

WORKING ENVIRONMENT MATTERS

Nursing Home Resident Quality of Life
Knowledge Sharing Series



HOW DO WE KNOW WORKING ENVIRONMENT MATTERS?

Surveys with residents, family, and staff from nursing homes across Nova Scotia showed that perceptions of resident quality of life were generally positive. Across the three perspectives, the things that mattered most were positive relationships among residents, families and staff, and more home-likeness. For staff, a supportive working environment also mattered. Based on these findings, we know that relationships, home-likeness and working environment are more important to resident quality of life than physical design and staffing approach. This brochure focuses on the importance of the working environment on resident quality of life.

Care staff are key facilitators of resident quality of life. They can support residents' dignity, autonomy, and social interactions. As a result, their perceptions of resident quality of life are valuable. Many features of the working environment were associated with higher perceptions of resident quality of life, but three key areas emerged:

- Being part of a team with a supportive leader.
- Having some control over their day.
- Experiencing growth in their job.

"The leadership strongly impacts the culture and therefore relationships within the facility" – Workshop Participant

I AM PART OF A TEAM WITH A SUPPORTIVE LEADER



Role clarity and transformational leadership within the workplace contributed to more positive perceptions of resident quality of life. Role clarity included receiving clear direction and performance standards, and knowing what to expect from their supervisor. When supervisors embodied transformational leadership, a style which includes offering encouragement, supporting staff decision-making, and fostering trust among team members, staff assessed resident quality of life to be better.

“Staff work closely together and everyone wants what is best for the residents. Staff are encouraged to spend some time getting to know the residents. Information is shared among departments, which makes it easier to provide good care.” – Staff Member

I HAVE SOME CONTROL OVER MY DAY



Staff perceived resident quality of life to be higher when they felt like they had influence over their job and had the opportunity to make their own decisions. They also assessed resident quality of life to be higher when staff felt like they had control over how they completed their work.

I EXPERIENCE GROWTH IN MY JOB

The opportunity to grow and learn within their role was positively related to staff perceptions of resident quality of life. Specifically, when staff had the opportunity to use a wide range of existing skills and abilities, and continued to learn new skills they assessed resident quality of life to be better.

IDEAS FOR ACTION

The project hosted a workshop with almost 70 representatives from the long-term care sector in Nova Scotia. Workshop participants heard research results and identified areas for action.

SUPPORT THE DEVELOPMENT OF EVIDENCE-BASED POLICY



- Review current policies and regulations to review how and why they were developed and to ensure that they support outcomes related to resident quality of life.
- Ensure there is consistency between expectations of staff and how staff performance is evaluated.

OFFER EDUCATIONAL OPPORTUNITIES

- Ensure that education curriculum transitions from a task-oriented approach to a resident-centred approach.
- Identify opportunities to educate families and the general community about both living and working in the nursing home environment.
- Ensure training opportunities are accessible to all staff.



IMPLEMENT FINDINGS IN EVERYDAY PRACTICE

- Review philosophy of care to support a resident-focus rather than a task-focus approach.
- Involve staff and union representatives in decisions that affect their roles.
- Institute consistent staffing assignments, when possible.
- Promote a collaborative practice model that supports the views of all staff as part of a team.

“We work as a team. The staff is its own little family. The residents become part of the staff’s family.” - Staff

MOVING FORWARD

The findings of this research regarding the importance of the working environment to resident quality of life can be applied in any nursing home environment, regardless of the facility's physical design or staffing approach. While the relationship between staff perception of working environment and resident quality of life is not fully understood, it may be that when staff feel more positive about the care they provide, this is reflected in their approach and interactions with residents.

PROJECT BACKGROUND

In Nova Scotia, the long term care sector has been undergoing significant changes as part of the government's Continuing Care Strategy, impacting those living in the province's 89 licensed nursing home facilities (with approximately 7000 publically-funded beds). New and replacement facilities were built with the self-contained household design, which includes smaller households of private rooms and baths with a shared kitchen, dining, and living space. The staffing approach was adjusted to support continuing care assistants to perform personal care along with household-level tasks such as housekeeping and dietary.

The Care and Construction project team sought to understand the impact of models of care on resident quality of life from the perspectives of residents, family, and staff. The models of care included 1. New-Full-scope with household design and Continuing Care Assistants (CCAs) responsible for all tasks 2. New-Augmented with household design and CCAs providing care needs and limited dietary and housekeeping, and 3. Traditional with Floor/unit design and CCAs providing care needs only. Multiple methods were used to answer the research question, including surveys, interviews, focus groups, participant observation, and physical activity monitoring. Results presented here are based on surveys with 319 nursing home residents, 397 family members, and 862 staff members.



This research was part of the *Care and Construction: Assessing the Impact of Model of Care on Nursing Home Resident Quality of Life* project with funding from the Canadian Institutes of Health Research (FRN# 114120) and the Nova Scotia Health Research Foundation (Matching 2011-7173) (2011-2015). For more information about the Care and Construction project, please visit www.careandconstruction.ca