



Implementation Guide:

Goal 8: Assessing Staff Satisfaction with the Work Environment to Inform Quality Improvement Activities

This Implementation Guide provides efficient, consistent, evidence-based approaches to assessing staff satisfaction.

www.nhqualitycampaign.org

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ADVANCING EXCELLENCE IN AMERICA'S NURSING HOMES

A Campaign to Improve Quality of Life for Residents and Staff

Advancing Excellence in America's Nursing Homes is a [national](#) campaign to encourage, assist and empower nursing homes to improve the quality of care and life for residents.

Comprised of long term care providers, medical professionals, consumers, employees, and state and federal agencies, *AE* is the largest and first coalition of its kind to measure quality by setting clinical and organizational goals for nursing homes.

The coalition stimulates quality improvements by providing nursing homes with free, current and practical evidence-based [resources](#), empowering residents and their families with education, and helping participants reach their targets. Homes can compare their progress with state and national averages.

This Implementation Guide was prepared by volunteers and members of the Advancing Excellence Steering Committee.

Click [here](#) to see a list of coalition leaders.

Goal 8: Staff Satisfaction

Almost all nursing homes will assess staff satisfaction with their work environment at least annually and upon separation and incorporate this information into their quality improvement activities.

New Objectives: By 4Q 2011

A1: The national average of Nursing Homes that regularly assess staff satisfaction with their work environment and incorporate the results into their quality improvement activities will exceed (75%).

A2: The national average of Nursing Homes that regularly assess staff satisfaction with their work environment and incorporate the results into their quality improvement activities will exceed (85%).

B1, C1, D1,: No measurement


Phase 2 measures for B, C2, D2 will be based on Year 1 data collected.

E. Each state will attain an average facility level improvement of one decile.

F. NH will set a specific target to improve the number of staff satisfaction by one decile rank over the next 24 month period.

ICON KEY

 Recognition/Assessment

 Cause Identification

 Management

 Monitoring

The icons in the box to the left will be used throughout this guide to help identify those processes related to key evidence-based approaches.

Approach to Implementation

A nursing home working to assess and improve staff satisfaction with their work environment to incorporate that information into its quality improvement activities should follow these steps:

Recognition / Assessment



1. *Identify improved staff satisfaction as an area for potential improvement.*

- Based on staff survey results, focus groups or learning circles, interviews with current and departing staff, nursing home quality improvement data, quality measures, review of actual occurrences and situations involving staff, comparison to benchmarks, etc.

2. *Identify authoritative information available about improving staff satisfaction.*

- Review references listed in the *Staff Satisfaction Resources*, as well as reliable and evidence-based information about ways to improve staff satisfaction from the literature and from relevant professional associations and organizations.
- Identify ways to distinguish the reliability of information about improving staff satisfaction (i.e., how to separate valid ideas from assumptions, myths and misconceptions about the topic).

3. *Identify current approaches to improving staff satisfaction.*

For an overview of the process, see the *Staff Satisfaction Process Review Tool* and related *Resident and Staff Satisfaction Flow Diagram*.

- Are the nursing home's approaches consistent with the steps identified in the Staff Satisfaction Process Framework?
- Identify the nursing home's current approach to improving staff satisfaction, and the basis for that approach.
- Who in the nursing home decides how to address issues related to staff satisfaction, and what approaches do they use?

4. *Identify areas for improvement in processes and practices related to improving staff satisfaction.*

Using the information gathered in Steps 2 and 3 above, compare current with desirable approaches to improving staff satisfaction. Address the following:

- Check whether current nursing home policies / protocols are consistent with desirable approaches.
- Check whether desirable approaches are being followed consistently.

Approach to Implementation (cont.)

- Identify whether anyone has been reviewing and comparing current approaches to addressing issues related to staff satisfaction to desirable ones.
- Have issues related to staff satisfaction been identified previously? Were they followed up on? Has the nursing home previously evaluated its performance and taken steps to improve?

Cause Identification



5. *Identify the causes of issues related to improving staff satisfaction, including root causes of undesirable variations in performance and practice.*

- Identify issues and practices that are inhibiting improvement in staff satisfaction.
- Identify underlying causes (including root causes) of, and factors related to, not achieving improvement in staff satisfaction.
- Identify reasons given by those who do not adequately follow desirable approaches.

Management



6. *Reinforce optimal practice and performance.*

- Continually promote “doing the right thing in the right way.”
- Follow the steps of the *Staff Satisfaction Process Framework*, throughout the nursing home.
- Identify and use tools and resources to help implement the steps and address related issues.
- Based on information and data collected about the organization and the processes and results related to improving staff satisfaction, identify and strengthen systems and processes that are already optimal.

7. *Implement pertinent interventions.*

- Address underlying causes (including root causes) of the challenges and obstacles to the nursing home’s efforts to improve staff satisfaction.
- Implement pertinent generic and cause-specific interventions.
- Address issues of individual performance and practice that could be improved in trying to improve staff satisfaction.
- Refer to Staff Satisfaction Resources for resources and tools that can help to address this goal.

Approach to Implementation (cont.)

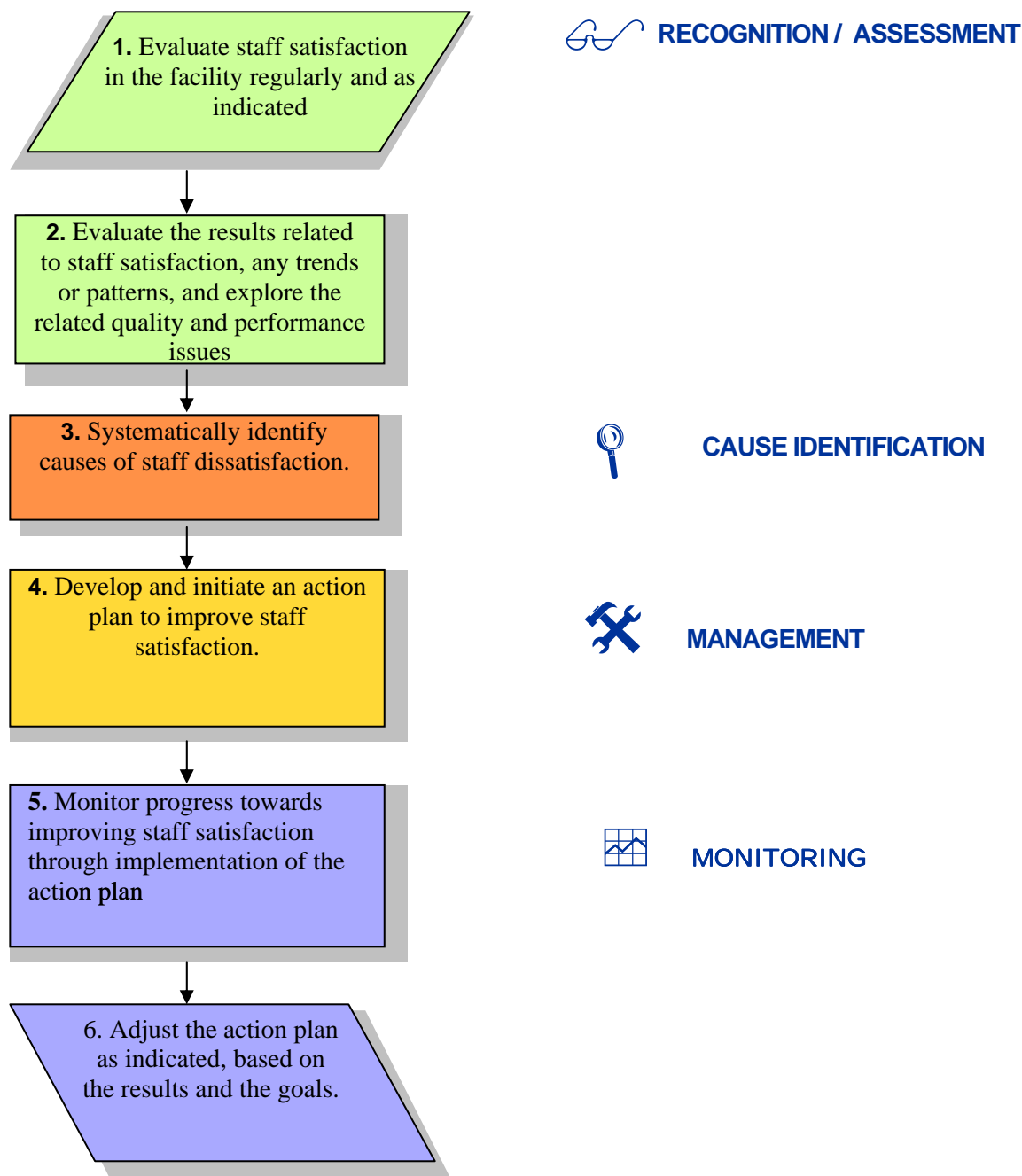
Monitoring



8. *Reevaluate performance, practices and results.*





- Recheck for progress towards getting “the right thing done consistently in the right way.”
- Use the *Staff Satisfaction Process Review Tool* to identify whether all key steps are being followed.
- Use the *Staff Satisfaction Process Framework* and related references and resources from Steps 2-4 above, and repeat Steps 2-7 (Recognition / Assessment, Cause Identification, and Management) until processes and practices are optimal.
- Continue to collect data on results and processes.
- Evaluate whether changes in process and practice have helped attain desired results.
- Adjust approaches as necessary.

Flow Diagram – Staff Satisfaction Process Framework



STAFF SATISFACTION PROCESS REVIEW TOOL

Abstraction Date:			
Nursing home Name:		Nursing home Address:	

 RECOGNITION/ASSESSMENT				
		YES	NO	N/A
1.	Does the nursing home assess staff satisfaction?			
2.	Does the nursing home identify information about aspects of work that directly or indirectly relate to staff satisfaction?			
3..	Does the nursing home use a consistent approach to conducting, distributing, and collecting information about staff satisfaction, including a satisfaction survey?			
 CAUSE IDENTIFICATION				
		YES	NO	N/A
4.	Does the nursing home identify factors that impact staff satisfaction?			
5.	Does the nursing home identify trends and patterns related to staff satisfaction?			
6.	Has the nursing home sought the root causes of any identified trends or patterns related to staff satisfaction?			
 MANAGEMENT				
		YES	NO	N/A
7.	Has the nursing home established realistic and measurable staff satisfaction goals?			
8.	Has the nursing home implemented action plans, which reflect key steps in the <i>Staff Satisfaction Process Framework</i> , to meet its goals?			
9.	Has the nursing home involved all staff and others to help develop its action plan, and has it communicated that action plan to staff and others?			
 MONITORING				
		YES	NO	N/A
10.	Has the nursing home periodically evaluated the effectiveness of the action plan related to improving staff satisfaction?			
11.	Has the nursing home revised its action plan to reflect the results of the evaluation process, including any unanticipated obstacles?			
12.	Has the nursing home implemented ongoing approaches to monitor staff satisfaction (e.g., routine follow-up satisfaction surveys, exit interviews, etc.)?			

STAFF SATISFACTION PROCESS FRAMEWORK

PROCESS STEP	EXPECTATIONS	RATIONALE
PROBLEM RECOGNITION / ASSESSMENT		
<p>1. Evaluate staff satisfaction in the facility regularly and as indicated.</p>	<ul style="list-style-type: none"> - Identify direct and indirect indicators of staff satisfaction from a variety of data sources including attendance data, job performance, staff turnover, exit interviews, staff statements and observations about specific aspects of their job and the work environment, resident and family concerns or complaints - Management and supervisors discuss with staff on an ongoing basis their staff's perspectives on various aspects of their job and the work environment. - Do a staff satisfaction survey, using standardized tools (see "Resources" related to the "Staff Satisfaction Implementation Guide" document – www.nhqualitycampaign.org). - Select satisfaction survey tool that captures one or more of the following domains: <ul style="list-style-type: none"> • Training • Supervision • Management • Work environment/culture • Self-empowerment - Wages and benefits 	<ul style="list-style-type: none"> - There is evidence that staff and resident satisfaction are connected. Satisfied staff can help improve resident satisfaction and clinical and operational outcomes (e.g., reduce costs, improve facility reputation). - Diverse data sources can be helpful in defining issues, identifying patterns, and drawing conclusions. - An organization's mission and vision should include attention to resident and staff satisfaction as well as staff retention issues. - Attention to staff satisfaction helps build upon an organization's strengths as a valued employer and provider. - Exit interviews are useful tools to determine the view of departing employees about their job and the work environment, attendance data, staff meetings to elicit comments & reactions - Examples of how to conduct a staff satisfaction survey are covered in "Considerations in Survey Selection and Implementation and Special Issues for Nursing Home Satisfaction Surveys."

PROCESS STEP	EXPECTATIONS	RATIONALE
PROBLEM RECOGNITION / ASSESSMENT (cont'd)		
<p>2. Evaluate the results related to staff satisfaction, any trends or patterns, and explore the related quality and performance issues.</p>	<ul style="list-style-type: none"> - Facility management and staff analyze information from diverse sources and carefully define the issues related to staff satisfaction, retention, and performance, and identify any patterns and trends. - Look for variations in satisfaction based on factors such as pay grade, job title, department and shift worked. 	<ul style="list-style-type: none"> - The facility's Quality Assessment and Assurance Committee is a good avenue for these reviews and discussions or a cross-functional team including representatives of all departments, job - Staff may have different experiences with their job based on their pay, hours worked, and department. Awareness of these potential differences will help the nursing home develop interventions that specifically address job satisfaction issues that may arise. -- It is important to carefully and specifically define satisfaction issues in detail (e.g., exactly what are the concerns about hours or resources, under what circumstances, and how frequently, support from supervisors or peers), instead of in vague terms (e.g., just to say that staff is dissatisfied with working conditions) in order to develop interventions to address concerns. - It may be helpful to gather more data, particularly if working from the results of a staff survey. A focus group or learning circle may be helpful in understanding an issue identified in survey results.

STAFF SATISFACTION PROCESS FRAMEWORK (cont'd)

PROCESS STEP	EXPECTATIONS	RATIONALE
CAUSE IDENTIFICATION / DIAGNOSIS		
<p>3. Systematically identify causes of staff dissatisfaction.</p>	<ul style="list-style-type: none"> - Using recommended tools and processes, identify or clarify causes (including multiple coexisting and root causes) of staff dissatisfaction, including issues related to retention and performance. - Identify factors contributing to dissatisfaction and/or lack of improvement in satisfaction. - Facility management and staff select realistic, measurable staff satisfaction goals. 	<ul style="list-style-type: none"> - Discussions should include representation from all departments and a mix of management and direct care staff. - Identifying underlying causes will help to correct or improve staff satisfaction, performance, and retention. - It is likely that multiple causes of staff dissatisfaction and related issues coexist. There may also be common (root) causes of multiple issues. It is important to identify all of the causes in order to address the issues satisfactorily.
MANAGEMENT		
<p>4. Develop and initiate an action plan to improve staff satisfaction.</p>	<ul style="list-style-type: none"> - Develop an action plan to identify specific interventions (both generic and cause-specific) to implement, time frames for completion, key responsible individuals, and methods to monitor implementation and outcomes. - Ask affected staff to consider specific interventions and help develop the action plan, based on identification of issues and underlying causes. 	<ul style="list-style-type: none"> -An action plan serves as a “roadmap” to move forward in meeting goals related to staff satisfaction and increases the likelihood of both attaining the goals and sustaining related performance measures. - Staff engagement is critical to success in both planning and implementation of that plan.

PROCESS STEP	EXPECTATIONS	RATIONALE
MANAGEMENT continued		
	<ul style="list-style-type: none"> - Share the overall plan with all staff prior to or during implementation and explain the strategies to resolve identified issues. - Implementation group should include representatives from all departments and a mix of management and front-line staff. - Ensure that the staff and management implement identified approaches correctly and consistently. 	<p>- Examples of potential interventions might include: 1) defining strategies to address that cause staff dissatisfaction; 2) developing skills of managers to lead, motivate and reward staff while maintaining accountability for performance; 3) using staff input to address the causes of staff dissatisfaction; 4) providing education and training to help maintain and improve staff competencies; 5) appreciating and recognizing the work of all staff; 6) celebrating successes (e.g., good survey, family compliment, getting through a challenging time).</p>
MONITORING		
<p>5. Monitor progress towards improving staff satisfaction through implementation of the action plan</p>	<ul style="list-style-type: none"> - The nursing home periodically evaluates the effectiveness of the action plan implementation including (but not limited to) the following: - Are interventions being implemented as designed - Are interventions being implemented within the identified time frames - Are plan interventions being implemented by the identified responsible staff members - What are the results/findings related to the implementation of the action plan? - Have there been unanticipated barriers identified during implementation of the action plan? If so, 	<p>- Using the same tool in subsequent surveys provides consistency in data and allows comparisons and identification of trends based on the action plan.</p>

PROCESS STEP	EXPECTATIONS	RATIONALE
	<p>what are they?</p> <ul style="list-style-type: none"> - As soon as appropriate, management and staff define progress toward changes, activities, and goal(s) listed in action plan, and identify and address any barriers to progress - The facility repeats a satisfaction survey with ongoing monitoring to assure that changes and interventions are making a difference. - The facility periodically identifies different or additional areas for improvement, related to staff satisfaction and performance. 	
MONITORING continued		
<p>6. Adjust the action plan as indicated, based on the results and the goals.</p>	<ul style="list-style-type: none"> - Based on the results, and relative to the goals, either validate the effectiveness of current approaches or modify them, as needed. - If the plan is not implemented as designed, identify the barriers and other reasons, and adjust the plan. - Continue with reviews and adjustments until all goals are attained. 	<p>- It is helpful to consider whether current interventions have been implemented correctly and fully before deciding that different or additional interventions are needed.</p>

Staff Satisfaction Survey Tools

CORE DOMAINS OF THE STAFF SURVEY

Letter	Domain
A	Training
B	Supervision
C	Management
D	Work Environment/Culture
E	Self-Empowerment
F	Wages and Benefits
G	Etc.

A SAMPLE OF STAFF SURVEY TOOLS – NON-PROPRIETARY SURVEYS

Survey Name	Author	Domains	Methods of Admin	Additional Details
Two dimensions of job satisfaction (intrinsic job satisfaction, extrinsic job satisfaction) *Appendix 1) -Intrinsic/Extrinsic job satisfaction	Lynch & Plant <i>Professional Psychology: Research and Practice</i> 2005	G	Survey (can be self administered by mail, drop-off box or online)	Items were asked on a 5 point Likert scale
Employee Opinion Survey 9 satisfaction facets + 1 overall satisfaction *Appendix 2) -47 field tested opinion items	Kavanaugh, Duffy, & Lilly <i>Management Research News</i> , 2006	C,E,D,F	Survey (can be self administered by mail, drop-off box or online)	Items were asked on a 5 point Likert scale
Job Satisfaction Questionnaire (Celluci & Devries, 1978) 5 factors & 16 questions *Appendix 3) Satisfaction with supervisors, co-workers, pay, promotion and work	Tsai & Huang <i>Journal of Business Ethics</i> 2008	C	Survey (can be self administered by mail, drop-off box or online)	Items were asked on a 5 point Likert scale
Swedish Satisfaction with Nursing Care and Work Assessment Scale (SNCW: Hallberg, Welander, & Axelsson, 1994) 35 items *Appendix 4)	Brodaty, Draper, & Low <i>Journal of Advanced Nursing</i> 2003	C	Survey (can be self administered by mail, drop-off box or online)	Items were asked on a 5 point Likert scale

A SAMPLE OF STAFF SURVEY TOOLS – NON-PROPRIETARY SURVEYS				
Survey Name	Author	Domains	Methods of Admin	Additional Details
Job Description Index <u>*Appendix 5)</u> <u>Original JDI domain</u> <u>*Appendix 6) lists job satisfaction instruments used in previous studies in long-term care settings</u>	<u>Castle, Degenholtz, & Rosen</u> <i>BMC Health Services Research</i> 2006	C	Survey (can be self administered by mail, drop-off box or online)	Items were asked on a 7 point Likert scale
HomeHealthcare Nurses' Job Satisfaction Scale (HHNJS) & Mueller and McCloskey Satisfaction Scale (MMSS) <u>*Appendix 7)</u> <u>-Extrinsic/Intrinsic characteristics and job satisfaction scale</u>	<u>Ellenbecker & Byleckie</u> <i>Journal of Advanced Nursing</i> 2005		Survey (can be self administered by mail, drop-off box or online)	Items were asked on a 5 point Likert scale
Kiefer et al (2005)	Report of worker surveys available at http://aspe.hhs.gov/daltcp/reports/dcwgguide.htm			

A SAMPLE OF STAFF SURVEY TOOLS – PROPRIETARY				
Survey Name	Organization and Contact Information	Domains	Methods of Admin	Additional Details
The Eden Warmth Survey – Employees	Eden Alternative Survey available for use by non-member facilities upon request Contact: registry@Edenalt.org Denise Hyde 512-557-1514	D,C,E	Paper survey or online	<ul style="list-style-type: none"> ▪ Total number of items: 46 ▪ Cost: Free for Eden Homes; \$1 per online survey for non-Eden Homes ▪ Response scale: 5 point Likert scale ▪ Survey is designed to measure the “climate” of a facility on a scale of “cold” to “warm”. “Cold” organizations are characterized by cynicism, pessimism, and stinginess, while “warm” organizations show optimism, trust, and generosity. ▪ Consumer and family Warmth Surveys are also available
Gallup Consulting	Contact healthcare@gallup.com website https://www.gallup.com	A, B, C, D,E,F	Mode varies based on need. Outbound Phone, IVR phone and mail most common	<ul style="list-style-type: none"> ▪ Total number of items: Varies; average is 20 items ▪ Response scale: not available as of 9/15/09 ▪ Completion time: Varies; average 4 minutes ▪ Readability: specific to survey
Life Services Network Confidence Satisfaction Surveys	Website http://www.lsn.org Confidence Satisfaction program at www.confidence-surveys.com	A, C, D, E, F	Information not available as of	<ul style="list-style-type: none"> ▪ Cost of the survey: Varies as to whether or not the consumer is an LSN member or an AAHSA member or neither ▪ Response scale: 5 point Likert

A SAMPLE OF STAFF SURVEY TOOLS – PROPRIETARY				
Survey Name	Organization and Contact Information	Domains	Methods of Admin	Additional Details
MyInnerview Note: acquired by NRC but continues to use MyInnerview name Developed by Vivian Tellis-Nayak and Leslie Grant Reference: Grant (2007)	Contact web site: www.myinnerview.com	A, B, C, D, F plus additional domains	Mail/electronic	<ul style="list-style-type: none"> ▪ Total number of items: 29 ▪ Response scale: 4 point Likert ▪ Completion time: 15-30 minutes ▪ Readability: 6.5 ▪ Target: family members of current skilled nursing residents
NRC Picker	Note: now uses MyInnerview nursing home surveys in the US			
Press Ganey Employee Partnership Survey	www.pressganey.com	B, D, G	Mail, phone, internet, hand out	<ul style="list-style-type: none"> ▪ Total number of items: 45 ▪ Completion time: 10 minutes ▪ Response scale: 4 point Likert ▪ Readability: between 7th and 8th grade
Vital Research Work Life Satisfaction and Engagement Survey	Contact: Harold N. Uman, PhD, hurman@vitalresearch.com, (888) 848-2511 Web site: www.vitalresearch.com	A, B, C, D,	Self Completion in Small Groups/Online	<ul style="list-style-type: none"> ▪ Total number of items: 29 ▪ Completion time: 20-30 minutes ▪ Response scale: 4 point Likert ▪ Readability: 7.7

References:

Grant, L. (2004) "A Person-centered Workplace: The Foundation for Person-centered Caregiving in Long Term Care," Journal of the American Medical Director Association 12 (1):3-13.

Kiefer, K. M., L. Harris-Kojetin, et al. (2005). Measuring Long-Term Care Work: A Guide to Selected Instruments to Examine Direct Care Worker Experiences and Outcomes, April, 2005. Washington, DC, Institute for the Future of Aging Services under contract #HHS-100-01-0025 with the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, Office of Disability, Aging and Long-Term Care Policy and the the U.S. Department of Labor: 116 pages (plus Appendices)

STAFF SATISFACTION RESOURCES

RESOURCE	LOCATION	CONTACT INFORMATION
Recommended Tools		
Cohen-Mansfield, J., Ejaz, F.K., and Werner, P. (eds.). Satisfaction Surveys in Long-Term Care. Springer Publishing Company, 2000.		
Holistic Approach to Transformational Change (HATCh) – Staff Stability Toolkit	Quality Partners of Rhode Island - http://www.riguqualitypartners.org/cfmodules/objmgr.cfm?Obj=NHQ_QIOSharedMaterials&pmid=124&mid=145&cid=145&clear=yes&bc=Workforce&bcl=2	Quality Partners of Rhode Island (QIO) 235 Promenade St # 500 Providence, RI 02908-5763 (401) 528-3200
Measuring Long-Term Care Work: A Guide to Selected Instruments to Examine Direct Care Worker Experiences and Outcomes	U.S. Department of Health and Human Services, Assistant Secretary for Planning and Evaluation (ASPE) - http://aspe.hhs.gov/daltcp/reports/dcwguide.htm	Stephanie Swirsky, OASP Project Officer, DOL/OASP, Suite S-2312, 200 Constitution Avenue, N.W. Washington, D.C. 20210.
Better Jobs, Better Care Program resources and information center	Better Jobs Better Care - http://www.bjbc.org/catalogue.asp	Better Jobs, Better Care Program Institute for the Future of Aging Services, AAHSA 2519 Connecticut Ave. NW, Washington, DC 20008-1520
Literature / Latest Research		
Intrinsic job satisfaction, overall satisfaction, and intention to leave the job among nursing assistants in nursing homes.	The Gerontologist for October 2009, both articles appear in that edition—I guess the best thing to do is to send people to this publication's website	Long-Term Care Statistics Branch, Division of Health Care Statistics, National Center for Health Statistics, 3311 Toledo Road, Hyattsville, MD 20782, USA. fdecker@cdc.gov

STAFF SATISFACTION RESOURCES (cont.)

RESOURCE	LOCATION	CONTACT INFORMATION
Literature / Latest Research		
Nursing home work practices and nursing assistants' job satisfaction. October 2009	The Gerontologist for October 2009, both articles appear in that edition—I guess the best thing to do is to send people to this publication's website	Second article: The Heller School for Social Policy and Management, Room 214, Schneider Institutes for Health Policy, Brandeis University, Mailstop 035, 415 South Street, P.O. Box 549110, Waltham, MA 02454-9110, USA. bishop@brandeis.edu
Nurse aide empowerment strategies and staff stability: effects on nursing home resident outcomes.	The Gerontologist, June 2005	Third article: 116 Henderson Building, The Pennsylvania State University, University Park, PA 16802, USA. txb13@psu.edu
Job and organizational determinants of nursing home employee commitment, job satisfaction and intent to turnover	Ergonomics, April 2005	Department of Industrial and Systems Engineering, University of Wisconsin-Madison, 1513 University Avenue, Room 387, Madison, WI 53706, USA. bkarsh@engr.wisc.edu
Addressing Shortages in the Direct Care Workforce: Recruitment and Retention Practices of California's Not-for-Profit Nursing Homes, Continuing Care Retirement Communities and Assisted Living Facilities.	www.aahsastore.org . Research done by the Institute for the Future of Aging within AAHSA.	

STAFF SATISFACTION RESOURCES (cont.)

RESOURCE	LOCATION	CONTACT INFORMATION
Literature / Latest Research (cont.)		
Improving Nursing Employee Satisfaction in Long-Term Care Facilities: Let Nurses do the Nursing. Academy Health Meeting 2005 in Boston, MA	http://gateway.nlm.nih.gov/MeetingAbstracts/ma?f=103623043.html This shows up on a research engine maintained by the N Institute of Health	Boston University School of Public Health, Health Services, 715 Albany St, Boston, MA 02118 Tel. (781) 687-2000 x 6696 Fax (781) 687-3106
Determinants of staff job satisfaction of caregivers in two nursing homes in Pennsylvania	BMC Health Services Research, Vol. 6, No. 60, 1-11 Authors: Castle, N.G., Degenholz, H., and Rosen, J. http://www.biomedcentral.com/content/pdf/1472-6963-6-60.pdf	Nicholas G. Castle University of Pittsburgh Department of Health Policy and Management A649 Crabtree Hall, 130 DeSoto Street, Pittsburgh, PA 15261; E-mail: CASTLEN@Pitt.edu .
A Person-Centered Workplace: The Foundation for Person-Centered Caregiving in Long-Term Care	Journal of the American Medical Directors Association, January 2007. Author: V. Tellis-Nayak	Contact: V. Tellis-Nayak MyInnerView 6651 North Washtenaw Ave. Chicago, IL60645 Email: vtn1@aol.com

STAFF SATISFACTION RESOURCES (cont.)

RESOURCE	LOCATION	CONTACT INFORMATION
Specialty Organizations and Links		
Improving Staff Satisfaction: What Nursing Home Leaders are Doing	http://www.ahcancal.org/facility_operations/workforce/Documents/StaffSatisfaction.pdf	AHCA 1201 L Street, N.W. Washington, DC 20005 Phone: (202) 842-4444
The Rationale for Conducting Staff Satisfaction Surveys	Indiana QIO article Found at http://www.hce.org/Resources/Publications/TipsandTools/TipsandTools%20Aug07.pdf	Contact Joan_Teno@brown.edu
Staff Satisfaction Survey Tool, a product of the Texas QIO	http://nursinghomes.tmf.org/NursingHomeResources/Tools/tabid/577/Default.aspx	TMF: Health Quality Institute Bridgepoint I, Suite 300 5918 West Courtyard Drive Austin, Texas 78730-5036 Phone 1-800-725-9216 Fax 512-327-7159 solutions@tmf.org
National online library of resources on direct care workforce issues and solutions	www.phinational.org/clearinghouse	info@phinational.org 718.402.7766
Resident, Family and Staff Warmth Surveys associated with the Eden Alternative	Texas State University	Texas Long Term Care Institute Texas State University-San Marcos 601 University Drive HPB 302 San Marcos, TX 79666-4616 Phone: (512) 245-8234
Staff Satisfaction Surveys—Research and Reports from My Innerview surveys	http://www.myinnerview.com/resource_center/publications/whitepapers.php?catgrpId=8	2620 Stewart Avenue Wausau, WI 54401 Phone: (715) 848-2713

STAFF SATISFACTION RESOURCES (cont.)

RESOURCE	LOCATION	CONTACT INFORMATION
Specialty Organizations and Links (cont.)		
Staff Satisfaction Surveys	Life Services Network	911 N Elm Street, Suite 228 Hinsdale, IL 60521 Phone: (630) 325-6170
Staff Satisfaction Surveys	NCR & Picker	1245 Q Street Lincoln, NE 68508 Phone: (800) 388-4264
Staff Satisfaction Surveys	Press Ganey	404 Columbia Place South Bend, IN 46601 Phone: (800) 232-8032

Appendix 1

Staff Satisfaction Appendix Survey Questions

Martin F. Lynch Jr., Robert W. Plant, (2005), Psychological Needs and Threat to Safety: Implications for Staff and Patients in a Psychiatric Hospital for Youth, *Professional Psychology: Research and Practice*, Vol. 36, No. 4, 415–425

- Intrinsic Job Satisfaction

1. Most days I find my job to be extremely satisfying.
2. I often wish I had a different job. (reverse scored)
3. I feel very positively about my job at [name of hospital].

- Extrinsic Job Satisfaction

1. I am satisfied with my current level of pay and benefits.
2. [Name of hospital] pays its employees fairly.
3. The salary I receive is adequate to the responsibilities I am expected to fulfill.

Appendix 2

Joe Kavanaugh, Jo Ann Duffy, and Juliana Lilly, (2006), The relationship between job satisfaction and demographic variables for healthcare professionals, *Management Research News*, Vol. 29, No. 6, 304-325

Scale	Item name	Items Definition
My JOB	ENJOY JOBIMP INTEREST	I usually enjoy the type of work I do My job is important to the hospital's success The work I do is generally interesting
Safety	JOBSAFE SAFEPROB	Sufficient attention is given to job safety at this school Management attempts to eliminate safety hazards
COMPOSITE SATISFACTION	SATISFY OVERALL SATWRK QUALSTAT	Overall, I am generally satisfied with how the hospital is managed Overall, I am generally satisfied with my job at (the hospital) Overall, I am generally satisfied with my working conditions at (the hospital) Overall, I am generally satisfied with the quality of supervision I receive
FEELINGS ABOUT THE HOSPITAL	RECOM HR COND WELL MORALE FUTURE	If an acquaintance were to be looking for work, I would suggest applying at this hospital Human resource policies and practices here are good or better than at most hospital Physical working conditions (heat, light, dust, noise, clearness, etc) are generally satisfactory The hospital is generally well thought of by its employees Employee morale is generally good This hospital has a good future
SUPPORT FOR QUALITY	MGTSUP SERVICE PROF POLCLR FREEDOM	Management is generally supportive of the applicable work standards which govern my area Management usually places the delivery of quality professional services ahead of financial considerations With few exceptions, management decisions support professional standards for patient care The polices and procedures for quality patient care in the hospital are clear

Scale	Item name	Items Definition
		I have the freedom to make timely decisions in order to fulfill my job responsibilities
SUPERVISION	EXPECT SUGGEST ANSWER SUPJOB ORGANIZE WORK FAVOR JOBS LISTEN BREAKS	I usually understand what is expected of me on the job My suggestions are usually given consideration My supervisor gives complete answers to questions or complaints My supervisor handles his or her job well The work here is pretty well organized My work responsibilities are generally clear Decisions of hospital supervisors are seldom affected by favoritism Job assignments are made fairly at the hospital Job problems are usually solved because supervisors listen and implement an adequate solution I am given an adequate break-in time or training for new job assignments
COMMUNICATIONS	BENEFITS INFORMED PAYROL CHANGE	I have a good understanding of employee benefits such as vacation, medical coverage, etc. The hospital keeps me informed about things that concern me and my job The hospital pay policy is well understood by employees here Management usually tells people in advance that changes are coming
WORKING RELATIONSHIPS	COOP SPIRIT COOPDPT	The members of my department are generally cooperative There is a good spirit of cooperation between employees and management Cooperation among the various departments in the hospital is good
QUALITY OF MANAGEMENT	RULEQUAL PROMISE WELLBE GRIPE	Hospital rules and policies are equally applied to all employees Promises made by hospital management are usually kept Management believes the well being of employees is important Complaints and problems are handled fairly here
PAY AND BENEFITS	PAY PROMOTE PAYFAIR BENGOOD	Pay here is about average or better when compared with wages at most local hospital Promotional opportunities here are good, compared with other hospitals this size The hospital policy on pay increases is administered fairly Benefits here are about average or better when compared to other hospitals

Appendix 3

Ming-Tien Tsai, Chun-Chen Huang, (2008), The Relationship among Ethical Climate Types, Facets of Job Satisfaction, and the Three Components of Organizational Commitment: A Study of Nurses in Taiwan, *Journal of Business Ethics*, Vol. 80, 565-581

Facets of job satisfaction
Satisfaction with supervisors
The managers I work for back me up
The managers I work for are "top notch"
My superiors do not listen to me*
My management does not treat me fairly*
Satisfaction with co-workers
I enjoy working with the people here
I work with responsible people
The people I work with do not give me enough support*
When I ask people to do things, the job gets done
Satisfaction with pay
My hospital pays better than competitors
My pay is adequate, considering the responsibilities I have
My fringe benefits are generous
Satisfaction with promotion
I do not like the basis on which my hospital promotes people*
Promotions are infrequent in my hospital*
Satisfaction with work itself
I would rather be doing another job*
I get little sense of accomplishment from doing my job*
My job is interesting

*Items are reverse coded

Appendix 4

Brodaty, Henry, Draper, Brian, and Low, Lee-Fay, (2003), Nursing home staff attitudes towards residents with dementia: strain and satisfaction with work, *Journal of Advanced Nursing*, Vol. 44, No. 6, 583-590.

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1. My duties at work are stimulating
 2. My duties at work are varied
 3. I am able to organize my working conditions so that I can work at a pace which is comfortable to me
 4. I often find that I do not complete everything that I should in my job
 5. My opinions are considered when changes are made at work
 6. I worry that my own job situation will change because of changes to the organization
 7. I am satisfied with the independence I have in my job
 8. I am satisfied with the responsibility I have in my job
 9. Our work organization is good
 10. Our staff work well together
 11. There is a friendly atmosphere at work
 12. I often feel that I know too little about the patients'/residents' disease and treatment
 13. I often feel that I know too little about the patients'/residents' personal background, habits and wishes
 14. There are enough opportunities at work to discuss the psychological stress of the job
 15. The patients/residents at work nearly always receive good care
 16. The patients are given enough information about their disease
 17. The patients/residents are given enough information before examinations and treatment
 18. Newly admitted patients/residents are given enough information about the routine in the place where I work
 19. Relatives are given enough information about care and treatment
 20. It is important to try and enter into the way patients experience what happens to them
 21. It is too much to expect that I can involve myself with every patient/residents
 22. It is difficult to manage the job if you get too involved myself with the patients/residents
 23. I seldom have time to try and understand what the patients/residents think about our care
 24. It is boring to work with the same patients/residents every day
 25. I enjoy my current work situation
 26. I feel that I am developing a person from my work here
 27. I feel that I am developing professionally from my work here
 28. I often receive constructive (i.e. helpful) criticism about the work I do
 29. My colleagues value what I do at work
 30. My colleagues often ask me for information I can give about particular patients
 31. We often discuss ways of improving the care we give (e.g. alternative care methods, setting care goals, changing the work routine)
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Appendix 5

Nicholas G Castle, Howard Degenholtz, and Jules Rosen, (2006), Determinants of staff job satisfaction of caregivers in two nursing homes in Pennsylvania, *BMC Health Services Research*, Vol. 6, No. 60, 1-11
Items (Original JDI domain)

Positively Worded Items:

After a day's work, I really feel like I have accomplished something (w)

Working for this Facility is like being part of a family (w)

I am paid fairly for the work I do (c)

Salary and wage increases are given to those who do a good job (c)

My pay is better than that for similar jobs in other nursing homes (c)

My chances for getting ahead in this facility are good (p)

The people I work with are stimulating (cw)

Negatively Worded Items:

I just hate to get up in the morning to go to work (w)

I am in a "dead end" job (p)

My opportunities for getting promoted in this facility are somewhat limited (p)

The people I work with are unpleasant (cw)

Management is quick to criticize poor performance (m)

Management is hard to please (m)

Appendix 6

Nicholas G Castle, Howard Degenholtz, and Jules Rosen, (2006), Determinants of staff job satisfaction of caregivers in two nursing homes in Pennsylvania, *BMC Health Services Research*, Vol. 6, No. 60, 1-11

Table 1: Studies of job satisfaction in long-term care settings

Author(s)	Job Satisfaction Instrument	Number of Items	Number of Responses options (Anchor used)	Job Satisfaction Domains	Sample Size and Setting	Analyses Used	Significant Findings
Parsons and associates (2003) [3]	Modified from Herzberg (1966)	35	5 (strongly disagree- strongly agree)	Personal opportunity Supervision Benefits Coworker support Social rewards Task rewards	550 NAs in 70 facilities in Louisiana	Ordinary Least Squares Regression	Most dissatisfied with pay, benefits, and recognition
Moyle and associates (2003) [39]	N/A	N/A	N/A	Workplace flexibility Team environment Optimal resident care	27 RNs and NAs in one facility in Australia	Content analysis of focus group data	Satisfaction was linked to workplace flexibility, residents, team environment and better resident care
Chou, Boldy. & Lee (2002a, b) [7,19]	Measure of Job Satisfaction (MJS)	22	5 (very dissatisfied- very satisfied)	Professional support Personal satisfaction	Seventy facilities with 610 nursing home staff and 373 hostel care staff in Australia	Structural Equation Modeling	Job satisfaction is associated with Professional support

Author(s)	Job Satisfaction Instrument	Number of Items	Number of Responses options (Anchor used)	Job Satisfaction Domains	Sample Size and Setting	Analyses Used	Significant Findings
				Workload Training Team spirit/co-workers			
Will and Simmons (1999) [33]	Job Descriptive Index (JDI)	NG	NG	Work on present job Pay Opportunities for promotion Supervision Co-workers Job in general	423 NAs in 29 nursing homes in Ohio	Means	Satisfied most with work and least with pay
Atchison (1998) [20]	Job Diagnostic Survey	14	5 (extremely dissatisfied-extremely satisfied)	Satisfaction Job Security Coworkers Sense of accomplishment Helping other people Dissatisfaction Pay/benefits Potential for job growth Management Autonomy	283 NAs in 24 nursing homes	Chi square	Job satisfaction lowest for security, growth/development, socialization, and challenges

Author(s)	Job Satisfaction Instrument	Number of Items	Number of Responses options (Anchor used)	Job Satisfaction Domains	Sample Size and Setting	Analyses Used	Significant Findings
Kiyak, Namazi, & Kahana (1997) [27]	Job Descriptive Index (JDI)	NG	NG	Work on present job Pay Opportunities for promotion Supervision Co-workers Job in general	308 nursing home and community agency staff	Ordinary Least Squares Regression	Higher dissatisfaction associated with turnover
Gillies, Foreman, & Pettengill (1996) [22]	Index of Work Satisfaction (IWS)	44	7 (not given)	Autonomy Interaction Agency policies Pay Professional status Task requirement	44 nurse directors and nurse educators working in long-term care facilities	Repeated Measures ANOVA	Job satisfaction highest for interactions, autonomy, and professional status
Grieshaber, Parker, & Deering (1995) [1]				Work environment Job content	Two nursing homes		
Irvine & Evans (1995)+ [40]	N/A	N/A	N/A	Routinization Autonomy Feedback	Meta-analyses with combined sample size of 5,352	Meta-analyses	Work content and work environment are more strongly associated with job satisfaction than economic variables

Author(s)	Job Satisfaction Instrument	Number of Items	Number of Responses options (Anchor used)	Job Satisfaction Domains	Sample Size and Setting	Analyses Used	Significant Findings
				Role conflict Role ambiguity Work overload			
Coward and associated (1995) [29]	Modified Stamps and Piedmonte (1986) scale [IWS]	18	5 (strongly disagree- strongly agree)	Professional status Task requirement Autonomy Interaction with other nurses Pay	281 RNs and LPNs from 26 nursing homes	Multivariate regression analysis	Five factors associated with job satisfaction (race, income, supervisor, initial intent to stay, current intent to leave)
Monahan & Carthy (1992) [41]	N/A	N/A	N/A	Attachment Gratification Demands Monetary needs Decision-making	75 NAs at 7 nursing homes	Content analysis	Attachment most related to retention of NAs
Grau and associates (1991) [42]	Combined several scales	44	5 different scales	Job process Attitudes toward administration Social atmosphere Job benefits Job tasks	219 NAs in one nursing home	Hierarchical regression analysis	Social atmosphere and job benefits associated with institutional loyalty

Author(s)	Job Satisfaction Instrument	Number of Items	Number of Responses options (Anchor used)	Job Satisfaction Domains	Sample Size and Setting	Analyses Used	Significant Findings
Anderson, Aird, & Haslam (1991) [43]	NG	12	5 (strongly disagree- strongly agree)	None	212 nursing staff in 6 nursing homes	Means	Nursing staff have high levels of satisfaction, but is associated with absenteeism
Humphris & Turner (1989) [44]	Porter (1962) scale	13	6 (extremely satisfied- extremely unsatisfied)	Working conditions Emotional climate General	84 nurses at a unit for the elderly severely mentally infirm	Chi square	Low satisfaction was associated with turnover from unit
Mullins and associates (1988) [45]	Job Satisfaction Survey (JSS)	36	NG	Pay Promotion Supervision Benefits Rewards/appreciation Working conditions Coworkers Nature of job Communication	Heads of departments (n=439) from 46 nursing homes	Regression analyses	Most satisfied when individual efforts are rewarded
Deckard, Hicks & Rountree (1986) [46]	Job Diagnostic Survey (JDS)	NG	NG	Skill variety Task identity Task significance Autonomy Job feedback	340 nurses from a nursing home chain	Means	Job satisfaction was similar to norms in other occupations

Author(s)	Job Satisfaction Instrument	Number of Items	Number of Responses options (Anchor used)	Job Satisfaction Domains	Sample Size and Setting	Analyses Used	Significant Findings
Waxman and associates (1984) [47]	Minnesota Satisfaction Scale	20	5 (very dissatisfied-very satisfied)	Job Satisfaction Scale	234 NAs in 7 facilities, uses 20 questions for overall job satisfaction score	Kendal's Rank Order Correlation	Positive association between job satisfaction and turnover
Berman et al. (1984) [2]	None	19	4 (none-very much)	Job Knowledge, skill, and attitudes Autonomy Stress	12 long-term care facilities and 432 RNs, LPNs, and NAs	ANOVA	Descriptive results provided
NA = Nurse Aide; RN = Registered Nurse; LPN = Licensed Practical Nurse							
+ = This study is a meta-analysis, and does not include only long-term care studies							
NG = Not given; N/A = Not applicable							

Appendix 7

Ellenbecker, Carol H., Byleckie, James J., (2005), Home Healthcare Nurses' Job Satisfaction Scale: refinement and psychometric testing, *Journal of Advanced Nursing*, Vol. 52, No. 1, 70-78

Nine Home Healthcare Nurses Job Satisfaction Scale (HHNJS) subscales from the psychometric study

Characteristics	Subscales	Number of items
Intrinsic characteristics	Autonomy and independence	4
	Professional growth	5
	Group cohesion, peers	3
	Group cohesion, physicians	2
	Characteristics of organization	5
	Intrinsic total	19
Extrinsic characteristics	Stress and work load	3
	Autonomy and flexibility in working scheduling	2
	Autonomy and control of work activities	2
	Salary and benefits and perception opportunities elsewhere	4
	Extrinsic total	11
	Job satisfaction total	30

Component items	
Satisfied with relationship with administration	My salary is satisfactory
Have the power to change	It would be difficult to find job
Opportunity to grow	Benefits package is not as good
Authority to adopt standards of care	Overwhelmed by all the work I have
Administration decision interfere	If I had more time I could do better
Patients satisfied with care	Able to cope with documentation
Have helped patients	Good amount of collegiality
Patients relationship are rewarding	Have peers I can rely on
Care adheres to professional standards	Open lines of communication with team

Component items	
Independence is required in my job	Treated as a professional
Proud to talk of work	Physicians value my input
Work is important and worthwhile	More flexibility than others
Would recommend my job	Have control over scheduling my time
Would choose home care again	Frustrated because of programmed activities
Pay scale needs to be upgraded	Have little control over work