# CHAPTER 3:  READY TO USE INSTRUMENTS

## Criteria for Inclusion of Instruments

Specific criteria were applied to each instrument under consideration for inclusion in this Guide.

The instruments included in the Guide (in Chapter 3 and Appendix G)….

- are quantitative in nature.
- have some evidence of reliability and/or validity, when possible.  At a minimum, they have solid face validity (e.g., appear on the surface to be a reasonable measure of the concept of interest).
- have already been used in (or are able to be applied to) health care or LTC settings.

The instruments in Chapter 3 also….

- are practical and applicable to DCWs in LTC.
- are free to use or available for free when used for research purposes.[4]

## Types of Instruments Included in this Guide

Chapter 3 contains two main categories of workforce topics:

1. Topics whose instruments use data organizations may already collect (i.e., use administrative records)

2. Topics whose instruments require new data collection (i.e., use worker questionnaires)

There are 4 topics that use data organizations may already collect and 8 topics that require new data collection.

The following 4 topics require the use of data organizations may already collect: injuries and illnesses, retention, turnover, and vacancies.[5]  Instruments that use data that already may be collected are generally formulas in which calculations are made using factual information available from administrative records.  Records used to calculate measures might include employee payroll records, cost reports, human resource records, employment records, or nurse aide registries.  The data for some

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[4] Under the scope of this Guide, "research purposes" means that instruments are used solely by providers and their staff (or in collaboration with researchers or data collection vendors) to obtain information about their organization and, ultimately, use it for internal quality improvement at their organizations.

[5] Absenteeism and use of temporary workers were excluded because valid instruments for measuring them were unavailable.

measures in this section come from surveys (also called questionnaires) completed by employer representatives (e.g., Human Resources staff, administrator).  In these cases, the respondents are asked to complete the survey by using information from their employer records.

Employers can assess organizational factors that may be contributing to recruitment and retention problems by examining the feelings and perceptions of their employees.  The following 8 topics require the use of newly collected information: empowerment, job design, job satisfaction, organizational commitment, organizational culture, worker-client relationships, worker-supervisor relationships, and workload.[6]  Instruments that require new data collection are questionnaires (also called surveys) that collect information on respondents' attitudes and perceptions of their experiences.

Instruments for which new data are required have been divided into two groups in this Guide:  (1) instruments that measure DCW job characteristics; and, (2) instruments that measure the organization.  The instruments that measure DCW job characteristics are focused on DCWs specifically and assess their feelings and perceptions of various aspects of their jobs.  The instruments that measure the organization are focused on employees at all levels in the organization (not just DCWs) and assess employees' feelings and perceptions about the organization by which they are employed.

## Caveats about the Instruments in this Chapter

Chapter 3 presents a collection of instruments to consider in addressing workforce issues.  Here are some caveats about these instruments.

- Not all instruments are applicable for use in all LTC settings.

- Many were not developed to be used with LTC DCWs specifically and have not been tested with DCWs.  Rather, many have been used with employees (e.g., usually nurses) in hospital settings.

- There is a range of reliability and validity across instruments.

- Some instruments are simply a list of questions that need to be formatted into a survey questionnaire.

- Certain instruments in this chapter are ready for immediate use, while others need minor alteration.  For example, minor wording changes may be needed to make them more applicable to a certain LTC setting, such as changing the word "hospital" to "nursing home."  Or simplification of words used in questions asked of DCWs in surveys may be necessary.  For these reasons, it is important to pre-

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[6] Some surveys in this Guide address wages and benefits by asking employees how they feel about their wage and benefit offerings.

test survey questionnaires with a small number of DCWs.  This will provide a sense of whether the content and wording of questions in a survey are appropriate for DCWs or whether readability levels of the questions need to be adapted to be used with them.

## Differences Between Chapter 3 and Appendix G

Certain subscales in some instruments are not applicable to the nature of DCWs' jobs so they have been included in Appendix G.  It is important that, when using a subscale, all subscale questions are asked of DCWs because scoring, reliability and validity have been done on a subscale level.  An example of a two-item subscale is the **Recognition subscale** from the *Job Role Quality Questionnaire,* where respondents are asked to rate the extent these two items are rewarding parts of their jobs (on a scale of 1 (not at all) to 4 (extremely)):

1.  The recognition you get
2.  The appreciation you get

The remainder of Chapter 3 introduces instruments and subscales of instruments that are currently ready (or nearly ready) for use.  Appendix G includes instruments and subscales that require adaptation before they are ready for use and/or charge a fee for use.  As mentioned, these instruments include the subscales considered irrelevant to DCWs, but that may be fruitful for future development and adaptation for use with DCWs.  For two topics in this Guide -- organizational structure and peer-to-peer work relationships -- none of the instruments are considered ready for use because they are not geared towards DCWs and/or because they have associated costs.  Therefore, the extant instruments and subscales we identified for these topics have been included only in Appendix G.

## How the Instruments in this Chapter are Organized

The instruments and subscales in this Chapter were chosen because they are ready (or nearly ready) for providers to "take off the shelf" and apply in their settings, as appropriate.  These instruments require no sophisticated software for scoring.  Surveys (questionnaires) for which slight modification in wording (either through changing words to reflect the appropriate setting type or wording simplification for DCWs) were selected based on the fact that these alterations would enhance, not compromise (or change the meaning of) the instrument being used.  Readability levels for surveys included in this Chapter appeared to be reasonable for DCWs, based on face validity and feedback from contributors to this Guide.  Subscales of instruments that are relevant to DCWs are also included in this Chapter.

Each of the topics in Chapter 3 includes two main sections:

1.  An introduction describing the topic and its relation to the DCW workforce; and,

2. A summary chart of the alternative instruments or subscales, where appropriate. These charts include a detailed description of the instrument or subscale. Survey item/instrument wording (for instruments that use surveys to gather information) follow these charts.

Overview charts for the instruments that use data already collected using information contained in records may differ from those based on administering surveys to collect information. These instruments are usually formulas calculated using information from employment records and do not contain subscales. When this is the case, a description and survey questionnaire are not included because they are not applicable. In a few cases where these instruments are based on a survey, descriptions of instruments are included.

## Summary Chart for Instruments

As mentioned, a summary chart is included for each instrument or subscale. These charts contain information on the following features: description, measure, administration, scoring, availability, reliability and validity, and relevant contact information. An overview chart describing these features for instruments that use data already collected and for instruments that require new data collection is included on the two next pages.

Appendix B provides overview charts for all measures in a given topic if organizations are interested in making cross-comparisons as they decide which measure may be best to use for their purposes.

# Overview of Features in Summary Chart for Each Instrument

|  | Topics whose instruments use data organizations may already collect (Based on administrative records or surveys completed by employer representatives) | Topics whose instruments require new data collection (Based on surveys, questionnaires of workers) |
|---|---|---|
| **Description** | Provides a brief description of the formula or survey instrument being discussed. | |
| **Measure** | Proposed formula or way to calculate a measure | Name of questionnaire and its subscale labels<br>Subscale: A subscale usually contains multiple survey items intended to measure the same aspect or dimension of a topic (e.g., autonomy is a subscale of 5 items measuring one aspect of empowerment). |
| **Administration** | Specifies data source to be used.  Data to make calculations for measures may come from sources such as:<br>    Employee payroll records<br>    Cost reports<br>    Human resource records<br>    Employment records<br>    Nurse aide registries<br>    Surveys of administrators or nurse aides | Survey administration<br>(1) Whether survey is meant to be conducted using paper and pencil or in-person interviews and/or whether the survey can be adapted for administration in either way<br>(2) Length of time required to complete the survey<br>(3) Number of questions in the survey<br>(4) The types of response scales given to people taking the survey, such as: 1=strongly disagree, 2=disagree, 3=not sure, 4=agree, and 5=strongly agree<br><br>Readability = the reading level of the survey instrument<br>*Flesch-Kincaid Grade Level Index* = readability test designed to show how easy or difficult a text is to read.  The Index uses a formula based on the number of words in sentences and the number of syllables per word. The Index score rates text on a U.S. grade-school level. For example, a score of 8.0 means that an eighth grader can understand the document.  This measure will be useful to providers in thinking about whether the reading levels in each survey are appropriate for their workers.  Note: the Flesch-Kincaid Grade Level Index tends to underestimate the actual reading level; aim for 8th grade or less and pretest with employees. |
| **Scoring** | Scoring = the method used to tally survey results or to make calculations<br>(1) Whether scoring can be computed by hand, by using software, or either way<br>(2) Method used for scoring of measure; range of possible scores (low – high)<br>(3) Meaning of scores (what a low score indicates, what a high score indicates) | |
| **Availability** | Which category the instrument falls into for use:<br>(1) Free<br>(2) Free with permission from author -- email author to request permission to use<br>(3) Fee or costs associated with use | |

| | Topics whose instruments use data organizations may already collect (Based on administrative records or surveys completed by employer representatives) | Topics whose instruments require new data collection (Based on surveys, questionnaires of workers) |
|---|---|---|
| **Reliability** | To date, there is little evidence available on the reliability of the records-based measures.  Reliability for these measures is designated as N/A. | Reliability<br>*Internal consistency* (Cronbach's Alpha) = a measure of how well a set of items measures a single one dimensional construct consistently on different occasions<br>For example, internal consistency might measure how well a set of questions measures job satisfaction.  Internal consistency scores range from 0-1.  A score of internal consistency that is .7 or higher shows that a measure is reliable. |
| **Validity** | To date, there is little evidence available on validity other than face validity for records-based measures.  Validity for these measures is designated as N/A. | *Validity* = how close what is being measured is to what was intended to be measured.  Answers the question "did you measure what you were supposed to measure?"  Validity measure scores range from 0-1.  The closer that the validity measure is to 1, the more valid the measure.<br><br>There are multiple types of validity.  The charts in this topic show the types of validity available for the selected measures.<br>*Face validity* = when the quality of a measure appears on the surface to be a reasonable measure of the concept of interest.<br>For example, a group of experts may not agree on what should be included in a retention measure, but they likely would agree that retention rates in a nursing facility have implications for workforce stability.<br><br>*Criterion-related validity* (predictive validity) = the degree to which a measure relates to or predicts something.<br>For example, the validity of a job satisfaction measure may be determined by the quality of a worker's relationship with his or her supervisor or fellow workers.<br><br>*Construct validity* = the degree to which logical relationships exist between items (includes convergent and discriminate validity).<br>For example, one might assert that retention relates to empowerment and job design.  If an analysis shows that this relationship exists, then the measure has construct validity.<br><br>*Content validity* = the degree to which a measure covers the range of meanings included in the concept.<br>For example, a test of employee empowerment would not be limited to access to opportunity alone, but would also need to include support, information and resources (and so forth) in an individual's work setting. |
| **Contact Information** | Provides relevant contact information for more information on the formula or instrument being discussed. | |

# Instruments Which Use Data Organizations May Already Collect

# Injuries and Illnesses

## Introduction

### *Definition of Injuries and Illnesses*

Occupational injuries and illnesses are those which occur as a result of an individual completing the tasks required of them in their job.  Nursing aides, orderlies, and attendants rate second highest among occupations experiencing the most injuries and illnesses.  They have some of the highest lost-worktime injuries and illnesses days away from work.  In 2002, 79,000 injuries and illnesses requiring days away from work were reported among this occupational category (BLS, 2004).  For example, DCWs in LTC often suffer from the strain and repetitive stress injuries that result from lifting or repositioning residents or clients.

### *Overview of Selected Instruments for Injuries and Illnesses*

One instrument included in this Guide calculates injuries and illnesses:

1.  Bureau of Labor Statistics (BLS) Instrument for Injuries and Illnesses

### *Issues to Consider When Selecting Instruments of Injuries and Illnesses*

*   Incidence rates cannot be calculated if worker's compensation data (as opposed to the number of reportable injuries) are being used because it is not possible to obtain data on the denominator (hours worked) from worker's compensation databases.

# Alternatives for Measuring Injuries and Illnesses

## Bureau of Labor Statistics (BLS) Instrument for Injuries and Illnesses

| | |
|---|---|
| **Description** | This instrument calculates injuries and illnesses as "incidence rates" as used by the Bureau of Labor Statistics. The incidence rate is the number of nonfatal injuries and illnesses for the year divided by the number of all employee hours worked for the year.<br><br>The numerator can be calculated by counting the number of recordable cases of occupational injuries and illnesses for the year, as reported from the Occupational Safety and Health's (OSHA) Log and Summary of Occupational Illnesses and Injuries. This form is required of employers covered by the Occupational Safety and Health (OSH) Act, except for those with ten or fewer employees. The 200,000 hours in the formula represents the equivalent of 100 employees working 40 hours per week, 50 weeks per year, and provides the standard base for incidence rates. The denominator can be determined through payroll or other time records. |
| **Measure** | Number of nonfatal injuries and illnesses X 200,000<br><br>Number of all employee hours worked<br><br>(not including non-work time, such as vacation, sick leave, holidays, etc.) |
| **Administration** | Data collected from employers via survey and payroll records. |
| **Scoring** | Can be scored by hand. |
| **Availability** | Free. |
| **Reliability** | N/A |
| **Validity** | N/A |
| **Contact Information** | Not needed for use of this instrument. |

## Survey Items

The instrument for injuries presented here uses a formula calculated using data from various sources; therefore, no survey instrument is included here.

# Retention

## Introduction

### *Definition of Retention*

Retention generally refers to the number of employees who remain at their job within an organization over time. Worker retention rates measure the proportion of staff that has been employed in an organization over a specified period of time. Other measures of retention include tenure or length of stay.

### *Overview of Selected Instruments for Retention*

Two instruments for staff retention rates have been included here. These instruments were taken from published literature on retention among nurse aides (sources to be discussed under "alternatives for measuring retention" section) and identify two main concepts in the measurement of retention. Both examine the number of staff employed for a specified period of time relative to the total number of employees in an organization. One measure also looks at retention as length of service or tenure of both terminated employees and employees that remain.[7]

1. Leon, et al. Retention Instrument
2. Remsburg, Armacost, and Bennett Retention Instrument

### *Issues to Consider When Selecting Instruments for Retention*

- While retention rates are often thought of as the reciprocal of turnover, having high turnover does not necessarily mean low retention. For example, an organization with a high annual turnover rate may also maintain a large proportion of their staff for the year, suggesting that terminations are concentrated within a few positions. Therefore, when assessing the stability of an organization, it is important to look at both turnover and retention rates. This is especially true for LTC organizations, where discontinuity of paraprofessional nursing staff may adversely affect the quality of care (Wunderlich et al., 1996).

- Time periods used in measuring retention rates differ so comparisons of retention rates across organizations must be made with caution. For example, some have assessed retention rates for one year, while others have measured two, three, or even ten-year retention rates.

- Retention rates may include the entire workforce or specific subgroups. Subgroups for measuring retention might include employees who remain with the

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[7] Numerous instruments have been developed which measure retention similarly to those selected: CMS/Abt Associates (2001); Garland, Oyabu and Gipson (1988); Iowa Caregivers Association (2000); Kettlitz, Zbib and Motwani (1998); Konrad and Morgan (2002); and Stone, et al., (2001). For more information on these instruments, consult the References section of this Guide.

organization, yet have been promoted to another position (career ladders), or newly hired employees who have remained at the organization for a specified period of time.  Consideration of subgroups might be of interest in LTC where new hires often leave their positions after only a few short months of employment or during the initial orientation period (Bowers & Becker, 1992; Pillemer, 1997).

- In measuring both turnover and retention of DCWs, it is often more difficult to assess rates of home care workers due to the nature of employment.  According to Feldman et al., distinctions between stayers and leavers in the home care industry are not always clear (1990).  Home aides can refuse work for several weeks or even for several pay periods without actually resigning.  Furthermore, aides may declare a leave of absence from which they do not return.

# Alternatives for Measuring Retention

## *Leon, et al. Retention Instrument*

| Description | Retention data were collected in a statewide study of LTC organizations in Pennsylvania (Leon et al., 2001).  As part of a telephone interview, LTC administrators were asked to report the number of DCWs that have been with them for specific periods of time (less than one year, 3 or more years, 10 or more years) and the total number of DCWs.  The retention rate for the organization was calculated as the percentage of DCWs who worked for a certain time period (less than one year, 3 or more years, 10 or more years) divided by the total number of DCWs at the time of the telephone interview. |
|---|---|
| Measure | # of nurse aides employed for less than one year<br>total # employees at time of survey<br><br># of nurse aides employed for 3 years or more<br>total # employees at time of survey<br><br># of nurse aides employed for ten years or more<br>total # employees at time of survey |
| Administration | Data collected from nursing home administrator via survey. |
| Scoring | Can be scored by hand. |
| Availability | Free. |
| Reliability | N/A |
| Validity | N/A |
| Contact Information | Not needed for use of this instrument. |

## *Survey Items*

The instrument for retention presented here uses a formula calculated using data from various sources; therefore, no survey instrument is included here.

### *Remsburg, Armacost, and Bennett Retention Instrument*

| | |
|---|---|
| **Description** | In their research, Remsburg and colleagues refer to retention rates as "stability rates" and measure them in two ways. Annual retention rates were calculated for a study of a 255-bed LTC facility as the number of nurse aides (NAs) employed for more than one year divided by the number of employees on the payroll on the last day of the fiscal year. In addition, Remsburg, et al, looked at retention by calculating the length of service for terminated employees and employees who remained. |
| **Measure** | # of nurse aides employed for more than one year<br># of nurse aides on payroll on the last day of the fiscal year<br><br>length of service for terminated employees and staff who remained |
| **Administration** | Data collected from human resource records. |
| **Scoring** | Can be scored by hand. |
| **Availability** | Free. |
| **Reliability** | N/A |
| **Validity** | N/A |
| **Contact Information** | Not needed for use of this instrument. |

### *Survey Items*

The instrument for retention presented here uses a formula calculated using data from various sources; therefore, no survey instrument is included here.

# Turnover

## Introduction

### Definition of Turnover

Many references to employee turnover refer to the termination of employment, which can be voluntary or involuntary. The turnover of positions within an organization might also occur through promotions or transfers.

### Overview of Selected Measures of Turnover

Three main ways to measure turnover have been included here. These measures were taken from published and unpublished literature on employee turnover (sources to be discussed under "alternatives for measuring turnover" section). These instruments include valuable information that is important when measuring turnover among LTC organizations. One instrument provides a way to consistently collect turnover information for employees across the long-term care continuum (e.g., nurse aides, personal care aides, and/or home management aides, etc.). The others provide more precise ways of measuring turnover among LTC organizations than are used by most. These three measures are described in more detail in the remainder of this section.[8]

1. Annual Short Turnover Survey of North Carolina Department of Health and Human Services' Office of Long Term Care
2. Eaton Instrument for Measuring Turnover
3. Price and Mueller Instrument for Measuring Turnover

### Issues to Consider When Selecting Measures of Turnover

- There is debate about the usefulness of distinguishing between voluntary and involuntary turnover. Some argue that, no matter the reason for people leaving positions (e.g., moving to a different state or being fired), there is still turnover within an organization. Others find this distinction is important because it might be useful for suggesting different management responses. For instance, if employees are being terminated due to a lack of proficiency in the job (e.g., involuntary turnover), there may be a training issue that needs to be addressed.

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[8] Numerous instruments have been developed which measure turnover similarly to those selected (though they may not capture as much detail): AHCA (2003); Anderson et al. (2002); Banaszak-Hall and Hine (1996); Brannon et al. (2002); CMS/Abt Associates (2001); Florida Department of Elder Affairs (2000); Halbur and Fears (1986); Hollinger-Smith (2002); Remsburg, Armcost and Bennett (1999); Straker and Atchley (1999); Stryker (1982); Gordon and Stryker (1994); U.S. Department of Labor (JOLTS); U.S. Department of Personnel; Wagnild (1988); Parsons et al. (1998); and Waxman et al. (1984). For more information on these instruments, consult the References section of this Guide.

- Variation among reference periods may test the accuracy of some instruments. Instruments for turnover over a 12-month period, for example, may be preferable to a 6-month period in that they may capture more movement of employees in and out of the organization over time.

- The rate has no precise meaning.  For example, one cannot tell from a high separation rate whether it is due to the same position turning over many times or many positions each turning over one time.  These two different ways of producing a high quit rate can have different implications for the work environment and workload of employees who stay.

- Use of cost reports prohibits the distinction between voluntary and involuntary turnover which may provide useful information.

- While not reflected in the turnover rate, it may be beneficial to also count the number of times the same position turns over.

- The rate does not account for the stability of the employees.  High turnover rates among a few positions may be appropriate if the organization maintains a stable core of employees despite the rate.

- Payroll records must be used with caution.  Issues that need to be addressed when using payroll records to compute a quit rate include (Price & Mueller, 1986;1991):
  o Members of governing boards may appear on payroll records and should be deleted.
  o Women who marry may change their names -- these changes should be documented.
  o Some employees quit and are rehired between the two periods of measurement -- these employees should be located and considered "stayers."
  o Individuals who go on "leaves of absence" should be labeled as such and remain in the employee pool, even if they are not on the payroll for the specified time period.
  o "Temporary" workers should be identified and not be included in the turnover rate.

# Alternatives for Measuring Turnover

## *Annual Short Turnover Survey of North Carolina Department of Health and Human Services' Office of Long Term Care*

| | |
|---|---|
| **Description** | In North Carolina, the Annual Short Turnover Survey is included by the North Carolina Department of Health and Human Services as an insert with the licensure renewal application for the state's licensed LTC facilities. The Annual Short Survey measures turnover as a "separation rate." The separation rate is calculated as the total number of full-time and part-time staff who leave an organization either voluntarily ("quits") or involuntarily ("fires") divided by the total number of employees (both part-time and full-time) needed for the organization to be considered fully staffed. |
| **Measure** | Total Separation = <br> $$\frac{\text{FT voluntary terminations + PT voluntary terminations + FT involuntary terminations + PT involuntary termination}}{\text{# needed to be completely staffed by FT and PT staff}}$$ <br><br> Voluntary separation = <br> $$\frac{\text{FT voluntary terminations + PT voluntary terminations}}{\text{# needed to be completely staffed by FT and PT staff}}$$ <br><br> Involuntary separation rate = <br> $$\frac{\text{FT involuntary terminations + PT involuntary terminations}}{\text{# needed to be completely staffed by FT and PT staff}}$$ |
| **Administration** | Data collected from employee payroll records. |
| **Scoring** | Can be scored by hand. |
| **Availability** | Free. |
| **Reliability** | N/A |
| **Validity** | N/A |
| **Contact Information** | Not needed for use of this instrument. |

## *Survey Items*

The instrument for turnover presented here uses a formula calculated using data from various sources; therefore, no survey instrument is included here.

### *Eaton Instrument for Measuring Turnover (1997)*

| Description | Eaton measured turnover of LTC employees as the number of newly hired employees in a certain category (e.g., registered nurses, licensed practical nurses, nurse aides) divided by the number of employees in that category over a 12-month period. For example, if an organization had employed 50 nurse aides during the year and had hired 20 over the course of the year, the turnover rate would be 40 percent (e.g., 20/50).<br><br>Use of a rate is readily understandable when expressed in percentages. Use of the same reference period enhances accuracy of the measure. |
|---|---|
| Measure | <u># full-time new hires over 12 months</u><br>average # staff employed in that category over 12 months<br><br><u># part-time new hires over 12 months</u><br>average # staff employed in that category over 12 months |
| Administration | Data collected from Medicaid cost reports. |
| Scoring | Can be scored by hand. |
| Availability | Free. |
| Reliability | N/A |
| Validity | N/A |
| Contact Information | Not needed for use of this instrument. |

### *Survey Items*

The instrument for turnover presented here uses a formula calculated using data from various sources; therefore, no survey instrument is included here.

## *Price and Mueller Instrument for Measuring Turnover (1986; 1981)*

| Description | Price and Mueller measure turnover as a "quit rate." The quit rate is computed as the number of employees who leave voluntarily during a period divided by the number employed at the beginning of that period. |
| --- | --- |
| | The quit rate is relatively easy to compute. While it may take some attention to obtain the list of voluntary terminations, it is generally not a problem to obtain the average number of employees during the time period. The quit rate is readily understandable when expressed in percentages; (e.g. a 50-percent rate is higher than a 25-percent rate). The quit rate is widely, but not exclusively, used in LTC organizations. |
| Measure | Total # employed at Time 1 - # still employed at 12-month <u>follow-up + involuntary terminations ("voluntary terminations")</u> <br> Total # employed at Time 1 |
| Administration | Data collected from employee payroll records. |
| Scoring | Can be scored by hand. |
| Availability | Free. |
| Reliability | N/A |
| Validity | N/A |
| Contact Information | Not needed for use of this instrument. |

## *Survey Items*

The instrument for turnover presented here uses a formula calculated using data from various sources; therefore, no survey instrument is included here.

# Vacancies

## Introduction

### *Definition of Vacancies*

Vacancies refer to job openings for which employers are seeking employees. Vacancies are the most commonly cited indicator of labor shortages when measuring the demand for labor.  A large number of vacant positions, relative to some expected level of vacancies, is often considered as evidence of a labor shortage (Institute of Medicine, 1989).

### *Overview of Selected Instruments for Vacancies*

Three instruments for vacancies have been included here.

1. Job Openings and Labor Turnover Survey (JOLTS)
2. Job Vacancy Survey (JVS)
3. Leon, et al. Vacancies Instrument

The JOLTS is a federal-level instrument which measures job openings, hires and separations in business and government.  The JVS is a state-level instrument which has been used by several states (CO, LA, MN, OK, TX, and WI) to assess state labor market conditions.  The Leon, et al Vacancies Instrument has measured vacancies to understand the extent of recruitment and retention problems from a provider's perspective.

All three measures calculate vacancies as rates.  While they share the same numerators, the denominators used to calculate these rates differ.  The JOLTS and JVS calculate vacancy rates in a similar manner, but the JVS provides vacancy data by certain occupations and industry and supplies additional details about the specific positions that are available.  The vacancy rate instrument used by Leon, et al uses a different denominator (full-time equivalents) than the JOLTS or JVS and has been used specifically in LTC settings.[9]

### *Issues to Consider When Selecting Instruments for Vacancies*

- Vacancy rates should be interpreted with caution because high vacancy rates may not necessarily represent a labor shortage, but rather a labor "imbalance." For example, if wages are kept below the level that would balance supply and demand of workers, then employer demand will surpass the number of individuals who are willing to work at that wage.  Thus, the reported vacancy rates may not reflect a worker shortage per se, but may be the result of

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[9] A 2003 American Health Care Association (AHCA) study used a vacancy rate calculation similar to the one used by Leon et al.  For more information on this instrument, consult the References section of this Guide.

organizational or industry characteristics that contribute to the difficulty in recruiting for vacant positions.  In contrast, low vacancy rates may simply be the result of a high availability of workers due to factors such as a recession.

- The use of vacancies with other indicators of labor demand, such as turnover, would provide a more accurate picture of the need for employees within the industry.  There are always some vacancies in a particular job due to employee turnover and higher vacancy rates occur in occupations that experience the highest turnover (Institute of Medicine, 1989).

- Calculating rates for both full-time and part-time positions may provide a more accurate picture of employer demand by more specifically defining the types of vacancies that are present.  Although the total number of *positions* within the organization may not collected as part of the original survey, a question asking the respondent to report a total number of full and part-time positions, respectively, can be added.  This could be used to determine the vacancy rates for full and part-time positions rather than an overall vacancy rate using the number of employees as the denominator.

# Alternatives for Measuring Vacancies

## *Job Openings and Labor Turnover Survey (JOLTS)*

| | |
|---|---|
| **Description** | Introduced in 2001, the JOLTS collects counts of job openings on a monthly basis using the last business day of the month as the reference point.  While using the middle of the month was considered in order to remain consistent with other JOLTS data, the pilot study revealed that job vacancies were not always available at that time (Levin et al., 2000).  The goal of JOLTS is to produce monthly measures of unmet labor demand in the form of rates and numbers of job openings.  For a job to be considered "open," three conditions must apply:<br>• A specific position must exist and there is work available for that position. The position can be full-time, part-time, permanent or short-term;<br>• The job could start within 30 days; and,<br>• The organization is actively recruiting workers from outside the organization. |
| **Measure** | # job openings on last day of month<br>total # employed for pay period that<br>includes the 12$^{th}$ of the month (for full-time or part-time) |
| **Administration** | Data collected from human resources records via survey. |
| **Scoring** | Can be scored by hand. |
| **Availability** | Free. |
| **Reliability** | N/A |
| **Validity** | N/A |
| **Contact Information** | Not needed for use of this instrument. |

## Survey Items

Exhibit 1. Sample JOLT form with instructions

Job Openings and Labor Turnover Report                    U.S. Department of Labor

Bureau of Labor Statistics, JOLTS OCC, 61 Forsyth Street SW, Rm 7T50, Atlanta, GA 30303 / Phone: (800) 341-4620 / FAX: (800) 376-2515 / www.bls.gov

This report is authorized by 29 U.S.C.2. Your voluntary cooperation is needed to make the results of this survey comprehensive, accurate, and timely. The Bureau of Labor Statistics will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law.

BLS Form No. BLS-1411-C1
Form Approved
OMB No. 1220-0170
Approval Expires 3/31/2003

NAME   SIC# O A AUX0446 CITY TWP   ANY/EMP RUN M          (386) 555-5555 Ext. 5555   FAX (555) 555-5555

LEGAL NAME XXXXXXXXXXXXXXXXXXXXXXXXX5
TRADE NAME XXXXXXXXXXXXXXXXX00000X6
ATTN: CONTACT NAME XXXXXXXXXXXXXXXX7
JOLTS ADDRESS XXXXXXXXXXXXXXXXXXXXX5
JOLTS ADDRESS2 XXXXXXXXXXXXXXXXXXX5
JOLTS CITY XXXXXXXXXXXXXXXX0 ST ZIP56.2996

Your reporting number is:   12345678

Need help with this form?
Call 1-800-341-4620.

1   This form requests information about job openings and employee turnover at:
    TRADE NAME OR LEGAL NAME XXXXXXXX5                 COUNTY: XXXXXXXXXXXXXXXX20
    PHYS LOCATION OR JOLTS ADDRESS XXXX5              RPT-UNIT-DESCR XXXXXXXXXXXXXXXXXXX5
    PHYS LOCATION 2 OR JOLTS ADDRESS2 X5             U: 123456789   in  STATE XXXXXXXXXXXXX
    PL-CITY OR JOLTS CITY 0000 ST 123456789

2   Please check all that apply:  Employees are paid
    ☐ each week      ☐ every two weeks      ☐ twice a month      ☐ once a month      ☐ other

3   Please provide data for the time period indicated for each item.  Enter 0 if none.
    See the explanation of these terms on the back of this page.

| | EMPLOYMENT | JOB OPENINGS | HIRES | SEPARATIONS | | |
|---|---|---|---|---|---|---|
| | Number of full- or part-time employees who worked or received pay for the pay period that includes the 12th of the month | A job is open if it meets all three conditions:  • A specific position exists  • Work could start within 30 days  • You are actively seeking workers from outside this location to fill the position | A hire is any addition to your payroll, and:  • May be new, rehired, or recalled from layoff  • May be permanent, short-term, or seasonal | Report by type of separation in the columns below:  Column D   Quits, except retirements.  Column E   Layoffs, discharges, and other terminations initiated by the employer.  Column F   Other separations due to retirements; transfers from this location; deaths; employee disability | | |
| Report for month of: | A Total Employment for the pay period that includes the 12th of the month | B Number of Job Openings on the last business day of the month | C Hires for the entire month | D Quits | E Layoffs and Discharges | F Other Separations |
| | | | | ------- for the entire month ------- | | |
| Jan   2000 | | | | | | |
| Feb   2000 | | | | | | |
| Mar   2000 | | | | | | |
| Apr   2000 | | | | | | |
| May   2000 | | | | | | |
| Jun   2000 | | | | | | |

## *Job Vacancy Survey (JVS)*

| | |
|---|---|
| **Description** | The Job Vacancy Survey (JVS) produces vacancy statistics as a measure of employer demand for workers within states and local communities. The Bureau of Labor Statistics (BLS), the Employment and Training Administration, and State Labor Market Information Offices collaborated to produce the JVS. The JVS was created in order to obtain reliable information on job vacancies that can be used in concert with other labor statistics to assess the health of state and local labor markets.<br><br>From the survey, job vacancy rates are calculated as the total number of vacancies reported divided by the total number of employees in the organization at a single point in time.<br><br>In addition to determining job vacancy rates in certain occupations and industries, the survey provides an analysis of the characteristics of these vacancies, including wages and benefits, educational requirements, full versus part-time positions and length of time a position has been vacant (see "survey items" below). The additional information included in the questionnaire regarding characteristics of vacant jobs provides important supplemental information on reported vacancies. |
| **Measure** | <u># job openings</u><br>total # employed<br>     **OR**<br>total # positions |
| **Administration** | Data collected from human resources records via survey.<br><br>No time frame specified for when to make calculation. |
| **Scoring** | Can be scored by hand or by using purchased software. |
| **Availability** | Free. |
| **Reliability** | N/A |
| **Validity** | N/A |
| **Contact Information** | Not needed for use of this instrument. |

**Survey Items**

# 2002 Job Vacancy Survey: Occupations in Demand

## DIRECTIONS

- Please direct this survey to the manager or human resources professional responsible for hiring and recruitment at this location of your business.
- Please respond before <months> <day>. Your cooperation will allow us to complete this survey in a timely manner.
- Surveys can be returned by mail, fax, or Internet. Return your survey by fax at (999) 999-9999. Submit it via the Internet at www.<yourorganization>.org/[lmi]jobvacancy.
- **No data identifying individual firms, directly or indirectly, will be published or released.**
- Summary results will be available on the Internet in <Month and year> at www.<yourorganization> website.
- If you have any questions about the survey, please call: Mary Smith at (999) 999-9999 or John Jones at (999) 999-9999 or visit our website at www.<yourorganization>.org/[lmi]jobvacancy
- Callers outside the metro area can phone toll-free, (877) 999-9999.
- **Answer Part A below, and then turn the form over to complete Part B.**

(pre-printed establishment identification label here)

## Part A – About Your Business

This form asks for information about the business, institution or organization listed in the upper right hand corner of this form.

**1: Total number of employees:**

_____

If you have multiple locations, please fill out the survey for the entity listed in the upper right hand corner of this form.

**2: Who is responding to this survey?**

Your name _____

Title _____

Phone Number _____

**3: Do you have vacancies at this location?**

☐ Yes   Turn over survey and complete Part B

☐ No   Mail or fax survey back to the contact listed above.

It is important for you to return the survey even if you have no vacancies. You may also notify us by phone at (999) 999-9999 if you have no vacancies.

**Comments:**

☐ If you would like a copy of the survey results mailed to you, please check this box.

survey ID number

## Job Titles for Vacancies

Include positions you are actively recruiting for

Include full- and part-time, temporary and permanent workers

Exclude positions reserved for consultants, outside contractors and others not considered employees

**Full-time** = 35+ hours per week
**Part-time** = 1-34 hours per week

| | A — Job Titles for Vacancies | Full-time: Junior Accountant (Example) | Full-time: Trainer (Example) | Part-time: Mail Clerk (Example) |
|---|---|---|---|---|
| B | Number of current job openings | 2 | 1 | 1 |
| C | Fill in the ○ if position is seasonal or temporary (lasting for a fixed duration) | ○ | ● | |
| D | How long have you been trying to fill this vacancy? — Less than 30 days | | ● | |
| D | 30 – 59 days | ● | ○ | |
| D | 60 or more days | ○ | ○ | |
| D | Constantly recruiting/always hiring | ○ | ○ | |
| E | What education level is usually required? (Choose one) — No education requirement | ○ | ○ | |
| E | High school or GED | ○ | ○ | ● |
| E | Vocational training | ○ | ○ | |
| E | Associate's degree | ○ | ● | |
| E | Bachelor's degree | ● | ○ | |
| E | Advanced degree | ○ | ○ | |
| F | Fill in the ○ if a license or certification required | ○ | ○ | |
| G | What experience is usually req'd? (Choose one) — No experience required | ○ | ○ | |
| G | Some work experience | ● | ○ | |
| G | Experience related to position | ○ | ● | |
| H | What is the expected hourly, monthly or annual compensation? | $45,000/yr | $3500-4000/mo | $6 - 8/hr |
| I | What benefits are offered? (Choose all that apply) — Health insurance | ● | ● | ○ |
| I | Paid sick leave | ● | ○ | ○ |
| I | Paid vacation | ● | ○ | ○ |
| I | Retirement savings plan or pension | ● | ● | ○ |
| I | No benefits offered | ○ | ○ | ● |

Not enough space? Call for another copy (999)-999-9999 or make a photocopy of this page. Thank you for your participation.

### Leon, et al. Job Vacancies Instrument

| | |
|---|---|
| **Description** | Job vacancy data were collected in a statewide study of LTC organizations in Pennsylvania (Leon et al., 2001). As part of a telephone interview, LTC administrators were asked to report the number of full time equivalents (FTEs) and the number of vacant positions on the day of the interview. The job vacancy rate for the organization was calculated as the percentage of vacant jobs over all jobs. Further, vacancy rates were categorized as low (rates greater than 0 but less than 10%), moderate (rates between 10 and 20%) and high (rates greater than 20%). |
| **Measure** | # job openings<br>total number of FTE positions<br>on the day of the interview |
| **Administration** | Data collected from human resources records via survey. |
| **Scoring** | Can be scored by hand. |
| **Availability** | Free. |
| **Reliability** | N/A |
| **Validity** | N/A |
| **Contact Information** | Not needed for use of this instrument. |

### Survey Items

2. How many full-time equivalent [WORKER] positions do you currently have at your [PROVIDER]? Please count a full-time [WORKER] as one person and a 20-hour per week [WORKER] as half a person. For example, if you had two people working 20 hours each, that would be one full time equivalent.

    _____ # OF POSITIONS


6. How many job openings for [WORKERS] do you currently have?

    _____ # OF OPENINGS

# Instruments Which Require New Data Collection -- Measures of DCW Job Characteristics

# Empowerment

## Introduction

### *Definition of Empowerment*

Much has been written about empowerment at three different levels: individual/ psychological, sociological, and management/organizational. The focus here is on the management/organizational perspective.

Empowerment is often explained as the delegation of authority and decentralization of decision-making. However, when empowerment is more broadly defined, it speaks to the ability of management to create a working environment that shapes an individual's perceptions of his or her work role in a way that motivates positive work behavior (Conger & Kanungo, 1988). This broader definition of empowerment includes workers' perceptions of the meaning of their job to them, their sense of competence in the job, how much self-determination they believe they have in the job, and how much impact they believe they have in their job (Thomas & Velthouse, 1990).

Studies have found that nurses in hospitals who feel more empowered have higher job satisfaction, more commitment to their employer, and are less likely to voluntarily quit (Kuokkanen & Katajisto, 2003; Larrabee et al., 2003; Radice, 1994; Laschinger, Finegan, & Shamian, 2001).

Measuring worker empowerment in the workplace can help managers to identify and remove conditions in the organization that foster powerlessness and provide structural processes that foster empowerment.

### *Overview of Selected Measures of Empowerment*

The five instruments reviewed here measure multiple dimensions of empowerment.

1. Conditions for Work Effectiveness Questionnaire (CWEQ I) and (CWEQ II Short Form) (3 of 6 subscales)
2. Perception of Empowerment Instrument (PEI)
3. Psychological Empowerment Instrument
4. Yeatts and Cready Dimensions of Empowerment Measure

### *Issues to Consider When Selecting Measures of Empowerment*

- Some survey items in the reviewed instruments may need to be simplified for DCWs or modified to be more applicable to DCWs than to nurses or other professionals (for which the instruments were initially developed).

# Alternatives for Measuring Empowerment

## *Conditions for Work Effectiveness Questionnaire (CWEQ I) and (CWEQ II Short Form)* **(3 of 6 subscales)**[10]

| | |
|---|---|
| **Description** | The Conditions for Work Effectiveness Questionnaire (CWEQ- I) is a 31-item questionnaire designed to measure the four empowerment dimensions -- perceived access to opportunity, support, information and resources in an individual's work setting -- based on Kanter's ethnographic study of work empowerment (Kanter, 1977; Laschinger, 1996). Opportunity refers to opportunities for growth and movement within the organization as well as opportunity to increase knowledge and skills. Support relates to the allowance of risk taking and autonomy in making decisions. Information refers to having information regarding organizational goals and policy changes. Resources involve having the ability to mobilize resources needed to get the job done. Access to these empowerment structures is facilitated by: (1) formal power characteristics such as flexibility, adaptability, creativity associated with discretionary decision-making, visibility, and centrality to organizational purpose and goals; and (2) informal power characteristics derived from social connections, and the development of communication and information channels with sponsors, peers, subordinates, and cross-functional groups. Chandler adapted the CWEQ from Kanter's earlier work to be used in a nursing population (1986). |
| | The CWEQ-II a modification of the original CWEQ, consists of 19 items across 6 subscales (three for <u>each</u> of Kanter's empowerment structures, 3 for the Formal Power (JAS) measure and 4 for the Informal Power (ORS) measure) (Laschinger, Finegan, Shamian, & Wilk, 2001). Because the CWEQ II is shorter to administer while still having comparable readability and measurement properties, only the CWEQ II survey items are provided. |
| | The CWEQ II has been studied and used frequently in nursing research since 2000 and has shown consistent reliability and validity. The University of Western Ontario Workplace Empowerment Research Program has been working with and revising the original CWEQ and CWEQ-II in nursing populations for over 10 years. |
| **Measure** | <u>Subscales</u> (3 of 6 subscales)<br>(1) Opportunity<br>(2) Support<br>(3) Formal Power |
| **Administration** | <u>Survey Administration</u><br>(1)  Paper and pencil<br>(2)  10 to 15 minutes for entire scale<br>(3)  19 questions for entire scale<br>(4)  5-point Likert scale (none to a lot; no knowledge to know a lot; strongly disagree to strongly agree)<br><br><u>Readability</u><br>Flesch-Kincaid:  7.9 |

---

[10] The other three subscales of the *Conditions for Work Effectiveness Questionnaire II (CWEQ II)* can be found in Appendix G.

| Scoring | (1) Simple calculations. |
|---|---|
| | (2) <u>Total empowerment score</u> = Sum of 6 subscales (Range 6 – 30). Subscale mean scores are obtained by summing and averaging items (range 1-5). |
| | (3) Higher scores indicate higher perceptions of empowerment. |
| Availability | Free with permission from the author. |
| Reliability | Cronbach alpha reliabilities for the CWEQ-II ranges from 0.79 to 0.82, and 0.71 to 0.90 for the subscales. |
| Validity | • The CWEQ II has been validated in a number of studies. Detailed information can be obtained at: http://publish.uwo.ca/~hkl/ |
| | • Construct validity of the CWEQ II was supported in a confirmatory factor analysis. |
| | • The CWEQ II correlated highly with a global empowerment measure. |
| Contact Information | Permission to use this instrument can be obtained on-line at http://publish.uwo.ca/~hkl/ or by contacting: Heather Spence Laschinger, PhD University of Western Ontario School of Nursing London, Ontario, Canada N6A 5C1 (519) 661-4065 hkl@uwo.ca |

## *Survey Items*

Key to Which Questions Fall into Which Subscales

O = Opportunity subscale (3 items)
S = Support subscale (3 items)
FP = Formal Power subscale (4 items)

### HOW MUCH OF EACH KIND OF OPPORTUNITY DO YOU HAVE IN YOUR PRESENT JOB?

| | | | None | | Some | | A Lot |
|---|---|---|---|---|---|---|---|
| O | 1. | Challenging work. | 1 | 2 | 3 | 4 | 5 |
| O | 2. | The chance to gain new skills and knowledge on the job. | 1 | 2 | 3 | 4 | 5 |
| O | 3. | Tasks that use all of your own skills and knowledge. | 1 | 2 | 3 | 4 | 5 |

### HOW MUCH ACCESS TO SUPPORT DO YOU HAVE IN YOUR PRESENT JOB?

| | | | None | | Some | | A Lot |
|---|---|---|---|---|---|---|---|
| S | 1. | Specific information about things you do well. | 1 | 2 | 3 | 4 | 5 |
| S | 2. | Specific comments about things you could improve. | 1 | 2 | 3 | 4 | 5 |
| S | 3. | Helpful hints or problem solving advice. | 1 | 2 | 3 | 4 | 5 |

**IN MY WORK SETTING/JOB:**

| | | | None | | Some | | A Lot |
|---|---|---|---|---|---|---|---|
| FP | 1. | the rewards for innovation on the job are | 1 | 2 | 3 | 4 | 5 |
| FP | 2. | the amount of flexibility in my job is | 1 | 2 | 3 | 4 | 5 |
| FP | 3. | the amount of visibility of my work-related activities within the institution is | 1 | 2 | 3 | 4 | 5 |

## Perception of Empowerment Instrument (PEI)

| | |
|---|---|
| **Description** | The Perception of Empowerment Instrument measures three dimensions of empowerment -- autonomy, participation, and responsibility.  Autonomy refers to an individual's perception of the level of freedom and personal control that he or she possesses and is able to exercise in performing job tasks.  Participation measures perceptions of influence in producing job outcomes and the degree to which employees feel they have input into organizational goals and processes.  Responsibility measures the psychological investment an individual feels toward his/her job and the commitment he/she brings to the job. |
| **Measure** | Subscales <br> (1)  Autonomy <br> (2)  Responsibility <br> (3)  Participation |
| **Administration** | Survey Administration <br> (1)  Paper and pencil <br> (2)  5-10 minutes <br> (3)  15 questions <br> (4)  5-point Likert scale (strongly agree to strongly disagree) <br><br> Readability <br> Flesch-Kincaid: 4.6 |
| **Scoring** | (1)  Simple calculations. <br> (2)  Subscale score =  Sum of items on the subscale (Range 4 – 30, depending on subscale) <br> (3)  Higher scores indicate higher perceptions of empowerment. |
| **Availability** | Free with permission from the author. |
| **Reliability** | Internal consistency ranges from .80 to .87 for the subscales. |
| **Validity** | Criterion-related validity reported as .82; however, specific criterion used is unclear. |
| **Contact Information** | This instrument can be obtained on-line.  Permission to use it can be obtained by contacting: <br> W. Kirk Roller, Ph.D. <br> 1515 Jefferson Davis Highway #1405 <br> Arlington, VA 22202 <br> (703) 416-6618 <br> kroller225@aol.com |

## Survey Items

| |
|---|
| Key to Which Questions Fall into Which Subscales <br><br> A = Autonomy subscale (5 items) <br> R = Responsibility subscale (4 items) <br> P = Participation subscale (6 items) |

Provide your reaction to each of the following by putting a number from the scale below in the column to the right of the statement.

5 = Strongly Agree
4 = Agree
3 = Neutral
2 = Disagree
1 = Strongly Disagree

|  | ITEM # | ITEM | RESPONSE |
|---|---|---|---|
| A | 1 | I have the freedom to decide how to do my job. | |
| P | 2 | I am often involved when changes are planned. | |
| A | 3 | I can be creative in finding solutions to problems on the job. | |
| P | 4 | I am involved in determining organizational goals. | |
| R | 5 | I am responsible for the results of my decisions. | |
| P | 6 | My input is solicited in planning changes. | |
| R | 7 | I take responsibility for what I do. | |
| R | 8 | I am responsible for the outcomes of my actions. | |
| A | 9 | I have a lot of autonomy in my job. | |
| R | 10 | I am personally responsible for the work I do. | |
| P | 11 | I am involved in decisions that affect me on the job. | |
| A | 12 | I make my own decisions about how to do my work. | |
| A | 13 | I am my own boss most of the time. | |
| P | 14 | I am involved in creating our vision of the future. | |
| P | 15 | My ideas and inputs are valued at work. | |

## *Psychological Empowerment Instrument*

| | |
|---|---|
| **Description** | The Psychological Empowerment Instrument was designed to measure the four dimensions of empowerment based on Thomas and Velthouse's definition -- meaning, competence, self-determination, and impact (1990).  Meaning refers to the value of the work goals or purposes; it involves a fit between values, beliefs and behaviors and the work role.  Competence is a reflection of an individual's self-efficacy or one's belief in his/her capability of performing work tasks.  Self-determination involves believing that one has a choice in initiating actions in the workplace.  Impact is the degree to which an employee can influence the outcomes of the organization. |
| **Measure** | Subscales<br>(1)   Meaning<br>(2)   Competence<br>(3)   Self-Determination<br>(4)   Impact |
| **Administration** | Survey Administration<br>(1)   Paper and pencil<br>(2)   5-10 minutes<br>(3)   12 questions<br>(4)   7-point Likert scale (very strongly agree to very strongly disagree)<br><br>Readability<br>Flesch-Kincaid: 8.1 |
| **Scoring** | (1)   Simple calculations.<br>(2)   Subscale score = Sum of items on the subscale (Range 3 – 21)<br>        Total scale score = Average of subscale scores (Range 3 – 21)<br>(3)   Higher scores indicate higher perceptions of empowerment. |
| **Availability** | Free if used for research or non-commercial use with permission from the author. |
| **Reliability** | Internal consistency ranges from .62 to .74 for the total scale and from .79 to .85 for the subscales. |
| **Validity** | Criterion-related validity:<br>• Subscale scores were significantly but moderately related to career intentions and organizational commitment. |
| **Contact Information** | Permission to use it can be obtained by contacting:<br>Gretchen Spreitzer<br>Department of Organizational Behavior and HRM<br>University of Michigan<br>701 Tappan Street<br>Room A2144<br>Ann Arbor, MI  48109<br>(734) 936-2835<br>spreitze@bus.umich.edu |

## *Survey Items*

Key to Which Questions Fall into Which Subscales

M = Meaning subscale (3 items)
C = Competence subscale (3 items)
S = Self-determination subscale (3 items)
I  = Impact (3 items)

7-point response scale, ranging from very strongly agree to very strongly disagree

- M   1. The work I do is meaningful.
- M   2. The work I do is very important to me.
- M   3. My job activities are personally meaningful to me.

- C   1. I am confident about my ability to do my job.
- C   2. I am self-assured about my capability to perform my work.
- C   3. I have mastered the skills necessary for my job.

- S   1. I have significant autonomy in determining how I do my job.
- S   2. I can decide on my own how to go about doing my work.
- S   3. I have considerable opportunity for independence and freedom in how I do my job.

- I   1. My impact on what happens in my department is large.
- I   2. I have a great deal of control over what happens in my department.
- I   3. I have significant influence over what happens in my department.

## *Yeatts and Cready Dimensions of Empowerment Measure*

| | |
|---|---|
| **Description** | Yeatts and colleagues at the University of North Texas are currently conducting an evaluation of 10 nursing homes in the Dallas-Fort Worth metropolitan area to assess whether self-managed work teams (SMWTs) result in reduced turnover and absenteeism and improved performance among CNAs.  SMWTs were designed to empower CNAs, improve their job satisfaction, and improve resident care.  The teams consist of CNAs who work together daily with the same residents, identify clinical or work areas needing improvement and share decision-making about how to accomplish their tasks (Yeatts et al., 2004).<br><br>As part of this research, Yeatts and Cready developed a 26-item questionnaire designed to measure five empowerment dimensions -- ability to make workplace decisions, ability to modify the work, perception that management listens to CNAs, perception that management consults CNAs, and global empowerment (Yeatts et al., 2004).  Global empowerment encompasses employees' perceptions of competence, the meaningfulness of their work, the impact of their work and autonomy.  This measure has been pretested in seven nursing homes with 207 CNAs. |
| **Measure** | Subscale<br>(1)  Ability to make workplace decisions<br>(2)  Ability to modify the work<br>(3)  Management listens seriously to CNAs<br>(4)  Management consults CNAs<br>(5)  Global empowerment |
| **Administration** | Survey Administration<br>(1)  Paper and pencil<br>(2)  20 to 30 minutes<br>(3)  26 questions<br>(4)  5-point Likert scale (disagree strongly to agree strongly)<br><br>Readability<br>Flesch-Kincaid:  Data not available at this time. |
| **Scoring** | (1)  Simple calculations.<br>(2)  <u>Total scale score</u> = Sum of subscale scores, after reverse coding the one negatively worded item (Range 26 – 130)<br>(3)  Higher scores indicate higher perceptions of empowerment. |
| **Availability** | Free with permission from the author. |
| **Reliability** | Internal consistency ranges from .63 to .80 for the subscales.  (It should be noted that the survey data are still in the process of being collected from 3 nursing homes, and additional reliability testing will be conducted in future phases of the research project.) |
| **Validity** | No published information is available. |
| **Contact Information** | Permission to use this instrument is available by contacting:<br>Dale Yeatts, PhD<br>Professor<br>Department of Sociology<br>University of North Texas<br>(940) 565-2000<br>Yeatts@unt.edu |

## *Survey Items*

Key to Which Questions Fall into Which Subscales*

WD =  Ability to Make Workplace Decisions subscale (7 items)
WP  = Ability to Modify the Work subscale (3 items)
ML =   Management Listens Seriously to CNAs subscale (6 items)
MC =  Management Consults CNAs subscale (3 items)
GE =  Global Empowerment subscale (8 items)

* The total number of items adds up to 27 because one item is asked in two subscales.

Please use the following scale to answer the questions below:

1 = Disagree strongly
2 = Disagree
3 = Neutral
4 = Agree
5 = Agree strongly

| | | | Disagree Strongly | | Neutral | | Agree Strongly |
|---|---|---|---|---|---|---|---|
| WD | 1. | The nurse aides decide who will do what each day. | 1 | 2 | 3 | 4 | 5 |
| WD | 2. | The nurse aides provide information that is used in a resident's care plan. | 1 | 2 | 3 | 4 | 5 |
| WD | 3. | The nurse aides decide the procedures for getting residents to the dining room. | 1 | 2 | 3 | 4 | 5 |
| WD | 4. | I am allowed to make my own decisions. | 1 | 2 | 3 | 4 | 5 |
| WD | 5. | I make many decisions on my own. | 1 | 2 | 3 | 4 | 5 |
| WD | 6. | I work with the management staff in making decisions about my work. | 1 | 2 | 3 | 4 | 5 |
| WD | 7. | CNAs work with the management staff in making decisions about CNA work. | 1 | 2 | 3 | 4 | 5 |

| | | | Disagree Strongly | | Neutral | | Agree Strongly |
|---|---|---|---|---|---|---|---|
| WP | 1. | I sometimes provide new ideas at work that are used. | 1 | 2 | 3 | 4 | 5 |
| WP | 2. | I sometimes provide solutions to problems at work that are used. | 1 | 2 | 3 | 4 | 5 |
| WP | 3. | I sometimes suggest new ways for doing the work that are used. | 1 | 2 | 3 | 4 | 5 |

| | | | Disagree Strongly | | Neutral | | Agree Strongly |
|---|---|---|---|---|---|---|---|
| ML | 1. | The management staff (such as the DON and administrator) listen to the suggestions of CNAs. | 1 | 2 | 3 | 4 | 5 |
| ML | 2. | When CNAs make suggestions on how to do the work, charge nurses seriously consider them. | 1 | 2 | 3 | 4 | 5 |
| ML | 3. | When CNAs make suggestions, someone listens to them and gives them feedback. | 1 | 2 | 3 | 4 | 5 |
| ML | 4. | When CNAs make suggestions on how to do their work, the management staff (such as the administrator and DON) considers their suggestions seriously. | 1 | 2 | 3 | 4 | 5 |
| ML | 5. | When CNAs make suggestions, someone listens to them and gives them feedback. | 1 | 2 | 3 | 4 | 5 |
| ML | 6. | CNAs are provided reasons, when their suggestions are not used. | 1 | 2 | 3 | 4 | 5 |

| | | | Disagree Strongly | | Neutral | | Agree Strongly |
|---|---|---|---|---|---|---|---|
| MC | 1. | Whenever CNA work must be changed, the CNAs are usually asked how they think the work should be changed. | 1 | 2 | 3 | 4 | 5 |
| MC | 2. | The management staff asks the CNAs for their opinion, before making work related decisions. | 1 | 2 | 3 | 4 | 5 |
| MC | 3. | CNAs are asked to help make decisions about their work. | 1 | 2 | 3 | 4 | 5 |

| | | | Disagree Strongly | | Neutral | | Agree Strongly |
|---|---|---|---|---|---|---|---|
| GE | 1. | I do NOT have all the skills and knowledge I need to do a good job. | 1 | 2 | 3 | 4 | 5 |
| GE | 2. | I have all the skills and knowledge I need to do a good job, and I use them. | 1 | 2 | 3 | 4 | 5 |
| GE | 3. | I feel I am positively influencing other people's lives through my work. | 1 | 2 | 3 | 4 | 5 |
| GE | 4. | I have accomplished many worthwhile (good) things in this job. | 1 | 2 | 3 | 4 | 5 |
| GE | 5. | I deal very effectively with the problems of my residents. | 1 | 2 | 3 | 4 | 5 |
| GE | 6. | I can easily create a relaxed atmosphere with my residents. | 1 | 2 | 3 | 4 | 5 |
| GE | 7. | I am allowed to make my own decisions about how I do my work. | 1 | 2 | 3 | 4 | 5 |
| GE | 8. | While at work, I make many decisions on my own or with other nurse aides. | 1 | 2 | 3 | 4 | 5 |

# Job Design

## Introduction

### Definition of Job Design

Job design includes the characteristics of the tasks that make up a given job that influence its potential for producing motivated work behavior. Job design comes from a line of research started more than 50 years ago looking at the impact on workers of assembly-lines with highly specialized and repetitive jobs and external control over the pace of production. Job design describes perceptions of jobs by job incumbents themselves, and is distinguished from more objective job or task analysis techniques used to classify jobs for compensation systems or other human resource management functions. Job design is associated with job satisfaction, job stress, and job performance among nursing staff (Bailey, 1995; Banaszak-Holl & Hines, 1996; Streit & Brannon, 1994; Peterson & Dunnagan, 1998; Tonges, 1998; Tonges, Rothstein, & Carter, 1998).

### Overview of Selected Measures of Job Design

The two major approaches to measuring job incumbents' perceptions of job design both focus on the description of several job characteristics. They differ in terms of which characteristics are measured. Both are described in the remainder of this section.

1. Job Characteristics Scales (JCS) of the Job Diagnostic Survey (JDS) Revised (4 of 5 subscales)
2. Job Role Quality Questionnaire (JRQ)

### Issues to Consider When Selecting Measures of Job Design

Major issues related to the use of perceptional measures of job design are:

- Since job perceptions are subjective responses to presumed objective features of work, they are likely to be moderated by individual personality differences such as the need for growth and locus of control as well as job knowledge and skill and demographic characteristics. There is strong evidence, however, that perceived job characteristics are reasonably accurate reflections of objective job design features (Fried & Ferris, 1987).

- Perceptional measures are valid for measuring variability in perceptions within similar job categories including change over time. However, they are less informative when comparing distinctly different jobs given that job incumbents have only their own experience by which to frame assessments of their job. For example, stock brokers and home health aides may both rate their work as very significant, but the comparison is not very useful.

# Alternatives for Measuring Job Design

## Job Characteristics Scales (JCS) of the Job Diagnostic Survey (JDS) Revised (4 of 5 subscales)[11]

| | |
|---|---|
| **Description** | The Hackman and Oldham Job Characteristics Model is the dominant model for studying the impact of job characteristics on affective work outcomes (e.g., job satisfaction, empowerment, and motivation) and to a more limited extent behavioral outcomes (e.g., performance, absenteeism, and turnover intentions) (1975, 1980).  The Job Characteristics Scales (JCS) are a component of the Job Diagnostic Survey (JDS), the most widely used instrument across many types of jobs to measure perceived job characteristics.  The JDS was revised in 1987 to eliminate a measurement artifact resulting from reverse-worded questionnaire items.  Only the revised version should be used (Idaszak & Drasgow, 1987). <br><br> The JCS contain five subscales -- skill variety, task significance, autonomy, task identity and feedback.  The JCS is often combined in surveys with other measures of workers' feelings about and satisfaction with their jobs.  Hackman and Oldham recommend that it be administered during regular work hours in groups of no more than 15 respondents at a time (1980).  Hackman and Oldham provide substantive guidelines for administration (1980). |
| **Measure** | <u>Subscales</u> (4 of 5) <br> (1)  Skill variety <br> (2)  Task significance <br> (3)  Autonomy <br> (4)  Job feedback |
| **Administration** | <u>Survey Administration</u> <br> (1)  Paper and pencil <br> (2)  5-8 minutes <br> (3)  12 questions <br> (4)  7-item Likert scale  (very little to very much) <br><br> <u>Readability</u> <br> Flesch-Kincaid: 6.8 |
| **Scoring** | (1)  Simple calculations. <br> (2)  <u>Subscale score</u> = Average of items on the subscale (Range 1 – 7) <br> (3)  Higher scores indicate better job design features. |
| **Availability** | Free. |
| **Reliability** | Internal consistency ranges from .75 to .79 for the subscales. |
| **Validity** | Criterion-related validity:  Job design correlates with intent to leave and is predictive of absenteeism and job satisfaction |
| **Contact Information** | Not needed for use of this instrument. |

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[11] The other subscale of the *Job Characteristics Scales (JCS) of the Job Diagnostic Survey (JDS) Revised* can be found in Appendix G.

*Survey Items*

Key to Which Questions Fall into Which Subscales

SV = Skill Variety subscale (3 items)
TS = Task Significance subscale (3 items)
A = Autonomy subscale (3 items)
F = Feedback from the Job Itself subscale (3 items)

On the following pages, you will find several different kinds of questions about your job. Specific instructions are given at the start of each section. Please read them carefully. It should take no more than 10 minutes to complete the entire questionnaire. Please move through it quickly.

The questions are designed to obtain your perceptions of your job. There are no trick questions. Your individual answers will be kept completely confidential. Please answer each item as honestly and frankly as possible. Thank you for your cooperation.

# Section One

This part of the questionnaire asks you to describe your job listed above as objectively as you can. Try to make your description as accurate and as objective as you possibly can. Please do not use this part of the questionnaire to show us how much you like or dislike your job.

A sample question is given below.

A.      To what extent does your job require you to work overtime?

| 1--- | ---2--- | ---3--- | ---4--- | ---5--- | ---6--- | ---7 |
|---|---|---|---|---|---|---|
| Very little; the job requires almost no overtime hours. | | Moderately; the job requires overtime at least a week. | | | Very much; the job requires overtime more than once a week. | |

You are to circle the number which is the most accurate description of your job.

If, for example, your job requires you to work overtime two times a month -- you might circle the number six, as was done in the example above.

### Survey Items

(A) 1. How much autonomy is there in the job? That is, to what extent does the job permit a person to decide on his or her own how to go about doing the work?

| 1--- | ---2--- | ---3--- | ---4--- | ---5--- | ---6--- | ---7 |
|---|---|---|---|---|---|---|
| Very little; the job gives me almost no personal "say" about deciding how and when the work is done. | | Moderate autonomy; many things are standardized and not under my control but I can make some decisions about the work. | | | Very much; the job gives a person almost complete responsibility for deciding how and when the work is done. | |

(SV) 2. How much variety is there in your job? That is, to what extent does the job require you to do many different things at work, using a variety of his or her skills and talents?

| 1--- | ---2--- | ---3--- | ---4--- | ---5--- | ---6--- | ---7 |
|---|---|---|---|---|---|---|
| Very little; the job requires the person to do the same routine things over and over again. | | Moderate variety | | | Very much; the job requires the person to do many different things, using a number of different skills and talents. | |

(TS) 3. In general, how significant or important is your job? That is, are the results of your work likely to significantly affect the lives or well-being of other people?

| 1--- | ---2--- | ---3--- | ---4--- | ---5--- | ---6--- | ---7 |
|---|---|---|---|---|---|---|
| Not at all significant: the outcomes of the work are not likely to affect anyone in any important way. | | Moderately significant | | | Highly significant; the outcomes of the work can affect other people in very important ways. | |

(F) 4. To what extent does doing the job itself provide you with information about your work performance? That is, does the actual work itself provide clues about how well you are doing -- aside from any "feedback" co-workers or supervisors may provide?

| ---1--- | ---2--- | ---3--- | ---4--- | ---5--- | ---6--- | ---7--- |
|---|---|---|---|---|---|---|
| Very little; the job itself is set up so a person could work forever without finding out how well he or she is doing. | | Moderately; sometimes doing the job provides "feedback" to the person; sometimes it does not. | | | Very much; the job is set up so that a person gets almost constant "feedback" as he or she works about how well he or she is doing. | |

## Section Two

Listed below are a number of statements which could be used to describe a job.

You are to indicate whether each statement is an accurate or an inaccurate description of your job.

Once again, please try to be as objective as you can in deciding how accurately each statement describes your job -- regardless of you like or dislike your job.

Write a number in the blank beside each statement, based on the following scale:

How accurate is the statement in describing your job?

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|---|---|---|---|---|---|
| Very Inaccurate | Mostly Inaccurate | Slightly Inaccurate | Uncertain | Slightly Accurate | Mostly Accurate | Very Accurate |

(SV) ___ 1.  The job requires me to use a number of complex or sophisticated skills.

(F) ___ 2.  Just doing the work required by the job provides many chances for me to figure out how well I am doing.

(SV) ___ 3.  The job requires me to use a number of complex or high-level skills.

(TS) ___ 4.  This job is one where a lot of other people can be affected by how well the work gets done.

(A) ___ 5.  The job gives me a chance to use my personal initiative and judgment in carrying out the work.

(F) ___ 6.  After I finish a job, I know whether I performed well.

(A) ___ 7.  The job gives me considerable opportunity for independence and freedom in how I do the work.

(TS) ___ 8.  The job itself is very significant and important in the broader scheme of things.

## *Job Role Quality Questionnaire (JRQ)*

| | |
|---|---|
| **Description** | The Job Role Quality questionnaire was developed through a National Institute of Occupational Safety and Health (NIOSH)-funded project (Marshall et al., 1991).  The Job Role Quality questionnaire was developed as a response to research findings from the widely used Job Content Questionnaire (JCQ).[12]  This research has shown that satisfaction and health outcomes are impacted by the strain that results when jobs combine heavy demands and low decision latitude with little social support.  This model has been applied in some health care settings and the occupation "nurse aide" is categorized as a high strain one, combining relatively high demands and low decision latitude. A major problem with the model underlying this approach, however, has been that it is based predominantly on data from male workers.  The Job Role Quality Questionnaire was designed to adapt the JCQ to more accurately reflect women's psychosocial responses to service work.  While it is derived from the Job Content Questionnaire and includes the same concepts, the Job Role Quality scales are not identical.  Further, the Job Role Quality items of "helping others" and "discrimination" were added to assess their moderating role on job strain.  These modifications suggest a good fit for studies of DCWs.<br><br>The Job Role Quality questionnaire is intended to measure job strain that leads to negative psychological and physical health outcomes.   It contains 5 Job Concern subscales -- overload, dead-end job, hazard exposure, poor supervision, and discrimination.  It also contains 6 Job Reward subscales -- helping others, decision authority, challenge, supervisor support, recognition, and satisfaction with salary.<br><br>Overall, decision authority, challenge and the opportunity to help others are each important buffers of heavy work demands.  Supervisor support and helping others most consistently buffer the negative health effects of overload (Marshall & Barnett, 1993; Marshall et al., 1991). |
| **Measure** | <u>Subscales</u><br>Concern Factors:<br>(1)  Overload<br>(2)  Dead-end job<br>(3)  Hazard exposure<br>(4)  Supervision<br>(5)  Discrimination<br><br>Reward factors:<br>(1)  Helping others<br>(2)  Decision authority<br>(3)  Challenge<br>(4)  Supervisor Support<br>(5)  Recognition<br>(6)  Satisfaction with salary |

---

[12] The Job Content Questionnaire is managed by Dr. Karasek at the JCQ Center.  The instrument is copyrighted and not in the public domain.  Use of the instrument for research purposes is free for studies involving fewer than 750 subjects.  The use fee for studies involving 750-2000 subjects is $.50 per subject and for studies with sample sizes 20,000-40,000, it is $.10.  You can contact Dr. Robert Karasek to obtain use contract at Professor of Work Environment, University of MA Lowell, One University Ave., Kitson 200, Lowell, MA 01854-2867.

| Administration | Survey Administration<br>(1) Designed for face-to-face interview, but may be possible to adapt to paper and pencil, self-administered<br>(2) Data on time not available<br>(3) 36 questions<br>(4) 4-item Likert scale (not at all (concerned/rewarding) to extremely (concerned/rewarding))<br><br>Readability<br>Flesch-Kincaid: 5.9 |
|---|---|
| Scoring | (1) Simple calculations.<br>(2) <u>Subscale score</u> = Average of items on the subscale (Range 1 – 4)<br>(3) Lower scores on Job Concern subscales indicate better job design features; Higher scores on Job Reward subscales indicate better job design features. |
| Availability | Free. |
| Reliability | Internal consistency ranges from .48 to .87 for the subscales. |
| Validity | Construct validity:<br>• Subscales were confirmed using confirmatory factor analysis.<br>• Logical variations in scores among social workers and LPNs.<br><br>Criterion-related validity:<br>• Hospital LPNs and nursing home LPNs report quite different job demands. Hospital LPNs reported more overload and less decision authority than those in nursing homes. |
| Contact Information | Not needed for use of the instrument. |

## *Survey Items*

Key to Which Questions Fall into Which Subscales

The 36 items are organized below into their respective 11 subscales (5 job concern subscales and 6 job reward subscales).

## Job Concern Factors

Instructions.   Think about your job right now and indicate on a scale of 1 (not at all) to 4 (extremely), to what extent, if at all, each of the following is of concern.

Overload
1. Having too much to do
2. The job's taking too much out of you
3. Having to deal with emotionally difficult situations

Dead-End Job
1. Having little chance for the advancement you want or deserve
2. The job's not using your skills
3. The job's dullness, monotony, lack of variety
4. Limited opportunity for professional or career development

Hazard Exposure
1. Being exposed to illness or injury
2. The physical conditions on your job (noise, crowding, temperature, etc.)
3. The job's being physically strenuous

Poor Supervision
1. Lack of support from your supervisor for what you need to do your job
2. Your supervisor's lack of competence
3. Your supervisor's lack of appreciation for your work
4. Your supervisor's having unrealistic expectations for your work

Discrimination
1. Facing discrimination or harassment because of your race/ethnic background
2. Facing discrimination or harassment because you're a woman


# Job Reward Factors

Instructions: Think about your job right now and indicate on a scale of 1 (not at all) to 4 (extremely) to what extent, if at all, each of the following is a rewarding part of your job.

Helping Others
1. Helping others
2. Being needed by others
3. Having an impact on other people's lives

Decision Authority
1. Being able to make decisions on your own
2. Being able to work on your own
3. Having the authority you need to get your job done without having to go to someone else for permission
4. The freedom to decide how you do your work

Challenge
1. Challenging or stimulating work
2. Having a variety of tasks
3. The sense of accomplishment and competence you get from doing your job
4. The job's fitting your interests and skills
5. The opportunity for learning new things

Supervisor Support
1. Your immediate supervisor's respect for your abilities
2. Your supervisors concern about the welfare of those under him/her
3. Your supervisor's encouragement of your professional development
4. Liking your immediate supervisor

Recognition
1. The recognition you get
2. The appreciation you get

Satisfaction with Salary
1. The income
2. Making good money compared to other people in your field

# Job Satisfaction

## Introduction

### Definition of Job Satisfaction

Job satisfaction is generally defined as the degree to which individuals have a positive emotional response towards employment in an organization.  It is not the same as morale, which includes other concepts such as commitment, discouragement, and loyalty.

Organizations care about job satisfaction because it is thought to be related to employees' emotional and behavioral responses to work. However, the evidence on these relationships is mixed.  Extensive literature reviews, meta-analyses, and organizational studies conducted in the 1970s found that the relationship between job satisfaction and productivity, absence, and turnover is negligible (Landy, 1989; Steers & Rhoades, 1978; Mobley, Horner, & Hollingsworth, 1978; Locke, 1976).  In contrast, more recent studies have found that job dissatisfaction is strongly associated with job stress and organizational commitment among nurses (Blegen, 1993; Cohen-Mansfield, 1997; Lundstrom et al., 2002; Upenieks, 2000).

### Overview of Selected Measures of Job Satisfaction

Job satisfaction can be measured globally as a single measure of whether one is generally satisfied (or dissatisfied) with his or her job (Porter & Lawler, 1968).  With this global approach, job satisfaction is measured as a general, overall emotional response to a person's current work situation.  Three measures identified for this topic address overall job satisfaction:

1.  General Job Satisfaction Scale (GJS, from the Job Diagnostic Survey or JDS)
2.  Various single-item measures including the Visual Analog Satisfaction Scale
3.  Visual Analog Satisfaction Scale (VAS)

In contrast to a global approach, some argue that job satisfaction should be assessed in terms of multiple dimensions such as in response to tasks, supervisor, coworkers, or pay (e.g., Smith, Kendall, & Hulin, 1969). This multi-dimensional or facet approach assumes that people have reactions to specific aspects of their work that a general measure fails to recognize.  Satisfaction on different dimensions does not simply combine to produce a general or overall measure of satisfaction. Three measures identified for this topic use this multi-dimensional approach.

1.  Benjamin Rose Nurse Assistant Job Satisfaction Scale
2.  Grau Job Satisfaction Scale
3.  Job Satisfaction Survey (JSS[©])

### Issues to Consider When Selecting Measures of Job Satisfaction

- For many years it has been assumed that multi-item measures of satisfaction were psychometrically superior to single items. Recent evidence (summarized in "Single Item Measures of Job Satisfaction" later in this topic) suggests that it is possible to construct one-item measures that have good measurement properties. This possibility may be significant to users with limited time and budget resources. Single item measures have proven popular in many studies of health care workers where job satisfaction is not the focus of the research, but one among many data points collected in a study.

# Alternatives for Measuring Job Satisfaction

## *Benjamin Rose Nurse Assistant Job Satisfaction Scale*

| | |
|---|---|
| **Description** | The Benjamin Rose Nurse Assistant Job Satisfaction Scale is an 18-item scale that measures job satisfaction which was developed for use in surveys of state-tested nursing assistants working in nursing homes. It was developed by researchers at the Margaret Blenkner Research Institute.  The Benjamin Rose Nurse Assistant Job Satisfaction Scale has been used with 338 nurse assistants for more than ten years and its psychometric properties established. |
| **Measure** | Subscales<br>(1) Communication and recognition<br>(2) Amount of time to do work<br>(3) Available resources<br>(4) Teamwork<br>(5) Management practices |
| **Administration** | Survey Administration<br>(1)  Interview<br>(2)  5 minutes or less<br>(3)  18 questions<br>(4)  4-point Likert scale (0=very dissatisfied to 3=very satisfied)<br><br>Readability<br>Flesch-Kincaid: 4.3 |
| **Scoring** | (1)  Simple calculations.<br>(2)  Total scale score =  Sum of 18 items (Range 0-54)<br>(3)  Higher scores indicate higher job satisfaction. |
| **Availability.** | This scale is copyrighted.  Parties interested in using the measure must obtain written permission from Benjamin Rose's Margaret Blenkner Research Institute and acknowledge the source in all publications and other documents. |
| **Reliability** | Internal consistency of scale is .92 |
| **Validity** | Construct validity:<br>• Lower levels of job satisfaction are related to on the job stress, such as having a low numbers of other nursing assistants that they consider friends (r = .16, p = .005), and having a low number of residents that they consider friends (r = .218, p = .000).<br>• Higher levels of job satisfaction are significantly correlated with non-job related stress, such as having fewer financial worries (r = -.386, p = .000), and having lower depression scores (r = -.365, p = .000). |
| **Contact Information** | Permission to use this instrument can be obtained by contacting:<br>Administrative Assistant<br>Margaret Blenkner Research Institute<br>Phone:  216-373-1604<br>Email:  klutian@benrose.org |

## *Survey Items*

Key to Which Questions Fall into Which Subscales

CR = Communication and recognition subscale (5 items)
TO = Amount of time/organization subscale (2 items)
R = Resources subscale (2 items)
T = Teamwork subscale (2 items)
MP = Management practice and policy subscale (7 items)

**THE NEXT STATEMENTS ARE ABOUT DIFFERENT ASPECTS OF YOUR JOB.  AFTER I READ EACH STATEMENT, PLEASE TELL ME HOW SATISFIED ARE YOU WITH:**

| | | | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied |
|---|---|---|---|---|---|---|
| MP | 1. | the working conditions here? | 3 | 2 | 1 | 0 |
| T | 2. | the way nurse assistants here pitch in and help one another? | 3 | 2 | 1 | 0 |
| CR | 3. | the recognition you get for your work? | 3 | 2 | 1 | 0 |
| MP | 4. | the amount of responsibility you have? | 3 | 2 | 1 | 0 |
| MP | 5. | your rate of pay? | 3 | 2 | 1 | 0 |
| MP | 6. | the way this nursing home is managed? | 3 | 2 | 1 | 0 |
| CR | 7. | the attention paid to suggestions you make? | 3 | 2 | 1 | 0 |
| MP | 8. | the amount of variety in your job? | 3 | 2 | 1 | 0 |
| MP | 9. | your job security? | 3 | 2 | 1 | 0 |
| MP | 10. | your fringe benefits? | 3 | 2 | 1 | 0 |
| TO | 11. | the amount of time you have to get your job done? | 3 | 2 | 1 | 0 |
| T | 12. | the teamwork between nurse assistants and other staff? | 3 | 2 | 1 | 0 |
| CR | 13. | the attention paid to your observations or opinions? | 3 | 2 | 1 | 0 |
| R | 14. | the information you get to do your job? | 3 | 2 | 1 | 0 |
| R | 15. | the supplies you use on the job? | 3 | 2 | 1 | 0 |
| TO | 16. | the pace or speed at which you have to work? | 3 | 2 | 1 | 0 |
| CR | 17. | the way employee complaints are handled? | 3 | 2 | 1 | 0 |
| CR | 18. | the feedback you get about how well you do your job? | 3 | 2 | 1 | 0 |

### General Job Satisfaction Scale (GJS, from Job Diagnostic Survey or JDS)

| | |
|---|---|
| **Description** | The General Job Satisfaction Scale is a short 5-item measure of overall job satisfaction that is derived from the theoretical and conceptual work that resulted in the Job Diagnostic Survey (Hackman & Oldham, 1975, 1980). Job satisfaction is defined as "an overall measure of the degree to which the employee is satisfied and happy with the job." As a component of the JDS, the scale has been used in a wide variety of jobs, including telephone companies, factory workers, clerical workers, supervisors, and nursing and technical staff. An example of the use of the JDS in a long-term care setting is Schaefer's work on the effect of stressors and work climate on staff morale and functioning (1996). |
| **Measure** | (1) Overall (global) satisfaction. |
| **Administration** | Survey Administration<br>(1) Paper and pencil or interview<br>(2) < 5 minutes<br>(3) 5 questions<br>(4) 7-point Likert scaling (strongly disagree to strongly agree)<br><br>Readability<br>Flesch-Kincaid: 5.3 |
| **Scoring** | (1) Simple calculations.<br>(2) Overall score = Average of the 5 items after reverse coding the two negatively worded items (Range 1 – 7).<br>(3) Higher scores indicate higher job satisfaction. |
| **Availability** | Free. |
| **Reliability** | Internal consistency of scale ranges from .74 – .80. |
| **Validity** | Construct validity:<br>• GJS is negatively related to organizational size and positively related to job level, tenure, performance, and motivational fit between individuals and their work. |
| **Contact Information** | Not needed for use of this instrument. |

### Survey Items

| |
|---|
| Key to Which Questions Fall into Which Subscales<br><br>All 5 items go into the General Job Satisfaction scale. |

Note that two items, marked ®, are reverse worded. Their responses must be recoded prior to scoring.

1. Generally speaking, I am very satisfied with this job.
2. I frequently think of quitting this job. ®
3. I am generally satisfied with the kind of work I do in this job.
4. Most people on this job are very satisfied with the job.
5. People on this job often think of quitting. ®

Each item is to be answered using the following 7-point response scale:

1. Disagree strongly
2. Disagree
3. Disagree slightly
4. Neutral
5. Agree slightly
6. Agree
7. Agree strongly

## Grau Job Satisfaction Scale

| | |
|---|---|
| **Description** | A two-dimension measure of job satisfaction was developed by Grau et al. for a study of nurse aides in nursing homes (1991). The instrument was based on earlier work by Cantor and Chichin for a study of homecare workers (1989). Although the instrument included items related to multiple job satisfaction dimensions (economic characteristics, sense of accomplishment, personal satisfaction, job responsibilities, supervision, and job convenience), factor analysis of the instrument provided evidence of only two dimensions (Grau et al., 1991). These two dimensions are general job satisfaction and job benefits. The instrument has been used in a study of home health aides who cared for AIDS patients (Grau, Colombotos, & Gorman, 1992) and nurse aides in a long term care facility (Grau, Chandler, Burton, & Kilditz, 1991). |
| **Measure** | Subscales<br>(1)  Intrinsic job satisfaction<br>(2)  Satisfaction with benefits |
| **Administration** | Survey Administration<br>(1)  Paper and pencil or interview<br>(2)  5 minutes<br>(3)  14 questions<br>(4)  4-point Likert scaling (very true to not true at all)<br><br>Readability<br>Flesch-Kincaid: 3.2 |
| **Scoring** | (1)  Simple calculations.<br>(2)  Subscale score = Sum of items on the subscale (Range 4 – 52, depending on subscale).<br>(3)  Lower scores indicate higher job satisfaction. |
| **Availability** | Free. |
| **Reliability** | Internal consistency is .84 for intrinsic satisfaction scale and .72 for job benefits scale. |
| **Validity** | No published information is available. |
| **Contact Information** | Not needed for use of this instrument. |

## Survey Items (Exact wording below)

| |
|---|
| Key to Which Questions Fall into Which Subscales<br><br>The survey items are grouped as shown below into the two respective subscales (13 items in Intrinsic Job Satisfaction subscale and 4 items in Job Benefits subscale). |

The 4-point response scale is: 1. very true; 2. somewhat true; 3. not too true; 4. not true at all

## Intrinsic Job Satisfaction

1. See the result of my work.
2. Chances to make friends.
3. Sense of accomplishment.
4. My job prepares me for better jobs in health care.
5. Get to do a variety of things on the job.
6. Responsibilities are clearly defined.
7. Have enough authority to do my job.
8. I am given a chance to do the things I do best.
9. I get a chance to be helpful to others.
10. I am given a chance to be helpful to others.
11. I am given freedom to decide how I do my work.
12. The work is interesting.
13. The people I work with are friendly.

## Job Benefits

14. The fringe benefits are good.
15. The security is good.
16. The pay is good.
17. The chances for promotion are good.

### *Job Satisfaction Survey (JSS)*[©]

| | |
|---|---|
| **Description** | The Job Satisfaction Survey (JSS)[©] -- a 36 item, nine subscale measure -- was developed by Spector to assess employee attitudes about certain aspects of their job (1985). The nine subscales include pay, promotion, supervision, fringe benefits, contingent rewards (performance-based rewards), operating procedures (required rules and procedures), coworkers, nature of work, and communication. Each subscale includes four items, and a total score is computed from all items. While the JSS[©] was originally developed for use in human service organizations, it is applicable to all organizations, both in the public and private sectors. |
| **Measure** | <u>Subscales</u><br>(1) Pay<br>(2) Promotion<br>(3) Supervision<br>(4) Fringe benefits<br>(5) Contingent rewards<br>(6) Operating conditions<br>(7) Coworkers<br>(8) Nature of work<br>(9) Communication |
| **Administration** | <u>Survey Administration</u><br>(1) Paper and pencil or interview<br>(2) 10 minutes<br>(3) 36 questions<br>(4) 6-point Likert scaling (strongly agree to strongly disagree)<br><br><u>Readability:</u><br>Flesch-Kincaid: No published data at this time. |
| **Scoring** | (1) Simple calculations.<br>(2) <u>Subscale score</u> = Sum of items on the subscale (Range 4 – 24, depending on subscale)<br>    <u>Overall score</u> = Sum of all 36 items (Range 36 – 216)<br>(3) Higher scores indicate higher job satisfaction. |
| **Availability** | Free for research or non-commercial use with permission from the author. |
| **Reliability** | Internal consistency ranges from .60 – .91 for subscales. |
| **Validity** | Validity correlations between equivalent scales from another tested instrument (JDI) and the JSS[©] were significantly larger than zero and of reasonable magnitude. |
| **Contact Information** | This instrument is available on-line at http://chuma.cas.usf.edu/~spector. Permission to use it can be obtained by contacting:<br>Paul Spector, PhD<br>Department of Psychology<br>PCD4118G<br>University of South Florida<br>Tampa, FL 33620<br>(813) 974-0357<br>spector@chuma.cas.usf.edu |

### Survey Items (Exact wording below)

| Key to Which Questions Fall into Which Subscales |
| --- |
| P = Pay subscale (4 items)<br>PR = Promotion subscale (4 items)<br>S = Supervision subscale (4 items)<br>F = Fringe benefits subscale (4 items)<br>C = Contingent rewards subscale (4 items)<br>O = Operating procedures subscale (4 items)<br>CO = Coworkers subscale (4 items)<br>N = Nature of work subscale (4 items)<br>CM = Communication subscale (4 items) |

Note that 19 items, marked ®, are reverse worded. Their responses must be recoded prior to scoring.

7-point response scale, ranging from very strongly agree to very strongly disagree

**PLEASE CIRCLE THE ONE NUMBER FOR EACH QUESTION THAT COMES CLOSEST TO REFLECTING YOUR OPINION.**

| | | |
| --- | --- | --- |
| P | 1. | I feel I am being paid a fair amount for the work I do. |
| PR | 2. | There is really too little chance for promotion on my job. ® |
| S | 3. | My supervisor is quite competent in doing his/her job. |
| F | 4. | I am not satisfied with the benefits I receive. ® |
| C | 5. | When I do a good job, I receive the recognition for it that I should receive. |
| O | 6. | Many of our rules and procedures make doing a good job difficult. ® |
| CO | 7. | I like the people I work with. |
| N | 8. | I sometimes feel my job is meaningless. ® |
| CM | 9. | Communications seem good within this organization. |
| P | 10. | Raises are too few and far between. ® |
| PR | 11. | Those who do well on the job stand a fair chance of being promoted. |
| S | 12. | My supervisor is unfair to me. ® |
| F | 13. | The benefits we receive are as good as most other organizations offer. |
| C | 14. | I do not feel that the work I do is appreciated. ® |
| O | 15. | My efforts to do a good job are seldom blocked by red tape. |
| CO | 16. | I find I have to work harder at my job because of the incompetence of people I work with. ® |
| N | 17. | I like doing the things I do at work. |

| CM | 18. | The goals of this organization are not clear to me. ® |
|----|-----|--------------------------------------------------------|
| P | 19. | I feel unappreciated by the organization when I think about what they pay me. ® |
| PR | 20. | People get ahead as fast here as they do in other places. |
| S | 21. | My supervisor shows too little interest in the feelings of subordinates. ® |
| F | 22. | The benefit package we have is equitable. |
| C | 23. | There are few rewards for those who work here. ® |
| O | 24. | I have too much to do at work. ® |
| CO | 25. | I enjoy my coworkers. |
| CM | 26. | I often feel that I do not know what is going on with the organization. ® |
| N | 27. | I feel a sense of pride in doing my job. |
| P | 28. | I feel satisfied with my chances for salary increases. |
| F | 29. | There are benefits we do not have which we should have. ® |
| S | 30. | I like my supervisor. |
| O | 31. | I have too much paperwork. ® |
| C | 32. | I don't feel my efforts are rewarded the way they should be. ® |
| PR | 33. | I am satisfied with my chances for promotion. |
| CO | 34. | There is too much bickering and fighting at work. ® |
| N | 35. | My job is enjoyable. |
| CM | 36. | Work assignments are not fully explained. ® |

### Single Item Measures of Job Satisfaction

| | |
|---|---|
| **Description** | Over time, the trend in measuring job satisfaction has been towards multi-item, multi-scale instruments. Many currently available instruments have grown out of theories of satisfaction that emphasize employees' emotional reactions to multiple aspects of their job. For example, one of the most heavily researched and widely used instruments, the JDI, is based on a model that identifies five important aspects of work: the task, pay, coworkers, supervision, and promotion. However, the long form of this instrument consists of 72 items, and even a shorter, more streamlined version still contains 25 statements. Yet simpler and more adaptable measures may be available to the researcher.  For example, Aiken et al. used a single job satisfaction question rather than a lengthy multi-item instrument in her study of nursing burnout and found satisfaction significantly related to nurse-patient ratio (2002). |
| **Measure** | (1)   Single item measures have generally been used to assess overall job satisfaction, but may be adapted to address specific dimensions or facets. |
| **Administration** | Survey Administration<br>(1)   Paper and pencil or interview<br>(2)   < 1 minute<br>(3)   1 question<br>(4)   Typically a 5-point Likert scale anchored by levels of satisfaction.<br><br>Readability<br>Typical Flesch-Kincaid levels range from 4-6 |
| **Scoring** | (1)   Simple calculations.<br>(2)   Subject's response is used as his/her "score" on the measure.<br>(3)   Depends on direction of scores. |
| **Availability** | Free. |
| **Reliability** | Internal consistency measures are not applicable to single item measures. |
| **Validity** | Recent research indicates that single- item measures of overall or global job satisfaction correlate well (r ≥ .60) with multi-item measures, and may be superior to summing up multi-item facet scores into an overall score. |
| **Contact Information** | Not needed for use of this instrument. |

### Examples of Survey Items

- Scarpello and Campbell, in a review of job satisfaction measures, concluded that the best global rating of satisfaction is a single item, 5-point scale asking "Overall, how satisfied are you with your job?" (1983)

- Nagy suggests that single item measures are most likely to have acceptable measurement properties if they use a discrepancy format (2002). That is, their wording should follow a form such as "How does the amount of satisfaction [or some other area of interest] compare to what it should be?" The measure should use a multi-level response, such as a five-point scale ranging from "not at all satisfying" to "very satisfying."

## Visual Analog Satisfaction Scale (VAS)

| | |
|---|---|
| **Description** | The Visual Analog Satisfaction Scale (VAS) is a one-item graphical rating scale. Unlike the other instruments described here, the VAS is not an instrument, per se, but an approach to measurement that can be implemented easily. McGilton and Pringle describe the VAS and the significant relationship they found among nurses in LTC between job satisfaction (using the VAS) and perceived organizational control and clinical control (1999). |
| **Measure** | Overall job satisfaction. While examples of dimensions that might affect overall satisfaction are given, subjects are encouraged to make their rating in terms of their overall emotional reaction to whatever aspects of their job are important to them. |
| **Administration** | Survey Administration<br>(1)  Paper and pencil<br>(2)  < 1 minute<br>(3)  1 question<br>(4)  Graphical rating scale: The subject's evaluation of his/her job satisfaction is indicated by placing a marker on an anchored analog scale that ranges from no satisfaction to greatest possible satisfaction.<br><br>Readability<br>Flesch-Kincaid: 8.5 |
| **Scoring** | (1)  Simple calculations.<br>(2)  The VAS score is the distance (using a ruler) from the lowest end of a 100ml analog scale on which the respondent records their response.<br>(3)  Depends on which end of scale is reference point for measuring. |
| **Availability** | Free. |
| **Reliability** | Internal consistency measures are not applicable to single-item measures. |
| **Validity** | VAS and similar graphical rating scales are believed to be a valid measure of job satisfaction. It is argued that they capture respondents' global affective reactions to their work situation. The global nature of the question allows respondents to identify and respond to aspects of work that are most personally relevant or important. |
| **Contact Information** | Not needed for use of this instrument. |

*Survey Item*

I would like you to think about how satisfied you are with your job.  Think about all the different parts of your work life.  This could include things like hospital management, unit organization, and relationships with co-workers and supervisors. How satisfied are you?

No Job
Satisfaction

Greatest
Possible Job
Satisfaction
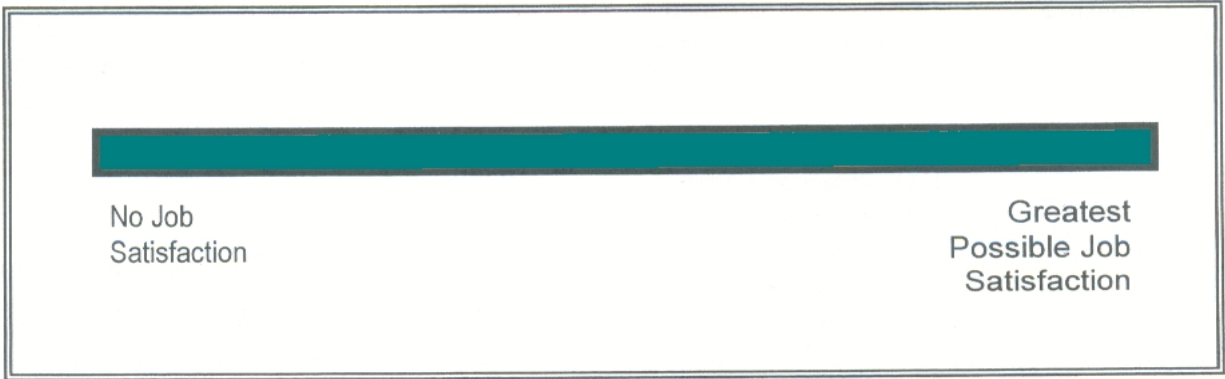
# Organizational Commitment

## Introduction

### *Definition of Organizational Commitment*

Organizational commitment is the strength (or lack thereof) of an individual's expressed attachment to a particular organization. This attachment has been measured in two ways: affective (or emotional) and behavioral (intent to leave). In some studies, most notably with direct care staff in psychiatric hospitals, organizational commitment has been more effective than job satisfaction at discriminating stayers from leavers (Porter et al., 1974).

### *Overview of Selected Measures of Organizational Commitment*

One measure of organizational commitment focuses on behavioral intent whereas the other addresses both affective attachment and behavioral intent.

1. The Intent to Turnover Measure (from the Michigan Organizational Assessment Questionnaire or MOAQ)
2. Organizational Commitment Questionnaire (OCQ)

### *Issues to Consider When Selecting Measures of Organizational Commitment*

- To date, no issues have been identified.

# Alternatives for Measuring Organizational Commitment

## *Intent to Turnover Measure (from the Michigan Organizational Assessment Questionnaire or MOAQ)*

| | |
|---|---|
| **Description** | Developed initially in 1975 as part of a larger survey instrument measuring employee perceptions, the three-item instrument has been used with many different occupational samples (Cammann et al., 1983). This set of items focuses on behavioral intent rather than affective attachment as indicating degree of commitment to the organization. |
| **Measure** | Behavioral intent to leave job |
| **Administration** | Survey Administration<br>(1) Paper and pencil<br>(2) < 5 minutes<br>(3) 3 questions<br>(4) 7-point or 5-point Likert scaling (strongly disagree to strongly agree; not at all likely to extremely likely)<br><br>Readability<br>Flesch-Kincaid: 7.1 |
| **Scoring** | (1) Simple calculations.<br>(2) Score = Sum of the 3 items (Range 3 – 21).<br>(3) Lower scores indicate greater organizational commitment. |
| **Availability** | Free. |
| **Reliability** | Internal consistency of scale is .83 from diverse occupational sample at 11 sites. |
| **Validity** | Logical relationships found between "look for new job" item and age, loneliness, and satisfaction with pay and benefits in study of home health aides. |
| **Contact Information** | Not needed for use of this instrument. |

## *Survey Items*

Here are some statements about you and your job. How much do you agree or disagree with each?

1. I will probably look for a new job in the next year.

   1-strongly disagree
   2-disagree
   3-slightly disagree
   4-neither agree nor disagree
   5-slightly agree
   6-agree
   7-strongly agree

2.   I often think about quitting.

       1-strongly disagree
       2-disagree
       3-slightly disagree
       4-neither agree nor disagree
       5-slightly agree
       6-agree
       7-strongly agree

Please answer the following question.

3.   How likely is it that you could find a job with another employer with about the same pay and benefits you now have?

       1-not at all likely
       2-
       3-somewhat likely
       4-
       5-quite likely
       6-
       7-extremely likely

## *Organizational Commitment Questionnaire (OCQ)* -- Mowday and Steers (1979)

| | |
|---|---|
| **Description** | The Organizational Commitment Questionnaire (OCQ) is the most thoroughly studied instrument in the literature that measures *affective* attachment to the organization. The OCQ was developed over a 9-year period on research from diverse samples (n=2563) including hospital employees and psychiatric technicians (DCWs). It includes the extent to which the individual: (1) accepts and believes in the organization's goals; (2) is willing to exert effort on behalf of the organization; and (3) wants to continue involvement in the organization. These first two components represent attitudinal commitment, whereas the third one is behavioral (Price & Mueller, 1986). |
| **Measure** | Affective attachment to organization |
| **Administration** | Survey Administration<br>(1) Paper and pencil<br>(2) 5 minutes (short form), 10 minutes (long form)<br>(3) 9 (positively worded) questions in short form and 15 questions (both positively and negatively worded) in long form<br>(4) 7-point or 5-point Likert scaling (strongly agree to strongly disagree)<br><br>Readability<br>Flesch-Kincaid: 8.9 (9-item short form) and 9.4 (15-item long form) |
| **Scoring** | (1) Simple calculations.<br>(2) <u>Score</u> = Average of the items, after reversing negatively worded items if long form is used (Range 1 – 7).<br>(3) Higher scores indicate greater organizational commitment. |
| **Availability** | Free. |
| **Reliability** | Internal consistency of scale ranges from .8 - .9 for the long version (not known for short version). |
| **Validity** | Construct validity:<br>• Factor analysis supports a single scale.<br>• Correlated with intent to leave, turnover, job satisfaction, and supervisors' ratings of employee commitment; may not be clearly distinct from job satisfaction. |
| **Contact Information** | Not needed for use of this instrument. |

### *Survey Items*

Listed below are a series of statements that represent possible feelings that individuals might have about the company or organization for which they work. With respect to your own feelings about the particular organization for which you are now working (company/agency name) please indicate the degree of your agreement or disagreement with each statement by checking one of the seven alternatives for each statement.

1-strongly disagree
2-moderately disagree
3-slightly disagree
4-neither disagree nor agree
5-slightly agree
6-moderately agree
7-strongly agree

1. I am willing to put in a great deal of effort beyond that normally expected in order to help this organization be successful.
2. I talk up this organization to my friends as a great organization to work for.
3. I feel very little loyalty to this organization. (reverse scored)
4. I would accept almost any type of job assignment in order to keep working for this organization.
5. I find that my values and the organization's values are very similar.
6. I am proud to tell others that I am part of this organization.
7. I could just as well be working for a different organization as long as the type of work was similar. (reverse scored)
8. This organization really inspires the very best in me in the way of job performance.
9. It would take very little change in my present circumstances to cause me to leave this organization. (reverse scored)
10. I am extremely glad that I chose this organization to work for over others I was considering at the time I joined.
11. There's not too much to be gained by sticking with this organization indefinitely. (reverse scored)
12. Often, I find it difficult to agree with this organization's policies on important matters relating to its employees. (reverse scored)
13. I really care about the fate of this organization.
14. For me this is the best of all possible organizations for which to work.
15. Deciding to work for this organization was a definite mistake on my part. (reverse scored)

# Worker-Client/Resident Relationships

## Introduction

### Definition of Worker-Client/Resident Relationships

The worker-client/resident relationships topic addresses workers' perceptions of their relationships with care recipients. It is concerned with both workers' feelings for the care recipients, and with workers' perceptions of how their feelings have been affected by relationships with care recipients.

Worker-client/resident relationships are important for organizations to consider, as turnover has been found to decelerate as a result of workers sharing kin-like relationships with clients (Karner, 1998). In a study of nursing home nursing assistants, worker-resident relationships were identified as the most important work issue, and the major reason for worker retention (Parsons, 2003). Conversely, the involvedness of relationships that develop between residential care workers and residents has also been found to be especially stressful for workers (Maslach, 1981). Further, low levels of empathy and negative attitudes towards older people are associated with nursing staff burnout (Astrom, 1991).

Pringle details the dearth of studies on what constitutes an appropriate worker-client/resident relationship (2000). Current literature does not provide guidance for the type of relationships health-care aides or nurses should develop with residents (Pringle, 2000). At this time, very few measures exist that focus on the positive aspects or feelings of worker-client/resident relationships. Rather, measures usually emphasize the negative and difficult features these relationships entail.

### Overview of Selected Measures of Worker-Client/Resident Relationships

This scale focuses on home care workers' feelings about their relationship with their client and the client's involvement in their work.

1. Stress/Burden Scale from the California Homecare Workers Outcomes Survey (2 of 6 subscales)

### Issues to Consider When Selecting Measures of Worker-Client/Resident Relationships

- No measures designed to *exclusively* assess the quality of worker-client/resident relationships have yet been developed.

# Alternatives for Measuring Worker-Client/Resident Relationships

### *Stress/Burden Scale from the California Homecare Workers Outcomes Survey (2 of 6 subscales)* [13]

| | |
|---|---|
| **Description** | Researchers at the University of California, Los Angeles developed the California Homecare Workers Outcomes Survey to compare outcomes (stress and satisfaction) between agency and client-directed workers and between family and non-family workers (Doty et al., 1998). In 1997, the survey was administered by telephone to 618 home care providers working in California's In-Home Supportive Services (IHSS) program, a well-established program in California that provides both agency and client-directed services to residents living in their own homes that are aged, blind or disabled and reimburses any provider selected by eligible clients, including family members.<br><br>Ten subscales were developed to measure these outcomes (6 scales for stress/burden and 4 for satisfaction). Stress refers to how stressed home care workers feel when it comes to client safety, family issues, client behavioral problems, their relationship with the client, the client role in their work and their own emotional state. Satisfaction relates to how satisfied home care workers are with their job role, their self-assessment of performance, career benefits and independence and flexibility in their work schedule. |
| **Measure** | Stress/Burden Scale (2 of 6 subscales)<br>(1) Relationship with client<br>(2) Client role in provider's work |
| **Administration** | <u>Survey Administration</u><br>(1) Telephone interview<br>(2) 1–2 minutes<br>(3) 6 questions<br>(4) 5-point Likert scales (very close to hostile; strongly agree to strongly disagree; or extremely well to not well at all)<br><br><u>Readability</u>: Published data not available at this time. |
| **Scoring** | (1) Simple calculations.<br>(2) <u>Score</u> = Average of the 6 items (Range 1-5)<br>(3) Higher scores indicate the most stress. |
| **Availability** | Free. If using this measure, please cite the following:<br>Benjamin, A.E., and Matthias, R.E. (2004). Work Life Differences and Outcomes for Agency and Consumer-Directed Home Care Workers. *The Gerontologist,* 44(4): 479-488. |
| **Reliability** | Internal consistency ranges from .63 - .75 for subscales. |
| **Validity** | • Published data on validity not available at this time. |

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[13] The other four subscales of the *Stress/Burden Scale from the California Homecare Workers Outcomes Survey* can be found in the Workload topic section of this Chapter.

| Contact Information | Ruth Matthias, Ph.D<br>UCLA School of Public Policy and Social Research<br>3250 Public Policy Building<br>Los Angeles, CA 90095-1656<br>(310) 825-1951<br>matthias@ucla.edu |
|---|---|

## *Survey Items (exact wording below)*

Key to Which Questions Fall into Which Subscales

R = Relationship with Client subscale (3 items)
CR = Client Role in Provider's Work subscale (3 items)

## THESE NEXT FEW QUESTIONS DEAL WITH THE RELATIONSHIP YOU HAVE WITH YOUR CLIENT(S).

| | | | Very Close | | Not Very Close | | Hostile |
|---|---|---|---|---|---|---|---|
| R | 1. | How would you describe your relationship to your client? | 1 | 2 | 3 | 4 | 5 |

| | | | Strongly Agree | | Uncertain | | Strongly Disagree |
|---|---|---|---|---|---|---|---|
| R | 2. | My client is someone I can tell my troubles to and share my feelings with. | 1 | 2 | 3 | 4 | 5 |

| | | | Extremely Well | | Somewhat Well | | Not At All Well |
|---|---|---|---|---|---|---|---|
| R | 3. | My client is someone I can tell my troubles to and share my feelings with. | 1 | 2 | 3 | 4 | 5 |

### HOW MUCH DO YOU AGREE WITH THE FOLLOWING STATEMENTS?

| | | | Strongly Agree | | Uncertain | | Strongly Disagree |
|---|---|---|---|---|---|---|---|
| CR | 1. | My client is comfortable telling me what he/she wants done. | 1 | 2 | 3 | 4 | 5 |
| CR | 2. | I appreciate my client telling me how he/she wants things done. | 1 | 2 | 3 | 4 | 5 |
| CR | 3. | My client wants to have a say in what I do for him/her. | 1 | 2 | 3 | 4 | 5 |

# Worker-Supervisor Relationships

## Introduction

### *Definition of Worker-Supervisor Relationships*

Lack of knowledge about effective management strategies for improving quality of care of nursing homes has been identified as a priority concern in long-term care (Binstock & Spector, 1997).  The quality of worker-supervisor work relationships topic addresses workers' perceptions of their relationships with their supervisors, as well as their perceptions of their peers' relationships with their supervisors.  It is concerned with both workers' feelings for their supervisors, and for workers' attitudes toward their peer group's relationship to their supervisors.

The importance of considering worker-supervisor relationships when attempting to maximize retention and limit turnover cannot be overstated.  In residential care research, supervision has been cited as a primary reason for leaving an organization (Howe, 2003). Conversely, perceived supervisor support has been found to be associated with high job satisfaction (Moniz, 1997; Gleason, 1999; Poulin, 1992).

### *Overview of Selected Measures of Worker-Supervisor Relationships*

Four instruments/subscales that measure worker-supervisor relationships differently are presented here.  One job satisfaction instrument looks at workers' feelings on their relationship with their supervisor, while another measures their feelings about the empathy and reliability of their charge nurse.  Another instrument measures nursing staff's perceptions about leadership effectiveness of their supervisors.  Other subscales assess the respondent's satisfaction with the worker-supervisor relationship or examine how concerned or rewarded workers feel by supervision given to them.

1. Benjamin Rose Relationship with Supervisor Scale
2. Charge Nurse Support Scale
3. LEAP Leadership Behaviors and Organizational Climate Survey  (1 of 2 subscales, Leadership)
4. Supervision Subscales of the Job Role Quality Questionnaire (JRQ) (2 of 11 subscales)

### *Issues to Consider When Selecting Measures of Worker-Supervisor Relationships*

- To date, no issues have been identified.

# Alternatives for Measuring Worker-Supervisor Relationships

## *Benjamin Rose Relationship with Supervisor Scale*

| | |
|---|---|
| **Description** | The Benjamin Rose Relationship with Supervisor Scale is an 11-item measure of nursing assistants' perceptions of relationships with their supervisors developed and refined by researchers at the Margaret Blenkner Research Institute (Noelker & Ejaz, 2001). This measure taps nursing assistant perceptions about the frequency with which supervisors demonstrate good communication, recognition and team building abilities. The Benjamin Rose Relationship with Supervisor Scale has been used with 338 nurse assistants in long-term care settings for more than ten years and its psychometric properties established. |
| **Measure** | Relationship with supervisor. |
| **Administration** | Survey Administration<br>(1) Interview<br>(2) Less than 5 minutes<br>(3) 11 questions<br>(4) 3-point Likert scale (2=most of the time to 0=hardly ever/never)<br><br>Readability<br>Flesch-Kincaid: 6.2 |
| **Scoring** | (1) Simple calculations.<br>(2) Total scale score = Sum of 11 items (Range 0 - 22)<br>(3) Higher scores indicate more positive perceptions of supervisors. |
| **Availability.** | This scale is copyrighted. Parties interested in using the measure must obtain written permission from Benjamin Rose's Margaret Blenkner Research Institute and acknowledge the source in all publications and other documents. |
| **Reliability** | Internal consistency of scale is .90 |
| **Validity** | Construct validity:<br>• Better relationships with supervisors is correlated with nursing assistants reporting higher levels of positive interaction with other staff members (r = .206, p = .000).<br>• Better relationships with supervisor is also significantly correlated with higher job satisfaction (r = .604, p = .000). |
| **Contact Information** | Permission to use this information can be obtained by contacting:<br>Administrative Assistant<br>Margaret Blenkner Research Institute<br>Phone: (216) 373-1604<br>Email: klutian@benrose.org |

### *Survey Items*

**THE FOLLOWING STATEMENTS ARE ABOUT YOU RELATIONSHIP WITH YOUR SUPERVISOR. IF YOU HAVE MORE THAN ONE, THINK ABOUT THE ONE WITH WHOM YOU HAVE THE MOST CONTACT.  AFTER I READ EACH STATEMENT, PLEASE TELL ME WHETHER YOU FEEL THIS WAY MOST OF THE TIME, SOME OF THE TIME, HARDLY EVER OR NEVER.**

**MY SUPERVISOR…**

|  | Most of the Time | Some of the Time | Hardly Ever/ Never |
|---|---|---|---|
| listens carefully to my observations and opinions. | 2 | 1 | 0 |
| gives me credit for my contributions to resident care. | 2 | 1 | 0 |
| respects my ability to observe and report clinical symptoms. | 2 | 1 | 0 |
| lets me know how helpful my observations are for resident care. | 2 | 1 | 0 |
| talks down to me. | 0 | 1 | 2 |
| shows me recognition when I do good work. | 2 | 1 | 0 |
| encourages me to use my nursing skills to the fullest. | 2 | 1 | 0 |
| treats me as an equal member of the health care team. | 2 | 1 | 0 |
| ignores my input when developing care plans. | 0 | 1 | 2 |
| acts like they are better than I am. | 0 | 1 | 2 |
| understands my loss when a resident dies. | 2 | 1 | 0 |

## *Charge Nurse Support Scale*

| | |
|---|---|
| **Description** | The Charge Nurse Support Scale was developed to evaluate the supportive leadership behaviors of charge nurses in long-term care settings.  Supportive leadership is defined as behaviors in which the supervisor exhibits empathy and reliability towards staff (McGilton et al., 2003).  The first outcome measured by the Charge Nurse Support Scale -- empathy -- is the ability to recognize standards of care among the nursing staff, to recognize and accommodate nursing staff's expressed needs, and to understand nursing staff's point of view when they come forward with concerns.  The second outcome -- reliability -- is the ability to be available to nursing staff if things were not going well with residents and families, to keep nursing staff informed of changes in the work environment and to tolerate feelings of frustration from staff. |
| **Measure** | Charge nurse support. |
| **Administration** | Survey Administration<br>(1)   Paper and pencil<br>(2)   10 minutes<br>(3)   15 questions<br>(4)   5-point Likert scale (never to always)<br><br>Readability<br>Flesch-Kincaid:  Published data not available at this time. |
| **Scoring** | (1)   Simple calculations.<br>(2)   Scale score = Sum of items in the scale  (Range 15-75)<br>(3)   Higher scores indicate higher levels of supportive charge nurses/supervisors. |
| **Availability** | Free with permission from author. |
| **Reliability** | Internal consistency for scale is .92 |
| **Validity** | Construct validity.<br>• The precursor supportive supervisory scale has been show to be related to how well an aide related to a client during care (r = .42, p = .05). |
| **Contact Information** | Kathy McGilton, RN, PhD.<br>Toronto Rehabilitation Institute.<br>McGilton.Kathy@torontorehab.on.ca |

### *Survey Items*

Below are 15 statements that relate to how you feel about your charge nurse. Please circle the number that reflects your relationship with your charge nurse. Please be as honest as your can.  Your answers are confidential and will not be shared with others you work with.  If you work with more than one charge nurse, please answer these questions in relation to the charge nurse that you work with most often.

|  |  | Never | Seldom | Occasionally | Often | Always |
|---|---|---|---|---|---|---|
| 1. | My charge nurse recognizes my ability to deliver quality care. | 1 | 2 | 3 | 4 | 5 |
| 2. | My charge nurse tries to meet my needs. | 1 | 2 | 3 | 4 | 5 |
| 3. | My charge nurse knows me well enough to know when I have concerns about resident care. | 1 | 2 | 3 | 4 | 5 |
| 4. | My charge nurse tries to understand my point of view when I speak to them. | 1 | 2 | 3 | 4 | 5 |
| 5. | My charge nurse tries to meet my needs in such ways as informing me of what is expected of me when working with my residents. | 1 | 2 | 3 | 4 | 5 |
| 6. | I can rely on my charge nurse when I ask for help, for example, if things are not going well between myself and my co-workers or between myself and residents and/or their families. | 1 | 2 | 3 | 4 | 5 |
| 7. | My charge nurse keeps me informed of any major changes in the work environment or organization. | 1 | 2 | 3 | 4 | 5 |
| 8. | I can rely on my charge nurse to be open to any remarks I may make to him/her. | 1 | 2 | 3 | 4 | 5 |
| 9. | My charge nurse keeps me informed of any decisions that were made in regards to my residents. | 1 | 2 | 3 | 4 | 5 |
| 10. | My charge nurse strikes a balance between clients/families' concerns and mine. | 1 | 2 | 3 | 4 | 5 |
| 11. | My charge nurse encourages me even in difficult situations. | 1 | 2 | 3 | 4 | 5 |
| 12. | My charge nurse makes a point of expressing appreciation when I do a good job. | 1 | 2 | 3 | 4 | 5 |
| 13. | My charge nurse respects me as a person. | 1 | 2 | 3 | 4 | 5 |
| 14. | My charge nurse makes time to listen to me. | 1 | 2 | 3 | 4 | 5 |
| 15. | My charge nurse recognizes my strengths and areas for development. | 1 | 2 | 3 | 4 | 5 |

**LEAP Leadership Behaviors and Organizational Climate Survey (1 of 2 subscales, Leadership)**[14]

| | |
|---|---|
| **Description** | The LEAP Leadership Behaviors and Organizational Climate Survey is a 14-item questionnaire designed to measure nursing staff's perceptions about two specific areas: leadership effectiveness and the organizational climate.  One subscale, the Leadership subscale, contains 10 items examining leadership behavior such as: informing, consulting/delegating, planning/organizing, problem solving, role clarifying, monitoring operations, motivating, rewarding, mentoring, and managing conflict.  The second subscale, the Organizational Climate subscale, includes four items measuring the organizational climate including communication flow, human resources, motivational conditions, and decision-making practices.  Questions were derived from the extensive work at The University of Michigan in the development of the Survey of Organizations questionnaire, an extensive survey of organizational conditions and practices utilized across many diverse industries (1970).  The original tool was derived from a theoretical integrative model of leadership tested as a predictor of an organization's effectiveness (Bowers & Seashore, 1966).  Organizational climate is conceptualized as a quality of the internal environment of an organization that is experienced by its members, influences their behavior, and reflect the values of the characteristics or attributes of the organization (Tagiuri & Litwin, 1968). |
| **Measure** | Subscales (1 of 2)<br>(1)  Leadership |
| **Administration** | Survey Administration<br>(1)  Paper and pencil<br>(2)  5-6 minutes<br>(3)  10 questions<br>(4)  5-point Likert scale (very little to always)<br><br>Readability<br>Flesch-Kincaid:  8.1 |
| **Scoring** | (1)  Simple calculations.<br>(2)  Subscale score = Sum of 10 items (Range of 10 - 50)<br>(3)  Higher scores indicate better perceptions of leadership behaviors. |
| **Availability** | Free with permission from author. |
| **Reliability** | Internal consistency ranges from .75 to .82 for leadership items; .94 for the leadership subscale. |
| **Validity** | Discriminant validity showed high intercorrelations among leadership items. |
| **Contact Information** | Permission to use this instrument can be obtained by contacting:<br>Linda Hollinger-Smith, RN, PhD<br>Director of Research<br>Mather LifeWays Institute on Aging<br>1603 Orrington Avenue<br>Suite 1800<br>Evanston, IL 60201<br>(847) 492-6810<br>Lhollingersmith@matherlifeways.com |

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[14] The other subscale (Organizational Climate) of the *LEAP Leadership Behaviors and Organizational Climate Survey* can be found in the Organizational Culture topic section of this Chapter.

### *Survey Items*

| | | Very Little | | Some | | Always |
|---|---|---|---|---|---|---|
| 1. | How often does your supervisor keep the people who work for him/her informed of changes or activities in the organization? | 1 | 2 | 3 | 4 | 5 |
| 2. | How often does your supervisor encourage people who work for him/her to exchange opinions and ideas? | 1 | 2 | 3 | 4 | 5 |
| 3. | How often is your supervisor receptive to the ideas and suggestions of others? | 1 | 2 | 3 | 4 | 5 |
| 4. | How often does your supervisor offer new ideas for solving job-related problems? | 1 | 2 | 3 | 4 | 5 |
| 5. | How often does your supervisor show people who work for him/her how to improve their performance? | 1 | 2 | 3 | 4 | 5 |
| 6. | How much does your supervisor pay attention to what people who work for him/her say? | 1 | 2 | 3 | 4 | 5 |
| 7. | How much does your supervisor encourage people who work for him/her to give their best effort? | 1 | 2 | 3 | 4 | 5 |
| 8. | How much does your supervisor praise the job performed by the people who work for him/her? | 1 | 2 | 3 | 4 | 5 |
| 9. | How much is your supervisor willing to listen to your problems? | 1 | 2 | 3 | 4 | 5 |
| 10. | How often does your supervisor encourage persons who work for him/her to work as a team? | 1 | 2 | 3 | 4 | 5 |

### Supervision Subscales of the Job Role Quality Questionnaire(JRQ) (2 of 11 subscales)[15]

| | |
|---|---|
| **Description** | The Job Role Quality questionnaire was developed through a National Institute of Occupational Safety and Health (NIOSH)-funded project (Marshall et al., 1991). The Job Role Quality questionnaire was developed as a response to research findings from the widely used Job Content Questionnaire (JCQ).[16] This research has shown that satisfaction and health outcomes are impacted by the strain that results when jobs combine heavy demands and low decision latitude with little social support. This model has been applied in some health care settings and the occupation "nurse aide" is categorized as a high strain one, combining relatively high demands and low decision latitude. A major problem with the model underlying this approach, however, has been that it is based predominantly on data from male workers. The Job Role Quality Questionnaire was designed to adapt the JCQ to more accurately reflect women's psychosocial responses to service work. While it is derived from the Job Content Questionnaire and includes the same concepts, the Job Role Quality scales are not identical. Further, the Job Role Quality items of "helping others" and "discrimination" were added to assess their moderating role on job strain. These modifications suggest a good fit for studies of DCWs.

The Job Role Quality questionnaire is intended to measure job strain that leads to negative psychological and physical health outcomes. It contains 5 Job Concern subscales -- overload, dead-end job, hazard exposure, poor supervision, and discrimination. It also contains 6 Job Reward subscales -- helping others, decision authority, challenge, supervisor support, recognition, and satisfaction with salary.

Overall, decision authority, challenge and the opportunity to help others are each important buffers of heavy work demands. Supervisor support and helping others most consistently buffer the negative health effects of overload (Marshall & Barnett, 1993; Marshall et al., 1991). |
| **Measure** | Subscales (2 of 11)<br>Concern Factors:<br>(1) Supervision<br><br>Reward factors:<br>(1) Supervisor Support |
| **Administration** | Survey Administration<br>(1) Designed for face-to-face interview, but may be possible to adapt to paper and pencil, self-administered<br>(2) Data on time not available<br>(3) 8 questions (4 for poor supervision subscale and 4 for supervisor support subscale)<br>(4) 4-item Likert scale (not at all (concerned/rewarding) to extremely (concerned/ rewarding))<br><br>Readability<br>Flesch-Kincaid: 5.9 |

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[15] All subscales of the *Job Role Quality Questionnaire* can be found in the Job Design topic section of this Chapter.

[16] The Job Content Questionnaire is managed by Dr. Karasek at the JCQ Center. The instrument is copyrighted and not in the public domain. Use of the instrument for research purposes is free for studies involving fewer than 750 subjects. The use fee for studies involving 750-2000 subjects is $.50 per subject and for studies with sample sizes 20,000-40,000, it is $.10. You can contact Dr. Robert Karasek to obtain use contract at Professor of Work Environment, University of MA Lowell, One University Ave., Kitson 200, Lowell, MA 01854-2867.

| Scoring | (1) Simple calculations.<br>(2) <u>Subscale score</u> = Average of items on the subscale (Range 1 – 4)<br>(3) Lower scores on Job Concern subscales indicate better job design features; Higher scores on Job Reward subscales indicate better job design features. |
|---|---|
| **Availability** | Free. |
| **Reliability** | Internal consistency ranges from .48 to .87 for the subscales. |
| Validity | Construct validity:<br>• Subscales were confirmed using confirmatory factor analysis.<br>• Logical variations in scores among social workers and LPNs.<br><br>Criterion-related validity:<br>• Hospital LPNs and nursing home LPNs report quite different job demands. Hospital LPNs reported more overload and less decision authority than those in nursing homes. |
| **Contact Information** | Not needed for use of the instrument. |

## *Survey Items*

Key to Which Questions Fall into Which Subscales

The 8 items are organized below into their respective 2 subscales (job concern and  job reward).

## Job Concern Factors

Instructions.   Think about your job right now and indicate on a scale of 1 (not at all) to 4 (extremely), to what extent, if at all, each of the following is of concern.

Poor Supervision
1.   Lack of support from your supervisor for what you need to do your job
2.   Your supervisor's lack of competence
3.   Your supervisor's lack of appreciation for your work
4.   Your supervisor's having unrealistic expectations for your work

## Job Reward Factors

Instructions: Think about your job right now and indicate on a scale of 1 (not at all) to 4 (extremely) to what extent, if at all, each of the following is a rewarding part of your job.

Supervisor Support
1.   Your immediate supervisor's respect for your abilities
2.   Your supervisors concern about the welfare of those under him/her
3.   Your supervisor's encouragement of your professional development
4.   Liking your immediate supervisor

# Workload

## Introduction

### *Definition of Workload*

Subjective workload is a measure of a worker's perception of the *amount* of work assigned to him/her, the *lead time* available to perform it, the extent to which the worker can *control* the pace of his/her work and the *stress* or *burden* felt by the worker. High amounts of work load pressure and stress lead to situations in which the worker can exercise little job discretion because the pace, scheduling and standards for work tasks are externally controlled. Studies among nurses have found that as perceived workload increases, job satisfaction decreases (e.g., Burke, 2003; Lyons et al., 2003).

### *Overview of Selected Measures of Workload*

Three measures of worker-perceived workload are reviewed here:

1. Quantitative Workload Scale from the Quality of Employment Survey
2. Role Overload Scale (from the Michigan Organizational Assessment Questionnaire or MOAQ)
3. Stress/Burden Scale from the California Homecare Workers Outcomes Survey (4 of 6 subscales)

### *Issues to Consider When Selecting Measures of Workload*

- None of the measures included were developed for nursing homes or assisted living environments. Although two were developed for home care, the issue of workload is quite different in nursing home versus home care settings.

# Alternatives for Measuring Workload

## *Quantitative Workload Scale from the Quality of Employment Survey*

| | |
|---|---|
| **Description** | The Quantitative Workload Scale was developed for the Department of Labor as one component of the Quality of Employment Survey (Quinn & Shepard, 1974). Variations have been observed in many kinds of jobs. |
| **Measure** | Workload |
| **Administration** | Survey Administration<br>(1) Paper and pencil<br>(2) 2 minutes<br>(3) 4 questions<br>(4) 5-point Likert scale (very often to rarely)<br><br>Readability<br>Flesch-Kincaid: 3.8 |
| **Scoring** | (1) Simple calculations.<br>(2) Score = Average of the 4 items (Range 1 – 5).<br>(3) Higher scores indicate higher workload. |
| **Availability** | Free. |
| **Reliability** | Internal consistency of scale is not reported. However, since items are highly correlated (.5 - .6), it may be suitable to use only one item. |
| **Validity** | Criterion validity:<br>• Scale is negatively related to job satisfaction (higher workload, lower satisfaction)<br>• Scale is distinct from role conflict and role clarity in factor analysis. |
| **Contact Information** | Not needed for use of this instrument. |

## *Survey Items*

These questions deal with different aspects of work. Please indicate how often these aspects appear in your job. The following response scale is used:

> 5-very often
> 4-fairly often
> 3-sometimes
> 2-occasionally
> 1-rarely

1. How often does your job require you to work very fast?
2. How often does your job require you to work very hard?
3. How often does your job leave you with little time to get things done?
4. How often is there a great deal to be done?

### Role Overload Scale (from the Michigan Organizational Assessment Questionnaire or MOAQ)

| | |
|---|---|
| **Description** | This scale is part of a widely used battery of assessment scales with reliabilities and validity well-established with industrial workers (Cammann et al., 1983). Feldman reports using the MOAQ with some adaptations with home care workers but does not report on this scale (1990). |
| **Measure** | Role Overload |
| **Administration** | <u>Survey Administration</u><br>(1) Paper and pencil<br>(2) 2 minutes<br>(3) 3 questions<br>(4) 7-point Likert scale (strongly disagree to strongly agree)<br><br><u>Readability</u><br>Flesch-Kincaid: 4.7 |
| **Scoring** | (1) Simple calculations.<br>(2) <u>Score</u> = Average of the 3 items after reverse scoring item #2 (Range 1–7).<br>(3) Higher scores indicate higher workload. |
| **Availability** | Free. |
| **Reliability** | Internal consistency of scale is .65 in original sample of 400 respondents with varied jobs. |
| **Validity** | Criterion validity: The scale is negatively related to overall job satisfaction (higher workload, lower satisfaction). |
| **Contact Information** | Not needed for use of this instrument. |

### Survey Items

A seven-point Likert scale is used as follows:

> 1--strongly disagree
> 2--disagree
> 3--slightly disagree
> 4--neither agree nor disagree
> 5--slightly agree
> 6--agree
> 7--strongly agree

1. I have too much work to do to do everything well.

2. The amount of work I am asked to do is fair. (reverse-scored)

3. I never seem to have enough time to get everything done.

### Stress/Burden Scale from the California Homecare Workers Outcomes Survey (4 of 6 subscales)[17]

| | |
|---|---|
| **Description** | Researchers at the University of California, Los Angeles developed the California Homecare Workers Outcomes Survey to compare outcomes (stress and satisfaction) between agency and client-directed workers and between family and non-family workers (Doty et al, 1998). In 1997, the survey was administered by telephone to 618 home care providers working in California's In-Home Supportive Services (IHSS) program, a well-established program in California that provides both agency and client-directed services to residents living in their own homes that are aged, blind or disabled and reimburses any provider selected by eligible clients, including family members.<br><br>Ten subscales were developed to measure these outcomes (6 subscales for stress/burden and 4 for satisfaction). Stress refers to how stressed home care workers feel when it comes to client safety, family issues, client behavioral problems, their relationship with the client, the client role in their work and their own emotional state. Satisfaction relates to how satisfied home care workers are with their job role, their self-assessment of performance, career benefits and independence and flexibility in their work schedule. |
| **Measure** | Stress/Burden Scale (4 of 6 subscales)<br>(1) Client safety concerns for provider<br>(2) Family issues<br>(3) Client behavioral problems<br>(4) Emotional state of provider |
| **Administration** | (1) Telephone interview<br>(2) 4–5 minutes<br>(3) 15 questions<br>(4) 5-point Likert scale (very often to never or strongly agree to strongly disagree, or all to most of the time)<br><br>Readability: Published data not available at this time. |
| **Scoring** | (1) Simple calculations.<br>(2) Score = Average of the 15 items (Range 1-5).<br>(3) Higher scores indicate the most stress. |
| **Availability** | Free. If using this measure, please cite the following:<br>Benjamin, A.E., and Matthias, R.E. (2004). Work Life Differences and Outcomes for Agency and Consumer-Directed Home Care Workers. *The Gerontologist,* 44(4): 479-488. |
| **Reliability** | Internal consistency ranges from .63 - .75 for subscales. |
| **Validity** | ▪ Published data on validity not available at this time. |
| **Contact Information** | Ruth Matthias, Ph.D<br>UCLA School of Public Policy and Social Research<br>3250 Public Policy Building<br>Los Angeles, CA 90095-1656<br>(310) 825-1951<br>matthias@ucla.edu |

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[17] The other two subscales of the *Stress/Burden Scale from the California Homecare Workers Outcomes Survey* can be found in the Worker-Client/Resident Relationships topic section of this Chapter.

### *Survey Items (exact wording below)*

Key to Which Questions Fall into Which Subscales

CS = Client Safety Concerns for the Provider subscale (4 items)
FI = Family Issues subscale (4 items)
CB = Client Behavioral Problems subscale (4 items)
E = Emotional State of Provider subscale (3 items)

**HOW OFTEN DO YOU HAVE THE FOLLOWING CONCERNS ABOUT YOUR CLIENT(S)?**

| | | | Never | | Sometimes | | Very Often |
|---|---|---|---|---|---|---|---|
| CS | 1. | I worry that my client might do something dangerous when I am not there, like not turning off the stove. | 1 | 2 | 3 | 4 | 5 |
| CS | 2. | I worry about my client's safety when I am not there. | 1 | 2 | 3 | 4 | 5 |
| CS | 3. | I worry that someone could easily take money or other things from my client when I am not there to protect him/her. | 1 | 2 | 3 | 4 | 5 |
| CS | 4. | I worry about how family members or others treat my client when I am not there. | 1 | 2 | 3 | 4 | 5 |

**THE NEXT FOUR STATEMENTS DEAL WITH BEHAVIORS THE CLIENT'S FAMILY MEMBERS MAY EXHIBIT.  HOW STRONGLY DO YOU AGREE WITH THESE STATEMENTS?**

| | | | Strongly Agree | | Uncertain | | Strongly Disagree |
|---|---|---|---|---|---|---|---|
| FI | 1. | Some family members do not trust me. | 1 | 2 | 3 | 4 | 5 |
| FI | 2. | Some family members of the client criticize the work that I do. | 1 | 2 | 3 | 4 | 5 |
| FI | 3. | The family expects me to do things that are not part of my job. | 1 | 2 | 3 | 4 | 5 |
| FI | 4. | The family appreciates what I do for the client. | 1 | 2 | 3 | 4 | 5 |

**HOW OFTEN HAS YOUR CLIENT(S) DONE THE FOLLOWING?**

|  |  |  | Never |  | Sometimes |  | Very Often |
|---|---|---|---|---|---|---|---|
| CB | 1. | How often has a client yelled at you in the past 6 months? | 1 | 2 | 3 | 4 | 5 |
| CB | 2. | How often has a client threatened you in the past 6 months? | 1 | 2 | 3 | 4 | 5 |
| CB | 3. | How often do you experience conflict between what client wants you to do and what you want to do? | 1 | 2 | 3 | 4 | 5 |
| CB | 4. | (Sum of "yes" responses for the following 5 items:<br>• Did your client have behavior problems?<br>• During the past six months, did your client become upset and yell at you?<br>• Did your client make unreasonable demands like wanting you to do tasks you shouldn't do?<br>• Have you injured yourself while working as a home care provider?<br>• Has your client ever made unwanted sexual advances? | 1 | 2 | 3 | 4 | 5 |

**THE NEXT THREE QUESTIONS ARE ABOUT HOW YOU FEEL AND HOW THINGS HAVE BEEN WITH YOU DURING THE PAST MONTH.**

|  |  |  | All |  | Some |  | None of the Time |
|---|---|---|---|---|---|---|---|
| E | 1. | How much of the time during the past month did you have a lot of energy? | 1 | 2 | 3 | 4 | 5 |
| E | 2. | How much of the time during the past month have you felt calm and peaceful? | 1 | 2 | 3 | 4 | 5 |
| E | 3. | How much of the time during the past month have you felt downhearted and blue? | 1 | 2 | 3 | 4 | 5 |

# Instruments Which Require New Data Collection -- Measures of the Organization

# Organizational Culture

## Introduction

### *Definition of Organizational Culture*

Culture is defined as the values, beliefs, and norms of an organization that shape its behavior. Data on culture should be collected from workers at all levels of the organization. Significant organizational change, such as the transition to a continuous quality improvement mode of operating, requires a culture that supports both the process of change and the substance of the intended change. Type of organizational culture has been found to be related to continuous quality improvement (CQI) implementation (Wakefield et al., 2001). There is increasing acknowledgement among providers and researchers alike about the importance of assessing capacity for change by tapping into organizational culture (Scott et al., 2003).

### *Overview of Selected Measures of Organizational Culture*

There are several approaches to measuring organizational culture. The measures included here were selected because they have been used in LTC organizations and are free to use:

1. LEAP Leadership Behaviors and Organizational Climate Survey (1 of 2 subscales, Organizational Climate)
2. LEAP Organizational Learning Readiness Survey
3. Nursing Home Adaptation of the Competing Values Framework (CVF) Organizational Culture Assessment

### *Issues to Consider When Selecting Measures of Organizational Culture*

- Some have argued that organizational culture (as distinct from but related to organizational climate) may not be adequately measured through attitudinal close-ended surveys (Bowers, 2001).

- If surveys are to be used to examine culture, instruments that tap multiple dimensions and ways of thinking about culture should be considered (to aim toward tapping some of the complexity of organizational culture).

# Alternatives for Measuring Organizational Culture

### *LEAP Leadership Behaviors and Organizational Climate Survey* (1 of 2 subscales, Organizational Climate)[18]

| | |
|---|---|
| **Description** | The LEAP Leadership Behaviors and Organizational Climate Survey is a 14-item questionnaire designed to measure nursing staff's perceptions about two specific areas: leadership effectiveness and the organizational climate. One subscale, the Leadership subscale, contains 10 items examining leadership behavior such as: informing, consulting/delegating, planning/organizing, problem solving, role clarifying, monitoring operations, motivating, rewarding, mentoring, and managing conflict. The second subscale, the Organizational Climate subscale, includes four items measuring the organizational climate including communication flow, human resources, motivational conditions, and decision-making practices. Questions were derived from the extensive work at The University of Michigan in the development of the Survey of Organizations questionnaire, an extensive survey of organizational conditions and practices utilized across many diverse industries (1970). The original tool was derived from a theoretical integrative model of leadership tested as a predictor of an organization's effectiveness (Bowers & Seashore, 1966). Organizational climate is conceptualized as a quality of the internal environment of an organization that is experienced by its members, influences their behavior, and reflects the values of the characteristics or attributes of the organization (Tagiuri & Litwin, 1968). |
| **Measure** | Subscales (1 of 2) <br> (1) Organizational climate |
| **Administration** | Survey Administration <br> (1) Paper and pencil <br> (2) 2-3 minutes <br> (3) 4 questions <br> (4) 5-point Likert scale (very little to always) <br><br> Readability <br> Flesch-Kincaid: 6.4 |
| **Scoring** | (1) Simple calculations. <br> (2) Subscale score = Sum of 4 items (Range of 4 - 20) <br> (3) Higher scores indicate better perceptions of organizational climate. |
| **Availability** | Free with permission from author. |
| **Reliability** | Internal consistency ranges from .54 to .62 for organizational climate items; .65 for the total organizational climate score. |
| **Validity** | Construct validity and discriminant validity of organizational climate items reported – four distinct "clusters" that relate to four concepts identified in the theoretical model of organizational climate. |
| **Contact Information** | Permission to use this instrument can be obtained by contacting: <br> Linda Hollinger-Smith, RN, PhD <br> Director of Research <br> Mather LifeWays Institute on Aging <br> 1603 Orrington Avenue <br> Suite 1800 <br> Evanston, IL 60201 <br> (847) 492-6810 <br> Lhollingersmith@matherlifeways.com |

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[18] The other subscale (Leadership) of the *LEAP Leadership Behaviors and Organizational Climate Survey* can be found in the Worker-Supervisor Relationships topic section of this Chapter.

### *Survey Items*

| | | Very Little | | Some | | Always |
|---|---|---|---|---|---|---|
| 1. | How often do you get information about what is going on in other parts of your facility? | 1 | 2 | 3 | 4 | 5 |
| 2. | How much do you enjoy doing your daily work activities? | 1 | 2 | 3 | 4 | 5 |
| 3. | How much does other staff you work with give their best effort? | 1 | 2 | 3 | 4 | 5 |
| 4. | How much does administration ask for your ideas when decisions are being made? | 1 | 2 | 3 | 4 | 5 |

### *LEAP Organizational Learning Readiness Survey*

| | |
|---|---|
| **Description** | The LEAP Organizational Learning Readiness Survey is a 20-item questionnaire designed to measure the management style and learning readiness of an organization.  The premise of a "learning organization" is one in which all employees and managers build their capacity to produce results as learning opportunities become personally rewarding and satisfying ongoing processes.  In this environment, staff from all levels strives to achieve at the highest levels.  This tool was built on the learning organization model proposed by Peter Senge who stated in his book, "The Fifth Discipline: The Art and Practice of the Learning Organization" that a learning organization is "…where people continually expand their capacity to create the results they truly desire, where new and expansive patterns of thinking are nurtured, where collective aspiration is set free, and where people are continually learning to see the whole picture" (1990).  The tool may be useful for organizations that wish to assess their current capacity and support for a culture of learning, targeting key areas to consider including management style and environmental factors that may impact the organization's capacity to develop as a learning organization.  Four styles of management (autocratic, custodial, supportive, and collegial) are assessed (three subscales per management style for a total of 12 subscales).  Four dimensions of learning readiness (mobility, visioning, empowering, and evaluating) are assessed (two subscales per dimension for a total of 8 subscales). |
| **Measure** | <u>Management Style subscales</u><br>(1)  Autocratic<br>(2)  Custodial<br>(3)  Supportive<br>(4)  Collegial subscale<br><br><u>Organization Readiness for Learning subscales</u><br>(1)  Mobility<br>(2)  Visioning<br>(3)  Empowering<br>(4)  Evaluating |
| **Administration** | <u>Survey Administration</u><br>(1)  Paper and pencil<br>(2)  Data on time unavailable<br>(3)  20 questions<br>(4)  5-point Likert scale (almost never almost always (except for two reversed scales)<br><br><u>Readability</u><br>Flesch-Kincaid: 11.0  (The survey is designed primarily for administration and managers.) |
| **Scoring** | (1)  Simple calculations.<br>(2)  <u>Subscale scores</u> = Sum of items on the subscale (Range 20–100).<br>(3)  Highest scored subscales determine the management style.  Higher scores<br>     on Organization Readiness for Learning scale indicate greater readiness<br>     for learning in each dimension. |
| **Availability** | Free with permission from author. |

| Reliability | Internal consistency for management styles: autocratic subscales - .798; custodial subscales - .623; supportive subscales - .709; collegial subscales - .820.<br><br>Internal consistency for learning readiness dimensions: mobility subscales - .642; visioning subscales- .841; empowering subscales - .644; evaluating subscales - .726. |
|---|---|
| Validity | Construct validity of the management scale and learning readiness scale supported.  For the management scale, three components were identified: autocratic style, custodial style, and supportive/collegial style.  The supportive/collegial styles of management best support organizational learning cultures.  For learning readiness, all factors loaded on a single dimension which was to be expected given all four dimensions are key to establish an organization's readiness to learn. |
| Contact Information | This instrument can be used with the author's permission and is available online at http://www.l-e-a-p.com. The author can be reached at:<br>Linda Hollinger-Smith, RN, PhD<br>Director of Research<br>Mather LifeWays Institute on Aging<br>1603 Orrington Avenue, Suite 1800<br>Evanston, IL 60201<br>(847) 492-6810<br>lhollingersmith@matherlifeways.com |

## *Survey Items*

Evaluation of the long-term care facility's learning readiness focuses on assessment of three key areas.  These are:  management style, readiness for learning, and capacity to implement and sustain LEAP.

We ask that the facility's administrator and director of nursing each complete a survey. Additionally, you may want others in the organization to complete a survey.  We can supply you with additional surveys.  Please respond to each item in the survey.  We will compile the results and provide your facility with a summary of our assessment.

|  | Almost never | Seldom | Occasionally | Frequently | Almost always |
|---|---|---|---|---|---|
| 1.  Some employees fear for their jobs. |  |  |  |  |  |
| 2.  Management includes employees in organizational decisions. |  |  |  |  |  |
| 3.  Management encourages employees to give their best effort. |  |  |  |  |  |
| 4.  Most employees feel secure working here and therefore do not leave. |  |  |  |  |  |
| 5.  Even though employees have good benefits, they tend to give minimal job performance. |  |  |  |  |  |
| 6.  Most employees seem content in their positions and are not interested in job promotion. |  |  |  |  |  |

| | Almost never | Seldom | Occasionally | Frequently | Almost always |
|---|---|---|---|---|---|
| 7. Management is respected by employees. | | | | | |
| 8. Employees feel a part of the organization. | | | | | |
| 9. Managers regularly recognize employees for their job performance. | | | | | |
| 10. There is a feeling of teamwork in this organization among managers and employees. | | | | | |
| 11. Employees are enthusiastic about improving job performance. | | | | | |
| 12. Employees are valued by this organization. | | | | | |
| 13. This organization encourages employees to learn and develop new skills. | | | | | |
| 14. Employees and managers in this organization have the capacity to apply new knowledge to future clinical situations. | | | | | |
| 15. The climate of our organization recognizes the importance of learning. | | | | | |
| 16. Upper management supports the vision of a "learning environment" that supports learning and development across all levels of staff and managers. | | | | | |
| 17. Our managers have the capacity to be mentors and coaches to facilitate learning among staff. | | | | | |
| 18. Our organization believes staff should feel empowered and participate in learning and development experiences. | | | | | |
| 19. Following trends in our organization's practice, management, and staff through benchmarking would be valuable and utilized for evaluation purposes. | | | | | |
| 20. Our organization supports creativity to improve care practices for our residents. | | | | | |

## Nursing Home Adaptation of the Competing Values Framework (CVF) Organizational Culture Assessment

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| **Description** | The Competing Values Framework (CVF) Organizational Assessment is a model of organizational culture as the expression of competing values (Quinn & Kimberly, 1984). The model has two axes reflecting different values: (1) flexibility and change versus stability and control; and, (2) internal emphasis on well-being and development of people in an organization versus external focus on well-being and development of the organization. Together, these two dimensions form four quadrants, each representing a set of organizational effectiveness indicators (human relations, growth, resource acquisition, stability/control, and productivity/efficiency).<br><br>Jill Scott-Cawiezell and colleagues from the Colorado Foundation for Medical Care (the QIO of Colorado) and MetaStar (the QIO of Wisconsin) have developed an adaptation of the CVF for use with nursing home staff at all levels (Scott-Cawiezell et al., in press). The four value quadrants within the context of the nursing home include:<br><br>**1. Group**. The extent to which the respondent perceives the organizational culture to be based on flexibility and internal focus. Dominance in a group culture demonstrates shared values, cohesiveness, and a sense of "we-ness."<br><br>**2. Developmental.** The extent to which the respondent perceives the organizational culture to be prepared to deal with changing times. Dominance in a developmental culture shows an organization's ability to adapt to new opportunities.<br><br>**3. Hierarchy.** The extent to which the respondent perceives the organizational culture to be based on internal focus and control. In a hierarchy, rules and centralized activity drive daily operations.<br><br>**4. Market.** The extent to which the respondent perceives the organizational culture to be driven by external focus and control ("results-oriented"). Dominance in a market structure focuses on profitability and competitiveness, often at the expense of the caregivers and residents in a nursing home.<br><br>It is not expected that any organization will be totally characterized as only one of the culture types mentioned above (e.g., group, market) when perceptions of multiple respondents are combined. However, some studies have found that the group or developmental culture type is more associated with likelihood to succeed in implementing CQI (Cameron & Quinn, 1999). |
| **Measure** | Subscales (e.g., Culture Types)<br>(1) Group<br>(2) Developmental<br>(3) Hierarchy<br>(4) Market |
| **Administration** | Survey Administration<br>(1) Paper and pencil<br>(2) 10 minutes<br>(3) 24 questions (4 in each of 6 sets)<br>(4) Distribution of 100 points for each of 6 sets of 4 categories. Respondents must know basic math.<br><br>Readability<br>Flesch-Kincaid: 10.6 (Although the tool actually tests at a 10.6 grade level, it has been used successfully with all levels of nursing home staff in over 140 nursing homes.) |

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| **Scoring** | (1) Multi-step calculations. |
| | (2) <u>Subscale (culture type) score</u> = Validate that each section adds up to 10 and then multiply each section total by 10 to maintain relative value on a 100 point scale. |
| |     • Add across sections so that the first question in each section is added, the second question in each section is added, etc. There will be a total of four different sets of six questions. |
| |     • Divide the sum of each set of six questions by six to get the relative value of each cultural type, the first question set provides the relative value score for group, the second question provides the relative value score for adhocracy or risk taking, the third question set provides the relative value score for hierarchy and the fourth question set provides the relative value score for market. |
| |     • Subscale and total scores were averaged across raters to obtain facility scores. |
| | (3) For each type, higher scores indicate the organization is perceived to reflect more characteristics of this type (than other types). |
| | (4) Note the difference between the overall scores, the score is 10 greater than the other values, there is a strong culture. Also note if the same patterns of strength exists across the six dimensions (set of questions), this suggests there is congruence within the different aspects of the organizational culture (Scott-Cawiezell et al., in press). |
| **Availability** | Free with permission from the author. |
| **Reliability** | Measures of internal consistency can not be computed because the CVF is a scale with relative rather than absolute values (Scott-Cawiezell et al., in press). |
| **Validity** | Construct validity: |
| | • The relationship between CVF scores and selected subscales (organizational harmony, connectedness, and clinical leadership subscales) from another tested tool (Shortell Organizational and Management Survey) were examined. There was a strong positive correlation between the group orientation of the CVF and the modified Shortell subscales of organizational harmony and connectedness and a strong inverse relationship between the hierarchy dominance and organizational harmony and connectedness. |
| **Contact Information** | For information on the instrument and its availability, contact: <br> Jill Scott-Cawiezell, PhD, RN <br> University of Missouri-Columbia <br> S235 Sinclair School of Nursing Building <br> (573) 882-024 <br> scottji@missouri.edu |

### *Survey Items*

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| Key to Which Questions Fall into Which Subscales <br><br> All "A" statements fall into the "Group" subscale (6 items) <br> All "B" statements fall into the "Developmental" subscale (6 items) <br> All "C" statements fall into the "Hierarchy" subscale (6 items) <br> All "D" statements fall into the "Market" subscale (6 items) |

Six sets of statements about your nursing home are listed below.  Each set has 4 statements that may describe where you work.  Rate each set of statements separately. For each set, first read all 4 statements.  Then decide how to split up 10 points across the 4 to show how much each of these, compared with the other 3 statements, describes your nursing home.

The following examples show how you might do this:

Example #1 | Example #2 | Example #3
A.  10 | A. 2 | A.  4
B.  0 | B. 3 | B.  2
C.  0 | C. 2 | C.  4
D.  0 | D. 3 | D.  0
Total = 10 | Total = 10 | Total = 10

**Set 1: My nursing home is:**

A.  A very personal place like belonging to a family.     _____

B.  A very business-like place with lots of risk-taking.     _____

C.  A very formal and structured place with lots of rules and policies.     _____

D.  A very competitive place with high productivity.     _____

        Add together A+B+C+D to make sure they equal 10: ___+___+___+___= 10

**Set 2: The nursing home administrator is:**

A.  Like a coach, a mentor, or a parent figure.     _____

B.  A risk-taker, always trying new ways of doing things.     _____

C.  A good organizer; an efficiency expert.     _____

D.  A hard-driver; very competitive and productive.     _____

        Add together A+B+C+D to make sure they equal 10: ___+___+___+___= 10

**Set 3: The management style at my nursing home is:**

A.  Team work and group decision making.     _____

B.  Individual freedom to do work in new ways.     _____

C.  Job security, seniority system, predictability.     _____

D.  Intense competition and getting the job done.     _____

        Add together A+B+C+D to make sure they equal 10: ___+___+___+___= 10

**Set 4: My nursing home is held together by:**

A.  Loyalty, trust and commitment     _____

B.  A focus on customer service     _____

C.  Formal procedures, rules and policies     _____

D.  Emphasizing productivity, achieving goals, getting the job done     _____

        Add together A+B+C+D to make sure they equal 10: ___+___+___+___= 10

**Set 5: The work climate in my nursing home:**

A.  Promotes trust, openness, and people development                    _____

B.  Emphasizes trying new things and meeting new challenges             _____

C.  Emphasizes tradition, stability, and efficiency                     _____

D.  Promotes competition, achievement of targets and objectives         _____

> Add together A+B+C+D to make sure they equal 10: ___+___+___+___= 10


**Set 6: My nursing home defines success as:**

A.  Team work and concern for people                                    _____

B.  Being a leader in providing the best care                           _____

C.  Being efficient and dependable in providing services                _____

D.  Being number one when compared to other nursing homes               _____

> Add together A+B+C+D to make sure they equal 10: ___+___+___+___= 10

# MEASURING LONG-TERM CARE WORK:
# A Guide to Selected Instruments to Examine Direct Care Worker Experiences and Outcome

# PDF Files Available for This Report

Cover, Table of Contents, Acknowledgments and Executive Summary
http://aspe.hhs.gov/daltcp/reports/dcwguide.pdf

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http://aspe.hhs.gov/daltcp/reports/dcwguide1.pdf

CHAPTER 2:  How This Guide Can Help Organizations Use Information to Address the Challenges of Job Retention and Performance Among DCWs
http://aspe.hhs.gov/daltcp/reports/dcwguide2.pdf

CHAPTER 3:  Ready to Use Instruments http://aspe.hhs.gov/daltcp/reports/dcwguide3.pdf

References http://aspe.hhs.gov/daltcp/reports/dcwguide4.pdf

APPENDIX A:  From Start to Finish -- Sample Scenarios of Using and/or Constructing Survey Instruments http://aspe.hhs.gov/daltcp/reports/dcwguideA.pdf

APPENDIX B:  Overview Charts of Chapter 3 Measures, By Topic
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APPENDIX C:  Data Collection Planning and Implementation Issues
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APPENDIX D:  Resources for Providers Considering Use of Employee Surveys
http://aspe.hhs.gov/daltcp/reports/dcwguideD.pdf

APPENDIX E:  Individual Measures from Chapter 3 that Use Survey Instruments to Collect Data, By Topic http://aspe.hhs.gov/daltcp/reports/dcwguideE.pdf

APPENDIX F:  Ready Made Multi-Topic Survey Instruments
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APPENDIX G:  Instruments Needing Work http://aspe.hhs.gov/daltcp/reports/dcwguideG.pdf

APPENDIX H:  Guide Reviewers http://aspe.hhs.gov/daltcp/reports/dcwguideH.pdf