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Factors Related to Job Stability of
Direct-Care Staff of Residential Facilities
for Mentally Retarded People

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Abstract

Direct-care staff turnover has been cited frequently as a major problem in the management of both public and non-public residential facilities. This article reports on a follow-up study of over 1000 direct-care staff one year after an initial interview. Staff members were employees of facilities in a national, stratified random sample of public and non-public facilities. Demographic, experiential, job satisfaction, geographical and institutional factors related to occupational status at the time of the follow-up are reported.

Factors Related to Job Stability of Direct-Care Staff of
Residential Facilities for Mentally Retarded People

Turnover of direct-care staff constitutes one of the most serious problems facing the residential services system (Bensberg & Barnett, 1966; Bruininks, Kudla, Wieck & Hauber, 1980). This problem affects not only the cost of care (George, 1980; Zaharia & Baumeister, 1978a), but even more importantly, the quality of care (Balla, Butterfield, & Ziegler, 1974; King, Raynes & Tizard, 1971; McCormick, Balla & Zigler, 1975). Rates of turnover of direct-care staff vary tremendously among residential facilities, with a weighted average for a national sample of public and non-public facilities of approximately 30% and 55%, respectively, (Lakin & Bruininks, 1981).

While similar turnover rates are common in other types of human service organizations (Levine, 1957; Tollen, 1960; Tuchi & Carr, 1971; Stryker-Gordon, 1979), it is in the area of long term residential care that high rates of staff turnover most seriously undermine the mission of providing the stable life styles and interpersonal relationships called for under the principle of "normalization" (Nirje, 1976). Still, despite the central importance of direct-care staff stability in carrying out the caregiving the habilitative mission of residential facilities, remarkably little research has focused on personnel turnover. This problem takes on added importance when one considers that over 70% of the cost of residential care goes to personnel expenditures and that the approximately 120,000 people providing direct care in residential facilities in the United States earned the bulk of over 2 billion dollars spent in 1978 for personnel (Lakin & Bruininks, 1981; Wieck & Bruininks, 1981).

A number of major reviews of literature of employee turnover have been published in the past several years, (e.g., Porter & Steers, 1973; Price, 1977). In addition, there have been several hundred reports of empirical research on various factors related to job turnover. While only a few of these studies involved direct-care staff in facilities providing residential services for mentally retarded persons, a number of consistent findings have been noted. These are summarized in Table 1. The purpose of this research was to study the extent to which factors associated with employee stability/instability in other work roles would be associated with the occupational stability of direct-care staff in residential facilities for mentally retarded people.

Insert Table 1 about here

METHOD

Subjects

The subjects of this study were direct-care staff of residential facilities for mentally retarded people who were interviewed as part of a national study of residential services. The interviewed staff members were employees of the 75 public and 161 non-public facilities comprising a stratified (by size and location) probability sample of residential facilities in the United States (Hauber, Bruininks, Sigford, Wieck, & Hill, 1981).

Interviews were conducted by interviewers from the Survey Research Center at the University of Michigan. Interviewers were instructed to interview the person nominated by a facility administrator as the direct-care staff person on-duty "responsible for the day-to-day care and/or supervision of (a particular randomly selected resident)". (Hauber,

Bruininks, Sigford, Wieck & Hill (1981) describe the sampling process in detail.) Staff selection was therefore indirect, and appears biased in two ways: 1) all staff selected were day employees, and 2) since it was necessary to interview staff members who knew well the residents in the resident sample, there was a strong tendency for administrators to nominate direct-care persons with longer lengths of service where more than one staff person qualified as "responsible for" the selected resident. Only 3% of the staff interviewed had four or fewer months of service.

In a one year follow-up questionnaire facility administrators were asked to re-confirm the direct-care status of each staff member originally interviewed. For this purpose they were supplied the same definition of direct-care staff they had been provided at the time of the original staff nomination:

Those staff persons who spend the major portion of their day in activities that involve the daily care and supervision of residents. Such duties typically include supervising the residents when they get up in the morning, getting them organized for meals, providing supervision for their activities, and insuring that residents are ready at appropriate times to leave the residential unit for day placement in school and other agencies.

This confirmation process led to the exclusion of 259 of the original 1,461 interviewees as not fully meeting the operational definition of direct-care staff, leaving a confirmed sample of 1,202 direct-care staff.

Staff Interviews

Face-to-face interviews with direct-care staff focused primarily on the characteristics of sampled residents and resident programs. However, each interview also included a series of questions about the staff member's individual characteristics, background and training experience. Staff opinions about their jobs and work settings were obtained through direct questioning and through the use of the Minnesota Satisfaction Questionnaire--Short Form (MSQ). The MSQ is a self-report job satisfaction scale with which employees rate 20 aspects of job satisfaction on a 1 to 5 (very dissatisfied to very satisfied) scale. The reliability and validity of this instrument are discussed in Weiss, Dawis, England & Lofquist (1967). The reported test-retest reliability coefficient for the Short Form is .90. The reported reading level for the questionnaire is fifth grade. Interviewees were assured that responses to any or all questions in the interview or job satisfaction scale were completely voluntary and anonymous.

One-Year Follow-up

A one-year follow-up on the job status of each interviewee was conducted to see which of the data collected in the interview were most predictive of which staff would remain in their jobs over a one-year period. The follow-up questionnaire consisted of a one-page form for each interviewed staff asking about his/her present job status. In the case of persons no longer employed, brief questions were asked about the circumstances of leaving and subsequent type of employment.

Data were obtained on 1,035 (86%) of the direct-care staff sample. Of these, 686 were direct-care staff of public facilities and 349 were direct-care staff of non-public facilities. Of the non-public facility

careproviders, 316 were paid employees and 33 were owner/operators of licensed facilities which had no staff other than the owner's nuclear family.

RESULTS

The one-year follow-up of direct-care staff found that 14% of the public facility sample members, 35% of the non-public facility sample members and 6% of owner/operators were no longer working in the sample facility. This report compares "leavers" to "stayers" regarding factors on which data were collected in the interviews. Employees leaving because of layoffs, position closings, health reasons, retirement or death have been excluded from the analyses in this study.

Demographic/Experiential Factors as Predictors of Job Status at One Year Follow-Up

Age. Age of employees was categorized as 16-23 years, 24-29 years, 30-45 years and 45 years and older. Age was found to be inversely related to job stability over a one year period for both public and non-public facility staff ($X^2 = 47.52$, $p < .0001$). Across the sample employees 23 years old and younger were three times as likely to leave their positions as were employees 45 years old or older (33% versus 11% leaving). It was also found that employees initially hired at an older age (30+) were more stable than those initially hired at younger ages ($X^2 = 10.41$, $p = .015$).

Length of Service. The length of service of employees was categorized as 2-4 months, 5-12 months, 13-24 months, 25-48 months and more than 48 months. Length of service was found directly related to employee stability ($X^2 = 127.69$, $p = .0001$). Employees who had been on the job for less than

a full year were about six times as likely to leave their positions as employees with four or more years of service (42% versus 8%). Sixty percent of the 30 employees with four or fewer months of employment at the time of interview left during the subsequent years.

Sex. Sex was not a factor in direct-care staff stability. Twenty percent of female and 23% of male employees left during the year.

Amount of Education. The amount of formal education of staff members was categorized as 11 or fewer years, 12 years, 13-15 years and 16 or more years. Formal education was found to have a strong inverse relationship with job stability among both public and non-public facilities ($\chi^2 = 42.54$, $p < .0001$). For example, employees with 11 or fewer years of education were found to be three times less likely to leave their direct-care position than were staff with 16 or more years of education (11% versus 39%).

Expectations. In this research an attempt was made to assess sample members' job expectations by asking each of them, "Why did you come to work here?" Three general categories of responses were coded: (1) "economic/employment reasons," i.e., responses which indicated that the decision was based on economic self-interest or convenience; (2) "professional advancement or professional fulfillment" responses which indicated that the decision was based on the chances to utilize special training or experience or advance within a profession; and (3) "special experiences concern or interest for handicapped people or children. Comparison of stayers and leavers showed that those who stated they had initially accepted employment for professional reasons were significantly more likely to leave within one year than those who had economic or special concern motivations (30%, 18%, and 19%, respectively ($\chi^2 = 12.16$, $p = .002$)).

Prior Special Training. In the initial interview members of the sample were asked to report any special training they had for their job prior to accepting employment. At the time of follow-up, across four levels of education studied (11 years or below, 12 years, 13-15 years, and 16 or more years), persons who reported no formal training were found to be more stable, although the differences decreased at each level. Across the entire sample, at the time of the one-year follow-up, 15% of those with no prior formal training versus 29% with formal training had left their positions ($p < .0001$).

Job Satisfaction Factors as Predictors of Job Status at One-Year Follow-Up

Minnesota Satisfaction Questionnaire (Weiss, Dawis, England & Lofquist, 1967) responses were assessed for their ability to predict which staff would quit during the one-year period following their original ratings of job satisfaction. Chi-square analyses were done separately for public and non-public facility direct-care staff on each item of the Minnesota Satisfaction Questionnaire. The items of the questionnaire are presented in Table 2 along with the probability levels for items with moderate to strong associations with staff separations.

Insert Table 2 about here

Extrinsic Job Satisfaction. The factor analytically-derived Extrinsic Job Satisfaction sub-scale of the Minnesota Satisfaction Questionnaire relates to direct rewards and conditions of the job (i.e., pay, chances to advance, quality of supervision, and personal recognition). Expressed satisfaction with the extrinsic job elements was associated with staff stability over a one year period ($p = .01$). While this level of association was less than for a number of the individual job satisfaction

items presented above, extrinsic job satisfaction was a far better predictor of staff stability/instability than was the total job satisfaction index.

Organizational Factors Associated with Staff Turnover

Owning/Operating One's Own Facility. Thirty-three persons in this sample owned and operated small facilities (12 or fewer residents) with no staff other than members of their own families. These persons were clearly the most stable of all employees in the sample. Of the 33, only two were no longer doing direct-care work at the end of the one year follow-up. One of these had died. The controllable stability rate of 97% (compared with 65% for other non-public staff) was by far the highest of any sub-category of direct-care staff in this study.

Location of Facility. The population of the community in which each staff member worked was categorized. The only size category found differentially related to staff stability was the largest category (250,000 or more residents). Stability rates were lower among direct-care staff working in urban locations (250,000 or more residents) for both public ($p = .028$) and non-public facilities ($p = .02$).

Working with More Severely Impaired. The level of independence of randomly selected residents cared for by each sample member was measured with the Behavioral Characteristics Assessment (Hill & Bruininks, 1980) at the time of the original interview. This assessment provided a numerical level of independence score for a randomly selected resident cared for by each employee. These scores were not related to staff separations in either public or non-public samples.

Characteristics of the Treatment Environment. At the time of the initial interview, direct-care staff were asked to use a short form of the Characteristics of the Treatment Environment Scale (Jackson, 1964, 1969, adapted by Silverstein, McLain, Hubbell & Brownlee, 1977) to rate the facility in which they worked on nine statements reflecting active rehabilitative programming, support of clients' independence, and respect for clients' rights and dignity. Ratings of the treatment environment were not found to be related to staff separations in either public or non-public facilities.

Discrimination of Stayers from Leavers

Several factors which were individually related to staff separations were identified. Discriminant function analyses were used to assess the combined power of these factors to differentiate between employees who would stay or leave their jobs within a one-year period. In these analyses direct-care staff separating because of lay-offs, position closings, health reasons, retirement, or death were excluded.

Four separate step-wise discriminant analyses were performed. One pair of analyses used the Minnesota Satisfaction Questionnaire job satisfaction ratings by staff job satisfaction ratings at the time of the original interview to discriminate among staff who stayed or left their jobs during the one-year period. Despite the several job satisfaction item ratings statistically associated with staff separations, the combined predictive power of these ratings accounted for only 4% of the variance among stayers versus leavers among staff of public facilities and 9% among staff of non-public facilities. Nevertheless, for both public and non-public

facility staff members Wilks Lambda (.959 and .907, respectively) was statistically significant ($p = .0032$ and $p = .0018$, respectively).

Another set of step-wise discriminant analyses assessed the ability to predict staff stability from employee and work setting characteristics. These characteristics included the "demographic/experiential" and "organizational" factors previously discussed. These employee and work setting variables were found to be better discriminators between stayers and leavers than were the job satisfaction ratings. Among the public facilities approximately 8% of the variance could be accounted for by 6 personal/institutional factors. Among non-public facilities 8 factors accounted for 22% of the variance. Among both public and non-public facility staff, the first three factors in the step-wise discriminant function were careperson age, years lived in county, and length of employment (Wilkes Lambda = .938 and .817, respectively, $p < .0001$).

DISCUSSION

The findings of this research were consistent with factors found related to employee turnover in the cross-occupational literature on employee turnover. Most of the variables found to be associated with the instability of direct-care staff had previously been identified as influential in the decisions to leave jobs by various other types of workers.

While much can be made of the unique characteristics of direct-care service in residential facilities for mentally retarded people, the considerations which will be most important in dealing with the problem of attrition among staff will probably be found in attempts to deal with human factors that all workers have in common.

For most people, work serves primarily to provide a means for sustenance, and the amount of pay determines both lifestyle and social status. Pay for direct-care staff positions is in general very low, and it is probably unreasonable to expect much stability in this type of work until wages paid direct-care staff allow for at least a modest lifestyle. Among public facilities in this 1978 sample, the average annual income of direct-care staff was \$8,340, and among non-public facilities it was \$7,259. Low levels of direct payment in non-public facilities are made even worse by generally poor fringe benefits for employees. Attempts to improve the quality of life in residential facilities by increasing the stability of resident-careprovider relationships without addressing the issue of adequate compensation will meet very limited success.

Nevertheless, there are some personal factors that were identified as related to employee stability which ought to be considered in planning and recruiting within facilities and among agencies with general responsibility for residential programming. Among these factors were 1) age (older staff were more stable, as were staff initially hired at older ages), 2) length of service (persons employed longer were more stable), 3) education (persons with less formal education were more stable), 4) prior specialized training (persons with no specialized training prior to accepting employment were more stable), 5) reason for accepting position (persons accepting employment for reasons other than professional advancement or fulfillment were more stable), 6) length of time lived in county, controlled for age (the more geographically stable employees were more occupationally stable), 7) owning and operating one's own facility (owner-operators were the most stable direct-care staff in the sample).

Each of these findings would be relatively easy to translate into personnel planning, recruiting, and training activities within the residential services system. Many of these findings, however, challenge the biases presently held within the services system. Young, well-educated, specialized professionals may be "ideal" employees in some respects, but certainly not in regard to the degree of inter-personal and social stability they bring to the lives of persons in residential facilities. Working for profit may not fit the notion of "mission" idealized by some persons associated with residential services, but clearly, people who own and operate their own facility provide more stable caregiving.

Thinking through present biases to locate the substance on which a more effective residential services system can be built in the future is clearly a challenge. Other challenges involve finding means to provide opportunities for advancement for direct-care employees that are not based exclusively on education and training, increase staff involvement in policy decisions, decentralize decision-making in larger facilities, and improve appreciation and feedback to direct-care staff. None of this will be easily accomplished, but the goal of attaining more stable direct-care staff is clearly worth considerable effort. Both the dollar cost and the human cost of the high turnover of careproviders in the residential services system dictate that changes are needed.

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Table 1
Relationships Between Selected Factors and
Employee Job Stability

Factor	Direction of Relationship*
Age of Employee	-
Length of Service	-
Sex of Employee	0
Years of Education	+
Amount of Pay	-
Opportunity for Advancement	-
Relationships with Co-workers	-
Positive Communication with Supervisors	-
Positive Communication with Co-workers	-
Employee Autonomy	-
Realistic Expectations for Job	-
Perceived Interest Level of Job	-
Independence of Clients	-
Perceived Status/Importance of Job	-
Satisfaction with Unit Performance	-
Other Employment Opportunities	+
Facility Size	+

* + refers to direct relationships, i.e., higher or positive amount of variable relate to higher turnover;
- refers to inverse relationship;
0 refers to no established relationship

Source: Lakin & Bruininks, 1981.

TABLE 2

Association of Minnesota Satisfaction Questionnaire Ratings to
Job Tenure Over a One-Year Follow-up

	ASSOCIATION WITH LEAVERS ^a			SUBSCALES	
	Public	Non-Public	All Staff	Intrinsic	Extrinsic
1. Being able to keep busy all the time	.088	ns ^b	ns	X	
2. The chance to work alone on the job	.008 ^c	ns	.001 ^c	X	
3. The chance to do different things from time to time	ns	ns	ns	X	
4. The chance to be "somebody" in the community	.02	ns	.01	X	
5. The way my supervisor handles his/her workers	ns	ns	ns		X
6. The competence of my supervisor in making decisions	ns	ns	ns		X
7. Being able to do things that don't go against my conscience	ns	ns	ns	X	
8. The way my job provides for steady employment	ns	ns	ns	X	
9. The chance to things for other people	ns	ns	ns	X	
10. The chance to supervise others	ns	ns	ns	X	
11. The chance to do something that makes use of my abilities	ns	ns	ns	X	
12. The way facility's policies are put into practice	ns	.005	.08		X
13. My pay for the amount of work I do	.05	.017	.0005		X
14. The chance for advancement on this job	.10	.005	.0002		X

TABLE 2 (Continued)

Association of Minnesota Satisfaction Questionnaire Ratings to
Job Tenure Over a One-Year Follow-up

	ASSOCIATION WITH LEAVERS ^a			SUBSCALES	
	Public	Non-Public	All Staff	Intrinsic	Extrinsic
15. The freedom to use my own judgment	.016	ns	ns	X	
16. The chance to try my own methods in doing the job	.077	ns	ns	X	
17. The working conditions	.019	ns	.04		
18. The way my coworkers get along with each other	.003	ns	.003		
19. The praise I get for doing a good job	.008	ns	ns		X
20. The feeling of accomplishment I get from the job	ns	.047	ns	X	
Total Intrinsic Job Satisfaction Scale ^d	ns	.033	ns		
Total Extrinsic Job Satisfaction Scale ^d	.0007	.056	.01		
Total General Job Satisfaction Scale ^d	.025	ns	.09		

^aSignificance levels are reported where $p \leq .10$

^b $ns = p > .10$

^cLess satisfaction with chance to work alone was associated with staying

^dProbabilities obtained by one-way analysis of variance