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Developing recommendations to improve the recruitment and retention of staff who support people with an intellectual disability

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Keywords: Intellectual disability; recruitment; retention; recommendations; social care staff

Key points

- A large number of nurses work directly, or indirectly with colleagues, in social care settings
- Recruitment and retention of staff in social care settings is difficult and staff shortages can negatively impact quality of care
- We review the literature about the factors that are thought to influence recruitment and retention of social care staff, in relation to supporting people with an intellectual disability and/or autism
- We provide a summary of the areas to consider and examples of strategies to improve recruitment and retention, based on the existing evidence base.

Abstract

Research aims: Nurses are increasingly becoming involved in the support of people with an intellectual disability in social care settings. Recent policies identify the need for an increased social care workforce, but many organisations have difficulty recruiting and retaining staff. We conducted a review which aimed to identify evidence-based examples of areas that could be targeted to improve the recruitment and retention of staff who support people with an intellectual disability.

Methods: We reviewed published literature, grey literature and relevant websites. Existing evidence about factors which were thought to influence recruitment and retention was collated and summarised and used to inform the development of target areas and example strategies.

Findings: Many factors influence recruitment and retention directly and indirectly. These include individual factors such as gender and age, factors which contribute to staff stress and burnout and organisational factors such supervision, training, and organisational culture.

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Conclusion: Factors which influence recruitment and retention have been identified by researchers, however, few have been evaluated in respect of whether they ultimately improve recruitment and retention. The paper highlights a number of areas which could be addressed and subsequently evaluated. in order to have an evidence-based approach to increasing the workforce who provide care for people with an intellectual disability.

Keywords: intellectual disability; recruitment; retention; staff

Background

Both health and social care staff play a key role in the provision of good quality support to people with an intellectual disability and/or autism. Health professionals work in collaboration with, and often rely on their colleagues in social care to provide information that helps them to develop and deliver health interventions, such as behaviour support plans. In addition, there are an increasing number of nurses working within, employed by, or managing social care organisations (Skills for Care, 2018), with an estimated 49,500 nurses working across all areas of adult social care in 2016 (Skills for Care, 2016)

The need for a robust social care infrastructure was highlighted following the abuse of people with an intellectual disability by a number of staff at Winterbourne View. The resultant 'Transforming Care' strategy (NHS England 2014) identified the need to ensure that people with an intellectual disability and/or autism were not supported inappropriately in institutions. In order to meet the goal of offering alternative community-based provision, there was a need to develop and expand on the existing social care workforce. In 2017, Health Education England highlighted the expectation that social care organisations supporting people with an intellectual disability would employ an additional 7500 staff.

It was, however, recognised in a number of policy and strategy documents that the demand for social care is growing faster than the social care workforce that provides it (e.g., Dromey & Hochlaf 2018; Health Education England 2017; National Audit Office 2018). Many social care organisations experience difficulties recruiting and retaining staff and nurses in particular, have a high rate of turn-over, with 2017/18 figures reporting a 29% turnover rate in social care settings (Skills for Care, 2018).

As well as being detrimental to staff members, high staff burnout and turnover impacts negatively on the quality of care for those being supported and has significant financial and organisational costs for the employers (see Stevens et al 2019 for an overview). Despite this, until recently there was no resource in the UK that brought together the existing evidence base as to which factors influence the recruitment and retention of staff and how these might be addressed. This paper provides an overview of the results of a project, commissioned by Health Education England, to identify those areas that might best be targeted to help improve the recruitment and retention of staff who support people with an intellectual disability and/or autism in community services in the UK (McKenzie et al 2017).

The identified areas were based on a scoping review as outlined in the method section. This highlighted a range of factors that influenced recruitment and retention including individual factors, such as gender and age, and organisational factors, such as work demands, rewards and supervision, and approaches to behaviours that challenge. These factors frequently interact, overlap, and influence each other, as well as being shaped by wider system issues, such as general employment conditions, policy, and legal frameworks. For example, staff stress, which is associated with staff turnover, is influenced by individual factors, such as coping style (e.g. Griffith et al 2014), and organisational factors, such as quality of supervision and training provided (e.g. Hewitt & Larson 2007). Some factors, gender for example, are fixed and must just be taken into account in targeted recruitment or retention strategies (e.g. McConkey et al 2007), while others, such as staff coping styles, knowledge, or skills, are open to intervention.

A summary of the main factors found in the literature to influence recruitment and retention and areas to target are presented below. The full supporting evidence base is provided in McKenzie et al (2017).

Method

In order to ensure that the areas identified were evidence-based as much as possible, they were developed following a review, evaluation, and summary of the existing evidence base as outlined in academic, peer reviewed journals, grey literature and key websites. Literature searches for peer reviewed literature were carried out in Proquest, Web of Science, and Scopus academic databases (see Table 1 for search terms). For a paper to be included for consideration, one keyword from lists A, B, and C had to be included within either the title, abstract, author keywords, or keywords plus (keywords assigned to articles post publication). No date restriction was imposed. Articles were included if they were in a peer reviewed journal and were in the English language.

Insert Table 1 about here

The search returned 1070 articles. Once duplicates were removed, 907 articles remained which were then searched by title in order to determine relevance. Clearly irrelevant articles were removed at this stage. A 2007 literature review by Skirrow and Hatton on staff burnout was found, allowing for any article specifically on burnout published before that date to be excluded. The process was repeated based on reading the abstracts of the remaining articles. Finally, 71 articles were retained which were reviewed in detail to provide an evidence base for the areas identified (see McKenzie et al 2017, for the full details).

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The process outlined above was repeated for grey literature. In addition, a search was made using Google and Google Scholar. Information was also gathered from websites for relevant organisations, such as Skills for Care, Skills for Health, Health Education England, NHS England, Department of Health, National Institute for Health and Care Excellence (NICE) and Scottish Intercollegiate Guidelines Network. The website searches aimed to identify examples of good practice, innovations, or case studies in relation to the recruitment, development, and retention of staff.

Results

The results of the review were organised into broad categories of factors that had been found to influence recruitment and retention directly or indirectly: individual factors, such as age and gender; factors that influenced staff stress and burnout; and wider organisational factors

Individual factors

Gender

There are some differences between males and females that have been found to impact on recruitment and retention, although the research is limited and relatively old. Overall, care workers are more likely to be female (McConkey et al 2007) and some research suggests that female support workers have a higher rate of burnout than males, although this is not found consistently (Kozak et al 2013). Males employed in support work settings are more likely to be in full-time employment, to come from non-care backgrounds, and to be main wage earners. Males are also more likely to be in managerial posts (McConkey et al 2007). Some of the reasons that men apply for support work are: they want a career in caring/looking after people; they have had previous contact with people with an intellectual

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disability; they have had family members working in the caring profession; or they want a career change. Many men have limited awareness of support work as an employment option, although there would appear to be particular age groups that are more open to the idea (Skills for Care 2010).

Age

Research suggests that different generations may differ in respect of their expectations and experiences of work. These differences need to be considered when recruiting and retaining staff (Warren & Jones 2015). Young people generally do not aspire to become social care workers or work in social care settings and there is a lack of a clear career structure for them (Hewitt & Larson 2007). Early research suggests that younger staff are significantly more likely to intend to leave their job (e.g. Hall & Hall 2002) and to experience aggression from those they support, which may, in turn, reinforce the likelihood of staff leaving (Alink et al 2014). Some research, however, suggests that older staff have a higher rate of burnout (Kozak et al 2013). Project work with men (Skills for Care, 2010) suggests that age, as well as gender, should be considered in recruitment strategies, with men aged 50 and above being more likely to consider care work. By contrast, nurses working in care settings tend to be female and aged over 40 (Skills for Care, 2016).

Relationship between stress and staff burnout and turn-over

Many different factors have been found to be associated with high job strain/stress and burnout. The most common include: the high use of wishful thinking, as a coping strategy (e.g. Griffith et al 2014), as contrasted with practical coping strategies; a lack of staff support (e.g. Howard et al 2009;) and the nature of support received (Gray-Stanley & Muramatsu

2011); high work demands coupled with low control over your job (Lee et al 2009) and decision-making within work (Gray-Stanley & Muramatsu, 2011); poor work-life balance and short term contracts/job insecurity (e.g. Kozak et al 2013). Similar reasons for staff turnover have been found for nurses working in social care settings, including those supporting people with an intellectual disability. In particular, the respondents identified low morale and high levels of work related pressure, issues with training and equipment, the ethos and value base of the organisation, perceived high levels of bureaucracy and difficulties in working relationships with external professionals, as well as the stresses that resulted from difficulties with recruiting and retaining staff within their services (Royal College of Nursing, 2012).

Other commonly noted sources of stress relate to working conditions, such as workload, lack of staffing, limited flexibility of work, no time away from those being supported, high noise levels, experiencing behaviours that challenge, the inability to make a difference (e.g. Kowalski et al 2010; Mascha 2007), inter-personal conflict, lack of teamwork and communication between team members (e.g. Denny et al 2011) and the perceived reciprocity of relationships between the staff, the organisation, their colleagues, and those being supported (Devereux et al 2009; Rose et al 2010).

Perceived levels of effort compared to reward received is also important, with dissatisfaction and stress occurring when the two factors are seen as being out of balance (Disley et al 2009; Lee et al 2009). Psychological inflexibility of staff can worsen the effects of psychological distress (Kurz et al 2014). Positive, direct contact with those being supported and prosocial motivation can help moderate work-related stress (Hickey 2014).

Behaviours that challenge, stress and burnout

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Links have been found between experiencing behaviours that challenge, particularly aggression, and burnout (e.g. Hensel et al 2012) and perceived stress (Kozak et al 2013). Other researchers, however, have found no links with burnout (see Rose 2011 for an overview). Positive work motivation (Hensel et al 2015) and personality factors, such as neuroticism (Chung & Harding 2009), have been found to be moderators of the relationship between exposure to aggression and aspects of burnout. While supporting people with particular issues, such as behaviours that challenge, can be more emotionally draining (Mills & Rose 2011), it can also be a rewarding aspect of the job (Søndenaa et al 2015). Rose and colleagues (2013) found that fear of assault completely explained the relationship between supporting people with challenging behaviour and emotional exhaustion. Smyth et al (2015) found that the frequency and severity of aggressive/destructive behaviour were related to stress of support staff, while severity and destructive aspects of the behaviour were related to burnout.

Organisational and wider system factors

Organisations obviously exist within wider systems over which they may have limited control. For example, staff are more likely to intend to leave their job if market conditions are more favourable to them easily securing a different job. While pay is consistently identified as an important factor in both recruitment and retention (e.g. Kazemi et al 2015), it is only one of many other factors; direct contact with those being supported is an important benefit of the work (e.g. Hickey 2014). An additional important factor was the perceived lack of a career pathway within support work. Early research suggests that leavers are more likely to be better educated, suggesting that they may be seeking career progression in different employment fields (Hall & Hall 2002).

Summary of the areas to consider for increasing recruitment and retention

Table 2 provides a summary of areas to consider for increasing the recruitment and retention of staff, with examples, based on the review of peer reviewed publications, grey literature and relevant websites (McKenzie et al 2017).

Insert table 2 about here

Discussion

A large number of nurses work within the social care sector and many of their NHS colleagues rely on input and collaboration from social care staff in order to provide health care to people with an intellectual disability. Staff shortages in the social care sector and high levels of absenteeism and burn out can have a significant negative impact on the communication, continuity, and coordination of care between health and social care staff that helps ensure a high quality of support for people with an intellectual disability. A series of policy and strategy documents have highlighted the need for an increased social care workforce (Dromey & Hochlaf 2018; Health Education England 2017; National Audit Office 2018). Recruiting and retaining social care staff remains, however, a significant challenge for many organisations. This paper reports on the areas identified and evidence-based examples of strategies aimed at improving the recruitment and retention of social care staff who provide support to people with an intellectual disability and/or autism.

The results of the review illustrate that a great deal is known about the factors that influence workforce recruitment and turnover and that many of these factors are open to intervention by the employing organisations. There are, however, few robust evaluations of the impact of initiatives to improve recruitment and retention, with most of the evidence in

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this area being anecdotal, involving small sample sizes, or evaluating outcomes that are thought to be associated with recruitment and retention, such as stress, rather than the direct impact on staff employment and turnover. This highlights a need for future research that addresses this gap. This is particularly urgent if the goals outlined in policy documents for an increased workforce in order to provide good quality support for people in community settings are to be met (Health Education England 2017; NHS England 2014).

The research did have some limitations. The literature and website reviews were conducted with the aim of identifying examples of areas that could be useful to address in order to improve staff recruitment and retention and there was no evaluation of the quality of the paper or source that informed this. This was a deliberate strategy, in order to be as inclusive as possible in identifying potential factors that influenced recruitment and retention. It is likely, however, that some factors are more influential than others and that there will be differences in the extent to which individuals and organisations consider specific factors to be relevant to their own circumstances and employment context. In addition, while many of the factors that have been identified as influencing recruitment and retention in the general social care workforce overlap by those identified by nurses working in social care settings, there is a need for further research to look specifically at nurses working in support organisations for people with an intellectual disability. Future research, which evaluates whether there is agreement about those factors which are most important, will inform organisations about the interventions that are likely to be most effective. In addition, the implementation of some strategies will be constrained by factors out with the control of individual organisations, such the wider economic, funding and employment context in the UK.

Implications for Practice

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These findings have implications for nurses working in social care settings or in collaboration with social care staff, in delivering health care to people with an intellectual disability.

Introducing and evaluating evidence based strategies to improve recruitment and retention will be of benefit to organisations, staff and those people with an intellectual disability who are receiving support.

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Table 1: Keywords included in the search

A: "intellectual disability", "learning disability", "autis*", "autis* spectrum disorder"
B: "staff*", "support worker", "workers", "care staff", "workforce", "employ*"
C: "recruitment", "recruiting", "retention", "retaining", "burnout", "job strain", "job", "work", "satisfaction", "promotion", "absenteeism", "sickness", "job stress", "organisational commitment", "hiring", "attracting", "experience", "turnover", "support"

Table 2: Summary of areas to consider for increasing the recruitment and retention of staff, with examples, based on the literature review

Areas to consider	Examples based on the literature review
Recruiting staff	
Creating a diverse workforce	<ul style="list-style-type: none"> • Develop a range of tailored recruitment strategies to target groups with different characteristics and from different backgrounds. • Promote care work in a range of settings, e.g., job centres, sporting events. • Profile a range of staff and role models in promotional materials. • Tackle potential bias to recruiting certain groups, e.g., by providing unconscious bias training. • Emphasise the intrinsic rewards of caring.
Promoting employment opportunities	<ul style="list-style-type: none"> • Public awareness events. • Creating links with education, employment services and other relevant organisations. • Word of mouth via existing staff.
Reducing potential stigma and barriers to recruitment	<ul style="list-style-type: none"> • Provide opportunities for direct contact with, and personal experience of, people with an intellectual disability e.g. through workplace visits. • Ensure that potential employees have realistic expectations and an awareness of the realities of the role. • Include people with an intellectual disability and current staff as part of the selection and recruitment process.
Pay and conditions	<ul style="list-style-type: none"> • Provide flexible working practices and conditions, that can be adapted to the changing needs of staff. • Ensure pay and benefits are consistent with that offered for equivalent employment.
Retaining staff	
Pay and conditions	<ul style="list-style-type: none"> • Provide staff with fair and open promotion and development opportunities. • Ensure career progression does not necessarily mean less contact time with those being supported.
Stress Management	
Training	<ul style="list-style-type: none"> • Provide sufficient and relevant training opportunities and support.

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	<ul style="list-style-type: none"> • Ensure training is good quality, provides transferable skills, and, where appropriate, is competency-based. • Ensure management are properly supported and supervised so that they in turn can support junior members of staff.
Role	<ul style="list-style-type: none"> • Provide staff with clarity about their role, increased control over their job, e.g., involvement in care planning, and reduced bureaucratic processes.
Supervision and support	<ul style="list-style-type: none"> • Offer support from a range of sources, e.g., supervisors, peers, team meetings, service users, and consider providing tailored stress management programmes. • Facilitate values-based work practices and prosocial motivation, e.g., by providing opportunities for values-based reflections on work and training, such as positive behavioural support. • Highlight the benefits of support work to staff as well as the positive impact the staff make on those they support and the people they work alongside. • Facilitate staff mentoring and networking to promote peer support and the development of practical coping strategies. • Ensure there is a sociable environment within the organisation and open and honest dialogue between staff and management. • Ensure staff have sufficient and good quality support from supervisors who are well-trained and provide clear feedback.
Ethos and culture	<ul style="list-style-type: none"> • Have a clear organisational mission statement that is consistent with organisational ethos, values, and practice and the values of the staff.