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Workplace Predictors of Perceived Quality of Care in Nursing homes

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Nursing home quality of care (QOC) is a matter of public concern and public policy. Higher nurse-to-patient ratios have been shown to decrease rates of adverse outcomes. Positive nurse-doctor relationships also have a positive effect, which might translate to other clinical staff, such as nursing aides, who perform the majority of direct care tasks in nursing homes. This cross-sectional study examined whether workplace factors in nursing homes were associated with QOC as evaluated by staff members themselves. Surveys were distributed to personnel in 24 nursing home facilities in the Northeast U.S. A total of 1463 respondents provided ratings of QOC and 14 work environment features. Analyses included correlations, Cronbach's alpha, and principal components analyses (with rotation) to examine psychometric properties of predictor scales and reduce multicollinearity. A multivariable model of QOC was built using all potential workplace factors to determine which factors contribute to self-reported QOC, with removal of those covariates that were not significant ($p > 0.05$), decreased the model fit, or showed a confounding effect ($\geq 15\%$ change in other coefficients). The final model showed that perceived commitment and obstacles to safe-lifting programs, respect and support between coworkers and supervisors, adequacy of staffing, physical exertion, safety climate, and psychological demand, were significant contributors to staff-assessed QOC. Nursing homes should consider cultivating these work environment characteristics for the benefit of both direct-care staff and the residents for whom they provide care.

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