THE DETERMINANTS OF DIRECT SERVICE WORKER TURNOVER IN OHIO

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Introduction

Turnover among direct service workers (DSWs) in the long-term direct care (LTDC) field is quite high. It has been estimated that the cost to an employer of some DSWs leaving and hiring and training a replacement can be 25% of the annual salary of the position.\(^1\) The quality of care might also decline with less experienced replacement workers and can also result in an increased workload for the co-workers of departed DSWs. To the extent that tax dollars are used to fund the training of these workers, these monies are not achieving their intended goals. The aim of this study is to examine the causes of turnover of DSWs in long-term direct care for employees of nursing homes (NH), home health agencies (HH), mental health service organizations (MH) and development disability providers (DD).

Sample

The initial goal was to collect data from approximately 100 providers across the four human service industries, i.e., 25 of each industry type, or five from each of the five regions in Ohio. Two parallel provider questionnaires were developed: 1) NH, HH and DD providers; and 2) MH providers. Developing a separate questionnaire for MH was considered necessary because DSWs were defined differently in MH, as Community Psychiatric Supportive Treatment or CPST workers, compared to NH, HH, and DD providers. The providers who had responded to the initial survey were contacted again in May and June of 2012. They were asked to distribute an employee survey to their DSWs.

Procedures

A cover letter was mailed to the 137 provider organizations that had responded to the initial survey asking them to distribute the DSW survey to their employees. Follow-up letters and emails were sent requesting them to distribute the surveys. The DSW surveys asked the employees to identify themselves and a ten dollar check was mailed to participants that returned the survey with an identifiable name and address. Six months later a short survey was mailed to the providers. They were asked whether each of the DSWs identified as one of their employers who had returned a survey were: 1) still employed with them as a DSW worker; 2) still employed with them but in a different job or 3) had turned over, i.e. left employment with the provider.

Data Analysis

Of the 235 usable responding DSWs, 28 or 11.9% turned over. Although these rates are substantially lower than those in other studies that generally used annual turnover, it should be noted that the time period between the survey being returned by the DSW worker and the follow-up with their employer on whether they had subsequently left their employment was only six months. Another reason for the lower turnover rate is that it is possible the providers distributed the surveys to the workers they felt were least likely to leave. Further, the time period of the survey, 2012, was one of high unemployment which might have limited turnover.

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Survey Participants

There were few HH providers in our study. Their smaller scale of operations could have resulted in having fewer people available to fill out our surveys and hence not taking the time to complete and return them. The lack of HH providers also resulted in few HH DSWs in the sample.

Table 1. Providers and DSWs Participating in the Survey by Provider Type

<table>
<thead>
<tr>
<th>Providers in the survey with DSWs in the sample</th>
<th>NH</th>
<th>HH</th>
<th>MH</th>
<th>DD</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appalachia DSWs</td>
<td>21</td>
<td>0</td>
<td>31</td>
<td>37</td>
<td>89</td>
</tr>
<tr>
<td>Rural DSWs</td>
<td>24</td>
<td>0</td>
<td>30</td>
<td>12</td>
<td>66</td>
</tr>
<tr>
<td>Metropolitan DSWs</td>
<td>10</td>
<td>0</td>
<td>29</td>
<td>1</td>
<td>40</td>
</tr>
<tr>
<td>Small City DSWs</td>
<td>2</td>
<td>6</td>
<td>1</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>Suburban DSWs</td>
<td>0</td>
<td>10</td>
<td>17</td>
<td>4</td>
<td>31</td>
</tr>
<tr>
<td>Total DSWs</td>
<td>57</td>
<td>16</td>
<td>108</td>
<td>54</td>
<td>235</td>
</tr>
</tbody>
</table>

MH DSW workers had the lowest rate of certification/licensure with less than half being certified or licensed. Approximately half of the MH DSWs who were either certified or licensed were Licensed Social Workers (LSWs). Over 90% of NH DSWs were State Tested Nursing Assistants (STNAs), as were half of those in HH. Half of DD DSWs held some type of certification or licensure.

Although there was not a large difference in the length of employment with the current employer across the provider types, there was a rather large gap in the hourly wage rate of DSWs. MH DSWs ($14.86) made approximately fifty percent more than HH ($10.25) and DD ($9.77) DSWs and in excess of three dollars an hour more than NH DSWs. These results are consistent with higher level of post-secondary education by MH DSWs described earlier. MH and NH DSWs tend to be full-time while a substantial minority works less than full-time for the other two provider types.

MH DSWs are substantially more likely to receive sick leave, paid holidays and traditional pensions as well as both individual and family health insurance. They were also more likely to receive a 403b/401k defined contribution pension compared to other DSWs. On average the MH DSWs receive more non-pay benefits although NH and HH receive more pay-related benefits such as extra pay for working holidays and overtime. A follow-up question revealed that 23.0% of all DSWs did not use their employer provided health insurance and did not have health insurance from another source. It is possible that in the case of partially paid health insurance, as was the case with over sixty percent of the DSWs, the person might not have the resources to pay the rest of the premium and therefore have no insurance. The overall picture that emerges is that a typical DSW is a woman in her forties with an average hourly wage rate of just under $12.50 per hour with a quarter lacking health insurance. One in four had also had a child six years or younger at home. Further, union membership is minimal for DSWs. Although 14% of NH DSWs belonged to a labor union, the share was two percent or less for the other groups.

Descriptive Statistics

The DSWs in our sample are overwhelmingly female. Almost five of six DSWs reported Caucasian for at least one of the racial groups they self-identified as. Three of five were married and living with their spouse for each provider group except DD where the rate was a bit under half. The two oldest provider type DSWs, HH and DD also had the lowest share of children ages six or under at home. The DD group also had fewer children ages six to 18. There are marked differences in education levels. MH DSWs are the most educated group by far with over 82% reporting at least a bachelor’s degree. (Note: Full results including detailed tables available at http://grc.osu.edu/odsw/research/dswturnover/index.cfm)
In terms of training, orientation, mentoring and continuing education/in services were offered to over 70% of the DSWs by three of the four provider types, the lone exception was mentoring for DD DSWs. It is of interest to note that DSWs generally found the training quite helpful. A low offering of mentorship coupled with a high helpfulness score for the mentoring has implications for practice in that administrators could offer mentorship as a means of enhancing the training of DSWs. The other two types of training, employer paid training and paid time to attend trainings, were used to a lesser extent.

Overall, DSWs responded with mild agreement to the statement that job expectations are well communicated by supervisors and that supervisors provide timely feedback. DSWs also were somewhat of the opinion that pay was not fair for the effort. DD DSWs reported a low level of agreement with the statement of little job repetition as did HH DSWs for the pay being fair for the effort. DD DSWs had a reported a high level of being treated with respect.

The most cited potential reason for leaving for all types of DSWs was inadequate pay (Table 2). DSWs from three of the provider types, except for MH, cited going back to school to further their education as the second most frequently reason. As the MH DSWs were the most educated, it is not surprising that they did not cite going back to school as their second most frequently reason for leaving their job.

In Table 3 the first two questions use a value of 1 for “Quite likely”, 2 for “Somewhat likely” and 3 for “Not at all likely.” Lower scores mean a higher degree of likelihood for finding another job. In general, DSWs find it likely they will be able find another DSW job as well as a better one. DSWs in NHs view both of these as being most likely compared to the other provider types and MH DSWs as the least likely. Interestingly enough, these were the two provider types most likely to respond that they had in fact considered looking for a job other than a DSW.

### Table 2. Cited Potential Reasons for Leaving by Provider

<table>
<thead>
<tr>
<th>Reason</th>
<th>NH</th>
<th>HH</th>
<th>MH</th>
<th>DD</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Cited Reason</td>
<td>Inadequate Pay 54.4 %</td>
<td>Inadequate Pay 62.5 %</td>
<td>Inadequate Pay 57.4 %</td>
<td>Inadequate Pay 48.1 %</td>
<td>Inadequate Pay 54.9 %</td>
</tr>
<tr>
<td>2nd Most Cited Reason</td>
<td>Back to School 43.9 %</td>
<td>Back to School 56.3 %</td>
<td>Work Emotionally Exhausting 38.9 %</td>
<td>Back to School 35.2 %</td>
<td>Back to School 33.6 %</td>
</tr>
<tr>
<td>3rd Most Cited Reason</td>
<td>Personal Health 35.1 %</td>
<td>No/Few Opp. For Advance 43.8 %</td>
<td>No/Few Opp. For Advance 35.2 %</td>
<td>Inadequate Benefits 29.6 %</td>
<td>No/Few Opp. For Advance 33.2 %</td>
</tr>
</tbody>
</table>

### Table 3. Other Employment Opportunities by Provider Type

<table>
<thead>
<tr>
<th></th>
<th>NH</th>
<th>HH</th>
<th>MH</th>
<th>DD</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Likelihood of Finding Another DSW Job</td>
<td>1.38</td>
<td>1.5</td>
<td>1.66</td>
<td>1.53</td>
<td>1.56</td>
</tr>
<tr>
<td>Likelihood of Finding Any Job with More Pay and/or Benefits</td>
<td>1.54</td>
<td>1.63</td>
<td>1.86</td>
<td>1.72</td>
<td>1.74</td>
</tr>
<tr>
<td>Considered Looking for a Job Other Than DSW in Past Two Months</td>
<td>47.0%</td>
<td>25.0%</td>
<td>44.0%</td>
<td>33.0%</td>
<td>41.0%</td>
</tr>
</tbody>
</table>
Analysis of the Determinants of Turnover

A statistical analysis was performed to see which factors affected the probability of a DSW turning over. The results showed that:

- HH DSWs were more likely to turn over compared to other DSWs, controlling for all of the other factors, and DD DSWs the least likely.
- Older workers and women are significantly more likely to leave as are those who are married and those who have children ages 6 to 18.
- When controlling for all of the other factors, those with a college degree of any kind, Associate, Bachelor’s or Master’s, are more likely to turnover, perhaps because they have better alternate job opportunities.
- DSWs with a certification of some type are less likely to depart.
- DSWs with longer service with their employers are more likely to leave.
- Consistent with the expectations of many, higher wages are associated with lower turnover rates and a larger number of hours per week with greater turnover.
- DSWs who believe they are more likely to be able to find another job are more likely to turnover.

Several types of benefits have a statistically significant effect on turnover.

- Paid sick leave for the DSW as well as for their family members both can reduce turnover.
- An IRA/403b can give a worker a greater reason to stay and does in fact reduce turnover.
- Health insurance for family members will also reduce turnover.
- The provision of three types of benefits was found to actually increase the chances of turning over: extra holiday pay, extra pay for overtime and an Employee Assistance Plan. The reason for this for the first two could be that requiring DSWs to work holidays or overtime, even if compensated, could make the job less desirable. The need for an EAP might reflect employees with greater problems who would be more likely to turnover for reasons independent of the job.

Offering continuing education with paid time off for attending the training was associated with lower rates of turnover. Offering the training without paid time to attend, however, increased the probability of a DSW leaving, perhaps for a better job. The key appears to be that offering paid training alone does not help with retention but paying the DSW for attending it does.

Certain attributes of the job can in fact reduce turnover.

- DSWs who found they had a permanent, consistent client load, had a great deal of say about the job, had input in planning their schedules and experienced social interaction on the job were less likely to turnover.
- A surprising result was that being involved in the care plan, however, was found to increase turnover.
- Quite unexpectedly, the attitudinal variable on the fairness of pay for the effort was found to have a positive impact on turnover, that is, controlling for other factors, including the actual level of pay, DSWs who felt their pay was fair for the effort actually turned over at a greater rate.

We were able to examine the impact of the various types of training on turnover, correcting for the other factors, separately for MH and non-MH DSWs. For MH DSWs offering continuing education was likely to reduce turnover. Although over 90% of MH DSWs did have continuing education, those that did not were more likely to leave. For the non-MH DSWs when they were offered paid time for training, they were more likely to stay. Offering the training without being paid while during the training actually increases turnover.
Policy Recommendations

The results of the study give rise to some possible changes that might lead to an increase in the retention of DSWs.

- More family friendly policies especially for MH DSWs with young children, such as on-site day care for large employers and more flexible work schedules might reduce turnover. In line with this, our results demonstrate that those who work more hours are likely to turnover, suggesting that perhaps, work-life/family demands and stress could contribute to turnover.

- It is important to note that Associate, Bachelor’s and Master’s degrees were each found to increase turnover for NH, DD and HH DSWs. It is possible that taking people with only a high school education and certifying them with a credential such as STNA could be a means to reducing turnovers.

- As turnover is defined as leaving the employer, not just changing from a DSW to a different job with the same employer, then career paths with promotion opportunities might lead to greater retention.

- DSWs who thought that there was a greater likelihood of finding a better job were more likely to leave. Clearly, this is not something an organization can control but it should be noted that the turnover rate in this study during a period of high unemployment was much lower than turnover rates in other studies.

- Not surprisingly, greater pay was associated with a lower probability of turnover.

- Paid sick leave for the DSW and their family was found to reduce turnover when controlling for other factors. Since fewer than three quarters of DSWs had paid sick leave and slightly more than half paid sick leave to take care of family members this is an area for possible change.

- Two important fringe benefits that can tie a worker to an employer are health care for family members and IRAs/403b’s. Although the Affordable Care Act might extend health care to more employees including DSWs, this study points out that turnover might be reduced by extending health insurance to the families of DSWs, something that is not affected by the Affordable Care Act. As health insurance is cheaper in a group, diverting resources to family health insurance over direct pay might be a win-win change that would increase retention and save money for organizations. Similarly, expansion of pension benefits could be a means to reducing turnover.

- Training done on the DSWs time without compensation appears to increase turnover while compensation for the training is likely to serve as a mechanism to increase retention.

- Giving DSWs a greater say in their jobs might reduce turnover. DSWs who had input into their schedules and had a consistent client load were also less likely to leave their employer.

References


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