

## Facility Turnover Self-Assessment

### Instructions:

*“What a difference management makes!”* looked at nursing staff turnover variation within a single labor market to determine what practices made a difference in turnover and retention. The study identified five major practices, and elements within each of the five, that are listed in this self-assessment.

**Purpose:** This self-assessment is designed to allow facilities to measure the extent to which they engage in practices that support retention by supporting and facilitating inquiry into how staff at all levels of the organization perceive their experience. Through this inquiry, facility leadership can identify strengths, areas where perceptions differ among staff, and areas that are ripe for improvement.

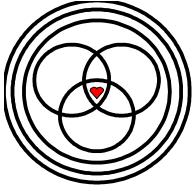
### 1. Who should complete this self-assessment?

The self-assessment can be completed by one person or by many, including department heads, supervisory staff, and all staff. An individual administrator or department head that completes the assessment may base their answers on their own perceptions or on interview with others.

If many people are asked to complete the self-assessment, it will be important to conduct this process in stages. This is because the self-assessment will open up a range of conversation and expectations within the building that leadership will need to be prepared to respond to. A good way to go forward is to have department heads complete the assessment first. Compare notes as a group. See where there is a shared perception of high or low marks, and where perceptions differ. Fully discuss areas of shared concern and areas of differences. Then invite others to complete the self-assessment. Again, see where there is a shared perception of high or low marks and where perceptions differ.

### 2. Scoring:

A high score is better. The highest possible score is 484 and the lowest possible score is 121. A score of 4 is given for a low-turnover practice that is almost always the case and for a high-turnover practice that is almost never the case. The score sheet is designed to provide scores for each of the five major areas of management practice, as well as a total score.



## Facility Turnover Self-Assessment

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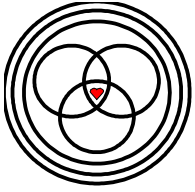
### 3. Then what?

As an organization, take time to appreciate and celebrate areas where scores are universally high. These are your strengths. They will be the bases from which you can improve. Do some review as a leadership team to explore more about these strengths? Often the things we do well, we take for granted. Yet it is important to understand what we do well and why so that we can build upon the good and spread it.

Take a look at the areas where perceptions and experiences differ. It is not uncommon for people at different levels of the organization to have different perceptions. If lower scores are prevalent on some departments, units, or shifts, find out more about what might be causing the concerns. If the scoring differences are primarily between upper management and the rest of the staff, learn as much as you can, as leaders, about what people are experiencing. In areas where differences in perception exist, and where there is significant agreement on low scores, “drill-down” to learn more about the root cause of low scores, before rushing to solutions.

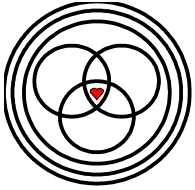
The best way to learn is to ask staff directly, in one-on-one meetings or group discussions. This is not easy. It is natural for leaders to feel uncomfortable, disappointed, even hurt, in learning that others are not feeling as good about their work experience as you thought they were. It is natural, too, for staff to feel uncomfortable sharing their concerns in concrete and explicit terms. What’s important to remember is that if you don’t know it, you can’t address it, and once you do know about it, then you can work with it? As staff feel sure of your earnest desire to learn more and your sincere intention to respond constructively, they will be able to share their perceptions and experiences openly. If some things have not been spoken about openly before, they may come out in a rush. Staff does not expect an on-the-spot solution. They will appreciate a full airing and sincere listening. As you can, invite staff to be a part of thinking through ways to address concerns and be a part of the solution.

Quality Partners of Rhode Island used this self-assessment in a yearlong effort through which five national corporations reduced their relative rate of turnover by 10%. The corporations used this self-assessment and drill-down tools to guide their inquiry into the root cause of their turnover. The tools included interviews with staff and former staff about a range of issues related to their daily work experience. These tools and other materials that can be used to address turnover are available at: [www.qualitypartnersri.org](http://www.qualitypartnersri.org) and [www.medqic.org](http://www.medqic.org).



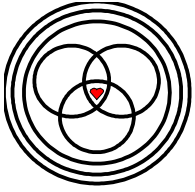
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Topic	CIRCLE THE NUMBER IN THE APPROPRIATE COLUMN (ONE CHOICE PER STATEMENT)			
<b>Quality Leadership and Management</b>	<b>Almost Always</b>	<b>Often</b>	<b>Sometimes</b>	<b>Seldom</b>
Revolving door in leadership positions	1	2	3	4
Leaders in place a long time, well known and respected across staff	4	3	2	1
Lack of leadership down the chain of command	1	2	3	4
Supervisors treat staff with dignity and respect, hold them accountable	4	3	2	1
Administrator doesn't know staff individually very well	1	2	3	4
Staff feel a sense of mission as part of a shared commitment to care	4	3	2	1
Staff feel more aware of cost issues than quality issues	1	2	3	4
Each resident's death is individually memorialized, and staff's grief is acknowledged and supported	4	3	2	1
Death's are covered over or grouped for remembrances	1	2	3	4
Staff trust the leadership	4	3	2	1
Staff frequently call out	1	2	3	4
Staff feel accountable for their attendance	4	3	2	1
Managers do not hold staff accountable for attendance or care	1	2	3	4
Regular communication across shifts and units	4	3	2	1
Some staff have never met the administrator	1	2	3	4



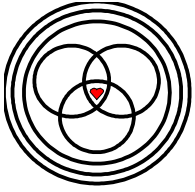
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Topic	CIRCLE THE NUMBER IN THE APPROPRIATE COLUMN (ONE CHOICE PER STATEMENT)			
<b>Quality Leadership and Management</b>	<b>Almost Always</b>	<b>Often</b>	<b>Sometimes</b>	<b>Seldom</b>
Managers on the floor helping out	4	3	2	1
Sudden changes in shift hours	1	2	3	4
Effective problem resolution processes that foster communication and win-wins	4	3	2	1
Residents sitting for long periods with long dried food stains, teeth unbrushed, fingernails uncared for	1	2	3	4
Worker friendly as far as safety	4	3	2	1
Emergency loans, other assistance with personal life traumas/needs	1	2	3	4
Management believes for staff that, "it's more important that they be able to take care of their families and themselves."	4	3	2	1
Punitive if too much time off needed	1	2	3	4
Managers allow room for innovation and creativity	4	3	2	1
CNAs have little respect for their supervisors and supervisors have little respect for their CNAs	1	2	3	4
Staff feel supervisors are open and approachable, give positive feedback when due	4	3	2	1
Staff feel appreciations are empty	1	2	3	4
There's a feeling of good teamwork throughout the building – "we help each other, we eat together, and we go back and forth together"	4	3	2	1
<b>Total All Columns in this Topic / Transfer Grand Total to Page 8 under appropriate Topic -</b>				



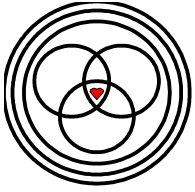
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Topic	CIRCLE THE NUMBER IN THE APPROPRIATE COLUMN (ONE CHOICE PER STATEMENT)			
<b>A Culture of Valuing and Respecting Caregivers</b>	Almost Always	Often	Sometimes	Seldom
Intolerance for limitations of staff	1	2	3	4
Highly visible ways welcoming and introducing new staff	4	3	2	1
A sense of anonymity among staff; staff are treated as interchangeable	1	2	3	4
Flexible scheduling	4	3	2	1
Inflexible scheduling	1	2	3	4
Scheduling problems resolved in a way that people find satisfactory, with sufficient notice, so staff can predict and rely on their schedule	4	3	2	1
Lack of predictability; little advance notice of schedule or of changes	1	2	3	4
Accommodation to workers' needs and accountability for residents' needs	4	3	2	1
Favoritism in scheduling holidays, overtime, and preferred shifts or units	1	2	3	4
Use of self-scheduling	4	3	2	1
Scheduling used for reward/punishment	1	2	3	4
<b>Total All Columns in this Topic / Transfer Grand Total to Page 8 under appropriate Topic -</b>				



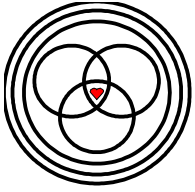
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Topic	CIRCLE THE NUMBER IN THE APPROPRIATE COLUMN (ONE CHOICE PER STATEMENT)			
<b>High Performance Human Resource Policies</b>	<b>Almost Always</b>	<b>Often</b>	<b>Sometimes</b>	<b>Seldom</b>
Leadership encourages and assists staff in their development of skills and pursuit of goals	4	3	2	1
Lack of understanding and ease in cross-cultural relations	1	2	3	4
Newly hired CNAs with little experience receive starting wages near the rate that longer-term employees make	4	3	2	1
Consistently raise wages over time for staff who stay longer term	1	2	3	4
Hiring bonuses	4	3	2	1
Significant percentage of staff works full-time	1	2	3	4
Bonuses for working on short notice or longer shifts	4	3	2	1
High take-up rate for health insurance benefits	1	2	3	4
Significant percentage of per diem staff	4	3	2	1
Opportunities for retirement savings through work	1	2	3	4
High turnover rates among new hires	4	3	2	1
DoN directly involved in hiring nurses and CNAs	1	2	3	4
Unrealistic job previews	4	3	2	1
Extensive orientation	1	2	3	4
Abbreviated orientation	4	3	2	1



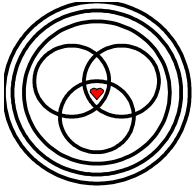
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Topic	CIRCLE THE NUMBER IN THE APPROPRIATE COLUMN (ONE CHOICE PER STATEMENT)			
<b>High Performance Human Resource Policies (continued...)</b>	<b>Almost Always</b>	<b>Often</b>	<b>Sometimes</b>	<b>Seldom</b>
Consistent assignment during period of acclimation to facility	1	2	3	4
Oriented to every unit and shift to be able to be assigned anywhere	4	3	2	1
Recruitment via word of mouth from current employees	1	2	3	4
No assistance or accommodation for further schooling	4	3	2	1
Tuition assistance and scheduling to accommodate schooling	1	2	3	4
Limited career advancement within the workplace	4	3	2	1
Opportunities for learning and advancement on the job	1	2	3	4
Lack of management responsiveness to concerns raised by staff	4	3	2	1
<b>Total All Columns in this Topic / Transfer Grand Total to Page 8 under appropriate Topic -</b>				



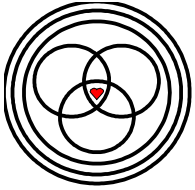
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Topic	CIRCLE THE NUMBER IN THE APPROPRIATE COLUMN (ONE CHOICE PER STATEMENT)			
<b>Motivational Work Organization and Care Practices</b>	Almost Always	Often	Sometimes	Seldom
Staff are assigned to different residents each day, week or month	1	2	3	4
Staff are assigned all the time to the same residents and co-workers	4	3	2	1
Staff routinely moved around to fill in gaps in schedule	1	2	3	4
Residents go to bed according to their own personal rhythms and routines	4	3	2	1
All care and services are given according to the facility's scheduling	1	2	3	4
Decentralized services and decision-making	4	3	2	1
Problem solving through medications	1	2	3	4
CNAs involved in care planning	4	3	2	1
Conflicts between shifts and across departments	1	2	3	4
CNAs give report to each other at shift change	4	3	2	1
Interpersonal strife among staff	1	2	3	4
Care teams and/or regular teamwork on the floor	4	3	2	1
Lack of training for staff on residents' conditions	1	2	3	4
<b>Total All Columns in this Topic / Transfer Grand Total to Page 8 under appropriate Topic -</b>				



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Topic	CIRCLE THE NUMBER IN THE APPROPRIATE COLUMN (ONE CHOICE PER STATEMENT)			
<b>Sufficient Staffing Ratios and Support for High Quality Care</b>	Almost Always	Often	Sometimes	Seldom
Understaffing and working short	1	2	3	4
Staff have enough time for personalized caring	4	3	2	1
Care is just functional, no time to meet emotional needs or be in relationship	1	2	3	4
All scheduled staff are in attendance	4	3	2	1
Agency staff	1	2	3	4
<b>Total All Columns in this Topic / Transfer Grand Total to Page 8 under appropriate Topic -</b>				



# Facility Turnover Self-Assessment

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## SUMMARY DATA

### Quality Leadership and Management

Excellent- 91 to 112      Good- 70 to 90  
Fair- 49 to 69              Poor- 28 to 48

### A Culture of Valuing and Respecting Caregivers

Excellent- 37 to 44      Good- 28 to 36  
Fair- 20 to 27            Poor- 11 to 19

### High Performance Human Resource Policies

Excellent- 76 to 92      Good- 58 to 75  
Fair- 41 to 57            Poor- 23 to 40

### Motivational Work Organization and Care Practices

Excellent- 43 to 52      Good- 33 to 42  
Fair- 23 to 32            Poor- 13 to 22

### Sufficient Staffing Ratios and Support for High Quality Care

Excellent- 17 to 20      Good- 13 to 16  
Fair- 9 to 12              Poor- 5 to 8

### Overall Score (Total of the 5 Topic Areas above)

Excellent- 260 to 320      Good- 200 to 259  
Fair- 140 to 199            Poor- 80 to 139