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An exploratory study of the job satisfaction and educational needs of health care workers working in private homes for the elderly in Hong Kong

Key Messages

1. Job satisfaction was relatively high among health care workers in private homes for the elderly.
2. Job satisfaction was associated with levels of work pressure, intention to remain in current employment, and personal health.
3. There was a discrepancy between the perceived need for work-related skills and the level of acquisition of those skills in daily practice.
4. Elderly home health care workers wanted education on general health care, common illnesses in the elderly, the psychology of the elderly, emergency care, and communication skills.

Introduction

Although being old is not synonymous with illness and disability, many elderly people live with disabilities caused by age-related illnesses. Changes in family structure and the increasing number of women in the labour force play a role in the care of the elderly people in society. Such structural changes in society may diminish the capacity of the family to care for its members. The elderly people are particularly vulnerable when they lose the ability to care for themselves. Although elderly care is often provided by informal caregivers, the demand for more formal long-term care continues to grow.¹ Institutional care in either government-funded or private elderly care homes may be required when an elderly family member is frail and/or the family is unable or unwilling to provide care at home. However, the waiting list for government-funded elderly care homes is lengthy and admission difficult.

Because private elderly care homes provide care for residents with higher levels of disability and morbidity,² the role of the health care worker as a provider of high quality care is important. Proper staff training to develop the skills necessary to provide quality care and meet the financial needs of the homes is required.³ In Hong Kong, there is little information regarding the training needs or job satisfaction levels in elderly care home workers. Elsewhere, job satisfaction is low and turnover high—factors that lead to decreased quality of care and increased costs.¹

The aims of this study were to measure the job satisfaction levels and training needs of health care workers in private elderly care homes in Hong Kong.

Methods

Study design

This cross-sectional study of private elderly care home health care workers in the Central, Western, and Southern Districts of Hong Kong Island was conducted from September 1998 to August 1999.

Sample size

In 1999, 33 of 35 private elderly homes accepted the invitation to participate in the study. The home supervisory staff selected study subjects. All 229 recruited subjects were ethnic Chinese with competence in Cantonese or Mandarin and worked day shifts; 162 were successfully interviewed (response rate, 71%). All face-to-face interviews took place in the elderly homes where the respondents were introduced by the home supervisors.

Study instrument

A structured questionnaire using both closed and open-ended questions, comprising 76 items including the Job Satisfaction Scale⁴ and General Health Questionnaire (GHQ-12) scale, was used for data collection.

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Table. Respondents' perception of the importance of skills needed to care for elderly residents and their skills acquisition order

Type of skill	Order of acquisition	Perceived importance
Falls prevention	1	1
Emergency care	7	2
Knowledge of medicine	9	2
General health care	2	4
Nursing observations of the elderly people	3	5
Psychology of the elderly people	7	6
Common illnesses of the elderly people	6	7
Communication skills	5	8
Maintaining elderly's mobility and independence	4	9

Results

Socio-demographic characteristics

Most respondents were female (95.1%), middle-aged (63.6%), married (75%), had a monthly income of HK\$6001 to HK\$10 000 (74.1%), secondary or tertiary level education (77.2%), and elderly care or related training (63%). Although 73% of the respondents had less than 4 years of elderly care experience, all had worked in at least one (range, 1-10) other elderly home. Among the respondents, 16.7% were 'overseas labourers'.

Job satisfaction and its relationship to socio-demographic, work, and health variables

The Job Satisfaction Scale had high internal consistency (Cronbach alpha=0.89) and contained 37 items rated on a five-point Likert scale (strongly satisfied to strongly dissatisfied). The respondents' mean score of 157.7 (SD, 17.8; range, 78-185) indicates above-average job satisfaction.

Job dissatisfaction was significantly associated with work pressure and the intention to leave the current position. Work pressure was derived from the residents, their relatives, colleagues, and supervisors. There was no relationship between job satisfaction and previous elderly home experience, prior training in elderly care or worker status, ie 'overseas labour'. High GHQ-12 scores were associated with increased job satisfaction and fewer somatic complaints.

Educational needs

We found differences between the respondents' self-perceived need for education or training and their reported skills acquisition (Table). Compared with other skills, respondents ranked "falls prevention", "emergency care", and "knowledge of medicine" as important for the daily care of elderly residents. Most respondents claimed a high level of acquisition of general health care skills; for example, feeding and bathing residents. Respondents indicated that training in common illnesses of the elderly, the psychology of the elderly, emergency care, and communication skills were also important.

Discussion

As government-funded services are not able to provide sufficient residential care services for the frail elderly, private elderly homes play an important role meeting this demand. Maximising job satisfaction in these homes is important, as high levels of job satisfaction may translate into improved quality of care, enhanced continuity of care,¹ and have an impact on client well-being.

Although job satisfaction among the study respondents was high, this may reflect the poor job market at the time of the study (unemployment rate of 6.2% in 1999). Job expectations and turnover may be quite different when the economy recovers.

The skills and knowledge health care workers acquire may raise their level of competence as carers for elderly residents which, in turn, may improve their job satisfaction. Our study subjects identified psychological support of the elderly and improved communication skills as training needs and key aspects in the understanding of, and care for, the frail elderly. Although ongoing training is an important issue affecting the quality of care in institutions, little research has been conducted to determine desirable standards, levels, and types of training for elderly care home workers.⁵ Harrington et al⁵ suggest that nursing home staff should have a minimum of 160 hours of training.

The degree to which these findings can be generalised is limited by the relatively small number of health care workers interviewed and by the fact that the study itself was confined to a particular locality. Also, only the respondents nominated by the supervisor and working the day shift were interviewed, possibly leading to selection and information bias.

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