

# Factors Associated with Infection Preventionist Turnover in Long-term Care Facilities

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NEDHHS/Nebraska ICAP

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# Factors Associated with Infection Preventionist Turnover in Long-term Care Facilities

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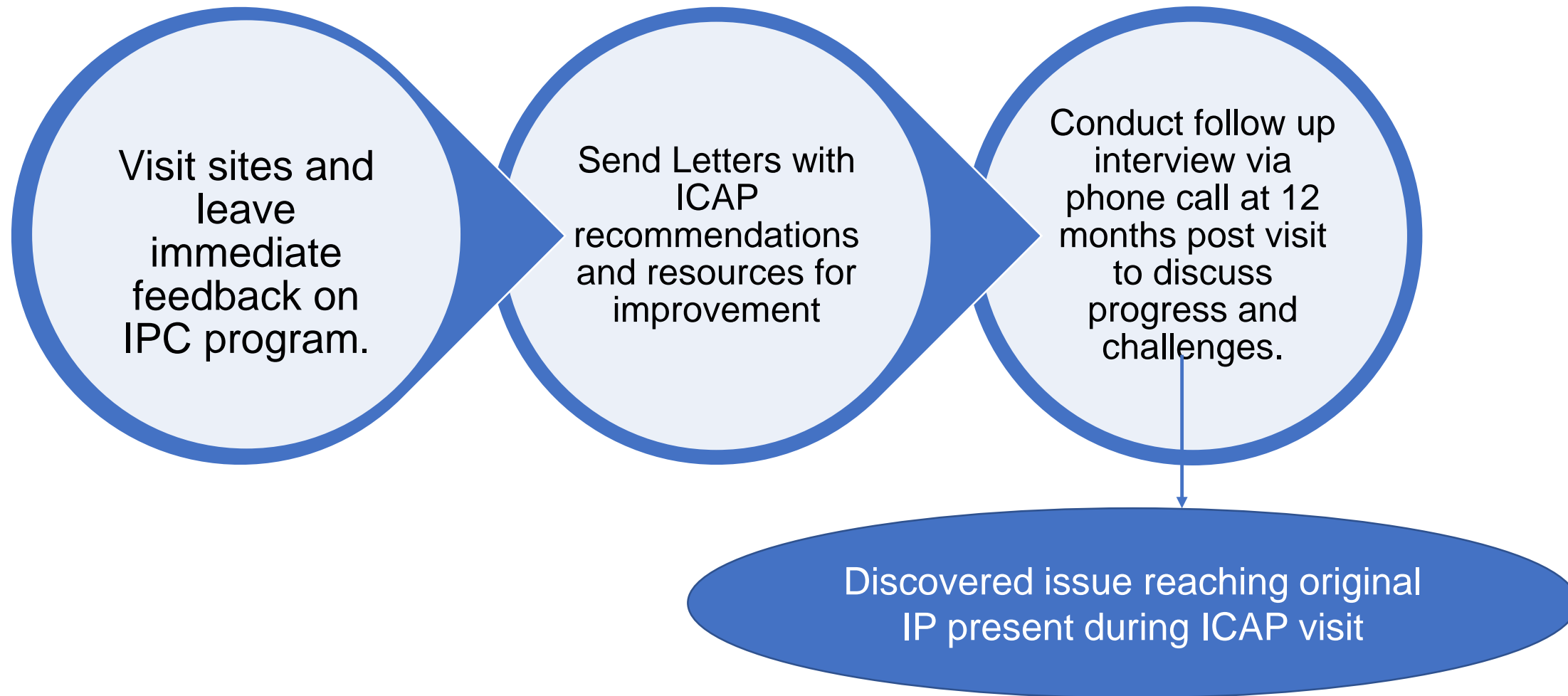
# Factors Associated with Infection Preventionist Turnover in Long-term Care Facilities

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- Objectives
- Identify the frequency of staff turnover at nursing leadership and infection preventionist positions in LTCF.
- Understand the impact of nursing leadership and infection preventionist turnover on infection prevention and control program implementation in LTCF
- Recognize the factors contributing to or preventing infection preventionist turnover in LTCF.

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# Factors Associated with Infection Preventionist Turnover in Long-term Care Facilities

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- **Background:**
- Infection Preventionist (IP) turnover is a significant barrier in developing effective infection prevention and control (IPC) programs in the long-term care facilities (LTCF).
- We studied the factors that contributed to or prevented IP turnover in LTCF.
- Survey collected information on turnover of IP, DON and ADON in the past 12 and 24 months.
- Additional questions assessed perceptions of IPs regarding impact of turnover and factors associated with it.

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An 11 question online survey was developed and emailed to 222 directors of nursing (DON) of LTCF with directions to forward it to the facility IP for completion.

64 IPs (28.8%) completed the survey

LTCF Infection Preventionist and Nursing Leadership Turnover Survey Questions  
Survey to be sent to Dir of Nursing with instructions for DON to forward the survey link to the IP. Only t  
will be completing the survey

1. In addition to having primary responsibility for the infection prevention program, what other role are you currently responsible for within your facility? (Select all that apply).
  - a. Staff nurse with resident care responsibilities
  - b. Director of Nursing
  - c. Assistant Director of Nursing
  - d. Manager/Director of Environmental Services
  - e. Manager/Director of Quality
  - f. Manager/Director of Food and Nutrition Services
  - g. Manager/Director for Emergency Preparedness
  - h. Manager/Director of Resident Safety
  - i. Other: (please specify)
  
2. How long have you had primary responsibility for the infection prevention program in your facility?
  - a. < 3 months
  - b. 3-6 months
  - c. 7-11 months
  - d. 1 year
  - e. 2 years
  - f. 3 years
  - g. 4 years
  - h. 5 years or more
  
3. In the most recent 12 months, how many persons have been in the Director of Nursing role in your facility?
  - a. 1
  - b. 2
  - c. 3
  - d. 4

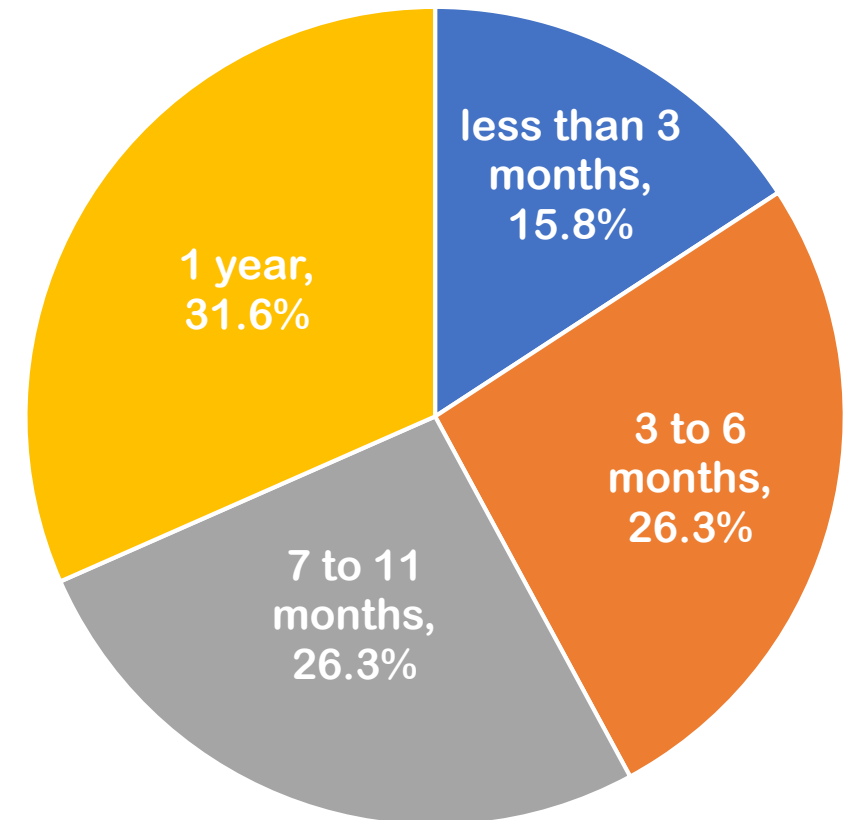
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## How Long have you had primary responsibility for IPC in your Facility



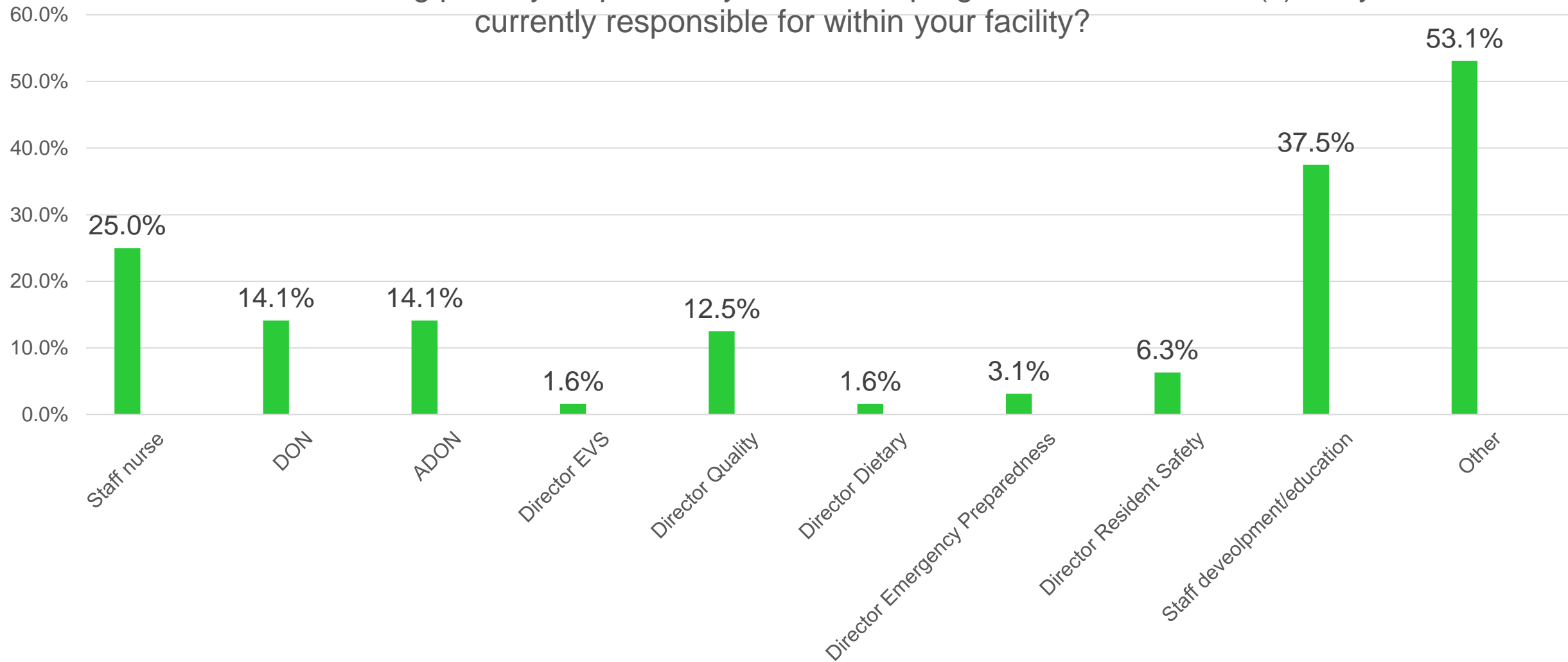
## Breakdown of Experience for IP with Primary Responsibility of IPC for 1 year or less



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In addition to having primary responsibility for the IPC program, what other role(s) are you currently responsible for within your facility?

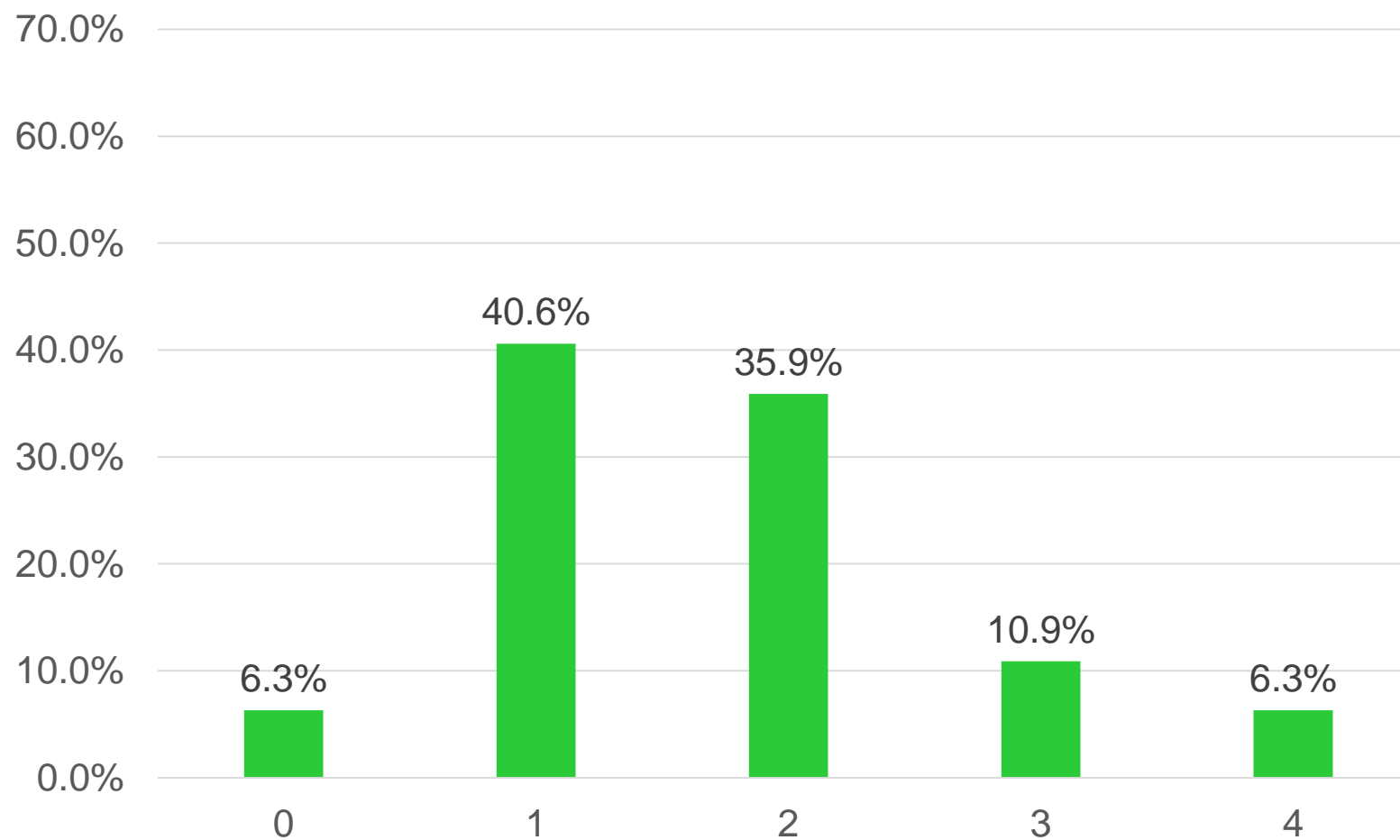




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## Number of Additional Roles Assigned to IP



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## Turnover at Different Positions in LTCF

Job Title	% IP reporting more than 1 person in the role in last 12 months in their facility (N=64)	% IP reporting more than 1 person in the role in last 24 months in their facility (N=64)
IP	39.1%	54.7%
ADON*	18.8%	29.7%
DON	31.3%	54.7%

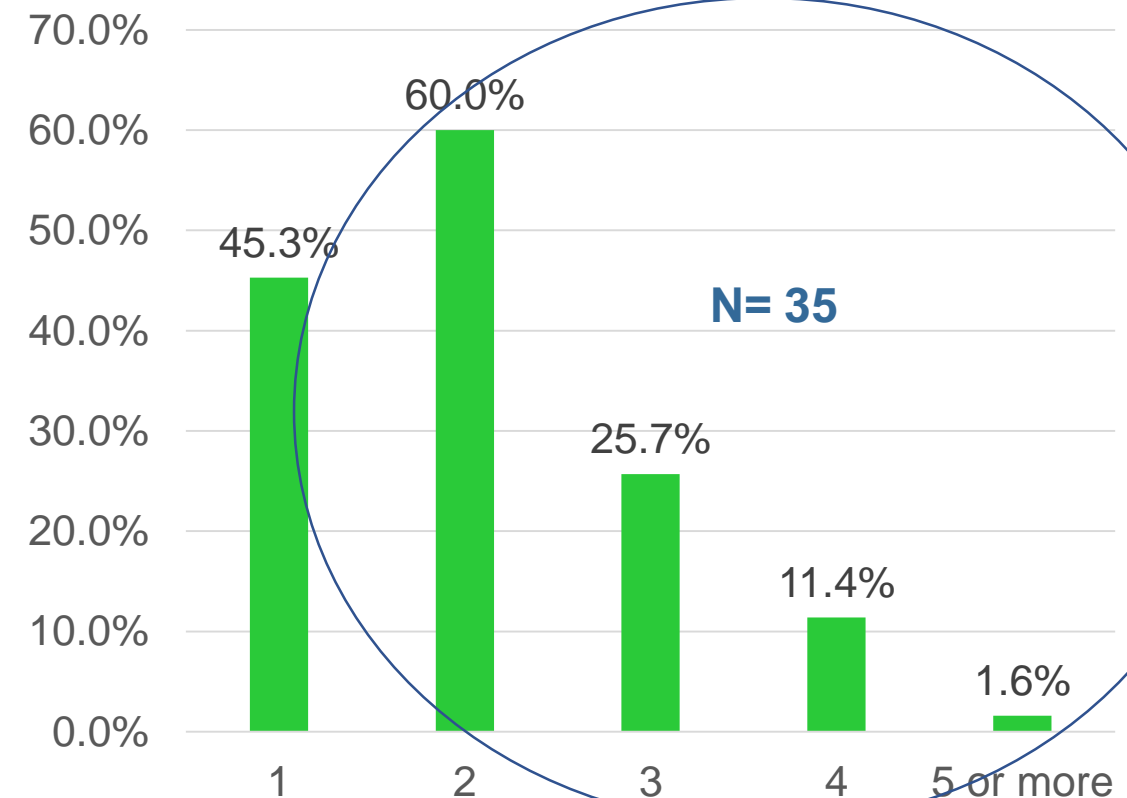
\* 22 IPs reported “not applicable” at ADON position

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- 45.3% of IP's from those LTCF who reported turnover at DON position reported that:
  - Turnover in leadership affected ability to perform IP Program responsibilities

In the past 24 months, how many persons have been in the Director of Nursing Role in your facility



# Factors Associated with Infection Preventionist Turnover in Long-term Care Facilities

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In what manner nursing leadership turnover has affected your ability to perform your IPC program responsibilities? Some of the responses are as follows:

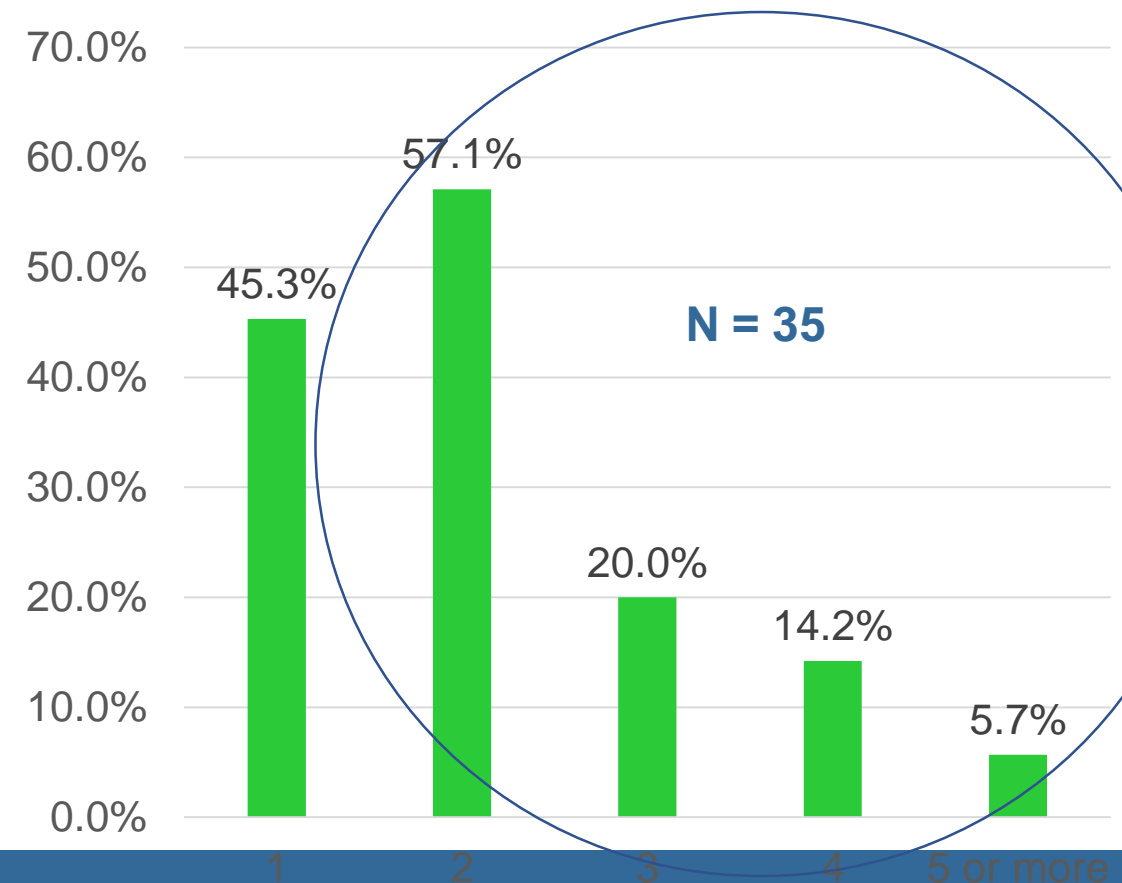
- *“Infection Control has turned over multiple times”*
- *“Different perspectives, priorities and expectations”*
- *“Difference of opinion in the way things should be done. As well as a difference of opinion in the importance of infection prevention.”*
- *“Lack of direction and focus on several areas of concern due to the changes in management/administration”*
- *“We have turnover of the DON position every 1-2 years, so I assume a lot of those responsibilities, so not a lot of time is spend on the role in that position of IC nurse.”*
- *We are attempting to function in many leadership roles and also very very frequently are working on the floor as a nurse and a CNA. It is very typical for nursing leadership to go 13 to 16 days without a full day off. Typical days are 10 to 14 hours long.*

# Factors Associated with Infection Preventionist Turnover in Long-term Care Facilities

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- 45.3% IP from those LTCF that experienced IP turnover reported that:
  - IP turnover Impeded full implementation of IPC program

In the past 24 months, how many persons have had primary responsibility for the IPC program in your facility, including your self?



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In what manner the IP turnover has affected your facility's IPC program?

Some of the responses are as follows:

- *“Not knowing where the others have left off or what they have already done.”*
- *“Consistency in direction being given to staff on policies and regulations”*
- *“Takes time to learn what and why the previous person did what they did. The tracking and trending etc.”*
- *“Inability to implement the IPP to its fullest potential”*
- *“it hasn't been turned over as of yet, keep telling our administrator that I need help or a Nurse to do only this position, I just keep trying my best, with the hope that someday somebody can do something about this.”*

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Most frequently selected contributing factors to the IP turnover as reported by IPs from LTCF that experience turnover in past 24 months:

- Workload (40.5%)
- Wages and benefits (32.4%)
- Nursing leadership turnover (29.7%)
- Dissatisfaction with the job (27.0%)
- Understaffing (27.0%)

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Some of the comments regarding factors that the IP think contributed to IP turnover are as follows:

- *“Expectations of other roles besides those that pertain to infection prevention”*
- *“Lack of TRAINING!”*
- *“No specific job description for this role”*
- *“She left to utilize her RN abilities in a hospital setting”*
- *“Unsure, likely due to better opportunity in another facility and/or salary.”*
- *“This role has been spread to thin and covered by whoever is available. We have now placed 1 person in that role. “*



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- The most common reasons preventing IP turnover reported by IPs from LTCF without any IP turnover (n=29)
  - nursing leadership stability (27.6%)
  - opportunity for professional development (20.7%)
  - overall satisfaction with the job (17.2%).

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Some of the comments regarding factors that prevented IP turnover are as follows:

- *“I feel a responsibility to the residents to stay.”*
- *“I enjoy learning and developing. This environment gives me the opportunity to fill my learning bug and putting what I learn into the facility to make it better. I am frustrated that I can't really implement what I would like to do because of my other job duties but its a small facility and I like see the outcomes of this that I do get to implement.”*

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- **Conclusion:**
- This study identified several modifiable factors that influence IP turnover in LTCF.
- Advocacy at the national level is required to raise awareness of the challenges faced by IPs in this setting in order to decrease their turnover rate.

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Nebraska DHHS webpage:

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Nebraska ICAP webpage:

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