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Medical Sciences 4300A: Addressing Healthcare Misconceptions Using Scientific Inquiry

Schulich School of Medicine & Dentistry: Community Engaged Learning

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Restructuring Training (Participation House Support Services)

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PHSS Community Engaged Learning Project: Restructured Training

Western

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Introduction

- The pandemic has brought on extra burden and stress for PSW's across Canada and they often report feeling overworked and organizations are understaffed^{1,2}
- Due to inefficient training structures and new hires not understanding their roles on the job, PHSS Coordinators have been left feeling burnt-out and overwhelmed with their responsibilities, creating a negative culture in the organization
- Our overall aim was to improve the training process at PHSS and reduce some of the responsibilities of the coordinators
- With the improved training structure and awareness of the roles that come with the job, we hope to improve staff retention as well at PHSS

Project Aims

- To improve the culture of the PHSS organization, especially with management
- Make Coordinators and the employees at PHSS feel less overwhelmed and ease some of the pressure they are facing from the pandemic
- Create a more efficient training structure that will help to improve the troubled culture at PHSS and improve staff retention, reducing the staff turnover rate
- Adding an extra day at Project Hope training to reduce the burden put on the PHSS Coordinators with having to continuously train new staffs
- Gather sufficient feedback from Coordinators through Communications Corner meetings, listening to different perspectives about the new training structure

Methods

- Initial brainstorm meeting to determine main problem, discussing burnout, staff retention, and overall culture of resentment. The plan to address the training framework was agreed upon to have the largest impact on all staff.
- Literature review on burnout, negative culture, and plans to reduce them. Focus was on specific burnout causes, COVID impact, and training methods.
- Search terms: Personal Support Worker (PSW) crisis, burnout, retention, complex care, COVID-19, training, healthcare, workplace culture
- Qualitative research done in Communications Corner meeting, where focus groups were held with Coordinators. Feedback was gathered on current training and the idea of part-time trainers.
- Project pivot based on gathered feedback. The collective decision was made to add a second day to Project Hope training, allowing for reduced burnout of Coordinators and Project Hope training staff as well as new hires' increased understanding to limit staff turnover.
- **Qualitative Research Questions** What are your general thoughts about the current training program + impact on your role as coordinator? What do you think is the biggest problem with the way training currently runs?
- What training requirements are feasible to be delegated to a staff training role/ another potential staff? Do you think it is feasible for a part-time trainer to train specific
- items at two different locations? Do you think implementing a part-time trainer position would help to ease some of the burnout faced by the coordinators? What do you feel is a realistic timeline to implement this new
- What incentives in addition to a training stipend could be effectively offered?

role? By the end of year?

- What other solutions do you think can help reduce your
- Presentation of restructured training book to Coordinators and Project Hope training staff during Communications Corner meeting, final changes made from feedback.

Results and Deliverables

The deliverables include:

- Conducted meetings with the Coordinators at PHSS to allow them to share their thoughts and give feedback regarding the training regime to improve the workplace culture
- 2: Restructure the training protocol for new hires at PHSS to reduce the workload for Coordinators and increase staff retention.
- 3: Future questions were created along with the deliverable to gather valuable feedback from Coordinators and training leaders

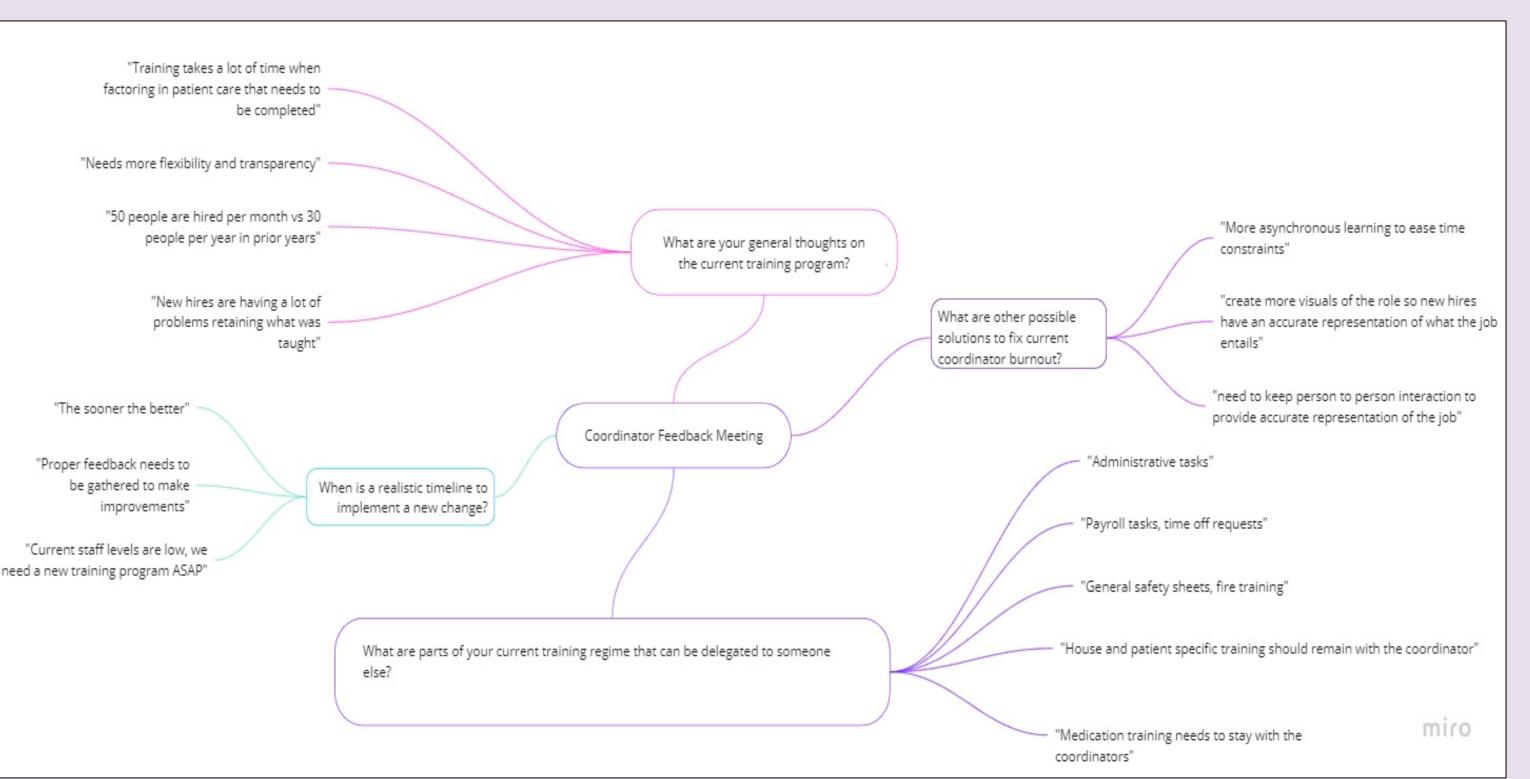


Figure 1. Flowchart summarizing feedback from Coordinators gathered during Communications Corner

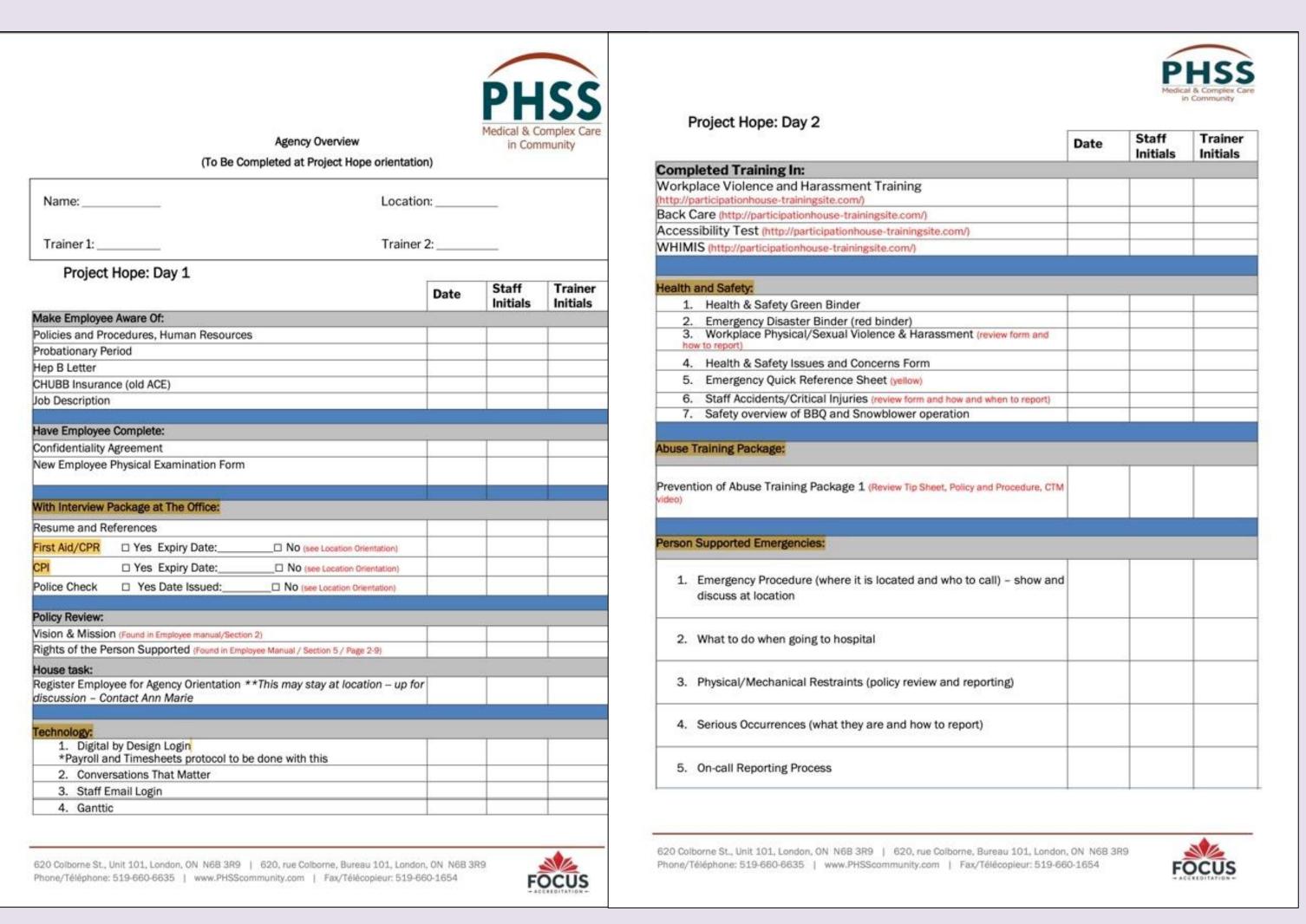


Figure 2. Restructured training package with the extra added day of training at Project Hope. Highlights show what was moved from PHSS coordinators into the Project Hope training days

Impact

- Coordinators of PHSS primarily benefits from the deliverable as it seeks to reduce their burnout and create a positive change in culture that starts with management
- Leaders of Project Hope Training training content will be more manageable and engaging with the addition of a second day at Project Hope and an interactive question and answer period
- Patients at PHSS with improved work ethic and culture at PHSS, new hires and Coordinators will be able to focus on patient-centered care
- **London Community** members of London community who join PHSS will be provided with higher quality of care from an organization with a positive work culture
- Beyond the London Community if the pilot project is a success, this new training process will be implemented across PHSS' 60+ locations across Ontario

Future Directions

- 1. New format of training structure will be piloted for 20 new hires across different PHSS locations, hoping to be implemented across all locations.
- 2. Training videos will be added to the new training program in January
- 3. Feedback will be collected from the Coordinators at PHSS using a questionnaire created by our team, allowing coordinators to share their opinions regarding the new training structure -> collect this data from the Coordinators and pilot project by the beginning of February



Feedback Questions to Assess New Structure

For Coordinators:

Literature Cited:

- How effective did you find this extra day of training at Project Hope to
- . Did you feel that it was beneficial to have new staff come into location with additional information from the extra day of training at Project . Did you find that the extra day of training at Project Hope relieved
- some of the stress on you as a Coordinator?
- 4. What do you think could be improved on this new training structure? . Can you think of any other solutions to alleviate the stress associated
- Please feel free to share any additional comments
- For Project Hope Trainers:
- Did you find the added interactive Q&A period useful? Did you find the amount of content covered on each day of training to
- be appropriate in terms of timing? 3. Was training more manageable now that there is an extra day added?
- 4. What do you think could be improved on this new training structure?
- 5. Do you have any concerns related to the new training structure? 6. Please feel free to share any additional comments.

Literature Cited & Acknowledgements

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Figure 3. Future questions included at the end of the restructured training

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