

## **Med Sci 4300A - Final Deliverable for PHSS**

### **Executive Summary**

Participation House Support Services (PHSS) is a non-profit organization with over 60 locations across Ontario that serves individuals with complex medical, physical, and developmental needs with the goal of including them in the community. The scope of the project covers members of the PHSS organization and the London community that they serve by addressing problems with burnout and culture of resentment that the Coordinators of the organization face. After initial discussions with the community partner, qualitative research was done via focus groups with PHSS Coordinators and training staff. An agreed-upon solution of restructuring the training process was developed, as training is a heavy task for Coordinators in addition to their daily patient-centered responsibilities. Currently, training occurs for one day at their Project Hope location prior to new hires entering specific PHSS locations. This has caused issues with information overload and unmatched expectations. The outcome of this project is to add an additional day of training at Project Hope so new hires are better trained and more knowledgeable before entering locations to engage in patient-centered training. Although not all training processes are feasible to delegate to Project Hope, most of the administrative tasks offloaded from the Coordinators should result in less burnout and a more positive culture for the organization. In addition, a feedback form will be created to gauge the effectiveness of the deliverable. The new training structure will be piloted for 20 new hires and additional videos will be added prior to implementing it across all 60+ PHSS locations.

### **Course Concepts**

#### **1. Perspective-taking**

When an individual thinks of an idea from another perspective, this can strengthen one's communication and problem-solving skills to find the optimal solution to complex dilemmas. Our project involved thinking from the perspective of numerous stakeholders involved at PHSS, including Coordinators, training staff, new hires, and the people they serve to improve the work

culture at PHSS. Our Community-Engaged Learning (CEL) project is related to perspective-taking due to consistent weekly discussions with the PHSS team in which we listened to their problems and put ourselves in their shoes to understand how they were feeling. Effective communication skills were necessary to perform qualitative research, in which focus groups were held with Project Hope trainers and PHSS Coordinators in Communications Corner meetings to learn their perspectives about the problem at hand and the efficacy of our plan to mitigate it. Perspective-taking is a vital aspect that was taken into consideration when coming up with a solution to the burnout and culture of resentment at PHSS, hence our final deliverable of a new training structure was created with everyone's perspectives in mind. Our deliverable aimed to solve the problems of burnout experienced by members of PHSS and this involved understanding everyone's needs. The Communications Corner was essential for feedback, and different perspectives about the new training structure were acquired from the Coordinators, leaders of Project Hope training sessions, and community partner contacts. Ultimately, the training process was redesigned with all perspectives being taken into account to address PHSS' problem.

## **2. Intersectionality**

Intersectionality is a framework that helps contextualize the complexity in health and organizational issues as it addresses multiple factors in a particular situation. This course concept has been considered as part of our CEL project with PHSS due to individuals' varying abilities related to technological competency, self-motivation, limits on workload, and a diverse pool of personalities. The prior training process was described as mundane and dry due to the one-day structure where a lot of self-directed information is presented to new hires at the Project Hope training session. This caused new hires to have unrealistic expectations when they transitioned to their PHSS locations and this was the main reason for high staff turnover, which led to Coordinator burnout and a culture of resentment in the organization. In restructuring the training package for the project's deliverable, all these components were taken

into account as the intersectionality contributed to the issue at hand. Thus, an additional day was added to split up the different training responsibilities that were passed on from Coordinators to the Project Hope leaders, as well as incorporating interactive components to help address concerns with the new hires' different competencies with technology, willingness to learn, definitions of a reasonable workload, and personalities. With the new training structure designed with the course concept of intersectionality in mind, the goal is to create a more accessible, suitable, and efficient training process for the Coordinators to reduce burnout and inspire a positive work culture.

### **3. Health literacy**

Health literacy is essential to every individual's daily life as it involves accessing, understanding, and evaluating information in all settings to improve health outcomes, including at one's workplace. Due to the shortage of personal support workers (PSW) as a result of the pandemic, PHSS has had to lower the qualifications necessary to work at their locations to fill staffing requirements. Over the years, it has been noted that new hires were unaware of the job expectations which lead to high turnover rates once they experienced the vigorous role that PSWs have. The Coordinators were forced to take on an unmanageable workload in having to teach new hires about the role, which negatively impacted their mental health. With this in mind, the final deliverable of a restructured training package was designed to improve the understanding of complex care and ultimately the competency of new hires. This new training process will give new hires more time to enhance their knowledge of becoming a PSW before they meet the Coordinators by increasing the training period at Project Hope into two days. This extra time will hopefully allow for new hires to better understand pivotal parts of the PSW role, such as medication training and completing personal healthcare forms, and increase the quality of care they give to their persons. By improving new hires' knowledge of the workplace, Coordinators will be able to take on a more realistic workload by only having to expand on new hires current knowledge, instead of starting from scratch.

## **Future Directions**

The new training structure will be piloted for 20 new hires at the end of December 2021 and if successful, will be implemented across all 60+ PHSS locations. Also, feedback will be gathered from the Coordinators at PHSS and project Hope trainers upon completion of the pilot via a questionnaire we made as a deliverable. Coordinators will provide feedback on the competency of hirees once at the location, and training staff will provide feedback regarding the allocation of training tasks. Based on feedback and pilot training outcomes, improvements can be made to the training package to create an effective resource for new hires, Coordinators, and employees at the Project Hope training location. In the future, training videos will be added to the new training package to provide an accurate representation of the role that new hires will be trained for, in hopes of boosting staff retention.