

Introducing Peer Mentoring in Long-Term Care Settings

Nursing assistant and home health aide positions will be two of this decade's fastest-growing occupations, according to the U.S. Bureau of Labor Statistics (BLS). Over the past several years, long-term care providers, in both home and facility settings, had already begun to feel this pressure as they struggled to fill direct-care positions. Though providers have felt some relief in the last year as economic growth has slowed, high rates of vacancies will most likely return when the economy strengthens and the job market again tightens: Not only will demand for long-term care services grow over the next decade, but the cohort of women between 25 and 44, which usually supplies entry-level direct-care workers, will not keep pace. The BLS projects a demand for more than a million additional direct-care staff between 2000 and 2010, and yet the number of women aged 25 to 44 entering the workforce during that same period will be *only 400,000*.

Though the slow economy has temporarily reduced high vacancy rates, long-term care programs remain concerned about the constant churning of their staff. Turnover rates of 60 to 100 percent are unacceptable—because such high rates of turnover destabilize any provider's ability to ensure high-quality services. Furthermore, rapid staff turnover places undue stress on those direct-care workers who stay, creating a downward cycle of turnover and a culture of instability. Today, employers not only need to find workers, but to *keep* them.

Peer mentor programs can reduce turnover among new employees and provide opportunities for advancement for committed workers.

This issue of *Workforce Strategies* introduces long-term care providers to peer mentoring, an innovative strategy that has been shown to significantly improve retention among direct-care workers. Drawing on the Paraprofessional Healthcare Institute's experience implementing peer mentor programs at home care agencies and in nursing facilities, we identify the benefits of mentoring programs, define the peer mentor's role, discuss critical mentoring skills, and outline the key design elements that long-term care organizations need to consider when developing their own peer mentor programs.

Why Implement a Peer Mentor Program?

Research suggests that much of the constant churning of direct-care staff takes place during the first three months of employment.¹ But home care agencies and nursing facilities also lose seasoned staff because their jobs offer few opportunities for growth and advancement. Peer mentor programs help solve both of these problems, reducing turnover among new employees and providing opportunities for advancement for committed workers.

A series of occasional papers produced by the Paraprofessional Healthcare Institute (PHI), *Workforce Strategies* explores public policies and industry practices that affect the long-term care direct-care workforce. In this issue, we focus on peer mentoring as a strategy for improving retention of home health aides and certified nursing assistants. This publication is distributed by the National Clearinghouse on the Direct Care Workforce, www.directcareclearinghouse.org

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One of the primary reasons that new home health aides and nursing assistants leave their jobs is because they feel isolated. For home health aides, who work alone at the homes of their clients, few opportunities arise to connect to other direct-care workers. At facilities, incumbent workers often have tight friendship networks that exclude new employees whom they don't yet know or trust.² By providing each new worker with a mentor, or “buddy,” who can answer questions and offer support, organizations can break down barriers between new and incumbent workers, decreasing the isolation and loneliness that so often undermines new workers.

New direct-care workers also leave their jobs because they feel inadequately prepared for the realities of caregiving work. Researchers in Pennsylvania, who conducted focus groups with direct-care workers, noted, “Time and time again during the focus groups we heard conversations that the training is not adequate, is outdated, is not ‘reality-based.’”³ Mentors can ease the transition from the training environment to the work environment, by assisting new aides with problem solving, clinical skills, and handling the emotional impact of the work.

For experienced aides, mentoring positions provide a rare opportunity for personal and professional growth. Moreover, by implementing a well-structured peer mentor program that offers enhanced responsibilities and pay to employees whose expertise might otherwise be lost to the organization, employers demonstrate that they truly value the skills and experience of frontline workers.

Defining the Role of the Peer Mentor

The primary role of the peer mentor is to help new employees become comfortable with their job responsibilities and the culture of workplace. As seasoned employees, mentors understand your organization's values and know how to get things done. They can answer questions for new hires, give advice, help resolve problems, and provide emotional support when a worker faces the early challenges of caring for people who have complex physical and emotional needs.

In many organizations, peer mentors help orient new employees and share their caseloads during the first week or two on the job. Peer mentors help new employees

hone their skills in the real world. They also provide a critical link between employee and supervisor, improving the supervisor's knowledge and understanding of the employee's strengths and weaknesses and helping to ensure that problems are addressed early in the employee's tenure.

Occasionally, mentors have a more expansive role, providing support not just to new hires but to any employee who encounters a new challenge and needs additional support. Cooperative Home Care Associates (South Bronx, NY), for example, added four full-time peer mentor positions to their coordinating team. The peer mentors act as role models and coaches, helping home health aides resolve personal and professional problems as they arise. The mentors also support the coordinators by responding to crises in the field (by telephone and in person) and by

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conducting home visits or providing coverage on particularly challenging cases to determine how best to support the assigned home health aide.

Some long-term care facilities have a preceptor position, in which experienced aides assist trainees in developing their clinical skills. The peer mentor role often encompasses the responsibilities of the preceptor, but it is more expansive. Rather than helping the new aide to become competent at completing “tasks,” the peer mentor helps the aide build and sustain caring relationships—with clients or residents, family members, and co-workers. To build these relationships, new aides need assistance strengthening clinical skills as well as communication, problem-solving, and work-readiness skills. Peer mentors help new employees acquire the full range of knowledge and skills they need to succeed in a new work environment.

Training Peer Mentors

Obviously, a good peer mentor needs to have excellent job skills. These include clinical care skills, an ability to apply relevant health-related knowledge, a capacity for solving problems when they arise, and good interpersonal skills. In addition, peer mentors must have the desire—and the patience—to teach these skills to others.

Mentoring programs should build on these basic skills, strengthening the ability of the mentor to act as a role model and a coach for new employees.

Because mentoring is about building supportive relationships, training programs are most successful when they focus on developing “relational skills.” These include:

- **Leadership:** having a positive attitude, motivating others, and using influence in a positive manner. Mentors need to see themselves as role models and to use their leadership to build a high-performance culture in which employees are proud of the work they do.
- **Interpersonal communication skills:** the ability to listen, ask questions, and reflect back what has been said. Active listening skills are critical to building supportive relationships with new employees. The mentor needs to be able to suspend judgment, listen with compassion, and understand the perspective of the mentee when problems arise.
- **Teaching and coaching skills:** the ability to assess skills, provide supportive feedback, and help mentees develop their clinical and problem-solving skills. To do this well, mentors need to learn principles of adult learning and understand differences in how people learn and retain new information.
- **Problem solving:** maintaining composure and seeking solutions in stressful situations that involve clients or supervisors. This may be one of the most difficult skills to master and the most important to succeeding on the job. Mentors play an important role in helping new aides to develop skills such as exploring a full range of options in response to a problem or “pulling back” when emotions may get in the way of finding an appropriate solution to a conflict.

Aides who demonstrate informal leadership skills and good interpersonal skills are likely to find mentoring to be a positive career opportunity.

Designing a Peer Mentor Program

When beginning a new program such as peer mentoring, it is important to think of its impact throughout your organization and how to prepare everyone for the change. Creating a peer mentor program isn't just about implementing training for a few good aides; it is a major organizational change that requires considerable thought and preparation. PHI has identified nine key program design elements that organizations need to address before any selection and training begins:

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- 1. Job design:** Write a job description that clearly articulates the new job responsibilities of the mentor. Ask for input from workers hired in the last year: What support would have been helpful to them? Think through issues such as caseload reduction: How will a mentor manage new mentoring responsibilities along with caregiving responsibilities?
- 2. Mentor compensation:** Decide whether mentors will receive a wage supplement or a career advancement wage adjustment. Though some organizations pay mentors only for “mentoring hours,” mentors act as leaders and role models at all times. Thus, peer mentor programs tend to be more successful when the position is recognized as a career pathway and compensated accordingly.
- 3. Management buy-in:** Make sure you have sufficient organizational support. “Talk up” the program, letting people know how it will benefit the organization. Solicit input regarding program design. In order for a mentoring program to be effective, the organization's leadership must support it.

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4. Organizational orientation to the mentor's role:

Introduce the mentoring role to supervisors and other key personnel. Make sure staff understand the mentor's responsibilities, how the job is structured, how mentors are assigned mentees, and who is responsible for supervising and supporting the mentors. Explain to this group how the program will benefit them, as this is key to having staff embrace the program. It is a good idea for those overseeing the program and working closely with mentors to attend the mentor training program. Also make sure that those who will have responsibility for implementation have sufficient resources.

5. Mentor selection: Create a fair and accessible system for aides to apply to be mentors. If the system is seen as a way to promote "favorites," mentors will have no credibility with their peers and the program will fail. In some organizations, the application review team solicits references from supervisors, peers, and clients/residents in addition to having the mentor candidates complete an interview process.

6. Mentor training: Focus initial training on interpersonal skills that help mentors support new employees. Generally, to learn effective skills, mentors need at least 16 hours of training. This initial training can be organized over two days or broken up into two- or four-hour segments and taught over several weeks. Additional in-services, once the mentors are carrying out their new responsibilities, are a good chance to build on early learning experiences.

7. Mentor oversight and support: Identify the staff person who will provide primary oversight for the mentor program. Discuss responsibilities, including matching mentors to mentees, ensuring that mentors fulfill their responsibilities, scheduling, troubleshooting, and providing support to mentors who may find themselves in situations they don't know how to handle. A program champion who sees the benefits and is willing to go to bat for the program is an important asset.

8. Mentor to mentee matching: Match mentees with mentors who seem to have a good personality fit as well as appropriate skills. If a mentee has weak clinical skills, match her with a mentor who excels in this area. If a mentee is very shy, find a mentor who can help give her confidence but will not overwhelm her with a strong, outgoing personality.

9. Mentee orientation: Orient new employees to your organization and introduce them to their mentors. Make sure mentees understand the mentor's role and the length of the mentoring period, so that they know what to expect from their mentor and know the limits of the mentor's responsibilities.

Creating a peer mentor program isn't just about implementing training for a few good aides; it is a major organizational change that requires considerable thought and preparation.

In developing your mentor program, be sure to involve frontline staff in discussions and decision making. Ask direct-care workers for input regarding job descriptions, the program's structure, and training. Your frontline staff have important knowledge about why it is so difficult to retain new workers. By seeking their input, you promote buy-in and ensure a solid program that responds to workers' real needs.

Facing the Challenges of Organizational Change

A peer mentor program is not a magic bullet that can solve all staffing-related problems. Programs work best in settings where frontline staff are valued for their contribution to caregiving, supervision is well structured and functioning at all levels within the organization, employees receive adequate compensation for their work, and nursing staff recognize the important role mentors play in training and acclimating new employees.

If the mentor role is not properly explained to the entire staff before you implement the program, you are likely to encounter resistance at many levels. Staff often hold back when asked to participate in an organizational change process because they fear that the change will disrupt relationships with co-workers. Involving all staff in defining the role and structuring the program will reduce these tensions and ensure that mentors play a positive role within your organization.

Fortunately, there are few financial barriers to implementing a peer mentor position. The costs of training and compensating peer mentors are minimal and are at least partly compensated for by money saved on recruiting and training new aides who leave during the first three months of employment.⁴

Many long-term care facilities and home care agencies are already reaping the benefits of peer mentor programs. At the Women's Educational and Industrial Union in Boston, Massachusetts, for example, a peer mentor demonstration program has more than doubled the retention rate, from 32 percent to 68 percent, in just one year. Marian Estates, a nursing facility in Sublimity, Oregon, implemented a peer mentor program in 1999 and within six months, eliminated the use of temporary agency staff. Director of Nursing April Diaz says, "Peer mentoring has dramatically improved retention of newly trained CNAs, while also providing new opportunities for experienced aides. Mentors do more than orient new hires; they advocate for their unit, support their co-workers, and are actively involved in culture change activities such as developing and implementing client-centered caregiving practices." Valued for their contribution, CNAs at Marian Estates are becoming increasingly valuable employees.

Ask direct-care workers for input regarding job descriptions, the program's structure, and training.

Conclusion

In today's labor market, long-term care employers need to think smart about how to keep direct-care workers. Too often, these workers give up on their jobs because they are offered too little support, too late. Shifting resources from filling vacancies to supporting workers can be an effective strategy to stabilize the workforce. Peer mentor programs often offer employers a double benefit, providing a career path for experienced employees while nurturing new employees as they adjust to the culture of the workplace, the demands of their residents or clients, and the stress of balancing family and work responsibilities.

For more information on peer mentor programs, visit the website of PHI's National Clearinghouse on the Direct Care Workforce, www.directcareclearinghouse.org

Endnotes

¹ See Karl Pillemer, *Solving the Frontline Crisis in Long-Term Care. A Practical Guide to Finding and Keeping Quality Nursing Assistants*. Frontline Publishing Co., 1996. Pillemer found that 40 to 50 percent of all nursing assistants leave during orientation and training.

² "In Their Own Words: Pennsylvania's Frontline Workers in Long-Term Care," Pennsylvania Intra-Governmental Council on Long-Term Care, February 2001. "There was clearly no sense that co-workers were there to help new workers succeed, and in many cases co-workers can make it much more difficult for new employees to succeed."

³ "In Their Own Words," February 2001. Also see Robert Atchley, "Frontline Workers in Long-Term Care: Recruitment, Retention, and Turnover Issues in an Era of Rapid Growth," Scripps Gerontology Center, September 1996. "Nursing home workers often quit early in their tenure, some in response to the heavy demands of the job, some to pursue better opportunities, and some from disillusionment caused by the gap between what they saw as the ideal of frontline care and the realities of work in many nursing homes."

⁴ Costs for replacing direct-care workers are estimated at \$1,500 to \$4,000 per worker.

Recommended Job Description: **Certified Nursing Assistant Peer Mentor**

Purpose:

- To reduce turnover in the direct care workforce by giving new employees a personal introduction to the work and the role of the nursing assistant
- To support newly hired nursing assistants to become a caring member of the team
- To serve as a resource to other nursing assistants in the organization

Job responsibilities:

- Provide on-the-job training for new, rehired, and existing employees
- Support newly hired aides for a minimum of five shifts, increasing the mentees' caseloads as their progress and experience allows
- Train/educate all newly hired/existing staff regarding departmental procedures, safety and health issues, and other information
- Complete an orientation check on all new hires upon the completion of the orientation period and a competency evaluation within 2 to weeks of hire
- Provide constructive feedback to the new aide
- Serve as a liaison to the administrative staff and the new employee
- Participate in the interviewing of nursing assistant applicants
- Be an active member of the peer mentor team

Skills, abilities, and qualities pertinent to the position:

- Strong connection to the work of direct-care service
 - Demonstrates an ability to do the work of a CNA
 - Shows a positive attitude about being a CNA
- Good assessment and observation skills
 - Demonstrates ability to be nonjudgmental of staff and other aides
 - Sees many sides of a situation
- Good interpersonal, relational and communication skills
 - Shows ability to learn and use problem-solving skills
 - Displays good listening skills
 - Asks for help/assistance
 - Demonstrates the ability to be self-reflective
- Ability to work as a member of a team
 - Maintains a good relationship with other staff and other aides
 - Receives positive feedback from residents and/or family members
 - Understands confidentiality and will discuss issues only with those who have a "need to know"
- Flexibility
 - Able to respond in emergency situations
 - Willing to be on call
- Knowledge of company policy, procedures and culture
 - Has exemplary work history
 - Demonstrates knowledge of policies and procedures
 - Understands how to access resources and explore options
- Ability to work independently and in potentially stressful situations
 - Able to handle self in a calm manner in stressful situations
 - Self-directed and able to follow instructions
 - Demonstrates good organizational and time-management skills

Minimum qualifications:

- Six months experience
- Familiarity with agency policies and procedures
- Ability to speak, read and write functional English

Recommended Job Description: Home Health Aide Peer Mentor

Overview:

The peer mentor position is open to experienced home health aides who are interested in providing support to new employees. Peer mentors report to the peer mentor project director

Job responsibilities:

- Provide early intervention, mentoring, advising, and support to new aides/attendants in the early stages of employment
- Provide constructive and appropriate feedback about the aide that is being mentored
- Answer questions and provide supportive peer counseling to aides and attendants
- Serve in a liaison role between the coordinating/administrative staff and home health aide/ personal care attendant
- Be an active member of the peer mentor team

Skills, abilities, and qualities pertinent to the position:

- Strong connection to the job of a home health aide
 - Demonstrates an ability to do the work of a home health aide
 - Shows a positive attitude about being a home health aide
- Good assessment and observation skills
 - Demonstrates ability to be nonjudgmental of staff and other aides
 - Sees many sides of a situation
- Good interpersonal, relational and communication skills
 - Shows ability to learn and use problem-solving skills
 - Displays good listening skills
 - Asks for help/assistance
 - Demonstrates the ability to be self-reflective
- Ability to work as a member of a team
 - Maintains a good relationship with other staff and other aides
 - Receives positive feedback from clients and/or family members
- Flexibility
 - Able to respond in emergency situations
 - Willing to carry a pager and/or cell phone
- Knowledge of agency policy, procedures and culture
 - Has exemplary work history with agency
 - Demonstrates knowledge of policies and procedures
 - Understands how to access resources and explore options
- Ability to work independently and in potentially stressful situations
 - Able to handle self in a calm manner in stressful situations
 - Self-directed and able to follow instructions
 - Demonstrates good organizational and time-management skills

Minimum qualifications:

- One year experience as a home health aide/personal care attendant (recommended)
- Familiarity with agency policies and procedures
- Ability to speak, read and write functional English

*The peer mentor helps the aide build and sustain caring relationships—
with clients or residents, family members, and co-workers.*

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The nonprofit **Paraprofessional Healthcare Institute** (PHI) focuses on strengthening the direct-care workforce within our nation's long-term care system through developing innovative approaches to recruitment, training and supervision; client-centered caregiving practices; and effective public policy. PHI's work is guided by the belief that creating quality jobs for direct-care workers is essential to providing high-quality, cost-effective services to long-term care consumers.

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