

Measure #23. Nursing Home Work Environment and Performance Team Survey

CARE COORDINATION MEASURE MAPPING TABLE

	MEASUREMENT PERSPECTIVE		
	<i>Patient/Family</i>	<i>Health Care Professional(s)</i>	<i>System Representative(s)</i>
CARE COORDINATION ACTIVITIES			
Establish accountability or negotiate responsibility			
Communicate		■	
<i>Interpersonal communication</i>			
<i>Information transfer</i>		■	
Facilitate transitions			
<i>Across settings</i>			
<i>As coordination needs change</i>			
Assess needs and goals		■	
Create a proactive plan of care		■	
Monitor, follow up, and respond to change		□	
Support self-management goals			
Link to community resources			
Align resources with patient and population needs			
BROAD APPROACHES POTENTIALLY RELATED TO CARE COORDINATION			
Teamwork focused on coordination		□	
Health care home			
Care management			
Medication management			
Health IT-enabled coordination			

Legend:

- = ≥ 3 corresponding measure items
- = 1-2 corresponding measure items

Nursing Home Work Environment and Performance Team Survey

Purpose: To develop an instrument that will assess work environment and perceived work effectiveness in a nursing home facility.

Format/Data Source: Survey consists of three components of complementary nursing home attributes, including work environment and performance. Responses to the first component were based on a 5-point Likert scale. Responses to the second component were based on a 12-item Likert scale from the LEAP Survey.¹

Date: Measure published in 2009.¹

Perspective: Health Care Professional(s)

Measure Item Mapping:

- **Communicate:**
 - *Within teams of health care professionals:* 1A7, 1A10, 1C8
 - *Across health care teams or settings:* 1C7
- Information transfer:
 - *Within teams of health care professionals:* 1B12
 - *Across health care teams or settings:* 1B13
 - *Participants not specified:* 1B15, 1C2
- **Assess needs and goals:** 1C8, 1D1, 1D5
- **Create a proactive plan of care:** 1A10, 1B10, 1C6, 1C8
- **Monitor, follow up, and respond to change:** 1C2
- **Teamwork focused on coordination:** 1C4, 1D7

Development and Testing: Instrument items were adapted from a previously validated team survey in PACE programs (H. Temkin-Greener, personal communication, September 1, 2010). Reliability and construct validity were demonstrated. Two items were removed through exploratory factor analysis. Redundancy, conceptual independence, and convergent-divergent validity were assessed via Pearson correlation coefficients. Standardized Cronbach's alphas measured internal consistency and indicated high reliability.¹

Link to Outcomes or Health System Characteristics: While controlling for facility characteristics, the primary assignment of staff to residents was significantly associated with fewer quality of care (QC) and high severity deficiencies. Additionally, greater penetration of the self-managed teams within the nursing homes was associated with fewer QC deficiencies.³

Logic Model/Conceptual Framework: The Shortell model was successfully adapted for a previous instrument upon which this study is related.⁴

Country: United States

Past or Validated Applications*:

- **Patient Age:** Older Adults, Adults
- **Patient Condition:** General Population/Not Condition Specific
- **Setting:** Long Term Care Facility

*Based on the sources listed below.

Notes:

- Instrument was provided by the corresponding author upon request (H. Temkin-Greener, personal communication, September 1, 2010).
- This instrument contains 86 items. Only Section 1 was mapped, which contains 46 items; 14 of which were mapped.

Sources:

1. Temkin-Greener H, Zheng N, Katz P, et al. Measuring work environment and performance in nursing homes. *Med Care* 2009; 47(4):482-91.
2. Temkin-Greener H, Cai S, Katz P, et al. Daily practice teams in nursing homes: Evidence from New York State. *Gerontologist* 2009; 49(1):68-80.
3. Temkin-Greener H, Zheng NT, Shubing C, et al. Nursing home environment and organizational performance – association with deficiency citations. *Med Care* 2010; 48(4): 357-364.
4. Shortell S, Rousseau DM. Excerpted from *The Organization and Management of Intensive Care Units* [pamphlet]. 1989.