Standing in front of the Aging and Older Adult Services Committee of the Pennsylvania House in 2008, Linda Bettinazzi, CEO of the Visiting Nurse Association (VNA) of Indiana County, spoke of her commitment to quality jobs in her independent home care organization.

We believe our product is our people. High turnover rates among direct-care workers are too often regarded as simply a cost of doing business in long-term care, but we have seen firsthand how investing in direct-care workers improves both the health and well-being of those we care for, and the health and well-being of the workers themselves.

Bettinazzi has been at the forefront of high-quality employer practices. Her organization, the Visiting Nurse Association (VNA) of Indiana County is a nonprofit, non-unionized home care provider affiliated with Indiana Hospital in Indiana, Pennsylvania, located 60 miles northeast of Pittsburgh and 280 miles northwest of Philadelphia. Through three divisions—Home Care (Medicare funded), Extended Care (private nursing), and Hospice—the VNA employs 59 direct-care workers (home health aides, nursing assistants, companions and housekeepers) and 82 nurses. In 2009 these staff made 80,100 visits, providing services including home health aide care, physical therapy, rehabilitation services, personal care, companion, and homemaker/housekeeper services. Situated in rural Pennsylvania, the VNA’s staff travels 500,000 miles per year to the homes of over 3,000 clients.

Bettinazzi’s policy work is a testament to her vision and leadership within and outside of her own organization. A nurse by training, she has worked in hospital, educational, and home health settings. For

---

**The Business of Caregiving** is a series of case studies that showcases exemplary employers in the eldercare/disability services industry. The organizations featured in this series have been selected to illustrate a “quality care through quality jobs” approach to sustaining and growing a long-term care business. All case studies, along with slide shows and podcasts, are available online at: [www.PHInational.org/casestudies](http://www.PHInational.org/casestudies). The development of these case studies, along with web-based best practice descriptions, have been funded by the Hitachi Foundation ([www.HitachiFoundation.org](http://www.HitachiFoundation.org)).
The Business of Caregiving

six years she was the director of hospice at the VNA of Indiana County; she became CEO in 2001. She has served on numerous boards and committees both locally and nationally, including the Workforce Cabinet of the American Association of Homes and Services for the Aging (AAHSA), which provided policy, practice, and training/education recommendations to address the looming shortage of workers in aging services. In 2010, Bettinazzi received the Benjamin Rush award from the Indiana County Medical Society, honoring her voluntary contributions to the health of the people of Pennsylvania.

A challenging business environment

Bettinazzi is leading the VNA in the context of a very challenging business environment. She describes “ever increasing competition in the marketplace,” coupled with significant payer constraints— including Medicare and managed care. In fact, at last count the VNA’s home health and hospice divisions were working with 68 different third-party payers!

“Our number one challenge is financial,” Bettinazzi states. “We live in such totally uncertain times. The biggest challenge that our industry faces is what we are going to do with chronic long-term care management—between the tsunami of elderly people that is coming, the fact that there is no third party reimbursement to speak of for any kind of long-term care. All reimbursement focuses on short-term episodic care—it’s definitely a mounting challenge to us, and I think going forward it’s going to be the biggest challenge, not only for us in particular, but for health care in general.”

Bettinazzi has tackled this challenge from several angles. First, as noted above, she has taken an active role in addressing the regional and national policy issues that shape the home care environment. Second, in 2001 she helped start the Indiana County Healthcare Career Consortium. This all-volunteer group, which Bettinazzi chaired for seven years, has 21 members representing a cross-section of the health care and workforce industries. The consortium has succeeded in bringing in over one million dollars in workforce development funds into the county, and through its creative efforts, has established new training programs for nursing assistants and LPNs, two positions for which there has been high demand but an insufficient pool of trained workers.

Bettinazzi’s third strategy for addressing the challenges her business faces—and the focus of this case study—has been to invest, within her own organization, considerable resources to strengthen leadership and communication and create a supportive and respectful work environment for all employees. The efforts have resulted in increased staff satisfaction, reduced turnover, and savings in management time estimated at $45,000.
Striving to create an ever-more supportive environment

The VNA has always been known as an excellent employer that supports its workforce. “[Commitment to quality jobs] comes from Linda [Bettinazzi],” notes Marion Nugent Cowan, director of hospice. “She’s very committed. When she first started here, she did a lot of research on national average salaries. We’re in a rural community, and she wanted to make sure we were up there with the national averages for salaries and benefits.”

The VNA pays entry-level home care aides $10.82 per hour, about equal to the national average, in a rural area where typical wages are nearly 20 percent less. More experienced aides can make $13.75 an hour, almost $1.50 per hour more than the national average. Additionally, the VNA provides benefits equal to an additional $5 or $6 per hour.

Bettinazzi describes the organization’s efforts to ensure that its workers have quality jobs: “Historically we’ve always had a culture where we support our staff,” she says. “We have put numerous strategies into place over the last several years related to better training of our staff, career ladder implementation, better benefits, salary structure, more education, opportunities for advancement within the organization, and recognition strategies.”

The PHI Coaching ApproachSM

Bettinazzi and the VNA leadership strive to maintain a respectful workplace where all contributions are valued.

Bettinazzi and the VNA leadership strive to maintain a respectful workplace where all contributions are valued. “I have a philosophy, and I make sure that all the staff know this,” she states, “that there’s not one person in this agency that is better than or more important than any other person. Everybody has different roles to play, but we all work together as a team.”

To foster such a respectful work environment, Bettinazzi is always looking for “any opportunity to improve problem solving, communication, and working together more as a team.” Such an opportunity arose when the VNA became engaged in the Better Jobs Better Care (BJBC) initiative. Through BJBC in 2004, VNA’s Extended Care division was able to partner with PHI, a national organization that works with eldercare and disability service providers to improve the quality of jobs and the quality of care in both home and residential settings.

PHI, the national technical assistance provider for BJBC, introduced its signature Coaching Approach to supervision (also called PHI Coaching SupervisionSM), a skill-building approach that helps supervisors improve their ability to support direct-care staff—and hold them accountable—through improved communication and problem solving. PHI Coaching Supervision skills include active listening, management of one’s emotional responses, and communicating clearly and directly about expectations while using language free of blame and judgment. During BJBC, PHI trained one Extended Care director and two supervisors in coaching skills, while also providing training in team building for direct-care staff.

When the opportunity arose in 2006 to expand the PHI Coaching Approach throughout the organization through the Center for Coaching Supervision and Leadership (CCSL), Bettinazzi took advantage. CCSL would provide an opportunity to strengthen communication and problem-solving skills throughout the VNA—and build sustainable systems to support this approach to staff development. The PHI Coaching Approach, Bettinazzi understood, builds skills that are critical to teamwork, which in turn is crucial for “relationship-centered caregiving” that values the relationships among staff and between worker and client.
The Business of Caregiving

The PHI Coaching Approach builds skills that are critical to teamwork, which in turn is crucial for “relationship-centered caregiving” that values the relationships among staff and between worker and client.

Through CCSL, PHI trained three staff members in a nine-day train-the-trainer seminar that prepared them to deliver two-day coaching training for VNA supervisory and administrative staff. The VNA also received ongoing technical support and coaching from a PHI staff person (see box on page 5 for elements of the CCSL initiative).

“[Coaching] is promoting more accountability with managers,” notes Debbie Bier, director of the home health division. “All managers have gone through the training. We refer to coaching a lot during our meetings, on how to handle situations they encounter day to day.”

Additionally, the VNA trained all staff in the same core communications skills taught to supervisors in their training. “All levels of staff, including myself, participated,” notes Bettinazzi. “We trained the nurses, supervisors, clerical and billing people, aides.” Some received a two-day Coaching Supervision seminar; others participated in a one-day training called the “PHI Coaching Approach to Communication.”

Indeed, VNA staff attest to the fact that the PHI Coaching Approach supports both supervisors and direct-care workers alike. Nugent Cowan, who heads the hospice division, participated in Coaching Supervision training for executive leaders. “I always felt that I had a pretty good communications style,” she notes. “I remember in school reading about ‘management by walking around,’ and I like to be really involved. I thought, ‘I communicate pretty well, I’m not too bad.’ But when I went through the Coaching Supervision I really learned a lot.”

Mary Wolak, a nursing assistant, participated in the communications training. “I do feel that it’s making you feel that you can understand the [clients] better sometimes by listening to what they’re saying,” she observes. “Sometimes you have to bring that out in them, what they want to talk about. And letting their emotions show. You have to be very understanding. Because [clients] have bad days, and those days, they might take a lot out on you, and we have to be able to be strong and understand they’re not taking it out on us personally, they’re just having a bad day. And that class taught us basically to be able to withstand a lot of emotions.”

Alicia Pearce, trainer and RN coordinator, concurs. “This can be a very frustrating field at times,” she notes, “and the physicians are yelling at you and staff or the families are angry for things that you can’t control. And you need to use pull back [managing one’s own emotions], you need to use active listening. We’ve given them these tools and I think that’s been really paramount in ultimately improving patient satisfaction and patient care.”
The Business of Caregiving

VNA of Indiana County

Key elements of the Center for Coaching Supervision and Leadership

**Executive Leader Training.** Two-day coaching seminars that introduced leaders to the program and to clarified their leadership role in a high-involvement change process. These seminars also covered the language, core skills, and the overall PHI Coaching Approach.

**Train-the-Trainer Program.** Three staff from the VNA attended a nine-day training program conducted by PHI staff. The program covered all aspects of PHI Coaching Supervision and prepared attendees to conduct in-house two-day trainings for supervisory staff at their sites.

**Cross-Functional Team Development.** Cross-functional teams were responsible for determining how best to “roll out” training at their site and how to sustain PHI Coaching Supervision practice. The VNA’s cross-functional team included senior management, frontline supervisors, coaching trainers, direct-care staff, and others from the three divisions.

**Coaching Supervision Training.** Conducted by VNA trainers, with PHI’s assistance, this two-day training introduced supervisors and managers to the language, skills, and approach of coaching, and represented a key step toward integrating coaching into the organizational culture.

**Booster Sessions.** PHI staff work with on-site trainers to provide refreshers, or “boosters,” to participants who had previously completed the two-day training. Booster sessions reinforce the core coaching skills, ensuring that their use is sustained.

**Peer Gathering.** A Peer Gathering in 2007 brought together trainers from all the participating CCSL employer sites, as well as other organizations at various stages of implementing coaching in their organizations. Trainers were able to network and practice skills together, learning from each other.

**Coaching Intensive Seminar.** The Coaching Intensive Seminar was a two-day professional development opportunity, attended by the VNA trainers, as well as other CCSL participants, that allowed them to build on their knowledge of the PHI Coaching Supervision curriculum and further develop their skills in teaching and modeling. It is also provided a chance for trainers to reconnect, and share the successes and challenges of implementing coaching at their sites.

**Communications Training.** VNA trainers trained non-supervisory staff in a one-day seminar that introduced participants—through interactive, skill-based training—to the core communication skills needed to strengthen teams, enhance leadership, and improve caregiving relationships. These skills include active listening, paraphrasing and asking clarifying questions, self-awareness, pulling back, and giving and receiving feedback. At the VNA, this training was termed the “3Ps”—for paraphrasing, pull back and personal styles.

Cross-Functional Team

CCSL helped organizations not only to introduce new skills to staff, but also to build systems and structures so that these skills would be institutionalized—remaining part of the organization’s culture beyond the duration of the project. Participatory leadership was considered an important component of initiating and sustaining this organizational change. Thus, as part of the CCSL initiative, the VNA established a cross-functional team (CFT) with representatives from the three divisions. Members included schedulers, aides, RN coordinators, directors, nurse supervisors, RNs, and administrative staff. The coaching trainers...
The Business of Caregiving

Participatory leadership was considered an important component of initiating and sustaining this organizational change.

are permanent members of the team. “[Our purpose], states one CFT member, “is to maintain and facilitate better communication throughout the organization… to maintain a healthy environment for the people who work here.”

In order to ensure that activities and recommendations from the CFT are fully considered, the CFT chairperson attends executive “resource” meetings on a quarterly basis to report on progress and to make suggestions for organizational improvements. In that way, says Bettinazzi, “things aren’t lost in the translation. If it’s something that we need to take to the board for approval, it’s decided at the resource group level, or if it’s something that I can just approve along with the other managers, then we just take care of it then and there.”

One coaching trainer describes her experience as a CFT member:

“I’ve been very excited to be part of the whole process here and I’ve appreciated my opportunity to be one of the trainers. In my job there is so much that is regulated. … You have to do this, you have to do that, and you don’t have a choice about so many things. It’s very exciting to be part of the catalysts for change—and to actually effect change within an organization. [It] is very personally satisfying for me to be part of a group that has done something. … Working in collaboration with everybody is very fulfilling.

In addition to planning the coaching training within the organization, the CFT has put into place many mechanisms to strengthen communication within and between divisions and levels of staff. Because the majority of the staff work in the field, the CFT has devised some creative strategies for catching their attention during their weekly visits to the office (see box at left).

Cross-functional team strategies to improve communication and the work environment

- Tag-a-coworker, person-to-person “thank yous”—a box, with paper and pencils, is located by the elevators; anyone can write a thank you to another employee. The letter goes directly to the person being thanked.
- Suggestion box, reviewed and discussed regularly by CFT.
- Placards and signs posted throughout the office with key aspects of coaching – signs are changed and moved monthly to keep it fresh.
- Quarterly CFT Newsletter, distributed to all staff with:
  - ✔ A “coaches corner” that provides pointers on communication and coaching skills, as well as humorous examples of right and wrong communication.
  - ✔ Publishing of person-to-person “thank yous.”

Recognition

VNA leadership recognizes the value and importance of acknowledging
employee contributions and accomplishments. “I try really hard to make sure that I thank staff, and they know that they are appreciated and what they do matters,” explains Bettinazzi. “Also, I have an open-door policy and they can come to me at any time. I make myself personally accountable to them, I make myself available to them,” she continues. “I think that strategy has made them feel that it is not a ‘them and us’ management/staff kind of environment. I think people appreciate that, and I think it’s definitely helped with retention issues.”

In general, there is a great appreciation of the work of direct-care staff. Their contributions do not go unrecognized. Hospice director Nugent Cowan, for example, describes her personal appreciation:

“My own mother was in hospice ten years ago, and I was already a hospice nurse at the time and I appreciated what the aides did, or thought I did, but I didn’t understand it completely until I went through it with my mother and, I thought, what a valuable, intimate service that our aides provide. They are excellent, they do a wonderful job.

Opportunities for formal recognition abound at the VNA. For instance, the VNA has established a “brag board,” which is a bulletin board on which they post positive achievements of staff as well as any recognition received from a client or family member. In this way, achievements are publicly honored and recognized. The VNA also has an annual recognition ceremony that acknowledges the longevity of staff (at 5, 10, 20, 30 years of employment) and their accomplishments. In addition, they make it a point to participate in the national celebrations of the various disciplines working in the agency. Finally, employee birthdays are honored with a card and, funding permitting, a gift certificate.

An annual luncheon sponsored by the Healthcare Career Consortium, which began in 2005, provides another opportunity for recognizing staff. “Anyone from the community or any of the health care facilities can nominate any healthcare worker—from companion all the way to physician—to receive a health care worker of the year recognition award,” explains Bettinazzi. “So over the last six years within the VNA, we have had 36 employees who have received this beautiful award.” She goes on to highlight the remarkable nature of the ceremony that recognizes and honors all types of health care workers equally.

Investing in a quality workforce

“The VNA is very committed to the staff,” states Nugent Cowan. “Our CEO really is dedicated to finding any way that she can to support them.” The organization has put into place numerous structures and practices that support staff development.

Orientation and Mentoring

Office staff provide new hires with a general orientation when they first begin. New hires are then as-

The VNA has established a “brag board,” which is a bulletin board on which they post positive achievements of staff as well as any recognition received from a client or family member.
signed a preceptor whom they shadow for a period of time before taking on their own cases. The duration of the shadowing varies, from a day or two to several weeks, since some employees join the VNA with years of experience while others are relatively new to the field. The preceptor and employee come to an agreement as to when the new hire is ready to go to the field independently. Preceptors receive $25 when they mentor a new employee; after the new employee has worked 200 hours, the preceptor receives another $25.

Until staff are in the field working on their own, what is presented in the initial office orientation is unlikely to make a lot of sense, according to Maureen Bonatch, director of extended care. Therefore, after working one to three months, every new aide participates in an orientation class held by one of the seasoned nursing assistants working in the field. The daylong class provides employees with the opportunity to address any questions that they have and connect with their peers. “They get the perspective of a co-worker on how to exceed in their role, and how to do those extra things for the clients that make them know that they’re getting that extra special care,” explains Bonatch.

Nursing assistant Mary Wolak has been providing this follow-up orientation training for five years. “After 11 years of experience, I’ve been through it all,” Wolak states. “It seems like they can ask questions a lot easier because of me being a field worker also. I’m one of them.”

Nugent Cowan explains how mentoring is an important part of the VNA’s overall approach to support employees and help them to reach their full potential: “We do a lot of mentoring here. We mentor each other, we support each other,” she says. “When someone doesn’t have a skill that they need—a communication or a technical skill—we are willing to mentor and help them along the way to learn that.” She goes on to describe the impact of coaching on the mentoring process:

The coaching skills help foster that mentoring approach. You can take different views. If someone doesn’t have the skill to do the job you could say that person can’t do the job, or you can say let’s work together, and see how we can help you to be able to do some new things that maybe you weren’t able to do before. And part of that is the education that is provided, part of that is mentoring.

Career Ladder

The VNA believes in helping employees grow and advance themselves. While participating in BJBC, they created a career ladder that made it possible for companions to become nursing assistants. At that time in 2004, ten companions received scholarships to pay for nursing assistant training, with a two-year commitment to the agency upon completion of the course.

The LPN training program, established through the work with the Indiana County Healthcare Career Consortium, provided an additional career oppor-
The VNA offers full-time employees competitive salaries, comprehensive health coverage with no employee contribution, and paid vacation and sick days.

Specialized Training

In order to provide the highest quality of care, and to ensure that employees are well equipped with the skills they need to do so, the VNA provides specialized training. An example is hospice training for nursing assistants. The VNA supported Mary Seale, a hospice and palliative care RN, to attend a train-the-trainer seminar to certify nursing assistants in hospice and palliative care. She has since provided eight hours of training to 37 nursing assistants. “It’s a way of getting the patients better care, because aides are better prepared to handle end-of-life situations,” Seale explains. “It’s a very different way of thinking, because they are going from trying to get the person as well as possible to seeing a sometimes very quick decline. They had to totally change their focus: how to speak with a patient and family, how to cope with their own feelings. We felt this was really needed and feedback from the nurse aides has been very positive and it continues to have an impact.”

Salaries & Benefits

The VNA offers full-time employees competitive salaries, comprehensive health coverage with no employee contribution, and paid vacation and sick days. Direct-care workers (nursing assistants, companions, HHAs) receive a 3 percent annual salary increase, and budget permitting, a 1 to 2 percent annual bonus. Full-time employees are guaranteed a minimum of 35 hours per week. The VNA provides the federal mileage reimbursement rate for travel. The organization provides referral bonuses: $100 upon hire of the referred employee and $150 once the new employee has worked for six months with the agency.

In addition to these financial benefits, the VNA offers other supports. For example, the hospice division hosts an annual retreat that combines education and relaxation. Given the stressful nature of the work, there is also a staff support counselor available.

Experiencing tangible results

Employer and Employee Outcomes

“When people feel valued, when they feel their opinions are valued, they feel they are being respected as a person, and are trusted,” says Nugent Cowan, “then you get that back, you get that trust and respect back. And I think that contributes to a feeling of job satisfaction and contentment in the job.” The various initiatives and practices described above lead to an overall positive work environment, one that employees appreciate. When employees are satisfied, they are less likely to leave their jobs and are able to build deeper relationships with their clients.

Job satisfaction. The VNA has demonstrated measurable improvements in job satisfaction. For CCSL, PHI developed’ a scale for job satisfaction that was composed of five items: 1) My work gives me a feeling of personal accomplishment; 2) I would recommend this organization to others as a good place to work; 3) I would like to continue to do this job for the next two years; 4) I feel a strong sense of loyalty to this organization; and 5) I am very satisfied with my job. Statistically significant changes were recorded in job satisfaction for all VNA staff surveyed at baseline.
in 2007 and in 2009, following the intensive coaching work (See Figure 1).

Retention. Staff consistently report that the high level of satisfaction in working at the VNA has translated into very high retention and low turnover. Indeed, from 2003 to 2006, turnover for direct-care workers in Extended Care decreased from 53 percent to 11 percent. Quarterly turnover from 2003 through 2010 show a consistent downward trend (see Figure 2). “Right now, 77 percent of our [Extended Care] employees have been here for over five years,” notes the extended care director, Maureen Bonatch.

Improved Management. The integration of the PHI Coaching Approach into daily practice has also led to increased efficiencies as employees learn and are empowered to solve problems and supervisors learn to guide them in that process. In a survey of nine supervisors trained in the PHI Coaching Approach to Supervision, they estimated a total of 25 hours saved per week following training. This translates on average to more than 3.5 weeks of time saved annually per supervisor—a value of over $5,000 each.

Supervisors and managers discussed this shift with CCSL evaluators. “As staff has become more independent in their self-

VNA staff express high levels of satisfaction with their jobs and the supportive work environment

As far as work atmosphere, this job is the greatest job I’ve ever had, and you see I’ve had a lot (steel mill, deli, beauty shop, making fishing lures, factory work). I really enjoy this job the best.

–Mary Wolak, nurse aide

If your employees are not healthy and happy within themselves and their family, they’re not going to do a good job for you. That is the impression that you get when you’re here. When you’re here, you truly get the impression that these people actually care about me as well as what I can do for them.

–Robin Ruffner, field supervisor

They constantly look for ways to make this job work with family life. Most of us are female and the majority are moms. They look for ways to allow flexibility, understanding that if you are able to answer important needs for your family, you are a much better employee and much more able to be focused.

–Alicia Pearce, RN coordinator

This is the best job I’ve ever had. It’s the first time probably in my whole career that I don’t go home everyday looking in the paper for another job.

–Anne Richardson, patient care coordinator for hospice and palliative care supervisor
management skills,” states an RN coordinator, “my need to manage it is decreased.” One director observes that “supervisors in middle management have become more independent in problem solving and disciplinary action—[they] only consult me after they have attempted to handle a situation. They came to me more before [coaching supervision] training.”

Another director points out that learning to hold back from solving problems for staff is “a real process.” “And when you realize that you don’t have to do that,” she observes, “it is a little bit of a burden lifted.”

“Finally, one surveyed supervisor wrote: “What has changed [since coaching training] is my ability to deal with situations. This has given me less frustration and stress in a job that is full of stress! It has provided a very viable way to provide guidance in empowering others to do their own problem-solving.”

Related to improved efficiencies and problem-solving is the impact of CCSL on the way in which division directors and managers conduct meetings. The cross-functional team served as a model for a different approach—one in which all voices are encouraged and heard, one that elicits input and ideas from all participants and shares decision-making among group members. Cross-functional team members report that new strategies for meeting management have been incorporated into other management and departmental meetings. “[I have] completely changed my team meeting format,” noted one manager. “I used to use a printed agenda and went through it, but a monkey can do this. We now put all chairs in a circle to indicate that we are all on equal standing.”

One of the directors who participated on the cross-functional team observed: “[In the CFT] it was nice for a change not to have to be in the lead position and let everybody else participate. …I have enjoyed letting [staff] take ownership of what has been happening in the agency. And I’ve taken that outside of this meeting and done more of that type of thing with some of the meetings in my department. It’s kind of taken the pressure off, of feeling like I was responsible to make all the decisions.”
The Business of Caregiving

Finally, Home Health Director Debbie Bier notes that the coaching work has led to an improved understanding of teamwork:

*I think the training was very helpful in helping us understand our differences [and] learning how each other learns or accepts change and in that way I think it’s improved communication. I don’t know that we’re prefect. …I do feel that it has improved how people interact with each other. …We work better as a team I think in terms of sitting down at a table and working out solutions to problems.*

Client Outcomes

Qualitative data provide evidence that VNA staff are using coaching skills with clients and families, resolving problems and easing relationships. Nugent Cowan describes how coaching skills can impact clients as well as staff. She says it “promotes a feeling of mutual respect, when you do that, trying to understand where people are coming from, not making assumptions, it applies not just to staff but also to patients and families.”

Other staff also reflect upon the usefulness of coaching skills with clients and family members. Active listening and responding calmly to concerns and demands are skills that they see as helping to facilitate improved communications and leading to more satisfying interactions. “I had a patient’s daughter call in and she was very upset,” relates one supervisor. “She said that nurses are supposed to call her when there is a change. I asked her could I have a minute, because I wasn’t clear, and I paraphrased. It was really interesting because as soon as I said to her I wasn’t sure what she was asking, so I wasn’t sure how to help her, she calmed down. This worked really well.”

Improved retention also has implications for the quality of care for clients. With a stable, skilled workforce—one that has years of experience, as the majority of the VNA staff do—the VNA of Indiana County is able to offer not only excellent clinical skills, but also relationship-centered care that values and respects clients and staff alike, and offers care and companionship consistent with a client’s desires.

In 2008, the VNA was selected as the top home care agency, among 223 in Pennsylvania, in the reduction of avoidable hospitalizations among its clients. Using a team approach to identifying clients most at risk for emergencies, and by front-loading visits, intensifying patient education, and tapping the skills of all the agency’s disciplines, the VNA reduced acute care hospitalizations by 17 percent in three years.

Lessons Learned: Leadership Commitment Is Essential

Home care and hospice are intimate services that require dedicated staff, good communications, and positive relationships. The VNA of Indiana County continues to build a supportive work environment that translates into better jobs and higher quality care. What makes this all possible is the committed leadership of Linda Bettinazzi and her team.

VNA staff consistently praise Bettinazzi for her support and vision and positive leadership approach. RN Mary Seale describes the type of support that Bettinazzi models: “From the very beginning,” says Seale, “we have had a very strong support team—this job is very challenging. It has to start with the manage-
The Business of Caregiving

The leadership is always striving to make a good work environment even better. An example is their introduction of the PHI Coaching Approach throughout the organization. Bettinazzi says: “We always, as an organization, try to take a leadership role, and we are always looking for a way to improve and carry on our business, and I thought [coaching] would be beneficial to the organization as a whole.”

But simply investing resources was not enough—such a skills-based approach requires ongoing practice and reinforcement, and leadership’s understanding of the approach and its ability and willingness to model it is seen as a key to its success. “I think they support coaching by living it,” observes Alicia Pearce.

“I think that our leadership very much lives the idea of Coaching Supervision. They don’t have the old supervisory style, three strikes you’re out kind of thing. They’re always interested in what’s going on and what the problem is.”

It is this deep commitment to communication and problem solving, which are as essential to the delivery of quality care as training and career development, that attracted the VNA to the PHI Coaching Approach and made the partnership with PHI through the Center for Coaching Supervision and Leadership so successful. Pearce summed it up by noting that being a part of CCSL made “an already very good place to work an even better place to work.” “Having the tools and the structure on how to communicate in a positive and affirming way,” she says, “has been excellent for us—[helping us] to continue to grow in a way that we want to grow.”

Endnotes:

1 See www.vnaindianacounty.com/

2 Nursing assistants provide hands-on care, have completed a recognized training program and competency evaluation, and are enrolled in the Pennsylvania Nurse Aide Registry. Home Health Aides provide hands-on care and have completed a minimum of 60 hours of pre-employment training. Companions and housekeepers do not provide hands-on care, but provide assistance with shopping, housework, and similar tasks.

3 The VNA is structured as two separate not-for-profit corporations with Bettinazzi as the CEO of both. The VNA of Indiana County includes home health and hospice, and the VNA Extended Care is the private-pay entity. Both have the same board but with different officers and separate by-laws and financial records. In practice, the organization is managed as having three separate divisions, each with its own director and Bettinazzi as the supervisor of each director.

4 Participating organizations include the Indiana Regional Medical Center, human services agencies such as the Indiana County CareNet, schools such as Indiana University of Pennsylvania and Westmoreland County Community College, and economic development agencies such as the Chamber of Commerce and the Tri-County Workforce Investment Board. Bettinazzi co-chaired the consortium from 2001 to 2008.

5 Better Jobs Better Care was a four-year research and demonstration program, funded by the Robert Wood Johnson Foundation and The Atlantic Philanthropies. The program sought to achieve changes in long-term care policy and practice that helped to reduce high vacancy and turnover rates among direct-care staff across the spectrum of long-term care settings and contribute to improved workforce quality.

6 The Center for Coaching Supervision and Leadership (CCSL) was a four-year PHI demonstration program funded by the John A. Hartford Foundation and The Atlantic Philanthropies that assisted employers in implementing and sustaining the PHI Coaching Approach.

7 The scale was identified through factor analysis and tested for reliability (Cronbach’s alpha = .854.)
PHI (www.PHInational.org) works to improve the lives of people who need home and residential care—and the lives of the workers who provide that care. Using our workplace and policy expertise, we help consumers, workers, employers, and policymakers improve eldercare/disability services by creating quality direct-care jobs. Our goal is to ensure caring, stable relationships between consumers and workers, so that both may live with dignity, respect, and independence.

About the Author Marcia Mayfield, MPH, is the PHI Director of Evaluation. She is responsible for the design and management of evaluation systems and studies for PHI’s training, organizational development, workforce development, and policy initiatives.