

EMPLOYEE SATISFACTION WITH SUPERVISOR SUPPORT: THE CASE OF
DIRECT CARE WORKERS IN NURSING HOMES

Lisa C. Whitaker, MPH

Dissertation Prepared for the Degree of
DOCTOR OF PHILOSOPHY

UNIVERSITY OF NORTH TEXAS

December 2017

APPROVED:

Stan Ingman, Co-Major Professor
Dale Yeatts, Co-Major Professor
James Swan, Committee Member
Linda Holloway, Chair of the Department of
Rehabilitation and Health Services,
and Interim Dean of the College of
Health and Public Service
Victor Prybutok, Dean of the Toulouse
Graduate School

Whitaker, Lisa C. *Employee Satisfaction with Supervisor Support: The Case of Direct Care Workers in Nursing Homes*. Doctor of Philosophy (Applied Gerontology), December 2017, 72 pp., 2 tables, 3 figures, references, 115 titles.

The nursing home industry has been saturated for decades with culture change initiatives in an effort to improve resident quality of care. The direct care worker (DCW) is considered a critical position to achieving nursing facility quality improvements. Understanding what leads to job satisfaction for DCWs could result in improved resident care. The relationship DCWs have with their direct supervisor or upper-level manager can impact employee satisfaction. The purpose of this research is to identify factors that are associated with DCWs satisfaction with supervisor and management support. Data was obtained from 307 DCWs who were employed at 11 North Texas nursing homes. It was expected that factors affecting satisfaction with direct supervision and upper-level management would differ. In fact, the study found that the antecedents for employee satisfaction with supervisor support were participative decision-making/empowerment, age, information exchange and feedback. Furthermore, participative decision-making/empowerment, perceived competence, staffing, information exchange and feedback were found to affect direct care workers' satisfaction with manager support. In conclusion, this research provides a starting point towards a more holistic view of employee satisfaction with supervisor support by considering the preceding factors and its subsequent effects.

Copyright 2017

by

Lisa C. Whitaker

ACKNOWLEDGEMENTS

I thank the Lord of Lords, Jesus Christ for his grace, provision and love. If it had not been for Him this research by me would not have been completed.

I am forever grateful to my first teacher, my mother, Peggy. You not only modeled the importance of education but also sacrificed your time and resources for my educational accomplishments. Thank you for your belief in me, and knowing that this dissertation would happen. Thank you to my grandparents, Nena and Felmon, who paved the way for graduate level education. Knowledge of your theses as a child inspired me to earn my doctoral degree.

I am grateful for the continued support of my dissertation committee. Drs. Yeatts and Cready thank you for sharing your dataset with me. Dr. Yeatts, I am sincerely appreciative of your guidance and willingness to provide your expertise. Your help made this dissertation possible.

To my husband, Creston, this dissertation is dedicated to you. I could not have completed this degree without you. I am truly grateful for your friendship and love. You have given me every opportunity to complete this degree and encouraged me each step of the way. Thank you for being more to me than I can express in words.

To my children, Creston and Lillian, I hope that this work means to you what my mother's and grandparent's theses meant to me. You both are my inspiration.

TABLE OF CONTENTS

	Page
ACKNOWLEDGEMENTS	iii
LIST OF TABLES	vi
LIST OF FIGURES.....	vii
CHAPTER 1. INTRODUCTION.....	1
CHAPTER 2. ORGANIZATIONAL, WORK DESIGN, INTERPERSONAL, AND INDIVIDUAL FACTORS AFFECTING SUPERVISOR AND MANAGEMENT SUPPORT	3
Organizational Characteristics.....	3
Employee Training.....	3
Staffing.....	5
Work Design Characteristics	6
Scheduling of Work.....	6
Participation in Decision-Making (Empowerment)	7
Interpersonal Characteristics	8
Communication and Information Exchange	8
Feedback.....	11
Individual Characteristics.....	13
Age of Worker.....	13
Perceived Competence.....	14
Summary of Factors Found in Literature to Affect Supervisor and Management Support.....	15
CHAPTER 3. THE DIFFERING ROLES OF SUPERVISORS AND MANAGERS.....	17
CHAPTER 4. DESIGN AND METHODS	21
Data Collection	21
Direct Care Worker Characteristics	21
Questionnaire Items, Concepts, and Indices	22
Analytical Strategy.....	25
Data Analysis and Statistical Detail	26

CHAPTER 5. FACTORS FOUND TO AFFECT DCW SATISFACTION WITH SUPERVISORS AND MANAGERS	30
Introduction.....	30
Organizational Characteristics.....	30
Work Design Characteristics	31
Interpersonal Characteristics.....	33
Individual Characteristics.....	34
CHAPTER 6. CONCLUSION	38
Introduction.....	38
Study Limitations	39
Practical Applications of Study Results	41
Supervisor Support	41
Management Support	46
You Can't See the Forest for the Trees	54
Future Research.....	55
APPENDIX A. ADJUSTED ALPHA COEFFICIENTS.....	58
APPENDIX B. BI-VARIATE CORRELATIONS OF ALL DEPENDENT AND INDEPENDENT VARIABLES.....	61
REFERENCES.....	63

LIST OF TABLES

	Page
Table 4.1. Sample Means and Standard Deviations for Organizational, Work Design, Interpersonal, and Individual Characteristics.....	28
Table 4.2. Regression Models Adjusted for Clustering Examining the Effects of Organizational, Work Design, Interpersonal, and Individual Characteristics on Supervisor and Management Support ^a	29

LIST OF FIGURES

	Page
Figure 2.1. Factors identified in literature to affect direct care worker satisfaction with supervision.	16
Figure 5.1. Factors found to affect DCW satisfaction with supervisor support.	36
Figure 5.2. Factors found to affect DCW satisfaction with manager support.....	37

CHAPTER 1

INTRODUCTION

The United States nursing home (NH) industry has struggled for over five decades to make significant improvements in resident quality of care (Zimmerman, 2014; Ingman & Amin 2011). This lack of improvement has contributed to Americans' view of nursing homes as an unwanted form of healthcare services (Yeatts & Cready, 2007; Ingman & Amin, 2011). The negative perception of long-term care has resulted in an industry saturated with culture change initiatives. Unfortunately these initiatives are still attempting to produce high quality care.

Each initiative aimed at changing the culture of nursing homes has focused on the importance of direct care workers (DCWs) (Harrison, Swan & Carillo, 2007). DCW's primary role is to assist residents with activities of daily living and basic clinical needs via personal interactions. Research suggests it is through the work of DCWs that quality health care and its associated negative stigma will be overcome (Yeatts, Cready and Noelker, 2008; Ingman & Amin, 2011). These workers can be viewed as the cornerstones of long-term care, spending an estimated 70 percent to 80 percent of their work hours delivering care to residents (Institute of Medicine, 2008). This requires that the DCW obtain appropriate training and be satisfied and committed to their work. One factor that has been associated with training, job satisfaction and commitment is the DCW's relationship with his/her supervisor (Johnson, 2009; Mintzberg, 1973).

Research suggests that DCW's satisfaction with supervision highly influences their attitudes and performance (Johnson, 2009; Hackett and Lapierre, 2004). Rajesh and Suganti (2013) revealed that satisfaction with supervision positively impacted job

satisfaction. Therkelsen (2003) has noted that an organization's success is associated with DCW's feeling of support from their supervisor. These feelings of managerial support not only impact the employee but have also been shown to have an affect on worker tenure. Supervisor satisfaction was determined by Noelker (2009) to reduce the sizeable average direct care worker turnover rate of seventy-one percent (Institute of Medicine, 2008). Bono et al. (2007) have provided further evidence that a supervisor's leadership continuously affects DCWs' enthusiasm and optimism. Additionally, positive attitudes with supervision were found by Bono, Foldes and Muros (2007) to result in an increased attention to detail and dedication to work by DCWs even when difficulties arose.

Thus, to the extent that DCWs are satisfied with their supervisors, direct care workers are more likely to have positive work attitudes and provide higher quality health care. This highlights the importance of examining factors that contribute to satisfaction with supervision. The purpose of this dissertation is to identify those factors that are associated with DCWs' satisfaction with their supervisors.

CHAPTER 2

ORGANIZATIONAL, WORK DESIGN, INTERPERSONAL, AND INDIVIDUAL FACTORS AFFECTING SUPERVISOR AND MANAGEMENT SUPPORT

A thorough review of the literature found that there are very few studies identifying factors that affect employee satisfaction with supervision. This included an examination of the following indices: AgeLine, Business Source Complete, Health Source: Nursing/ Academic Edition, MEDLINE, Professional Development Collection, PsycArticles, Psychology and Behavioral Sciences Collection, SocINDEX and Vocational and Career Collection. Provided below are factors that have been reported in the literature to affect supervisor support including age, communication and information exchange, feedback, participative decision-making (empowerment), perceived competence, employee training, scheduling, and staffing. These factors have been grouped within four levels: organizational, work design, interpersonal factors and individual factors (Figure 2.1).

Organizational Characteristics

Organizational characteristics are found at the broadest level of the nursing home infrastructure. Two organizational characteristics reported to be important to employee satisfaction with supervisor support are employee training and level of staffing.

Employee Training

Ingman and Amin (2011) conducted a study of the effectiveness of direct care workers (DCWs) continuing education provided by their employer. Their research identified that the professional development offered by employers did little to promote

the utilization of skills that companies desired. Furthermore, Ingman and Amin (2011) found that although direct care workers were inadequately trained by their employer, DCWs continued to be relied upon for the majority of geriatric patient care.

Studies have shown that workers who receive training from their supervisor tend to feel they are receiving support from their supervisor (Worthington & Roehlke, 1979; Kutsyuruba 2003). Given these findings it is reasonable to suspect that workers who are given the opportunity to receive training will be happier with their supervisor. Further support of these findings is found in a research study conducted by Valentine in 2009. He found evidence that professional training for employees was positively related to an employee's satisfaction with his or her supervisor. Additionally, results from this study showed that employees who received hours of continuing education from their employer had increased perceptions of individual workplace contributions and felt more personally connected to their organization as a whole.

Similar findings were found by Kutsyuruba in his 2003 study of high school teachers. He demonstrated that supervisor-led trainings directly related to the employee feeling that he/she was receiving support from his or her supervisor. Kutsyuruba explained that the teachers believed that their supervisor was investing in the development of their professional careers. Further, Tesfaw and Hofman showed in their 2014 study of teachers that supervisors who did not personally provide professional development to their employees were viewed by the teachers as not providing employee support. Consequently, the teachers involved in this study expressed dissatisfaction with their supervisor's support.

Staffing

Unruh (2008) conducted a review of the literature with the purpose of identifying specific outcomes resulting from various levels of hospital nurse staffing. In Unruh's review, 117 studies were identified that examined hospital staff between 1980 and 2006. Unruh found that employees were more likely to be dissatisfied with their employer when staffing levels were considered insufficient. Further, a 2007 article by Harrington, Swan and Carillo revealed that over 90% of American nursing homes are inadequately staffed (USCMS, 2001). Inadequate staffing has been established as a predictor of increased work related pressure and misery (Räikkönen et al., 2007; Chapel & Novak, 1992) and consistently demonstrated an increase in adverse events for employees and clients (West et al., 2012; Cohen-Mansfield, 1995; Räikkönen et al., 2007; Johnson-Pawlson & Indeld, 1996; AARN, 1997; Dellefield, 2000; Kovner & Harrington, 2002; Harrington et al., 2000a, 2000b; Akinci & Krolikowski, 2005; Hickman et al., 2003; Harrington, 2005).

A work environment where employees feel overworked and understaffed may lead to staff burnout and significant reduction in employee satisfaction including satisfaction with supervision (Kelly & Moen, 2007). Thus, it is reasonable to suspect that employees, who are working in an understaffed environment, will be less likely to be satisfied with management since it is management that establishes the staffing levels. Unfortunately, there is very little reported research on the relationship between staffing and its affect on perceived supervisor support.

Work Design Characteristics

Work design characteristics are determined by organizational leadership and include the encouragement of employees to make work related decisions that improve “day to day” processes and positively impact customer care. There are two work design factors found to influence an employee’s satisfaction with their supervisor’s support: work scheduling and participative decision making.

Scheduling of Work

Swanberg et al. (2011), found that as workers are more satisfied with their work schedule their perception of supervisor support increases. An employee’s satisfaction with his/her work schedule is directly affected by the opportunity to make suggestions on when and how long he or she will work. Employees who are denied the opportunity to make work schedule changes and suggestions develop strong negative feelings toward their employer and are significantly less satisfied with their supervisor (Kelly & Moen, 2007; Swanberg et al., 2011).

Front-line workers generally have little control over their work schedules (Swanberg et al., 2011; Kalleberg, 2009; Lambert, 2008). It is common practice for hourly workers to not have an opportunity to select preferred weekends off or make modifications to their work assignments. These working limitations are driven by an organizational expectation to limit labor costs and are implemented by the front-line supervisor (Swanberg et al., 2011; Swanberg et al., 2008). Most organizational structures delegate authority to modify subordinate work assignments and schedules to direct supervisors (Kelly & Kalev, 2006; Kossek, Lautsch, & Eaton, 2005; Lambert & Waxman, 2005). These alterations to the work schedule are considered permissible as

Kelly and Moen (2007, p. 490) have stated, “even when written, formal policies are in place in the organization.” Because schedule modifications are generally at the discretion of individual supervisors, satisfaction with supervision is affected when DCWs are not satisfied with their assigned work schedule (Swanberg et al., 2011).

Participation in Decision-Making (Empowerment)

Theorists reference the term empowerment in at least two ways. Logan and Ganster (2007, p.1524-1525) have defined psychological empowerment as “the basic belief that [an employee can] effectively influence the course of activities at work so as to produce a significant impact on the quantity and quality of work that is accomplished”. They have defined role empowerment as the “specific management behaviors that encourage and provide more decision-making authority to the employee (Logan & Ganster, 2007). For the purposes of this dissertation, *empowerment* will include both psychological empowerment and role empowerment.

Empowerment is a leadership philosophy, which encourages the transfer of some amount of management decision-making authority to subordinates (Gorski & Belfry, 1991; Randeniya, Baggaley, & Rahim, 1995). Empowered employees are encouraged by organizational leadership to independently make decisions and resolve work related concerns. Britt and Gleaves (2011) found that employees who participate in organizational decision-making are more satisfied with their supervision and more motivated to work towards an organization’s mission.

According to Randeniya, Baggaley, and Rahim (1995), participative decision making (employee empowerment) has been extensively considered as the mechanism responsible for employees, at any level, contributing to and making manager-level

decisions. The more an employee feels that he or she is in a genuine and collaborative relationship with organizational leadership, the higher the satisfaction with supervision (Britt & Gleaves, 2011; Farmer, 2011). Furthermore, Farmer (2011) found that employees' negative attitudes towards their supervisor were increased when few opportunities were offered to subordinates to make decisions.

Interpersonal Characteristics

The interpersonal characteristics of an organization refer to communication between organizational leadership and the employee as well as the interrelationship between employees. There are two variables at this level that have been associated with employee satisfaction with his/her supervisor's support.

Communication and Information Exchange

Communication and information exchange describe how individuals within organizations transfer knowledge, company data and support to one another. Both are considered a critical component of organizational success (Steiner, 2008). Communication and information exchange are so critical to an organization's success that even the most successful companies must reevaluate their practices of employee notifications to ensure the most effective methods of information transfer are practiced (Steiner, 2008). A survey of 789 administrators, case managers and supervisors indicated that satisfaction with supervision was related to respectful communication between supervisors and subordinates (Hanna & Potter, 2012; Lietz, & Rounds, 2009). Clark et al. (2008) conducted a study of 1,000 front-line workers, supervisors and managers in 14 counties throughout the state of California with the goal of analyzing the perceptions of supervision within the child welfare system. As part of their study they

found that dissimilar views between employee and organizational leadership with regard to effective supervisory communication led to dissatisfaction with supervision. Further, they found that supervisors and those subordinates directly reporting to them had different views of what should be communicated between managers and direct reports. Managers gave a high priority to communicating the organization's mission in addition to informing employees of organizational behavior expectations as essential to effective supervision. Alternatively, subordinates gave high priority to communication of job-related details and employee advocacy. Clark et al. (2008) found such communication as critical components of satisfaction with supervision. To the extent that there were divergent views between subordinates and their supervisors there was a negative impact on satisfaction with supervision (Clark et al., 2008)

These findings are supported by the motivating language theory (MLT) as introduced by Jeremiah Sullivan (1988). This theory explains that communication between supervisors and subordinates has positive and measurable impacts on subordinates' satisfaction with supervision (Sullivan, 1988). Motivating language theory indicates that satisfaction with supervision is impacted by a supervisor's ability in three distinct communication areas (Sullivan, 1988; Sharbrough & Simmons, 2006; Mayfield, Mayfield & Koph, 1998).

These include clear communication of:

- Tasks, roles and rewards
- Organizational culture and rules
- Leader-led praise, critiques and sharing of personal feelings

Further, Sharbrough (1998) and Sharbrough, Simmons and Cantril (2006) found that there was a significant and positive relationship between a supervisor's use of motivating language and satisfaction with supervisor. Worthington and Roehlke (1979) also found that positive affirmations from supervisors to their employees resulted in increased satisfaction with supervision. McCroskey (1981) conducted a four-sample investigation of 420 front-line workers, supervisors and upper level managers employed across various industries with the purpose of examining the effect management communication style had on subordinates as it related to supervisor and executive leadership. While his findings support previous research of the positive association of management communication style with employee satisfaction he also found that supervisors and upper level management were "differentially predictive" (McCroskey, 1981, p. 9) of employee satisfaction.

Mikkelson, York and Arritola (2015) conducted a study of 276 supervised employees from various vocations. The purpose of their research was to assess how organizational leadership practices may affect subordinate satisfaction outcomes. From their research they concluded that subordinates desire productive information exchange with organizational leadership. Furthermore, they concluded that when supervisors and management communicate effectively with subordinates, the subordinate's positive view of organizational leadership increases (Myers & Kassing, 1998; Mikkelson, York and Arritola, 2015). Thus, effective leadership (supervisor and upper-level management) communication with subordinates and constructive information exchange is expected to improve the supervisor – direct report relationship.

Feedback

The process of how to provide effective feedback has developed overtime. Organizational feedback has evolved from the simple application of serving the “feedback sandwich” into a more sophisticated approach that targets behavioral modifications through feedback loops. (Molloy, 2010; Boud, 2015; Boud & Mollo, 2013). Feedback has been defined by Boud (2015, p. 4) as “a process whereby [individuals] obtain information about their work in order to appreciate the similarities and differences between the appropriate standards for any given work, and the qualities of the work itself, in order to generate improved work”.

Historically considered a one-way communication from manager to subordinate, feedback is now being considered as a means to improve employee satisfaction with supervision (Westberg & Jason, 1993; Swank, 2015; de Kleijn et al., 2013; Bernard and Goodyear, 1998; Heckman-Stone, 2004). As Claiborne and Goodyear (2005, p. 209) have stated, “feedback... has two essential functions, information and influence. Furthermore, feedback sends a personalized message from giver to receiver concerning specific behaviors and increases the probability of valued behaviors to be repeated (Claiborn & Goodyear, 2005; Swank & McCarthy, 2015). Effective feedback is considered an essential component of positive organizational outcomes due to its positive impact on employee trust, motivation and creativity (Baker et al., 2013).

Ashford and Tsu (1991) conducted a field study of 387 managers with the goal of analyzing managerial effectiveness. Memon et al. (2014) conducted a comprehensive review of the literature and found that supervisor feedback was one of two factors affecting postgraduate student’s degree of satisfaction. They found that employees

valued supervisor feedback more than subordinate and colleague feedback. Westberg and Jason (1993) found that employees were more likely to be satisfied with their supervision when feedback processes were used instead of other informative methodologies, such as didactic instruction. Westberg and Jason discussed in their book, *Fostering Reflection and Providing Feedback: Helping Others Learn from Experience* that ineffective feedback can stagnate employee growth and development while effective feedback can accelerate employee growth and development. They further explained that while feedback is a valuable management tool it is often not provided by supervisors or is overlooked, untimely or insufficient.

Also important is the type of feedback a supervisor provides. Feedback has four central themes. It can be descriptive, evaluative, emotional and interpretive (Claiborne & Goodyear, 2005). Each feedback component can be categorized as negative feedback or positive feedback (Swank & McCarthy 2015). In examining the effectiveness of the counselor feedback training model, Swank and McCarthy (2015) conducted a study of 68 counseling students. They found that 93% of the study's participants found feedback most beneficial when constructive (negative) and positive feedback communications were balanced. When a greater emphasis is placed on either constructive or positive feedback the recipient is more likely to develop an inaccurate perspective one's work successfulness which directly impacts feedback effectiveness and feelings of satisfaction with supervision. (Swank & McCarthy, 2015; Claiborne & Goodyear, 2005).

de Kleijn et al. (2013) conducted a study that included 1,016 graduate students being supervised for masters thesis completion with the purpose of understanding how feedback is received during one-to-one, in person meetings.

They concluded that students had greater satisfaction with supervision when feedback from supervisors was perceived to be positive and personal (Coleman, Kivlighan, and Roehlke, 2009; Swank, 2015). Furthermore, in Bernard and Goodyear's book *Fundamentals of Clinical Supervision* (1998) they conclude that the frequency and sufficiency of feedback affects the subordinate's view of his/her supervisor. Fewer feedback sessions by the immediate supervisor was negatively associated with an employee's perception of satisfaction with supervision (Heckman-Stone, 2004; Bernard and Goodyear, 1998).

Individual Characteristics

Individual characteristics include age and the self-assessment variable, perceived competence.

Age of Worker

A 2009 study conducted by Noelker found that age was an important factor in determining satisfaction with supervision in nursing homes. Survey results indicated that older workers were significantly more likely to be satisfied with their supervisor than younger workers. These findings are supported by Herzberg's two-point theory (Hazer, 1976). This theory states that greater satisfaction is found in work as a direct result of realistic expectations for one's job. Realistic work expectations develop as a function of time after working for various organizations. Therefore, as the worker ages and learns from different employment opportunities his or her expectations for work are modified to match his or her experiences. Furthermore, as the worker learns what he or she likes in a supervisor and manager, he or she will gravitate towards those supervisors and managers of preference. Older workers have had more time for this accomplishment.

This progressive change of work expectations leads to the development of work goals that are more attainable and directly results in greater work satisfaction (Hunt & Saul, 1975).

Perceived Competence

Employee competence and training are closely related but are clearly two distinct concepts (Räikkönen et al., 2007; Tzeng, 2004). While training focuses on teaching employees new skills and knowledge, employee competence refers to the employee's current level of skill and knowledge. As employees gain job skills and knowledge through training their perceived competence increases (Räikkönen et al., 2007; Tzeng, 2004).

Perceived competence relates to an informal self-assessment in the areas of effectiveness, skill and productivity (Fuller, 2014 ; Boekaerts, 1991). More specifically, Fuller (2014; pp. 4690-4693) and Boekaerts (1991; pp. 1–17) defined it as: “one's awareness, beliefs, expectancy, or understanding of abilities, skills, or capacities to be effective in interactions with the environment”. Simply put, perceived competence is a series of “I can” statements based on an individual's belief that he or she has the effective skills, knowledge and abilities to meet the requirements of a specific situation (Fuller, 2014).

Perceived competence has been linked to satisfaction with supervision. In a study of 214 social workers, Ben-porat and Itzhaky (2015) found that competence and satisfaction with supervision were positively related. Social workers who reported higher levels of professional competence were more satisfied with supervision (Ben-porat & Itzhaky, 2015). Similarly, Cohen and Laufer found that the positive relationship between

satisfaction with supervision and perceived professional competence was statistically significant. The explanation for this relationship appears to be that an employee's confidence to effectively achieve professional obligations is facilitated by his or her supervisor. As competence grows, satisfaction with his or her supervision also grows (Cottrell, 1990; From, 2013).

Summary of Factors Found in Literature to Affect Supervisor and Management Support

Eight factors have been shown in literature to affect direct care worker satisfaction with supervisor support. Each factor has been categorically grouped. Organizational factors include employee training and staffing. Typically the employer, with little employee input selects the content/ topic of employee professional development and staff to patient ratios. Work design is comprised scheduling and feelings of empowerment. Traditional organizational structure does not involve front-line employees in scheduling decisions. Employee feelings of empowerment are encouraged when subordinates are granted the authority to make decisions that are historically associated with organizational leadership. Interpersonal communication factors include information exchange and feedback. According to Mayfield and Mayfield (2010, p. 407), "Leader communication competence is indisputably one of the most powerful influences in the workplace". Lastly, Individual factors are those characteristics that are personal and unique to each individual worker. Perceived competence and age are included within this category.

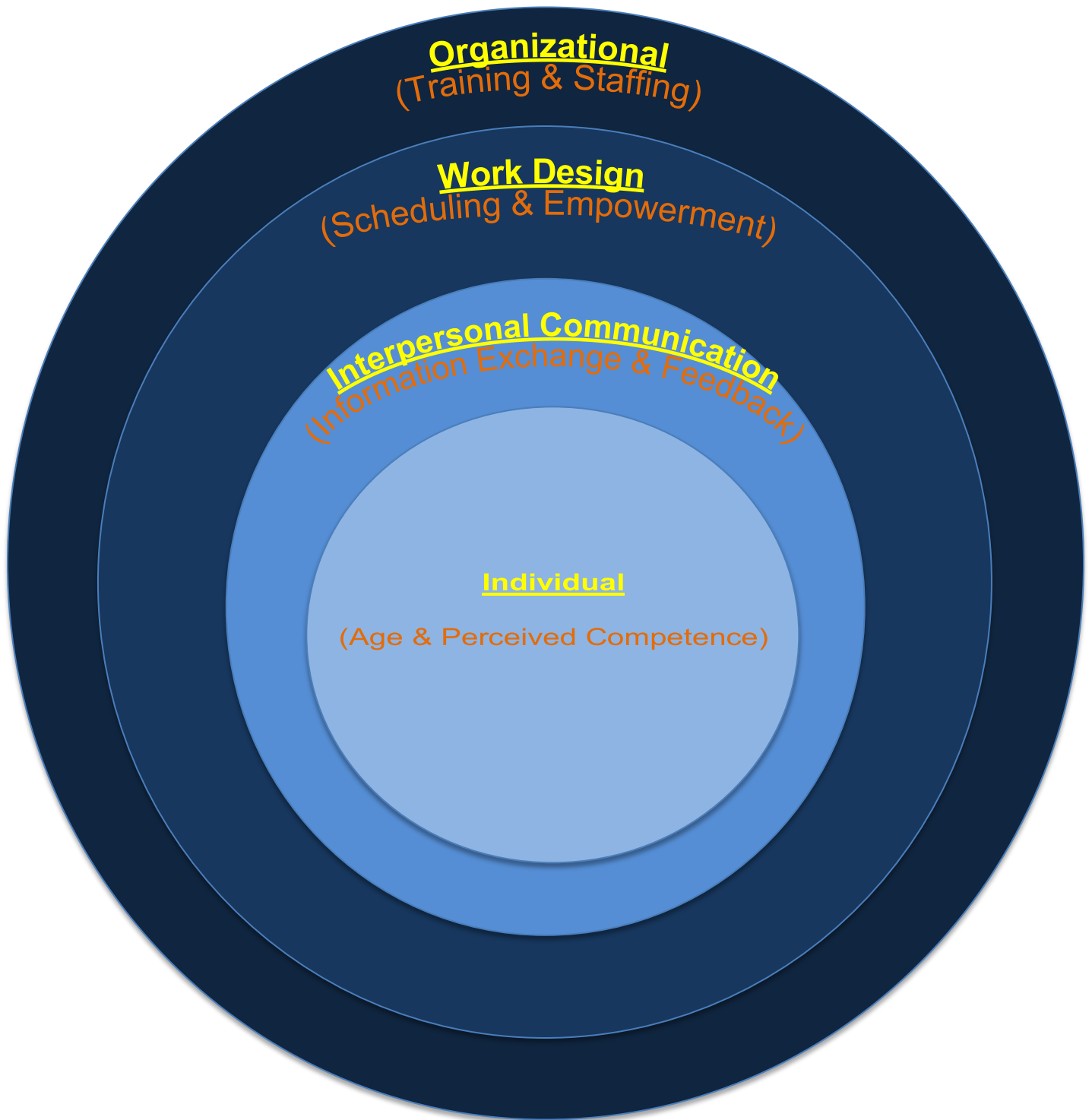


Figure 2.1. Factors identified in literature to affect direct care worker satisfaction with supervision.

CHAPTER 3

THE DIFFERING ROLES OF SUPERVISORS AND MANAGERS

Supervisors and managers have different responsibilities and are positioned at different levels within an organization. These differences foster relationships with different levels of staff. Consequently, the factors affecting satisfaction with supervisors and managers may vary to some extent.

Managers have a higher rank than supervisors. They are the top-level executives who create the vision and goals for a company. Job titles for managers vary depending on the organization. Some common titles for senior management are, Chief Executive Officer, Executive Director, President, Vice-President and Chief Financial Officer. These high-ranking positions are tasked with developing the overall vision of an organization, strategically planning short-term and long –term objectives and ensuring that organizational goals are achieved through the development of corresponding policies and procedures. (Hartzell, 2016). Although the leadership decisions of managers overarch an entire organization, such as acceptable wages, policies and allocation of resources, the majority of their interactions and work relationships are with other managers or supervisors not front-line workers (Lord & Maher, 1991). For example, it is common for senior managers of large companies to not know the names of most of their front-line staff (Brown et al., 2005). Therefore the perceptions of executive leadership by front line workers may not be the result of direct contact with upper level management but rather based on the decisions executive leaders put in place (Dalal et al., 2011).

Dalal et al. (2011) have conducted a four-sample study of employee satisfaction with middle level and upper level management. They defined “employee satisfaction

with management [as] an attitude” (p. 186) and defined “satisfaction with management as a set of judgments, by employees, about the employee relevant behavior of management above the level of immediate supervision” (Dalal et al., 2011, p. 186).

Employee satisfaction with upper level management is more likely to be associated with an employee’s perception of organizational fairness. Frontline workers who believe they are employed with an organization that upholds its policies and practices impartially are more likely to equate their satisfaction with the overall organizational climate to their satisfaction with executive leadership. This may be due to the designation of specific responsibilities as it relates to organizational structure. Employees may associate upper level management as representing the organization as a whole with the ability to impose more powerful changes than their immediate supervisor. Further, if employees are not able to distinguish whether their immediate supervisor’s behavior is a function of individual autonomy or imposed by upper management control, then dissatisfaction with supervision may be inappropriately experienced.

Supervisors, on the other hand, report to managers and directly lead front-line workers. Sometimes considered middle managers, supervisors serve as a liaison between managers and front-line workers. As Chen and Scannapieco explain in their study of child protective services workers, supervisors serve as an organizational “overpass” for frontline workers and executive management. By this, they mean that supervisors have the critical responsibility of teaching and promoting organizational culture (Chen & Scannapieco, 2010). As a result, supervisors are more visible to direct-care workers than upper management and have more opportunities to build deeper

relationships with front-line staff. Direct-care workers directly report to supervisors. Their requests for time off and schedule changes must have their supervisor's approval before any adjustments can take place. The supervisor is also responsible for interdepartmental communications that improve work processes. Dalal et al. (2011) have described these distinct differences between supervisors and upper level management in their study of Lebanese and American workers. They have noted: "the differences in satisfaction with management differs from satisfaction with the immediate supervisor because management, unlike the immediate supervisor is viewed by employees as the organization's collective system of authority" (Dalal et al., 2011 p. 186).

Leadership style has been shown to influence employee attitudes towards supervision. (Brown et al., 2005). One leadership style that was demonstrated to affect employee satisfaction with supervision is ethical leadership. Brown et al. (2005, p. 120) have defined ethical leadership as "the demonstration of normatively appropriate conduct through personal actions and interpersonal relationships, and the promotion of such conduct to followers through two-way communication, reinforcement, and decision-making." Brown et al. (2005, p. 118) conducted seven interconnecting surveys of undergraduate students, graduate students and employees with the purpose of "[laying] the necessary conceptual and empirical groundwork that might advance knowledge about ethical leadership." In their study they found that ethical leadership was positively associated with feelings of satisfaction with supervision. Furthermore, Brown et al. (2005) found that ethical leadership was a strong predictor of subordinate satisfaction with leadership and leadership effectiveness. Escobar (2015) conducted a

study of 126 mental health employees with the purpose of examining how employee satisfaction is affected by leadership style. His results support the findings of Brown (2005). His research suggests that transformational leadership has a significant positive affect on supervisor satisfaction while passive avoidant styles of leadership have a negative affect on employee satisfaction with supervision.

The supervisor – subordinate relationship has long been considered a critical alliance for not only employee satisfaction but for organizational success.

The importance of the supervisor has been noted by Chen and Scannapieco (2010) who found it to be more effective than ample training at creating employee satisfaction (Chen & Scannapieco, 2010; Kleinpeter et al., 2003; Scannapieco & Connell-Carrick, 2007). However, Dalal et al. (2011) have disputed these findings as a result of their research study of American and Lebanese professors and university student workers. They found that it was satisfaction with executive leadership that produced the most meaningful employee satisfaction rather than direct supervision (Dalal et al., 2011).

Due to the differences in relationships that managers and supervisors form with direct-care workers it is expected that the factors that affect DCWs' attitudes towards supervisors may be somewhat different than the factors that affect their attitudes toward management. Unfortunately, no previous research was found that has made the comparison between these two types of organizational leaders with regard to direct-care worker attitudes.

CHAPTER 4

DESIGN AND METHODS

The purpose of this study is to identify factors that are associated with DCW's satisfaction with supervision and management. Detailed below is a description of how data were collected, the direct care workers who responded to the questionnaire for this study, and an explanation of each questionnaire item and technique used for data analysis.

Data Collection

Data for this analysis were obtained from a 2007 employee empowerment study in nursing homes conducted by Yeatts and Cready (2007). The study used responses from 372 self-administered questionnaires of CNAs and nurses working within 11 nursing homes in north Texas. Survey sites were selected to allow for variation in size, resident income level, private versus nonprofit status and location (rural, urban and suburban). The questionnaires were primarily distributed and collected at each NH during an all staff meeting between the years 2002 and 2005. Absent nurses and CNAs were contacted by a member of the research team and offered an opportunity to complete the questionnaire. The DCW response rate was 78%. In *Consequences of Empowered CNA Teams in Nursing Home Settings*, Yeatts and Cready (2007), provide a comprehensive description of the procedures used for data collection.

Direct Care Worker Characteristics

The majority of the direct care worker participants for this study had a high school education, were between 30 and 39 years of age, identified as non-White and were women. More specifically, participants had an average of 11.9 years of education, with

an average age of 36 years, 52% identified as non-White and 88% of the respondents were women (Table 4.1).

Questionnaire Items, Concepts, and Indices

The questionnaire was composed of statements to which DCWs indicated their agreement by selecting an option on a 5-point Likert-type scale. The Likert-type scale ranged from *strongly disagree* (1) to *strongly agree* (5). Many of the likert-scale statements were derived from previous studies that measured and validated the concepts (see Yeatts & Cready 2007, for details). When statements from previous studies were not found, questionnaire statements were developed and pretested at a nursing facility to develop validity. A factor analysis was used to determine if the questions were correlated together. Alpha coefficients were also calculated to examine how well the questions were correlated. Further, in some cases, previous statements were modified to reflect the nursing home setting (e.g., using “resident” instead of “recipient”).

There are 8 independent variables and two dependent variables in the study. The majority of concepts analyzed used multiple survey statements to create representative indices (see Appendix A for all statements used). The dependent variables are: (1) satisfaction with supervision and (2) satisfaction with management. The statements used to measure satisfaction with supervision include: “The charge nurse listens to the suggestions of the CNAs.”, “When CNAs make suggestion on how to do the work, charge nurses consider their suggestions seriously.”, “I can trust the charge nurses I work with to lend me a hand if I need it.” The statements used to measure satisfaction with management include: “When CNAs make suggestions on how to do their work, the

management staff (such as the Administrator or the DON) consider their suggestions seriously.”, “I can trust the management staff (such as the Administrator or the DON) to lend me a hand if I need it.”, “The management staff (such as the Administrator or the DON) listen to the suggestions of the CNAs.”

The independent variables have been grouped according to their type of organizational or staff characteristic: *Organizational*: (1) employee training and (2) staffing, *Work Design*: (3) participation in decision-making (empowerment), and (4) scheduling, *Interpersonal*: (5) information exchange, and (6) feedback, *Individual*: (7) age of worker and (8) perceived competence. The statements used to measure the independent variables are provided in Appendix A.

Organizational characteristics included employee training and staffing. Various statements were used. For example, employee training was represented by the 2 following statements: “Training is available whenever I need it.” and “Whenever I need training I can get it.” Staffing was measured by the 3 following statements: “Usually, we have enough CNAs working to do a good job.”, “There are usually enough CNAs working to do a good job.”, “Usually, we do NOT have enough CNAs working to do a good job.”

Only one of the work design variables was measured using a variety of statements. For example, participation in decision making/ empowerment was represented by the following 5 statements: “I work with the management staff in making decision about my work.”, “The management staff ask the CNAs for their opinion (or what they think) before making decisions about the CNAs work.”, “CNAs are asked to help make decisions about their work.”, “CNAs work with the management staff in

making decisions about CNA work.”, “Whenever CNA work must be changed, the CNAs are usually asked how they think the work should be changed.” The work design variable, *scheduling*, was measured by a respondent’s selection to the statement “I am not satisfied with the number of days I am given to work per pay period.” Data for this variable were analyzed by coding responses of 1, 2 and 3 as one (1) indicating an employee’s satisfaction with the number of days given to work during a pay period. Responses of 4 and 5 on the Likert-scale for this questionnaire statement were coded zero (0) to indicate staff dissatisfaction with the number of days given to work during a pay period. Thus, scheduling satisfaction is analyzed from the context of staff contentedness with the number of days worked during a pay period.

Each interpersonal characteristic was measured using a variety of statements. For example, information exchange, was measured by statements such as: “Nurse aides have to rely on the “grapevine” or rumors for information.” and “When a new resident is admitted, I am given all the information I need about the new resident.”

Finally, individual characteristics were obtained by requesting the DCW participants to provide their age and to respond to statements such as, “I have all the skills and knowledge needed to do a good job and I use them.” Appendix A presents the measured concepts, their components, and the Cronbach’s Alpha for each. The bivariate correlations for all variables considered in this study are provided in Appendix B.

Confirmation of each item’s ability to represent a specific concept was reflected by the standardized Cronbach’s alphas. These ranged from .677 to .796 with most above .700 (see Appendix A). Following the determination of items for each index, the scores for each individual item were added together and then divided by the total

number of items. This computation allowed the index score to remain within the initial range of the individual items (i.e., 1 to 5 or strongly disagree to strongly agree).

Analytical Strategy

The questionnaires were disseminated during the 2007 employee empowerment study in 11 nursing homes conducted by Yeatts and Cready. A listwise removal approach was used for missing cases. This resulted in 20 cases being removed due to a participant's failure to respond to at least one question. The remaining 307 direct care workers' responses were utilized for the completion of the regression analyses. While the questions used to measure the dependent and independent variables for this study are the same as those used by Yeatts and Cready in their employee empowerment study (2007), the aim of this research is unique. Yeatts and Cready have not looked at factors affecting supervisor support, which is the focus of this research.

There was a need to adjust the regression results for clustering via the STATA statistical analysis program. This program was utilized due to all direct care workers in the 2007 research study led by Yeatts and Cready being clustered within one of 11 nursing homes (i.e., 11 clusters). This procedure was conducted to address the potential effects of clustering and to reduce the chances of standard error miscalculations (Yeatts, Seckin, Shen, Thompson, Cready, 2017) (Huang, 2014, p.4).

Also reported are the Beta coefficients, p-values and adjusted R-square values (Table 4.2). Due to the inclusion of multiple independent variables in the data set an adjusted R-squared was used. The adjusted R-squared adjusts the R-Squared statistic for the artificial inflation of R-squared that occurs as the number of independent variables in the regression equation increases.

Data Analysis and Statistical Detail

The sample means and sample standard deviations were calculated for each independent and dependent variable (Table 4.1). The sample standard deviation provides characteristics of the responses. A large sample standard deviation signals that there is considerable variation in the respondents' answers. The sample mean provides the arithmetic average categorically for all DCW responses.

The sample means and sample standard deviations for each variable within the organizational, work design, interpersonal, and individual characteristics constructs are provided in Table 4.1. Detailed below is a discussion of these variables and their relationship to other variables.

Next, a regression analysis was conducted and presented for each dependent variable (Table 4.2). The purpose of the regression analysis is to provide the least biased estimate of the impact each independent variable has on each dependent variable. Furthermore, the regression analysis provides evidence of how (negatively or positively) each independent variable affects satisfaction with supervision and satisfaction with management.

Supervisor support and manager support were measured using a five-point Likert scale. Manager support (3.13) has a slightly lower mean than supervisor support (3.31). Contrastingly, the standard deviation for manager support is slightly higher (0.94) than the standard deviation for supervisor support (0.91).

An examination of the organizational variables (employee training and staffing) indicates that one is much higher than the other. Employee training has the highest

mean at 3.64 and staffing has the lowest mean at 2.81. The standard deviations for the organizational variables were 0.77 for employee training and 1.00 for staffing.

Work design includes two variables, participation in decision making/ empowerment and scheduling. The mean for scheduling was 0.80 with 1= satisfied and 0= not satisfied. Thus, 80% of the direct care workers were satisfied with scheduling. The mean for participation in decision making/ empowerment was 2.64. Each of these variables utilized a Likert scale from 1 to 5, with 1 meaning strongly disagree and 5, strongly agree. The standard deviation for scheduling was 0.41 and for participation in decision making/empowerment, 0.71.

The interpersonal characteristics are comprised of 2 variables; each is measured on a 5-point Likert scale. The mean for communication/ information exchange (3.33) was larger than that for feedback, which was 2.98. The standard deviations for both variables are around 0.80. The standard deviation for information exchange is 0.80 while the standard deviation for feedback is 0.82.

The individual characteristics include 2 variables. Perceived competence was the only variable in this category measured using a five-point Likert scale. The mean for perceived competence was 4.23 and the mean for age was 36.49. The standard deviation for perceived competence was 0.68 and for age it was 11.80. The remaining demographic variables are displayed in Table 4.2.

Table 4.1

Sample Means and Standard Deviations for Organizational, Work Design, Interpersonal, and Individual Characteristics

Characteristics		Sample Mean	Standard Deviation
Supervisor Support		3.31	0.92
Management Support		3.13	0.94
Organizational	Employee Training	3.64	0.77
	Staffing	2.81	1.00
Work Design	Participation in Decision Making/ Empowerment	2.64	0.71
	Scheduling	0.80	0.41
Interpersonal	Information Exchange	3.33	0.80
	Feedback	2.98	0.82
Individual	Age	36.49	11.80
	Perceived Competence	4.23	0.68

Note. All sample means and standard deviations were calculated using the same 307 respondents as used to estimate listwise regression coefficients (see Table 4.2). The higher the mean the higher the score for the characteristic with all variables ranging from 1 (less of the characteristic) to 5 (more of the characteristic), with the exception of age. If respondents did not respond to the variable being studied their responses were removed.

Table 4.2

Regression Models Adjusted for Clustering Examining the Effects of Organizational, Work Design, Interpersonal, and Individual Characteristics on Supervisor and Management Support^a

	Characteristics	Management Support		Supervisor Support	
		Beta (Rank) ^b	p-Value	Beta (Rank) ^b	p-Value
Organizational	Employee Training	0.06 (5)	0.954	0.07 (7)	0.38
	Staffing	0.04 (6)	0.699	0.19 (4)	0.00
Work Design	Participation in Decision Making/ Empowerment	0.17 (3)	0.005	0.29 (2)	0.00
	Satisfied with Number of Work Days ^(c) (0=Dissatisfied) (1=Satisfied)	-0.07 (8)	0.108	0.03 (8)	0.72
Interpersonal	Information Exchange	0.30 (1)	0.000	0.21 (3)	0.03
	Feedback	0.29 (2)	0.000	0.44 (1)	0.00
Individual	Age	0.11 (4)	0.007	0.08 (6)	0.02
	Perceived Competence	0.00 (7)	0.706	0.09 (5)	0.00
Adjusted R ²		0.35		0.55	

^aLevel of significance obtained from multiple regressions adjusted for clustering and using a two-tailed test.

^bBeta scores were obtained from unadjusted OLS regressions because betas cannot be calculated from OLS regressions that are adjusted for clustering. Betas of dichotomous variables are not presented because such variables cannot be increased by one standard deviation. Adjusted R² = coefficient of determination adjusted for number of variables in the regression equation. ^c Equivalent to Scheduling

CHAPTER 5
FACTORS FOUND TO AFFECT DCW SATISFACTION WITH
SUPERVISORS AND MANAGERS

Introduction

The literature states the following hypothesis: Supervisor support is affected by employee age, communication and information exchange, feedback, participative decision-making/ empowerment, perceived competence, employee training, scheduling and staffing. Furthermore, the literature suggests that there may be differences in the factors that affect a worker's satisfaction with a direct supervisor to whom one reports versus a manager who oversees supervisors within an organization. This research has been conducted in an effort to identify those factors that are associated with direct care workers' (DCWs') satisfaction with supervision and management.

Job performance is positively impacted when employees are satisfied with organizational leadership (Johnson, 2009; Hackett and Lapierre, 2004; Bono, Foldes & Muros, 2007). Various research studies identify the positive effects of employee satisfaction with their supervisors and managers; however, there continues to be a shortage of studies identifying the leading causes of worker satisfaction with each. This study is an attempt to close this gap in research by providing insight into what may be associated with the direct care worker's satisfaction.

Organizational Characteristics

Past research suggests that the unique structure and processes used by an organization are associated with employee satisfaction with supervisors and managers. These practices include employee training and departmental staffing. In our analysis

only staffing had an affect and this was on management support (Table 4.2, beta= .19). The current data suggest that organizational characteristics only affect management support and not supervisor support. This may be explained by employees considering staffing as an executive level decision that is beyond the control of their immediate supervisor. Therefore supervisors are viewed as following executive leadership orders for staffing ratios versus creating this standard themselves. Furthermore, the data suggest that employee training is not associated with either managerial support or supervisor support. This does not support the previous findings of Worthington and Roehlke (1979), Kutsyuruba, (2003) or Valentine (2009). It appears that training by itself does not help to establish supervisor support; neither does staffing (Table 4.2). Conversely, these data support the findings of Chen and Scannapieco (2010), Kleinpeter et al. (2003) and Scannapieco and Connell-Carrick (2007 that found employees were more likely to be dissatisfied with their employer when staffing levels were insufficient. In summary, the only significant effect found was staffing on management support. Apparently, DCWs felt that management was making staffing decisions and those decisions affected the their feelings of satisfaction toward management.

Work Design Characteristics

Literature suggested that employee satisfaction with supervisor and manager support was associated with the two work design variables (participation in decision making/ empowerment and scheduling). Our findings partially support the literature in showing a strong relationship between participative decision making/ empowerment and feelings of managerial support (Table 4.2, beta = 0.292) and supervisory support (Table

4.2, $\beta = 0.168$) by the employee. Perhaps DCWs felt management developed and encouraged an organizational culture that values employee autonomy and these feelings affected their satisfaction toward management. Apparently, employees felt supervisors valued their input as it related to improving work operations. However, the current data do not support a relationship between scheduling and satisfaction with supervision and/or satisfaction with upper management. Apparently, DCWs have adapted to the nursing home industry's practice of not including frontline workers in scheduling decisions. These findings support those of Kelly and Moen (2007) and Swanberg et al. (2011). Furthermore, the mean of 0.795, indicates that 80% of the DCWs were satisfied with their current required days at work.

Participative decision-making was found to have a higher association with management support than supervisor support relative to the other variables in each regression. Participative decision-making is the 3rd highest-ranking independent variable for supervisor support and was found to be statistically significant. This result is explained by the research of Britt and Gleaves (2011) and Farmer (2011). Their research found that employee's attitudes towards supervision were increasingly positive as subordinates received opportunities to contribute to their jobs and organization. A higher standing for participative decision making with management may be due to the limited exchanges employees have with upper level leadership resulting in more focused dialogue between these two levels of the organization. In 2011 Farmer conducted research of 149 medium-level security prison workers with the aim of determining whether staff empowerment has an effect on employee burnout, job satisfaction and relationships with supervisors and managers. He found that employees'

negative attitudes towards their supervisor increased when few opportunities were offered to subordinates to make decisions. Furthermore, Myers and Kassing, (1998) and Mikkelsen, York and Arritola (2015) indicated a strong desire for employees to effectively communicate with their supervisor.

Interpersonal Characteristics

Two variables were assessed for interpersonal characteristics. Our findings do support the literature. Both interpersonal variables have a strong association with feelings of management support and supervisor support. Feedback and communication & information exchange were more highly associated with manager and supervisor support than any other independent variables. Information exchange was the most important independent variable for supervisor support. Contrastingly, information exchange ranked 3rd for management support. These differences can be attributed to the differing expectations of information exchange in an organization between leaders at various levels and direct care workers. The data obtained for this study found that DCWs associated supervisor and manager support with clear information exchange. Perhaps DCWs value information exchange from their direct supervisor more than an organizational manager due to the supervisor's understanding of their job responsibilities. Apparently, DCWs work more closely with their direct supervisor than a manager. This may result in more value being placed on communication exchange with a supervisor as a result of a closer professional relationship. Our findings support the work of Mayfield and Mayfield (2010) that found leader communication significantly and positively affected employee feelings of satisfaction. Maybe the DCW study participants were employed with an organization in which positive information exchange regarding

their position was consistently communicated from supervisors and managers to direct reports (Sharbrough, Simmons and Cantril, 2006).

Prior research indicates that feedback from organizational leadership is instrumental in developing positive feelings of supervisor and managerial support by direct care workers. This includes the work of Klejin et al. (2013) and Ashford and Tsu (1991) who found feelings of supervisor and manager support to be positively related to feedback. The current findings indicate that feedback ranked 2nd for supervisor support and 1st for management support. Perhaps the direct care workers felt that executive leadership feedback was generally more positive compared to their supervisor's feedback, which may be more work centered and constructive. Another explanation for our results may be that frontline workers felt a greater value in executive leadership feedback due to their higher organizational position. Compared to the remaining 7 independent variables, feedback had the highest association with manager support while information exchange ranked highest for supervisor support.

Individual Characteristics

Previous research studies have shown a positive relationship between age and supervisor and managerial support. The data obtained through our study somewhat supports this thesis. The average age of respondents was 36.74 years of age. Age was ranked fourth out of the four significant independent variables for supervisor support (Table 4.2, beta = 0.114), while ranked sixth out of the six variables found to affect manager support (Table 4.2, beta = 0.076). Herzberg's two-point theory provides insight into the affect of age on satisfaction with supervision. Because realistic work expectations develop over time and the average age of the DCWs included in this study

approach middle age, this suggests that participants have some work related experience that provided opportunities for the development of practical employment goals (Hazer, 1976). The respondents of this study would therefore, according to Hunt and Saul (1975), gravitate towards supervisors who more closely represent their personal employment goals. On the other hand, our findings do not support a strong association between age and management support.

The previous literature suggested that perceived competence has a positive effect on supervisor and management support (Cotrell 1990; From, 2013). When the data are analyzed we find this variable has a relatively small significant effect on management support (Table 4.2, beta = 0.093). Thus, perceived competence is less likely to positively impact supervisor support than managerial support. That is, our data show that perceived competence is not associated with supervisor support and ranks fifth in its association with manager support. Perhaps, employees who have high levels of perceived competence are more likely to seek affirmation from upper level managers within their organization than from their direct supervisor.

The current data indicates that workers feel supported by supervisors and managers for different reasons. Interpersonal (feedback and information exchange) and work place characteristics (participative decision making) were found to be the most highly associated variables with manager and supervisor support but their rankings varied between the two dependent variables. The statistical significance and high ranking for feedback (1 for manager support and 2 for supervisor support) support an employee's need of affirmation by their employer, which results in strengthening the supervisor/manager-subordinate relationship.

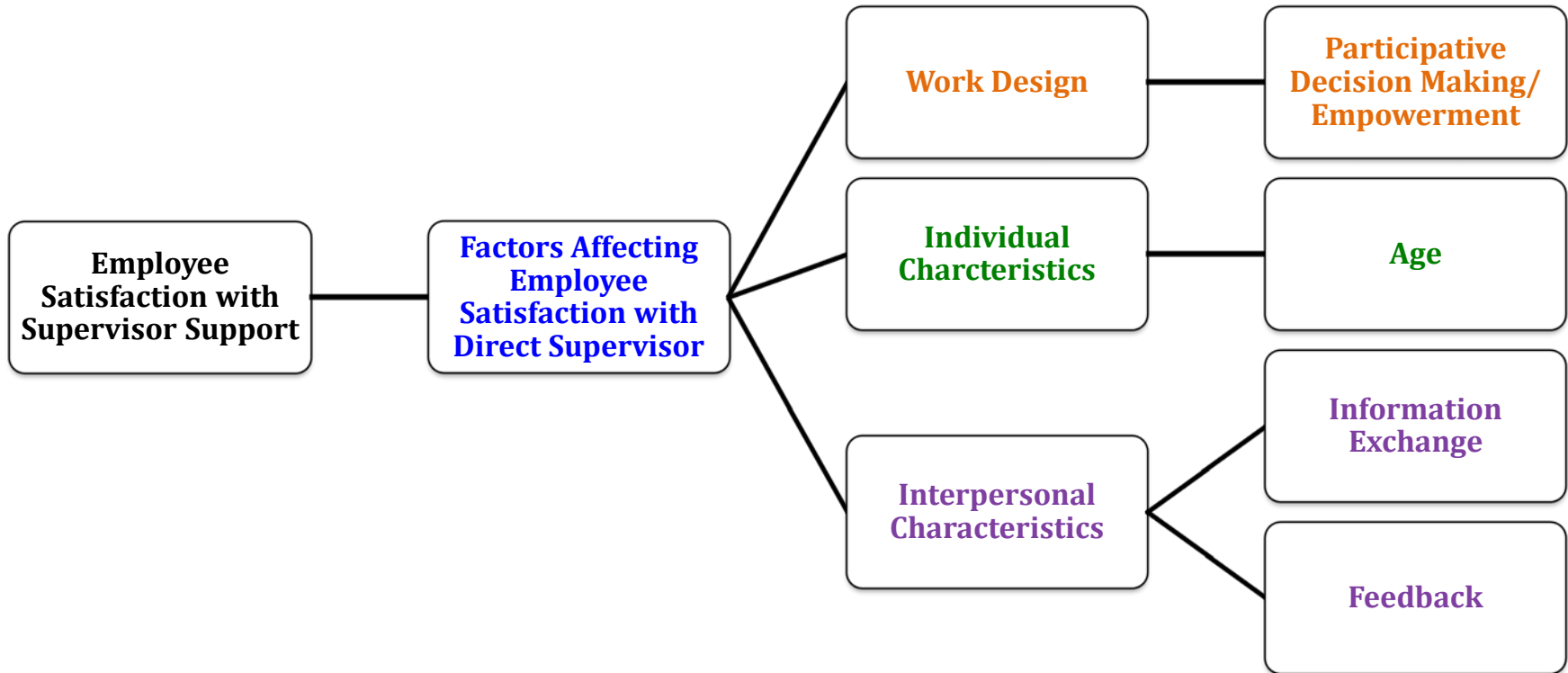


Figure 5.1. Factors found to affect DCW satisfaction with supervisor support.

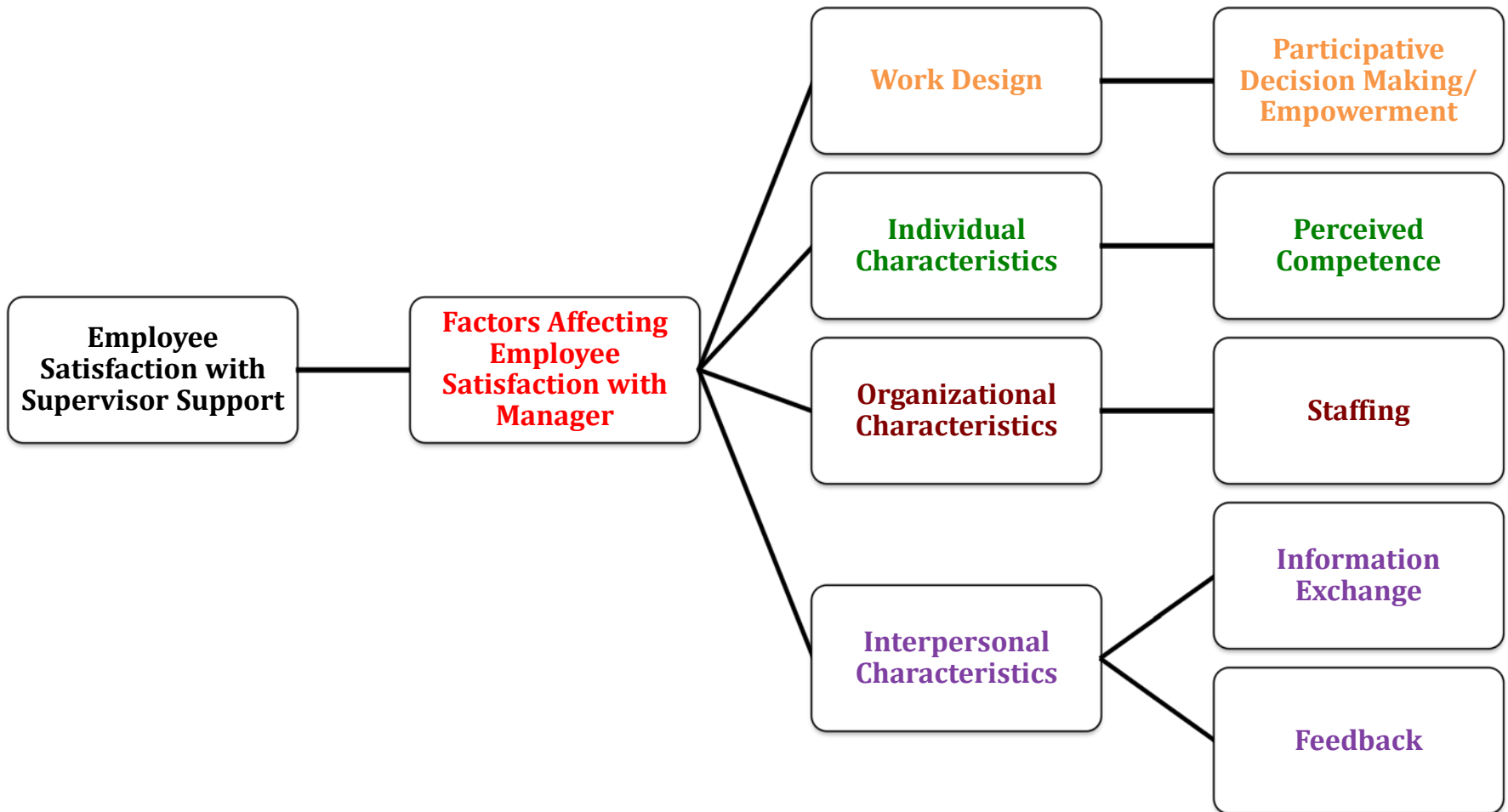


Figure 5.2. Factors found to affect DCW satisfaction with manager support.

CHAPTER 6

CONCLUSION

Introduction

The purpose of this section is to discuss the significance of results, limitations, implications for practice, and suggestions for future research. Direct care workers (DCWs) truly are the frontline of the nursing home industry. They spend the majority of their work shifts providing personal care to residents. Additionally, direct care workers have absorbed the bulk of responsibility for why nursing homes continue to struggle with improving quality assurance efforts. Plagued with high turnover rates due to employee dissatisfaction it is imperative for the nursing home industry to gain empirical evidence on the driving factors of direct care worker's satisfaction. Employee satisfaction with supervision has been linked to increased employee satisfaction and reduced turnover rates. Quality of care in nursing homes cannot significantly improve until the industry leaders understand which specific factors affect direct care workers feelings of supervisor support.

The quality of care provided in nursing homes has a negative perception among past, current and potential clientele. Many researchers note the positive impact supervisor satisfaction has on patient quality of care but there are few studies that identify the specific factors that contribute to supervisor satisfaction. Findings from this study help to identify those factors that could improve satisfaction with supervision and consequently improve perceptions of care provided by staff in skilled nursing facilities.

While this research represents a needed bridge in understanding the causes of supervisor support, there are limitations to its generalizability. The areas of limitation

described below relate to the investigation itself and sampling. It is noted that the provided limitations are not fully comprehensive. Rather, it is an effort to make evident major constraints of the study's findings.

In addition to the limitations, this chapter encourages further research in the field of supervisor support. Many research studies focus on the impact of supervisor support specifically as it relates to employee satisfaction and turnover. However, there are very few studies that address the reasons employees develop perceptions of supervisor support.

Finally, this study claims that employee satisfaction with supervisor and manager support is directly related to employee and patient satisfaction. It has been shown that employees who are satisfied with supervisor support have greater feelings of employee satisfaction overall. Thus, it is possible for patient quality of care to improve and direct care worker turnover to decrease by developing employee initiatives that nurture the factors shown to increase employee satisfaction with supervisor support.

Study Limitations

This study seeks to add information to a limited area of research. While the outcomes of this study are distinctive, limitations are present. The study limitations discussed in this chapter provide the reader with insight to important restrictions of the study's application. Consistent with prior studies (Dalal et al., 2011; Herzberg et al., 1957), satisfaction with management is defined "as pertaining to all levels of management above the immediate (i.e. first-line) supervisor" (Dalal et al., 2011, p.186).

One potential limitation of this study is that manager support is not specifically measured to reflect the various levels of executive leadership. We measured

satisfaction with management support to include all levels of management above that of the direct supervisor. Data collected for executive leadership reflects all levels of upper management. While direct care workers in nursing homes typically have more interactions and relationship building opportunities with their direct supervisors it is important to note that different levels of management above the direct supervisor could present varying levels of satisfaction. For example, the director of nursing may have more contact with direct care workers as the leader of the nursing department than the chief executive officer of the nursing home. This difference in interactions amongst levels of executive leadership, which is not measured in this study, may influence satisfaction with leadership support above that of the direct supervisor.

Another limitation that has the potential to directly influence satisfaction with supervisor and management support is the overall influence of the human resources department. Shroeder (2012) has explained the importance of the human resource department. He has noted that the human resources department is responsible for ensuring policies and procedures of an organization are created and enforced. According to Schroeder, human resource specialists provide the “terms and conditions” (Shroeder, 2012, p .80) of employment and are recognized as an information resource and provider of guidance and support. Further, he states “high quality human resource policies and practices ... promote positive employee-related outcomes such as improved morale, increased engagement, higher productivity and improved retention” (Shroeder, 2012, p. 80). Department supervisors and/or managers generally communicate human resource initiatives. Therefore, it is possible for employees to inappropriately place dissatisfaction with human resource practices towards the

messenger of the information – direct supervisors and/or upper level management. Furthermore, human resources' impact on organizational behavior could affect employee satisfaction with supervision. This study does not take into account the influence of human resources on perceptions of employee satisfaction with supervisor and manager support.

An additional limitation stems from the respondents coming from eleven North Texas nursing homes. Generalizations to the U.S. population cannot be made based on this group. Participant responses could primarily reflect the characteristics of the area and not represent direct care workers perceptions as a whole.

Practical Applications of Study Results

Supervisors and managers play a critical role in the satisfaction of frontline workers. Thus, further insight into the supervisor-employee relationship and the manager-employee relationship are important pieces in optimizing positive organizational outcomes. A better understanding of what affects employee satisfaction with supervisor and manager support is an initial step in attaining this.

Supervisor Support

Frontline Workers Report to Supervisors

On most organizational charts, supervisors are between the DCW and managers. This study found that 4 of 8 independent variables tested had a significant affect on supervisor satisfaction (Figure 5.1). These included: participative decision-making/ Empowerment (Work Design Characteristics), communication and information exchange (Interpersonal Characteristics), feedback (Interpersonal Characteristics) and

age (Individual Characteristics). Notably, satisfaction with supervision was not affected by factors within the organizational characteristic.

The data from this study indicate several practical applications pertaining to employee satisfaction with direct supervisor support. First, this study suggests that employees value autonomy at work. DCWs are more satisfied with their direct supervisor when they are allowed to participate in decisions that affect how their jobs are done. Therefore it would be beneficial for organizations to invest in strengthening the employee – supervisor relationship from this perspective. One way to achieve this is to incorporate leadership development opportunities for individuals with direct reports. Many nurses (LVNs or RNs) who become supervisors of DCWs feel they have little training on how to provide effective leadership (Candela & Bowles, 2008; Smith & Crawford 2003). In a 2008 study of 352 recent nursing graduates, Candela and Bowles (p. 269) found that “respondents were satisfied overall with their preparation regarding skills for practice. They felt least prepared in the areas of management, leadership and organizational skills...” Most nursing schools focus on patient quality of care, dedicating only one semester to nursing leadership and management (Candela & Bowles, 2008). This means that even the most experienced nurse may be ill equipped to become a supervisor. Prior studies indicate the need for leadership development of nurses to prepare them for leading work teams (Fiset et al., 2017; Candela & Bowles, 2008; Smith & Crawford 2003). Companies should invest in programs that include best practices for nurturing employee autonomy through the guidance of supervisors. This represents a big shift from the skill-heavy staff development nursing homes generally provide.

This research study found that communication and information exchange affect employee satisfaction with direct supervisor support. The method in which organizational leaders choose to communicate with employees and share company updates impacts how employees feel towards supervision. Direct supervisors have a key role in organizational communication and information exchange. Immediate supervisors are responsible with connecting front line employees and executive leadership. It is through the immediate supervisor that employees learn how their role specifically supports their employer's mission. Furthermore, direct supervisors are tasked with representing and sharing the ideas and concerns of their subordinates with upper level management. Effective supervisors are those individuals who communicate departmental changes, employee praise/ critiques, company goals and organizational culture using a balanced but personalized approach (Sullivan, 1988; Sharbrough & Simmons, 2006; Mayfield J., Mayfied, M. & Koph, 1998).

Employees want to Build Strong Communicative Relationships with their Supervisor that Allows for Professional Growth

Our data show that when employees are satisfied with the communication and information exchange practices of their immediate supervisor they have increased feelings of satisfaction with leadership support. Research indicates that the most effective leaders use communication techniques that build trust, encourage proactive work behaviors, develop employee skill and talent and motivate employees to accomplish work related goals. This research supports the theoretical framework of Sullivan's (1988) motivating language theory. We found that supervisor communication with DCWs has a positive impact on DCWs' satisfaction with supervisor support. According to Hardy-Vallee (2012), failure within an organization occurs when a greater

consideration is given to rational factors, such as processes and procedures, rather than interpersonal factors that lead to the psychological engagement of workers. It is often said that employees do not leave companies they leave people. Developing organizational systems that promote interpersonal exchanges between supervisors and direct reports can result in successfully improving nursing facility patient care.

Historically nursing homes have attempted to improve the quality of patient care through different initiatives aimed at the direct care worker (DCW; Harrison, Swan & Carillo, 2007). Research shows that, when DCWs are more satisfied with supervision, positive patient care outcomes are attained. Our data provides evidence that DCWs are more satisfied with supervisor support when their direct supervisor provides them with work performance feedback. Research suggests that providing feedback that will result in increased satisfaction with supervisor support requires a supervisor who will communicate performance concerns and accomplishments to employees promptly and comprehensively (Chur-Hansen; McLean 2006). Employee feedback should reflect what the employee has done well and what the employee should improve upon. Additionally, feedback must be offered more than just in the form of a summative annual assessment of employee performance (Chur-Hansen; McLean 2006). Research indicates that feedback positively affects supervisor satisfaction when it is consistent and occurs soon after an employee's behavior is observed (Chur-Hansen; McLean, 2006; Newble & Cannon, 2001; Rolfe & McPherson, 1995).

If positive change is to occur in nursing home patient care the frequency of feedback communicated to DCWs must be changed to include more opportunities for supervisors to share with DCWs their work accomplishments and concerns. In a 2012

study of direct care workers at a community-based child services program, Flood and Luiselli found that when supervisors provided direct reports task related feedback multiple times per week work performance improved. Offering regular and consistent feedback from manager or supervisor to direct reports requires an intentional effort. Additionally, employees who are satisfied with supervisor support not only provide higher quality of resident care but they are also less likely to resign from their positions, thus reducing turnover a significant concern in the long-term care industry (Johnson, 2009; Hackett and Lapierre, 2004; Noekler, 2009; Bono, Foldes & Muros, 2007).

Positive Correlation between Age and Feelings of Satisfaction with Supervisor Support

The older a worker is in age the more likely he or she is to be satisfied with supervision. According to the U.S. Bureau of Labor Statistics older workers are choosing to stay employed beyond traditionally considered retirement age (Tossey & Torpey, 2017). This longer length of employment increases the likelihood of older frontline workers in long-term care. The U.S. Bureau of Labor Statistics estimates that 25% of American workers will be over the age of 55 in the year 2024. By contrast, the labor force in 1994 was comprised of only 11.9% of Americans aged 55 years old and older (US Department of Labor, 2016). The average age of the United States labor force is expected to continue an upward climb (Toossi, 2015).

Older workers offer many benefits to employers and present a great opportunity to reduce the staggering turnover percentages experienced within long-term care. The tenure of workers over the age of 50 is three times longer than that of their younger counterparts (Coombs, 2017). Older workers are less likely to resign from their positions than younger workers, who are still trying to determine their right career match.

Apparently, older workers know what type of supervisor they would like to report to and seek employment from these types of organizations.

Employees over the age of 55 years of age offer employers a wealth of job experience and skill. Companies should develop policies to ensure the transfer of these skills to other workers. A 2014 study of 1,913 human resource professionals conducted by the Society for Human Resource Management found that older workers were 70% more persistent in reaching organizational goals and 59% more dependable than younger employees (SHRM, 2014). Capitalizing on the skills of older workers can significantly improve the quality of care for nursing home residents via an increase in knowledgeable and dedicated tenured staff. Nursing facility leaders should review hiring and retention practices specifically aimed at older workers within their organization to ensure company policies reflect and support aged employees.

Management Support

Management support was associated with at least one factor in each independent variable category (Figure 5.2). Management is comprised of those leadership roles above that of direct supervisor. Managers oversee the overall direction of an organization. Factors affecting satisfaction with management support were staffing (organizational characteristics), participative decision-making/empowerment (work design characteristics), communication & information exchange (interpersonal characteristics), feedback (interpersonal characteristics) and perceived competence (work design characteristics). Five of the eight independent variables analyzed affected satisfaction with management support.

The data from this study indicate that feelings of management support are positively associated with departmental staffing. Previous research indicates that staffing levels positively affect patient and staff success rates (Yu & Kim, 2015; Garland, A. & Gershengorn, 2013). Therefore, organizational policy pertaining to per patient staffing has practical implications. Improved corporate policies could result in staffing changes that better suit achieving organizational goals. Yu and Kim found in a 2015 study of a Korean surgical unit that increasing staffing levels by just one registered nurse above the government recommendation lead to improved nurse job performance evaluations, quicker patient recovery times, and reduced overtime hours worked. Additionally, Garland and Gershengorn (2013) conducted a study on registered nurse staffing levels in acute care hospitals. They found an association between high registered nurse staffing levels and reduced adverse patient outcomes, including mortality. This data signifies the importance of nursing facilities regularly evaluating organizational staffing to appropriately respond to resident needs. One way to achieve this is through organization leaders developing actionable and beneficial staffing policies.

Implementing higher staffing of certified nursing assistants in nursing homes does not come without specific challenges. Hiring and retaining experienced and skilled direct care workers continues to stifle an industry long seeking a solution to patient quality of care concerns. "Nursing homes across the country continue to experience a staffing crisis that can jeopardize quality of care and life for residents" (National Citizens' Coalition for Nursing Home Reform, 2001). The staffing crisis within nursing homes also includes licensed and registered nurses who generally serve as supervisors and

managers. This means that workers in the nursing department may lack supervision as a result of departmental vacancies. In a 2001 consensus statement published on behalf of 31 healthcare agencies, public policy changes, updated professional standards, and employee education were cited as solutions to the long-term care staffing crisis (National Citizens' Coalition for Nursing Home Reform, 2001). Further research is needed to understand the factors affecting staffing in long-term care.

Participative decision-making/ empowerment was found to positively affect not only employee feelings of supervisor support but also employee satisfaction with management support. Abdulai and Shafiwu (2014, p. 1) have explained participative decision-making/ empowerment "has been used interchangeably to mean shared leadership, employee involvement, dispersed leadership, open-book management, or industrial democracy". Employees are more likely to feel valued and respected when managers provide opportunities for subordinates to make decisions about how their work is done and/or assist in developing solutions to organizational challenges. Abdulai and Shafiwu (2014) conducted a study of 80 banking staff with the goal of examining the relationship between participative decision-making and employee productivity. They found that employees who were offered opportunities to share leadership responsibilities with managers were more committed to their employer and exhibited greater productivity. Berridge et al. (2016) conducted a national study of 2,034 long-term care administrators. They learned that increased opportunities for direct care worker empowerment were associated with increased staff tenure. Historically, companies that are committed to employee development, experience higher employee

satisfaction, staff commitment and organizational goal accomplishments (Abdulai & Shafiwu, 2014).

Organizational decisions are generally developed by upper-level management but implemented by lower level staff members (Abdulai & Shafiwu, 2014). The lack of subordinate participation in company decisions related to their job reduces employee buy-in and thus can significantly reduce the impact of a company's change initiative. Another benefit of employee participation in decision -- making / empowerment is that it increases employee's motivation and feelings of respect. In a study of more than 19,000 employees from different countries conducted by the Schwartz, Porath and the Harvard Business Review (2014), leader to subordinate respect was found to be the most significant behavior to impact employee engagement and organizational commitment. Participants who reported receiving respect from organizational leaders experienced 89% greater job satisfaction, 92% greater progression towards work related goals and were 1.26 times more likely to experience positive purpose and value from their jobs (Harvard Business Review, (2014). Furthermore, Porath and Erez (2007) found in 3 experimental studies that, when respect is absent from a work environment, employees are less creative and productive even when they expressed a desire to be more effective.

Yeatts and Cready (2007) provide evidence in their study of certified nursing assistants that empowered CNA work teams are a possible solution for incorporating participative decision making/ employee empowerment opportunities in long-term care. Empowered CNA work teams are comprised of frontline staff who work together to make decisions on various aspects of their work (Yeatts & Cready, 2007). Direct care

workers who participated in empowered work teams demonstrated greater positive resident and organizational outcomes including, improved offerings of person-centered care to residents, improved job performance, increased cooperation between different levels of staff and work system effectiveness (Yeatts & Cready, 2007).

Banaszak-Holl and Hines (1996) suggest inclusion of DCWs on interdisciplinary care plan teams as an option to increase DCW participative decision making/ empowerment opportunities in long-term care facilities. In a study of 250 U.S. nursing homes in 10 states Banaszak-Holl and Hines (1996) found that nursing facilities that provided DCWs participative/ empowerment opportunities through participation in interdisciplinary resident care plan meetings experienced lower staff turnover. CNA's participation in resident care plan meetings requires shifting from the traditional care plan model (Banaszak-Holl & Hines; 1996). Typically, DCWs assist “behind the scenes” when it comes to resident care plans. CNAs provide assessment information to other staff members on resident care needs. Other interdisciplinary staff members at the resident care plan meeting then present the information they provided. This system does not empower DCWs and it also may make it difficult for frontline staff to connect how the information they provided for resident assessments affects their primary job responsibility of providing high quality resident care (Banaszak-Holl & Hines, 1996).

Offering formal opportunities for CNA advancement through the establishment of lead CNA positions can also provide empowerment opportunities for direct care workers through participating in departmental and organizational decisions. A lead CNA is a leadership position that allows direct care workers to have a career ladder for advancement (Meir, 2002). Lead CNAs report to supervisors on an organizational chart

and act as an intermediary between nursing supervisors and direct care staff. (Brannon et al., 2007) conducted a study of 3,039 frontline care staff. They learned that DCWs intent to resign was significantly correlated to lack of opportunity for organizational advancement. The development of a career ladder for CNAs to promote within their organization supports the reduced turnover efforts of the nursing home industry while helping to improve overall job satisfaction of DCWs (Brannon et al., 2007).

Results from this study indicate that direct care workers are more satisfied with managerial support when they feel executive leadership provides sufficient organizational communication and when they receive feedback. Executive leadership can easily be disconnected to frontline staff if most of their communication exchanges occur with department supervisors.

Our data indicate that direct care workers not only want to receive communication from managers but they want to receive performance feedback as well. Upper level management can meet this need of front line employees by embodying the business leadership technique management-by walking-around (MBWA). MBWA is a management approach that involves executive leadership having in-person dialogue with front line workers regarding concerns, performance feedback and recognition. Shra'ah et al. (2013, p. 66) have explained "Management by 'walking around' keeps space-time continuum between the manager and employees and thus develops the employees' positive attitudes towards the work." Further, it offers front line workers a direct line of communication to managers. While the goal of this technique is to promote meaningful communication, Asbury and Staples (1991) and Tucker and Singer (2015) found in two separate studies of healthcare workers that MBWA requires conservative

implication to prevent or limit feelings of intrusiveness by front line workers. Additionally, Tucker and Singer (2015) found that MBWA had the most positive impact on employee productivity when it was associated with a specific, lower-priority work concern. CNA work teams and management making intentional efforts to connect with front line staff provide employable strategies to improve direct care worker satisfaction with manager support.

Our analysis shows that 3 of the 8 independent variables affected both supervisor support and management support. These factors were found within the interpersonal and work design categories. Interpersonal characteristics appeared to have the largest effect among independent variables associated with both employee's satisfaction with supervisor support and employee satisfaction with management support. Apparently workers want to assist and be trusted by all levels of the organization to develop on-the-job solutions. Additionally, workers want to receive performance feedback. Employing consistent communication, feedback and participative decision-making opportunities for frontline workers within organizations is critical as each promote employees to feel as an important part of their organization.

Improving quality of care in nursing homes has been a continuous challenge for the long-term care industry. Many researchers have focused on the direct care worker's level of job satisfaction to improve patient care. This research indicates that it is important for organizations to have a holistic approach to tackle this issue. One way to accomplish this is to implement policies that encourage those factors proven to promote employee feelings of satisfaction with supervisor support at all levels of the organization.

Mayfield and Mayfield (2010) conducted a study of 151 employees in a southeastern United States healthcare facility. The goal of their study was to provide insight into the effects of leader-based communication on organizational outcomes. They found that effective communication provided by organizational leaders played a critical role in attaining positive organizational results (Mayfield & Mayfield, 2010). Our findings supported these results. Additionally, training supervisors and upper level management on how to provide the most effective and timely employee feedback (communication) may also help to improve employee satisfaction with supervisor support. At a basic level, all employees want reassurance of a job well done. Feedback sends the message to employees that their managers not only care about getting the job done but also care about the person responsible for doing the job.

The implementation of these policy changes in the nursing home industry may not come with out challenges. First, nursing facilities would need to tackle the unwanted elephant in each of its organizational rooms - turnover. The nursing home industry is plagued with significant annual turnover. Historically, annual turnover in U.S. nursing homes has ranged from 71% to 400% (Halbur, 1983; Harrington, 1991; Schwartz, 1974; Institute of Medicine, 2008). Banaszak-Holl and Hines (1996, p. 512) explain, "staff turnover in nursing homes is exceptionally high when compared to rates in other types of organizations... In fact, nursing aides often leave homes within months of being employed. Even within the health care professions, [nursing home] turnover rates appear exceedingly high and should be cause or concern." Antwi and Bowblis (2016) conducted a study of California nursing homes. They found that turnover for direct care workers in nursing homes ranged from 50% to over 100% annually (Antwi & Bowblis,

2016, p.6). The lack of consistent staffing is persistent in most nursing homes across the country. This concern results in even the best initiatives to improve employee satisfaction with supervisor and manager support to be rendered ineffective.

You Can't See the Forest for the Trees

This popular saying indicates that success cannot be attained when too much focus is dedicated to the details. It is reasonable to expect that the current challenges facing the nursing home industry from the vantage points of the patient and the employee require both detailed and holistic evaluation. The results from this study provide a beginning into combining these two views. Renowned computer scientist Niklaus Wirth (1983, p. 70) further explains success as “the possible solutions to a given problem [that] emerge as the leaves of a tree, each node representing a point of deliberation and decision”. The connection between improving the quality of care in nursing homes by learning more of the precursors to front-line worker’s satisfaction with supervision is evident. Feedback, participative decision-making, staffing and information exchange represent the emerging “leaves” or solutions to two long standing obstacles for the nursing home industry - employee satisfaction and patient quality of care.

Further research is required in the area of employee satisfaction with supervision and management. At a minimum a more inclusive model for employee satisfaction is needed. It is the argument of this study that further research in the area of factors affecting satisfaction with supervision can lead to positive change in an industry that eagerly awaits a solution.

Future Research

The main objective of this research was to identify factors that contributed to feelings of satisfaction with supervisor support. Many researchers have tackled the issue of the causes and implications of employee satisfaction. Additionally, it is well known that satisfaction with supervisor support results in employee satisfaction. However, very few studies have provided insight into the antecedents of employee satisfaction with supervisor support. Furthermore, the role of management and its influence on positive employee outcomes has not been extensively explored. Dalal et al. (2011), have detailed the importance of learning more about front-line employee's satisfaction with management above the level of direct supervisor due to an incomplete assessment of this construct. They have noted that previous research "paid insufficient attention to the definition and measurement of satisfaction with management. For example, several of these studies (Fryxell & Gordon, 1989; Gordon & Fryxell, 1989; Riordan et al., 1997) measured satisfaction with management using a single item" (Dalal et al., 2011, p.186).

As noted in Chapter 3, the differences between supervisor and management leadership should not be overlooked. There is great value to understanding employee satisfaction by looking at each relationship separately. This study represents a beginning in identifying the different factors that affect employee's perceptions of supervisor and management support. Further research is needed to determine the uniqueness of each leadership type as it relates to subordinates and their satisfaction with leadership support.

Future research is needed to determine additional factors that affect employee satisfaction with supervisor and management support. Understanding the reasons direct care workers have specific perceptions toward organizational leadership could help to positively change the negative perception of the nursing home industry. Additionally, new data based initiatives focused on improving nursing home quality could be developed in response to identifying these factors. Furthermore, additional research in this area supports a whole view of employee satisfaction with supervisor support by considering the preceding factors and its subsequent effects.

Employees want to not only feel considered but included by their employer when organizational decisions are made. Participative decision-making provides a platform for employee involvement, which can result in greater employee commitment and satisfaction. There is great value in studying further the differential impact of participative decision-making between supervisors and managers. The data from this study indicate that more research is needed to understand the contrasting results on factors affecting feelings of supervisor and management support. It is possible that organizational structure, culture, policies and procedures could impact these differences.

Finally, the findings of this study have shown that feedback from supervisors and upper level management are equally critical to employee satisfaction with supervisor and managerial support. Employees want to learn how they are doing not only from their direct supervisors but also from executive leadership. Further, employees desire to receive specific information on how they benefit their department and the overall organization. Mayfield and Mayfield (2010, p. 407) have stated, “ ...Despite the high

value of leader communications, much remains to be discovered, understood, and practiced”. Our findings, in addition to those by Mayfield and Mayfield (2010); Bono, Foldes and Muros, (2007); Boud, (2015); Boud and Molloy (2013); de Kleijn et al. (2013) and Worthington and Roehlke (1979) indicate a need for further research in the area of leader to subordinate communication. Deepening our understanding of the role feedback has on employee feelings of supervisor and management support may assist the nursing home industry with the development of specific strategies that aim to improve employee satisfaction and consequently enhance the quality of resident care.

APPENDIX A
ADJUSTED ALPHA COEFFICIENTS

Dependent Variables: Types of Leadership Support

**Number in parenthesis report the adjusted alpha coefficients.*

Supervisor Support (.754)

- The charge nurses listen to the suggestion of CNAs.
- When CNAs make suggestions on how to do the work, charge nurses consider their suggestions seriously.
- I can trust the charge nurses I work with to lend me a hand if I need it.

Management Support (.804)

- When CNAs make suggestion on how to do their work, the management staff (such as the Administrator or DON) consider their suggestions seriously.
- I can trust the management staff (such as the Administrator or DON) to lend me a hand if I need it.
- The management staff (such as the Administrator or DON) listen to the suggestions of the CNAs.

Independent Variables

**Number in parenthesis report the adjusted alpha coefficients*

Organizational Characteristics

Employee Training (.796)

- Training is available whenever I need it.
- Whenever I need additional training, I can get it.

Staffing (.780)

- Usually, we have enough CNAs working to do a good job.
- There are usually enough CNAs working to do a good job.
- Usually, we do NOT have enough CNAs working to do a good job.

Work Design Characteristics

Participation in Decision-making (Empowerment) (.749)

- I work with the management staff in making decisions about my work.
- The management staff ask the CNAs for their opinion (or what they think) before making decisions about the CNAs work.
- CNAs are asked to help make decisions about their work.
- CNAs work with the management staff in making decisions about CNA work.
- Whenever CNA work must be changed, the CNAs are usually asked how they think the work should be changed.

Satisfied with Number of Work Days

- I am not satisfied with the number of days I am given to work, during a two-week period.

Interpersonal Characteristics

Information Exchange (.677)

- Nurse aides have to rely on the “grapevine” or rumors for information.
- When a new resident is admitted, I am given all the information I need about the new resident.
- When I ask for information related to my work or the residents, I usually get it right away.
- I am given regular updated information on any changes that have occurred with the residents.

Feedback (.703)

- When CNAs make suggestions about their work, someone listens to them and gives them feedback on their suggestions.
- If a CNA suggestion is not used, the CNAs are usually provided reasons why the suggestion is not used.
- CNAs are provided reasons, when their suggestions are not used.

Individual Characteristics

Age of Worker

- Age: _____

Perceived Competence (.677)

- I have all the skills and knowledge needed to do a good job and I use them
- I have all the skills and knowledge I need to do a good job and I use them.

Note: *1Numbers in parentheses report the adjusted alpha coefficients. Nurse aides responded to the statements with either 1 = disagree strongly, 2 = disagree, 3 = neutral, 4 = agree, or 5 = agree strongly

APPENDIX B
BI-VARIATE CORRELATIONS OF ALL DEPENDENT AND INDEPENDENT
VARIABLES

		1	2	3	4	5	6	7	8	9	10
Dependent Variables	1. Supervisor Support	1.00	0.57	0.30	0.30	0.48	-0.02	0.52	0.51	0.18	0.10
	2. Management Support	0.58	1.00	0.39	0.44	0.63	0.10	0.58	0.66	0.18	0.18
Organizational Characteristics	3. Employee Training	0.30	0.39	1.00	0.23	0.37	0.05	0.41	0.39	0.01	0.18
	4. Staffing	0.30	0.44	0.23	1.00	0.37	0.00	0.37	0.36	0.06	0.12
Work Design Characteristics	5. Participation in Decision Making/ Empowerment	0.48	0.63	0.37	0.37	1.00	0.14	0.55	0.62	0.06	0.04
	6. Satisfied with Number of Work Days	-0.02	0.10	0.05	0.00	0.14	1.00	0.08	0.12	0.05	-0.05
Interpersonal Characteristics	7. Information Exchange	0.52	0.58	0.41	0.37	0.55	0.08	1.00	0.53	0.11	0.14
	8. Feedback	0.51	0.67	0.39	0.36	0.62	0.12	0.53	1.00	0.12	0.08
Individual	9. Age	0.18	0.18	0.01	0.06	0.06	0.05	0.11	0.12	1.00	0.10
	10. Perceived Competence	0.10	0.18	0.18	0.12	0.04	-0.06	0.14	0.08	0.10	1.00

REFERENCES

- Abdulai, I.A., Shafiwu, A.B. (2014). Participatory decision making and employee productivity. A case study of community banks in the upper east region of Ghana. *Business and Economic Journal*, 5(3), doi: 10.4172/2151-6219.100099
- Amsbary, J. H., & Staples, P. J. (1991). Improving administrator/nurse communication: A case study of "management by walking around." *Journal of Business Communication*, 28(2), 101.
- Antwi, Y., Bowblis, J. (2016). *The impact of nurse turnover on quality of care and mortality in nursing homes: Evidence from the great recession*. Upjohn Institute Working Paper (pp. 16-249). Kalamazoo, MI: W.E. Upton Institute for Employment Research. doi: 10.17848/wp15-249
- Ashford, S.J. & Tsui, A.S. (1991). Self-regulation for managerial effectiveness: The role of active feedback seeking. *Academy of Management Journal*, 34(4), 251-280.
- Baker, A., Perreault, D., Reid, A. & Blanchard, C.M. (2013). *Canadian Psychology*, 54(4), 260- 268. doi: 10.1037/a0034691
- Banaszak-Holl, J. & Hines, M. (1996). Factors associated with nursing home staff turnover. *The Gerontologist*, 36(4), 512-517.
- Bandura, A. (1994). Self-efficacy. In V. S. Ramachaudran (Ed.), *Encyclopedia of human behavior* (Vol. 4, pp. 71-81). New York: Academic Press. (Reprinted in H. Friedman [Ed.], *Encyclopedia of mental health*. San Diego: Academic Press, 1998).
- Bandura, A. (2006). Adolescent development from the agentic perspective. In F. Pajares & T. Urdan (Eds.), *Self-efficacy beliefs of adolescents* (pp.1-45). Greenwich, England: Information and Age Publications.
- Ben-Porat, A. & Itzhaky, H. (2015). Burnout among trauma social workers: The contribution of personal and environmental resources. *Journal of Social Work*, 15(6), 606–620. doi: 10.1177/1468017314552158
- Bernard, J. M., & Goodyear, R. K. (1998). *Fundamentals of clinical supervision*. Boston: Allyn & Bacon
- Berridge, C. Tyler, D. & Miller, S. (2016). Staff empowerment practices and CNA retention. *Journal of Applied Gerontology*, 1-16. doi: 10.1177/07334648166664204
- Bocknec, G. (1971). Supervision of counseling: An overview. *Journal of Education*, 153, 3-6.

- Boekaerts, M. (1991). Subjective competence: Appraisals and self-assessments. *Learning and Instruction, 1*, 1–17.
- Bono, J.E., Foldes, H.J., & Muros, J.P. (2007). Workplace emotions. The role of supervision and leadership. *Journal of Applied Psychology, 92*, 1357-1367.
- Boud, D. & Molloy E. (2013). Rethinking models of feedback for learning: The challenge of design. *Assessment & Evaluation in Higher Education, 38*, 698-712.
- Boud, D. (2015). Feedback: Ensuring that it leads to enhanced learning. *Clinical Teacher, 12*(1), 3-7. doi:10.1111/tct.12345
- Brannon, D., Barry, T., Kemper, P., Schreiner, A., Vasey, J. (2007). Job perceptions and intent to leave among direct care workers: Evidence from the better jobs better care demonstrations. *Gerontologist, 47*(6), 820-829. doi: 10.1093/geront/47.6.820
- Britt, E. & Gleaves, D. (2011). Measurement and prediction of clinical psychology students' satisfaction with clinical supervision. *The Clinical Supervisor, 30*, 172-182. doi: 10.1080/07325223.2011.604274
- Brown, Michael E.; Treviño, Linda K.; Harrison, David A. (2005). Ethical leadership: A social learning perspective for construct development and testing. *Organizational Behavior and Human Decision Processes, 97*(2), 117-134.
- Bureau of Labor Statistics. *Older workers*. Retrieved from https://stats.bls.gov/spotlight/2008/older_workers/ June 5, 2017
- Candela, L. & Bowles, C (2008). Recent RN graduate perceptions of educational preparation. *Nursing Education Perspective (National League for Nursing), 29*(5), 266-271.
- Chen, S. Y. & Scannapieco, M. (2010). The influence of job satisfaction on child welfare worker's desire to stay: An examination of the interaction effect of self-efficacy and supportive supervision. *Children and Youth Services Review, 32*(4), 482-486.
- Chur-Hansen, A. & McLean, S. (2006). On being a supervisor: The importance of feedback and how to give it. *Australian Psychiatry, 14*(1), 67-71. doi: 10.1111/j.1440-1665.2006.02248.x
- Claiborn, C. D., & Goodyear, R. K. (2005). Feedback in psychotherapy. *Journal of Clinical Psychology, 61*(2), 209-217.
- Clark, S., Gilman, E., Jacquet, S., Johnson, B., Matthias, C., Paris, R., & Zeitler, L. (2008). Line worker, supervisor, and manager perceptions of supervisory practices and tasks in child welfare. *Journal of Public Child Welfare, 2*(1), 3–32. doi: 10.1080/15548730802237304

- Coombs, J. (2017). *Older workers prop up labor market, even as waves of baby boomers retire*. Society for Human Resource Management. https://www.shrm.org/ResourcesAndTools/hr-topics/talent-acquisition/Pages/Older-Workers-Labor-Market-Baby-Boomers-Retire.aspx?utm_content=buffer553c0&utm_medium=social&utm_source=twitter.com&utm_campaign=buffer Retrieved: June 5, 2017
- Cottrell, R.F. (1990) Perceived competence among occupational therapists in mental health. *American Journal of Occupational Therapy*, 44(2), 118-124.
- Dalal, R. Bashshur, M. Credé, M. (2011). The forgotten facet: Employee satisfaction with management above the level of immediate supervision. *Applied Psychology: An International Review*, 60(2). 183-209. Doi:10.1111/j.1464-0597.2010.00431.x
- de Kleijn, R., Mainhard, M., Meijer, C., Brekelmans, M., & Pilot, A. (2013). Master's thesis projects: Student perceptions of supervisor feedback. *Assessment & Evaluation in Higher Education*, 38(8), 1012-1026.
- Elnaga , A. & Amen, I. (2014). The impact of employee empowerment on job satisfaction theoretical study. *American Journal of Research Communication*, 2(1), 13-26.
- Escobar, R. (2015). The relationship between managers' leadership style and employees' job satisfaction in mental health inpatient facilities. *Dissertation Abstracts International Section A*, 75.
- Farmer, J.F. (2011). The effects of staff empowerment on supervisory relations, burnout and job satisfaction: A comparative case study of two American prisons *International Journal of Business and Social Science*, 2(13), 21-27.
- Flood, W. & Luiselli, J. (2012). Supervisory intervention: Improving data reporting by direct-care staff at a child services program. *Child & Family Behavior Therapy*, 34(1).
- Fiset, V., Luciani, T., Hurtubise, A., Grant , T. (2017). Clinical nursing leadership education in long-term care: Intervention design and evaluation. *Journal of Gerontological Nursing*, 43(4), 49-56.
- From, I., Nordström, G., Wilde-Larsson, B., & Johansson, I. (2013). Caregivers in older people's care: Perception of quality of care, working conditions, competence and personal health. *Scandinavian Journal of Caring Sciences*, 27(3), 704-714.
- Fryxell, G.E., & Gordon, M.E. (1989). Workplace justice and job satisfaction as predictors of satisfaction with union and management. *Academy of Management Journal*, 32, 851–866.
- Fuller, S. (2014) Perceived competence. In C. Michalos (Ed.), *Encyclopedia of life and well-being research* (pp. 4690-4693) Springer Netherlands.

- Garland, A. & Gershengorn, H. B. (2013) Staffing in ICUs: Physicians and alternative staffing models. *Chest*, 143(1), 214.
- Gordon, M.E., & Fryxell, G.E. (1989). Voluntariness of association as a moderator of the importance of procedural and distributive justice. *Journal of Applied Social Psychology*, 19, 993–1009. Hambrick, D.C., & Mason, P.A
- Gorski, K.L . & Belfort, M. (1991) Achieving competitive advantage through employee empowerment. *Employee Relations Today*, 8, 213-220.
- Gray, J. A., & Muramatsu, N. (2013). When the job has lost its appeal: Intentions to quit among direct care workers. *Journal of Intellectual & Developmental Disability*, 38, 124-133. doi: 10.3109/13668250.2012.760728
- Hackett, Rick D. & Lapierre, L.M. (2004). A meta-analytical explanation of the relationship between LMX and OCB. *Academy of Management Best* (conference paper).
- Halbur, B. T. (1983). Nursing personnel in nursing homes: A structural approach to turnover. *Work and Occupations*, 10, 381-411.
- Hanna, M.D., & Potter, C.C. (2012). The effective child welfare unit supervisor. *Administration in Social Work*, 36(4), 409-425. doi: 10.1080/03643107.2011.604403
- Hardy-Vallee, Benoit (2012). The cost of bad project management. *Gallup Business Journal*. <http://www.gallup.com/businessjournal/152429/cost-bad-project-management.aspx> (6/4/17)
- Harrington, C. (1991). The nursing home industry: A structural analysis. In M. Minkler and C. L. Estes (Eds.), *Critical perspectives on aging. The political and moral economy of growing old*. Amityville, NY: Baywood.
- Harrington, C., Swan, J. H., & Carrillo, H. (2007). Nurse staffing levels and Medicaid reimbursement rates in nursing facilities. *Health Services Research*, 42(3P1), 1105-1129. doi:10.1111/j.1475-6773.2006.00641.x
- Hartzell, S. (2003). *Management in organizations: Top, middle & low-level managers*. Retrieved from <https://www.slideshare.net/ritchiejaycampugan/differentiate-among-the-three-levels-of-management-and-describe-the-task-and-responsibility-of-managers-at-different-levels-of-the-organizational-hierarchy>
- Hazer, J. T. (1976). Job satisfaction: A possible integration of two theories. *Training & Development Journal*, 30(7), 12.
- Herzberg, F., Mausner, B, Peterson, R.D., & Capwell, D.F. (1957). *Job attitudes: Review of research and opinion*. Pittsburgh, PA: Psychological Service of Pittsburgh.

- Huang, F. (2014). Analyzing group level effects with clustered data using Taylor series linearization. *Practical Assessment, Research & Evaluation* 19(13), 1-9.
- Hunt, J.W. & Saul, P. N. (1975). The relationship of age, tenure, and job satisfaction in males and females. *Academy of Management Journal*, 18(4), 690-702.
- Ingman, S., & Amin, I. (2011). Introduction to the theme issue on sustainable senior living for the 21st century. *Educational Gerontology*, 37(6), 441-449.
doi:10.1080/03601277.2011.570221
- Institute of Medicine. Committee on the Future Healthcare Workforce for Older Americans. (2008) *Retooling for an aging America: Building the health care workforce*. (Rep. No. ISBN: 0-309-11588-4). Washington, DC: National Academies Press.
- Johnson, J. (2009). *The empirical relationship between the level of job satisfaction and the quality of leader-member exchange in engineers and scientists at a government aerospace facility*. (Doctoral dissertation). Retrieved from UMI Dissertation Publishing. (3392349).
- Kalleberg, A. L. (2009). Precarious work, insecure workers: Employment relations in transition. *American Sociological Review*, 74(1), 1-22.
- Kalisch, B., & Lee, K. H. (2014). Staffing and job satisfaction: nurses and nursing assistants. *Journal of Nursing Management*, 22(4), 465-471.
doi:10.1111/jonm.12012
- Kelly, E., & Kalev, A. (2006). Managing flexible work arrangements in US organizations: Formalized discretion or “a right to ask.” *Socio-Economic Review*, 4, 379-416.
- Kelly, E., & Moen, P. (2007). Rethinking the clockwork of work: Why schedule control may pay off at work and at home. *Advances in Developing Human Resources*, 9(4), 487-506. Retrieved from
<https://libproxy.library.unt.edu/login?url=http://search.proquest.com/docview/221131283?accountid=7113>
- Kossek, E., Lautsch, B., & Eaton, S. (2005). Flexibility enactment theory: Implications of flexibility type, control, and boundary management for work–family effectiveness. In E. E. Kossek & S. J. Lambert (Eds.), *Work and life integration* (pp. 243-261). Mahwah, NJ: Lawrence Erlbaum Associates.
- Kula, S. & Guler, A. (2014). Influence of supervisor support on job satisfaction levels: An evaluation of Turkish National Police officers in the Istanbul Police Department. *International Journal of Criminal Justice Sciences*, 9(2), 209-224.
- Lambert, S. (2008). Passing the buck: Labor flexibility practices that transfer risk onto hourly workers. *Human Relations*, 61(9), 1203–1277.

- Lambert, S., & Waxman, E. (2005). Organizational stratification: Distributing opportunities for balancing work and personal life. In E. E. Kossek & S. J. Lambert (Eds.), *Work and life integration: Organizational, cultural, and individual perspectives* (pp. 103-126). Mahwah, NJ: Lawrence Erlbaum Associates.
- Logan, M. S., & Ganster, D. C. (2007). The effects of empowerment on attitudes and performance: The role of social support and empowerment beliefs. *Journal of Management Studies*, 44(8), 1523-1550. doi:10.1111/j.1467-6486.2007.00711.x
- Lord, R. G., & Maher, K. J. (1991). *Leadership and information processing: Linking perception and performance*. Boston: Unwin-Hyman.
- Kutsyuruba, B. (2003). *Instructional supervision: Perceptions of Canadian and Ukrainian beginning high-school teachers* (Master's thesis). Saskatoon: University of Saskatchewan.[Online] <http://library2.usask.ca/theses/available/etd-09052003-134303/>
- Lietz, C. A., & Rounds, T. (2009). Strengths-based supervision: A child welfare supervision training project. *The Clinical Supervisor*, 28(2), 124–140. doi: 10.1080/07325220903334065.
- Maier, G. (2002). Career ladders: An important element in CNA retention. *GN Management*, 23(4), 217-219.
- Mayfield, J., & Mayfield, M. (2010). Leader-level influence on motivating language. *Competitiveness Review*, 20(5), 407-422. doi:http://dx.doi.org/10.1108/10595421011080788
- Memon, M. Salleh, R., Baharom, M. & Harun, H. (2014). Factors influencing the satisfaction of international postgraduate students in the Malaysian context : A literature review and a proposed model. *International Education Studies*, 7(11), 76-83.
- Mikkelson, A., York, J.A., & Arritola J. (2015). Communication competence, leadership behaviors and employee outcomes, in supervisor-employee relationships. *Business and Professional Communication Quarterly*, 78(3), 336–354 doi: 10.1177/2329490615588542 bcq.sagepub.com
- Molloy, E. 2010. The feedforward mechanism: A way forward in clinical learning? *Medical Education*, 44, 1157–9.
- Mueller, W. & Kell, B. (1972) *Coping with conflict: Supervising counselors and psychotherapists*. New York: Appleton-Century-Crofts.
- Myers, S. & Kassing, J. W. (1998). The relationship between perceived supervisory communication behaviors and subordinate organizational identification. *Communication Research Reports*, 15, 71-81.

- National Citizens' Coalition for Nursing Home Reform (2001). Retrieved from http://theconsumervoice.org/uploads/files/issues/Consensus_Statement_Staffing.pdf . June 7, 2017.
- Newble, D. and R. Cannon. (2001). *A handbook for medical teachers* (4th ed.). Dordrecht: Kluwer, 2001. AH Dordrecht, The Netherlands: Kluwer Academic Publishers
- Noelker, L. , Ejaz, F.K., Menne, H.L. & Bagaka, J.G. (2009). Factors affecting frontline workers' satisfaction with supervision. *Journal of Aging and Health*, 8, 85-101. doi: 10.1177/0898264308328641.
- Porath, C. Erez, A. (2007). Does rudeness really matter? The effects of rudeness on task performance and helpfulness. *Academy of Management*, 50(5), 1181-1197. doi: 10.2307/AMJ.2007.20159919
- Pugh, S.D. (2001). Service with a smile: Emotional contagion in the service encounter. *Academy of Management Journal*, 44, 1018-1027.
- Rajesh, J.I., & Suganthi, L. (2013). The satisfaction of teachers with their supervisors' interpersonal communication skills in relation to job burnout and growth satisfaction in southern India. *Management in Education*, 27, 128-137.
- Randeniya, R., Baggaley, N., & Rahim, M. A. (n.d). Total quality management: The need to uncouple empowerment. *Total Quality Management*, 6(3), 215-220. doi:10.1080/09544129550035387
- Rolfe, I., McPherson, J. (1995). Formative assessment: How am I doing? *Lancet*, 345(8953), 837-839.
- Rushton, A. (2005). Formative assessment: A key to deep learning? *Medical Teacher*, 27(6), 509-513. doi: 10.1080/01421590500129159
- Schwartz, A. (1974). Staff development and morale building in nursing homes. *The Gerontologist*, 14, 50-53.
- Schwartz, T. & Porath, C. (2014). The power of meeting your employees' needs. *Harvard Business Review*. Retrieved from: <https://hbr.org/2014/06/the-power-of-meeting-your-employees-needs>. June 7, 2017.
- Shra'ah, A., Rumman, M., Hamour, H., Sha"ar, I. (2013). practicing management "by walking around" and its impact on the organizational commitment in the Jordanian hospitals. *Journal of Management Research*, 5(1), 64-79. doi:10.5296/jmr.v5i1.2740
- Sharbrough, W.C. (1998). *Using motivating language: The impact on perceived effectiveness of cadet leaders in a military college*. (Paper presented at the

- international meeting of the Association for Business Communication, San Antonio, Tx).
- Sharbrough, W.C., Simmons, S.A., & Cantrill, D.A. (2006). Motivating language in industry. Its impact on job satisfaction and perceived supervisor effectiveness. *Journal of Business Communication*, 43(4), 322-343. doi: 10.1177/0021943606291712.
- Shroeder, H. (2012). The importance of human resource management in strategic sustainability: An art and science perspective. *Journal of Environmental Sustainability*, 2(2), 75-82.
- Smith, J., & Crawford, L. (2003). The link between perceived adequacy of preparation to practice, nursing error, and perceived difficulty of entry-level practice. *JONA's Healthcare Law, Ethics, and Regulation*, 5(4), 100-103.
- Society for Human Resource Management (2014). Retrieved from: <https://www.shrm.org/hr-today/trends-and-forecasting/research-and-surveys/Documents/140765%20Executive%20Briefing%20Aging%20Workforce%20v4.pdf> June 5, 2017
- Stanton, M. (2004). Hospital nurse staffing and quality of care. *Research in Action*, (14) Agency for Healthcare Research and Quality, Rockville, MD. Retrieved: <http://archive.ahrq.gov/research/findings/factsheets/services/nursestaffing/nursesstaff.html> June 7, 2017
- Steiner, A. (2008). *The effects of communication and feedback channels on the levels of employee satisfaction relating to the implementation of a performance improvement intervention: A health care study* (Order No. 3318920). Available from ProQuest Dissertations & Theses Global. (304378474). Retrieved from <https://libproxy.library.unt.edu/login?url=http://search.proquest.com/docview/304378474?accountid=7113>
- Sullivan, J. (1988). Three roles of language in motivation theory. *Academy of Management Review*, 13, 104-115.
- Swanberg, J., James, J., Ojha, M., Werner, M., McKechnie, S.P. (2008). *Introduction to the Citisales study: Citysales issue brief 1*. University of Kentucky Institute for Workplace Innovation, Lexington, KY, p. 13.
- Swanberg, J.E., McKechnie, S.P., Ojha, M.U. & James, J.B. (2011). Schedule control, supervisor support and work engagement: A winning combination for workers in hourly jobs? *Journal of Vocational Behavior*, 79(3), 613-624. doi:10.1016/j.jvb.2011.04.012
- Swank, J.M. & McCarthy, S. (2015). Effectiveness of the counselor feedback training model. *Journal of Counselor Preparation and Supervision*, 7(1). <http://dx.doi.org/10.7729/71.1078>

- Tesfaw, T.A., & Hofman, R.H. (2014). Relationship between instructional supervision and professional development. *International Education Journal: Comparative Perspectives*, 13(1), 82-99.
- Therkelsen, D.J. & Fiebeck, C.L. (2003). The supervisor: The linchpin of employee relations. *Journal of Communication Management*, 8, 120-129.
- Toosi, M. (2017). Labor force projections to 2024: The labor force is growing, but slowly. *Monthly Labor Review*, U.S. Bureau of Labor Statistics, December 2015, <https://doi.org/10.21916/mlr.2015.48>.
- Toossi, M. & Torpey, E. (2017). *Older workers: Labor force trends and career options*. Bureau of Labor Statistics. <https://www.bls.gov/careeroutlook/2017/article/older-workers.htm>. Retrieved June 5, 2017.
- Tucker, A.L. & Singer, S.J. (2015). The effectiveness of management-by-walking-around: A randomized field study. *Production and Operations Management*, 24(2), 253-271. Doi:10.1111/poms.12226
- Unruh, L., and Byers, J.F. (2002). Hospital downsizing: International experiences and perspectives. *Nursing and Health Policy Review*, 1(2), 117-151. 4. 2002
- U.S. Centers for Medicare and Medicaid (USCMS). 2001. *Appropriateness of minimum nurse staffing ratios in nursing facilities*. Phase II final, volume I, II, and III, report to Congress. Washington, DC: Prepared by Abt Associates Inc., USCMS
- Valentine, S. (2009). Ethics training, ethical context, and sales and marketing professionals' satisfaction with supervisors and coworkers. *Journal of Personal Selling & Sales Management*, XXIX(3) 227–242. doi: 10.2753/PSS0885-3134290302
- Westberg, J., & Jason, H. (1993). *Providing constructive feedback. Collaborative clinical education: The foundation of effective health care* (pp. 297-318). New York: Springer Publishing.
- Wirth, N. (1983) Program development by stepwise refinement. *Communications of the Association of Computing Machinery*, 26(1), 70-74.
- Worthington, E. & Roehlke, H. (1979). Effective supervision as perceived by beginning counselors-in-training. *Journal of Counseling Psychology*, 26, 64-73.
- Yeatts, D.E. & Cready, C.M. (2007). Consequences of empowered CNA teams in nursing home settings: A longitudinal assessment. *The Gerontologist*, 47, 323-339. doi: 10.1093/geront/47.3.323
- Yeatts, D.E., Cready, C.M. & Noelker (2008). *Empowered work teams in long-term care*. Baltimore, Maryland: Health Professions Press, Inc.

- Yeatts, D.E. Seckin, G., Shen, Y., Thompson, M., Cready, C. (2017). *Burnout among direct-care workers in nursing homes: Influences of organizational, work place, interpersonal, and personal characteristics.*
- Yu, S. & Kim, T.G. (2015). Evaluation of nurse staffing levels and outcomes under the Government—recommended staffing levels in Korea. *Journal of Nursing Management, 23*(4), 479.
- Zheng, A. (2015). Positive and negative supervisor developmental feedback and task-performance. *Leadership & Organization Development Journal, 36*(2), 212-232. doi: 10.1108/LODJ-04-2013-0039
- Zhou, W.; He, G.; Wang, H.; He, Y.; Yuan, Q.; Liu, D. (2015). Job dissatisfaction and burnout of nurses in Hunan, China: A cross-sectional survey. *Nursing & Health Sciences, 17*(4), 444-450.
- Zimmerman, S., Shier V. & Saliba, D. (2014). Transforming nursing home culture: Evidence for practice and policy. *The Gerontologist, 54*, S1-S5. doi:10.1093/geront/gnt161