



Eurofound

Work organisation and innovation

Case study: Care Home X, Finland

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Background to the organisation

Care Home X is situated in a relatively large city in Finland, in the grounds of an old mansion owned by the municipality. In 1919, a care home for elderly people was established in the buildings of the mansion. At first there were 20 residents in the care home but this number has risen to 62. Care Home X is a long-term care unit with traditional elderly care wards but which also has psychiatric wards and a Swedish-speaking elderly care ward.

In Finland arranging care for the elderly is the responsibility of the municipalities. The goal for the municipalities, as recommended by the state, is to secure independent living of older people in their own homes for as long as possible, despite declines in their ability to function. The services offered to elderly citizens include home care and supporting care, information provision and guidance, services for living at home and in institutions, and services offered by social workers.

The fulfilment of care for the elderly in municipalities is monitored by the state system known as 'Valvira', which aims to ensure that elderly people get the nursing and care stipulated by the laws, regulations and recommendations concerning senior care.

At this moment elderly people in Finland are in an unequal position, because their chances of receiving care and the quality of nursing depends on how much money their municipality has to use for care of the elderly. The retirement home in this case study is situated in one of the wealthiest municipalities in Finland.

The care home is a part of a network of care units in the city in question.¹ When a person suffering from memory loss is no longer able to live at home either independently or with the aid of home help or if their relatives do not have the means to take care of them, they are transferred for long-term treatment.

The focus of this case study is one of the wards in Care Home X. The residents of the ward D are all elderly people. The majority of them have multiple health problems and they need support with daily tasks such as dressing, eating and hygiene. The nursing activities consist mainly of these basic care tasks which occupy almost all of the work time, especially for staff on the morning shifts. The majority of inhabitants need the support of two nurses for washing, dressing and toileting. In the work shifts there are eight nurses in the morning, five in the evening and one or two on the night shift. Both the management and the staff of the ward are solely female.

Residents are placed according to an assessment of their needs and the city's aims. Care Home X is part of the network of care units in the city to provide continuity of care; i.e. those in need of constant care can live in a particular senior care centre for the remainder of their lives if they wish to do so. A model of care work has been introduced on the ward in an attempt to maintain the basic abilities for as long as possible. According to this model all of the inhabitants are helped to get out of bed in the morning and those who can walk are taken for a walk every day.

The city's goal for long-term nursing is to offer quality home-like care to those residents who are over 65 years old and need constant care. Within this overarching strategy, Care Home X seeks to offer the opportunity for a fulfilling life for residents. This means providing for recreational home-like activities. The ward hostess programme discussed in this case study is part of this provision.

¹ This Care Home was chosen as the case study because it was a part of a development project 'Support of nursing – Learning from good experiences' undertaken by the Helsinki Diaconia University of Applied Sciences. Tasks that would provide support to nursing were modelled in the research. The role of ward hostesses was in the focus of the care home case study (Kattanen and Kinnunen, 2012). http://www.diak.fi/files/diak/Julkaisuutoiminta/D_59_ISBN_9789524931588.pdf

As in many countries, the growing number of elderly people needing care and the demand for nursing staff are problems. Despite growing unemployment the municipality has had trouble finding suitable staff for social and health work, which have traditionally been sectors with a labour shortage.

Ward D of Care Home X has 6.5 nurses and 16 practical nurses. That means there are 0.59 nurses per resident. These are distributed across three shifts; there are 8 on the morning shift on weekdays: and 7 on weekends: 5 on the evening shift: and 1–2 at nights.

Since 2008 the ward has had one or two regular ward hostesses doing occupational therapy work. The work of the ward hostesses is part-time and takes up four hours per day. Hostesses work different patterns of days, thus allowing at least one ward hostess to be present on the ward for at least part of every day. Most of the time there are two ward hostesses present.

For this case study, the matron, the assistant matron, two nurses, a practical nurse and three of the ward hostesses were interviewed.

The ward hostess role fits well into the strategic emphasis of the organisation, because it means the permanent staff can do their care work better. The staff, however, still do not have time to socialise with the dwellers, which is what they would have hoped for.

Nature of the innovation

The ward host or hostess (at this moment all the ward hostesses are female) is in charge of various recreation activities, the majority of which the hostesses themselves generate. The goal of the group activities was to mobilise the seniors to use their hands. All of the activities delivered during the day were recorded by the ward hosts or hostesses. In 2010 records show that the ward host's work consisted of planning and organising the work, hosting clubs, working on the ward and helping seniors personally. The ward activity consisted of singing, doing crafts and spending time together.

Data records show that in 2010 a reminiscing group activity was organised 10 times, crafts (textile work, decoration) 21 times, karaoke and singing seven times, playing games 16 times, other ward activity – such as watching films, beauty treatments, reading magazines or sitting and talking on the patio – 13 times, hosting clubs (for example the cooking club) 25 times, seasonal parties five times, activities organised by visiting students six times and a trip outside the ward once. In total there were 104 events involving 755 participants.

The idea for the activity came from occupational therapy organisers. The employment authorities were looking for suitable places for those who had been long-term unemployed and for those who needed redeployment (occupational therapy) because of physical restrictions making it impossible for them to work in their previous jobs.

The activity sits comfortably with the elderly care strategy of the city, emphasising services for the seniors of the city.

Process of implementing the innovation

The ward hostess activity has affected all the residents of the ward. The ward hostesses ensure that they can all participate, including those who can no longer take an active part – in which case they are given a chance to participate by watching and listening.

The recreational activities are organised according to the operating model in which a pair of hostesses offer hospital units the chance to order a two-hour package deal for recreational activities regularly for the mornings or afternoons of certain weekdays.

According to the model the units can choose the nature of the recreational activity for their residents. The costs are divided according to the package deals. The package deals could consist of crafts and handiwork, karaoke and singing in a group, physical exercise, cooking club and topics such as literature and history. Group trips and seasonal parties are also offered to the units. According to Kattanen and Kinnunen (2012, pp. 63–64), the costs of one recreational activity day would consist of the wages of the two persons, materials, various equipment, travel costs and also of the maintenance costs of the firm, such as rent, administrative costs and marketing.

The HR manager has been involved in introducing the ward hostess activity in the job training centre of the city together with the matron. She was once a matron herself and is thus familiar with the day-to-day life on the ward. The HR manager had been a member of a project group of the development project at its pilot phase. The project concerned the residences and the long-term nursing services provided for the city's senior citizens and also day care centres. The project aimed to embed the information and operation models developed in the organisational structures of the city.

The initiative at first came under the director of occupational therapy, but is now based on the cooperation of many participants. The ward hostess activity is not actually a part of nursing management, but the matron and the assistant matron coordinate the recruiting of ward hostesses and fitting the recreational activity into the ward's work schedule.

On ward D there has been at least one ward hostess working since 2007, the year when there was a man working on the ward doing similar tasks to those of ward hostess's tasks. The plans for developing and expanding the activity started at this time.

The changes have been gradual. First one ward hostess started on the ward D, then another came along, and now there are three of them. For some time there were as many as four ward hostesses on the ward, but that was felt to be too many. The activity has now expanded to other wards and other homes as well.

Developing the ward hostess activity in Care Home X did not take place through a work group but there were regular conversations and ideas shared on starting and developing the activity on the ward. The ward hostesses themselves came up with ideas and were sometimes thought to be too imaginative and productive – so much so that they were asked to proceed with one thing at a time.

Directing the ward hostess activity is the responsibility of the matrons. The higher management is aware of the activity, and fully supports it but is not in charge of it.

The ward hostesses get rehabilitation allowance (€608.63 a month, or €539.85 if living with a partner) with an extra €9 per day, paid by the state of Finland. The ward hostess activity does not incur actual wage costs for the city or for Care Home X. The only costs caused by the activity are the material costs for crafts and baking which have to be paid from the ward's own budget. Rummage sales and raffles have been organised on the ward to fund the ward hostess activity.

Employment officials and the management of the workplace monitor how well the ward hostesses are coping with their work.

There is no training offered for either ward hostess work or for the nursing staff concerning the ward hostess activity. As the ward hostess activity has spread to other wards of Care Home X, one of the existing ward hostesses has gone around the wards guiding others in starting the activity. She has also visited other care homes in order to help them start the activity.

The ward hostess activity has brought a new method of documenting the work and activities on the ward as well as recording activity in the life of the residents. The ward hostesses keep a diary of happenings on the ward and everything that has been done each day. They also document who of the residents have been involved in each activity. The ward now has documentation of the activity from several years. How the documentation would be used in other ways than monitoring the work of the ward hostesses did not come out in the interviews.

Reactions and challenges

The management of the ward was eager to take the opportunity to employ suitable people from those who had been long-term unemployed or participating in redeployment as occupational therapy. However, according to the representative of the trade union there had been resistance towards the ward hostess initiative amongst some of the staff. It was feared that people involved in the activity would ‘steal’ some of the work done by the permanent staff and they would thus be replaced. However, this concern has not materialised.

In the view of the permanent staff the ward hostess activity is important work, because the staff have no time to socialise with the residents themselves. Permanent staff focus on the physical well-being of the residents, whereas the ward hostesses focus on their emotional well-being and comfort.

This clear separation of the work of the permanent staff and the work of the ward hostesses was not seen as positive by the permanent staff, who would like to be able to spend more social time with the residents, but now feel that the chance to do so has diminished.

Finding people suitable to be ward hosts or hostesses was seen as a challenge. Ward hostesses are given rehabilitative ‘wages’ and also maintenance costs, which is meant for their commuting. A challenge in expanding the innovation was the fact that the rehabilitation allowance – with an added €9 per day – was so small it doesn’t necessarily tempt people to do such work. The applicants to be ward hostesses who are seen to be most suitable and interested in working with senior people are chosen by the home, together with the employment authorities. The suitability of the applicants for the work is tested.

The ability to integrate the ward hostess activity into the daily rhythm of the care home, the cooperation with permanent staff, taking notice of the wishes of the residents and their relatives and the reliability of the ward hostesses are critical factors in the success of the innovation. A wish was expressed in interviews that hostesses could be present at all times and also visit other wards.

Impact on employees

The recruiting of ward hostesses has to be done in cooperation with the authority that deals with employment matters. The activity has had no effect on other recruitment on the ward or on the number of trainees or temporary and permanent staff.

In the view of the management of the organisation, the residents of the care home, as well as the staff and the management itself, had all benefited from the innovation. They also saw that after implementing the innovation the staff had more time to concentrate on the actual care work for which they had been trained. The nurses could now concentrate fully on tasks related to taking care of the residents, such as administering medicine, washing, dressing and feeding.

The nurses felt the activity might have influenced their work pace because they needed to have the ward residents ready in time to take part in their activities in the morning. However, in the group interview this was not mentioned to be an aspect which creates more stress and time pressure for the nurses.

According to the group interview the ward hostess activity has only had positive effects on work. However, negative feelings of not having enough time to socialise with patients while nursing, a job which had now been given to the ward hostesses, came out in a personal interview.

The activity has affected the distribution of work tasks so that the staff can now do their own work more smoothly. All sorts of requests by the residents to bring or move things can be met without the help of trained staff.

According to the staff the innovation had brought better quality of life for the residents. The activity has meant that residents are now calmer because they have something meaningful to do.

The ward hostess activity was felt to have created a good atmosphere on the ward. The innovation had also brought positive publicity as newspapers and other media had written and reported the activity. Also, one of the ward hostesses who had been particularly productive in her ideas had been given an award for her active and innovative way of working.

It was observed that the performance of the seniors on the standardised tests had increased; for example when previously unmoving hands had restored some of their mobility. The improved mood of the seniors and taking part in activities helped them to maintain their improved performance.

The ward hostess activity affects the pace of the work in two ways. The staff know how to prioritise the tasks which have to be done every morning, i.e. the basic washing, dressing and toileting. After this the residents can take part in the activities organised by the ward hostesses.

The requirements of the residents can be responded to in more detail, because there are now more staff. The ward residents keep asking after the ward hostesses, wanting to know when they will be back again. The felt benefit thus seems tangible.

The fact that the people on the ward now have more company was seen as the most important aspect of the ward hostess activity. The seniors have had greater opportunity to enjoy things that are familiar to them, such as traditional foods they used to eat. The activity fulfils the wishes of the clients, and thus corresponds to the strategic policies of the city.

According to the views of the management the stress level of the permanent staff has decreased when it comes to the basic nursing of the dwellers, because the staff no longer have to worry about not having enough time to socialise with the seniors.

According to the ward hostesses their experience of the work has been so rewarding they would recommend it to others, and they report that they have done so. They felt that the work had helped them cope with other things in their lives and had been so positive that 'it doesn't really feel like work at all.'

In the group interview the general opinion was that the activity has impacted positively on what the staff think of their workplace, and felt that the home could be recommended to friends or relatives, but with the caveat that the work really is quite hard, and people considering the work should be willing and able to do work among senior patients.

It was also stated in the group interview that the activity may also have improved work safety, because there are now more people to take care of the residents of the care home in different situations.

On ward D, where the residents need a high level of care and cannot dress or feed themselves, the nursing takes a great deal of time. According to the interviews with the persons representing the management the number of permanent nurses on the ward was a little below that recommended by the authorities. From the point of view of the permanent nurses the ward hostess activity had brought more comfort for the residents, which they were very happy about.

The biggest issue for the permanent staff is that their core work, which included washing, dressing, feeding and other nursing of the residents, took all their work time. The basic nursing is prioritised in their work, and the recreational activities are the last on the list of things to do. The permanent staff wish they could sit down and talk with the residents, but they have no time for this. They felt that the ward hostesses had taken the part of the work which would have been enjoyable: being together, sitting and talking to the seniors.

The nurses had some other reservations about the innovation. It was mentioned that the ward hostesses sometimes intervened unhelpfully in the work done by the permanent staff. For example the ward hostesses had helped the residents to use the toilet, which is a part of the work of the nurses. The ward hostesses do not have the education, experience or responsibility for nursing tasks. If there were some mistakes, for example if a senior fell down while going to the toilet helped by a ward hostess, the question of responsibility would have to be addressed. The suitability of some of the ward hostesses was questioned by the permanent nurses who said that some ward hostesses had favoured certain residents over others.

The innovation had no effect on the level of permanent staff on the ward. The ward hostess activity had no effect on amount of sick leave.

Lessons learnt and future plans

The changes on the ward have been mainly positive from the point of view of the residents. The comfort of the residents has increased. According to the interview with the management the relatives of the residents were pleased to know that regular activities were being organised on the ward. The management was also pleased that the residents seemed to be in higher spirits and the whole atmosphere on the ward was more active and positive than it was without the ward hostess activity.

This initiative has affected the lives of many people positively. The lives of the ward hostesses, who were previously unemployed, or had not found a suitable job because of their physical condition, were positively affected by the activity as were the lives of the residents of the ward.

Finding suitable people to work as ward hostesses can be seen as a critical factor in the success of the innovation. Enjoying the company of older people, reliability and having a richness of ideas are the qualifications for success in the work. Another critical factor was the integration of ward hostess activity in the daily rhythm of the care home and cooperation with the permanent nursing staff.

A third critical factor was the approval of the seniors and their relatives. According to the interview with the management of the ward the reliability of the ward hostesses was seen to be especially important here.

The fourth and the most important critical factor would appear to be that of clarifying of the distribution of work and responsibilities between permanent staff and ward hostesses, and also improvement of giving feedback. The positive attention, publicity and the awards given to the ward hostess activity because of its innovativeness had given rise to annoyance and jealousy amongst some of the permanent staff. The intensive primary care work undertaken by the permanent staff of the ward was not acknowledged on the same level, either in publicity or by the management.

It can be said based on the interviews that, ideally, the whole staff of the care home should be involved in the planning phase of starting possible ward hostess activity. The aims and goals of the ward hostess activity should be clear to everyone working on the ward. Also, the rules of the work and responsibilities on the ward should be formulated together and be checked and updated regularly.

According to the group interview the message to organisations planning similar activities was to have courage and try. Ward D of Care Home X, where the activity is fully operational, offers support to others who are considering or trialling something similar and who need help.

Longer term, the ward hostess activity would benefit from a more professional standing in care homes. The work does not need the long education that nurses have, but clear ethics and a basic knowledge about the work nurses do would be helpful to full integration. Professionalisation could be one way of attracting more unemployed young people (of particular concern across Europe) and give them a place in working society and a job that is meaningful. Forming a cooperation network amongst the workplaces involved in the ward hostess activity could be the next developmental step in the project.

Reassembling of the tasks and changing of the work division in the working community should happen in cooperation with the staff by hearing their opinions. In this case study the permanent nursing staff had not been able to take part in planning the ward hostess work, nor had the relationship between permanent staff and the employed ward hostesses been defined in terms of who had responsibility for what. The distribution of work should be discussed, so that the experiences, feelings, thoughts and wishes of the staff can be taken into consideration when planning or implementing new distribution of work.

The ward hostess activity in this care home is an example of how to respect the wishes and preferences of the elderly care home residents in their nursing. In what way could the ward hostess-like activity be expanded in care homes? The result is linked to the expenses and the wages given to the ward hostesses. As a voluntary project the activity has not expanded. What would be the size of the reward or the wages that would help expand the ward hostess activity, and where would the money come from?

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Riikka Kivimäki, Work Research Centre, University of Tampere