

Intercultural Issues in Continuing Care:

# **Culturally Diverse HCAs in a Continuing Care Provider**

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ICCER Speed Networking Event

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# Project Background: Research Problem

- Bayshore Home Health experienced challenges in recruiting qualified front line staff (health care aides, licensed practical nurses), and retaining these staff to meet the requests for continuing care services from their clients.
- A significant proportion of front line staff hired at Bayshore are internationally born & educated, and often have less than 5 years experience living and working in Canada.
- Bayshore suspected these factors impacted staff satisfaction, client outcomes.



# Methodology: Participants & Activities

- Research participants (39)
- In-office staff (human resources, coordinators, nursing supervisors, front-desk) (19)
- Front line health care aides (20):
  - 10 - less than 240 hours, and less than 1 year
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- In-office observations
- Focus groups with HCAs, coordinators, nursing supervisors
- Review of recruitment and retention organizational processes (both local and national)

# Overarching Themes #1

- A more diverse HCA workforce has resulted in a misalignment of tools, structures, and approaches for supporting and retaining the workforce.

# Overarching Themes #2

- Bayshore has a distinctive set of values underlying the HCA services they provide. These are implicitly conveyed (and evaluated), but don't appear to be explicitly understood by all staff.

# Overarching Themes #3

- “A golden rule” or “common sense” approach (**IDI Minimization stage**) is the primary strategy being utilized by Bayshore staff to make sense of cultural differences.

# Successes

- Staff overwhelmingly positive about their Bayshore experience
- Onboarding is much better than other companies; staff felt supported to do job
- Bayshore organizational culture very growth, team, and inclusion-oriented
- Bayshore's sensitivity to compatibility and time to build HCA-client relationships leads to richer experiences\*

# Challenges

- HCAs felt first year very difficult
- Past onboarding, feel a disconnect and a lack of guidance
- Office staff are experiencing increased communication difficulties with HCAs
- HCAs and office staff using “common sense” to demonstrate implicit Bayshore values



# The Home Care Workplace





# HCA Perspectives

Recruitment & Onboarding	Internal	External
In-office orientation days are very comprehensive for information  Information is written & expectation is to read all of it	Little peer mentorship Little peer networking	Success with clients depends largely on: <ul style="list-style-type: none"><li>• Heart</li><li>• Commitment</li><li>• Relationship skills</li></ul>
First 6 months is tough because of: <ul style="list-style-type: none"><li>• Getting enough hours</li><li>• Managing schedule</li><li>• Logistics of travel</li></ul>	Some unclear cultural expectations & boundaries: <ul style="list-style-type: none"><li>• End of contracts</li><li>• Knowing how to be successful</li><li>• Communication (how much/ when)</li></ul>	“Judgment” consistently utilized: <ul style="list-style-type: none"><li>• Profession-based</li><li>• Value-based</li><li>• Experienced-based</li></ul>
First year is tough for: <ul style="list-style-type: none"><li>• What homecare is/ looks like</li><li>• Client relationships (trust, expectations)</li><li>• Knowing how to be successful</li></ul>	In-office staff generally supportive; Some inconsistencies at times in support for HCAs	Unexpected realities of the job: <ul style="list-style-type: none"><li>• Clients: pets, bodily-fluids, addictions</li><li>• Boundaries: personal, peripheral care</li><li>• Differences: gender, generational, cultural</li></ul>
Beyond initial buddy-shift, little peer mentorship		Use a “golden rule” strategy



# Office Team Perspectives

Recruitment & Onboarding	Internal	External
Rely very heavily on orientation to set the platform for employee success	Culturally competent Canadian strategies for feedback in cross-cultural interactions	HCA approach to clients differs based on cultural groupings
Feel unwritten expectations not very clear: <ul style="list-style-type: none"><li>• The pickle analogy</li><li>• Workplace safety</li><li>• Communication (how much/ when)</li></ul>	Challenges in conflict situations: <ul style="list-style-type: none"><li>• Fear of offending</li><li>• Fear of being perceived as racist</li><li>• Avoidance strategies (language fatigue)</li><li>• “Golden rule” strategy</li></ul>	Coordinators are very much more at that cross-cultural interface on a daily basis with HCAs and their client relations
Clear idea of what a successful HCA <u>doesn't</u> look like: <ul style="list-style-type: none"><li>• Can identify trespasses</li><li>• Can give stories</li></ul>	Expectations of HCAs are sometimes misaligned with employee expectations, needs, concerns (ie. Maslow)	Use a “golden rule” strategy in judging HCAs as safe, competent, and hardworking in the client-care role
First year is tough for: <ul style="list-style-type: none"><li>• What homecare is/ looks like</li><li>• Client relationships (trust, expectations, personal boundaries)</li><li>• “virtual” team; supports &amp; expectations</li></ul>	Aware of the cultural and communication trespasses that the culturally diverse HCAs are often unaware of	

# Observations

Recruitment	Onboarding
<p>Application:</p> <ul style="list-style-type: none"> <li>• Audience increasingly EAL speakers of non-Canadian cultural origin</li> <li>• Language level misaligned for current trends in HCA applicants</li> <li>• Multiple sections and fields with varying parameters</li> <li>• Role of guiding through application process appears to lie with receptionist</li> </ul>	<p>Tools &amp; Information:</p> <ul style="list-style-type: none"> <li>• Focus on job duties, tasks, policies, standards</li> <li>• Use of much written information</li> <li>• Use of mixed-content/ mixed-media</li> <li>• Use of N. American-style tools</li> <li>• Success indicators conveyed implicitly: boundaries, judgement, prioritizing, behaviours</li> </ul>
<p>Interview process:</p> <ul style="list-style-type: none"> <li>• Audience increasingly EAL speakers of non-Canadian cultural origin</li> <li>• Language level misaligned for current trends in HCA applicants</li> <li>• Interview process &amp; dynamic from Canadian cultural standpoint</li> <li>• Interview process generated miscommunications which needed repeated rephrasing</li> </ul>	<p>Dynamic:</p> <ul style="list-style-type: none"> <li>• Full schedule imparts a lot of information</li> <li>• Core individualistic approach</li> <li>• Use of didactic communication to impart information</li> <li>• Implicit understanding of relevance, intent, and meaning</li> <li>• Written information not fully utilized by participants</li> </ul>

# Recommendations

Return to the overarching themes:

1. How might tools, structures, and approaches be better aligned with supporting and retaining a more diverse HCA workforce?
2. How might an organization's distinctive set of values be more explicitly understood by all staff?
3. How might organizations help staff have access to more tools for making sense of cultural differences?

# Thank you!

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