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Understanding and measuring the work-related quality of life (WRQoL) among those working in adult social care: A scoping review

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Disclaimer

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Background

• The adult social care in England has been experiencing workforce crisis.

• Work-related quality of life (WRQoL) is one of the factors that may help us to understand how the adult social care can become an attractive sector to work in.

• A comprehensive evidence synthesis of understanding WRQoL across different adult social care settings and workforce is lacking.
The Aim:
To understand how WRQoL has been defined and measured in the literature and to map key components of WRQoL among those working in adult social care and other similar contexts.
Research Questions

1) What are the existing definitions of WRQoL in adult social care?

2) What are the components of WRQoL in adult social care?

3) What aspects of adult social care work has an impact on the social care worker’s quality of life?

4) What questionnaires of WRQoL are available to be used in adult social care?

5) What strategies have been implemented and evaluated that addressed care staff’ WRQoL?
Eligibility

Type of study
Primary research studies qualitative, quantitative or mixed methods
Systematic reviews, meta-analyses and other types of evidence synthesis

Protocols

Language
English

Time restriction
None

Flow chart of studies identified in the literature search

Records identified through database searching (n = 6289)

Records after duplicates removed (n = 5979)

Records screened (n = 5979)

Full-text articles assessed for eligibility (n = 225)

Full-text articles excluded, with reasons (n = 181)
- n = 96 not a concept
- n = 30 not a context
- n = 31 not professionals
- n = 7 language
- n = 9 type of study
- n = 2 duplicates
- n = 6 no full texts available

Studies included in qualitative synthesis (n = 61)

Additional records identified through other sources (n = 17)
- n = 11 through references
- n = 6 provided through network of experts

*Out of those 124 duplicates identified manually
Characteristics of studies included

Continental Europe (26)
The USA (12)
Canada (9)
UK or England (6)
Australia (3)
Israel (2)
South Africa, Taiwan and Japan (1 each)

The type of participants and context varied across studies.
Definitions of WRQoL

There is an absence of an agreement on a definition of WRQoL.

A variety of terms to describe WRQoL:

- Work psychosocial characteristics
- Job characteristics
- Work environment
- Work situation
- Working conditions.
Six key components of WRQoL

1. Organisational characteristics:
   - Working culture
   - Working climate.

2. Job characteristics:
   - Job–person match
   - Autonomy/Control at work
   - Time
   - Responsibility for people
   - Learning and growth opportunities/self-actualization
   - Meaningful work
   - Feedback from work.

3. Mental wellbeing and health
   - Compassion satisfaction
   - Compassion fatigue
   - Burnout/Work engagement
   - Mental well-being.

4. Physical wellbeing and health

5. Spillover from work to home

6. Professional identity
## Measures of WRQoL

**Table 1. Characteristics of sources of evidence and identified key areas of work-related quality of life they reflect**

<table>
<thead>
<tr>
<th>Study citation</th>
<th>Country</th>
<th>Study design</th>
<th>Context</th>
<th>Type of participant</th>
<th>Measures of WRQoL</th>
<th>OC</th>
<th>JC</th>
<th>MWh</th>
<th>PWh</th>
<th>S</th>
<th>PI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>André, Sjøvold et al. 2014</td>
<td>Articles from the USA and Canada</td>
<td>Evidence synthesis</td>
<td>Nursing homes; Administrators; ombudsmen; department staff, different kinds of healthcare workers</td>
<td>Not applicable</td>
<td></td>
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<tr>
<td>2</td>
<td>Arts, Kerstjens et al. 2001</td>
<td>Origin of studies included not reported</td>
<td>Evidence synthesis</td>
<td>Domiciliary care; Home help aides</td>
<td>Not applicable</td>
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<td></td>
<td>•</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Arts, Kerstjens et al. 1999</td>
<td>The Netherlands</td>
<td>Cross-sectional</td>
<td>Domiciliary care; Home helps</td>
<td><strong>Workload</strong>: ‘Experience and Assessment of Work’(4) <strong>Psychological and physical outcomes; job satisfaction; from Boumans(5)</strong> <strong>burnout; the Dutch translation of the Maslach Burnout Inventory (MBI-NL)(6)</strong> <strong>health; a self-assessment of general health</strong> <strong>Capacity for coping; social support; from the Organizational Stress Questionnaire (VOS-D)(7)</strong> <strong>leadership style scale; by Boumans(5), based on the Algere(8)</strong> <strong>ways of dealing with problems; shortened version(9) of the Utrecht Coping List (UCL)(10)</strong></td>
<td>•</td>
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</tbody>
</table>
Measures of WRQoL

- Quality of Work Life Measure (13 items);
- the Professional Quality of Life (ProQOL) Scale and its revised version, the Professional Quality of Life Scale-Revised (ProQOL);
- Leiden Quality of Work Questionnaire (LQWQ);
- the Nordcare survey;
- the 15-item version of the Social Production Function Instrument for the Level of Well-being;
- the Work-related quality of life scale
The DEMIAN intervention provided tools to staff to improve situational wellbeing and experiences of meaning and purpose of people living with dementia.

This in turn led to significantly decreased time pressure and decreased job dissatisfaction for intervention group providers.
Summary

• No agreement on WRQoL.

• WRQoL is a complex concept consisting of several components including: organisational characteristics; job characteristics; mental wellbeing and health; physical wellbeing and health; spillover from work to home; and professional identity.

• Some existing measures may be potentially of interest.

• Evidence on strategies how to improve WRQoL of people working in adult social care is almost entirely lacking.
Team

- Professor Shereen Hussein (Chief Investigator)
- Ann-Marie Towers (Co-Investigator)
- Sinead Palmer (Co-Investigator)
- Dr Nadia Brookes (Project Manager)
- Dr Petra Makela (Research Fellow)
- Jennifer Bostock (Public and patient representative)
- Dr Sarah Markham (Public and patient representative)
- Helen Salisbury (Public and patient representative)
- 10 members of Project Advisory Group
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Thanks for your attention!

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