

# Care home staff and residents need 'family' bonds to thrive, says study

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Care home residents receive much better care when they enjoy "family" bonds with staff—but staff must be empowered to create these bonds, new research has found.

The study, led by the University of Leeds, found that when care home staffing is stable and consistent and numbers are sufficient, workers have the capacity to develop "familial" relationships with residents and can deliver quality, personalized care.

The work, titled "Understanding the Staffing Relationship to Quality in care homes: the StaRQ mixed-methods study," is published in *Health and Social Care Delivery Research*.

Lead researcher Karen Spilsbury, Professor of Nursing at the University of Leeds School of Healthcare, said, "Understanding how to meet the needs and preferences of the thousands of people living in care homes is a societal priority. It is vital that we know how to use the workforce resources in care homes to promote quality and effective working."

Quality of care and quality of life varies significantly for the 441,479 people living in care homes in the UK. Previous research into the reasons for this has not provided robust explanations.

The study team speculated that staffing and ways of working were key influences on quality. Working with managers, residents, families, and care home staff from a range of care homes in England, the researchers set out to find out how and why staffing in care homes affects the quality of life and care of the residents.

The team analyzed research journal articles, care home and care organization data to look at what it is about staffing that influences quality. They analyzed reports and ratings of homes from the Care Quality Commission (CQC) regulator, and networks between staff in homes.

According to the results, staffing considerations that might improve quality include not swapping managers too much; having sufficient and

consistent staff for family-like relationships in homes and putting residents' needs first; supporting staff and giving them freedom to act, and key staff leading by example.

The research also showed that where more care was provided by registered nurses, there were fewer incidents such as falls with fractures, urinary tract infections and medication errors.

However, simply increasing nursing input was unlikely to be a cost-effective way of reducing adverse incidents in care homes. The study found that although there might be savings to the wider health care system in reduced treatment costs, any savings would be wiped out by the high additional costs of employing more nurses.

The study also found:

- Care homes with a manager in-post in the 12 months prior to a CQC inspection were more likely to be rated as good or outstanding
- Higher staff-to-bed ratios were associated with a greater chance of a good or outstanding CQC inspection score
- Having experienced care staff, that is, staff in post for 5 years, was likely to improve quality, as measured by CQC ratings, and staffing consistency was important for organizing care and work
- Larger homes were less likely to be rated positively: but team size (not home size) may be a useful lever for promoting quality, i.e. small groups of linked residents and staff (5–15 residents per staff member based on level of [resident](#) dependency) promoted familiarity, communication and a family-like environment for cultivating relationships
- Use of agency nurses to cover for staff sickness or unfilled vacancies was not associated with more falls, infections, or pressure ulcers, but was associated with more medication errors

The report is the latest publication by NICHE-Leeds, a research partnership between the University's School of Healthcare and care home providers which develops research projects from ideas generated by care home staff, families and residents.

It is the first study in the UK which has worked with a large care organization to provide novel evidence on relationships between nurse staffing and care quality in English care homes over time.

Professor Spilsbury, who is also NICHE-Leeds's Academic Director, added, "Staffing in [care homes](#) matters and needs to be valued. It needs to be stable, skilled and competent, to realize the benefits of person-focused organization of care, and enhanced teamworking. Our study shows that leadership, reward and recognition of staff, and a shared philosophy of care are key to improving quality as experienced by residents."

**More information:** Understanding the Staffing Relationship to Quality in care homes: the StaRQ mixed-methods study, *Health and Social Care Delivery Research* (2024).

Provided by University of Leeds

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