

**Supportive groups for
isolated home care workers:
*A successful state-university
dissemination***

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Occupational Health Sciences



**OREGON HEALTHY
WORKFORCE CENTER**

A NIOSH CENTER OF EXCELLENCE



“Faith and Education in the service of justice”

COMPASS



- Integrated elements of effective peer-led social support groups with scripted team-based programs
- Targeted *Total Worker Health*[®] focused outcomes



(Delbecq et al, 2012; Toseland et al, 1989, 1990; Goldberg et al., 1996 and colleagues)



The Intervention

Team building workshop + 12 monthly meetings

	<u>Work</u>	<u>Life</u>
Susan	8	6
Carol	6	6
Laura	7	4
Rebecca	5	7
Sally	9	8
Fred	8	10
Natalie	4	5
Diana	3	7

MONTHLY MEETING STRUCTURE

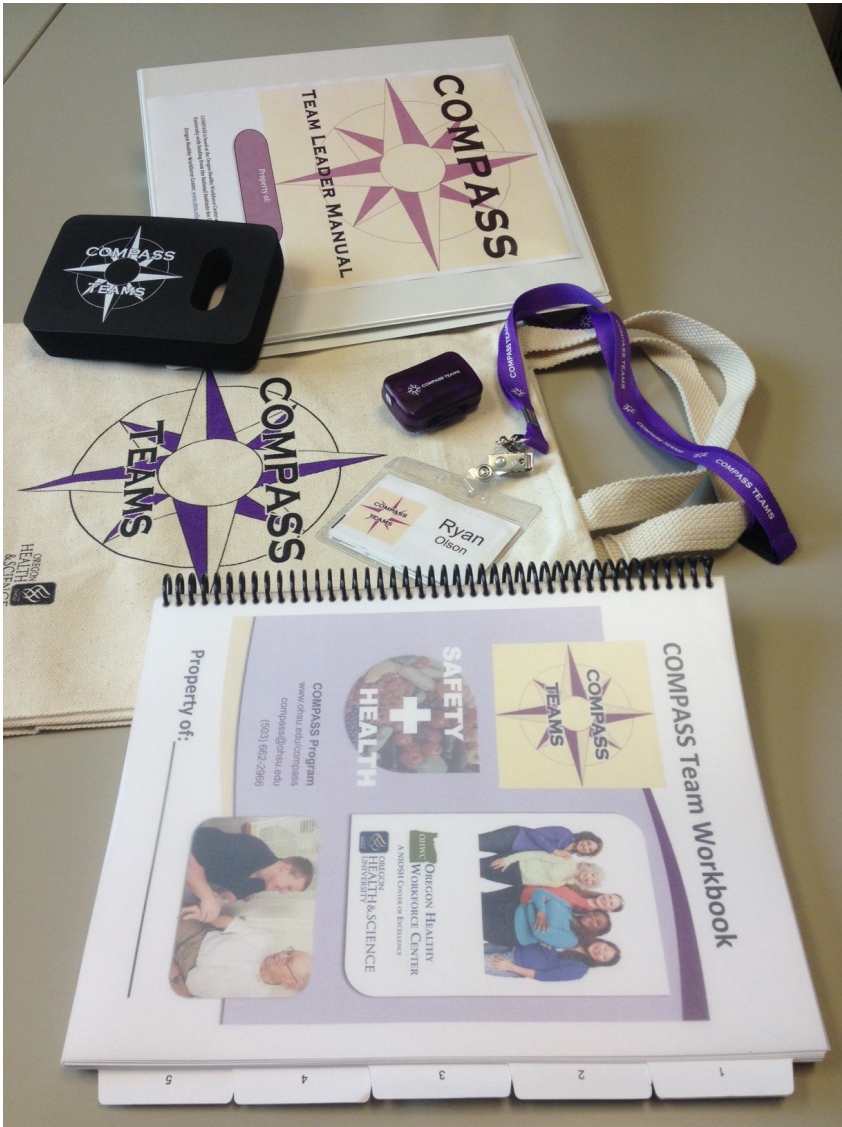
Scripted Education

- **WorkLife Check In (at left)**
- Scripted Workbook Lesson
- Take Home Goals

Social Support

- Shared Meal
- Worklife Support
- Reflection

Monthly Scripted Topics: *First 6 months*



0. *Team building workshop*
1. Fruits & Vegetables
2. Back to Healthy Postures
3. Functional Fitness
4. Take a Load Off with Tools
5. Communicating for Hazard Correction
6. Mental Health

Take home goal examples: *Functional Fitness*

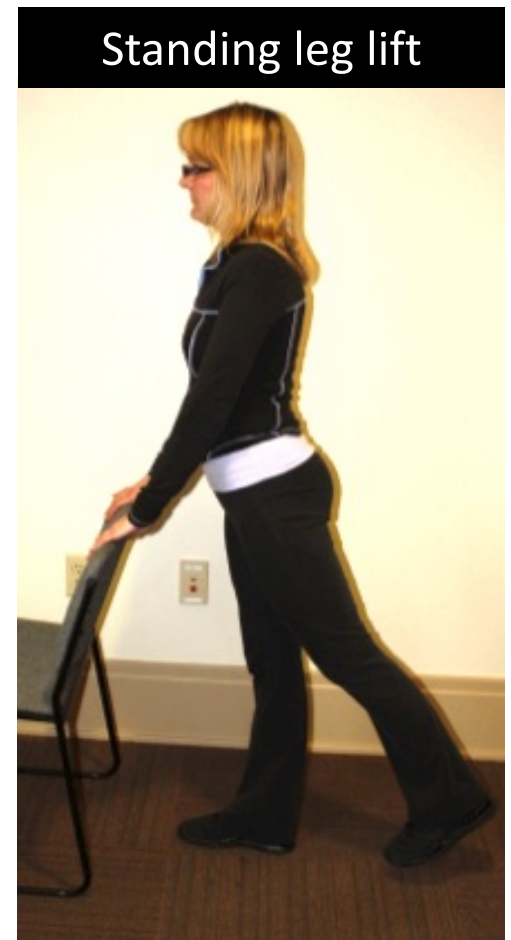


Team goal:

- **Odds vs. Evens** step count challenge

Individual goal options:

- “anywhere core exercise” **scavenger hunt**
- **Buddy up** and try an active class or game
- Find **community resources** for exercise



Self-monitoring lanyard cards

Name: _____			
Day	Week 1	Week 2	Week 3
1			
2			
3			
4			
5			
6			
7			
Total			

Core Exercise Scavenger Hunt
Cross out each exercise as you complete it

- Butt squeeze
- Heels
- Knee bends
- Toe squeeze
- Standing crunch
- Sideways walk
- Standing leg lifts

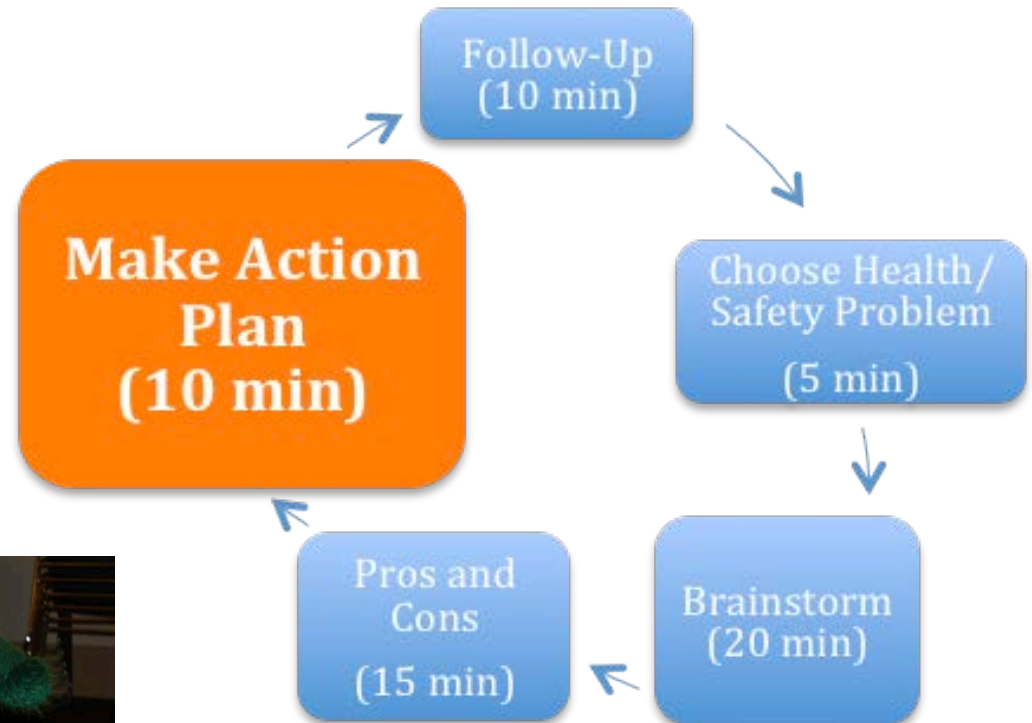
Shared meal



WorkLife Support:

Action oriented problem solving

<u>Name</u>	<u>Problem</u>	<u>Rating</u>
Susan	Bathing gone bad	B
CAROL	NO SUPPORT	A
Laura	Case of the munchies	C
Rebecca	Exercise Woer	D
Sally	Abusive Client	A
Fred	Mt. Dew Withdrawal	B
NATALIE	CLIENT COMMUNICATION	B



Overview: COMPASS Iterations

- **Pilot with Guidebook 1** (published 2015; n=16):
6 monthly meetings
- **Pilot with Guidebook 2** (unpublished; n~6):
6 additional monthly meetings, different style
- **Randomized Controlled Trial** (published 2016; n=149):
12 monthly meetings with Guidebooks 1 and 2
- **Oregon Home Care Commission (OHCC) adaptation pilot** (unpublished; 5 groups):
7 bi-weekly meetings based on Guidebook 1
- **OHCC adaptation v2 for statewide dissemination** (unpublished; 6 groups and rapidly growing): Design, further adjustment, systems, and supports

COMPASS pilot: Guidebook 1 (n=16)

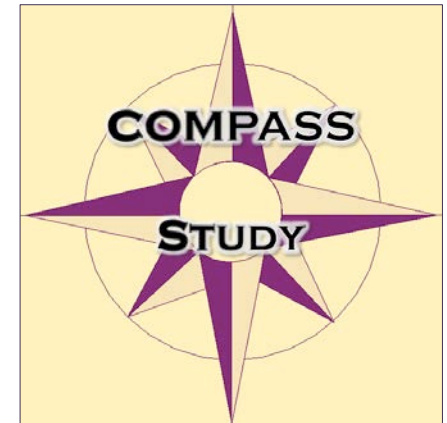
(April -Nov 2012)

- Well attended (**90%**) and liked (**4.1**/5 pt. scale)
- **18%** pre/post meeting knowledge gains
- **60%** reported making changes between meetings
- Life satisfaction and negative affect significantly improved ($p < .05$).
- **21 of 28** safety/health outcomes changed in expected directions and 11 had standardized effects $d > 0.20$ (max $d = 0.65$)

Olson et al. (2015) Journal of Occupational & Environmental Medicine

Randomized Controlled Trial

(April 2013 – Oct 2015)



16 Groups (N = 149)

8

8

COMPASS

CONTROL

Baseline (n=75)

Baseline (n=74)

6 mo (n=55)

6 mo (n=63)

12 mo (n=54)

12 mo (n=58)

24 mo

24 mo

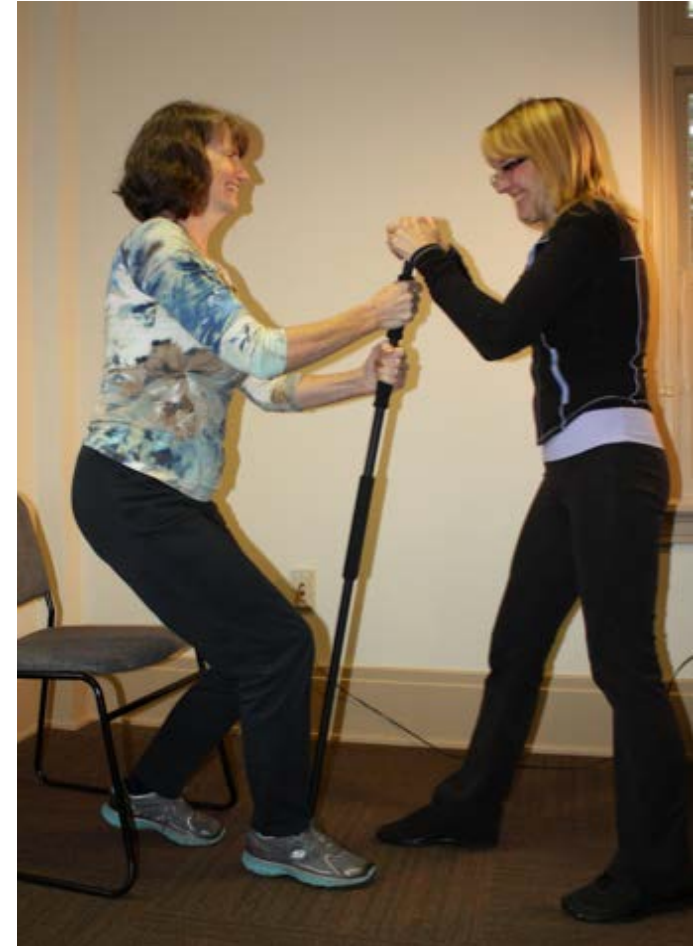
Intervention

Both Groups:

- Survey
- Health Assessment
- Interviews

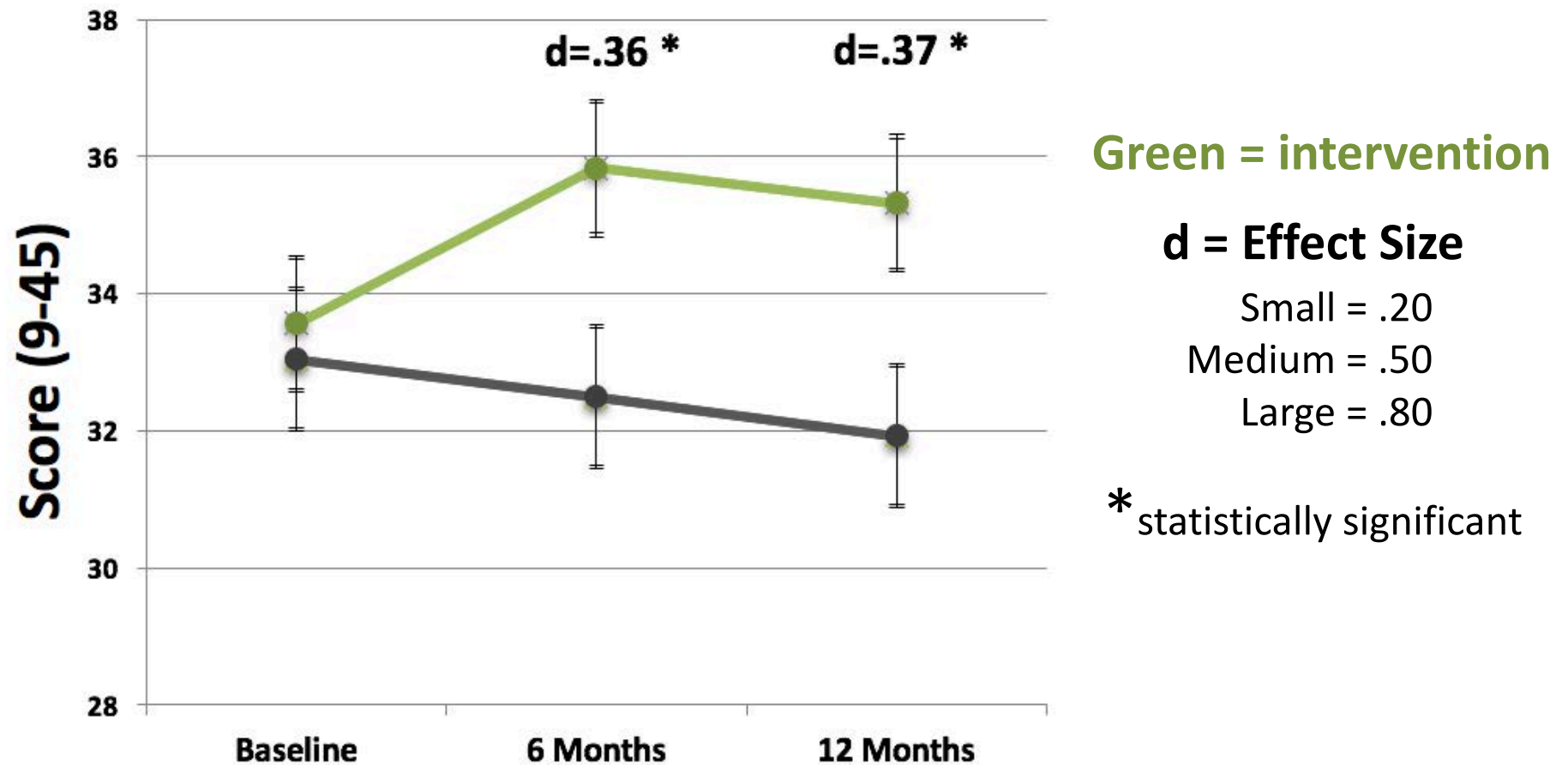
RCT participants (n=149)

- Female **89%**
- Caucasian **74%**
- Average
 - **51.6 yrs old**
 - **BMI 31.9**
 - **7.4 yrs home care experience**
 - **24.1 weekly work hrs**
- **39% depression diagnosis**
(at some time in life)



Intervention Effects:

Experienced Community of Practice



Olson et al. (2016) American Journal of Public Health

Intervention Effects: *Safety & Health Outcomes*

- Using new tools for housecleaning (6 mo. $d=.51$, 12 mo. $d=.64$)
- Using new tools for moving objects and/or CEs (6 mo. $d=.65$)
- Communicating with CEs about safety hazards (12 mo. $d=.84$)
- Correcting slip, trip, fall hazards (12 mo. $d=.45$)
- Eating more fruits and vegetables (12 mo. $d=.31$)



- 6 mo HDL ($d=.22$)
- 6 mo lost work days due to injury ($d=-.66$)
- 12 mo grip strength ($d=.29$)

Consumer-employers independently confirmed significant safety improvements

Qualitative Interviews (n=26)

Stories of job demands, resources, resource gaps, and experienced support

If you say you're going to be there at 9:00 for someone, you're going to be there at 9:00! Now, if you have a person who's waiting for you and laying in bed because they can't get up by themselves, and you're 20 minutes late, . . . can you imagine -- "I can't get up by myself, and I gotta go to the bathroom. I don't want to wet my pants. . . . I'll be so humiliated!" (Clara, May 19, 2015)

I'm starting to realize that I need some assistance from durable medical equipment . . . There's things my [CE] should be having that would make the care worker's job easier . . . There's days that my [CE] can't stand up and use her legs. (Tate, July 3, 2015)

I had been holding it all in, [but after sharing with my team], I felt good. Sometimes . . . you're just thinking you're going to scream, but you cannot scream. I felt that way . . . I felt like I got rid of something (Olive, May 23, 2015).

When I start getting in a stressful situation . . . I go back to the [COMPASS] book. . . . [Also, I am] tracking for vegetables . . . I use this . . . bead bracelet . . . [and] the step counter . . . The exercises, too – at home, I'm doing it. And I remember the positions [neutral spine posture]. . . I implement it in my life and in my work (Olive, May 23, 2015).

Adaptation for Dissemination

- ❖ Why did the Commission want COMPASS?
- ❖ Duration and topics reduced
 - 7 meetings over 3 months
- ❖ Professional trainer as facilitator
- ❖ Peer-leaders rotate



Training system reaches 60% of Oregon's home care workers.

- 25 topics
- Nearly 100 classes offered monthly



OHCC adaptation pilot

- ❖ 5 groups in 2 cities
- ❖ 3 professional trainer-facilitators
- ❖ Abbreviated outcomes
 - mean $d=.49$, range .31-.95
- ❖ Influence of facilitator style



Cheryl Miller, Executive Director
Oregon Home Care Commission

Further design, adaptation, systems, and supports

- ❖ Realities of Roll Out + New Training Director + OHSU Tech Transfer Guidance + ...
 - New design and activities
 - Removal of “giveaway” resources (e.g., step counters, knee pads)
 - Facilitator online orientation training
 - Videos demonstrating group processes
 - Adjustments to training evaluation questions
 - Contract to accommodate personal support workers



**State of Oregon
Oregon Home Care Commission**

Training Evaluation

Training _____

Date _____

Trainer Name _____

Location _____

	Poor	Fair	Average	Good	Excellent
The training met my expectations and needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The information will be useful in my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information was presented in a variety of ways to facilitate learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The trainer was well prepared and organized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The trainer communicated effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The handouts (if applicable) are helpful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend this training to others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What changes or additional information would have made the training more valuable?

Two (or more) things I learned that are most useful are:

Suggestions for future trainings:

Oregon Home Care Commission Training Evaluation

Training _____

Date _____

Trainer/Facilitator Name _____

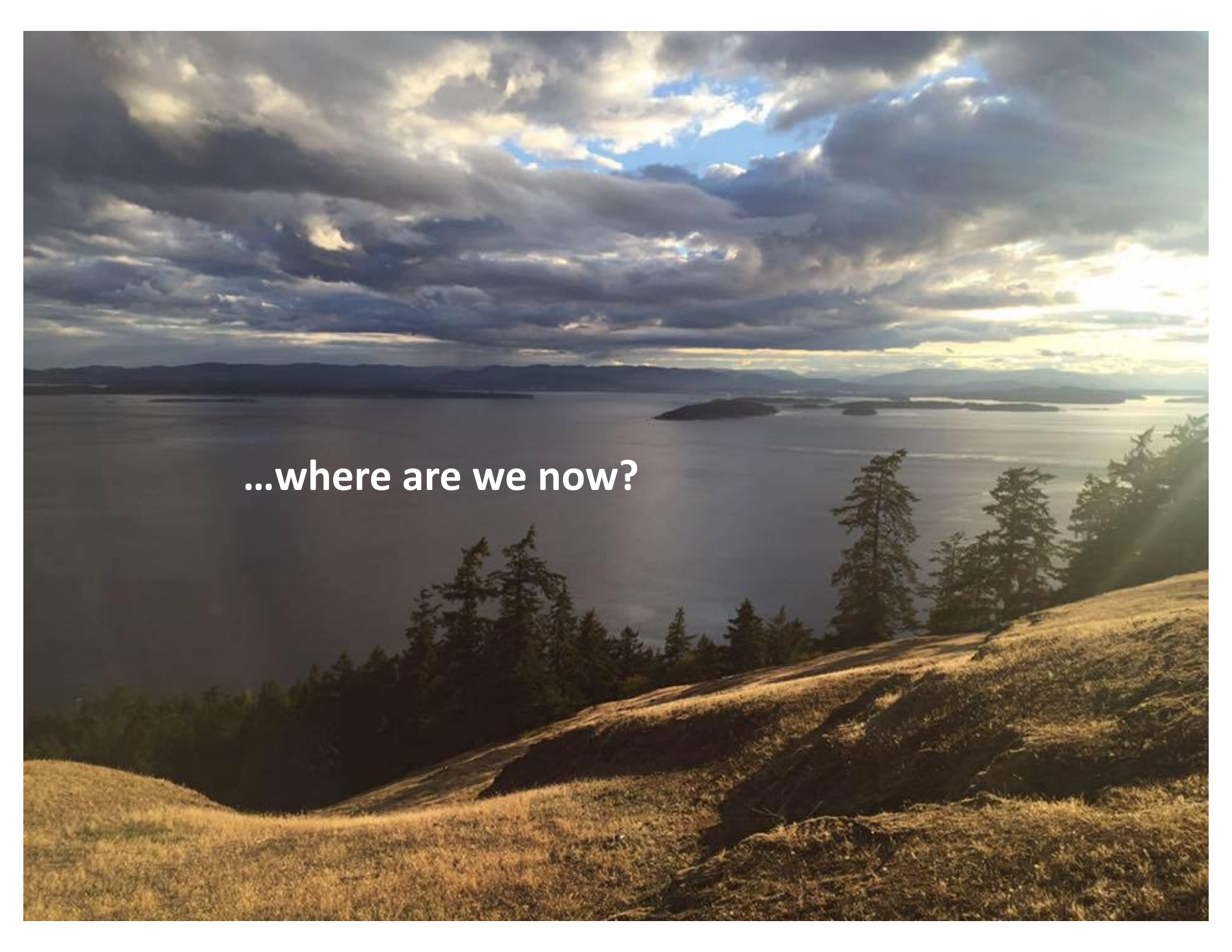
Location _____

	Strongly Disagree	Disagree	Agree	Strongly Agree	Does Not Apply
The training met my expectations and needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The information will be useful in my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information was presented in ways that facilitated learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The trainer/facilitator was well prepared and organized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The trainer/facilitator communicated effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The handouts (or written materials) are helpful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend this training to others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoyed this training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I will do something new, different, or better in order to be safer at work because of this training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I will do something new, different, or better in order to improve my health and well-being because of this training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I will do something new, different, or better in order to improve my consumer-employers' health and well-being because of this training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What changes or additional information would have made the training more valuable?

Two (or more) things I learned that are most useful are:

Can you share one (or more) specific actions you plan to take as a result of this training?



...where are we now?

Lessons Learned

Adjusting with
Leadership &
Strategic Changes

Flexibility &
Preserving
Evidence-Based
Tactics

Evaluation
Compromises

Perseverance &
Letting Go

Acknowledgements

Partners

OR Home Care
Commission
SEIU Local 503

Co-Investigators

Jennifer Hess
Miguel Marino
Diane Elliot

Olson lab & alumni

Kelsey Parker
Brad Wipfli
Katrina Bettencourt
Kristy Luther-Rhoten
Sharon Thompson
Robert Wright
Annie Buckmaster

Students

Claire Boenisch
Teala Alvord
Shalene Allen
Afsara Haque
Faith Raspante
Colleen Hunter
Natasha Gulati
Jacob Wilhite
Autumn Graves
Veronka Larova

Consultants

Linda Mabry
Daniel McClintick
Diana White
Thuan Nguyen

Grant: NIOSH U19 OH010154



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Discussion & Questions?

