What are the factors affecting satisfaction and retention of care assistants in the continuously growing Irish home care industry?

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Abstract

Background: Home care provision is a rapidly expanding market and the industry face challenges in relation to the homecare workforce. This study was designed to investigate the factors affecting satisfaction and retention of home care assistants. The study findings may help to make recommendations to management on ways to boost employee satisfaction and retention further, which will result in creating high quality care services.

Methodology: A qualitative research method was used for this study. Data were collected using ten semi-structured interviews from a large franchise home care organisation in Ireland. Flexible open-ended questions were used to gain insight into the attitudes of home care assistants, along with their experiences and opinions on employee satisfaction and retention in the Irish home care industry. The participants have worked in the home care sector from between three and ten years.

Findings: A thematic analysis of the data showed that the participants have factors in common, adversely affecting both employee satisfaction and retention in the Irish home care industry. The thematic data analysis identified a number of themes including undervalued in their role, under pressure in a busy environment, limited career progression, frustration, intrinsic motivation and appreciating support from the organisation. The themes encompassed both positive and negative factors towards employee satisfaction and retention.

Practical and social implications: Based on the study findings, Irish home care assistants are satisfied in their current job. In keeping with previous literature, this research found that pay is still a key factor of employee satisfaction and retention, not only in relation to their salary. Greatly, care assistants felt constrained by irregular working hours, no travel allowance to and from clients and limited career progression. As a result of these factors home care organisations struggle to maintain a competent and stable workforce.

Originality/value: These findings have the potential to enable human resources managers, home care organisations and policy makers to formulate strategies to satisfy and retain home care assistants who are considered vital to the strength of the Irish home care industry.
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Chapter 1: Introduction

1.1 Background and context to study

Home care in Ireland is generally understood as home help services for a person who is unable to complete tasks for themselves due to old age or disability. These services include light housekeeping, meal preparation, prompting medication and assistance with personal care, washing and dressing (Van De Weerdt and Baratta, 2012). Home care services play an important role in enabling people of all ages with care needs to continue to live independently in their own home for as long as possible (The Institute of Public Health in Ireland, 2018). Van De Weerdt and Baratta (2012, p. 1) asserts that “there is a general tendency for people to preserve the greatest possible independence”.

Although the majority of people have family members, neighbours and friends who can assist them with their daily routine, approximately one third of people who need assistance rely to some extent on direct paid care assistants (Butler, 2016). The demand for these services will continue to grow (Clarke, 2015), predominantly for elderly people (The Institute of Public Health in Ireland, 2018).

“The health trends associated with population-ageing are expected to result in an increase in demand for home care. With the Economic and Social Research Institute (ESRI) predicting that the share of the population aged 65 and over will increase from one in eight in 2015 to one in six in 2030, and that the number of people aged 80 and over will almost double during this period, the Department of Health’s Health Service Capacity Review 2018 forecasts that a 120% increase in home care services will be required by 2031” (The Institute of Public Health in Ireland, 2018, p. 8).

It is also reported that other countries around the world are experiencing the same growth. For example, the Australian Health Directory (2016) concludes the increasing aging population with the increasing demand for the elderly to remain in their own homes for longer specifies that by 2050, three million additional people will seek services provided by the home care industry and therefore, the workforce will need to double by 2050 (Tyrrell, 2016) to match with the growing trend (Sutcliffe and Dhakal,
Similarly, Onder et al. (2007) identified homecare as one of the fastest growing sectors of the healthcare industry in Europe. Consequently, satisfying, retaining and managing this workforce will be crucial to meeting society’s expectations regarding the future care needs of people in the community (Clarke, 2015). However, there are several limitations which impact negatively on the success and productivity of this existing service e.g. home care organisations struggle to maintain care assistants due to unappealing aspects of the job such as poor pay, irregular working hours and limited career advancement. As a result, companies come under pressure to meet the rapid growth of home care services (The Institute of Public Health in Ireland, 2018).

The immediate challenge for home care organisations is to build and retain a workforce large enough, and with the necessary skills to meet this demand. Care jobs are not, however, considered highly attractive (Clarke, 2015). They are in general poorly paid and associated with poor quality jobs (Clarke, 2015) including job insecurity, demanding tasks, long working hours, unpleasant working conditions and poor training opportunities (Perry, Mulligan and Smith, 2017; Kadri et al., 2018). Many home care assistants experience these job difficulties all around the world such as Canada (Berta et al., 2013), Netherlands (Xanthopoulou et al., 2007) and the United States (Butler, 2016). Furthermore, these factors create a high turnover of staff (Collier and Harrington, 2008; Donoghue, 2010) which results in inconsistent and unstable staffing (McHugh et al., 2011). Because of this, it is imperative that home care companies establish strategies to alleviate the disadvantages associated with the job (King, 2012).

Given the growing demand for homecare services in our ageing population, there is an urgent need to understand more about the home care assistant’s experiences and attitudes towards working in this industry, to allow organisations to better understand and acknowledge the factors that are affecting employee satisfaction and retention, so the industry can ensure a competent and stable workforce to meet this growing trend. There is a lack of literature on care assistants in general. There is very little known about how home care assistants experience and negotiate their jobs. This suggests a significant gap in our knowledge of the work environment of this growing workforce in Ireland. Therefore, the aim of this research is to determine the factors affecting
employee satisfaction and retention of care assistants in Ireland, with the aim of making recommendations to management to boost employee satisfaction and retention further, along with creating high quality care services.

1.2 The organisation of the study

For the purpose of this research, interviews were conducted with staff from a number of home care companies which are part of a leading home care franchise. The franchise network was first established in the United States and then came to Ireland in the year 2005 and has continued to grow throughout Ireland with a core mission to allow people with caring needs to remain in their own homes independently for as long as possible. The home care franchise network is among the top home care providers in Ireland. It offers personal services such as washing, dressing, incontinence care and mobility assistance. It also provides companionship, meal preparation, light housekeeping and keeping the person safe within their own surroundings. The organisation has over 20 independently owned offices across Ireland. With a present workforce size exceeding 3,500, the organisation has recruited more than 700 employees in the year 2018-2019 and has plans for further expansion of its workforce in the near future to meet the increasing business demand. This report evaluates the factors of satisfaction and retention at three of these home care companies dispersed across Ireland and each of them has over 200 care assistants employed.

1.3 The structure

This research study will comprise of seven chapters.

- **Chapter 1**: is the introduction which includes the background and context of the study, the problem in hand, the reason for taking this topic into consideration, why the researcher feels this topic is worthy to study and a description of the organisation where the research was undertaken.

- **Chapter 2**: will focus on the literature review which will analyse most recent academic articles, journals, books and reports on employee satisfaction and retention, firstly in a general context and secondly in the home care industry. This part will also discuss the important factors that affect employee satisfaction and retention in the home care industry.
• **Chapter 3:** is the research question which includes the aim and objectives of this study.

• **Chapter 4:** is methodology and this will discuss how the appropriate approaches were carried out for the specific research study.

• **Chapter 5:** outlines the study findings.

• **Chapter 6:** discusses these findings in the context of the broader literature.

• **Chapter 7:** will comprise of a conclusion and recommendations for further research.
Chapter 2: Literature Review

2.1 Employee satisfaction and retention

Employee satisfaction has been brought to our attention in many research studies as it plays an important role in the success of any business (Sibhoko and Bayat, 2019). A high level of employee satisfaction automatically enhances a lower turnover rate (Gregory, 2011). Therefore, keeping employees happy within their careers should be top priority for every employer (Gregory, 2011).

Employee satisfaction is a complex mix of a person's feelings, beliefs and evaluation of task performance within the workforce (Chamberlain et al., 2016). According to Robbins (2009), employee satisfaction is one’s general attitude towards their job. Further, he concludes that a person who is satisfied within their job has a good attitude towards their work and in contrast a person who is dissatisfied within their job has a bad attitude towards their work. Employee satisfaction is key to every organisation as it encourages productivity and organisational performance (Budie et al., 2019). This concept can be influenced in the way companies operate and manage their business and employee workforce (Bauman and Skitka, 2012). Dhanpat et al. (2019) also contend that employee satisfaction can be enhanced by compensation, training and development, work-life balance, working conditions, intrinsic factors and career progression.

As well as employee satisfaction, retention also plays an important role in the success of any business, including sustainability (Olckers and Du Plessis, 2012). Research describes employee retention as a logical attempt by employers to develop a favourable working atmosphere that fosters a culture of retention (Iles, Chuai and Preece, 2010). Employee retention refers to policies and practices that organisations use to deter good employees from leaving the workplace (Baharin and Hanafi, 2018). It comprises of taking measures to encourage employees to stay in an organisation for as long as they possibly can (Francis, 2014; Baharin and Hanafi, 2018). Recruitment and retention come hand in hand as they are both “hot issues” (Gaber and Fahim, 2018, p. 24). Though, experts maintain that it is relatively easy to recruit staff, whereas it is much harder to retain them (Gaber and Fahim, 2018). Sinha and Sinha (2012) conclude that there is no simple one-way system of keeping employees, but organisations must
try and implement relevant strategies to ensure the retention of a talented workforce (Dhanpat et al., 2019).

Previous studies cite various positive consequences of having employees who are satisfied, namely staff committed towards the organisation (Kim and Back, 2012), job fulfilment (Sun and Pan, 2008), innovation (Yen-Ku, Tsung-Hsien and Li-An, 2014), good helpful peer behaviours (Chin, 2015), positive job energy and work meaningfulness (Clercq, Haq and Azeem, 2019). Further literature adds that employee satisfaction increases productivity, awareness, quality and good customer service (Sageer, Rafat and Agarwal, 2012). However, there are many reasons why employees do not always engage in these aspects of employee satisfaction. This can be due to high stress levels, lack of communication within the company, lack of recognition, or limited opportunity for career progression (Gregory, 2011). When this happens, employee turnover begins to rise, loyalty levels become less, and a lack of commitment becomes evident (Sageer et al., 2012). These negative concepts develop consequences such as the cost incurred due to employee replacement, employee turnover and loss of productivity (Baharin and Hanafi, 2018). Undeniably, employee dissatisfaction has many negative side effects for a company, while satisfaction results in a much better retention rate (Gregory, 2011).

Retention of skilled employees has been an ongoing concern for the last number of years in face of high rates of employee turnover (Samuel and Chipunza, 2009). When a company has a high employee turnover rate this can indicate poor retention strategies from management, therefore, organisations need to understand what makes people commit themselves to being loyal and productive to an organisation (Embughira, 2011). Thereby, retention is viewed as an important aspect to comprehend as it demonstrates the opposite of turnover, it indicates the behaviour to continue/stay rather than to quit/leave the organisation (Muir, 2014).

Lastly, despite the exemplary literature dedicated to employee satisfaction and retention across a range of contexts, for example, medical industry (Genet et al., 2011; Dhanpat et al., 2019), transportation industry (Sila and Sirok, 2018) and hospitality industry (Baharin and Hanafi, 2018) there is little consensus concerning these concepts in the home care industry. Given the importance of employee satisfaction and retention, it is obvious that a more combined field of research would be beneficial to
the development of knowledge within this sector. Essentially, the need to address this situation along with the rapid increase in the level of people remaining in their own homes and being able to meet future home care service demands (Burgess et al., 2018) is what has led to the purpose of the present study, and thereby this will be discussed and thoroughly clarified in the next section.

2.2 Employee satisfaction and retention within the home care industry

But before we begin this section, it is important to note that the current supply of the employees i.e. care assistants in the home care industry is poorly understood (Hewko et al., 2015). Documented evaluation pertaining to care assistants in particular is limited, as most of the research in this area has focused mainly on issues surrounding nurses, care users and their families, and few studies have involved and captured the viewpoints of actual care assistants (Manthorpe, Moriarty and Cornes, 2011; Christensen, 2012; Glendinning, 2012). Consequently, this section will discuss the challenges home care companies experience in terms of care assistant satisfaction and retention and will follow on to discuss the factors that affect employee satisfaction and retention in the home care setting.

With the dramatic growth of the ageing population, caring for this sector of the population has become increasingly difficult. As many people choose to age at home, home care services are being forced to respond. The emergence of home care and the employment of care assistants is one of the ways that the industry has evolved to meet this crisis. However, employee satisfaction and retention of home care assistants has proven to be problematic (Faul et al., 2010). This is due to their job being regarded as unskilled, low paid, work under challenging conditions, minimal benefits and inconsistent hours of work (Faul et al., 2010).

Care assistants who experience these factors tend to leave their job which consequently poses a significant workload challenge to home care companies (Burston, 2017). It also makes it difficult for home care services to meet with the continuously growing trend if care assistants are endlessly leaving the organisation (Lecovich, 2011), thereby, Lecovich (2011) concluded that home care assistants are the core of the business. Cooke and Bartram (2015) convey that care assistant retention difficulties may affect the quality of client care needs and further challenge employee
retention as a result of intensive work and reduced employee well-being, thus creating a vicious circle.

Overall, to gain an understanding of the factors that promote employee satisfaction and retention in the home care industry is imperative (Larsen, Broberger and Petersson, 2017). It is apparent that securing employee satisfaction simply adds to increased productivity and morale and therefore increases employee retention (Gaber and Fahim, 2018). But, why then do care assistants continue to leave? What is missing from today’s retention strategies in the home care industry?

2.3 Factors affecting employee satisfaction and retention in the home care industry

Career prospects have been recognised as a major limitation for individuals to undertake within the home care industry, which is demonstrated in various research studies (Sutcliffe and Dhakal, 2018). Sutcliffe and Dhakal (2018, p. 6) highlights the lack of career advancement opportunities and how care assistants perceive care work as a “dead end job”. But, Burgess et al. (2018) also indicate that career paths for home care assistants are within the control of organisations. Supervisor support and recognition, an opportunity for promotion and support to do the job are all issues that can be addressed by the organisation itself (Burgess et al., 2018). The Institute of Public Health in Ireland (2018) express their concerns on the importance of the home care sector looking towards additional qualifications and continuous development of employees.

However, Fattore et al. (2010) show evidence of low levels of organisational support for learning and development beyond mandatory courses and induction. Funding and pay rates are public policy issues, but management can focus on strategies and policies that consider competencies, skills, health, well-being and career development of care assistants that may result in improved satisfaction and retention in the home care sector (Burgess et al., 2018). Although, a relatively recent study by McCaughey et al. (2012) did not find a significant connection between satisfaction and retention and the availability of career ladder positions in home care companies.

The Institute of Public Health in Ireland (2018) feels a more national strategic approach is required. The idea of career development is important, especially as the
carer labour market will grow largely over the next 30 years (The Institute of Public Health in Ireland, 2018).

“The workforce needs to increase by 48% just to meet demographic growth over the next 10 years” (The Institute of Public Health in Ireland, 2018, p. 55).

It was advised that if training and skills were set to recognise national standards, this would help strengthen caring as a valued career (The Institute of Public Health in Ireland, 2018). Even though many studies have made the forecasted care needs known to the public, few have the actual information gathered to assess the gap between the future needs and the current supply or existing training capacity (Hewko et al., 2015).

It is evident and consistent from each reviewed study in the home care sector that pay and hours are a big issue when we refer back to employee satisfaction and retention. In this regard, care assistants working in private home care companies are vulnerable to mixed working conditions, including poor wages with very few opportunities of pay progression (Briar, Liddell and Tolich, 2014). In home care organisations care assistants are generally employed on a causal part time contract (Clarke, 2015). We also learn from Clarke (2015) that casual part time contracts allow care assistants to have a high degree of flexibility which is one of the main positive attractions to home care jobs. Yet, Clarke (2015) expresses a disadvantage where home care assistant’s income can be unpredictable and fluctuate at every pay period. This is due to the fact that their existing client situations can change at any given time such as moving from their home into a residential facility, respite, hospitalisation, or even passing away. It can take a relatively long time for the company to replace these clients (Clarke, 2015).

In addition, care assistants are paid poorly. They are normally paid below the minimum wage. This is conveyed in both Clarke (2015) and Sutcliffe and Dhakal (2018) studies which discovered that care assistants were experiencing financial strain and difficulty planning realistic budgets simply for living expenses. Care assistants are affected also by this because of cost cutting measures within organisations, such as disregarding payments for meetings, training and travel between clients (Rubery and Urwin, 2010) including no payment for pension schemes or some forms of leave, for example, sick leave (Leece and Peace, 2010). These outcomes have been said to obstruct employee’s performance, productivity and retention imperatives (Burgess et al., 2018).
However, Briar et al. (2014) suggested that care assistants love their job because it intrinsically rewards them (e.g. feels good helping others in need) and they are not in it for the financial gain, therefore, organisations felt they weren’t expected to reward care assistants by giving extra pay or making allowance for financial benefits. Caregiving is also perceived as unskilled (Briar et al., 2014). With these perceptions of care work in mind, it weakens the pay and working conditions of care assistants, “and in future may undermine the quality of care delivered to vulnerable clients” (Briar et al., 2014, p. 2). Care assistants love and feel passionate about their job, but they also want to be valued for their experience, complex skills and committed, professional attitude (Briar et al., 2014), even though, an interesting statement was brought to the authors attention when a care assistant from a study by Butler et al. (2014, p. 178) could not understand why employees would leave their role as a care assistant; she explained she wasn’t in the job to make money.

“If you enjoy making people happy, and letting them stay home, home health is the perfect job you can get. If they’re looking to make a million bucks, then don’t do it.”

Despite this, Briar et al. (2014) suggests there needs to be a pay and career structure that acknowledges and appreciates the skills and qualities care assistants bring to the workforce.

Cheng, Nielsen and Cutler (2019) found that different aspects of job quality are connected to intention to stay or leave a company. Genet et al. (2011), for example, showed that care assistants in Northern Ireland were not gaining a work-life balance such as regular working hours or intrinsic factors such as support from their organisation which resulted in them feeling dissatisfied in their job.

Cooke, Donaghey and Zeytinoglu (2013) gathered fascinating data from interviews they held in Newfoundland and Ireland with rural workers which highlighted that the same or similar jobs can be seen very differently depending upon the context in which they are placed within, as people of different locations or stages of their lives have a different outlook on life. Particularly, workers’ individual situations at an exact stage of their life, such as their age and family or relationship expectations, together with their beliefs on work and life and available alternatives in achieving personal life goals are important in defining work quality (Cooke et al., 2013). Therefore, it is argued that
the factors that affect job quality are formed by wider aspects of life such as family, friends, community, lifestyle and past experiences (Cooke et al., 2013).

Autonomy is an important ongoing aspect in job quality which means it too is a prime factor influencing employee satisfaction and retention that keeps reoccurring in recent literature. Both Butler (2013) and Leece and Peace (2010) found that a greater sense of autonomy while performing tasks was a predictor for a home care assistant to stay longer in their job, especially more experienced older workers who prefer to work with little or no direct supervision (Faul et al., 2010).

Two studies of home care assistants found a positive link between having a sense of worker accreditation and lower intention to leave the job (Denton et al., 2002). Together Faul et al. (2010) and Ghosh et al. (2013) claim that it is important for an employee to have independence, individual choice and control over their own pace of work. Not only this, further reports also found that home care companies who recruit their own staff directly have greater autonomy (Leece and Peace, 2010). This allows for better relationships within the company and better communication (Leece and Peace, 2010), along with care assistants being able to negotiate their conditions and hours directly with their employers (Laragy and Ottman, 2011). Additionally, autonomy is directly correlated with care assistants’ intention to stay (Kovner et al., 2009; Unruh, Zhang and Chisolm, 2016) because discretion enables care assistants to respond appropriately to the needs of their clients, thus it contributes positively to care quality and employee wellbeing (Cortis and Eastman, 2015) creating positive outcomes both for the care assistant and client.

When working conditions are good this factor too creates positive outcomes for home care companies. Working conditions involve a wide range of themes and issues, from working time such as hours of work, rest periods, and work rosters to payment, as well as the physical conditions and mental demands that occur in the workplace (International Labour Organisation, 2019). It has been suggested recently that home care policy makers and service providers need to better recognise the influence of a wider range of factors, such as working conditions and the workplace environment, on the intention to leave or stay (Cheng et al., 2019). There are some inconsistencies throughout recent studies on working conditions. Some research articles hold a
negative view on working conditions for care assistants whereas other articles consist mainly of positive views.

First, there is a collection of hazards that can affect the health and safety of home care assistants. These can include muscular issues/injuries caused by lifting and transferring clients, risks involved with physically demanding housekeeping, and dangers related to transport which play a huge part of a care assistant’s daily routine (Seavey and Marquand, 2011). Emotional stress also plays into the nature of this work including having too much responsibility with insufficient training (Stacey, 2011), having to deal with deterioration and death of their clients (Butler et al., 2010), or working within organisational rules that do not always fit with what the care assistants feel is in favour of their clients (Stacey, 2011).

All in all, Hewko et al. (2015) claims that care assistants are disregarded and that improvements to work conditions and respect are hard gained. But on a positive note, regardless of all the physical and emotional demands of the job, home care work is flexible enough for workers to refuse work that might be beyond their capacity (Butler et al., 2014). Although, unfortunately, they face many challenges in their attempt to attain reasonable treatment and recognition (Hewko et al., 2015), but, in an industry with a flat pay rate and limited progression opportunities, recognition is important (Eastwood, 2017).

Finally, Tuckett and Colleagues (2009) found that despite what an organisation or supervisor could offer or not to a care assistant to fulfil their needs didn’t matter because care assistants have an intrinsic love for their job allowing them to maintain commitment to their work and organisation (Tuckett et al., 2009; Karantzas et al., 2012). While, qualitative findings suggested that the quality of communication and the relationship with one’s supervisor was a significant concern for the care assistants and it is essential that home care organisations work to improve the relationships and communication between direct care assistants and their supervisors (Ryvicker, 2018). Past studies have reported that having a supportive or good-quality supervisor is associated with good retention strategies (Radford, Shacklock and Bradley, 2013; Jang et al., 2017). And lastly, Van Waeyenberg, Decramer and Anseel (2015) established that the nature of supervisory feedback (i.e. frequent favourable feedback and regular praise) gives rise to higher rates of satisfaction and retention with care assistants.


2.4 Conclusion

While the majority of care assistants find the work they do very rewarding, there are also challenges which eventually begin to affect satisfaction and retention in home care companies (Faul et al., 2010; Stacey, 2011; Butler et al., 2014).

This literature review offers the reader a review of the breadth and depth of current knowledge of employee satisfaction and retention in a general context and then goes into greater detail of these aspects in the home care workforce. The research presents a picture of a marginalised workforce charged with caring for a vulnerable segment of the global population. No doubt, care assistants face the poorest working conditions (Hewko et al., 2015). Consequently, there is no denying based on the study of this literature review that satisfying and retaining a caring workforce to keep up with the needs of an aging society is one of the biggest challenges we face today. Client’s needs have increased over the years and meeting these needs in circumstances of difficulties surrounding satisfaction and retention with care assistants is hard. Home care companies are constantly coming up with day-to-day challenges that must be addressed and dealt with quickly and efficiently for them to be successful at all in this phenomenon.

The literature review focuses on the elements which have positive and negative effects on employee satisfaction and retention. Based on the findings of the literature, it is evident that employee satisfaction and retention can have both a negative and positive impact on employees and how they perceive their work, and that is critical for home care organisations to be effective in order to have an upper hand in the sector (Sibhko and Bayat, 2019). If home care organisations can address these elements sooner rather than later not only will employee satisfaction and retention improve, but high-quality care outcomes will also improve, and organisations will then be able to meet the growing demand and expectations of home care services. Organisations urgently need to concentrate on these elements to ensure they keep the compassionate and loyal care workers for tomorrow (Eastwood, 2017).
Chapter 3: Research Question

What are the factors affecting satisfaction and retention of care assistants in the continuously growing Irish home care industry?

The aim of this research is to investigate how Irish home care companies can satisfy and retain care assistants during the growing demand and high expectations for elderly and disability care services. The research question is to consider the contributions made in home care companies that will save talented care assistants, whilst trying to provide efficient and effective outcomes. Therefore, the goal of the research is to specify the factors that make employees stay in a home care environment with the aim of making recommendations to management to boost employee satisfaction and retention further, along with creating high quality care services.

Thus, the aims of the study are:

1. To explore the experiences of Irish home care assistants
2. To investigate the factors that influence employee satisfaction among home care assistants
3. To explore the attitudes of Irish home care assistants towards the industry and their intentions regarding employee retention
4. To explore the factors that influence home care assistants’ intentions to leave or stay within the industry

The following section will discuss the plans on achieving these objectives and the requirements involved to answer the research question.
Chapter 4: Methodology

This chapter will begin by outlining the methodological framework used for this research study. The methodological framework will provide details pertaining to the research philosophy, research approach, the sample technique, and the data collection tool. This chapter will also look at the procedures that were implemented and the research design. Additionally, it will discuss the ethical considerations, data analysis and limitations embodied in this study.

4.1 Research philosophy

Research philosophy is a term which “refers to a system of beliefs and assumptions about development and knowledge” (Saunders, Lewis and Thornhill, 2016, p.124). The research philosophy refers to the assumptions which guide the methodology used by the researcher. These assumptions will support the research approach and the method implemented as part of the approach. The two most important elements to consider in the research philosophy are ontology and epistemology. Ontology states the assumption of nature of reality; and covers the following three contrasting aspects i.e. objectivism, subjectivism and constructionism (Saunders et al., 2016). In comparison, epistemology relates to the knowledge and by what process the knowledge is shaped in a certain field of research; this element has two different approaches which include positivism and interpretivism (Quinlan, 2011). “These assumptions inevitably shape how you understand your research questions, the methods you use and how you interpret your findings” (Saunders et al., 2016, p. 124) which in turn will enable the researcher to create a clear research project, in which all elements of research fit together (Saunders et al., 2016).

As a guide, Saunders and Colleagues (2016) suggest that the most efficient method of deciding which philosophy to select is to consider what the research aims to achieve and the objectives of the research. The chosen philosophy can help the researcher justify their choice of research strategy (Rubin and Rubin, 2012) as the research strategy is influenced by the philosophy the researcher has chosen to accept (Bryman and Bell, 2011). Therefore, in view of the research aims and objectives of this study the most appropriate philosophy to adopt is the epistemology approach.
The epistemology approach adopted in the current study was interpretivism. This was considered the most pertinent approach because the aims of the study were exploratory in nature and related to understanding individual experiences. The interpretivism outlook concludes that human beings are different from physical phenomenon because they create meanings. People of different cultural backgrounds, hailing from different circumstances, situations and at different times consequently create different social realisms. The purpose of this research is to create new, richer understandings and interpretations of social worlds and contexts (Saunders et al., 2016).

The concept of employee satisfaction and employee retention will be influenced by each individual’s experience of work, their unique values, beliefs and backgrounds. The knowledge required is new aspects of the phenomenon of employee satisfaction and retention “which cannot be analysed through unprejudiced interpretations” (Larsen et al., 2017, p. 344). The researcher explores this phenomenon by focusing on understanding and interpreting the knowledge gained within a given context (Larsen et al., 2017). In conclusion, once the researcher has identified the appropriate philosophy the researcher must then chose a research approach to investigate the research aims and objectives.

4.2 Research approach

Initially, the qualitative methodology was used as opposed to quantitative. This was due to the fact that a quantitative approach requires a hypothesis that is tested as part of the study (Silverman, 2014), while a qualitative approach requires the hypothesis to be formulated after the data has been analysed (Saunders et al., 2016). Considering the limited research in the area of employee satisfaction and retention in the home care workforce, it was decided that a more exploratory approach was needed which directed the researcher to a qualitative approach. The researcher decided to use one-to-one interviews as the preferred qualitative method of data collection.

A single data collection technique was put in practice, i.e. qualitative semi-structured interviews (Saunders et al., 2016). Qualitative research is mainly inductive by nature (Graue, 2015; Mayer, 2015). An inductive approach is used when exploring a phenomenon, exploring individual experiences and identifying themes and patterns (Saunders et al., 2016). The researcher used this type of approach to identify themes related to the researcher’s research question. The qualitative approach offered a more
effective approach to investigating this topic and creating results with rich, valuable and worthy information. On the other hand, a quantitative approach is usually linked to a deductive approach where the emphasis is on using data to test theory or investigate the relationship between two or more variables (Graue, 2015; Saunders et al., 2016).

### 4.3 Sample/participants

For the purpose of this study, the researcher recruited a sample of home care assistants working within the home care sector in Ireland to take part in the semi-structured interviews. The home care assistants were selected through a process of convenience sampling i.e. the researcher recruited volunteer participants who were easily accessible, also known as non-probability sampling. This method was used (1) to reflect varying age and experiences of care assistants; (2) to factor in the time and cost constraints on this research study; (3) the researcher worked with a very small sample within an organisation (Saunders et al., 2016). In comparison to this, quantitative research works with a large sample encompassed within a mathematical model. Working with a large sample can be very time consuming (Mayer, 2015).

In total ten participants were recruited to the study, all of whom were female. The majority of home care workers are female (Butler, 2016). Butler (2016) states that female workers are the primary carers, both formally and informally, i.e. paid and unpaid. Participants ranged in age from 26 to 60 (mean age = 41.5 years). Participants had been working in the home care sector ranging from three to ten years (average time working in the sector = 5.5 years). Data saturation was reached after interviewing eight care assistants in accordance with the protocols of Francis et al. (2010). Francis and Colleagues (2010) defined the point of data saturation when no new shared themes or ideas were emerging.
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Table 1: Sample profile

The participants were selected from three private home care companies belonging to the same franchise in three different locations across Ireland. Each company provides home care services to the elderly and disabled including assistance with personal care and all the activities of daily living. The interviewees were employed by the companies. They were informed about the study through their HR manager and participated on the basis of accessibility and availability throughout the study and level of interest on the topic. An information sheet (see appendix 1) was emailed to them detailing what the research was about and explaining that it was a study for a master’s dissertation in Human Resource Management. The care assistants participated voluntarily, with promised confidentiality.

4.4 Data collection tool

The author set out the aims and objectives of this research study as previously mentioned above. Once the researcher was happy to proceed with the identified aims/objectives and approach, 3/4 interview questions were prepared for each aim and objective. This was done quite early on in the study process as it steered the research in the right direction instead of it becoming unfocused (Bryman and Bell, 2011).
A semi-structured interview guide was developed as the research instrument to allow the researcher to prompt care assistants’ responses on various aspects relevant to employee satisfaction and retention. As the aim of the research is to understand the experiences of home care assistants working in Ireland, Easterby-Smith, Thorpe and Jackson (2012) discussed using a flexible approach. This type of interview allows for the interviewer to probe particular answers in depth or in more detail (Collis and Hussey, 2014) and place more importance on ‘why’ than just understanding the ‘what’ and the ‘how’ (Saunders et al., 2016). This was done by the initial question being supplemented with questions such as ‘What do you mean?’ and ‘Can you explain a bit more?’

The interview comprised of a detailed set of open-ended questions (see appendix 3), designed with the following purpose/s in mind (1) to explore the experiences of Irish home care assistants; (2) to investigate the factors that influence employee satisfaction among home care assistants; (3) to explore the attitudes of Irish home care assistants towards the industry and their intentions regarding employee retention; (4) to explore the factors that influence home care assistants intentions to leave or stay within the industry. The interview guide incorporated some opening questions that collected basic information such as how long the interviewee had been working as a homecare assistant, in order to build rapport and encourage conversation. Open ended questions were then used to encourage the interviewee to provide detailed descriptions of their experiences, e.g. by asking the interviewee to describe a typical working day, or a situation in which they felt very satisfied/dissatisfied within their job. This enabled the interviewees to reflect and articulate their own concepts of satisfaction and retention in the working environment.

The semi structured interviews also consisted of personal contact, which the author felt would not only be beneficial for them but also for the interviewee as they had the chance of being heard and gave them an “opportunity to receive feedback and reassurances about the way in which information would be used” (Saunders et al., 2016, p. 394).
4.5 Procedures

Before the interviews were complete, the researcher set up individual meetings with the HR directors of the three home care companies seeking their permission to recruit participants. Once permission was granted by each company, the HR directors then identified staff members who were eligible for the study. These potential participants were then approached by the researcher via email with information about the study. Participants were then free to choose to take part and communicated their agreement directly with the researcher if they decided to participate.

Once the participants were confirmed upon receipt of their agreement, a date, time and place of the interview was arranged. Home care assistants are not office based and their work rosters tend to vary from week to week which created logistical challenges in terms of organising the data collection process. As Clarke (2015) suggested, the best way to deal with this was to organise interviews on a particular day and venue and then let the participants choose according to personal preference and time limits. All interviews were carried out face to face. Interviews were conducted in quiet private meeting rooms in hotels close to where they were living for their convenience. At this point, the interviewer gave the interviewee a consent form (see appendix 2) to peruse and sign. The researcher then explained to the participant the purpose of the study.

Interviews ranged in duration from 30 minutes and 41 seconds to 46 minutes and 54 seconds resulting in the average interview duration being 39 minutes and 54 seconds. They were recorded through note taking and audio recording (for reference purposes). All interviews took place between May 30 and June 17, 2019. The interviewer held the first interview on May 30, 2019, the next three interviews on June 3, 2019, the following three interviews on June 7, 2019, and the last three interviews on June 17, 2019. The interviewer took a 20-minute break between each interview to take notes. These notes included such information as the room setting, if the room acoustics were acceptable; background information about the participant, for example, gender, age profile and years working in the sector; and the researcher’s immediate impression on how the interview went.

Upon completion of the interview the researcher checked to ensure the audio recorder worked efficiently and made sure it was stopped and saved immediately. The
researcher made written notes of the physical responses the interviewees made throughout the interview as this may give a further indication into the interviewee’s thoughts on the topic.

4.5.1 Pilot study

Part of the procedures section involved a pilot study. This was undertaken with two experienced Irish home care assistants to fine tune the research instrument before the interviews commenced. This was undertaken to test and receive feedback on the phrasing and the lay out of the interview questions. There were some adjustments to be made on the interview schedule after the pilot study took place. Some of the questions did not have a clear meaning, were vague and unspecified, hence rewording was done to rectify this and help to refine ideas. One or two questions were also added to the interview schedule for probing purposes and one of the participants recommended ending the interview schedule by asking the interviewee if they would prefer to add anything else to the interview. The researcher thought this was an extremely relevant point as it gave the interviewee an option and choice to discuss whatever they felt was relevant and perhaps omitted from the interview process. The pilot study also provided the researcher an opportunity to test the audio recording equipment and confirm that it was functioning correctly.

However, one restriction emerged from the researcher’s observation was that the interviewees in the pilot study did not feel as comfortable discussing some of the topics in their workplace. As a result, the researcher made sure the real research interviews were not conducted in any of the interviewee’s place of work.

4.6 Ethical considerations

As discussed, three private home care companies within the same franchise were selected. Access to participants was negotiated and approved by Human Resources, who also acted as the initial point of contact between the interviewer and interviewees. Informed consent was ensured by asking each participant to sign an informed consent form prior to taking part in the interviews. In addition, participants received an information sheet and were given an opportunity to ask questions throughout the process at any time. Participants were also advised that they could withdraw from the study at any time without fear of any ramifications or discrimination towards them.
Confidentiality and privacy were stressed to the participant throughout the study and no information on any of the participants was exposed with each person’s name and organisation replaced with a pseudonym.

In this study there is no direct benefit for the participants themselves, but they have an opportunity to give their views and opinions which can be valuable in understanding the importance of the factors surrounding employee satisfaction and retention in the Irish home care industry. Confidentiality is one of the main elements of ethical research in order to ensure the protection of all involved as well as encouraging complete honesty in the research data collected. Reassurances were outlined in the information sheet, so interviewees were informed fully of data handling and the protection of their privacy. The consent forms collected as well as the transcripts were put into closed folders and kept safely in a protected safe keeping filing cabinet. The audio recordings were stored securely on a computer and deleted from the recording device once they were transferred and backed up. Ethical approval was also obtained from NCI prior to the carrying out of the interviews to enhance the validity of the study.

4.7 Data analysis

The study used a thematic analysis framework. This involved a thematic analysis of the qualitative interview data in recognising and merging the main themes and sub-categories.

In order to conduct a thematic analysis Braun and Clarke (2006) recommend the verbal interview data to be transcribed into written format. In this process, all identifying information is removed, such as names and company information. Once the researcher completed the transcriptions they then familiarised themselves with the data by reading and re-reading all transcripts. During this the researcher made self-notes for the coding process. This made it easier for the researcher when it came to the coding phase. Once the researcher was familiar and had made a list of general recommendations from analysing the data, each transcript was then coded. This was done manually.

The researcher went through the data in detail, giving full and equal attention to each transcript. This was done by writing notes in a side margin on the transcripts page that
were being analysed. Sentences and words that indicated potential patterns and themes were then highlighted. The codes were then matched with the data extracts that demonstrated the particular code, which Braun and Clarke (2006) recommended. Once this was achieved, the researcher then moved onto phase three which involved searching for the themes and patterns (Braun and Clarke, 2006). This was done by writing the name of each code with a brief description on a sticky note and mixing and matching the codes by arranging them into theme sections on a white board. At this stage, the researcher began to think about the relationship between codes and themes. Some themes outperformed other themes, where other themes were disregarded as the process continued.

Following on from this, themes were reviewed. This was done by reviewing the codes and themes and seeing if they formed a coherent meaning as a whole and worked in relation to the data set. Once the researcher was happy with the themes they were defined and named. The researcher identified what each theme was about and determined what aspect of the data each theme captured. This was done by going back over the captured data for each theme and arranging them into an organised and coherent manner. A detailed analysis was conducted as well as identifying a story that each theme told and if the story fitted into the broader picture of the research question (Braun and Clarke, 2006). Once the themes were fully worked-out it was then time to write up the findings.

4.8 Limitations

There are various limitations when using qualitative research. Qualitative research can be influenced by researcher bias as qualitative research is much more based on the researcher’s understanding of the data collected, whereas quantitative research aims to remove bias from the research study. The researcher can lead the responses of the interviewees by developing leading questions (Saunders et al., 2016). Silverman (2014) provided a checklist while conducting qualitative research interviews which is the researcher’s responsibility to ensure they have followed the relevant checklist and the extent to which it is followed is entirely up to the researcher. In this study the researcher made use of part of the checklist. They constantly compared collected data and verified its accuracy in terms of context with continuous comparison (Silverman, 2014). Although this is generally done, the reliability of the interviews can be
uncertain. Reliability with regard to findings resulting from using semi structured interviews is that these are not necessarily intended to be replicable since they reflect reality at the exact moment they were collected where this could be subject to change (Saunders et al., 2016).

All of the care assistants were female, this was due to the fact that nearly 90% of the specific workforce consist of women (Guven, 2016). The proportion of men employees working in this industry are far less; hence we could not produce conclusive evidence about what factors can influence employee satisfaction and retention of male employees. Although the influence of gender was not a key focus of this study, it is possible that it may influence the concepts that are being investigated i.e. employee satisfaction and retention. Also, the interviews conducted in the study were franchised based; hence the factors behind employee satisfaction and retention that have developed are exclusive to employees working in this particular franchise. Results could have been generalised across the sector if more home care organisations had been covered.

Lastly, the researcher needs to consider that the participant may have been reluctant to be completely honest with their answers as they may have felt it would develop ramifications with regard harmful to the relationship they have with their organisation, although confidentiality was stressed to them on numerous occasions.

Nevertheless, it was undisputable that the limitations of the methodology did not exceed the strengths and appropriateness of this type of design, which is why the author chose to go with the qualitative research method.
Chapter 5: Findings

The interview discussions provided a wealth of knowledge to the researcher with regards to the care assistant’s experiences and attitudes towards the Irish home care industry. A thematic analysis was used to develop themes encompassing the topic of employee satisfaction and retention. Stemming from the thematic analysis, six critical themes emerged with regard to employee satisfaction and retention of Irish home care assistants, namely they are undervalued in their role, under pressure in a busy environment, limited career progression, frustration, intrinsic motivation and appreciating support from their organisation. The six themes relating to employee satisfaction and retention will be discussed in more detail in the sections that follow.

5.1 Undervalued in their role

Undervalued in their role was developed as one of the main crucial themes from this research study. This was evident throughout the data analysis by the fact that the participants discussed their roles being perceived by others as unskilled, low paid, hours and income fluctuating at any given time and only being paid for hours worked directly with clients with no travel allowance built in. They felt these aspects were not taken seriously from management in the home care organisations and therefore caused them to feel undervalued for what they do which resulted in having a negative impact on employee satisfaction and retention. For casual part-time workers these aspects were a growing concern.

The majority of the interview respondents perceived themselves as lower cost workplace substitutes for nurses and accepted their roles as this. Their tasks covered ‘unsavoury work’, helping with eating, drinking and assisting with washing and dressing. The vast majority of home care assistants interviewed did not however perceive these tasks as unskilled due to the difficulty involved in performing the tasks at hand.

“I wanted to become a nurse, but I couldn’t read or write properly so this was the next best thing, I understand that, but I feel our job is put down and we don’t get paid properly for what we actually do” (Participant 9)
Home care assistants were generally employed on casual part-time contracts. This provided a high degree of flexibility (which was of key importance to home care assistants who had family responsibilities), but in contrast hours of work and therefore income, tended to fluctuate and be unpredictable. If a regular client went into hospital or passed away care assistants would have to wait until staff coordinators allocated them a new client to reinstate them to their regular number of hours per week. As one interviewee commented:

“When one of your clients’ drops off your schedule it financially affects you. The office would try and get you something quickly, but it doesn’t happen overnight. I don’t think it is very fair that we have to suffer financially” (Participant 10)

In addition, a critical issue emerged where they were only paid for the time spent with clients and not for mileage costs between jobs.

“It was costing me more. I was doing a lot of mileage. I can see why some carers don’t stay at it. It doesn’t pay them” (Participant 1)

Yet, one interviewee out of the entire interview process stated:

“In any job you have to drive, so it is the same thing, like what job does pay fuel?” (Participant 3)

Each participant had strong opinions on the overall hours they were paid for. They felt it was unfair to be paid for only the time you spent with clients which also had a negative impact on employee satisfaction and retention. For example, they may work for seven or eight hours per day but only receive payment for five or six hours with the remaining time disallowed as either a break between calls or travel time.

“I was adding up my wages and thinking this isn’t right. I was doing all these hours but with very little money. They were only half hours and like only totalled at three hours pay even though you could be out from four until eleven at night” (Participant 9)

5.2 Feeling under pressure in a busy environment

Feeling under pressure in a busy environment was also developed as one of the main themes. From the onset and throughout the interview discussions, this was apparent as the majority of participants spoke about how they had inadequate travel time between
clients and also too much unpaid time-out between clients. Again, this concern was not addressed by management even though they were aware of the situation. Consequently, this also had a negative impact on employee satisfaction and retention.

Many participants complained that their schedule did not allow for adequate travel between clients despite recurrent relaying to their coordinators. This adversely affected their relationship with their clients. It did not allow them to establish a proper relationship as they were always rushing from one house to the next.

“So like a typical working day would be 08:00-09:00, 09:00-10:00, 10:00-11:00, 11:00-12:00, 12:00-13:00, 13:00-13:30 and so on. As you can see they don’t give you time to go from one client to the next, it is not possible. You would only give the clients’ 20 minutes and the company told us to do that. You would have to rush old people” (Participant 5)

“I am always rushing because the company has me out doing a lot of calls back to back. It is always very busy and I don’t get a chance to do my job the way I would like to because you are up against the clock to get to your other client on time” (Participant 2)

On the other hand, if clients were too sparse from one another then care assistants may incur unpaid time-out. The major issue was not only coping with the pressurised work but also the ripple effect that it had on their personal life outside of work.

“You might have calls in the morning, then you might have time off in the afternoon, but then you’re back out again in the evening, so that time off in the afternoon you still feel on duty, you’re still on call. It is a long day. You could be planning on doing those calls and then you get a call from the office to say look somebody is gone into hospital so your day is very much all over the place, you can’t and don’t really make plans” (Participant 1)

“When I’m working I like to be busy and when I’m not I like to close the book and walk away from it but unfortunately it is not like this in this job. We always seem to be on call even when we are not working because they are always looking for you to cover extra calls. This can sometimes disrupt your personal life” (Participant 2)
5.3 Limited career progression

Loretto et al. (2013) define career progression at an individual level which contains organisational factors such as continuing advancement, lateral movement, flexible working, role positions, and personal factors such as following interests or developing new skills, retaining power and autonomy, making use of knowledge and experience, continuing to learn and develop and retaining enthusiasm and commitment. Therefore, limited career progression was established as a theme because factors such as continuous advancement, continuing to learn new skills and develop within their role was a major topic of discussion in relation to employee satisfaction and retention. Many participants discussed a lack of opportunities for career progression within their company and in fact, within the Irish home care sector in general.

Based upon the interviewee’s responses the only way you could move up the career ladder was by moving into an administrative role such as a client/staff coordinator in the office or care supervisor who calls out to the client’s homes. A few participants aspired to become a care supervisor so they could earn a proper salary, but the majority did not want an office-based role and therefore expected to remain at the same level. The following statements from the interviewees varied. Two care assistants explained:

“*I would like to become a care supervisor like a more managerial role. A girl I used to always work with became a care supervisor in the company we are in now. I would love a job like that, like that you are on a proper salary. There is not many of those opportunities***” (Participant 5)

“*There is nothing to progress to. The only progression is a care supervisor or in the office but like what else is there. It is kind of a dead-end job. Like when I worked in the hospital every three months you would receive a review which gave you the opportunity to develop or move up in the sector, but with this you don’t get that opportunity. It is not very encouraging but what can you do***” (Participant 7)

Although these participants experienced the lack of career progression it did not prompt them to leave.

Alternatively, two other care assistants stated:
“I don’t want to progress. Like what, go into the office and work there, no thanks. I did that, I don’t want to do it, it is not for me. I like being in the car, I like being out and about. It makes the day go by quicker for me” (Participant 6)

“To be honest awhile back I was offered to be a care manger, but I didn’t want that because you are just popping in and out, you don’t form any relationships with anybody. It didn’t appeal to me at all and I can’t stand office work” (Participant 10)

While limitations to career advancement was evident, so too was continuous learning and development of new skills within their role. Although all care assistants were encouraged to undertake QQI Level 5 Healthcare the organisations rarely put pressure on them or provided very little encouragement to complete the modules. The organisation offered minimal training sessions on a range of topics relevant to new skills and development for home care workers.

“You have to do them yourself. The company are not getting onto me about it. If they were saying come on you have to do them, I would be like right okay, but they are not. I would like if the company ran these courses themselves because I know other companies do” (Participant 6)

“I don’t hear from the office about training courses but then again I live far away from the office so maybe that is why, but I have never been offered additional training for upgrading my skills and I don’t even know what training they hold, if they hold any” (Participant 4)

Additional skills or training did not have any impact on career advancement. From the results of the interviews, six out of the ten interviewees stated that employee retention at work could be improved by the presence of career advancement. For example, one participant stated the following:

“I love the job I do, so I am happy in it, but I am telling you now, more people would stay in the job if they could see themselves working their way up. It would benefit everyone” (Participant 2)

5.4 Frustration

Frustration also emerged as a theme. This was evident throughout the data analysis, owing to the fact that the majority of the participants discussed how they were limited
to the extent in which they could respond to client requests due to internal constraints and having to work seven days a week with no break. One participant expressed her frustration when she explained the following:

“When I go into clients that have a need that we can’t meet. So, for example, if a client that needs eye drops can’t do it themselves, but we can’t do it either as we are not allowed. They don’t all have family members that can do it or won’t do it for them. And the family look at you as if to say why can’t you do it? We look like we are being awkward, when we’re not, we want to do it, but we are not allowed” (Participant 1)

Care assistants also were expected to maintain a professional relationship which they sometimes felt limited their ability to show initiative and ascertain problems. This not only produced a feeling of frustration but also guilt, particularly if the client had no additional community help.

“The clients would call me after my shift or just before I was going in and ask me to go to the shop and buy them milk or something, but I wasn’t allowed do that. I felt bad though like what was I supposed to do. If I didn’t get them the milk, they would have nothing in the house. They don’t have family to buy them things” (Participant 7)

Absenteeism in the workplace adversely impacts on employee satisfaction and retention. It is apparent from discussions with the participants, four interviewees stated that they had to work seven days a week because the company was unable to get another care assistant to cover their calls. In response to questions relating to the difficulty in retaining care assistants, five interviewees stated that staff shortages were the reason for their individual exhaustion and frustration at work. This was an important finding as it helped explain the factors that were affecting employee satisfaction and retention.

“They had promised me a rota buddy. So there would be two of us with the same clients. I would work three days one week, four days the next week and vice versa for the rota buddy. But as soon as I started, my rota buddy left the company and I was left to cover seven days on my own. They expected this of me. I got no break, I was exhausted” (Participant 5)

“There was only three of us working in the one area. The other two would call in sick all the time so I would have to cover their clients. I couldn’t get a day off. My niece
got married and they couldn’t even give me that day off because the other two were off. I couldn’t even go to my niece’s wedding. After that, that was it, I left!” (Participant 7)

5.5 Intrinsic motivation

Intrinsic motivation involves the importance of feeling good, gaining new skills and abilities, job security, chances to learn new things, accomplishment, flexibility, freedom, praise from supervisor and friendship (Stringer, Didham and Theivananthampillai, 2011). In this research study, intrinsic motivation was developed as one of the six main themes. This was evident throughout the analysis due to the fact that the care assistants discussed much of these aspects, for example the job appealed to them because they wanted to make a difference to other people, found it extremely rewarding, and enjoyed the freedom and control of their own work. This theme portrayed a positive impact on employee satisfaction and retention.

“I was excited to go because I was making a difference, she was a difficult client, she did not want me there, but the family knew she was safe because I was there. It made me feel good” (Participant 4)

“They were abusive, shouting at me and clattering their dishes. They called me stupid at the beginning. I said or did nothing. I was patient. And a year on we are now best of friends and they cannot manage without me. I know now I make a big difference to their lives” (Participant 6)

Care assistants spoke of “loving the job” and “finding it extremely rewarding”. These intrinsic factors associated with helping others stay in their own homes were evidently important and home care was seen as providing a valuable service than just a job.

“It really is amazing; you really do develop a bond with them. Sometimes you’re the only person they see all day. You feel important, you feel important to them. I feel rewarded doing it for them because it’s the simplest little thing and means so much to them. You really have to experience it” (Participant 1)

“I love the work I do, the actual job, building relationships with them, like you really do become friends with them. You go the extra mile for them, like you know you are
making their lives easy, that’s what I love. And the feeling when you come home in the evening that you have made a difference to their lives in a good way” (Participant 5)

Additionally, when asked about their perceptions and opinions on employee satisfaction and retention the term ‘control’ and ‘freedom’ appeared on numerous occasions. Interviewees described their role as “independent”, having lots of freedom and allowing “control over their work”. Individuals who had previously worked in highly controlled roles such as residential care referred to their current role as a form of self-employment with the additional support of the coordinators and other office staff. This was an enabling factor in regard to employee satisfaction and retention.

“It’s great, I have full control on my own work, and I can decide on the hours I want to do. I am able to make decisions for myself with nobody looking over me. It’s great though, because if I do have a problem or I am not sure of something I do have the support from the office.” (Participant 7)

Control within their own work, combined with a high level of flexibility as discussed previously, was seen as a form of compensation for the less attractive aspects of the work.

“I realise this job isn’t for everyone and it has its ups and downs but it’s easier for me... It’s like I don’t have a boss that is looking over me, so I feel I am my own boss. I don’t have that weight on my shoulders” (Participant 3)

“My work allows me to go and help out with my elderly Mum when I want. Not many jobs you can do that in, that is a plus” (Participant 10)

5.6 Appreciating support from the organisation

Lastly, appreciating support from the home care organisation itself was established as one of the six themes for this research study. This was evident throughout the data analysis because the entire group had strong views on their relationship with the organisation, management, care supervisor and office staff members and how each of these supported them throughout their role. They felt these aspects were important while working in the home care industry and therefore resulted in having a significant impact on employee satisfaction and retention. The majority described their current organisation as a good employer. As aforementioned, care assistants acknowledged
the high degree of practical support and appreciation at the office level. It was evident that the relationship between office staff and care assistants was critical to the success of satisfaction and retention of home care assistants in the organisations. Most interviewees described their relationship with management and office staff members as supportive, understanding and thoughtful.

“I have to say they are very understanding, like if you need to pick a sick child up you know they are very understanding and helpful. We are like one big happy family” (Participant 3)

“Like when you have a problem, they deal with it there and then and they are there to support us” (Participant 7)

“They are so good and so thoughtful. Every year we receive an Easter egg at Easter and presents at Christmas” (Participant 8)

However, in contrast to management and office staff members, care supervisor relationships with care assistants were quite disjointed. The independent, working alone nature of homecare work meant there were few opportunities for interactions with their care supervisor. A lot of the time care assistants would only meet their care supervisor at structured, formal staff meetings or unexpected supervisions in client’s homes which were generally focused on communicating information rather than providing an opportunity for more informal communication between the care supervisor and care assistant, which did at times negatively impact on forming a good working relationship. Two interviewees commented:

“I don’t see her too often, a lot of the time she is too busy to call” (Participant 3)

“I wouldn’t see her too often, only if she called out to check on me. I don’t like this, there is no need for it. Like we are doing our jobs” (Participant 7)

Although, participants commented that if they were ever in a difficult situation where advice or help was required, their care supervisor was always there to give it.

“If I am ever unsure of a procedure in a client’s home or don’t know what to do in a certain situation, my care supervisor will always be there to give me the right guidance and answer” (Participant 8)
Chapter 6: Discussion

In summary, satisfaction and retention of care assistants is an important and often overlooked aspect of caring for the vulnerable community (Kadri et al., 2018). Today it is more important than ever as the need for caring for people in their own homes continues to grow (Chamberlain et al., 2016). The views and experiences reported in the interviews highlight a number of significant factors that affect employee satisfaction and retention. The study also addresses the issues within the sector that can assist organisations to improve retention strategies as well as ensuring a satisfied workforce. Funding and pay rates are public policy issues (The Institute of Public Health in Ireland, 2018), therefore it is intended that the study findings will help management with strategic planning and policies that can be developed to take competencies, skills, well-being and career development of care assistants into consideration. This in turn will promote improved satisfaction and retention in the workforce.

First of all, to accomplish this, the researcher explores in depth what the employees have experienced working as an Irish home care assistant, the factors influencing employee satisfaction among home care assistants and the attitudes of Irish home care assistants towards the industry. The researcher also explores their intentions in relation to employee retention and the factors that influence home care assistant’s intentions to leave or stay within the industry.

This study investigated these possible views through the use of qualitative interviews. The participants who took part in the study had viewpoints in common regarding employee satisfaction and retention which were similar to those found in recent literature. In this study, care assistants reported encountering stresses and difficulties in their working lives. Feeling undervalued and under pressure in their job as well as a sense of frustration were the most common concerns among respondents. Difficulties in relation to client care needs, relationships with co-workers and care supervisors were also frequently reported by respondents. This impacted negatively on employee satisfaction and retention. Although, there were positive signs of employee satisfaction and retention when the participants spoke highly about intrinsic motivation such as making a difference to other people’s lives, finding the job itself extremely rewarding and enjoying the freedom and control of their own work. Unfortunately, due to
extrinsic factors such as concerns over pay, hours and career advancement, factors which make the job less attractive and therefore make it difficult to retain a satisfied homecare workforce. The factors that influence satisfaction and retention of care assistants, the implications of the findings and limitations of this research are discussed next.

Initially, while many stated that they “love their job” because they were “making a difference” the issue of pay arose in each interview discussion. Interviewees felt that the hourly rate of pay failed to mirror the importance of their actual role and the level of responsibility in that role, resulting in them feeling undervalued. This particular finding was in line with previous literature. Briar et al. (2014) stated that low salary rates tend to support the idea that care work requires minimal skills and training and that home care assistants weren’t been paid fairly and truly for what their role entails.

However, one positive outcome relating to previous literature was the flexibility care assistants had within their job. This is broadly consistent with a recent home care study (Clarke, 2015) concluding that casual part-time employment has potential benefits for both organisations and individuals in that it allows a high degree of flexibility. The results revealed that Irish home care assistants appreciate the flexibility to allow them to allocate time to other aspects of their lives, e.g. looking after elderly parents or young children. This is in keeping with previous literature that stated that this was one of the main attractions to working in home care (Clarke, 2015). Combined with good support from management and office staff, flexible employment made this type of work attractive for women with family responsibilities and commitments. It was apparent from data derived from the interviews, flexibility and control of their own work created a greater sense of autonomy over both work and personal life thus enhancing employee satisfaction and retention.

Although, casual part-time employment with no guaranteed hours creates an element of flexibility, it can lead to a high degree of financial stress and feeling undervalued. Participants argued it wasn’t “fair” that they should suffer financially when a client was taken off their schedule. These sentiments correspond with the findings of Clarke (2015) and Sutcliffe and Dhakal (2018) where they witnessed care assistants struggling financially by being unable to plan weekly budgets.
Previous literature expressed how rostering and the need to be available can create great pressure and frustration between work and non-work activities (Clarke, 2015). This was evident from the care assistants who took part in this project as they were griping on about absenteeism. They felt that if they were asked to cover an additional shift due to absenteeism and they said no, the client would then be left on their own with no care received, therefore they had no choice but to cover the additional shift.

From the study findings, it was clear, the fact that casual part-time workers were only paid for time spent with the client and received no travel allowance for time spent travelling to and from each job was also perceived as being undervalued and a major disadvantage for care assistants which made long term retention of home care assistants challenging. In the existing literature by Rubery and Urwin (2010) there has been some mention of the other potential cost cuttings by companies (e.g. no payment for taking part in meetings or training) but in the recent findings of this study, being paid only for the time you spend with your client was profoundly discussed in all interviews. Sutcliffe and Dhakal (2018) maintained that cutting back on payment minimises the quality and number of home care services performed and in turn, impacts negatively on employment. Not enough travel time between clients was another common pattern that emerged from the results, creating a pressurised environment, however, in comparison to previous literature this was not an evident matter.

Other factors affecting employee satisfaction and retention of care assistants in Ireland is access to new skills and development opportunities. The organisation in which the participants currently work was seen as being a good employer because it offered a significant amount of support from management and office staff. However, there was limited access to new skills and career development opportunities. This was evident in the literature review from the beginning where Sutcliffe and Dhakal (2018) emphasised limited career progression. Although, “dead-end job” was quoted in both the literature (Sutcliffe and Dhakal, 2018) and the findings section, very few interviewees spoke about advancing or moving up in their role as a care assistant, preferring to remain as a direct care assistant rather than becoming a care supervisor or office coordinator. Even if they didn’t want to progress in their role, many still discussed their dissatisfaction over the lack of recognition for skills and development opportunities.
In comparison to other studies, McCaughey et al. (2012) did not find limited career progression such as development of new skills, moving up the career ladder or additional training an issue and highlighted the fact that it did not have an effect on employee satisfaction and retention. Whereas, in general the participants felt opportunities for career progression would help improve retention and create a higher rate of intention to stay within the company. However, the majority of the participants who perceived career progression as important were not aware of the in-house training available within their organisation and in fact, if they held any at all. In addition to this, they were not encouraged by the organisation to seek further training. Furthermore, from the literature explored in this field of study and investigating the participants experiences in their role development, it is argued that career progression is an individual’s perspective as everybody has different personal life goals and achievements to reach, along with various reasons to choose to work in the industry (Cooke et al., 2013).

Intrinsic motivation such as autonomy, support and feeling good about oneself are important factors of employee satisfaction and retention (Burgess et al., 2018) and this was demonstrated numerous times by the participants when they were asked if they were satisfied in their job. This was an important finding as it relates back to previous literature. As we have seen, the opportunity for home care assistants to provide care to vulnerable people in their community while working with a high degree of control over their own work was critical to their evaluation of employee satisfaction and retention. The fact that much of the work happens in the clients home rather than in a residential facility gives them a sense of control and purpose that may be lacking in other low paid jobs and that enhances good perceptions of employee satisfaction and retention (Clarke, 2015). This aspect of the job is the main reason why the care assistants who took part in this study chose to work in the home care industry.

In addition, when interviewees were asked during the interview, if they intended to stay within the industry, a lot of the responses were a definite yes. This was owing to the fact that they had so much control over their own work, despite the feeling of being undervalued, under pressure, frustrated and facing the lack of career and development opportunities. These findings corroborate Leece and Peace (2010) and Butler (2013) when autonomy was seen as a major influence on the intention to stay within the job. The meaning and importance of autonomy was consistent throughout the recent
literature and the findings of this study. Although, in the literature review it was perceived that older women valued control of their own work more than younger workers (Faul et al., 2010). This was not evident from the results of the current study. Effectively, self-independence and control was important to all woman of all ages.

The study aimed to explore the attitudes of the care assistants towards the industry and their intentions related to employee retention by investigating whether organisational and supervisory support were important factors. Because recent studies had concerns with this and recommended organisations to focus on the relationships and communication between direct care assistants and supervisors to improve retention strategies (Ryvicker, 2018). However, mixed views emerged from the results. Care assistants were happy to be left working alone and did not feel the need for care supervisors to be checking in on them. This refers back to the importance of control over their own work. However, it is important to note that the results of this study showed that care assistants appreciated the support, help and advice from the organisation and care supervisor and that this was always present if needed.

6.1 Limitations

The main limitation of this study is that it does not cover the entire workforce as a whole. This study focuses on care assistants from one particular home care franchise. Due to difference between home care organisations both in regard to the way they operate and provide organisational support the findings of the research would not be consistent to factors affecting employee satisfaction and retention in other home care organisations. While some of the themes found during the course of this investigation may also affect employee satisfaction and retention in other Irish home care organisations this study cannot say to what degree these issues affect those individuals. As these findings are based on the experiences of these participants from convenience sampling, which means that the sample is unlikely to represent the Irish home care assistants’ population as a whole.

Fundamentally, Irish home care assistants are satisfied in their current role. Nevertheless, in keeping with previous studies, this research found that pay is a core factor of employee satisfaction and retention, but not only in terms of the hourly rate of pay. More importantly, care assistants felt constrained by irregular working hours, cost cuttings and last but not least, limited career progression.
Chapter 7: Conclusion and recommendations

In conclusion, the aim of this study was to investigate the factors affecting employee satisfaction and retention in the continuously growing Irish home care industry. The sub objectives were (1) to explore the experiences of Irish home care assistants; (2) to investigate the factors that influence employee satisfaction among home care assistants; (3) to explore the attitudes of Irish home care assistants towards the industry and their intentions regarding employee retention and lastly; (4) to explore the factors that influence home care assistants’ intentions to leave or stay within the industry. These four aims of this study were achieved through the use of qualitative interviews. This research study was influenced by the challenges current home care assistants face in Ireland and the limited previous research into this topic.

The findings relating to the main objectives of this study indicate the clear need for home care organisations and policy makers to develop better retention strategies to improve and boost satisfaction and retention within the home care workforce.

As Clarke (2015) and Dhakal and Sutcliffe (2018) argue home care assistants make an invaluable contribution to the community. They are not highly qualified or perceived as high up in society, yet they take care for some of the most vulnerable members in today’s community. As demand for home care services increases, the organisations of this working group will be critical to the provision of meeting this excellent caring service. Enhancing employee satisfaction and retention is one way of keeping a committed, competent and skilled care workforce. But, for organisations to achieve the above they must be aware of the findings that emerged from this study. They are as follows:

(1) Undervalued in their role
(2) Feeling under pressure in a busy environment
(3) Limited career progression
(4) Frustration
(5) Intrinsic motivation
(6) Appreciating support from the organisation
7.1 Recommendations for home care organisations

Home care organisations need to focus on home care assistant’s skills, competencies and responsibilities. It is evident from the analysis carried out that they don’t have many opportunities to progress in the industry and receive minimal recognition of their complex skills. Skill-based career structures offer significant benefits for home care organisations, therefore it is important that companies allow care assistants the opportunity to grow and learn. This can be achieved by allowing established care assistants the responsibility of mentoring newly inducted staff, keeping care plans up to date in client home journals and encouraging them to attend client care meetings with community representatives and office staff members. These additional responsibilities to the role of a care assistant will have the potential to make home care services a more attractive career choice.

The financial cost for the above recommendation is minimal. Allowing care assistants more responsibility within their role does not cost the organisation. This should be implemented as an internal assignment, and therefore can be achieved within an impermanent timeframe.

In addition, home care companies need to review payments for care assistants travelling between clients. As aforementioned, funding and pay rates are public policy issues (Burgess et al., 2018), but companies can allow payment for travel time. This would potentially lead to more effective scheduling, use care assistant’s time more efficiently and allow more of that time to be spent with clients.

Home care managers and policy makers may argue they are financially unable to implement the above but this study disputes that there needs to be more focus on payment for travel allowance between calls, for example, payment for travel allowance could be offset against the recruitment of additional office staff members. Using the organisation’s financial resources for this would be much more beneficial to the entire organisation. This too is an internal HR strategy which should be implemented in a short timeframe.
7.2 Recommendations for future research

Future research on why and how home care companies in Ireland satisfy and retain employees better than other home care companies would be worthy of investigation. Many of the interviewees mentioned working in a number of home care companies within Ireland and how they experienced employee satisfaction and retention differently in some more than others. Therefore, a recommendation for future research is that this study is repeated by investigating how home care organisations operate and manage their staff differently, if they implement any part of their employee strategies or policies in a different way.

Secondly, a future recommendation would be to investigate the experiences of satisfaction and retention of former home care assistants. The researcher interviewed home care assistants currently working in the home care sector, however it would also be beneficial to explore why previous home care assistants left their organisation and if they felt anything could have been done to improve employee satisfaction and retention.

Replicating the study with these suggestions will further develop the literature on care assistants and the factors affecting employee satisfaction and retention, which at the current time is limited.
Personal learning statement

One of the challenges I faced while writing this dissertation was analysing the articles, journals and reports of this topic. There was a significant amount of information to gather, that initially I didn’t know where to start or understand how to link the literature together. I found this challenging and overwhelming. In hindsight if I were to perform this task again, I would continue to investigate and examine the literature when I had a break between the submission of my proposal and commencement of my dissertation. This would have allowed me the opportunity to be more prepared from the very beginning.

I decided to carry out a qualitative study which I had never completed before. Conducting interviews is one of my main responsibilities and strengths in my current job, which gave me an advantage and enhanced my confidence throughout the interviewing process. However, I found it challenging to coordinate times and venues to suit all concerned. As well as that, I was travelling a far distance to meet the participants so it was important I made sure in advance they were going to attend as previously agreed. Nevertheless, I felt this section of my dissertation worked effectively.

The biggest constraint of this dissertation is the time allocated for the study. Keeping within the given time frame can be difficult. Given the chance to undertake this task again I would have started two weeks earlier to give myself a head start. Taking all into consideration one of my main strengths which stood out during this research is my time management. I have been consistent with time throughout the process and have worked in the most productive manner. By setting myself tasks and breaking down my report, chapter by chapter, I was able to complete the dissertation promptly.
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Appendices

Appendix 1: Participant information sheet

Experiences of Home Care Workers in Ireland

You have received this information sheet because you are being invited to take part in a research study. Before you decide whether to take part in this study, you need to understand why the research is being done and what it would involve for you. Please take time to read the following information carefully. Ask questions if anything you read is not clear or if you would like more information. Take time to decide whether or not to take part.

Who am I and what is the study about?

My name is Meghann O’Reilly and I am a part-time student in National College of Ireland Dublin completing a Masters’ in Human Resource Management. As part of this qualification I must complete a research project, which will be submitted as my dissertation for my final assessment. For this project, I am conducting a study to investigate the factors affecting satisfaction and retention of care assistants in the Irish home care industry. Therefore, I would like to invite you, as a home care assistant working in the Irish home care industry to take part in a one-to-one interview with myself to discuss and share your experiences working as a caregiver. Your views are important in order for me to be able to build up a clear picture on this specific topic.

What will taking part involve?

If you decide to take part, you will be asked to engage in a one-to-one interview with me, which will last approximately 40-50 minutes. This will take place in a location which suits you best and will be agreed and arranged with you in advance. During the interview, you will be asked questions related to your experiences working as a home care assistant in Ireland. You will be asked to discuss challenges associated with working in the industry, and your opinions about factors that can help to improve the experiences of home care assistants.
The interview will be audio recorded, to allow me to transcribe and analyse the data. You will be asked to sign an informed consent form before the session commences to indicate your agreement to take part in the interview and for the audio recording of the session.

All information provided will be kept strictly confidential in accordance to National College of Ireland Ethics Committee requirements.

**Why have you been invited to take part?**

You have been asked to take part in this study because as a care assistant you will have knowledge on satisfaction and retention factors in your company and sector.

The Human Resource department within your company have agreed to share this information with staff who are eligible to take part in the study. However, it is important to note that your HR department have agreed only to share the study invitation with you, and there is no obligation for you to take part in this research if you would prefer not to. Your HR department will not be informed about your decision to take part, or not take part, in this research.

**Do you have to take part?**

Your participation is entirely voluntary, and you are not obliged to take part. If you do decide to take part, you can decline to answer any particular question and you can stop the interview at any time. Participants may withdraw at any time without any consequences whatsoever or having to provide any reason for doing so.

**What are the possible risks and benefits of taking part?**

There will be no direct benefits to you by participating in this study, however, the information collected may be used to improve satisfaction and retention strategies of home care companies.

Participating in the research is not anticipated to cause you any disadvantages or discomfort. The potential physical and/or psychological harm or distress will be the same as any experienced in everyday life.

**Will taking part be confidential?**
All the information that we collect about you during the course of the research will be kept strictly confidential. All names and any other identifying information will be removed from the interview transcripts as well as the written report. When writing up my findings, some quotes from interviews may be included, but these will not contain any identifying information. You will not be able to be identified in any reports or publications. Your company will also not be identified or identifiable.

The researcher will use an audio recorder during the interview session to ensure accuracy in collecting the information, and to allow for the data to be transcribed for analysis. A transcript of the discussion can be provided for you if you request it.

The only circumstances under which confidentiality may be breached are if information disclosed during the interview relates to a serious risk of harm or danger to you or another individual. In these circumstances, the research team would be obliged to breach confidentiality and report this information to the appropriate authorities. This would be discussed with you first, but I may be required to report with or without your permission.

**How will information you provide be recorded, stored and protected?**

All participant’s information will be kept private and confidential. Audio recordings and transcripts of interviews will be stored in secure, password protected files on my computer. Signed consent forms will be stored in a locked filing cabinet. Data will be retained for 1 year following the submission of my dissertation.

Under Freedom of Information and Data Protection legalisation, you are entitled to access the information you have provided at any time.

**What will happen to the results of the study?**

The results of this study will only be submitted in my dissertation to the National College of Ireland.

**Who should you contact for further information?**

Please contact the principle researcher- Meghann O’Reilly on (contact number) or email (email address)

You can also contact my supervisor, Dr Caoimhe Hannigan: caoimhe.hannigan@ncirl.ie
Appendix 2: Participant consent form

Consent to take part in research

I………………………………………… voluntarily agree to participate in this research study.

I understand that even if I agree to participate now, I can withdraw at any time or refuse to answer any question without any consequences of any kind.

I understand that I can withdraw permission to use data from my interview within two weeks after the interview, in which case the material will be deleted.

I have had the purpose and nature of the study explained to me in writing and I have had the opportunity to ask questions about the study.

I understand that participation involves taking part in an interview lasting 40-50 minutes and will require me to share my experiences and challenges working as a home care assistant in Ireland.

I understand that I will not benefit directly from participating in this research.

I agree to my interview being audio-recorded.

I understand that all information I provide for this study will be treated confidentially.

I understand that in any report on the results of this research my identity will remain anonymous. This will be done by changing my name and disguising any details of my interview which may reveal my identity or the identity of people I speak about.

I understand that disguised extracts from my interview may be quoted in the dissertation.

I understand that if I inform the researcher that myself or someone else is at risk of harm they may have to report this to the relevant authorities - they will discuss this with me first but may be required to report with or without my permission.
I understand that signed consent forms, original audio recordings and interview transcripts will be retained for 1 year following the submission of my dissertation.

I understand that under Freedom of Information and Data Protection legalisation I am entitled to access the information I have provided at any time while it is in storage as specified above.

I understand that I am free to contact any of the people involved in the research to seek further clarification and information.

-----------------------------------------
Signature of participant                  Date

I believe the participant is giving informed consent to participate in this study

-----------------------------------------
Signature of researcher                   Date
Appendix 3: Interview guide

Interview Schedule

1. Why did you choose to become a care assistant?
2. Why choose home care over residential care?
3. What do you find most interesting about your role as a care assistant?
4. Can you describe a typical working day for you?
5. Overall, do you feel satisfied in your job? Why/Why not?
6. Can you describe an example of a time you felt really satisfied in your job? (How did that make you feel?)
7. Can you describe an example of a time that you felt dissatisfied in your job? (How did that make you feel?)
8. Could you tell me a bit about any training you have engaged in while working as a home care assistant?
9. Could you tell me about the type of training and development opportunities you would like to have?
10. Describe your relationship with the office and your care supervisor. How often do you hear from them? Do you have a good working relationship with them? Why/Why Not?
11. How does your supervisor support you on carrying out your role?
12. If you could change anything about your job or the company, what would you change?
13. Do you feel your role as a care assistant has any impact on your personal life?
14. Do you see yourself staying working in the home care industry in the long term? Why/Why Not?

Have you any other information you would prefer to add?