CHILD, YOUTH AND FAMILY SERVICES SOCIAL WORKER TURNOVER IN NEWFOUNDLAND AND LABRADOR: TRENDS AND DETERMINANTS

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Child, Youth and Family Services Social Worker Turnover in

Newfoundland and Labrador: Trends and Determinants

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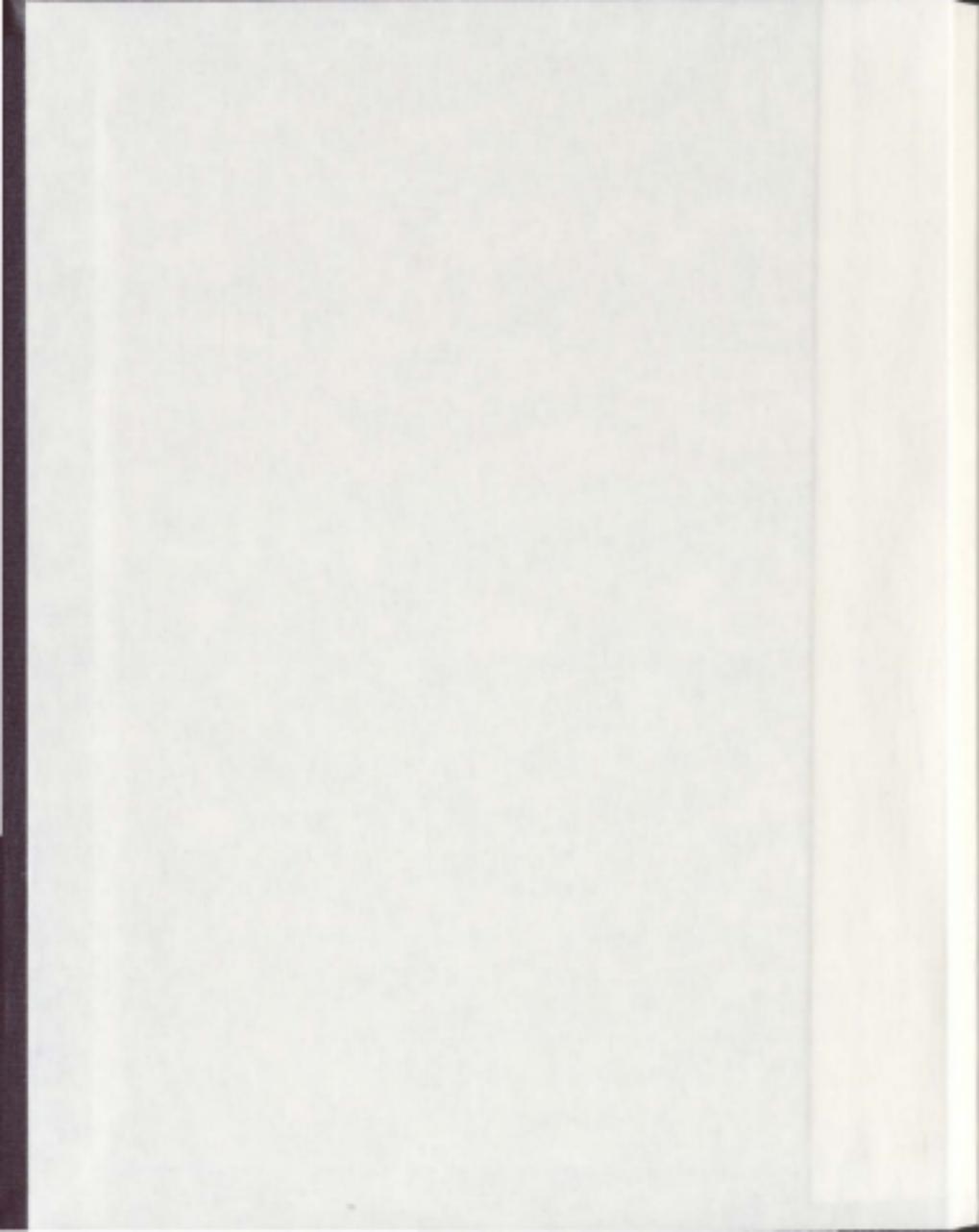
Abstract

Social worker turnover has been repeatedly identified in Newfoundland and Labrador (NL) as a major issue affecting the stability within Child, Youth and Family Services (CYFS) and the level of client care provided by the organization. Although recent provincial research has identified turnover as a primary issue, no studies have quantified CYFS turnover and examined trends over time, or examined factors associated with intent to leave. The purposes of the current studies are twofold: (1) to quantify and examine trends in CYFS social worker turnover within Eastern Health (EH); and (2) to identify what factors may be contributing to the turnover of CYFS social workers within NL.

Results from Study 1 indicated that EH's internal and external child welfare worker turnover is high, with internal movements contributing to the majority of the turnover within CYFS. The highest levels of internal turnover were observed in 2007-2008, and the highest levels of external turnover were observed in 2008-2009. The majority of the turnover was internal, and attributable to SWIs and managers changing positions within CYFS. When examined by geographic location, external turnover was generally higher amongst urban teams than rural teams. Wide variations in internal and external turnover were also observed at the team level.

Findings from Study 2 indicated that approximately one quarter of CYFS social workers surveyed intended to leave their position within 12 months. The results suggested that decreased job satisfaction, increased depersonalization, decreased manager support, increased emotional exhaustion, and rural location were positively correlated

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with intent to leave. When entered into logistic regression models, the full model accounted for the most explained variance in intent to leave (21.6%).

These findings suggest that CYFS social workers within EH are experiencing high levels of turnover, specifically internally. Also, across the province CYFS social workers are experiencing levels of burnout, job dissatisfaction, and decreased manager support that are contributing to their desire to leave their positions within CYFS.

Specifically targeted programs aimed at reducing levels of burnout, increasing job satisfaction, and increasing perceived levels of manager support amongst CYFS social workers will likely help reduce and manage turnover within the organization.

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Chapter One: Introduction

Child and Family Services (child welfare) is a primary division of social work responsible for promoting the safety and well-being of children and encouraging stability within families across Canada (Child Welfare Research Portal, 2009b). Child and family services workers, or child welfare workers, are generally the first point of contact in situations where inappropriate behavior involving children is suspected. Child welfare workers encounter a variety of situations in which a child's safety is potentially compromised. Research has indicated that the majority of child maltreatment cases in Canada involve neglect, followed by emotional and physical abuse, and in most instances the perpetrator is the biological mother or father (Trocmé et al., 2001).

Whether in the form of neglect or physical, sexual, or emotional abuse, child abuse in most provinces is considered grounds for further investigation to determine if a child is in need of protection. In 1998, an estimated 135,573 child maltreatment investigations were carried out in Canada, an annual incidence rate of 21.52 investigations per 1,000 children; however the rate is expected to be higher as there are a number of maltreatment cases which are inevitably not reported (Trocmé, Tourigny, MacLaurin, & Fallon, 2003). After suspected child abuse or neglect is brought to the agency's attention, an initial investigation is carried out by a child welfare worker. During this investigation, children generally remain in their home, unless there is reason to believe the child is unsafe. If upon initial assessment a child is determined to be at risk for neglect, abuse, and/or immediate danger, the organization will work to reduce the opportunity for risk by educating the family and/or putting safety plans in place. If the

child is still deemed to be at immediate risk, the child could be temporarily removed from the home and remains *in care* until the environment is considered safe (Secretariat to the Federal/Provincial/Territorial Working Group on Child and Family Services Information, 2002).

Child welfare systems across Canada work with families to help keep children safe and healthy. Although differences in the child welfare systems exist between provinces, all share several common elements: the best interests of the child must be considered, a parent's primary responsibility for raising their child should be respected, continuity of care and stability is important, children's views should be considered when making decisions that affect their future, and cultural heritage should be respected (Child Welfare Research Portal, 2009a).

Child, Youth and Family Services in Newfoundland and Labrador

The division of Child, Youth and Family Services (CYFS) is responsible for the delivery of services to children, youth, and families in Newfoundland and Labrador (NL). It is based on a framework that is child centered, supports family preservation, promotes permanency and stability, and adheres to the least intrusive methods. According to the Policy and Services Manual, developed by the Department of Health and Community Services (2007), the division of CYFS in NL is described as follows.

"The *Child, Youth and Family Services Act, S.N.L. 1998 c. C-12.1.* is the legislative authority for the delivery of services to children, youth, and families that includes Family Services, Protective Intervention Services, the In Care Program, and Youth Services. This Act includes a number of initiatives and a

framework for provision of services and supports to children and youth and their families. It promotes practice approaches that focus on early intervention and prevention to support children, youth, and their families. The legislation provides authority for a provincial director and regional directors of Child, Youth and Family Services. Service delivery for programs and services under this Act rests with the four Regional Integrated Health Authorities. The *Child, Youth and Family Services Act* provides the legislative framework within which services to children, youth, and families are delivered in Newfoundland and Labrador. The Act has legislated principles to govern the provision of services to children, youth, and families."

These principles are fundamental to the development of services and supports to children, youth and families within the context of their community.

Structural History of Eastern Health and Child, Youth, and Family Services

A number of significant structural changes involving the province's child welfare workers have occurred since 1998 within NL, primarily the development of the division of CYFS, as well as the creation of the province's four Regional Health Authorities (RHAs). Knowledge of the improvement of the health and community services system and the accompanying organizational transformations across NL, beginning in 1992, is imperative to understanding the history of CYFS, as well as methodological challenges encountered in obtaining data for Study 1.

Prior to 1998, child protection, including child welfare, rehabilitation, and corrections, was a part of the provincial government's Department of Human Resources

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and Employment. However, in 1998, as a result of a province-wide regionalization of the health boards, child protection moved out from under the direct influence of the provincial government and became CYFS, a division within Health and Community Services and ultimately part of the 14 new regional boards across NL (Deloitte, 2007). In 2005, further restructuring within the province integrated the 14 regional health boards into four RHAs. At this point the division of CYFS was present across NL in the Eastern Health (EH), Central Health, Western Health, and Labrador-Grenfell Health.

EH's division of CYFS also experienced reorganization, with respect to team structure, early in 2008. A team refers to a social worker, or a group of social workers, working in a particular geographical location, in a similar program area (e.g. Long Term Protection or Assessment), and reporting to the same manager. In urban locations there can be many teams in a particular site or building. Prior to this time, all urban teams, were represented by individual department codes; however all urban CYFS social workers were, administratively, part of the same department. However, in rural locations, generally there was one team per site or building. In early 2008, CYFS underwent significant restructuring and the one urban CYFS department was dissolved and each team within EH's urban area was assigned a new department code.

A number of obstacles were encountered while attempting to retrieve archival data. The level of restructuring that occurred across the province within the 10 year period required a considerable amount of planning and execution from Information Technology specialists across NL. An enormous amount of work was necessary to link the various computer programs supporting the province's health boards and to ultimately

prevent information loss. However, the programs were not completely compatible and linkages were not entirely seamless.

Background and Rationale

Since 2006, a number of reports have been released in NL, in which internal and external consultants investigated the operations of CYFS. Although CYFS has undergone organizational restructuring as well as changes in the services provided, it was a tragic event in 2003 which catalyzed a careful examination of the entire child protection system. The death of thirteen-month-old Zachary Turner led people to question "the practice of child protection, the legislation from which it derived its authority and the overall human capacity to address the complex challenges of keeping children safe from abuse and neglect" (Abell, Moshenko, & van Leeuwen, 2008 p. 8; Markesteyn & Day, 2006). An immediate investigation began, which examined the child protection system, Zachary Turner's family practice, and the details regarding the time leading up to his death. Amongst many key conclusions found in the *Turner Review* (Markesteyn and Day, 2006) was an indication that the factors contributing to the death of Zachary Turner did not originate with front-line social workers, but were more the result of systematic problems within CYFS (Abell et al., 2008).

Subsequent investigations included an *Organizational and Operational Review of Child, Youth and Family Services* (Deloitte, 2007), the *Children In Care In Newfoundland and Labrador* report (Fowler, 2008), and the *Clinical Services Review* (Abell et al., 2008). The *Organizational and Operational Review of Child, Youth and Family Services* was commissioned by the Department of Health and Community

Services (DOHCS), and focused on social worker roles and responsibilities, the relationship between the DOHCS and the provinces four Regional Health Authorities (RHAs), and the tools and processes that support CYFS in NL. Over 40 regional and provincial recommendations were made with 16 key recommendations articulating the need for a well described and supported vision for CYFS, clear lines of accountability, a province-wide strategy for child protection, access to clinical supervision, and ongoing training (Abell et al., 2008; Deloitte, 2007). The *Children In Care* review, released in 2008, had four primary objectives: to establish an accurate profile of all children in the care and custody of CYFS that would be sufficient to provide an understanding of their needs; to determine the extent to which existing placements were suitable; to identify gaps in the current placement continuum; and to provide recommendations regarding how to strengthen the placement resources currently available. Fowler's research identified a number of salient themes including:

> "1) limited in care placement options, 2) resources and service shortcomings for children in care, 3) trying to match programs and services with need, 4) aspects of the foster care system including contemporary realities of fostering, rates (payment) currently provided to caregivers, and foster home availability, 5) implications of court processes, 6) the impact of significant system and legislative restructuring on the in care program, and 7) human resource issues including social worker caseload and turnover." (Fowler, 2008, p. viii).

Based on his extensive research and comprehensive findings, Fowler proposed nine recommendations; the DOHCS adopted or acknowledged all recommendations. Most recently, the *Clinical Services Review* (Abell, et al., 2008) was released. The report was "designed to provide information regarding the clinical practice across the province as well as recommendations regarding the design and implementation of a provincial quality improvement program" (Abell et al. 2008, p. 9). The key findings of the review indicated a lack of stability within the workforce, insufficient leadership and resources, a legislation that fails to position the safety of children, a lack of training, and a lack of timely and accurate data. Within the report's 10 key recommendations, the *Clinical Services Review* outlined the need to improve areas involving leadership, workloads, documentation, training, and technology.

All three major reports evolving from the *Turner Review – the Organizational and Operational Review of Child, Youth and Family Services* (Deloitte, 2007), the *Children In Care In Newfoundland and Labrador report* (Fowler, 2008), and the *Clinical Services Review* (Abell, et al., 2008) indicated that social worker turnover was one of the primary issues affecting the stability of CYFS with NL. Specifically, the *Clinical Services Review* (2008) reported workforce instability as one of the five key findings from the review and indicated that turnover at the case level affected the amount of time workers spent with their clients. The *Turner Review – the Organizational and Operational Review of Child, Youth and Family Services* (Deloitte, 2007) indicated that there were significant or sizeable gaps across all regions regarding the organization's ability to retain skilled managers and frontline social workers. However, in this province

no study has quantified this turnover or explored organizational factors that are potentially associated with the turnover of child protection workers.

The current study was undertaken at the request of the provincial government of Newfoundland and Labrador's DOHCS. Originally, the DOHCS was interested in quantifying CYFS turnover, as it has never been quantified, and examining the factors that might lead to improved recruitment and retention of CYFS social workers in NL. The initial objective evolved, with the aid of researchers at EH and Memorial University, into a two-study project protocol aimed at 1) determining the extent of CYFS social worker turnover in EH, the province's largest RHA, and outlining historical turnover trends; and 2) assessing the factors associated with CYFS social worker turnover across NL.

Purpose

Social worker turnover has been repeatedly identified in NL as a major issue affecting the stability within CYFS and the level of client care provided by the organization. Although recent provincial research has identified turnover as a primary issue, no studies have quantified CYFS turnover and examined trends over time. True of any organization, without the knowledge of the size, experience, and make-up of its membership, an organization cannot rationally plan for its future. Without this understanding, it isn't possible for a social work profession to retain its workforce (Wermeling, 2009). Therefore, one of the purposes of the current study is to quantify and examine trends in CYFS social worker turnover within EH, NL's largest RHA.

Furthermore, a recent depiction of the turnover trends, current levels of burnout, and workloads within CYFS is necessary to enhance the implementation of the recommendations proposed in the CYFS Clinical Review. In addition, a summary of the issues underlying the division's instability, including social worker attitudes, job satisfaction, burnout, and intention to leave, would add to the findings reported in the CYFS Clinical Review. As Dickinson and Painter (2009) state, "the harmful effects of turnover on children, youth, and families occur in spite of the different ways that turnover can be measured or explained" (p.204), and it is therefore necessary to identify the factors associated with social worker turnover, or intent to leave, in NL to help reduce and manage disadvantageous consequences, and improve CYFS social worker retention rates in NL. Hence a second study will also outline the current employment conditions within CYFS across the entire province, including intent to leave, and various important organizational factors as identified in the literature, such as job satisfaction, burnout, and workload measurements. The study will also aim to explore the association between intent to leave and a variety of organizational factors, as identified in the literature, to help identify what may be contributing to the turnover of CYFS social workers within NL.

Research Questions

The current study was designed to answer the following research questions:

Study 1.

1. What was the overall annual CYFS social worker turnover rate in Eastern Health (2006-2009) and did this vary over time?

2. Did turnover vary by position, by urban/rural designation, and from site to site?

Study 2.

1. What factors are associated with intent to leave CYFS within 12 months in Newfoundland and Labrador?

Organization of Thesis

This thesis has been organized into six chapters. The current chapter provides an introduction and overview of the issue being addressed. A literature review found in Chapter Two offers an overview of social worker turnover, its antecedents and consequences. Chapter Three describes the methods used to investigate the above-mentioned research questions, and the results are presented in Chapter Four. Chapter Five provides a comprehensive discussion of the findings, insight into the limitations of the current research, and suggestions for future research. Finally, Chapter Six highlights the policy and practice implications of the results from the current research studies.

Chapter Two: Literature Review

Chapter Two provides background for and context to the present research. This literature review is divided into four major sections. The first section is a general discussion of employee turnover and its prevalence among child welfare organizations in North America. The second section summarizes prior research regarding child welfare turnover in NL. The primary factors contributing to social worker turnover are discussed in the third section, and the consequences of social worker turnover are also explored in the final section.

Employee Turnover and its Prevalence Among Child Welfare Organizations

Although defined in a variety of ways, employee turnover generally refers to the number of people leaving an organization over the course of a year. Turnover can be voluntary or involuntary, depending on an employee's reason for departure and it is a useful statistic for describing the stability of a workforce within an entire organization, or the stability within various positions or teams throughout an organization (Harvey & Stalker, 2007, p. 275). A certain level of turnover in an organization is functional, as it can provide people with alternative employment opportunities and allow organizations to benefit from integrating new employees and their knowledge (Harvey & Stalker, 2003). However, despite being a necessary process, excessive turnover is also a significant issue contributing to workforce instability, and is frequently caused by high levels of stress and a variety of organizational factors (Kim & Stoner, 2008).

Turnover rates can be challenging to compute as various definitions exist and calculations often require a certain level of knowledge of an organization's workforce and their methods and tools used to track employee movement. As a result of this complexity, actual turnover rates are rarely reported in the literature and, although turnover is frequently researched because of its negative consequences, reported rates of child welfare worker turnover are ambiguous and dated, making it difficult to compare across studies. For example, the American Public Human Services Association reported a median annual preventable turnover rate of 22% in 1999-2000 for public child welfare social workers (Cyphers, 2001); while Weaver, Chang, and Gil de Gibaja (2006) reported nonspecific child welfare turnover rates between 27% and 37%, with social workers leaving for a multitude of reasons. A Canadian study investigating the workloads of child protection workers in British Columbia found annual turnover rates ranged from 10.9% to 12.8% between 2002 and 2006 (Perrin, 2006).

Since turnover can be challenging to capture, it is rarely measured directly in child welfare research. However, the literature indicates that intent to leave is a good, if not the strongest, predictor of social worker turnover and is often used as a proxy for actual turnover rates when researching employee attrition (George & Jones, 1996; Mor Borak, Nissly, & Levin, 2001; Mor Borak, Levin, Nissly, & Lane, 2006). Using a variety of methodological techniques, this style of research generally focuses on the antecedents of turnover or intent to leave, the pathways leading to employee attrition, and the consequences associated with turnover. Research results tend to vary, as the factors significantly affecting turnover and intent to leave are generally unique to each

organization depending on the challenges they experience. Westbrook, Ellis, and Ellett (2006) stated in their study on child welfare worker retention that complex research designs have helped researchers determine that social worker turnover is often best explained through a number of interacting organizational and personal variables. Further, Mor Barak and colleagues (2001) acknowledged that "study results are often inconsistent with each other, perhaps reflecting the complexity of defining and measuring the multifaceted predictor and outcome constructs as well as differences among the varying work contexts" (p. 629).

Summary. While child welfare worker turnover is often researched, actual turnover rates within an organization are difficult to obtain. When turnover rates are published, the definitions used within each study can vary substantially, making it difficult to compare turnover across regions. In addition, research involving child welfare worker turnover has indicated that it is a complex issue involving a multitude of interacting factors. Since employee turnover can be cumbersome to calculate and difficult to capture, many studies use social workers' intent to leave as a primary outcome, as it is a strong indicator of future turnover.

Turnover of Newfoundland and Labrador's Child Welfare Social Workers

When dealing with a child's health and safety, CYFS social workers are often the first level of contact in the health and community services system – they are considered one of NL's primary health care providers (DOHCS, 2003). In a report outlining the need to mobilize provincial primary health care services, the DOHCS indicated that the primary care provided to patients in NL is fragmented and further identified employee

turnover as a major issue affecting the quality of health care delivery in NL. Reducing turnover will undoubtedly enhance the health and well-being of individuals, and ultimately the health of our communities (DOHCS, 2003).

Several recent provincial investigations have identified social worker turnover as one of the more significant underlying factors contributing to the instability within the CYFS and related workforce in NL (Deloitte, 2007; Devine, 2006; Abell et al., 2008; Fowler, 2008). Divine's (2006) dissertation thoroughly described recent significant organizational changes experienced by child welfare workers in NL, including their move from NL's Department of Social Services to a program within the new Health and Community Services Board. Interested in examining the impact of these changes, Devine surveyed a total of 60 EH social workers working within Child Welfare Services, Community Living Services, and Youth Corrections Services (response rate = 37.5%). Results indicated that, of the social workers surveyed, 41.2% felt they were "maybe" to "very likely" actively looking for a new job within the next year. Similarly, approximately 36% indicated that "maybe" to "for sure", they would be probably looking for a new job within the next year. Finally, survey results revealed that 45.7% of participants "sometimes" to "often" times considered quitting their job (Devine, 2006).

The first of a number of recent provincial reviews was a thorough investigation into CYFS's organizational structure in late 2006. The Deloitte Review (2007) conducted interviews with approximately 200 individuals across NL's four RHAs and administered surveys to the province's CYFS social workers (N = 156, response rate = 53.2%). Although employee turnover was not the primary topic of this research, the Deloitte

Review (2007) cited turnover as one of the major organizational issues affecting the CYFS division. Deloitte's provincial survey results demonstrated that, in the fall of 2006, approximately 20% of the CYFS social workers surveyed intended to leave their area of practice within 12 months. Furthermore, the review suggested that, in all four regions, high turnover resulted in increased workloads for the remaining frontline social workers and program managers. As part of this investigation, Deloitte conducted interviews and held focus groups to help profile the conditions and their proximity to ideal child welfare practice at that time (2006). In addition to a number of organizational challenges, the review identified turnover as an issue spanning the entire province, with levels of severity thought to range by office and by region. Most notable in this report was Deloitte's estimation that turnover was as high as 50% in the Eastern-Urban region of Newfoundland.

A thorough review of the conditions of in care/custody services provided by CYFS was conducted with results presented in the *Children In Care Report* (Fowler, 2008). Fowler used a mixed methods approach, capturing information regarding the children in care in NL through a questionnaire administered to front line social workers (N = 579 children's cases, response rate = 92.8%) and through key informant interviews with a variety of personnel associated with the in care program (N = 90). The main purpose of this research was to profile the children utilizing CYFS's in care services, outline gaps in the placement continuum, and identify ways to address these gaps.

Contributors in key informant interviews acknowledged social worker turnover as a major issue affecting the entire province. In addition, interview participants stated that

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the elevated levels of turnover were resulting in a higher proportion of less-experienced social workers across the board. Turnover, and ultimately lack of experience, was also said to result in reduced social worker confidence in critical decision making situations. Finally, Fowler spoke of the workforce's instability as it directly affected the child in care – that losing a well-known case worker or being assigned multiple case workers over a short period of time can be seen by the child as another failed relationship (Fowler, 2008).

A recent informal report, commissioned by the DOHCS (Abell et al., 2008), presented the findings of an intensive review of active CYFS case files across NL. A random sample of cases was selected from CYFS divisions such as Protection Intervention, Family Services, Child Welfare Allowance, Children In Care and Custody, Caregiver Homes, and Youth Services. The initial population consisted of 9630 active cases (April 1, 2007 to March 31, 2008), from which 400 were randomly selected and reviewed by external consultants and internal consultants representing each RHA. The results of the research indicated the presence of workforce instability within CYFS and the authors stressed that it could no longer be tolerated and needed to be addressed. With the aim of ameliorating the child protection system, Abell and colleagues examined the conditions and developed recommendations to assist in the planning and implementation of new policies, programs, practices, standards, and methods of service delivery.

Results within the publication outlined turnover at the case level, showing that a quarter of the initial investigation and assessment cases had a change in caseworker, and that more than a third of the children in care cases and approximately one half of the

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protection intervention cases had a change in caseworker in the past year. In addition, the authors indicated there was an association between CYFS turnover and the degree of contact the social workers had with their clients. Similar to Fowler's (2008) finding that inexperience is playing a major role in CYFS's instability, Abell et al. (2008) reported that high staff turnover was resulting in an unspecified portion of the management positions being filled by less experienced workers.

This recent research provides new knowledge and sheds further light on CYFS's current workforce instability. The authors of the *CYFS Clinical Services Review* (Abell, et al., 2008) recommended that a province-wide strategy be launched to address and improve the short and long-term staffing needs. It was proposed that this new recruitment and retention strategy focus on addressing structural changes, opportunities for incentives, enhanced training, methods to alleviate overtime/on-call shifts, and workload benchmarks, amongst other issues.

Summary. The three recent provincial reports involving CYFS have identified turnover as a primary issue affecting the stability within the organization. Although turnover itself has not been directly measured locally, the studies revealed that approximately one fifth of the province's CYFS social workers intended to leave their position within one year in 2006, and turnover itself was hypothesized to be as high as fifty percent in some regions of NL. While in most recent research, specific areas within the organization, such as training, overtime, on-call, and workload benchmarks, have been identified as needing improvement, gaps in CYFS research still exist in NL; including quantifying CYFS turnover, and exploring associations between novel

organizational factors, and those previously assessed, and child welfare turnover or intent to leave in NL.

Factors Contributing to Turnover

Examining social worker turnover is often a complex process, involving the identification and understanding of the various organizational, social, and emotional factors and how they contribute to turnover and the relationships between them. According to the literature, there are a variety of organizational factors associated with social worker turnover, including caseload size, salary, amount of paperwork, inadequate hiring, and issues associated with employee training (Ellett, Ellett, & Rugutt, 2003; Scannapieco & Connell-Carrick, 2007). Other research examining the antecedents of child welfare worker turnover has revealed that social worker turnover is often best predicted by the degree of professional commitment a worker has to their organization, as well as levels of burnout, job satisfaction (Mor Barak et al., 2001; Nissly, Mor Barak, & Levin, 2005), job autonomy (Kim & Stoner, 2008) and social support (Kim & Stoner, 2008; Mor Barak et al., 2001; Nissly et al., 2005). The following section describes several organizational factors and their association with social worker turnover within child welfare, as indicated by the literature.

Role conflict. Weaver and colleagues (2007) define role conflict as a "mismatch between individual expectations, and specific contextual demands of the job" (p. 21). Both role conflict and role ambiguity have been identified by the Canadian Association of Social Workers (CASW) as factors negatively affecting social workers' wellbeing. The CASW explains that role conflict can result from organizational restructuring and the use

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of interdisciplinary teams, and that ultimately, it arises from social workers taking on too many roles within their organization (CASW, 2004).

In 1984, Jayaratne and Chess conducted a quantitative study in which social workers holding a Masters Degree were compared (N = 288). Levels of organizational commitment were compared between family service (n = 84), mental health (n = 144), and child welfare social workers (n = 60). The study's findings suggest that child welfare workers experienced significantly higher levels of role conflict and role ambiguity. Interestingly, level of financial reward was the only significant predictor of intent to leave among child welfare workers, indicating that turnover might be reduced by increasing, or at least addressing, the financial rewards available to the child welfare workers in this population.

Recent research involving the effect conflict and role ambiguity have on social worker turnover has shown that they play an important part in an employee's decision to leave their position with child welfare services (Dickinson & Painter, 2009; Weaver, Chang, Clark, & Rhee, 2007). Weaver and colleagues (2007) administered a survey to over 1700 new public child welfare workers hired in California, USA to determine the factors associated with intent to leave their job. The original response rate was approximately 34% (N = 519), however the final sample consisted of 382 social workers. The results indicated that child welfare workers' intent to leave was primarily associated with role conflict. However, the underlying causes were indistinct as a variety of vague questions had been posed in the questionnaire.

In a more recent study, Dickinson and Painter (2009) surveyed child welfare workers hired in North Carolina between January 2002 and October 2005. With a response rate of 48.4%, the initial sample consisted of 356 completed surveys. However a number of surveys were missing key employment history data, therefore the final sample comprised 157 social workers. In this study, role clarity was determined to be a significant predictor of intent to leave. Dickinson and Painter explain this finding by indicating that social workers are less likely to intend to leave their job when they have more confidence in the match between their job expectations and their skills.

Summary. Role conflict in this context is best described as disparity between a child welfare worker's understanding of their role and skills, and their actual job responsibilities and the expectations set by the organization. Quantitative research conducted over the past three decades has identified role conflict as a significant predictor of child welfare worker turnover and intent to leave.

Supervisor support. In all professions, supervisor support is an essential aspect of an organization's stability; however, it is crucial that front-line child welfare workers receive adequate support from their superiors. Proper supervision methods specific to child welfare have been outlined by Dickinson and Painter (2009). In their 2009 study surveying child welfare workers (N = 157), they stated that "retention-focused supervisors know best practices with families, set clear and measurable performance expectations, and provide workers expert help through such tactics as coaching, case consultation and mentoring" (p. 204). Similarly, Siggner (2008) explained in a report commissioned by the British Columbia Government Employees Union that consistent

supervision, for example regular performance reviews, can facilitate clear communication between employees and managers, and that a lack of ongoing supervision can lead to reduced communication between staff and management, resulting in front-line workers feeling isolated and secluded.

Research regarding the factors affecting social worker turnover in child welfare has consistently shown that inadequate support from supervisors often results in front-line staff leaving their positions (Dickinson & Perry, 2002; Dickinson & Painter, 2009; Landsman, 2008; Scannapieco & Connell-Carrick, 2007; Siggner, 2008). For example, Dickinson and Perry (2002) administered surveys to specially educated Master of Social Work graduates (N = 368) to examine the factors associated with their retention and found that social workers with higher perceived levels of supervisor support were more likely to remain in their position. Similar findings were reported in Dickinson and Painter's 2009 study which outlined the predictors of unwanted turnover in child welfare.

Landsman (2008) conducted a study using a cross-sectional research design in which child welfare workers in Iowa were surveyed on their perceptions of their employment and workplace. A total of 497 child welfare workers completed the survey, with a response rate of 59%. However, after excluding respondents with excessive missing data, a total of 456 remained. The study explored factors affecting organizational commitment in social work and found that supervisor support was positively associated with organizational commitment, through job satisfaction and perceived organizational support.

The relationship between managerial support and social worker turnover was also evident in Canadian research. Anderson & Gobeil (2002) reported the results of a cross-sectional study, using quantitative and qualitative methods, conducted to explore recruitment and retention issues affecting child welfare organizations in Canada. Surveys were mailed to 36 Child Welfare League of Canada (CWLC) agency members across the country. A total of 16 agencies responded (response rate = 44%), with a total of 12,144 full-time equivalent staff positions represented within the results. The survey results indicated that nearly 70% of agencies found that insufficient support and lack of recognition within the organization was at least somewhat problematic, with 8% identifying these issues as very problematic (Anderson & Gobeil, 2002).

A Canadian study investigating the factors affecting turnover in British Columbia's child protection workforce reported similar results (Bennett et al., 2009). Surveys were sent to social workers who left the Ministry of Children and Family Development and those who remained working at the Ministry (N = 109). When social workers who had left their child welfare positions were asked to indicate their main reasons for leaving, 41.1% of survey respondents indicated they had concerns related to leadership or management and 23% felt there was a lack of support or clinical supervision within the organization (Bennett et al., 2009).

Herbert (2007) reviewed the results of the 2000 CASW study, *Creating Conditions for Good Practice*, in which social workers across Canada were surveyed and interviewed in focus groups to identify factors that support and hinder good social work practice. A total of 1,118 social workers from 10 provinces and three territories

responded to the survey; however the final sample size consisted of 983 respondents. In examining the results, Herbert (2007) found that lack of supervisory support was a prominent theme among social workers. In addition, respondents indicated that they felt social workers were becoming supervisors for various reasons, however mostly unrelated to the social worker's understanding and skills as a clinical supervisor. Respondents also indicated that managers were too often occupied with administrative tasks and thus unavailable to front-line social workers (Herbert, 2007).

   Summary. The research regarding manager support suggests that child welfare organizations across North America are experiencing challenges in maintaining adequate supervision. The front-line social workers are reporting a lack of direction from their management, which appears to be a significant factor contributing to decreased levels of organizational commitment and an increased desire to leave among social workers. Scannapieco and Connell-Carrick (2007) offer a solution by suggesting that supervisors undergo continual professional development to better understand their role in the retention of front-line social workers.

   Workload. Research examining the factors associated with child welfare turnover often includes social worker workloads or caseloads. Workload is a more general term that references the amount of time a person spends on a variety of work-related tasks, while caseload refers to the number of files or cases a particular worker oversees or has responsibility for (Perrin, 2006). The literature suggests that social workers often feel overwhelmed with their high caseloads, and consequently leave their position. However, when social workers leave due to high caseloads, the remaining cases are distributed

amongst fewer workers, thereby escalating the problem (CPS Human Resource Services, n.d.).

A mixed methods study was conducted in Ontario, Canada to outline working conditions within the Children's Aid Society of Toronto (CAST) and to examine the factors related to the turnover of the organization's child welfare workers (Coulthard et al., 2001). Sixty-seven surveys were mailed to child welfare workers who chose to leave their positions with CAST; the final sample size consisted of 27 completed surveys (response rate = 40.3%). Results from the survey indicated that front-line staff who left their position felt that the preventable turnover rate had increased over the past 10 years, listing increased caseloads and caseload complexity as primary causes. Similarly, the association between caseload or workload and turnover was apparent in survey results (N = 109) reported by British Columbia's Ministry of Children and Family Development (Bennett et al., 2009). One third of survey respondents indicated that high caseloads or unmanageable workloads were among their main reasons for leaving child protection. Further, approximately 70% of social workers indicated that a reduction in caseload would have made it more likely for them to stay with British Columbia's Ministry of Children and Family Development.

Administrative burdens, on-call shifts, and overtime hours also lend to increased stress and turnover. The General Accounting Office reported that both front-line staff and supervisors were frustrated by levels of administrative tasks, including court appearances and paperwork (CPS Human Resource Services, n.d.). The National Council on Crime and Delinquency (2006) conducted a study in California, USA to examine the relationship among organizational factors contributing to turnover, efficiency, case outcomes, and overall workplace functioning. Data were obtained from 12 counties, resulting in a database representing approximately 3,000 social workers and over 40,000 child protection cases. The findings indicated that turnover rates were higher in counties requiring on-call shifts compared to those where on-call status was not required. Further, a meta-analysis exploring the effects of on-call shifts on working professionals found that working on-call shifts may contribute to increased stress and decreased mental well-being (Nicol & Botterill, 2004). Regehr, Leslie, Howe, and Chau (2000) administered a survey to CAST social workers (N = 175) and identified overtime and high caseloads as ongoing stressors in Canadian child welfare practice.

    Summary. North American studies have shown that high unmanageable workloads can lead to increased stress and ultimately result in front-line staff leaving their child welfare positions. Research suggests that a number of factors contribute to overwhelming workloads, including excessive caseloads, high complexity caseloads, overtime hours, and on-call shifts. Proposed methods to help decrease or manage child welfare workloads include increased training for social workers, proper guidelines for manageable workloads, and increased support staff.

Salary. Salary is an additional organizational factor which has been shown to be related to social worker turnover. In Herbert's review (2007) of the CASW study in which front-line staff were surveyed (n = 983) and interviewed in focus groups, the survey results indicated that social workers felt that lack of opportunity for increased pay and status, without taking a supervisor position, was an impediment within the organization. Focus group participants also suggested that incentives and rewards would encourage competent and suitable staff to continue working in front-line positions.

Similarly, in a study conducted by the National Council on Crime and Delinquency (2006), in which organizational data from social work organizations were obtained from 12 California counties, social worker salary was found to be closely associated with turnover rates. Specifically, strong correlations were observed between the minimum worker salary and agency turnover (-.80), as well as minimum supervisor salary and average turnover (-.75); indicating that higher salary was associated with lower turnover. In addition, Strolin-Goltzman (2008) surveyed 668 child welfare workers in a Northeastern American state regarding factors contributing to workforce retention (response rate = 71%). The results indicated that satisfaction with pay and benefits and job satisfaction was significantly higher in social worker organizations with low turnover compared to those with high turnover.

However, Vinokur-Kaplan, Jayaratne, and Chess (1994) surveyed social workers working in the USA within a public agency, a private non-profit agency, or a private practice (N = 746) to determine factors associated with intent to leave. In contrast to the results obtained by Strolin-Goltzman (2008), Vinokur-Kaplan and colleagues found no

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association between income or perceived pay satisfaction, and social worker job satisfaction and intent to seek a new position.

Summary. A number of studies have identified pay satisfaction or salary as an important factor to examine when investigating antecedents to intent to leave or turnover. Several studies found that salary or pay satisfaction was directly associated with social workers intending to leave their position within their organization and seeking employment elsewhere. While there is empirical evidence suggesting a strong association with pay and intent to leave, additional research has indicated otherwise. Further research at the organizational level is necessary to determine the role pay satisfaction plays in social workers leaving their positions.

Job satisfaction. Job satisfaction among social workers, and more specifically child welfare workers, is frequently researched. Low job satisfaction has been identified in the literature as a negative factor resulting from unsatisfactory employment conditions within the child welfare sector (CASW, 2004). Coulthard and colleagues (2001) examined the results of a study which administered surveys and held interviews for child welfare workers no longer working in their positions (N = 27). The results indicated that the primary reasons social workers were leaving the CAST involved high levels of stress and unmanageable workloads. However, Coulthard and colleagues point out that the reasons social workers leave can ultimately be explained by job dissatisfaction. This lends to the idea that underlying factors may be contributing to social worker turnover through intermediates, such as job satisfaction.

In a study examining the retention of specially educated child welfare workers (N = 368), Dickinson and Perry (2002) found that social workers who remained in child welfare positions experienced significantly higher levels of job satisfaction than those who left. Similarly, both Mor Borak et al. (2001), who conducted a meta-analysis of research concerning the retention of child welfare workers, and Strolin-Goltzman, Auerbach, McGowan, and McCarthy (2008), who surveyed child welfare agencies within a Northeastern state (N = 820), determined that job satisfaction, along with other variables, is a strong predictor of intent to leave and turnover amongst child welfare workers.

Cahalane and Sites (2008) administered surveys to recent social work graduates and collected data over a four year period in order to determine the factors which were associated with the retention of child welfare workers in Pennsylvania, USA. A total of 305 graduates completed the survey regarding their employment with public child welfare and analysis revealed that the respondents with higher levels of job satisfaction were more likely to have remained in their child welfare position.

Summary. Job satisfaction has been identified in the literature as a direct or indirect factor contributing to the turnover of child welfare workers. Most of the studies' findings support that child welfare workers with lower levels of job satisfaction are more likely to leave their position, indicating that job satisfaction is a good predictor of intent to leave. It is important to measure job satisfaction as it can provide insight into an organization's workforce and help determine what factors need to be addressed to reduce social worker turnover (Barth, Lloyd, Christ, Chapman, & Dickinson, 2008).

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Burnout. Christina Maslach, often considered the pioneer of burnout research in human services organizations, defines burnout as "a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who work with people in some capacity" (Maslach, Jackson, & Leiter, 1996, p. 4). Maslach and colleagues indicate that emotional exhaustion is a significant component of burnout, because when "emotional resources are depleted, workers feel they are no longer able to give themselves at a physiological level" (Maslach et al., 1996, p. 4). Depersonalization is another important factor and is characterized by "negative, cynical attitudes and feelings about one's clients" (p. 4). Finally, the third component is referred to as reduced personal accomplishment and "refers to the tendency to evaluate oneself negatively, particularly with regard to one's work with clients; workers may feel unhappy about themselves and dissatisfied with their accomplishments on the job" (p. 4). All three aspects of Maslach's burnout are critical in explaining the multifaceted burnout experienced by health services employees.

Research has shown that emotional factors, such as stress, anxiety and burnout, contribute to social worker turnover. Child welfare is frequently identified as a particularly stressful field of social work with high levels of staff burnout (Lambert & Regehr, n.d.). Canadian research indicates that children's aid, family services, and intake workers experience more traumatic stress than other social workers (Regehr et al., 2000). Similarly, a study evaluating burnout in Canadian child-protection professionals found that child welfare social workers and psychologists had the highest levels of burnout compared to other child-protection professions (Bennett, Plint, & Clifford, 2005).

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Kim and Stoner (2008) administered a survey to 1,500 randomly selected registered social workers in California to investigate the relationship between stress, burnout, and employee turnover amongst social workers (N = 478). The authors found that social workers who were exposed to high levels of stress tended to experience higher levels of burnout. The results also indicated that as employees' level of burnout increased, so did the likelihood of their turning-over; illustrating the link between stress, burnout and social worker turnover. Similarly, Turcotte and Pouliot (2007) administered a survey to examine the predictors of job satisfaction among child welfare workers (N = 450). High levels of stress amongst survey respondents were typically apparent through staff burnout and increases in social worker turnover.

In an Ontario workplace study, child welfare workers were surveyed and levels of burnout measured to determine the relationship between burnout and intention to leave (N = 98). The results suggested that social workers' emotional exhaustion levels were highly correlated with intent to leave (Stalker, Mandell, Frensch, & Harvey, 2003). Furthermore, Mor Barak, Levin, Nissly, & Lane (2006) conducted a qualitative research study to examine why child welfare workers leave their positions. A total of 33 telephone interviews were conducted and results indicated that when there is conflict between professional expectations and stressful organizational conditions, child welfare workers tend to continue the demanding work at the expense of their health, resulting in high levels of burnout (Mor Barak et al., 2006).

Research conducted by Dickinson and Perry (2002) examining the factors associated with the retention of social workers found that those who left or were likely to

leave child welfare experienced higher levels of emotional exhaustion than those who remained (N = 368). Further, research in British Columbia (Bennett et al., 2009) found that over a quarter of social workers' main reasons for leaving child welfare were linked to high levels of stress and burnout (N = 109). Respondents felt there were no supports in place to help them manage the pressures associated with working in child welfare and felt their burnout had personal and organizational consequences. Specifically, child welfare workers also reported that increased levels of stress negatively impact their co-workers and ultimately their clients (Bennett et al., 2009). Related research has shown that other negative emotions, such as feeling undervalued by one's organization and experiencing elevated levels of fear and anxiety regarding child welfare cases, often contribute to social worker turnover (Ellet, Ellis, & Westbrook, 2006).

Summary. Quantitative and qualitative research has consistently identified stress and burnout as primary factors contributing to child welfare worker turnover. When the Maslach Burnout Inventory has been used as a tool to measure stress, emotional exhaustion has been consistently shown to be directly related to turnover and intent to leave. Based on the results obtained from the literature, it is evident that high levels of stress result in social worker burnout and, either alone (Omar, 2003) or in combination with lack of support (Bennett et al., 2009), burnout typically leads to high social worker turnover (Harvey & Stalker, 2003).

Burnout in Newfoundland and Labrador's Social Workers

Circa the release of the Turner Review, the Newfoundland and Labrador Association of Social Workers (NLASW) launched a provincial survey (NLASW, 2007)

to capture information regarding the factors affecting the quality of work life of social workers in NL. The survey gathered information from 368 social workers across NL (response rate = 32.5%) with the intention of improving the organizational climate for the province's social workers. Although the survey did not directly measure levels of burnout, the results suggested that social workers were busier than ever and that work conditions were taking their toll.

Respondents indicated that social work in NL is fast-paced and characterized by complex cases and high-volume workloads. This type of environment hinders social workers' ability to complete their work and take the time necessary for well-being. According to the *Quality of Work Life Survey*, almost two-thirds of the province's social workers stated that work conditions negatively impacted their family and/or social life. Further, forty percent of respondents indicated that, as a result of their job, they were sick more often, and one-third of the social workers reported feeling depressed as a result of work conditions (NLASW, 2007).

Although not the primary focus of their review, Deloitte (2007) indicated that already-high levels of stress experienced by CYFS social workers are amplified by specific factors such as workload, inadequate training, and the frequency of on-call shifts and attending court. CYFS social workers explicitly communicated their opinions to Deloitte investigators through the following quotes: *"The work consumes your life"*, *"Child protection is referred to as a death sentence"*, and *"The system is broken"*, suggesting underlying stress. It is evident from the results of the Deloitte investigation that child welfare social workers in NL work in exceedingly stressful environments with

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daily tasks that include assessing a child's safety, determining appropriate intervention methods, and ultimately influencing a child's fate.

Summary. Local research in NL regarding social workers, and more specifically child welfare workers, has indicated that social workers feel they have high workloads and that negative work conditions are affecting their personal life. As a result of their work environment, social workers have reported feeling stressed and depressed. Although high stress levels are mentioned in previous research, burnout levels within the CYFS social worker population have not been examined, nor has it been determined whether burnout contributes to intent to leave among the provinces child welfare workers.

Consequences of Employee Turnover

The multitude of factors contributing to social worker turnover only adds to the diversity of its consequences. Based on the literature, it is evident that high levels of social worker turnover negatively influence a variety of outcomes, thereby creating and further contributing to social work instability. Aside from the stress and burnout experienced by the social workers who have left, a number of other major issues arise from increased social worker turnover, indirectly affecting the workforce and ultimately the delivery of care. For example, turnover can result in increased caseloads for the remaining social workers, as the cases previous employees left behind are distributed amongst the remaining workers (Curry, McCurragherm, & Dellmann-Jenkins, 2005). As a result, the remaining staff may be over-worked; ultimately contributing to increased employee burnout and regrettably, a decrease in the level of client care (Pollack, 2008).

Employee turnover can lead to an increased number of inexperienced social workers in the field (Curry et al., 2005), inevitably affecting the level of client care provided by the child welfare workers. A study conducted by the United States General Accounting Office found that workforce instability and employee turnover limit the amount of time child welfare workers have to complete crucial aspects of their job, including conducting frequent and meaningful home visits, establishing trusting relationships with children and families, and making appropriate decisions regarding the safety of children (CPS Human Resources Services, n.d.). Unfortunately, social worker turnover has also been directly linked to child maltreatment recurrence rates. Specifically, a correlation of .81 was reported between reported turnover in 2002 and maltreatment recurrence at 3 months for children left in their home; and a correlation of .60, the lowest of reported correlations, was reported between turnover rates and maltreatment recurrence at 12 months for all cases (National Council on Crime and Delinquency, 2006).

In addition to the consequences affecting personnel, there are also direct costs associated with employee turnover (Pollack, 2008). After the initial loss of a social worker and prior to hiring new staff, direct departmental expenditures can include increased costs for remaining staff's overtime hours and additional costs associated with recruiting new social workers.

Summary. As the literature indicates, there are many factors associated with increased social worker turnover and therefore, numerous consequences affecting the stability of the remaining workforce. It is evident that social worker turnover has a major

impact on the quality of employment and the client-services provided by organizations, and it must be improved upon to increase worker longevity and child safety (Scannapieco & Connell-Carrick, 2007; Siggner, 2008).

Chapter Three: Methodology

Chapter three is divided into two sections. The first section describes the research design for Study 1, including the population and sample, procedures used, key variables, and a discussion of the ethical considerations and proposed data analysis techniques. The second section describes the research design for Study 2, including the population and sample, the instruments, procedures, and a discussion of the ethical considerations and proposed data analysis techniques. Since the project was an initiative of the Department of Health and Community Services (DOHCS), the research design was discussed with the DOHCS, Eastern Health's (EH's) Department of Research and Knowledge Transfer, and researchers working with Memorial University's Faculty of Medicine.

Research Design – Study 1

Background and rationale. Study 1 was a retrospective archival study designed to quantify the turnover of CYFS social workers and managers working between April 2006 and May 2009, within EH, the largest Regional Health Authority (RHA) in NL. This exploratory study compared internal and external turnover, and examined differences in social worker turnover between regional and area teams.

Various methodological approaches were explored. Several data extraction options were originally identified: retrieve data from existing position control, a system used within human resources to track employee movement through positions, allowing for straightforward turnover calculations; retrieve data from the Newfoundland and Labrador Association of Social Workers (NLASW) annual registration forms; and extract

archival data containing employment history from EH's MEDITECH system, one of the RHA's primary data repositories.

Human resources staff and various officials within CYFS were contacted to determine if position control of CYFS social workers existed. Position control allows for employment tracking by position rather than by employee. With accurate position control, an organization can track the number of employees that move through particular positions over time and more easily explore turnover and occupancy rates. Unfortunately, at the start of and over the course of this study, CYFS position control was not kept.

Extracting data from the NLASW annual registration forms as a method of calculating turnover was also explored. After consultations with the NLASW, it was determined that this option was not viable as the registration forms are preloaded and only completed on a yearly basis. More specifically, the information provided by a social worker upon first registering with the NLASW is recorded and resent to the respective social worker each year on a preloaded form for re-registration purposes. If the information is inaccurate, it is left to the social worker to make any appropriate changes to the preloaded form. The information is updated once a year, if at all; thereby reducing the likelihood of obtaining accurate turnover measurements.

The final option involved obtaining historical data from MEDITECH, the methodological approach used in Study 1. MEDITECH data extraction methods were initially explored with members of the DOHCS and Eastern Health's Information Management and Technology (IM&T) department; numerous meetings were held (December 2008 – February 2009) to explore task feasibility. Due to Eastern Health

mergers, it was found that extraction methods were complicated and the data would require significant manipulation and cleaning. In collaborating with the Department of IM&T, it was determined that accurate data was not available from MEDITECH prior to 2006. Consequently the data obtained was used to calculate CYFS turnover trends in EH between April 2006 and May 2009.

Population and sample. The target population was all employees who had worked as a social worker I (SWI), social worker II (SWII), social worker III (SWIII), manager, or director within an EH CYFS-specific department between April 2006 and May 2009. A sample was obtained from EH's MEDITECH system based on this criteria and comprised 392 employees, 3 were excluded because they did not meet the inclusion criteria. The final sample consisted of 389 unique employees. Social worker position descriptions can be found in Appendix A.

Procedure. The IM&T department extracted administrative data files containing employee records from EH's MEDITECH system. Extracted data included demographic information (employee's age, gender, position, and employment status) and audit trail information that captured all position changes, status changes, and departmental moves which had occurred during the social worker's employment with EH's division of CYFS between April 2006 and May 2009. The data were cleaned to contain information only concerning SWIs, SWIIs, SWIIIs, managers, and directors.

Using the formula below, turnover rates were calculated for internal movement, as well as external rates. For each type of turnover, rates were calculated by position (SWI, SWII, SWIII, Manager, Director), by individual team, and by urban/rural locality.

Urban teams within EH refer to the CYFS teams working within St. John's and its surrounding areas. Rural teams refer to those within EH, but outside of the capitol city and its surrounding areas. Please refer to Appendix B for a list of rural localities.

For each position, the number of social workers leaving their position, for any reason (including sick leave, vacation, maternity leave, etc.) was considered an exit. The number of exits per category or division were summed for each quarter, and divided by the total number of employees working within that category or division within that same quarter.

Key Variables.

Turnover. The key variable calculated in Study 1 was employee turnover, which is generally defined as the number of employees who left a position or organization during a defined time period divided by the total number of employees working during that same time period. For the purpose of this study, turnover rates were calculated on a quarterly basis and two separate, but equally important, definitions of turnover were used: *internal turnover* and *external turnover*.

$$\text{Turnover Rate} = \frac{\text{Sum of the Exits (per quarter)}}{\text{Total Number of Social Workers (per quarter)}}$$

In the context of the current study, *internal turnover* refers to a CYFS social worker leaving a CYFS program area to work as a social worker in another CYFS program area within EH. *External turnover* refers to one of three situations, 1) a CYFS

social worker leaving a CYFS department to work as a social worker in another division of social work within EH other than CYFS (e.g. addictions, mental health, a medical facility, a private clinical practitioner), 2) a CYFS social worker leaving the social work profession, but remaining in EH, or 3) a CYFS social worker leaving EH altogether, regardless of the reason. Social workers on sick leave, extended leave, or maternity leave were considered to have turned over since temporary replacement was required for their positions and hence contributed to employee turnover.

Ethical Considerations. The study protocol was approved by the Human Investigation Committee (HIC), Faculty of Medicine, Memorial University of Newfoundland, EH's Research Proposal Approval Committee (RPAC), and Western Health's Regional Ethics Board to ensure a high ethical standard (See Appendix D). To ensure complete confidentiality and anonymity in Study 1, unique identifiers were used to code the data and any indentifying information (e.g. name, employee number) provided initially in the administrative data files was deleted.

Data Analysis. Data were obtained from IM&T and transferred to Microsoft Excel spreadsheets. Data were labeled and then transferred and analyzed using the Statistical Package for the Social Sciences (SPSS) version 17.0. Using the turnover definitions described above under *key variables*, overall internal and external quarterly turnover rates were calculated for 2006-7, 2007-8, and 2008-9. In addition, more detailed turnover rates were calculated by position, team, and locality (urban/rural) by dividing the sum of the exits over the total number of social workers within each category.

Since the data from Study 1 were obtained from a regional administrative data repository, the results were obtained from the data as it was entered into MEDITECH. It is possible that there are inaccuracies in the raw data and since turnover was calculated based on the raw data, the final results may be a slight over or under representation of the actual turnover values.

Research Design – Study 2

Study 2 employed a cross-sectional design to determine the factors that predict intent to leave amongst Newfoundland and Labrador's (NL's) CYFS social workers. A questionnaire package was designed as part of a provincial initiative to explore and assess the effect of various demographic and organizational factors (attitudes towards roles and responsibilities and manager support, burnout, job satisfaction, various work attributes, and pay satisfaction) on intent to leave. The final draft of the survey was completed with feedback from the DOHCS, CYFS Regional Directors, and Chief Operating Officers, and researchers from Memorial University of Newfoundland.

Population and sample. The sampling frame consisted of all social workers and program managers working within CYFS across the four RHAs in NL during May and June of 2009. At the time the survey was administered, this population consisted of 379 social workers and program managers combined. This number can be broken down further to represent the number of social workers (n = 324, 85.5%) and program mangers (n = 55, 14.5%) employed provincially with CYFS when the survey was administered. To ensure the largest sample possible, a convenience sample was taken and all social

workers and managers were asked to participate in the survey. Of these 379 social workers and managers, 146 responded to the survey for a response rate of 39%.

Procedure. Recipients received an electronic questionnaire package accompanied by a cover letter informing participants of the study's purpose and voluntary nature of their participation (See Appendix C). In May and June 2009, the survey package was emailed to all four NL CYFS regional directors who then forwarded the email, with the attached questionnaire, to their program managers and social workers. Respondents were informed of the anonymity of their responses and they were also provided with the researcher's and HIC's contact information in the event that any questions or concerns arose. Respondents were asked to mail their completed surveys (via internal mail or through Canada Post), anonymously, to the researcher within four weeks of receiving the survey. In an attempt to increase response rates, CYFS directors were asked to send reminder emails to their staff at one and two weeks following survey distribution.

Instruments. All CYFS social workers received a questionnaire package, designed specifically as part of a larger initiative with the DOHCS, to profile social worker and manager perceptions of current employment conditions. The package consisted of a number of sections. The first section of the questionnaire package included a survey previously used to explore NL's CYFS social worker opinions regarding employment conditions. It profiled social worker perceptions and attitudes concerning their roles and responsibilities, levels of support and safety, job satisfaction, current priorities in the work place, and technological resources (Deloitte, 2007). In addition, the questionnaire package profiled levels of burnout using the Maslach Burnout Inventory

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Human Services Survey (MBI-HSS) (Maslach & Jackson, 1986), a variety of work attributes, pay satisfaction (a subscale of Spector's [1985] job satisfaction scale), and intent to leave. Survey participants were also asked to provide demographic information. Specifically, the questionnaire package consisted of six key sections.

Organizational factors – re-administering the 2006 survey (Deloitte, 2007). The first section of the questionnaire package made use of a survey administered to NL's CYFS social workers in late 2006. This survey had previously been validated on the province's CYFS social workers, and contained questions designed specifically for this population. Re-administering the Deloitte survey was seen as beneficial as it would allow for the comparison of social worker attitudes and perceptions over time; allowing the DOHCS to indirectly track the progress of internal program changes, through levels of perceived contentment with various organizational factors.

Section 1 included approximately 53 questions and statements relating to a variety of child-welfare-specific issues in NL. Survey questions were grouped into broad topics; however the corresponding questions do not sum to quantify any underlying concepts as the survey has not been subjected to factor analysis. Informal themes included social worker roles and responsibilities, levels of managerial support, ability to access fundamental resources, opportunities for collaboration, quality of technological tools, job satisfaction (rated on a 7-point Likert scale ranging from "very dissatisfied" to "very satisfied"), professional commitment, and likes and dislikes with working in child welfare. It should be noted that professional commitment does not imply organizational commitment. In addition, this section of the survey instructed respondents to specify the

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percentage of time they spent on various work-related tasks, and also asked respondents to prioritize their greatest occupational needs. For the majority of this first segment of the questionnaire, respondents were instructed to rate statements on a 5-point Likert scale ranging from "strongly disagree" to "strongly agree". A small number of questions required numerical (percentages and rankings) or qualitative responses.

Section 2: The Maslach Burnout Inventory – Health Services Survey (Maslach & Jackson, 1986). The MBI-HSS is the most widely used measure of burnout in health research (Evans et al., 2006; Prosser et al., 1996). It is a standardized survey consisting of 22 statements and aims to measure burnout in staff members employed in human services institutions and health care occupations such as social work, nursing, psychology, and ministry.

Burnout itself is measured across three separate subscales: (decreased) personal accomplishment, emotional exhaustion, and depersonalization. The subscales are described as follows: decreased personal accomplishment is characterized by feeling inadequate regarding one's work (e.g. statement: I feel I am positively influencing other people's lives through my work); increased emotional exhaustion is characterized by feeling drained and worn-out with one's work (e.g. statement: I feel like I am at the end of my rope); and increased depersonalization is characterized by feeling withdrawn from, and seeking out less interaction with one's clients (e.g. statement I feel I treat some recipients as if they were impersonal objects).

The 22 statements compiling the MBI-HSS relate to, and are scored according to, the three subscales previously mentioned. Respondents are meant to rate each statement

on a 6-point Likert scale ranging from "Never" to "Every day". Burnout is present when a person reaches the threshold for each subscale: when the emotional exhaustion score is ≥ 21, the personal accomplishment score is ≤ 28, and the depersonalization score is ≥ 8 (Evans et al., 2006; Prosser et al., 1996). Survey respondents can be categorized as experiencing low, moderate, or high levels of burnout on each of the three subscales. Table 1 displays the scoring key for each subscale according to the *MBI Manual* (Maslach and Jackson, 1986). The MBI-HSS has been used extensively in burnout research and has shown high internal consistency across its three subscales (α = .90 for emotional exhaustion; α = .79 for depersonalization; α = .71 for personal accomplishment) (Maslach et al., 1996). The MBI was adapted and reproduced by special permission of the Publisher, CPP, Inc., Mountain View, CA, 94043 from MBI-HSS by Christine Maslach and Susan E. Jackson. Copyright 1986 by CPP, Inc. All rights reserved. Further reproduction is prohibited without the publisher's written consent. Additional CPP, Inc. Publications are available at www.cpp.com.

Table 1 *Maslach Burnout Inventory - Health Services Survey Scoring Key*

Level of Burnout	Depersonalization	Emotional Exhaustion	Personal Accomplishment
Low	0-6	0-16	39 +
Moderate	7-12	17-26	32-38
High	13 +	27 +	0-31

Section 3: Work attributes. The third section in the questionnaire package contained 25 questions designed specifically to profile the CYFS workforce and the associated workloads. This section included questions pertaining to position type, discipline area, length of time as a social worker and within CYFS, overtime, caseload size, sick-leave, and various factors associated with on-call shifts. Questions required responses that were qualitative, continuous, nominal or categorical in nature.

Section 4: Intention to leave. Intention to leave has been widely studied as the primary outcome in turnover studies, as it is a strong predictor of employees leaving their positions (George & Jones, 1996; Hellman, 1997; Mor Barak et al., 2001; Mor Barak et al., 2006). The survey contained eight qualitative and quantitative questions relating to CYFS social workers intent to leave. These questions asked participants to indicate whether child welfare was their first career choice and to highlight their preferred working areas within social work, and specifically within CYFS. In addition, a direct measure of intent to leave was included ("Do you believe you will still be working in your current area of practice 12 months from now?") and respondents were also asked to indicate how often they had thought about leaving their current position in the past year. The section focusing on intent to leave concluded with two qualitative questions instructing participants to list the factors that might lead them to stay or leave their position within CYFS.

Section 5: Pay satisfaction subscale (Spector, 1985). The pay satisfaction section is a subscale taken from Paul E. Spector's Job Satisfaction Scale. This section asked participants to rate four statements relating to pay appreciation and opportunities for pay

increases on a 7-point Likert scale ranging from "disagree very much" to "agree very much". The responses to these four questions are summed to create an overall pay-satisfaction score. The pay subscale was validated across a variety of professions and was reported to have an internal consistency of $\alpha = .75$ (Spector, 1985).

Section 6: Demographics. A variety of demographic information was requested in the final section of the questionnaire. This included questions regarding age, gender, geographic location, and highest level of education achieved.

Ethical Considerations. The cover letter which accompanied the questionnaire package in Study 2 informed social workers that their participation in the study was completely voluntary and that their completion of the questionnaire implied informed consent. To ensure confidentiality and anonymity, participants were not asked to provide their name, employee number, or other identifying information. To further guarantee participant confidentiality, only aggregate results were used to report study findings.

Data Analysis. The Statistical Package for Social Sciences (SPSS) was used to analyze the data obtained from the province-wide survey. Frequencies and descriptives were run for all variables in order to summarize various working conditions within CYFS, as well as to assess the data's nature, structure, and quality. Due to the small number of SWIIs and managers indicating intent to leave, Fisher's Exact Test was used to confirm the appropriateness of combining or excluding groups from the final sample. Since the study's sample size was small, the number of predictor variables included in analysis needed to be limited; however, a total of five questions regarding social worker roles and responsibilities were of interest. Confirmatory Factor Analysis was conducted

to determine the appropriateness of reducing the five variables into one single variable. Finally, Spearman correlations and logistic regression analyses were conducted to explore the relationship between intent to leave CYFS and various important organizational factors, as identified in the literature, and to identify the best predictors of intent to leave.

Chapter Four: Results

Study 1

The primary purpose of Study 1 was to quantify the turnover of Child, Youth and Family Services (CYFS) social workers working within Eastern Health (EH) between April 2006 and May 2009. The results from Study 1 are presented in six sections. EH's annual internal and external CYFS turnover rates are presented in the first section. The second section gives a breakdown of the turnover by position. Urban and rural teams are compared for external and internal turnover in sections three and four respectively. Finally, sections five and six explore the external and internal CYFS turnover by team.

Eastern Health's turnover trends.

Annual internal and external CYFS social worker turnover. Figure 1 illustrates two important findings. First, the graph shows Eastern Health's annual internal and external CYFS social worker turnover over three years (2006-7, 2007-8, and 2008-9). When comparing CYFS's internal and external turnover, it is evident that turnover is higher within (internal), compared to turnover out of (external) the CYFS division. For administrative purposes, CYFS's structural organization changed from one department to numerous department codes in 2007-8. This administrative change is reflected in Figure 1, as the data from 2007-8 illustrates a high level of turnover. Although it appears as though a large proportion of CYFS social workers and managers changed positions in 2007-8, the majority of social workers did not actually change positions, only their administrative department code changed. Despite the inflation from the structural

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changes, the data indicates that both internal and external CYFS turnover has been increasing over the three year period.

Secondly, the graph illustrates EH's overall external turnover as an organization. When comparing CYFS external turnover to that of EH as a whole, CYFS turnover is consistently, and becoming increasingly, higher. Most recently in 2008-2009, CYFS's average annual internal and external turnover was approximately 45% and 20% respectively.
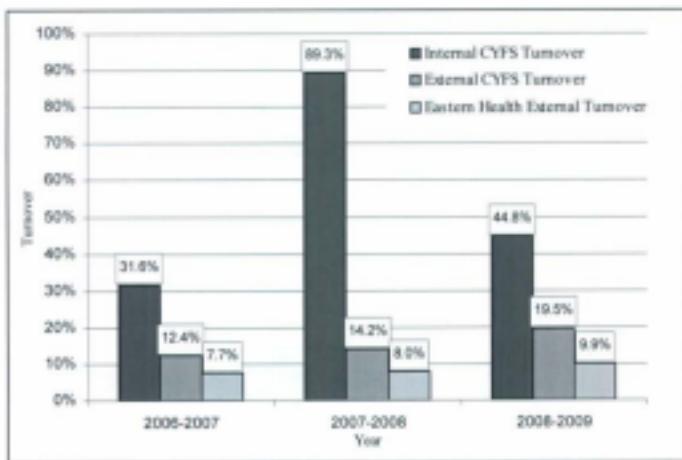
Figure 1. Annual CYFS internal and external turnover compared to Eastern Health's annual external turnover (2006-2009).

Note: 2007-8 internal CYFS turnover data is inflated due to restructuring within the organization.

Figure 2 illustrates CYFS's internal and external turnover, by quarter, between 2006 and 2009. Overall employment figures ranged from approximately 200 to

approximately 400 social workers per quarter. The graph indicates that CYFS's internal turnover per quarter has been consistently higher than the divisions' external turnover, with combined turnover approximately 25% over a three month period in 2008-9. There appears to be no underlying trends with respect to external turnover, as it has been fairly consistent at approximately 5% per quarter.

Focusing on the most recent data from April 2008 onwards, combined turnover was highest in the 1st quarter of 2008-9 (April-June, 2008), at approximately 25%. The results indicate that CYFS's internal turnover has been declining since April 2008; however, more recent quarterly rates (Oct-Dec 2008 and Jan-Mar 2009) are still high at approximately 7%, compared to those of April-June and July-September 2008. Due to the major organizational restructuring in 2008, it is difficult to comment on any internal turnover trends prior to Jan-Mar 2008. It was during this quarter that one urban CYFS department was restructured into many department codes, and therefore, prior to this quarter, internal urban turnover is a challenge to trace.
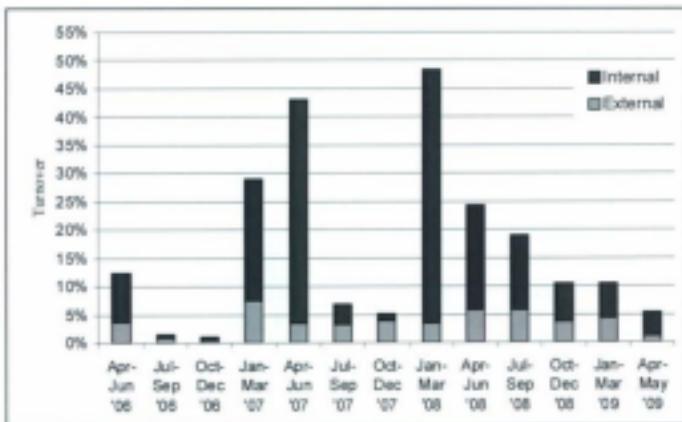
Figure 2. CYFS quarterly social worker turnover (2006-2009).

Notes: 1. Data in Jan-Mar 2007, Apr-Jun 2007, and Jan-Mar 2008 is inflated due to restructuring. 2. The last column represents April and May 2009 only.

As indicated in the notes section of Figure 2, the last column in Figure 2 represents only two months. Therefore, although it may appear that the turnover declined, it is not possible to directly compare this time frame to others. If the data were extrapolated for April to June 2009, internal turnover would increase and external turnover would decrease from the previous quarter. However, this calculation is only an estimation and must be interpreted with caution.

Who's leaving? The sample obtained from MEDITECH was compared with the current CYFS social worker population within EH to determine the generalizability of the results. No significant difference in age was found between the current EH CYFS social worker and manager population (as of March 8, 2010) ($M = 35.82$, $SD = 9.51$) and the

age (as of June 18, 2009) of the population used in Study 1 ($M = 34.75$, $SD = 9.64$), $t(615) = 1.152$, $p > .05$, $d = 0.92$, 95% CI [-0.65, 2.49]. Similarly, the proportion of males and females did not differ between the two samples, $\chi^2(1, N = 617) = 0.101$, $p > .05$, indicating that the sample obtained in Study 1 is representative of the current social worker and manager population within EH.

Table 2 illustrates the total external and internal turnover by position for the entire data set (April 2006 – May 2009). External turnover was highest amongst social workers Is (SWIs) (approximately 35% of all SWIs) between April 2006 and May 2009. Total external turnover was approximately 14% for all social worker IIIs (SWIIIs), 7% for all directors, 5% for all managers, and 18% for *Other*. Positions within *Other* include regional and special project positions, which one might expect to be temporary, and thus vulnerable to turnover. Total internal turnover rates were approximately 148% for SWIs, 120% for managers, 60% for social worker IIs (SWIIs), 40% for Directors, and 10% for SWIIIs between April 2006 and May 2009. Turnover was very high for both SWIs and managers, and overall internal turnover was much higher than external turnover.

Table 2 EII's External and Internal CYFS Turnover by Position (April 2006 – May 2009)

Position	External Turnover	Internal Turnover
Social Worker I (N = 347)	35.73%	148.13%
Social Worker II (N = 13)	0.00%	61.54%
Social Worker III (N = 21)	14.29%	9.52%
Manager (N = 41)	4.88%	121.95%
Director (N = 15)	6.67%	40.00%
Other (N = 11)	18.18%	0.00%

External turnover – urban and rural. Figure 3 illustrates the comparison between urban and rural external turnover by quarter. A noteworthy underlying trend is the increase in rural and urban external CYFS turnover increased between 2007-8 and 2008-9. There are no consistencies with respect to highest and lowest external turnover, indicating no underlying trends. The peak in rural turnover between January and March 2007 followed the release of the Turner Review. Major changes occurred in staff structure during this period.
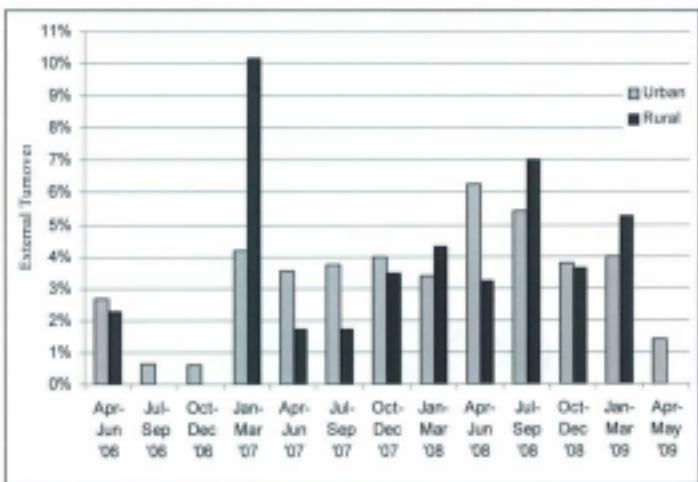
Figure 3. CYFS external turnover by quarter: urban vs. rural sites (2006-2009)

Note: 1. The last column represents April and May 2009 only.

Internal turnover – urban and rural. Figure 4 illustrates the comparison between CYFS's internal urban and rural turnover by quarter. As indicated in the notes section of Figure 4, major organizational restructuring of the division of CYFS occurred between Jan-Mar 2007, Apr-Jun 2007, and Jan-Mar, 2008. As mentioned previously, the peak in rural turnover between January and March 2007 followed the release of the Turner Review. Also, it was between Jan-Mar 2008 that one urban department was divided into several department codes. As a result, it is difficult to discern any underlying trends previous to the last quarter in 2007-8.
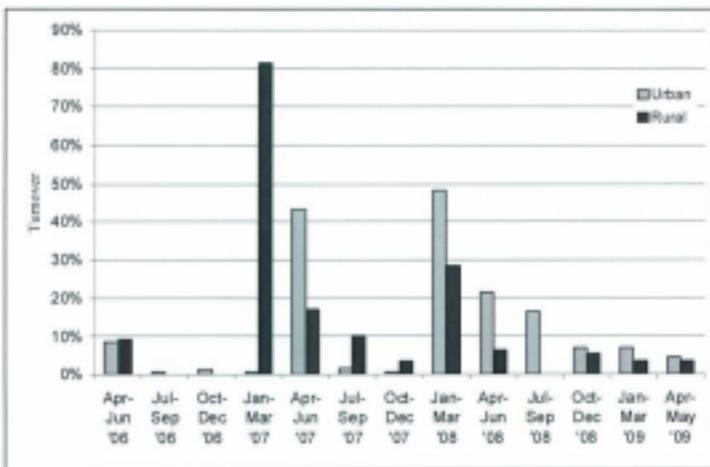
Figure 4. CYFS internal turnover by quarter: Urban vs. rural sites (2006-2009).

Notes: 1. Data in Jan-Mar 2007, Apr-Jun 2007, and Jan-Mar 2008 is inflated due to restructuring. 2. The last two columns represent April and May 2009 only.

However, there are clear underlying trends from April 2008 onwards. The first is

that internal turnover has been consistently higher in urban sites compared to rural sites

since April 2008. That is, there were more social workers moving to other departments

within CYFS in the urban region than there were in the rural region. Secondly, as

illustrated in Figure 4, while turnover in the urban sites declined in 2008-9, it had not

been less than 7% per quarter.

Again, since the last column represents only two months, it may appear that the

turnover declined in urban and rural sites; however it is not possible to compare this

column to the other quarters. If the data is extrapolated for April to June 2009, internal

turnover would decrease less than half a percent and external turnover would increase from the previous quarter. This calculation is only an estimation and must be interpreted with caution.

External turnover by team. The external turnover data was examined by team. Eastern Health's quarterly external CYFS turnover data are presented in detail in the following tables found Appendix B. Table B1. Eastern Health's CYFS External Turnover by Team – 2006-2007; Table B2. Eastern Health's CYFS External Turnover by Team – 2007-2008; Table B3. Eastern Health's CYFS External Turnover by Team – 2008-2009; Table B4. Eastern Health's CYFS External Turnover by Team – April and May 2009.

Quarterly external turnover rates between April 2006 and Mar 2007 ranged between zero and 100%. Higher rates were observed in rural teams with small numbers of social workers per team. When team sizes are small, turnover rates can appear to be larger. For example, in a team consisting of 4 social workers, turnover reaches 50% within a quarter when 2 workers leave their positions. If the number of social workers within the team is not known, the percentage can appear falsely high. Overall, there were a low number of external exits in 2006-2007 and external turnover in urban sites was minimal. External turnover rates were highest between January and March of 2006.

Similarly, external turnover rates in 2007-2008 ranged from zero to just over 30% per quarter. Again, the higher rates signify changes in rural teams with 1 or 2 social workers. External turnover in urban sites increased slightly from the previous year, but

remained relatively low below 4.5% per quarter (n = 7). Overall, external turnover rates were highest between January and March of 2007.

Rural external turnover in 2008-2009 did not change from the previous years. Turnover rates ranged from zero to 100% in rural teams, with 100% the result of one social worker leaving a small team. In the urban teams, external turnover rates increased from previous years, with rates ranging from 0% to 40% (n = 5) per quarter in particular teams. In general, external turnover rates were highest between July and September of 2008. Rates for April and May of 2009 cannot be directly compared to previous quarters, as the data only represent 2 months.

Internal turnover by team. The internal turnover data was also examined by team. Rates for April and May 2009 cannot be directly compared to other quarters. Eastern Health's quarterly internal CYFS turnover data are presented in detail in the following tables found Appendix B. Table B5. Eastern Health's CYFS Internal Turnover by Team – 2006-2007; Table B6. Eastern Health's CYFS Internal Turnover by Team – 2007-2008; Table B7. Eastern Health's CYFS Internal Turnover by Team – 2008-2009; Table B8. Eastern Health's CYFS Internal Turnover by Team – April and May 2009.

In 2006-2007, quarterly internal turnover ranged from 0% to 111% in rural teams, with anywhere between zero and 11 social workers changing positions within rural CYFS over a three month period. Turnover can exceed 100% when the number of exits exceeds the number of social workers working during that time period. In urban teams, internal turnover ranged from zero to 9%, with a maximum of 13 social workers per team changing positions within one quarter. However, in 2006-7 there was one main

urban CYFS department and therefore many internal position changes that occurred within urban EH are not documented. Internal turnover rates were highest in 2006-2007 between January and March.

Quarterly internal turnover by team increased in 2007-2008; that is, there was a higher frequency of turnover observed in 2007-2008 than in 2006-2007. Again in rural teams, turnover ranged from zero to 75% with a maximum of five social workers per team changing positions internally within one quarter. With respect to urban sites, internal turnover also increased by team in 2007-8 from 2006-7. However, many structural changes occurred in this year and must be taken into consideration when examining the internal turnover data. Rates in urban teams ranged from zero to 100% with a maximum of 144 social workers changing positions (some of which was due to restructuring). Internal turnover rates were highest between January and March 2008.

In 2008-2009, quarterly internal turnover rates leveled out from the previous year. In rural teams, internal turnover ranged from zero to approximately 40% by quarter, per team, with a maximum of two social workers per team changing positions internally. With respect to the urban teams, turnover ranged from zero to 100%, with a maximum of 26 social workers in one team changing positions within a three month period. Within the 2008-9 year, internal turnover rates were highest between April and June 2008.

Summary

Results from Study 1 indicate that child welfare worker turnover is high in EH, both internally and externally, with the former contributing to the majority of the turnover within CYFS. With respect to annual CYFS turnover within EH between 2006 and 2009,

the highest levels of internal turnover were observed in 2007-2008, and the highest levels of external turnover were observed in 2008-2009. In this year, turnover was highest between April and June (2008) and July and September (2008), especially with respect to internal movement. External turnover has remained somewhat consistent at approximately 5% per quarter.

When the results were examined by position, the majority of the external turnover was attributable to SWIIs, however internally, both SWIs and managers experienced high internal turnover. Results were also compared by rural and urban teams. Externally, turnover of urban teams has been higher than rural teams across most quarters, with the exception of peaks in rural external turnover of child welfare workers between July and September (2008) and between January and March (2009). Internally, urban turnover has been consistently higher than rural turnover since April 2008. Wide variations in internal and external turnover were also observed at the team level.

Study 2

The primary purpose of Study 2 was to examine the factors associated with intent to leave among CYFS social workers in NL. To achieve this, the predictor variables of interest, as identified in the literature, and pertinent demographic information were regressed on the dichotomous variable illustrating intent to leave within 12 months.

Respondent Characteristics. A total of 146 of the possible 378 CYFS social workers and program managers completed the survey, resulting in an overall response rate of 39%. Collectively, the response rate was higher for social workers (n = 132, 40.7%) than for program managers (n = 12, 21.8%). One respondent indicated *Other* for their position title, while one respondent did not complete the question. Regional and provincial response rates are displayed in Table 3. Response rates were highest in Western Health (WH) and Labrador-Grenfell Health (LGH) and lowest in Central Health (CH) and Eastern Health (EH).

Table 3 Provincial and Regional Survey Response Rates by Position

Regional Health Authority	Social Workers	Program Managers	Unknown/ Other (n)	Total (n)
Labrador-Grenfell	45.7%	54.5%	1	50.0% (23)
Western	56.7%	28.6%	0	53.7% (36)
Central	30.2%	14.3%	1	30.0% (15)
Eastern	37.1%	10.0%	0	33.3% (72)
Total	40.7% (132)	21.8% (12)	2	38.5% (146)

All survey respondents worked full-time and 97.9% (n = 143) of respondents held permanent full-time positions, 1.4% (n = 2) temporary full-time positions, and 0.7% (n = 1) indicated another unspecified permanency status. Of the 145 respondents who specified their position, 80% (n = 116) indicated they were SWIs, 11% (n = 16) indicated they were SWIIs, 8% (n = 12) indicated they were program managers, and 1% (n = 1) *other*. When the outcome of intent to leave position was considered, analysis revealed 26.1% (n = 30) of social worker Is, 18.8% (n = 3) of SW IIs, and zero percent (n = 0) of program managers indicated intent to leave their position within 12 months.

Given the small sample size in each of the SWII and program manager categories, analyses were performed to determine if these categories could be merged with the larger SWI position category. Analysis revealed no significant difference in the percentage of SWIs and SWIIs indicating intent to leave (p = .760, Fisher's exact test). Therefore, SWIs and SWIIs were combined into one group. Subsequent analysis indicated that social workers as a whole were significantly more likely to indicate intent to leave than managers (25.2% (n = 33) versus 0% (n = 0) respectively, p = .048, Fisher's exact test). However, due to the small number of managers (n = 12) and *other* or unspecified positions (n = 2) and lack of variation demonstrated with regard to managers' intent to leave, these participants were excluded and all subsequent analyses conducted on the social worker group comprising SWIs and SWIIs only (N=132).

Demographics. The final sample comprised 116 (87.9%) females and 16 (12.1%) males. There was an even distribution of respondents aged 25-years and older, but the majority (n = 40, 30.5%) of respondents were over the age of 40-years. Thirty-five

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(27.3%) respondents were between 30 and 39 years-old, 38 respondents (29.7%) were between 25 and 29 years-old, and 16 (12.5%) respondents were between 18 and 24 years-old; four respondents did not indicate their age category. The majority (n = 123, 93.2%) of respondents indicated that a Bachelor's of Social Work was their highest level of education, while 5.3% (n = 7) of respondents held a Masters degree or a PhD. Two respondents (1.5%) indicated *"other"* as their highest level of education.

To determine the generalizability of the results, the social workers who completed the survey were compared to the provincial CYFS social worker population across age and gender. Figures used for comparison included data from EH, WH, and LGH. Age and gender data were unavailable for CH. The provincial gender distribution of CYFS social workers was 10.2% males and 89.8% females. The average age was 35.12 years (*SD* = 9.71), and when divided into comparable categories, 9.3% of the CYFS social worker population was between 18 and 24 years, 27.5% between 25 and 29 years, 33.0% between 30 and 30 years, and 30.2% aged 40 and over. These distributions are comparable to those obtained from the survey, indicating that the sample obtained in surveying the CYFS social workers is representative of their population.

Geographical location. Respondents were asked to indicate the geographical area(s) they considered their practice (the areas they serve) to be. Options included urban, rural, and remote. Although not instructed to do so, respondents may have selected more than one option. Figure 5 indicates the distribution of respondents by self-reported geographical location. The majority of respondents considered the area(s) they considered to be either primarily rural or primarily urban. It is important to note that respondents were

neither instructed to select only one option, nor all that apply. Therefore, it is unknown whether those who selected only urban, rural, or remote would have chosen more than one answer if they had been instructed to do so.
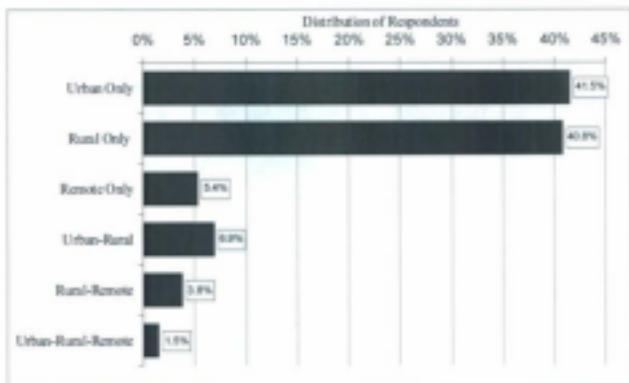
Figure 5. The percentage of respondents working per geographical area.

Due to small group sizes, a number of categories were collapsed to allow inclusion of the variable in subsequent regression analysis. The final variable, *location*, contained two groups 1) urban only, rural only, and urban-rural groups combined (*n* = 116), and 2) remote only, rural-remote, and urban-rural-remote groups combined (*n* = 14). This nominal variable was included in regression analyses.

Program area. The number of respondents working in each program within CYFS across NL is presented in Figure 6. When examining Figure 6, it is important to note that respondents were asked to select all that apply. The majority of respondents

indicated they worked with Long Term Protection. Residential Services was selected the least often amongst the CYFS divisions. Responses from the *Other* category included relief worker, Family and Rehabilitation Service (FRS), Stop Now and Plan (SNAP) pilot project, management, on-call, training, and community support.
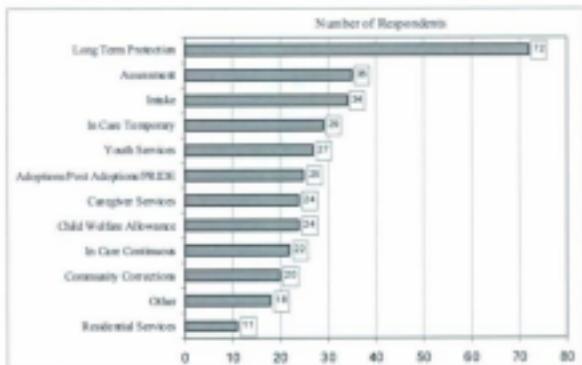
Figure 6. The number of respondents who indicated working within each CYFS program.

Experience. Table 4 depicts the mean number of years the social workers have been employed as a social worker, within CYFS, and in their current position. The range and medians have also been presented to better illustrate the distribution of social worker experience. Survey respondents were also asked to indicate the number of positions they have held while working within CYFS. The mean number of positions held per social worker was 2.48 (1.87), or approximately 3 positions. The median number of positions held was 2, with a range of 9.

Table 4 Social Worker Experience

	Mean (SD)	Range	Median
	(Years)	(Years)	(Years)
Total number of years worked as social worker (N = 128)	7.40 (7.37)	28.92	5.00
Number of years within CYFS (N = 129)	6.01 (6.67)	24.92	3.00
Number of years in current position (N = 125)	2.94 (3.78)	23.92	1.67

In addition to the relevant demographic information previously described, the literature identifies the following organizational variables to be pertinent in the current analysis. These factors include social worker burnout, job satisfaction, roles and responsibilities, manager support, workload, and pay satisfaction. The distributions of these variables are described in the following section.

Burnout. Survey respondents were categorized as experiencing low, moderate, or high levels of burnout on each of the MBI's three subscales; emotional exhaustion, depersonalization, and personal accomplishment. The distribution of survey respondents based on low, moderate, or high levels of burnout across the three components is illustrated in Table 5. According to the distributions within each subscale, most social workers were categorized with high levels of emotional exhaustion, low levels of depersonalization, and average or moderate levels of personal accomplishment.

Table 5 *Distribution of Respondents According to Level of Burnout Across the Three Maslach Burnout Inventory Subscales*

Level of Burnout	Emotional Exhaustion	Depersonalization	Personal Accomplishment
Low	23 (17.7%)	54 (42.2%)	26 (20.8%)
Average	72 (32.3%)	43 (33.6%)	52 (41.6%)
High	65 (50.0%)	31 (24.2%)	47 (37.6%)
Total	130	128	125

The results indicate that the majority of social workers are experiencing high levels of emotional exhaustion, which indicates a high level of burnout. The means of the social workers are taken and categorized across the three subscales as low, average, or high, according to the classification in the MBI manual (see Methods). Based on the MBI categorization, the mean emotional exhaustion score ($M = 27.59$, $SD = 11.57$) was high, the mean depersonalization score ($M = 9.06$, $SD = 5.74$) was average or moderate, and the mean personal accomplishment score ($M = 33.46$, $SD = 6.53$) was also average or moderate.

When split by intent to leave, the emotional exhaustion variable lacked large enough groups for regression analysis. Therefore, the low and moderate emotional exhaustion groups were combined ($n = 116$) and compared against the respondents categorized as experiencing high levels of emotional exhaustion ($n = 14$).

Job Satisfaction. When asked to rate their overall job satisfaction, one third (n = 44, 33.3%) of the respondents indicated they were somewhat satisfied with their current job. More than half (n = 74, 56.1%) indicated they were at least somewhat satisfied with their current job, while approximately 37.1% (n = 49) indicated they were somewhat dissatisfied, dissatisfied, or very dissatisfied. The distribution of respondents according to level of job satisfaction can be seen in Figure 7.

Very Dissatisfied	12.0%
Dissatisfied	6.9%
Somewhat Dissatisfied	19.2%
Neither Satisfied nor Dissatisfied	6.8%
Somewhat Satisfied	33.3%
Satisfied	16.2%
Very Satisfied	6.9%
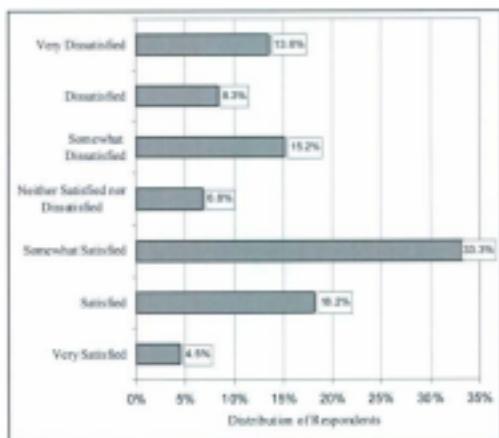
Figure 7. The distribution of responses regarding overall job satisfaction.

Regression analysis required that the groups with small numbers be combined. Therefore in subsequent analyses, the final job satisfaction variable included contained three categories: 1) the participants who indicated they were very dissatisfied, dissatisfied, or somewhat dissatisfied (n = 49), 2) the participants who indicated they

were neither satisfied nor dissatisfied (n = 9), and 3) the participants who indicated they were somewhat satisfied, satisfied, or very satisfied (n = 74).

Roles and Responsibilities. Respondents rated their agreement with the five statements within the survey relating to their roles and responsibilities. The distributions of these responses can be seen in Figure 8. The results indicate that the majority of respondents felt they have a good understanding of their roles and responsibilities, the CYFS Act, and the policies associated with CYFS; that they understand when to bring an issue forward to discuss with their manager, and that their primary commitment is to provide services to their clients.
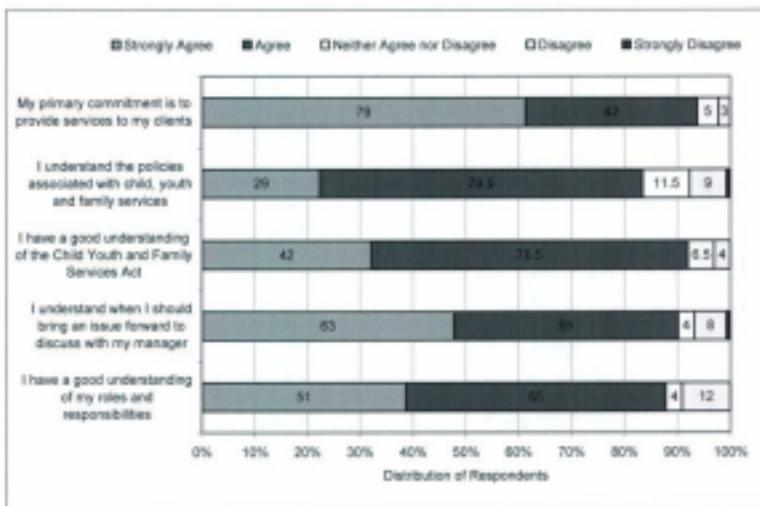
Figure 8. The distributions of responses regarding roles and responsibilities.

Exploratory factor analysis or principle component analysis, a statistical technique used to explore whether underlying themes or concepts exist within larger questionnaires or sets of questions, was used in the current study to determine if the five questions related to roles and responsibilities could be combined and further reduced. The results supported one underlying component. The Kaiser-Meyer-Olkin measure of sampling adequacy was .727, and Bartlett's test of sphericity was significant (χ^2 (10) = 229.73, $p <$ .001). Together the five items explained 56.66% of the total variance. Factor loading scores are presented in Table 6. Subsequent analysis utilized the factor *Roles and Responsibilities*.

Table 6 *Factor Description and Factor Loading of Roles and Responsibilities*

Items included in *Roles and Responsibilities*	Factor Loading
I have a good understanding of my roles and responsibilities	.803
I understand when I should being an issue forward to discuss with my manager	.737
I have a good understanding of the Child, Youth and Family Services Act	.771
I understand the policies associated with Child, Youth and Family Services	.829
My primary commitment is to provide services to my clients	.603

Manager Support. Survey respondents were asked to rate their agreement with two statements related specifically to management support and manager availability within CYFS. Over 65% of respondents indicated that they felt supported by their

manager and approximately 52% felt that they could reach their manager when needed.
The distribution of responses regarding manager support can be seen in Figure 9.
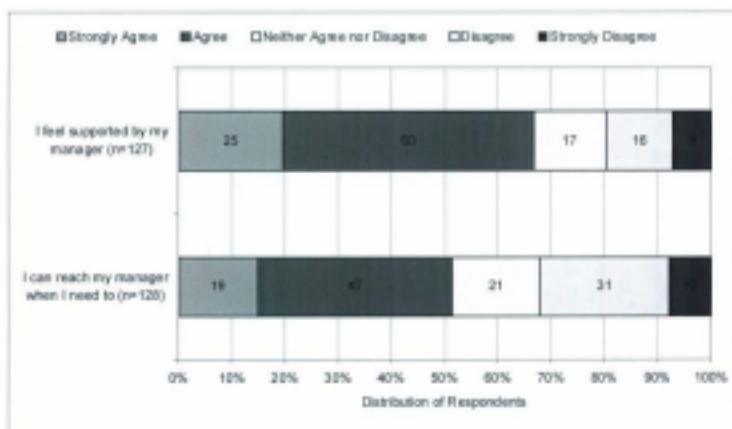
Figure 9. The distribution of responses regarding manager support.

     Small group sizes required categories to be collapsed. Therefore the responses for the statement "*I feel supported by my manager*" were collapsed into three categories: 1) strongly agree and agree (n = 85), 2) neither agree nor disagree (n = 17), and 3) disagree and strongly disagree (n = 25). Similarly, the responses for "*I can reach my manager when I need to*" were collapsed into three categories: 1) strongly agree and agree (n = 66), 2) neither agree nor disagree (n = 21), and 3) disagree and strongly disagree (n = 41).

     Workload. Responses to a number of questions regarding caseload volume, overtime hours, court appearances, and on-call shifts were explored. Table 7 displays the mean and median caseload volume, number of overtime hours worked per week, and

number of court appearances made per month. In addition, social workers were asked to indicate how frequently they work on-call shifts. The distribution of results is shown in Table 8. Several categories were combined to ensure groups with large enough sample sizes were available to conduct logistic regression analyses. The three social workers who indicated they were unsure were excluded from further analysis.

Table 7 *Descriptives of Social Worker Caseloads, Overtime Hours, and Court Visits*

Variable	Mean (SD)	Range	Median
Size of current caseload (N = 118)	27.10 (18.2)	127.00	24.00
Total overtime hours worked per week (N = 128)	7.52 (8.17)	50.00	5.00
Number of court visits per month (N = 101)	2.96 (5.50)	40.00	0.00

Table 8 *Frequency of On-call Shifts*

Frequency of On-call Shifts (N = 128)	n (%)	Frequency of On-call Shifts Combined (N = 128)	n (%)
Never	27 (21.1%)	About once a year or less	54 (43.2%)
About once a year	27 (21.1%)		
About once every 6 months	30 (23.4%)	About once every 3 to 6 months	54 (43.2%)
About once every 3 months	24 (18.8%)		
About once a month	14 (10.9%)		
About once a week	2 (1.6%)	About once a month or more	17 (13.6%)
More than once a week	1 (0.8%)		
Not sure	3 (2.3%)	Not sure	Omitted

Pay satisfaction. Scores were computed based on the responses to the four questions concerning pay satisfaction and each respondent's score was categorized as *satisfied, ambivalent,* or *dissatisfied.* Approximately 44% (43.9%, n = 57) of respondents were categorized as being dissatisfied with their current pay, 29.2% (n = 38) were categorized as satisfied, and 26.9% (n = 35) were categorized as being ambivalent towards their pay satisfaction.

Intent to leave. A total of 131 CYFS social workers responded to the questions regarding their intent to leave their position within 12 months. Approximately 75% (n = 98, 74.8%) of survey respondents indicated they had no intention to leave their position, where as 25.5% (n = 33) of CYFS social workers did indication an intent to leave.

Data analysis.

Missing data. Generally, the amount of missing data on variables examined in this study was less than 5%; a proportion generally considered unproblematic providing it is not related to the research design (Aroian, Dixon, Duffy, Jacobsen, & Norris, 2005; Dodd, 2008; Peugh and Enders, 2004). However, the proportion of missing data on variables representing monthly court visits and caseload volume exceeded this amount and these variables were consequently excluded from subsequent analysis.

Interrelationships among study variables. Table B9 (Appendix B) presents the Spearman rho correlations between all independent variables and the outcome intent to leave. Based on the correlation matrix, intent to leave is low to moderately correlated with job satisfaction, locating, emotional exhaustion, depersonalization, and manager support at significance levels of .01 and .05. In addition, a number of predictor variables

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are low to moderately intercorrelated. The strongest correlations were observed between job satisfaction, emotional exhaustion, and depersonalization (the latter two are both components of the Maslach Burnout Inventory), as well as between perceived manager support and manager availability (at a significance level of .01).

Logistic regression analysis. A binary logistic regression model was tested to determine how well job satisfaction, depersonalization, emotional exhaustion, manager support, and location predicted intent to leave. The full model is illustrated in Figure 10 and the results of the regression can be seen in Table 9. Overall, the model was significant ($\chi^2(9, N = 121) = 29.42, p = .001$), indicating that emotional exhaustion, depersonalization, location, manager support, and job satisfaction together accounted for 21.6% of the variance in intent to leave.
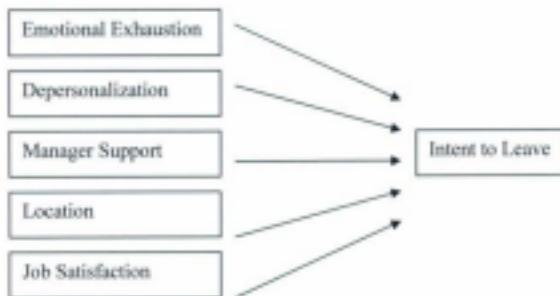
Figure 10. Full logistic regression model including emotional exhaustion, depersonalization, manager support, location, and job satisfaction.

The results of the regression model indicated that the odds of intending to leave are 3.61 times higher for individuals that strongly disagree or disagree they are supported by their manager compared to those who strongly agree or agree they are supported by

their manager. With respect to location, the odds of intending to leave are 10.2 times higher for rural respondents in comparison to respondents from remote or mixed localities. Correlated variables emotional exhaustion, depersonalization, and job satisfaction, did not have a direct and independent significant effect on intent to leave in this model.

Table 9 *Regression of Manager Support, Location, Emotional Exhaustion, Depersonalization, and Job Satisfaction on Intent to Leave (N = 121)*

	B	p	Exp β	95% CI
Manager support (SA/A)		.09		
Manager support (neither)	0.16	.81	1.18	0.31 – 4.52
Manager support (SD/D)	1.28	.03	3.61	1.12 – 11.67
Location (combined and remote)		.08		
Location (urban)	1.59	.16	4.91	0.53 – 45.8
Location (rural)	2.32	.04	10.2	1.11 – 93.1
Emotional exhaustion	0.22	.72	1.25	0.37 – 4.16
Depersonalization (low)		.16		
Depersonalization (moderate)	0.34	.60	1.40	0.40 – 4.97
Depersonalization (high)	1.31	.07	3.69	0.88 – 15.4
Job satisfaction (satisfied)		.22		
Job satisfaction (dissatisfied)	0.96	.09	2.60	0.85 – 7.95
Job satisfaction (neutral)	0.11	.91	1.11	0.17 – 7.14

Note: SA/A indicates the group containing combined strongly agree and agree responses

SD/D indicates the group containing combined strongly disagree and disagree responses

Given the moderate correlation observed between job satisfaction, emotional exhaustion, and depersonalization, three alternative models were constructed to test the individual effects of each of these variables in the model on the outcome of intent to leave. More specifically, a model with emotional exhaustion and job satisfaction excluded, illustrated in Figure 11, was tested and compared to the full model (Figure 10); a model with depersonalization and emotional exhaustion excluded, as illustrated in Figure 12 was tested and compared to the full model (Figure 10); and a model with job satisfaction and depersonalization excluded, as illustrated in Figure 13 was tested and compared to the full model (Figure 10).
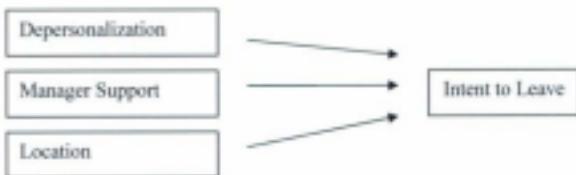
Figure 11. Restricted logistic regression model including depersonalization, manager support, and location.
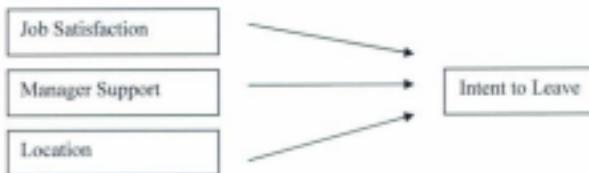
Figure 12. Restricted logistic regression model including job satisfaction, manager support, and location.

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┌─────────────────────┐
│ Emotional Exhaustion │ ─────────┐
└─────────────────────┘          │
┌─────────────────────┐          │     ┌───────────────┐
│  Manager Support    │ ─ ─ ─ ─ ─ ─ ─ ▶│  Intent to Leave │
└─────────────────────┘          │     └───────────────┘
┌─────────────────────┐          │
│      Location       │ ─────────┘
└─────────────────────┘
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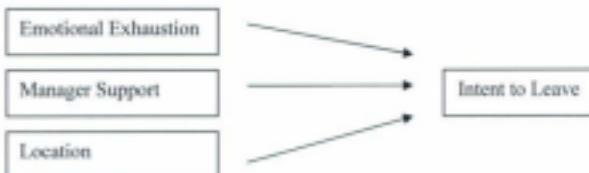
Figure 13. Restricted logistic regression model including emotional exhaustion, manager support, and location.

While the alternative model with emotional exhaustion and job satisfaction removed was significant ($\chi^2(6, N = 121) = 25.57, p = .000$), the removal of emotional exhaustion resulted in an increase in the -2 log likelihood when compared to the full model respectively (112.14; 108.28). In addition, the Cox and Snell statistic, interpreted as a pseudo R^2, decreased slightly from .216 to .190, suggesting that the removal of emotional exhaustion and job satisfaction reduced the model's ability to predict intent to leave. The results from the logistic regression analysis, displayed in Table 10, indicate that respondents with decreased feelings of manager support, rural locality, and high depersonalization have increased odds of indicating intent to leave.

Table 10 *Logistic Regression of Manager Support, Location, and Depersonalization on Intent to Leave (N = 121)*

	B	p	Exp β	95% CI
Manager support (SA/A)		.02		
Manager support (neither)	.24	.72	1.28	0.34 – 4.75
Manager support (SD/D)	1.57	.01	4.79	1.59 – 14.42
Location (combined and remote)		.09		
Location (urban)	1.63	.15	5.08	0.56 – 46.0
Location (rural)	2.26	.04	9.54	1.08 – 84.7
Depersonalization (low)		.01		
Depersonalization (moderate)	0.63	.29	1.87	0.58 – 6.02
Depersonalization (high)	1.77	.00	5.87	1.76 – 19.6

Similarly, when depersonalization and emotional exhaustion were removed from

the full model the -2 log likelihood increased (108.28 to 114.92). Also, the Cox and Snell

statistic, interpreted as a pseudo R^2, decreased from .216 in the full model to .180; this

change was larger than that observed when emotional exhaustion and job satisfaction

were removed. The decrease in the Cox and Snell statistic and the increase in the -2 log

likelihood statistic suggest that the removal of depersonalization and emotional

exhaustion also reduced the ability of the overall model to predict intent to leave. The

results of the regression model (χ^2(6, N = 124) = 25.54, p = .000) can be seen in Table

11, where respondents with decreased manager support, rural locality, and decreased job satisfaction have increased odds of indicating intent to leave.

Table 11 *Logistic Regression of Manager Support, Location, and Job Satisfaction on Intent to Leave (N = 124)*

	B	p	Exp β	95% CI
Manager support (SA/A)		.07		
Manager support (neither)	0.42	.52	1.52	0.43 – 5.43
Manager support (SD/D)	1.31	.02	3.70	1.23 – 11.1
Location (combined and remote)		.10		
Location (urban)	1.85	.10	6.36	0.71 – 56.6
Location (rural)	2.34	.04	10.4	1.15 – 93.9
Job satisfaction (satisfied)		.02		
Job satisfaction (dissatisfied)	1.38	.01	3.96	1.47 – 10.7
Job satisfaction (neutral)	0.47	.61	1.60	0.27 – 9.56

When depersonalization and job satisfaction were removed from the full model the -2 log likelihood increased (108.28 to 118.00); this restricted model was significant ($\chi^2(5, N = 124) = 21.46, p = .001$). Also, the Cox and Snell statistic, interpreted as a pseudo R^2, decreased from .216 in the full model to .159. This change was larger than that observed when emotional exhaustion and job satisfaction were removed, and when depersonalization and emotional exhaustion were removed. The decrease in the Cox and Snell statistic and the increase in the -2 log likelihood statistic suggest that the removal of

depersonalization and job satisfaction also reduced the ability of the overall model to predict intent to leave. The results of the regression can be seen in Table 12, where respondents with decreased manager support, rural locality, and increased emotional exhaustion have increased odds of indicating intent to leave.

Table 12 *Logistic regression of manager support, location, and emotional exhaustion on intent to leave (N = 124)*

	B	p	Exp β	95% CI
Manager support (SA/A)		.05		
Manager support (neither)	0.42	.51	1.52	0.44 – 5.29
Manager support (SD/D)	1.38	.01	3.97	1.34 – 11.76
Location (combined and remote)		.14		
Location (urban)	1.93	.08	6.85	0.79 – 59.5
Location (rural)	2.18	.05*	8.86	1.02 – 77.1
Emotional exhaustion	1.03	.04	2.81	1.08 – 7.34

*Actual p value equal to .048

Summary

Findings from Study 2 demonstrate that approximately a quarter of CYFS social workers surveyed provincially had an intention to leave their position within 12 months. Non-parametric correlations were conducted and the results indicated that decreased job satisfaction, increased depersonalization, decreased manager support, increased emotional exhaustion, and rural location were positively correlated with intent to leave. There were also a number of interrelated predictor variables. The variables correlated

with intent to leave were entered into a logistic regression model and accounted for 21.6% of the variation. Since emotional exhaustion, depersonalization, and job satisfaction were low to moderately correlated, three alternate logistic regression models were explored. The results revealed that removing depersonalization and job satisfaction had a greater effect on the model than when emotional exhaustion and depersonalization were removed or when emotional exhaustion and job satisfaction were removed, indicating that, although emotional exhaustion and job satisfaction are associated with intent to leave, depersonalization has a stronger association with intent to leave. Ultimately, the full model accounted for the most explained variance.

Chapter 5: Discussion

Chapter five begins with an overview of the results obtained in Studies 1 and 2 and a discussion relating the results to evidence in the literature presented in Chapter 2. Following the discussion of the results, the limitations of the current studies are highlighted and potential areas for future research are presented.

CYFS Social Worker Turnover within Eastern Health

Provincial investigations and local research have proposed that the issue of social worker turnover is related to the instability of the division of CYFS in NL (Abell et al., 2008; Deloitte, 2007; Fowler, 2008). Although this research has pointed towards high turnover rates, the issue was not quantified or thoroughly examined to determine the origin of the retention issues. The purpose of Study 1 was to calculate and examine CYFS social worker turnover trends within Eastern Health (EH), the largest regional integrated health authority in NL between April 2006 and May 2009.

As expected, the findings from Study 1 illustrate high levels of internal and external turnover rates within EH's CYFS division. For example, when examining the most recent turnover rates in 2008-9, combined internal and external turnover reached nearly 20-25% per quarter. To put this in perspective, in an organization with approximately 200 social workers and with approximately 25% turnover within one quarter, in maximum turnover situations approximately 40-50 social workers are changing positions or leaving the organization within a three month period. Although recent quarterly turnover rates have dropped to 10%, this still implies that approximately

20 CYFS social workers within EH are leaving the division altogether or changing positions within three months. Variations in turnover rates by quarter are may be reflective of seasonal changes in hiring. For example, generally there is an influx in new social worker graduates in May and June, which may contribute to higher turnover in subsequent months.

It is difficult to compare these turnover rates from the current study to those of other localities, as turnover itself is rarely calculated in social work research, and when it is, the type of turnover examined is often inadequately and inconsistently defined. Weaver et al. (2006) cited annual turnover rates between 27%-37%, however the study did not specify whether it was internal, external, or combined turnover. Similarly, annual rates were reported between 10.9%-12.8% in British Columbia (Perrin, 2006), but the type of turnover was not specified. However, regardless of the type of turnover explored, annual social worker turnover rates in EH appear to be greater than those reported in British Columbia. Clearer explanations of the terms used to define turnover would be helpful when attempting to compare studies and determine benchmarks for acceptable levels of social worker turnover in Canada.

The current study's findings indicate that CYFS's internal turnover rates were considerably higher than the external turnover rates across the region. When comparing the annual internal and external turnover rates from 2008-9, annual external turnover reached approximately 20%, while annual internal turnover reached approximately 40-45%. High external and internal turnover may reflect voluntary and involuntary organizational changes resulting from the release of the *Clinical Services Review* (Abell

et al., 2008). The presence of high internal turnover is consistent with current employment options in the region. Opportunities for social workers, other than child welfare positions, are limited in EH, and more specifically outside of CYFS division. Further, current union agreements might have influenced the level of internal turnover; a concept that could be examined in future research. In addition, under the current organizational structure, CYFS is often seen as gateway to more desirable social work positions. Although cyclic in nature, due to the high levels of turnover positions are available for the new graduates who are looking to gain seniority. Internal turnover rates may also have been considerably higher than external rates due to an inability to separate natural social worker turnover (e.g. promotions) and leave from employee's changing positions.

As depicted in the results, there was an increase in CYFS social worker turnover between January and June 2007, as well as between January and March 2008. The peaks in turnover cannot be attributed to voluntary position changes alone, as there were external factors and organizational changes which would have influenced the amount of turnover. The first obvious inflation in the data appears between January and June 2007. The stability of CYFS as an organization was shaken with the release of the *Turner Review* (Markesteyn & Day, 2006) in the fall of 2006. The review turned the public's attention towards CYFS and the weaknesses within the organization. The report's release could have potentially created dissatisfaction amongst the social workers leading to a chain reaction of CYFS social workers resigning and changing positions – thus increasing external and internal turnover. Although a direct link cannot be drawn between the

report's release and increased turnover, the timing of the report's publication coincides with peaks in social worker turnover. Research focusing on organizational change and turnover has indicated that external events can influence employees' intent to leave (Morrell, Loan-Clarke, & Wilkinson, 2004). In summary, extraneous factors, such as recent organization change and detailed research publications, may influence CYFS social worker turnover and intent to leave.

Similar peaks in turnover were observed between January and March 2008; however this sudden rise in turnover is attributable to administrative changes within CYFS. Prior to 2008, although the rural teams were considered separate departments, the urban teams were all considered to be working within the same department. However, between January and March 2008, CYFS underwent organizational restructuring and the large urban department was dissolved and each team was assigned a new departmental code. The implications of restructuring on internal turnover are evident in the data, as rates spiked to close to 50% between January and March 2008. This restructuring also masked an unknown proportion of the internal turnover prior to early 2008, as changes within the large urban department were untraceable due to the organizational structure of CYFS at the time. Therefore, only internal changes of the rural teams were reliably traced.

When the data was examined to determine what category of social workers were leaving their positions, the majority of the external turnover was attributable to SWIs leaving CYFS altogether. This finding may be related to the level of competition for internal positions. CYFS is an organization in which seniority plays a large part in position allocation, perhaps SWIIs, and higher, have a greater chance at being awarded

internal positions, thus pushing SWIs with less seniority to leave CYFS. When the internal turnover rates were examined by position, SWIs and managers both showed high levels of turnover over the three year period. These results are consistent with speculations that both frontline social workers and their managers were experiencing high turnover.

With respect to team locality the results showed that, most recently, urban turnover has been higher than rural turnover. This finding seems logical, as there are more employment opportunities in the urban areas, allowing for more position changes and thus higher turnover. Also, rural CYFS social work practice usually involves a more generalized caseload. Further, urban turnover may be higher than rural turnover since changing positions within the city and its surrounding areas is less cumbersome, as it generally does not require moving or relocating one's family. In addition to differences in locality, turnover also varied by team, suggesting that – be it due to the location or the area of specialty – there are more, and less, desirable teams in which to work within CYFS. A number of factors may be contributing to social workers changing positions across CYFS teams including convenience of office location, desirability of certain teammates or managers, intensity of cases, and type of workload.

High turnover within an organization is undesirable, as it often has a number of negative consequences. For instance, research has shown that social worker turnover can result in increased caseload volume for those remaining in position (Curry et al., 2005) and social worker burnout (Pollack, 2008). Turnover has also been linked to negative outcomes for the children in care; more specifically, maltreatment recurrence rates have

been directly associated with social worker turnover (National Council on Crime and Delinquency, 2006). Increased turnover, especially external turnover, is also undesirable for the organization as it requires additional expenditures related to overtime hours, recruitment, and training new staff (Pollack, 2008). Since the factors contributing to turnover vary by organization, it was important to explore which are associated with CYFS social worker intent to leave to help manage unwanted turnover of social workers in NL.

Factors Associated with Social Workers' Intent to Leave

Intention to leave is often used in retention studies when turnover data is unavailable as it is generally indicative of future turnover (George & Jones, 1996; Mor Borak et al., 2006). However, regardless of whether or not the social worker actually leaves their position, examining factors significantly associated with intent to leave aids in determining which organizational factors contribute to social worker discontent and desire to leave.

Findings from the questionnaire revealed that nearly a quarter of survey respondents intended to leave their position within 12 months. These results indicate that a large percentage of CYFS social workers are dissatisfied to the point that they contemplate leaving their position. The purpose of Study 2 was to determine what factors are associated with intent to leave. Intent to leave was associated with job satisfaction, geographical location, emotional exhaustion, depersonalization, and decreased manager support. In addition, multiple low to moderate correlations were observed between predictor variables.

Burnout. The results from the MBI revealed that CYFS social workers were experiencing, on average high levels of burnout with respect to emotional exhaustion, moderate levels of burnout with respect to depersonalization, and moderate levels of burnout with respect to personal accomplishment. When these scores were compared to the norms for social services employees (Maslach et al., 1996), CYFS social workers' scores were higher across all three subscales, indicating higher than normal levels of burnout.

In comparison to burnout levels reported in other studies, CYFS social workers' burnout scores are slightly higher or similar. For example, in comparison to child welfare workers in a New England State (USA), the CYFS social workers in NL are experiencing higher levels of burnout across emotional exhaustion and depersonalization, and similar personal accomplishment burnout levels (Boyas & Wind, 2010). Compared to reported levels of burnout in another group of child welfare workers in the USA, CYFS social workers had slightly higher levels of burnout with respect to personal accomplishment, slightly higher levels of depersonalization burnout, higher levels of emotional exhaustion burnout than those who stayed and slightly lower levels of emotional exhaustion burnout than those child welfare workers who left their position or were likely to leave public child welfare (Dickinson & Perry, 2002). Finally, in comparison to mental health social workers in the UK, NL's CYFS social workers were experiencing slightly higher levels of emotional exhaustion burnout, higher levels of depersonalization, and similar personal accomplishment burnout scores (Evans et al., 2006).

Findings from correlation analyses revealed that emotional exhaustion and depersonalization, both subscales of the MBI, had low positive correlations with intent to leave. When entered into the full logistic regression model, depersonalization had a direct positive effect on intent to leave, while emotional exhaustion had an indirect positive effect. The association between burnout and intent to leave is consistent with results from similar research (Bennett et al., 2009; Dickinson & Perry, 2002; Stalker et al., 2003), although emotional exhaustion has often been identified as the component of burnout holding the strongest association with social workers' intent to leave (Perry & Dickinson, 2002; Stalker et al., 2003). The findings suggest that CYFS social workers in NL are more likely to indicate intent to leave if they are experiencing higher levels of depersonalization, which occurs when social workers are faced with continuous client-related stress. They can become overwhelmed and retreat from their clients as a self-protection coping strategy. However, the level of detachment varies by person, but can be strong enough that the professional becomes indifferent to others' needs and feelings and ultimately fails to provide the appropriate client-care (Maslach, 1982).

In addition to the direct relationship with intent to leave, burnout was also shown to be related to a number of organizational factors. Emotional exhaustion was associated with increased depersonalization (a second burnout subscale), decreased job satisfaction, decreased manager support, and increased frequency of on-call shifts. Depersonalization was also low to moderately associated with decreased job satisfaction, decreased manager support, decreased manager availability, increased overtime hours, and increased frequency of on-call shifts. The effect of burnout in the current study on intent to leave is

consistent with findings from the literature. For example, Mor Barak and colleagues (2006) explored factors associated with child welfare workers' intent to leave and found that stress was correlated with intent to leave, but also with a number of organizational variables including manager support and job satisfaction.

Since a number of the predictor variables were associated with both depersonalization and emotional exhaustion, burnout is likely acting as an intermediate on the pathway to social workers' intent to leave. This is supported by research studies employing statistical methods such as structural equation modeling. For example, in a research study aimed at developing models to predict turnover intention among social workers, Kim and Lee (2009) found that burnout, as measured by the MBI, was an intermediate between role stress and turnover intentions, and indirectly mediated the relationship between workplace communication and intent to leave. Similarly, Kim and Stoner (2008) established burnout as a mediator between role stress and turnover intention.

Job satisfaction. Findings from the current study indicate that job satisfaction has a low negative correlation with intent to leave; suggesting an association between decreased job satisfaction and CYFS social workers intending to leave their positions. Logistic regression analysis revealed that, in the full and strongest model, the effect of job satisfaction was mediated by depersonalization. However, when the effect of job satisfaction was explored without the presence of the low to moderate correlates, emotional exhaustion and depersonalization, job satisfaction had a significant negative effect on intent to leave. That is, social workers who indicated low job satisfaction were

more likely to indicate intent to leave. These results are consistent with recent social work research which has shown that social workers who leave have lower levels of job satisfaction than those who remain on the job (Cahalane & Sites, 2008; Strolin-Goltzman et al., 2008).

Low job satisfaction, or job dissatisfaction, was also correlated with several other independent variables in the study. More specifically, job dissatisfaction was associated with increased emotional exhaustion, depersonalization, and frequency of on-call shifts and decreased personal accomplishment, understanding of roles and responsibilities, manager support, and ability to reach management. In both social work and nursing professions, job satisfaction has been shown to act as an intermediate in the relationship between intent to leave and organizational factors such as work motivation, autonomy, coworker support, supervisor support, organizational culture, trust in employer, and motivation (Gleason-Wynn & Mindel, 1999; Gregory, Way, LeFort, Barrett, & Parfrey, 2007).

In the current study job satisfaction is correlated with other independent variables. It is probable that job satisfaction is an intermediate on the pathway to CYFS social workers' intent to leave. This finding is supported by Coulthard and colleagues (2001) who suggested that social worker turnover can ultimately be explained by job dissatisfaction, as undesirable working conditions lead to dissatisfaction and eventually the desire to leave their position.

Manager support. Manager support is reported in the literature as one of the key factors relating to organizational commitment (Landsman, 2008) and higher retention rates (Lawson & Claiborne, 2005; Scannapieco & Connell-Carrick, 2007; Signger, 2008). Findings from the current study indicate that manager support has a low, negative association with intent to leave, suggesting that CYFS social workers who felt they had little manager support were more likely to indicate intent to leave. In addition, across all logistic regression models, manager support had a direct negative association with intent to leave. In comparison to social workers who agreed or strongly agreed they were supported by their manager, social workers who disagreed or strongly disagreed they had management support were 3.5 to 4.75 times more likely to indicate intent to leave. These findings, in conjunction with the distribution of responses regarding manager support and availability of management, suggest a lack of perceived supervisory support within CYFS.

Herbert (2007) found that lack of supervisory expertise was a prominent theme among Canadian child welfare workers and stated in her report that, across Canada, social workers were becoming managers for a variety of reasons that had little to do with their understanding and skills as clinical supervisors. Herbert found that social workers felt frustrated because managers were preoccupied with administrative tasks, and consequently were often unavailable to them. Further, recent provincial studies have suggested that a portion of the province's management positions are being filled by less experienced social workers (Abell et al., 2008; Fowler, 2008). The *Clinical Services Review* conducted by Abell et al. (2008) reported that the majority of current managers

across the province have had no training beyond their own limited experience as frontline social workers. The authors believed this system weakness could contribute to under resourced social workers and may ultimately contribute to increased risk for children and social worker burnout. The observations and findings from recent local research provide a partial explanation for the lack of supervisory support expressed by a number of the surveyed social workers as well as the relationship between decreased manager support and intent to leave.

   Location. The effect of the demographic variable location on turnover or intent to leave varies in the literature. While some research indicates no difference between urban and rural localities with respect to turnover intentions (Baernholdt & Mark, 2009; McGowan, Auerbach, & Strolin-Goltzmann, 2009), other research findings have suggested associations exist between locality and intent to leave. For example, in a study examining the relationship between organizational characteristics and child welfare worker turnover in New York, turnover intentions were similar across urban and rural settings, however both were higher than the percentages of social workers intending to turnover in suburban settings (Strolin-Goltzmann et al., 2008). In contrast, recent research conducted in Kentucky, USA found that social workers in rural regions were more likely to have stayed in their position than those working in urban regions (Yankeelov, Barbee, Sullivan, & Antle, 2009).

   The findings from the current study are inconsistent with the literature. Logistic regression analysis revealed that, in comparison to the *other* localities (including remote and mixed locations), social workers in rural settings were significantly more likely to

indicate intent to leave. The magnitude of this association was large with the odds of intending to leave between 9.5 and 10.5 times greater than the *other* combined category, depending on the regression model. However, the width of the 95% confidence interval suggests that the parameter should be interpreted with caution. Contrary to expectations, the association between urban locality and intent to leave was not significant. Social workers in rural localities may be more likely to indicate intent to leave because of feelings of social isolation and related levels of dissatisfaction; yet it was entirely true, one would expect intent to leave to be greater in remote areas as well. The results were explored for possible explanations for the unanticipated findings. Specifically, the proportion of social workers intending to leave was explored across geographic location and it was found that proportions were similar across urban and rural localities. This would suggest that urban and rural groups would have a similar effect on intent to leave; however, this was not observed.

The absence of a significant effect of urban locality and the magnitude of the odds ratio suggest spurious results. This may be due to a number of reasons. First, the significant association between rural locality and intent to leave may have been obtained by chance, or the results may have been due to type I error. Also, although groups were combined to create larger sample sizes, the results may still have been caused by reduced power or the results may be subject to type II error. Finally, the significance of urban locality on intent to leave may not have been visible as it may have been mediated by another variable present in the regression models.

Summary. The purpose of the current research studies was twofold; Study 1 quantified the internal and external turnover of CYFS social workers working within EH between April 2006 and May 2009, while Study 2 investigated various organizational factors and their association with CYFS social workers' intent to leave. The findings from Study 1 indicated that both internal and external turnover within EH is high, with the former the most disconcerting. Additionally, turnover was shown to vary by team, and, most recently, higher turnover was observed in urban teams in comparison to rural teams. Study 2 revealed that a number of variables were correlated with intent to leave including job satisfaction, depersonalization, emotional exhaustion, manager support, and location. However, the significance of location needs to be viewed with caution. Ultimately, increased burnout, decreased job satisfaction, and decreased manager support were the variables most strongly associated with CYFS social workers' intent to leave.

Study Limitations and Future Research

While the findings from the current study provide a greater understanding of the quantity of CYFS social worker turnover within EH and the factors associated with intent to leave across the province, there are a number of limitations. The ability to generalize the turnover rates obtained in Study 1 is limited since the data represents a three year period within EH and not the other three regions within NL, as the data were unavailable at the time of analysis. Although the social workers employed within EH represent over half of the CYFS social workers in NL, there may be potential regional differences related to location and culture. Ideally, data would have been obtained for the entire

province. In the future, data should be collected for all regions, thereby allowing for regional and provincial comparisons.

The findings from Study 2 should be generalized to other populations with caution for a number of reasons including the voluntary nature of the study which can result in respondent bias, as well as the self-reported nature of survey responses. The response rate of approximately 40% indicates that responses were not received from more than half of the CYFS social workers across the province. Unfortunately, this leads to an absence of data from non-participants and an inability to determine whether the decision to respond to the survey was random. In addition, a smaller response rate limits the sample size, which can cause issues related to power and ultimately lead to type II error. The response rate may have been affected by the timing of survey distribution, since surveys were distributed in late spring when the number of new graduates is high and social workers begin to take annual leave. A suggested method to ensure more complete future data collection and to help determine where CYFS social workers are going when they leave would be to have social workers complete exit interviews or questionnaires as they change positions or leave the organization. This would also help increase sample size and response rates, and ensure valuable information was collected from social workers who had left CYFS.

Limitations also exist with respect to study design. In Study 1, turnover rates were calculated based on a retrospective data set obtained from administrative files for the purpose of the study. As CYFS social worker turnover had not previously been calculated, there was no preexisting method to calculate turnover efficiently. Ultimately,

turnover rates would have been best obtained from CYFS if they kept position control, an administrative approach allowing for easy tracking of employee movement within and out of an organization. CYFS would benefit from a position control approach to allow for consistent and accurate tracking of social worker movement.

Study 2 employed a cross-sectional design, from which researchers cannot imply causality. In addition, the main outcome variable was intent to leave, a good predictor of actual turnover. However, exploring the relationships between organizational factors and turnover itself would provide a better representation of the associations. Unfortunately the survey data from Study 2 could not be linked to the turnover data from Study 1 due to confidentiality requirements of the local Human Investigation Committee. Limitations also exist within the survey questions with respect to the manner in which some questions were posed. For example, respondents were not instructed to select only one answer nor all applicable answers when asked to indicate the locality of their practice. This absence of guidance resulted in a small number of social workers selecting all applicable answers. However, this creates uncertainty as to whether social workers who selected only one response would have chosen more than one response if instructed to select all applicable answers. Future survey research on this population should focus on employing a longitudinal study, which would follow social workers through their employment and link changes in various organizational factors over time to turnover. In addition, sections of the survey package used, including the first section, had not previously been subjected to psychometric testing to determine internal validity and reliability.

With respect to the data analysis in Study 2, correlation analysis and logistic regression models provided valuable insight into the associations between the independent variables and intent to leave. Results from the logistic regression analysis revealed wide confidence intervals for the odds ratios. The presence of wide confidence intervals implies poor precision and can ultimately be a sign of inadequate sample size. Finally, based on the correlation and logistic regression results, it is probable that several variables acted as intermediates for other variables on the path to intent to leave. Since logistic regression analysis does not depict these relationships, it would have been ideal to employ additional statistical techniques, such as path analysis and structural equation modeling, however this was not feasible due to the small sample size.

Chapter 6: Implications for Policy and Practice

The current study provides insight into the levels of Child, Youth and Family Services (CYFS) social worker turnover within Eastern Health (EH) and what factors can be addressed to improve social worker turnover across the province. Chapter six summarizes the main findings and their implications for CYFS social work policy and practice in NL and provides potential solutions to problems outlined in the study's results.

Implications for Policy and Practice

The timing of the studies' completion is ideal, since the division of CYFS, is currently in transition to become the provincial Department of CYFS, within the Department of Health and Community Services, Government of Newfoundland and Labrador. This organizational and structural change is the result of the findings of several local research initiatives and reviews such as *The Deloitte Review*, *The Children in Care Report*, and *The Clinical Services Review*, which highlighted the systemic shortcomings within CYFS. More consideration and attention was required in order to improve upon the challenges CYFS faced. The results from the current research studies provide valuable insight into the quantity of turnover within the province's largest RHA, as well as factors directly associated with social worker intent to leave. This information can be used by the new Department of CYFS to build a stronger foundation for the province's child welfare system.

The findings from Study 1 demonstrate the extent of the turnover issues within EH's division of CYFS. However, a major limitation in the current study and within CYFS was the difficulty in obtaining information on CYFS's organizational structure and the absence of data regarding the movement of social workers in and out of CYFS. In order to adequately track province-wide recruitment and retention issues, the new Department of CYFS should implement a provincial system to track and record position changes thus making it easier to determine internal and external turnover for a given time period.

The findings suggest that CYFS social worker turnover is high, especially internally. This is an important finding since transitioning to a province-wide Department may allow more opportunities for internal movement. Currently, there are four RHAs and movement between the regions is somewhat restricted because social workers from other regions can only apply to external postings. The impact the move to a province-wide department will have on internal turnover is yet to be determined as it will depend on the final number of bargaining groups there are across the province. However, there is a potential for social workers to have access to more internal positions, thereby increasing the possibility of further internal turnover. The new Department of CYFS should monitor the potential for increased turnover as they develop and implement new policies.

A number of things can occur within the organization as a result of high turnover. For example, social workers who remain in their positions are burdened with the workloads left behind by staff leaving the workforce. In addition, social workers with more experience are often expected to share their expertise and help mentor new staff.

However this can become time consuming and cumbersome when the organization is constantly requiring and therefore hiring new social workers.

The findings from Study 2 indicate that the primary factors associated with intent to leave are social worker burnout, decreased manager support, and decreased job satisfaction. Increased emotional exhaustion and increased depersonalization, both major components of burnout, emerged as factors significantly associated with CYFS social workers' intent to leave. The level of burnout experienced by the province's CYFS social workers is characterized by a growing sense of apathy towards clients and feelings of being drained and worn-out, as characterized by emotional exhaustion and depersonalization. The CYFS social workers in NL are not only experiencing high turnover, they are also experiencing high levels of burnout. It is important for the organization to try to reduce the level of burnout experienced by the social workers, as it ultimately affects the level of client care provided to families and children. The new Department of CYFS may benefit from regular monitoring of burnout levels and the implementation of well-being programs aimed at reducing stress in the workplace. However, it is also important for the new Department to address a variety of organizational factors, since burnout itself was related to manager support, manager availability, overtime hours and frequency of on-call shifts.

The findings from the current study indicate that social workers who perceive lower manager support are more likely to indicate intent to leave. This is an important finding as the Department of CYFS can address the perceived level of supervisory support and availability early in the Department's development. Research indicates that

social workers are less likely to leave when they feel their managers are competent, reliable, provide positive feedback, show concern for social worker welfare, and help social workers get the job done (Dickinson & Perry, 2002). Since decreased supervisor support is related to intent to leave (Curry et al., 2005) and decreased staff retention (Mor Barak et al., 2006), conceivably discussions with managers regarding issues that hinder their ability to supervise will help focus the drive to increase manager support across NL. In addition, as previous research in the province has suggested, it is possible that as a result of high staff turnover social workers are moving to management positions without adequate training and experience as clinical supervisors. At this point in time, the workforce is quite junior, meaning that a large proportion of the frontline social workers are relatively new graduates and have not been working with CYFS long enough to have fully developed the skills and qualifications necessary to adequately manage teams. Although the selection process does focus on hiring the best candidate for the position, many of the social workers who exemplify the characteristics for excellent management don't have the experience to apply for the management positions. By focusing on retaining the current social workers so they can develop their skills and become experienced managers and by maintaining current management training initiatives within CYFS, the quality of supervision within CYFS will likely improve.

Job satisfaction also emerged as a significant factor associated with intent to leave. This was expected, as it was correlated with a number of organizational factors. Evidently CYFS social worker job satisfaction is influenced by variables such as burnout, manager support and availability, understanding of one's roles and responsibilities, and

frequency of on-call shifts. The Department of CYFS can target interventions aimed at any or all of these factors in an effort to increase job satisfaction amongst its social workers. By selecting more suitable managers or appropriately training management for clinical supervision, the organization can help increase manager support and ultimately job satisfaction. Providing the social workers with a clear description of their responsibilities and acknowledging social workers' accomplishments would likely aid in increasing the level of job satisfaction among CYFS social workers.

Summary. Findings from Study 1 and Study 2 have important implications for CYFS social worker practice as they have provided knowledge of turnover rates within EH, the largest RHA and greater insight into which organizational factors are associated with intent to leave, a strong predictor of social worker turnover. The final regression model indicated that burnout, specifically depersonalization and emotional exhaustion, manager support, job satisfaction, and location accounted for the variation in intent to leave. These findings provide valuable information for the new Department of CYFS, as well other child welfare organizations, since policies to reduce CYFS social worker turnover can be developed.

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Appendix A

Social Worker Position Descriptions

Social Worker I – Definition of Work

This is a professional social work practice in providing social work services to clients in a community, health care, correctional or other provincial institutional setting.

Employees at this level apply professional judgment in planning and coordinating the implementation of case plans for one or more social service programs. Direct services include intake/assessment and placement, case management, case planning, individual and group counseling, court work, discharge planning, coordination with other service providers and the provision of education, consultation, guidance, and counseling to clients, the general public and external agencies. Employees must have a comprehensive knowledge of community resources and other service programs as there is considerable interaction and joint service delivery with other agencies within and outside the province. Clinical independence and accountability is exercised in determining appropriate intervention strategies, developing, implementing, and evaluating case plans and providing supportive services with consultation and direction from supervisory officials as required. Work may be reviewed in the form of case file analysis, workload measurement statistics or annual performance evaluation.

Social Worker II – Definition of Work

This is a highly responsible professional and clinical leadership/supervisory social work position within a community, health care, correctional or other provincial institutional setting.

Employees at this level may be sole charge for a site of a multi-site organization, or have responsibility or administration of all legislated programs within a district, or have responsibility for both continuing care and mental health programs within a district, or be supervisory over other social workers and social work support personnel, or coordinate a social work service which is unique within the province, in addition to performing the clinical functions depicted in the Social Worker I class. Work involves consulting and advising social work staff and other team members in area of clinical

expertise; participating in the orientation and performance evaluation of staff in the area; participating in program evaluation, quality initiatives and strategic planning activities; ensuring compliance with professional standards and professional development; interpretation of social work policies; and promoting knowledge of legislation as it affects client services. Work is performed with considerable independent judgment and initiative within the scope of policies, regulation and legislated authority with work reviewed through period visits, conferences, reports and analysis of results obtained.

Social Worker III – Definition of Work

This is specialized professional social work practice in one or more social service programs to provide intensive therapeutic counseling and supportive services to clients.

Work of this class involves the performance of intensive therapeutic interventions to restore and/or enhance the psychosocial functioning of clients, conducting research activities designed to further clinical practice and service delivery, providing expert knowledge and skills within the practice area, developing and implementing a wide range of quality improvement activities, acting as a resource/consultant to a variety of agencies, and presenting expert testimony in court. Employees exercise a significant degree of independent clinical judgment with work reviewed through clinical consultation as needed.

Table B1 *Eastern Health's CYFS External Turnover – 2006-2007*

		2006-2007			
Team Name	Location	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar
Die CYFS Rural Avalon Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Adoption Services Rural	Rural				
Youth Corrections (YC) Bonavista	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
YC Burin Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
YC Clarenville	Rural		0.0% (0)	0.0% (0)	0.0% (0)
YC Whitbourne/Placentia/Holyrood	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS/CC Rural	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Bonavista	Rural	0.0% (0)	0.0% (0)	0.0% (0)	50.0% (2)
CYFS Burin Peninsula	Rural	14.3% (1)	0.0% (0)	0.0% (0)	12.3% (1)
CYFS Clarenville	Rural	0.0% (0)	0.0% (0)	0.0% (0)	16.7% (1)
CYFS Harbour Grace/Bay Roberts	Rural	0.0% (0)	0.0% (0)	0.0% (0)	14.3% (2)
CYFS Whitbourne/Placentia/Holyrood	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CC Youth & Residential Services	Urban				0.0% (0)
Youth Corrections Urban	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Residential Services	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Adm. Support	Urban				
CYFS Enquiries/Special Projects	Urban				
CYFS Training/CRMS	Urban				
CYFS Urban 1	Urban				
CYFS Urban 1a	Urban				
CYFS Urban 1b	Urban				
CYFS Urban 1c	Urban				
CYFS Urban 1d	Urban				
CYFS Urban 1e	Urban				
CYFS Urban 1f	Urban				
CYFS Urban 1g	Urban				
CYFS Urban 2	Urban				
CYFS Urban 2a	Urban				
CYFS Urban 2b	Urban				
CYFS Urban 2c	Urban				
CYFS Urban 2d	Urban				
CYFS Urban 2e	Urban				
CYFS Urban 2f	Urban				
CYFS Urban 2g	Urban				
CYFS Ass/Pride/Adopt	Urban				
CHS inactive account	Urban	2.7% (4)	0.6% (1)	0.6% (1)	4.3% (7)

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Table B2 *Eastern Health's CYFS External Turnover - 2007-2008*

		2007-2008			
Team Name	Location	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar
Dr CYFS Rural Avalon Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Adoption Services Rural	Rural				
Youth Corrections (YC) Bonavista	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
YC Burin Peninsula	Rural	0.0% (0)	0.0% (0)	33.3% (1)	0.0% (0)
YC Clarenville	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
YC Whitbourne/Placentia/Holyrood	Rural	0.0% (0)	25.0% (1)	0.0% (0)	25.0% (1)
CYFS/CC Rural	Rural	0.0% (0)			0.0% (0)
CYFS Bonavista	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Burin Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	11.1% (1)
CYFS Clarenville	Rural	0.0% (0)	0.0% (0)	14.3% (1)	0.0% (0)
CYFS Harbour Grace/Bay Roberts	Rural	7.7% (1)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Whitbourne/Placentia/Holyrood	Rural	0.0% (0)	0.0% (0)	0.0% (0)	6.7% (1)
CC Youth & Residential Services	Urban	0.0% (0)	0.0% (0)	6.3% (1)	0.0% (0)
Youth Corrections Urban	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Residential Services	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Adm. Support	Urban	0.0% (0)	25.0% (1)	0.0% (0)	0.0% (0)
CYFS Enquiries/Special Projects	Urban				0.0% (0)
CYFS Training/CRMS	Urban				0.0% (0)
CYFS Urban 1	Urban				0.0% (0)
CYFS Urban 1a	Urban				0.0% (0)
CYFS Urban 1b	Urban				0.0% (0)
CYFS Urban 1c	Urban				10.0% (1)
CYFS Urban 1d	Urban				0.0% (0)
CYFS Urban 1e	Urban				0.0% (0)
CYFS Urban 1f	Urban				9.1% (1)
CYFS Urban 1g	Urban				
CYFS Urban 2	Urban	3.9% (6)	4.5% (7)	4.1% (6)	4.5% (7)
CYFS Urban 2a	Urban				0.0% (0)
CYFS Urban 2b	Urban				7.1% (1)
CYFS Urban 2c	Urban				0.0% (0)
CYFS Urban 2d	Urban				10.0% (1)
CYFS Urban 2e	Urban				0.0% (0)
CYFS Urban 2f	Urban				0.0% (0)
CYFS Urban 2g	Urban				0.0% (0)
CYFS Ass/Pride/Adopt	Urban				0.0% (0)
CHS inactive account	Urban	1.1%	0.0% (0)	0.0% (0)	0.0% (0)

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Table B3 Eastern Health's CYFS External Turnover – 2008-2009

| Team Name | Location | 2008-2009 | | | |
		Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar
Dir CYFS Rural Avalon Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Adoption Services Rural	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Youth Corrections (YC) Bonavista	Rural	0.0% (0)	50.0% (1)	0.0% (0)	100.0% (1)
YC Burin Peninsula	Rural	0.0% (0)	0.0% (0)	50.0% (1)	0.0% (0)
YC Clarenville	Rural	50.0% (1)	0.0% (0)	0.0% (0)	0.0% (0)
YC Whitbourne/Placentia/Holyrood	Rural	0.0% (0)	0.0% (0)	33.3% (1)	0.0% (0)
CYFS CC Rural	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Bonavista	Rural	0.0% (0)	25.0% (1)	0.0% (0)	0.0% (0)
CYFS Burin Peninsula	Rural	12.5% (1)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Clarenville	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Harbour Grace/Bay Roberts	Rural	0.0% (0)	6.7% (1)	0.0% (0)	12.5% (2)
CYFS Whitbourne/Placentia/Holyrood	Rural	0.0% (0)	8.3% (1)	0.0% (0)	0.0% (0)
CC Youth & Residential Services	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Youth Corrections Urban	Urban	0.0% (0)	11.1% (1)	0.0% (0)	0.0% (0)
Residential Services	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Adm. Support	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Enquiries/Special Projects	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Training/CRMS	Urban	2.4% (1)	0.0% (0)	7.7% (1)	20.0% (2)
CYFS Urban 1	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Urban 1a	Urban	0.0% (0)	5.9% (1)	7.7% (1)	0.0% (0)
CYFS Urban 1b	Urban	0.0% (0)	7.7% (1)	0.0% (0)	0.0% (0)
CYFS Urban 1c	Urban	0.0% (0)	11.1% (1)	0.0% (0)	0.0% (0)
CYFS Urban 1d	Urban	14.3% (2)	0.0% (0)	0.0% (0)	7.7% (1)
CYFS Urban 1e	Urban	4.2% (1)	0.0% (0)	0.0% (0)	6.3% (1)
CYFS Urban 1f	Urban	0.0% (0)	0.0% (0)	0.0% (0)	12.5% (1)
CYFS Urban 1g	Urban			0.0% (0)	0.0% (0)
CYFS Urban 2	Urban	23.1% (3)	0.0% (0)	14.3% (1)	16.7% (1)
CYFS Urban 2a	Urban	6.7% (1)	9.1% (1)	15.4% (2)	8.3% (1)
CYFS Urban 2b	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Urban 2c	Urban	20.0% (3)	25.0% (4)	6.3% (1)	0.0% (0)
CYFS Urban 2d	Urban	18.5% (5)	9.1% (1)	9.1% (1)	0.0% (0)
CYFS Urban 2e	Urban	11.1% (1)	16.7% (2)	0.0% (0)	0.0% (0)
CYFS Urban 2f	Urban	0.0% (0)	0.0% (0)	9.1% (1)	0.0% (0)
CYFS Urban 2g	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Ass/Pride/Adopt	Urban	0.0% (0)	0.0% (0)	0.0% (0)	7.1% (1)
CHS Inactive account	Urban	0.0% (0)	50.0% (1)	0.0% (0)	0.0% (0)

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Table B4 *Eastern Health's CYFS External Turnover – April and May 2009*

Site Name	Location	Apr - May 2009
Dir CYFS Rural Avalon Peninsula	Rural	0.0% (0)
Adoption Services Rural	Rural	0.0% (0)
Youth Corrections (YC) Bonavista	Rural	0.0% (0)
YC Burin Peninsula	Rural	0.0% (0)
YC Clarenville	Rural	0.0% (0)
YC Whitbourne/Placentia/Holyrood	Rural	0.0% (0)
CYFS/CC Rural	Rural	0.0% (0)
CYFS Bonavista	Rural	0.0% (0)
CYFS Burin Peninsula	Rural	0.0% (0)
CYFS Clarenville	Rural	0.0% (0)
CYFS Harbour Grace/Bay Roberts	Rural	0.0% (0)
CYFS Whitbourne/Placentia/Holyrood	Rural	0.0% (0)
CC Youth & Residential Services	Urban	5.6% (1)
Youth Corrections Urban	Urban	0.0% (0)
Residential Services	Urban	0.0% (0)
CYFS Adm. Support	Urban	0.0% (0)
CYFS Enquiries/Special Projects	Urban	0.0% (0)
CYFS Training/CRMS	Urban	0.0% (0)
CYFS Urban 1	Urban	0.0% (0)
CYFS Urban 1a	Urban	0.0% (0)
CYFS Urban 1b	Urban	0.0% (0)
CYFS Urban 1c	Urban	11.1% (1)
CYFS Urban 1d	Urban	0.0% (0)
CYFS Urban 1e	Urban	0.0% (0)
CYFS Urban 1f	Urban	0.0% (0)
CYFS Urban 1g	Urban	0.0% (0)
CYFS Urban 2	Urban	0.0% (0)
CYFS Urban 2a	Urban	0.0% (0)
CYFS Urban 2b	Urban	0.0% (0)
CYFS Urban 2c	Urban	7.7% (1)
CYFS Urban 2d	Urban	0.0% (0)
CYFS Urban 2e	Urban	0.0% (0)
CYFS Urban 2f	Urban	0.0% (0)
CYFS Urban 2g	Urban	0.0% (0)
CYFS Ass/Pride/Adopt	Urban	0.0% (0)
CHS inactive account	Urban	0.0% (0)

Table B5 *Eastern Health's CYFS Internal Turnover – 2006-2007*

Site Name	Location	2006-2007			
		Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar
Dir CYFS Rural Avalon Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	75.0%
Adoption Services Rural	Rural				
Youth Corrections (YC) Bonavista	Rural	0.0% (0)	0.0% (0)	0.0% (0)	100.0% (1)
YC Burin Peninsula	Rural	100.0% (1)	0.0% (0)	0.0% (0)	50.0% (2)
YC Clarenville	Rural		0.0% (0)	0.0% (0)	100.0% (2)
YC Whitbourne/Placentia/Holyrood	Rural	25.0% (1)	0.0% (0)	0.0% (0)	80.0% (4)
CYFS/CC Rural	Rural	0.0% (0)	0.0% (0)	0.0% (0)	50.0% (1)
CYFS Bonavista	Rural	0.0% (0)	0.0% (0)	0.0% (0)	25.0% (1)
CYFS Burin Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	100.0% (8)
CYFS Clarenville	Rural	0.0% (0)	0.0% (0)	0.0% (0)	83.3% (5)
CYFS Harbour Grace/Bay Roberts	Rural	20.0% (2)	0.0% (0)	0.0% (0)	78.6% (11)
CYFS Whitbourne/Placentia/Holyrood	Rural	0.0% (0)	0.0% (0)	0.0% (0)	111.1% (10)
CC Youth & Residential Services	Urban				0.0% (0)
Youth Corrections Urban	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Residential Services	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Adm. Support	Urban				
CYFS Enquiries/Special Projects	Urban				
CYFS Training/CRMS	Urban				
CYFS Urban 1	Urban				
CYFS Urban 1a	Urban				
CYFS Urban 1b	Urban				
CYFS Urban 1c	Urban				
CYFS Urban 1d	Urban				
CYFS Urban 1e	Urban				
CYFS Urban 1f	Urban				
CYFS Urban 1g	Urban				
CYFS Urban 2	Urban				
CYFS Urban 2a	Urban				
CYFS Urban 2b	Urban				
CYFS Urban 2c	Urban				
CYFS Urban 2d	Urban				
CYFS Urban 2e	Urban				
CYFS Urban 2f	Urban				
CYFS Urban 2g	Urban				
CYFS Ass/Pride/Adopt	Urban				
CHS inactive account	Urban	8.8% (13)	0.6% (1)	1.2% (2)	0.6% (1)

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Table B6-Eastern Health's CYFS Internal Turnover - 2007-2008

Site Name	Location	2007-2008			
		Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar
Dir CYFS Rural Avalon Peninsula	Rural	0.0% (0)		0.0% (0)	66.7%
Adoption Services Rural	Rural		25.0%		
Youth Corrections (YC) Bonavista	Rural	0.0% (0)	0.0% (0)	100.0%	0.0% (0)
YC Burin Peninsula	Rural	50.0% (2)	0.0% (0)	0.0% (0)	33.3% (1)
YC Clarenville	Rural	50.0% (1)	50.0% (1)	0.0% (0)	50.0% (1)
YC Whitbourne/Placentia/Holyrood	Rural	25.0% (0)	25.0% (1)	0.0% (0)	75.0% (3)
CYFS/CC Rural	Rural	0.0% (0)			0.0% (0)
CYFS Bonavista	Rural	20.0% (1)	20.0% (1)	0.0% (0)	33.3% (2)
CYFS Burin Peninsula	Rural	12.5% (1)	0.0% (0)	0.0% (0)	22.2% (2)
CYFS Clarenville	Rural	14.3% (1)	0.0% (0)	0.0% (0)	50.0% (3)
CYFS Harbour Grace/Bay Roberts	Rural	15.4% (2)	7.1% (1)	0.0% (0)	28.3% (5)
CYFS Whitbourne/Placentia/Holyrood	Rural	10.0% (1)	15.4% (2)	8.3% (1)	6.7% (1)
CC Youth & Residential Services	Rural	0.0% (0)	0.0% (0)		0.0% (0)
Youth Corrections Urban	Urban	0.0% (0)	22.2% (2)	0.0% (0)	62.5% (5)
Residential Services	Urban	0.0% (0)	0.0% (0)	0.0% (0)	20.3% (9)
CYFS Adoptive Support	Urban	100.0% (2)	0.0% (0)	0.0% (0)	100.0% (3)
CYFS Enquiries/Special Projects	Urban				0.0% (0)
CYFS Training/CRMS	Urban				0.0% (0)
CYFS Urban 1	Urban				0.0% (0)
CYFS Urban 1a	Urban				9.1% (1)
CYFS Urban 1b	Urban				0.0% (0)
CYFS Urban 1c	Urban				0.0% (0)
CYFS Urban 1d	Urban				0.0% (0)
CYFS Urban 1f	Urban				0.0% (0)
CYFS Urban 1g	Urban				0.0% (0)
CYFS Urban 2	Urban	0.7% (1)	0.6% (1)	0.0% (0)	92.2% (142)
CYFS Urban 2b	Urban				9.1% (1)
CYFS Urban 2b	Urban				0.0% (0)
CYFS Urban 2c	Urban				0.0% (0)
CYFS Urban 2d	Urban				10.0% (1)
CYFS Urban 2e	Urban				11.1% (1)
CYFS Urban 2f	Urban				16.7% (1)
CYFS Urban 2g	Urban				0.0% (0)
CYFS Ass/Pride/Adopt	Urban				0.0% (0)
CHS inactive account	Urban	90.6% (144)	0.0% (0)		100.0% (2)

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Table B7 Eastern Health's CYFS Internal Turnover - 2008-2009

		2008-2009			
Site Name	Location	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar
Dir CYFS Rural Avalon Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Adoption Services Rural	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Youth Corrections (YC) Bonavista	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
YC Burin Peninsula	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
YC Clarenville	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
YC Whitborne/Placentia/Holyrood	Rural	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS/CC Rural	Rural	0.0% (0)	0.0% (0)	0.0% (0)	33.3% (1)
CYFS Bonavista	Rural	40.0% (2)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Burin Peninsula	Rural	0.0% (0)	0.0% (0)	12.5% (1)	0.0% (0)
CYFS Clarenville	Rural	12.5% (1)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Harbour Grace/Bay Roberts	Rural	0.0% (0)	0.0% (0)	13.3% (2)	6.3% (1)
CYFS Whitbourne/Placentia/Holyrood	Rural	7.7% (1)	0.0% (0)	0.0% (0)	0.0% (0)
CC Youth & residential services	Rural	11.8% (2)	6.3% (1)	0.0% (0)	6.3% (1)
Youth Corrections Urban	Rural	37.5% (9)	11.1% (2)	11.8% (2)	12.5% (2)
Residential Services	Urban	0.0% (0)	0.0% (0)	16.7% (1)	0.0% (0)
CYFS Adm. Support	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Enquiries/Special Projects	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Training/CRMS	Urban	21.4% (9)	68.4% (26)	30.8% (4)	0.0% (0)
CYFS Urban 1a	Urban	16.7% (2)	17.6% (3)	7.7% (1)	18.2% (2)
CYFS Urban 1b	Urban	13.3% (2)	23.1% (3)	27.3% (3)	0.0% (0)
CYFS Urban 1c	Urban	23.1% (3)	11.1% (1)	12.5% (1)	0.0% (0)
CYFS Urban 1d	Urban	28.6% (4)	0.0% (0)	0.0% (0)	7.7% (1)
CYFS Urban 1e	Urban	37.5% (9)	11.1% (2)	11.8% (2)	12.5% (2)
CYFS Urban 1f	Urban	25.0% (3)	11.1% (1)	0.0% (0)	0.0% (0)
CYFS Urban 1g	Urban			0.0% (0)	0.0% (0)
CYFS Urban 2	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
CYFS Urban 2a	Urban	20.0% (3)	0.0% (0)	0.0% (0)	16.7% (2)
CYFS Urban 2b	Urban	65.0% (13)	0.0% (0)	0.0% (0)	15.4% (2)
CYFS Urban 2c	Urban	6.7% (1)	0.0% (0)	6.3% (1)	6.7% (1)
CYFS Urban 2d	Urban	7.7% (1)	0.0% (0)	0.0% (0)	10.0% (1)
CYFS Urban 2e	Urban	22.2% (2)	8.3% (1)	10.0% (1)	0.0% (0)
CYFS Urban 2f	Urban	11.1% (1)	11.1% (1)	0.0% (0)	0.0% (0)
CYFS Urban 2g	Urban	0.0% (0)	0.0% (0)	100.0% (1)	
CYFS Ass/Pride/Adopt	Urban	9.1% (1)	0.0% (0)	0.0% (0)	7.1% (1)
CHS inactive account	Urban	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)

Table B8 *Eastern Health's CYFS Internal Turnover – April and May 2009*

Site Name	Location	Apr - May 2009
Dir CYFS Rural Avalon Peninsula	Rural	0.0% (0)
Adoption Services Rural	Rural	0.0% (0)
Youth Corrections (YC) Bonavista	Rural	0.0% (0)
YC Burin Peninsula	Rural	0.0% (0)
YC Clarenville	Rural	0.0% (0)
YC Whitbourne/Placentia/Holyrood	Rural	0.0% (0)
CYFS/CC Rural	Rural	0.0% (0)
CYFS Bonavista	Rural	20.0% (1)
CYFS Burin Peninsula	Rural	12.5% (1)
CYFS Clarenville	Rural	0.0% (0)
CYFS Harbour Grace/Bay Roberts	Rural	0.0% (0)
CYFS Whitbourne/Placentia/Holyrood	Rural	0.0% (0)
CC Youth & Residential Services	Urban	11.1% (2)
Youth Corrections Urban	Urban	9.1% (1)
Residential Services	Urban	0.0% (0)
CYFS Adm. Support	Urban	0.0% (0)
CYFS Enquiries/Special Projects	Urban	50.0% (1)
CYFS Training/CRMS	Urban	0.0% (0)
CYFS Urban 1a	Urban	0.0% (0)
CYFS Urban 1a	Urban	11.1% (1)
CYFS Urban 1b	Urban	0.0% (0)
CYFS Urban 1c	Urban	11.1% (1)
CYFS Urban 1d	Urban	0.0% (0)
CYFS Urban 1e	Urban	0.0% (0)
CYFS Urban 1f	Urban	0.0% (0)
CYFS Urban 1g	Urban	0.0% (0)
CYFS Urban 2	Urban	0.0% (0)
CYFS Urban 2a	Urban	11.1% (1)
CYFS Urban 2b	Urban	0.0% (0)
CYFS Urban 2c	Urban	0.0% (0)
CYFS Urban 2d	Urban	0.0% (0)
CYFS Urban 2e	Urban	0.0% (0)
CYFS Urban 2f	Urban	20.0% (2)
CYFS Urban 2g	Urban	0.0% (0)
CYFS Ass/Pride/Adopt	Urban	16.7% (2)
CHS Inactive account	Urban	0.0% (0)

Table PP Correlation between Independent Variables and Outcome Variable Intent to Leave

	2	3	4	5	6	7	8	9	10	11	12	13	14
1. ITL in 12 months	-.10	.00	-.20*	-.39**	.25**	.20	.27*	.12	-.26*	-.11	-.05	.06	.07
2. Years employed at SW		-.08	.22*	.00	-.08	-.18	-.16	.48*	.00	-.15*	-.18*	-.08	.07
3. Gender			.05	.07	.05	.14	.11	-.08	-.09	-.11	-.18*	.17	.10
4. Location				.15	-.08	-.14	-.14	.13	.14	.20**	.04	-.00	.07
5. Job Satisfaction					-.41**	-.20**	-.38**	.29**	.20**	.17*	.04	-.10	-.19*
6. Emotional evaluation						.20	.46*	-.08	-.26*	-.18	-.04	.13	.22*
7. Personal accomplishment							.24*	-.27*	-.15	-.11	-.03	.06	.01
8. Depersonalization								-.04	-.20*	-.20*	-.05	.24*	.18*
9. Roles and responsibilities									.22	.48*	-.10	-.09	-.17
10. Manager support										.46*	.08	-.06	-.04
11. Manager availability											.08	.01	-.07
12. Pay satisfaction												-.04	-.04
13. Total overtime													.30**
14. Frequency of on-call shifts													

* Correlation is significant at the 0.05 level (2-tailed)
** Correlation is significant at the 0.01 level (2-tailed)

Appendix C

Child, Youth and Family Services Survey
Letter of Information

The following anonymous survey has been designed for a research study and is completely voluntary. Your decision to complete the anonymous questionnaire has no implications for your current employment and is independent of your employment record.

Study Title: Factors Influencing Social Worker Turnover and Retention in Child, Youth and Family Services (CYFS) in Newfoundland and Labrador

Introduction and Purpose: Eastern Health and Memorial University are doing a study on CYFS social worker turnover and retention. The study will examine job satisfaction and burnout within CYFS. It will also look at the factors (e.g. demographics, intention to leave, etc.) related to length of stay and summarize any differences between employee positions and geographic locations. The questions in the enclosed survey are related to job content, levels of burnout, work attributes, intention to leave, job and pay satisfaction, and demographic information.

Procedure: It is important to note that your participation in this survey is entirely voluntary. Should you decide to participate, we ask that you please print off and complete the anonymous survey, which should take approximately **25 minutes**. Please do not put your name or employee number on the survey. Your completion and return of this questionnaire indicates your consent to participate in this research study.
Please return the survey to the address below using the health care mail system.

Possible risks and discomforts: It is possible that some questions may make you feel uncomfortable. You have the right to not answer these questions.

Benefits: There are no immediate benefits for participants. However, the results of the study might lead to policy changes aimed at improving employee satisfaction and the CYFS workforce.

Confidentiality: Protecting your privacy is an important part of this study. Unique identifiers, such as your name or employee number, are not recorded and will not appear in any document or article. Results will only be presented in their combined form. The results collected from the surveys will be kept in a secure area. Every effort to protect your privacy will be made.

Thank you in advance for your participation in this survey.

If you have any questions you can contact Ms. Katie Little by telephone (709)-752-3538, fax (709)-752-4733 or Email: katie.little@easternhealth.ca .

Please return your survey using internal mail or the address below.

Katie Little
Eastern Health
Rutter Building
22 Pearl Place
P.O. Box 13122

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St. John's, NL A1B 4A5

You can also talk with someone who is not involved with the study at all, but can advise you on your rights as a participant in a research study. This person can be reached through: Office of the Human Investigation Committee (HIC) at 709-777-6974 or Email: hic@mun.ca

1. How strongly do you **agree** or **disagree** with the following statements:

Roles & Responsibilities	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I have a good understanding of my **role and responsibilities.**					
I understand when I should bring an issue forward to discuss with my manager.					
I have a good understanding of the **Child, Youth and Family Services Act.**					
I understand the policies associated with child, youth and family services.					
I feel supported by my manager.					
I can reach my manager when I need to.					
My primary commitment is to provide services to my clients.					
I believe I have the tools I need to **identify** risks to my clients.					
I believe I have the tools I need to **manage** the risks to my clients.					

2. Please provide any additional comments.

_____
_____
_____
_____

3. In an average week, roughly what percentage of your time is spent on the following activities (your total should be 100%)?

Direct interaction with clients	%
Financial matters (requesting payment, tracking down approvals, cutting cheques)	%
Completing case notes in CRMS	%
Completing other documentation in CRMS	%
Completing documentation outside of CRMS	%
Travel	%
Other activities	%
TOTAL	**100%**

4. If a percentage of your weekly time is spent on "Other activities" (specified in the above question), please describe these activities.

_____
_____
_____
_____

5. What is your greatest need at this moment? Please prioritize from 1-9 with 1 being the greatest priority and 9 the least priority.

[____] I need more access to clinical supervision.
[____] I need more access to residential services.
[____] I need more training in general.
[____] I need a smaller caseload.
[____] I need more information technology support.
[____] I need to improve my court skills.
[____] I need better time management skills.
[____] I need more skills in the management of high risk cases.
[____] I need cultural awareness training.

6. Please provide any additional comments.

_____
_____
_____
_____

7. How strongly do you agree or disagree with the following statements:

Supports	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
a) I have the training I need to do my job effectively.					
b) I have the technological tools I need to do my job effectively.					
c) My physical work space is adequate.					
d) There are programs in place focused on my personal wellness.					
e) CRMS allows for better sharing of information between child protection workers and managers.					
f) CRMS allows for a standardized approach to documentation for child, youth					

Supports	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
and family services.					
g) CRMS has improved the accountability of social workers with respect to timely and complete documentation.					
h) I have received adequate training on CRMS.					
i) I know who to call with questions about CRMS.					
j) I have sufficient time to complete CRMS documentation.					
k) I have the <u>technical support</u> I need to utilize the <u>computerized risk management system</u>.					
l) I have the <u>program support</u> I need to utilize the <u>computerized risk management system</u>.					
m) I have the <u>technical support</u> I need to utilize the <u>computerized case management system</u>.					
n) I have the <u>program support</u> I need to utilize the <u>computerized case management system</u>.					
o) I have regular performance appraisals.					
p) The performance appraisal system is useful for me.					
q) I have access to the resources I need <u>in my community</u>.					
r) I have access to the resources I need <u>in my region</u>.					
s) I have access to the resources I need <u>in the Province</u>.					
t) Supports are in place to ensure I can be safe while on the job.					
u) I <u>get</u> the information I need from <u>outside parties</u> (e.g. RCMP, schools, health practitioners) to do my job effectively.					
v) I <u>provide</u> the information needed by <u>outside parties</u> (e.g. RCMP, schools, health					

Supports	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
practitioners) to enable them to do their jobs effectively.					
w) I get the information I need from parties within my RHA (e.g. Addictions, Mental Health, Public Health) to do my job effectively.					
x) I provide the information needed by parties within my RHA (e.g. Addictions, Mental Health, Public Health) to enable them to do their job effectively.					
y) I have the support I need to ensure that parental visits are provided efficiently.					
z) I have opportunities for collaboration.					
aa) I have opportunities to participate in case conferences such as ISSP meetings.					

8. Please provide additional comments.

9. If you feel that you have inadequate access to resources in your community, RHA, or province, please specify what resources and why.

10. What is the primary factor that prevents you from collaborating more?
    a. Time
    b. Other people's priorities
    c. Confidentiality/privacy
    d. Other (please specify):_____

11. My last performance appraisal was conducted within the last:
    a. 6-12 months
    b. 13-24 months
    c. Greater than 5 years
    d. Never had a performance appraisal

12. How would you rate your overall satisfaction with your job?
    a. Very satisfied
    b. Satisfied
    c. Somewhat satisfied

     d. Neither satisfied or dissatisfied
     e. Somewhat dissatisfied
     f. Dissatisfied
     g. Very dissatisfied

13. Please provide any additional comments.

_____
_____
_____

14. Would you recommend to a friend that they work with CYFS?
     a. Yes

15. Would you recommend to a friend that they work for your Regional Health Authority?
     a. Yes
     b. No
     c. Not sure

16. Please explain your answer to the previous questions.

_____
_____
_____

17. What 3 things do you like best about your job? Please rank your responses.

_____
_____
_____

18. What are your 3 biggest frustrations with your job? Please rank your responses.

_____
_____
_____

The following 22 items make up Maclach's Burnout Inventory. It is designed to discover how people

in caring professions view their jobs and those with whom they work.

Using the scale below, how frequently (if at all) do the following statements apply to

you?

0	1	2	3	4	5	6
Never	A few times a year or less	Once a month or less	A few times a month	Once a week	A few times a week	Every day

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SAMPLE ITEMS FOR THE

MASLACH BURNOUT INVENTORY

"Human Services Survey"

by Christina Maslach and Susan E. Jackson

I. Depersonalization

5. I feel I treat some clients as if they were impersonal objects.

II. Personal Accomplishment

9. I feel I'm positively influencing other people's lives through my work.

III. Emotional Exhaustion

20. I feel like I'm at the end of my rope.

WORK ATTRIBUTES

Please answer the following questions with respect to your current work environment.

1. What is your primary level of responsibility / job title?
   a. Social Worker I
   b. Social Worker II
   c. Social Worker III
   d. Program Manager / Team Leader
   e. Other _____ (please specify)

2. What is your current employment status?
   a. Permanent full-time
   b. Permanent part-time
   c. Temporary full-time
   d. Temporary part-time
   e. Casual
   f. Contractual
   g. Other _____ (please specify)

3. With what Regional Health Authority are you currently employed?
   a. Eastern Regional Health Authority
   b. Central Regional Health Authority
   c. Western Regional Health Authority
   d. Labrador-Grenfell Regional Health Authority

4. In what other Regional Health Authorities have you been employed as a social worker? Circle all that apply.
   a. Eastern Regional Health Authority
   b. Central Regional Health Authority
   c. Western Regional Health Authority
   d. Labrador-Grenfell Regional Health Authority

5. In what area of CYFS do you presently work? Circle all that apply.
   a. Adoptions / Post adoptions / PRIDE
   b. Assessment
   c. Caregiver Services (Foster Care)
   d. Child Welfare Allowances (CWA)
   e. Children In Care – Temporary custody
   f. Children In Care – Continuous custody
   g. Community Corrections
   h. Intake
   i. Long Term Protection
   j. Residential Services
   k. Youth Services
   l. Other _____ (please specify)

6. What type of practice do you currently work in?
   a. A generalist practice
   b. A focused practice (for example, child protection)

7. If you work in a focused practice, do you feel there are sufficient supports in place for social workers that cover off the other areas of the practice?

_____

_____
_____
_____
_____

8. In total, how long have you been employed *as a social worker*? _____ years OR _____ months

9. How long have you been employed *as a social worker* with CYFS? _____ years OR _____ months

10. How long have you worked in your *current position* in CYFS? _____ years OR _____ months

11. How many different position(s) (including all title and program changes) have you held *since you've been employed with CYFS*? _____ position(s)

12. Do you work a compressed work week (set schedule)?
    a. Yes
    b. No

13. Are you currently working a flex-work schedule (flexible, at times temporary)?
    a. Yes
    b. No

14. On average, how many paid overtime hours do you usually work per week? _____ hours per week

15. On average, how many unpaid overtime hours do you usually work per week? _____ hours per week

16. What is the size of your current caseload? _____ cases

17. In your opinion, how many of these cases are high risk? _____ cases

18. On average, how many court mandated visits do you make per month?

    _____ visits per month

19. When you are sick, how often do you go to work anyway?

Never   Rarely   Sometimes   Often   Always   Not Applicable

20. On average, how often are you called to work while on a day off?
    a. Never
    b. About once a year
    c. About once every 6 months
    d. About once every 3 months
    e. About once a month

f. About once a week
g. More than once a week
h. Not sure

21. How often are you "on call"?
    a. Never
    b. About once a year
    c. About once every 6 months
    d. About once every 3 months
    e. About once a month
    f. About once a week
    g. More than once a week
    h. Not sure

22. On average, how many calls do you receive per on call shift? _____ calls per shift

23. How many of these calls do you respond to in person? _____ calls per shift

24. Do you work with Aboriginal clients?
    a. Yes
    b. No

25. If you answered yes to the previous question, do you feel there are issues unique to working with Aboriginal clients? Please specify.
_____
_____
_____
_____

INTENTION TO LEAVE

Please answer the following questions with respect to your intentions regarding your current employment.

1. When you began working with CYFS, was it your intention to stay with CYFS?
    a. Yes
    b. No

2. If you had a choice to work as a social worker anywhere within the system, with which division would you most like to work? Please circle only one response.
    a. I would like to stay working with CYFS
    b. Addictions
    c. Adult Corrections
    d. Alternate Caregiver Services
    e. Career Development
    f. Child Care / Day Care
    g. Community Outreach
    h. Community Health
    i. Employee Assistance
    j. Housing Services
    k. Mediation
    l. Psychiatric / Mental Health

m. Physical / Developmental Disability Services
n. Private Clinical Practitioner
o. Social work department in a medical facility (Oncology, Surgery, etc.)
p. Victim services
q. Other _____ (please specify)

3. **If you had a choice to work anywhere within CYFS, in which area would you most like to work?**
Please circle only one response.
a. I would prefer to work in my present division
b. Adoptions / Post adoptions / PRIDE
c. Assessment
d. Caregiver Services (Foster Care)
e. Child Welfare Allowances (CWA)
f. Children In Care – Temporary custody
g. Children In Care – Continuous custody
h. Community Corrections
i. Intake
j. Long Term Protection
k. Residential Services
l. Youth Services
m. Other _____ (please specify)

4. **Do you believe you will still be working in your current area of practice 12 months from now?**
a. Yes
b. No

5. **Do you believe you will still be working in your current area of practice 24 months from now?**
a. Yes
b. No

6. **In the past year, how often have you thought about leaving your current position?**

Never   Rarely   Sometimes   Often   Always

7. **What factors might lead you to decide to leave your position with CYFS?**
_____
_____
_____

8. **What factors might lead you to decide to stay in your position with CYFS?**
_____
_____
_____

SATISFACTION WITH PAY

The following four questions relate to your overall pay satisfaction.
This subscale is taken from Paul E. Spector's Job Satisfaction Scale

1. **I feel I am being paid a fair amount for the work I do.**
   a. Disagree very much
   b. Disagree moderately
   c. Disagree slightly
   d. Agree slightly
   e. Agree moderately
   f. Agree very much

2. **Raises are too few and far between**
   a. Disagree very much
   b. Disagree moderately
   c. Disagree slightly
   d. Agree slightly
   e. Agree moderately
   f. Agree very much

3. **I feel unappreciated by the organization when I think about what they pay me.**
   a. Disagree very much
   b. Disagree moderately
   c. Disagree slightly
   d. Agree slightly
   e. Agree moderately
   f. Agree very much

4. **I feel satisfied with my chances for salary increases.**
   a. Disagree very much
   b. Disagree moderately
   c. Disagree slightly
   d. Agree slightly
   e. Agree moderately
   f. Agree very much

To help us analyze the data from this questionnaire, please answer the following questions about yourself.

1. Please identify your age category (in years).
   a. 18-24
   b. 25-29
   c. 30-39
   d. 40+

2. What is your gender?
   a. Male
   b. Female

3. Based on the options below, what size community(s) do *most* of your clients reside?
   a. 1,000 people or less
   b. Greater than 1,000 people but less than 5,000 people
   c. Greater than 5,000 people but less than 10,000 people
   d. Greater than 10,000 people

4. What geographical area do you consider your practice (the areas you serve) to be?
   a. Urban
   b. Rural
   c. Remote

5. What is your highest level of education?
   a. Bachelor of Social Work
   b. Master or Doctorate of Social Work
   c. Other _____

If you have any additional comments you wish to share with the researcher, please provide

them here.

End of Survey.
Thank you for taking the time to complete this survey.

Appendix D

Faculty of Medicine

Human Investigation Committee
2ⁿᵈ Floor, Eastern Trust Bldg.
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St. John's, NL Canada A1B 2X5
Tel: 709 777 6974 Fax: 709 777 8776
hic@med.ca www.med.mun.ca/hic

This replaces correspondence dated March 20, 2009

March 24, 2009

Reference #09.58

Ms. Katie Little
Dept of Research Corporate Strategy and Research
Eastern Health
Rutter Building
22 Pearl Place
P.O. Box 13122
St. John's, NL
A1B 4A5

Dear Ms. Little

RE: Factors influencing social worker turnover and retention in child, youth and family services in Newfoundland and Labrador

Your application received an expedited review by the Human Investigation Committee. **Full approval** was granted for one year effective March 18, 2009.

This approval will lapse on March 18, 2010. It is your responsibility to ensure that the Ethics Renewal form is forwarded to the HIC office prior to the renewal date. *The information provided in this form must be current to the time of submission and submitted to HIC* **not less than 30 nor more than 45** *days of the anniversary of your approval date.* The Ethics Renewal form can be downloaded from the HIC website http://www.med.mun.ca/hic/downloads/Annual%20Update%20Form.doc

The Human Investigation Committee advises THAT IF YOU DO NOT return the completed Ethics Renewal form prior to the date of renewal:

- *Your ethics approval will lapse*
- *You will be required to stop research activity immediately*
- *You may not be permitted to restart the study until you reapply for and receive approval to undertake the study again*

Lapse in ethics approval may result in interruption or termination of funding

For a hospital-based study, it is **your responsibility to seek the necessary approval from Eastern Health and/or other hospital boards as appropriate.**

Faculty of Medicine

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