

we will present an overview of the WE-THRIVE initiative with a specific focus on CDEs and measurement. The first talk will provide the context for the WE-THRIVE initiative, and discuss the collaborative and iterative processes required to develop the initial CDEs in the area of workforce and staffing. In the second talk, we will discuss which staff should be “in the house” to meet the needs of residents during and after a pandemic, and what type of workforce data system should be available to ensure the best quality outcomes for residents and carers. Next, current issues in the measurement of staffing in LTC based on a review of reviews of staffing’s relationship to quality of care will be discussed. Finally, we extend the debate to consider theoretical and empirical explanations for the relationship between staffing and quality in LTC and the promotion of person-centred care outcomes.

LAYING DOWN THE GROUNDWORK FOR AN INTERNATIONAL MEASUREMENT INFRASTRUCTURE

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The COVID-19 epidemic has brought to light the significant problems in the long-term care (LTC) sector, specifically the lack of an infrastructure to collect and aggregate data between LTC sectors in different countries. This talk will briefly describe goals of the WE-THRIVE initiative, and focus on exploring the development of “workforce and staffing” common data elements for LTC. We will describe how the subgroup is “laying down the groundwork” within this domain with various methodologies to develop CDEs related to workforce and staffing. The CDEs aim to measure staff retention and turnover, evaluating nursing supervisor effectiveness, and staff training in LTC. Anticipated challenges of this international work will also be highlighted. International research on LTC can valuably inform LTC policy and practice, and the proposed CDEs can facilitate data sharing and aggregation internationally, including low-, middle-, and high-income countries.

CHALLENGES IN THE MEASUREMENT OF STAFFING: A REVIEW OF REVIEWS

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The question concerning the relationship of staffing and quality of care of residents in residential long-term care (LTC) has been explored extensively; however, no consistent evidence has been brought forth so far. Inconsistent measurement of staffing might hinder this research field to move forward. We assessed its measurement in a narrative review of reviews that explore the staff – quality of care relationship. We identified 12 systematic reviews, covering 1960 to May 2018. Most studies included had a cross-sectional design, were performed in the USA and worked with secondary, administrative data (e.g., OSCAR). Comparability of studies

was limited by diverse definitions and measurement methods for staffing, including data about grade-mix, number of staff, and staff-resident ratios. We suggest performing international multi-case studies to compare and contrast LTC staffing and develop appropriate international common data elements. Logic models support the description of the expected relationship between staffing aspects and quality.

WHO'S IN THE HOUSE: STAFFING IN LONG-TERM CARE HOMES DURING THE COVID-19 PANDEMIC

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There is an absence of high-quality workforce data that could be used globally for comparative research on workforce planning in the residential long-term care (LTC) sector. We know that older adults residing in the LTC settings have multimorbidities resulting in complex care needs, yet the workforce is insufficiently able to meet their needs. A further reduction in LTC workforce was noted during the COVID-19 pandemic which increased the risk of adverse outcomes for residents. Survey results focused on the workforce in LTC homes collected from several countries during the current pandemic, highlighted that several members of the workforce were either absent or worked virtually (e.g., physicians, social workers). A better understanding of who is/or should be in the house to meet the needs of residents during or after future pandemics requires a workforce data system that routinely collects this information to ensure best quality outcomes for residents and their carers.

UNDERSTANDING AND EXPLAINING HOW STAFF PROMOTE QUALITY FOR OLDER PEOPLE LIVING IN LONG-TERM CARE FACILITIES

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Little is known about how the workforce influences quality in long term care facilities for older people. Conceptually, quality is complex, often contested, and dynamic, has overlapping physical, social, psychological and emotional dimensions and can refer to both quality of life and quality of care. Assuming ‘more staff equates to better quality’ is intuitively appealing but research suggests that a more nuanced, non-linear, relationship exists. A programme of research in the UK is developing theoretical and empirical explanations of how staff promote quality for older people living in long-term care facilities. It shifts the debate from numbers of staff and their relationship to quality indicators toward recognising the ways in which staff more broadly influence quality. Our work will be useful for people