

From the Chief Executive



BY E-MAIL

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Review of training and support of healthcare assistants
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Dear Ms Cavendish,

Review of training and support of healthcare assistants

The Professional Standards Authority for Health and Social Care oversees statutory bodies that regulate health and social care professionals in the UK. We assess their performance, conduct audits, scrutinise their decisions and report to Parliament. We also set standards for organisations holding voluntary registers for health and social care occupations and accredit those that meet them.

We welcome your Review of training and support of healthcare assistants. We agree that this group is a vitally important part of the healthcare workforce and often provide fundamental components of care. In our view, to allow this group to 'be as good as they can possibly be' we need to focus time and resources on improving recruitment, training supervision and support and not be distracted by calls for additional regulation.

As part of our work we have developed thinking on regulatory policy, which we describe as 'right-touch regulation': the minimum regulatory effort to achieve the desired result. Our commitment to this approach and our assessment of the current evidence has led us to conclude that statutory regulation is not appropriate for healthcare assistants.

Providing high quality care for patients and service users depends upon the skills, knowledge, experience and compassion of those on the front line. This is achieved through effective local management processes, such as recruitment and training, delegation, appraisal and supervision. This applies to healthcare support workers as

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much as to other groups in the workforce, such as doctors, physiotherapists, pharmacists and nurses. However healthcare assistants should always work under supervision of others and should not be required to exercise autonomous decision-making, which is the hallmark of professional responsibility.

Professional regulation therefore provides a point of contrast between these two groups. For doctors, physiotherapists, pharmacists and nurses, and others, the risks associated with practice demand that they are individually regulated. These statutory obligations provide for a common training and qualification route to the register, mandatory continuing professional development, as well as a mechanism for dealing with concerns about poor practice and misconduct. However, statutory regulation is not an essential prerequisite for good training and support and in our view not necessary to improve the training and support available to healthcare assistants.

We have observed that the debate around the role and contribution of healthcare assistants is strongly influenced by a number of prevailing opinions and preconceptions that may be misinformed. For that reason, we would urge the Review to consider the research evidence base that has emerged over the last few years, funded by the National Institute of Health Research and its predecessor bodies.ⁱ These findings are helpful in unravelling the nature and complexities of healthcare assistant roles, the characteristics and demographics of the workforce, the value added to high-quality patient-centred care, and good practice in training, supporting and developing these staff.

There is a pressing need to establish clearer and more constructive definitions of the healthcare assistant workforce. Healthcare assistants are often characterised as a large and homogenous group in the workforce, whereas experience and research evidence tells a different story.ⁱⁱ A more accurate and detailed definition of the variety of healthcare assistant role and skill mix is required if we are to improve recruitment, training and support. We also need to recognise the place these workers have in the overall employment market, their relatively low pay and high turnover.

Following this, we need to establish why current mechanisms to recruit, train and support healthcare assistants are not working satisfactorily. There are various levers – regulatory, contractual, good practice, public commitment - that influence the training and support that healthcare assistants ought to receive to allow them to fulfill their role successfully. These levers act on different relationships – between the individual healthcare assistant and their professionally regulated colleagues, between the assistant and the employer, and between the employer and other organisations. The details of the levers associated with each relationship are described in the table below. We have focused our analysis on the contractual and regulatory systems operating in England’s NHS.

Relationship	Provision for training and support for healthcare assistants
Healthcare assistant – Employer/Service Providers	NHS Constitution (2010)ⁱⁱⁱ <i>The NHS commits to provide all staff with clear roles and responsibilities and rewarding jobs</i> <i>The NHS commits to provide all staff with personal</i>

	<p><i>development, access to appropriate training for their jobs and line management support to succeed.</i></p> <p>ACAS good practice on employer’s duty of care^{iv}</p> <p><i>Requirements under an employer’s duty of care are wide-ranging and may manifest themselves in many different ways, such as:</i></p> <ul style="list-style-type: none"> • <i>Clearly defining jobs and undertaking risk assessments</i> • <i>Ensuring a safe work environment</i> • <i>Providing adequate training and feedback on performance</i> • <i>Ensuring that staff do not work excessive hours</i> • <i>Providing areas for rest and relaxation</i> • <i>Protecting staff from bullying or harassment, either from colleagues or third parties</i> • <i>Protecting staff from discrimination</i> • <i>Providing communication channels for employees to raise concerns</i> • <i>Consulting employees on issues which concern them.</i> <p>Cabinet Office guidance on Principles of Good Employment Practice^v</p> <p><i>Good practice to allow employers to be aware of best practice in employment, including training, that secures ‘quality outcomes in the provision of public services’</i></p>
<p>Healthcare assistant – professionally registered staff in multidisciplinary teams</p>	<p>Regulatory standards on delegation and management, for example, NMC Code:</p> <p><i>Work effectively as part of a team</i></p> <p><i>24. You must work cooperatively within teams and respect the skills, expertise and contributions of your colleagues</i></p> <p><i>25. You must be willing to share your skills and experience for the benefit of your colleagues</i></p> <p><i>26. You must consult and take advice from colleagues when appropriate</i></p> <p><i>27. You must treat your colleagues fairly and without discrimination</i></p> <p><i>28. You must make a referral to another practitioner</i></p>

	<p><i>when it is in the best interests of someone in your care</i></p> <p>Delegate effectively</p> <p><i>29. You must establish that anyone you delegate to is able to carry out your instructions</i></p> <p><i>30. You must confirm that the outcome of any delegated task meets required standards</i></p> <p><i>31. You must make sure that everyone you are responsible for is supervised and supported</i></p>
<p>Employer/Service Provider – Commissioning organisation</p>	<p>NHS standard contract clauses on staff</p> <p><i>23.2 The Provider shall have sufficient appropriately qualified and experienced medical, nursing and other clinical and non-clinical Staff to ensure that the Services are provided in all respects and at all times in accordance with this Agreement. ...</i></p> <p><i>23.3.2 The Provider shall ensure that the Staff possess the appropriate qualifications, experience, skills and competencies to perform the duties required of them and to be appropriately supervised....</i></p> <p><i>23.4 The Provider shallensure that every member of Staff involved in the provision of the Services receives:</i></p> <p><i>23.4.1 proper and sufficient continuous professional and personal development and training and instruction</i></p>
<p>Employer/Service Provider – Care Quality Commission</p>	<p>CQC registration standards</p> <p><i>Outcome 12: Requirements relating to workers: People should be cared for by staff who are properly qualified and able to do their job.</i></p> <p><i>Outcome 13: Staffing: There should be enough members of staff to keep people safe and meet their health and welfare needs.</i></p> <p><i>Outcome 14: Supporting workers: Staff should be properly trained and supervised, and have the chance to develop and improve their skills.</i></p>

There is clearly a range of levers operating at a number of different points in the system to allow for training and support of healthcare assistants, as a key part of the NHS workforce, that delivers high quality care. In our view it is essential that we understand where these levers work well so good practice can be actively shared, encouraged and supported across the country to deliver high quality care for all.

Given the central role played by the employer/service provider throughout these relationships, questions should be focused on understanding why some employers are not fulfilling their responsibilities to provide training, support and continuing development opportunities to their staff.

Recently published National Minimum Training Standards for Healthcare Support Workers and Adult Social Care Workers in England^{vi} are aimed at the individual worker, describing 'the minimum you should know, irrespective of your individual work role'. The impact of these training standards would, in our view, be much greater if employers of healthcare assistants were provided with complementary guidance. This has happened in Scotland, where an explicitly employer-led approach to improve standards, training and induction for healthcare support workers has been adopted. The code of conduct and mandatory induction standards are complemented by a code of practice for employers, requiring a board-level sponsor to oversee compliance with the scheme. An independent evaluation of the pilot scheme found that it had the potential to improve patient safety and public protection.^{vii}

In closing, we would urge the Review to consider what opportunities are available to guarantee that employers, as service providers to patients and the public and as recruiters and managers of the healthcare assistant workforce, demonstrate good practice and fulfil their various commitments to recruit, train and support healthcare assistants. In our view this is key to delivering improvements quickly and locally and too often has been overlooked in recent debates.

We would be happy to discuss this further if you would find that useful.

Yours sincerely,



Harry Cayton
Chief Executive

References

ⁱ http://www.nhsconfed.org/Publications/Documents/SDO_Research_Digest_Issue1.pdf

ⁱⁱ Kessler I, Heron P. 2010. NHS modernisation and the role of HCAs. British Journal of Healthcare Assistants

ⁱⁱⁱ <http://www.nhs.uk/choiceintheNHS/Rightsandpledges/NHSConstitution/Pages/Overview.aspx>

^{iv} <http://www.acas.org.uk/index.aspx?articleid=3751>

^v https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/62089/principles-good-employment.pdf

^{vi} <http://www.skillsforcare.org.uk/codeofconductandtrainingstandards/>

^{vii} Birch A, Martin C. 2009. Healthcare Support Workers in Scotland: Evaluation of a National Pilot of Standards and Listing in Three NHS Boards. <http://www.scotland.gov.uk/Publications/2009/06/01144730/2>