

Developing a Picture of the Home Care Team: Roles of Care Team Members

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Topics Addressed in this Presentation

1. Home care team member roles
2. Personal Support Worker (PSW) role: education, core competencies, and added skills
3. Delegation and teaching and assignment of care to PSWs
4. Challenges to the safe integration of PSWs



Home Care Team Members



Care Coordinator Role

- ✓ Employed by the CCAC
- ✓ Responsible for service allocation and care coordination
- ✓ “Big picture” understanding of patient status and services
- ✓ Document in electronic CCAC chart kept at the CCAC

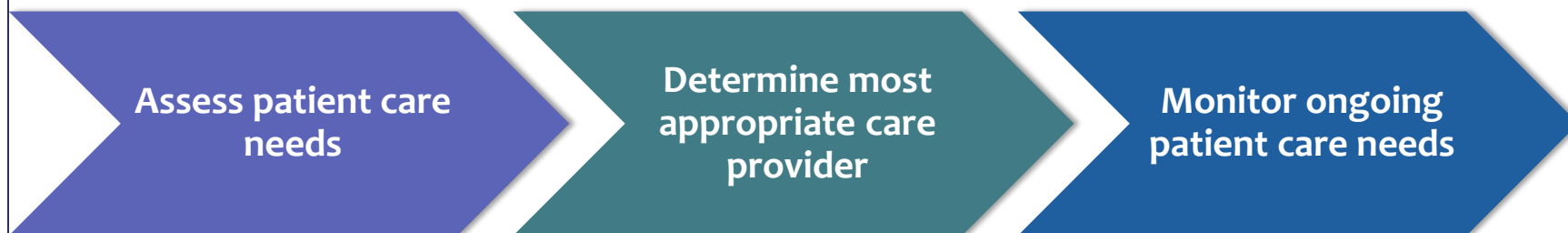


Chart # 1



Primary Care Provider Role

- ✓ Physicians or Nurse Practitioners
- ✓ Provide direct patient care usually in offices / clinics but sometimes in patients' homes
- ✓ Document in patient charts kept in provider offices (paper or electronic)
- ✓ Not included in chart reviews



Chart # 2



Nursing Role

- ✓ Employed by service provider organizations
- ✓ Plan and provide direct patient care including:
 - Chemotherapy
 - Intravenous infusions
 - Dialysis
 - Palliative care
- ✓ Document in paper charts kept in patients' homes or electronic charts maintained by the SPO



Chart # 3



Allied Health Role

- ✓ Employed by service provider organizations
- ✓ Plan and provide direct patient care
- ✓ Document in paper charts kept in patients' homes or electronic charts maintained by the SPO



Chart # 4



Personal Support Services Supervisor Role

- ✓ Employed by service provider organizations
- ✓ Plan and monitor supportive care
- ✓ Supervise PSWs
- ✓ Document in electronic employee record and in-office patient charts (electronic or paper)



Chart # 5



Personal Support Worker Role

- ✓ Employed by service provider organizations
- ✓ Often first service provider to visit the patient
- ✓ Deliver supportive care
- ✓ Document in the PSW chart kept in patients' homes (paper) or in electronic chart maintained by the SPO
- ✓ Often tick box documentation (electronic or paper)



Chart # 6



Community Support Services Role

- ✓ Increasing role in delivery of personal and supportive care
- ✓ 2014: changes in regulation
- ✓ Deliver supportive care to less complex patients
- ✓ Document in an organization specific chart
- ✓ Not included in this study



Chart # 7



Home Care Team Communication



Personal Support Worker

Education, Core Competencies
and Added Skills



PSW Education



❖ **Certified PSWs** are educated through:

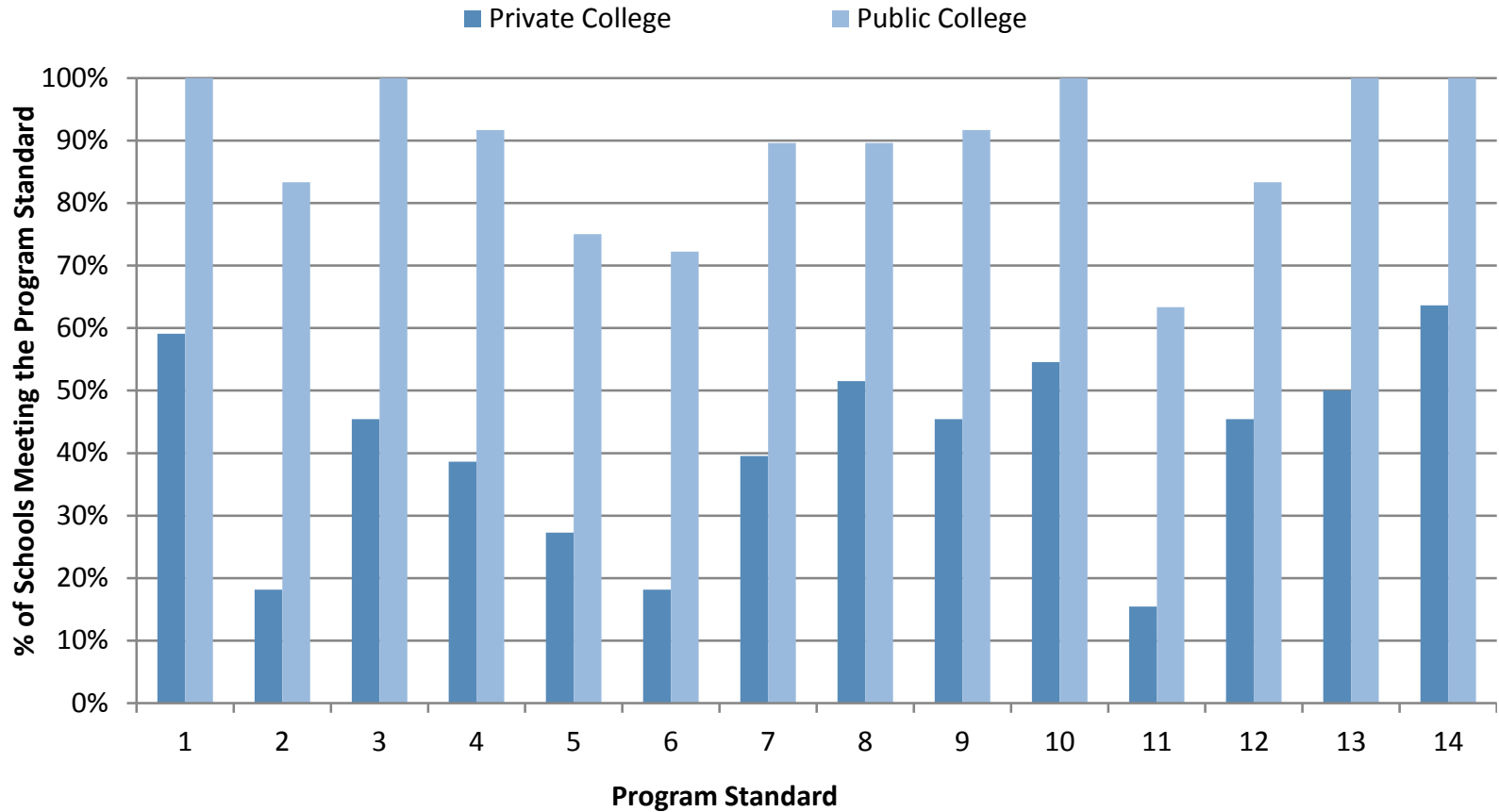
1. Community Colleges
2. Private Career Colleges
3. The Board of Education

❖ **Health Care Aides** receive on the job training and are often hired based on previous experience providing supportive care



Variation Across PSW Programs By College Type

Comparison of Program Standards Met by College Type



CCAC Service Manual: Core Skills

Task	Examples
Personal Support Tasks	Bathing, mouth care, hair care, skin care, nail care, dressing, assistance with elimination, catheter care, emptying catheter bag or stoma bag, repositioning, simple transfers, mobility, and application of prostheses and orthotic devices
Homemaking tasks	Light cleaning (tidying of patient's space, removal of light garbage), laundry, grocery shopping, meal preparation

CCAC Service Manual: Added Skills

Task	Examples
Compression therapy	Compression stockings
Transfers	Transfers using equipment, special transfer techniques
Physiotherapy	Range of motion and other exercise programs, breathing exercises
Medications	Cuing, reminding, monitoring, or Administering of: oral medications, eye drops, ear drops, nasal spray, medicated creams, inhalants , assisting with pre-loaded injections (not administration), application of a medicated patch
Urinary catheters	Intermittent catheterization
monitoring	Urine testing using test strips, measuring and recording fluid intake, assisting patient to test and monitor blood glucose
Bowel management	Enema and suppository administration
Wound Care	Dry dressings (intact skin, established tubes, chronic stoma), cleaning outer cannula of established trach
Other	Enteral nutrition, special mouth care, shallow oral suctioning, assist with oxygen administration

❖ Any other activity taught by a regulated health professional

PSW Activity Profile: Chart Review

Care Activity	Frequency
Assistance with personal care	99.6%
Assistance with elimination	34.1%
Nutrition and meal support	23.3%
Mobility assistance	50.6%
Light house keeping	55.9%
Medication assistance	13.4%
Psychosocial care	15.2%
Assessment and monitoring	30.6%
Wound care	12.0%
Compression therapy	2.8%
Application of braces	0.5%
Foot care	4.4%



PSW Activity Profile: Added Skills

Care Activity	Frequency
Transfer with equipment and/or special teaching	4.3%
Range of motion and exercise programs	9.0%
Compression stockings	2.8%
In and out catheterization	0.1%
Enteral nutrition (tube feeds)	0.3%
Medication cueing / reminding / monitoring / assisting	11.9%
Oxygen	0.1%
Eye / ear drops	0.5%
Assist with inhalants	0.3%
Application of medicated creams / shampoos	1.8%
Wound care	1.6%
Assist with blood sugar monitoring	1.0%
Other	2.1%

Delegation or Teaching and Assignment

Delegation: The transfer of authority from a registered health professional to an unregulated care provider to deliver care considered a controlled act under Ontario's *Regulated Health Professions Act*.

E.g., Tracheal suctioning, intermittent catheterization, suppository / enema administration

Teaching and assignment: The preparation of PSWs to provide care considered added skills, but not considered a controlled act under Ontario's *Regulated Health Professions Act*.

E.g., Application of compression stockings, mechanical lifts and transfer

Requirements:

- ✓ Task is considered an activity of daily living
- ✓ Stable patient
- ✓ Predictable outcome (i.e., the outcome of the care activity is consistent)



Policy: Example of Variation across Regions and Service Provider Organizations

Task: assist the Patient to take oral medication, if the Patient needs physical assistance to take the medication

Controlled Act	RHP to Teach	CCAC 1	CCAC 2	SPO 1	CCAC Policy Manual
NO	Nursing	High risk Added skill (teach & assign)	High risk Added skill (delegate)	Cue Core skill	Added skill
				Remind Core skill	
				Monitor Core skill	
				Assist Added skill (teach & assign)	

- ❖ Focus group participants identified assisting patients with medication as a delegated act



Policy: Example of Variation across Regions and Service Provider Organizations

Task: assist with the administration of oxygen

Controlled Act	RHP to Teach	CCAC 1	CCAC 2	SPO 1	CCAC Policy Manual
YES	Nursing / Respiratory Therapy	High risk Added skill (teach & assign)	High risk Added skill (delegate)	Turn on/off when directed by patient (teach & assign) Application & removal of mask / nasal prongs (teach & assign)	Added skill



Challenges to the Safe Integration of PSWs



PSW Education

PSW preparation varies and as a result their ability to perform added skills also varies

- ❖ Not all individuals providing supportive care in home and community-based care are certified PSWs
 - ◆ Certified PSWs have completed formal education and training
 - ◆ Health care aides is the most common term used to refer to individuals providing supportive care who are not certified PSWs

“It depends on the individual PSW, you may have three or four different PSWs going in to a patient’s home. Three of them are capable but maybe the fourth isn’t, so it is up to us make sure that everybody’s skill set is adequate.”

PSW supervisor



Policy and Procedure: Added Skills and Delegation

Policy and procedures related to delegation varied across regions and service provider organizations

- ❖ PSWs and health professional staff (i.e., nurses, allied health professionals, and care coordinators) were unclear about what added skills required teaching or delegation
- ❖ Policies and procedures related to added skills for PSWs varied across regions and home care service provider organization

“We’ve done different types of creams or eye drops. They’ve been delegated, but it’s very hard sometimes to know, even though it’s delegated, sometimes we can still give some without being delegated.”

PSW



PSW Time for Care Provision

PSWs often did not feel they had adequate time to complete added skills

- ❖ PSWs are often expected to perform added skills without being provided additional time for their visit
- ❖ PSWs were often willing to learn added skills, however, they did not feel adequately compensated for the additional required knowledge, skills, and workload

“The expectation is that you finish whatever you have to do with the client in half an hour, 45 minutes, and 15 minutes is the exercise time. You can imagine the quality of care we provide.”

PSW



PSW Perceptions of Support

PSWs had both positive and negative feelings about the support they received for added skills

- ❖ PSW perceptions of support for added skills varied across and within home care service provider organizations
- ❖ Most PSWs felt initial training for added skills was adequate
- ❖ Ongoing support / supervision for added skills seemed to be lacking

“Today I was just learning catheter care, catheter insertion...they will train me as much as I need. They will not leave it on me until I feel secure doing it.”

PSW

“I was trained by a nurse just the one time. It was just, you’re on your own after that.”

PSW



PSW Supervision for Added Skills

Ongoing supervision for added skills was inconsistent across regions and home care service provider organizations

- ❖ Ongoing monitoring of PSW competency to deliver added skills was lacking
- ❖ The need for the added skills was not routinely assessed
- ❖ Adequate staffing and PSW supervisor workload seemed to contribute to issues around supervision for added skills

“I’d seen [the patient] for a couple of years. I had nobody come in and reassess me or ask me to do this [intermittent catheterization] under supervision.”

PSW

“We’re stretched so thin in terms of supervisors...we’re just left to our own devices. We do the best we can. If we have any concerns, we usually bring them forward.”

PSW



THANK YOU!

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