

Unit Three

Competence from an education provider's perspective

Unit key messages

This unit will:

- *introduce the role of the health care assistant (HCA) and some of the benefits that come from employing HCAs in general practice*
- *describe the size of the current and future HCA workforce*
- *establish the requirements of both HCAs and practices for support with education and training on competence assessment.*

The benefits of employing HCAs were recognised in *Securing our Future Health: Taking a Long Term View*.¹ Properly trained, developed and integrated HCAs can help by:

- *releasing capacity – enabling qualified nurses to deliver more complex care while the HCA takes over some of the less-complex tasks*
- *enabling the practice to meet the Quality and Outcomes Framework (QOF) targets – eg smoking cessation, blood pressure monitoring, routine testing, and generally improving the recording and updating of clinical records*
- *improving access – enabling the practice to achieve improved access to their services for patients in relation to the new Access Directed Enhanced Service.*

The NHS currently employs around 350,000 HCAs. This number is expected to grow by 40% by 2020 to cope with demand for healthcare.¹

The range of tasks undertaken by HCAs varies from practice to practice. A recent review of training programmes for HCAs provides some idea of the scope of the HCA's role in general practice.

Scope of HCA role

New patient registration	Phlebotomy/venepuncture	Audiometry	Supporting practice nurses
Urinalysis	Ordering vaccines	Smoking cessation	Triage
Height/weight/BMI	ECG recording	Restocking clinical areas	Minor-illness clinics
Ordering supplies	Peak-flow measurement	Health promotion orders	Assisting with specific long-term conditions, eg asthma or diabetic clinics
Cleaning sterilisation equipment	Spirometry	Simple dressing and wound care	Diabetes, asthma etc.

Practices are being encouraged to adopt a competency management approach in order to make the most of their workforce and to guarantee the quality of the service that they provide to patients.

Education providers have three potential roles in supporting practices with this task:

1. introducing a competence management approach in general practice
2. supporting mentors and assessors to develop competence frameworks for the staff that they supervise and to undertake competence assessment
3. supporting HCAs with identified learning needs as a result of a competence assessment.

1. Introducing a competence management approach in general practice

The education provider will plan and deliver programmes that respond to the training need of the practice and its staff. This might include short courses for practice managers and GPs on the benefits and key elements of the competence-based approach, or longer courses for HCAs designed to impart particular skills or knowledge.

All courses provided for HCAs in general practice should have competences linked to the National Workforce Competences listed on the Skills for Health website (<http://www.skillsforhealth.org.uk>). Skills for Health work with employers and other stakeholders to ensure that those working in the UK health sector are equipped with the right skills to support the development and delivery of healthcare services.

2. Supporting mentors and assessors to develop competence frameworks for the staff that they supervise and to undertake competence assessment

Some provision may be needed to help the assessor/mentor with personal development planning, succession planning and action planning. Educational providers can also help to increase the number of nurses taking up the role of mentor.

In certain areas, there can be a shortage of mentors/supervisors to work with HCAs, especially those undertaking NVQs. Education providers should liaise with PCTs to draw on the skills of the wider community nursing workforce to ensure this can be addressed.

Liaison between education providers and general practice employers is important because it will help to emphasise the key role that mentors play in the development of general practice team members. General practice employers are not always keen to release qualified nursing staff to undertake training in mentorship and assessment skills as they do not always see the direct benefit to the practice. Liaising with general practice employers could aid the recognition of the mentor/supervisor role.

3. Supporting HCAs with identified learning needs as a result of a competence assessment

General practice employers should work with local education providers to engage PCTs and SHAs to identify funding sources for the further career development of HCAs. Sector-wide commissioning should be explored as a way of developing and standardising the range of training options available to HCAs after their induction programme. This could be based on a training needs analysis of all HCAs working in general practice in a PCT locality.

This training will need to be delivered at different levels in accordance with whether the HCA is new in post, requires induction and basic training or, for more experienced people, needs updating and bespoke programmes (see [Unit 5: Education and training](#)).

Blended learning and a work-based learning approach, combined with e-learning, workbook and direct contact styles, will enable the HCAs to gain easier access. The focus of the programmes will need to include supervision, clinical teaching, mentorship and assessment for the individual.

Ongoing quality monitoring of education is now the remit of Skills for Health. The quality standards are available on the Quality Assurance Agency (QAA) website. Major review of HEI healthcare programmes remains the remit of QAA; the handbook quality criteria are available on the QAA website (<http://www.qaa.ac.uk/>).

Summary

- *Employing HCAs to work as part of the practice team provides:*
 - *opportunities to cascade workload from GPs to nurses and from nurses to trained HCAs*
 - *greater capacity in general practice, bringing benefits to patients by enabling doctors and nurses to concentrate on more complex care.*
- *The NHS currently employs approximately 350,000 HCAs – Wanless estimated that a 40% increase in the number of HCAs is required in the period to 2020 to meet future demand for healthcare in primary care.¹*
- *Education providers have three potential roles in supporting practices with this role:*
 1. *introducing a competence management approach in general practice*
 2. *supporting mentors and assessors to develop competence frameworks for the staff that they supervise and to undertake competence assessment*
 3. *supporting HCAs with identified learning needs as a result of a competency assessment.*
- *Education providers will need to deliver a mixture of learning styles and course lengths to meet the needs of practices, mentors and HCAs.*

Reference

1. Wanless D. *Securing Our Future Health: Taking a Long Term View*. London: HM Treasury; 2002.
http://www.hm_treasury.gov.uk/consultations_and_legislation/wanless/consult_wanless_final.cfm