

## Unit Five

# Education and training of health care assistants from a general practice employer's perspective

### Key messages

Reading this unit will:

- explain the importance of appropriate supervision for the work of health care assistants (HCAs) in general practice
- help you to think about planning training for your HCA and to consider the different styles of training that you can access
- help you to understand the training that is specific to the HCA role
- emphasise the need for ongoing HCA supervision when undertaking the tasks delegated by the nurse or GP.

The provision of structured education and training for your HCA can help to improve their performance in their role. A recent evaluation of a foundation training course for HCAs showed that the range of tasks undertaken by HCAs pre and post training changed considerably. The practices concerned benefited from HCAs that were able to take on a wider range of tasks than they had before the course.

## Confident delegation

Professional staff who delegate tasks to an HCA must be confident in the abilities of that individual to carry out the tasks allocated to them in a competent manner. If the professional staff know that the HCA has completed a recognised training programme to enhance and assess skills, knowledge and attitudes, they may be confident in their delegation. It is important to stress, however, that individual circumstances vary and that professional staff should only delegate tasks to HCAs when they are confident that the HCA is competent to carry them out.

Many HCAs will be required to work in situations where they cannot be closely supervised. In these circumstances, they will need to be able to take responsibility, and to work safely and correctly by themselves. Look at [Unit 7: Integration of health care assistants in the general practice workforce](#) for information about accountability. During the initial training period, practices should ensure that clinical and administrative supervision is provided for the HCA to ensure patient safety (see Box: *Ensuring adequate supervision time* and see [Tool – Supervision for health care assistants](#) for more information on supervision).

### Example: Ensuring adequate supervision time

All HCAs that worked for East Leeds PCT were initially given 2 hours of clinical supervision per week when they could meet with the lead practice nurse and the PCT representative. The HCAs were able to discuss any problems or to share good practice on an informal, but focused, basis. As the HCAs became more experienced the supervision time reduced from once a week to every 2 weeks and, subsequently, to once a month.

## Consent from patients for training activities

During the training period, informed consent should be obtained from patients (see [Unit 5: Education and training of health care assistants from a patient's perspective](#) for more information).

Reception staff must know that it is a training session and have a protocol to follow that includes informing the patient of their right to decline from having the HCA in their consultation if they wish. You might prepare cards to help with this process (see Box: *An information card for a patient*).

### Example: An information card for a patient

When you booked this appointment, you should have been informed that the HCA is currently training under the supervision of an experienced practice nurse. If you do not wish to see the HCA while they are in training, please inform the receptionist who will make alternative arrangements for your care.

Your cooperation with training is greatly appreciated as training could not take place without your help. Ask questions at any time. You can change your mind at any time about your decision to help with training by telling the nurse. This will not affect the level of care you receive in any way. Your confidentiality is ensured by the practice code of conduct as detailed in the practice leaflet.

Thank you for your help.

## Planning the training

It is essential to plan what learning the HCA needs both now and in the future. Use the learning needs assessment (see [Unit 3: Competences](#)), personal development plan and appraisal (see [Unit 4: Personal and professional development](#)) to help tailor the training provided to the individual's needs. The plan outlined should include:

- an **induction programme** to equip the HCA to start work
- an **HCA group or forum** to help them learn as a group
- **suggested one-to-one learning** that is given adequate protected time and includes:
  - coaching
  - mentoring
  - patient input
  - supervision

Anyone who supervises the HCA should be properly qualified and undertake regular reviews of their standards (see [Tool – Supervision for health care assistants](#)).

- **education and training focused on the HCA's tasks** and functions defined in their original job specification (see [Unit 2: Employment](#)) – this may include chaperone training
- **education and training for new tasks** and functions as these become modified by the requirements of the general practice development plan
- **continuous learning opportunities** to maintain and improve skills and knowledge.

## How can education and training be provided?

There are a number of ways in which HCA education and training can be provided. These include:

- *in-practice learning*
- *via patient input*
- *outside courses (see Box: How will you know if the course is what you need?)*
- *support groups*
- *specific education and training provided as part of a PCT initiative*
- *or, if you have been out of the learning environment for some time you may be starting back, you may find some useful information in [Tool – Information about training courses](#).*

### How will you know if the course is what you need?

Ask questions about what is provided.

#### 1. *What does the course involve?*

*What teaching methods are employed, eg workshops, videos, e-learning?*

*What is the course outline and options?*

*What form do the exams or assessment take?*

*Is there a mixture of teaching and practical work?*

*What arrangements are there for practical work?*

*How much time will it take away from service provision at work?*

*How much work will have to be done at home?*

#### 2. *What are the facilities like?*

*What is the library and computer availability like?*

*Will the HCA need a computer at home?*

*What refreshments and other provision for comfort have been made?*

*Is the journey reasonable and practical, eg close to public transport links or with good car parking facilities?*

#### 3. *Is there any additional support available for students?*

*Is there a regular system for individual learning?*

*Will time need to be set aside for reflection and learning at work?*

*Is additional learning support available, eg a support group?*

#### 5. *How does this education provider perform?*

*What percentage of students complete their studies?*

*Is the pass or drop out rate information readily available?*

*Does the education provider ask for, and act on, feedback?*

*Are its standards checked by an external moderator?*

#### 6. *What can you do with the qualification?*

*Can progress to other courses be made, eg complementary to the qualification or higher education?*

*Can the qualification be transferred to other workplaces, areas or countries?*

#### 7. *How much will it cost?*

*Is the course affordable for the HCA, the general practice and the PCT?*

*Is any financial assistance available?*

#### 8. *Are the contact details easy to find and is the training provider responsive to enquiries?*

*Where can the contact details be found?*

*Who is the best person to contact with enquiries?*

Some HCAs may have little educational background, but excellent caring and practical experience. Access courses, and numeracy and literacy courses are available at local colleges. Unison have organised a large number of free courses for members, which provide support for people to improve their learning abilities and to become more confident in accessing other learning.<sup>1</sup> The *Return to Learn* course is organised between Unison and the Open University to pave the way for entry into other educational opportunities.<sup>2</sup>

Additional courses are listed in [Tool – Information about training courses](#). If the HCA has a learning need for one type of course and it coincides with a practice priority, find out if there is a local course or if the training can be accessed remotely.

Regular protected time for reflection and study should be part of the timetable for the HCA. The practice and patients will benefit by having motivated, enthusiastic and well-trained staff.

## Specific training and education for the post

HCAs should have a mentor to whom they can turn with any problems and who can help them organise their learning. In addition, they should also have a supervisor who can assess their competence and sign off the demonstration of competence at any assigned task. An example of how to record competency appears in [Tool – Recording competence](#). A learning needs assessment (see [Unit 3: Competences](#)) or personal development plan (see [Unit 4: Appraisals and personal development records](#)), together with the practice development plan will determine the learning priorities for both now and the future.

The basic nationally available qualifications for HCAs are NVQs or Scottish Vocational Qualifications (SVQs). Look at the education provider's perspective for information about NVQs (see [Tool – Information about training courses](#)).

GPs, practice managers and practice nurses planning to employ HCAs will need to draw on the services of an already approved local NVQ assessment centre (more information about NVQs is available from: [www.uknnp.org.uk](http://www.uknnp.org.uk) and [www.skillsforhealth.org.uk/qualifications-3.php](http://www.skillsforhealth.org.uk/qualifications-3.php)). The practice nurses within the practice will need to develop skills as NVQ assessors and a few may need to become internal verifiers. Training should be arranged by the practice or the PCT with the local NVQ assessment centre.

HCAs who have attended in-house or external courses will need to be assessed for their standard of competence (see [Tool – Recording competence](#)). Any problems identified may require feedback by the assessor to the relevant course organiser.

Consider what financial reward you will make for HCAs who have done further training and are taking on increased responsibilities, especially for working independently, by regrading their salary scale.

Specific training courses for specific skills are usually available through the arrangements made by the responsible PCT or from local centres for NVQs. A training fund should be identified within the practice budget. Extra funding may be available for specific development that is a priority for the PCT via the supporting officer for HCA training at the PCT. Smaller practices may be able to join in with training arranged by larger practices. Approach the PCT officer responsible for the development of HCAs for further information.

The Open University has recently set up a diploma course specifically for HCAs in general practice (see [Tool – Information about training courses](#)).

## Summary

- Investing in structured education and training can improve the performance of your HCA and ease the burden of supervision on other members of practice staff.
- The work of HCAs is delegated by a trained professional who ultimately bears responsibility for the tasks undertaken by the HCA.
- Only an individual assessment of competence can determine if an HCA can work safely without supervision.
- Informed consent should be obtained from patients involved in the training of HCAs.
- Taking a planned approach to identifying the training needs of the HCA will ensure that the HCA is able to make a full contribution to the work of the practice.
- Training is available in a range of formats so you will need to consider what is the most appropriate format for your HCA.
- Although there is specific training at NVQ level for HCAs, this does not remove the need to provide clinical supervision.

## References

1. Unison. *Learning and Organising Services*. Unison website: <http://www.unison.org.uk/laos/laos.asp#lifelong>
2. Unison. *Lifelong Learning – An Employers Guide*. London: Unison; 2003. Unison website: <http://www.unison.org.uk/acrobat/13337.pdf>
3. East Kent NHS. *Induction Programme for Healthcare Assistants in General Practice*. East Kent NHS website: [http://www.kentandmedway.nhs.uk/pdf/Professional\\_pages/healthcare\\_assistants\\_induction.pdf](http://www.kentandmedway.nhs.uk/pdf/Professional_pages/healthcare_assistants_induction.pdf)