

RCN Policy and International Department and Nursing Department Position Statement 17/14
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RCN position statement on EU report:

Development and coordination of a network of nurse educators and regulators with particular focus on registration of health care support workers and EU wide competencies for HCAs

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Introduction

The RCN was pleased to be involved in the project¹ which aimed to initiate a Europe-wide exchange about educational standards and legal regulations of employment for health care assistant staff within the health care sector. The RCN supports much of the overall direction of the report, in particular the recommendations around role definition, accountability and delegation, competence assessment, quality assurance and the concept of widening participation into nursing. We are particularly pleased to see that there is a strong recognition of the valued role that health care assistants (HCAs) play within the nursing team and clarification of the line of accountability between nurses and health care assistants. However there are some areas within the recommendations that may raise potential issues requiring further exploration including a focus on the professional mobility of HCAs within the EU. These are considered below.

4.2.5 Registration

The EU report recommends "a registration of HCAs through an organ of self-administration of the occupational group or a state agency. This registration should be seen in conjunction with the necessity of sustained continued education and self-improvement".

Compelling arguments for registration of HCAs are given, including quality of care, patient safety, assurance for receivers of care and organisations, health policy and HCAs themselves.

The report links continued education and training with registration which is clearly a key factor in maintaining the quality of care. The report also notes that an up-to-date database of registered HCAs will help with workforce planning. It also suggests that it will "strengthen the position of HCA within the health care economy and with other occupational groups".

While the report states that "the registration of HCAs creates security for the care recipient and assures organisations that HCAs are regulated and trained according to known standards", a system of registration which is not mandatory or linked to fitness to practise will not bring with it the assurance associated with a system of regulation.

While we warmly welcome the recommendation that all HCAs across the EU should be registered, the RCN believes that mandatory regulation and consistent standards of education provide confidence to patients and assurance to nurses that any HCA has a core level of knowledge and skills that will be applicable in all care settings, underpinned by a clear and consistent regulatory structure if concerns are raised about performance or conduct. It also provides a standardised framework for education and conduct and a career pathway for the HCAs themselves. Mandatory regulation, enshrined in law and underpinned by core standards, would provide a far better platform for HCAs to ensure that their skills and knowledge could be transferred with them. It would also ensure that there is clear statutory oversight of the regulatory structure from a specific organisation. (RCN 2012b)

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¹ http://hca-network.eu/

4.2.1 Structure of HCA Education and Training and Development of HCA Common Training Framework

Many of the key recommendations reflect the RCN's position (2012a), including that HCA education should be embedded in practice and should lead to a recognised certificate within each member state. The RCN welcomes the recommendation that the curriculum should be competence based with learning outcomes that can be assessed, and should define the responsibilities and accountabilities of the HCA and in particular, demonstrate the demarcation between those of a registered nurse and an HCA. Quality assurance is highlighted, as is the need to base assessments on nationally approved standards. The RCN believes that a robust quality assurance framework for education and training is an essential requirement of the system.

HCAs must be supported to develop the knowledge and skills required to deliver competent and compassionate patient-centred care. A clear understanding of the role boundaries and accountability of both HCAs and nurses is essential for the role of the HCA to be effective within the nursing team. The report also highlights the need for providing opportunities for HCAs to access programmes of study that will lead to further/higher qualifications. The widening access agenda will remain an important concept especially as registered nurse numbers fall.

Since the publication of the report the RCN notes that a call for tender has been published which calls for bids to carry out a study which will explore the feasibility and prepare for a future suggestion for the establishment of a Common Training Framework (CTF) for health care assistants (HCAs) in the European Union.

While we welcome the best practice recommendations for each member state in relation to educating and training of health care assistants, the RCN believes that any development of a common training framework for health care assistants in the EU must focus on the architecture underpinning a future framework, rather than focusing on detailed lists of skills and competencies for HCAs. The RCN would emphasise the importance of **all** member states having:

- a system of registration underpinned by mandatory regulation of support workers to ensure effective mobility of health care assistants
- a robust quality assurance system for all HCA programmes
- a commitment to continuing professional development for all HCAs
- a clear articulation and understanding of the line of accountability between a registered nurse and a health care assistant
- a system which is flexible enough to respond to future workforce needs.

It is only by having these system architecture issues in place that the EU can work towards effective professional mobility of HCAs and we would recommend that any future study on a common training framework should focus on these important principles. Equally the RCN recommends that any future work in the area must be directly informed by nurses and nursing given the need for clear lines of supervision between registered nurses and HCAs.

The report demonstrates the considerable differences between the skills, competencies and activities that HCAs carry out in individual member states. Indeed the future competencies of registered nurses across the EU are currently being discussed and are not yet finalised. The RCN would also recommend that any future work on a common training framework should focus in the medium term on the extent to which HCAs share high level competencies across member states rather than focusing on the detailed tasks and skills that might be required at a European level at this stage.

The report also recommends that education should take place at state accredited health specialised vocational schools and be supported in practice. The duration of the training should be two to three years of full time study (level 4 EQF). There are huge implications here in terms of practicality and for the labour market, especially around setting limitations as to who may offer training given the varied landscape of the member states. Level 4 EQF equates to level 3 of the Qualifications and Credit Framework and while this would seem to be a good target to aspire to, consideration should be made as to whether it is essential for the more fundamental of the HCA roles. The impact of HCAs being required to achieve this level would also need to be considered for registered nurses.

Summary

While the report and recommendations are broadly welcomed by the RCN and emphasise many factors that have been high priority for the RCN for many years, there are some aspects of the report, which need to be considered carefully. We need a clear and consistent system for the education and management of the HCA role within the nursing team across the EU. However the RCN is conscious that member states are at very different stages in relation to the education and training of health care assistants and the regulation and registrations of them. There will need to be extensive consultation with nursing groups going forward to ensure any future system of professional mobility for HCAs is effective and which avoids any detrimental implications with wider consequences for nursing across Europe.

References

RCN 2012a: Position statement on the education and training of health care assistants (HCAs)

http://www.rcn.org.uk/__data/assets/pdf_file/0003/441912/004214.pdf

RCN 2012b, Policy briefing 40/12: The weaknesses of voluntary regulation for health care support workers

http://www.rcn.org.uk/ data/assets/pdf_file/0008/493874/40.12_Support_worker_re_gulation_FINAL.pdf