

# Healthcare Support Worker Case Study

## Healthcare Assistant and Assistant Practitioner questionnaire

### Please tell us your name

Lindsay Cardwell

### Tell us about your role, where you work and how long you have been in post

I am an Assistant Practitioner working in a District Nursing team with North Somerset Community Partnership (NSCP) a staff led organisation delivering NHS services in the South West. I have been in post for 5 years.

### What qualifications and experience did you have prior to coming into the role?

Prior to this, I worked in the local hospital, spending 2 years on the orthopaedics ward. I moved to Endoscopy as a Senior Technician/HCA where I stayed for 16 years. Here I was given great support to complete my NVQ Level 3 in Health; I was supported during my Foundation Degree in Health and Social Care Practice and Preparing to Teach Life Long Learning Sector (PTLLS Course) I was also doing odd shifts as Bank HCA with my current employer.

As Endoscopy AP I cared for patient's pre, peri and post procedure managing patient airway and monitoring vital signs during procedures. Other elements of my role included admitting/discharging, enema administration and cannulation. I really enjoyed teaching /mentoring staff supporting them to gain knowledge and confidence with the different procedures/techniques, "handing up" equipment to consultants during endoscopic procedures and teaching all elements of endoscopic decontamination. However I started to feel that I wanted to get back to more "hands on nursing care,"

I was over the moon when I was offered my current job. It was hard to leave the close knit Endoscopy team and it took a good six months for me to feel settled in the community but I've not looked back since. Many of these skills made my transition to the community much smoother and many skills I took with me and continue to use now.

### Describe a typical working day

My day usually starts at 08.30 this can be to see patients who are stable type 2 diabetics and require insulin, suppositories and bowel care or an early morning TWOC (Trail without catheter) My role is very varied from taking blood checking international normalised rate (INR) levels to changing catheters, dressing simple and complex wounds, applying compression, to administering Clexane,

Vitamin B12 injections or pain medication, such as pain patches, I can undertake full assessments, support, welfare visits and make appropriate referrals to other services. No two days are the same and this keeps you on your “toes” as you never know what you could walk into or get called out to see. During my shift I could be asked to see patient with blocked or bypassing catheter, undertake urgent skin inspections for pressure damage or wound and dressing reassessments.

I work independently within a framework of delegated responsibility. I must be able to plan my workload to ensure that urgent visits take priority. Many of our patients have other co-morbidities which impact the care they require, ensuring that patients are treated holistically is important. Much can be discovered by asking questions and undertaking investigations into their medical backgrounds and lifestyles, by seeing patients regularly allows me to build strong patient professional relationships, building on trust and respect. This is an integral part of NSCP core values ensuring that care given is caring, compassionate and responsive.

My work is delegated to me by a registered practitioner, in some situations tasks may be delegated on a named patient basis; however it would always fall within the level of my skill, experience and the scope of my training and competency.

Although we are not regulated by the Nursing and Midwifery council, I am accountable and responsible for my practice both to my patients, NSCP and in law. By working within NSCP Delegation of Duty, Clinical competency policies and have achieved the relevant competencies for the skills I perform, allows me to make clinical decisions for the patients I see. This can be from deciding on best wound treatments, scheduling visits, to referring to other specialties or requesting GP visits.

### **Describe how you make a difference**

I am able to give advice and teach patients how to manage long term conditions as with all other aspects of the care I provide. This gives our patients' increased knowledge and the confidence to live more independently. Just being able to give patient reassurance and guidance can make a big difference to them both physically and mentally, this has a positive effect on the healing process and their overall wellbeing. I regularly tap in to my knowledge I gained from my time in endoscopy. As always there is a great team of RNs to seek advice from when I am not sure or treatment required is outside of my remit.

I enjoy my tissue viably link role and love teaching staff KCI V.A.C. Negative Pressure Wound Therapy and giving support with dressing choices, it very satisfying to see wounds go through the entire healing process, leading to discharging them off the team case load. As part of this role I attend bi month study days, these are great way to share best practice, learn and update skills and share problems and ideas with the other nursing teams.

As an Assistant Practitioner working alone with a delegated workload I need to have the confidence and knowledge to be able to recognise, raise concerns and take immediate action with patients who are unwell. This can range from SEPSIS/Delirium/Hypos and infections. Being able to take immediate action is vital; this may be requesting GP Community Matron or contacting emergency services to attend.

## **Tell us about the training, education and career opportunities you have**

All staff are supported and encouraged to gain knowledge and training, either by internal or external training providers regardless of grade. This can be linked through the University of the West of England or local colleges. I have great support with my current studies.

- **Did you complete any training to prepare for your role?**

Training for staff within NSCP is very robust, as an AP I attend the same sessions as RNs, this is from , bladder and bowel care, pressure ulcer, leg ulcer, wound management, catheters and sepsis. We undertake medicine management training specifically designed for APs. All staff must undertake training and have signed off competencies before independent practice can start. We must maintain our competence and keep up-to-date with best evidence based practice and training.

- **Are you currently undertaking any education/training programmes?**

I am currently working on a dissertation for a BA degree in Health and Social Care Management. I joined the 3rd year at Bristol College as a top up flexible student; this allows me to continue to work full time whilst studying, as much of the course is through distance learning. Hard work but I am enjoying it!

## **Thinking about your team**

- **Describe the support you are given**

Support within the team is fantastic RNs are just a phone call away. We have daily handovers where we discuss treatment plans, any concerns we may have, bounce ideas around, discuss issues or just off load. Tea is essential; much of it involves cake too!

All NSCP staff have regular 1 to 1s, clinical supervision and yearly appraisals, this is vital for our professional development.

I have continued to receive great support within the team and wider NSCP in both my RCN roles as a Steward and the RCN Health Care Practitioner committee work I do, where I have the enormous privilege to represent all RCN HCA/AP/TNA members in the South West.

- **Do you mentor or support colleagues?**

Having been well supported in completing my Mentoring FLAP qualification, (Facilitating Learning and Assessment in Practice) allows me to mentor new staff, Trainee Assistant Practitioners, HCAs and 2nd year Student Nurses. I am able to support and sign off competences for KCI vac therapy / INR coagulation testing and vital signs.

**What are your aspirations for the future?**

I would love to mentor and teach more, being able to support colleagues in their learning is fantastic, to help them and see their development is great. If I can pass some of my knowledge to them that will be of benefit to them is reward enough for me.

**Is there anything else you would like to tell us about your role?**

Assistant Practitioners are well established with in NSCP and the role and work we do has evolved since I joined. We are well received and supported which allows us to be an integral part of the multi-disciplinary team. The remit and underpinning knowledge we have allows us to be safe, competent practitioners, giving the RNs more time with our complex, patients. Having well trained competent practitioners ensures that NSCP continue to deliver high quality, timely care to all our patients.

**Are you a member of the RCN? YES**

**If yes: have you used any of our services? YES**

**If yes: do you have any feedback? Excellent service / support**

**Thank-you for your participation**