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## The challenges of training, support and assessment of healthcare support workers: A qualitative study of experiences in three English acute hospitals



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## ABSTRACT

**Background:** Ever-growing demands on care systems have increased reliance on healthcare support workers. In the UK, their training has been variable, but organisation-wide failures in care have prompted questions about how this crucial section of the workforce should be developed. Their training, support and assessment has become a policy priority.

**Objectives:** This paper examines: healthcare support workers' access to training, support and assessment; perceived gaps in training provision; and barriers and facilitators to implementation of relevant policies in acute care.

**Design and settings:** We undertook a qualitative study of staff caring for older inpatients at ward, divisional or organisational-level in three acute National Health Service hospitals in England in 2014.

**Participants:** 58 staff working with older people (30 healthcare support workers and 24 staff managing or working alongside them) and 4 healthcare support worker training leads.

**Methods:** One-to-one semi-structured interviews included: views and experiences of training and support; translation of training into practice; training, support and assessment policies and difficulties of implementing them. Transcripts were analysed to identify themes.

**Results:** Induction training was valued, but did not fully prepare healthcare support workers for the realities of the ward. Implementation of hospital policies concerning supervision and formal assessment of competencies varied between and within hospitals, and was subject to availability of appropriate staff and competing demands on staff time. Gaps identified in training provision included: caring for people with cognitive impairment; managing the emotions of patients, families and themselves; and having difficult conversations. Access to on-going training was affected by: lack of time; infrequent provision; attitudes of ward managers to additional support workforce training, and their need to balance this against patients' and other staff members' needs; and the use of e-learning as a default mode of training delivery.

**Conclusions:** With the current and unprecedented policy focus on training, support and assessment of healthcare support workers, our study suggests improved training would be welcomed by them and their managers. Provision of training, support and assessment could be improved by organisational policy that promotes and protects healthcare support worker training; formalising the provision and availability of on-ward support; and training and IT support provided on a drop-in basis. Challenges in implementation are likely to be faced in all international settings where there is increased reliance on a support workforce. While recent policies in the UK offers scope to overcome some of these challenges there is a risk that some will be exacerbated.

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### What is already known about the topic?

- Healthcare support workers are employed in many healthcare systems across the world to undertake both clinical and clerical aspects of patient care, but the training and assessment of these non-registered staff is not standardised.
- Healthcare support workers' leading role in providing frontline care is not reflected in the allocation of training budgets. They report feeling insufficiently prepared, but take-up of training is often low.
- To date there has been little research examining the factors that influence healthcare support workers' access to training, support and assessment.

### What this paper adds

- To support healthcare support workers in the delivery of high quality care for older people, training in the following is required: practical skills in caring for people with cognitive impairment; patients' and families' emotions; managing their own negative emotions; and in having "difficult conversations".
- Barriers to accessing training, support and assessment include: staff shortages; variability in ward managers' enthusiasm and support for training; problems with IT infrastructure and lack of IT literacy in sections of the healthcare support workforce.
- Provision of training, support and assessment could be improved by organisational policy that promotes and protects healthcare support workers' training; formalising the provision and availability of on-ward support; and training and IT support provided on a drop-in basis.

## 1. Background

### 1.1. The role of healthcare support workers

In many healthcare systems across the world, there is growing pressure on hospital resources arising from a number of factors, including a shortage of qualified nurses and a rise in demand caused in part by an ageing population (Marangozov et al., 2016). This has led to an increase in the healthcare support workforce, a group of workers known variously, depending on which healthcare system they operate within, as healthcare support workers, healthcare assistants, nursing auxiliaries, certified nursing assistants or aides, or assistants in nursing. There is an assumption that, given adequate training and supervision, they are able to undertake care tasks that do not require nurses' specialist skills (Roberts, 1994). This is particularly evident on wards for older people. Currently much of the direct personal care of older patients in acute settings is undertaken by healthcare support workers, albeit officially under the supervision of a qualified nurse. Their role consists of making beds; assisting patients with hygiene and intimate care; carrying out observations; helping patients to eat and drink; obtaining specimens; wound care; discussing patient care with colleagues; and talking to or reassuring patients and their relatives (Thornley, 2000). In March 2016 there were 365,208 clinical support staff working in hospital and community services in the UK's National Health Service (NHS) (HSIC, 2016).

### 1.2. Policy and practice on training, supporting and assessing healthcare support workers

The growth of the healthcare support workforce, in terms of numbers and role, has occurred in the UK without systematic education and training (McKenna et al., 2004). Guidance on the application of knowledge and skills required by all NHS staff, including clinical support workers, has been provided centrally since 2004 (DoH, 2004). The core areas are: communication; personal development; health, safety and security; service improvement; quality; equality and diversity.

However, training for healthcare support workers in the UK has been delivered and managed locally. While healthcare support workers make up 40% of the total NHS workforce across settings, and provide around 60% of patient care, this group receives less than 5% of the national training budget (HEE, 2015). A national survey on healthcare support workforce training in acute hospital Trusts in England (Arthur et al., 2017) found that in around half of Trusts induction training lasts a week or less. A survey by the trade union UNISON of nearly 2300 support workforce members working across healthcare sectors found that 40% of respondents felt they had not received sufficient training to carry out their work; and two thirds felt they were not given sufficient training and development opportunities to reach their potential (UNISON, 2016). Despite these findings, an evaluation of the provisions for healthcare support workers at London NHS Trusts (Kessler, 2015) found limited take-up of the in-house training provided.

Skill development of the support workforce has started to receive greater attention and investment in recent years. In part, this is a response to a series of high profile failings in care and a recognition that improvement in care standards is unlikely to be achieved without paying attention to the work of 'front line' staff. In this respect the Francis Report into the failings at Mid Staffordshire NHS Trust has been a catalyst for change (Francis, 2013). Following its publication, a review of training and recruitment of health and social care support workers was undertaken (Cavendish, 2013). The review recognised the importance of healthcare support workers as "a critical, strategic resource" who "feel undervalued and overlooked [with] no compulsory or consistent training" (Cavendish, 2013: 6). As a result of recommendations from the Cavendish Review a training plan for healthcare and social care support workers was developed (HEE, 2014), and implemented nationally in 2015. Although not mandatory, the framework urged employers to implement and develop a training and support programme for support workers that goes beyond mandatory training and annual appraisal. Central to this was the introduction of a certificate of competence (the Care Certificate), predominantly targeted at new staff. An early national evaluation of the implementation of the Talent for Care initiative (which includes the Care Certificate) shows that the Certificate had prompted changes in induction, including increasing the length of induction courses (Kessler et al., 2016).

Despite the increased scrutiny and policy attention on the role and training of healthcare support workers, there is a lack of research evidence to support the successful implementation of new training initiatives. This paper draws on a large qualitative dataset gathered as part of a wider national study to design and test a short training programme for healthcare support workers (Arthur et al., 2017). Data collection took place between February and November 2014, before the national implementation of the Care Certificate, but during the period of intense consultation and review outlined above. The data was collected as part of a study to design a training intervention for healthcare support workers, to improve the experiences of care by older hospital patients.<sup>1</sup> The paper draws lessons from a detailed exploration of the factors that have been found to impact on the implementation of healthcare support worker training, support and assessment, specifically in older people's wards in three NHS hospitals in England. It addresses the research question: What are the challenges of training, supporting and assessing healthcare support workers in an acute setting? It uses findings to suggest actions hospitals might take to create a more effective model.

<sup>1</sup> "Can Healthcare Assistant Training improve the relational care of older people? (CHAT) A development and feasibility study of a complex intervention". The aims of the study were to understand the relational care training needs of HCAs caring for older people, design a relational care training intervention for HCAs and assess the feasibility of a cluster randomised controlled trial to test the new intervention against HCA training as usual.

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