



# Review of PSWs Role in Ontario

How did we get here, where are we going?



# Agenda

## Review of PSWs Role in Ontario

1

**PSW: Where Are we coming from?**

2

- History of the PSW/PA Role

3

- Evolution of the Role

4

**Where are we now?**

5

- Current environment issues and observations

6

**Where are we going?**

7

- PSW Registry



# PSW: Where are we coming from?



# Where did PSW come from?

A “short” history

**The Personal Support Worker Program/Personal Attendant Program** was established through an extensive consultation process that began in 1993.

**The term PSW can imply either education qualifications or role played by worker**

**Personal Attendant: first 7 modules, placement with consumer who directs her own support**

**PSW: 14 modules, community and facility placement**



## Before and After

**Many titles and  
variances in training**

**Health Care Aides** who provided care in long-term care homes,

Workers who provided care in clients' homes. This latter group included **Home Support Workers** (Level II or III), **Respite Workers**, **"Integrated Personal Support Workers"** and **Home Helpers**.

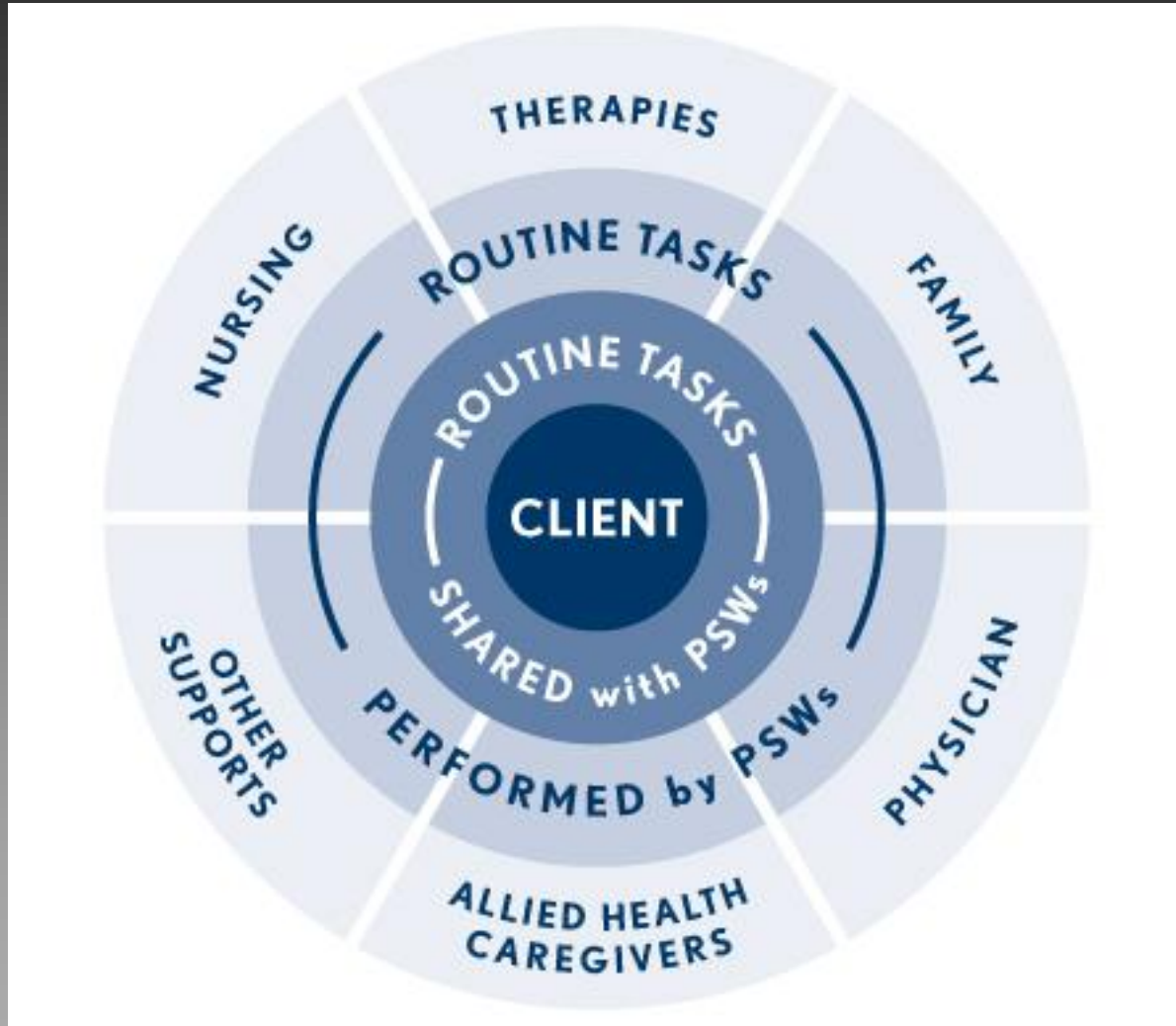
**Consistent ,common  
curriculum, portal  
Worker**

The PA/PSW program developed a common curriculum for unregulated workers. The PA programme was designed to use those modules appropriate for workers supporting consumers who direct their own support.. The PSW focussed on workers working in long-term care and the community creating a worker with targeted general skills, great flexibility and portability across the health system.



# Personal Support Discipline

a.k.a, not a mini-nurse



# Personal Support Role is a Supportive One



- **Activities of Daily Living (ADL)** – personal care (bathing, feeding, dressing, toileting), transferring (walking), light housekeeping and child care.
- **Instrumental activities of daily living (IADL)** – menu planning, shopping, meal preparation, providing transportation or accompanying clients, educational and recreational assistance.



# Personal Attendant Role



- Personal attendants assist consumers with the same range of activities as do PSWs, but under the direction of the consumer.
- Includes consumer teaching/coaching as well as direction as to how support is provided





# PSWs can perform specific types of controlled acts, under certain conditions

- Exempted Acts

- 2 classes of controlled acts under RHPA

- Administering a substance by injection or inhalation
    - Putting an instrument, hand or finger,
      - i. beyond the external ear canal,
      - ii. beyond the point in the nasal passages where they normally narrow,
      - iii. beyond the larynx,
      - iv. beyond the opening of the urethra,
      - v. beyond the labia majora,
      - vi. beyond the anal verge, or
      - vii. into an artificial opening into the body.

- Delegated Acts



# Exempted Acts



- May be performed for a prolonged period, so long as specific conditions apply:
  - **Routine** for the person
  - **Stable** condition
  - **Expected outcomes** of the act are predictable
  - **Taught** by a person legally able to perform the act
  - **Periodically monitored** by a person legally able to perform the act
- Person performing act is responsible for correct performance, as per teaching



# Delegation



- Generally time limited activities for PSWs
- An act can be delegated when:
  - Regulated health professional is certain PSW is **competent**
  - Regulated health professional **has taught the PSW**
- Regulated health professional **remains responsible** for the correct performance of the act and must make sure **procedure is monitored**



# Where are we now?



# Impact of Personal Support Workers

By the numbers.....



PSWs provide 70% to 80% of the care in the community and long-term care.

Estimated Number of Personal Support Workers:

- Long term care: 47,000
- Home and Community Care: 25,000
- Hospitals: 5,000

Estimated Number of Hours of Personal Support:

- Long-Term Care: 47 million hrs/year, or @\$1.2B/year
- Home Care: 19 million hrs/year, or @\$500M
- Community Support: 12 million hrs/year, or @\$200M



# 3 Recognized Training standards, 4 Sectors Responsible for Delivering PSW Training

And so the deviation begins.....

## Community Colleges

1

MTCU 2004 standard

## Private Career Colleges

2

NACC Guideline

## Boards of Education/NFPs

3

MOHLTC/OCSA PSW Program Standard, 1997

Growing concerns from stakeholders on accountability and quality issues with training

Not all PSW training organizations are equal in their commitment to quality

PSWs are not treated equally based on where they received their training

Negative press coverage has created a loss of trust from the public and low moral for staff



# To Regulate or not Regulate

## The results from HPRAC



- Despite two series of referrals and consultations, HPRAC declined to recommend PSW regulation
- MOHLTC Minister directed HPRAC not to revisit this issue



## LONG TERM CARE

- Practice limited to personal care, toileting, dressing grooming, feeding
- Formal training from a recognized certification program required for new hires

LTC

## RETIREMENT HOMES

- Stretching the boundaries of scope with tasks like medication “passes”, limited supervision
- Care Standards still to be developed

Retirement Homes

- Broadest use of scope
- Home maintenance, personal care, family responsibilities, social/recreational activities
- Medication administration (Certain types)

Home Care/  
Community Support/  
Attendant Services/  
Supportive Housing

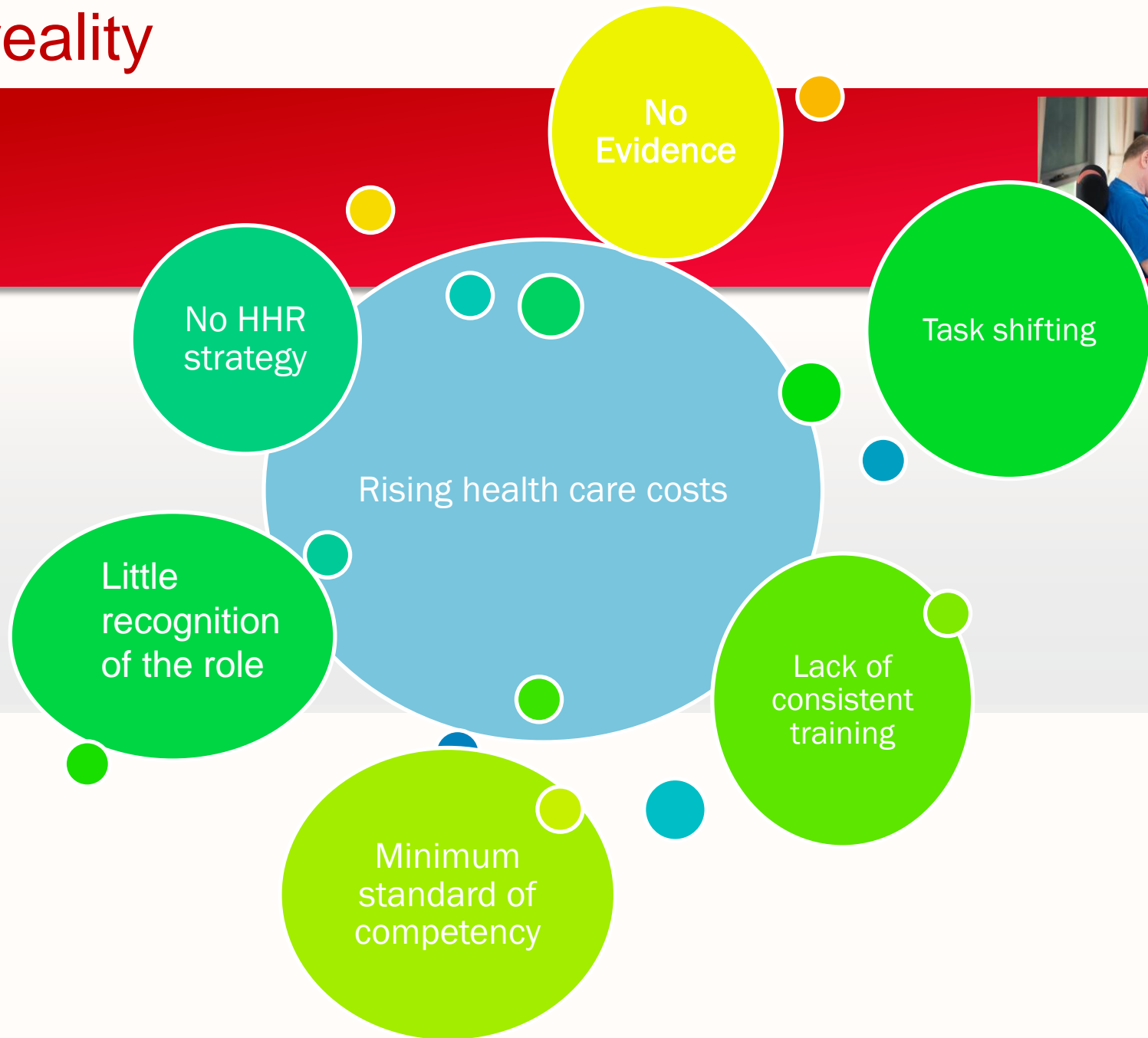
Hospitals

- Not envisioned when PSW developed
- Scope varies from hospital to hospital
- Specific situations require additional education/training





# Our reality

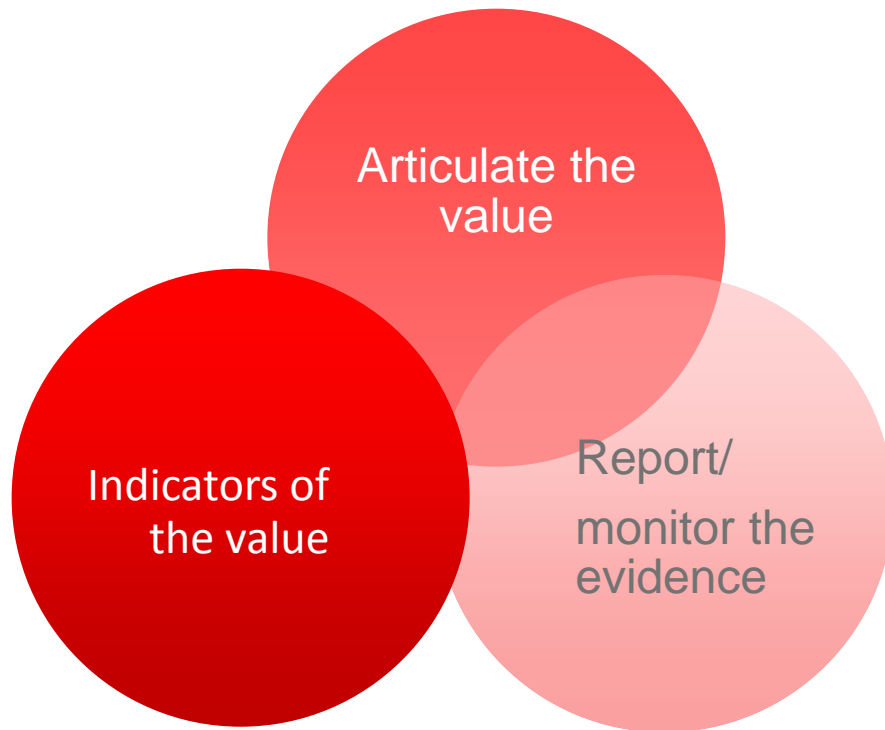


# Where are we going?



# Do Better, and Prove it

## Environmental influencers



1. Health Quality Ontario
2. Commitment to the Future of Medicare Act
3. Excellent Care for All Act
4. Integrated Client Care Project



# Can't support the Quality Agenda without evidence

## Benefits of a PSW registry

How many are out there?  
How many do we need?  
What's the demographics?

What education and skills are required?

Where are they?  
Where do they work?



Understanding the PSW Workforce =  
Better client care, more satisfied workforce



# Why Now?

## Data on the PSW workforce

- Provide data on workforce – allowing for evidence-based health human resources planning

## Improve access to personal support services for clients and caregivers

- 3 When functioning, the registry could provide access to respite services and self-directed care providers, making it easier for clients and caregivers to find qualified workers

## Role Definition and Educational Requirements

- Mechanism to address need for a standardized approach for training and role definition

## Potential Public Safety Mechanism

- 3 When/if defined, the registry at capacity could deal with issues when trust is preached, providing a safety mechanism for the public in the future



# THANK YOU

