

Spring 2013 Health Care Assistant Provincial Articulation Meeting
Vancouver Community College, Downtown Campus
April 18/13

Introductions and Welcome

Attendees

Carly Hall, Camosun	Sarina Corsi, Stenberg + BCCCA rep
Carol Tanner, Capilano	Cathy Shultz, Okanagan College
Trudy Baker, CNC	Anne MacDonald, TRU
Cheryl Mackie, COTR	Jim Olsen, VCC
Diane Maxwell, Douglas	Gianina Bocsanu, UFV
Tanvir Gill, Douglas	Janet Hebron, VIU, Articulation Chair
Judith DeGroot, Kwantlen	Bruce Bell, BCCA registry
David Wells, Native Education College	Charlene Wuerch, Home Support FH
Pooran Qasimi, NEC	Monica Lust, PCTIA
Marti Harder, Nicola Valley Inst. of Tech.	Heather Middleton, Worksafe BC
Laurie Bird, NIC, Articulation Secretary	Mike Sager, Worksafe BC
Lou Black, HEU	Christie Garneau, BCCAT
Dr. Vicki Scott, SAIL (Strategies and Actions for Independent Living) Program –	

Regrets

Yvonne Moritz, Dean Liaison, Okanagan College
Sabine Lundmann, NWCC
Katelyn Ranger, MOH
Ministry of Adv. Ed. representative

Agenda – approved with no additions

Minutes approved

- Sarina Corsi, BCCCA moved to accept
- Marti Harder, NVIT seconded

Bruce Bell, BC Care Aide Registry

- Have created a new position Educational Assessment Consultant
- Sarina Corsi hired as consultant at the Care Aide Registry, spoke to her goals to improve the standards of education/program delivery and streamline the process
- Will look at the education approval process – plan to have institutions to register for recognition with the registry, site visit will be involved, and the institution will be listed on the website as being in the queue for a site visit or approved
 - The grads of schools who do not meet registration standards will not be recognized and registered with the registry – hope to have this process in place with one year
 - Who will pay for the site visit? Not decided yet but perhaps a cost-sharing model. Will attempt to keep costs down.

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- The intent was to follow a similar process to the ECCE programs with the expectation of cont'd reporting by the institutions. Sarina commented that they want something similar but that the ECCE system has a significant backlog. Bruce notes that other provinces have similar registries in place (minus the focus on abuse) so they will be looking at best practices
- At present a voluntary process since there is no government mandate
- Also, will deal with registrants from other countries
- Creating a PLAR process
- Educational offerings is one of the registry mandates, particularly to those who were grandfathered in as HCAs
- Will be a self reporting mechanism for educators as to how they are implementing their program – the registry will be 'recognizing' educational programs
- New BC Care Aide Registry website will be launched at the end of April
- Goals is to eventually cover all sites that employ HCAs; public, private facilities
- Move to elevate the profile of HCAs publically, the role, training so that both potential students, employers, and the public at large are aware of their options for education and hiring
- There was a BC Care Aide Registry review completed by independent consultants and a report was written. Overall the report was positive; the biggest complaint was the cost associated with the review process of a registrant accused of abuse. The employers paid on average 50% of the \$6300 cost. The review and associated action plan are available on-line via the registry website – link on the home page.
- Is there a move to keep detailed stats on the investigations to monitor trends – for instance the educational institutions would like to know if the individuals cited for abuse came from their schools. Unions backed the formation of a registry and the sharing of this type of data is controversial
- MOH funds the registry – HealthMatch BC – they are a project under this umbrella of the MOH.

BC Care Aide Registry -Stats from 2010-2012

- 44,000 plus registered
- 178 alleged abuse reports – registry is a neutral 3rd party investigator who can decide on consequences for the registrant
- 82 terminations
- 45 investigations
- 8 permanently removed
- 23 removed without investigation ensuing, and no action from the union or registrant
- There is a remedial work process for registrants to get back on the registry
- Gets tangled and time consuming when there is a labour issue with the union and employer as well as an alleged abuse situation

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PCTIA, Monica Lust

- Stuck in the interim period before the election so can't announce anything that was under discussion for PCTIA with the ministry
- 60/40 split of accredited/non-accredited institutions in PCTIA
- The agency has had some interesting things pop-up – seeing an increase in HCA new program applications – some with interesting twists as noted below
 - HCA and ESL pgm. combined – speculate this may be schools who are ahead of the curve who recognize that there are changes to the federal international study study permits as of January 2014. If an IE student comes into Canada with a study period over 6 months they require a temporary study permit. If the student is only enrolled in an ESL program they will not be able to get a work permit. If they are coming into a training program with a co-op portion component the latter requires a work permit so the student will have one for that component of the program. The work permits are only relevant while the student is still registered in the program.
 - HCA and co-ops – these are in the approval process currently. If an institution can demonstrate that the co-op helps students meet the outcomes of the program this is viewed favourably, they would do the co-op portion on top of the regular studies and then they return to study.
 - HCA with the acute care piece tacked on to it
 - Institutions offering the program are also offering the PSW program – PCTIA is wondering what is the difference
- 45 programs registered at present with 10 applicants under review. They review applicants in respect to the HCA provincial curriculum.
- The agency has no control over the number of programs who are applying
- Question as to whether there are any post grad surveys done within the private college sector. Each accredited college has new outcome criteria to submit to PICTIA – this has just been rolled out.

Charlene Wuerch, Home Support Fraser Valley

- Report submitted
- ARQ (Accountability/Responsibility/Quality) model – see pt. #1 in FH report, this model originated with joint project between Vancouver Coastal Health and Fraser Health (FH)
- Cluster Model of care has increased in FH – some work with contracted service providers such as WeCare – contracted by FH. Normally workers are paid by hour and move from site-to-site; now they are assigned to a geographical area and receive a schedule of visits but are able to be responsive to calls within their area as well. Hope that it is a more fluid model. Promotes consistency for client in terms of workers visiting them, less windshield time for the workers, consistency for the workers as well etc.
- Client ID education is aimed to ensure the care workers are with the right client, ID must be shown and this check is recorded by the worker

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- Project doing assessment to see what education has been most effective in falls prevention in the home
- Workers are doing the violence prevention modules and associated teaching

WSB – Mike Sager and Heather Middleton

- Handouts
 - 2013 Health Care & Social Assistance Injury Prevention Resources List
 - 2013 Education Sector Injury Prevention Resources List
 - Incident investigations in health care – Focusing on change instead of blame
- This year's video features the topic of hand washing, not bringing germs home
- Now interactive e-books for iPads (at present only the Apple product)
- Violence Prevention Curriculum and on-line modules are available for free access on the Health Employers Association of BC- unfortunately missing the facilitator manual and the classroom module. At this time the tests have to be printed off from this site as well as the test answers – painful process.
- Alzheimers Association – 2 (3) hr. sessions parts #1 + 2 have been presented around the province. Huge wait lists for sessions. Not WSBs mandate to provide this type of workshop, more relevant for employers so WSB is looking to others to take this on. Sessions were attended by a workers and students, average work experience of attendees was 14 years
- Recommend Teepa Snow resources for supporting clients with dementia – available via her website, some for purchase, and also some on Utube
- MOH policy papers related to restraint use. Currently papers released on reducing seclusion and use of antipsychotics – research shows that in pilot sites the reduced use of medication is resulting in worker injury
- New language on bullying is still being reviewed and policy decisions will be released after the election. Currently WSB is accepting c/o chronic stress related to bullying.

BCCAT – Christie Garneau

- Report distributed and attached to the minutes
- All materials being moved on-line and will be interactive – guidebooks, articulation companion guide, etc.
- Will be launching a blog
- Have had significant increase in the visits to the website felt to be secondary to their marketing – see bus ads across the province
- A&P now an official articulation committee
- Working closely with the Indigenous Adult Higher Learning Association (IAHLA) – realized they were missing this perspective

Native Education College, David Wells and Pooran Qasimi

- Historical perspective on NEC provided
- Most IAHLAs are funded by bands
- NVIT and NEC are not affiliated with a particular band

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- Quasi-public institution accredited through PCTIA but receives a funding grant from the government, and is affiliated with VCC.
- Currently in the process of getting a public institution designation
- Have ABE delivery which takes approx. ½ of their FTEs. Currently have 300 FTEs overall.
- Have formal transfer agreements with institutions where applicable
- Doing a co-delivery of an Aboriginal Youth Worker program with Douglas College
- Pooran is the co-ordinator for the HCA program and it is being delivered in Vancouver
- Use the HCA provincial curriculum and added hours that indigenized the content, program runs 8 ½ months full time.
 - Have 3 terms – first two are theory based and the last one is a practice term. They use HSPnet. Have a placement and student recruitment person who, aside from recruit
 - On their 5th intake, generally take 24 students
 - Estimate that approx. 80 hours over the basic requirement in order to indigenize the content
 - NVIT's HCA program is 1 ½ months longer due to indigenous content
- Starting post basic courses – acute care course will commence next week, 12 students are in the program with certification at the end, 100 hrs theory/lab and 70 hours clinical hours minimum
- Placements for above with be in VCH region
- Are working on post basic courses in mental health and palliative care – these are for professional development and will be shorter, approx.. 45 hrs.
- Part of funding is to look at a remote LPN model around what does it look like in remote communities with nursing stations and less infrastructure

BCCCA, Chair of the HC committee -Sarina Corsi/Stenberg

- The British Columbia Career Colleges Association supports consistency, accountability, and excellence in the private post-secondary training sector. To promote this vision, they co-ordinate and disseminate information on topics relevant to the members through seminars and meetings, as well as through an annual conference. The BCCCA acts as the communication and advocacy heart for our membership on all fronts related to government policy, post- secondary education and training infrastructure, and the parity issues affecting institutions and students within the larger framework of post-secondary education in BC.
- 56 member colleges
- New executive director – Amanda Stevens
- New president – Jeremy Sabell, (Stenberg College President)
- New liaison for this committee will be elected at BCCCA HC Committee April 30/13 meeting
- PCTIA sets the approval framework for private institutions – if providing training over 40 hrs. or \$1000 have to be registered with PCTIA

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HEU – Lou Black

- Involved in BCCA Registry review process – supported vetting of the educational institutions and the support of HCAs in practice
- MOH will be conducting a review of the HCA curriculum this year which will go to M.AdEd and HEU feels they would have role in contributing to this
- Worked with the VIHA to develop an acute care competency document and HCA training model for in-house use, and this was shared with all the health authority
- **ACTION ITEM** – Janet to contact Chris Kincaid re: above document and access
- Remain interested in the Ombudspersons report (Feb. 2012) on Seniors Care in BC made 176 recommendations about care standards for different settings. Did an update in Dec. 2012 on where the BC gov't was at in terms of meeting recommendations. Have established a Seniors Advocate in response to this report.

Ministry of Health, SAIL (Strategies and Actions for Independent Living) Program – Dr. Vicki Scott, BC Injury Prevention

- Research interest in falls prevention
- Advisor to health authorities on this issue
- 80% of all admissions for those 65 and older
- Asked to come up with a fall prevention program for public funded home support community dwelling adults
- Asked for a self directed and workshop version of the program for all health authorities
- Requests for this have come from other sectors including First Nations Bands and educational institutions
- The course fits well in the existing HCA curriculum, it is a holistic perspective looking at all aspects of the client health and environment
- A lot of the package for this program is directed at the client themselves as well as the worker – how to promote exercises, etc.
- Have access to a multitude of data related to the senior population – hospital, the RAI database, etc.
- Is there interest in participation in developing a pilot project? General consensus is yes there is interest.
- CNC has had the SAIL content in their curriculum for the last 5 years and is considering pulling it as the community setting does not use it in their area
- Developed and designed as part of a health authority program for the community only, not residential care
- On VCH education platform
- **ACTION** – public educators to provide Dr. Vicki Scott with curriculum information re: content related to health promotion, risk management/safety, fall prevention, role of HSW and content related to this. Invite Dr. Scott to our Fall meeting.

Ministry of Advanced Education = Paul Clarke provided a written report

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See report

- Point #3 on the report – pls. request clarification re the last sentence and are they using the national standards adopted by Health Canada
- Point #4 – PLAR questions who will house the tools, will it be the registry, and who will offer the PLAR process. Bruce advised that this topic has been discussed at the Deans & Directors' table.
- **ACTION** – Janet to follow up with Paul Clarke re: questions above

Deans & Directors Report - Yvonne Moritz not present

- Cathy Schulz reports that Yvonne sends her regrets and hopes to attend the fall meeting. Was unable to send a report as had not rec'd minutes from the latest Deans and Directors mtg.
- **ACTION** – Janet to follow up with Yvonne Moritz

Next Meeting

- **October 24 + 25, 2013**