

Project Title

Redesign of Care Roles in the Community Care Sector – Job redesign of a Community Care Associate

Project Lead and Members

Project Lead: Joan Tay

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Organisation(s) Involved

NTUC Health Co-Operative Ltd

Healthcare Family Group(s) Involved in this Project

Nursing

Applicable Specialty or Discipline

Nursing, Support Care staff

Aim(s)

To drive transformation and improve productivity by relooking at processes and roles, encouraging cross-deployment and multi-skilling of staff, thus creating new career pathways to attract and retain locals

Background

See poster appended/ below

Methods

See poster appended/ below

Results

The redesigned job scope of a CCA was developed with the aim to create greater value in the CCA role, and establish attractive salaries and career progression in parity with other healthcare job families, so as to attract and retain locals in the community care sector. The main focus of the work trial was to test the feasibility of a non-certified role taking on uplifted nursing and therapy competencies, to better serve the residents and clients. Thus, there is no baseline data per se to measure the level of improvement.

It was observed that there was more than 160% increase in the number of locals attracted in the Early Adopter phase, which shows a promising trend, towards improving the situation of local hires in the Care sector.

Through the pilot work-trial, challenges in (a) training, (b) competence level and (c) competency assessments were highlighted. For (a), due to operational issues and scheduling, some of the new hires were unable to attend training at the designated learning institute. Hence, NTUC Health developed an in-house foundational curriculum which aligns with the institute. As the work trial progressed, with increasing success, NTUC Health also established an on the job training (OJT) structure to guide new hires in performing competencies required for the role.

For (b), concerns were raised by the CCAs on the amount of competency assessments required to be completed within a short time frame, as they were also trained to take on uplifted tasks performed by SCCAs. For (c), to comply with the competency assessment requirements set by the Ministry of Health (MOH), NTUC Health organised more competency assessments for all new hires. There was a concern raised by the therapy team, that the duration of the work trial was too short to complete the assessments.

Through this work trial, feedback received from the participants stated that the CCA role, salary and progression are attractive and majority of the participants were keen to continue in the role, with additional allowance provided. It was also concluded that the CCA scope is attractive to locals where CCAs enjoyed interactions with seniors through the enhanced nursing and therapy related work.

However, there is a need to increase awareness of the role and improve the retention rate of locals. NTUC Health is confident that with the redesigned CCA/SCCA role, the Community Care sector can look into how to scale up the various Care roles, in order to enhance career progression across the various job roles, and how efficiency can be achieved to better value add to the seniors' wellbeing such as having CCAs take on some of the nursing tasks to free up time for nurses or certified professionals to focus on more complex care needs.

Lessons Learnt

Through the qualitative survey results, NTUC Health has learnt that it would be helpful for CCAs/SCCAs to have OJT, on top of training with assessments, so as to ease staff into the new role with the uplifted competencies. With a combination of lectures and hands-on training, CCAs are able to apply what they have learnt and put them to practise. This allows them to be more confident in performing their tasks.

Secondly, not all CCAs are able to practise or demonstrate their competency for certain nursing tasks such as NGT which is not commonly available across the NHs and SCCs. Thus it would be helpful to ensure that all CCAs are given a chance through the whole trial period to demonstrate their competency by ensuring that learning opportunities and competency assessments are rostered.

Lastly, during the work trial where in-house training was conducted, the competency level of CCAs may differ across the pilot CCOs. For across the board consistency, it is necessary to ensure that training is conducted at designated learning institutes with standardised training curriculum, workflows and competency assessments, to ensure consistent standards across the trained individuals.

Conclusion

Our population is ageing rapidly with 1 in 8 are seniors aged 65 and above in 2015, and the figure is expected to double by 2030, with 1 in 4 are seniors aged 65 and above. Employees over 50 years old are the fastest growing demographic, where

there will be a 55% increase by 2030, accounting for 40% of the workforce. The demands of an ageing population and consequently ageing workforce will see an increase in the demand for healthcare services, and also in the community care sector, where more working families require assistance in caring for their aged family members.

Through the job redesign, NTUC Health not only hopes to attract more locals into the community care sector, it also hopes to relook its processes so as to ensure sustainability in community care roles which can be physically demanding in its daily work. With job redesign to create higher value jobs, it not only reduces repetition and overlaps in care duties between the different roles, but it also serves to increase productivity and emphasises on care to the residents and seniors.

Project Category

Care & Process Redesign

Value Based Care

Workforce Transformation

Job Redesign, Inter-Disciplinary

Keywords

Community Care, Competency Assessment

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Redesign of Care Roles in the Community Care Sector

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Nursing Aide (NA)/ Healthcare Attendant (HA)

Duties and responsibilities

- Activities of daily living (ADL)
- Assist in medication administration
- Monitor vital signs
- Maintain seniors' personal hygiene and environmental cleanliness
- Change of bed linen
- Serve meals
- Assist in nasogastric tube (NGT) or dysphagia feeding
- Mobility and transfer



Therapy Assistant (TA)

Duties and responsibilities

- Facilitate structured social group activities and individual exercise sessions for seniors
- Assist in residents' movement
- Assist occupational therapists during occupational therapy sessions



Community Care Associate (CCA) and Senior Community Care Associate (SCCA)

Duties and responsibilities of a CCA

- Nursing care - **assist in medication administration**; monitor health status; perform cardiopulmonary resuscitation (CPR)/AED and first aid.
- Seniors' personal care - assist with oral and **NGT feeding**; provide basic ADL support; manage short-term care and diet care needs.
- Psychosocial care - identify behaviours of concern.
- **Therapy support - perform range of motion exercises and mobility training; integrate maintenance rehabilitation activities into daily routine; perform and monitor individualised therapy exercises; observe seniors during sessions, compile and evaluate seniors' responses and progress.**
- Engagement with seniors - develop and facilitate recreational programmes; supervise and encourage seniors to participate in activities; monitor and record seniors' participation level in activities.

Duties and responsibilities of a SCCA

- Nursing care - **perform basic wound care; administer subcutaneous insulin injection.**
- Seniors' personal care - provide perineal and catheter care.
- Psychosocial care - identify and report signs of dementia and other mental health issues; identify signs of possible abuse; and provide support to seniors in distress.
- **Therapy support - assist physiotherapist or occupational therapist with the mobility assessments of seniors; instruct, motivate, and safeguard seniors in practising simple therapy exercises and range of motion (ROM) exercises.**
- Engagement with seniors - develop and review proposed recreational programmes for seniors; implement programmes and activities with external partners; conduct prescribed community integration activities; interact with seniors and caregivers to better understand their needs, and manage expectations and feedback from them.
- Administration and operations - inventory management; operate basic functions of smart devices; implement infection control initiatives.

**Enhanced nursing and therapy tasks are indicated in bold.*