

**Personal health budgets
and the delegation of
healthcare tasks for
children with complex
needs to personal
assistants (PAs).**

Report 2015

Personal health budgets and the delegation of healthcare tasks for children with complex needs to personal assistants.

An Introduction

This document considers issues relating to the delegation of healthcare tasks to personal assistants (PAs). It outlines the key roles, responsibilities and key considerations to ensure the effective delegation of health tasks as part of a personal budget and that all decisions are made in the best interests of the child.

What is Delegation?

Delegation is the process by which you, (the delegator) allocate clinical treatment and or care to a competent person (the delegatee).

Informed by RCN (RCN),
NRCeSLDACSP

Why Delegate?

Delegation of some clinical health care tasks to a PA can be highly beneficial including delegation of tasks related to care and support for children with complex care needs. PAs are often able to respond in a timely manner to needs, they may have developed a very good understanding of the person they care for, and have particular skills in communicating with them. Their skills, knowledge and availability can make them ideally placed to carry out delegated tasks.



When is Delegation Required?

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Decisions in relation to delegation will be based on the nature and complexity of the task. At one of the end of the spectrum, there will be clinical tasks that are unsuitable for delegation, because of the nature of the task or the circumstances relating to it, and at the other, some lower level tasks will only need instruction in safe use and simple awareness training rather than formal delegation. For example, basic awareness training in how to recognize and treat a hyperglycemic episode is well established in schools across the UK.

The risk here is limiting the staff who can respond by long and complex training rather than a clinical mistake being made due to complexity of the task. However, it should be noted that some tasks, may have different training and accountability issues due to the setting it is delivered in, for example, a PA employed to deliver care in school will come under the schools medication policies and the administration of medicine in schools guidance.¹

It is not appropriate for parents to train PAs on clinical tasks even where they feel competent to do so. It must be made very clear to parents and families about the value of robust clinical training from professionals and those lower level tasks they are able to train PAs to do must be clearly identified by the healthcare professional working with the family.

Accountability.

Delegation of clinical tasks needs careful consideration within the care planning process.

When delegating work to others, registered practitioners have a legal responsibility to have determined the knowledge and skill level required to perform the delegated task. The registered practitioner is accountable for the decision to delegate the task. The support worker is accountable for accepting the delegated task, as well as being responsible for his/her actions in carrying it out as long as the support worker has the skills, knowledge and judgment to perform the delegation, and that the delegation of task falls within the guidelines and protocols of the workplace, and the level of supervision and feedback is appropriate.²

CCGs have a responsibility to ensure delegation of clinical tasks is resourced in the budget or identified within an existing contract.

Framework for Delegation.

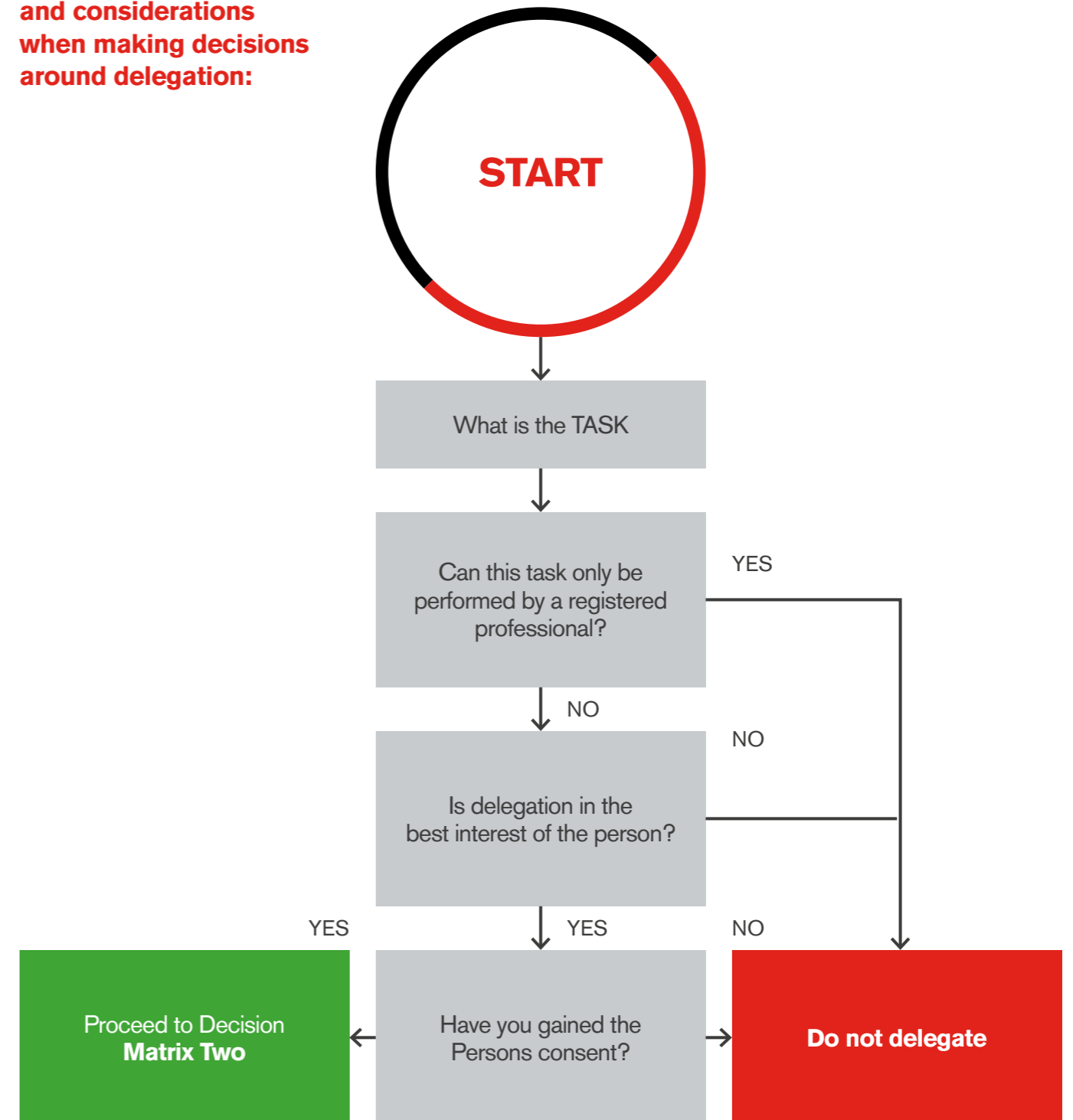
A framework for delegation, with clear protocols for all those involved, is essential for safe and appropriate delegation. Key roles and responsibilities within the delegation process are set out below to help organisations formulate local protocols. RCN guidance³ makes it clear that 'any delegation of clinical tasks to unregistered health and non-health qualified staff must be undertaken within a robust governance framework.

When is Delegation Required?

Process of delegation

The following decision tree sets out the process and considerations when making decisions around delegation:

Matrix One - Assessment of the TASK .



¹ Supporting Pupils at School with Medical Conditions DfE September 2014

² RCN consideration to mental capacity act

³ Managing children with health care needs: delegation of clinical procedures, training, accountability and governance issues RCN 2014

When is Delegation Required?

Process of delegation

Matrix Two - Assessment of the PA.

Box 1: Feasibility

Feasibility includes consideration of time constraints, resources, capabilities and cost.

Box 2: Knowledge, skills and training

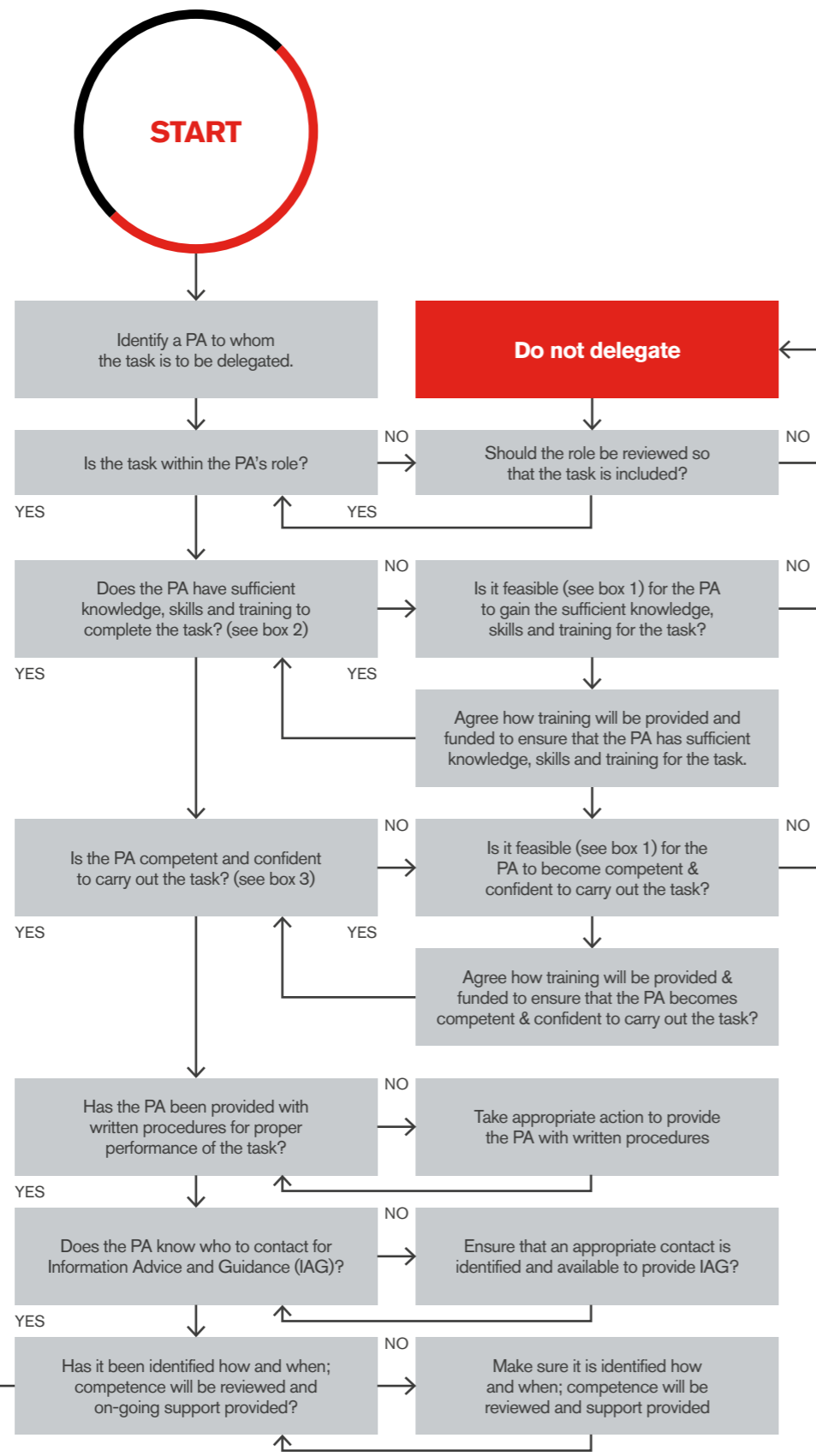
Determine whether the PA has sufficient knowledge, skills and training bearing in mind the following:

- Has the PA been trained to carry out the task?
- When was the training last given?
- Has the task changed since training and has training been updated?

Box 3: Competence and Confidence

When considering if the PA is competent and confident to carry out the task, note the following:

- Does the personal health budget holder/employer view the PA as a suitable person to carry out the task?
- Do you believe the PA to be competent and confident to carry out the task?
- Does the PA consider themselves to be confident and competent to carry out the task?
- Does the PA recognise the limits of their competence and authority, and know when and where to seek help?



Roles and Responsibilities

There are 3 key stages once a decision to delegate has been made:

- Initial training and preparation
- Assessment and confirmation of competence
- Confirmation of arrangements for on-going support, updating of training and reassessment of competence

Roles and responsibilities will vary depending on local structure but, to ensure that delegation is a safe and successful part of a personal budget, there are key actions and responsibilities for everyone involved in the local delivery of PBs.

This is likely to include the:

- Commissioner
- Care plan Coordinator
- Delegator

The above roles will sit within one or more organisations. These organisations will be responsible for the governance and assurance

- Personal health budget holder/employer
- Personal assistant

Key responsibilities are listed below. These should be built into local policies, commissioning specifications, agreements and job descriptions. The list is not all-inclusive but aims to give a clear framework of the key responsibilities and governance for all involved in delegation.

Governance and Assurance.

The employing organisation must ensure that individuals employed on their behalf to assess, delegate and train must have support and robust guidance from their employers.

This should include access to protocols and clinical policies, training materials, clinical supervision and local framework for the scope of delegation.

Commissioner's role and responsibilities.

Commissioners have overall responsibility for the commissioning of a safe and robust system for assessments, delegation and delivery of delegated health care tasks.

This includes:

- Commissioning the care coordination and delegation roles within robust service specifications which details the roles outlined below and ensuring the post holders have a clear understanding of roles and responsibilities of their role.
- Maintaining robust contract management oversight on providers to ensure the service specification of the care plan coordinator role and the delegation provider role continue to be met throughout the contract.

Care coordinator Role.

- To have the correct skills and knowledge to undertake assessments of children and families including the specific skills and competencies in the assessment of children including child development
- To ensure that care plan coordinators assessments fully identify the healthcare tasks that require delegation including a formal assessment as to whether the delegation of the task is in the best interest of the child (that there has been a robust risk and benefit assessment completed around the proposed delegation including an assessment of the stability of the child, the complexity of the task being delegated, and the expected outcome of the delegation (NMC Delegation)).
- To ensure that funding is included in the plan to cover the cost of appropriate delegation training and support as outlined below and insurance for Personal Assistants (and where necessary nurses) to carry out delegated tasks included in the plan.
- To put in place a robust evaluation plan to ensure delegation is appropriate and supported to the standards below.
- To arrange clinical support plans that fully meet the role set out below, including 24 hour support for clinical issues that arise in the care package.
- To participate in providing clinical guidance on the skills and attributes required to safely enable recruitment of personal assistants who are able to be trained in the tasks to be delegated.
- To ensure that roles and responsibilities are clearly identified and understood.

Roles and Responsibilities

Continued

- To ensure that there is support available locally for personal health budget holders acting as individual employers to support them in their employer responsibilities. This should include writing job descriptions and person specifications, interviewing and identifying appropriate PAs for their needs.
- To ensure that there are systems in place to provide suitable access to support and advice to PAs in relation to delegated health care tasks including where these activities are outside normal working hours.

The care coordinator role includes key responsibilities and duties in relation to the child's care plan and is responsible via their provider organization to the holder of the commissioning role for the execution of those duties. Registered practitioners employed to deliver aspects of the plan also have responsibilities, including to their professional registration body.

The Delegator

This could be the same person as the care coordinator for some or all of the tasks.

To have in place clinical supervision. The delegator has the following responsibilities:

- To fully identify the healthcare tasks that require delegation including:
- Formally assessing that the delegation of the skills are in the best interest of the child.
- That there has been a robust risk and benefit assessment completed around the proposed delegation including an assessment of the stability of the child, the complexity of the task being delegated, and the expected outcome of the

- delegation (NMC Delegation).
- To use the organisations robust procedures, risk assessments, documentation and robust training systems to underpin delegation.
- Provide certified child specific, task specific competency training underpinned by robust training and competency sign off systems including policies and references.

This training should include-

- Relevant anatomy and physiology
- Psychological implications and approaches
- Specific steps involved in the task
- Complications and trouble shooting
- Record keeping
- Associated skills i.e. hand washing
- Assessing that the PA recognizes the limits of their competence and authority and knows when to seek help.
- Provide or arrange for each child, sustainable 24/7 telephone support and advice from registered health care professionals skilled in children's complex health care for all PAs who deliver complex care which includes specific delegated health care tasks
- Provide supervision to those that care has been delegated to on a minimum of 3 monthly basis
- Deliver training to respond to newly identified care needs within 24 hours Monday to Friday ex bank holidays
- Write and keep updated clinical care plans, escalation plans, risk assessments and training records
- Support evaluation of delegated activity by care coordinator
- Raise any concerns about the appropriateness of any delegated

health care task directly with care coordinators and if required escalate concerns to the commissioner

- Provide up to date copies of care plans and risk assessments and training records to the budget holder
- Provide copies of identified clinical policies to the budget holder
- Provide feedback to care coordinator / commissioner on the above

Personal Health budget holder employer responsibilities (with support as identified within the care plan).

People taking on employment responsibilities should be supported with information, advice and training. The NHS service providing the personal health budget should ensure good quality support is available and direct people to it.

Personal assistants (PA's) can be employed either by the personal health budget holder, or by a third party organisation such as a health care agency or voluntary organisation. A personal health budget holder may choose to employ a PA through a direct payment. In the majority of cases, PAs are not eligible to be treated as self-employed as the nature of their work does not meet the criteria set by HMRC.

When the personal health budget holder is the employer, they are subject to relevant employment law. This includes a legal responsibility to ensure their employee remains safe. In carrying out this responsibility, the employer should consider any training needs along with health and safety issues. If more than five people are employed, a health and safety policy is needed.⁸

People employing PAs should consider insurance for employment related issues. The cost of appropriate insurance should be included within the personal health budget. Employers should ensure they speak to their insurer's help line regarding any specific circumstances, as indemnities are dependent on the budget holder taking and following advice on any issue affecting their PAs.

Budget holder role and responsibilities.

Consideration must be given to the following four areas:

1. Recruitment.

- When recruiting staff, to have due regard to the candidates ability to learn the required skill and to seek advice and support in this regard as required.
- To include in the Job Description the responsibilities outlined below for the PA

2. Training.

- To ensure adequate time is allowed for all the responsibilities outlined in the PA role
- To ensure that each PA has received training and both the trainer and PA have signed to say they are satisfied that the PA has the competence and confidence to deliver the delegated care.
- To sign the delegation document as employer of the PA to identify as employer satisfaction with the PAs competency and confidence to carry out the delegated task.
- To not ask the PA to go outside the scope of their training
- To not ask the PA to deliver complex care tasks without competencies

- To ensure the PA has up to date competencies

3. Supervision and Governance.

- To have in place clear care plans and risk assessments and escalation plans for all the delegated tasks which are up to date and relevant to the budget holder's child.
- To support the supervision of PA's to ensure they are undertaking delegation in the manner they were trained
- To ensure the PA appropriate records of the tasks they have undertaken.
- To seek advice from the registered delegator if concerned about any PAs abilities to deliver the delegated care
- To ensure the PA has regular clinical supervision as identified in ***
- To ensure insurance is in place for the PA to carry out delegated health care tasks
- To raise with care coordinator and if required commissioners any concerns about the quality of work by or availability/capacity of the delegation provider

4. Personal assistants' (PAs) Individual role and responsibilities.

- To take part in competency training and to sign to acknowledge readiness and competence and confidence to accept the delegated tasks.
- To undertake delegated healthcare tasks within the training given and the care plan and escalation plans that have been provided.
- To record delegated care given in a clear and contemporaneous manner.
- To seek advice and support from the employer and delegator if clinical concerns arise or the

PA comes across something not covered in training

- To take part in clinical supervision at a minimum of 3 monthly intervals
- To cease undertaking tasks and to seek retraining if the PA is unclear about any aspect of the delegated tasks.
- To not undertake tasks that the PA has not been trained for or to exceed the limits specified in the delegation of the task.
- To not use the training received for other children with similar needs without specific agreement and training from the delegator.
- To keep copies of records of training and expiry dates
- To seek retraining for delegated tasks 6 weeks prior to expiry.
- To raise concerns about delegation training and on-going support with the employer.

Although PAs are not currently regulated by statute, they remain accountable for their actions in the following ways:

- To the personal health budget holder – under civil law the PA has a duty of care and is accountable for their actions and omissions when they can reasonably foresee that they would be likely to injure people or cause further discomfort or harm (e.g. if a PA failed to report that a person had fallen out of bed). The PA could also be dismissed for being in breach of their contract of employment.
- To the public – under criminal law, if a PA were to physically assault a client they could be held accountable and could be prosecuted under criminal law.

Conclusion

For some children, young people and their families, personal budgets have significant advantages.

The need for delegation of nursing tasks does not prevent care packages being offered. However it does require all involved in the commissioning, setting up, provision and ongoing support to these packages to be clear about their roles and responsibilities.

We hope that this paper will help our colleagues working to support children, young people and families to make good use of the opportunities offered by personal health budgets, and that this guidance helps remove some of the issues and challenges that have in the past slowed down and in a few cases blocked the development of personal health budget funded support packages.





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