

Title Protection for Unregulated Care Providers in Canada



**Canadian Association of
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Introduction

Personal Support Worker, Health Care Aide, Personal Attendant, Community Worker, Clinical Assistant, Health Care Assistant; these are some of the titles used by 1 year trained Unregulated Care Providers (UCPs) who provide care and support to clients across the lifespan. The umbrella term of UCP has been used to describe this group and this specifically denotes how this worker is not regulated (does not have a governing body) compared to their other health care team members (nurses, and doctors). There are over 60 different titles being used across Canada and this is putting quality of care and patient safety at risk in addition to keeping the UCP profession from progressing, meeting the continued demands on this level of worker.

The **Canadian Association of Continuing Care Educators (CACCE)**, a national network of publicly funded post-secondary faculty and leaders responsible for the education of unregulated personal care providers recognizes the importance of having one standardized title. Currently there are multiple national initiatives related to the UCP sector (some funded by the health Canada) that are underway. With national standards of education and regulation being elusive, the CACCE identified a need to move forward the conversation of having one standardized title (title protection). A survey was developed and distributed to UCPs, employers, educators, and UCP students across Canada to determine what title they want. This paper will review in greater detail the need for title protection and survey results.

Background

Canadians depend heavily on UCPs and regulated care providers (nurses, doctors) to support unwell and dying clients in hospitals, long term care, community, and private homes. Historically, this level of worker provides personal care such as bathing, grooming, and dressing which may require the use of mechanical lifts and manual transfers; in addition to supporting clients in their own homes with meal planning, preparation, and light housekeeping. For over a decade, the UCP scope of practice has expanded. This is due in part to the rising acuity of clients' conditions, where registered health professionals (e.g., registered nurses) increasingly delegate to UCPs "controlled acts" such as assistance with oral and injectable medications, wound and stoma care, and patient transfers and exercises. This is not safe practice. The current framework of this unregulated care provider sector leaves clients and UCPs vulnerable. These vital healthcare team members, on a national basis, lack standards in education, a universal scope of practice, in addition to a formal title. As this sector is made up of mostly women and other vulnerable minorities, the CACCE stepped up to create the survey to hear the voices of those within the sector. We all agree that having one common title is appropriate, overdue, and will provide safer care. However, for decades our recommendations for title protection have gone unnoticed.

Having one title for this level of worker would ensure the accuracy of consumer perception that when a UCP comes to provide care, that professional received specific

training at a level of rigor which is standardized. Having title protection also promotes the profession so that UCPs are more accountable. Accountability measures are not possible when professionals have titles that are not tied to core competencies and a standard of education

Why title protection is so elusive is unclear. Especially considering that the evolution of the UCP role over the last thirty years aligns with the evolution of nursing. Where Certified Nursing Assistants became Registered Nursing Assistants and now have title protection as Registered Practical Nurses (or Licensed Practical Nurses) in direct response to increased responsibility, client's complex needs and the increased demands on Registered Nurses, the progressive professional path and title protection has not been afforded to UCPs in Canada. Not having a uniform title is one example of how this profession is not standardized and protecting one title will promote the profession- a step in the right direction towards standardization and promoting the UCP sector.

Title protection benefits everyone. Title protection will protect the public interest, create a more accountable and modern framework for UCPs, and provide health care consumers with mechanisms that ensure quality care. UCPs will receive the recognition they deserve for their education; the public becomes more aware of their value on the healthcare team, and clients will be assured that their UCP has the training to stand behind the title.

There is an assumption that when someone calls themselves a "UCP" they have completed a 1-year program and that they are trained the same. This is not the case and because of the pandemic various levels of UCPs have been added to the mix further watering down the caliber of graduate and causing confusion with healthcare consumers.

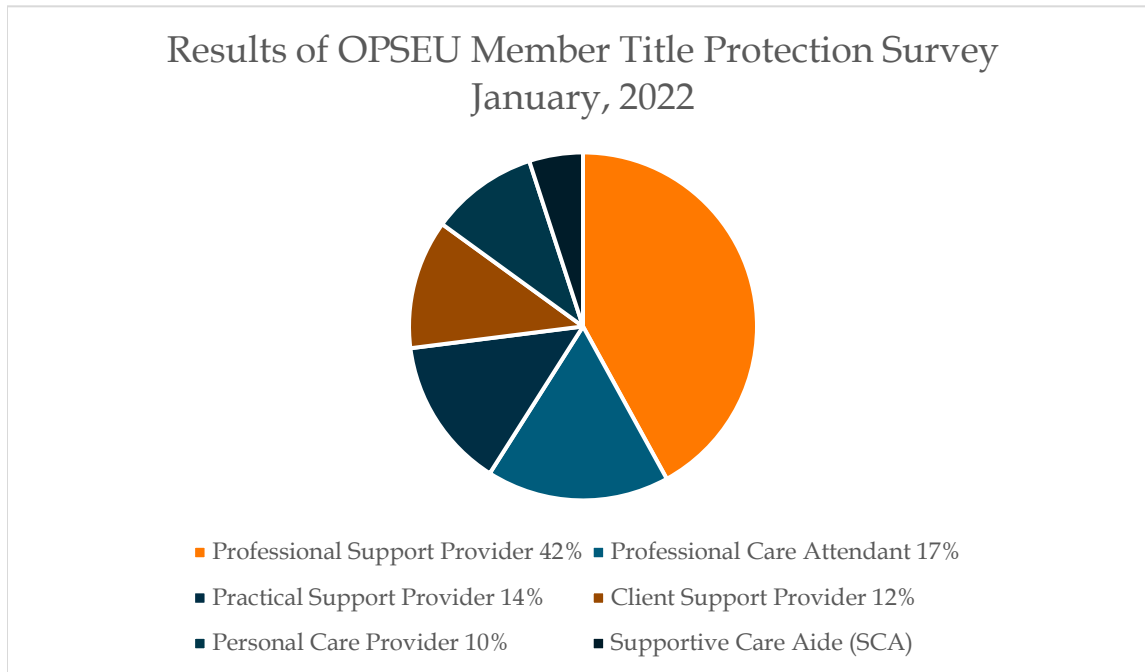
Of note, Title Protection is not an effort to dictate or restrict those who are permitted to do the work; it is not a form of practice protection. It is a form of statutory protection to ensure the accuracy of consumer perception that certain professionals receive specific training at a level of rigor to which providers can be held accountable. Accountability measures are not possible when professionals have titles that are not tied to core competencies and a standard of education.

Title protection would not dictate who employers hire, but it would prevent them from advertising their employees as UCPs if they do not hold specific training credentials.

Title Protection Survey: Part I

While on a temporary assignment with the OPEU conducting PSW research and advocacy, Laura Bulmer received permission to use the newly formed OPSEU PSW Community for beta testing a survey to see if there were any preferences for a professional title. The survey was conducted in January 2022 with a total of sixty-six participants. A February 1 posting on the OPSEU website revealed that Professional Support Provider (PSP) as the preferred standardized title for those being surveyed. Members were asked to select the professional title from a list of six possible titles. Forty-two percent of respondents chose "Professional Support Provider (PSP)." The

five other titles received much less support with only 17% support for the next runner up (Professional Care Attendant (PCA)).



The results of this survey were shared with the CACCE Executive team, and it was decided that a national survey should be developed to gain a better perspective on the opinion of UCPs and other stakeholders in the sector.

National Title Protection Survey

The national survey was developed using data retrieved from research and interviews that indicated having the word “worker” in the title denoted an unskilled, less valuable health care team member. To promote the UCP profession, marketing and health care experts were consulted and six potential titles offered as choices in the survey.

Key audience for this survey were UCPs, UCP students, UCP educators and UCP employers across Canada.

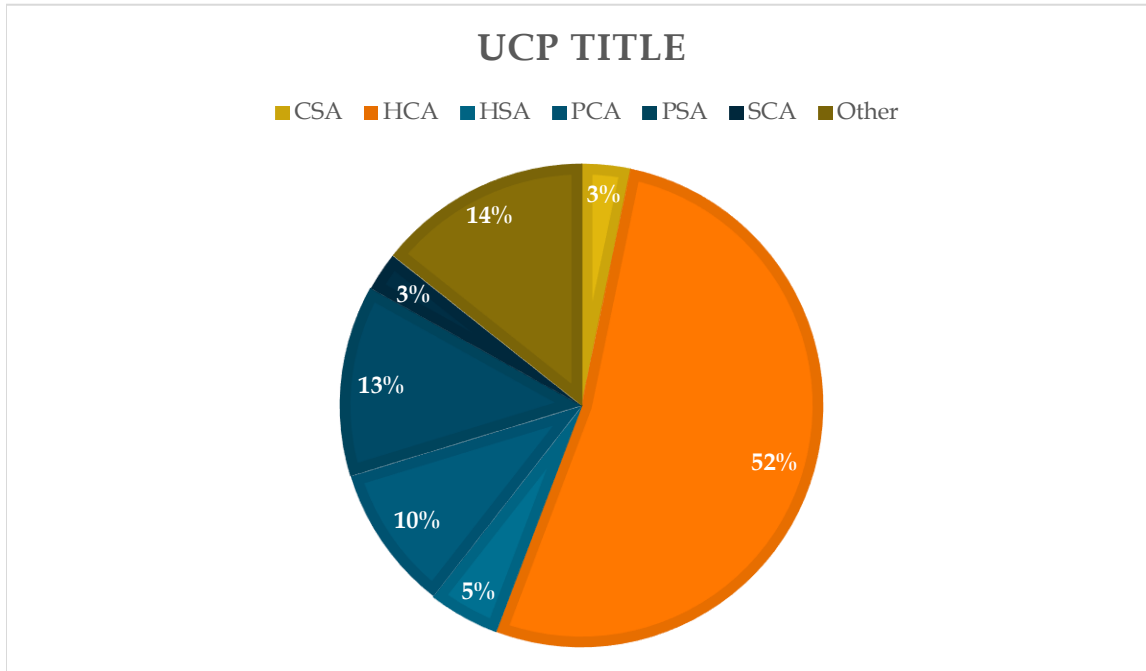
Survey Results

The survey was available to respondents online for 10 weeks. Four questions were posed:

- 1. What do you believe should be the title for the role we as unregulated care providers (UCPs) have in health care,
- 2. Why do you believe this should be our title*,
- 3. What is your role in this profession,
- 4. What province are you from.

=*Question 2 was optional to answer, however answers were required for questions 1, 3, and 4.

We had 460 responses to the survey. For question #1, What should our title be, the choices the respondents could choose from were: Client Support Aide (CSA), Health Care Aide (HCA), Health Support Aide (HSA), Personal Care Aide (PCA), Personal Support Aide (PSA), Support Care Aide, and other. In other, the respondent could write what they believe the title should be. The top title chosen was Health Care Aide (HCA) with 242 votes. In the other category we had some names suggested multiple times such as Personal Support Worker (13 votes), Continuing Care Assistant (8 votes), Nursing/Nurse’s Aide (7 votes), and Health Care Assistant (6 votes). We also had several respondents suggest that certified or registered should be at the beginning of the title once the role has been regulated.



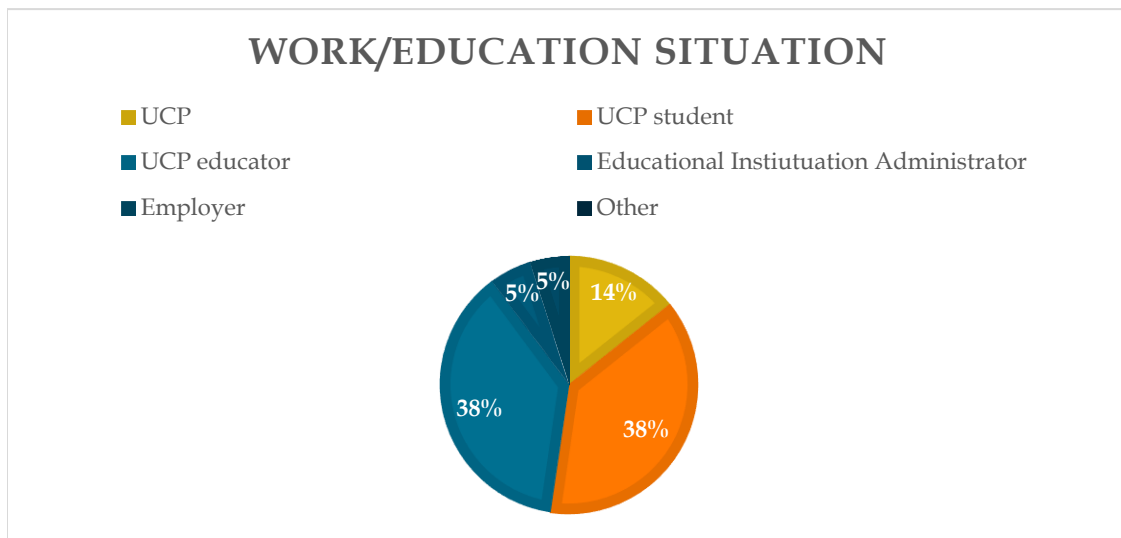
Choice	Total
Client Support Aide (CSA)	15
Health Care Aide (HCA)	242
Health Support Aide (HSA)	22
Personal Care Aide (PCA)	45
Personal Support Aide (PSA)	59
Supportive Care Aide (SCA)	12
Other	66

For those respondents that answered question #2, the main reason the respondents indicated as for why they chose the title Health Care Aide (HCA) was that they believed the term “Health” sounded more encompassing for the role they have. They felt that the term was more holistic and included all the components of their role.

Some respondents felt that the term “Personal” did not encompass our full scope of practice. We did have respondents that did not prefer the term “Aide” as they felt that the term could be seen as outdated or derogatory to our role in health care.

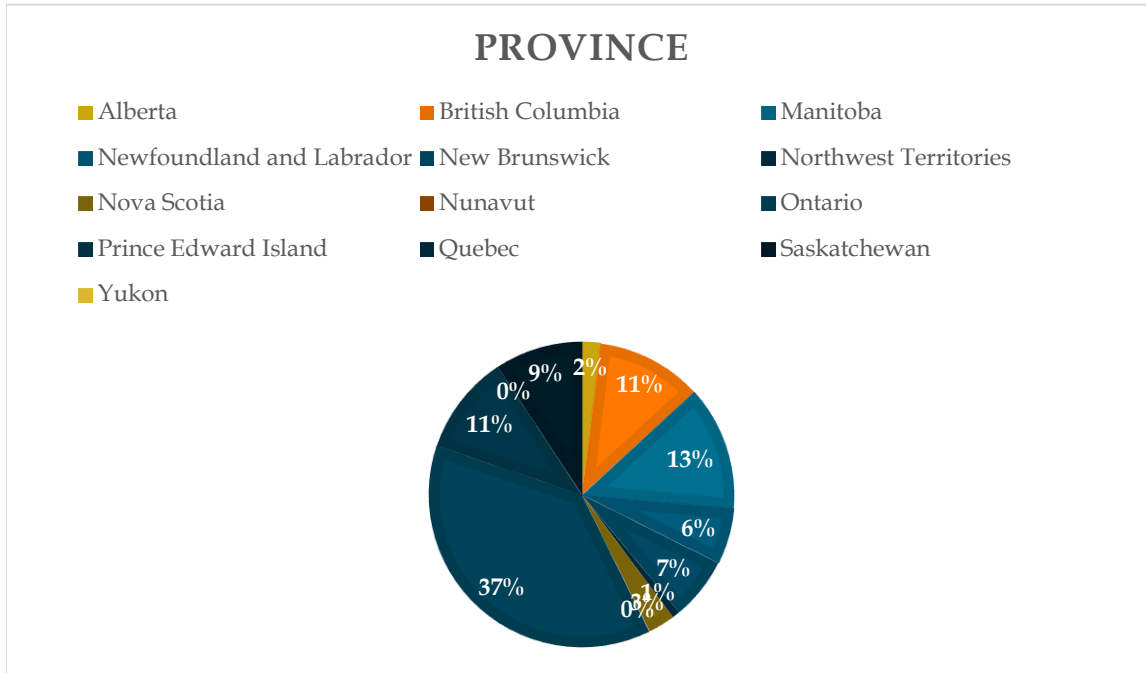
There were several respondents that indicated they chose or suggested the title they did simply because they currently have that title and do not want to change it. We also had respondents that chose the option they did simply because they liked the sound of it.

For question #3, most of our respondents were either UCP students (165) or UCP educators (163). However, we did have respondents from every category listed. In the other category, we had clinical educators (4), RN (4), nurse managers (4), and government workers (4) as the top other work/education choice.



Choice	Total
UCP (Unregulated Care Provider)	62
UCP student	165
UCP educator	163
Educational Institution Administrator	23
Employer	21
Other	27

For question #4, the top province we received responses from was Ontario (170) followed by Manitoba (60). We received no responses from Quebec or Nunavut. We did not have a CACCE representative in Quebec to disperse the survey.



Choice	Total
Alberta	9
British Columbia	51
Manitoba	60
Newfoundland and Labrador	27
New Brunswick	30
Northwest Territories	4
Nova Scotia	13
Nunavut	0
Ontario	170
Prince Edward Island	48

Quebec	0
Saskatchewan	42
Yukon	6

Conclusion

The need for a standardized title for unregulated care providers should be a national concern. Without it the public and UCPs are unsafe. The CACCE encourages dialogue on this important topic and will continue to engage healthcare industry decision makers on the need for multi levels of standardization (title, education, scope of practice) to support this level of worker.

A deeper dive into this subject is required however, funding, and human resources are required, and this appears to be elusive to obtain. What is clear are the results of this survey that indicate *Health Care Aide* is a contender for a standardized title. It should be noted as well that several regions in Canada already use this title.

The results from this national survey will be shared with federal, provincial/territorial, and local government in addition to UCP organizations, UCP employers and of course UCPs to in an effort to spark continued conversations and to promote positive movement on this subject.

About the Authors



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As a RN in palliative and community care Laura has worked alongside PSWs in addition to her 25 years experience as a PSW educator. Her unique and extensive knowledge of the unregulated health care provider sector in Canada has resulted in her being invited to consult on a multitude of provincial and national committees including most recently Health Canada's Human Health Resource Symposium. Based out of Ontario, Laura has been advocating for the advancement of the unregulated care provider profession including regulation, title protection and the need for a national Centre for UCP Excellence. As a well known PSW Knowledge Broker Laura has consulted on the Ontario PSW Program Educational Standards, the National Occupational Standards for PCPs (PSWs), spoken to the legislative assembly on Bill 283 (PSW oversight in Ontario), developed PSW curriculum, served as a contributing editor for several editions of the national PSW textbook and is the co-founder of the PSW Champions- an Ontario alliance with a mandate to advocate for PSWs in the province. Laura is also the current Chair of the Canadian Association of Continuing Care Educators (CACCE).



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As RN in both acute and long-term care, Jillian has over 16 years of experience. She has been teaching in the Personal Care Attendant (PCA) program at College of the North Atlantic in Newfoundland since 2014 and has been a dedicated member of the Canadian Association of Continuing Care Educators for many of those years. Jillian agreed to come on board as a provincial representative in 2020 and has been a valuable member representing educators in Newfoundland.