

Primary Care Assistant service specification

Background

The Primary Care Assistant (PCA) /Medical Centre Assistant (MCA) is an unregulated health worker which has been introduced into the general practice and primary care setting in response to changing health workforce needs. The PCA role is a valued and valuable member of the extended general practice team in the Health Care Home. The role has proven to be an integral part of the team by helping manage the patient flow within practices and removing some of the tasks historically performed by nurses. This enables nurses to practise at the top of their scope, allowing more quality time to care directly for patients. PCAs undertake a range of administrative and clinical tasks, under the direction and delegation of a registered health professional.

Training for the PCA role is supported through workplace mentoring by a registered nurse alongside a recognised programme provided by an accredited education provider. The qualification is an NZQA level 4 New Zealand Certificate in Health and Wellbeing –Te Mahi Awhina Tuatahi, (Primary Care Practice Assistance). The programme recognises the need for an adult learning concept and is delivered as a modular on-line learning programme allowing access for students from across the network. Online learning gives opportunity for work based, on-the-job learning and offers less disruption to the practice team's continuity of care. Students can expect to spend five hours a week completing online exercises designed to complement the knowledge and skills gained from working in the practice. Additional support is provided to students by tutors from the education institute.

Outside the tertiary training programme, formalised training modules are also being explored by Pinnacle Midlands Health Network to support the suite of tasks PCAs are able to undertake.

Service objectives

- Contribute to the provision of quality care and experience for patient
- Enable better patient flow saving patient and clinician time
- Expand the primary care workforce
- Enable clinicians to work at top of scope

Service key responsibilities

- Provide quality customer service to all persons interacting with the centre
- Provide administrative support tasks in order to maintain the smooth and effective running of the practice
- Assist in patient care under direction and delegation of the Registered Nurse
- Communicate effectively and liaise appropriately between the patient and health team members
- Document patient communication and care provided accurately and appropriately
- Provide continuous quality improvement and assist the clinical team in the implementation of quality initiatives
- Ensure safe work practices are adhered to
- Participate in training that supports the development of the PCA role

Building a sustainable workforce

Initially PCAs start with a basic set of tasks, such as taking blood pressure, weight, height, and as they prove capable and are delegated tasks, further tasks are added to standard work being undertaken. A staged approach to the development of the PCA is best undertaken, and there will be variance in the range of responsibility depending on the individual needs of practices. As the range widens the number of PCAs required may need to increase. PCAs play a key role in the marketing, registration, activation and training of patients onto the patient portal, with the portal being a key enabler within the Health Care Home.

Tasks are signed off in a workbook by nurse mentors upon demonstration of activities being performed under supervision and also independently, and when all requirements of direction and delegation have been met.

Future development will include a key role in health promotion/ health coaching. This function will provide patient support and education to enable self –management, the end goal being patients living well with long term conditions.

PCA suggested stages of development depending on PCA existing skills and practice development plans

<p>Stage One</p>	<ul style="list-style-type: none"> • Rooming (if facility allows) • Collection of basic pre consultation metrics data (height, weight, blood pressure, temperature, BMI) • Urinalysis • Pregnancy testing • Smoking – initially: asking smoking status and offering brief advice • Routine visual acuity • Glucose finger prick testing • Infection control- sterilisation, clinical waste, cleandown of beds • Routine recalls - using patient prompt to alert team to overdue screening (as part of rooming/ basic observations) • Breast screening registration for eligible age group • Promote pt portal registration and activation- patient portal champion • Stock ordering • Restocking all clinical areas • Huddle lead • Update visual display board with quality results and Health Care Home dashboard measures • Chaperoning • Monthly control checks (e.g glucose meters, dated stock)
<p>Stage two</p>	<ul style="list-style-type: none"> • Phlebotomy • Routine 12 lead ECG recording • Spirometry • Drug testing-ESR & non ESR • Audiometry • Medicals and pre employment work up prior to seeing GP • Drivers licence medical support • Smoking: giving cessation support • Minor surgery-set up , assistance, clean up • Dressings-post clinical assessments • Liaising with patients re results/follow up (eg inr notification) using available technology • Scheduling follow up with patients • Continuous Improvement Champion • Recall management system- in partnership with the nursing team and PAC
<p>Advanced role</p>	<ul style="list-style-type: none"> • Health coaching- consider Stanford training • Point of care testing • Medication compliance-supporting pts, not administration of meds • B4 School programme - support process • Management of practice newsletter • Management of Facebook page