

BSAHAA-registered Hearing Care Assistants

1. Skills for Health, with whom BSHAA has been working, describe the Hearing Care Assistant role as providing a new way of working that will reflect assistant roles already widely developed in other sectors of healthcare. The primary aim of the development of these roles has been to:

- Enhance client access to services by adding capacity to the healthcare team.
- Allow a client's more complex care needs to be focussed on by senior highly skilled practitioners.
- Allow clients and carers more time to discuss the practical aspects of their care needs.
- Develop career pathways that will support career progression and contribute to a continuing supply of suitable applicants into Higher Education. (In our case, the education and training of HCAs will be a stepping stone onto the foundation degree which is the new threshold entry level for HADs.)
- Facilitate sustained capacity to meet the inevitable demands for care from an aging population.
- Ensure best value for the client by developing skill-mix across care teams.
- Improve standards of client aftercare by creating a skilled support workforce.

We should expect similar benefits to be achieved in hearing care, with the added dimension that customers have a direct interest in gaining better value from the service for which they are paying.

2. We welcome the flexibility of statutory self-regulation to allow innovative service and workforce developments with the objective of improving the service to clients.

We recognise the concomitant responsibility of self-regulation to ensure and demonstrate safe and effective practices to regulators, to clients and to the public at large.

BSHAA, and employers and HADs using HCAs, intend that their introduction and use in support of registered professionals will demonstrate client-centred self-regulation within UK-wide standards for:-

- i). A client hearing care pathway indicating clearly the functions which the Hearing Aid Dispenser as registered professional must undertake and those activities which a trained and competent assistant could undertake, under appropriate supervision.

- ii) A defined Scope of Practice for a Hearing Care Assistant with the purpose of supporting and enhancing the services of the Hearing Aid Dispenser.
- iii) A Competence Framework for a Hearing Care Assistant which uses National Occupational Standards and National Workforce Competences for Health to describe:-
 - a) the competences required by a Hearing Care Assistant and
 - b) the required standards, performance criteria and knowledge safely and effectively to support the registered professional in the successful delivery of hearing care services.
- iv) A BSHAA and HEI validated and accredited education and training programme which achieves the Intended Learning Outcomes and produces Hearing Care Assistants competent to perform the activities set out in the Scope of Practice; which maintains up to date practice; and can be a stepping stone to career progression.
- v) Professional development for Hearing Aid Dispensers to achieve national competences required for the safe and effective supervision of Hearing Care Assistants and to help Hearing Aid Dispensers to meet HPC and BSHAA professional practice standards.
- vi) A BSHAA-hosted register of HEI certified Hearing Care Assistants for the sector.

3. Going into the HPC, we know that the absolute bar of the HAC, in involving anyone other than a RHAD in any part of the supply of hearing aids, is removed.

In future, “assessing, testing, prescribing....with a view to supply” are the protected functions of a Hearing Aid Dispenser and so limit delegation of those activities. Dispensers will, however, be able to involve an assistant in any other parts of the hearing care pathway – for which they are trained and competent

But the responsibility for delivery of professional hearing care to the client rests solely with the Dispenser. The Dispenser’s total responsibility does not change if they choose to involve someone else in that process to help in particular tasks.

The BSHAA HCA programme is designed to facilitate the development of appropriately trained and skilled individuals who a Dispenser may consider suitable to assist them. It will always be the Dispenser’s decision, on a case by case basis, whether and the extent to which an assistant is involved in the delivery of service to a client.

The choice of whether or not to involve a Hearing Care Assistant, and in what client situations, will remain with the HAD, the registered professional.

When it is the supervising professional’s decision to involve an HCA at appropriate stages in a client pathway, there must be complete assurance for clients, HADs and employers that high standards of care will be maintained, if not enhanced, through adoption of and compliance with nationally-recognised standards of healthcare practice.

4. The BSHAA HCA programme requires participating companies and HADs:-

- i) to use HCAs trained to the competences and skills prescribed
- ii) to deploy HCA skills within the limits of the scope of practice and the stages of the hearing care pathway defined.

The hearing care pathway has been analysed into tasks which must only be performed by the professional Hearing Aid Dispenser; and those which could be performed by the Dispenser, or a suitably trained HCA under their supervision

The scope of practise of a newly certified and BSHAA-registered HCA is to support and enhance the services provided by their supervising HAD to hearing impaired clients, their relatives or carers

- iii) to have HADs perform, and not delegate, any of the protected function

Hearing Aid Dispensers will perform and not delegate the functions of assess, test and prescribe on the pathway, which are the Protected Functions in law.

- iv) to supervise HCAs to the BSHAA and HPC standards required.

Hearing Care Assistants are supervised by and work with Hearing Aid Dispensers, who must comply with HPC standards and effectively supervise tasks which they have asked others to carry out.

5. Anglia Ruskin University have developed an education and training programme of 2 trimesters duration (approx 6 months), with a combination of University-based and work-based learning and skills development, leading to a University Certificate qualification.

Fees are likely to be c£750 per student

As the HCA programme will include Fd-level content, students should have an A-level education, or have shown through an involvement in hearing care the potential and enthusiasm, in order to benefit from the training and put it to full use.

Training will be substantially work-based under a designated training supervisor, who must be an experienced student supervisor, or an experienced HAD willing to undergo appropriate, but limited, University training.

Anglia Ruskin staff will assess and certify students competent to undertake the HCA scope of practice under the supervision of an experienced HAD.

HADs supervising a certified HCA will need to have at least 2 years post-registration experience; be fully up to date with their own CPD; undertake CPD in clinical supervision; and must adhere to BSHAA-approved standards of practice in supervision and the use of their HCA.

Although training and work-place supervision roles may not necessarily be fulfilled by the same HAD, it is anticipated that, certainly for the first pilot training programme starting in Feb 2010, HCA students should come already “paired” with the experienced Dispenser who will be responsible for their day-to-day on-going supervision.

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