# Support matters: a mixed methods scoping study on the use of assistant staff in the delivery of community nursing services in England

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## Executive summary

### Use of assistant staff in the delivery of community nursing services in England

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# Executive summary

## Background

As the disease burden shifts from acute to chronic conditions, community nursing (and health) services are faced with the growing challenge of caring for increasingly dependent patients with complex care needs. This is further exacerbated by the emphasis on providing care and services closer to patients' homes rather than in hospital settings. Community nursing refers, in its broadest sense, to any nursing care delivered outside the hospital setting, such as in patients' homes or health centres, or residential care.

More than 70% of the community services workforce is made up of registered nurses (RNs) and their assistants. Securing a sufficient number of nursing staff with the appropriate skills, across differing levels of qualifications and expertise, and deploying them effectively can be challenging. Nonetheless, it is an increasingly important priority given the current economic climate and financial constraints in the NHS. The skills of the entire nursing workforce need to be deployed and used appropriately and efficiently. Over the last decade, there has been a significant increase in the number of assistants working in community nursing teams and yet there is a lack of published literature on this topic. Our study was concerned specifically with understanding the contribution and potential impacts of assistants (at Agenda for Change bands 2, 3 and 4) in the delivery of care to adult patients by community nursing services.

## Objectives

Our research objectives were to:

1. describe numbers, types and roles of assistant staff (at levels 2, 3 and 4) delivering services and care in community nursing services in England, UK
2. explore how assistant roles affect the organisation of nursing work in these teams, particularly where new integrated organisational models and ways of delivering services exist and innovative assistant roles are identified
3. explore how the use of assistants in community nursing teams impacts on (or has the potential to impact on) health-care professional workload, patient experience and patient choice
4. report key findings and implications from the scoping study for policy, practice and research.

## Design and methods

We adopted a three-stage approach for the study using mixed quantitative and qualitative methods. This enabled us to (1) present a national picture of assistant roles in community nursing teams at levels 2, 3 and 4; (2) reflect any regional variations in use of the roles at these levels; and (3) describe the type of work assistants undertake and their contribution to any innovative models of service delivery. These stages can be summarised as follows:

- Stage 1: Establishing contact with senior managers (Director of Nursing or equivalent) in provider organisations to inform them about the study and to determine (a) whether or not they employ assistants within community nursing teams and (b) if they would be interested in taking part in a short telephone interview.
- Stage 2: Short telephone interview with all senior managers who indicated a willingness to participate. This helped us to scope the national use of community nursing assistant roles

(at levels 2, 3 and 4), and use of the NHS iView data source, from the Electronic Staff Record Data Warehouse, to map numbers of assistant staff in community nursing teams across England.
- Stage 3: In-depth telephone interviews with a purposive sample of service managers and team leads. These were from services that use community nursing assistants at different levels and in varied ways, and represented a range of types of organisations and regions of England.

Qualitative data were analysed for thematic content and comparative analysis was undertaken to compare and contrast data across organisations and within organisations. This was achieved by exploring similarities and differences in the accounts of managers at senior and service levels. Descriptive summary statistics were used to analyse quantitative data. Where appropriate, data from the stage 2 interviews were examined to determine proportions and patterns by organisations and regions. This was to promote the description and interpretation of the national use of assistant roles in community nursing teams. Although analyses of these data sets were independent, each provided an understanding of assistant roles in community nursing teams. These impressions from the different sources have been integrated to provide a description located within real-world contexts of health service delivery.

## Participants and setting

There have been significant changes in the provider organisations of community nursing services due to the Transforming Community Services agenda (Department of Health. *Transforming community services: enabling new patterns of provision*. 2009. URL: www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_093196.pdf). These changes were being implemented when we were collecting our data. We aimed to include the 102 new provider organisations in our census of senior managers (stage 1). Thirty-seven senior managers (Director of Nursing or equivalent) participated in stage 2. This constitutes 36% of the total number of provider organisations ($n$=102) and 49% of the organisations that we had research governance permission to contact ($n$=76). The NHS iView data source was included for all community provider organisations in England. We purposively sampled 10 organisations from stage 2, and recruited two service-level managers from each ($n$=20), as well as the 10 senior managers from these organisations. Stage 3 therefore included 30 managers in total. All of the participants had an understanding of adult community nursing services within their organisations.

## Findings

Findings from the different stages of the study are presented as main headlines below. In doing so, we aim to offer clear messages on the use of community nursing assistants (at levels 2, 3 and 4) and their potential contribution to service delivery and patient care in this setting. These findings are based on the perspectives of managers at senior and service levels in provider organisations of community nursing services.

### *Assistants promote flexibility in the community nursing workforce so as to respond to changing demands on these services*

- The increasing workload and complexity of patients' care needs in the community is impacting on the roles of community nurses and assistants.
- Assistants provide flexibility in a way that helps to meet the changing needs of community nursing team caseloads.
- Assistants are especially valuable in supporting routine care and enabling RNs to focus on more complex cases.
- The use of assistants provides opportunities for a more efficient skill mix, promoting better use of resources and providing stability to the workforce.

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### *Lack of consensus in defining the roles of community nursing assistants has created inconsistency in the ways these roles are deployed and are developing nationally*

- Roles of assistants appear to be strongly influenced by local contextual factors, such as staff shortages, organisational changes or rurality.
- There is creeping role development for assistants determined at a service level.
- There is a lack of consensus about the appropriate role for assistants, leading to a lack of consistency in the roles and responsibilities of assistants not only across different organisations, but also within services in an organisation.
- There appear to be no fixed boundaries to demarcate how far some organisations are developing the roles of assistants at bands 2, 3 and 4.

### *Ad hoc development of the assistant roles has created variations in numbers of assistants, the roles that they play and preparation for practice*

- There is no consistent pattern in the ratio of RNs to assistants in community nursing teams and there is great variability between and within organisations.
- Assistants may work beyond their band or level because of local flexibility, discretion and unpredictability of the contexts in which they deliver care.
- Different organisations experience different levels of freedom in considering new ways of delivering services and new ways of working, including roles for assistants in the delivery of these services.
- Organisations are developing strategies to ensure that assistants have sufficient competence to practise safely.

### *Assistants are core members of the community nursing team but there is a lack of clear structure for career development and progression*

- There is general enthusiasm among managers about the contribution of assistants, and their employment is regarded as fundamental to the ability of community nursing teams to deliver an acceptable and appropriate service.
- Managers are keen to ensure assistant roles provide job satisfaction and career development.
- However, there are some concerns about development of the assistant role (particularly at band 4); there are fears that assistants are being developed as a substitute for RNs.

### *Community nursing teams value the maturity and life experience of assistants*

- The majority of assistants bring a level of maturity and life experience to the role.
- This is recognised as important for delivering care in this setting, and many managers report taking the personal characteristics of an individual into consideration when recruiting assistants to community nursing teams.
- Assistants are described as providing motherly figures for the nursing team, offering emotional support and stability to the community nursing workforce.

### *Line management of assistants in community nursing teams is identified as creating challenges when trying to balance the management of risk while promoting innovation*

- Participants emphasise the importance of line management, responsibility and accountability in managing the work of assistants.
- There is little agreement across localities about how best to achieve this and a mix of formal and informal methods is evident.

- Managers would like more guidance and advice on how best to manage the role of assistants and to access examples of good practice.
- Regulation of assistants is considered important by some managers, and several organisations are developing codes of practice for their assistants in order to promote role clarity.

## Conclusions

Our scoping study highlights the opportunities and challenges associated with the use of assistants to deliver care by the community nursing team. To the best of our knowledge, this is the first study to have explored the roles of these assistants in community nursing. This study relies on the description of assistant roles in community nursing teams by senior and service-level managers. Accepting this, we anticipate the findings are likely to be of value for organisations that are considering the contribution and future roles of assistant staff as part of their plans for delivering the ambitious community services agenda. It appears that the developing roles of assistants in community nursing teams have been relatively neglected. This may require further attention at national and local levels to support and mediate the definition and development of these roles in the future.

### *Policy and practice implications*

Based on our findings, we offer the following recommendations for policy and practice. We consider these to be key areas of consideration, as the roles of assistants develop to deliver community nursing services:

- Developing clearer national guidance on the roles and responsibilities of assistants in community nursing teams to reduce local confusion and to highlight potential areas of benefit to organisations and patient care, while also allowing flexibility for local role development to meet the needs of the local patient population.
- Supporting the development of national data sets that provide reliable information on numbers and roles of assistants in community nursing teams nationally.
- Promoting clarity of role descriptions for assistants at different levels working in an organisation, and good communication across the organisation so that assistant roles are valued and integrated within nursing teams.
- Providing opportunities for national standardisation of the training and preparation of assistants to support the development of skills and competencies that are transferable within and across community nursing teams.
- Promoting the importance of managing risk by organisations to ensure safe practice by assistants, but also promoting opportunities for innovation and new ways of working to meet the challenges of future community nursing service provision.
- Encouraging organisations to learn from each other about the varied mechanisms available to clinically supervise and performance-manage assistants, who are often lone workers going into the homes of vulnerable people.
- Developing policies and processes for recruitment and retention of the assistant workforce within organisations to ensure fairness, equity and future workforce planning.
- Organisational support for assistants from managers and colleagues to develop their clinical skills and competencies to meet the demands of their evolving workload.
- Supporting organisational and national consideration of opportunities for continuing development for assistants, to support their career progression and aspirations.

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### *Future areas for research*

- Exploring the tasks and activities of community nursing assistants and how these roles are allocated, organised, managed and supervised from the perspectives of a range of stakeholders and by observing actual practice.
- Understanding the impact of community nursing assistant roles on the practice, activities and workload of health-care professionals in community settings.
- Understanding the effect of community nursing assistants on the quality and safety of patient care and patient outcomes.
- Understanding the impact of community nursing assistants on patient experience, choice and quality.
- Identifying the best standardised training packages for community-based assistants.
- Evaluating the cost-effectiveness of innovation in assistant roles in community nursing services.

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