

Role and Responsibilities of Personal Support Workers

Introduction

This document defines the role and responsibilities of registered Personal Support Workers (“PSWs”) in Ontario. PSWs play a vital role in Ontario’s health care system because they promote client dignity and independence and facilitate aging at home, thereby reducing the need for more acute health care services. They practice in a variety of care settings and their specific activities are determined by client needs. As a result, the PSW role is highly variable. This document does not aim to provide an exhaustive list of tasks carried out by PSWs. Rather, this document seeks to facilitate the integration of PSWs on care teams by providing clarity and guidance regarding the PSW role to the public, other health professionals, and PSWs. This document is not a job description; it describes the parameters of services for all registrants, rather than the specific activities that will be carried out under an employment contract.

PSWs do not have a legislated scope of practice like regulated health professionals (“RHP”). However, the activities they are permitted to perform are defined in part through the *Regulated Health Professions Act* (“RHPA”) and related legislation as outlined below.

What is Personal Support Work?

Personal support work is the provision of routine care activities, support and assistance to people with medical conditions and/or functional limitations, and their families to carry out activities of daily living with the goal of supporting client independence and promoting optimal functioning.

Personal support work is often carried out under the supervision and direction of an RHP (e.g. nurse). This supervision may come in the form of onsite supervision in institutional settings, or remote supervision in home care settings (e.g. communication via smart phone).

Registered PSWs may work collaboratively with a variety of professionals in diverse care settings. As a result, the work carried out by PSWs may overlap with that of other professional groups. This can include tasks such as range of motion exercises or controlled acts that are set out in section 27(2) paragraphs 5 and 6 of the RHPA (described below).

While tending to a person’s physical needs, PSWs also relieve loneliness, provide comfort, encourage independence, and promote the person’s self-respect.

Activities Performed by PSWs

Registrant PSWs carry out or assist with activities of daily living with the goal of supporting client independence and optimal functioning. These activities include:

- Implementing care plan interventions
- Feeding
- Toileting
- Dressing
- Bathing
- Mobility assistance (including the proper use of transfer and lifting devices)
- Medication assistance
- Activation, companionship, and social engagement
- Assistance with finances
- Reporting changes in client status or safety concerns to a supervising RHP and/or responsible family member
- Controlled acts where they are appropriately delegated by an RHP or fall under an RHPA exception (defined below)
- Documenting care provided

Registrant PSWs may undertake tasks that are documented in a client's plan of care, that are within the individual PSW's skills and training, and that are compliant with the RHPA and Policies and Procedures of the PSW Registry of Ontario ("**Registry**"). Care plans are developed by the client's care team which can include, but is not limited to, the client, their family, their physician, nurse, case coordinator, physiotherapist, and PSW.

PSWs assist clients with activities they would do for themselves were they physically or cognitively able. Care activities carried out by PSWs must be routine activities for that client, in circumstances where the client's condition is stable and/or predictable.

In some practice settings, PSWs may also be asked to carry out homemaking tasks such as shopping, light housework, and meal preparation. These activities are aspects of home support work rather than personal support work, but does not inhibit PSWs from performing these tasks.

Personal support work varies significantly based on clients' needs; therefore it is important to determine the PSW's responsibilities with regards to each client assigned to the PSW.

Personal Support Work does *not* include:

- Performing acts that go beyond assisting clients with the routine activities of living

- Diagnosing a disease or disorder as the cause of symptoms of the individual
- Performing a procedure
- Independently making changes to the plan of care
- Implementing interventions that are not provided in the care plan outside of an emergency
- Performing controlled acts that are not (a) appropriately delegated by an RHP or (b) exceptions described under the RHPA
- Prescribing any form of treatment
- Providing urgent or acute care that is not routine for the client outside of an emergency
- Performing any act for which the PSW does not have the appropriate skill, training or supervision

Client Population

Registrant PSWs provide safe, client-centred care for people with medical conditions and/or functional limitations, including:

- People with physical disabilities
- Elderly people
- People with Alzheimer's and dementia
- Palliative care clients
- People with cognitive and developmental disabilities
- People with mental illness
- Children

Controlled Acts

PSWs can perform actions called “controlled acts” set out under the RHPA *if* the actions meet an exception under the RHPA or the actions are appropriately delegated by an RHP. Controlled acts are actions that are considered potentially harmful if performed by an unqualified person. They include the following acts outlined in paragraphs 5 and 6 of subsection 27(2) to the RHPA:

5. administering a substance by injection or inhalation.
6. Putting an instrument, hand or finger,
 - i. beyond the external ear canal,
 - ii. beyond the point in the nasal passages where they normally narrow,
 - iii. beyond the larynx,
 - iv. beyond the opening of the urethra,
 - v. beyond the labia majora,

- vi. beyond the anal verge, or
- vii. into an artificial opening into the body.

Registrant PSWs who agree to perform controlled acts through delegation from an RHP or under an RHPA exemption must ensure they have the proper training and supports to carry out the task safely and competently. Registrant PSWs should ensure the act is routine for the client, that the client's condition is stable, that there are predictable outcomes to the act, that they have been appropriately trained, and that they know how to obtain assistance if required.

Controlled Acts - Exemptions

The RHPA allows someone other than an RHP to carry out certain controlled acts if they are done in the course of one of five conditions set out in section 29(1), including: "rendering first aid or temporary assistance in an emergency", and "assisting a person with his or her routine activities of living and the act is a controlled act set out in paragraph 5 or 6 of subsection 27 (2)."

Therefore, the specific acts set out above **do not need** to be delegated when they are routine activities of daily living for that client. The College of Nurses of Ontario states: "A procedure is considered to be a routine activity of living when its need, response and outcome have been established over time and are predictable." However, many employers require controlled acts to be delegated to a PSW by an RHP for each client even if the act falls under an exemption.

Controlled Acts - Delegation to PSWs

Where a controlled act is not included under the exemptions above, delegation by an RHP to the PSW is required. Performing a procedure below the dermis of mucous membrane is one such procedure. All of the actions under paragraphs 5 and 6 of subsection 27(2) also require delegation if they are not routine activities of living.

PSWs are responsible for knowing their strengths and limitations, and recognizing when they do not have the requisite knowledge, skills or judgement to safely carry out a delegated (or other) task. PSWs have the right to refuse a task if they do not believe they can deliver the care safely and effectively.

PSWs may not delegate controlled acts to another PSW, even if they are well versed in the care. Training and oversight must be provided by an RHP with the statutory authority to perform the intervention being delegated.

Each employer establishes their own policies and procedures with regards to when, how and to whom tasks can be assigned or delegated. It is each registrant PSW's responsibility to stay apprised of and act in accordance with their employer's policies regarding assignments or delegations.

Examples of care activities that are commonly delegated to PSWs by registered nurses include:

- **Controlled Acts**
 - G-tube feeds
 - Medication Administration by injection or inhalation
 - Management of indwelling catheters
 - Stoma care
 - Wound care
- **Assigned Nursing Tasks**
 - Oral medication administration
 - Range of motion exercises
 - Application of compression stockings

Conclusion

The purpose of this document is to foster role clarity for registrant PSWs by describing the appropriate parameters of activity, regardless of the setting in which the PSW practices. The document may also serve as a reference for PSWs, regulated health professionals, employers, and members of the public regarding the appropriate manner in which to engage PSWs in client care.

References

The following sources were referenced in drafting this document:

- Stakeholder consultations
- *Mosby's Canadian Textbook for the Support Worker*, 3rd Edition, S. Sorrentino et al, 2013
- *Regulated Health Professions Act, 1991*, S.O. 1991, c.18
- *Personal Support Worker Program Standard*, Ministry of Training, Colleges and Universities, July 2014
- *Practice Guideline: Working with Unregulated Care Providers*, College of Nurses of Ontario, 2013
- Documents defining professional scope published by regulatory colleges and public registers