

22 August 2013

VIA EMAIL

BC Care Aide & Community Health Worker Registry
200 – 1333 West Broadway
Vancouver, BC V6H 4C6

Attn: Bruce Bell, Program Director

- and -

Ministry of Advanced Education, Innovation and Technology
PO Box 9884 Stn Prov Govt
Victoria BC V8W 9T6

Attn: Lori MacKenzie, Director of Programs

Dear Sir and Madam:

Re: Health Care Assistant Program Recognition

We thank Mr. Bell and his staff for hosting the Health Care Assistant (HCA) Education Standards Advisory Committee meeting on June 20, 2013. The BC Care Providers Association supports the improvement of HCA's occupational competencies through education standards. Improved competencies will help enhance the quality of care for British Columbians, including seniors who receive personal care and assistance in residential care settings and in their homes.

We write, however, to express some of our concerns and to seek clarity on a number of issues regarding the draft HCA Program Recognition Guide dated June 6, 2013 (the Guide) and Timelines for Existing HCA Program Recognition dated June 19, 2013 (the Timeline).

The issues we identify in this letter add to the Registry's mounting flaws. As you know, our Association has continuously raised a number of serious concerns with the Registry, most recently in a [letter](#) dated April 30, 2013 to former Minister of Health Dr. Margaret MacDiarmid. A main concern, for example, is that rather than supporting a zero tolerance approach to elder abuse, which puts the protection of seniors first, the Registry takes the position that a "scale of abuse" model is acceptable. We remain troubled that the Registry takes this flawed position and appears headed down the path of expanding the "scale of abuse" model to private pay providers.

With respect to the Guide and Timeline, there are several issues that could negatively impact the continuing care sector – and ultimately, the seniors in our members' care. We identify three of these issues below.

1. Out of Province and Internationally Educated HCAs

The Timeline states that after July 30, 2014, “only graduates from BC HCA programs listed on the Registry website will be eligible for registration.” Taken at face value, this statement suggests that HCAs from out of province and outside of Canada will not be eligible to register, and thus, not eligible for employment in a publicly funded health care setting (or in a private setting when the Registry's scope expands).

We understand that the Registry intends to have a Prior Learning Assessment Recognition (PLAR) process in the future, which will allow out of province and international applicants who do not have formal HCA training in BC to qualify for registration by successfully completing a knowledge exam and having their skills assessed. The Timeline is at odds with this intention.

International HCAs comprise a large and important portion of continuing care sector staff. Further, with the aging workforce, employers are already facing a shrinking employee pool. We are puzzled about the mixed messages regarding how the Registry will handle applications from the substantial pool of out of province and international employees.

Please confirm that out of province and international applicants will continue to be eligible to register after July 30, 2014 – rather than “only graduates from BC HCA programs.”

2. Minimum Instructor Qualifications

The Guide states that, as a minimum, lab and practice instructors must have two or more years nursing experience in Canada. Requiring “Canadian experience,” however, may raise human rights concerns as it could be viewed as discrimination (see e.g., Ontario Human Rights Commission, “[Policy on Removing the ‘Canadian Experience’ Barrier](#),” 1 February 2013).

We are interested in receiving the Registry's explanation that two or more years of Canadian nursing experience is a *bona fide* occupational requirement for HCA program instructors.

3. English Language Test

We encourage the Registry to revisit the English language competency requirements for non-native English speaking student applicants. Accepting five different tests, for example, may create the opportunity for confusion and inconsistency. We note that the College of Registered Nurses of British Columbia only allows applicants to choose from two tests (the International English Language Testing System [IELTS] and the Canadian Language Benchmark Placement Test [CELBAN]).

Please confirm whether the Registry is amenable to undertaking further consultation regarding the English language requirements.

Conclusion

Enhancing HCA's occupational competencies through education standards is a laudable goal. As currently drafted, however, the program recognition process may hamper this objective – as it may create more barriers, confusion and complexities. When combined with the Registry's overall flaws, the program recognition process is adding to an already broken model. Given the importance of this matter to our members, seniors and their families, we remain committed to finding solutions to achieve the well-intentioned Registry mandate of protecting vulnerable British Columbians, improving standards of care and promoting professional development.

We look forward to continuing to work together, and we look forward to hearing from you regarding the above-noted matters.

Thank you.

Sincerely,



Heather Campbell, LLB
Director of Policy and Research

cc: HCA Education Standards Advisory Committee