

The Benefits of Self- Regulation: (Educational Standards)

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Personal Support Workers (PSWs) are extremely important in the healthcare system, and have been described as “the virtual backbone of healthcare delivery” (Reiche, 2017). Sadly, it has become harder to recruit and retain PSWs based on inadequate or difficult working conditions (Laucius, 2018). With an increased need for PSWs, there have been discussions around the best ways to recruit and keep workers. Such discussions have focused on whether or not PSWs should become regulated, and some see this as a possible solution for recruitment and retention (Kelly & Bourgeault, 2015).

Regulation comes in a variety of forms, so it is important to determine what form would be best for those working as a PSW. One form of regulation is self-regulation, which is when an industry implements its own rules and standards for its discipline, while keeping the public's best interest in mind (Gupta & Lad, 1983; Gunningham & Rees, 2002, Ontario College of Teachers, 2019, Ministry of Health and Long-term Care, 2005). Although self-regulation sounds simple, some believe that is not the best form of regulation for professions. For the purpose of this paper, I will explore the benefits of self-regulation, and how this may help with the current PSW crisis. In doing this, I will outline the main fallbacks to self-regulation, the positives that it can hold for a profession, and outline what steps should be taken in order for PSWs to achieve self-regulation.

There are many industries that are self-regulated, however not all of them began with self-regulation in place. The Ministry of Health and Long-term Care (2005) shares that in order for self-regulation to occur, a profession must show a willingness to be regulated. The profession needs to have a high commitment level from staff, accept the costs and new responsibilities

associated with the regulation, and be able to maintain a professional association (Ministry of Health and Long-term Care, 2005). Additionally, the professions leadership must have the ability to distinguish between the public's best interest and the interest of the organization, and ensure that the public's best interest comes first (Ministry of Health and Long-term Care, 2005). Some believe that the PSW profession may not be prepared to face these new responsibilities (Kelly & Bourgeault, 2015; Ministry of Health and Long-term Care, 2005). In 2006, the Health Professions Regulatory Advisory Council (HPRAC) considered allowing PSWs to become self-regulated, but decided against it due to ambiguity around the profession's scope of practice, non-standardized knowledge held by workers, and the fact that regulation would increase costs in human resources (Kelly & Bourgeault, 2015). Additionally, HPRAC felt that there was not widespread support from the PSW profession, indicating that self-regulation may not work, as employees may not be willing to comply with new rules and guidelines (Ministry of Health and Long-Term Care, 2005). HPRAC concluded that even though the role of a PSW is becoming more complicated, and the job requirements are always changing, self-regulation is not the way to solve such issues (Kelly & Bourgeault, 2015).

Kelly and Bourgeault (2015) outline that when a profession is pursuing self-regulation, they need a group of workers to advocate and create various documents to make legislative changes. Kelly and Bourgeault (2015) found, through research on social media websites, that PSWs expressed a want and need to be self-regulated, but expect the changes to 'come from above'. This indicates that perhaps there are not enough workers willing or able to come forward and start the self-regulation process. As already noted above, in order for self-regulation to become a reality, there needs to be a large enough group of workers, and a commitment from those workers to make any changes (Ministry of Health and Long-Term Care, 2005).

Sadly, there appear to be strong points outlining that self-regulation is not beneficial for the PSW profession. However, there are benefits to allowing this profession to be self-regulated, and these can be seen from other professions who have taken this path.

“Self-regulation recognizes the maturity of a profession” (Ontario College of Teachers, 2019), and recognizes the knowledge, skills, and capabilities those within the profession hold (Ontario College of Teachers, 2019). Teachers in Ontario are self-regulated, and outline that this form of regulation is not only an honour, but it has positive effects on the profession (Ontario College of Teachers, 2019). Being given the opportunity to self-regulate shows that a profession has the specialized knowledge to govern themselves and determine what rules and standards would be beneficial for employees, as well as for those they serve (Ontario College of Teachers, 2019). This type of regulation allows the organization to implement standards, and discipline those who do not meet the requirements (Ontario College of Teachers, 2019). It also ensures that those who are members of the regulated profession remain competent and qualified in their role and follow all guidelines appropriately (Ontario College of Teachers, 2019). This ensures that the public, or the “customers” of the profession are protected, and will not be given inadequate services (Ontario College of Teachers, 2019; Professional Engineers Ontario, 2018).

Additionally, a self-regulated profession would personally investigate any complaints from the public about inadequate or unprofessional services, and use their own disciplinary actions to resolve the problem (Professional Engineers Ontario, 2018). Each of the benefits above allow a profession to create guidelines that are most effective for them. This will increase the likelihood that work will be completed successfully, and allow employees to make changes to things that are not working. Based on the fact that self-regulation has been successful for teachers in Ontario, one may believe that it could be the same for PSW’s. PSW’s are the frontline staff in

most hospitals, long-term/ retirement homes, and family homes, so are aware of the best ways to provide care, ensure care is adequate, and enforce rules and guidelines (Home Care Ontario, 2014; Laucius, 2018).

Gunningham and Rees (2002) outline that another benefit to self-regulation is that members of the profession are likely to fall prey to peer pressure, and internalize the values and standards of conduct. This increases employee compliance, and ensures that there is better behavior in the workplace (Gunningham & Rees, 2002). Work completed by Dubbelt, Demerouti and Rispens (2016) found that women benefit the most by using self-regulation while at work. Women who are self-regulated have increased performance, increased functioning at work, and are more likely to self-reward (Dubbelt, Demerouti, & Rispens, 2016). The majority of PSWs are women, indicating that allowing them to self-regulate, may increase performance at work and ensure better care for clients (Lum, Patel, Holloway Payne, & Ying, N/A).

Self-regulation also will be a major benefit to the financial infrastructure of this province. Currently, Ontario health care has become dependent on Ontario's 'shadow health force'. The 'shadow health force' is PSWs and Home care workers who individually work with their clients (usually referred from the LHINs), and are offered cash payments for completing additional hours of care. Families faced with a critical shortage of PSWs in Ontario often feel compelled to secure services for their loved ones, using cash. This results in the 'shadow health force', which is not accountable to any professional body and does not contribute to income taxes. This then causes the government to make cuts, and forces even more people to take part in the 'shadow health force'. This is not only a risk to the safety of Ontarians health, but also to the economic health of this province.

Finally, one major benefit of self-regulation is that this title gives a profession credibility (Mysicka, 2014; Ontario Securities Commission, 2019). Once a profession is viewed as credible, there is likely to be an increased interest in the profession (Mysicka, 2014; Ontario Securities Commission, 2019). This will not only increase the numbers of new employees entering the field, but will also result in more individuals using the profession, making the field more legitimate (Ontario Securities Commission, 2019). Additionally, Gunningham & Rees (2002) share that self-regulation flourishes when both the public and the profession have an interest in self-regulation. Therefore, if the benefits and reasons behind the PSW profession becoming self-regulated are shared with the public, they might see the importance of it, and provide support. Additionally, sharing this information with the public may increase interest in the field, and help with recruitment of PSWs.

In 2010, Kendall Raynor completed work that indicated that 85 percent of Healthcare Support Workers (PSWs) felt that they should become regulated. This shows that a large amount of staff think regulation would benefit them in the workplace. However, seeing both the negative and positive aspects of self-regulation, for some it remains difficult to determine what would be best for PSWs. Significant literature outlines that self-regulation would be ideal, but there are a few steps to take before self-regulation can become a reality.

Before becoming an entirely self-regulated profession, Personal Support Workers and their organizations need to consider a few things. In 2015 Kelly and Bourgeault argued that PSWs in Ontario do not always require formal training or need to pass any tests (Kelly & Bourgeault, 2015). Since this time the OPSWA and its partners have created a provincial standard test to measure skill sets and standardize PSW training. Furthermore, since 2015 the variety of programs that one can take to learn about the job or complete hands-on, on-the-job

training has been greatly reduced. For example by 2021 PSW programs offered by the Ontario Board of education will be moving to a quality assurance model and no longer be formally accredited, and by extension, places the viability of these programs in question. However, the OPSWA will work with these programs moving forward to ensure these educational opportunities are not lost. Over time this will effectively standardize education and training across the province of Ontario. Combined with the standardized test already developed, the OPSWA will have firmly satisfied this pre-requisite.

These achievements by the OPSWA marry perfectly to The Ontario Ministry of Health and Long-term Care (2005) position, that shares that there should be mandatory standardized educational outcomes for personal support worker programs. This means that all PSW's would receive the same level of training, have the same educational standards, and possibly be viewed as more credible in the workforce (Ontario Ministry of Health and Long-term Care, 2005; Vaughan, Melling, O'Reilly, & Cooper 2014).

The successes of the OPSWA in standardizing education is contrary to the efforts of past Ontario governments. For example, in 2013, the Ontario Ministry of Education announced that it would be creating a PSW educational standard program (Kelly & Bourgeault, 2015). Between May and June of 2013, an online survey was carried out, but results were not shared with the public (Kelly & Bourgeault, 2015). However, the Personal Support Network of Ontario (PSNO), CUPE Ontario, and the Ontario Nurses Association (ONA), all shared that they were strongly in favour of this new standard (Kelly & Bourgeault, 2015). However, the PSNO and ONA did share concern of how this may affect PSW's already working in the field (Kelly & Bourgeault, 2015). The authors shared that due to sporadic, and not always well-paid positions, it may be challenging to expect PSW's to go back to school for the standardized training (Kelly &

Bourgeault, 2015). In 2014, the Ontario governments Ministry of Training, Colleges and Universities wrote a document outlining the new “PSW Program standard”, which outlined the new program and the standards that will be put in place (Ministry of Training, Colleges and Universities, 2014). Although this new program standard was written in 2014, and the government outlined that all PSW’s must complete a program accredited by the Ministry of Training, Colleges and Universities, it does not appear that the standard is being implemented everywhere (Ministry of Training, Colleges and Universities, 2014; Personal Support Worker HQ, 2019).

Self-regulation for the Personal Support Worker has become an axiom. It will allow them to be viewed as credible, create appropriate guidelines for their profession, and help with recruiting new workers. The OPSWA agrees that it makes sense to ensure that standard education is in place first. The efforts made since 2015 have given PSWs a firm educational foundation, and have made the process of self-regulation for PSWs easier in Ontario. Most importantly, the new educational foundation will protect the safety of vulnerable Ontarians and from Ontario’s ‘Shadow Health Force’.

Works Cited

Dubbelt, L., Demerouti, E., & Rispens, S. (2016). Self-regulation: Women’s key to unlocking the resources in the self-domain. *Zeitschrift fur Psychologie*, 224(1), 46- 56.

Gunningham, N. & Rees, J. (2002). Industry Self- Regulation: An Institutional Perspective. *Law & Policy*, 19(4), 363- 414. doi: <https://doi.org/10.1111/1467-9930.t01-1-00033>

Gupta, A. & Lad, L. (1983). Industry Self-Regulation: An Economic, Organizational, and Political Analysis. *Academy of Management Review*, 8 (3), 416- 425.

Home Care Ontario. (2014). Home Care Services: Personal Support Work. Retrieved from: <https://www.homecareontario.ca/home-care-services/services/personal-support>

Kelly, C.& Bourgeault, I. (2015). The Personal Support Worker Program Standard in Ontario: An Alternative to Self-Regulation? *Healthcare policy*, 11(2), 20- 26.

Kendall Raynor, P. (2010). Regulation for support workers may take years to achieve—NMC. *Nursing Standard*, 24(27), 6.

Laucius, J. (2019). We are in crisis': Personal support workers are the backbone of home care in Ontario- and there aren't enough of them. *Ottawa Citizen*. Retrieved from: <https://ottawacitizen.com/news/local-news/when-the-backbone-is-broken>

Lum, J, Patel, A, Holloway Payne, L. & Ying, A. (N/A). Canadian research network for care in the community- Personal Support Workers: Survey Monkey Results. Retrieved from: http://www.psno.ca/uploads/1/0/1/9/10197937/psno_crncs_survey_results.pdf

Ministry of Health and Long-Term Care. (2005). The regulation of personal support workers. Minister's Referral Letter. Retrieved from: <https://hprac.org/en/reports/resources/PSW-FinalReportSept27-06.pdf>

Ministry of Training, Colleges and Universities. (2014). Personal Support Worker Program Standard. Retrieved from: <http://www.tcu.gov.on.ca/pepg/audiences/colleges/progstan/health/41469.pdf>

Mysicka, R. (2014). Labour productivity among Canadian professionals is in the bottom fifth among all sectors. *Financial Post*. Retrieved from: <https://business.financialpost.com/opinion/rein-in-self-regulated-bodies>

Ontario College of Teachers. (2019). Professional Self Regulation. Retrieved from: <https://www.oct.ca/about-the-college/what-we-do/professional-self-regulation>

Ontario Securities Commission. (2019). Marketplaces, SROs & Clearing Agencies: Self-Regulatory Organizations (SROs). Retrieved from: https://www.osc.gov.on.ca/en/Marketplaces_sro_index.htm

Personal Support Worker HQ. (2019). New Education Standard for Personal Support Workers. Retrieved from: <https://personalsupportworkerhq.com/standards/>

Professional Engineers Ontario. (2018). About PEO: How We protect the Public. Retrieved from: http://www.peo.on.ca/index.php/ci_id/1801/la_id/1.htm

Reiche, D. (2017). Personal Support Workers in Health Care. *Local Employment Planning Council for Elgin, Middlesex, and Oxford*. Retrieved from: http://www.localemploymentplanning.ca/images/uploads/Health_Care_Report.pdf

Vaughan, S., Melling, K., O'Reilly, L, & Cooper, D. (2014). Understanding the debate around regulation of support workers. *British Journal of Nursing*, 23(5), 260- 263.