

Task Shifting Electrocardiograms (ECGs) to the Medical Laboratory Profession

Task shifting is a process of delegation. Tasks are assigned, where appropriate training and scope is determined, to workers who may be less specialized in the task than another profession.¹

A flexible model of health care duties within and between professions has occurred in recent years, especially in rural and remote areas as well as developing countries, where human resources are limited. Task shifting is considered a “promising policy option to increase the productive efficiency of the delivery of health care services, increasing the number of services provided at a given quality and cost.”² The patient-centred movement from “task delegation” to a “team care” environment is a globally recognized trend, fostering role evolution within legal frameworks and scopes of practice.³

For medical laboratory professionals (MLPs; includes Medical Laboratory Technologists [MLT] and Medical Laboratory Assistant/Technicians [MLA]), the Canadian Society for Medical Laboratory Science (CSMLS) is aware of current and potential task shifting for MLPs. The role MLTs now play in radiographic imaging procedures is one example.

In a recent CSMLS survey (N=724), MLPs were asked for their perspective of ECG task shifting trends as most provinces and territories lack delegated acts for this procedure. Below are highlights of findings.

How often are ECGs conducted by MLPs?

Forty-four per cent of MLPs indicated they conduct ECGs as part of their duties, with MLA conducting ECGs most often (28% MLTs vs 62% MLAs). Differences were noted in the workplace setting; MLTs often conduct the procedure within the hospital while MLAs practise in private laboratories or clinics. The top four provinces employing ECG enabled MLPs most often are Alberta, British Columbia, Manitoba, and Prince Edward Island.

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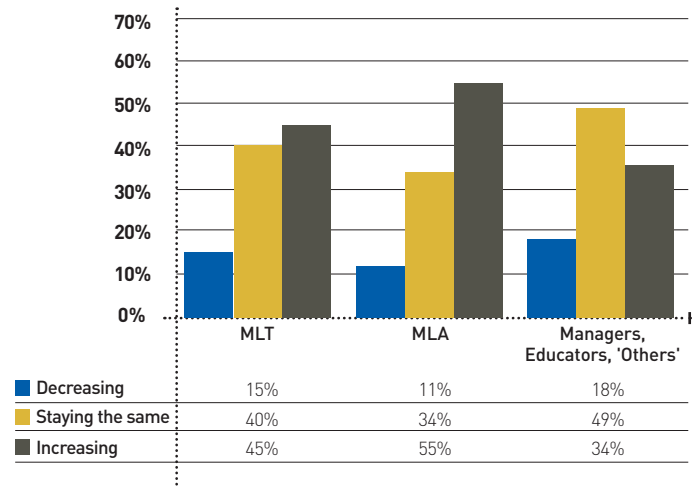
According to respondents, MLPs who perform ECGs do so frequently. For MLAs, the youngest generation was mostly likely to conduct ECGs daily or weekly. MLTs in the youngest and oldest age brackets conducted ECGs most frequently. These findings suggest there may be patterns in hiring and training models associated with education and experience.

What is the ECG task shifting trend?

Overall, it is perceived that there is an increase in ECG task shifting for MLPs, with greatest emphasis for MLAs. However, other stakeholders were less likely to recognize this trend.

New Brunswick and Nova Scotia respondents felt that ECG workload would remain consistent, in line with delegated acts and regional policies. In contrast, the more western provinces and Ontario were amongst the highest believers that the trend was increasing.

ECG TASKING SHIFTING TRENDS AS PERCEIVED BY:



What type of ECG training should be required for MLPs?

The majority of Canadian MLA programs incorporate ECG curricula (n=19) while MLTs acquire this training on the job. Three-quarters of respondents believed a certificate-based continuing education course should be the minimal requirement to demonstrate competence and that certification was not required. This notion was upheld during a regulator discussion held at LABCON 2016.

As our health care system continues to mobilize human resource efficiency initiatives, the issue of who will do what work is likely to remain at the forefront of policy debates. ECG task shifting is one such conversation that should be monitored by employers and academic programs. Within the debate, emphasis should remain on quality assurance mechanisms and evaluation procedures to assess the strategic value of task shifting over time.

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