

East Midlands Improvement and Efficiency Partnership



Nottinghamshire Leads the Way in Dementia Care Training ▼



Quality Development Officers learn how e-learning works

Nottinghamshire successfully tests new training approach in dementia care ▼

As a result of a project in Nottinghamshire, access to training and training materials for use in dementia care are set to improve throughout the East Midlands region.

The project was led by the Joint Improvement Partnership (JIP) Prevention and Early Intervention Board and funded by the Department of Health through the East Midlands Improvement and Efficiency Partnership (EM IEP).

Nottinghamshire County Council was selected to become an exemplar site for the testing of training materials. The pilot included an innovative mix of e-learning and face-to-face training and will set new, consistent standards in dementia care training, as well as providing a cost effective alternative to previous training models. The training is being rolled

out to the workforce in the social and healthcare sector from January 2011. The training will be adapted to the new Qualifications Credit Framework Unit for Dementia.

“This project has been a significant milestone in improving the training for people working in dementia care. At a regional level, we have identified issues and delivered outcomes which will ultimately help those working in dementia care at a national level. Although this is a pilot, the outcomes will reach a far wider audience, supporting the national strategy set out by the Department of Health in 2009.”

David Pearson
Corporate Director,
Adult Social Care and Health,
Nottinghamshire County Council
Chair of the JIP Prevention and
Early Intervention programme

The necessity to improve training ▾

There are estimated to be over 750,000 people with dementia in the UK and, due to our ageing population, numbers are expected to double in the next 30 years. This means that not only is there is an increase in the need for dementia care, but also for a standardised approach to this care.

In November 2009, the Department of Health published 'Living Well with Dementia - a National Dementia Strategy', which set out a vision for transforming dementia services including workforce competency. Organisations which provide

support or care services to people with dementia need to understand more about the condition in order to be able to provide quality support now and in the future.

A Department of Health study concluded that there were no consistent standards in the training for people working in dementia care, and this was true in the East Midlands. The Social Care Dementia Workforce Project, sponsored by the JIP Prevention and Early Intervention Programme Board, was set up in order to address these training needs.

The pilot: Addressing the training challenges ▾

To address the training needs a steering group was set up to oversee the dementia awareness pilot project. This included experts or leads in dementia from: Skills for Care, local Primary Care Trusts, Nottinghamshire County Council staff and independent sector care providers. The remit of the group was:

- Selection of the pilot group.
- Development of resources.
- Organisation, development and delivery of the training programme.
- Evaluation of the project.
- To make recommendations and report on the results of the project.

Nottinghamshire County Council selected a sample of 13 providers of varying sizes and quality, including both residential care homes and home care.

A challenge for the training pilot was to engage front line care staff who have little time to devote to training. The training also had to meet certain criteria i.e. it had to be:

- Possible without taking people out of their setting.
- Cost effective.
- Sustainable and deliver transferable skills.
- Possible, with limited back filling of roles.

The pilot: A blend of training activity ▾

When looking for a training solution, Nottinghamshire County Council adapted the successful Gloucestershire County Council dementia training model, which is based on the Skills for Care knowledge skills set for dementia and focuses on how to communicate with someone with dementia.

Based on this model, the Nottinghamshire County Council programme used the Kwango e-learning Dementia Awareness online course, which provides basic level training and can be done at the learner's own pace. E-learning also delivers cost benefits including savings on time, travel and training materials, as well as the cost of



Face-to-face training gets underway

the trainer. E-learning would cost £1 per person if all the social care workforce accessed it, whereas on average, it costs £30 per person to do face-to-face training, excluding time out of the work place and travel to the course venue.

The e-learning took place in August 2010 and was followed by a one day face-to-face training course, designed by Nottinghamshire County Council's Learning and Development Unit and delivered by an experienced and knowledgeable in-house Staff Development Officer. The courses were delivered

in various locations around Nottinghamshire from September to November 2010.

This blend of modern online training, which could be done in the trainees own time, mixed with the traditional, face-to-face training approach and QUIS (Quality of Interactions Schedule), was felt to be an appropriate approach for the Nottinghamshire pilot. (QUIS is an observational, evaluation tool, developed by Dean, Proudfoot and Lindsay and adapted by David Sheard of Dementia Care Matters.)

Evaluating Success ▼

In order to understand the success of the pilot training, evaluation techniques were put in place for both the e-learning and face-to-face training.

E-learning

Evaluation forms were completed before and after the e-learning experience to measure the improvement and impact of the pilot training.

The 13 care organisations taking part in the pilot employed approximately 800 staff between them, of whom 50% (400) were asked to complete the e-learning training. Of these 400 86% accessed the e-learning and 104 completed the evaluation.

- 85% confirmed they were new to e-learning which, in itself, posed a challenge as managers had to spend time reassuring those taking part that they would be able to follow the training using a personal computer.
- 46% of those who felt that they would need support in using a computer suggested that help from their manager and instruction during access would be the preferred support mechanism.

Following the training the organisational and behavioural impacts anticipated are as follows:

- 57% said that, following the training, they would change the

way they support people with dementia.

- 59% confirmed that where appropriate changes to support are required they would amend person-centred plans accordingly.
- 80% said they would share knowledge with their colleagues.

Face-to-Face

The face-to-face training was evaluated using an observation tool called Quality of Interactions Schedule (QUIS), where the observer notes down the minute by minute interactions between the people in the room, for example

staff, service users, relatives and visitors. The interactions are measured against the five types of care: positive social, positive care, neutral, negative protective and negative restrictive.

178 employees took part in one of the 14 one-day training courses and the observer reported witnessing excellent individual practice at the homes. As a result of the QUIS observations, five care providers have made major changes in their care homes and the advice was acted upon by all 11 care homes who took part.

Challenges identified ▾

The pilot and evaluation work identified several challenges, which are being addressed as the training is rolled out:

Time commitment: Homecare providers found it difficult to release staff for a full day's training.

IT literacy: There was some resistance to e-learning because some trainees did not feel they were computer literate or did not have access to a computer at work.

Attendance at face-to-face training: Only half the staff who undertook e-learning also attended the face-to-face training. This was predominantly due to the timing of

the training i.e. too soon after the summer holiday break.

Ways of working: Some trainees felt that systems and processes could hinder the implementation of the learning in some care settings.

Location: Requests were received to spread the geographical location of the training courses, which led to some courses being held near to groups of care homes while others were delivered for a single care provider. On reflection, mixed provider sessions could have been more beneficial for trainees in terms of a greater sharing of knowledge and experience.

Conclusion and recommendations ▾

The Nottinghamshire pilot succeeded in exploring the opportunities for improving dementia training pathways in the social care sector, within the County.

As a result of the feedback received, the e-learning has already been updated and the scheme is now being rolled out to a wider audience, which will include service users, their relatives, carers and the voluntary sector. The face-to-face training has also been amended and will now include a resource pack, which the dementia leads in each

care setting can cascade throughout their respective organisation.

The Nottinghamshire model is now being promoted to all staff in the social and healthcare sector. Everyone will have access to the e-learning and two face-to-face training sessions are being organised. This will help ensure there is consistency in standards of training across Nottinghamshire.

The care providers on the pilot will act as ambassadors to promote this programme as it is rolled out.



Face-to-face training continues in the East Midlands

The following recommendations have been made:

- Dementia leads should be identified in each care organisation with a defined list of responsibilities, skills and knowledge including:
 - Going through the e-learning and helping staff to undertake e-learning via individual or groups sessions in their care setting or at home.
 - Attending the amended face-to-face training and rolling this in their care settings.
 - Sharing their dementia knowledge and experience with other providers, staff, service users and relatives.
 - Staying abreast of the latest developments in dementia.
 - Championing dementia care at staff meetings.
- To continue to use QUIS observations as it was felt this is a good tool for gaining practical help from an independent source.

- Quality Development Officers who visit the care providers on an annual basis should develop questions around dementia for their quality audits.
- The dementia awareness training should form part of a dementia training pathway that all care providers should aspire to achieve.

“As the portfolio Holder for Adult Social Care and Health, I am pleased to see that the department is at the forefront of this innovative project. From my recent visits to local care providers, I have seen at first hand the success of the work that is being done to raise awareness of dementia and dementia training pathways, and the difference this can make to a person’s quality of life.”

Councillor Kevin Rostance
Portfolio Holder for
Adult Social Care and Health,
Nottinghamshire County Council

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East Midlands Improvement and Efficiency Partnership Case Studies

The East Midlands Improvement & Efficiency Partnership is committed to celebrating the successful, innovative and imaginative project work that exists in the East Midlands region.

The EM IEP Support Team publish case studies showing how East Midlands councils are improving services, and delivering significant improvements and efficiencies.

The case studies are intended to inspire councils in the region, and indeed nationally, to transform services and benefit from the processes developed by those councils that have pioneered the way forward.