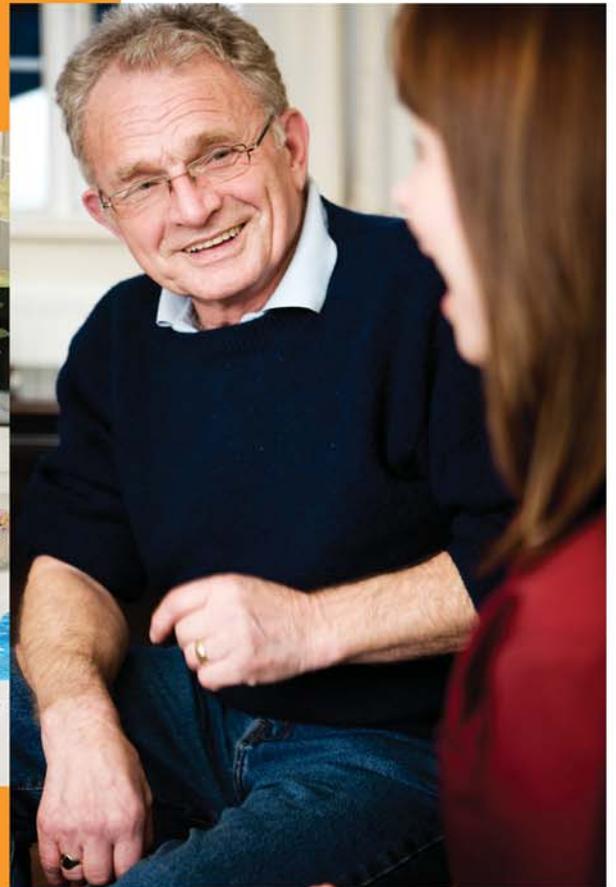


# Supporting Unpaid Carers Access to Training in Wales

Research report



Noddir gan  
**Lywodraeth Cymru**  
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# Supporting Unpaid Carers Access to Training in Wales

## Research Summary

### Summary Introduction

Research was carried out in January and February 2012 on behalf of Care Council for Wales. A wide range of stakeholders were identified and contacted in Wales. Most information was gathered via structured discussions either in face to face meetings, telephone interviews or feedback from presentations to groups of unpaid carers, their representatives and supporting organisations. In general the research focus was enthusiastically welcomed and seen as timely in view of the Carers Strategies (Wales) Measure 2010.

There was a large degree of consistency and agreement about training and development for unpaid carers. Desk based research also took place to identify initiatives, training and units already available to unpaid carers and this was incorporated in the research. The work of the carer representatives on the Care Council for Wales in developing a proposed 'support programme for unpaid carers' was also highly relevant and was included.

### Findings and recommendations:

#### Current training and learning

Training and development was found to sit in three broad areas:

- 1. Supporting the individual and practical care skills** – these were often seen as essential skills and knowledge for the caring role to be undertaken safely. Some specialist areas have already been accredited with health.
- 2. Living with the impact of the caring role** – delivered in very diverse ways again seen as essential for the carer to be able to access for their own health & well-being
- 3. Personal development & leisure** – wide ranging, often 'taster' sessions to encourage socialising, reduce isolation, build confidence and assist in recognition and acquisition of skills including employability, management, IT and 'expert' carer/trainer

**Gaps in training and development** were often identified which were actually in relation to access (location, timing, travel, funding and respite) or resources rather than no training or learning being available. Developments in one geographical area, organisation or specialism were not known about by others.

## 1. A core of training

The research identified wide spread support for a core cluster of training and learning that reflected the generic **practical tasks of caring** and dealing with the **impact of the caring role**.

There was a good consensus about what this core should contain and some work has already been undertaken by Carer Representatives Members of the Care Council for Wales to develop a clear proposal to meet this need across Wales. There was support for this core to be agreed, made available and aspects accredited so that participants can undertake assessment and gain formal recognition and 'credit' for their achievement, though this should not be compulsory. Accreditation can be a positive option available for those carers who wish to undertake it and lead to further learning, qualifications and employment (including into the care sector).

## 2. A national approach

There was a good consensus about how a 'National support programme' could promote and make accessible this core training and specialist areas to reflect the requirements of the Carers Measure to have a **'strategic approach' and consistent, accessible training in a core of essential areas**. An all Wales approach was seen to address some of the common problems such as:

- Promotes equality of access, content, and quality standards
- Increases the opportunity to identify needs and commission shared learning as required
- Share costs, strengthen partnerships, coordinate supply and avoid repetition
- Developing and supporting a pool of 'expert' carer trainers involved in delivery to peers and service providers

Key concerns were:

- Not flexible and responsive to local or individual needs

- Who would pay for development work and resources
- This should not be an attempt to 'professionalise' carers or make the training compulsory
- If not undertaken carers should not be made to feel they are 'failing' or not caring well

### 3. Accreditation of training

Both benefits and concerns were raised about accreditation and the resulting assessments for unpaid carers training and learning. Generally there was support for accreditation for both key aspects of the 'core' of training and more specialist areas. These would cover condition specific e.g. living with cancer and the recognition of skills developed in the caring role such as a '**management skill set**' (including project management, financial management, negotiating skills, working in partnership, presentation skills, assertiveness, decision making, time management, stress management) and the '**expert carer**'. The greatest support was thought to be for younger carers who may be looking to employment and further learning or qualifications.

A range of specialist areas have already been successfully developed into units and accredited for example the Credit for Patients programme from Health and Welsh Government and the Early Support programme for parent carers. Further QALL accreditation is being sought by the Alzheimer's Society for their Carer support training programme and MIND for their Mental Health First Aid programme.

The strongly voiced caveat to the development of accredited training and learning for unpaid carers was that this should be **available** but not seen as a **requirement**

### 4. Changes to assessment

For accreditation of training programmes in the context of the CQFW QALL, learning would need to contain: learning outcomes and assessment criteria, individual assessment, quality assurance of the assessment, requirements of the assessor for example relevant occupational knowledge and experience of assessment and standards of 'operating' (such as appeals, equal opportunities and registration procedures). This is achieved by working through an Awarding Organisation who will approve and monitor the organisation providing the accredited learning. The **assessment methodology** for any new or proposed units will need to offer straight forward, realistic and enjoyable ways to produce evidence of learning and skills. It would also need to take advantage of emerging media solutions to enhance access.

## 5. Sustainable delivery

The role of health & social care workers and service provider organisations

A model is emerging whereby social care and other paid service providers offer training and '**demonstrations**' to unpaid carers in their own homes, local care homes, day centres or similar appropriate resources (short periods of respite may be possible at the same time). This could be supported by recognising and enhancing the '**demonstration**' or '**instruction**' role of care workers through the development of QALL or QCF units for CPD that formalise the activity and offer a degree of standardisation and quality in its conduct. Demonstrating may be more acceptable model of delivery to avoid concerns about risks and liability.

### The '**expert carer/trainer**'

This role is clearly emerging across Wales and involves unpaid carers in

- delivering training for peers and health & social care workers
- support for peers including learning to be a 'champion'
- challenging and representing others
- presentation skills

It is thought these skills would benefit from accreditation or mapping to existing qualifications for recognition, efficiency and standardisation. This area is likely to grow as carers are increasingly involved via the Carers Measure and can aid recognition and value the contribution being made by these individuals

## 6. Making good use of what we have and data collection

Another way of supporting sustainable delivery is to make changes to the commissioning of care services in order to promote the training needs of unpaid carers, encouraging care provider organisations to innovate and collaborate through shared training opportunities or extensions to staff job roles to formalise the educational element of support. Data collection could be improved with minor changes to registrations and evaluations of existing programmes such as the Social Care Workforce Development Programme, MIND Mental Health First Aid and Applied Suicide Intervention Skills Training programmes to identify specific take up by unpaid carers.

## **7. Smart solutions - using electronic resources to overcome barriers**

Emerging media needs to be recognised as offering an answer to some of the barriers to accessing training and its use in building support networks that could promote learning and peer support. Online learning and assessment resources, social networking and “ask an expert” opportunities could all be delivered through existing media platforms. Work in this area is being taken forward in Scotland where rurality is recognised as a serious barrier to take up of training by unpaid carers.

## **8. Joining up – a central resource and exchange**

Information hubs have been identified across Wales through this research. These exist in the statutory and third sector as well as health. No one central clearing house is in place for this information. A central resource that collates information from a range of organisations such as the Carers Learning and Information Network, the Princes Royal Trust, Carers Wales could cover learning resources, local initiatives, available qualifications, accredited units, training courses, funding opportunities and trainer lists (including expert carers).

## Introduction

Research was carried out in January and February 2012. In line with project requirements young carers were not included in the scope, though parent carers were (that is caring for a child). A wide range of stakeholders were identified and contacted and this was facilitated by the Care Council Wales. Most information was gathered via structured discussions either in face to face meetings, telephone interviews or feedback from presentations to groups of unpaid carers, their representatives and supporting organisations. A list of those involved is contained in Appendix 1 and the structured discussion template is Appendix 2. In general the research focus was enthusiastically welcomed and seen as timely in view of the Carers Strategies (Wales) Measure 2010. There was a large degree of consistency and agreement about training and development for unpaid carers. Every discussion seemed to add at least one new idea to the research and the stakeholders generously shared their thinking and experiences. The research evolved as new leads were given and followed up and could certainly have continued beyond the timescales allocated. The methodology was very effective.

Desk based research also took place to identify initiatives, training and units already available to unpaid carers and this was incorporated in this research. The work of the carer representatives on the Care Council for Wales in developing a proposed 'support programme for unpaid carers' was also highly relevant and has been included.

## **A picture of current training and development undertaken**

Training and development was found to sit in three broad areas:

- **Supporting the individual and practical care skills**
- **Living with the impact of the caring role**
- **Personal development & leisure**

Learning and development activities which are currently occurring in each of these areas have been summarised in the tables below.

### **Supporting the individual and practical care skills**

Many of these areas were seen as essential for both the unpaid carer and the individual they are supporting. Some have already become accredited and therefore have a level of quality assurance and standardisation built in, which was widely supported. The benefit of 'off the shelf', all Wales packages of learning in key areas of skill and knowledge which are easily accessible, was also greatly supported. This would be especially welcomed in areas where resources are thinly spread as is the population and was seen as a positive way to address resource issues.

The involvement of health was far more significant in these 'practical care skills' and there has been success in their Expert Patient Programme now called the Education of Patient Programme (EPP) with over 6000 people having completed it some of whom would be unpaid carers. Support was also high for a **core** to be agreed and implemented, possibly with accreditation. There was a good consensus about what this core should contain and some work has already been undertaken by Carer Representative Members of the Care council for Wales to develop a clear proposal to meet this need across Wales. Specialist areas could then be added on and there are many already developed. Again a range of these specialist areas have been developed into units and accredited as part of the Credit for Patients programme from Health and Welsh Government.

Concerns were raised during the research about peers or workers having responsibility for training unpaid carers and the liability and risks in this. Some providers have started using ‘**Demonstrating**’ rather than ‘**training**’ in titles of programmes for example ‘demonstrating safe moving’.

Training and development identified	Details including accreditation/ recognition and success/difficulties
Moving and positioning	All Wales Moving & Handling Passport is used with carers in some areas. Also St John’s Ambulance has developed a Safe Moving course for carers. This may be moving people or objects.
First aid	Carers participate in assessed courses leading to certification alongside social care workers and some participate in specialist courses for unpaid carers which may be adapted to run over several shorter sessions to improve access. For example St John’s Ambulance run a carers version of First Aid
Assisting with or administering medication	To cover impact & common side effects, different types of medication, safe administration, terminology, storage, complementary medicine
POVA and POCA	General safeguarding awareness. May be specifically developed for unpaid carers or for a wider audience
Supporting personal care and hygiene	To include mouth care, skin care and managing incontinence
Supporting eating and drinking	
Dressings	
Person centred care	
Mental health awareness	
Dementia awareness	This has been provided by the Alzheimer society

Training and development identified	Details including accreditation/ recognition and success/difficulties
Wheelchair training	Has had a very good uptake and is linked to mobility assistance
Alcohol and substance misuse	May also include aspects of self harm
Using aids, adaptations and assistive technology	May be training with the individual they are supporting e.g. Bobath teach parents how to support their own child
Makaton	
Multi sensory training	
Sensory impairment	
Epilepsy	
Early Support	<p>For parent carers of children with disabilities. Two substantial units have been accredited at Level 4.</p> <ul style="list-style-type: none"> <li>• Support disabled children and young people and those with specific requirements</li> <li>• Key Working for Children with Additional Needs and their Families</li> </ul>
Living with cancer (3 levels)	<p>Part of the units developed by Agored Cymru to support the Credit for Patients programme aimed at 'patients' and their unpaid carers. Units are at a variety of levels from Entry to level 2 and are recognised on the CQFW QALL so carry credits in Wales. They currently are funded by NLIAH (Welsh Government). Workbooks have been developed for these units or assessment can be by oral questions from the assessor/tutor.</p>
Living with stroke	As above

<b>Training and development identified</b>	<b>Details including accreditation/ recognition and success/difficulties</b>
Living with diabetes	As above
Living with angina	As above
Living with Aspergers syndrome	As above and training is also offered through Social Services for Autism Spectrum Disorder
Self manage bandaging	As above
Cardiac rehabilitation	As above
Recovering from cardiac surgery	As above
Living with chronic obstructive pulmonary disease	As above
Routes to recovery	As above
Self management of long term conditions	As above
Awareness of Huntingtons	Not specific to carers but accessed via Social Care Workforce Development Programme (SCWDP)
Awareness of Parkinsons	
Podiatry support and basic foot care	
Understanding behavioural aspects of the individual being supported	Also called positive behaviour management

## **Living with the impact of the caring role**

Training and development opportunities in these areas were delivered in diverse ways and at differing levels. This included leaflets, websites, training courses, peer support, carers forum (may be online), newsletters, videos, annual carers

conferences (e.g. Carmarthen carers Service), peer training. Opportunities came from SCDWP training programmes, Carer services and support centres, National initiatives (e.g. suicide Prevention) and health (e.g. the Welsh Government EPP programme's 'Looking After Myself'). Uptake by carers and opportunities to access the training were reported as varying greatly across the organisations and locations involved in the research. Many of these areas were seen as essential for unpaid carers to be able to participate in and part of a 'core' of training and learning that could be both an all Wales programme, accredited and standardised.

<b>Training and development identified</b>	<b>Details including accreditation/ recognition and success/difficulties</b>
Stress management, relaxation techniques	Looking at recognition, trigger points, the effects of stress, dealing with stress and action planning
Maintaining good health & wellbeing	This usually includes, diet and healthy eating
Negotiating and working with agencies, professionals and other service providers	This may be called 'partners in care' so partnership concepts are key or 'participation skills'. It has been a focus in the planning and setting up of the new Gwent Frailty Project and the role out of multiagency community resource teams in the Cardiff Project. Team and collaborative working is also covered here
Representing unpaid carers	Overlaps with the partnership training in the above section and 'train the trainers' but with more of an emphasis on getting involved, learning to be a 'champion' and how to challenge and represent others. Examples are provided by Carers Wales which has training at different levels moving to advanced and Carmarthen Carers Service.

Training and development identified	Details including accreditation/ recognition and success/difficulties
Family dynamics and changing roles and relationships including bereavement and loss	Relate and Cruse are providers of some of these programmes
Managing finance	This includes aspects of financial protection, Direct Payments, tax, managing other peoples finances
New to the role/new carer	Essential information and signposting
Accessing benefits, entitlement, rights	Essential information and signposting
Housing support and rights	Essential information and signposting
Equality & Diversity	
Assertiveness & confidence building	This may include aspects of anger management
Carers needs assessments	What to expect and how to prepare
Suicide Awareness and Prevention (ASSIST)	Mind Cymru have an accredited programme which is included on the CQFW QALL . This has been delivered across Wales but delivery information does not identify specific carer take up

Training and development identified	Details including accreditation/ recognition and success/difficulties
Mental Health First Aid	Again provided by Mind Cymru aimed at a wide audience, can be about Children and Young People or Adults. This programme has been accessed by carers and is in the process of becoming QALL accredited
<p>'Looking after me' programme open to any adult who is a carer. 6 sessions</p> <ul style="list-style-type: none"> <li>• Relaxation techniques</li> <li>• Dealing with tiredness</li> <li>• Exercise</li> <li>• Eating healthily</li> <li>• Coping with depression</li> <li>• Communication with family, friends and professionals</li> <li>• Planning for the future</li> </ul>	This can be by self referral and is delivered across Wales via the LHBs. Run in local communities and led by two volunteer tutors who themselves have experience of caring for a friend or relative. It is linked to the Education for Patients Programme (EPP Cymru) and supported by Welsh Government and NLIAH.
Key legislation e.g. Mental Capacity Act & best interest	Can be tailored to carers or generic. This can be accessed via SCWDP training in some counties
Fire safety awareness and Health & Safety awareness	Will include accident and fire prevention, awareness of hazards, risk assessing
Food safety and infection control	May be specifically for unpaid carers relating to their own homes and situations

## Personal development & leisure

These areas are wide ranging in subject matter and may be ‘tasters’ (e.g. golf or holistic therapy) or in depth support (e.g. life coaching) and full qualifications (e.g. driving, European Computer Driving Licence or PTLLS). Funding came in many ways such as the Lottery, European funds, carer assessments, donations of professional trainer’s time and many were therefore not secure. Some areas could be seen to be closely linked to improving the carers life experiences e.g. driving, IT; whilst other were aspirational such as employability, management development and photography. They were reported as being highly beneficial and appreciated by some carers and were seen to enhance wellbeing significantly. Access was enhanced by supporting carers to try new things often through carers support workers or peer support and encouragement. The common difficulties of location, timing, travel and respite were present and solutions varied as did resources. Accreditation and/or the achievement of a qualification was particularly valued in many of these areas particularly the development or recognition of skills that might lead to employment and further development.

Training and development identified	Details including accreditation/ recognition and success/difficulties
Life coaching offering support for making changes and personal development in any area	Example of Disability Advice Project which has been very successful model and includes reviewing current situation, drawing on previous life experiences, setting personal goals and what prevents or helps progress and achievement. Approximately 80 unpaid carers per year are involved and this can continue over a long period. It is Lottery funded
Outdoor activities which boost fitness/wellbeing and are social opportunities. Examples include golf taster lessons, rambling, cycling	Example of the ‘venture out project’ where carers are part of the broader target group for social inclusion. Support to begin attending is often needed through peers or carers support workers.

Training and development identified	Details including accreditation/ recognition and success/difficulties
Driving lessons	Examples of funding through carers assessment for the lessons and the DVLA Driving Test
IT skills and internet use	May be provided through community/adult education, corporate staff programmes in Local Authorities or in funded projects e.g. European funding. Often contain some assessment and may be accredited or a qualification such as ECDL or very basic IT for beginners. On line learning works well once basic confidence and computer skills are developed.
Arts & crafts taster days e.g. pottery, painting	<p>Informal learning may lead onto longer programmes in adult/community education once confidence is built and access established.</p> <p>Tasters may be delivered free of charge 'donated' by the trainer</p>
Photography	<p>Informal learning may lead onto longer programmes in adult/community education once confidence is built and access established.</p> <p>Tasters may be delivered free of charge 'donated' by the trainer</p>
DIY skills	Informal learning only and in response to local interest. Carers needed to be in very small groups as it is practical so 8 maximum. Often undertaken by carers supporting a partner where they are not used to this aspect of home maintenance which now falls on them (e.g. Monmouthshire Social Services)

Training and development identified	Details including accreditation/ recognition and success/difficulties
Cooking and food preparation skills	<p>Informal learning only and in response to local interest. Carers needed to be in very small groups as it is practical so 8 maximum. Often undertaken by carers supporting a partner where they are not used to this aspect of home life which now falls on them. There were budget and healthy eating aspects to these workshops, one example had a chef from Swansea attending to demonstrate meals on a budget</p>
General study and qualifications including degrees	<p>OU and University of the Third Age, Learn Direct. Flexible distance learning which can be taken at an individual's pace and mostly from home. The subject may be related to the caring role or not</p>
Employability skills	<p>May be formal assessment and qualifications. Programmes can be structured and some are linked with Careers Wales. There is support for accreditation of these types of programmes to ensure their use in job seeking and confidence building through personal achievement being recognised. Mapping to existing qualifications in this area is also thought to be beneficial. May be formal assessment and qualifications. Basic Skills programmes have been delivered in conjunction with Deeside College and these have proved particularly popular with younger carer's. DfES employment and work programmes are gathering information about unpaid carers accessing this training</p>
Choir and singing	<p>Informal and could be developed with peers (fellow carers) or by joining local groups/choirs. Timing could cause access issues</p>

Training and development identified	Details including accreditation/ recognition and success/difficulties
<p>Management skills development – identified in a variety of carer support organisations as an area which carers may wish to have open for further personal development and that there is a need for recognition of the management ‘skill set’ that has been developed in the carer role.</p>	<p>To build on the identified skill set which can include: project management, financial management, negotiating skills, working in partnership/multiagency working, presentation skills, assertiveness, decision making, time management, stress management. It was thought this could benefit from links to existing QCF units (management and care) and accreditation of key areas to recognise specialist skills for unpaid carers</p>
<p>Teaching Assistants training and placements to make use of parent carers skills (Gower College)</p>	<p>Parent carers undertake a QCF qualification in Supporting Teaching &amp; Learning whilst on placement in schools usually with a focus on support for children with special needs so as to capitalise on their existing skills and experiences. Both knowledge and competence will be assessed and good job opportunities follow if desired</p>
<p>Relaxation and holistic therapy sessions</p>	<p>For example Swansea Carers Support Centre had opportunities for ‘taster sessions’ booked in advance and without charges. This worked well as it was offered in 4 different venues and was the first Monday of the month</p>
<p>Yoga</p>	<p>Informal and may be for groups of unpaid carers to give maximum opportunity for access</p>

Training and development identified	Details including accreditation/ recognition and success/difficulties
<p>Training and presentation skills to participate in training peers or social care &amp; health staff, social workers etc</p>	<p>Used in a variety of unpaid carer initiatives and likely to grow as carers are increasingly involved in training and support for peers and workers awareness. Linked to development of 'expert carer' with skills to train others. It is thought this would benefit from accreditation or mapping to existing qualifications for recognition, efficiency and standardisation (examples include the Early Support Programme for parent carers which has a model of cascading learning on through carers and to benefit from first hand experiences, Powys Council with Powys Carers Service and Carmarthen Carers Service)</p>
<p>Preparing to Teach in the lifelong Learning Sector (PTLLS) qualification</p>	<p>This qualification has been offered to support personal development and would have the benefit of supporting presentation skills, development of training and learning resources for carers and delivering training.</p>
<p>Welsh language skills – Coleg Harlech</p>	<p>This has been delivered in conjunction with Gwynedd Council</p>

## Gaps in training and development identified and suggested actions to address:

Gaps were often identified which were actually in relation to access or resources rather than no training or learning being available. For example a number of carer support organisations wanted to provide training dealing with aspects of living with and supporting an individual with dementia and currently did not, so identified this as a gap. However this was successfully delivered to unpaid carers in other settings. The gap in these situations was knowledge of provision and 'supply' of training. Funding differences also led to 'gaps' in what has been identified as needed but not provided. Subject areas where these factors were an issue included:

- Moving and positioning (for carers)
- Medication awareness for carers
- Dementia
- Employability
- Bereavement, loss, preparing for the end of caring role (personal , practical and emotional )
- Life Coaching for carers
- POVA for carers
- Nutrition
- Hospital discharge to include patient/carer's rights
- Foot care and podiatry
- IT and internet use for carers
- Partnership working /being part of a team
- Continence care and management
- 'Train the trainer'/expert carer
- Representing Carers/expert carer

In a small number of areas a gap in any current training or learning was identified and these are detailed below.

<ul style="list-style-type: none"> <li>• Management skills and knowledge e.g. project management, financial management, negotiating skills, working in partnership/multiagency working, presentation skills, assertiveness, decision making, time management and stress management.</li> </ul>	<ul style="list-style-type: none"> <li>• The need identified was for recognition and extension of a 'skill set' being developed by many unpaid carers in this role which could be used in a wider context such as a return to work or the undertaking of formal qualifications. It is thought this would also benefit from accreditation</li> </ul>
<ul style="list-style-type: none"> <li>• Credit for carers</li> </ul>	<ul style="list-style-type: none"> <li>• Gap identified in health and particularly family carers supporting individuals with cardiac problems. Development work is being undertaken in Aneurin Bevan Health Board with Agored Cymru and NLIAH to produce QALL units and assessment materials</li> </ul>

## Recent research and findings summary:

The research found a wide range of recent papers the majority being produced around condition specific interventions with carers i.e. effects of carer training on palliative care. The focus of these papers is on enhancing the carer's role in the delivery of care and less on the needs of carer's themselves.

The most pertinent research papers are "The study of training for carers in Scotland 2006 "and "Caring with Confidence Report 2010: Understanding the barriers for carers in accessing learning and training opportunities ". The former produced by the Coalition of Carers for Scotland and the Princess Royal Trust for Carers and funded by the Scottish Executive produced a set of recommendations which centred on the development of a national " expert carer programme " based on the delivery of flexible ,tailored training to meet carers" health needs and enhance the caring role ". The core training proposed prioritised moving and handling, first aid and medication administration as key needs.

The latter paper reviewed the impact and evaluation of the Caring in Confidence programme in North West England. The findings suggested that travel and respite care costs were the greatest barrier to take up. The survey, undertaken with 523 respondents identified carers own priorities for training and learning. In order of priority the following were identified: Stress management, Carers Health, Confidence Building, Financial Advice, Condition Specific Training and Employability Training. This paper also quantified carer's attitudes toward training with 46% of respondents having little or no interest in training while 53% confirmed their interest , the figures indicated that this split could be seen in terms of age with the majority being in the 29-64 age group and the minority being 65+. This group though were shown to value training and learning opportunities as a way of extending their support networks and combating isolation.

## Potential benefits and challenges identified of an all Wales approach:

The research found strong support for an all Wales approach to aspects of training and development for unpaid carers particularly a 'core' of the fundamentals of the caring role. Some specialist clinical areas were also seen as being better developed on a National basis. Clearly the Carers Measure is requiring a 'strategic approach' and consistent, accessible training in a core of essential areas. Some reservations were expressed.

The **benefits** were highlighted as:

- Reduced variation in content and access so more consistency and a 'national standard' and associated quality could be developed
- Promotes equality of access, content, and quality
- A coordinated approach can be developed
- Increases the opportunity to identify needs and commission learning as required
- Identifies and shares what is available and how it is delivered successfully (and what to avoid)
- Ability to share costs, strengthen partnerships and avoid repetition
- 'off the shelf' learning and courses would increase the leverage and volume of provision by carers support organisations and representatives and extend the content range.
- Useful if the 'condition' is rare or the needs of the individual very specific
- Pool of 'expert' trainers who are also unpaid carers can be supported and involved in delivery.
- Materials such as information fact sheets, 'hints & tips' leaflets, DVDs, e resources and information packs can be shared extensively if they do not 'belong' to one organisation

- Could share translation costs and make available in a multimedia formats to suit different learners
- Will be a good tool to implement the Carers Measure and to promote carer awareness in Wales
- Measures of uptake and need can be gathered (at present SCWDP data for Welsh Government only collect information on ‘service users and family’)
- Certification and accreditation in key areas can be progressed
- Learning will be more transferrable and can be mapped to QCF qualifications or used as Recognition of Prior Learning (RPL) without over burdening individual organisations and workers
- Will assist in longer term planning and piloting of next steps particularly in the evolving world of e learning and mobile learning
- Has worked well in the EPP model led by Health
- An index of sources of training and information across Wales would be a very beneficial reference point

**Challenges and concerns** were identified as follows:

- Not flexible and responsive to local or individual carer needs
- Language differences
- May not be kept up to date
- Who would pay for any development work and resources particularly ‘off the shelf’ packages
- This should not be an attempt to ‘professionalise’ carers or make the training compulsory
- If not undertaken carers should not be made to feel they are ‘failing’ or not caring well
- Carers must be involved and this is not ‘done to them’

- Carers need local training and an all Wales approach might lead to 'national' or 'regional' events which prohibit many from being involved
- A shared approach is difficult with so many different organisations and representatives involved in unpaid carer training and learning
- It will not work with 'generic' learning or much of the 'personal development and leisure'
- Each area and organisation will want to do it their own way so it will not be worth the development time and resource

## Key findings about accreditation:

During the research it was identified that there was confusion about what **accreditation** actually meant in this context (for Credit and Qualifications Framework Wales and Quality Assured Lifelong Learning pillar). Courses and learning were often highlighted as being accredited when they were actually only leading to a 'certificate' from the provider confirming an individual's 'completion' or 'attendance'. Some courses did contain individual assessment by an 'expert' and included a judgement of 'competence' or satisfactory knowledge such as First Aid or Moving and Handling. However for accreditation in the context of this project learning would need to contain: learning outcomes and assessment criteria, individual assessment, quality assurance of the assessment, requirements of the assessor for example relevant occupational knowledge and experience of assessment and standards of 'operating' (such as appeals, equal opportunities and registration procedures). This is achieved by working through an Awarding Organisation who will approve and monitor the organisation providing the accredited learning. These programmes accredited onto the CQFW QALL also have a 'level' and a 'credit value'. They represent a significant step up from normal training and learning programmes both in quality assurance mechanisms and in the demands and worth to a learner.

The research identified that many of the benefits and concerns were the same for an all Wales approach and accreditation and it is therefore appropriate to refer to these in section 4 above. The following gives the additional key messages about accreditation as told by stakeholders during the research:

- Accreditation and undertaking the QALL units has provided people with concrete, documented and nationally recognised achievements to be proud of
- New and unrecognised skills and knowledge gained during the caring role can be celebrated leading to increased confidence and wider recognition of their role in society
- Use of QCF units or mapping training to QCF units must also be used as this is efficient and can lead to qualifications which are recognised across the UK
- Quality assurance and some equality to standards is needed across Wales
- A new accredited 'unit' is needed for unpaid carers who are going to train the paid or unpaid service providers

- Accreditation can give recognition of expertise and draw carers into training and development
- It can give access to further opportunities for learning, qualifications or employment
- Peer mentoring skills should be accredited to be recognised
- Not all carers will want to undertake accredited or assessed learning and this should be respected “ Available but not required”
- Carers not undertaking accredited training must not be made to feel their care is less or lower quality
- There are issues with a ‘pass/fail’ model and ethical issues as carers are unpaid
- Time limits on completion must be flexible or removed
- It is essential for those who are looking to return to the job market
- It must go hand in hand with respite care
- Will need funding for carers and assessors
- This must be an option only and not compulsory
- Older carers are less likely to want accreditation of learning
- Partnerships with delivering/assessing organisations are very important
- There should not be too much development and existing units should be used when possible especially if they are in the QCF qualifications

## Priorities and possible delivery models:

The barriers to unpaid carers attending and becoming involved in training and learning are well documented and clearly include difficulties with access, location, timing, respite, transport, confidence and finance. Research showed many innovative solutions and supporting resources and even more ideas and suggestions. Variation and gaps in provision are apparent but not easy to quantify as records do not capture the range of learning opportunities undertaken or required. Models to support and enhance carer participation are being considered and piloted across Wales. The emerging possibilities of 'e-learning' and 'mobile learning' add considerably to the potential of new ways of making learning and assessment accessible.

Some of the most interesting initiatives that were identified included:

- Information available in written and easy read formats such as leaflets, 'credit card' sized key facts or contacts to be given out, 'helpful tips' sheets containing practical ideas, Q&A and signposting and key contact sheets and booklets for new carers
- online resources in websites which can include any written information produced and other media
- Carer forum, chat rooms and 'ask an expert' on line areas for both peer and 'expert' advice when it is needed.
- Phone help lines to reflect the accessible advice and support offered online and by the NHS
- video demonstrations of procedures, techniques and skills for use on webinar, DVDs, facebook, websites with video links
- phone and personal console 'apps' for 'mobile learning' and recording of assessments and evidence
- Schemes developed using joint funding from DFES, Careers Wales, Bridges to Work

There was overwhelming support for a **core of training** which would contain aspects of both practical care skills and dealing with the impact of the caring role. This core is

considered to be needed for carers and should be made available across Wales as a National 'support programme' and aspects should be accredited so that participants can undertake assessment and gain formal recognition and 'credit' for their achievement. Again there was consistent concern that any such programme should not be compulsory or even expected and that carers choosing not to be involved should not be made to feel their care is less or lower quality. Accreditation also should be a positive option available for those carers who wish to undertake it. A proposed core is contained in Appendix 3.

In addition to the core a 'pick and mix' of specialist areas of interest or need are also supported as in the training section of this report.

## Recommendations from the research for further development:

1. 'Expert' carers giving support, advice and training or demonstrations to peers (and paid service providers). This to be supported by development of a unit accredited for the QALL in these skills and knowledge
2. Social Care and other paid service providers giving training and 'demonstrating' to unpaid carers in their homes. Demonstrating may be more acceptable model of delivery to avoid concerns about risks and liability. Support for social care workers in this role could be achieved by a unit developed for QALL or for the QCF Diploma in Health & Social Care
3. Social Care and other paid service providers training and demonstrating to unpaid carers in care homes, day centres or similar appropriate resources (short periods of respite may be possible at the same time)
4. Development of a 'core' of training and learning which would contain aspects of both practical care skills and dealing with the impact of the caring role. This core is considered to be needed for carers and should be made available across Wales as a National 'support programme'. Aspects to be accredited so that participants can undertake assessment and gain formal recognition and 'credit' for their achievement, though this should not be compulsory. Accreditation can be a positive option available for those carers who wish to undertake it and lead to further learning, qualifications and employment (including into the care sector).
5. Changes to the commissioning of care services in order to promote the training needs of unpaid carers. Care provider organisations could be encouraged to offer or collaborate through shared training opportunities or extensions to staff job roles to formalise the educational element of support.
6. The SCWDP model provides national coverage and delivers many of the training areas discussed to the paid workforce. Although much of this training is available to unpaid carers take up is low. The implication being that this model is not suitable and does not overcome access barriers for unpaid carers. However this extensive network of training provision could be more clearly matched to unpaid carers needs with a parallel model that addresses access. This could be reinforced by the specific data collection of the actual training opportunities taken up by unpaid carers for Welsh Government in the SCWDP returns

7. Emerging media needs to be recognised as offering an answer to some of the barriers to accessing training and its use in building support networks that could promote training and peer support. This to include online learning and assessment resources, social networking and 'ask an expert' opportunities
8. A central resource that collates information from a range of organisations such as Carers Learning and Information Network, Third sector organisations and statutory providers. Information could cover learning resources, local initiatives, available qualifications, training courses, funding opportunities and trainers lists.

Compiled by Rhys Hughes, Sue Gwynn 27-2-12

## Appendix 1 :Supporting Unpaid Carers Access to training-stakeholders contacted

Name/representative	Organisation
Angela Roberts	Crossroads Wales
Deborah Saunders	Monmouthshire social Services
Claire Sullivan	NEWCIS Flintshire
Manon Williams	Carers Outreach Service for NW Wales
Ceri Ord	Carers Info and Support Service AVOW Wrexham
Ken Jones	Care Council for Wales member and unpaid carer
Sue Phelps /Tess Saunders/	Alzheimer's society
Claire Foster	Mind MHFA
Gareth Cooke	Torfaen Carers Centre
Gill Winter	Princes Royal Trust for Carers
Tim Southern	ATEGI (Learning Disability)Shared Lives Project
Kate Proudfoot	Crossroads employability project
Sue Saunders	Agored Cymru
Roz Williamson	Carers Wales
Carers Alliance (as a group)	Included: Carers Wales, Crossroads, Contact a Family, All Wales Forum of Parents & Carers for people with a Learning Disability, Alzheimer's Society, Hafal, Parkinson's UK
Crossroads All Wales Forum (as a group)	Managers and trustees

Name/representative	Organisation
Lynda Chandler	Programme Manager Older Persons Service Delivery Programme Cardiff & Vale University Health Board
Jackie James	Hafal (mental health)
Carol Smith	Parkinson's Disease Society
Keith Brown	Contact a Family
Jane Guest	Coordinator Social Care Partnership Mid Wales
Princes Royal Trust for Carers	Regional meeting Wrexham 6-12-11
Adele Hood	Education & Development Manager Aneurin Bevan Health Board
Evan Davies	All Wales Forum of Parents & Carers
Carers LIN forum	Given email opportunity to respond
Wrexham Carers forum (group)	with unpaid carers participating
Jane Questle	Scheme Manager -Crossroads Care Bridgend
Barbara Bale	NLIAH (Welsh Government NHS)
Tracey Davies	GAVO
Shirley Bowen	Swansea Carers Support Center
Andy Lyden	Crossroads Development Manager
Heather Parry	Powys SSD
Alison James	NPT Carers Service
Marie Lewis	Powys Carers Service
Lynne Hill	Children in Wales – Policy Director
Pauline Jones	CCW member, Disability Advice Project and

Appendix 1 Supporting Unpaid Carers Access to training- stakeholders contacted:

Name/representative	Organisation
	parent carer
Joanne Silverthorne	Carmarthenshire Carers Service
Martin Jones	CCW Member and parent carer
Care Council for Wales	Citizen and Community Board
Sian Galloway	Alzheimer's Society
Lester Bath	Gwynedd County Council
Nick Barnes	Social Welfare Benefits Specialist
Dafydd Stone / Malcolm Perret	Carewatch Cardiff / Newport
Jo Finch	Training Officer Bridgend County Council
Joanne Harris	Training Officer Powys Social Services
Claire Perry	Carers Support Officer R.C.T.

## Appendix 2 :Supporting Unpaid Carers Questions to Participants

Name .....Date.....

Email/phone contact:

- 1.Role and remit of respondent, care constituencies served.
- 2.Geographical area covered.
- 3.Knowledge of carer training initiatives, past, present. What worked and why.
- 4.Knowledge of accreditation, who provided, benefits / disadvantages / take up.
- 5.Personal knowledge /ideas /suggestions regarding Carers development needs.
- 6.Ideas about range of provision i.e. Care specific training, future role preparation, personal development.
- 7.Ideas about delivery models, what works, assessment methods, knowledge of partnerships to access accreditation.
- 8.Value of an All Wales approach, pro's and con's, benefits of formalised assessment.
- 9.Contribution to a resource index.
10. Information on carers networks, further contacts etc.

## Appendix 3: Proposed Core Training & Learning for Unpaid Carers in Wales

Training area	Content identified in research
Person centred support & outcomes	Understanding the delivery of Person Centred Care and its relationship to 'outcome' as opposed to 'Task' centred delivery models. Contribution / expectations of carers
Understanding behaviour	Also called positive behavior management Understanding behavioural aspects of the individual being supported
First aid	Carers currently participate in assessed courses leading to certification alongside social care workers and some participate in specialist courses for unpaid carers which may be adapted to run over several shorter sessions to improve access.
Medication	To cover impact & common side effects, different types of medication, safe administration, terminology, storage, complimentary medicine
POVA/POCA	General safeguarding awareness. May be specifically developed for unpaid carers or for a wider audience
Moving & positioning	All Wales Moving & Handling Passport is used with carers in some areas. Also St John's Ambulance has developed a Safe Moving course for carers. This may be moving people or objects
Supporting eating & drinking	Condition specific training often linked to nutrition and dietary needs.

Training area	Content identified in research
Supporting personal care and hygiene	To include mouth care, skin care, care of the feet and managing incontinence
Using aids, adaptations & assistive technology	May be training with the individual they are supporting
Health & well-being – emotional and physical	This may include diet and healthy eating, aspects of anger management, recognition of stress, trigger points, the effects of stress, dealing with stress and action planning, relaxation techniques, dealing with tiredness, exercise, coping with depression and mental health ‘first aid’
Collaborative working	Negotiating and working with agencies, professionals and other service providers this may be called ‘partners in care’ so partnership concepts are key or ‘participation skills’. It has been a focus in the planning and setting up of the new Gwent Frailty Project and the role out of multiagency community resource teams in the Cardiff Project. Team and collaborative working is also covered here
Managing finances	This includes aspects of financial protection, Direct Payments, tax, welfare benefits, managing other peoples finances
Family dynamics and changing roles and relationships including bereavement and loss	Relate and Cruise are providers of some of these programmes. Others have developed in response to specific need and overlap with emotional wellbeing

Training area	Content identified in research
Entitlements, rights & carers assessments	<p>Essential information and signposting</p> <p>What to expect and how to prepare. Role of independent Advocate</p>
Developing awareness of specific conditions as required	e.g. mental health, dementia, learning disability, Aspergers, stroke, cancer, epilepsy, diabetes etc