It's no barrier

Promoting best practice in learning and development for all learners regardless of age

Part of the Ageless@Work series

December 2011

"we provide support
to those who
provide support"

Contents

The recommendations arising from the findings have been published separately as It's no barrier: best practice in learning and development for all learners regardless of age. Top ten tips for training providers and managers.

1   Introduction

This guide has been produced following a project of work undertaken by ACTAN, funded by the European Social Fund, Innovation, Transnationality and Mainstreaming Programme through the Ageless@Work initiative led by Skills for Care in the South West. The initial brief was to identify:

- best practice in training and developing and retaining older workers

- any unique learning needs of older workers and how these could best be met

- age-friendly learning and development-related policy and practice.

The project specifically looked at the following areas:

- perceived or actual barriers in relation to engaging with older learners

- ways to overcome such barriers to learning for older workers, including whether specific types of learning – such as e-learning – present particular barriers

- case studies which illustrate particular successes with older workers engaging with training and development, and the general demographics of the workforce in social care and health

- the potential or actual impact that the Health and Social Care diploma may have on older workers as it replaces NVQs, in terms of delivery style and assessment processes.

As a result of extensive research and discussion it has become apparent that within the health and social care sector there did not appear to be any notable discrimination against older workers as has been identified in other sectors and industries, as cited by Rosen et al (1976). There are, however, notable barriers in relation to training and development which impact on all workers regardless of age, which have been identified in this guide.

ACTAN focused on the potential impact of the changing qualification system from the NQF (NVQs) to the QCF(awards, certificates and diplomas) and the potential that this had for a much more academic approach to learning than under the former NVQ system. ACTAN wanted to identify if this was likely to have particular impact on older learners, specifically in terms of changes training providers may make in relation to the delivery of the awards.

It is hoped that the Top Ten Tips and research published in this guide will help to facilitate a positive culture towards the inclusion and development of older workers within the workforce training and development strategies in social care and health. With their maturity and life experience, older people have much to contribute both in their own right as social care practitioners and also as mentors and guides for younger colleagues.
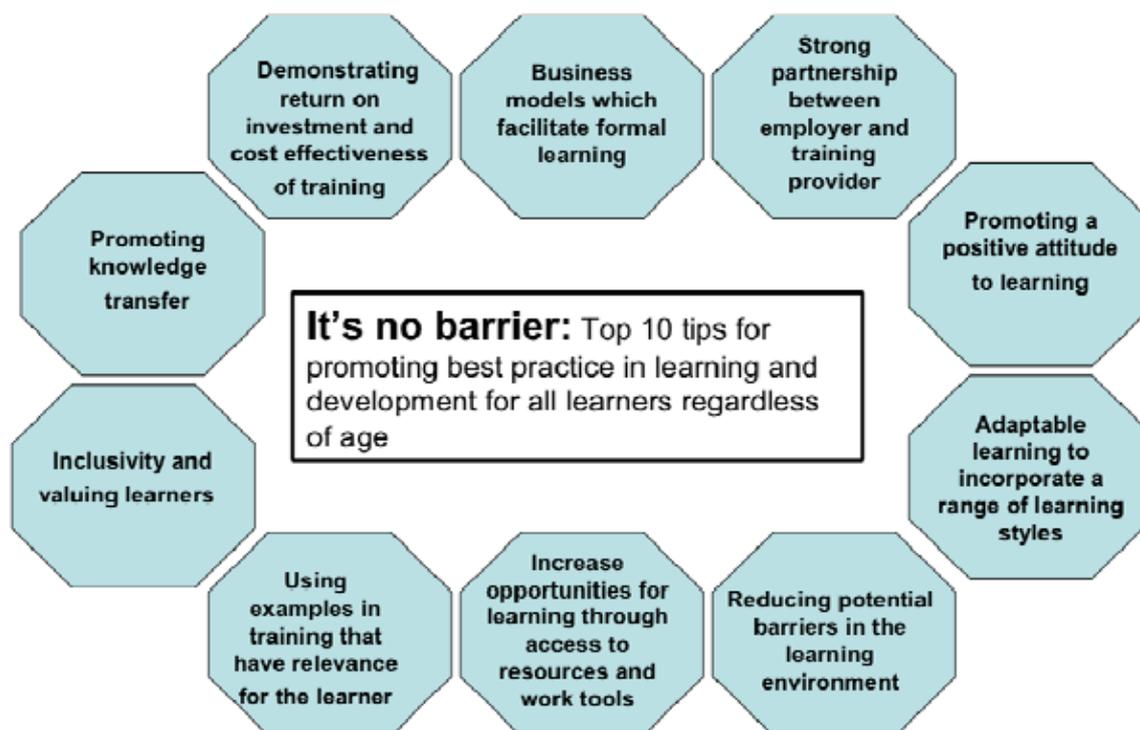
The guide has been developed from research and practice in the South West of England, notably:

- Ageless at Work: Changing workplace cultures, developing skills. Good Practice Report. Hilary Stevens September 2009

- E-learning research conducted at a medium-sized social care employer

- Research conducted with ACTAN members across the United Kingdom at regional and national events from 2009–11.

The findings within this guide are informed by around 300 contributions gathered over an 18 month period. These have come from a variety of training providers who are ACTAN members, as well as from social care managers and social care staff.

The recommendations arising from the findings have been published separately as Best practice in learning and development for all learners regardless of age: top ten tips for training providers and managers. The headlines of those ten top tips are shown below.

Demonstrating return on investment and cost effectiveness of training

Business models which facilitate formal learning

Strong partnership between employer and training provider

Promoting knowledge transfer

Promoting a positive attitude to learning

It's no barrier: Top 10 tips for promoting best practice in learning and development for all learners regardless of age

Inclusivity and valuing learners

Adaptable learning to incorporate a range of learning styles

Using examples in training that have relevance for the learner

Increase opportunities for learning through access to resources and work tools

Reducing potential barriers in the learning environment

ACTAN (the Association for Care Training and Assessment Networks) strives to promote and develop good practice in training delivery and assessment of health and social care staff, and those who support children and young people. ACTAN believes that quality services are reliant on the skills, knowledge, values and attitudes of those who work in such services, and the professionalism of such staff. As the only national body that specifically addresses training, development and workplace assessment in health, social care and children's workforce development, ACTAN gives its members a voice to influence policy and practice at a national and local level.

ACTAN

Association for Care Training and Assessment Networks

2   Examples from ACTAN members
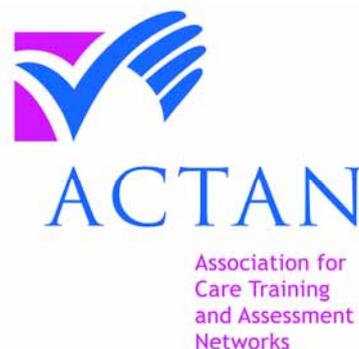
The following examples illustrate the demographics of the workforce and how learning and development can successfully meet the needs of older workers.

Overcoming paper barriers

The everyday pressures on a manager to ensure their staff are trained adequately cannot be more at the front of every manager's mind.

Many managers have older staff who have been resistant for many years about doing their NVQs.

I worked with a home in Minehead who employed many young staff and also two older members of the team who had been doing the job for over 20 years. Every time a manager had insisted they had to do their NVQ they left and moved to a new employer. I started working with the younger members first, using a 'paper-free' version where I used photography, video and dictaphone to evidence the full NVQ. No handwritten work was done by the candidates other than signing review forms and writing their experience of their learning through a questionnaire.

Through the older staff seeing these new ways of proving their competence and the use of other evidence materials they realised actually they could do that too. My oldest candidate was 68 and she passed in five months from start to receiving her certificate. She had never achieved a certificate before and was delighted with her qualification.

I have had many older candidates since that first experience six years ago. The key is building their trust and confidence in breaking down the learning barriers and their fears of learning that they have had from past experiences.

Reading the trends

As a fifty plus worker myself, I started within the learning disability sector in my late-20s or early-30s. The majority of the staff group who started with me were all about the same age group as myself, with a few in their late teens and our other colleague was a gentleman of 50-plus. The staff group was made up of people of various backgrounds: a mother returning to work, qualified health care sector staff, and ex-services personnel.

As the years have gone on, a large majority of my peer group have continued our professional development, and people have progressed to senior or managerial posts.

This too can be said of the training sector, with a large percentage of social care and health trainers, tutors and assessors being within the 50-plus workforce.

A recent course I delivered is a prime example. Over half the group were aged 50 or over. Several were new to the sector and others were there for CPD requirements. This is a pattern which I have noticed on a majority of courses I teach, from induction training to management courses.

Talking to employers, it would appear that more mature people are applying for posts: either because they want a change in direction; or due to the shift in the current working climate.

"I'm in my 50s and haven't done formal learning for years"

I had arranged my first meeting with a new candidate just about to embark on a vocational management award. One of the first things she said to me was,
> "I don't know what you'll make of me. I'm very worried about this. I'm in my fifties, and haven't done any formal learning for years. I'm only doing this because the Inspector says I have to."

I assured her that we would find a way for her to provide evidence which she felt comfortable with. We started with some short reflective accounts, for which I gave her a template. Her first account was short, concise and relevant. Over the course of the award she discovered that she actually enjoyed learning, researching things and started encouraging her staff team to do more. Once she had finished her award she said, "What can I do now? I want to carry on with something."

We talked through various options. She went on to complete another management award and a mentoring award over the following years. She was regularly finding open learning courses for her staff, which she mentored them through and the whole staff group started to grow in confidence, knowledge and ability. She became a wonderful role model, sharing with her staff the joys of learning as well as the trials and tribulations. Having seen her go on a journey of learning, the staff team was also willing to learn. The home inspections noticeably improved over this time and an improved service delivery was evident.

3   Methodology

ACTAN utilised the initial Ageless@Work research findings (Stevens 2009) as a driver for further research specific to social care and health. The initial findings identified potential barriers and using this data ACTAN engaged with a variety of training providers, some of whom are also social care employers, across a range of meetings and events. These included:

- an employer partnership conference

- an employer partnership forum

- ACTAN regional meetings

- a regional conference entitled 'It's no barrier'

- the ACTAN executive committee

- a workshop at the national ACTAN conference

- an e-learning pilot undertaken by a social care provider.

The extent and nature of engagement was dependent on the event itself and ranged from a discussion of age-related issues in relation to specific aspects of learning to a full day conference focusing on the issues. An online evaluation of an e-learning pilot conducted by an ACTAN member who is a social care employer was also conducted.

Participants

Learning providers and social care employers, social care workers and regional partnerships of both employers and learning providers all took part in the research.

The learning providers included in the research consisted of independent, private training providers, FE provision and workplace learning providers across private, voluntary and statutory sector bodies.

To date over 300 participants have been either directly or indirectly involved. These include conference delegates, attendees at meetings and those directly involved in project delivery. Social care providers who took part in this research have included residential, nursing and domiciliary care providers across all sectors.

Participant reactions have been sought formally through information gathering at events via flip-charted discussions and rated items, and an online survey about e-learning.

Data was collected through initial discussions with training providers based on the Stevens (2009) research. This highlighted several issues for consideration in the current project, including:

- whether older workers were more reluctant to train, especially if bordering on retirement, or whether they were not supported or encouraged by their employer to learn

- whether fear, insecurity or a lack of understanding of the need to train among older workers was causing barriers to training in social care and health

- whether age, family commitments or health were creating barriers to learning

- whether age in itself was a barrier to learning in terms of learning new things, or whether people lacked confidence about 'going back to school'

- whether training for older workers was perceived by employers as a poor return on investment.

Analysing the results from the initial discussions, and other research and publications related to training and development in the workplace (Baldwin & Ford 1988, Holton & Baldwin 2003, Salas & Cannon-Bowers 2001) three key themes emerged:

- potential barriers in the environment;

- potential barriers from an individual learner's perspective

- potential barriers in the organisation.

These themes were presented to several groups of ACTAN members to identify what they perceived to be the specific barriers within each category, if any of these were specifically age related and pertinent to older workers, and how to overcome such barriers.

The qualitative data collected from these groups was presented to a further group of ACTAN members and managers working in social care and health who were asked rate the items in terms of probability, as being the 'least' and 'most' likely to impact on the issue in question. A ranking method was assigned to responses, in order to determine the perceived likelihood of each statement. The analysed data is presented in figures 1–6 below.

4   Findings

The results suggest that barriers to learning are not age related or age specific in the care sector. The demographics of the social care workforce are known to be different from those in other sectors, in that workers generally enter care at a later age than in some other occupations. Initial feedback (informal and anecdotal) suggests that this sector is more inclined to promote workers over the age of 50 than are other sectors.
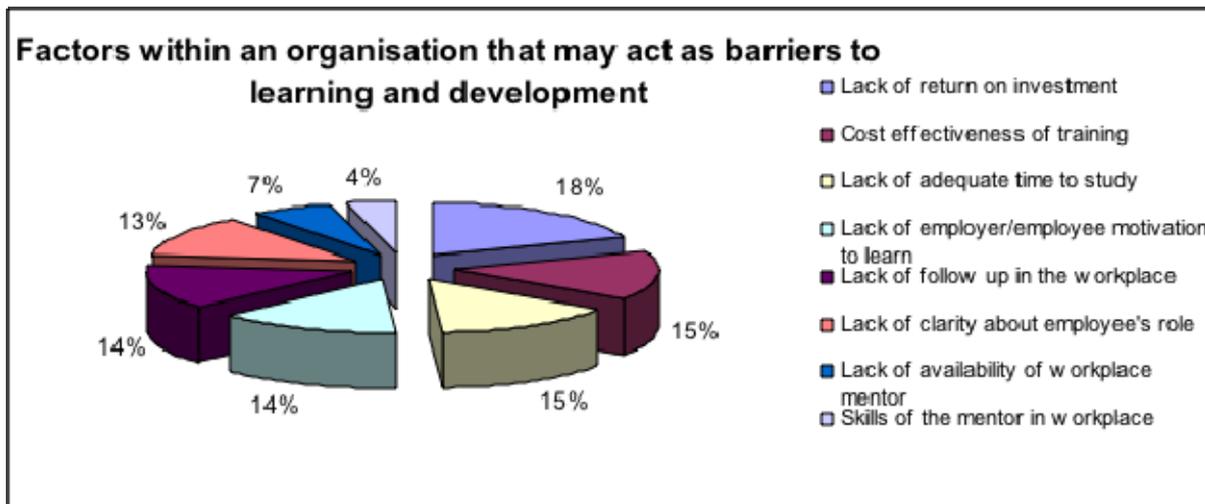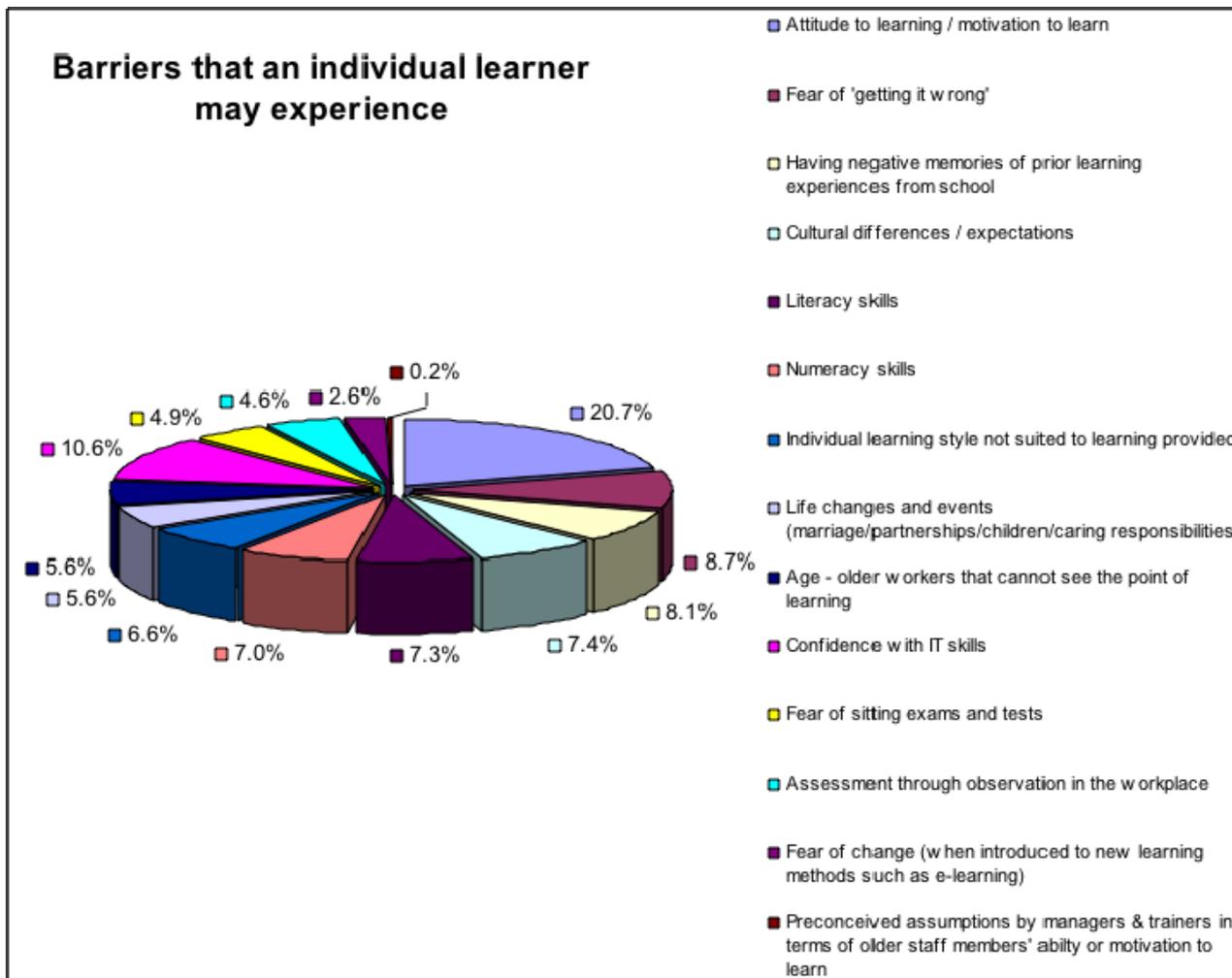

Figure 1

The most highly rated factor within an organisation to act as a barrier to learning and development was considered to be a lack of return on investment. From the employer's perspective, however, this was closely followed by the cost of the training itself, adequate time to study, lack of motivation and a lack of follow-up in the workplace. It is difficult to quantify, however, if the lack of return on investment is actually linked to the lack of follow-up in the workplace and if a causal relationship exists between the two.
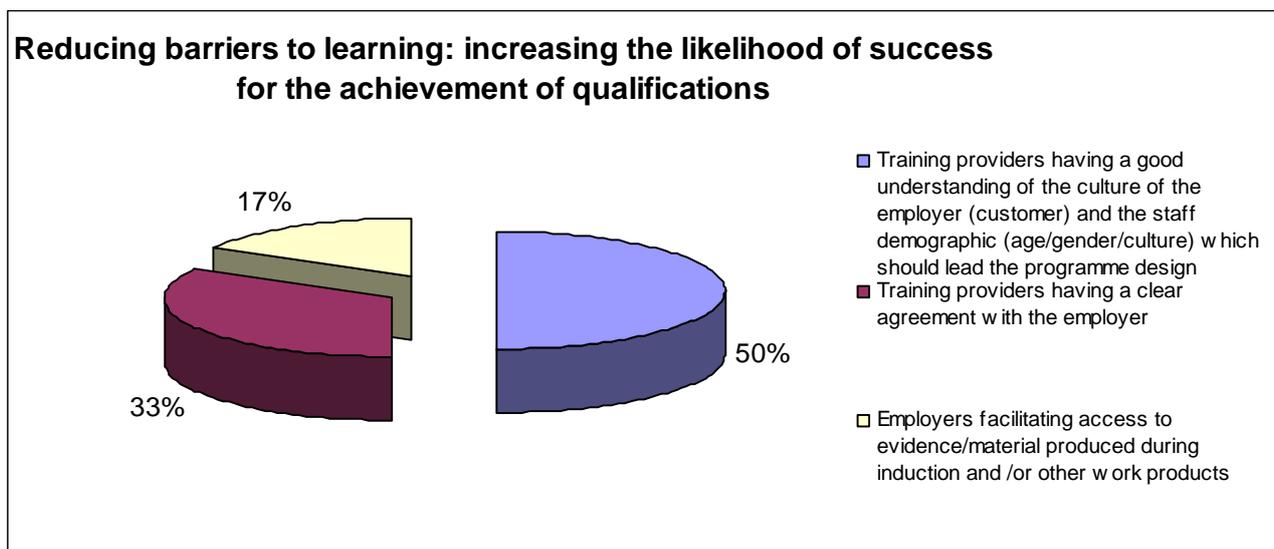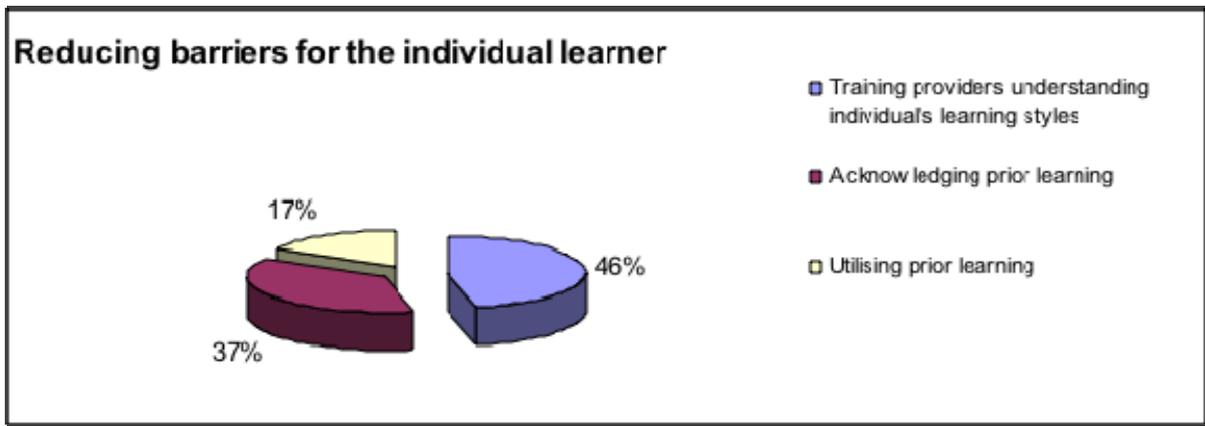

Figure 2

There was a clearer agreement on how to reduce barriers in the workplace. Overwhelmingly, it was suggested that training providers should have a clear understanding of the culture and demographic of the employer for whom they are providing a service. There was a clear signal that training providers should tailor training and development to meet the needs of individual employers.
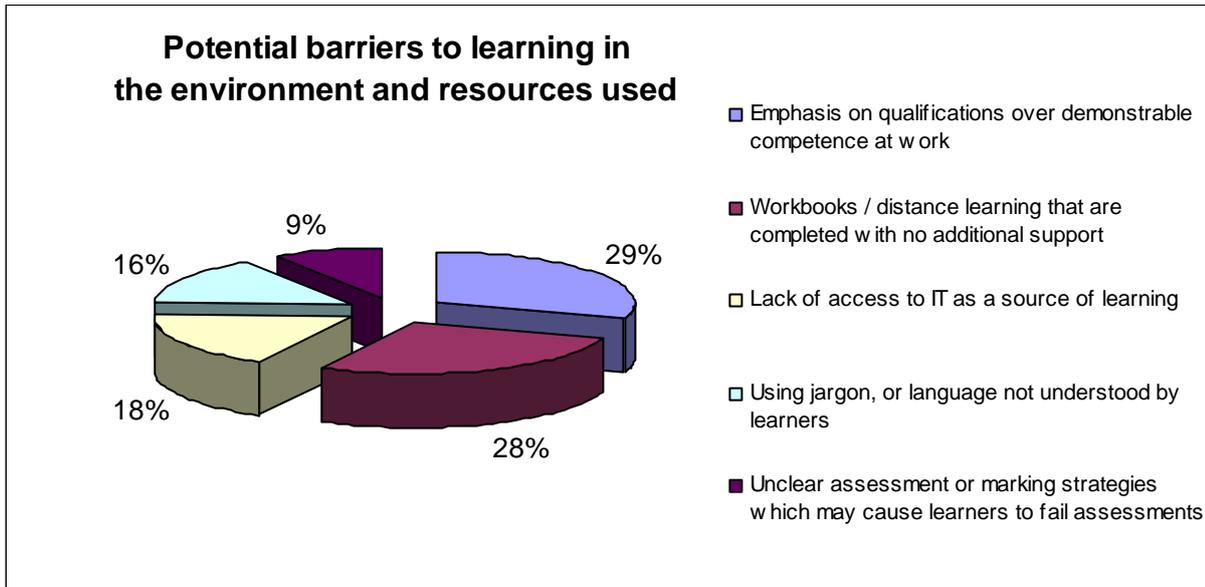

Figure 3

There were many potential barriers faced by individual learners that were suggested in the initial research. Following the rating exercise, they are presented in figure 3. Interestingly from this study's point of view, those identified in the initial Stevens (2009) research were not rated as the greatest barriers to individuals at all. In figure 3, potential barriers that an individual may experience are identified. The individual learner's attitude or motivation for learning was, by far, the biggest barrier regardless of age. Other individual factors such as confidence with IT skills – particularly with the increase in e-learning – and fear of 'getting it wrong' suggest that self-efficacy and general confidence issues need to be taken into account by both training providers and employers, as these are likely to be significant in terms of the person's motivation to learn.
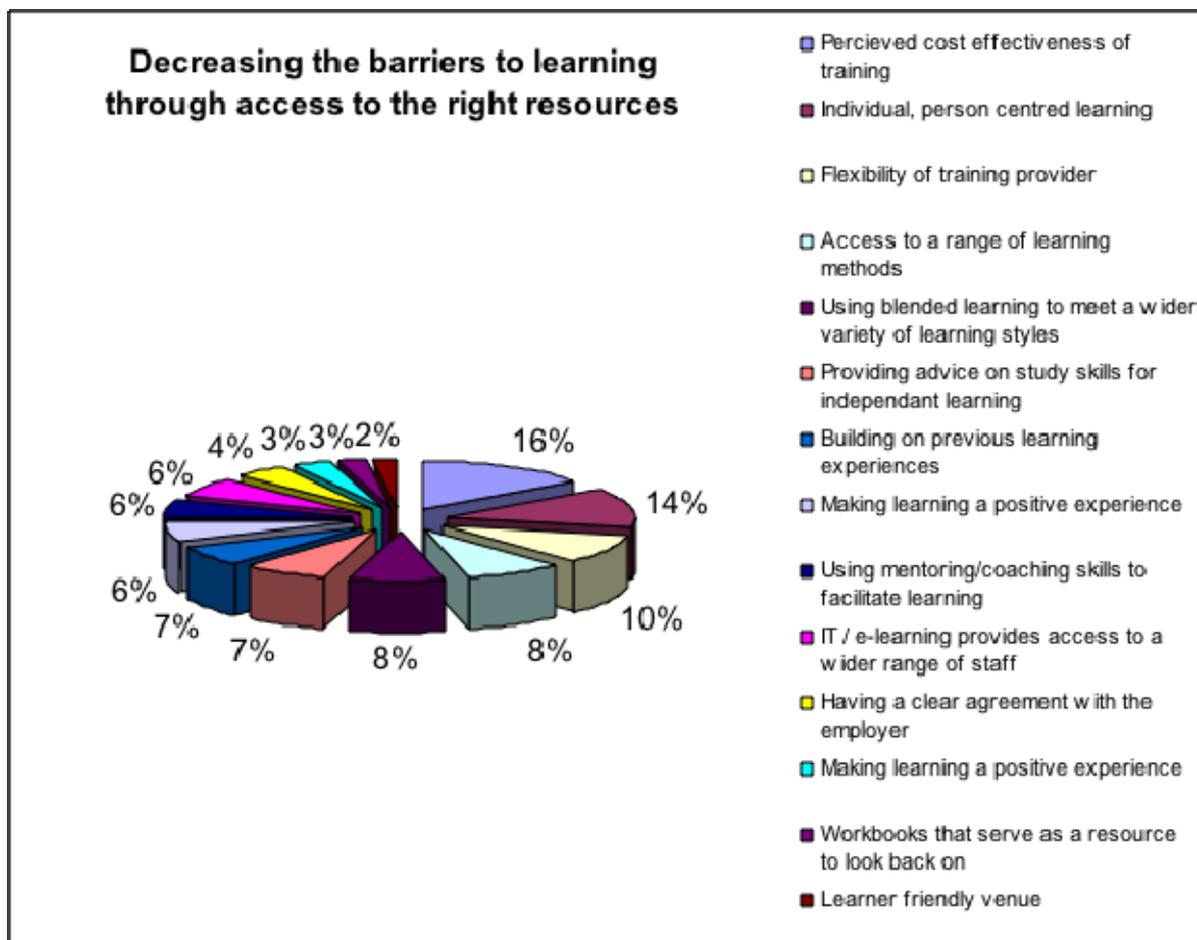
Reducing barriers for the individual learner

- Training providers understanding individual's learning styles
- Acknowledging prior learning
- Utilising prior learning

46%
37%
17%

Figure 4

Ways to facilitate learning were said to include understanding an individual's learning style, and acknowledging and utilising prior learning. If a training provider is able to tailor learning so that an individual feels confident enough to engage with it, the likelihood of a successful and positive learning experience is increased as is the likelihood of the employer seeing a valuable return on their investment.

Potential barriers to learning in the environment and resources used

- Emphasis on qualifications over demonstrable competence at work
- Workbooks / distance learning that are completed with no additional support
- Lack of access to IT as a source of learning
- Using jargon, or language not understood by learners
- Unclear assessment or marking strategies which may cause learners to fail assessments

29%
28%
18%
16%
9%

Figure 5

The learning environment (figure 5) is considered as not only a physical structure such as a classroom but, with the greater use of distance learning and e-learning, the learning environment can also be the structure in which the learning is presented. This could be a combination of resources used or a piece of equipment such as a computer or 'tablet' device such as an iPad or ELbox.

Decreasing the barriers to learning through access to the right resources

Legend:
- Percieved cost effectiveness of training
- Individual, person centred learning
- Flexibility of training provider
- Access to a range of learning methods
- Using blended learning to meet a wider variety of learning styles
- Providing advice on study skills for independant learning
- Building on previous learning experiences
- Making learning a positive experience
- Using mentoring/coaching skills to facilitate learning
- IT / e-learning provides access to a wider range of staff
- Having a clear agreement with the employer
- Making learning a positive experience
- Workbooks that serve as a resource to look back on
- Learner friendly venue

Percentages shown: 16%, 14%, 10%, 8%, 8%, 7%, 7%, 6%, 6%, 6%, 4%, 3%, 3%, 2%

Figure 6

The research suggested that the learning resources used should be designed to improve performance in the workplace and not simply to pass qualifications, and was clearly felt to be an important factor for both managers and training providers. The perceived cost effectiveness of the training is, once again, linked to the return on investment. From an employer's perspective, an improved service delivery signals a good investment. From an individual's perspective, it could also be argued that person-centred learning, and a positive learning experience, is a good investment. Training that revolves around an individual, and flexibility of learning and learning provision, are also considered to be essential for providing appropriate resources.

What is significant about the research findings is the lack of evidence that age is, or creates, a barrier for learning within the health and social care sector. Although research participants were consistently asked to consider any age-related issues, the issues raised

were far more generic and more concerned with relationships and resources. These relationships can be those between the employer and training provider, training provider and learner, or employer and employee. Resources clearly need to be flexible, have relevance for the learner and be designed to improve service delivery and not be solely focused on the confirmation of competence.

Using appropriate resources to support the achievement of QCF units and the Health and Social Care diplomas

Part of the research gathering process was to identify methods that could be used to gather evidence for the Health and Social Care diploma units.

A range of methods for gathering knowledge and competence were suggested. While these do not vary widely from those used for the achievement of NVQs there is a significant difference. The ability to gather knowledge separately, and at a different time from assessing performance in the work place, has created the possibility of more evidence being sought through a range of written assignments completed in classroom style settings.

Once again there were no specific concerns in relation to the age of workers, in that workers aged 50+ were not necessarily likely to find any of the methods more of a barrier than other workers. The biggest potential barriers were considered to be literacy, numeracy and people whose first language isn't English, who may have difficulty completing workbooks, written assignments, etc. It was noted, however, that a facilitated workshop with workbooks could have a 'back to school' approach, and could make people uncomfortable. However, for older workers this could be viewed as a familiar and therefore comforting learning environment that might facilitate learning. The following are in no particular order of preference.

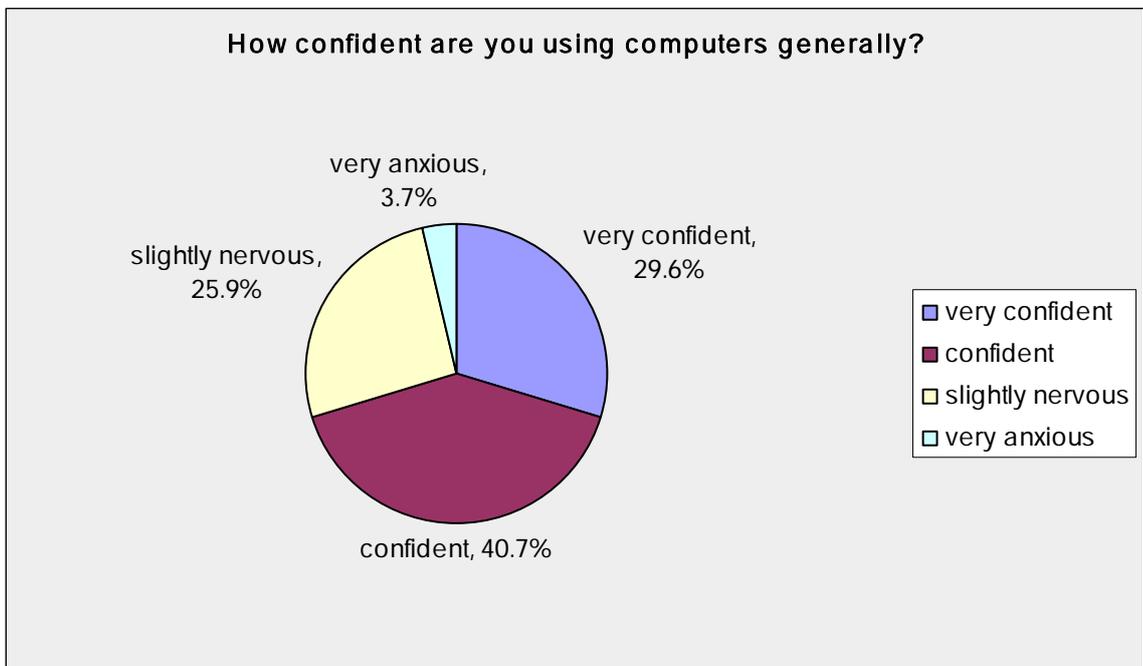| Ways of gathering <u>knowledge</u> evidence for the QCF		Ways of gathering evidence to demonstrate <u>competence</u> at work	
1.	Scenarios (role plays if no other possibility)	1	Observation in the workplace
2.	Worksheets	2	Feedback from people who use the service
3.	Oral or written questions	3	Witness testimony
4.	Essays	4	Work products completed or used by the learner such as: ▪ Life History Books ▪ Staff communication book ▪ Daily Reports ▪ Accident Forms ▪ Care planning/reviews ▪ Dementia Care Mapping ▪ Risk assessments ▪ Reports ▪ Letters
5.	Comprehension exercise		
6.	Recognition of prior learning		
7.	Reflection / learner reports or statements		
8.	Supervision		
9.	Team meetings		
10.	DVDs **with** a 'test of learning'		
11.	E-learning **with** a 'test of learning'		
12.	Workbooks linked specifically to the learning outcomes		
13.	SCIE – Social Care TV www.scie.org.uk/socialcaretv/		
14.	Learning Pool – free resources online		
15.	SCILS www.scils.co.uk		
16.	Smart Screen, City and Guilds		

5   E learning survey

The e-learning survey was conducted with staff working for a social care employer who had conducted an organisational e-learning pilot. This was a new mode of learning for the organisation and was therefore being evaluated in terms of its suitability, applicability and return on investment.

A sample of 30 participants who had completed an e-learning course were asked to complete an online questionnaire about it. Most courses took between two and four hours to complete. The results of the survey are shown in figures A–H.
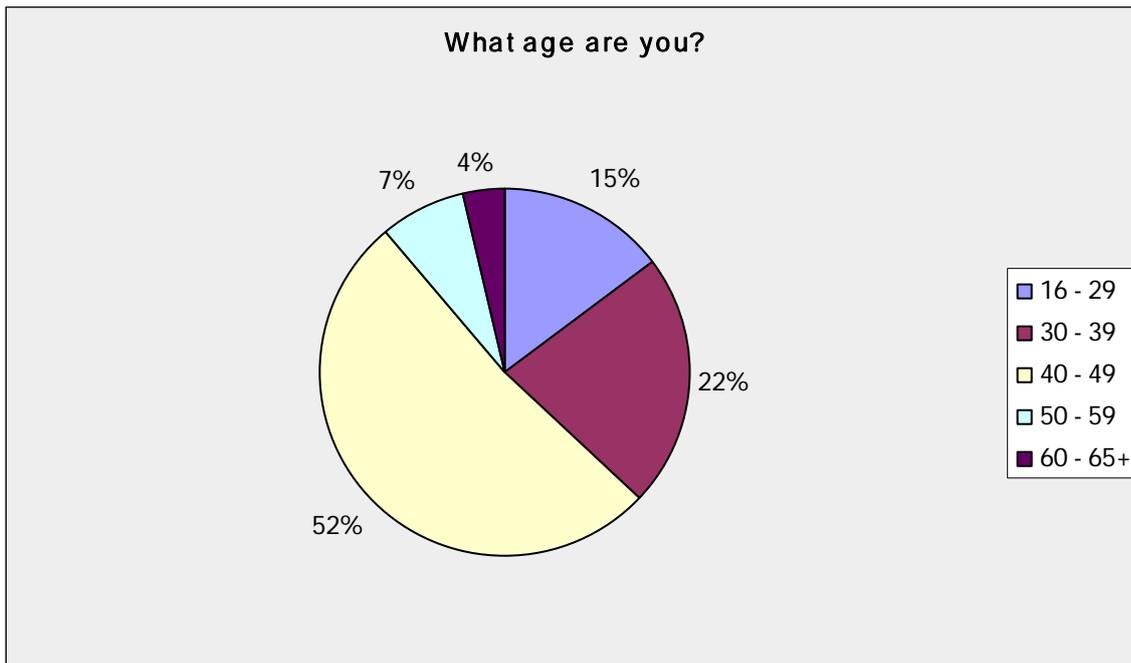
Figure A

Participants were asked of their age to see if there was a particular age bias in relation to their learning experience. Seven per cent were aged over 50, just over half of the participants were aged 40–49.

How confident are you using computers generally?

very anxious, 3.7%

very confident, 29.6%

slightly nervous, 25.9%

Legend:
- very confident
- confident
- slightly nervous
- very anxious

confident, 40.7%

Figure B

Of those people questioned, 70.3% said that they were confident or very confident using computers. 25.7% stated they were slightly nervous and only 3.7% were very anxious. Those who were very anxious were not all within the older age ranges.

These were not people who used computers as part of their normal daily work; they were a mixture of housekeeping, catering, portering and care staff working in a care environment.

Before working in this role at St Monica Trust, have you ever used a computer for e-learning or on-line learning?

no, 44.4%

yes, 55.6%

Legend:
- yes
- no
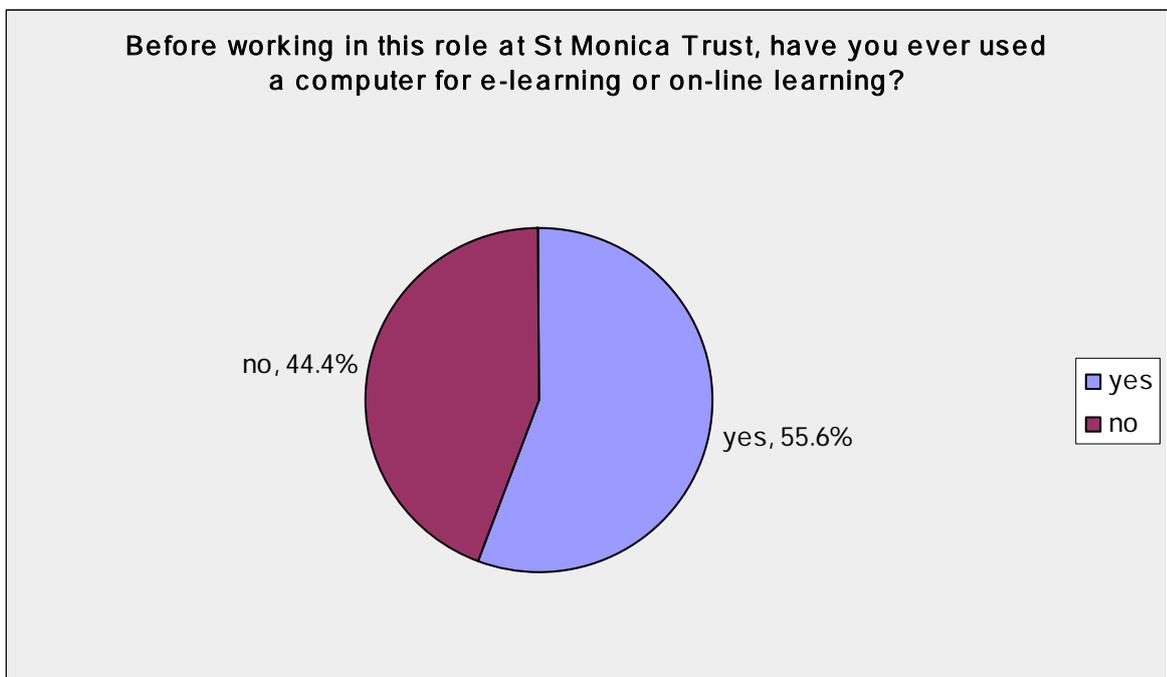
Figure C

There was a fairly equal split between those who had and had not used e-learning in the past.
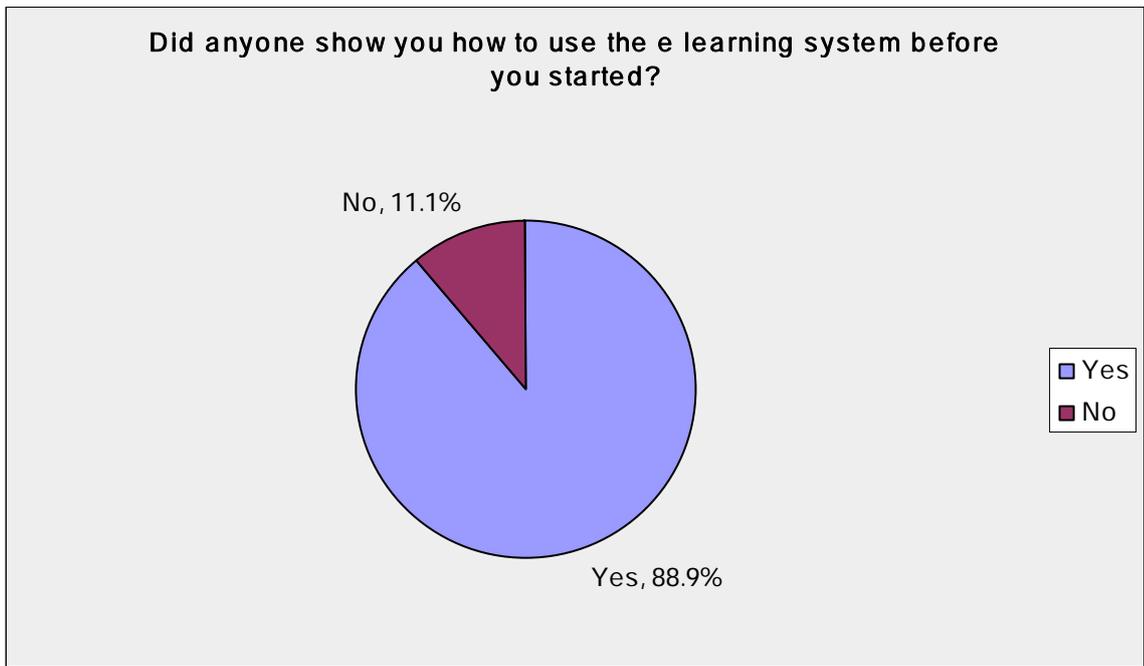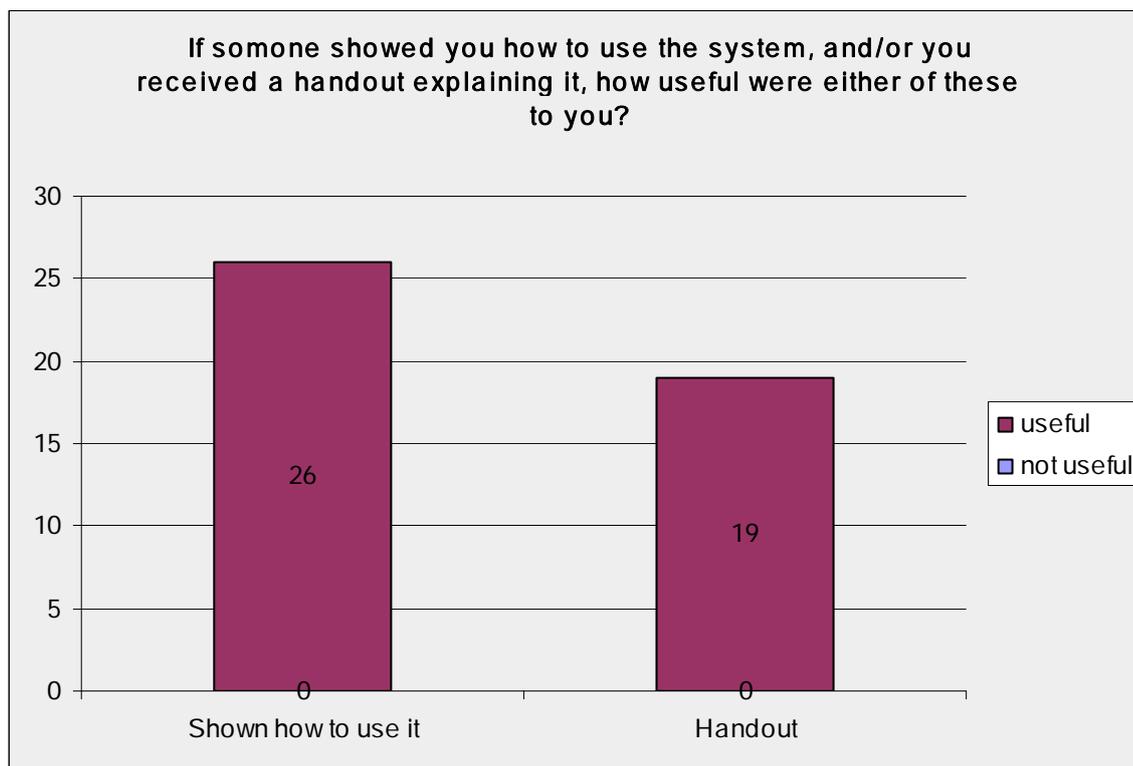
Figure D

The pilot study ascertained whether or not the individual learners had been shown how to use the e-learning before starting it, and had also received a written explanation. This had been a clear recommendation of the Practice and Development section which had instigated the pilot study. 88% of the pilot group had been shown the system prior to using it. This is considered important as it could have affected the individual's motivation to learn or their attitude to learning. The training department had also set up familiarisation sessions for each work site and an opportunity for staff to practise.
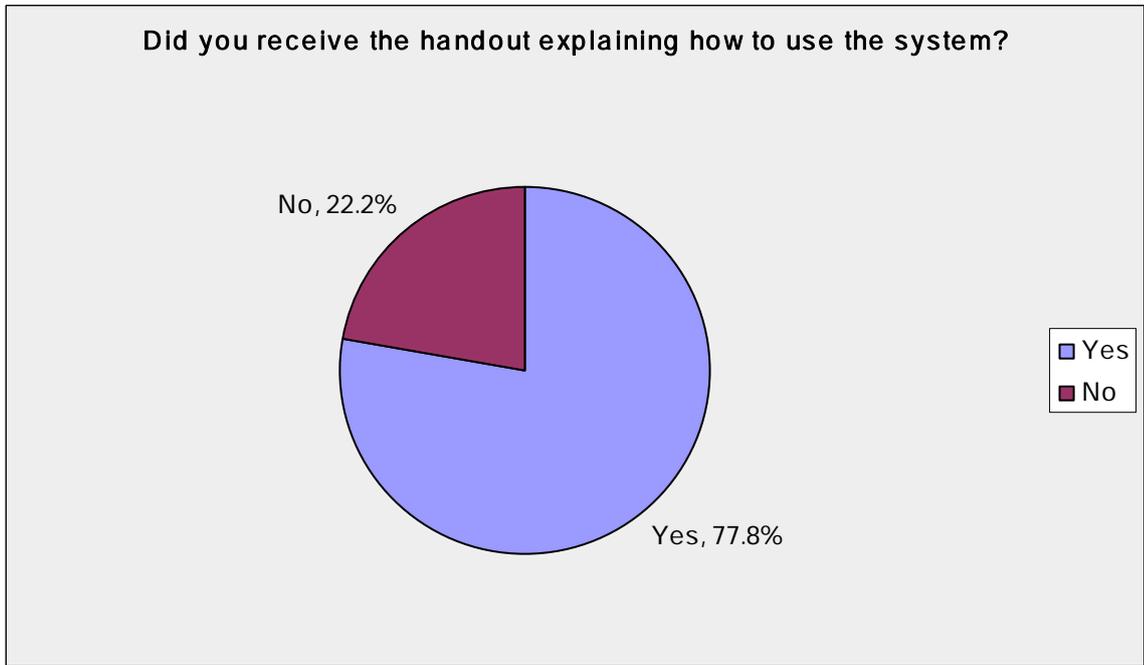
Figure E

In addition, a handout was prepared and this should have been handed out to individual staff on these sessions, or later by managers in the workplace, for those unable to attend the

sessions. The use of a handout was seen as important to reinforce how to use the system, and to increase learners' confidence in using the system.
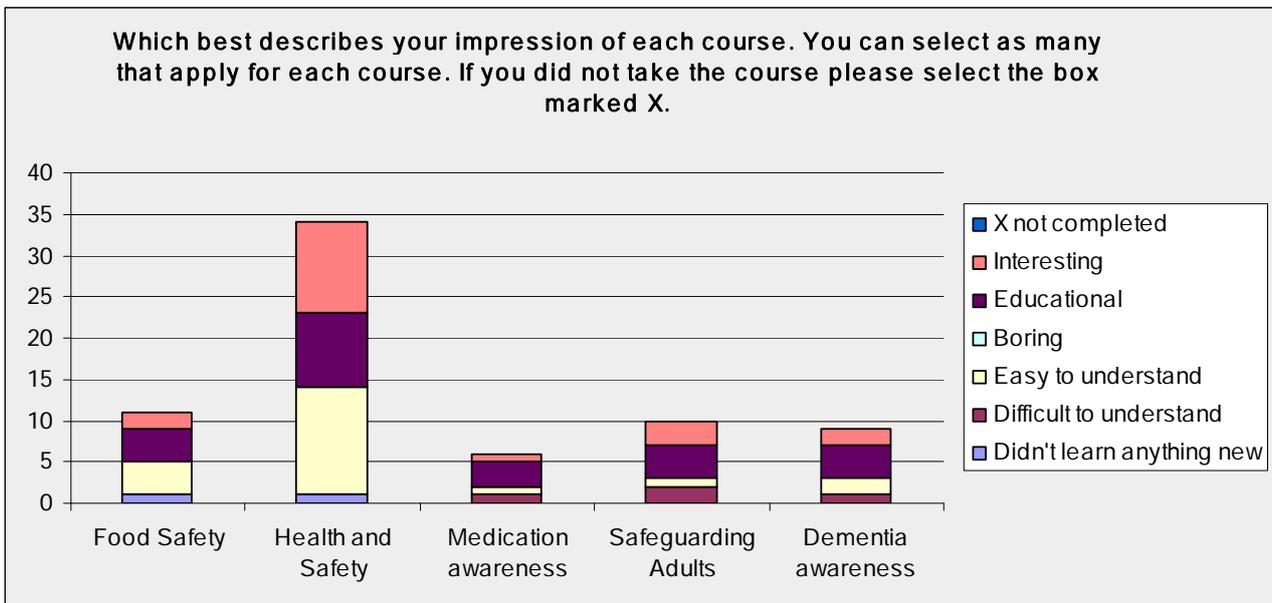

Figure F

Some people were only given a handout as distinct from being shown the system, and it would appear that a majority preferred to be shown the system, although they were both perceived to be useful for learning how to use e-learning.

Some of the comments from learners regarding the provision of the facilitation sessions and handouts included:

- "Gained confidence in using site. Handouts were not necessary."
- "Otherwise I wouldn't have been able to get going."
- "Explained easily"
- "Explained all procedures"
- "Easy to follow instructions"
- "Easy process to follow."

Figure G

It was considered important to gauge the impressions of each learner in relation to each course. There was a series of statements to describe their reaction to each completed course. The courses had been selected prior to the pilot starting on the basis of the interaction the learner had with each programme and the way in which information was put across to them. Of all the courses taken, no one commented that they were 'boring', and all were said to be interesting and educational.
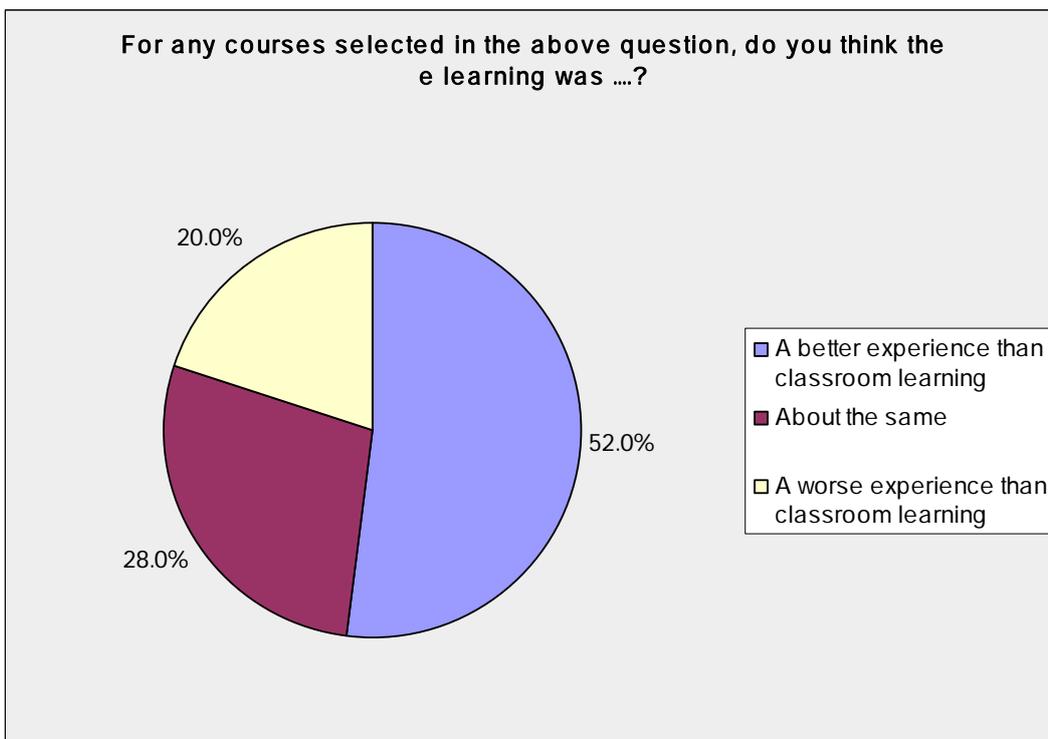
Figure H

Most people had attended this learning previously in a classroom setting, and their reaction to the experience of e-learning in relation to classroom-based learning was sought. Somewhat surprisingly perhaps, 52% stated that the e-learning was a better experience than classroom-based learning. The responses given by participants were:

16

- "Do it at your own pace and time."

- "Although I did all my training classroom-based, I have done e-learning training before and feel it is a lot better."

- "Concentrate more as we know there is an assessment at the end of session, but missing other colleagues' experiences on some."

- "Questions are very specific and don't allow any opportunity to have an opinion or ask questions."

- "I just didn't think I really took it in like I would have if I was in a group learning."

- "No interaction or chance for creative expression."

6   Conclusion

On analysis of the various research conducted, there would not appear to be a bias in relation to age in social care and health workforce development that needs to be addressed as a singular issue.

The research conducted with learners and training providers demonstrated that there are many other potential barriers to learning that are not explicitly age related. There is a clear message for training providers and employers to work in partnership in order that an organisation's culture and service provision will be taken into account when any training, learning or development is delivered, and a clear message for training providers to provide flexible learning, development and assessment to employers.

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