

Oliver McGowan draft code of practice on statutory learning disability and autism training

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Please review your answers

Email consent

Are you happy to share your email address with the Department of Health		
and Social Care?	Yes	<u>Change</u>
What is your email address	jayne.easterbrook@homecareassociation.org.uk	<u>Change</u>

About you

On behalf of an organisation

Organisations and individuals sharing their views as professionals

What sector do you work in?	Not for profit	<u>Change</u>
What is the main area of focus of your work?	Membership association for social care providers	<u>Change</u>
Where does your organisation operate services?	London	<u>Change</u>
Is your organisation regulated by the Care Quality Commission (CQC)?	No	<u>Change</u>
What is the name of your organisation?	Homecare association (formally UKHCA)	<u>Change</u>

Introduction to the code of practice

Do you agree or disagree that the purpose of the code is clear? Agree

Change

Please explain your answer. (maximum 250 words) I feel the introduction clearly states the importance of this training and provides clear rational for the reason this has been implemented.

<u>Change</u>

Section 1 - standards for training and related guidance

Standard 1 - all staff receive training that covers a minimum curriculum of capabilities

Agree	<u>Change</u>
Agree	Change
	Agree

Do you agree or disagree that Standard 1 is clear that where further training is required, this should align with the tiers and capabilities set out in the core capabilities frameworks?	Agree	Change
Please share any other thoughts you have on Standard 1 (maximum 250 words)	Standard 1 is clear when read with the guidance.	<u>Change</u>

Standard 2 - all staff receive training that enables them to explore how they will put their learning into practice

Do you agree or disagree that Standard 2 is clear that training must be tailored in content and delivery to help staff to put their learning into practice?	Agree	<u>Change</u>
Do you agree or disagree that Standard 2 is clear on how training should be tailored to staff working in different settings?	Agree	<u>Change</u>
Please share any other thoughts you have on Standard 2 (maximum 250 words)	It is clear when read with the guidance	<u>Change</u>

Standard 3 - all staff receive a minimum amount of live and interactive training that is co-produced and codelivered by people with a learning disability and autistic people

Do you agree or disagree that Standard 3 is clear about the length (one hour in addition to 90-minute e-learning) of live and interactive training required for staff who require a general awareness of learning disability and autism? Agree Do you agree or disagree that Standard 3 is clear regarding the length (one day in addition to 90 minute e-learning) of live and interactive training required for staff with responsibility for providing care and support for people with a learning disability and autistic people and for staff with a higher level of autonomy, who manage complex care and lead on learning disability and autism services? Not sure Do you agree or

disagree that Standard 3 is clear that live and interactive training must be co-produced and co-delivered with at least one person with a learning disability and one autistic person?

Agree

<u>Change</u>

Change

Please share any other thoughts you have on Standard 3 (maximum 250 words) It is not clear in this standard if the additional training is for all support staff who provide front line care. Further in the guidance it becomes clear that an organisation that takes clients at short notice (for example homecare) would need to do Tier 2 training as they may provide care for a client with a learning disability or autism.

<u>Change</u>

Standard 4 - all staff receive training that is based on evidence and is quality assured, through trialling, ongoing evaluation, and accreditation

Do you agree or disagree that Standard 4 is clear that staff must receive training that is evidence- based?	Agree	<u>Change</u>
Do you agree or disagree that Standard 4 is clear that staff must receive training that is subject to an accreditation process?	Agree	<u>Change</u>
Do you agree or disagree that both the content and delivery of training should be subject to an accreditation and quality assurance process?	Not sure	<u>Change</u>

Do you currently offer your staff training on learning disability and autism which has been accredited?

No

<u>Change</u>

Standard 4 - continued

Do you agree or disagree that Standard 4 is clear that staff must receive training that is subject to ongoing evaluation?	Agree	<u>Change</u>
Please share any other thoughts you have on Standard 4. (maximum 250 words)	Although I agree that training should be accredited this will be costly for providers of social care, who will need to fund this for their own staff. Having viewed the funding options it would be unlikely that funding will be available or sufficient to support social care providers (specifically homecare).	<u>Change</u>

Further guidance on recruiting and supporting people with a learning disability and autistic people, procurement, and record keeping

Do you agree or disagree with this approach?

Not sure

<u>Change</u>

Please share any other thoughts you have on the section in the draft code on 'Further guidance on recruiting and supporting people with a learning disability and autistic people, procurement and record keeping'. (maximum 250 words)

In the homecare sector there is currently a huge issue with recruitment and retention. so the cost of employing those who are new to care or who have not received the training will be very high in comparison to health care.

Change

Section 2: The Oliver McGowan Mandatory Training

Do you agree or disagree that the code clearly sets out which tier of the training on learning disability and autism is appropriate for staff to complete?	Disagree	<u>Change</u>
Do you agree or disagree that the code clearly sets out how the training on learning disability and autism meets the standards set out in section 1 of the draft code?	Agree	<u>Change</u>
Please share any other thoughts you have on section 2 of the draft code. (maximum 250 words)	For some social care providers who are able to accept or decline clients or LA packages they may feel that Level 2 is not required, this may cause issues with the regulator. So this does need to be much clearer.	<u>Change</u>

Section 3: How to use the code to meet the training requirement

Do you agree or disagree that it is clear from the draft code how registered providers can ensure they are complying with duties to train staff to work with people with a learning disability and autistic		
people?	Not sure	<u>Change</u>
Please explain your answer. (maximum 250 words)	There are a lot of training providers who are claiming their training meets the standards, which many do not. It must be made clear how to choose an accredited training provider.	<u>Change</u>

Impact assessment

In your organisation

Approximately what proportion of your staff would you say would need the Tier 1 package of the Oliver McGowan Mandatory Training?

Over 75%

Change

Approximately what proportion of your staff would you say would need the Tier 2 package of the Oliver McGowan Mandatory Training?	Over 75%	<u>Change</u>
Approximately what proportion of your staff would you say would need training on tier 3 capabilities from the core capabilities frameworks on supporting people with a learning disability and supporting autistic people?	Over 75%	<u>Change</u>
Please share any ideas, information and evidence you may have here (for example, web links, titles of papers or reports, useful contacts). This will inform the final IA. (maximum 250 words)		<u>Change</u>
If you have tried to link any staff training to the impacts on patients and service users or know of such attempts, please share the information with us. (maximum 250 words)		<u>Change</u>
Do you currently measure the effectiveness of training provided to staff	No	<u>Change</u>

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