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# Best Practices in Designing and Evaluating Healthcare Workforce Education to Support Family Caregivers

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# Dementia workforce development as a national priority

- First National Dementia Strategy (2009)
- Subsequent focus on the need to upskill the health and social care workforce
- Government mandate to Health Education England (HEE) in 2014



# Dementia Training Standards Framework for England



Tier 1 – dementia aware  
Tier 2 – those working regularly,  
directly with people with  
dementia  
Tier 3 – clinical leaders

## Target audience

The entire health and social care workforce (tiers 1, 2 and 3).

## Key learning outcomes

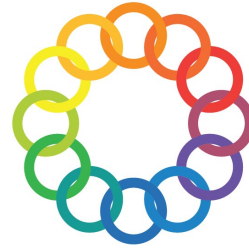
### The learner will:

- a) know what is meant by the term dementia
- b) be aware of the prevalence of dementia in the UK population
- c) be able to recognise signs of dementia and also be aware that these signs may be associated with other conditions or circumstances
- d) know what actions individuals can take to reduce their risk of dementia, or to delay onset
- e) know why early diagnosis of dementia is important
- f) know the actions that people affected by dementia can take in order to live as well as possible after diagnosis
- g) understand the importance of recognising a person with dementia as a unique individual
- h) be aware of the impact of dementia on individuals, families and society
- i) be able to communicate effectively and compassionately with individuals who have dementia
- j) understand reasons why a person with dementia may exhibit signs of distress and how behaviours seen in people with dementia may be a means for communicating unmet needs
- k) be able to signpost individuals, families and carers to dementia advice, support and information.





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**What works?**  
in dementia training  
and education

# What Works in Dementia Education and Training study



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# Aim and methods



## Aim

To gain an understanding of what constitutes an effective approach to education/training for the dementia workforce

## Three inter-related work packages

WP1: Systematic literature **review**

WP2: National **audit** of dementia training and **survey** of staff who have taken dementia training

WP3: In-depth **case studies** in 10 sites who show signs of good training practice

# Framework for analysis



## Kirkpatrick's 4 levels

1. **Reaction** – satisfaction with and views of the training;
2. **Learning** – impact on staff knowledge, attitudes and confidence;
3. **Behaviour** – do staff change their behaviour as a result of training;
4. **Results** – impact on outcomes for people with dementia, their families and staff



# Training most likely to be effective



I think practical sessions speak volumes, rather than PowerPoint presentations. Everyone's always like: 'It's death by PowerPoint, isn't it?' You sit there and you just think 'another slide, another slide, another slide' and you don't get people to engage with it, (Trainer AT044 046)

I find personally I understand things better when it's in a training setting, there is a group of you, when you know, giving ideas and all talking together about it rather than a question on a page (Staff member, SC042)

- Face-to-face delivery
- Interactive small group-based activities (e.g. discussions, learning activities, videos, scenarios)
- Is not didactic/lectures only

(Review, survey, case studies)



# Training most likely to be effective

- Covers fewer subject areas (survey)
- Is tailored to the staff attending so it is relevant to their role and service setting (review, case studies)

... what we wanted to do was to tailor training according to staff groups  
(Trainer AT044)

We tried to make it relevant to each clinical area (Training Facilitator MHT062 001)

... but in terms of the content it was about getting it right and making it sure that we pitched it at the right level for staff, ... and that I covered the right topic materials so that they were going to be able go back and use it  
(Trainer MHT068 030)





# Training most likely to be effective



“I was feeling very confident with X. The way she did the training is very good” (SC042 Focus Group1),

And obviously X is very personable as well as a trainer and presenter as well you know so yeah (Staff Member MHT062 005)

- Is delivered by an experienced facilitator (review, case studies)
- Is of at least 3.5 hours duration (review)
- Has individual sessions of at least 2 hours (review)



# Training most likely to be effective



“As a company X are really, really keen and up there to make sure the staff are fit for purpose, well trained and can deliver good care and they feel quite passionate about it I think” (Training Facilitator SC040)

So the reality is, by sort of saying that this is a must, that we facilitate people have the availability to attend the training. So that's facilitated within the off duty etc. for people to attend. So it's not a matter of people trying to juggle things around. We facilitate you know the time for them to attend. (Ward Manager MHT062 022)

- Is supported by management
  - Has clear leadership in the organisation
- (survey, case studies)



# Outputs: Training audit tool

## Download for free from

<https://www.leedsbeckett.ac.uk/research/centre-for-dementia-research/what-works/>



### Dementia Training Design and Delivery Audit Tool (DeTDAT) v2.0

Name of training programme/resource			
Length of training programme/completion time			
Target staff group for programme/resource			
Audit undertaken of	Full programme	Individual session/module (name)	
Name of auditor	Date of audit		

This audit tool is designed to help you consider indicators of evidence-based best practice in relation to the design and delivery of dementia training and education. It is designed to be completed with reference to the accompanying [DeTDAT Auditor's Manual](#) which provides more detail on each item and guidelines for how a score should be allocated, as well as possible evidence sources that could be used to inform the score. The manual also provides details on how to interpret your score and what you can do with the results.

Assessment area	Score	Evidence
General (applicable to all training)	0 = No	
Design, content and materials	1 = Partial	
	2 = Yes	
1. Training has been designed for/tailored to specific service setting and job role of learners who will attend		



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Thank you.  
**Any questions?**

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