



### Setting up the Training Program

The training program was established as a result of an Aged Care facility having identified the need for improved communication skills of its Personal Care staff. In partnership with a chosen Registered Training Organisation (RTO), acknowledged for its literacy and numeracy expertise, the facility and RTO successfully applied for Workplace English Language and Literacy (WELL) funding.

Jemal is employed at the Aged Care facility as a Personal Carer. He has a LOTE background and arrived in Australia 3 years ago. He is enrolled in Certificate 111 in Aged Care Work but his managers do not regard his language and literacy skills as being adequate for the job requirements.

Jemal was a qualified primary school teacher in Nigeria and speaks English well but his supervisors, colleagues and residents find it hard to understand him. Although Jemal's writing skills are sufficient to meet his everyday needs, they are not at the standard the industry and facility require for reporting on residents' progress or contributing to the development of residents' care plans. Jemal is a well regarded staff member because of the high standard of his work and excellent interpersonal skills so the facility was very interested in helping him improve his LLN skills so that both Jemal and the facility could benefit further from his work.

The facility therefore decided that Jemal and other staff would benefit from communication skills training. An information

sheet outlining the proposed training was distributed amongst the personal carers inviting them to indicate their interest. Jemal and other staff members welcomed the opportunity and agreed to participate in the program.

As part of the funding application process, the RTO and facility management identified the following key skills as essential to effectively meet workplace requirements:

- the English language and literacy skills required for reporting and documentation
- the ability to convey critical information about aged care residents both orally and in writing to internal and external personnel and family members
- the ability to communicate effectively with residents.

The relevant unit of competence which would address these skills requirements was specified in the submission: Comply with information requirements of the aged care and community care sectors, from the Community Services Training Package. This unit of competence forms part of the Certificate III in Aged Care Work in which Jemal is currently enrolled. The WELL focus however is specifically on the development of language, literacy and numeracy skills.

# Selecting the Participants and Conducting Pre-Training Assessments

The specific learning outcomes of a training programme depend on the individual needs of the target group of employees, in this case Aged Care personal carers, so pre-training assessments were conducted to confirm the existing LLN skills of potential participants, identify LLN skills gaps and consequent training needs.

Jemal attended the interview in which he was assessed by the specialist LLN trainer/assessor using a customised assessment tool with tasks developed using the processes, workplace standards and documents from the Aged Care facility where Jemal works. These tasks were developed with the required language and literacy skills in mind and mapped against the ACSF.

The Assessment tasks were divided into Reading, Writing, Oral Communication and Numeracy and covered areas such as:

- reading about residents' details in care plans and profile forms
- interpreting and recording information on charts for behaviour / toileting / infection control / activities of daily living
- documenting a resident's dietary needs
- understanding spoken and written instructions
- relaying information orally
- entering numerical information onto charts; calculating time; measuring medication.

Jemal's results showed that his pre-training levels of competence were at ACSF level 2 in Reading and Writing, level 2 in Oral Communication in the procedural, technical and systems Aspects of Communication but level 3 in the personal Aspect of Communication. His numeracy skills were also at level 3, which is above the required level for Certificate 111, so it was not necessary for him to undertake specific numeracy training. From these results, it was clear that Jemal required training to improve his Reading, Writing and certain areas of his Oral Communication skills. The Trainer/Assessor then used Jemal's results to inform the development of the training programme, in this way ensuring that Jemal's needs were being directly addressed.

To identify the additional core skills training Jemal required to ensure he was able to manage the Certificate 111 course requirements, the trainer/assessor compared Jemal's level of competence across the core skills with those required to undertake the Certificate 111. These have been identified as ACSF level 3 in Learning, Reading, Writing and Oral Communication and level 2 in Numeracy.

# Develop Curriculum and Deliver training

As with the development of the pre training assessment kit, the curriculum development process needed to take account of:

- the identified LLN needs of the participants
- the facility's processes, documentation and communication requirements and standards
- the competency unit
- the ACSF levels and Aspects of Communication.

The 80 hour training program was delivered as a weekly 2 hour class over 40 weeks. The Aged Care facility together with the training provider and LLN trainer decided on this format taking into account the work demands of the participants, timetabling issues and the expert advice of the LLN trainer as to the best possible training program for LLN purposes.

Jemal's training focused on the language, literacy skills required for effective Aged Care documentation and communication through the use of the Aged Care Funding Instrument (ACFI). The ACFI comprises 12 questions on which all Aged Care facilities depend for their assessment of resident requirements as well as for their ongoing Government funding and support.

The ACFI 12 questions cover the entire range of care for the aged under the 3 domains of: Activities of Daily Living (ADL); Behaviour; Complex Health Care.

By focusing on the LLN requirements of these care areas, the training programme ensured that Jemal was developing and improving in the areas most vital for him to carry out his work effectively.

- reading (resident details in Care Plans / care instructions/ medication instructions / resident dietary needs and nutritional information / Progress Notes/ infection control etc)
- writing ( reporting changes in condition of residents in Progress Notes / reporting behaviour problems / filling in charts / recording information in Care plans)
- speaking & listening skills (communication with fellow staff during handover/ giving & receiving instructions / communication with supervisors, colleagues, residents, families etc in person and on the phone)

#### **Assessment**

The assessment procedure included:

- on going (formative) assessment of Jemal's development of skills through class activities such as reading and writing progress notes for each of the ACFI 12 questions
- evidence of effective oral reporting at handover
- demonstration of improved knowledge, use and spelling of Aged Care terminology.

A final interview to discuss Jemal's evidence portfolio of class work, workplace documents, workplace projects undertaken partly in class and partly in the workplace- such as writing or re- evaluating a care plan, formed the main assessment method for this training program. The assessment interview also included discussion of the self assessment Jemal had completed prior to the interview and oral questions based on workplace procedures relating to the training curriculum. In the event of a participant not having sufficient evidence, 3rd party evidence of a supervisor or colleague would be included.

Jemal's final assessment outcomes were aligned to the ACSF as reflected in the following table. (Please note that at the time this case study was written the table used was adapted from the previously used WELL/NRS Table of Outcomes. It is not in a format approved by DEEWR).

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### **WELL / ACSF Table of Outcomes**

Jemal's Pre-Training Assessment Outcomes x

Jemal's Final Assessment Outcomes ✓

			COR	E SKILL	s & INDI	CATORS	OF CO	третепі	CE_			
Communication Aspects		Learning		Reading	Writing		Oral Communication		Numeracy			
		01	02	03	04	05	06	07	08	09	10	11
Level 1	Procedural											
	Technical											
	Personal											
	Cooperative											
	Systems											
	Public											
Level 2	Procedural			x	x	х	x	х	x			
	Technical			x	x	х	x	x	x			
	Personal			х	х	х	x	х	x			
	Cooperative				x	х	x	х	x			
	Systems			x	x	x	x	х	x			
	Public											
Level 3	Procedural			V	√	V	√	V	√	x	x	x
	Technical			V	√	V	√	V	√	x	x	x
	Personal			V	√	V	√	х	x	x	X	x
	Cooperative									x	x	x
	Systems			V	√	V	√	√	√	x	x	x
	Public											
Level 4	Procedural											
	Technical											
	Personal							√	√			
	Cooperative											
	Systems											
	Public											
Level 5	Procedural											
	Technical											
	Personal											
	Cooperative											
	Systems											
	Public											

The outcomes show that, as a result of the training, Jemal's levels increased from level 2 to level 3 in Reading and Writing. In Oral Communication Jemal increased his skill level from 2 to 3 in the procedural, technical and systems Aspects of Communication targeted in the training, and also improved in the personal Aspect from level 3 to level 4.

Based on Jemal's evidence, the trainer/assessor made the decision that he was Competent in the Unit Comply with the information requirements of the aged care industry and community care sectors. As a result of his being deemed Competent by his assessor, Jemal received a Statement of Attainment from the RTO .

### Reporting

The reporting requirements for WELL funding specify that the training provider must deliver an interim progress report at 6 months in which progress of the whole group is reported in general terms. This does not include assessment outcomes.

When the training has been completed, a final WELL report is submitted in which assessment outcomes of the training are reported as aggregated data. In addition, as part of the training evaluation, information is provided on the gains to both the participants and the employer organisation as a result of the training. The information reflects feedback from the employer/employee and the RTO. As a result of Jemal's training the outcomes for the facility were:

- improved accuracy in completing documentation,
- increased efficiency,
- improved productivity,
- more effective quality control.

The outcomes for Jemal and his colleagues were:

- improved workplace skills,
- more effective communication,
- increased confidence
- greater participation in teams and meetings
- improved moral and attendance

Jemal's and his classmates' final assessment outcomes were reported in the final WELL Report in general descriptive terms as well as being recorded on an ACSF Table of Outcomes where the assessment outcomes were measured against the 5 Levels of Performance, 5 Core Skills reflected through the 11 Indicators of Competence and, the 6 Aspects of Communication.

In the WELL ACSF Table of Outcomes below are the assessment outcomes of Jemal and his 6 classmates. The consolidated outcomes are reflected numerically and entered against the achieved ACSF level of performance, Indicators of Competence and relevant Aspects of Communication. The table reveals that most of Jemal's group achieved the required level 3 across the Core Skills of Reading, Writing and Oral Communication, and a small number achieved level 4.

### **WELL / ACSF Table of Outcomes**

Numbers of Participants: 7

			COR	E SKILLS	s & INDI	ICATORS	OF CO	ηρετεπι	CE			
Communication Aspects		Learning		Reading		Writing		Oral Communication		Numeracy		
		01	02	03	04	05	06	07	80	09	10	11
Level 1	Procedural											
	Technical											
	Personal											
	Cooperative											
	Systems											
	Public											
Level 2	Procedural											
	Technical											
	Personal											
	Cooperative											
	Systems											
	Public											
Level 3	Procedural			5	5	7	4	4	4			
	Technical			5	6	7	4	4	4			
	Personal			4	4	4	4	4	4			
	Cooperative											
	Systems			5	5	7	4	5	5			
	Public											
Level 4	Procedural			2	2		3	3	3			
	Technical			2	1		3	3	3			
	Personal			3	3	3	3	3	3			
	Cooperative											
	Systems			2	2		3	2	2			
	Public											
Level 5	Procedural											
	Technical											
	Personal											
	Cooperative											
	Systems											
	Public											

(Please note that at the time this case study was written the table used here was adapted from the previously used WELL/NRS Table of Outcomes. It is not in a format approved by DEEWR).