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## A Model of Induction for Specialised Residential Care

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A Model of Induction for Specialised Residential Care

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**Abstract**

The Social Care Education and Training Project at the Dublin Institute of Technology is a four year project funded by the Department of Health and Children. The project has increased the number of students enrolled in social care courses at the Institute and delivers Continued Professional Development courses for workers in the specialised residential units. The article describes an induction model developed and delivered by the project team to new workers in the specialised residential units in the Dublin region although the course is suitable for all residential care settings. The evaluation suggests that the majority of participants found the induction module worthwhile because it had a positive effect on their professional practice and increased their self confidence. This supports the need for formal induction training for all new workers to ensure they perform their professional duties as effectively as possible in their new working environment.

**Key Words:** induction; course design; course evaluation.

## Introduction

This article relates to induction training in specialised residential care units for children and young people in Dublin. Initially, the article highlights the importance of induction training for new workers followed by an account of a model of induction training devised by the Social Care Education and Training Project. This module formed part of a wider Induction programme provided by the employers. The three central features of the course design will then be identified followed by an overview of the learning outcomes, module content and assessment process. Findings from the evaluations carried out to date are presented and discussed. Whilst the findings were mostly positive, the article concludes with an explanation of some of the limitations encountered.

## Induction

Induction is a planned training programme that integrates new staff members into the workplace (Warner, 1992; Fowler, 1999; Skinner, 1992; Goldson, 1995; Meighan, 1995). The goal of induction training in residential care and specialised residential settings is to familiarise new staff to the agency's policies, procedures and the principles that govern practice (Goldson, 1995). Induction also aims to help new workers to gain the necessary skills, knowledge and competences to carry out their professional duties as effectively as possible (Goldson, 1995; Meighan, 1995; Skinner, 1992). In addition, induction training contributes to team building (Davis, 1994), clarifies roles and assists in staff retention (Davis, 1994; Fowler, 1999; Meighan, 1995).

Whilst induction provides a baseline of training for all workers it is not intended to supercede recognised professional qualifications. All new staff should have an understanding of the principles, standards and procedures required for effective

practice in that unit. Furthermore, some units will apply particular theoretical models and practice interventions to meet the needs of the young people in their care. Regardless of prior education, training and experience, induction can give workers an opportunity to enhance their skills and to inform staff of the relevant practices, perspectives and culture of the organisation. Induction should be seen as the initial stage in a process of training for social care professionals from pre-professional, professional and Continuous Professional Development (CPD) training (Skinner, 1992).

In Ireland, regulations state that all new staff should receive formal induction (Department of Health and Children, 2001). Despite this there is no national policy on induction in residential centres.

#### Induction Module Design

In consultation with key stakeholders including the project's advisory board<sup>1</sup> and the Social Services Inspectorate (SSI), the need for the development of an induction module for new workers in the specialised residential care units in the Dublin region was highlighted. The project addressed this by designing and developing an induction module. The aim of the induction module is to provide staff (in groups of 15 max.) with an introduction to social care work as part of an overall induction process. The wider induction programme provided by the employers includes training on health and safety, first aid, child protection and introduction to the unit's own policies and procedures.

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<sup>1</sup> The Advisory Board was established by the DIT to give guidance and direction to the Social Care Education and Training Project. The Board meets four times a year and its members include staff from the DIT, the project leader, representatives from ERHA, representatives from the SSI and representatives from Area Health Boards in the Dublin region.

Drawing on personal reflective practice and relevant adult learning principles and incorporating current theoretical models in social care education and training (Knowles, 1970; Brookfield, 1983; Kolb, 1984; Shardlow and Doel, 1996; Horwath and Morrison, 1998 and Toohey, 1999), the central features of the course design are as follows:

### 1: Student Centred

The course participants invest time studying, writing up assignments, developing their professional development portfolio, attending the workshops and making a contribution to the learning environment. To assist learners in this process, the delivery insures the learning is more accessible than traditional college based courses by:

- being available to learners by providing the training off college campus with user friendly materials, causing minimum disruption to the service through limited out of agency time
- allowing some flexibility regarding the time, place and pace of learning
- promoting deep learning for learners through active teaching methods
- supporting learners to be more autonomous in their learning
- helping learners to reflect on and evaluate their own learning
- using interactive and innovative teaching methodologies to enhance the collaborative process where there is sharing of experiences and knowledge
- using introspection and critical reflection as a component of the professional development portfolio and employing clear assessment criteria to measure learning outcomes
- encouraging learners to integrate theory and practice

## 2. Modular Structure

The module consists of a series of 15 interrelated but separate units which form an integrated learning programme. The module is accredited under the European Credit Transfer System of accreditation (5 ECTS). 1 ECTS credit is awarded for 20 hours of study. To gain five credits it is necessary for students to complete 100 hours of an educational programme. The Staff Induction Module for Specialised Residential Care is a 100 hour programme broken down as follows: 55 hours of face-to-face teaching and 45 hours of self-directed study. The credits for the completed elements of the course are retained and may be built on at a later stage. The Introductory Unit of the DIT module has a different structure than the other 14 units. Compiled as a learner's handbook, the Introductory Unit provides the learner with an overview of the module including the content and structure of the course, the supports available, the assessment process, strategies for effective study and guidelines on compiling a professional development portfolio.

## 3. Partnership with Employing Agency

All participants on the course have the full backing of their employing agency. The employer provides practical support in relation to:

- *Work based support and mentoring:* an identified mentor for each learner provides practical support on work related aspects of the course
- *Attendance at workshops:* the agency facilitates study leave to cover the attendance at course workshops
- *Work based assignments and critical reflection processes:* as part of the assessment process, participants undertake work related tasks along with their normal work to facilitate the integration of theory and practice
- *Course fees:* are met through the project funding and additional costs such as venues and meals are provided by the agencies. An appropriate room

creating a comfortable learning environment is essential. The DIT provides the essential course materials, the course tutors, the training workshops, the assessment process and awarding of CPD certificates to successful participants and offers opportunities to continue studies to degree level and beyond.

### Learning Outcomes and Course Content

Following discussions with the specialised residential units regarding the essential components of an induction module for new staff, the project team identified the subsequent learning outcomes as essential. On completion of the induction module, the learner is expected to:

- Define, discuss and evaluate the role and responsibilities of the social care practitioner working with young people in the specialised residential care sector
- Recognise, interpret and assess the underlying factors that contribute to the high level of needs of young people
- Discuss and analyse how beliefs, values and attitudes affect professional care practice
- Recognise, analyse and interpret the values, knowledge and skills required to translate learning into action through reflective practice
- Demonstrate the basic study, writing and reflective practice skills required to compile a professional development portfolio that will present the knowledge, learning and skills the learner has developed

### Course Content

The module consists of 15 units, all of which provide core skills in the context of the specialised residential care sector. The majority of units were delivered over a two-hour period (the units are listed in Figure 1:1 in the appendix section).

The delivery timescale is flexible to suit the residential unit; most recently the face-to-face workshops have been delivered over a two-week time frame. The students are then given a further six weeks to complete their professional portfolios. Support is available to the students from DIT tutors and the workplace mentor to help them to complete the portfolio.

### The Assessment Process

Through the process of completing the induction module, learners compile a portfolio to show evidence of their acquisition of knowledge, skills and competence and their ability to reflect on their own learning. Key units, including Promoting Resilience, Personal Development and Attachment Theory contain carefully constructed portfolio assessment tasks aligned with the learning outcomes, content and the overall aim of the course. These are explained during the teaching of each of the key units and time is allocated for discussion during the workshop. The tasks vary in type and content to incorporate opportunities for students to record their learning in a variety of ways. The portfolio should contain reflective writings that summarise the writer's knowledge and skills that s/he has learned. Assessment decisions are reached by the DIT tutors based on the satisfactory completion of each task. The assessment criteria are related to the specified learning outcomes and are published in Figure 1:2 in the appendix section.

### Course Evaluation

Course evaluation can take place either in a planned or less formal manner (Toohey, 1999). Toohey argues that some of the dangers of the latter are that anyone with a connection to a course will make some evaluation of it and sometimes judgements may be based on limited knowledge of the course and against criteria that do not



reflect the course designer's aims. Therefore, she argues it is vital that a planned evaluation takes place in order to 'provide evidence of the degree to which the programme meets its own goals and which also attempts to evaluate the programme from other perspectives' (Toohey, 1999, p. 197). Additionally, Reece and Walker (2002) propose the following evaluation strategies:

- Personal reflection by the lecturer on their performance
- Peer observation through sitting in on a class and 'micro-teaching' – teaching a group of peers followed by critical evaluation
- Feedback from students

With regard to this, it was decided to employ a variety of different methods of evaluation, both internal and external, as quality control measures. The methods used were peer review, learner self-reports and stakeholder interviewing. Firstly, each workshop was evaluated by a self-report sheet completed by learners. The initial reactions of learners to the workshop were assessed by examining what learners found most useful, the benefit they received from the course, time allocation and how the workshop could be improved. Tutors employed informal peer review as an additional evaluation method through team planning and critique and by observing each other's training sessions. Anonymously, at the end of each module learners completed a second and more detailed self-report evaluation on such topics as organisation and content, structure, relevance, resources, time allocation, supports, course delivery, assessment processes and suggestions for improvement. In conjunction, feedback from these evaluation findings and course content was sought from unit managers and mentors. Finally, two independent external evaluations were conducted by research consultants six months and a year approximately after the induction modules were completed. These evaluations

utilised learner self-evaluation reports as well as qualitative interviews with managers and mentors.

The internal evaluation findings derived from three separate modules self-reports (completed between May, 2003 and September, 2003) indicated that the majority of learners described the various components of the course (see figure 3) as satisfactory or excellent. The majority of respondents found the modules 'relevant, well-delivered and enjoyable' and said the course content was interesting. Many of the learners stated that the lecturers were 'easy to understand, supportive and approachable'. One issue that was encountered was that just over half the participants on one induction course found the course content too theoretical. However, the remaining learners on this course felt the content was satisfactory or excellent. This result underlines the challenge of designing the induction to meet the learning needs of a diverse learning group. The learners' qualifications ranged from those with postgraduate qualifications, relevant social care qualifications, to those with minimal second level education.

In addition, the importance of providing a suitable learning environment and good work based mentoring was highlighted. Evaluation from the first two courses indicated that there were problems delivering the course on-site because of regular interruptions and difficulties in concentration due to work demands. These issues were addressed and changes were made for the delivery of the third course, which was delivered off-campus and over a two week concentrated period.

The key findings of the external evaluation<sup>2</sup> highlighted that the majority of learners (87%) viewed the induction module as worthwhile because:

- It had a positive effect on their professional practice and awareness of the importance of consistency in working with young people
- It gave them a greater insight to the lives of young people in care
- It promoted positive communication and relationships between colleagues and staff
- It enhanced skills and knowledge in relation to specific areas such as LSI and planning
- It increased self-confidence

The evaluation noted that learners with limited experience or qualification received most benefit from the course. This was particularly evident when new members joined the staff team who had not received the induction training. The evaluation found that training needed to be more interactive with time built in during the module for the completion of portfolio tasks. In conclusion 'Participants reported that their professional behaviour was influenced as a result of participation in the Induction Programme' (Thrive, 2004, p. 9). Learners reported that they were able to apply the knowledge that they had gained on the induction module on a day to day basis in their work. Examples of this include viewing case histories, planning for children in care and the use of LSI. In addition, they indicated that the induction resulted in a more positive attitude to supervision and the importance of working in a consistent and professional manner with young people in their care.

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<sup>2</sup> Thrive, (2004), Training Initiatives for Child Care Workers in the Dublin Region, (Unpublished), Thrive. The external evaluation was conducted at two different stages, at 6 months and 12 months after the delivery of the courses.

## Conclusion

This article began with a discussion of the importance of induction training for new workers. The model of induction training, incorporating innovative teaching and learning methodologies, designed and developed by the DIT Social Care Education and Training Project was described. The three central features of the course design were outlined followed by an overview of the learning outcomes. The module content and assessment process were detailed. To date, three separate induction modules have been evaluated, both internally and externally, and the findings have been in the main, positive. Further induction courses are planned but one of the difficulties encountered has been delays in the recruitment of new staff affecting the number of induction courses delivered. In addition, the delivery of CPD courses has been impeded due to the dilemma encountered by management of maintaining a quality service to the young people in the units and at the same time offering CPD opportunities to staff.

Starting any new job is a stressful experience, not only has a great deal of information to be assimilated, but a whole array of work and personal relationships are being established whilst meeting the needs of service users. Studies have shown that a change or start in a new job can be a stressful event for those involved. Job induction is a gradual process which begins with the basic information about the job and the organisation and continues informally and formally over the early months of starting work. The results of a positive induction process can assist staff in learning about their new role and can assist new staff to develop good working relationships with management and colleagues and appropriate working relationships with service users. Additionally, through induction new staff are given

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an opportunity to familiarise themselves with the agency, including its policies and ethos and staff will begin to identify with the agency.

The induction module aims to offer learners far more than a CPD certificate. It is hoped that it will provide learners with an opportunity to grow in skill and confidence, to get to know their colleagues better, deepen their understanding and broaden their experience of training and development. It is anticipated that the module will offer a progression route to lifelong learning and seeks to support learners developing both personally and professionally.

#### Acknowledgements

We wish to express our appreciation to our former colleagues Stephen Hennessy and Bridget Megarry for their contribution to the development of the induction module.

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Fig. 1:1 Short Course in Continual Professional Development

Unit 1	<p><b>Introductory unit</b></p> <p>This is a written handbook that provides participants with information on the course, content, structure and support systems available. It clearly outlines the assessment tasks and the development of a portfolio. It is also intended to assist participants with the basic study, writing and reflective practice skills required to tackle the course successfully. The introductory unit also recommends readings under the different units for participants.</p>
Unit 2	<p><b>Course Overview and Portfolio Development*</b></p> <p>The aim of this introductory session is to provide the participants with the information about the background and context of this initiative in specialised residential care, to give an overview of the module and to provide guidelines in relation to the assessment process. It also provides an opportunity to clarify the expectations of the participants, tutors and employers.</p>
Unit 3	<p><b>Children's Rights and Complaints</b></p> <p>The aim of this unit is to provide the participant with an overview of the relationship between children's rights and complaints policies, procedures and practice. By the end of this unit participants will have deepened their understanding of the basic importance, concepts and issues in relation to rights and complaints procedures for young people in residential care. Additionally, participants will have reflected on professional practice, through deeper discussion and the acquisition of skills and strategies that promote the development of safe care and the positive management of complaints procedures within the specialised residential setting.</p>
Unit 4	<p><b>Promoting Resilience</b></p> <p>This unit aims to equip participants with the skills, knowledge and strategies necessary to promote resilience in service users. By the end of this unit participants will have deepened their understanding of the concept of resilience. In addition, participants will have developed a heightened understanding of the concept of a secure base, stability and continuity and participants will have learned the importance of social networks, eco-maps and mentors for service users.</p>

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Unit 5	<p><b>Report Writing and Record Keeping</b></p> <p>This unit aims to enable participants to understand their responsibilities in relation to report writing and record keeping and to undertake the task effectively. By the end of the unit participants are expected to be aware of the standards required by SSI and the importance of the Freedom of Information Act, 1997. They will also have had the opportunity of applying theory to practice during the unit.</p>
Unit 6	<p><b>The Role of the Supervision</b></p> <p>This unit aims to facilitate the participants in gaining an understanding and appreciation of the importance of supervision in their work through exploring different models of supervision, the purposes of supervision, the roles of the different parties and contracts in the supervisory process.</p>
Unit 7	<p><b>Inter-professional and Interagency Work</b></p> <p>The aim of this unit is to help participants to gain a better understanding of the benefits to children and their families of inter-professional and inter-agency co-operation. By the end of this session, the different professionals and agencies that may be involved in a child's life will be identified. The key role of the social worker is described and the key factors that hinder and enhance communication is discussed. Participants have an opportunity to work together in small groups towards a common goal and the process noted by an observer.</p>
Unit 8	<p><b>Safe Care</b></p> <p>This unit identifies the definitions of child abuse in residential care and reviews the history and effects of child abuse in institutions in Ireland. It identifies the key factors that contribute towards safe care and how to deal with concerns, disclosures and allegations.</p>
Unit 9	<p><b>Working with Families</b></p> <p>This unit aims to enhance the participants' knowledge of the value of working co-operatively and in partnership with parents and significant others. Participants will have clear information in relation to the diversity of family composition in Ireland today and the different stages of the family life cycle. The effects of dysfunctional family dynamics on child welfare are discussed and the participants will have an increased understanding of their obligations to facilitate contact between children in their care and significant others, as appropriate.</p>
Unit 10	<p><b>The Legal Framework</b></p>

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	<p>This unit aims to give the participants an increased knowledge of the relevant child care legislation. They should have a detailed knowledge of the Child Care Act 1991 and an appreciation of how the legislation impacts on their work</p>
Unit 11	<p><b>The Professional Role of the Social Care Worker*</b></p> <p>The unit aims to introduce participants to the role of the Social Care Worker. They should have increased knowledge of key principles of professional practice such as empowerment, confidentiality and respect for persons. Participants are given the opportunity to discuss how principles of professional practice impact on their work and relate to their professional practice. The unit also examines the needs of young people in care.</p>
Unit 12	<p><b>Solution Focused Therapy / Life Space Intervention (LSI)</b></p> <p>The unit aims to introduce participants to the concepts and therapeutic approach associated with either Life Space Intervention or Solution Focused Therapy. Learners are given an opportunity to discuss how these approaches can be adapted and applied to their work with young people in residential care.</p>
Unit 13	<p><b>Attachment Theory and Child Development*</b></p> <p>This unit aims to increase the participant's knowledge in the area of child development, attachment theory, separation, loss and trauma and give the participants an opportunity to relate their learning to practice. By the end of this unit participants will be introduced to the theory of attachment and will have an opportunity to relate it to their work practice. Additionally, participants will be given an opportunity to study the relevant theory, will be introduced to the effects of separation, loss and trauma in relation to attachment theory and will be given an opportunity to relate it to their work practice.</p>
Unit 14	<p><b>Principles and Practices of Group Work**</b></p> <p>This unit aims to introduce participants to the characteristics of groups and how they can be best facilitated for optimum use within the residential care environment. Learners will be helped to understand how groups form, develop and function. The expectations that participants bring to a group and how these affect the ways in which the group functions are explored. Learners will be helped to gain a better understanding of the different roles that members can adopt within a</p>



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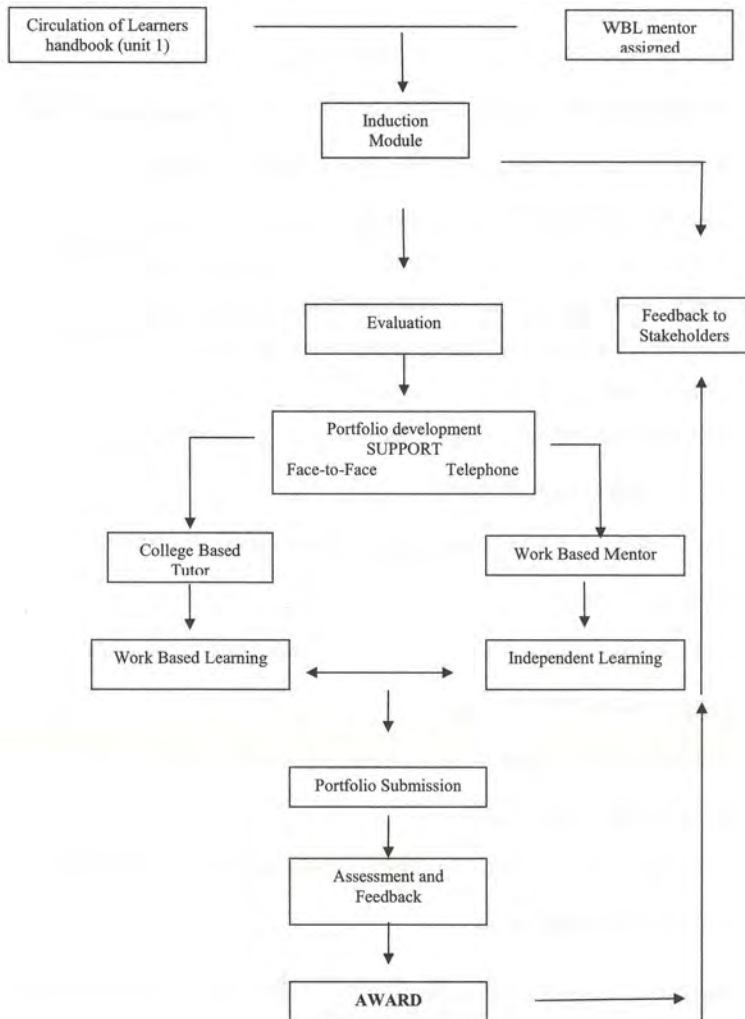
	group and to develop the skills required for effective group facilitation.
Unit 15	<p><b>Course Review and Evaluation</b></p> <p>This unit reviews the different units of the module and gives the participants an opportunity to complete evaluation forms and give verbal feedback. Their expectations on the first day are revisited and suggestions on how their future learning can continue are discussed.</p>

\* These sessions were delivered over an eight hour period

\*\* This session was delivered over a six hour period

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Fig. 2: DIT Induction Module for Specialised Residential Care



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Twelve Weeks of Ice Cubes: A Short Story

*Rhys Evans*

Lucien worked from home. Just like all good business men. Except, this wasn't a family enterprise run for centuries in a roaming place such as Wyoming, nor a palatial waste treatment plant in New Jersey. No. Lucien ran a photocopier business. Nothing wrong with this, many successful entrepreneurs had to start somewhere. Though, to contact Lucien, for diligent expert advice on photocopiers, meant you had to ring Token Springs Motel, Highway 11, in Virginia. And ask for room number 12.

Lucien ran his enterprise from room number 12. He had been doing so for twelve weeks. Twelve weeks of ice cubes, tooth picks and late night television. A recent sitcom that had spun Lucien out of control was 'Dog.' 'Dog' was a show about cats that alluded to a growing undercurrent beneath Uganda that would be detrimental to the state of cows on the Shetland Islands. No, 'Dog' was about...Dogs. Show dogs, working dogs, dogs that saved those trapped in mines, every ilk of reverie with dogs that could be imagined.

Late at night, Lucien would lie on top of the made up bed (he never slept under blankets) and whistled. Whistling allowed him to fashion a form of company that had evaded him for some time. The evasion was caused by photocopiers.

Lucien ran a photocopier firm, yet didn't really. Sure he had the brochures, the knowledge (abundant sheets of paper printed from the computer at the local internet café). Enquiries had been made by a number of people. The thing was Lucien didn't have any photocopiers: simple as that. In week three of his residency at Token Springs, he had attempted, unsuccessfully, to coerce a partnership with a major photocopier company in Washington. Lucien plodded on, loosely, dishing