



Implementing the 'autism skills and knowledge list' through staff training and development

For those who plan, commission and deliver workforce development for workers in generic health and social care services.

Part of the 'Better social care and health outcomes for people with autism' series.









Once you have determined the need to develop greater understanding about how to respond to the needs of any person with autism using your social care or health service (possibly by having used the self-assessment checklist in the *Autism skills and knowledge list*) you can use the following 'mapping' to identify which parts of the list you can support with current health and social care QCF units.

QCF units specifically about autism

There are currently three QCF knowledge units specifically about autism, at levels 2, 3 and 5:

- LD 210 Introductory awareness of Autistic Spectrum Conditions
 (level 2, credit value 2, ref: M/601/5316)
- LD 310 Understand how to support individuals with autistic spectrum conditions

(level 3, credit value 3, ref: T/601/5317)

 LD 510 – Promote good practice in the support of individuals with autistic spectrum conditions

(level 5, credit value 7, ref: A/601/5318).

These are complemented by other units such as 'Support Individuals Undergoing Healthcare Activities', 'Contribute to supporting individuals with a learning disability to access healthcare' and 'Working in partnership with family carers'. All the units are available to view at www.skillsforcare.org.uk in the training and qualifications section.

Collectively, the units within the Diplomas in Health and Social Care cover many of the areas identified in the *Autism skill and knowledge list* as essential underpinning values and attitudes, basic autism awareness and knowledge and skills. This is shown in detail in the mapping below. Work is currently underway to develop further specialist QCF competence units about autism.

An introduction to the QCF

The Qualifications and Credit Framework (QCF) is a new way of recognising skills and qualifications, by awarding credit for qualifications and units (small steps of learning). It enables people to gain qualifications at their own pace along flexible routes.

The QCF is designed to make sure that future qualifications allow a flexible, 'mix and match' approach to meeting the different development needs of the workforce.

Every unit and qualification in the framework has both a 'credit value' and a 'level'. One credit represents 10 hours of average learning time and so the *credit value* shows how much time it takes to complete. The level shows how difficult the unit or qualification is on as scale of 'Entry' then levels 1–8.

There are three sizes of qualification in the QCF:

- awards (1–12 credits)
- certificates (13–36 credits)
- diplomas (above 36 credits).

(QCF diplomas are not the same as the '14–19 Diploma'.)

The qualification type – award, certificate or diploma – represents the 'size' of a qualification, not how difficult it is, therefore there are awards available at various levels up to 8 within the framework.

It is important to note that existing NVQs, already completed or that workers have already registered for but not yet completed, continue to be valid qualifications in health and social care. The QCF is designed to make sure qualifications allow a flexible, 'mix and match' approach to meeting the different development needs of the workforce. So those people who already hold a generic health or social care NVQ or professional qualification may choose to undertake units specifically about autism to complement their existing qualification

See below for information about the new level 2 and 3 diplomas in health and social care that have replaced the NVQs.





The Autism skills and knowledge list mapped to the QCF autism units and others

Autism skills & knowledge list	Learning outcomes and assessment criteria within autism-specific QCF units									Other QCF units which support the		
(see separate publication)	LD210			LD310			LD510			skills and knowledge		
1. Underpinning values	and a	attitu	des. P	eople	e with	n autis	m us	ing o	ur sei	rvice have a right to:		
Be independent	4			1.1	2.4	6.1	1.5 3.5	3.1 4 5	3.4 5.4			
Be regarded and treated as individuals	1.1	2.3	4.5	2 3	1.4 3.4 3 4.3		1.5 2.4 3.4 3.7	1.6 3.1 3.5 4 5	2.3 3.3 3.6	HSC 26 & 36 PWCS 26 & 36 Person-centred approaches		
Make choices for themselves	2.1 3 4	2.2 5	2.4		1.4 3.6 5	_	1.5 3.1 3.6 5.4	1.6 3.4 4.4				
Be treated in an equal and fair way										SHC 23 & 33 PWCS 23 & 33 SHC 53 Equality and Inclusion		
Be treated with respect, dignity and confidentiality		.1 3 4.5		1.1 1.6 2.4 3.5 5.1	1.3 2.2 3.2 3.6 5.3	1.4 2.3 3.4 4 6	1.5 3.1 4.3 5.3	1.6 3.4 4.4 5.4	3.7			
Access specialist support to realise potential	4 & 5	5		1.1 3.5	2.25.2	2.4	1.3	3.1	2.1			
Receive compassionate and non-judgemental support, and to give it in their own roles	2.1	4.4 5.1		2.3	3.6		1.5 3.2 3.7	3.5	3.1 3.6 4.3	This concept is covered implicitly in several units: HSC 25, 26 & 36,		
as parents, carers, workers or volunteers		Not covered explicitly but implicit units shown.				in the			SHC 23 & 33 PWCS 23, 33, 25, 26 & 36			



Autism skills & knowledge list (see separate publication)	Learning outcomes and assessment criteria within autism-specific QCF units									Other QCF units which	
		LD21	0		LD31	0		LD51	0	support the skills and knowledge	
2. Basic autism awareness should	inclu	de:									
The notion of autism as a spectrum, including the fact that it is a life-long condition.	2			1 (e:	sp 1.3	3)	,	sp 1.2	2)		
A brief synopsis of the theoretical models developed by Kanner and Asperger in identifying autism.				2.3			1.4				
Key characteristics – understanding the main differences found in people with autism (often referred to as the 'triad of impairments').	1.1	2.4	3.1	1.2			1.1				
Common sensory differences experienced by people who have autism.	2.4			1.4	6.4		5				
Common co-occurring conditions. Basic understanding of the complexity surrounding diagnosis, which includes: - getting a formal diagnosis - lots of different diagnoses within	2.3			1.5							
the 'autistic spectrum' - reasons for avoiding, or barriers to, diagnosis.		Blank in sup	nt								
Prevalence of autism in the general population.											
3. Intermediate knowledge and skills											
Use appropriate communication skills when supporting a person with autism.	5			5			4				
Support families and friends and make best use of their expert knowledge of the person.	4.2	4.3	4.4	2.1	2.4	6.2	3.4 3.7		3.6	HSC 3038 Work in partnership with families to support individuals	





Autism skills & knowledge list (see separate publication)	Learning outco	Other QCF units which								
	LD210	LD310	LD510	support the skills and knowledge						
3. Intermediate knowledge and skills (continued)										
Support the development of social interaction skills.	4.5	2.3 2.4 5.2 6.3 6.5 6.6 6.7	1.6 3.1 3.3 3.4							
Provide support with transitions and significant life events.				LD 311K and LD 311S Support young people with a disability to make the transition into adulthood						
Understand the issues which arise from co-occurrence of mental ill health and autism.										
Support people with autism to gain and maintain employment (where appropriate).				SS Op 3.7 Support individuals to access education, training or employment						
4. Specialist development										
Diagnosis Assessment skills Sensory profiling Strategic planning of services	At the time of publication (Spring 2011) further work was in progress on the development of skills for workers in autism specialist services.									



Other QCF units that may be *particularly* relevant to health and social care workers supporting one or more people with autism

SHC 23 – Introduction to equality and inclusion in health, social care or children's and young people's settings (level 2, credit value 2, ref: R/601/5471)

PWCS 23 – Principles of diversity, equality and inclusion in adult social care settings (level 2, credit value 2, ref: H/602/3039)

SHC 33 – Promote equality and inclusion in health, social care or children's and young people's settings (level 3, credit value 2, ref: Y/601/1437)

PWCS 33 – Principles of diversity, equality and inclusion in adult social care settings (level 3, credit value 2, ref: M/602/3044)

SHC 53 – Champion equality, diversity and inclusion (level 5, credit value 4, ref: Y/602/3183)

HSC 25 – The role of the health and social care worker (level 2, credit value 2, ref: J/601/8576)

HSC 26 – Implement person centred approaches in health and social care (level 2, credit value 5, ref: A/601/8140)

HSC 36 – Promote person centred approaches in health and social care (level 3, credit value 6, ref:

LD 208C – Contribute to supporting individuals with a learning disability to access healthcare (level 2, credit value 3, ref: J/602/0036)

HSC 2025 – Support individuals undergoing healthcare activities (level 2, credit value 3, ref: L/601/8725)

HSC 3038 – Work in partnership with families to support individuals (level 3, credit value 4, ref: H/601/8147)

HSC 3057 – Work with families, carers and individuals during times of crisis (level 4, credit value 5, ref: F/601/9029)

The QCF Diplomas in Health & Social Care

The Health and Social Care (HSC) NVQs at levels 2 and 3 were replaced by QCF Diplomas in Health and Social Care (HSC) at levels 2 and 3 in January 2011.

The diplomas offer opportunities to take a generic HSC diploma or a diploma with a specialist pathway in either dementia or learning disability pathway, so learners can tailor their learning to their job role.

The diplomas are made up of nine mandatory units and a range of 'optional' units. The mandatory units are very closely aligned to the refreshed Common Induction Standards for adult social care, and the aim is for learners from any area of work to complete these and then contextualise their learning to their job role or service, including support for people with autism, by selecting relevant optional units.

HSC 3065 – Implement the Positive Behavioural Support model (level 4, credit value 8, ref: T/601/9738)

LD 311K – Principles of supporting young people with a disability to make the transition into adulthood (level 3, credit value 3, ref: M/601/7227)

LD 311C – Support young people with a disability to make the transition into adulthood (level 3, credit value 5, ref: F/602/0049)

SS OP 3.7 – Support individuals to access education, training or employment (level 4, credit value 4, ref: H/601/3546)

ACT 307 – Equality and diversity in activity provision (level 3, credit value 3, ref: Y/502/7577)





This listing of units does not claim to be exhaustive. Particular work roles, and the individual needs of any person with autism, might make selection of other QCF units appropriate for some workers.

Some ideas for staff education and training about autism

The main use of the *Autism skills* and *knowledge list* is to help with workforce development initiatives and products in generic social care and health services and in autism-specific services. Initiatives and products envisaged are commented on here, but there may be others to which the list is relevant.

Profession-related qualifications

As the Autism skills and knowledge list was being developed, it became clear that many of the professionals questioned wanted to see autism training delivered as part of qualifications. Some of the elements of knowledge and skills identified in the list could be:

- subjects or units within existing professional qualifications
- accessed via post-graduate or postqualifying or higher education certificate level qualifications that stand alone as autism-specific modules.

There are already examples of autism units being available as options in nationally accredited qualifications, as noted in the mapping above. The same knowledge units are also available in the smaller level 2 and 3 awards and certificates in Supporting Individuals with Learning Disabilities.

Written materials

There are many resources available, including books, journals, toolkits, resource kits and guidelines, published in print or electronically. These can be used to enhance knowledge and skills in the health and social care sectors, but they should not be seen as a complete solution to staff development needs.

E-learning

A number of providers can provide autism training as e-learning. This can be accessed via the internet or CD-Rom. Essentially, the learner sits at a computer and engages in learning that is often self-paced and flexible to suit time constraints, personal commitments and work-life balance. E-learning therefore suits people who can use a computer and lack the time to be away from the workplace. E-learning can also be used by small groups of people. Some programmes include interactive discussions to simulate the conversations that usually happen as part of a taught course. People with autism and their families may find it easier to develop a video or audio or animation to get their message across rather than having to deliver training to groups of people face-to-face.

It is worth bearing in mind that e-learning is not always suitable for all learning or all learners. It may provide good opportunities to learn about theory but be less able to provide practical insights and experiences. It may not always give the best opportunities for learners to engage effectively with other participants or a course facilitator.

A blended approach which uses e-learning to deliver facts and information to learners, linked with face-to-face or interactive methods to answer questions, encourage debate, share experiences and challenge beliefs and attitudes, would seem to be a sensible approach.





Taught courses

There are a variety of providers in the UK who can deliver training based on the units in the Autism skills and knowledge list. Training will vary in respect of the specific outcomes and length of each course. Further information of providers of autism training can be found in the Autism Services Directory on the National Autistic Society's website - www.autism.org.uk The consultation that led to the Autism skills and knowledge list showed that many people found it useful to hear personal accounts from people with autism and their families and carers included in their learning about autism. However, due to the very individual nature of autism, it is essential that this method should include or be used alongside other more theoretical and general information about autism and the ways that people with autism are different from each other. The Autism skills and knowledge list is intended to help people delivering this kind of training to make sure that their training covers all the essential values, skills and knowledge that the learners need.

Shadowing, coaching and mentoring

The use of work shadowing, mentoring and coaching can support a broader culture of learning in the workplace. These are methods which are often used in health and social care settings to provide individually-tailored staff development.

If properly planned, designed, delivered and evaluated, this is a reliable method of providing on-the-job training, learning and development and should be seen as an integral part of the whole process used by an organisation for its staff.



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Skills for Care, West Gate, 6 Grace Street, Leeds LS1 2RP www.skillsforcare.org.uk

Skills for Health, 2nd Floor, Goldsmiths House, Broad Plain, Bristol BS2 0JP www.skillsforhealth.org.uk

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This is one of three publications from Skills for Health and Skills for Care that form the 'Better social care and health outcomes for people with autism' series.

The others are:

- the Autism skills and knowledge list, for workers in generic health and social care services, introducing the topic and providing a self-assessment checklist for individual workers or for services the list is as in the mapping tables above
- Getting it right for people with autism the research behind the 'autism skills and knowledge list'. All the documents are free from the autism sections of www.skillsforhealth.org.uk and

www.skillsforcare.org.uk where there are also links to other autism resources.

Skills for Care West Gate 6 Grace Street Leeds LS1 2RP

tel: 0113 245 1716 fax: 0113 243 6417

email: info@skillsforcare.org.uk web: www.skillsforcare.org.uk

Skills for Health 2nd Floor Goldsmiths House Broad Plain Bristol BS2 0JP

tel: 0117 922 1155 fax: 0117 925 1800

email: office@skillsforhealth.org.uk web: www.skillsforhealth.org.uk