A sector-based work academy approach to the recruitment of personal assistants

Review of self-evaluations

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A sector-based work academy approach to the recruitment of personal assistants: review of self-evaluations

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Acknowledgements

Skills for Care would like to thank the organisations that volunteered to pilot a sector-based work academy approach to the recruitment of personal assistants, and share their learning in the form of a self-evaluation report.
Executive summary

About the funded projects

Skills for Care funded four organisations to pilot a sector-based work academy (SBWA) approach to recruiting personal assistants (PAs) to work with individual employers:

- **Independent Lives** - a user led charity that operates across West Sussex, Portsmouth and Hampshire and delivers services for disabled people and people with long-term health conditions
- **Leeds City Council** – specifically, it’s Organisational Workforce Development Team, that supports the PA workforce under their key priority of ‘recruitment, retention and career development’
- **Northern Independent Living** – a user led organisation that’s based in Blackpool and offers services in PA recruitment support – it’s directors have lived experience of being an individual employer or PA
- **West of England Centre for Inclusive Living (WECIL)** – a user led organisation that operates in parts of Somerset and Gloucestershire and offers support in PA recruitment, training and management.

Activities and outputs

Activities across the pilot projects fell into four main phases:

1) set up (including promotion, pre-screening and interviewing)
2) training
3) work placements
4) employment support.

Pilot organisations were encouraged to recruit and support people from groups that are under-represented in the adult social care workforce. Across the four pilot projects the most commonly reported groups involved were:

- men
- people from deprived areas
- people who were long-term unemployed.

1 Additional activities such as working with IEs, evaluation and partnership working ran throughout the pilot projects

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* A sector based work academy approach to the recruitment of personal assistants: * review of self-evaluations
A wide range of training was offered, including:

- understanding the role of a PA
- employability skills
- equality and diversity
- moving and assisting
- person-centred care
- safeguarding adults.

Resources produced included marketing materials, learning materials and employability resources.

**Outcomes and impacts**

Whilst there was limited evidence of positive outcomes for participants in terms of jobs secured, there was evidence that participants had gained other ‘softer’ benefits relating to increased self-confidence and motivation, which may impact upon their chances of securing employment in the future.

The pilot projects were able to reach people who had never considered working in adult social care before, and educate them about the nature of the role which meant that they could apply for jobs secure in the knowledge that this was something they were committed to doing. For individual employers this also meant that they could employ people with more certainty that they would have the right values, attitudes and behaviours that they were seeking.

On a wider basis the pilot projects were able to raise awareness about the PA role and the need to recruit more PAs to support individual employers. The organisations also improved their local networking and started to build momentum which will hopefully be translated into future roll-outs of the SBWA approach.

Much knowledge can be extrapolated from the identification of barriers (see Section 4.2) and from the lessons learnt from the pilot projects (see Section 5.2).

**Successes, challenges and lesson learnt**

Success was observed in several ways.

- **For PAs** – increased skills and confidence in the role and in job searching, more job opportunities and a clearer career pathway.
- **For individual employers** – an easier method to find and recruit PAs and an increase in their confidence as an employer.
- For the pilot organisations – enhanced profile and reputation, contribution to their corporate social responsibility goals and upskilling of their own staff.
- Wider impact – an increased awareness of the PA role in adult social care and of a SBWA approach to the recruitment of PAs.

Common challenges noted included:
- recruiting enough PAs and individual employers to participate in the programmes
- retaining the PAs and individual employers throughout the duration of the programmes
- effective multi-agency working.

Lessons learnt

Some useful lessons emerged from the pilots, including:
- programme design – the need to: involve PAs and individual employers in the design of the programmes to ensure maximum understanding of what’s involved; develop in-house expertise and effective partnership working; promote SBWA opportunities as widely as possible; consider the geographical barriers inherent in rural/far-reaching areas; include a training element for individual employers as well as for PAs
- recruitment of PAs and individual employers – the need to: invest the necessary time and resource upfront; promote widely to PAs and directly to individual employers; adopt values-based recruitment techniques to attract people with the right attitudes, values and behaviours; not be too rigid in the criteria for potential applicants; provide ongoing communication and support to keep participants engaged
- programme timing – the need to: try to avoid peak holiday times for running the programmes; offer a part-time option to candidates if possible.

A note of caution

The number of people involved in these four pilot projects was very small\(^2\). Therefore, the findings from the self-evaluations must be treated with caution. However, they do offer helpful indications of the issues to consider and the potential benefits for others looking to adopt this approach.

\(^2\) Across the four pilot projects 32 people started and 30 people completed the programmes offered (see Appendix 8.1 for details)
1. Introduction

1.1 About Skills for Care

Skills for Care helps create a well-led, skilled and valued adult social care workforce, including the PA workforce. We do this by helping employers to get the best from their most valuable resource – their people. Our practical support, which includes online guidance, free events and funding opportunities, helps individual employers to recruit, develop and lead their PAs, and retain them.

1.2 About this project

Skills for Care estimates that there are approximately 70,000 people that are in receipt of a direct payment and are employing a PA. The number of ‘self-funders’ is unknown. There are an estimated 145,000 PA jobs with direct payment recipients.

In addition to this, the national ambition for personal health budgets (PHBs) will see the number of PHB holders grow to between 50,000 and 100,000 by 2020, thereby further increasing the number of people employing PAs.

Other initiatives, including, integrated personal commissioning (IPC) and The Transforming Care Programme, also have the potential to further increase the demand for PAs.

Feedback and research indicate that finding the right PAs to recruit is still an issue. Individual employers tell us that recommendations and support are needed to identify suitable candidates for the role, as well as a greater access to registers or databases of PAs who understand the role and have been vetted in advance.

The ‘Recruitment and retention in adult social care: secrets of success’ (Skills for Care, 2017) study revealed that more than half (55%) of individual employers had experienced some difficulty or didn’t find recruiting PAs easy, and that getting recruitment right in the first place goes a long way towards creating a positive working relationship.

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3 Individuals using their own money to employ PAs
4 www.skillsforcare.org.uk/SecretsOfSuccess
The ‘Individual employers and the personal assistants workforce’ report (Skills for Care, 2019)\(^5\) noted that, although the turnover rate amongst PAs was considerably lower than that for care workers (18.4\% vs 38.5\%), the vacancy rate was similar (8.2\% vs 9.1\%). The same briefing reported that half of respondents (48\%) said that they had not previously known their employer before being recruited by them, indicating a need to support individual employers with recruitment.

SBWAs have been around for a number of years, but had not been widely used as a way of recruiting PAs.

To explore this opportunity, Skills for Care funded four organisations to pilot a SBWA approach to recruiting PAs for individual employers. In doing so, we hoped to collect data and capture learning that could be used to make recommendations for others to implement in the future.

The pilot organisations were expected to bring together a consortium of individuals and organisations to consist of:

- a lead organisation
- trainers
- individual employers
- job advertising organisations
- job seekers.

Projects were expected to have at least five components:

1) pre-screening
2) pre-employment training
3) a work experience placement
4) a guaranteed job interview
5) ongoing support for PAs and individual employers.

1.3 About this review

The purpose of this review is to bring together the evidence from the self-evaluation reports produced by the four funded projects.

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\(^5\) [www.skillsforcare.org.uk/IEPAreport](http://www.skillsforcare.org.uk/IEPAreport)
2. About the funded projects

This chapter briefly describes the four funded projects, their aims and intended beneficiaries.

2.1 About the organisations that were funded

- **Independent Lives** is a user-led charity that develops services in response to the needs of disabled people and long-term health conditions. It runs a combination of contracted services and person-centred services following a social enterprise model. Their work includes assistance with budgets for care, recruiting PAs, and ongoing support around employing and supervising PAs, including information, advice and guidance to employers. It supports over 1,500 employers across West Sussex, Portsmouth and Hampshire.

- **Leeds City Council ‘We Care Academy’** is part of the Organisational and Workforce Development Team and has five staff members. It provides support to care providers with their training, qualifications, apprenticeships, recruitment, retention and staff development needs. Its work to support the PA workforce falls under the ‘Recruitment, Retention and Career Development’ theme of its workforce strategy.

- **Northern Independent Living (NIL)** is a user-led organisation based in Blackpool with a small team of two directors; the chief executive and the office administrator apprentice. The directors have lived experience of being an individual employer and a PA, which gives them a clear insight into the everyday experiences of individual employers and PAs. The organisation aims to support people primarily by offering free and impartial information and advice. It also hosts other services such as, personal assistant recruitment, a PA register, payroll, Disclosure and Barring Service checks, direct payments paperwork and support planning.

- **West of England Centre for Inclusive Living (WECIL)** is a user led organisation that actively encourages all their users to share experiences and promote the different care and support options that are available for disabled people. The majority of people that use WECIL’s services live in the Bristol, Bath and North East Somerset or South Gloucestershire areas, and receive support to recruit, train and manage their PAs. Individual employers can also access payroll and direct payment information services to help them fulfil their responsibilities as an employer.
2.2 Project aims

The shared aims of the four pilot projects were to:

- form a consortium of skilled organisations to work in partnership in the recruitment of PAs, including building a trusted relationship with local authorities
- support the increased and sustained recruitment of PAs by producing a pool of trained, work-ready PAs, with the right values, to make PA recruitment easier for individual employers
- highlight career pathways in the PA role to retain PAs and allow them to see caring as an ongoing career
- promote a wider understanding of the PA role and the flexibility it can offer as a career
- offer employment opportunities and training to people that are unemployed.

Independent Lives also aimed to allow informal carers specifically to use their unique skills and values in paid employment, and WECIL also aimed to build long lasting relationships between individual employers and their PAs to mutual benefit.

2.3 Intended beneficiaries

When commissioning the pilot projects, Skills for Care did not specify any beneficiary groups, but projects focusing on people who are under-represented in adult social care were encouraged. The table overleaf summarises the groups covered by the pilot projects.

Table 1: Target groups

<table>
<thead>
<tr>
<th></th>
<th>Independent Lives</th>
<th>Leeds City Council</th>
<th>NIL</th>
<th>WECIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Disabled people</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Young people</td>
<td></td>
<td>✓</td>
<td></td>
<td></td>
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<tr>
<td>Older workers</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>Ex-military personnel</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>People from specific ethnic or cultural groups</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
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<tr>
<td>People from deprived (urban or rural) areas</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>People who are long term unemployed</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>Unpaid carers</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Others</td>
<td>✓</td>
<td>✓</td>
<td>✓**</td>
<td>✓**</td>
</tr>
</tbody>
</table>
* ‘Others’ for Leeds City Council = anyone that had an interest in the role of a PA within adult social care, and who had the right values and attitudes”

** ‘Others’ for WECIL = students and those changing career
This chapter describes the four phases of activity that the pilot projects had in common (set-up, training, work placements and employment support), as well as some which were programme specific, such as working with individual employers, evaluation, partnership working, signposting, developing new tools/resources, events, additional support and administration. It also summarises the outputs resulting from these (i.e. the number of people participating in the different parts of the various programmes).

3.1 Activities

Whilst each of the pilots delivered different programmes, there was some commonality amongst the activities they undertook. Typically, the programmes fell into four broad phases, with additional activities happening throughout the duration. These are summarised in Chart 1 (overleaf).
Chart 1: Common phases and activities across the four pilot projects

**Phase 1 - Set-up**

**Promotion:**
- to PA candidates, IEs and more widely
- drop-in information sessions and recruitment days
- network circulation
- social media groups
- newsletters
- word of mouth
- emails
- flyers
- community centres
- job shops
- schools and colleges
- advocates
- testimonials
- telephone calls
- local libraries.

**Pre-screening:**
- pre-employment checks
- right to work in the UK
- DBS checks
- reference checks
- literacy, language and numeracy assessments
- employability and core skills based on the Employability Skills Matrix for the health sector.

**Interviewing PAs for the programme:**
- values-based interviewing
- case study scenarios.

**Phase 2 - Training**

**In topics such as:**
- understanding the role of a PA
- employability skills
- duty of care
- equality and diversity
- first aid
- moving and assisting
- safeguarding.

**Design training, in conjunction with:**
- existing PAs
- IEs
- Partners.

**Further activities:**
- produce materials
- accredit materials (for some)
- deliver training utilising Skills for Care PA Toolkit.

**Phase 3 - Work placements**

- arrange work placements
- monitor work placements
- review and modify work placements.

**Phase 4 - Employment support**

- arranging job interviews
- building CV writing and interviewing skills
- offering interviews with their organisation.
Examples of other, additional activities happening in the projects included:

- **working with individual employers** – working in partnership to design PA training based on individual employer’s needs and common challenges faced; promoting and raising awareness of the SBWAs; providing information and training on interviewing style and recruitment decision making; reimbursing travel expenses for individual employers to attend training; working together to provide work placements

- **evaluation** – baselining; formative evaluation at various stages (e.g. feedback on training) using views from partners, PAs, and individual employers; summative evaluation; self-evaluation

- **partnership working** – with job centres, local authorities, housing associations, training providers, networks and universities

- **signposting** – for those who didn’t pass pre-screening and interview into the programme; for further support in this area from colleges, free courses, and online help; (after training) to further training if required

- **developing new tools and resources** – (see Section 3.2 Outputs)

- **networking events** – post training and work placements; to feedback, share experiences and build relationships further (Independent Lives)

- **extra support** – food bank referrals; housing support; referrals to outside agencies such a family support (Leeds City Council)

- **administration** – developing schedules and checklists; email correspondence.

### 3.2 Outputs

**Recruitment**

Chart 2 (overleaf) shows the total number of PAs participating in recruitment, training, work placements, interviews and further work opportunities across the four pilots.

**NB:** More detailed information about how many people undertook these activities in each category for each of the four pilot organisations can be found in tables A-H in Appendix 8.2.

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6 These categories shown in the table are not mutually exclusive (i.e. a person could, and generally did, feature in more than one category)
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Chart 2: Recruitment of under-represented groups

- Undertook pre-screening
- Undertook pre-employment training
- Attended a job interview
- Required further training
- Began the programme
- Undertook a work placement
- Were offered a job
- Were offered a job trial or volunteering opportunity
Training
The chart below illustrates the number of people trained in each of 26 topics throughout the pilot projects. More detailed information by pilot organisation can be found in Table I in Appendix 8.3

Chart 3: Number of people trained

- Understanding the role of a PA
- First aid and basic life support
- Moving and assisting people
- Employability skills
- Duty of care
- Equality and diversity
- Person-centred care/work in a person-centred way
- Safeguarding adults
- Individual Employer awareness
- Moving and handling objects
- Communication
- Food hygiene
- Privacy and dignity
- Infection prevention and control
- Digital skills
- Safeguarding children
- English skills
- Number skills
- Positive behaviour support and non-restrictive...
- Recording and reporting/Handling information
- Mental capacity and deprivation of liberty safeguards
- Other
- Team working
- Managing own health and well-being
- Health and safety
- Medication management
The following resources were produced by the pilot projects:

- **marketing materials** – emails; flyers; letters; website; logo design; social media; marketing strategy
- **screening resources** – interview questions; learning styles questionnaires; literacy and numeracy questionnaires; competency assessment booklets; case study scenarios; values-based interview questions; job descriptions
- **evaluation resources** - feedback/evaluation forms; data collection tools
- **learning materials** – portfolios; individual learning plans; flowcharts; registers; assessment sheets; quizzes; workbooks; personal online learning accounts; training plans; reflective learning logs; support plans
- **for others leading similar SBWAs** – project support toolkit
- **job/PA finding resources** – a personal assistant register for PAs and individual employers to find each other more easily
- **employability resources** – CV building activity; interview questionnaires; employability support plans; strengths and weaknesses activities; employability guidance workbooks.
4. Outcomes and impacts

This chapter sets out the key findings of the evaluation in terms of the outcomes achieved by the pilot projects. Barriers to achieving outcomes are also reported as are the impacts that the projects have had.

4.1 Outcomes achieved

Below is a summary of the outcomes achieved by the four pilot projects.

- **Independent Lives** – whilst there were no documented positive outcomes specifically related to their target group, they were able to record a number of broader outcomes relating to their increased understanding of the issues related to engaging unpaid carers in formal learning opportunities (i.e. ensuring there is a foundation for a learning culture), about being less prescriptive about those eligible to participate in their programme (i.e. broadening the scope to encourage anyone interested in becoming a PA, rather than just informal carers) and around limiting the geographic scope of their offer to facilitate participation (i.e. recognising that a wide, rural geographic area prevented some people from participating).

- **Leeds City Council** – an essential outcome was the ongoing engagement and communications that they had with candidates and individual employers. Through this they were able to support candidates through their ‘journey’. Their relationship with Jobcentre Plus was key in awareness raising and their adoption of a values-based recruitment approach meant that they were able to ensure that the ‘right’ people were recruited.

- **Northern Independent Living** – whilst their project did not achieve the aims it set out to meet, they were able to identify ways of improving their strategies and processes if they were to try this again. This included avoiding recruitment during peak holiday periods, only pursuing DBS checks when they are actually required, tailoring the training on offer to be more specific to the needs of an individual employer and ensuring that marketing/promotional materials are placed where potential individual employers will see them.

- **WECIL** – despite issues relating to recruiting over the Christmas period and delays with DBS checks, they were able to support seven people through the programme, with three obtaining employment at the end. Feedback from the learners suggests that participation in this programme was positive.

Further details about the success of the projects can be found in chapter five.
4.2 Barriers to the achievement of outcomes

A range of barriers were identified that impacted upon the successful achievement of the outcomes. These can be summarised under five headings:

1) those relating to the recruitment of PAs
2) those relating to the recruitment of individual employers
3) those relating to work placements
4) those relating to multi-agency working
5) those relating to time.

Given that these were pilot projects, this is useful learning in the development of an understanding about what works.

Barriers relating to the recruitment of PAs

- **PAs being able to fit other commitments around the programme** – two organisations found that several interested candidates could not commit to the programme due to other responsibilities including informal caring, part-time work and studies.
- **Timing** – two organisations found that trying to recruit PAs to the programme during December and January was difficult as the gap between Christmas and New Year caused the recruitment drive to lose momentum.
- **Geography and travel** – two organisations found that operating the pilot in a wide geographical area and/or possible candidates not being able to drive, meant that the travel commitments associated with the programme were too big and the number of candidates recruited reduced accordingly.
- **Culture of informal care** – one organisation targeted informal carers for their programme to encourage acknowledgment, confidence-building and upskilling of this group. However, they believed that a lower culture of involvement and learning in informal care than formal care meant that engagement with, and recruitment of, informal carers was very difficult.
- **Recruitment agencies and strategies** – one organisation reported that, initially, the referral agencies that they were working with did not have a shared understanding of the PA role. This resulted in unsuitable candidates being put forward to participate in the programme. However, the organisation and the agencies later spent additional time working on a shared understanding to overcome this barrier.
Barriers relating to the recruitment of individual employers

- **Circumstances** – one organisation found that individual employers’ circumstances can often change and that the changes can be unexpected and out of the control of the individual. This impacted on individual employers being able to commit to the programme and the offering of work placements. Another organisation initially struggled to recruit individual employers as they found that their way of reaching out to them was not targeted enough.

Barriers relating to work placements

- **Training** – one organisation felt that the training they offered, although broad, was not relevant enough to the individual employers that were hosting work placements, and so the PAs and employers found that a training-job mismatch was a barrier to fully achieving their outcomes.
- **Length of placements** – one organisation received feedback from PAs that the working days during their work placements were too long which they felt hindered their learning and performance.

Barriers relating to multi-agency working

- **DBS checks** – two organisations found that the long lead in time associated with DBS checks delayed the start of their programmes and may have discouraged some people from applying. They concluded that, as the DBS checks weren’t required until work placements began, it may have been beneficial to delay the application process until candidates had already started the training element of the programme, which would have the intended effect of reducing delays and allowing the pilot organisations to better manage expectations and anxiety around the DBS checking process.

Barriers relating to time

- **Time** – one organisation reported that they felt time was too tight to do all that was needed. Another felt that the timings of the project and the deadline for self-evaluation meant that not enough time had elapsed to be able to truly evidence change. It was also reported that where informal carers were participating, their time was incredibly precious and in short supply. Due to the relatively intensive nature of the programme, this acted as a barrier for this group.
4.3 Impacts

Impact on the participants

- Projects were able to reach people who had never worked, or thought about working, in adult social care before.
- People were able to gain a better understanding of the diversity of the PA role/get some work experience which helped them to determine whether it was something that they were interested in doing.
- People who were long-term unemployed were helped back into work – they were able to identify the skills that they already had and how these could be translated into the skills needed to work in adult social care.
- Candidates reported increases in their confidence, self-worth and motivation.
- Candidates developed new friendships and were able to support one another through the process.

Impact on individual employers

- They were able to become more involved in sharing their experiences of employing PAs.
- They had a new/renewed pool of PAs with the right attitudes, values and behaviours to meet their needs.
- They had potential employees that understood the role they were applying for and, therefore, were more likely to stay if appointed.
- In one case, a vacancy was filled that had been vacant for six months which meant the individual employer could access the community, which led to improved wellbeing, confidence and social life.

Wider impact

- Local communities – pilot organisations found that their programmes were able to raise local awareness of the PA role, what it involves and the need for more PAs locally to support local individual employers. It was also found that the programme was able to support into employment, some people that had been long term unemployed due to confidence, skills gaps and lack of awareness of opportunities, and so the programmes contributed to the reduction in local unemployment.
“...we can see that should this be replicated on a larger scale there will be wider, positive impact socially for the PA workforce in Leeds and also the support for the individual employers.”

[Leeds City Council]

- The adult social care sector – It was reported by pilot organisations that, during the course of the programmes, increased networking and integrating with stakeholders and partner organisations, and awareness raising of SBWAs, meant that the SBWA approach has built momentum and popularity as a possible approach to be rolled out across the sector.

“Through our involvement with this project, it has kick-started and generated conversations with the local authority exploring working collaboratively in the future to build a care academy...This is a positive step forward for the PA workforce and will give us the opportunity to explore the area with greater resource”

[Independent Lives]
5. Successes and lessons learnt

This chapter highlights the successes achieved by the pilot projects and identifies transferable learning for the sector.

Success was recorded for the projects overall, for the participants involved (PAs and individual employers) and for the pilot organisations themselves.

Similarly, lessons learnt were observed in relation to the recruitment of PAs and individual employers, the design and timing of the programmes and the networking involved.

Ethical implications of this type of project are also noted.

5.1 Project success factors

Success was recorded in four key areas:
1) overall success for the projects
2) success for the PAs that participated
3) success for the individual employers that participated
4) success for the pilot organisations.

Success factors relating to the programmes overall included:

- working with existing PAs and individual employers when designing training, to ensure that it was fit for purpose and covered the skills and knowledge that individual employers really need and value in good PAs
- adopting a flexible approach to communication with PAs and individual employers and training
- establishing in-house expertise and effective partnership working to ensure that the whole programme and all aspects of it ran smoothly
- securing extra funding and work ‘in-kind’ from training delivery partners, which allowed the training to encompass more than it otherwise could
- having a wide-ranging publicity campaign to raise awareness and interest in the SBWAs
- using values-based recruitment techniques to identify the ‘right’ people that were committed to becoming PAs
- providing ongoing communication and support to keep participants involved and engaged in completing the programmes.
Success factors for the personal assistants included:
- accreditation and parity of esteem in qualifications and role
- clearer career pathways
- easier ways of finding work
- increased knowledge, skills and abilities
- heightened confidence and motivation in job searching and their roles
- increased person-job fit
- networks and peer support
- structured, on-the-job learning placements.

Success factors for the individual employers included:
- access to PAs with high quality training and increased commitment
- access to new pilot recruitment tools
- easier ways to find and recruit PAs
- increased confidence as an employer
- involvement, engagement and new opportunities.

Success factors for the pilot organisations included:
- improved engagement with stakeholders leading to an increase in profile and reputation
- contribution to corporate social responsibility goals
- possible new recruitment tools (to be tested further)
- upskilling of their own staff in supporting and understand the needs of individual employers and PAs.

5.2 Lessons learnt

The pilots reported a number of lessons they had learnt, relating to:
1) marketing and the recruitment of PAs and individual employers
2) programme design
3) programme timing.

As previously mentioned, this is valuable learning for a pilot programme such as this.
Lessons learnt in relation to marketing and the recruitment of PAs and individual employers.

- The term ‘personal assistant’ remains misunderstood and there is a need to explore the most effective language to use to attract people to this role.
- Invest the necessary, upfront time and resource into recruitment and promotion. One project suggested that if they were to run the programme again, they would recruit/assign a dedicated staff member to recruit to and oversee the programme.
- Generally, relaxing the recruitment criteria may have helped solve the recruitment challenges that some projects faced.\(^8\)
  - More successful projects had included this as part of their project design, for example, Leeds sought to “open this opportunity to anyone who we thought had a genuine interest in adult social care and the (fairly unknown) role of a PA.”
  - However, the potential economic benefit of the SBWAs is highest if they target benefit claimants, men and disabled people.
  - There is, therefore, a trade-off to be had between maximising the employability benefits of the academies and ensuring that recruitment is sufficient to generate economies of scale.
  - Fulfilling the needs of individual employers should be the overarching principle guiding recruitment policy.
- Promote widely to PAs. Leeds City Council found that their wide publicity campaign for recruiting PAs involving social media, local job centres, schools and colleges worked well.
- Promote directly to individual employers. Leeds City Council had success in this area by liaising with the social work team to write to individual employers about the opportunity. Northern Independent Living felt that using social media in their marketing activities was key.
- Provide networking opportunities. WECIL reported that the ‘meet and greet’ sessions that they held for PAs and individuals to meet each other were invaluable in ensuring that there were enough work placements on offer and that there was a suitable fit between the placement and individual employer and the PA recruited.
- Recruit within geographical localities that are of a reachable and manageable size. At least two projects found it difficult to recruit to their programme due to the wide geographical area that they were promoting it within. Travel and distance prevented some candidates from taking up the programme. They concluded that running the programme over a smaller and more manageable geographical area would likely have been more successful.

\(^8\) In particular, it was difficult to recruit active carers to sector-based work academies. Projects in future may be best targeted at past carers or other groups rather than active carers; alternatively more research could be done with active carers to explore whether they would like to seek paid employment and which type of pre-employment interventions might be most suitable for them.
Use a values-based approach to recruiting PAs. Although using values-based recruitment to recruit PAs was a pre-requisite for funding for all the programmes, the pilot organisations commented on how successful this approach was.

Projects also felt that the DBS check may have been a deterrent to applicants, and one suggested it could come later in the process, once a placement was agreed rather than prior to training.

One project also said that in future it would bring more of the referral stage in-house.

Lessons learnt in relation to programme design.

- Involve individual employers and PAs in the design itself. Organisations that involved PAs and individual employers in the design and specification of their programme reported great success. Those who did not adopt this approach reported that, should they run this or a similar programme in the future, that they would co-produce it.

- Produce targeted training content. One pilot organisation found that whilst their training offer to PAs was broad, it did not necessarily cover the topics that would be most useful for both PAs and individual employers in terms of the care needs of the employer. They commented, that should they run the programme or a similar programme again, they would consult more with individual employers in the design of the programme (as above) and in deciding on the relevant content.

- Include a training element for individual employers (as well as PAs). One organisation found that some individual employers found it difficult to support work placements as they themselves required some training and guidance. The organisation concluded that, were they to run a similar programme in the future, they would provide training for the individual employers to cover topics such as safeguarding, how to record feedback, managing expectations, how to manage a work placement, and conducting interviews with PAs.

- Include peer support for PAs. One organisation found that their PAs would have benefitted from more peer support and suggested that, were they to run a similar programme in the future, their programme would involve more in this area.

Lessons learnt in relation to programme timing.

- Take account of holiday periods. Organisations learned that trying to recruit for and manage the programme around busy holiday periods (e.g. December and January) made retention and momentum keeping difficult. They suggested that, if they ran the programme again in the future, they would avoid these busy times.

- More generally, projects said there is a need to keep both applicants and individual employers 'warm and engaged' as the project progresses.
- **Offer a part-time training option.** Some organisations reported that, due to other commitments and responsibilities, many potential PA candidates could not commit to the programme. They concluded that it would be wise to offer a part-time alternative if possible (and in one case proposed to shorten the length of the academy too).

### 5.3 Ethical implications

Consideration must be given to the ethical implications for both PAs and individual employers involved in SBWA programmes. Those reported by the pilot organisations included:

**For PAs:**
- **lone working** – ensuring PAs are safe in the lone-working environment and know how to conduct and protect themselves and what support is available
- **informal carers** – understanding the current commitments and associated emotions that informal carers may have as paid PAs and how they may affect their work

**For individual employers**
- **safety** – the safety of individual employers that offer work placements and recruit from these types of programmes rests on the quality of the pre-screening and training offered by the programme
- **practical load** – hosting work placements for training PAs requires a certain amount of time, commitment and work from an individual. The impacts on the individual’s wellbeing must be considered

**For both PAs and individual employers**
- **personal assistant relationship** – the employer/PA relationship is complex and involves power and emotion. Emotional work is required by both parties with regards to long hours of proximity and working in someone’s home environment. It is not uncommon for the relationship to experience conflict. Boundaries must be considered and adhered to, and the lead organisations must offer support, oversight and open communication to PAs and individual employers
- **PA-individual employer match** – respect must be given to matching PAs and individual employers to consider the needs and requirements of both (e.g. the gender of PA preferred by the employer and/or the location of the employer and the ability of the PA to get to them).
6. Value for money

This chapter sets out the findings of the self-evaluations relating to value for money. Value for money can be measured through economy (relating to the relative costs involved in delivering the programme), efficiency (relating to the cost per unit achieved) and effectiveness (relating to the achievement of the programme’s aims and objectives).

6.1 Added value

The pilot projects were asked to indicate the extent to which they would have been able to deliver the project without Skills for Care funding. All four projects stated that they ‘could not have delivered the project at all’ without Skills for Care support.

The pilot projects identified a number of added benefits above and beyond those envisaged in their aims\(^9\).

For PAs:
- they were provided with networks and peer supports in what is often a more individual based profession
- it increased their confidence as job seekers and as PAs
- it gave them transferable skills for other types of social and healthcare roles
- friendships were formed between and within the PA and individual employer groups.

For individual employers:
- it increased their confidence as an employer
- they felt they had more opportunities to be involved and engaged
- reduced delays in the recruitment process
- friendships were formed between and within the PA and individual employer groups.

For the pilot organisations:
- it contributed towards their corporate social responsibility goals
- it enhanced the organisation’s reputation/raised their profile
- their own staff were upskilled in supporting individual employers with PA recruitment
- better partnerships and relationships formed with local individual employers, stakeholders and organisations.

\(^9\) Some of these have already been reported in Section 5.1: successes
6.2 Economy

The projects provided several examples of how they had succeeded in minimising costs without compromising on quality, including:

- absorbing administration time and recruitment time in-house
- taking up offers of free training from training providers who wanted to get involved
- producing promotional material and learning materials in-house
- ensuring printing was kept to a minimum
- utilising free promotion avenues (e.g. social media and local libraries)
- comparing competitive quotes for training provision.

6.3 Efficiency

Programme expenditure to the four contractors was £63,641. This excludes Skills for Care administrative overheads (£18,330). The unit cost per participant was therefore £1,989; and the unit cost per employment outcome was £3,976. This is high compared to available benchmarks, for example the average unit cost of sector-based work academies (across sectors) was calculated at £665 in 2014/15 (about £738 in today’s prices). One contractor explained that training costs per head had risen due to the disappointing recruitment, which meant that they could not negotiate cheaper costs for a larger group with the training provider.

However, this programme was a pilot, as SBWA’s had not been run for this job role or very unique employer group before. Furthermore, the academies were not simply targeted at unemployed people, but at particularly disadvantaged groups such as carers, veterans and people living in areas of multiple deprivation. Higher than average unit costs may have therefore been anticipated.

6.4 Effectiveness

The overall numbers participating in the programme were disappointing. Skills for Care could improve value for money in future by setting more challenging targets and linking payment to results, and contractors could improve value for money in future by following the learning set out in chapter 5.

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11 http://www.in2013dollars.com/uk/inflation/2014?amount=665
One contractor did not achieve any programme completions and others achieved relatively small numbers given the expenditure. Two contractors acknowledged in their self-evaluation reports that their programmes were not cost effective.
7. Conclusions

The four pilot projects that were funded by Skills for Care have developed a strong set of guiding principles that can be used by those undertaking similar work in the future.

The pilots achieved many successes and had to overcome a number of barriers and challenges, some of which could not have been foreseen.

The benefits for the organisations delivering the pilots were widespread and went beyond the initial aims of the project. They included enhancing their reputation, upskilling existing staff and developing their relationships with other organisations and stakeholders.

Likewise, the benefits for participating PAs and individual employers went beyond those expected. Pilot organisations reported that PAs were provided with networks and peer support, had increased confidence as job seekers and as PAs and had increased transferable skills. Pilot organisations reported that individual employers had increased confidence as an employer, more opportunities to be involved and engaged and had formed between and within the PA and individual employer groups.

The projects have achieved significant social benefit for the individuals involved – both those moving into rewarding employment as PAs, and those individual employers who have filled vacancies (in one case after six months) and been supported to live independently. The benefits (social and economic) have however been limited due to the challenges faced by some contractors in recruiting and retaining people through the academy and into employment. It will be important that next steps regarding rollout take full consideration of and disseminate the lessons learned. Lessons learnt based on the experience of the projects are included in chapter 5 of this report.
## 8. Appendices

### 8.1 Appendix 1: Numbers of people starting/completing the pilot programmes

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Started</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent Lives</td>
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</tr>
<tr>
<td>Leeds City Council</td>
<td>12</td>
<td>11</td>
</tr>
<tr>
<td>Northern Independent Living</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>WECIL</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>32</strong></td>
<td><strong>30</strong></td>
</tr>
</tbody>
</table>
8.2 Appendix 2: Recruitment of PAs to the programmes by under-represented group and by pilot organisation

The tables below show the total number of PAs participating in recruitment, training, work placements, interviews and further work opportunities through the four pilots.\(^{12}\)

**Table A: Pre-Screening**

<table>
<thead>
<tr>
<th>Number of people who undertook pre-screening</th>
<th>Independent Lives</th>
<th>Leeds City Council</th>
<th>NIL</th>
<th>WECIL</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>-</td>
<td>6</td>
<td>12</td>
<td>3</td>
<td>21</td>
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<tr>
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</tr>
<tr>
<td>Ex-military personnel</td>
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<td>-</td>
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<td>-</td>
<td>1</td>
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<tr>
<td>People from specific ethnic or cultural groups</td>
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<td>9</td>
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<td>12</td>
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<tr>
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<td>People who are unpaid carers</td>
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</tr>
<tr>
<td>Others</td>
<td>-</td>
<td>26</td>
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<td>29</td>
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</table>

**Table B: Recruited**

<table>
<thead>
<tr>
<th>Number of people who began the programme</th>
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<th>Leeds City Council</th>
<th>NIL</th>
<th>WECIL</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Men</td>
<td>-</td>
<td>4</td>
<td>7</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>Disabled people</td>
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<td>-</td>
<td>-</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Older workers</td>
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<td>-</td>
<td>2</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Ex-military personnel</td>
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</tr>
<tr>
<td>People from specific ethnic or cultural groups</td>
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<td>2</td>
<td>8</td>
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<tr>
<td>People who are from deprived (urban or rural) areas</td>
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<td>12</td>
<td>-</td>
<td>12</td>
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<td>5</td>
<td>17</td>
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<td>People who are unpaid carers</td>
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<td>-</td>
<td>-</td>
<td>1</td>
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<td>12</td>
<td>-</td>
<td>2</td>
<td>14</td>
</tr>
</tbody>
</table>

\(^{12}\) These categories shown in the tables are not mutually exclusive (i.e. a person could, and generally did, feature in more than one category)

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*A sector based work academy approach to the recruitment of personal assistants: review of self-evaluations*
### Table C: Trained

<table>
<thead>
<tr>
<th>Number of people who undertook pre-employment training</th>
<th>Independent Lives</th>
<th>Leeds City Council</th>
<th>NIL</th>
<th>WECIL</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>-</td>
<td>4</td>
<td>7</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>Disabled people</td>
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<td>4</td>
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<tr>
<td>Young people</td>
<td>-</td>
<td>-</td>
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<td>2</td>
</tr>
<tr>
<td>Older workers</td>
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</tr>
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<td>Ex-military personnel</td>
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### Table D: Work placements

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<thead>
<tr>
<th>Number of people who undertook a work placement</th>
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<th>WECIL</th>
<th>Total</th>
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<tbody>
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</tr>
<tr>
<td>Disabled people</td>
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<td>Ex-military personnel</td>
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<td>People from specific ethnic or cultural groups</td>
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### Table E: Job interviews

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<thead>
<tr>
<th>Number of people who attended a job interview</th>
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<th>WECIL</th>
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<tbody>
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<td>1</td>
<td>-</td>
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<td>4</td>
</tr>
<tr>
<td>Disabled people</td>
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<td>Young people</td>
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<td>Older workers</td>
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<td>Ex-military personnel</td>
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<td>8</td>
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</table>
### Table F: Job offers

<table>
<thead>
<tr>
<th>Number of people who were offered a job</th>
<th>Independent Lives</th>
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<th>NIL</th>
<th>WECIL</th>
<th>Total</th>
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<tbody>
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<td>Men</td>
<td>-</td>
<td>2</td>
<td>-</td>
<td>1</td>
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</tr>
<tr>
<td>Disabled people</td>
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</tr>
<tr>
<td>Young people</td>
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<tr>
<td>Older workers</td>
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<td>Ex-military personnel</td>
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<td>People from specific ethnic or cultural groups</td>
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<tr>
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</table>

### Table G: Further training

<table>
<thead>
<tr>
<th>Number of people who required further training</th>
<th>Independent Lives</th>
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<th>WECIL</th>
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<tr>
<td>Disabled people</td>
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<td>-</td>
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<tr>
<td>Young people</td>
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<td>Older workers</td>
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<td>People who are from deprived (urban or rural) areas</td>
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<td>People who are unpaid carers</td>
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<tr>
<td>Others</td>
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### Table H: Job trials and volunteering

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<tr>
<th>Number of people who were offered a job trial or volunteering opportunity</th>
<th>Independent Lives</th>
<th>Leeds City Council</th>
<th>NIL</th>
<th>WECIL</th>
<th>Total</th>
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<tbody>
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<td>Men</td>
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<td>Disabled people</td>
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<tr>
<td>Young people</td>
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<td>Older workers</td>
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<td>Ex-military personnel</td>
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<tr>
<td>People from specific ethnic or cultural groups</td>
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<tr>
<td>People who are from deprived (urban or rural) areas</td>
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<tr>
<td>People who are long-term unemployed</td>
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<tr>
<td>People who are unpaid carers</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Others</td>
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### 8.3 Appendix 3: People trained by topic and pilot organisation

**Table I: Training courses attended**

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<th>Training topic</th>
<th>Independent Lives</th>
<th>Leeds City Council</th>
<th>NIL</th>
<th>WECIL</th>
<th>Total</th>
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</thead>
<tbody>
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<td>Understanding the role of a PA</td>
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<td>13</td>
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<td>First aid and basic life support</td>
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<td>Moving and assisting people</td>
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<td>Employability skills</td>
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<td>Duty of care</td>
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<td>Equality and diversity</td>
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<td>13</td>
<td>7</td>
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<tr>
<td>Person-centred care/work in a person-centred way</td>
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<td>6</td>
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<td>Infection prevention and control</td>
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<td>Digital skills</td>
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<td>Safeguarding children</td>
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<td>Recording and reporting/handling information</td>
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<td>Mental capacity and deprivation of liberty safeguards</td>
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<td>Other*</td>
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<td>Team working</td>
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<td>Managing own health and wellbeing</td>
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</tbody>
</table>

* 'Other’ for Leeds City Council = Level 1 Preparing to Work in ASC qualification*