BACKGROUND: CARE ASSISTANTS IN THE BRITISH NHS
• More than one million non-registered staff work in health and social care in the British National Health Service (NHS). Many are involved in the care of older people, either in their own homes or residential settings.
• Rising concerns about quality of care and the skill levels of care assistants led to the introduction of new training requirements in 2000.

PARKINSON’S DISEASE
• Parkinson’s disease is a degenerative neurological condition, affecting about 1% of those over 65, 2% over 80 years, and up to 10% care home residents.
• Although primarily a movement disorder, it additionally affects a range of distressing non-motor symptoms. As the disease progresses, people with Parkinson’s become increasingly dependent, and a considerable burden is carried by family carers.
• The mainstay of management is a medical regimen which becomes less effective over time. Supplementary rehabilitative therapies, assistive technologies and occasionally surgery may also be required.
• Many Care Assistants are not aware of the special issues facing people with Parkinson’s, and the most appropriate ways of helping them, and a need for specific training had been identified.

SERVICES FOR PEOPLE WITH PARKINSON’S DISEASE
• The National Service Framework for Long Term Conditions promotes disease specific nurses coordinating multidisciplinary teams to prevent emergency hospitalisations.
• The NICE guidelines for Parkinson’s disease (2006) prescribe an extended role for Parkinson’s specialist nurses, and care load of 300 patients.
• The future implementation of these recommendations is constrained by a shortage of community resources. Over half of Parkinson’s specialist nurses report case loads in excess of 500.
• The specific training of care assistants in Parkinson’s disease to work with Parkinson’s specialist nurses and multidisciplinary teams of healthcare professionals in the community could alleviate the pressure on nurses.

PARKINSON’S TRAINING MATERIALS FOR CARE ASSISTANTS

ASSESSMENTS
Baseline (pre randomisation) background information: age, first language, education and training, care experience including people with Parkinson’s, preferred method of training.

PARKINSON’S specific knowledge/learning outcomes: two tests, pre training, immediately post training, and 6 weeks after the end of training:
• True / false knowledge quizzes (25 questions) based on the material in the modules, and compiled using a two-stage validation process.
• Four facts about Parkinson’s: score range 8 – 0.

FINDINGS
Characteristics of participants at baseline (n=101):
• Only one care assistant was male, the age range was 18 – 65 years.
• More than 60% had never had training in Parkinson’s disease.
• Nearly 40% had never had formal generic training.

Preferences for type of training: Self study is more convenient for some care assistants and employers because backfill arrangements do not have to be made.

CONCLUSIONS
• Care assistants are willing to undertake disease specific training and are supported by their managers (when backfill is provided).
• Both interactive training and self study resulted in improved knowledge of care assistants about Parkinson’s disease.
• Training completion rates are higher with interactive training.
• Self study provides more flexibility, and is preferred by some care assistants and employers.

MESSAGE FOR OTHERS
• Disease specific training for care assistants that is tailored to their backgrounds, abilities and workplace needs is required, welcomed by relevant stakeholders and effective at improving knowledge.

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