

Specification for POST GRADUATE DIPLOMA (ARTS) (Working with People with Autism)

1.0 PREAMBLE

Early in 1999 the Clinical Training Agency (CTA) convened an external advisory group to specify a broad strategic content and direction for training and education in the area of Disability Support Services (DSS) Post Entry Clinical Training (PECT) within the stated priorities of the HFA's DSS Operating Group.

A key priority emerged in the area of health and disability professionals working with people who have high and complex needs. The DSS Advisory Group further prioritised this identified training for health and disability professionals¹ working with people with autism as the key focus.

The Clinical Training Agency cites the following literature as relevant to the development of a programme to train professionals working with people with autism: *Client Perspectives on Training in the Context of the New Zealand Health and Disability Sector – A Report on the Major Themes in the Literature* Sue Gates (1999), *Our Vision (2000 – 2002)* DPA (NZ) – The National Assembly of People with Disabilities (1999), United Nations Standard Rules on the Equalisation of Opportunities for Persons with Disabilities, *Human Rights Act (1996)*, *Health and Disability Services Consumers' Code of Rights (1996)*.

This programme is intended to contribute the Disability Support Services sector by increasing the number of skilled professionals working with people with autism and their families. It aims to build local capabilities, drawing on existing national and international expertise to address current and projected sector needs.

A long term objective is to promote and develop local expertise in the care and support of people with autism and over time, lessen the health and disability sector's dependence on overseas expertise in the area of autism.

As one of the first DSS related training initiatives funded by CTA, we expect a strong evaluation process to be built into the programme to enable its success to be measured and any changes required, quickly identified. This is outlined in Section 8.

2.0 DESCRIPTION OF TRAINING

The aim of this training programme is to provide a post entry clinical training option for health and disability professionals working with people with autism and their families. This will be completed over a two year period part time, including at least 30% client/clinical content² and shall lead to the trainee receiving a nationally recognised

¹ For the purposes of this programme this includes social workers.

² This refers to contact in a care setting

qualification. The programme will cover a range of specialised material and aim to equip the trainee for an advanced level of practice within their field of expertise.

While it is expected to have a strong academic foundation, this will be balanced by a relevant clinical/client contact training component, (involving supervised training in a care setting) with an emphasis on introducing trainees to a range of interventions that are relevant to their current practice.

The programme will target health and disability professionals practising within the health and disability sector and currently working with people with autism and their family/whanau (at least weekly contact).

Learning should be conducted within an open learning model and facilitated through interactions with people with autism and their families/whanau, health care professionals (including trainee peers and members of the interdisciplinary team), mentors/supervisors, clinical and other meetings/hui, individual study and evidence based practice (including action research).

The course design should include the opportunity for longitudinal evaluation of the programme effectiveness.

2.1 LEARNING ENVIRONMENT

The programme will involve a range of contemporary teaching methods including an action research project, peer critique/supervision and group learning processes. It is expected that an evaluation process will include provision for consumer, trainee and employer feedback in order to evaluate the programmes' impact on service delivery. Programmes should support trainees to adopt a self-directed approach to lifelong learning.

Arrangements will be in place with the trainees' employers so trainees can be released for both formal teaching (block courses) and supervision sessions.

2.1.1 General Requirements

The training programme should incorporate a number of general topics, including:

- ?? Understanding and application of Health and Disability services Consumers' Code of Rights (e.g. Rights based model).
- ?? Cultural aspects of practice - where possible with input from senior clinicians working within Maori or Pacific Island settings.
- ?? Application of the implications of the Treaty of Waitangi and the principles of partnership, participation and protection.
- ?? Application of medico-legal and ethical principles as it relates to the care and support of people with autism.
- ?? Effective teamwork as a member of the interdisciplinary team.

- ?? Quality assurance and audit (best practice/evidence based approach).
- ?? The nature of autism and the implications for daily living.
- ?? Training in the process of transferring knowledge and skills to others.
- ?? Understanding the perspectives articulated by people with autism and their families/whanau including recognition of the right of disabled people to participate in evaluation of their health care.

The development and presentation of this programme should be sensitive to the following principles³ of:

- ?? Promoting a partnership model and the involvement of people with disabilities in setting their own goals and providing the support required to achieve these.
- ?? Recognising the rights of people with disabilities, to enjoy the same opportunities as others and to be involved in decisions that affect their health and independence.
- ?? Be guided by the principles of tino rangatiratanga (self determination) as demonstrated by the input/participation of tangata (people) with disabilities into the design, conduct and evaluation of training.
- ?? Recognising the importance of the concepts of tika (honesty), pono (trust), aroha (compassion) whanaungatanga (relationships) and wairua (spirituality) in approaching people with disabilities and their whanau (families).
- ?? Basing the provision of support for people with disabilities, on the best available evidence.

Specific Requirements

This programme is aimed at preparing trainees who hold a pre-entry health and disability qualification for advanced level practice. It is expected that the programme will include input from local and overseas experts in the field of autism. Course content will include material drawn from the latest research into best practice, presented by practitioners recognised to be leaders in their field.

While specific course content is to be outlined by the course provider, this is likely to include the following:

- ?? Assessment and diagnosis of autism.
- ?? Lifestyle planning - skills to assist trainees to develop and implement plans to an advanced practice level.
- ?? Behaviour management - intervention in challenging behaviour - knowledge of contemporary approaches and the range of options.

³ Developed by the DSS Advisory Group

- ?? Theory and practical implications of dual diagnosis and the need to maintain links with mental health, child health and community services.
- ?? Ability to assess potential crises within the family/whanau and apply early, effective crisis prevention strategies using a range of contemporary intervention options.

Support for families/whanau – including support around diagnosis and specialised advice for day to day living.

- ?? Communication, team building and skills required to develop and maintain interdisciplinary and interagency co-operation.
- ?? Input to challenge trainees to critically evaluate their own therapeutic relationships, listening and counselling skills. Transparent supervision arrangements set in place to assist trainees to develop these skills and to develop their clinical practice when applying new skills to workplace setting.
- ?? Contemporary evidence-based practice in the support of people with disabilities with an inter-disciplinary, non-institutional focus.
- ?? Application of research findings to practice including, the views of consumers/clients and their families/whanau.
- ?? Use of action research methods and outcome measurement.
- ?? Medicolegal and ethical aspects of professional practice.
- ?? Application of relevant contemporary therapeutic models of care and support strategies with emphasis on autism, using a broad range of skills and techniques appropriate to meet the needs of each client and their family/whanau/care setting.

2.1.2 Formal Teaching Programme

The formal teaching component of the programme will be designed to integrate with, and be relevant to the trainee’s work environment⁴. The provider will provide a range of teaching methods and resources to suit the cultural and individual learning needs of the trainee. Particular emphasis should be placed on applied knowledge, skill enhancement and value clarification.

Principles of adult education are to be applied to the development of this programme. The programme will include:

⁴ The work environment refers to the setting in which the trainee delivers health care to the client. This may include: hospital settings, community-based settings, homes (including clients own), marae based, private hospitals and General practice.

- ?? Specific, relevant input to promote a better understanding and application of the Treaty of Waitangi and the principles of partnership, participation and protection.
- ?? Appropriate mentoring arrangements to promote a greater acceptance of personal and professional responsibility and accountability for their own practice.
- ?? Formal teaching including lectures, presentations and assigned work by senior and experienced professionals who are recognised by the health and disability sector as having specific expertise in the autism field. Ideally these people will be drawn from a variety of backgrounds.
- ?? The perspectives of people with autism and their families/whanau, where appropriate, are to be incorporated into the programme design.
- ?? A broad understanding of relevant legislation including:
 - ?? The Crimes Act 1961
 - ?? The Mental Health (Compulsory Assessment and Treatment) Act 1992
 - ?? The Criminal Justice Act 1985
 - ?? The Protection of Personal and Property Rights Act 1988
 - ?? The Code of Health and Disability Services Consumers Rights under the Health and Disability Commissioners Act and the Human Rights Act 1993

A detailed schedule of the papers that will be included in this programme will be attached to this specification.

2.1.3 Access to resources

- ?? Physical resource - teaching in an appropriate clinical environment, group teaching and meeting areas, equipment and therapeutic modalities, library, audio-visual teaching equipment.
- ?? Distance learning facilities e.g. the internet, where relevant.
- ?? Utilisation of disability adapted technology as appropriate.
- ?? Interaction with the client and their families/whanau, where appropriate, mentor support, quality assurance.
- ?? Teaching resource to include involvement of people with disabilities and their families/whanau in assessment processes and course design through local and regional focus groups.
- ?? Marae, or similar environment communicating with local iwi, hapu, whanau in the trainees own area of learning.

?? Access to kaumatua or practitioners within Maori community as required.

2.2 SUPERVISION/MENTORSHIP

It is envisaged that trainees will be drawn from a number of different locations and care settings.

Supervision and ongoing assessment of trainees is necessary to ensure the quality of training, educational support and guidance for the trainee, progress towards expected outcomes, suitability to continue training and complete the course of training.

This programme is intended to have a strong clinical/client contact focus. The course requires trainees to be employed in a setting where they have frequent contact with people with autism. In addition to the supervision received as part of their day to day work, we expect trainees to be supported via sessions with an experienced clinical supervisor, appointed by the course providers. The supervisor should be acknowledged as having expertise in the care and support of people with autism. Sixty days per trainee per year (on a pro-rata basis) will be supervised, the timing of these sessions to be determined with the trainee. In addition small group sessions with an experienced supervisor should provide trainees with opportunities to discuss their work and gain the mentoring of a more experienced practitioner.

This programme should include arrangements for both peer supervision (where trainees are paired with fellow trainees for on course peer supervision/critical review) and interdisciplinary supervision (where trainees are matched with a senior and experienced colleague in their local area with recognised skills in autism). Skills of mentor (supervisor) will include ability to:

- ?? Review training objectives and assessment of progress and skill development.
- ?? Role model and provide effective mentorship.
- ?? Demonstrate respectful, affirming and stimulating relationships.
- ?? Provide critique and facilitate the understanding of the trainee.

Where possible Maori and Pacific Island trainees should be mentored by experienced practitioners from their own culture.

2.3 PROGRAMME COORDINATION

Examples of the tasks that are included in this role are:

- ?? Effective organisation and administration.
- ?? Arranging formal teaching programme.
- ?? Selection and advice to trainees on requirements.
- ?? Assessment of trainees and moderation of supervisors' assessments.
- ?? Assessment of supervisors and evaluation of placements.

- ?? Advocacy for training and trainees (with professional body and service provider).
- ?? Fulfilment of CTA reporting requirements and accountability (including accreditation requirements).

2.4 EXPECTED OUTCOMES

2.4.1 Trainee Outcomes

To complete the programme successfully, the trainee will be able to demonstrate the following outcomes:

- ?? A knowledge of contemporary autism research and intervention and competence in applying this within their workplace.
- ?? Monitors and guides own practice through a professional development plan, clinical supervision and reflective practice.
- ?? The ability to plan and implement specific interventions within a predetermined competency framework.
- ?? Use of a collaborative approach, which is based on active participation, negotiation and partnership with consumers/clients/whanau/significant others and focuses on strengths and potential.
- ?? Develop enhanced strategies for collaborative expert practice within their client contact work and in the inter-disciplinary environment.
- ?? Develop enhanced awareness of attitudes and approaches to people with autism.
- ?? Is able to work independently, demonstrating skill in use of resources to manage workload and are equipped to bring about changes in their work places.
- ?? Actively applies new knowledge to their day to day work with people with autism.
- ?? Demonstration of culturally appropriate practice, which acknowledges the diversity within and between different cultures.
- ?? Trainees should emerge from the programme with a sound understanding of the range of contemporary options and the ability to select from these on the basis of individual's needs.

2.4.2 Client/Service Outcomes

It is expected that trainees will primarily provide care and support services to people within DSS funded services.

- ?? Improved access to skilled and trained professionals equipped with a knowledge of contemporary intervention methods to assist clients and families/whanau in meeting the needs of people with autism.
- ?? Geographical access is improved – local support and assistance is more readily available.
- ?? Specialised skills currently only available overseas become more accessible within New Zealand.
- ?? Professionals work in partnership with clients and their families/whanau in planning and providing assistance.
- ?? Improved networking and co-operation between services and health and disability professionals.

3.0 ELIGIBILITY

3.1 TRAINEE ELIGIBILITY

Trainees will:-

- ?? Have completed a pre-entry health and disability professional qualification.
- ?? Be employed in a service where they come in to at least weekly contact with people with autism and their families and have the support of their employers for release time to attend formal teaching and supervision.
- ?? Have demonstrated competence in the provision of basic care and support for people with autism and their families (relevant to the trainees' pre-entry training).

Priority will be given to trainees:

- ?? Employed in services funded primarily by the HFA DSS Operating Group.
- ?? Who display leadership potential and have established networks within the field.

3.2 PROVIDER ELIGIBILITY

Providers will need to:-

Demonstrate they have established a partnership with either an autism service provider or academic institution, as appropriate that is able to augment its own experience to provide the training required.

Satisfy the CTA that they can achieve NZQA accreditation for the course/programme within a set timeframe.

4.0 LOCATION AND SETTING

It is expected that this programme will be based on a distance/open learning model to facilitate access.

The clinical component will be predominantly offered within the trainees' current work environment. The programme is supported by Tautoko Services, Porirua.

The formal teaching component will be predominantly delivered in / by Massey University.

5.0 ASSOCIATED LINKAGES

The programme will promote and maintain links with:

- ?? Relevant professional bodies.
- ?? Other training centres focussing on autism.
- ?? Patient Advocates for Code of Health and Disability Services Consumer Rights and Privacy issues.
- ?? DSS health providers.
- ?? Consumer, family/whanau groups.
- ?? New Zealand Medical School(s).
- ?? N.Z. Autistic Association.
- ?? Other organisations providing services to people with autism and their families.

One of the programme's objectives is to address identified needs within the DSS sector relating to autism. It is important that good networks are established and maintained with providers working in this area. The course should aim to reflect the values of the sector and interact with it to develop the programme.

6.0 PURCHASE UNIT AND REPORTING UNIT

6.1 PURCHASE UNIT

A trainee who meets the eligibility criteria set out in Section 3.1 and who has formally enrolled in the programme.

6.2 REPORTING UNIT

Trainees progress towards meeting the expected outcomes (refer Section 2.4).

7.0 QUALITY STANDARDS: PROGRAMME SPECIFIC
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7.1 LEARNING ENVIRONMENT QUALITY STANDARDS

Training providers will demonstrate their commitment to training by:

- ?? Reviewing and evaluating on an ongoing basis, the content and style of delivery of the training programme and its acceptability to students and service providers
- ?? Having written and implemented policies on cultural safety.
- ?? Demonstrating a commitment to adult learning principles.

7.2 WORKPLACE SUPERVISION QUALITY STANDARDS

Workplace supervision will be provided to a standard that ensures:

- ?? Clear lines of responsibility and accountability for client care at all times, with backup available appropriate to the level of experience of the trainee.
- ?? Appropriate level of supervision.
- ?? Trainees have a written copy of general and specific training objectives.

7.3 EDUCATIONAL SUPERVISION QUALITY STANDARDS

Educational supervision will be provided to a standard that ensures:

- ?? Processes are in place to identify trainees who require additional support, and appropriate action is taken.
- ?? Reports are provided as required.
- ?? Trainees receive assistance with their learning skills.

7.4 PROGRAMME COORDINATION QUALITY STANDARDS

Programmes will be co-ordinated to a standard that ensures:

- ?? Supervision arrangements are clear, trainees equipped with the skills to action these.
- ?? Teaching is provided at an appropriate standard using current methods with appropriately skilled staff.
- ?? Assessments of trainees are objective and equitable.

?? Reports are provided by the due date.

?? Training records are kept and are available

8.0 REPORTING REQUIREMENTS: PROGRAMME SPECIFIC

8.1 PROGRESS REPORTING

Section 2.4 of the specification details the expected milestones and outcomes of the training programme.

8.2 QUALITY REPORTING

Reports as described in Part 4 of the CTA's standard contract document require a narrative statement. Part 5 of the contract requires that the provider will have a quality plan in place for the ongoing monitoring of the training provided. The narrative should refer to the outcomes of this internal quality management and make reference to the programme specific quality standards in 7.0 of this specification, particularly with regards to supervision.

8.3 EVALUATION PLAN

You will attach a detailed evaluation plan to this contract which should include the plans for the following:-

?? Feedback from employer groups – survey results

?? Trainee feedback – summary of trainee comments

?? Tracking and reporting trainees completing the course – reasons for leaving the programme

?? Client and consumer satisfaction – feedback collected via a variety of mechanisms.