

INSPECTION REPORT

Learn to Care

02 June 2006



ADULT LEARNING
INSPECTORATE

Adult Learning Inspectorate

The Adult Learning Inspectorate (ALI) was established under the provisions of the *Learning and Skills Act 2000* to bring the inspection of all aspects of adult learning and work-based learning within the remit of a single inspectorate. The ALI is responsible for inspecting a wide range of government-funded learning, including:

- work-based learning for all people aged over 16
- provision in further education colleges for people aged 19 and over
- **learnirect** provision
- Adult and Community Learning
- training funded by Jobcentre Plus
- education and training in prisons, at the invitation of Her Majesty's Chief Inspector of Prisons
- adult information, advice and guidance services (**nextstep**).

Inspections are carried out in accordance with the Common Inspection Framework by teams of full-time inspectors and part-time associate inspectors who have knowledge of, and experience in, the work which they inspect. All providers are invited to nominate a senior member of their staff to participate in the inspection as a team member.

Pre-inspection analysis

The resources allocated to a cycle 2 inspection are primarily determined by the findings from the previous inspection. Account is also taken of information about achievement and retention obtained from the funding body, and any significant changes in the size or scope of the provision.

Where a provider has received good grades in cycle 1, the cycle 2 inspection is relatively light. If the provider offers a number of areas of learning, a restricted sample is inspected.

Where a provider has received satisfactory grades in cycle 1, the cycle 2 inspection is less intensive and it is possible that not all areas of learning are included.

Where there are significant unsatisfactory grades from cycle 1, the intensity of the cycle 2 inspection is broadly the same as cycle 1, and all significant areas of learning are inspected.

Providers that have not previously been inspected will receive a full inspection.

Overall effectiveness

The grades given for areas of learning and leadership and management will be used to arrive at a judgement about the overall effectiveness of the provider.

An **outstanding** provider should typically have leadership and management and at least half of the areas of learning judged to be a grade 1. All area of learning grades will be graded 1 or 2.

A **good** provider should have leadership and management and at least half of the area of learning grades judged to be a grade 2 or better. A good training provider should not have any grade 4s, and few grade 3s in the areas of learning.

A **satisfactory** provider should have adequate or better grades in leadership and management and in at least two thirds of the area of learning grades. An adequate provider might have a range of grades across areas of learning, some of which might be graded 4.

Provision will normally be deemed to be **inadequate** where more than one third of the area of learning grades and/or leadership and management are judged to be inadequate.

The final decision as to whether the provision is inadequate rests with the Chief Inspector of Adult Learning.

Grading

Inspectors use a four-point scale to summarise their judgements about the quality of provision in occupational/curriculum areas and Jobcentre Plus programmes, as well as to summarise their judgements about the quality of learning sessions. The same scale is used to describe the quality of leadership and management, which includes equality of opportunity and quality assurance. The descriptors for the four grades are:

- *grade 1 - outstanding*
- *grade 2 - good*
- *grade 3 - satisfactory*
- *grade 4 - inadequate*

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DESCRIPTION OF THE PROVIDER

1. Learn to Care is a training and assessment organisation based in Canterbury, Kent. It was founded in 2002 and operated as part of Beech Tree Totalcare Associates until April 2006, when it became a limited company. Learn to Care supports the training and development needs of care staff employed in over 80 residential and nursing homes for older people and people with mental health or learning difficulties and/or disabilities. It also trains staff in domiciliary care services across Kent.
2. In 2005-06, Learn to Care had a total of 275 learners completing national vocational qualifications (NVQs) in health and social care at levels 2 to 4 and a registered managers' award. Learn to Care also offers assessors', verifiers' and mentors' awards. Learners receive visits every four to six weeks from assessors for the duration of their programme. The assessor, in partnership with the workplace, provides the training and assessment.
3. The organisation has 13 full-time staff and two part-time staff. The managing director is supported by a management team of four, which includes two internal verifier co-ordinators, a finance and administration manager and a centre co-ordinator. The two internal verifier co-ordinators each manage a team of assessors.
4. Learners are either recruited from within the workplace or are allocated to Learn to Care as part of its Train to Gain contract with the Kent and Medway Learning and Skills Council. Learn to Care also recruits just over 100 learners through a direct contract with the European Social Fund. In April 2006, the unemployment rate in Kent was 2.2 per cent, slightly lower than the average for England of 2.6 per cent. According to the 2001 census, 3.1 per cent of the population of Kent is from a minority ethnic group, about 2 per cent lower than the figure for the Southeast and 6 per cent lower than the average for England. In terms of employment, health and social care jobs account for 10.6 per cent of jobs in the Kent area, which is similar to the average for England.

OVERALL EFFECTIVENESS

Grade 3

5. **The overall effectiveness of the provision is satisfactory.** Learn to Care's leadership and management are satisfactory, as are its arrangements for equality of opportunity and quality improvement. The provision in health, public services and care is satisfactory.
6. **The inspection team had some confidence in the reliability of the self-assessment process.** This is Learn to Care's first self-assessment report. Learn to Care has established a suitable process for the production of the report. The self-assessment process is inclusive. It includes the views of staff, learners and employers. Learn to Care has not shared the final report with employers or learners. The report is largely descriptive and does not include sufficient evaluative detail to identify fully the key strengths and weaknesses. The judgements in the self-assessment report match some of those of the inspection team. The report matches closely the grades given by inspectors for leadership and management.

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7. The provider has demonstrated that it has sufficient capacity to make improvements.

Learn to Care has a suitable quality improvement plan in place which it is in the process of updating to reflect the strengths and weaknesses of the self-assessment report. The organisation has established many new procedures to identify opportunities to make further improvements. It is too soon to judge the effect of these developments. Learn to Care relies strongly on its internal verification processes to identify and make improvements. It analyses the views of learners and employers regularly to identify improvements. It does not make enough use of data to identify trends or to measure fully the effect of actions taken.

KEY CHALLENGES FOR LEARN TO CARE:

- improve the use of data to identify trends
- promote further equality of opportunity
- continue to build on the strong working relationships with employers
- consolidate the quality improvement arrangements
- maintain the high levels of success rates
- strengthen the attention given to individual learning needs
- develop further resources and skills in training and learning

GRADES

grade 1 = outstanding, grade 2 = good, grade 3 = satisfactory, grade 4 = inadequate

Grades awarded at inspection

Leadership and management		3
Contributory grades:		
Equality of opportunity		3
Quality improvement		3

Health, public services and care		3
Contributory areas:	Number of learners	Contributory grade
Social care		3
Other government-funded provision	100	3
Train to Gain	214	3

ABOUT THE INSPECTION

8. The inspection took place between 30 May and 2 June 2006. The inspection judged the effectiveness of Learn to Care's leadership and management and graded Train to Gain provision in health, public services and care. There were no pre-inspection visits.

Number of inspectors	4
Number of inspection days	16
Number of learners interviewed	36
Number of staff interviewed	15
Number of employers interviewed	13
Number of locations/sites/learning centres visited	21
Number of visits	1

KEY FINDINGS

Achievements and standards

9. **Overall success rates are high.** In 2003-04, 77 per cent of learners successfully achieved their qualification. In 2004-05, the success rate was 67 per cent. About half of all learners complete within their specified timescale. In 2004-05, the success rate was 74 per cent on the level 2 NVQ in care and 90 per cent on the level 3 NVQ in health and social care.

10. The development of skills at work is satisfactory overall. Learners demonstrate a keenness to apply their new skills in the workplace. The standard of work in portfolios is satisfactory. All learners demonstrate a good understanding of the rights of their clients. Many learners progress from level 2 to 3 and some to level 4 courses as they take on new responsibilities at work.

The quality of provision

11. **Relationships with employers are very productive.** Learn to Care responds well to employers' needs through its broad range of courses. Assessors enjoy very good working relationships with employers. They meet regularly to discuss assessment and learning opportunities at work. Learn to Care makes good use of workplace in-house training to support its learners.

12. Arrangements for assessment are satisfactory. Assessment plans are clear. Learners receive useful feedback which contains sufficient detail. The observation of learners completing work-based assessment tasks is satisfactory.

13. Learners receive satisfactory levels of support from their assessors. Arrangements for information, advice and guidance are satisfactory. Learn to Care ensures that learners understand the progression routes available for each qualification. It refers learners to

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other agencies if they have additional needs.

14. **Resources to support training and learning are insufficient.** Learn to Care provides few learning resources other than a textbook. The organisation does not have a library of resources for its learners, who have to use public libraries or the internet to complete research. Learn to Care's assessors offer coaching to learners but this is not planned or evaluated. Some assessors do not have the appropriate level of knowledge in health topics to support learners effectively. Few resources exist to support the specialist optional units of the NVQ.

15. **Insufficient attention is paid to individual learning needs.** Learn to Care's assessment of learners' literacy, numeracy and language skills support needs is insufficiently comprehensive. Many learners find the vocabulary of the NVQ workbooks difficult to understand. Some learners have difficulty in completing written tasks based on research from libraries and the internet. Learn to Care assesses evidence for many units at a time and some learners have difficulty understanding how much progress they have made.

Leadership and management

16. **Learn to Care involves employers well in the NVQ training provided for their employees.** It has developed very good relationships with local care homes. Employers receive regular feedback from assessors on learners' progress, and are routinely involved in the planning of assessment opportunities. Learn to Care has a detailed knowledge and understanding of employers' requirements and supports employers well to build their own training capacity.

17. **Communications at Learn to Care are particularly effective.** All meetings are regular, scheduled to enable staff to attend and are well minuted. Staff understand well the ethos and direction of the company and make valuable contributions to its development.

18. Arrangements for staff training and development are satisfactory. Learn to Care inducts new staff effectively into their roles. All staff receive an annual appraisal which identifies their training needs. Staff have appropriate qualifications and receive good support to develop their skills further.

19. The management of resources is satisfactory. Training rooms for off-the-job training are satisfactory. However, Learn to Care does not have sufficient resources overall to support training and learning.

20. The management information system is satisfactory, recording and monitoring learners' progress effectively. However, Learn to Care does not use data sufficiently to identify trends over time.

21. Learn to Care has an adequate strategy and arrangements in place for supporting learners to develop their literacy, numeracy and language skills. Learn to Care does not routinely monitor or record learners' progress against the development needs identified through the initial assessment.

22. Learn to Care promotes equality of opportunity satisfactorily. It has produced a suitable equal opportunities policy and provides all learners and their employers with a

copy of this policy at induction. Learn to Care discusses the training needs of most care workers with their employers. The organisation collects data on learners' gender, ethnicity and disability, and analyses the recruitment of its learners by gender and ethnicity through regular quarterly reviews.

23. Arrangements to support learners' needs are satisfactory. Learn to Care has participated in a number of local projects to provide learning support. It uses additional learning support funds appropriately, and makes suitable arrangements to support learners with physical disabilities.

24. Learners and staff demonstrate a satisfactory understanding of equality and diversity. Learn to Care routinely checks that learners have not been subjected to discriminatory practices. It does not, however, reinforce learners' understanding beyond the requirements of the NVQ. Staff have received little formal training in equality and diversity. Learn to Care deals with learners' complaints promptly and sensitively.

25. Internal verification is satisfactory and contributes to quality improvement. Internal verification procedures are comprehensive. Internal verifiers provide full and constructive feedback to assessors.

26. The self-assessment process is satisfactory. The process is inclusive and staff contribute fully to the self-assessment report, which identifies some of the strengths and weaknesses found by inspectors.

27. **Learn to Care's arrangements for quality improvement are insufficiently established.** It has implemented a range of quality monitoring processes to identify areas for improvement. These quality processes are not yet sufficiently established to provide a coherent and comprehensive approach to quality improvement. Learn to Care does not have a clearly defined quality improvement cycle that identifies the timing of its quality improvement activities.

Leadership and management

Strengths

- particularly effective communications
- good involvement of employers in training

Weaknesses

- insufficiently established quality improvement arrangements

Health, public services and care

Social care

Strengths

- high success rates
- very productive relationships with employers

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Weaknesses

- insufficient resources to support training and learning
- insufficient attention to individual learning needs

WHAT LEARNERS LIKE ABOUT LEARN TO CARE:

- the level of support from my assessor - 'she's willing to go out of her way to make sure you understand things'
- the good-quality feedback and advice from assessors
- 'I always get help with work if stuck. My assessor tells me when I've gone wrong'
- the support network
- the helpful and approachable staff
- the good-quality communication
- the reliability and friendliness of staff

WHAT LEARNERS THINK LEARN TO CARE COULD IMPROVE:

- the clarity of the language used in the NVQ workbooks
- the amount of information about opportunities in the future
- the opportunities to receive resources sooner
- the ability to complete one unit at a time
- the time available to complete the qualifications

DETAILED INSPECTION FINDINGS

LEADERSHIP AND MANAGEMENT

Grade 3

Strengths

- particularly effective communications
- good involvement of employers in training

Weaknesses

- insufficiently established quality improvement arrangements

28. Learn to Care involves employers well in the NVQ training provided for their employees. It has developed very good working relationships with local care employers, many of them small to medium-sized enterprises. Employers value Learn to Care's inclusive approach to the development of their employees in training, and appreciate the regular communication with staff from the provider. Many employers have gained nationally recognised qualifications for care home managers through Learn to Care. They work closely with Learn to Care to support their employees very effectively through their NVQ programmes. Employers receive regular feedback from Learn to Care's staff on learners' progress, and are also routinely involved in the planning of assessment opportunities. Employers appreciate the responsiveness of Learn to Care to the needs of their organisations. For example, assessors routinely plan their visits to accommodate the working patterns of the care homes and learners' shiftwork. Learn to Care's staff have a detailed knowledge and understanding of employers' requirements and support employers well to build their own training capacity through, for example, the provision of mentoring awards. Learn to Care has become the training provider of choice for many of the care homes it works with. It checks that each care home has completed its statutory training. Where Learn to Care is unable to respond to a particular request for training, it routinely refers employers to other specialist providers.

29. Communications at Learn to Care are particularly effective. The managing director has an open and inclusive approach to communications and meets regularly with managers, administrative staff and assessors. At meetings, staff make good and valued contributions to the development of Learn to Care. Staff demonstrate a good understanding of the ethos and direction of the company. They communicate effectively with each other through a wide range of management, team, centre and individual meetings. The company arranges a detailed schedule of these meetings to allow staff to attend. Staff at all levels in the organisation meet regularly to exchange information and to monitor overall progress. Internal verifier co-ordinators hold regular scheduled meetings with individual members of their team of assessors to review the progress of individual learners and to discuss detailed operational matters. Learn to Care keeps detailed notes of meetings. It supplements formal meetings with frequent informal contact through discussions, e-mail and telephone.

30. Arrangements for staff training and development are satisfactory. Learn to Care plans its staff development well in advance and focuses on key areas such as health and safety. All staff receive an annual appraisal which identifies their training needs. Staff are appropriately qualified for their main roles, and receive good support to develop further their professional skills. Most staff have received recent training.

31. The management of resources is satisfactory. Learn to Care inducts new staff effectively into their roles. It allocates caseloads to assessors appropriately, and managers review these regularly. Training rooms for off-the-job training are satisfactory. Although Learn to Care has developed a range of satisfactory workbooks for its learners, it does not have sufficient resources overall to support training and learning.

32. Management information systems are satisfactory. Learn to Care routinely collects data on key aspects of its activities, and generally evaluates this data effectively. The management information system records and monitors learners' progress effectively. Where learners are making slow progress, Learn to Care takes prompt action. Financial monitoring is effective. The managing director receives regular monthly financial reports. However, Learn to Care does not evaluate some management data sufficiently. For example, it does not use data to identify trends over time, or to assess the effectiveness of actions taken to recruit particular groups of learners.

33. Learn to Care has an adequate strategy and arrangements in place for supporting learners to develop their literacy, numeracy and language skills. All learners take an initial assessment of their needs using a nationally recognised test. Where a need is identified, Learn to Care either allocates additional time and help to the learner with its own staff or refers the learner to an external specialist agency. However, Learn to Care does not routinely monitor or record learners' progress against the development needs identified through the initial assessment.

Equality of opportunity

Contributory grade 3

34. Learn to Care promotes equality of opportunity satisfactorily. It has produced a suitable equal opportunities policy which includes reference to relevant legislation, with appropriate supporting procedures covering topics such as complaints, appeals and grievances. Responsibility for the implementation of the policy lies with the managing director. All learners and their employers receive a copy of this policy at induction. Learn to Care does not monitor employers' promotion of equality of opportunity in the workplace. It does, however, conduct a health, safety and welfare audit of each workplace. Learn to Care does not produce a separate equal opportunities policy for its learners or its staff. It has also produced a suitable statement of intent for equality of access to assessment. Learn to Care endeavours to identify and respond to the individual needs of learners. It works closely with employers to ensure that the training needs of most care workers are identified.

35. Arrangements to support learners' needs are satisfactory. Learn to Care has participated in a number of local projects to provide learning support. In 'Reaching Out', Learn to Care provided mentors, increased individual support and simplified documents to help about 100 learners with their studies. In 2004-05, of the 43 learners in receipt of support from this project, 31 completed their NVQ. Learn to Care uses additional learning support funds appropriately. Of the four learners in receipt of additional learning support funds, two have already gained their qualification. Learn to Care makes suitable arrangements to support learners with physical disabilities. Learners with visual impairments have benefited from the use of large-print documents and assistive equipment.

36. Learners and staff demonstrate a satisfactory understanding of equality and diversity. Learners apply the principles of equality and diversity well when they work with clients.

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Learn to Care routinely checks at each progress review that learners have not been subjected to discriminatory practices. It does not, however, reinforce learners' understanding beyond the requirements of the NVQ. Equality of opportunity features as a standard agenda item for most meetings. However, minutes of these meetings show little discussion or action points to promote equality and diversity further. Staff have received little formal training in equality and diversity but some have received training in disability awareness. Learn to Care deals with learners' complaints promptly and sensitively.

37. Learn to Care collects data on learners' gender, ethnicity and disability. It analyses the recruitment of its learners by gender and ethnicity through regular quarterly reviews. About 5 per cent of its current learners are from minority ethnic backgrounds, which is higher than the local representation. About 14 per cent are men. Learn to Care has recruited almost half of its learners from disadvantaged areas around Canterbury. It does not, however, set targets for the recruitment of specific under-represented groups. Learn to Care does not analyse effectively data relating to learners' completion. It produces data on the number of completers by gender and ethnicity for each quarter. It does not compare this data with the number of learners who had planned to leave in the same period.

Quality improvement

Contributory grade 3

38. Internal verification is satisfactory and contributes to quality improvement. Clear sampling plans ensure that all assessors, candidates and units are adequately sampled. Internal verification procedures are comprehensive, and internal verifiers provide full and constructive feedback to assessors. In addition to individual meetings with assessors, internal verifiers hold regular meetings with the assessor teams to standardise procedures and to share good practice.

39. The self-assessment process is satisfactory. Learn to Care produced its first self-assessment report in March 2006. The process was inclusive and staff contributed fully to the report. The report also took account of learners' and employers' views. The self-assessment report identifies some of the strengths and weaknesses found by inspectors.

40. Learn to Care's arrangements for quality improvement are insufficiently established. Learn to Care has implemented a range of quality monitoring processes to identify areas for improvement. It regularly collects and reviews learners' and employers' feedback. It has recently produced its first self-assessment report. It has introduced a system to observe and improve the quality of training and learning. These quality processes are not yet sufficiently established to provide a coherent approach to quality improvement that all staff understand. Learn to Care's quality improvement plan does not link sufficiently clearly to the strengths and areas for development identified in its self-assessment report. Learn to Care does not have a clearly defined quality improvement cycle that identifies the timing of its quality improvement activities. Some targets in its quality improvement and business plans are not sufficiently defined to allow the company to judge the success of its actions.

AREAS OF LEARNING

Health, public services and care

Grade 3

Contributory areas:	Number of learners	Contributory grade
Social care		3
Other government-funded provision	100	3
Train to Gain	214	3

41. Learn to Care has currently 214 learners on programme. Of these, 79 work towards NVQs in health and social care at level 2 and five work towards a level 2 NVQ in care. Fifty-six follow NVQs in health and social care at level 3 and eight work towards a level 3 NVQ in care. One learner is completing a promoting independence course at level 3. Thirty-four learners work towards the registered managers' award and a further 31 follow NVQs in care at level 4. About 5 per cent of learners are from minority ethnic groups and 14 per cent of learners are men. Training and assessment take place at work. Assessors visit learners every four weeks. Some care homes have additional work-based assessors and some use expert witnesses. Learn to Care also offers assessors' and internal verification awards and qualifications in coaching, mentoring and supporting learners, as part of its learning and development awards.

Social care

Strengths

- high success rates
- very productive relationships with employers

Weaknesses

- insufficient resources to support training and learning
- insufficient attention to individual learning needs

Achievement and standards

42. Overall success rates are high. In 2003-04, 77 per cent of learners successfully achieved their qualification. In 2004-05, the success rate was 67 per cent. The in-year success rate for 2005-06 is 66 per cent with just under half the learners still in learning. Many are about to complete their studies. About half of all learners complete within their specified timescale. In 2004-05, the success rate was 74 per cent on the level 2 NVQ in care and 90 per cent on the level 3 NVQ in health and social care. The success rate on the level 4 NVQ in health and social care was 60 per cent in 2004-05.

43. The development of skills at work is satisfactory for learners at levels 3 and 4. Learners at level 2 display good care skills, particularly those learners who are new to learning. They exhibit much enthusiasm and are excited by their learning. Learners are eager to apply their new knowledge and skills at work. The standard of work in portfolios is satisfactory. Learners' portfolios are well organised and contain an appropriate range of evidence.

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Written work is satisfactory. A few learners have gained confidence in using information technology to produce their work. All learners demonstrate a good understanding of the rights of their clients. Many learners progress from level 2 to 3 and some on to level 4 courses as they take on new responsibilities as senior staff, deputies and managers of care homes.

Programme	End Year	Success Rate	No, of learners	Provider NVQ Rate	National NVQ Rate	Provider framework rate	National framework rate
Adult training (long courses)	2003-04	overall	131	77		0	
		timely	115	48		0	
	2004-05	overall	138	67		0	
		timely	159	45		0	
	2005-06	overall	175	66		0	
		timely	275	22		0	

For details of how to calculate overall and timely success rates please refer to the "Quality Improvement Pack" (available from the Learning and Skills Council's website: www.lsc.gov.uk).

The quality of provision

44. Relationships with employers are very productive. Learn to Care responds well to employers' needs, through its broad range of courses. Assessors enjoy very good working relationships with employers. Learn to Care ensures that employers are involved in their employees' training and maintains regular contact by telephone, frequent visits and letters. All employers receive an informative induction booklet which clearly outlines Learn to Care's policies and procedures and its expectations relating to NVQ learning and assessment. The communication between Learn to Care staff and employers is good. Some work-based staff are qualified NVQ assessors and become involved in the assessment of their own employees' practical competence. Some act as expert witnesses. Assessors and employers meet regularly to discuss specific topics relating to assessment and learning opportunities at work. Learn to Care makes good use of workplace in-house training as well as the skills and knowledge of employers to support NVQ unit completion. Employers offer good training in many care homes, which provides additional portfolio evidence.

45. Arrangements for assessment are satisfactory. Assessors record the planning of assessment well. Learners receive useful feedback which contains sufficient detail. The observation of learners completing work-based assessment tasks is satisfactory. Learn to Care has produced workbooks to enable learners to develop their knowledge and skills for each unit of their NVQ and apply this to their practical work. However, some learners are insufficiently involved in the building of their portfolios of evidence and are unclear as to what they need to do to complete their qualification.

46. Learners receive satisfactory levels of support from their assessors. Assessors are punctual and respond promptly to learners' requests for extra help. They maintain frequent contact by text, mobile telephone and additional visits. Assessors generally arrange visits to fit into learners' patterns of attendance at work.

47. Arrangements for information, advice and guidance are satisfactory. Learn to Care makes sure that learners understand the progression routes available for each qualification. The organisation refers learners appropriately to other agencies if they have additional social or other support needs. However, insufficient information is available about wider work roles and about further or higher education courses such as nursing or other professional training.

48. Resources to support training and learning are insufficient. Learners can borrow a textbook but Learn to Care provides few other resources. Learn to Care advises learners to research using public libraries and the internet but some learners do not have easy access to these facilities and many have difficulty in finding the appropriate material. In the better workplaces, learners receive good support from their managers to develop their learning through in-house training sessions with access to relevant learning resources. Learn to Care does not have a library of resources for its learners. Its assessors offer coaching to learners. However, this coaching is not planned or evaluated and opportunities are not taken to deliver short coaching sessions in the workplace. Some assessors do not have the appropriate level of knowledge in health topics to support learners effectively. The sharing of knowledge among the staff team is insufficient. Few resources are available to support the specialist optional units in the NVQ, particularly at level 3.

49. Insufficient attention is paid to individual learning needs. Assessment of learners' literacy, numeracy and language support needs is insufficiently comprehensive. Where needs are identified, learners receive additional time but no specialist support. Assessors do not routinely correct subject-related spelling errors. They do not offer learners a glossary of common health-related terms to help them build their care vocabulary. Some learners have difficulty in completing written tasks based on research from libraries and the internet. Many learners find the vocabulary of the NVQ workbooks difficult to understand. Some of the tasks are repetitive, both within and between workbooks, particularly in relation to legislation and theories of growth and development. Learn to Care assesses evidence for many units at a time. Some learners are unable to identify how much progress they have made or the amount of work they still have to complete.

Leadership and management

50. The internal verification arrangements are satisfactory. The care internal verification sampling plan is well established. Internal verification takes place in the workplace and includes a detailed interview with learners and sampling of assessment practice. The feedback from internal verifiers is appropriate and helps assessors to improve their assessment skills. Standardisation meetings take place regularly. Learn to Care's assessors and expert witnesses from the workplaces attend these meetings.

51. Arrangements for the promotion of equality of opportunity are satisfactory. Learners demonstrate a good understanding of equality of opportunity as it applies to clients in care. Learners receive Learn to Care's policies and procedures at their induction. Regular progress reviews check that learners have not been subject to discriminatory practices. Learners understand the complaints procedure. Learn to Care deals with complaints promptly and sensitively.

52. The self-assessment report identifies some of the strengths and weaknesses of the provision. Many of the areas identified in the report as strengths are no more than normal practice, however, and some weaknesses are not identified. Most staff contributed to the

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self-assessment report. Learn to Care obtained learners' and employers' views through questionnaires. The organisation has not shared the final report with its learners or employers.

