Training Needs of Direct Support Staff


Article Summary

The level of training that direct care staff receive can be a significant factor in the quality of services received by individuals with disabilities. Unfortunately, budgetary restraints often dictate that the majority of training is pre-service. The authors conducted surveys among administrators, direct support staff, and consumers to measure training needs, employment information, and demographic information in order to determine the level of training and perceived training needs in North Carolina. They used the Community Support Skill Standards to determine what these groups felt represented the highest priority among the following 12 subscales:

- Consumer Empowerment;
- Communication;
- Assessment;
- Community Service and Networking;
- Facilitation of Services;
- Community Living Skills and Support;
- Education, Training, and Self-Development;
- Advocacy;
- Vocational Education and Career Support;
- Crisis Intervention;
- Organizational Participation; and
- Documentation.

The study, which targets programs and staff in a single state, may not generalize to a wider sample. The authors also indicated survey return rates for direct support staff and program administrators of 23% and 29% respectively. However, they used ranked data to draw some comparisons. Responding direct support staff recognized a need for additional inservice training, particularly in the areas of Crisis Intervention; Education, Training, and Self-Development; Advocacy; and Community Living Skills and Support. Administrators, on the other hand, prioritized Documentation and Communication as the areas of greatest need for staff training.

Administrators noted that providing coverage for staff during in-service training and adequate funding for such training were significant obstacles with a median agency training budget of $5,000. However, the authors noted that community agencies that serve individuals with developmental
disabilities must look at creative training options in order to increase the amount of training that
direct support staff receive. In so doing, they may decrease high staff turnover as well as better meet
the needs of consumers. Training options presented included the following more cost efficient
methods: state-wide planning; individually accessible learning via web-based or videotaped
instruction; development of training programs that would lead to standardized credentials with
incentives to achieve such standards; increased interagency collaboration on common training needs.

Access year 2003 issues of Mental Retardation for free by visiting
http://aamr.allenpress.com/aamronline/?request=get-archive