



#### Quality of programme for quality of care:

Curriculum development of a vocational education programme for community care for the elderly in Hong Kong

#### Caritas Institute of Community Education











The paper reports the dynamic and interactive process for the curriculum development of a vocational education programme of a Higher Diploma in Health and Community Care for the Elderly.

Nowadays, programme planning in self-financing education sector is a great challenge work. The programme planning is necessary to determine institutional direction among the mission of the institute, the community needs, resources. We need to tackle the emerging needs to offer quality programmes.





The process for developing new academic programmes can be a time-consuming process.

In order to meet the diverse needs of our senior citizens in different age ranges and the need for multi-faceted services. For the ablebodied elderly, the government aims to create a social environment conducive to "active ageing". For those with weaker physical conditions, we are offering them the necessary support according to their different level of care needs under our policy objective - "ageing in place as the core, institutional care as back-up".







However, the acute shortfall in the community care quota and manpower shortage in elderly service sector. The government has implemented a number of measures to enhance the supply of front-line care staff and improve their work prospects. The measures include implementing Qualifications Framework (QF) in the elderly service sector, supporting the various training programmes for the social welfare sector, implementing the Navigation Scheme for Young Persons in Care Services, etc.

馮志豪(2015年7月31日)。居家安老急需支援。**蘋果日報。2015**年7月31日,取自https://hk.news.appledaily.com/local/daily/article/20150731/19238317





By conducting stakeholder surveys and in-depth case studies of client-based requirements, the programme development team enhanced their understanding on the context-specific issues which underpin total quality of community care for the elderly.



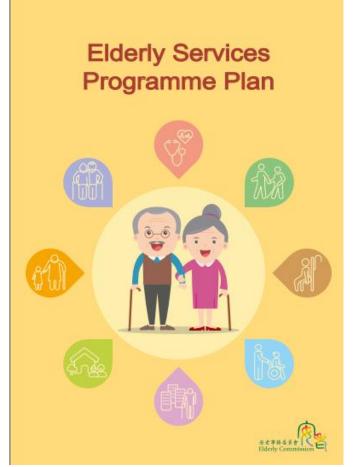








Achieve "ageing in place" and reduce institutionalisation rate through significantly strengthening CCS Uphold the Government's established policy direction of "ageing-in-place as the core, institutional care as back-up", and to actualise the principle of "prevention is better than cure". This means putting a heavier focus on CCS and strengthening health promotion and maintenance initiatives.







#### 護老政策不能迷信市場



劍橋護老院的院友被職員推 學 至蔣天平台被脫光衣服等候洗 得 獎,安老院的所為實在令人髮 指。其實任何長者都應有尊嚴 人 地度過晚年無法自我照顧或得 和客人的支展而為住生老院

卻得到不人道的待遇,這更只是冰山一角,相信 我們是應該反思香港的長者社福政策,應該何去 何從。

香港的長者長期護理服務,一直靠私營市場的參與,在現實社會,政府、私人和非牟利機構生各司其職,但是政府卻迷信市場化,以爲社福格構成本高、效益低,除了過往一直在市場上存在的私營老人院,並透過買位制度運作,政府亦管將家務助理的膳食服務投標以讓私營市場營運,近年更推出不少「錢跟人走」的服務,如長者醫療券、社區照顧服務券以至正在醯釀推出的長者醫療人社區照顧服務券,均可見政府的對市場的沒思。

非牟利機構的成本雖高,但人本的工作往往需要的是服務穩定和質素,純商業機構卻只顧收益 和向股東交代,可惜我們的政府深信芝加哥經濟

學派的現金券制度,現時的安老服務開始慢慢變 得商品化,將社福機構與私營企業放於一個鬥獸 場中競爭,使服務在一個全商業模式運作,卻將 人的價值放下,這絕對不是一個健康的社福生 態。

#### 提升安老服務員質素地位

其實政府與其在未來打算花8億元推行長者院舍住宿照顧服務券,何不將款項集中改善和提升現時安老業界的人手,目前的起居照顧員和保健員良莠不齊,就算後者有社署的註册制度,可是因爲人職者學歷不高、訓練期短、人工低微,以至難於吸引有質素的員工人職。政府在去年已透過資歷架構完成《安老服務業能力標準說明》,筆者曾有幸參與其中一個部分,清楚明白此舉硝實爲業界提供了一個架構和標準,更希望藉此爲業界提供了一個架構和標準,更希望藉此爲業界注入新血,既然宏圖已在,政府應該着力裁升安老服務業員工質紊和地位,以令行業的生態改善。

悲劇過後,我們必須重新審視社福服務的市場 化,未來日子,我們期望社福和學術界,應該 長者一起發聲,以維護長者應有雄浩。

作者是註冊計了

The Higher Diploma in Health and Community Care for the Elderly gave rise to a building block of technically oriented subjects in nursing skills, rehabilitation practice and social sciences methods and implementations in facilitating "ageng in place".

馮志豪(2015年5月30日)。護老政策不能迷信市場。明報。2015年5月30日,取自

https://news.mingpao.com/pns/%E9%A6%AE%E5%BF%97%E8%B1%AA%EF%B9%95%E8%AD%B7%E8%80%81%E6%94%BF%E7%AD%96%E4%B8%8D%E8%83%BD%E8%BF%B7%E4%BF%A1%E5%B8%82%E5%A0%B4/web tc/article/20150530/s00012/1432922065778





Programme design is shifted from institutional care to community care services in order to address emerging market needs and learning resources support. Curriculum design takes on new and interactive relationships of the following factors and issues:



Photo source: Caritas Elderly Services





- (1) With community care comprising mainly health and community care services, potential service needs are multifaceted, individualized and in a primarily social oriented context (Gendron, et al 2017, Al-Mazrooa 2011).
- (2) Graduates of this vocational education programme are expected to have the competencies to demonstrate practical skills in elderly care services and work independently with high sensitivity to the continuum of care in a broad client-based environment (Mulder et al 2007, Chaya et al 2008, cf. Zickafoose et al 2011).
- (3) The quality of care and the managed care contexts in elderly care services require embedding experiential learning in the practical training of students that goes beyond job shadowing to include action research for the design and implementation of individuals' care plans in a wellness perspective (Coogle et al 2005, Loffler et al 2018, Kwan 2007).





The programme is subsequently developed in a structure of mutually reinforcing the PILOs specifying graduates' abilities to design and implement client-oriented caring plans based on the service needs and communicate effectively in an ethically and responsibly in the planning and delivery of elderly care services.





#### A SIX-STEP APPROACH



Kern D et al., (2009). The Six-Step Approach to Curriculum Development. Baltimore, Md.: Johns Hopkins University Press.





# Step 1: Need Identification

- Characterize the social problem
- Identify societal need
- Know what we need to do





# Step 2: Identify Learners

#### Know

- who our target learner is and
- what our target learner needs





# Step 3: Goals and Objectives

- Helps prioritize
- Direct the choice of curricular content
- Suggest what learning methods will be most effective
- Enable and direct evaluation
- Provides clear communication to learners, faculty, and stakeholders





# Step 4: Educational Strategies

- Identify the educational strategies by which the curricular objectives will be achieved. Involve both content and method.
- Use multiple educational methods
- Choose methods that are feasible





# Step 5: Implementation

- Identify Resources
  - Personnel, Time, Facilities, Funding
- Obtain Support
  - Internal vs. External
- Develop Administrative Mechanisms
- Anticipate and Address Barriers
- Develop a Plan for Introducing Curriculum





# Step 6: Evaluation

- Describe the plan to evaluate the effectiveness of the curriculum
- Closes the loop
- Provides information about continuous quality improvement



# Future







#### **Future**

#### 長者院舍輸入外勞非上策



助院舍輸入照顧員的確可解燃眉之 是長者罷了

護理員平均年齡是52.3歲,甚至有18% 紛紛情願轉行,造成人手緊張。 退休的高峰期。隨着人力需求上升, 招聘會吸引本地人人行,而目前政府 護理員的退休潮將對服務質素帶來很 已經推動 「青年護理服務啓航

#### 應全面檢視目前護理員情况

勞工計劃」輸入了近1400名外勞。可 校任教長者照顧的高級文憑課程期 是當中的質素參差,不少都是年齡稍 間,眼見不少畢業生都不太願意投身

勞工及福利局長羅 菲律賓接受護士和護理訓練的青年 或社會認同,致令青年人卻步。反賴 訪時表示,若在一切 便與長者進行日常溝通;最重要的是 經塑造成一個受人尊敬的行業 度輸入外勞護理員。 此,就算香港真的打算引入外勞,絕 照顧領域的專業,如居家照

預期有六成將能活到85歲或以上,四 着在2000年實施整筆過撥款的津貼制 齡長者將會大幅增加。雖然政府的安 作者總工會在2014年的調查指出,只 老服務是以「居家安老爲本、院舍照 有3.7%的受訪者表示機構是與政府薪 顧爲後援」爲原則,但無論在家或院 級表看齊,現時的護理員或起居照顧 繼續,政府應該一併連 舍安老,均有需要接受不同程度的護員的薪金只有萬多元,與最低工資相 計劃方案》一同審視

#### 青年人看不見就業前景

政府表示在輸入外勞前會舉行大型 去年不少私營院舍已經透過「補充 流失。這正和筆者以往在其他大專院

得可憐的工資水平。相對來說,一岸 均没有常設的晉升階梯,今事業成爲 之隔的澳門,長者院舍的外勞多是在「倔頭路」。而且其工作亦不受家人

致光接受《明報》專 人,更需要在到地後接受語言訓練以 人口老化的日本,其安老服務很早已 手法未能奏效時會適 他們的薪資是與本地員工看齊。因 具醫學或專家訓練的工種外,並設有

理。但社聯和業界的調查指出,目前 若。「海鮮價」與厭惡性工作令員工 例、資歷、待遇和長遠發展作長遠檢 視,以令安老服務的質素更佳,令長 者能夠真的安享晚年

藝術及人文學部主任、



impending changes With in government policies and industry demands for career development for opportunities elderly care professionals (Fung 2017), introduction of the programme should help in capitalizing on changes moving towards prototype and curriculum frameworks for the study (cf. Riegelman and Wilson 2016).





# Q&A

