

# The Training Gap: A Hidden Injustice in Dementia Care and How to Fix it (Wales)



**Alzheimer's  
Society**

It will take a society to beat dementia

# Contents

<b>1. Summary</b>	<b>3</b>
<b>2. Context</b>	<b>5</b>
<b>3. Key findings</b>	<b>6</b>
<b>4. Conclusion</b>	<b>9</b>
<b>5. Recommendations</b>	<b>9</b>
<b>Annex 1 – Methodology</b>	<b>10</b>
<b>References</b>	<b>11</b>

---

# 1. Summary

No one living with dementia should be cared for by someone without sufficient training to deliver high-quality care. Equally, no care worker should be expected to support someone with dementia without the right skills to do so. It is this vision which is behind our new report: **The Training Gap: A Hidden Injustice in Dementia Care and How to Fix It**. The report sets out a bold, achievable, and costed ambition: to ensure dementia training not only meets the right level, but translates into understanding, so care staff can turn what they learn into confident, skilled, and compassionate dementia care.

Commissioned by Alzheimer's Society and delivered by the Centre of Dementia Research at Leeds Beckett University in partnership with IFF Research, this new report provides the most detailed picture to date of the level, quality and impact of dementia training across adult social care. It assesses how current provision aligns with the [Good Work Framework](#), and how it shapes staff knowledge, attitudes and confidence. The findings are clear: **the training most staff receive today is unlikely to equip them to deliver consistent, high-quality person-centred care**. Urgent improvement is needed. We therefore recommend a new legal requirement for all social care providers to ensure all direct care staff working in older adults' care – and direct care staff working with people living with dementia in other settings – undertake best practice dementia training. This should include both homecare and care home staff. A summary of our methodology is included at Annex 1.

Our new report comes at a pivotal moment, with major reforms converging across adult social care in Wales: the new 10 year Dementia Strategy; the potential establishment of a Social Care Negotiating Body to negotiate Fair Pay Agreements; the development of a Pay and Progression framework; and the creation of the National Office for Care and Support as a foundation for a future National Care Service – all against the backdrop of the upcoming Senedd election. Collectively, these represent a significant opportunity to transform dementia care. Our report makes clear why high-quality dementia training is fundamental to delivering consistently better care. Implementing the recommendations in this report will be a critical step towards ensuring Wales has a workforce that truly meets the needs of people living with dementia, now and in the future.

The findings are clear: **the training most staff receive today is unlikely to equip them to deliver consistent, high-quality person-centred care.**



## 2. Context

### Dementia and social care

Dementia is one of the biggest social care challenges of our time. Best available modelling suggests around 70% of people in care homes in England aged 65+ have dementia,<sup>1</sup> and this is set to rise sharply. By 2040, the number of people living with dementia in Wales is set to increase to 70,000, up from 51,000 people today.<sup>2</sup> In the UK an estimated additional 106,000 people will be living in a residential or nursing home<sup>3</sup>, while the demand for domiciliary care is also expected to rise by 43%.<sup>4</sup>

Dementia is a complex condition that needs more than basic awareness training – and the sharp rise in prevalence and social care utilisation makes it even more essential that the workforce is equipped with the necessary skills to deliver best-practice dementia care. Care staff need the skills to respond to behaviours that challenge (including distress and agitation, often caused by unmet needs); deliver cognitively stimulating activities that benefit health and wellbeing; and understand how different types of dementia present.<sup>5</sup>

### Current state of dementia social care in Wales

Dementia social care in Wales is not consistently delivering for people living with dementia and their families. Access to support remains inconsistent, with only 36% of respondents to our lived experience survey saying they find social care easy to navigate in Wales.<sup>6</sup> And just 34% of people living with dementia who receive professional care in their own homes felt that all or most of their needs are being met.<sup>7</sup>

Care Inspectorate Wales' 2020 review<sup>8</sup> into care homes for people living with dementia found that care was often rushed, and while staff received dementia training, it did not always translate into person centred practice.

The Welsh Government's March 2025<sup>9</sup> evaluation of progress against the 2018 Dementia Action Plan further reinforces this picture. It was highlighted that only half of their survey respondents reported that their individual needs and preferences were being considered in care plans and support arrangements, with some practitioners stating their ability to provide the necessary person-centred support was being hindered by a lack of resources.

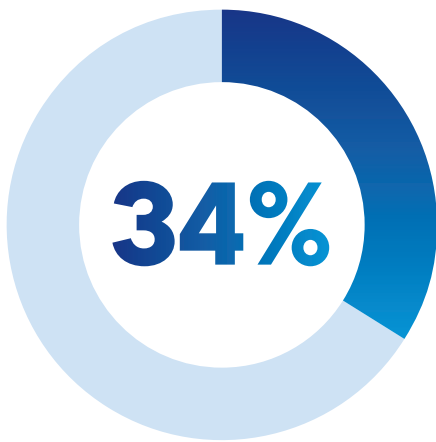


**By 2040, the number of people living with dementia in Wales is set to increase to**  
**70,000**



**Half of all training packages offer just one to two hours of training.**

**Up to a third**



**of staff who responded to our survey did not have the basic knowledge of dementia required to care for someone with dementia.**

## Benefits of dementia training

When dementia training is done well, evidence shows the impact is significant: Our 2024 report, [Because We're Human Too: why dementia training for care workers matters, and how to deliver it](#), identified what high-quality training looks like in practice, and its benefits. For people living with dementia and their families high-quality training can: improve quality of life; strengthen relationships; enable culturally competent care; provide a more ethical means of managing agitation; and reduce inappropriate use of antipsychotic medication.<sup>10</sup> Additionally, it boosts staff knowledge, confidence and job satisfaction, and crucially, can reduce staff turnover.<sup>11</sup> Benefits also go beyond social care, and include potential reductions to healthcare utilisation, because of fewer GP appointments and emergency hospital admissions.<sup>12</sup>

## 3. Key findings

### Summary

Our key finding is clear: whilst a significant number of care staff are receiving training at the appropriate level in the [Good Work Framework](#), training is too short and is not translating into sufficient staff knowledge or confidence. The current dementia training offer is dominated by:

- **E-learning**<sup>13</sup> – despite evidence showing that when used in isolation it delivers limited practical skills, is less valued by staff, and does not reliably equip them to provide safe, high-quality dementia care.<sup>14</sup>
- **Standalone sessions** – which offer insufficient opportunity for reflection or skill-building that makes for impactful implementation of dementia training.<sup>15</sup>
- **Short duration** – around half of training lasts only 1-2 hours, well below the evidence based eight hours for impactful dementia training.<sup>16</sup>
- **Very limited coaching, mentoring or supervision** – which are key elements of good practice.<sup>17</sup>

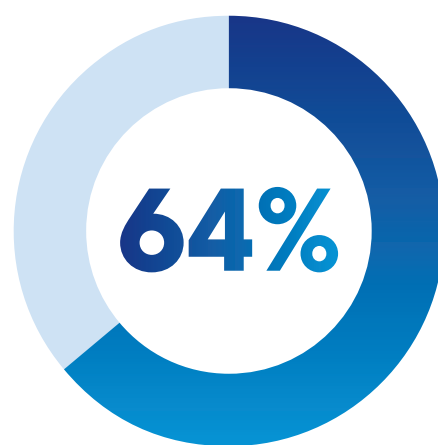
This is negatively impacting on staff knowledge and understanding of dementia – with Up to a third (34%) of staff who responded to our survey did not have the basic knowledge of dementia required to care for someone with dementia.

## What dementia training are staff currently undertaking in Wales?

- Despite 70% of training offered by providers being targeted at the skilled level, care staff most often report undertaking training at a level of dementia awareness, which is insufficient to support the delivery of high-quality person-centred care.
- 64% of care workers said that dementia training had been included as part of their induction – meaning over a third (36%) are likely to start caring for people with dementia with no dementia training at all.
- 57% of training packages our audit looked at were completed through e-learning, despite evidence showing this method is less positively received by staff and has reduced ability to provide them with the right knowledge and skills.
- 33% of training packages focused only on dementia awareness and communication.
- All eight of the Level 2 (skilled people) topics were covered by more than 67% of the packages.
- In contrast to the evidence-based minimum of eight hours<sup>18</sup> of dementia-specific training<sup>19</sup>, half of all training packages offer just one to two hours. Out of all the packages, only 20% met the evidence-based eight hours or more for impactful dementia training.<sup>20</sup>
- 40% of training was reported as being underpinned by evidence, but most providers struggled to articulate what this evidence was. For example, 13% of these said ‘research’ without expanding, one package (3%) cited the [Good Work Framework](#), and one package (3%) cited Social Care Wales.

## Impact on staff knowledge and understanding of dementia

- Up to a third (34%) of care staff we surveyed do not have the basic knowledge of dementia required to equip them to care for people with dementia (measured on the Dementia Knowledge Assessment Scale).<sup>21</sup>
- Only 58% reported feeling very competent in the care they are providing.
- But this is not due to a lack of willingness from the workforce – just under three quarters agreed they would like more dementia specific training, which demonstrates a clear appetite to build on existing awareness training.



**of care workers said that dementia training had been included as part of their induction.**



## 4. Conclusion

What's clear is that the current dementia training offer is falling short – and this shortfall is driving a hidden injustice at the heart of dementia care. Although many providers are delivering dementia training at the right level and including dementia specific content, this is too often not translating into increased staff knowledge and confidence. Urgent action is needed to improve dementia training – without this, we risk a workforce that is not only under-equipped to meet the needs of people living with dementia today, but also the rising demand and complexity of the future.

The momentum of current policy reforms must now be harnessed to level up dementia training and strengthen skills across the workforce, ensuring training translates into effective practice. Raising the standard of dementia training will help create a system that consistently delivers better outcomes, eases pressure on the NHS and social care, and supports a skilled, stable and compassionate workforce for the long term.

## 5. Recommendation

- To close the dementia training gap and address a key injustice at the heart of dementia care, we need a new legal requirement for all social care providers to ensure all direct care staff working in older adults' care – and direct care staff working with people living with dementia in other settings – undertake best practice dementia training. This should include both homecare and care home staff.
- This should be given effect by Welsh government through amendments to the relevant statutory guidance for care home and domiciliary support services issued under the [Regulation and Inspection of Social Care \(Wales\) Act 2016](#).

Best practice dementia training is defined in Annex 1 on page 10. Further recommendations and detail, including the cost of closing the dementia training gap, can be found in [our full report](#).

---

# Annex 1 – Methodology

To understand the quality and uptake of dementia training in Wales, we undertook:

- a provider audit, where care providers shared information on the training packages they currently use
- best practice case studies, where we visited two provider sites to observe training and interview staff
- a staff survey, where we asked staff about their experiences of dementia care and used an objective assessment tool to assess staff attitudes towards and knowledge of dementia (the Dementia Knowledge Assessment Scale).<sup>22</sup>

We assessed the quality of training against our evidence-based definition of best practice dementia training for direct care staff:

- **Content:** Aligning with the **Goodwork Framework**
  - **Duration:** At least eight hours<sup>23</sup>
  - **Delivery:** Meets the five key components for best practice training as outlined in the report **Because We're Human Too**: evidence informed training design and evaluation tools used; digital inclusivity; support and accessibility; strong leadership to ensure training impact is sustained; and include an interactive element with a facilitator (rather than being self-directed e-learning only).<sup>24</sup>
-

# References

- <sup>1</sup> CFAS II; Matthews FE, Arthur A, Barnes LE, et al, [A two-decade comparison of prevalence of dementia in individuals aged 65 years and older from three geographical areas of England: results of the cognitive function and ageing study I and II](#). The Lancet. 2013; 382 (9902): 1405-1412. There is no equivalent data available in Wales.
  - <sup>2</sup> Alzheimer's Society and Carnall Farrar (2024), [The economic impact of dementia: module 1 – annual costs of dementia](#).
  - <sup>3</sup> Ibid.
  - <sup>4</sup> Ibid.
  - <sup>5</sup> All Party Parliamentary Group on Dementia (2022), [Workforce Matters: Putting People Affected by Dementia at the Heart of Care](#).
  - <sup>6</sup> Alzheimer's Society and Walnut Unlimited (2025), [The Lived Experiences of Dementia](#). Wales (unpublished)
  - <sup>7</sup> Ibid.
  - <sup>8</sup> Care Inspectorate Wales (2020) [National review of care homes for people living with dementia](#).
  - <sup>9</sup> Welsh Government (2025), [Dementia action plan: progress update March 2025](#).
  - <sup>10</sup> Alzheimer's Society (2024), [Because we're human too: why dementia training for care workers matters, and how to deliver it](#).
  - <sup>11</sup> Ibid.
  - <sup>12</sup> Ibid.
  - <sup>13</sup> E-learning here is defined as standalone e-learning completed individually, without live interaction or support.
  - <sup>14</sup> Surr, C. A., et al (2017), [Effective Dementia Education and Training for the Health and Social Care Workforce: A Systematic Review of the Literature](#). Review of Educational Research.
  - <sup>15</sup> Ibid.
  - <sup>16</sup> Ibid.
  - <sup>17</sup> Alzheimer's Society (2024), [Because we're human too: why dementia training for care workers matters, and how to deliver it](#).
  - <sup>18</sup> Surr, C. A., et al (2017), [Effective Dementia Education and Training for the Health and Social Care Workforce: A Systematic Review of the Literature](#). Review of Educational Research.
  - <sup>19</sup> Dementia specific training is defined as in-depth training which focuses only on dementia and isn't more general training which includes a part on dementia.
  - <sup>20</sup> Surr, C. A., et al (2017), [Effective Dementia Education and Training for the Health and Social Care Workforce: A Systematic Review of the Literature](#). Review of Educational Research.
  - <sup>21</sup> Annear MJ, Toye C, Elliott KJ, McInerney F, Eccleston C, Robinson A. [Dementia knowledge assessment scale \(DKAS\): confirmatory factor analysis and comparative subscale scores among an international cohort \(1471-2318\)](#).
  - <sup>22</sup> Annear MJ, Toye C, Elliott KJ, McInerney F, Eccleston C, Robinson A. [Dementia knowledge assessment scale \(DKAS\): confirmatory factor analysis and comparative subscale scores among an international cohort. \(1471-2318 \(Electronic\)](#)
  - <sup>23</sup> Surr, C. A., et al. (2017), [Effective Dementia Education and Training for the Health and Social Care Workforce: A Systematic Review of the Literature](#). Review of Educational Research. This systematic review found that a common feature of the most efficacious training was that it lasted at least 8 hours, with training lasting more than 8 hours being more likely to lead to positive outcomes for staff (job satisfaction and accomplishment, reduced stress or reduced exhaustion, burnout or health complaints).
  - <sup>24</sup> Alzheimer's Society (2024), [Because we're human too: why dementia training matters and how to deliver it](#).
-

At Alzheimer's Society, we bring people together to end the devastation of dementia. We give vital support to those who need it, fund groundbreaking research and campaign to make dementia the priority it should be. It will take a society to beat dementia.



**Alzheimer's  
Society**

It will take a society to beat dementia

Alzheimer's Society  
43-44 Crutched Friars  
London EC3N 2AE

**0330 333 0804**  
**[enquiries@alzheimers.org.uk](mailto:enquiries@alzheimers.org.uk)**  
**[alzheimers.org.uk](http://alzheimers.org.uk)**