

**Learning Uncut Episode 99**  
**Building Frontline Capability 5 Minutes at a Time – Lil Ryan**  
**and James Stack Hosted by Michelle Ockers**



**Michelle Ockers:**

Today's Learning Uncut story is an excellent example for those who are interested in using evidence informed approaches from learning science to improve the effectiveness of learning solutions in their organisation. I speak with Lil Ryan from Anglicare SA and James Stack from Obvious Choice about a learning solution that was developed and implemented for aged care workers to improve their confidence with supporting dementia care patients in residential aged care facilities. This particular approach is commendable for many reasons. Firstly, because of the calibre of the application of learning science, in particular space repetition and retrieval practice. And James takes us through an example of what this looks like in regard to the use of scenarios and responses to scenarios and the pathway people are taken through based on correct or incorrect answers. Check out the show notes. James shared his screen when he was explaining how this worked. So we've shared a short video as he walks through an example of what this looks like. It's also a fantastic example of well-considered well supported change management on behalf of Lil and her team at Anglicare. It was actually a big shift for this particular group of staff to use a mobile app for learning. It went away from using e-learning taking time out of their day, big chunks of time, and which is one of the key challenges for frontline workers. Of course, not just in aged care, but in other types of frontline support environments and move them on to an app with five minutes a day to create a daily learning habit and to build in that space repetition and retrieval practice that I spoke about, but Lil and her team ran it like a marketing campaign. So it's a really great example of what it can look like to take that campaign approach and use data to guide you to provide the right level of support to create engagement during the campaign. One of the things that James talks about quite a lot in this episode is building a continuous learning habit and replacing intensity with consistency. So there's much to look at much to think about adapting to your own organization in this particular Learning Uncut episode.

**Michelle Ockers:**

Welcome to Learning Uncut, Lil.

**Lil Ryan:**

Thank you, Michelle.

**Michelle Ockers:**

And James, it's lovely to be speaking with you again too.

**James Stack:**

It's good to be here, Michelle.

**Michelle Ockers:**

I know James, we haven't spoken on Learning Uncut before, but you and I have had several conversations over the years, and I'm really delighted to be able to bring listeners a story about the use of technology for the aged care sector today. And in particular, the Forget Me Not technology from Obvious Choice. Lil let's start with an introduction to your organization, Anglicare SA. Would you like to tell us a little bit about who you are and what you do?

**Lil Ryan:**

Sure, Michelle. I'll start with the organization first. Anglicare SA is an amazing organization.

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What we do is we support South Australians in need, and we've done that for over 150 years. Our team of employees, which is approximately 1,900 employees, and we've also got approximately 300 volunteers as well, and we work together to transform people's lives for the better. We do this through supporting individual, families, communities, and we reach thousands of people each year. We have a vision and our vision is to see justice, respect, and fullness of life for all, and we have a huge diverse range of programs. If you don't mind me just listing a few of our programs that we do?

#### **Michelle Ockers:**

Sure.

#### **Lil Ryan:**

We work in housing and homelessness, disability and mental health services, we work in aged care, that's residential aged care and community aged care. Foster care, emergency assistance, financial counselling and literacy, aboriginal services, children, youth and families, and that is all supported by our corporate services team. My role within the organization is I'm the senior manager of the People Business Partnering team. We're a team of 10 people and we take care of all the HR and the learning and development requirements for the organization. As I mentioned before, our business is so diverse so we've designated people business partners to each portfolio, so they can partner and understand what their requirements are, and in particular what we're talking about today is learning and development requirements and what's best suited to their people. That's a wrap of me and Anglicare SA.

#### **Michelle Ockers:**

Yeah, thank you. You have your business partnering team, do you then have a separate learning and development team as well, Lil?

#### **Lil Ryan:**

No. Basically the way we've worked it Michelle, is our business partners do HR and learning and development, but what we've got in the background is our learning and development advisor, as well as an administrator, and I also come through with some knowledge of learning and development as well.

#### **Michelle Ockers:**

Okay, and I guess with a relatively skinny L&D specialist team for a workforce of 1,900 plus 300 volunteers, you would be using external partners to support some of your needs, which is James, where Obvious Choice comes in. Would you like to tell us a little about Obvious Choice?

#### **James Stack:**

Sure thing, Michelle. Obvious Choice supports organizations, adopts micro-learning and campaign style learning. And that's usually in service of two things, firstly to build capability or secondly, to move business metrics. Our footprints is in the not-for-profit government and corporate space. We're pretty passionate about the work that we do in aged care, because we see there's a wonderful opportunity to use technology to support a continuous learning and development habit, that's enabled using app-based learning.

#### **Michelle Ockers:**

Thanks, James. You mentioned, we're talking about aged care today, Lil, and thank you for going through that pretty wide list of services and types of needs that Anglicare supports. If we talk about the aged care sector, would you like to tell us a little bit more about the sector

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from a workforce perspective? The kind of work, the kind of roles, the kind of people who are working in aged care for Anglicare?

#### **Lil Ryan:**

Certainly. Aged care takes up 1,000 of our employees, so it is half of our workforce space. There is a huge range of roles within aged care, anything from a senior manager who runs one of our aged care facilities, this is in particular with residential aged care. We've got registered nurses, enrolled nurses, we've got PCWs, which is a personal care worker, which is a majority of our workforce, but we also got hospitality people as well that work within cheffing or serving. That's within our residential aged care and within community aged care we have people that go out to people's homes and help them with cleaning, cooking, personal requirements, medication, all that kind of stuff so there's a huge range of people that work in those areas as well.

That's our workforce characteristics. I guess one of our challenges is people working in aged care and especially when we went through COVID with people being off sick, is sometimes we do have a shortage of staff that we have to cover, so that's one of our challenges there, but there's a huge range of people. People that I've engaged with in aged care are always those real salt of the earth people, they really are caring, hardworking, really love what they do, but obviously there's some challenges there as well.

#### **Michelle Ockers:**

Yeah. And I mean, my grandmother is in an aged care facility and I agree they are hard working. It's been a particularly challenging period of time in the sector with COVID, so I think it stands us well just of pause for a moment and recognize the hard work that's gone in, in the aged care sector, in keeping that part of our population as safe and well as possible over the past couple of years.

#### **Lil Ryan:**

Absolutely.

#### **Michelle Ockers:**

This particular workforce then, talk to us a little about some of the development needs and maybe the particular needs and the business challenge that brought you to Obvious Choice and the partnership with Obvious Choice.

#### **Lil Ryan:**

Sure. As most organizations do, they do employee opinion surveys, and we certainly do those as well, we aim to do one every six months and we trend our insights. From there we asked the workforce more questions of what they would like particular training on, and some of the PCWs, what was coming up a lot was dementia. That's only one wing of a residential aged care facility, but it is a sensitive area and people wanted to have more confidence in that area. Prior to 2021, when we worked with Obvious Choice on another solution, it was e-learning. That was a part of our professional and development training in aged care, is that you go on, do an e-learning module in dementia, but we found some challenges with getting people to have time to do that, so hence why we reached out to Obvious Choice to come up with another solution.

#### **Michelle Ockers:**

What were some of those challenges? Because there will be other sectors, not just aged care, but where you've got frontline workers, people who aren't sitting at desks, people who

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are providing customer service throughout the whole of their shift, so what challenges were you facing with the e-learning approach?

#### **Lil Ryan:**

Yeah, I think the two main challenges for us is the administrative challenges, the time for them to do it, and for us to roster people to have time to do it, because there are so many other conflicting priorities that people have in an aged care facility. And then the second one that was our biggest, is backfilling these staff and sometimes having to backfill them with agency staff, which can be quite a costly thing for an organization.

#### **Michelle Ockers:**

Absolutely. So you knew you were looking for a change, I think you mentioned you had worked with Obvious Choice before, so you had some idea of the approach. What led you to think, "Well, this could be a useful approach, to replace the e-learning approach for dementia care?"

#### **Lil Ryan:**

I was new to the organization when we looked at this. I'd only been in the organization for a few months, but people within my team had worked with Obvious Choice and so we thought, or I did, "Let's have a look at an option and let's engage with James, that..." His company was spoken very highly of, I hadn't worked with Obvious Choice in the past, and it just went from there.

#### **Michelle Ockers:**

Okay, thanks Lil. I don't know which of you takes this question. In terms of the objectives and scope of the solution, we know it was around improving people's confidence with dementia care, particularly the personal care workers by the sound of it, but potentially other parts of your workforce. When you laid out the needs, did the needs analysis and figured out here's the objective that we're trying to meet, what did that look like? What was the brief?

#### **Lil Ryan:**

You want to do that, James?

#### **James Stack:**

No, I'll let you go, Lil, and then I can jump in.

#### **Lil Ryan:**

You can add to it, yeah. I guess just reiterating what I said before is, e-learning, we couldn't always pull them off the floor, and finding time for them to do the training and to find a device for them to use as well. Because not everybody, especially in the aged care sector, is tech savvy, so they don't have a computer at home. They have to wait and see if we've got a computer at work that's free that they can use, so that was a challenge. When it came to classrooms, attendance issues was a challenge because things pop up on the day and it's no fault of their own. Things pop up, we're short staffed, we can't have XYZ go to training today because they've got to cover shifts, so we were up against that as well.

We knew that Obvious Choice had some new and contemporary ways that we could look at that because they were issues for us, and issues that we were being told from the senior managers of those worksites as well, because I never got the feeling that no one wanted to

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do training, it was the time issue. That was the main problem.

#### Michelle Ockers:

And wherever you ask that question around what gets in the way of learning, it's always the time issue, right? It comes up number one in all sorts of research across the industry. So anything that helps us to tackle the time issue so that people can engage with learning, is going to be useful. James, what else stood out about this brief, for you?

#### James Stack:

I think the issue of accessibility is a really important one to talk about. These people don't have access to a PC, easily, and the idea of delivering learning on a mobile phone was a really good fit for the aged care workforce. Also, the need was surfaced from the employees themselves, they wanted more dementia care training, but it was really important that we didn't just give them another e-learning module. We took the opportunity to examine, well, what could work really well for this workforce? And we used an evidence-based, scientific approach to the delivery of dementia care training.

With the app, Forget Me Not, it provides people with multiple repetitions to practice their dementia care knowledge, and it bakes in another couple of important theories around cognitive load. The idea that we were delivering drips of learning every day while you had a shift, rather than one big drop of learning once a month on dementia care. And that provided the workforce with the opportunity to practice delivering safe, quality dementia care, multiple times until they mastered the knowledge, so that was a big difference between the two approaches, which we're obviously very passionate and strong advocates for. We want to get not just the aged care workforce, but frontline workers the mastery of knowledge, and so mastery looks like multiple repetitions where you demonstrate you have that knowledge.

#### Michelle Ockers:

There's a good body of evidence in learning science around retrieval practice and spaced repetition, and we can provide some resources, link to some resources for anyone who's interested in exploring that a little further, who may not be familiar with that body of evidence. We'll pop that into the show notes. Can we maybe talk through-

#### Lil Ryan:

Michelle can I just-

#### Michelle Ockers:

Yeah, go ahead Lil.

#### Lil Ryan:

... mention something that was a jump for us as an organization where I think James and his team really helped us. Is that jump from the normal classroom, e-learning to something that could be on your mobile phone was really scary for us, because of the fact that we had fears that people weren't going to be engaged with that because there was issues with people using technology within our workforce. That was a really scary step for us to take, and it really needed to be explained to us of what it could look like and what we needed to do, which we'll move on to further in the podcast. But I just wanted to point out there that, that can be a really scary leap for an organization and we certainly felt it, but we felt really supported. And really James and his team took the time to explain to us exactly the benefits

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of that, more so than the scariness of it.

#### Michelle Ockers:

Yeah, yeah. I think it's easy, I mean and I was just going to brush straight past that, right? It's easy for those of us who are using all sorts of tech all the time, to overlook some of those issues. And I would like to come back and talk about change management with you Lil, and how you supported your staff through that. In terms of design considerations, you mentioned accessibility, James, and we haven't talked about things like English as a second language, or whether there's any other, if we think about Accessibility with a capital A, issues. Because there's a lot of discussion now, more so than three or four years ago, about accessibility across learning and development and what that means. Were there other accessibility issues that you needed to take into account with design, James?

#### James Stack:

We designed with the frontline, so the actual experience was eight key topics on dementia care, and we were very cognizant of English as a second language. So one of the things we baked into the technology is a readability measure using the Gunning Fog Index, and we typically aim for year seven, year eight, and we measure every piece of text that goes into the learning experience, to ensure that it hits that Gunning Fog Index or GFI. We also made extensive use of audio and animation as part of the scenarios. Now what that let English as a second language workforce do was listen to those audio and animation snippets again and again. When we did a subsequent piece of qualitative research, one of the frontline workers for Anglicare SA told us, "I'm using it to improve my English and also to pick up the nuances of dealing with an Australian consumer of aged care," because there is cultural differences, and so we were able to use that as an opportunity in the learning experience as well.

#### Lil Ryan:

I think that's really important as well, just to point out that our aged care force, around 50% of them, English would be their second language. So we really had to take that into account.

#### Michelle Ockers:

Absolutely. You mentioned cultural differences as well there, or a cultural awareness working with, well, I guess your client base is multicultural as well, right Lil? We can't make assumptions about that.

#### Lil Ryan:

Absolutely.

#### Michelle Ockers:

But it just struck me that James, potentially in the way you've built scenarios into the app, it's not just around dementia care and caring for people with dementia, you've also got the opportunity to layer in other aspects of who people are supporting and what that might mean, including cultural differences.

#### James Stack:

Yeah. I mean it was really important that the animation and the audio in there reflected those cultural differences also, that it wasn't all Anglo-Saxon workers or consumers of aged care that featured in those scenarios.

#### Michelle Ockers:

Yeah. Yep. We talked a bit about design considerations and I'll include a link to some

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information on that Gunning Fog Index in the show notes, if people want to take a look at that. Can we maybe just walk through the user experience? And again, I don't mind which of you picks this up. Maybe Lil if you talk through the user experience, and then James can come in and layer in, "Well, here's what we were trying to do, and here's the learning science behind that and what that meant." Potentially even pick one of the topics or one of the scenarios, what might it look like, using the app for one of your workers?

#### James Stack:

Once staff were onboarded to the app, and I must call out Anglicare SA here because they did an amazing job of treating this like a campaign and getting out there, and supporting the frontline workforce get on board with the app. But the experience day to day was, I got a nudge or a notification to say, I've got some scenarios that I need to revisit on dementia care. And those scenarios usually took the form of a customer scenario. We made use of audio, animation and imagery to make it a multimodal learning experience, and usually the frontline personal care worker was asked to make a choice, a decision on what they would do or say in that situation. When they did, they got immediate feedback. Now that feedback was differentiated, whether I got it right or wrong, which enabled us to make this a highly adaptive personalized learning experience.

There was some other key things baked into the learning experience as well. Between the submissions to the scenarios, my answer options and whether I got it right or wrong, there was this thing called conversational banter. Now that let us motivate, encourage and engage the workforce in the learning experience. We told them, "You're just one attempt away from mastering this knowledge around agitation." That was a real win in terms of sustained learner engagement and it was something that we could customize for Anglicare SA's context as well that reinforced values and behaviours that they wanted to see in their organization.

What really differentiates the learning experience, though, is this concept of knowledge mastery. With an e-learning module, you sit and do it in a 30-minute setting, and you're done, you've completed your annual dementia care e-learning refresher. What happens when you engage in a micro-learning space repetition campaign is you got to demonstrate over multiple practice retrieval events, that you actually have mastered the knowledge when it comes to agitation or delusions, or risk of wandering, all of those topics that we covered up.

What that actually looked like for a frontline worker was that every day when I was rostered on at work, I got a couple of questions pushed to my mobile phone. And if I got those... Let's just pick a question, if I got question one right on delusions, using the spacing and testing effect, it was four days before I saw a question again on delusions. And because we didn't want to have pattern recognition happen, we actually created a variant scenario. Now this was really important, because it's further proof to the organization that yes, Lil Ryan is mastering knowledge when it comes to delusions.

When Lil gets it right on the second time, the fifth day of the month, Lil is called you're only one more attempt away from mastering knowledge around delusions, and then it comes to her final time, seven days later. And if she gets it right on her third attempt, we've considered that knowledge mastered. When you get it wrong, if you get scenarios wrong, the spacing interval shrinks and that's about bridging knowledge gaps.

What was really nice about the user experience is that it let Anglicare SA pinpoint star

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performers or people really knowledgeable and proficient in dementia care. And I mean, you know yourself Michelle, not all learning is digital, there's opportunities to sponsor some of that offline learning. How could we actually set up some of those people who demonstrated high levels of proficiency and accuracy, as peer coaches within the care workforce? And how also could we use the data and the insights in the analytics to pinpoint coaching opportunities for those who were perhaps struggling on their pathway to mastery?

When folk actually did master the space repetition campaign, we left it on their mobile phone. What that meant was that they could revisit that content again and again, and look at a scenario on aggression or delusions, or whatever topic they were most interested in. So maintaining fingertip access to knowledge was really important to us as part of the learning experience too. And the reward for mastery was access ongoing, to the content.

#### **Michelle Ockers:**

Great. Now, James, I don't normally share video with podcast episodes, but with your permission I'd like to grab a snippet of the... Just an extract, because I think particularly when you were talking about the phasing and the number of days between repetition from correct and incorrect responses, I think it would be really useful if anyone wants to see that little video segment where you've just shared your screen with us as you've talked that through, if that's okay?

#### **James Stack:**

Yeah, that's no problem at all, Michelle. I mean, it's really important that people recognize that this moves organizational learning away from a once and done approach for critical job role knowledge, to let's get people to mastery of job role knowledge, by giving them lots of opportunity to practice in a fail-safe environment. And then we can adapt the learning based on knowledge gaps, or identify high performers like I said, who can be set up as peer-to-peer coaches in a workforce setting.

#### **Michelle Ockers:**

Yeah. In terms of shaping the scenarios, Lil, James mentioned that that was done with the staff. Do you want to talk a little more about how you and the staff at Anglicare worked with Obvious Choice on developing the scenarios and the solution?

#### **Lil Ryan:**

Absolutely. It was really important to us that our staff were the subject matter experts because we wanted to make the scenarios as real as possible, and what people on the floor do go through. So we engaged with a couple of registered nurses that gave their time, and they worked with my learning and development team, as well as the account manager, Rebecca, I believe from Obvious Choice, we all worked together to come up with the questions and the scenarios. But for me, the most important thing, that it was as real as possible to what our staff go through on the floor on a daily basis.

#### **Michelle Ockers:**

How did you test those scenarios to make sure that they were landing?

#### **Lil Ryan:**

I guess as a learning and development team, we put our faith in the registered nurses, and we put some of the questions and scenarios across to the senior managers as well, who managed those sites, to make sure that the content was correct. But one in particular, of our registered nurses, was quite highly regarded in the organization and quite senior, so we had

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a lot of confidence in them as well.

#### Michelle Ockers:

Yeah.

#### James Stack:

If I can also just pick up on that, Michelle? The questions themselves, the scenarios themselves go through a hundred-point quality checklist as part of peer review and quality control processes at our end. So really cognizant of the facts that all the scenarios need to map closely back to the learning outcomes that were established at the outset of the project with the Anglicare SA subject matter experts.

#### Michelle Ockers:

Thanks James, that's helpful to hear that there's that QA process at your end as well. In terms of change and supporting people with adoption Lil, I think now's probably a good time now that we've got our heads around the app, how it works, what the content looks like, the scenario-based learning. What were the key challenges with take up, and how did you support staff to get them comfortable with using the app?

#### Lil Ryan:

Sure Michelle. I think James mentioned before that it was really important, I guess one of the things that we noted very early on is this is a big change for everybody, so we needed to look at it more like a marketing campaign than a learning and development campaign. So we engaged with our internal comms team to come up with how we could roll that out to the aged care workers. We started off with a video from our executive general manager of aged care, and we started that quite early on, so that people would start to talk about it. They would see these videos and be aware that something was coming up that's really exciting. We did put a communication plan together as well. And what we did, and this was what our team did, is we went out to the sites and put up balloons and posters and that and marketed the launch date of when this was going to start. My team would go out there and talk to people if they had any questions.

That was all prior to the launch date, so everyone was really talking about it, going, "Oh, you can do this learning on your mobile phone. It starts on..." I can't remember the date, James, but say the 1st of February. So there was a bit of hype about it and I think that was the real crucial part that we did, that we marketed it out to everybody and we looked at it as a marketing campaign. After the launch day, what was important for us to do is to revisit sites, we've got six residential aged care sites, and go out and give people an opportunity to ask questions, because it's very easy to use. We had dot points, we left leaflets on dot points on how you log into the app. But there's some people that just want someone to do it for them. There's people that are interested and they really are excited about it, but they're so scared to put it on their phone and how to do it.

So we did spend the time to go out and say, "We're going to be there between 12:00 and 1:00 on a Wednesday, come and speak to us, and we'll log you onto the app." That was really helpful for us as well, because what we could do is confront their fears head on and go, "Look, I'll do it for you. It's actually going to be easy and you get notifications that come up on your phone." That was the way that we approached it, and I think that us putting that change communication plan and almost marketing campaign in place, is what enabled us to

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be successful, I think. This was a very successful campaign.

#### Michelle Ockers:

I think that handholding, that level of support to get people actually onto the app, is a really smart idea as well. James mentioned peer coaching. Have you supplemented the app with any level of coaching or peer to peer support, Lil?

#### Lil Ryan:

I think that we've always had that there, but I guess this encourages it a little bit more, yeah.

#### Michelle Ockers:

Yeah. Yeah. Just tell me a bit more about that, in what way do you think it encourages that?

#### Lil Ryan:

Well, because both of the individuals are on the app, so they have that common ground, going, "Okay well, this is the scenario. What did the app say about it?" Then you can talk about it with each other. We don't call it peer to peer, we call it a buddy system, where you have a buddy with you that can talk you through things. Especially if you're new into aged care, because some of the things that you come across in aged care, especially in the dementia wing, can be quite confronting. So having that buddy system, and obviously having that app that you both are familiar with, that you can refer to. And if someone that you're with hasn't downloaded the app, they want to now, because you're talking about things that you've learned in it.

#### Michelle Ockers:

Absolutely.

#### James Stack:

Because the app uses a chat user interface or a conversational UI, Michelle, we can with the conversational banter to encourage that peer to peer or buddying up. So say you get a scenario wrong a couple of times on agitation, on that second incorrect attempt, you can go, "Look, you seem to be strongly a little bit with this one, maybe the next time you see this question, why don't you find a buddy to answer it with?" That's okay that we're actually having conversations with our peers to go, "What would you have done in this agitation event with a consumer of aged care services?"

#### Lil Ryan:

Yeah. Good point James.

#### Michelle Ockers:

Tell me a bit more about how that conversational banter works. Is that all pre-programmed or pre-recorded, and the app knows when to serve up what? Is there a level of AI in there? How does that hang together?

#### James Stack:

There is a level of artificial intelligence in there. Every time I get something right, the banter adjusts, because it knows I'm progressing closer to mastery, and similarly, when I get things wrong. It can say to you on the second incorrect attempt, like I said, "Maybe seek the help of a peer the next time you see this question, or right now and have a chat about that." There is also the opportunity for clients to put their own custom banter in there, and that's an opportunity to reinforce values or behaviours that you want to see, as a client. I mean, each

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day that you log in, it's personalized and it says, "Welcome back, Michelle. Keep going, you're just a few days away from mastering this," because engagement is really, really important.

And just to pick up on something, I think that Anglicare SA did exceptionally well, is they moved this dementia care training program away from a one-off learning event towards a campaign, and Lil used the word marketing campaign, and it really was like that. They didn't just deploy and forget about it, they made sure that there was support on the ground to get people to adopt this new way of learning, which they had fantastic adoption for a non-mandatory learning experience.

#### Lil Ryan:

Yeah, that's a good point, James. I don't think we've mentioned before that we decided that this was a non-mandatory training. It wasn't a mandatory training, it was up to you if you wanted to take it up or not.

#### Michelle Ockers:

I think one of the pieces of material, James, that you shared with me, mentioned a 64% adoption rate, Lil?

#### Lil Ryan:

Correct.

#### Michelle Ockers:

For something that his non-mandatory training, which is a really good level of engagement.

#### Lil Ryan:

Amazing, really just fantastic. It was not what we expected at all. We sometimes really struggle to get people to do mandatory training, let alone something that's non mandatory to have 64% adoption rate, that was amazing. We were really, really happy with that.

#### Michelle Ockers:

What did you...go ahead James.

#### James Stack:

It's bit like any piece of learning Michelle, or learning tech, it needs to be marketed. I mean, we can't just push it out into the business and miraculously hope that it will have widespread adoption, and that's, I think the momentum that Anglicare SA built. And we also had weekly campaign management meetings, we treated it as a campaign. We looked at the analytics on a weekly basis to pinpoint areas that there might've been lower levels of engagement, and to recognize people who were thriving and mastering in the learning experience.

#### Michelle Ockers:

What did you do with those observations? Where you saw either people who were really well engaged and thriving, or alternately areas where perhaps the engagement wasn't as high as it needed to be? What actions did you take as a result of that?

#### Lil Ryan:

I think that we commended... Correct me if I'm wrong. I think we gave people vouchers who were the first five to master it, something like that. Sorry, it's been a couple of years, but I

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think we actually gave them a voucher to thank them. And as for the people that were struggling, it was something that we would just keep encouraging people on. At launch, we were on site once a week, and then we started to take our resources out and get other people, their peers, to help them, because sometimes people are more readily listening to their peers than perhaps someone coming from corporate services into the residential aged care. Yeah, I don't really want to add anything, James, I might've missed some things there.

#### **James Stack:**

I think the recognition was really important. I am passionate about a continuous learning habit and I was really impressed by these frontline carers, who demonstrated a continuous learning habit. I did a handwritten note to the first five who mastered and popped a little voucher in there, just to say, "What you're doing is very noble." We struggle often in corporate, white-collar settings to get people to build a continuous learning habit, and here was this workforce who are overstretched dealing with COVID but taking on a new way of learning and actually thriving with it. It was really important that we called that out and recognized that as well.

#### **Michelle Ockers:**

Yeah.

#### **Lil Ryan:**

Yeah.

#### **Michelle Ockers:**

Yeah. I know that you were awarded an ARTD, Australian Institute of Training and Development Excellence award for use of technology, but there's a lot that went on around adoption, engagement, it wasn't just around the particular technology. And of course, tech is never a silver bullet, it always needs lots of careful thought around what are we trying to do with the technology and how are we supporting it? There was a lot to commend in the way you handled the change approach, the campaign approach, that things aren't set and forget with real learning being applied in the workplace as well.

In terms of the outcomes you were looking for, you obviously got great engagement, you said the staff had requested this because they wanted to build more confidence around dementia. What feedback have you had or what indicators are there that that has happened, and any other actual impacts on quality of service or anything that's happening back in the workplace as a result of this learning solution?

#### **Lil Ryan:**

I think definitely the confidence of the staff in the dementia wing has been apparent. I think that also staff are very motivated with the fact that they could do this in their own time. You can do the burst of learning when you're ready, you can do it on your way home on the bus, you can wait till seven o'clock at night, once you've fed the kids and you're sitting on the couch, you can do it then. There's no restrictions on when you have to do it, and I think that, with all other forms of learning, whether e-learning or classroom learning, you give them time restraints. You go, "You have to do it at 10 o'clock in the morning, because that's when you need to do it." This was a lot of freedom, and I think that the main part for me is the confidence. James, did you have a story where someone contacted you and said that they're still using the techniques that they learned? Was that something that you wanted to

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mention?

#### **James Stack:**

Yeah, we did a subsequent evaluation of will micro-learning and space repetition improve the educational outcomes in the aged care sector. And one of the frontline carers said, "You know, I have changed my behaviours in terms of saying no to someone who's displaying dementia behaviours of concern." They're using the learning to pivot their approach, to be much more human centred in their response, I guess. And that's no doubt due to the fact that they've actually had multiple repetitions to master that knowledge, so they can rely on their memory muscle to go, "No, you don't say no when they're agitated. The first thing you do is to try and create distractions or make them feel comfortable as a consumer of aged care services." That's a huge win, that behavioural change stuff where the frontline themselves taught us that in subsequent qualitative research.

#### **Michelle Ockers:**

Yeah, and hence the value of that retrieval practice, right? To embed, ingrain over time. Lil mentioned that it's possible for staff, they could be deciding to look at the app and do a little five-minute burst after dinner or on the bus, or anywhere at the time of their choice. Did you take a look at the data as to when people were actually accessing and using the app, James? Can you give us any insight into the patterns of usage?

#### **James Stack:**

Yeah, we did. What we found was about 50% of the staff that were doing the learning, weren't fitting it in at work, which we were really pleased about. And then the other half were doing it on the way home on the bus, so there was that 50/50 split in terms of when people actually consumed the five minutes of learning, each day.

#### **Michelle Ockers:**

It's not a huge imposition, right? Five minutes a day?

#### **Lil Ryan:**

No, and I think some people were doing it on their lunch breaks or dinner breaks, during their shift as well.

#### **Michelle Ockers:**

Yeah, excellent. Is there anything else we haven't talked about that you think was critical to the success of this initiative?

#### **James Stack:**

No, I think we have. I think Anglicare SA, they really treated it like a campaign, Michelle. For me, that was the silver bullet. To change learning culture, they had to run it as a marketing campaign and they did that really, really well. We treated it as a campaign just like marketers would look at analytics every seven days, we did that and then were able to pivot at times, when needed. What we've also learned from the rollout of this, because it wasn't backed on to a face-to-face classroom training event or an e-learning module, in subsequent implementations of Forget Me Not, we do try and launch it at the back end of a classroom or a virtual classroom training event, there's very little classroom training happening these days. But that's where we try and launch it because that does help with getting people on board.

Four out of five people, Michelle, who had learned this way at Anglicare SA, and this was

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replicated in a subsequent workforce study, they prefer to learn for five minutes a day, than the big drops, infrequently. And Simon Sinek talks about, we need to replace intensity with consistency, and this is a consistent approach to building capability, five minutes every day until you get to mastery, I just love his thinking, he has this metaphor that's wonderful. He talks about leadership development and he says, "We don't have healthy teeth and gums by going to the dentist and getting them cleaned twice a year. We have healthy teeth and gums because hopefully we brush them and floss them every single day. And it's the habit of every single day that actually leads to really solid leadership behaviours." And similarly with learning, this idea that we can replace intensity with a consistent approach to professional development.

#### Michelle Ockers:

Absolutely. We've had one other episode where we talked about nudge-based approaches to learning, and to your point, James, it's quite flexible as to whether you deliver the whole program with the nudges through a micro-learning app. Whether you do it before people come together and then it's all about the application together, whether you do it on the back end, so it's a very flexible approach. I love that it's grounded in really solid learning science as well, and that we support people to apply and adopt new habits through approaches like these. I'm going to get some tips from both of you. I might start with you James, for others who'd like to get started or do more with, I guess micro-learning for frontline staff, if we can call it that, or if you want to frame it in a different way? Nudges or however you want to frame it up, but tips for others who want to get started with a similar approach, not just in aged care, but I guess for any frontline staff in particular?

#### James Stack:

I think tip number one, is to treat it like a campaign, to recognize that this is a cultural change, and for the cultural change to be successful, take some guidance from marketing and run a launch event, run weekly activities. And up skill leaders as well, get them to think about their role in the whole learning experience also. Then what we've learned on another government implementation, Michelle, is actually we can use to this micro-learning approach to be much more targeted with our coaching and our supervision for frontline workers, because we use the analytics and the insights to go, "Actually, we don't need to send our competency assessors and trainers out to every single training station on the network. We just send them where we have evident gaps in knowledge and skill." That's pretty powerful as well. We're all doing more with less and targeting our coaching and supervision to those that need it most, is really powerful.

#### Michelle Ockers:

Thank you. Lil, what tips would you have for others who perhaps want to take a workforce through this kind of transition to adopt a new way of learning?

#### Lil Ryan:

I think my first thing is, don't be afraid of new initiatives. Have a look at all the information and don't be led by fear, be led by opportunity. Just to reiterate what James said, I think that you need to look at it as a marketing project, and you also need to have the change plan behind it because it is changing people's frame of mind of how they look at learning. And creating that easy, convenient, accessible platform that it is there and we can do it and it is possible, so that would probably be my tips for people that want to look into it.

#### James Stack:

Can I add a second tip that's really, really important? I think it's important to encourage the workforce and tell them that failure is a good thing. And by God, it's okay to fail in the app because the app will look to close and bridge your knowledge gaps,

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much better to do it in a failsafe learning environment than in front of a customer. So don't be disheartened or discouraged when you get things wrong, there's wonderful opportunities from learning from failure. That's a really important message for organizations to take to the workforce, because I think we're all a bit battered by multiple choice quizzes from our days of formal study, but also at the back end of an e-learning quiz. I mean, the messaging around that is really, really important.

#### **Michelle Ockers:**

Well, and the way it's handled is quite different, right? In terms of what is done and how the feedback is given, and the opportunity people get to practice again. And it's almost not even... I struggle with telling people that it's okay to learn from failing, because the word failing is still in there, right? But learning from practice, the opportunity to have another attempt at something in a safe environment created by the app, I think there's opportunity to shift the conversation.

#### **James Stack:**

Yeah. Much better, learn from practice.

#### **Michelle Ockers:**

Yes. Yes.

#### **James Stack:**

Yeah. Yeah, yeah.

#### **Michelle Ockers:**

Yeah. Thank you both, Lil and James, for coming on and sharing that experience. I think there's lots of practical takeouts for our listeners. If anybody wants to follow up and get in touch with either of you, we'll have your LinkedIn profiles on the show notes as per usual. I think there's some really good resources to share for people to dig into this. I'd just encourage all of our listeners to really dig into the learning science. There's not that many tried, tested, proven approaches that really make a difference to learning effectiveness, and I think this approach with the spaced retrieval, the practice, super powerful and strongly evident. Make sure you're familiar with and thinking through why are we doing things in a certain way and what is the learning science underneath that? Thanks so much for the contribution to lifting practice everywhere with sharing this story, James and Lil.

#### **James Stack:**

Yeah, no worries as well. And the final, final thing, and I know I keep thinking of final things to say. What's also baked into the app, Michelle, is self-determination theory, so the idea that if we offer people choice, confidence and competence, we will make a measurable difference to the outcomes of learning in organizations. But we've steered away from gamification with this app, we're not fans of gamification, we're fans of behavioural economics and self-determination theory, to treat these people as adults and to recognize important things like mastery of knowledge.

#### **Michelle Ockers:**

Thank you very much. And I'm going to close it off there in case you think of one more thing, James.

#### **Lil Ryan:**

Thanks Michelle.

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**Michelle Ockers:**

Thanks so much. Bye.

**James Stack:**

See you, now. Bye.

**Lil Ryan:**

Bye.

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### About Learning Uncut

Learning Uncut are learning and development consultants that work with learning teams and/or business leaders to accelerate learning transformation. We specialise in supporting organisations to create or update their learning strategy, enhance their learning team's capabilities, align learning to business value, and implement modern learning approaches.

We are highly collaborative and pragmatic. We partner with organisations to align learning to their business needs, unleash continuous learning, and build capability to help them thrive.

Learn more about us [at our website](#).

### About your host, Michelle Ockers



Michelle is the founder of Learning Uncut. She is an experienced, pragmatic organisational learning strategist, L&D capability builder and modern workplace learning practitioner. She also delivers keynotes, workshops and webinars for learning and broader professional or workforce groups at both public and in-house events.

Michelle received the following prestigious industry awards in 2019:

- Australian Institute of Training and Development Dr Alastair Rylatt Award for L&D *Professional of the Year – for outstanding contribution to the practice of learning and development*
- Internet Time Alliance Jay Cross Memorial Award – *for outstanding contribution to the field of informal learning*



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