

# RESIDENTIAL CHILD CARE QUALIFICATIONS AUDIT

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None of these were easy tasks. In some units, forms were lost or visits cancelled. As with any self-completion form, the answers were not always easy to understand or even read. In spite of all the difficulties, the team remained committed and cheerful. I would like to thank everyone involved very much for their patience and hard work. I would also like to thank the organisations in Scotland which provide residential child care, for allowing us to visit their units and schools, and the staff in the units and schools who co-operated readily with the process. Responsibility for the end product, of course, rests with SIRCC, but I hope that they will feel satisfied that we have done justice to their efforts.

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April 2002

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# **1. INTRODUCTION**

The Residential Child Care Qualifications Audit was commissioned from the Scottish Institute for Residential Child Care by the Scottish Executive. It was one of the objectives outlined in the "Invitation to apply for a grant for the education and training of residential child care workers in Scotland Initiative"<sup>1</sup> and was intended to provide essential information for the Scottish Social Services Council as it develops its qualifications framework, and also, more widely, as a published document for residential child care providers.

Whilst the Scottish Executive publishes statistics on the qualifications of workers employed by local authority social work departments, there are no comparable statistics for residential workers employed by the voluntary and private sectors, nor for residential workers employed in residential schools by education departments. The statistics which are published by the Scottish Executive are less detailed than those we have produced. In particular, we hoped that by finding out about the general education level of residential child care workers likely to be deemed unqualified, a clearer picture would emerge of potential capacity to achieve qualifications.

The audit started in October 2000 when letters were sent to 74 organisations in Scotland which provide approximately 220 residential establishments (see Appendix 1 for list of the organisations), asking their permission to visit these establishments and outlining the purposes of the visits. By October 2001, 241 visits had been completed (some schools are divided into a number of living units – where this was the case, a visit was planned to each unit) and 22 remained outstanding. This report is based on information concerning 2,971 residential child care workers' qualifications, or lack of them, collected from those visits.

This report outlines the level and range of the qualifications found and the very major challenges for achieving a fully qualified workforce posed by them; some of the implications of the findings; some of the wider considerations of which account needs to be taken if a strategy for achieving qualifications is to be successful; some of the unknown, and in some cases, unknowable, factors which will complicate planning and lead to a need for flexibility and adaptability; proposals for a qualifications framework which we consider is the minimum needed if the quality of care for looked after young people is to be improved; and some suggestions for how a fully qualified work force might be achieved.

<sup>&</sup>lt;sup>1</sup> Scottish Office (1999)

# 2. THE PROCESS OF UNDERTAKING THE QUALIFICATIONS AUDIT

Every agency offering residential child care<sup>2</sup> in Scotland was written to by SIRCC in October 2000 to advise them that we intended to undertake a qualifications audit on behalf of the Scottish Executive. The staff to be included were all care staff and any managers of care staff who were unit or school based; teachers, clerical and domestic staff, external managers and agency staff were excluded. Simultaneously with the collection of the qualifications audit, we intended to undertake a training needs analysis, collect a variety of other information concerning the units and schools and tell staff about the services SIRCC provides. We considered that face-to-face contact with staff would both allow them the opportunity to ask any questions they wanted and lead to a much higher rate of return of the qualifications audit and training needs analysis forms than would have occurred had the exercise been undertaken by post.

Written permission was sought from the organisations' directors for visits to be made to the units and schools. Senior managers in the organisations were offered a preliminary meeting, if they wanted to find out more about the process, prior to visits being made to units and schools. Approximately 20% took up this offer. With the benefit of hindsight, we consider it would have been helpful to have undertaken such a visit to all organisations. Once permission was received, the data collection began. We envisaged that this might take 4 months – January to April 2001. However, although there was surprisingly little wariness, and no hostility, to overcome, the process of receiving permission and getting firm commitments from units and schools for visits to proceed was long drawn out in a significant number of cases. In some cases, this was due to serious internal difficulties, or impending closures or changes; in others to the fact that our visit was not seen as a high priority or the paperwork being lost.

There were in November 2001 approximately 220 residential child care establishments/schools, comprising 263 units, in Scotland. These establishments range in size from the smallest, which have 2 - 4 residents, to large residential schools with 75 residents. The larger providers are often divided into a number of smaller living units. Where this was the case, we stated our willingness to visit all the units. To undertake this volume of work, SIRCC employed eight consultants and they, together with two SIRCC staff members, carried out the visits. Each consultant had at least one of their early visits quality assured by a member of SIRCC staff. Two hundred and forty one units were visited (92% of the planned total), some more than once, by the cut-off date for data collection which was the end of September 2001. A few more have been visited since.

<sup>&</sup>lt;sup>2</sup> The definition of residential child care used for the audit is the one specified in SIRCC's remit i.e. residential units provided by Scottish Local Authorities or registered under Section 62 of the Social Work (Scotland) Act (1968). This includes residential schools but not boarding (public) schools or boarding hostels.

The qualifications audit forms (see Appendix 1 for a sample) were sent to establishments approximately six weeks before the consultant's visit. It was hoped that the forms would be completed prior to the visit, with the consultant mainly providing advice where queries or difficulties had arisen. The process went according to plan in many cases, but in others the audit process had not started by the time the consultant visited and the consultant needed to provide further explanation and encouragement, sometimes agreeing to return at a later date to collect completed forms. Unfortunately, this still did not always result in forms being completed. Four agencies decided not to follow this process, each deciding to provide data from their own personnel records. In all four cases this has meant that the data given is in a somewhat different format and generally less detailed than the data collected by our chosen method. We have, however, managed to accommodate these differences, and their data is included in our analysis.

Completed returns were initially collated and entered on to a File Maker Pro database. At this stage in the process any ambiguities or uncertainties in how the returns had been completed were dealt with. Once we were satisfied with the accuracy of the information we had received and recorded, it was exported directly from File Maker Pro into Statistical Package for Social Sciences (SPSS) for statistical analysis.

In spite of the process proving considerably longer and more complex than anticipated, we are pleased by the high numbers of forms returned and the richness of the data collected. In addition to the analysis completed for this report, it will be possible over the next few months, if requested to do so, both to disaggregate the data for individual agencies and to analyse further the data to achieve a fuller picture of the residential child care workforce in Scotland.

# **3. THE FINDINGS**

## Introduction

At present our records show that there are 4,601 child care staff employed in residential child care. This figure is taken from SIRCC's records, which were compiled during the period of the study. Initially all units and schools were requested to state the number of care staff working in their unit or school on the 1<sup>st</sup> January, 2001. However, the reality was, in some cases at least, that these forms were not completed until the consultant's visit which took place between January and September 2001. Therefore, these figures should be taken as an indication of the number likely to be working in residential child care and may be subject to some variation – people leave and new employees are taken on in a continuous process.

We hoped for a high response rate given the strength of the support we received and the face to face nature of the audit. At 3<sup>rd</sup> October, 2001, 2,971 returns had been received, a 64.6% response rate. Returns were received from 168 units and schools (63.9% of units and schools) within Scotland managed by 59 organisations (79.7% of relevant organisations). As 241 units and schools were visited by consultants, this means that they were unsuccessful in obtaining qualification audits on 30.3% of visits by the cut off date.

## Characteristics of the work force

Of the total respondents, 1,389 (46.8%) were from local authorities, 1,468 (49.4%) from the voluntary/independent sector and 114 (3.8%) from the private sector. Responses were received from 945 males (34.5%) and from 1,792 females (65.5%). Findings on gender are set out in more detail in Table 1. Similarly, Table 2 sets out figures on employment patterns and Table 3 findings on type of unit/school.

Local Authority		Volunt	ary/ Independent	Private	
No. in Sector	% of Respondents	No. in Sector	% of Respondents	No. in Sector	% of Respondents
	in Sector		in Sector		in Sector
477	34.9	416	33.1	52	45.6
891	65.1	839	66.9	62	54.4
1368	100	1255	100	114	100
	No. in Sector 477 891	No. in Sector         % of Respondents in Sector           477         34.9           891         65.1	No. in Sector% of Respondents in SectorNo. in Sector47734.941689165.1839	No. in Sector% of Respondents in SectorNo. in Sector% of Respondents in Sector47734.941633.189165.183966.9	No. in Sector% of Respondents in SectorNo. in Sector% of Respondents in SectorNo. in 

#### Table 1. Gender numbers by sector

 $^{3}$  Totals in Tables do not necessarily add up to 2971 (the total number of returns) as not all respondents provided all the information requested.

Table 1 shows that the local authority and the voluntary/independent sector have a similar gender representation of approximately 2 females (65.1% and 66.9%) employed for every 1 male (34.9% and 33.1%). However in the private sector, which has only a small representation (approx. 4%) in this study, the above gender distinction is not so evident.

Employment Type	Local Authority			luntary/ ependent	Private	
	No. of respond- ents in sector	% of respond- ents in sector	No. of respond- ents in sector	% of respondents in sector	No. of respond- ents in sector	% of respond- ents in sector
Permanent Full Time	853	69.1	762	64.6	89	82.4
Permanent Part Time	181	14.7	206	17.5	8	7.4
Temporary Full Time	129	10.4	73	6.2	3	2.8
Temporary Part Time	38	3.1	20	1.7	1	0.9
Casual	33	2.7	118	10.0	7	6.5
Totals	1234	100	1179	100	108	100

Table 2. Type of employment contract held by respondentsin each of the three sectors

N = 2521

Almost 90% of those employed in the private sector have either a permanent full time or part time contract whereas in the local authority and voluntary/independent sectors the percentage of those with either full time or part time permanent contracts falls to 84% and 82% respectively. Differences are evident between the voluntary/independent and local authority sectors when both casual and temporary contracts are considered: less than 3% of employees in the local authorities are on casual contracts, but 1 in 10 have a casual contract in the voluntary/independent sector. This position reverses when looking at temporary contracts – just under 8% have such a contract in the voluntary/independent sector, but 13.5% of employees in local authorities have a temporary contract.

Table 3 below shows the number of responses from each type of establishment by sector.

Unit/School Type	Local Authority		Voluntary/ Independent		Private	
	No. in Sector	% in Sector	No. in Sector	% in Sector	No. in Sector	% in Sector
Res. Home (without Educ.)	1032	74.3	205	14.0	-	-
Res.Home/School (with Educ.)	105	7.6	408	27.8	103	90.4
Res. Home: Disability (without Educ.)	21	1.5	92	6.3	-	-
Res.Home/School: Disability(with Educ.)	28	2.0	363	24.7	11	9.6
Care Leavers	45	3.2	-	-	-	-
Respite Care	73	5.3	226	15.4	-	-
Secure Care	85	6.1	124	8.4	-	-
Close Support Unit <sup>4</sup>	-	-	-	-	-	-
Young Homeless	-	-	50	3.4	-	-
Totals	1389	100	1468	100	114	100

Table 3: Number of responses from each type of establishment by sector

N = 2971

Almost three quarters (74%) of the respondents in local authority units work in residential homes (without education), whereas just over 90% of employees in the private sector work in residential homes/schools (with education), although it should be noted that only two types of provision have been recorded for the small private sector. In the voluntary/ independent sector there is less of a concentration on one particular type of care. The four largest percentages -28%, 25%, 15% and 14% - have been recorded for residential home/school (with education), residential home/school: disability (with education), respite care and residential home (without education) respectively.

## Qualifications which are currently recognised by most employers

In order to analyse how many staff are likely to be recognised as qualified, we have had to make some assumptions as to which qualifications the Scottish Social Services Council (SSSC) might recognise. Whilst there will undoubtedly be debate as to whether all of the

<sup>&</sup>lt;sup>4</sup> Some secure units also include close support units. Establishments were only placed in one category.

qualifications listed here should be recognised, we suggest that the qualifications listed are those most likely to be **considered** for recognition as they already have widespread recognition from employers. There is not, however, uniformity across the sector. A small number of employers have been striving for a fully Diploma in Social Work (DipSW) qualified residential child care workforce. Some employers will only recognise SVQ3 if it is underpinned by an HNC or *vice versa* - a position discussed more fully later in this report.

Of the 2,971 records, 1189 staff (40.0%) indicated that they have such a qualification. Table 4 below shows the qualifications held by the highest qualification indicated by the respondent.

Qualifications	Number	%of Total	% of Respondents with a currently
		Respondents	recognised qualification
DipSW/CSS/CQSW	305	10.3	25.7
SVQ4	4	0.1	0.3
HNC & SVQ3	247	8.3	20.8
HNC	400	13.5	33.6
SVQ3 <sup>5</sup>	218	7.3	18.3
CRCCYP <sup>6</sup>	15	0.5	1.3
Total	1189	40.0	100
N=1189	I	I	

#### Table 4: Qualifications held

The most commonly held qualification is an HNC – 21.8% of all staff and 54.4% of all staff with a currently recognised qualification hold this one. This is followed by SVQ3 - 15.6% of all staff and 39.1% of staff with a currently recognised qualification. However, there is overlap between these groups. In total, 29.1% of all staff have one or both of these qualifications. Over 10% (10.3%) of all staff have a DipSW, CSS or CQSW. Only a tiny percentage of staff (0.1%) hold an SVQ4 and slightly more (0.5%) a CRCCYP. The latter qualification was discontinued in 1979 and numbers holding it will inevitably diminish over time. It was not recognised by CCETSW as equivalent to DipSW. However, it is the only extant residential child care qualification and, therefore, merits serious consideration for recognition at least at HNC level.

As well as recording the qualifications held, the respondents were also asked to indicate if they were undertaking any study at present and, if so, to indicate which qualifications.

<sup>&</sup>lt;sup>5</sup> SVQ 3 may be in "Care", "Caring for Children and Young people" or "Promoting Independence". A small number of workers have indicated that they have 2 SVQ3 qualifications –SVQ3 in Care and SVQ3 Caring for Children & Young People. They have only been counted once under SVQ3 as it is the level of educational achievement that is recorded and not the number of qualifications each individual has.

<sup>&</sup>lt;sup>6</sup> CRCCYP - Certificate in the Residential Care of Children and Young People.

Table 5 below shows that 592 respondents (19.9%) are currently undertaking a qualification, 371 of whom (62.7%) had no previous qualifications that might be recognised. Two hundred and twenty one respondents (37.3%) do have a previous qualification that might be recognised, the majority (136) of whom had an HNC and are now undertaking an SVQ3.

Qualification	Total Number	Respondents with no Previous Qualifications		Respon Previou Qualifi		% of All Respondents Undertaking a
		No.	%	No.	%	Qualification
DipSW/CSS/	71	36	6.1	35	5.9	12.0
CQSW						
SVQ4	26	9	1.5	17	2.8	4.4
HNC & SVQ3	46	46	7.8	-	-	7.8
HNC	108	75	12.7	33	5.6	18.2
SVQ3	341	205	34.6	136	23.0	57.6
Total	592	371	62.7	221	37.3	100

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Nearly 20% of total staff are currently undertaking qualifications. Providing they successfully complete their qualifications, this is an encouraging figure. It is also one that is likely to increase, given the uptake of SIRCC qualifying courses since the audit was undertaken. The majority, approximately 13% of total staff and over half (65.4.%) of those currently undertaking a qualification, are undertaking SVQ3. Significantly the numbers currently involved in undertaking the other qualifications that might be recognised are relatively small.

A different picture emerges for those currently undertaking a qualification from those who already hold a qualification that may be recognised. In place of the HNC, which was the most widely held qualification, 54.4% of staff with a qualification, 65.4% of those undertaking a qualification are doing SVQ3 either on its own or in partnership with HNC. However, only a small number (46) are doing the latter.

## **Geographical variations**

We decided to identify any geographical differences in the levels of qualifications either held or being undertaken both to gain a more detailed view of the workforce and because it will have implications for the level of provision of qualifying courses in different

<sup>&</sup>lt;sup>7</sup> Some respondents already hold a qualification that might be recognised but are also undertaking another qualification that might be recognised.

regions. For the purpose of this piece of work the regions were identified as - North of Scotland, South East Scotland, Tayforth and West of Scotland.<sup>8</sup>

#### NORTH OF SCOTLAND

The total number of returns in the North was 527 (representing 17.7% of total returns in the audit) of which 169 (32.1%) were from the local authority, 358 (67.9%) from the voluntary/independent sector, and none from the private sector. Table 6 below shows the percentage of respondents in each of these sectors who either have or are undertaking a currently recognised qualification.

Sector	Local Authority			untary/ pendent	Private	
Qualifications	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertaking a Qualifica- tion	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertaking a Qualifica- tion	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertak- ing a Qualific- ation
DipSW/CSS/ CQSW	23.1	1.7	10.1	2.2	-	-
SVQ4	-	-	0.3	0.6	-	-
HNC & SVQ3	3.0	5.9	4.7	1.1	-	-
HNC	7.1	1.8	8.4	2.0	-	-
SVQ3	4.1	8.9	10.1	3.6	-	-
CRCCYP	0.6	-	0.6	-	-	-
TOTAL	37.9	18.3	34.2	9.5	-	-

#### Table 6: Percentage of staff who have or are currently undertaking a likely to be recognised qualification in the North of Scotland

N = 527

In the North of Scotland, 35.0% of respondents, (37.9% of staff in the local authority sector and 34.2% of staff in the voluntary/independent sector) have indicated that they hold a currently recognised qualification. There are differences in the levels of qualifications between the sectors; for example, the local authority has a considerably higher percentage of staff who are DipSW gualified than the voluntary/independent sector. Percentages for those who are currently undertaking a qualification (13.5% of all staff in the North) are considerably less than the national average. There are almost twice as many staff in the local authority sector (18.3%) undertaking a qualification as in the

North of Scotland -Aberdeen, Aberdeenshire, Moray, Highland, Western Isles, Shetland, Orkney South East Scotland - City of Edinburgh, East Lothian, Midlothian, West Lothian, Scottish Borders Tayforth - Angus, Dundee, Perth & Kinross, Fife, Stirling, Clackmannan, Falkirk

 $<sup>^{8}</sup>$  The geographical groupings used to record data are the same as those used by SSSC consortia and cover any units or schools located in:-

West of Scotland - Argyll & Bute, Dumfries & Galloway, East Ayrshire, East Dunbartonshire, East Renfrewshire, Glasgow City, Inverclyde, North Ayrshire, North Lanarkshire, Renfrewshire, South Ayrshire, South Lanarkshire, West Dunbartonshire.

voluntary/independent sector (9.5%). In both sectors, the majority of those currently undertaking one of the recognised qualifications are doing so at HNC and/or SVQ3 level.

#### SOUTH EAST SCOTLAND

The total number of returns in the South East of Scotland was 438 (representing 14.7% of the total number of returns) of which 231 (52.7%) were from local authorities, 157 (35.9%) were from the voluntary/independent sector, and 50 (11.4%) were from the private sector. The table below shows the percentage of respondents in each sector who are either undertaking or have a currently recognised qualification.

Sector	Local Authority		Voluntary/ Independent		Private	
Qualifications	% of staff in Sector with a Qualific- ation	% of staff in Sector Undertaking a Qualific- ation	% of staff in Sector with a Qualific- ation	% of staff in Sector Under- taking a Qualific- ation	% of staff in Sector with a Qualific- ation	% of staff in Sector Under- taking a Qualific- ation
DipSW/CSS/ CQSW	18.6	4.8	11.5	4.5	4.0	2.0
SVQ4	-	0.4	-	-	-	-
HNC & SVQ3	22.5	2.2	5.1	1.3	6.0	-
HNC	14.3	3.9	8.9	1.9	28.0	20.0
SVQ3	2.6	10.0	4.5	14.0	2.0	20.0
CRCCYP	1.7	-	-	-	-	-
TOTAL	59.7	21.3	30.0	21.7	40.0	42.0

# Table 7: Percentage of staff who have or are currently undertaking alikely to be recognised qualification in the South East of Scotland

N = 438

In the South East of Scotland 46.8% of all respondents have a currently recognised qualification and another 23.8% are currently undertaking one or more of these qualifications. Here we find that there are considerably higher percentages of staff in the local authority who hold a currently recognised qualification (59.7%) than in either the voluntary/independent (30.0%) or private sectors (40.0%). Similarity can be found between the local authority (21.3%) and voluntary/independent (21.7%) sectors for qualifications currently being undertaken but the private sector (42.0%) has a much larger proportion of its staff currently undertaking qualifications. As in the North, we find that the qualifications most commonly being undertaken are HNC and/or SVQ3.

#### TAYFORTH

The total number of returns in Tayforth was 370 (representing 12.5% of total returns in the audit) of which 164 (44.3%) were from local authorities, 169 (45.7%) from the voluntary/independent sector, and 37 (10%) were from the private sector. Table 8 below shows the percentage of respondents in each sector who either have, or are undertaking, a currently recognised qualification.

Sector	Local Authority			luntary/ ependent	Private	
Qualifications	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertaking a Qualifica- tion	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertaking a Qualifica- tion	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertaking a Qualifica- tion
DipSW/CSS/ CQSW	18.3	3.0	10.7	5.9	8.1	-
SVQ4	-	0.6	1.2	-	-	-
HNC & SVQ3	13.4	1.2	2.4	1.8	-	13.5
HNC	14.6	1.8	15.4	3.6	5.4	2.7
SVQ3	7.3	20.7	4.7	4.1	18.9	8.1
CRCCYP	-	-	-	-	-	-
TOTAL	53.6	27.3	34.4	15.4	32.4	24.3

#### **Table 8: Percentage of staff who have or are currently undertaking a** likely to be recognised qualification in Tayforth

N = 370

In Tayforth 43.0% of all respondents have indicated that they hold a currently recognised qualification and a further 21.6% are undertaking one or more of these qualifications. Both the voluntary/independent and private sectors have recorded that approximately 1/3 of their staff hold a likely to be recognised qualification – 34.4% and 32.4% respectively - whereas in the local authority sector over half of their staff (53.6%) hold such a qualification. Staff in local authorities (27.3%) and the private sector (24.3%) are considerably more likely to be undertaking a qualification than those in the voluntary/independent sector (15.4%). As in the South East of Scotland we find that the local authority sector has higher percentages of staff both with and undertaking likely to be recognised qualifications. Again the data shows a tendency amongst staff towards undertaking qualifications at HNC and/or SVQ3 level.

#### WEST OF SCOTLAND

The total number of returns in the West of Scotland was 1636 representing 55.1% of total returns in the audit of which 825 (50.4%) were from local authorities, 784 (47.9%) from the voluntary/independent sector, and 27 (1.7%) were from the private sector. The following table shows the percentage of respondents in each sector who have or are undertaking a currently recognised qualification.

Sector	Local	Authority		intary/ pendent	Р	rivate
Qualifications	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertak-ing a Qualifica- tion	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertak- ing a Qualifica- tion	% of staff in Sector with a Qualifica- tion	% of staff in Sector Undertaking a Qualific- ation
DipSW/CSS/ CQSW	7.6	0.8	6.5	1.8	7.4	-
SVQ4	-	0.6	0.1	2.0	-	-
HNC & SVQ3	11.5	0.4	5.0	1.3	7.4	7.4
HNC	12.7	2.8	17.0	5.1	25.9	11.1
SVQ3	9.9	16.7	8.8	9.7	7.4	-
CRCCYP	0.7	-	0.1	-	-	-
TOTAL	42.4	21.3	37.5	19.9	48.1	18.5

<b>Table 9:</b>	Percentage of staff who have or are currently undertaking a
likely to b	be recognised qualification in the West of Scotland

N = 1636

In the West of Scotland 40.2% of all respondents have indicated that they hold a qualification which is likely to be recognised, with some 20.6% currently undertaking one or more of these qualifications. Here we see that the private sector (48.1%) has a higher percentage of qualified staff than the local authority (42.4%) or voluntary/independent (37.5%) sectors. A considerably lower proportion of staff in the West hold a qualification at DipSW level than the other three regions. There is more consistency across all three sectors in the West when looking at those who are currently undertaking a qualification: 18.5% in the private sector, 19.9% in the voluntary/independent sector and 21.2% in local authorities. As with the previous regions, the overall tendency is towards staff undertaking qualifications at HNC and/or SVQ level 3.

# Qualifications which may be recognised in certain settings

Residential childcare is not provided in homogeneous settings and staff remits and roles vary considerably. Children and young people of different ages, abilities, difficulties, cultures and life histories live in large, medium or small establishments, with or without education on the premises, for short, long or respite periods, in conditions of openness or security, and run by organisations with different philosophies, faiths or belief systems. Such diversity is generally a strength and provides the possibility of real choice. It also means that staff may require different knowledge and skills for different settings. The following qualifications are ones which may be considered appropriate, and recognisable, in some settings but less so or not at all in other settings. Table 10 below gives the number of staff who hold only these qualifications. There are a number of staff who have these qualifications but they also have another qualification which might be recognised and they have, therefore, been included previously.

		Got a Qualific	ation	U	ndertaking a Q	ualification
	Number	% of all Respondents	% of Respondents with these qualifications	Numb er	% of all Respondents	% of Respondents undertaking these qualific- ations
SVQ Early Years Care and Education	1	0.0	0.5	-	-	-
HNC (Supporting Special Learning Needs)	9	0.3	4.4	-	-	-
HNC (Child Care and Education)	10	0.3	4.8	-	-	-
NNEB	64	2.2	30.9	1	0.0	12.5
Nursing	95	3.2	45.9	2	0.1	25.0
Curative Education <sup>9</sup>	28	1.0	13.5	5	0.2	62.5
Total	207	7.0	100	8	0.3	100

 Table 10: Number of staff holding or undertaking a qualification that may be recognised in certain settings

N = 215

Some 215 (7.3%) of staff have indicated that they are either holding (207) or undertaking (8) a qualification that may be recognised in certain settings. The settings where these qualifications might be recognised are as follows:

<sup>&</sup>lt;sup>9</sup> This qualification is found almost exclusively in Camphill/Rudolf Steiner establishments. It is available at Degree, Diploma and Certificate level from Aberdeen University (Northern College).

- Two and a half percent of all staff currently hold either an SVQ Early Years Care and Education, an HNC (Child Care and Education) or an NNEB qualification. These qualifications might be considered as a recognisable qualification in units and/or schools working with groups of younger children or young women with their babies.
- Four and a half percent of all staff hold or are undertaking either a nursing, curative education or HNC (Supporting Special Learning Needs) qualification. They might find that they are considered to hold a recognised qualification in units/schools for children with disabilities.

The classification used by SIRCC for types of units and schools does not provide the level of detail necessary to discover whether staff with SVQ Early Years Care and Education, HNC (Child Care and Education) or NNEB qualifications are working with "appropriate" children. However, it is possible to see where staff with nursing or other qualifications for working with children with disabilities are based - see table 11 below:

<b>0.</b>	<b>%</b> 17.9	No.	(Support Learning %		
	-	No.			
	-	No.	0/		
T	179		70	No.	%
	11.5	-	-	2	22.2
	6.3	-	-	1	11.1
)	10.5	-	-	-	-
)	30.5	28	100	1	11.1
	1.1	-	-	-	-
ō	27.4	-	-	5	55.6
	4.2	-	-	-	-
	2.1	-	-	-	-
	100	28	100	9	100
		30.5 1.1 27.4 4.2 2.1	30.5     28       1.1     -       27.4     -       4.2     -       2.1     -	30.5     28     100       1.1     -     -       27.4     -     -       4.2     -     -       2.1     -     -	30.5       28       100       1         1.1       -       -       -         27.4       -       -       5         4.2       -       -       -         2.1       -       -       -

Table 11: Staff with a qualification	<u>that might be</u>	<u>e recognised in</u>	certain settings by
<u>type of establishment</u>			

N = 132

It can be seen that 99 of these staff (3.3% of total staff) are working in settings where the children have, or in the case of respite care probably have, disabilities.

## Qualifications that may be relevant but are less likely to be recognised

There are significant numbers – 196 or 6.6% - of care staff who have (191) or are undertaking (5) higher qualifications in subjects which are related or relevant to residential child care but where the curriculum and/or the lack of assessed placements mean that the qualifications are less likely to be recognised. These include teaching, community education, youth and community and degrees<sup>10</sup> which might be considered relevant. The small number of staff holding the Advanced Certificate in Residential Child Care, who have no other relevant qualifications, are also included here. This certificate course was provided at M level for a number of years by Glasgow University. Unfortunately, it was not submitted to CCETSW for approval and so its standing is uncertain. Nevertheless, holders might be able to submit it for accreditation of prior learning. Details of staff holding/undertaking such qualifications are given below.

Qualification	Got	t a Qualification	Underta	aking A Qualification
	No.	%	No	%
Teaching	31	16.2	1	20.0
Community Education	22	11.5	4	80.0
Youth and Community	14	7.3	-	-
Other Degrees which might be relevant	118	61.8	-	-
Advanced Certificate in Residential Childcare	6	3.1	-	-
Total	191	100	5	100

#### **Table 12: Staff holding or undertaking a relevant but less likely to be recognised qualification**

N = 196

We are aware that staff holding the above qualifications are sometimes currently required to undertake HNC's and SVQ's in order to become 'qualified'. We consider that it would make much more sense for them to be enabled to achieve a 'fast track' DipSW or equivalent and make proposals for this later in this report.

## General educational levels of unqualified staff

We attempted through the audit to gain information concerning general educational levels of residential childcare staff who do not have a recognisable or relevant qualification. Our aim was to consider how straightforward or difficult unqualified staff might find it to gain a qualification and whether some, e.g. existing degree holders, were more likely to aspire to a degree/diploma level qualification rather than an HNC/SVQ level

<sup>&</sup>lt;sup>10</sup> E.g. Psychology, sociology.

	Got a	Qualification	Undertak	ing a Qualification
	Number	%	Number	%
Degrees, Masters, and PhDs (equivalent to SCQF 9-12)	42	4.0	13	59.1
Dip HE, HND, SVQ level 4 (equivalent to SCQF 8)	20	1.9	2	9.1
HNC, Advanced Highers, Cert HE (equivalent to SCQF 7)	32	3.1	-	-
Highers, SVQ3 (equivalent to SCQF 6)	83	7.9	1	4.6
Standard Grades, SVQ2, SVQ1 (equivalent to SCQF 3- 5)	131	12.5	3	13.6
Other Qualifications <sup>12</sup>	90	8.6	3	13.6
Incomplete/Unclassifiable Information <sup>13</sup>	37	3.5	-	-
No Educational Qualifications Recorded	613	58.5	-	-
Total	1048	100	22	100
N=1070	1	1	I	

qualification. We classified the levels using a modified version of the Scottish Credit and Qualifications Framework.<sup>11</sup> The findings were as follows:

#### Table 13: General educational levels of unqualified staff

It is apparent that the majority of currently unqualified staff do not have a high general level of education. Six hundred and thirteen (58.5%) of this group did not record any qualifications whatever, whereas only 177 (16.9%) had general educational qualifications at the equivalent of Highers or above. Some of the latter group might be eligible for direct admission to Degree/Diploma level courses. The former group may well need basic educational assistance in order to achieve a qualification. Some of those in this group may prove unable to achieve a qualification.

## **Overview of findings**

Knowing the overall picture does not necessarily mean that all organisations and sectors share the same experience in relation to the number of qualified staff, or staff in training that they employ. Staff at different levels, or with different employment patterns, are not uniform in their pattern of qualifications.

<sup>&</sup>lt;sup>11</sup> An Introduction to the Scottish Credit and Qualifications Framework. Scottish Executive (9/2001). Enterprise and Lifelong Learning Department

<sup>&</sup>lt;sup>12</sup> e.g. D33, D34, K100, practice teaching, CALM, TCI.

<sup>&</sup>lt;sup>13</sup> This includes some overseas qualifications where no equivalence to UK qualifications was given.

Tables 14 & 15 show the number of staff holding or currently undertaking a qualification by employment position. Unsurprisingly, there are significant differences between management staff and other staff. If, as seems possible, the DipSW (or equivalent) is established as the recognised qualification for Heads of Care, Unit/House Managers, Depute Unit/House Managers and Senior Residential Care Workers, then there is still a very considerable proportion of these staff who will be required to achieve these qualifications. At the other end of the scale, and again unsurprisingly, it can be seen that Night Care and Sessional/Casual Workers are least likely to hold any qualifications that may be recognised.

Variation is also evident in the type of employment contract held by staff. Tables 16 and 17 show the number of staff presently holding or undertaking a currently recognised qualification by the type of employment contract they hold. Just under half (49.3%) of full time permanent staff and less than one quarter (22.7%) of permanent part time staff hold a currently recognised qualification; whilst just over one quarter (25.4%) of temporary full time staff and just over one eighth (13.6%) of temporary part time staff also hold one of these qualifications. Only 15.0% of those employed on a casual contract have indicated that they hold such a qualification. The majority of staff with a currently recognised qualifications have either an HNC or SVQ3 or a combination of both of these qualifications; although, in the case of permanent full time staff there is a more even distribution of qualifications held between DipSW, HNC, SVQ3 or a combination of HNC with SVQ3.

Those with a full time permanent contract are most likely to be presently undertaking a qualification (23.2%). Smaller percentages are to be found amongst those with different types of employment contracts - 18.7% permanent part time, 11.3% temporary full time, 13.6% temporary part time and 10.0% of staff employed on a casual contract are currently undertaking one of these qualifications. Overall the majority of staff currently undertaking a qualification are undertaking SVQ3.

	DI	IPSW	S	SVQ 4	HNC	C &SVQ3		HNC	5	SVQ3	CI	RCCYP	WHICI		BE REC	ANT BUT LIKELY TO COGNISED FICATIONS	ALL O RESPO	THER DNDENTS <sup>14</sup>	то	DTALS
Employment Position	No.	% of Respon- dents in each Position	No.	% of Respon- dents in each Position	No.	% of Respon- dents in each Position	No.	% of Respon- dents in each Position	No.	% of Respon- dents in each Position										
Head of Care [based on site]	27	56.2	1	2.1	-	-	1	2.1	-	-	3	6.3	9	18.7	2	4.2	5	10.4	48	100
Unit/House Manager/ Leader/OIC/ Senior Co-worker	95	47.3	-	-	4	2.0	10	5.0	13	6.5	3	1.5	37	18.4	8	4.0	31	15.4	201	100
Depute Unit /House Manager /OIC	53	28.8	2	1.2	28	15.2	26	14.1	6	3.3	-	-	12	6.5	8	4.3	49	26.6	184	100
Senior Residential Care Worker	26	10.4	-	-	37	14.7	36	14.3	33	13.1	3	1.2	12	4.8	16	6.4	88	35.1	251	100
Residential Care Worker/ Co-worker	94	5.1	1	0.1	112	6.1	265	14.4	137	7.5	5	0.3	47	2.5	137	7.5	1040	56.5	1838	100
Night Care Worker	8	2.4	-	-	21	6.2	36	10.6	20	5.9	1	0.3	10	2.9	9	2.6	235	69.1	340	100
Casual/ Sessional	1	2.3	-	-	-	-	9	20.9	2	4.7	-	-	-	-	1	2.3	30	69.8	43	100

## Table 14: Qualifications held by employment position

<sup>&</sup>lt;sup>14</sup> This category includes those who have no qualifications and those who are undertaking qualifications, but presently have no qualifications.

	DIPS	SW	SVQ	4	HNC	C &SVQ3	HNC		SVQ	3	CRC	СҮР	WHICH		BE REC	ANT BUT LIKELY TO COGNISED FICATIONS	ALL O RESPO	THER DNDENTS <sup>15</sup>	ТОТА	LS
Employment Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position
Head of Care [based on site]	2	4.1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	46	95.9	48	100
Unit/House Manager/ Leader/OIC/ Senior Co-worker	7	3.5	7	3.5	-	-	4	2.0	6	3.0	-	-	1	0.5	-	-	176	87.6	201	100
Depute Unit/ House Manager/ leader/OIC	13	7.1	7	3.7	1	0.5	2	1.1	16	8.7	-	-	-	-	-	-	145	78.8	184	100
Senior Residential Care Worker	4	1.6	1	0.4	3	1.2	10	4.0	27	10.7	-	-	-	-	-	-	206	82.1	251	100
Residential Care Worker /Co-worker	42	2.3	10	0.5	36	2.0	78	4.2	231	12.6	-	-	6	0.3	3	0.2	1432	77.9	1838	100
Night Care Worker	2	0.7	1	0.3	3	0.9	12	3.5	40	11.7	-	-	-	-	1	0.3	281	92.4	340	100
Casual/ Sessional	1	2.3	-	-	-	-	2	4.7	-	-	-	-	-	-	-	-	40	93.0	43	100

Table 15: Qualifications currently being undertaken by employment position

<sup>&</sup>lt;sup>15</sup> This category includes all those who are not currently undertaking one of the qualifications in this table.

	D	DIPSW		SVQ 4	HNO	C &SVQ3		HNC	5	SVQ3	C	RCCYP	TIONS WHIC BE RECO	CH MAY OGNISED RTAIN	RECO	LESS LY TO BE GNISED IFICA-		OTHER ONDENTS	то	TALS
Employment Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position
Permanent Full Time	237	16.0	3	0.2	156	9.1	241	14.1	155	9.1	13	0.8	81	4.7	97	5.7	721	42.3	1704	100
Permanent Part Time	18	4.5	-	-	18	4.5	37	9.4	17	4.3	-	-	26	6.6	28	7.1	251	63.6	395	100
Temporary Full Time	11	5.4	-	-	13	6.3	21	10.3	7	3.4	-	-	6	2.9	29	14.1	118	57.6	205	100
Temporary Part Time	3	5.1	-	-	1	1.7	5	8.5	1	1.7	-	-	1	1.7	6	10.1	42	71.2	59	100
Casual	2	1.7	-	-	-	-	12	10.0	4	3.3	-	-	1	0.8	7	5.8	94	78.4	120	100

Table 16: Qualifications held which are likely to be recognised by employment contract

<sup>&</sup>lt;sup>16</sup> This category includes those who have no qualifications and those who are undertaking qualifications, but presently have no qualifications.

	]	DIPSW	S	SVQ 4	HN	C Only	HN	C&SVQ3	SVQ3	BONLY	C	RCCYP	TIO WH BE I NISI CEF	ALIFICA- NS ICH MAY RECOG- ED IN RTAIN TINGS	BUT LIK BE I NISI	ALIFICA-	ALL OT RESPO	NDENTS <sup>17</sup>	то	TALS
Employment Position	No	% of Respon- dents in each Position	No	% of Respo- ndents in each Positio n	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position	No	% of Respon- dents in each Position						
Permanent Full Time	36	2.1	21	1.2	70	4.1	32	1.9	238	14.0	-	-	3	0.2	2	0.1	1302	76.4	1704	100
Permanent Part Time	10	2.5	-	-	19	4.8	6	1.5	39	9.9	-	-	1	0.3	2	0.5	318	80.5	395	100
Temporary Full Time	3	1.5	-	-	1	0.5	3	1.5	16	7.8	-	-	3	1.5	1	0.5	178	86.8	205	100
Temporary Part Time	1	1.7	-	-	5	8.5	-	-	2	3.4	-	-	-	-	-	-	51	86.4	59	100
Casual	4	3.3	-	-	5	4.2	2	1.7	1	0.8	-	-	-	-	-	-	108	90.0	120	100

#### Table 17: Qualifications currently being undertaken by employment contract

<sup>&</sup>lt;sup>17</sup> This category includes all those who are currently not undertaking one of the above qualifications.

		Local A	uthority		Vo	luntary/l	ndepend	ent	Private					
	Got a qualific	ation	Underta a qualif		Got a qualific	ation	Underta a qualif	0	Got a qualific	ation	Underta a qualif			
	No. of% ofStaffStaffininSectorSector		No. of Staff in Sector	% of Staff in Sector										
DipSW	175	12.6	32	2.3	123	8.4	39	2.7	7	6.1	1	0.9		
SVQ 4	-	-	7	0.5	4	0.3	18	1.2	-	-	-	-		
HNC & SVQ 3	174	12.5	20	1.4	68	4.6	19	1.3	5	4.4	7	6.1		
HNC	174	12.5	38	2.7	203	13.8	56	3.8	23	20.2	14	12.3		
SVQ 3	109	7.8	210	15.1	101	6.9	118	8.0	10	8.8	13	11.4		
CRCCYP	11	0.8	-	-	4	0.3	-	-	-	-	-	-		
Totals	643	46.2	307	22.0	503	34.3	250	17.0	45	39.5	35	30.7		

As can be seen in the table 18 below, there is also variation between the currently recognised qualifications held, and being undertaken, by sector.

N = 1783

#### Table 18: Qualifications held and currently being undertaken by sector

What emerges here is that the voluntary/independent sector has both the lowest level of qualified staff and of staff undertaking qualifications as compared to the local authority and private sectors.

Regardless of the differences in the numbers of qualifications held and undertaken, there is consistency across all sectors in the levels of qualifications presently being undertaken. The HNC and the SVQ3 are most favoured. Amongst those who already hold a currently recognised qualification there is variation to be found between the local authority sector and both the private and voluntary/independent sectors. Local authorities have virtually equal numbers of staff who hold a DipSW (175), an HNC stand-alone qualification (174) or a combination HNC/SVQ3 qualification (174). However, in the voluntary/independent and private sectors much the highest numbers are to be found with an HNC stand-alone qualification – 203 and 23 respectively.

Arriving at a precise figure for the percentages of those who are qualified, or who have embarked on a qualifying course and are likely to qualify in the near future, depends on a number of factors:

i) The range of qualifications which will be recognised by the SSSC.

- ii) The percentage of staff who successfully complete the qualifying courses or awards which they are currently undertaking. For the examples given below, the percentage is assumed to be 90%.
- iii) The individuals, units/schools and organisations which responded to the audit being typical of the sector as a whole. We cannot categorically say that this is the case without further analysis, but the high rate of return leads us to have reasonable confidence that they are typical. An analysis of the organisations and units/schools which did not make a return shows an overrepresentation of private organisations less than half of private organisations made a return. However, the private sector is very small and this is unlikely to have a significant effect on the overall results. The rest of the non-returns were split equally between local authority units, including one secure unit, and voluntary/independent units and schools. Geographically, almost half of the non-returns were in the West, the area with the highest number of returns.

We have worked out some examples to illustrate the results if different qualifications are recognised:

#### Example 1

All the qualifications described as 'may be recognised' (DipSW/CSS/CQSW, SVQ4, HNC and SVQ3, HNC, SVQ3, CRCCYP) and 'may be recognised in certain settings' (nursing, curative education, SVQ Early Years Care and Education, NNEB, HNC (Child Care and Education), HNC (Supporting Special Learning Needs)) are recognised by the SSSC. A 'fast track' diploma qualification is available for those with relevant higher educational qualifications. This would result in:

- 47.0% of current staff being recognised as qualified
- 11.5% of current staff achieving a recognised qualification in the near future
- 6.4% of current staff who hold relevant but not recognised qualification being eligible to achieve a 'fast track' qualification
- 35.1% of current staff being considered unqualified or failing or withdrawing from a qualifying course/award which they are currently undertaking

#### Example 2

Only those staff who have obtained DipSW, HNC and SVQ3/4, or CRCCYP are recognised as qualified. Nursing and curative education qualifications are recognised in units/schools for children with disabilities. A 'fast track' Diploma level qualification is available for those with relevant higher education qualifications. This would result in:

- 22.2% of current staff being recognised as qualified
- ◆ 32.9% of current staff achieving a recognised qualification in the fairly near future (i.e. those holding or undertaking HNC would also achieve SVQ3 and vice versa)

- 6.4% of current staff who hold relevant but not recognised qualifications being eligible to achieve a 'fast track' qualification
- 38.5% of current staff being considered unqualified or failing or withdrawing from a qualifying course/award which they are currently undertaking

# **4.THE FINDINGS IN CONTEXT**

It is important to compare our findings with other published findings concerning residential child care workers' qualifications, both to consider how much progress has been achieved and to see whether different methods of data collection throw up different results.

The data used in *Another Kind of Home*<sup>18</sup> relates to 1990 and 1991. The data published by the then Social Work Services Group, was as follows:

	Total Social V Qualifie			Other Qu	Other Qualifications <sup>2</sup>		None of these	
		No.	%	No.	%	No.	%	
Officers in Charge	110	45	41	34	31	31	28	
Assistant Officers in Charge	211	63	30	39	18	109	52	
Teachers	76	15	20	61	80	0	-	
Other Staff	214	17	8	19	9	178	83	

#### Table 19: Staff qualifications in 1990

<sup>1</sup> CQSW and CSS

<sup>2</sup> Other social service, nursing, nursery nurse, occupational therapy, youth and community qualifications, teaching and instructor's qualifications.

The survey commissioned to provide information for *Another Kind Of Home*<sup>19</sup> also covered voluntary and private establishments. Overall, 83% of staff had no relevant qualifications and only 14% had a Diploma in Social Work or equivalent.

In 1989, there were 2,994 whole time equivalent residential child care workers in Scotland. Although the number of children and young people accommodated in residential units and schools has decreased, there has been a very major increase in staffing to 4,220 whole time equivalents in March 2000.<sup>20</sup> (Our figure for 1 January 2001 is 4,600 but this counts all staff rather than whole time equivalents). This

<sup>&</sup>lt;sup>18</sup> Another Kind of Home, HMSO (1992)

<sup>&</sup>lt;sup>19</sup>op cit (1992)

<sup>&</sup>lt;sup>20</sup> Children in Residential Accommodation 1998-9 and Children in Residential Accommodation 1999-2000 Scottish Executive

increase may, in part, explain why it has proved so hard to meet the qualifications targets set in Another Kind of Home.<sup>21</sup>

A further notable change has been the increasing number and proportion of residential child care staff based in the voluntary and private sectors.

	1989		1994		1998		1999		2000	
	No.	%								
Local Authority	2,090	70	2,344	69	2,320	65	2,048	57	2,246	53
Voluntary/Private	904	30	1,057	31	1,260	35	1,530	43	1,973	47
Total	2,994	100	3,402	100	3,580	100	3,578	100	4,220	100

#### Table 20: Residential child care staff (FTE) by sector 1989 – 2000

The staffing figures found in this audit, which counted all staff rather than FTE, appear to show a further development in this trend. We found 46.8% of respondents working in local authorities and 53.2% in the voluntary/private sectors.

The targets established in Another Kind of Home<sup>22</sup> were as follows:-

Recommendation 47:	Local authorities and independent organisations should aim to achieve a position in which 30% of all residential child care staff, and 90% of all senior residential child care staff hold a diploma in social work or equivalent.				
Recommendation 48:	Local authorities and independent organisations should aim to achieve a position, in which 60% of all residential child care staff are assessed as competent at HNC/SVQ level 3.				

The following comments from Another Kind of Home<sup>23</sup> remain pertinent. "Residential child care establishments are faced with meeting needs which are amongst the most complex and challenging of any social work service... It is generally accepted that field social workers should all be fully qualified, and it is far from clear that they have more demanding or complex responsibilities. When young people or children are admitted to residential care it should be because they need the special care and skills available; the staff should, therefore, be equipped to deliver skilled care.... The introduction of the specific grant for social work training in local authorities has included a proposed target of 30% of residential child care staff holding a Diploma in Social Work or equivalent. This is appropriate, but the longer

<sup>&</sup>lt;sup>21</sup> op cit (1992) <sup>22</sup> op cit (1992) <sup>23</sup> op cit (1992)

term aim should be that 60% of residential care staff are qualified at this level; that may not be achievable before the next decade."<sup>24</sup>

Unfortunately, this target proved far from achievable over the next decade. Targets were re-established in 1999.<sup>25</sup> It was anticipated that 65% of officers in charge and deputes would have a DipSW or equivalent by 2000 and 90% by 2003 and that 50% of care staff would have an HNC/SVQ3 or equivalent by 2000 and 50% by 2003. Whilst numbers holding a Diploma in Social Work have significantly increased, their proportion in the overall staff group has actually fallen from 14% to 10%. However, somewhat more encouragingly, 41% of officers in charge and deputes now hold a DipSW or equivalent Likewise the target of 60% of the workforce being HNC/SVQ 3 qualified has not been achieved. Only 8% of the workforce holds both qualifications and 29% either one or both.

The statistics on qualifications collected by the then Social Work Services Group (SWSG) and subsequently the Scottish Executive, only relate to the local authority sector. The most recently published figures were collected in 1999.<sup>26</sup> It proved difficult to compare these with the data we collected in this audit as the Scottish Executive count all qualifications held, rather than highest qualifications held, so considerable numbers of staff are double, or possibly even treble counted. They also have a category "Other Social Services Qualifications" which 3% of staff hold (although possibly in combination with other qualifications). We offered this as a category in this audit but found most of the qualifications listed, such as D33 and D34 or K100 were ones that were highly unlikely to be recognised as stand-alone qualifications, as unqualified. We also, unlike the Scottish Executive, listed those with non-relevant degrees and post-graduate qualifications as unqualified.

	DipSW/CCS/CQSW	HNC and/or SVQ3/4	Total holding a currently recognised qualification
Qualifications held by staff in this qualifications audit	12.6%	33%	<b>45.6%</b> <sup>27</sup>
Qualifications held as reported by SWSG in 1999	11%	26%	<b>37%</b> <sup>27</sup>

Given the above caveats, we were able to compare some qualifications as follows:

#### Table 21: Levels of qualifications held by local authority staff

It would appear that over the period 1999 - 2001 there has been a modest increase in the percentage of local authority staff who hold a qualification. Given the current

<sup>&</sup>lt;sup>24</sup> op cit (1992)

<sup>&</sup>lt;sup>25</sup>Specific Grant for Social Work Training Circular, SWSG 1999

<sup>&</sup>lt;sup>26</sup> Staff of Scottish Local Authority Social Work Departments 1999, Scottish Executive (2001)

<sup>&</sup>lt;sup>27</sup> These figures do not include staff holding a CRCCYP as SWSG did not collect data concerning this qualification.

uncertainty about which qualifications will be required, the reduction in the Training Specific Grant paid to local authorities and the ensuing hiatus until staff start to graduate from SIRCC qualifying courses, this is a good achievement.

# 5. IMPLICATIONS OF THE QUALIFICATIONS AUDIT

The proportion of staff with, or undertaking, qualifications that are likely to be recognised has risen considerably in the last 10 years but is, nevertheless, disappointing when compared with "Skinner" and more recent targets. The challenge of achieving a fully qualified workforce remains a very substantial one. The range of qualifications held may also be seen as surprising. We had anticipated that the resources, time and effort dedicated by employers, managers and residential child care staff to SVQs would have borne more fruit by now. It is not clear whether the much higher proportion currently undertaking SVQs, as opposed to those who have already achieved them, is a positive sign of increased registrations and assessment activity, or a more concerning sign of the time it is taking for candidates to achieve SVQs.<sup>28</sup> The current qualification position does not, however, detract either from the requirement to achieve a fully qualified workforce or the need to ensure that the qualifications selected fully equip staff for the tasks which they undertake and, where appropriate, prepare them for practice in or promotion to supervisory or management posts.

### The nature of residential child care

Residential child care is undoubtedly a skilled, challenging, complex and highly responsible undertaking. For a variety of reasons, including shrinkage of numbers of children placed in the sector, legislative change, increase in outreach work and the impending National Care Standards, the complexity of the work has increased over the last few years and will continue to increase. Good basic care, although essential and, unfortunately, not always achieved, is not enough. Residential child care staff need to be equipped with the knowledge, attitudes and skills to:

- understand the potential of the milieu in which they are working
- provide safe care and to help children and young people over-come the trauma of past abuse
- understand child and adolescent development, needs and rights
- help children move in and move on well
- promote their education
- help them overcome health problems and learn about healthy lifestyles
- work in partnership with children and young people's families and their local communities
- promote equality and understand and value diversity
- help children overcome, or cope better with, the difficulties and disabilities that led to their admission to residential care.

<sup>&</sup>lt;sup>28</sup> SQA data for March 2001, relating to all staff undertaking SVQs not just residential child care staff, shows that 44% registered for Care Level 3, 18% registered for Promoting Independence Level 3, 11% registered for Care Level 4 and 3% registered for Caring for Children and Young People Level 3 have so far achieved these awards. The latter 2 awards are relatively new.

Residential child care is not yet widely acknowledged as a profession. Given the need for residential child care workers to work knowledgeably, skilfully and confidently with a wide range of professionals, aspiring to professional status is not overambitious or unachievable. It is a necessity, albeit that it will not be immediately achieved.

In addition to thorough knowledge and expertise in all these areas, residential child care managers need both general managerial skills, managerial skills specific to residential child care such as development of good, consistent and committed teamwork and management of shift working and rotas, and to be leaders modelling and inspiring excellent child care practice from their staff.

Residential child care is heterogeneous. Units and schools provide for a wide range of children and young people, with different, sometimes unique, difficulties and disabilities, for varying periods of time, with or without educational provision, and on a full-time, term-time, shared care or respite basis. The care provided may be underpinned by a variety of different approaches, theoretical frameworks and ethical or religious beliefs. This variety, provided it is safe and child-centred, provides choice and the possibility of pioneering innovations. It challenges complacency and uniformity. There is a danger that an inflexible qualifications framework could reduce choice and innovation and lead to unhelpful similarity between residential environments.

We particularly noted in the audit:

- the significant number of staff with nursing qualifications in residential units for children with disabilities. Some of them were in designated nurse posts, others were in care posts but a nursing qualification had been seen as desirable or essential for the post. There are probably a relatively small number of children who, because of chronic, possibly terminal, illness or severely disabling conditions, have specific and complex nursing needs. It is probably essential that there are nurse posts in their establishments or on call to them. Some of these establishments will previously have had dual registration. There are other establishments where nursing qualifications are not essential but where it may be helpful, or at least not disadvantageous, for some staff to hold nursing qualifications. These establishments could be identified by the Scottish Commission for the Regulation of Care (SCRC).
- a significant number (190 6.4%) of staff hold relevant higher education qualifications, e.g. teaching, community education, youth and community, other relevant degrees, or the Advanced Certificate in Residential Child Care. We know that the knowledge and skills these staff bring to the workforce are valued by their employers. There is a strong case for them not to have to start again on the qualifications ladder and that some kind of "fast track" or "emergency" bridging qualification is developed to retain them in the workforce. A number of organisations would like to be able to continue recruiting such staff alongside, or indeed instead of, staff with vocational qualifications. Their case is both that this provides a breadth of relevant knowledge and skills in the workforce and that they are more likely to recruit staff of good intellectual calibre. Consideration should be given to allowing organisations to continue recruiting such staff on a trainee basis until they achieve a fast track qualification.

- Interesting and unique qualifications are certificates, diplomas and degrees in Curative Education, available at Aberdeen University (Northern College), and developed and supported by Camphill/Rudolf Steiner. We have not considered the curricula in depth but there appears to be a number of aspects which would not be dissimilar to the HNC or DipSW curricula. We hope that it will be possible for the SSSC to work with Camphill/Rudolf Steiner and Aberdeen University (Northern College) to achieve a recognised residential child care qualification which both maintains the Steiner approach and philosophy and meets registration requirements.
- The diversity of functions and the particular difficulties of some of the children and young people placed, may lead the Scottish Commission for the Regulation of Care (SCRC) to consider that particular units or schools should be staffed with a more highly qualified workforce than the minimum. Examples of this might be secure units or units working with young people who are sexually aggressive or have psychiatric conditions.

### The historical context

The debate about training needs in residential child care is not a new one – it has gone on for at least the last 150 years. In the period since the Second World War the necessity of providing training courses specifically for residential child care workers was recognised and qualifying courses were established. The initial content was "fairly domestic and practical coupled with the study of normal growth, development and health of children. Teaching on courses was gradually extended to cover more detailed study of very young children and adolescents and also some study of disturbed and maladjusted children."<sup>29</sup> By the late 1960s a rethink had occurred. The move towards genericism in fieldwork led to a strong lobby for genericism in training. "The case for integration [of training of field and residential workers] rested on the conviction that training for residential work would gain strength by sharing with more established and more substantial provision of training for field social work. ... Training together would promote parity of esteem between residential and field worker which, in turn, would facilitate co-operation between them on the job and lower barriers between settings .... (The) claims of residential workers to recognition as social workers would gradually be realised." <sup>30</sup>

Unfortunately, the Certificate of Qualification in Social Work (CQSW) did not achieve this aspiration as far as residential child care workers were concerned: "This merger of interests ... has resulted in the submerging of group care practice in a larger more generalist field dominated by a social services perspective. This has resulted in the loss of specialist teaching that specifically refers to the health care, educational, recreational, counselling and caring needs of the children." <sup>31</sup> Additionally, given the numbers of unqualified staff who required training, it was deemed to be impractical

<sup>&</sup>lt;sup>29</sup> Barr, H., *Perspectives on Training for Residential Work*, CCETSW, London (1987)

<sup>&</sup>lt;sup>30</sup> Barr, H. (1987) Op cit

<sup>&</sup>lt;sup>31</sup> Ainsworth, F., The *Training of Personnel for Group Care with Children*, in Ainsworth, F. & Fullcher, L. (eds), *Group Care for Children, Concepts and Issues*, Tavistock (1981)

for all of them to gain a full qualification, even though this was expected for field social workers. Consequently, a new qualification, the Certificate in Social Service (CSS) emerged in the 1970s. The CSS was criticised as divisive and of lower status than the COSW, although some residential child care workers and managers considered it was better than the CQSW at equipping them for the tasks facing them. By the early 1990s, ironically at a time when CSS was beginning to achieve greater acceptance as on a par with COSW, both were abolished and a new generic qualification, the Diploma in Social Work, introduced. By 1992, when Another Kind of Home <sup>32</sup> was written, a new type of vocational qualification had also emerged, the SVQ in social care which was primarily based on evidencing existing knowledge rather than gaining new knowledge. In order to ensure an adequate knowledge base this was to be combined with the Higher National Certificate in Social Care. Neither qualification was specific to child care, although both had a group care focus (subsequently, the SVQ3 "Caring for Children and Young People" was approved). The continuing high numbers of unqualified staff again led to a situation where it was deemed impractical for the majority of staff to gain a professional qualification and it was expected that the majority of basic grade staff would only achieve these vocational qualifications. Even this modest expectation has proved elusive and parity of esteem with field social work is probably little closer to being achieved than it was 30 years ago.

### **Effectiveness of qualifying courses**

There is very little research available into the appropriateness and effectiveness of different qualifying courses for residential child care workers. What there is relates mainly to the Diploma in Social Work. *Readiness to Practice* <sup>33</sup> looked at how well Diploma in Social Work students were prepared for practice. At the point of qualification, over 80% said that they were adequately or well prepared to work with children and families. However, when particular work settings were considered, only 43% said that they were either badly prepared to work in residential child care, the other 56% said that they were either badly prepared or that this aspect of work was not included in their course. Some graduates of the Residential Child Care Initiative (RCCI)<sup>34</sup> in England were considerably more positive about their experiences of qualifying education, although a number reported feelings of disempowerment and demoralisation once they returned to the workplace. Nevertheless, this initiative led to a considerable increase in the proportion of qualified staff in unit manager and depute unit manager positions and appeared to increase retention of qualified staff. <sup>35</sup>

The fact-finding exercise undertaken by the Scottish Executive prior to establishment of SIRCC found that Diploma graduates and students working in residential child care

<sup>&</sup>lt;sup>32</sup> op cit (1992)

<sup>&</sup>lt;sup>33</sup> J. Triseliotis & P. Marsh, *Readiness to Practice*, CRU (1996)

<sup>&</sup>lt;sup>34</sup> The RCCI was a government funded scheme whereby residential child care workers (mainly managers) were seconded on to DipSW courses and the curriculum was adapted towards their learning needs.

<sup>&</sup>lt;sup>35</sup> See, for instance, Julie Kent & Chris Payne, *After The Residential Child Care Initiative – What Next?*, NISW/De Montford University (2000); Dione Hills & Camilla Child, *Leadership In Residential Child Care: Evaluating Qualification Training*, John Wiley (2000)

were often disappointed in the curriculum of the DipSW, and they had also experienced "anti-residential child care views" from some of their tutors. There was usually a shortage of residential child care placements in spite of the recommendations in *Another Kind of Home* that Diploma students "should have at least one assessed group care placement." <sup>36</sup> Nevertheless, most wanted to see the Diploma retained as a qualification for residential child care workers, provided the curriculum could be made more relevant, as they feared that any alternative residential child care qualification would not have the status of the Diploma. The development, by SIRCC, of the BA/Diploma in Social Work with a residential child care pathway aimed to address these criticisms and provide a course which residential workers would find both relevant and supportive.

We have been unable to find any research concerning the effectiveness of the HNC in Care for preparing staff to work in residential child care. We are aware that employers have mixed views about its effectiveness and it is often alleged that standards vary considerably between the different colleges in Scotland offering the course. The HNC courses provided by SIRCC have adapted the curriculum, as far as allowed and achievable, towards residential child care – the option of a "residential child care pathway" is not one that currently exists within the HNC. Our main concern about the HNC is not that it cannot prepare residential child care workers for some of the tasks they will undertake, but that the level of the course and the time students study on it gives insufficient preparation. It was striking, when we were developing the BA/DipSW with a residential child care pathway, which is a 3 year fulltime course, how much relevant and important material had to be left out. It is, therefore, evident that the HNC can only start the process of fully equipping staff for their complex and challenging roles.

Research concerning SVOs is also rare. One study, concerning group care workers but not specifically those in residential child care, found that progression through the NVQ system (at level 2) promoted an appreciation of the concept of good practice and a willingness actively to promote this in the workplace. It encouraged workers to reflect on the appropriateness of their previous and current practice and to deal positively with new and unfamiliar situations. However, there was overlap between the highest self-efficacy scores of the non-NVQ experienced groups and the lowest self-efficacy scores in the NVQ experienced groups. "Achievement of a National Vocational Qualification appears to be a good but not necessarily conclusive indicator of competent practice." <sup>37</sup> One small study <sup>38</sup> found that most residential child care staff did not believe they had learned anything new and did not believe that gaining an SVO had made any difference to their practice. They experienced the process as mechanistic and repetitive, geared towards evidencing, repeatedly, what they already knew, rather than in any way developing their knowledge and practice. Given that SVO is an assessment system designed to assess the current competence of the candidate, the fact that it was not experienced as developmental is perhaps

<sup>&</sup>lt;sup>36</sup> op cit (1992)

<sup>&</sup>lt;sup>37</sup> Sargent, A.V., An Exploratory Study of the Progression Towards National Vocational Qualifications on the Occupation Knowledge and Core Practice of Social Care Workers, Social Work Education, 19 (6) (2000)

<sup>&</sup>lt;sup>38</sup> Heron, G., *The Effectiveness Of Scottish Vocational Qualifications As A Method Of Qualifying Residential Staff In Children's Homes*, Unpublished PhD Thesis, Strathclyde University (2000)

unsurprising. However, the lack of any significant learning was the dominant factor underpinning the range of negative views expressed by staff. The SVQ considered in this research, "Promoting Independence level 3", has since been superseded by "Caring for Children and Young People level 3" which should be more relevant to residential child care workplaces. This may increase candidates' enthusiasm but it does not overcome the fact that SVQs are not, mainly because they are not intended to be, educational or developmental. Some employers have provided considerable amounts of "underpinning knowledge" training through short courses to try to overcome this deficit, and, indeed, SIRCC has also done this. However, there are few if any quality assurance mechanisms in place for short courses and there is a danger that such short courses fragment knowledge, mirroring the inherently fragmented nature of SVQ performance criteria. We have strong reservations about the likely effectiveness of SVQs as "qualifications" for residential child care workers, particularly if they are not preceded by formal theoretical learning.

Cost has undoubtedly been a factor in decision-making concerning the range of qualifications which have been available to those residential child care workers who have had any qualifying opportunities at all. It is regrettable that the fourth most prosperous country in the world (taking the UK as a whole) has been unable or unwilling to achieve anywhere near a fully qualified residential child care workforce. This compares adversely with much of Northern Europe where qualifications are often specialist in social paedagogy and at degree level. Nevertheless, the overall picture in Europe is not utterly dissimilar to Scotland. "Despite improvements in training, most countries encounter at least some difficulties in attracting and retaining suitable residential child care staff. In part this reflects relatively poor pay and working conditions and in particular the stresses and strains that the job can bring. The implications, whatever the reasons, are serious. In particular, they can mean considerable reliance on untrained and unqualified staff, as well as rapid staff turnover and consequent instability for the home, the workers and the young people involved."<sup>39</sup>

It is important that residential child care reflects general educational developments in society as a whole. In Scotland today, 31 % of school leavers enter higher education and 18 % further education.<sup>40</sup> Others take up such opportunities in subsequent years or as adults.<sup>41</sup> It is likely that these figures will continue to increase. Not only do these national trends, and the complexity of their work, demand that residential child care workers enter the workforce with relevant qualifications, it is unlikely that they will be able to develop educationally rich environments for the young people for whom they care, encouraging and supporting them to achieve qualifications in line with the population as a whole, if they remain unqualified.<sup>42</sup>

<sup>&</sup>lt;sup>39</sup> Madge, N., Children And Residential Care In Europe, NCB (1994)

<sup>&</sup>lt;sup>40</sup> Leaver Destinations from Scottish Secondary Schools 1996/7 to 1998/9, Scottish Executive (2000)

<sup>&</sup>lt;sup>41</sup> Paterson, L. in *Trends in Higher Education Participation in Scotland*, Higher Education Quarterly, Vol. 51 (1997) states that 38% of under 21 year olds entered higher education in 1993.

<sup>&</sup>lt;sup>42</sup> e.g. Berridge, D., Brodie, I., Ayre, D., Henderson, B., & Wenman, H., *Hello -Is Anybody Listening?: The Education Of Young People In Residential Care*, University of Luton (1996) found that unqualified residential workers felt patronised by school staff, ignorant of the curriculum, and unsure how to approach schools whereas qualified staff felt much more confident in these areas.

It is 10 years since *Another Kind of Home*<sup>43</sup> was published. It has undoubtedly had a very widespread and significant influence on residential child care in Scotland but it has not yet been sufficiently influential as far as achieving a qualified workforce is concerned. Its qualification recommendations remain relevant, but, arguably, rather modest given the increasing complexity of the residential child care task. It is important that lack of achievement of these recommendations is not used as an excuse to lower aspirations and standards.

<sup>&</sup>lt;sup>43</sup> op cit (1992)

### 6. PROPOSALS TO THE SCOTTISH EXECUTIVE AND THE SCOTTISH SOCIAL SERVICES COUNCIL CONCERNING QUALIFICATIONS

The following are general proposals but we hope there will be some specific exceptions agreed to them by the SSSC as outlined in section 3 above. There is a necessary balance to be achieved between desirable speed of achieving a qualified workforce and establishing qualifications of a type and level that will actually improve the services provided. There seems little point in setting the qualifications at a particular level just so that a "qualified" workforce can be achieved quickly if this is going to make no significant difference to standards – the very reason why a qualified workforce was wanted in the first place. On the other hand, it is important for children and young people currently in residential child care and those who will enter it in future years that firm timescales are set within which the proportion of qualified staff grows at a significantly increasing level year on year.

### An optimum framework

We consider that it would be responsible and entirely justifiable, for the reasons outlined above, that the only recognised residential child care qualification, in most settings, would be at degree/diploma level, be 3 - 4 years full-time or equivalent part-time, have a substantial, dedicated residential child care curriculum, have relevant, well-assessed practice placements, and flexible but robust APEL arrangements to allow workers with other qualifications to enter the workforce. Whilst it is very early days in terms of measuring effectiveness, the BA/DipSW with a residential child care pathway is designed to meet this specification.

We are, however, realists, and we recognise that, for the time being at least, the optimum proposal is unlikely to be practicable or achievable. Nevertheless, a stepwise strategy for achieving a qualified workforce, whereby the required level of qualifications is gradually ratcheted up, would be reasonable. The fact that virtually all the places on SIRCC's direct entry BA/DipSW with a residential pathway courses are full in their first year is encouraging. Once the likely expansion of courses needed to achieve the SSSC's initial qualifications framework are firmly in place, a strong platform will be created from which a degree/diploma level entrance requirement could become realistic and mandatory in the foreseeable future.

The above factors, this qualifications audit, the recommendations in *Another Kind Of Home*<sup>44</sup> and our own experiences, have led us to the following interim proposals:-

That SVQs, although they may have a part to play in residential child care, should not be stand-alone qualifications. Our reasons for reaching this conclusion are:

<sup>&</sup>lt;sup>44</sup> op cit (1992)

- i) They are an assessment system and, therefore, in themselves cannot provide the reflective, critical, deep learning that is required by residential child care staff.
- ii) They are post-entry qualifications and the goal should be pre-entry qualifications.
- iii) In the last decade the majority of employers have not been sufficiently successful in getting staff through SVQ3 and have hardly succeeded in getting SVQ4 off the ground.
- That the minimum, pre-entry, qualification for basic grade staff should be HNC and that at least 1/3 should have a degree/diploma level qualification. The ideal position would be a fully degree/diploma level qualified workforce.
- That the minimum pre-entry qualification for depute unit managers, unit managers and heads of care should be a degree/diploma level qualification.
- That once HNC holders are in post, their theoretical and practical knowledge should be consolidated and evidenced by achievement of the SVQ3 or 4.
- That once depute unit managers, unit managers and heads of care are in post, their management skills and knowledge should be deepened, consolidated and evidenced by achievement of a management qualification such as a Registered Managers Award.

Some suggested implications of these proposals are outlined in more detail below.

### An interim framework

For the present, we consider that the following interim proposals are justified and realisable (provided a number of urgent measures are put in place – see Section 7 below) and are likely to raise standards in residential child care. The proposals have varied timescales set against them. The shorter timescales would be very challenging. It is important that timescales are achievable but that staff qualify at a much greater rate than is currently the case.

#### Proposals for New Entrants

1) Within 3-5 years of the publication of the qualifications framework, the minimum qualification for entering the residential child care workforce will be an HNC, or the HNC modules required for a joint HNC/SVQ3 award. This would preferably be an HNC with substantial dedicated residential child care teaching and also with some tightening up of placement requirements. Once in the workforce, new entrants would be required, as part of their probationary period, to achieve an SVQ3 or 4 within perhaps 18 months to 2 years of appointment. Nursing, curative education qualifications or other special needs qualifications should be recognised as minimum entry qualification in certain workplaces.

2) It will also be important to create a cadre of basic grade staff who have a greater depth of knowledge, skills and understanding, both to strengthen practice and to provide future candidates for management posts. Therefore, at least 1/3 of practitioner posts should be designated senior practitioners and a DipSW should be

the required entry qualification for these posts. Where such a post falls vacant, the replacement must hold a DipSW. This requirement should be met within 5 - 7 years of publication of the qualifications framework.

3) If recruitment of qualified staff proves impossible, and/or employers are attracted to the idea of developing "home grown" staff e.g. a graduate entry scheme, or entry scheme for ethnic minority staff, permission could be sought from the SSSC to develop a trainee/apprenticeship scheme. Trainees would have to be supernumery, would work to reduced job descriptions agreed by SSSC and would be required to quickly start qualifying courses on a day release/part-time/distance learning basis. If they were studying for an HNC/SVQ3 this would need to be completed within 3 years of appointment or a DipSW<sup>45</sup> within 5 years of appointment. In the latter case, their supernumary status might be reviewed after the first year of their course had been successfully completed.

4) The qualification for Heads of Care and Unit Managers, appointed after the date of publication of the framework, should be DipSW; lead in time might be from 0 - 3 years.

5) Likewise the qualification for Depute Unit Managers should be DipSW although we realise that this will take a longer lead in time of perhaps 5 - 7 years.

6) Heads of Care, Depute and Unit Managers should complete a management qualification such as the Registered Managers Award within 2 years of appointment unless they already have a management qualification recognised by the SSSC.

7) There may be occasions, once the framework is in place, when it still proves impossible to attract DipSW qualified staff to management posts. It would not be in the interests of the units or schools to remain for long periods without managerial staff. A system would have to be in place whereby the SSSC allows employers, in these circumstances, to employ managers with HNC/SVQ3 or 4, provided this was either on a temporary contract or the manager was of sufficient calibre to achieve a DipSW and was supported to do so within a specified timescale. Timescales for also achieving a management qualification could be extended in these cases.

#### Proposals For Existing Staff

- 1) We consider the minimum qualification for existing staff should be both HNC in Social Care and SVQ3 or the joint HNC/SVQ3 award. We consider a timeframe of 5 8 years should be established within which staff would be required to achieve these qualifications. Nursing, curative education or other special needs qualification should be recognised as minimum qualifications in certain workplaces.
- 2) Positive consideration should be given to the creation of a "fast track" qualifying programme for staff with teaching, community education/youth and community or

 $<sup>^{45}</sup>$  These proposals assume the DipSW remains a 2 – 3 year course. If it becomes a 4 year honours degree, then timescales will need to be extended. They also assume that the option of a residential child care pathway remains, or is strengthened by, for example, developing some dedicated residential child care competencies.

nursing qualifications, or "relevant" degrees to achieve a DipSW. This could perhaps be completed within 18 months - 2 years by distance learning. Where they are already degree holders, it should not be required that they obtain a second degree. The staff involved would need to become qualified within 4 - 5 years of the course being established.

- 3) As indicated above, at least 1/3 of practitioner posts should be designated senior practitioner posts with the requirement of DipSW. Where existing staff fill these posts, they should already be DipSW holders or gain a DipSW within 5 7 years of the publication of the framework.
- 4) Heads of Care and Unit Managers should be required to have a DipSW within 5 7 years of publication of the framework and Depute Unit Managers within 7 – 10 years, and a management qualification within 2 years of achieving the DipSW or the publication of the framework, whichever is soonest.

### Other factors of which account needs to be taken

In addition to sheer weight of numbers described above, the following are some of the other factors which will need to be taken account of if a fully and appropriately qualified workforce is to be achieved and retained:

- The qualifications framework put in place needs to be one that will demonstrably improve standards in residential child care and command support from service users, the general public and staff. Research into the effectiveness of qualifications (both those currently available in Scotland and social paedagogy qualifications in Europe) needs to take place as a matter of urgency, and the framework should be reviewed in the light of research findings.
- Homes and schools need to continue to be fully and appropriately staffed whilst other staff are qualifying, and children and young people need to receive adequate consistency and continuity. Current staff will need to be released for qualifying training in a carefully planned and phased way.
- The diversity of job titles and of employment types/conditions may make matching posts and qualifications complex and could, at worst, lead to attempts to evade qualification requirements.
- Greater flexibility and determination to achieve qualifications may be required from some existing staff, e.g. through going part-time or taking leave of absence.
- Additional resources will need to be found to employ temporary staff, or pay for overtime, while unqualified staff gain a qualification. Additional resources are also highly likely to be needed to further develop qualifying education, practice placements and SVQ assessment and verification.
- Some existing staff may not be motivated or may not be of sufficient calibre to achieve a qualification. Others will require pre-HNC courses to develop their confidence and knowledge to the level where they can undertake an HNC.
- There will be very considerably increased demand for practice placements. Actual and potential practice teachers and link supervisors may be unable to meet demand for placements for BA/DipSW and HNC students whilst, often, at the same time being required to be workplace SVQ assessors. There may be

increased need for dedicated practice teachers and dedicated peripatetic SVQ assessors.

- Residential child care staff need varied opportunities to undertake learning through courses and methods which help them feel competent, confident and maximise their chances of obtaining a qualification. This will include availability of full-time, part-time, distance and workplace based courses and methods. Restricting staff to only one method may lead to high drop out and failure rates.
- Current pay and conditions are unlikely to attract and retain qualified staff and should be reviewed.
- Greater consideration needs to be given to the integration, deployment, supervision, support and post-qualifying training and development of qualified workers such that they are retained, achieve job satisfaction and the quality of services is enhanced.
- The media portrayal of residential child care may hinder recruitment and retention.

The above factors may affect the time needed to achieve a qualified workforce; they should not be used to dilute the requirements for qualifications or to reduce the level at which qualifications should be set.

### 7. IMPLICATIONS OF THE PROPOSALS

In addition to the implications of numbers needing to qualify and at what levels, and the timescales in which they will have to achieve qualifications, there are many currently unknown variables which will affect both the necessary provision of courses and staff replacement arrangements and costs. These include:-

- How many workers permanently leave the residential child care workforce each year
- Whether the workforce as a whole will expand or contract
- How many current employees are unable or unwilling to commence or achieve a qualification
- What proportion of new recruits currently have likely to be recognised qualifications
- ✤ Whether the need to become qualified, and subsequently being qualified, will assist or reduce staff retention
- Whether currently unqualified staff will leave the workforce at a consistent rate
- ✤ How many existing unqualified staff are in the 50 65 age band, many of whom will not need to undertake a qualification. Unfortunately, we did not ask this question in the audit.
- How many staff with, or who achieve, HNC/SVQ3 will choose or be required to achieve DipSW i.e. "double qualifying". Although, where staff clearly have the capacity to undertake a BA/DipSW, it makes little sense for them to have to undertake an HNC/SVQ3 first.

Whilst the establishment of a qualifications framework cannot wait for answers to these questions, establishing answers as quickly as possible, through statistical/research projects would be very helpful.

At a very rough and ready estimate, if the qualification proposals in this report are accepted, dependant on timescales, we consider that:

- HNC provision for current and intending residential child care workers will need to increase twice or 3 times.
- BA/DipSW with a residential pathway provision for current and intending residential child care workers will need to increase between 4 and 5-fold.
- Existing and new residential child care workers will need to register for SVQs at twice or 3 times the rate they are doing currently and then achieve the award in an average of 1 year.

We intend, once the qualifications framework and timescales are announced, to visit all employers and work out with them the implications for their workforce. This will provide a better picture of the scale of qualifying courses and assessment arrangements required. The audit and the proposals we have made indicate the need for:

- i) Major, and probably regular, recruitment campaigns nationally by the Scottish Executive and locally by employers, colleges and universities to attract potential residential child care workers.
- ii) Considerable expansion of HNC places/courses available for prospective and actual residential child care workers. This could probably be achieved both by an expansion in SIRCC run courses and the publication by SIRCC and SQA of HNC course materials adapted for residential child care workers, which could be taken up by local FE colleges.
- iii) Establishment/development of pre-HNC courses, possibly at GSVQ or access 3 level, to enable some current staff with low or no educational qualifications to subsequently successfully achieve HNC.
- iv) Significant expansion of SVQ opportunities such that they are provided by all residential child care employers and at a sufficient level and speed to allow the required number of staff to achieve SVQs in required timescales.
- v) Very major expansion of BA/DipSW with a residential child care pathway courses. This could probably be achieved both by the expansion of SIRCC courses, in particular distance learning, and the expansion of these courses to 2 or 3 other universities.
- vi) Development of a "fast track" DipSW with a residential child care pathway courses for existing staff, or new trainees, who are already qualified teachers or community education/youth and community workers or nurses, or who have a "relevant" degree. Given most candidates will already have a degree, this qualification would not necessarily need to be at degree level and could probably be achieved in 18 months 2 years by distance learning. This course could be undertaken by adaptation of, and expansion in numbers on, SIRCC's current courses.
- vii) Development of a Registered Managers Award or other relevant management qualification.
- viii) Recognition that the provision of recruitment campaigns and courses/assessment opportunities is only the tip of the iceberg as far as achieving and retaining a qualified workforce is concerned much greater attention will need to be given both to how staff are released and supported through qualifying training and how they are subsequently remunerated, deployed, supported, developed and helped to gain job satisfaction.

### **8. CONCLUSIONS**

The task of achieving a fully qualified residential child care workforce remains large and daunting. Achieving it will require doggedness, determination and commitment, an ambitious strategy and detailed plan, and considerable additional resources. It will be essential for Ministers and the Scottish Executive, the SSSC, the SCRC, employers, employee organisations, service users' organisations, colleges, universities, SQA, SHEFC, SFEFC, training organisations and SIRCC to work together with flair, imagination, speed and enthusiasm, to achieve desired outcomes. A first step towards this outcome might be a "Residential Child Care Summit", convened at the same time the qualifications framework is launched, which would involve representation from the above groups and which would hammer out the strategy for achieving a qualified workforce. Although achievement will undoubtedly be difficult, SIRCC staff are both optimistic and determined that, finally, children and young people in residential care will get the qualified staff that they deserve.

### **APPENDIX 1**

### **RESIDENTIAL STAFF QUALIFICATIONS AUDIT**

Please complete an individual form for each member of Care Staff, including on-site managers, but excluding teaching, clerical, domestic or manual staff, employed either permanently or temporarily in the unit or school on January 1<sup>st</sup> 2001 (i.e. not just those on duty on that day). Do not include any agency staff but do include casual staff who were on duty on that day. Please photocopy additional forms if we have not supplied sufficient numbers.

We are wanting to collect information both about relevant qualifications e.g. DipSW, HNC in Social care, SVQ in care and also, particularly for those who do not have relevant qualifications, about other qualifications which will show the general level of education they have achieved and, therefore, the pathways they might need to follow to achieve a relevant qualification.

#### NAME OF UNIT/SCHOOL

#### AUTHORITY/AGENCY

#### NAME OF STAFF MEMBER

<u>POSITION (please tick the nearest description which applies</u>. Only tick "other" if the tasks of the post are nowhere near any of the descriptions)

HEAD OF CARE	[based of	on-site]			 
		ER/LEADER/OIC/ S			
DEPUTE UNIT/H	IOUSE	MANAGER/LEADI	ER/OIC		 
SENIOR RESIDE	ENTIAL	CARE WORKER			 
RESIDENTIAL C	CARE W	ORKER/CO-WORI	KER		 🗆
		٤			
OTHER (please st	tate)				 🗆
u.	ŕ				
TYPE OF EMPI	<b>JOYME</b>	ENT			
PERMANENT		TEMPORARY		CASUAL	
HOURS					

FULL-TIME DART-TIME (STATE NUMBER OF HO	URS)□
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P.T.O.

### PLEASE COMPLETE THE CHART AS FOLLOWS:

In the "result" column, GQ = gained qualification, UQ = currently undertaking qualification, WF = withdrawn or failed qualification. A blank "result" box indicates that the staff member has never started that qualification.

QUALIFICATION	RESULT	QUALIFICATION	RESULT	STATE SUBJECT(S) AND/OR LEVEL	
DipSW/CSS/CQSW		Other Social work/child care			
HNC in Social Care		qualification			
SVQ 4 in Care		Degree			
SVQ 3 in Care		Masters Degree			
SVQ 3 Caring for Children and Young		Nursing			
People		Teaching			
		Community Education			
SVQ 3 Early Years Care and Education		Youth and community			
		Management			
NNEB		HND			
CRCCYP					
OTHER QUALIFICATIONS/AWARDS		RESULT	Please complete this section if all above boxes are blank or marked WF. Include any school or post school qualifications e.g. standard/higher grades, SVQ level 2, access courses. State subject(s) and level.		

### **APPENDIX 2**

## ORGANISATIONS WHICH PROVIDE RESIDENTIAL CHILD CARE UNITS OR SCHOOLS IN SCOTLAND

The following list contains the names of the local authorities, voluntary/independent and private organisations that own residential child care units and/or schools and which were contacted as part of the qualifications audit. Some individual units and schools were not visited in each of the three categories. Three local authorities are not included as they either do not own a residential child care facility or have contracted out that service to a voluntary organisation.

East Dunbartonshire East Lothian Falkirk Fife Glasgow City Highland Inverclyde Midlothian North Ayrshire North Lanarkshire Orkney Perth and Kinross Renfrewshire Scottish Borders Shetland South Ayrshire South Lanarkshire Stirling West Dunbartonshire West Lothian	Local Authorities	Aberdeen City Aberdeenshire Angus Argyll & Bute Clackmannanshire Dumfries and Galloway Dundee City Edinburgh City East Ayrshire
MidlothianNorth AyrshireNorth LanarkshireOrkneyPerth and KinrossRenfrewshireScottish BordersShetlandSouth AyrshireSouth LanarkshireStirlingWest Dunbartonshire		
North LanarkshireOrkneyPerth and KinrossRenfrewshireScottish BordersShetlandSouth AyrshireSouth LanarkshireStirlingWest Dunbartonshire		
Orkney Perth and Kinross Renfrewshire Scottish Borders Shetland South Ayrshire South Lanarkshire Stirling West Dunbartonshire		
Perth and Kinross Renfrewshire Scottish Borders Shetland South Ayrshire South Lanarkshire Stirling West Dunbartonshire		
Renfrewshire Scottish Borders Shetland South Ayrshire South Lanarkshire Stirling West Dunbartonshire		5
Scottish Borders Shetland South Ayrshire South Lanarkshire Stirling West Dunbartonshire		
Shetland South Ayrshire South Lanarkshire Stirling West Dunbartonshire		
South Ayrshire South Lanarkshire Stirling West Dunbartonshire		
South Lanarkshire Stirling West Dunbartonshire		
West Dunbartonshire		
		Stirling
West Lothian		West Dunbartonshire
		West Lothian

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Voluntary, Independent	Aberlour
and Trust Providers	Archdiocese of Glasgow
	Autistic Society
	Balnacraig School
	Barnardo's
	Belmont Centre
	Cademuir School
	Camphill Rudolf Steiner
	Capability
	Carolina Trust
	Church of Scotland
	Dean and Cauvin
	Donaldson's School
	East Park
	Falkland School
	Harmeny School
	Hillside School
	Kibble
	Kilsyth, Enable
	Linn Moor School VSA
	Moor House
	NCH
	New School
	Oakbank School
	Open Doors
	PHEW
	Quarriers
	Raddery School
	Rossie School
	Royal Blind School
	St Mary's Kenmure School
	St Philips School
	St John's Springboig
	Seamab School
	SENSE, Newark
	Snowdon School
	The Good Shepherd
	r · · · · · · · · ·
Private Providers	Closeburn
	Orca House
	Knockenshang
	Parkview School
	Redgorton School
	6
	Starley Hall
	Woodlands School

Price: £5 plus £1 postage and packing (UK).

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