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Residential Child Care 2007 Qualifications Audit

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This audit is the product of the efforts and leadership of a number of key people, without whom the detail and credibility of the data would not be nearly as robust. Our many thanks go to Roy Wilson, Database Co-ordinator; Monica McMahon, Office Assistant; Michele Goldie, Short Course Assistant; Andrew Hosie, Lecturer; and Sandy Moyes, National Office Administrator.

We especially extend our appreciation to staff working in residential child care. A great proportion of those working in this sector throughout Scotland took time to complete and return the questionnaires despite the many other pressing demands on their time.

Thanks to the collective work of everyone involved, we are now further on in determining the qualification levels and degree of change embarked on over the past three years. This is vital information in determining the pace and way forward for the sector, and we are grateful to all those who have contributed in developing our knowledge about this important context.

Jennifer Davidson
SIRCC Director

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In recent years there has been a drive to develop a fully qualified residential child care sector in Scotland. In 2003 the Scottish Social Services Council (SSSC) announced the baseline qualifications for residential child care¹ staff and set down a target for attaining it. This qualifications framework was subsequently reviewed and expanded in 2004. The Scottish Institute for Residential Child Care (SIRCC), commissioned by the Scottish Executive, has previously undertaken two inquiries into the qualification levels of the residential child care workforce in Scotland. The first Qualifications Audit (Frondigoun, Maclean, Hosie & Kendrick, 2002) was undertaken before the SSSC's initial qualification framework was known and the second (Hunter, Hosie, Davidson & Kendrick, 2004) was based on it.

The previous qualifications audit (Hunter et al., 2004) reported that 18% of residential child care staff were fully qualified in accordance with the SSSC's qualification criteria (SSSC, 2004). The report forecast that the number of fully qualified staff would rise to 29.1% if all qualifications being undertaken were achieved. The purpose of this current audit is to determine whether levels of qualified staff have risen and to identify qualification trends throughout the residential child care sector in Scotland.

¹ Residential child care is understood in this report to mean residential child care services provided by Scottish local authorities and the voluntary and private sectors. This includes residential schools but does not include boarding (public) schools or boarding hostels.

2. The Residential Child Care Workforce

Data collated by SIRCC shows that there are currently 4610 staff employed in the residential child care sector in Scotland. This is 243 more staff than in 2004, a 5.3% increase (Hunter et al, 2004). Of these 4610 staff, 3742 are full-time and 868 are part-time. Local authorities employ 1890 staff (40.9%), the voluntary sector employs 1919 staff (41.6%) and 801 staff work in the private sector (17.4%). The proportion of staff working in the private sector has increased considerably since 2004 when 4.3% of staff worked in the private sector (Hunter et al., 2004). In 2004, 46% of residential child care staff were employed in the local authority sector and 49.4% in the voluntary sector (Hunter et al., 2004). Scottish Government figures show that in 2006 there were 1988 members of staff working in local authorities in the residential child care sector (Scottish Executive, 2007b).

Since 2004 there has been an increase in the number of organisations providing residential child care. In 2004, 72 organisations offered residential child care. This has risen to 81 in 2007. There has also been an increase in the number of residential child care establishments. In 2004 there were 235 establishments. This has risen to 250 in 2007. Of these 250 establishments 55 (22%) are schools, 156 (62.4%) are care homes and there are 39 (15.6%) other establishments which include services such as respite care. The number of residents within each establishment ranges from one to 36 in care homes and two to 63 in residential schools (accommodated in smaller units) with one school having more children (132). In 2004 the number of residents per establishment ranged from one to 104 (Hunter et al., 2004).

As in previous audits, each organisation in Scotland offering residential child care was contacted by SIRCC. This took place in September 2006. Audit questionnaires were then sent to these residential care organisations with whom it had been agreed that an identified person would be responsible for organising the distribution and collection of questionnaires from the residential care homes and schools they operated. It was intended that every member of staff working within the care sector would complete a questionnaire (Appendix A). Link staff at SIRCC were identified in order to provide advice and assistance to residential child care organisations.

Completed questionnaires were entered into Statistical Package for Social Sciences (SPSS). Analyses of the results included identifying characteristics of the residential child care workforce such as age, gender and staff positions. Further analyses focused on determining the number of qualified staff and qualifications held or being undertaken by staff.

4. Results

4.1 Sample Characteristics

A total of 3330 questionnaires (72.2% of total workforce) was received by 30th April 2007. This return rate is comparable to the 2004 audit which had a 70.3% return rate. Questionnaires were received from all organisations. In the following analyses totals will not always add up to overall totals as not all information requested was provided by all respondents.

Of the 3249 respondents who provided this information 163 (5%) were registered managers, 520 (16%) were supervisors and 2566 (79%) were care workers. These proportions are virtually identical to those outlined in the 2004 audit: 5.3% managers; 15.2% supervisors and 79.5% care workers (Hunter et al., 2004). Approximately equal numbers of staff responding to the questionnaire worked in the local authority sector, 1415 (42.5%), and the voluntary sector, 1534 (46.1%). Fewer staff worked in the private sector, 381 (11.4%). In comparison, in the 2004 audit, 52% of responses were from local authorities, 43.7% from the voluntary sector and 4.3% from the private sector.

Of the 3157 respondents who provided details of contract status, 2741 (86.8%) have a permanent contract, 173 (5.5%) have a temporary contract and 243 (7.7%) work on a sessional basis. All but one of the sessional posts are held by care workers. The other sessional post is held by a supervisor. In the 2004 audit it was reported that 85.3% of staff held permanent posts, 6.8% held temporary posts and 7.9% held sessional posts.

Of those who provided information on gender (3260 respondents) a third, 1040 (31.9%) were male and two-thirds, 2220 (68.1%), female. These proportions of male and female staff were reflected across position (Table 1).

Table 1. Gender: Staff Position

Position	Male		Female	
	No. of Staff	%	No. of staff	%
Registered Manager	54	33.3	108	66.7
Supervisor	184	36.2	324	63.8
Care Worker	782	31.1	1733	68.9
Total	1020	32	2156	68

N = 3185

In the local authority and voluntary sectors approximately one third of staff are male and two thirds female (Table 2).

Table 2. Gender: Sector

Position	Male		Female	
	No. of Staff	%	No. of staff	%
Local Authority	437	31.2	964	68.8
Voluntary	459	31.0	1024	69.0
Private	144	38.3	232	61.7
Total	1040	31.9	2220	68.1

N = 3260

This finding is consistent with Scottish Government statistics which also indicate that 31.1% (684 individuals) of residential care staff members working in local authorities were male and 68.9% (1515 individuals) were female (Scottish Executive, 2007b). It is also consistent with 2004 audit findings for the local authority and voluntary sectors. A slightly different pattern emerged for the private sector. In the current sample there was a higher proportion of males (38.3%) in the private sector than in the local authority and voluntary sectors. The proportion of males working in the private sector has fallen, however, since the 2004 audit when there were equal numbers of male (50%) and female (50%) staff.

Overall the proportion of males working in the residential child care sector is higher than in local authority social work services as a whole where 15.7% of workers are male and are 84.3% are female (Scottish Executive, 2007b).

The mean age of the sample is 40.7 years (range 19-66 years). The age of the workforce has remained stable since 2004 when the mean age was 40.1 years (range 17-65 years). The proportions of staff reveal that the majority (37.2%) are aged between 25 and 39 years with another third (34.1%) aged between 40 and 49 years of age (Table 3).

Table 3. Staff Age³

Age	No. of Staff	%
16-24 years of age	207	6.6
25-39 years of age	1160	37.2
40-49 years of age	1065	34.1
50-59 years of age	573	18.4
60 plus	114	3.7
Total	3119	100

N = 3119

³ Age ranges categorised to correspond with the 2004 Qualifications Audit.

4. Results

Scottish Government statistics revealed that in local authorities, in 2006, 62.3% of staff working in residential child care were 40 years old or over (Scottish Executive, 2007b). In the current sample 56.2% of the workforce are 40 years old or over. The Scottish Government report concluded that the residential child care workforce was a relatively young workforce compared to local authority social work services as a whole in which 71.1% of staff were over 40 years old.

Table 4 shows that the local authority sector had the 'oldest' workforce with the highest proportion of staff (64.4%) 40 years or older. In the voluntary/independent and private sectors, however, around a half (51.3% and 43.9% respectively) were also aged 40 years or older.

Table 4. Staff Age: Sector

Age	Local Authority (%)	Voluntary / Independent (%)	Private (%)
16-24 years of age	50 (3.7%)	116 (8.4%)	41 (11.1%)
25-39 years of age	437 (31.9%)	556 (40.3%)	167 (45.0%)
40-49 years of age	511 (37.3%)	440 (31.9%)	114 (30.7%)
50-59 years of age	302 (22.0%)	228 (16.6%)	43 (11.6%)
60 plus	70 (5.1%)	38 (2.8%)	6 (1.6%)
Total	1370 (100%)	1378 (100%)	371 (100%)

N=3119

Questionnaires were received from all 81 organisations (but not all units) who provide residential child care in Scotland. Each organisation was categorised as one of eleven service types and it is worth highlighting at this point that while some organisations offer a range of services they were categorised by their key function only and that the following analysis was carried out on this basis.

Table 5. Service Type

Unit / School Type ²	No. of Staff	%
Residential Home (without Education)	1294	39.5
Residential Home / School (with Education)	704	21.5
Residential Home: Disability (without Education)	136	4.2
Residential Home / School: Disability (with Education)	480	14.6
Care Leavers	14	0.4
Respite Care	402	12.3
Secure Care	188	5.7
Close Support Unit	18	0.5
Young Homeless	9	0.3
Emergency Response	13	0.4
Residential Outreach	19	0.6
Total	3277	100

N = 3277

As is shown in Table 5, the majority of staff worked in one of four settings. Residential-only care settings [Residential Home (without Education)] employed the largest number of staff, 1294 (39.5%). The second highest proportion of staff, 704 (21.5%), worked in organisations offering residential and school services [Residential Home/School (with Education)]. The two other organisational types that accounted for a large number of staff were residential and school settings for children who have disabilities [Residential Home/School: Disability (with Education)], 480 (14.6%), and respite care, 402 (12.3%). Altogether these four service types accounted for 2880 (87.9%) people with 397 (12.1%) working in the seven other service types. Definitions of these services can be found in Appendix B.

Table 6 shows that the majority of staff working in residential-only care homes (80.7%) are within the local authority sector, whilst organisations offering residential and school services are largely provided by the voluntary sector (67.2%). The private sector is responsible for providing most of the remaining residential and school services (28.7%).

² Some organisations offer a range of services but have been categorised by their key function only.

4. Results

Table 6. Service Type: Sector

Unit / School Type	Local Authority (%)	Voluntary / Independent (%)	Private (%)
Residential Home (without Education)	1044 (80.7)	156 (12.1)	94 (7.3)
Residential Home / School (with Education)	29 (4.1)	473 (67.2)	202 (28.7)
Residential Home: Disability (without Education)	65 (47.8)	71 (52.2)	0 (0)
Residential Home / School: Disability (with Education)	20 (4.2)	460 (95.8)	0 (0)
Care Leavers	5 (35.7)	9 (64.3)	0 (0)
Respite Care	142 (35.3)	225 (56)	35 (8.7)
Secure Care	68 (36.2)	120 (63.8)	0 (0)
Close Support Unit	18 (100)	0 (0)	0(0)
Young Homeless	0 (0)	9 (100)	0 (0)
Emergency Response	0 (0)	0 (0)	13 (100)
Residential Outreach	0 (0)	0 (0)	19 (100)
Total	1391 (42.4)	1523 (46.5)	363 (11.1)

N = 3277

Scotland has been divided into four Learning Networks: North, South East, Tayforth, and West³ (Scottish Social Services Learning Network, 2007). The most densely populated of these is the West Learning Network and the majority of staff work in the West Learning Network, 1584 (47.8%) members of staff. In each of the North and South East networks there are 525 (15.8%) members of staff. A further 678 (20.5%) are employed in Tayforth network.⁴

Based on their main function the type of service offered can vary according to Learning Network (Table 7). In three of the Learning Networks (North, South East and West) staff are primarily employed in residential-only services. In Tayforth the largest number of staff work in residential and school settings. In North and South East networks the service employing the second greatest proportion of staff is residential and school services for children and young people with disabilities, 33.2% and 23.4% respectively. In Tayforth the second largest employer is residential-only services and in the West network it is residential and school services.

Table 7. Service Type: Learning Network

Unit / School Type	North (%)	South East (%)	Tayforth (%)	West (%)
Residential Home (without Education)	241 (46.8)	188 (35.8)	184 (27.6)	681 (43.4)
Residential Home / School (with Education)	15 (2.9)	74 (14.1)	295 (44.2)	320 (20.4)
Residential Home: Disability (without Education)	49 (9.5)	46 (3)	0 (0)	71 (4.5)
Residential Home / School: Disability (with Education)	171 (33.2)	123 (23.4)	19 (2.8)	167 (10.6)
Care Leavers	5 (1)	0 (0)	0 (0)	9 (0.6)
Respite Care	34 (6.6)	69 (13.1)	84 (12.6)	215 (13.7)
Secure Care	0 (0)	46 (8.8)	85 (12.7)	57 (3.6)
Close Support Unit	0 (0)	0 (0)	0 (0)	18 (1.1)
Young Homeless	0 (0)	9 (1.7)	0 (0)	0 (0)
Emergency Response	0 (0)	0 (0)	0 (0)	13 (0.8)
Residential Outreach	0 (0)	0 (0)	0 (0)	19 (1.2)
Total	515 (100)	525 (100)	667 (100)	1570 (100)

N = 3277

4.1.1 Summary⁵

The key elements of the sample are that 79% of respondents were care workers, 16% supervisors and 5% managers. One third of respondents were male and two-thirds female. The mean age of the sample was 40.7 years. There were roughly equal proportions of staff working in the local authority and voluntary sectors, just over 40% in each sector, and 11.4% from the private sector. Compared to the 2004 audit this represented a 10% decrease in the proportion of staff working in the local authority sector and an increase of more than 100% in the private sector.

The four key services within which 87.9% of staff were employed were: residential only; residential and school; residential school for children and young people with disabilities; and respite care services. There are some variations in service provision according to Learning Network.

⁵ Information is based on the number of respondents who provided this information.

4. Results

4.2 A Qualified Workforce

In March 2003 the SSSC published the set of qualifications that staff must meet in order to become a qualified member of the residential child care workforce in Scotland. As previously stated this was revised and expanded in 2004. As stipulated in the *Qualifications Criteria for Phase One Registrants* (SSSC, 2007), residential child care staff must hold one from a range of care qualification options. There are two lists of care qualifications. The first is a range from which care workers must hold a qualification and the second is a more stringent range from which supervisors and managers must hold a qualification. In addition, residential child care managers must obtain a management qualification before they are considered qualified. (See Appendix C for the SSSC qualification criteria framework options). The revision in 2004 increased the number of options available to staff, most noticeably in relation to qualifications equivalent to the HNC in Social Care.

Applying the qualifications framework we were able to establish the number of qualified and unqualified staff, based on qualifications which are already held (Table 8).

Table 8: Qualified Status: Position

Position	Qualified		Not Qualified		Total
	Number	%	Number	%	
Registered Manager	64	39.3	99	60.7	163 (100%)
Supervisor	203	39.0	317	61.0	520 (100%)
Care Worker	786	30.6	1780	69.4	2566 (100%)
Total	1053	32.4	2196	67.6	3249 (100%)

N = 3249

This shows that 1053 members of staff were qualified. *Based on all respondents (3330) this means that 32% of staff were qualified.* This proportion is reflected within each position – managers, supervisors and care workers – where around a third are qualified: 39.3%, 39% and 30.6% respectively. The 2004 qualifications audit revealed that 18% of staff were qualified: 7.4% of managers, 30% of supervisors and 16.4% of care workers. It predicted that, if all staff completed the qualifications they were undertaking, 29.1% would be qualified: 23.5% of managers, 38.8% of supervisors and 27.6% of care workers.

Based on the total number of returns 2277 (68%) members of staff are not qualified. Of those for whom position was known 2196 (67.6%) were unqualified. Of all unqualified staff (2277; 68%), 1176 (51.6%) hold a qualification that is listed in the SSSC qualification framework but is not sufficient to meet qualification criteria. For example, care workers may hold one of two qualifications that are required for qualification, or a supervisor may hold a qualification that meets care worker criteria but not supervisory criteria.

The total number of staff who hold a qualification included in the SSSC qualification framework, including those who are not qualified, is 2259 (67.8%).

As Table 9 shows, of those who are currently not qualified 461 (20.2%) have no relevant qualification but are undertaking one.

Table 9. Unqualified Staff

	Undertaking an award: will be qualified		Undertaking an award: will not be qualified		Not undertaking an award	
	No.	%	No.	%	No.	%
Holds a Qualification	535	46	59	5	576	49
No Qualification: undertaking an award	163	35	298	64	-	-
No Qualification: not undertaking an award	-	-	-	-	607	100
Total	698	31	657	16	1183	53

N=2238

Upon successful completion of qualifications being undertaken by staff, a further 698 (21.5%) will be qualified. If this were achieved a total of 1750 members of staff would be qualified (53.5%).

Not all staff who are undertaking qualifications will be qualified upon completion of them. Examples would be care workers who only completed one of two qualifications required, or supervisors and managers who completed a qualification applicable to care workers but not their position. There are 607 staff (26.6%) who are not qualified, have no qualifications and are not undertaking any.

4. Results

As previously highlighted the qualifications framework differentiates between the qualifications required at each position, although there are some relevant to all. Owing to this, the qualifications held by managers, supervisors and care workers were looked at separately.

4.2.1 Registered Managers

Registered managers require a care qualification and a management qualification in order to be fully qualified. The SSSC framework includes six care qualification options of which managers must meet one in order to meet the care criteria. There are four management qualification options. Managers must hold a management qualification that meets one of these options in addition to holding a care qualification in order to be fully qualified.

As stated previously 64 (39.3%) managers are qualified and 99 (60.7%) are not qualified. Of the total of 163 managers, 119 (73%) hold a qualification which meets SSSC care criteria for managers and 85 (52%) hold a relevant management qualification. Including those who are not qualified, 157 (96.3%) hold a qualification included in the SSSC qualification framework. In the 2004 qualifications audit 12 (7.4%) managers were qualified. Not only has the number of qualified managers increased but it has also surpassed the 2004 forecast, that upon completion of awards 38 (23.5%) would be qualified (Hunter et al., 2004).

Of the 99 (60.7%) managers who are not qualified, 93 (57%) hold a qualification. Fifty-nine (36%) of these managers hold a qualification which meets either, but not both, the care criteria or the management criteria for qualification at management level.

The range of care qualifications and number of awards held by managers is outlined in Table 10. It is not necessarily the case that each award represents the qualifications of one individual. A few individuals hold more than one qualification that meets qualification criteria. Almost half of the managers, 76 (46.6%), hold a Diploma in Social Work. The majority of managers, 19 (11.7%), who are undertaking an award are completing an S/NVQ Level 4 course in Care or Health and Social Care.

Table 10. Care Qualifications: Managers

	No. of Awards (%)	Awards being Undertaken (%)
Diploma in Social Work / equivalent	76 (46.6)	5 (3.1)
S / NVQ Level 4 (Care / Health & Social Care)	25 (15.3)	19 (11.7)
BA (Curative Education)	2 (1.2)	0 (0)
Teaching / Nursing / Medical	19 (11.7)	1 (0.6)
British Psychology Society (Chartered)	0 (0)	0 (0)
BA / Dip (Community Education)	5 (3.1)	0 (0)
Total	127	25

N=144

Table 11. Management Qualifications: Managers who have a Care Qualification

	Has Management Award (%)	Undertaking Management Award (%)
Diploma in Social Work / equivalent	29 (39.2)	26 (35.1)
S / NVQ Level 4 (Care / Health & Social Care)	23 (92)	1 (4)
BA (Curative Education)	0 (0)	0 (0)
Teaching / Nursing / Medical	13 (68.4)	3 (15.8)
British Psychology Society (Chartered)	N/A	N/A
BA / Dip (Community Education)	2 (40)	3 (60)
Total	67	33

Table 11 shows the number of managers who hold a relevant care qualification who also hold, or are undertaking, a relevant management qualification. The number of managers who hold a care qualification and management qualification meeting registration requirements is 64 (39.3%). (This number is lower than 67 in Table 11 because a few managers have more than one care or management award that meets qualification criteria.)

Of the 25 managers who are undertaking a care award, 2 (1.2%) have a management qualification and 5 (3.1%) are currently undertaking a management qualification. If all qualifications being undertaken by managers are successfully completed an additional 40 (24.5%) managers would be qualified. *This would result in 107 (65.6%) qualified managers.*

4. Results

4.2.2 Supervisors

Supervisors must meet one of the care qualification options that are applicable to managers in order to be qualified. Supervisors do not require a management qualification.

As previously stated 203 supervisors (39%) are qualified and 317 are not qualified (61%). In the 2004 qualifications audit the number of qualified supervisors was 139 (30%) and this was predicted to rise to 180 (38.8%) if they completed the qualifications they were undertaking.

Table 12. Care Qualifications: Supervisors

	No. of Awards (%)	Awards being undertaken (%)
Diploma in Social Work / equivalent	95 (18.3)	19 (3.7)
S / NVQ Level 4 (Care / Health & Social Care)	57 (11)	116 (22.3)
BA (Curative Education)	11 (2.1)	4 (0.8)
Teaching / Nursing / Medical	28 (5.4)	0 (0)
British Psychology Society (Chartered)	0 (0)	0 (0)
BA / Dip (Community Education)	19 (3.7)	0 (0)
Total	210	139

N= 335

Table 12 details the qualifications that supervisors hold. The total is greater than 203 as some supervisors hold more than one qualifying qualification. It shows that the majority of supervisors holding an award have a Diploma in Social Work, 95 (18.3%). The largest proportion of supervisors undertaking a qualification, 116 (22.3%), are completing an S/NVQ Level 4 in Care or Health and Social Care.

If all supervisors undertaking a relevant qualification achieved it then an additional 132 (25.4%) supervisors would be qualified. *This would mean that 335 (64.4%) supervisors would be qualified.*

There are 317 (60.9%) unqualified supervisors. Of these, 254 (80.1%) have a qualification that is listed in the SSSC qualification criteria. There are, therefore, 457 (87.8%) supervisors, qualified and unqualified, who have at least one qualification that is listed in the SSSC framework.

Although not required for qualification, a number of supervisors have or are undertaking management qualifications. Of those who are qualified 41 (14.7%) have a management award and 23 (10.9%) are undertaking one (Table 13).

Table 13. Management Qualifications: Supervisors who have a Care Qualification

	Has management award (%)	Undertaking management award (%)
Diploma in Social Work / equivalent	14 (6.7)	11 (5.2)
S / NVQ Level 4 (Care / Health & Social Care)	12 (5.7)	9 (4.3)
BA (Curative Education)	2 (0.9)	0 (0)
Teaching / Nursing / Medical	2 (0.9)	3 (1.4)
British Psychology Society (Chartered)	N/A	N/A
BA / Dip (Community Education)	1 (0.5)	0 (0)
Total	41	23

Of those supervisors undertaking care qualifications eight (5.9%) have a management award and 12 (10.4%) are undertaking a management award. On successful completion of these qualifications 84 (16.1%) supervisors will be qualified to managerial level.

4. Results

4.2.3 Care Workers

In order to be qualified, care workers must meet criteria from one of 11 qualification options. See Appendix C for qualification options. In some cases these options require two qualifications to be obtained before qualification criteria are met.

As previously seen 30.6% of care workers (786) are qualified and 69.4% (1780) are not qualified. The number of qualified staff is not the same as the number of awards (818) held as some care workers meet more than one qualifying criteria option. In the 2004 qualifications audit the number of qualified care workers was 398 (16.4%) and it was forecast that if all qualifications were completed 671 (27.6%) care workers would be qualified.

The number of care qualifications held or being undertaken by care workers is outlined in Table 14.

Table 14. Care Qualifications: Care Workers

	No. of Awards (%)	Awards being Undertaken (%)
Diploma in Social Work or equivalent	73 (2.8)	57 (2.2)
S / NVQ Level 4 (Care / Health & Social Care)	9 (0.4)	20 (0.8)
BA/Dip (Curative Education)	23 (0.9)	2 (0.1)
Teaching / Nursing / Medical	87 (3.4)	16 (0.6)
British Psychology Society (Chartered)	1 (0)	1 (0)
BA / Dip (Community Education)	38 (1.5)	0 (0)
SVQ / HNC or equivalent	569 (22.2)	469 (18.3)
Dip TMHA	0 (0)	0 (0)
CRCCYP	11 (0.4)	1 (0)
Senior CRCCYP	5 (0.2)	0 (0)
CCETSW	2 (0.1)	0 (0)
Total	818	566

N = 1314

The largest proportion of qualifications held by care workers, 569 (22.2%), is the combined SVQ3 and HNC or equivalent qualification. The most common qualifications following this were teaching, nursing or medical degrees (3.4%) and Diplomas in Social Work (2.8%). The most common course being undertaken by 469 (18.3%) members of staff was the SVQ3 and HNC or equivalent qualification.

There are 1780 (69.4%) care workers who are not qualified. Of these, 790 (44.4%) have a qualification outlined in the SSSC qualifications criteria. A total of 1576 (61.4%) care workers, including those who are qualified, have at least one qualification. *When all qualifications currently being undertaken are completed there will be 1314 (51.2%) qualified care workers.*

Although not necessary for qualification, 22 (0.8%) care workers hold a management qualification and 11 (0.4%) are currently undertaking a management qualification. Of care workers who are qualified, four (0.5%) have a management award and are qualified at managerial level. Six (0.7%) qualified care workers are undertaking a management qualification. Upon completion four (66.6%) of these individuals will be qualified at managerial level. Of those who are undertaking care qualifications and will be qualified, four (0.5%) have a management qualification and one (0.1%) is undertaking a management qualification. Once they complete the care qualification three (0.3%) of the staff will be qualified at managerial level. Upon completion of awards there will be 11 (4.3%) care workers who are qualified at managerial level.

4.2.4 The Diploma in Social Work or Equivalent

In the 2002 audit, SIRCC proposed to the SSSC a long term 'stepwise strategy' for developing a fully qualified workforce. This incremental approach began with an interim framework for new entrants and existing staff, which supported the combination of both the HNC and SVQ3 as a baseline qualification for the field. This interim framework was proposed as an important step toward an optimum framework for residential child care. In the 2004 audit we recommended not only maintaining the required qualifications as a baseline but continued to suggest that this framework should only remain in the interim.

With this in consideration it was important to take a closer look at the number of staff who were qualified at degree/diploma level and compare this to the previous audit.

Table 15. DipSW or equivalent: 2004 vs 2007

	2004		2005	
	No.	%	No.	%
Gained DipSW	260	8	252	8
Undertaking DipSW	95	3	83	2
Total	355	6	335	5

Table 15 compares the current number of staff undertaking the Diploma in Social Work or equivalent with those in the 2004 Qualifications Audit. It shows that the number of staff who have or are undertaking this qualification has not increased over the last few years. As few people withdrew from or failed the DipSW course (19; 0.6%) this indicates that there is some movement out of the residential child care sector.

4. Results

Tables 16 and 17 breaks this information down by position. While there has been a slight decrease in managers attaining the Diploma in Social Work or equivalent there has been little change for supervisors or care workers. In relation to staff undertaking the Diploma in Social Work or equivalent qualification there has again been little change.

Table 16. Gained DipSW or equivalent: 2004 vs 2007

	2004		2007	
	No.	%	No.	%
Registered Manager	95	59	76	47
Supervisor	87	19	95	18
Care Worker	78	3	73	3
Total	260	8.5	244*	8

*This figure does not equal 252 because information about the position of eight people undertaking a DipSW was not known

Table 17. Undertaking DipSW or equivalent: 2004 vs 2007

	2004		2007	
	No.	%	No.	%
Registered Manager	5	3	5	3
Supervisor	28	6	19	4
Care Worker	62	3	57	2
Total	95	3	81	2

4.2.5 Summary

Applying the qualifications criteria to all respondents we were able to establish that at present 32% of staff are qualified and 68% are not qualified. At present, 39.3% of managers, 39% of supervisors and 30.6% of care workers are qualified. Upon successful completion of qualifications being undertaken a further 21.5% of staff would be qualified resulting in over half (53.5%) of the workforce being qualified. Breaking this down 65.6% of managers, 64.4% of supervisors and 51.2% of care workers will then be qualified. There has not been an increase in the numbers of staff attaining or undertaking the Diploma in Social Work or equivalent qualification since the 2004 Qualifications Audit.

4. Results

4.3 The Nature of the Qualified Workforce

There are a range of other factors across which qualification levels may differ. Those that will be considered here are sector, organisation, learning network, service type, contract, age and gender.

4.3.1 Sector

As shown in Table 18 the local authority and voluntary sectors each have similar proportions of qualified staff, 36.8% and 31.2% respectively, which correspond approximately to the overall number of qualified staff (32%). In the private sector 17.3% members of staff are qualified.

Table 18. Sector

	Qualified		Qualified if achieve award	
	No. of staff	%	No. of staff	%
Local authority	516	36.8	838	59.7
Voluntary	474	31.2	797	52.7
Private	66	17.3	119	31.3
Total	1056	32	1754	53.2

In the local authority and voluntary sectors, upon successful completion of awards, an additional 22.9% and 21.5% of staff, respectively, will be qualified. (The forecast for the overall sample is that an additional 21.5% of staff will be qualified upon completion of awards being undertaken.) In the private sector an additional 14% of staff will be fully qualified if all staff successfully complete awards being undertaken.

4.3.2 Organisations

The proportion of qualified staff also varied across organisations (Figure 1). The range of qualified staff varied from 0% (2 organisations) to 100% (1 organisation). Data about the levels of qualified staff was available for 66 of the 81 organisations providing residential child care.

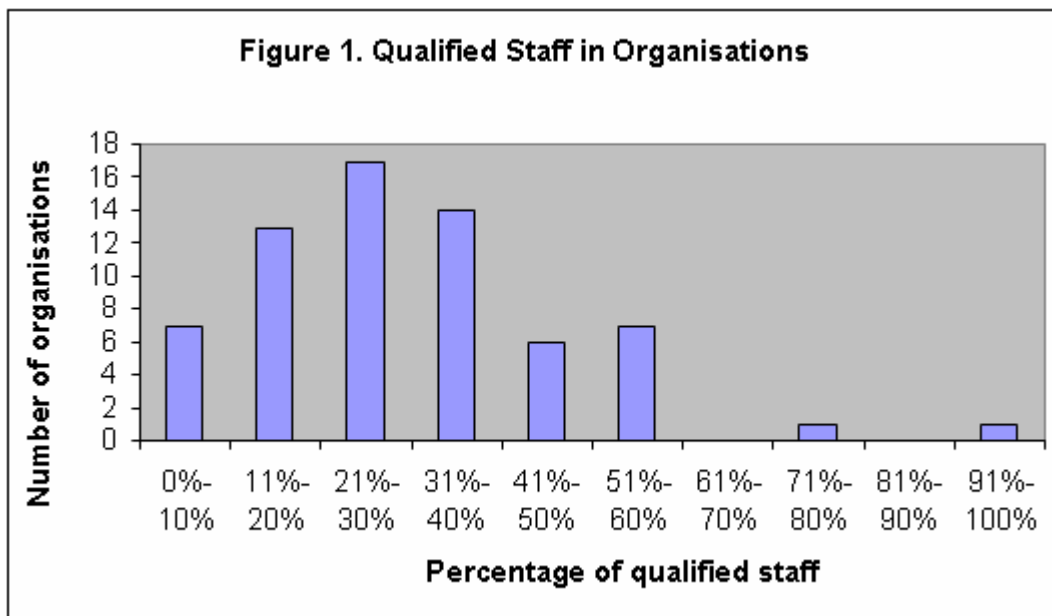
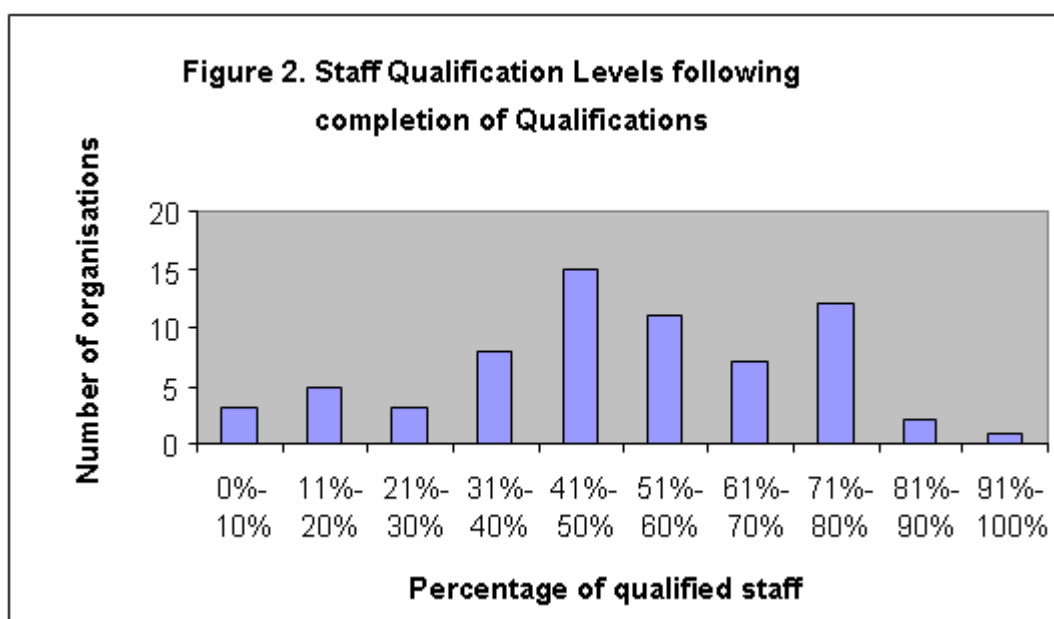


Figure 2 shows that upon completion of qualifications the majority of organisations will have 31% - 80% of staff qualified as opposed to current levels of 0% - 60%.



4. Results

4.3.3 Learning Networks

Table 19 shows that the North and West Learning Networks have approximately the same proportion of qualified staff as the overall sample (31.9%). Tayforth has slightly fewer with 25.8% of staff being fully qualified. South East has the greatest proportion, 43.2%, of qualified staff.

Table 19. Learning Network

	Qualified		Qualified if achieve award	
	No. of staff	%	No. of staff	%
North	159	30.3	254	48.5
South East	223	43.2	325	63.1
Tayforth	174	25.8	321	47.9
West	498	31.7	852	54.3
Total	1054	31.9	1752	53.2

Each Learning Network will have on average an additional 20.6% qualified staff (range 18.2%-22.6%) if all staff members complete their awards. This is close to the overall sample forecast of 21.5% for staff who will be qualified upon completion of qualifications.

4.3.4 Service Type

Staff employed in care leavers' services have the highest proportion of qualified staff, 64.3%. This service has a comparatively low number of staff, 14 (0.4% of workforce) in relation to other services (Table 20).

Table 20. Service Type ⁶

	Qualified		Qualified if Achieve Award	
	No. of staff	%	No. of staff	%
Residential only	436	33.9	732	57
Residential and school	221	31.7	383	55
Residential only: disability	47	34.8	75	55.6
Residential and school: disability	117	24.5	192	40.4
Care Leavers	9	64.3	11	78.6
Respite Care	118	29.6	189	47.6
Secure Care	79	42.7	122	66.3
Close Support Unit	6	35.3	7	41.2
Young Homeless	4	44.4	5	55.6
Emergency Response	2	15.4	5	38.5
Residential Outreach	3	15.8	6	33.3
Total	1042	32.1	1727	53.3

As previously mentioned there are four services which employ the greatest number of staff: residential-only care, residential and school services, respite care and residential and school services for children who have disabilities. As detailed in Table 20, the first three have around the average number of qualified staff, that is 32%. Residential and school services for children and young people with disabilities has a slightly lower proportion of qualified staff, 24.5%.

Services with the lowest proportion of qualified staff are emergency response, 15.4%, and residential outreach, 15.8%. After staff have completed qualifications, it is forecast that six of the eleven services will meet or exceed the forecast workforce qualification level of 53.5% if all staff complete qualifications.

4.3.5 Contract

There is a greater proportion of qualified staff (34.2%) among those who hold permanent contracts than for those who are temporary (18.5%) or work on a sessional basis (17.3%). Once qualifications have been completed an average of 20.4% (range 18.7% - 22%), additional staff will be qualified across the three types of contract. See Table 21.

Table 21. Contract Type

	Qualified		Qualified if achieve award	
	No. of staff	%	No. of staff	%
Permanent	930	34.2	1525	56.2
Temporary	32	18.5	67	39
Sessional	42	17.3	89	36.6
Total	1004	32	1681	53.7

4.3.6 Age

The youngest members of staff, those 24 and under, are least likely to be qualified, with 10.1% of this age group holding a qualification that meets SSSC qualification criteria (Table 22). In the other age groups the proportion of qualified staff is closer to that of the total sample, 32%. If all staff currently undertaking qualifications successfully complete them, with the exception of the 60-plus age category, an average of 22.1% (range 16.58%-25.3%) additional staff will be qualified. Staff in the 60-plus age range are less likely to be undertaking qualifications. An additional 9.7% of staff in this age category will be qualified if all staff complete the qualifications they are undertaking. It would however, still be the youngest members of staff who have the lowest qualified status, with a third (34.3%) being qualified.

4. Results

Table 22. Age

Age	Qualified		Qualified if Achieve Award	
	No. of staff	%	No. of staff	%
16-24 years of age	21	10.1	71	34.3
25-39 years of age	340	29.5	629	54.8
40-49 years of age	375	35.6	611	57.9
50-59 years of age	219	38.6	311	55.1
60 plus	35	30.7	46	40.6
Total	990	32	1668	54.03

4.3.7 Gender

A similar proportion of males and females are qualified (28.6% and 33.5% respectively) and are forecast to become qualified (52.3% and 53.9% respectively). On successful completion of qualifications an additional 23.7% of men and 20.4% of women will be qualified. See Table 23.

Table 23. Gender

	Qualified		Qualified if Achieve Award	
	No. of staff	%	No. of staff	%
Male	296	28.6	539	52.3
Female	738	33.5	1186	53.9
Total	1034	32	1725	53.4

4.3.8 Summary

Other factors over which qualification levels could vary were investigated. Those considered were sector, organisation, learning network, service type, contract, age and gender. These analyses revealed that the number of qualified staff varied across all factors (sector, organisation, learning network, service type, contract and age) with the exception of gender.

4.4 Overview of Results

The following provides an overview of the key findings from the 2007 Qualifications Audit:

- Questionnaires were received from 72.2% of residential child care staff in Scotland.
- At present 32% of staff are qualified.
- Breaking this down, 39.3% of managers, 39% of supervisors and 30.6% of care workers currently meet registration requirements.
- In the 2004 Qualifications Audit, 18% of staff were qualified: 7.4% of managers, 30% of supervisors and 16.4% of care workers.
- The considerable increase in qualified managers reflects an increase in the number who have achieved a management award.
- Of the 68% of staff who are not qualified, 46% are undertaking an award and will be qualified upon completion.
- Assuming these qualifications are achieved a further 21.5% of staff would be qualified resulting in 53.5% of staff being qualified.
- In this instance, 65.6% of managers, 64.4% of supervisors and 51.2% of care workers would meet registration requirements.
- The 2004 Qualifications Audit forecast that 29.1% would be qualified upon completion of qualifications being undertaken: 23.5% of managers, 38.8% of supervisors and 27.6% of care workers.
- The number of staff who have or are undertaking the Diploma in Social Work or equivalent qualification has not increased since the 2004 Qualifications Audit.

4. Results

- Based on the *projected figures* the nature of the qualified workforce differs over a range of factors:
 - The private sector will have 31.3% qualified staff whilst local authorities and the voluntary sector will have 59.7% and 52.7% qualified staff, respectively.
 - The majority of organisations will have 31% - 80% of staff qualified as opposed to current levels of 0% - 60%.
 - Each learning network will have either almost or over half of staff in their region qualified.
 - Six of the eleven service types will meet or exceed the forecast workforce qualification level of 53.5%.
 - Over half (56.2%) of those on permanent contracts will be qualified and around a third of those on temporary (39%) and sessional contracts (36.6%).
 - Over half of those in the 25-39, 40-49 and 50-59 age range will be qualified (54.8%, 57.9% and 55.1% respectively). About one in four of those 60 and over will be qualified (40.4%) and a third of those between 16-24 (34.3%) years of age.
 - Half of both men (52.3%) and women (53.9%) will then meet registration requirements.

- Those working in care leaver organisations were most likely to be qualified (64.3%), though there were low numbers of staff working in this service⁷.

- The South East Learning Network had the highest proportion of qualified staff (43.2%) which is 10% higher than the workforce average of 32%.

This section will explore the qualifications context within the residential child care sector, possible influencing factors, and the concerns raised by this study. It will consider the future aims for the sector and propose a way forward for long-term, sustained change in the qualification levels of the residential sector.

5.1 Context

The importance of a qualified workforce

Improving the quality of child care in residential establishments has long been linked to the education and training of residential child care workforce (Kent, 1997; Skinner, 1992; Scottish Office, 1999). A government strategic change programme to develop a qualified residential child care workforce has been in place since 2000, evident in the establishment of the Scottish Social Services Council's national baseline for registrable qualifications in residential child care, and the sponsored delivery of the range of specialised residential child care education by the Scottish Institute for Residential Child Care.

An increase in qualified staff

The increase in the numbers of qualified staff and staff currently undertaking a qualification which will qualify them is notable: the 2004 qualifications audit found that 18% of the sector were qualified, and it predicted that, if all staff completed the qualifications they were undertaking, 29.1% of residential child care workers would be qualified. The 2007 audit revealed that 32% of staff were qualified. If staff completed the qualifications they were undertaking then, overall, 53.5% of staff would be qualified. This is the first indication of a marked change in sector qualification levels. While these levels continue to be well below the desired levels, this research gives us cause to be cautiously optimistic about the potential of the sector to reach the currently designated qualification levels.

This potential, and the pace at which it can be achieved, must be appreciated within the limitations of employers' resources and the priority of stability in service delivery. The cost to employers of backfilling shifts for staff undertaking qualifications is substantial and should not be underestimated. Additionally, in order to provide consistent services and stable relationships for children and young people within these services, there is a limit to the number of staff who can undertake a qualification at any one time.

Influencing factors

While it is beyond the scope of this study to determine the causes for this increase in qualification levels, it is likely that efforts on many fronts have had an influence in reducing the barriers which once existed for many residential staff successfully to undertake qualifying training. Several factors will contribute to the achievement of a fully qualified workforce, including increasing the number of current staff successfully completing qualifying awards; retaining qualified staff in the sector; and increasing the number of qualified staff being recruited into the sector. The following offers some examples of changes influencing these factors within the

5. Implications and Discussion

residential child care sector in recent years:

□ **Registration**

The SSSC determination of minimum qualification levels in 2003 initiated a journey for the sector towards the achievement of basic qualification levels and a registration process. The register for the residential workforce was opened in 2005 for managers, and supervisors and basic grade workers were invited to join the register the following year. While the voluntary registration of the workforce has been slow, it is possible that the national publicity and emphasis on registration and qualification levels has focussed the sector's attention on undertaking qualifying training. It may be a valuable area of future research to explore what lies behind this slow uptake in registration, and what relationship may exist, if any, between the slow uptake of voluntary registration and the sector's qualification levels.

□ **Leadership**

With increasing numbers of residential child care managers undertaking leadership programmes such as the MSc in Advanced Residential Child Care, the Professional Development Award: Care Services Management and others, it is possible that leadership and support for qualifying education has been strengthened within units.

□ **HNC Social Care and SVQ3 changes**

The Scottish Qualifications Authority led a review of the HNC, and significant changes were made in 2004, including the integration of four Scottish Vocational Qualifications units (SVQs) at Level 3 embedded within the HNC. This has created a more accessible HNC Social Care for employers, a commonly chosen qualification route for basic grade workers.

□ **Student retention**

While residential child care basic grade workers are not limited in where they may undertake their qualifying training, SIRCC offers free places to 200+ of these workers in colleges throughout Scotland. In 2005, SIRCC began delivering an additional 100 HNC student places, again free from student fees. Student retention rates on the SIRCC HNC Social Care have improved remarkably since the establishment of a SIRCC Core Skills Appraisal Process (Davidson, Anderson & Rafferty, 2008). This process is tailored for residential child care staff who do not have the required qualifications to begin an HNC, offering an assessment of workers' literacy levels, and providing specially targeted learner support input for those who require it. Additionally, employers are given information and support to know how best to enable these workers to achieve.

□ **Workforce Planning**

SIRCC's promotion of workforce planning within residential establishments through events, professional consultation services and the creation and dissemination of a workforce development handbook *Towards a Competent and Confident Residential Child Care Workforce* (Howie, Anderson & Stevenson, 2006) will likely have had a supportive influence on the priorities of sector staff and their employers.

□ **Staff recruitment**

It is interesting to note that, while the evidence is anecdotal, it is increasingly apparent that advertisements for residential child care positions are requiring SSSC-related qualifications as essential criteria for recruitment of related residential child care positions more often than previously. Further research would be helpful in determining the extent to which employers are now requiring the HNC as a pre-entry qualification.

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5.2 Concerns Raised by this Study

This study raises several areas for concern. These and the recommendations for further research that follow from these are outlined below:

□ **Degree holders**

While rates of qualified staff have increased based on the SSSC minimum qualifications framework, it is important to note that the number of staff who have or are undertaking the Diploma in Social Work or equivalent qualification has not increased since the 2004 Qualifications Audit. A greater proportion of these qualified staff as compared to those with other qualifications may be moving out of the sector.

The importance of improving pay and conditions in residential child care in order to retain qualified staff is a vital area for consideration, and is further addressed below. We would suggest this improvement is particularly important to the retention of this group of staff. Anecdotal evidence indicates that remuneration of residential child care staff with a Diploma in Social Work or equivalent qualification is not equivalent to fieldwork social work posts. This may be creating a disincentive for these staff to remain in residential child care, and may be undermining efforts to recruit new residential child care staff who hold a social work degree.

□ **Age**

There are two other results which may cause some concern. The first is that there is a low proportion of staff in the 16-24 age group who are qualified (10.1%) and forecast to be qualified (34.3%). This is considerably lower than the average proportion of 32% qualified staff and that forecast of 53.5%. The second finding is that 9.7% of staff aged 60 plus were undertaking qualifications (compared to on average 22.1% of other age groups).

This may be due to a number of factors, including employers prioritising staff in the middle age groups to undertake qualifications; reluctance of more staff within these age groups than others to engage with formal education; and the imminence of retirement providing a disincentive for those over age 60. This raises questions about the role of employers and the education sector to support younger and older staff to undertake qualifying training, and to ensure they are included in employers' workforce planning.

□ **Differences across local authority, voluntary and private sectors**

The number of responses from the private sector (11.4%) has more than doubled since the 2004 audit (4.3%). It is of increased concern that this sector has the lowest proportion of qualified staff (17.3%), which is considerably lower than the overall average of 32% qualified staff. The number of additional private sector staff forecast to become qualified after completion of qualifications is 14% which is also

considerably lower than the 21.5% overall average.

The difference in the levels of qualified staff in the private sector and the voluntary sector raises questions about competition and incentives to improve qualification levels. For an organisation to ensure that its workforce is qualified requires a substantial investment in resources and increases costs, and this could potentially have a negative impact on referrals from local authorities. Further research is required to explore the impact of this difference between sectors, and to determine the factors involved in the lower level of qualified staff in the private sector.

In the past, Scottish government statistics have been collected for local authority staff and staff working in the voluntary sector (Scottish Executive, 2007a). Given the differences shown in this audit between the private and the voluntary and local authority sectors there is a case for collecting information about the private sector.

5.3 The Way Forward

This study indicates reason for optimism in the aim of achieving a fully qualified workforce in Scotland. It is important to note, however, that this is an aim based on minimum qualification levels. Given the traditionally low qualification levels for this sector, setting the minimum qualification at its current level was an ambitious start, and while there is yet far to go in attaining even these minimum levels, this progress should be recognised as a substantial achievement.

However, SIRCC has consistently called for a residential child care sector whose skills, knowledge and value base are sufficient to effectively meet the complex needs and uphold the rights of the young people served by residential child care services. The complexity of the task of working in the sector was recognised in Scotland 15 years ago in *Another Kind of Home*, which recommended that the ideal educational requirements for residential child care staff should be equated to that of field social work, a position which now requires a four year honours degree for registration purposes.

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 be fully qualified, and it is far from clear that they have more demanding or complex responsibilities.

(Skinner, 1992, p. 72)

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The Optimum Framework

SIRCC proposed a long-term 'step-wise' strategy in the 2002 Qualifications Audit (FronDIGOUN et al., 2002) which supported these minimum standards as an interim framework. This interim framework was proposed as an important step toward an optimum framework for residential child care. In 2004 we recommended maintaining the required qualifications as a baseline, with a short-term aim for the HNC to become a pre-entry requirement to residential work and with strict timescales essential for the achievement of the SVQ. We continued to recommend that this framework should only remain in the interim.

We would suggest the results of this 2007 study indicate it is the right time to begin to consider the direction forward toward an optimum framework with regard to increasing the current minimum levels for qualification, and to conclude the most desirable skills mix for the residential child care sector. The optimum framework broadly envisaged in 2002 continues to be relevant today:

We consider that it would be responsible and entirely justifiable...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. (FronDIGOUN et al., 2002, p. 42)

It will be necessary to consider the range of skills and knowledge required in the complex environment of residential child care, and the education and qualification levels which should be promoted and accessed to best support residential child care practice.

Recruitment and retention of qualified staff

Effective recruitment and retention of staff relies on many factors, not the least of which is related to the pay and conditions for qualified staff. We suggest a fundamental review of pay and conditions will be required to ensure effective leadership within the sector and to secure an appropriately skilled and experienced workforce for the future. This has the potential to impinge significantly on staff recruitment and retention.

While the achievements in raising the qualification levels of the sector have been noteworthy, it is important that the momentum created by this activity is further nurtured and built upon. Young people offer a clear message that while there is good practice, there is still much to improve upon (Scottish Executive, 2007; Kendrick, 2008). Determining what exactly is this optimum framework, supporting the sector's achievement of these levels and skills mix, and reviewing the pay and conditions of this workforce to recruit and retain well-qualified staff are ambitious yet vital components in the provision of improved residential care services. These children and young people have a right to excellent care.

The educational achievements of the residential child care sector over the last few years have been considerable with qualification levels surpassing those predicted in 2004. While we applaud this achievement and are cautiously optimistic about the potential of the sector to reach the currently designated qualification levels, we continue to advocate an optimum framework with regard to increasing the current minimum levels for qualification. The children and young people being served in residential care need, and indeed have a right to, be cared for by staff who are well-equipped with the skills, knowledge, values and confidence to meet their complex needs. It is essential that this growth is built upon to achieve consistently excellent professional services in residential child care.

Appendix A SIRCC Audit Questionnaire

Residential Child Care Qualifications Questionnaire

Please read these instructions carefully before completing the questionnaire.
The Residential Child Care Qualifications Audit (2006) is designed to find out more about the levels of qualifications within the residential child care workforce in Scotland so that the Scottish Executive, the Scottish Social Services Council, social care employers and the Scottish Institute for Residential Child Care can continue to offer the necessary qualifying courses, underpinning knowledge training, assessment resources and support to achieve a fully qualified workforce. The information you provide will be treated confidentially in accordance with the Data Protection Act 1998. Apart from members of SIRCC staff who will process the data, access to the data about identified individuals will only be available to the individual him or herself and their current employer.

A questionnaire should be completed by each member of **Care Staff**, including on-site managers and supervisors, **employed** either temporarily, permanently or in a casual/sessional capacity in the unit or school on 1 July 2006. (i.e. not just those on duty on that day). If you are employed as a teacher, except where you are a Head Teacher who is a manager registered by the Care Commission or a teacher who regularly undertakes care shifts, or a member of the clerical, domestic or manual staff, please do not complete an audit form. If you are employed by a staffing agency, please do not complete a form.

This form should be collected by a designated person in your own organisation. If, however, you are unsure who to return it to or there is anything else you are uncertain about, and you cannot find anyone in your organisation who can answer your question, please ring SIRCC on 0141 950 3683.

THIS SHOULD TAKE YOU NO MORE THAN 5 MINUTES TO COMPLETE. ALL FULLY COMPLETED FORMS WILL BE ENTERED FOR A PRIZE DRAW FOR ONE OF 5 GIFT VOUCHERS TO A VALUE OF £20. - THANK YOU FOR YOUR HELP.

PLEASE COMPLETE IN BLOCK CAPITALS AND BLACK PEN

Name of School/Unit _____

Authority/Organisation _____

Name of staff member _____

Gender M / F (please circle)

Date of Birth

POSITION

(Only tick 'other' if your responsibilities do not match any of the descriptions at all closely)

REGISTERED MANAGER (A staff member in overall charge of the establishment required to register with the Care Commission)

SUPERVISOR (A staff member who has supervisory responsibilities for other staff)



CARE WORKER (A staff member who provides care for children and young people)

OTHER (Please state) _____

When did you start your current position?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TYPE OF CONTRACT	Permanent <input type="checkbox"/>	Casual/Sessional <input type="checkbox"/>	Temporary <input type="checkbox"/>		
HOURS	Full time <input type="checkbox"/>	Part-time (state hours) <input type="checkbox"/>			

	QUALIFICATION	ALREADY GAINED	CURRENTLY BEING UNDERTAKEN	WITHDREW / FAILED
1	Diploma in Social Work or equivalent e.g. CSS, CQSW.			
2	<ul style="list-style-type: none"> ➤ SNVQ level 4 in Care ➤ SNVQ in Health and Social Care level 4 in <ul style="list-style-type: none"> ■ Children and Young People , or ■ Adults 			
3	<p>A qualification meeting the registration requirements of</p> <ul style="list-style-type: none"> ➤ the General Teaching Council e.g. PGCE, ➤ the Nursing and Midwifery Council e.g. SRN, ➤ the General Medical Council <p>or the following professional groups regulated by the Health Professions Council:</p> <ul style="list-style-type: none"> ➤ Occupational therapists, ➤ Arts, Music and Drama therapists, ➤ Physiotherapists, and ➤ Speech and Language therapists. 			
4	<p>A qualification meeting the requirements for chartered registration with the British Psychological Society in the following divisions</p> <ul style="list-style-type: none"> ➤ Chartered Clinical Psychology ➤ Chartered Counselling Psychology ➤ Chartered Forensic Psychology ➤ Chartered Educational Psychology (including full membership of either the division of Education and Child Psychology for England, Northern Ireland and Wales or the Scottish division of Educational Psychology for Scotland) ➤ Chartered Health Psychologist ➤ Chartered Occupational Psychologist ➤ Neuro-psychologists and Sports and Exercise Psychologists who have attained chartered status with the British Psychological Society 			
5	SNVQ Level 3 Early Years Care and Education			
6	SNVQ Level 3 Children's Care Learning and Development (CCLD)			

	QUALIFICATION	ALREADY GAINED	CURRENTLY BEING UNDERTAKEN	WITHDREW / FAILED
7	SNVQ level 3 in <ul style="list-style-type: none"> ➤ Caring for Children and Young People, ➤ Promoting Independence, or ➤ Care. 			
8	SNVQ level 3 Health and Social Care in <ul style="list-style-type: none"> ➤ Children and Young People, or ➤ Adults 			
9	21 credits from SCOTVEC modules in child care			
10	Scottish Nursery Nurse Examination Board Certificate			
11	National Nursery Examination Board Certificate			
12	HNC Social Care			
13	Any other qualification that is equivalent to or above SCQF level 7 with a minimum of 96 academic credits. Please specify-----			
14	Degree in Curative Education			
15	Certificate of HE in Curative Education			
16	Diploma in Curative Education			
17	Degree or Diploma in Community Education or equivalent, as recognised by Community Education Validation and Endorsement Unit, Communities Scotland			
18	Diploma in Teaching Mentally Handicapped Adults			
19	Senior Certificate in the Residential Care of Children and Young People			
20	CCETSW Certificate in Residential Social Work			
21	Certificate in the Residential Care of Children and Young People			
22	Registered Managers Award			

	QUALIFICATION	ALREADY GAINED	CURRENTLY BEING UNDERTAKEN	WITHDREW / FAILED
23	An award in management certificated at or above Diploma in HE level e.g.  Diploma in Management Studies, or  MBA			
24	SNVQ Level 4 Management Award			
25	PDA Advanced Certificate in Supervising and Managing Personal Social Services. Not sufficient alone for registration. If this award has been upgraded with a double credit please tick here. <input type="checkbox"/>			
26	PDA Certificate in Care Services Management			
27	Open University K303			
28	Any award in management that is certificated at or above SCQF Level 8 (minimum of 60 credits), accompanied by a letter from the Academic Registrar, Dean, Head of Faculty or a similar authorised signatory confirming that the course meets the quality assurance standards set by their own institution and QAA and attracts a minimum of 60 credits at SCQF Level 8.			
29	An assessed programme of study (either through a taught programme or by portfolio) where a minimum of 60 credit points covers management, at post-qualifying or advanced level, awarded by the PQ Consortium for Social Work in Scotland.			

NONE OF THE ABOVE QUALIFICATIONS (tick)

ARE YOU REGISTERED WITH THE SSSC? (tick) YES NO

ARE YOU REGISTERED WITH ANOTHER REGULATORY BODY? (tick) YES NO

If yes, please specify which one

DATE OF REGISTRATION

Signed _____ Date _____

THANK YOU

Definitions of Residential Child Care Services

Residential Children's Homes

Children's Homes ensure that the needs of children are met when they cannot live with their own family. They are places for children to develop and grow, as well as providing food, shelter, and space for play and leisure in a caring environment. Children's Homes look after children with varying needs.

Residential Schools

Residential Schools are not Boarding Schools. They work with young people who have a complex mix of social, emotional, educational and behavioural problems. They provide care and education on the same campus.

Residential Homes for Children with Disabilities

These care homes meet the needs of children with learning disabilities and complex/challenging behavioural needs.

Residential Schools for Children with Disabilities

Many of these schools offer a National facility to meet the needs of children who, for example, may be deaf or blind. They play a crucial role with the different need communities, providing high quality education and care facilities.

Respite Care

This type of service is also referred to as 'short breaks'. Residential short breaks are offered to disabled children and young people and their families.

Close Support Unit

There are no locked facilities in close care. They tend to offer intensive therapeutic care for young people who might have experienced violence, trauma and / or abuse. Care is usually long term and is individually planned.

Secure Care

There are currently seven secure units in Scotland. Most will offer secure care and education to young people referred from courts and Children's Hearings. Some might offer to hold young people on remand from a court.

Residential Outreach

Residential child care staff visit young people who might be considered for admission to a unit. The staff might offer a programme to prevent admission.

Care Leavers

A system for working with young people who have been looked after and are moving on from where they have been living. This service includes young people leaving foster care and in some cases leaving their relatives' care.

Young Homeless

Young people who do not have an address to live at and are offered accommodation.

SSSC Qualification Criteria

Outlined below are qualifications required by care workers, supervisors and managers. For full details please see *Qualification Criteria for Phase One Registrants*. (SSSC, 2007)

Residential Child Care Workers

To be qualified residential child care workers must meet one of the following 11 qualification options:

Option 1

Diploma in Social Work or equivalent.

Option 2

One of:

S/NVQ Level 4 in Care;

S/NVQ Level 4 in Health and Social Care.

Option 3

A qualification meeting the registration requirements of the General Teaching Council, Nursing and Midwifery Council, General Medical Council or the following professional groups regulated by the Health Professions Council:

- Occupational Therapists;
- Art, Music and Drama Therapists;
- Physiotherapists;
- Speech and Language Therapists.

Option 4

A qualification meeting the requirements for chartered registration with the British Psychological Society.

Option 5

To meet qualification criteria for this option two qualifications are required:

One of:

S/NVQ Level 3 in Health and Social Care;

S/NVQ Level 3 in Caring for Children and Young People;

S/NVQ Level 3 in Care or Care: Supported Living.

Along with one from the following:

- an HNC in Social Care;
- any other qualification which provides satisfactory evidence to the Council of an individual's academic achievement equivalent to or above SCQF Level 7 with a minimum of 96 academic credits;
- a group of 21 credits from the SCOTVEC modules in child care (see criteria for accepted modules: SSSC, 2007);
- The Scottish Nursery Nurse Examination Board Certificate;
- The National Nursery Examination Board Certificate (NNEB);
- Certificate of HE in Curative Education.

Option 6

To meet qualification criteria for this option two qualifications are required:

One of:

S/NVQ 3 in Early Years Care and Education;

S/NVQ 3 in Children's Care Learning and Development (CCLD);

Plus

a qualification at SCQF level 7 with a minimum of 96 academic credits.

Option 7

Degree or Diploma in Curative Education.

Option 8

Degree or Diploma in Community Education or equivalent, as recognised by Community Education Validation & Endorsement Unit, Communities Scotland.

Option 9

Diploma in Teaching Mentally Handicapped Adults.

Option 10

One of:

Certificate in the Residential Care of Children and Young People;

Senior Certificate in the Residential Care of Children and Young People.

Option 11

CCETSW Certificate in Residential Social Work.

Residential Child Care Supervisors and Managers

Supervisors and managers must meet the criteria for one of the following care qualification options:

Option 1

Diploma in Social Work or equivalent.

Option 2

One of:

S/NVQ Level 4 in Care;

S/NVQ Level 4 in Health and Social Care.

Option 3

BA in Curative Education.

Option 4

A qualification meeting the registration requirements of the General Teaching Council, Nursing and Midwifery Council, General Medical Council or the following professional groups regulated by the Health Professions Council:

- Occupational Therapists;
- Art, Music and Drama Therapists;
- Physiotherapists;
- Speech and Language Therapists.

Option 5

A qualification meeting the requirements for chartered registration with the British Psychological Society in the divisions listed in appendix 2.

Option 6

Degree or Diploma in Community Education or equivalent, as recognised by Community Education Validation & Endorsement Unit, Communities Scotland.

In addition, to be qualified managers must hold a management award from one of the following:

- any award in management that is certificated at or above SCQF Level 8;
- Registered Managers Award;
- S/NVQ Level 4 Management;
- an assessed programme of study (either through a taught programme or by portfolio) where a minimum of 60 credit points covers management, at post-qualifying or advanced level, awarded by the PQ Consortium for Social Work in Scotland.

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