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| Minimum Qualification Requirements for Residential Care Workers in VictoriaDecember 2018 |
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| Minimum Qualification Requirements for Residential Care Workers in VictoriaDepartment of Health |

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| Prepared by the Children, Families, Disability and Operations Division, Out of Home Care Unit.To receive this publication in an accessible format phone 03 9096 7366, using the National Relay Service 13 36 77 if required, or email Robyn Gumley <robyn.gumley@dhhs.vic.gov.au>Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.© State of Victoria, Department of Health and Human Services December 2018.Where the term ‘Aboriginal’ is used it refers to both Aboriginal and Torres Strait Islander people. Indigenous is retained when it is part of the title of a report, program or quotation.Available at [Program requirements for out-of-home care services](http://providers.dhhs.vic.gov.au/program-requirements-out-home-care-services) <http://providers.dhhs.vic.gov.au/program-requirements-out-home-care-services>  |
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Contents

[Introduction 6](#_Toc1038230)

[Minimum qualification requirements for residential care workers in Victoria 7](#_Toc1038231)

[Supporting core capabilities across the residential care workforce 7](#_Toc1038232)

[Mandatory units of competency 7](#_Toc1038233)

[Completing the mandatory units of competency 8](#_Toc1038234)

[Exceptional circumstances 8](#_Toc1038235)

[Trauma informed practice in residential care 9](#_Toc1038236)

[Collaborating with the training and education system 9](#_Toc1038237)

[Building skills, capability and capacity 9](#_Toc1038238)

[Promoting and supporting cultural awareness and inclusivity 9](#_Toc1038239)

[Appendix 1: Residential care capability framework 10](#_Toc1038240)

[Personal attributes 10](#_Toc1038241)

[Capabilities 11](#_Toc1038242)

[Knowledge Domains 13](#_Toc1038243)

[Appendix 2 Recognised qualifications 14](#_Toc1038244)

[Appendix 3 Minimum Qualification Requirements: Exceptional Circumstance 15](#_Toc1038245)

[Purpose 15](#_Toc1038246)

[Minimum Qualification Requirements: Exceptional circumstance framework 15](#_Toc1038247)

[Minimum Qualification Requirements: Exceptional Circumstance 17](#_Toc1038248)

[Name of residential care worker: 17](#_Toc1038249)

[Section 1: Assessment of suitability 17](#_Toc1038250)

[Section 2: Supporting the residential care worker 17](#_Toc1038251)

[Section 3: Timeframe and review 18](#_Toc1038252)

[Section 4: Approval and Reporting 18](#_Toc1038253)

[Appendix 4 Frequently Asked Questions 19](#_Toc1038254)

[What are the costs to undertake training? 19](#_Toc1038255)

[What funding support is available to alleviate training costs? 19](#_Toc1038256)

[What additional support is available? 19](#_Toc1038257)

[Do I need to complete minimum qualification requirements if: 19](#_Toc1038258)

[I work in a Therapeutic Residential Care home? 19](#_Toc1038259)

[I have a qualification but it is not listed as a recognised relevant qualification? 20](#_Toc1038260)

[I have completed training/workshops in Trauma Informed Practice? 20](#_Toc1038261)

[I have an overseas qualification? 20](#_Toc1038262)

[I provide care to a child or young person in a short term or contingency arrangement? 21](#_Toc1038263)

[I am not a full time worker? 21](#_Toc1038264)

# Introduction

Children and young people who reside in residential care require the best possible care that can be provided. The safety and wellbeing of these children and young people is the paramount consideration for everyone involved in their care.

The need for a stable and appropriately skilled residential care workforce has been raised in a number of inquiries into residential care, including both the Victorian Auditor General’s Office report on *Residential Care Services for Children (2014)* and the Commission for Children and Young People report *As a Good Parent Would (2015)*.

In order to build the capacity of the residential care workforce to provide high quality, responsive support to children and young people in residential out of home care, the department and community services organisations must ensure, amongst other issues, that Victoria has a stable and appropriately skilled workforce.

Evidence based research and review, including feedback from children and young people, has informed a capability framework that provides a foundation for the minimum qualification requirements for residential care workers. The Residential Care Capability Framework is at **Appendix 1**.

On 13 April 2016, the Victorian Government released *Roadmap for Reform: Strong families, safe children*, outlining the direction of long term reform of Victoria’s child and family services system, including child protection, family services, and out of home care.

*Roadmap for Reform: Strong Families, Safe Children* commits to establishing mandatory qualifications for residential care workers and supporting upskilling of the existing workforce.

On May 2017, the *Minimum Qualification Strategy for Residential Care Workers in Victoria* was released to **support community service organisations to meet the established minimum qualification and ensure residential care workers have the necessary skills, qualifications and training to care for vulnerable children and young people in residential care.**

**To sustain the established minimum qualification and continue to support children and young people in residential care, an ongoing expectation to meet minimum qualification requirements have been established.**

# Minimum qualification requirements for residential care workers in Victoria

The *Program requirements for residential care in Victoria* set out the expectations for departmental and community services organisations in the recruitment of residential care workers. The following sets out additional expectations to meet minimum qualification requirements from 1 January 2018.

The minimum qualification require all residential care workers providing direct care in a department operated, or funded residential care home, to hold or be undertaking, either:

* the preferred qualification, Certificate IV in Child, Youth and Family Intervention; or
	+ a recognised relevant qualification listed in **Appendix 2**

In addition, all residential care workers must complete three mandatory units of competency (see section “Supporting core capabilities across the residential care workforce”).

If a residential care worker is currently undertaking the preferred or recognised relevant qualification, they must have commenced and be in the process of completing the preferred or relevant qualification to meet this requirement. These workers are expected to complete the qualification within the timeframes prescribed by the tertiary institution or the vocational education training provider.

Residential care service providers must document that the minimum qualification requirements has or are being met by residential care workers in line with the community service organisation’s policies and procedures and the *Program requirements for residential care in Victoria*.

## Supporting core capabilities across the residential care workforce

There are a diverse range of qualifications that are relevant to working with vulnerable children and young people. Completion of mandatory units of competency, which covers trauma, working in residential care and managing behaviour, will support a baseline of core capabilities for all residential care workers across Victoria.

### Mandatory units of competency

Mandatory units of competency were selected following a process of mapping units of competency to the Residential Care Capability Framework (**Appendix 1**). This process was undertaken in consultation with industry training providers, community service organisations, and the Centre for Excellence in Child and Family Welfare. The mandatory units of competency are:

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| CHCMHS007 – Work effectively in trauma informed careThis unit describes the skills and knowledge required to practice and contributes to the continuous improvement of trauma informed care within a service. |
| CHCPRT009 – Provide primary residential careThis unit describes the skills and knowledge required to provide for the care and support of clients in residential care and assist their transition from primary residential care. |
| CHCCCS009 – Facilitate responsible behaviourThis unit describes the skills and knowledge required to monitor individuals, respond to behaviours of concern, deal with conflict, and support responsibility for behaviour management and change. |

Where possible, mandatory units of competency should be completed or included as part of undertaking the preferred or relevant qualification. Alternatively, residential care workers can meet this requirement through a separate “short course” delivered by a nationally accredited training provider.

### Completing the mandatory units of competency

The Australian Qualification Framework requires workplace based learning, activities and assessment (“workplace hours”) in order to complete the mandatory units of competency. As a result, this requires residential care workers to provide direct care in a residential care home without fully completing the mandatory units of competency.

Therefore, it is expected that all residential care workers **must have commenced** training in the mandatory units of competency prior to providing direct care to a child or young person in residential care.

It is expected that residential care workers will complete the mandatory units of competency (including the workplace hours and assessments) within 12 weeks of commencing the mandatory units of competency. Residential care workers, and their managers or supervisors, will need to discuss the amount of workplace hours required with the respective training provider

Whilst residential care workers are completing workplace hours, they should only undertake tasks commensurate with their skills, prior education or training, and previous work experience. Residential care service providers are required to allocate tasks that are appropriate for those who are working towards meeting minimum qualification requirements.

## Exceptional circumstances

In exceptional circumstances, residential care service providers may allow a residential care worker to provide direct care for a strictly time limited arrangement prior to the commencement of training.

To provide necessary safeguards, any exceptional circumstance must:

* Be time limited and align with the date of the next available training in the mandatory units of competency.
* Demonstrate all options for commencing the minimum qualification and mandatory units of competency have been exhausted.
* Include an assessment that shows that the worker’s skills, capabilities, previous experience and training align with the learning outcomes of the mandatory unit of competency.
	+ Include a strategy is in place to provide additional supports for the residential care worker whilst providing direct care to a child or young person until they have commenced training in the minimum qualification and/or mandatory units of competency.

Exceptional circumstances must be approved by the relevant residential care program manager (or equivalent) and must be reported to department Agency Performance and System Support (APSS) teams.

The provision of an exceptional circumstance does not change the expectation that residential care workers be working towards meeting minimum qualification requirements and complete training within the prescribed timeframes.

Frequent use or requests of exceptional circumstances would draw attention to the systems in place and may require a discussion with the department. In these circumstances, it would be recommended that residential care service providers review recruitment practices and engagement with training providers.

Residential care service providers will need to develop policies and procedures to support this requirement. These policies and procedures can be developed in collaboration with department’s operational divisions/areas. **Appendix 3** includes a template for residential care service providers to complete when instituting and reporting an exceptional circumstance.

## Trauma informed practice in residential care

Residential care workers should have sound knowledge and skills in trauma informed practice, which underpins the delivery of quality and safe residential care. The following strongly recommended trauma unit of competency complements the mandatory units of competency to provide a strong understanding of trauma and its impact on children and young people.

The strongly recommended unit of competency is:

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| CHCPRT010 – Work with children and young people with complex trauma and attachment issues and needsThis unit describes the skills and knowledge required to recognise indicators of trauma in children and young people of different ages and at different stages, and to identify their needs and those of their parents and carers. |

Completion of both the mandatory unit of competency (CHCMHS007 – Work effectively in trauma informed care) and the strongly recommended unit of competency (CHCPRT010 – Work with children and young people with complex trauma and attachment issues and needs) is encouraged for all residential care workers in Victoria.

If the residential care home model of care and/or presenting behaviours of children and young people require an advanced level of trauma informed practice, residential care service providers will need to consider whether the strongly recommended unit of competency is completed by all residential care workers providing care in the respective home.

For the purposes of therapeutic residential care training, residential care workers in a therapeutic residential care home **must complete** both the mandatory unit of competency and the strongly recommended unit of competency to have met the foundational training requirements outlined in the *Program requirements for the delivery of therapeutic residential care in Victoria.*

## Collaborating with the training and education system

### Building skills, capability and capacity

The residential care workforce is skilled, responsive and resilient, and training providers play an integral part in achieving increased skills, capability and capacity.

It is strongly encouraged residential care service providers and training providers collaborate together to develop an individual/localised strategy to best support residential care workers to meet minimum qualification requirements. This could include a strategy to support contexualisation of units of competency, timely and scheduled training intakes, and innovative approaches to training and assessment to support residential care workers.

### Promoting and supporting cultural awareness and inclusivity

It is acknowledged that investing in the Aboriginal workforce is an investment in the health, wellbeing and safety of Victoria’s Aboriginal people and communities. Training providers are encouraged in assisting communities to realise their individual visions and broadening the skills base of the Aboriginal workforce to support self-determination. Part of this commitment is to support Aboriginal Community Controlled Organisations to build their organisational and workforce capacity to successfully take on an expanded role across out of home care.

# Appendix 1: Residential care capability framework

To understand the training needs of the residential care workforce, the department commissioned a number of activities to build an evidence base of the personal attributes, capabilities and specialist knowledge required to deliver quality residential care. This includes feedback from children and young people with residential care experience.

The residential care capability framework has been developed using the *Community Sector Workforce Capability Framework Tool Kit (2013)*. In consultation with the sector and the Centre for Excellence in Children and Family Welfare, the following capabilities were identified as critical for providing residential care:

* **Personal attributes:** Resilient, supportive, culturally aware, collaborative, positive
* **Communication:** Interpersonal skills, verbal communication, written communication
* **Service delivery:** Reflective practice, diversity, client/member outcomes
* **Professionalism:** Problem solving, ethics
* **Leadership and teamwork:** Conflict management, team dynamics
	+ **Governance and compliance:** Legislation and compliance, Occupational Health and Safety.

The capability framework was contextualised for the Victorian residential care environment, incorporating feedback from children and young people.

## Personal attributes

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| Attribute | Description |
| **Resilient** | Recovers from setbacksOvercomes obstacles and impedimentsLearns from reflecting on experience and identifies areas for self-developmentRegulates emotions to respond to young people in a consistent, strengths-based manner, even in challenging situations. |
| **Supportive** | Encourages young people to attain goals and achieve outcomesListens actively and inspires confidence by taking young people’s concerns seriouslyBuilds trust through regular positive interactions with young peopleDemonstrates empathy when confronted with adversity. |
| **Culturally aware** | Respects difference in all its formsDemonstrates cultural sensitivity and adjusts personal style and communication in response to young people’s differencesValues diversity as a strength and positively utilises diversity. |
| **Collaborative** | Works with young people and other care providers to achieve common goalsEngages young people in shared decision making in an developmentally appropriate mannerBuilds trust with young people in care. |
| **Positive** | Has faith in own abilities and the abilities of young people in careIs optimisticRemains calm and focused when faced with difficulty. |

## Capabilities

| Stream | Capability | Description |
| --- | --- | --- |
| **Communication** | Building relationships & interpersonal skills | Develops trust and appropriate relationships through positive, trauma-informed interactions with young people in care. Applies active listening to recognise and respond to the views of young people. Provides continuity by taking young people’s concerns seriously and behaving in a consistent, fair, and reliable manner. |
| Collaborating with families | Appropriately shares information, articulates clear and respectful messages, and contributes to group discussions between young people, families, and other care providers. Supports young people to maintain appropriate relationships, including with other siblings who may live separately. |
| Problem solving and shared decision making | Supports young people to identify and resolve problems of their own, which may involve challenging or difficult conversations. Assists young people to raise complaints or concerns and respond to issues that matter to them. Promotes the voice of young people, sharing power and decision-making to plan and set goals in an age and developmentally appropriate way. |
| **Supporting adolescent development** | Monitoring child & adolescent development | Recognises normal and abnormal child and adolescent development (including growth, sexuality and attachment) to inform provision of age appropriate care and skill development. Understands and applies attachment theory to model and promote healthy relationships and respond to young people engaging in high risk sexual behaviours. |
| Supporting education | Assists young people to achieve educational outcomes by supporting school activities such as homework, advocating for the young person at school, responding to school refusal, and exploring vocational options. |
| **Skill building and supporting behaviour** | Providing trauma-informed care | Recognises indicators of trauma in the behaviours of young people, assesses vulnerability stemming from past family violence, abuse, or neglect, and applies appropriate evidence-based interventions that promote healing and recovery. Supports healthy development through sensitive and responsive caring. |
| Implementing behavioural management techniques | Aims to understand and address the function of problematic behaviours through the use of behaviour plans. Focus on understanding and reducing triggers for behaviour and teaches skills to support the physical, emotional, educational, social, and cultural needs of the young person based on their individual strengths.  |
| Encouraging positive behaviours and skill development | Supports young people to develop skills in emotional regulation, self and social awareness, problem solving, decision making and conflict resolution. Models and encourages positive behaviours and skills required to successfully transition to adulthood. |
| Managing group dynamics & conflict resolution | Recognises differences of opinion and works toward the resolution of group conflict. Responds to aggression with de-escalation strategies to maintain a safe environment and promote development of self-regulation for young people. |
| **Skill building and supporting behaviour (cont.)** | Crisis prevention and management | Establishes a safe environment, recognises early indicators of risk and behaviours that could lead to a crisis, and employs effective strategies compatible with the model of care to de-escalate the situation. |
| **Safety, health and wellbeing** | Cultural competence and ensuring cultural safety | Recognises the importance of cultural connection and creating a culturally safe and welcoming environment to enhance resilience for Aboriginal young people and those from culturally and linguistically diverse backgrounds. Demonstrates a commitment to Aboriginal self-determination. |
| Promoting youth health and safety | Assists young people to achieve and maintain good physical and emotional health through routine health assessments (including dental checks, GP visits, and other screening as appropriate). Promotes physical and emotional safety, including sexual health, social-emotional wellbeing and cyber safety. Understands the dynamics of sexual abuse and implements strategies to minimise the risk of sexual exploitation. Knowledge of health service systems. |
| Supporting mental health | Understands the impact of mental health conditions, how to work with young people with mental health concerns, and implementation of treatment plans. Knowledge of mental health service systems. |
| Responding to substance abuse | Recognises signs of drug and alcohol abuse. Appropriately supports and responds to young people wanting to use, bringing drugs and alcohol into the residence, or being intoxicated. Knowledge of alcohol and other drug service systems. |
| **Governance, compliance, and professionalism** | Complying with ethics, legislation, policy & procedures | Observes professional boundaries and standards and assists others with ethical dilemmas, including duty of care, confidentiality and privacy. Maintains current knowledge of relevant legislation, policy, and regulatory requirements and ensures compliance in work practices (including *Child Safe Standards* and the *Program Requirements for Residential Care in Victoria*). Understands the broader child protection and youth justice service system, and the legal issues and rights of young people in care. |
| Written documentation | Maintains accurate written records reflecting accurate information about the young person’s health, education, daily experiences and critical incidents. |
| Reflective practice | Applies organisational practice models, procedures and relevant legislation when working with young people. |
| Occupational Health and Safety (OHS) | Identifies OHS risks and hazards, and ensures safety for self and others in the residential care home. |

## Knowledge Domains

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| Applicability | Areas of understanding |
| **Model specific** | Workers are required to maintain an understanding of the specific model of care adopted in the residential care home. This model underpins the trauma-informed strategies and interventions applied in the home. |
| **Advanced training** | Advanced training may be required to support the individual needs of young people in care. These might include:Knowledge of young person’s engagement with support services (e.g. health providers, educational supports)Supporting a young person in the context of their mental health diagnosisUnderstanding, assessing, and responding to young people with sexualised behaviours and at risk of sexual exploitationManagement of a young person’s acute or chronic health condition/sSupporting and empowering a young person with a disability (disability specific, e.g. autism). |

# Appendix 2Recognised qualifications

While there is a need to establish a consistent skillset for residential care, workers from diverse backgrounds bring knowledge and skills from other related disciplines that contribute to better outcomes for vulnerable children and young people.

Based on alignment with the competencies outlined in the *Residential Care Capability Framework*, the following qualifications are recognised as relevant to meeting the complex needs of young people in residential care. The preferred and recognised relevant qualifications include all superseded versions as identified through the Commonwealth Department of Education and Training (See www.training.gov.au).

| Category | Qualification |
| --- | --- |
| **Preferred qualification** | Certificate IV in Child, Youth and Family Intervention |
| **Relevant qualifications** | A degree (or above) qualification (Australian Qualification Framework Level 7 and above) in the following fields of study:Community ServicesYouth WorkSocial WorkAlcohol and Other DrugsCommunity DevelopmentDisabilityYouth JusticeMental HealthBehavioural Sciences (inc. Psychology and Psychiatry)EducationHuman ServicesNursing & MidwiferyAllied HealthDiploma in Community ServicesDiploma in Youth WorkDiploma in Mental HealthDiploma in Alcohol and Other DrugsDiploma in Secure ServicesDiploma in Child, Youth and Family InterventionDiploma in Youth JusticeDiploma in NursingCertificate IV in DisabilityCertificate IV in Mental HealthCertificate IV in Youth WorkCertificate IV in Alcohol and Other DrugsCertificate IV in Youth JusticeCertificate IV in Community Services |

# Appendix 3Minimum Qualification Requirements: Exceptional Circumstance

## Purpose

Children and young people who reside in residential care require the best possible care. Having a skilled and qualified workforce is core to the safety and wellbeing of these children and young people.

It is recognised that there may be instances where it may be challenging for residential care workers to commence the preferred or recognised relevant qualification and/or the mandatory units of competency[[1]](#footnote-1) prior to providing direct care to a child or young. An exceptional circumstance may be granted to support continued care for the child or young person in line with best interest principles outlined in the *Children, Youth and Families Act 2005*.

The provision of an exceptional circumstance does not change the expectation that residential care workers be working towards meeting minimum qualification requirements and complete training within the prescribed timeframes.

An exceptional circumstance must clearly articulate a prescribed timeframe not beyond the next scheduled training in the mandatory units of competency; and how the residential care service provider will pro-actively support a residential care worker who will be providing direct care to a child or young person but has not commenced the minimum or recognised qualification and/or the mandatory units of competency training.

The Department of Health and Human Services will actively monitor requests for exceptional circumstances. Extensions to an exceptional circumstances arrangement will be negotiated on a case by case basis.

## Minimum Qualification Requirements: Exceptional circumstance framework

The framework below provides guiding principles to support residential care service providers in requesting an exceptional circumstance. It should be noted that the residential care service provider must continue to maintain the requirements set out in the *Program requirements for residential care in Victoria*, such as safety screening requirements.

Residential care service providers must document any request for an exceptional circumstance in line with the community service organisation’s policies and procedures and the *Program requirements for residential care in Victoria*.

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| Section 1: Assessment of suitabilityThis section outlines the assessment conducted by the residential care service provider regarding the suitability of the residential care worker providing direct care to a child or young person who has not commenced the minimum qualification and/or mandatory unit requirements.In responding to this section, residential care service providers must demonstrate the following:An assessment of the worker’s skills which demonstrates alignment to learning outcomes of the mandatory units of competency. This can be accomplished by reviewing academic transcripts, supervisor reports or through an interview.A comparative assessment of the needs, characteristics, behaviours of the children and young people in the residential care home. This assessment should demonstrate that the worker’s current skills, experience and prior training are adequate to provide appropriate care to a child or young person residing in the home.Any additional information that would indicate suitability of the worker.  |
| Section 2: Supporting the residential care workerThis section outlines processes, additional support strategies and supervision for the residential care worker whilst providing direct care in a residential care home. In responding to this section, residential care service providers must demonstrate the following:The worker has completed orientation to the organisation and the residential care home, including policies, procedures, and emergency management processes.The supervision and support provided to the worker, including on-call support if the worker is providing direct care independently without supervision.Any additional supports or strategies provided to the residential care worker until the worker commences the mandatory units of competency training.A commitment and process (including timeframes) in place to support the worker to commence mandatory units of competency training. |
| Section 3: Timeframes and reviewAn exceptional circumstance must be time limited and must be clearly prescribed and aligns with the next available training in the mandatory units of competency. An exceptional circumstance must be formally reviewed by the relevant residential care program manager (or equivalent) and department Agency Performance and System Support (APSS) managers who will convene the reviews on an agreed schedule. |
| Section 4: Approval & ReportingIn line with the area-based approach, the Minimum Qualification Requirement: Exceptional circumstances must be approved by the relevant residential care program manager (or equivalent) and must be reported to department Agency Performance and System Support (APSS) teams. |

# Minimum Qualification Requirements: Exceptional Circumstance

*This form is to be completed by the residential care service provider.*

## Name of residential care worker:

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## Section 1: Assessment of suitability

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| Please provide an assessment of suitability for the residential care worker who will be providing direct care to a child or young person but has not commenced the minimum or recognised relevant qualification and/or the mandatory units of competency training. |
| [Enter text here][Please attach any supporting documentation (e.g. academic transcript, reports etc.)] |

## Section 2: Supporting the residential care worker

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| Please outline the supports provided to the residential care worker whilst providing direct care to a child or young person but has not commenced the minimum or recognised qualification and/or the mandatory units of competency training. |
| [Enter text here] |

## Section 3: Timeframe and review

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| Please provide the specific timeframes, and the agreed review date for the exceptional circumstance.  |
| Start date: …./…./…. | Next available training:…./…./…. | Review date:…./…./…. | End date: …./…./…. |

## Section 4: Approval and Reporting

In line with the area-based approach, the Minimum Qualification Requirement: Exceptional circumstances must be approved by the relevant residential care program manager (or equivalent) and must be reported to department Agency Performance and System Support (APSS) teams.

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| Residential Care Service Provider |
| . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Organisation (block letters) |
| . . . . . . . . . . . . . . . . . . . . . . . . . . . . .Signature of Program Manager (or equivalent) |
| . . . . . . . . . . . . . . . . . . . . . . . . . . . . .Name (block letters) |
| . . . . . . . . . . . . . . . . . . . . . . . . . . . . .Date  |

# Appendix 4Frequently Asked Questions

## What are the costs to undertake training?

Training providers are able to set their own fees. Therefore, costs associated with training will vary between qualifications, “short courses” and between training providers.

Residential care service providers will need to embed processes that facilitate training to meet the minimum qualification requirements. Residential care service providers are encouraged to collaborate and engage with training and education providers to understand the opportunities to implement training to meet minimum qualification requirements.

## What funding support is available to alleviate training costs?

The Victorian Department of Education and Training offers learning and development support, services and resources. There are initiatives available that could provide financial support for individuals and residential care service providers. Further information on these initiatives is available on the Department of Education and Training website at:

<https://www.education.vic.gov.au/training/Pages/default.aspx>

## What additional support is available?

In the first instance, residential care workers are encouraged to speak to their manager to identify additional supports that may be required to complete training. Managers and residential care service providers should discuss training and individual learning needs and seek advice with their preferred training provider.

When undertaking accredited training, a request to complete a Learning, Literacy and Numeracy (LLN) assessment will be provided by training providers. This assessment will identify if additional training or learning supports are required and the training provider will aim to embed learning supports for the individual.

Residential care service providers may also consider developing an individualised training and support plan to support their residential care workers to meet minimum qualification requirements. This document should be a personalised document that is developed in collaboration with the residential care worker. This document should be designed to directly respond to the residential care worker’s needs through the identification and provision of, tailored and individualised support. The Support Plan should outline strategies to overcome any identified barriers to completing training.

## Do I need to complete minimum qualification requirements if:

### I work in a Therapeutic Residential Care home?

The minimum qualification requirements apply to all residential care workers providing direct care to a child or young person in a residential care home. This includes children and young people in a Therapeutic Residential Care home.

The *Program requirements for the delivery of Therapeutic Residential Care in Victoria* also provide additional training requirements for residential care workers providing care in a Therapeutic Residential Care home. Residential care service providers must also consider additional training needs and requirements to support the ongoing fidelity of the model of care in Therapeutic Residential Care.

### I have a qualification but it is not listed as a recognised relevant qualification?

The minimum qualification requirements apply to all residential care workers providing direct care to a child or young person in a residential care home.

The list of recognised relevant qualifications is based on alignment with the *Residential Care Capability Framework*. There could be a number of reasons why your qualification is not listed. This includes:

* The core units of the qualification did not align with *Residential Care Capability Framework*; or
	+ The qualification has been superseded or is no longer delivered by training providers in line with the *Australian Qualification Framework*.

Workers can request to participate in a Skills Recognition process with their preferred training provider so that their previous training, qualifications, and/or work experience can be considered for the purpose of gaining credits or exemptions for a qualification or units of competency they intend to complete.

The skills recognition process aims to provide information to the worker to understand the extent of training that may be required to meet minimum qualification requirements. For many workers, who have existing skills, training and experience, there may be benefit in completing units of competency to ensure they have up-to-date and relevant accredited training.

### I have completed training/workshops in Trauma Informed Practice?

It is recognised that residential care workers have completed a broad range courses, workshops and training. Whilst these courses may have similar learning outcomes with the learning outcomes of the minimum qualification requirements, these residential care workers are still required to complete the minimum qualification requirements.

Workers can request to participate in a Skills Recognition process with their preferred training provider so that their previous training, and/or work experience can be considered for the purpose of gaining credits or exemptions for a qualification or units of competency.

For many workers, who have existing skills, training and experience, there may be benefit in completing units of competency to ensure they have up-to-date and relevant accredited training.

### I have an overseas qualification?

Residential care workers with an overseas qualification are encouraged to undertake a Skills Recognition process with their preferred training provider to understand if their overseas qualification aligns with the minimum qualification requirements.

The Skills Recognition process aims to provide information to the worker to understand the extent of training that may be required to meet minimum qualification requirements. For many workers, who have existing skills, training and experience, there may be benefit in completing units of competency to ensure they have up-to-date and relevant accredited training.

In some instances, a professional association (e.g. Australian Association of Social Workers) can assist with recognising overseas qualifications.

### I provide care to a child or young person in a short term or contingency arrangement?

The minimum qualification requirements apply to all residential care workers providing direct care to a child or young person in a residential care home. This includes four (or more) bed homes, homes with less than four beds and time limited placements negotiated with the department to meet individual need.

### I am not a full time worker?

The minimum qualification requirements apply to all residential care workers providing direct care to a child or young person in a residential care home. This includes residential care workers who are part time, casual, or labour hire worker.

It is recognised that completion of training requirements requires completion of workplace based learning, activities and assessment (workplace hours). Workplace hours may vary between training providers. Residential care workers who do not work full time are encouraged to speak to their respective manager and training provider to identify additional supports that may be required to complete training requirements and workplace hours.

A Support Plan is recommended to support the residential care worker in meeting the expected timeframes for competition of workplace hours and assessments based on the individual worker’s needs.

1. Previously known as “Top up training” [↑](#footnote-ref-1)