

Securing safer care staff: a model for the assessment, selection and training of staff to work in residential care

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Introduction

The recruitment of staff into residential child care presents an ongoing challenge for organisations. Methods of recruitment in the past have been criticised in a range of government reports. Skinner (1992) and others have highlighted the need for better preparation and training of residential workers. At a national level, the Care Standards and the establishment of registration for residential staff have prompted a re-examination of selection and training practices.

Cora Learning supports four independent schools for young people in care in the West of Scotland, and provides a centralised training and assessment function for staff across the schools. With the expansion of the secure estate in Scotland, two of the new secure units (St Philip's in Airdrie and The Good Shepherd Centre in Bishopton) fell

within the remit of Cora Learning. The organisation was given the task of undertaking the recruitment and training of new staff for the two new units.

The two new units were designed to provide secure care for 48 of Scotland's most troubled and troublesome young people. To support this aim, each unit needed to recruit at least 50 residential care workers with the potential to offer the type of support needed for this group of young people. Cora had experienced difficulty in recruiting care staff and this was echoed by Scottish Executive figures (2004) showing that social services, including residential child care, are currently running with a high number of vacancies. It was clear that there was a shortage of candidates who were both registrable and who had secure care experience. It was therefore necessary to develop a strategy to achieve the volume and quality of staff required by the new services. A decision was made to recruit and train 50 trainees who wished to have a change of career, equip them with an HNC in Social Care and an SVQ 3 in Health and Social Care (Children), and to provide them with experience of secure care through a work placement. This group of trainees would then be eligible to apply for the posts in the new units. If successful, it was also hoped that the model for selecting the trainees could become the normal practice for recruiting staff within Cora schools. This paper seeks to outline the model and builds upon a presentation given to an international child care conference in Sydney (Watson, 2005).

Timetable

The planning process began early in 2002, as the opening of the first of the new units (St. Phillip's) was planned for December 2005. A project manager was employed

from October 2004, supported by the full time secondment of a senior manager from St Mary's Kenmure and creation of an HR team at Cora Learning.

Over 450 applicants were needed to ensure sufficient choice for the selection of 50 trainees. Experience from Kibble's *Men Can Care* project (2004) suggested this was possible with sufficient marketing. The project became branded *Care for Your Future*. Like *Men Can Care*, a corporate logo was designed and used in an advertising campaign in the regional and local press. This campaign was supported by local radio, websites and four recruitment open days.

Advertising for the trainees started in January 2005. The selection process, based on the *Scottish Recruitment and Selection Consortium Toolkit* (2001), began in March 2005 and successful trainees started their HNC and SVQ 3 in May 2005. Selection for permanent posts began in October 2005. A similarly constructed and managed process for the Good Shepherd Centre took place six months later.

Who was targeted to become a care worker?

The lack of registrable people working in secure care meant that the campaign had to appeal to a wide audience, especially those not working in care. It was designed to trigger interest from people who might not previously have considered such a career change but would be open to suggestion. In the selection process, the focus was on the core capabilities identified in the *Toolkit* such as emotional intelligence, values, motivation and potential. Cora Learning was mindful of the need to adopt the constructivist approach of creating a social process model to ensure that candidates

had an understanding of the work and values of the organisation as well as the predictivist approach of designing a selection system that was objective, reflected the capabilities, and was capable of being undertaken by staff using parallel processes. (Chmiel, 2000; Anderson and Heriot, 1997)

The selection process

Stage one: sifting of paper-based information

Standard personal and academic details and a statement of motivation and interest were collected by the application form. Medical information, enhanced criminal record disclosure, history of sickness or disability, and information from referees were also obtained and a separate equal opportunities monitoring form was included. A total of 746 applications were received and sifted in two stages. The full work history, minimum academic achievement levels and completeness of answers reduced the number to 300 applications, which were then read by a different staff member who scored each answer against relevant capabilities. The top 160 were invited to the assessment centre. Sixteen staff drawn from the four Cora schools were trained to take part in the assessment centre. The training introduced staff to the principles and language of capabilities prior to meeting candidates, and the sifting allowed the capability matrix scoring process to be tested prior to the assessment centre.

Stage two: assessment centre day one

During the assessment centre it was important to provide candidates with an understanding of what secure care work could entail. An extract from a Who Cares? Scotland video, *Welcome to our World* (2002) was shown and candidates were asked to write about their responses to the young people and the scenarios which were

presented. The video was also discussed by small groups of five candidates to assess how individuals performed in a group. A 'safe care' interview focused on the candidate's values and a 'personality profile' provided an objective characterisation of candidates.

The assessment centre included a written exercise to determine the candidate's suitability to work in care. It was also designed to assess core skills around comprehension, reasoning, spelling, and grammar. Candidates weaker in these areas were offered support prior to the start of the HNC using a three or five day *core skills* programme run by SIRCC at Langside College.

Each exercise was scored by the trained staff against five capabilities highlighted by Skinner (2003). For example in the 'safe care' interview candidates were asked:

What do you think about when considering the victims of abuse as reported in the media? What emotions do you personally experience when considering the victims of abuse, and the abuser?

Scorers were able to award up to two points per capability. The five capabilities used to score answers to this question were:

Flexibility

1. Has a non-judgemental approach
2. Modifies own behaviour as required

Emotional awareness

3. Recognises and understands own emotions
4. Recognises and understands the emotions of others
5. Manages own and others' emotions effectively

Stage three: assessment centre day two

The top 100 candidates were invited back to day two of the assessment centre. On this day, they had an in-depth screening interview. Candidates verified their application form details, discussed their work record, showed certificates for claimed qualifications, completed any omissions, clarified uncertainties and confirmed statements about health and disclosure. Any additional information gathered during this stage was recorded and candidates then signed this new, accurate record.

Candidates then had a panel interview. The panel consisted of four people; a non-scoring chair holding all information such as issues raised in the screening interview, two staff members and a young person from Who Cares? Scotland. The panel members scored the interview individually before any joint discussion took place, in order to ensure that members did not influence each other's scoring.

Any issues that arose at any stage of the process where the candidate said or wrote something that caused concern about their appropriateness to work with young people could be recorded separately on a 'pink slip'. Staff could record only observed behaviour or direct quotes, not what the observer felt about it. The 'pink slips' were then discussed at the end of the panel interview where the four panel chairs and the

Director of Cora Learning, who had no other part in the selection process, discussed the issues at some length. About 15 percent of candidates received pink slips. Of these, a third received no further action, a third resulted in conditional offers of traineeships, and a third were rejected from further consideration. To some extent this session ameliorated staff concerns that their personal experience and professional judgement was not properly being taken into account. The assessment was very comprehensive. Feelings of doubt had to be substantiated with written evidence, based on observed behaviour and corroborated either by another panel member, or by the candidate's written evidence.

Within the assessment process, personal and professional references were requested using a form that enquired about generic capabilities, health, grievance and development. References were considered at the end. Medical reports and enhanced disclosures were considered by a group of senior staff. As a result, about four percent of candidates were excluded. The successful trainees had an average age of 31 and just over half were female and career changers. Ten already had an HNC in Social Care.

The training programme

Trainees were employed for eight months and were paid £750 per month plus travel and lunches. During this time, 40 trainees undertook a SIRCC-delivered HNC for two days per week, and had a work placement at St Mary's Kenmure or St Philip's Open Unit for two days per week. The work placement enabled them to undertake SVQ units. Other time was available for additional short courses, training and personal

study. The SVQ delivery was supported by Cora Learning assessor staff and by experienced residential child care staff mentors on placement. All mentors were trained for this task.

The 10 trainees with HNC in Care had four days per week in work placement and were heavily mentored through their SVQ. For all trainees the time available prior to the opening of the new secure units was too short to complete either the HNC or SVQ. On average, six HN units (including the unit *caring for young people in secure care settings*) and four SVQ units were completed. All trainees were guaranteed the opportunity to apply for the posts in the secure units. If permanently appointed, they were assured that they would be given the resources to enable them to complete their qualifications.

All trainees received specialist training in areas such as the management of challenging behaviour. As well as providing necessary skills this intense training was an important part of developing team working at an early stage. The trainees had made significant financial commitments and were undergoing major life changes, therefore the mutual support from fellow trainees was an important element in maintaining motivation. (Kolb and Fry, 1975)

Recruiting permanent staff for the new units

Feedback from work placements indicated that the trainees selected using the assessment centre were of a very high quality. This meant that there was ready acceptance of using this recruitment model for all posts. At St. Phillip's, 100 posts

ranging from domestic staff to depute principal were to be filled. Each post required a job description, capabilities, information pack, a tailored application form, advertisement, web site posting, sifting, assessment centre exercises, disclosure, references and medical check. Different exercises were used during the recruitment process, depending on the capabilities for each post. For example, candidates for the post of unit manager were tested on how they might respond to a range of management challenges which unfolded during a typical day. For maintenance, administration and ancillary staff, there were multiple choice written papers, along with group exercises. The group exercises had evolved from a team building programme previously developed by staff members from Balnacraig School in Perth and were used for almost all posts. Assessment for all posts included an identity check, screening interview, and 'safe care' questions. References, disclosure and medicals were sought in all cases.

The permanent residential child care posts advertised in the press generated 252 applications, including trainees, which were then sifted. The assessment centre ran with a focus on the ability to do the job, questioning and probing practice and experience, rather than the candidate's potential to develop the skills, as was the focus of the trainee assessment centre.

Young people's involvement in the process

Involving young people in the selection of staff is suggested in the *Toolkit*. Who Cares? Scotland provided support and training for young people taking part in the

assessment centre. This training was supplemented by Cora Learning in the assessment training for all assessors.

It was agreed that young people would have a meaningful role in the assessment centre and that their opinions would be given equal weight to those of staff. Simpler language was used in the young people's scoring sheets according to their age, educational and emotional development, but the same capabilities in candidates were scored. From analysis of scores and predictability of outcome, the young people's scores reflected staff scores and, in the case of the video discussion, proved more reliable than staff rating. Research has consistently demonstrated that the attitudes of a staff member can be more important than their experience and this has been demonstrated in reports such as *Let's face it: young people in care tell it like it is* (Paterson, Watson and Whiteford, 2003).

As well as having the same scoring role, young people could also complete 'pink slips.' This was infrequent, but their concerns were generally substantiated by staff. Certainly the young people took their role seriously and their maturity and emotional insights impressed staff who initially questioned their involvement. Candidates reported that, prior to the selection, the exercise they were most nervous about was being interviewed by the young people. After the selection, however, candidates reported that this session was the most enjoyable. It confirmed for candidates that working with young people was at the heart of the job. Interestingly, there were clear instances of otherwise capable candidates being unable and even unwilling to engage with young people.

Discussion

This was a process driven by a number of important demands:

The need for an excellent quality of care: this created a momentum for best practice which permeated the whole process and was actively supported by all stakeholders.

The need to appoint large numbers of staff: this led to the creation of new systems which encouraged innovation and evolution through the process. To date, 2400 applications have now been received, 950 assessments run, 280 appointments made and 75 traineeships completed of whom 68 were offered permanent posts by Cora schools. To ensure fairness, equal opportunities became a driver and not an obstacle.

The presence of information and research: knowledge of appropriate qualifications and capabilities of the posts, and the HNC and SVQ modules allowed for all aspects of the process, from job description to induction, to relate to one another. All decisions were evidenced and recorded at every stage, allowing for a transparent, equitable process.

Resource requirements to run an effective assessment centre are significant in terms of advertising costs, sufficient space for assessment, personality profiling expertise and staffing. Each assessment day for 16 candidates required dedicated recruitment, HR and training teams with administrative and housekeeping support, a minimum of eight assessor staff and support from Who Cares? Scotland. Staff time was also required for training in the process. Training increased as the process evolved and new staff took part, although many of them had just been appointed through it.

It was important that responsibilities were shared throughout the organisation. Cora Learning was the trainees' employer and therefore controlled the assessment centre and decision to appoint. The employer responsibility transferred to the individual secure units when the permanent posts were filled. Cora Learning produced the assessment evidence but St Philip's and Good Shepherd Centre made the final decision about whom they appointed.

To date, Cora Learning has run the complete selection and recruitment process twice. On each occasion, it was possible to learn and improve. Refinement of the capabilities used, the questions asked and manipulation of data have continuously evolved, as has the exercise design. Feedback from candidates, staff and young people has led to integrating some exercises for support staff. It has also led to a reduction in the time taken to run assessment centres for senior posts. This process has gone from two days to one day. As more jobs were assessed with additional capabilities, the overall list of capabilities available increased from 70 to 330, although they have never all been tested for a single post. Keeping focus on which capabilities were used and ensuring that they were sufficiently tested to ensure a robust analysis is a continuing priority.

Ultimately, the safer recruitment process is still based on people judging people and is therefore subject to error. This process is an attempt to deliver high quality staff to a care environment. Decisions can be made at that point in time about the suitability of a candidate. It has to be recognised, however, that, people change, managers' priorities for staff can evolve and the demands of the job alter. Therefore the process can never be regarded as perfect. At this stage, the process has delivered what trainers and staff believed to be high quality trainees who have subsequently

gained work in the new units. Staff turnover has been far lower than in Cora's previous experience of staffing a secure unit. It must be remembered, however, that previous experience was not based on a full intake of completely new staff. Generally candidates have been very positive about the process and have felt that they have been given every opportunity to shine. Staff are aware of how the process can identify inappropriate candidates not only through the assessment centre, but also through systematic checking of references, disclosure and medical checks. The Scottish Executive agreed to make significant funding available after the project started and they have subsequently shared the models used by Cora through its *Safe Recruitment* working party. More recently, another care organisation commissioned Cora Learning to run an assessment centre for them. This was highly encouraging as external recognition by other practitioners of a sound assessment centre approach to safer selection. The value of the assessment centre approach has been further recognised by the Scottish Social Services Council, who awarded Cora Learning a Care Accolade this year, in recognition of its efforts to implement safer selection of staff.

It is important to note, however, that this process is organic and dynamic. It is not perfect nor is it complete. It requires a continued commitment to review results and processes and to continue to research alternatives of best practice to determine the best range of capabilities and assessment exercises for each individual post in the sector.

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