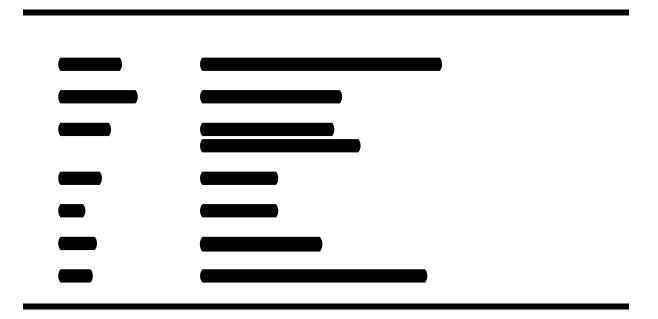


# ASU Submission Australian Government Attorney-General's Department

Establishment of an Accreditation Scheme for Children's Contact Services



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# 1. The ASU

The Australian Services Union (ASU) is one of Australia's largest unions, representing approximately 135,000 members in the public and private sectors.

The ASU is the largest union of workers in the social, community and disability services sectors. Our members predominantly work in non-government, not-for-profit organisations that support people experiencing or at the risk of experiencing crisis, disadvantage, social dislocation, or marginalisation. Of specific relevance to this consultation, the ASU represents workers in children's services, including Coordinators, Contact Workers, After Hours Service Workers, Youth Support Workers and Practice Leads at Children's Contact Services ('CCS') throughout Australia.

# 2. Our submission

The ASU supports, in principle, a CCS accreditation scheme. The accreditation scheme should have the following features:

# Requirements for accreditation

- All organisations offering CCS should be accredited;
- The same requirements should apply to publicly-funded and privately funded CCS;
- Compliance with operational standards defined by the Children's Contact Services Guiding Principles Framework for Good Practices ('Guiding Principles') should be the basis for accreditation;
- Additionally, the scheme should also require:
  - o demonstrated compliance with all obligations under employment law (e.g. award pay and conditions) must be a requirement for accreditation;
  - ongoing professional development for CCS workers;
- A Certificate IV in Community Services is a relevant minimum qualification, but the scheme should recognise the skills and experience of long standing sector workers without qualifications.

# Administration of the accreditation scheme

- There should be an independent body to handle complaints for accredited CCS;
- There should be sanctions for operating a CCS without accreditation; and
- There should be a centralised register of CCS providers.

### Workforce issues

 Any minimum qualification and professional development requirements for CCS workers must be supported by funding for training to upskill the workforce to meet the new requirements.

Accreditation must be supported by a significant and sustained increase in funding. The latest budget allocated \$101.4 million over four years from 2021-22 (with \$29.5 million per year ongoing) to increase access to Children's Contact Services. This funding needs to be tied, in part, to delivering improved pay and conditions, access to training and professional development for workers.

# 3. The Guiding Principles

All CCS providers should be required to comply with the Guiding Principles to be accredited. They are the minimum of service and safety standards that should apply to children, parents and workers. Anything less is unlikely to deliver positive outcomes for children and their families or ensure safety at work for employees.

In our recent survey, our members indicated the average wait time at their service was between 1 month - 3 months (33.34%) and 66.67% indicated their service had a waitlist of more than 3 months. Members also indicated it is common for clients to be referred to another service due to the wait times being too long at their workplace. A child's right to safe and quality services should not be based on the wait list of a funded, regulated, and quality-assured provider versus an unregulated private provider who does not have the same requirements/no requirements placed on them.

Further, our recent survey of members who work for CCS providers indicate the majority of members at workplaces covered by the principles (91.67%) feel they are safe when they are at work and when they are arriving and leaving their workplace. The majority of members (92.31%) agree the minimum number of staff that should be on-site at any one time should be 2 staff members, which is the same as the Guiding Principles Framework. However, 7.69% of our members felt the minimum number should be 3, particularly for CCSs that are supervising multiple families during the same time period.

# 4. Minimum qualifications and professional development

Staff working in the CCS sector should hold a minimum qualification relevant to supporting children in a safe, neutral and child-focused environment. However, there should be a transitional process to allow staff without qualifications to gain appropriate qualifications. There should be funding to allow those who need to complete a qualification.

In our recent survey, there was disagreement amongst members about the appropriate level of qualification that should be required to work in the sector. A majority of members indicated the minimum level of qualification that is appropriate for a worker in CCS is the Certificate IV and above (Cert IV = 14.29%, Diploma = 35.71%, Bachelor's Degree = 28.57%).

The ASU submits that all staff who engage directly with children and families should be required to hold the mandatory minimum requirement that is determined by the Department. We believe the only staff roles that should not require such a qualification are those working in an administrative and clerical function.

In addition, Supervisors and Managers of a CCS should hold an undergraduate qualification of a minimum of 3 years as these are specialist roles that have a high level of responsibility, skill and knowledge. They are often responsible for critical incident management, assessment of court orders, managing subpoenas, briefing and debriefing of staff pre and post changeover/supervised visits and are required to supervise other staff members.

### Reasons why our members think it is important to have a minimum qualification for CCS work

- I think relevant work experience is also important. I think at least Diploma level in a relevant discipline. The qualification should include important aspects such as mental health and responding to clients experiencing mental illness; child development; trauma informed practice; the role of gender inequality in DFV and how to recognise and respond to DFV victim-survivors, perpetrators and children who have experienced DFV/trauma. Child protection practice. Professional boundaries. Case note writing.
- Diploma or higher. I believe life experiences are extremely important but further study can hone the skills & cavities you bring to the role
- To be able to fully capture and understand what is happening within the contact, while being able to appropriately respond to the needs of the clients. Being able to manage the mental health, AOD, disability of parent and child, etc is extremely essential. Understanding of risk is also important
- To have a deeper understanding of child development, ability to work with children in age appropriate manner, communication skills with clients (adults & children), risk assessment, management & mitigation skills, conflict resolution skills, case planning and management, ability to walk alongside clients without judgement, appropriate support of vulnerable clients, hold optimism for a better future, transition planning, ability to identify need for referrals. Set clients up for success not failure.
- Staff should have a baseline understanding of child development, systemic community issues, cultural and economic issues, child and youth mental health etc. It's important to have this knowledge so when you put family workers in situations with vulnerable children, youth and their families that have been separated they know how to respond appropriately to this clientele, understand the risks involved and understand how to identify and manage challenging situations.

# Phasing in of qualification requirements

Assuming the Certificate IV in Community Services is the mandated qualification for workers, workers currently in CCS with no relevant qualification should have up to 12 months to enrol in an appropriate accredited course. There should be no minimum requirement in terms of how long it takes a worker to obtain the qualification, as our survey indicated many workers have multiple jobs (37.50% work at another community sector organisation or work in another industry). They also often work in a part time (43.75%) or casual basis (37.50%).

As noted previously, workers with lived experience should have prior experience and skills recognised by any new accreditation scheme, this could be accomplished through an audit process that determines what skills and knowledge the worker current has, and what/if any further study would be required to receive a formal qualification.

The audit could be developed by the Attorney-General's Department on the basis of units of competence (once finalised) that will be required to work for an accredited CCS provider.

For workers currently in CCS who hold a relevant qualification – this should be recognised by the accreditation scheme through an audit (or similar process). Should sector specific CCS practitioner units of competence form part of the mandatory qualification, workers should again have up to 12 months to enrol in these units with no minimum requirement for completion of units.

It is essential that all staff are provided with appropriate study time (including paid study time) in order to complete the qualification.

# **Professional Development**

The ASU believes mandatory training, supervision and professional development are essential to the success of an accreditation scheme. Who develops and who delivers the training will have a significant impact on its effectiveness. There should be appropriate funding to CCS providers to support professional development.

Professional development should not be limited to formal training and educational activities. It is important that CCS providers are required to take active steps to further the development of their staff, including activities such an in-house training, team meetings and mentoring by senior staff members.

# 5. Compliance with employment law obligations

Only Children's Contact Services that are able to demonstrate compliance with all obligations under employment law should receive accreditation. This includes meeting minimum employment law obligations in:

- Fair Work Act 2009:
- National Employment Standards;
- Work Health and Safety Standards;
- Any applicable Enterprise Bargaining Agreement;
- Any applicable Modern Award.

Every worker, regardless of employment status, should have access to a series of minimum standards to enable workers to be justly rewarded for the work that they do.

The use of an accreditation scheme has the potential to positively impact compliance with minimum legal employment entitlements and should be considered by the Department.

# 6. Administration of the accreditation scheme

# Complaints handling bodies

The ASU supports the establishment of an appropriate independent body for dealing with complaints concerning CCS providers or their staff. This body should be provided with sufficient funding to investigate and respond to complaints in a timely manner. This body should have the appropriate responsibilities to report matters to the police or to state occupational health and safety bodies.

The body should be empowered to handle all complaints against a CCS provider concerning their accreditation requirements. This should include their obligations to staff, such as safety features and compliance with employment law obligations.

# Registration of CCS providers

The ASU believes there should be a centralised list or register for all government funded and private CCS providers.

We understand the Australian Children's Contact Association (ACCSA) provides a CCS Information Directory and we support a centralised register that would contain similar fields to those required by ACCSA.

The register should capture the following information:

- Name of CCS;
- Service Type;
- Contact Details;
- Services Provided;
- Service Environment;
- Service Staff details;
- Service Process;
- Operating Hours;
- Service Documents, including costs; and
- Any contravention of the providers' accreditation requirements, including details of any sanctions imposed or remedial action taken.

In addition to the above, should an accreditation scheme be established, consideration should also be given to the following: current wait list times; list of qualifications of staff members; and accreditation information pertaining to the service and its workforce.