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Social Care **Wales**

Guidance for managers of Night residential child care workers

Guidance for managers of night residential child care workers to support workers studying for the Level 3 Health and Social Care: Practice (Children and Young People) qualification.

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Level 3 Health and Social Care (Children and Young People)

This guidance is for managers of night residential child care workers. It will help managers support workers studying for the Level 3 Health and Social Care: Practice (Children and Young People) qualification.

The qualification

The Level 3 Health and Social Care: Practice (Children and Young People) qualification, is designed for individuals working in health and social care settings. This qualification will develop their ability to practically support the health and care needs of children and young people in a range of settings. It's practice-based and assesses knowledge and practice through work in the work setting.

In this guide, the Night residential child care worker will be referred to as 'the learner'.

To achieve the Level 3 Health and Social Care: Practice (Children and Young People) qualification, the learner must achieve a minimum of 50 credits in total:

- 18 credits must be achieved from the mandatory group.
- a minimum of 13 credits must be achieved from optional group A
- the balance of 19 credits can be achieved from units in optional groups A or B.

Choosing the most appropriate units

As a manager, you'll be involved (with the learner and assessor) in choosing the optional units which will make up the learner's Level 3 qualification. The units chosen should reflect the needs of the service, but it's essential that they **reflect the learner's role and duties** as a night residential child care worker.

Below you'll see the range of units available to a learner across the mandatory and optional groups A and B. We have highlighted a selection of the most common units selected based on the role of a Night residential child care worker.

Mandatory group

Mandatory unit 365 - Promoting core practice in Health and Social Care (Children and Young People)

Credit value: 18

Optional units Group A

Suggested/common optional units to achieve the required credits:

The units chosen from the list below will depend on the setting

Unit 367: Providing care and support for children and young people who are looked after

Credits: 18

Unit 339: Promoting positive approaches for behaviour support

Credits: 6

Unit 382: Trauma informed practice with children and young people

Credits: 5

Unit 379: Supporting individuals to plan for and prepare meals

Credits: 6

Unit 401: Using assessments for the development of personal plans

Credits: 6

Unit 366: Providing care and support for disabled children and young people

Credits: 20

Unit 370: Supporting young people to develop independence skills and prepare for adulthood

Credits: 4

Unit 336: Supporting individuals who misuse substances

Credits: 7

Unit 309: Promoting and supporting speech, language and communication skills

Credits: 4

Unit 383: Using communication methods to motivate individuals to achieve their personal outcomes

Credits: 5

Unit 236: Contributing to the support of individuals who misuse substances

Credits: 4

Optional units Group B

Suggested/common optional units to achieve the required credits:

The units chosen from the list below will depend on the setting

Unit 347: Health promotion

Credits: 3

Unit 350: Supporting the use of medication in social care settings

Credits: 5

Unit 208: Supporting children living with diabetes mellitus

Credits: 5

Unit 210: Introduction to breathlessness and asthma in children

Credits: 2

Unit 243: Supporting food safety practice in health and social care settings

Credits: 2

Unit 312: Supporting children living with epilepsy

Credits: 3

Unit 212: Supporting individuals with moving and positioning

Credits: 3

Unit 240: Supporting individuals to maintain mobility and minimise the risk of falls

Credits: 2

Unit 244: Supporting individuals to manage pain and discomfort

Credits: 2

Within the Level 3 qualification, the 'you are able to work in ways that...' criteria demonstrate practice and includes observations, and the 'you understand..' criteria confirms knowledge. Some of the ways the night workers can demonstrate knowledge are through:

- reflective discussions
- reflective accounts
- written work
- oral questioning
- practice.

There's more information in the [assessment delivery guidance](#).

Some of the 'you are able to work in ways that' criteria, contain family and it's often considered difficult for night workers to demonstrate and gather evidence for these criteria. This is because night workers often have very little, if any

contact with the child's family. Below are examples of some of these criteria and suggested ways on how they can be met.

Examples of how to meet the criteria

Unit 365

Criteria

2.1 Well-being

You are able to work in ways that:

- take account of the importance of the child's family/significant others and support and develop these relationships in the interest of the child, unless there is evidence that this would be damaging
- take account of the importance of families, friends and community networks and work in a way that supports, develops and promotes these relationships.

Suggested evidence opportunities

This could be through:

- a discussion with the child and their feelings about the relationship
- listening carefully and actively to the child
- understanding the child's history and family dynamics and how you can support their communication
- writing in the child's notes
- handover times with colleagues

- asking that a colleague on a day shift follow up a particular request from a child
- supervision with manager
- contact as necessary with family members/significant others.

Unit 367

Criteria

8. Safeguarding and safer care

You are able to work in ways that:

8.6 Support children and young people to participate in agreed contact with wider family members and informal networks, taking account of any restrictions that are in place

8.7 Support children and young people to understand why any restrictions have been placed on contact with identified wider family members and informal networks

8.8 Support children and young people following contact with wider family members and informal networks

Suggested evidence opportunities

- a discussion with the child and their feelings about the contact. Listening carefully and actively to the child
- Writing in the child's notes what their preferences are and requesting a colleague pass information on.
- understand the child's history and family dynamics and how you can support their communication

- handover times with colleagues
- supervision with manager
- discussion with / explaining to the child to help them understand anything they may not know about the contact and restrictions.
- contact as necessary with family members/significant others.

Unit 339

Criteria

6. Promote multi-agency collaboration and partnership working

You are able to work in ways that:

6.1 Embed the principles of effective partnership working in your practice

6.2 Develop, share and agree plans and approaches for behaviour support in accordance with role and responsibilities

6.3 Share with others the outcomes of reviews and assessments, including risk assessments.

Suggested evidence opportunities

This could be through:

- a discussion with the child about their feelings, about the relationships and triggers
- listening carefully and actively to the child
- understanding the child's history and family dynamics and how you can support their communication
- discussions with the child about the support they need and the decisions that need to be made that affect their lives.

- writing in the child's notes – daily notes, support plan etc.
- making sure a detailed description of how best to communicate with individuals is included in their records
- handover times with colleagues
- asking that a colleague on a day shift follow up a particular request from a child
- supervision with a manager
- contact as necessary with family members/significant others
- asking individuals what they want in ways they understand
- giving sufficient time for the child to be fully involved in the decision making process.

Case example

Worker A is Night residential child care worker in a residential setting for young people aged 11 to 16. A typical night shift for Worker A involves:

- settling children and young people
- engaging with children and young people
- supporting children and young people
- supporting individual needs and preferences
- talking to and listening to children and young people
- positive behaviour approaches and managing unwanted behaviour
- monitoring children and young people
- trauma informed care
- administering medication
- multiagency working, such as contact with the police, health or the emergency duty team
- contact with family
- preparing meals

- food rotation
- domestic duties
- recording and reporting
- reading files, such as plans and risk assessments
- handover to colleagues
- health and safety checks
- challenging discrimination.

Worker A has an initial checkpoint meeting with their manager and assessor to:

- confirm the assessment process and discuss the job role functions to be carried out.
- discuss the links between the job role functions and the assessment, for example how practice promotes and supports the health and well-being of children and young people.
- match the job role functions to the unit requirements, i.e. making sure they provide enough evidence for the units Level 3 Health and Social Care: Practice (Children and Young People).

They identify the following units as appropriate because of the links with Worker A's work role and activity (click on 'show' to see the details for each unit) :

Mandatory unit 365 - Promoting core practice in Health and Social Care (Children and Young People)

Show

Credit value: 18

Activity examples

- Child centred practice

- Respecting individual needs and preferences
- Dignity
- Engaging with children and young people
- Transition
- Working with other agencies
- Challenging discrimination.

Option Group A, Unit 367: Providing care and support for children and young people who are looked after

Show

Credit value: 18

Activity examples

- Child centred practice
- Respecting individual needs and preferences
- Transition
- Engaging with children and young people
- Working with other agencies
- Positive behaviour approaches and trauma informed care
- Dealing with challenging behaviour
- Challenging discrimination.

Option Group A, Unit 339: Promoting positive approaches for behaviour support

Show

Credit value: 6

Activity examples

- Child centred practice
- Dealing with challenging behaviour
- Engaging with children and young people
- Transition
- Working with other agencies.

Option Group A, Unit 382: Trauma informed practice with children and young people

Show

Credit value: 5

Activity examples

- Child centred practice
- Dealing with challenging behaviour
- Engaging with children and young people
- Transition
- Working with other agencies
- Positive behaviour approaches and trauma informed care.

Option Group B, Unit 350: Supporting the use of medication in social care settings

Show

Credit value: 5

- Child centred practice
- Administer medication.

Total number of credits = 52

At the initial checkpoint meeting Worker A, their manager and assessor also:

- agree how consent will be gained from children/young people and their families/carers for the observations to take place, and how privacy and confidentiality will be maintained throughout the assessment process
- agree a timeframe for when assessments need to be completed, confirming a date for the planning meeting
- agree how the portfolio of evidence and reflective log will be managed
- plan a series of progress meetings to review day-to-day practice and reflections and identify portfolio evidence
- identify and agree any reasonable adjustments needed for learning
- agree how the learner's well-being will be supported while undertaking the qualification.

How the qualification is assessed

The assessment of this qualification needs close partnership working between the learner, manager and assessor.

The main assessment methods within this qualification are:

- a series of planned structured tasks
- a reflective log
- a portfolio of evidence
- an assessor-led discussion.

The assessments are designed to allow for **holistic evidence** collection. This means that the learner's evidence will be collected from real working situations that show the learner can work **confidently** and **consistently** across all aspects of the qualification on more than one occasion.

The **structured tasks** will support the learner to demonstrate their knowledge and skills across different units and learning outcomes, and integrate the knowledge and skills in a way that reflects workplace and sector requirements to provide effective care and support.

It's important that learners are only put forward for assessment purposes when there is confidence from both manager and assessor that the learner is sufficiently competent to be able to successfully complete the assessment. This should be at a point following the majority of learning delivery, and following a programme of ongoing and formative assessment.

The manager understands the normal internal processes of the setting, documentation, communication systems and so on, and can assess whether the learner is using them appropriately and confirm that the learner is ready for assessment.

How the manager can support the learner

Step 1 - Pre-delivery

Initial registration and unit selection

The employer/manager supports the learner to understand the unit options available and helps select units that are most relevant to Night residential child care worker role.

Step 2 - Learning period

Formal learning period

The employer/manager supports the learner through the process of on-the-job learning and training, including any reasonable adjustments. Ensuring the learner and their well-being is supported through 'normal' workplace monitoring and CPD activities, for example attending regular one-to-ones / supervision, updating reflective logs (which is a mandatory requirement for assessment).

Gateway to summative assessment / observations

The employer/manager liaises with the assessor to determine the point when the learner is ready for formative assessment. The assessor may want to carry out formative assessments and discuss the outcome with the manager to inform or confirm 'readiness for assessment' or identify any further development or support needs.

Step 3 - Assessment period

Before the assessment

- The employer/manager meets with the assessor to confirm and clarify, if needed, their understanding of assessment requirements, including mapping of outcomes and process expectations.
- Initial candidate checkpoint meeting before the assessment. The employer/manager can meet with the learner and assessor to discuss and plan unit choices, summative assessment plans and timeline.
- Conduct agreed workplace activities on an ongoing basis throughout the assessment period, for example regular progress meetings.
- Discuss and support the learner to identify the best evidence for their portfolio and reflective log.
- Planning meeting for assessment. The employer/manager needs to review the learner's final plans to confirm and sign off relevant paperwork.

Step 4 - Completion

Confirmation of decision

The assessor will meet with the manager to inform tell them of the assessment outcome.

More information and resources

- [Level 3 Health and Social Care: Practice \(Children and Young People\) qualification overview.](#)
- [City & Guilds Level 2/3 Health and Social Care: Practice, qualification delivery guide.](#)

Appendix 1 - Case study example of an assessment

Worker A is Night residential child care worker in a residential setting for young people aged 11 to 16.

Worker A's assessor is observing the end of their night shift and morning routine.

On arrival at the residential home, Worker A asked their assessor to show ID and sign the visitor book. Worker A explained that for everyone's safety and security, they must have a record of anyone coming in and out of the building. This also complies with fire regulations.

Worker A explained that they would be waking two young people up shortly, but first they had to make a phone call to the police about a young person (S) who had gone missing the night before.

Worker A called the police station. During the call, Worker A gave their details and confirmed who they were speaking to and the reason for their call. The desk sergeant confirmed they had located S at an address Worker A's colleagues had given the night before. They arranged that the police would bring S back to the unit later that morning. Worker A asked about S's condition when she was picked up, and explained to the police that the young person has type one diabetes which needs careful monitoring, regular meals and medication to maintain the balance of her blood sugar levels. Worker A stressed that it was very important S had something to eat and was brought back to the home as soon as possible so she could have medication.

When Worker A finished the call, they recorded the details, as set out in the organisation's requirements and recording systems for when a child or young person goes missing from home.

Worker A explained that they were now going to wake two young people. Worker A went upstairs and knocked the first door and in a friendly, gentle

voice said good morning to B. They then did the same on the other door, and again in a friendly, gentle voice said good morning to J. J wasn't keen to get up, so Worker A encouraged him in a playful but firm manner. Worker A commented on a new poster J had on his wall, and J became very animated and eager to tell Worker A what it was about. Worker A was engaged with J throughout.

B called worker A and asked if she had time to wash her hair. Worker A said she didn't really have time and B clearly wasn't happy with this. Worker A asked why she hadn't washed it the night before or asked for an earlier call. B said she hadn't had time the night before and no one had told her to ask for an earlier call. B appeared to become sullen and Worker A could see B's behaviour changing. Worker A responded to this saying she was in again that night and offered to help her wash and style her hair in a mini pamper session. B seemed excited about this and agreed enthusiastically. They discussed what products they could use and how B wanted her hair done. Worker A offered B some suggestions on what she could do with her hair for today.

When Worker A was sure both young people were up, they asked them what they would like for breakfast. Worker A went downstairs and put the kettle on ready for them to get up.

When Worker A returned downstairs, another member of staff had arrived. Worker A gave them a quick verbal handover and told them about their telephone call with police about S, and that the other two young people had been called and were getting up.

Young person B needed medication, and Worker A asked the other member of staff if they would help them administer the medication. Worker A explained to the assessor that two people were required to administer medication, in line with their medication policy. The medication was in a locked cupboard, which Worker A had the key to. Both staff checked the medication and that it matched

with the medication on B's paperwork. When they had dispensed the medication, they both signed the appropriate medication record.

B arrived downstairs and was asked if he would like a cup of tea. He was given his medication and Worker A checked it with him and observed him to make sure he had taken it.

B had a packed lunch for school. He went to check this with Worker A, who gave him a choice of cakes to take. He then had a chat while he drank his cup of tea and ate his breakfast.

Worker A updated the daily records as appropriate to the setting and completed a handover update. Other staff then started to arrive for the morning shift. Worker A went back upstairs to J who hadn't come downstairs. Worker A reminded J of the time and told her that she still needed breakfast. Worker A also told J that her lunch money and bus fares were ready, confirming the amounts with J.

After coming back downstairs, Worker A handed over relevant information to the morning team. They explained that S was at the police station and the police would be bringing her back soon.

Evidence of support and key practice

Worker A:

- embedded child centred approaches
- followed workplace policies and procedures
- respected the individual needs and preferences of the young people, and supported their personal routines while treating them with dignity and respect
- took into account the specific nutritional and medical requirements of the young people

- promoted and supported the health and well-being of the children and young people
- showed clear understanding of each young person's morning routine and needs. They communicated well with the young people while getting them up. They adapted their communication methods to meet the needs and preferences of the children and young people, and their colleagues during the handover.