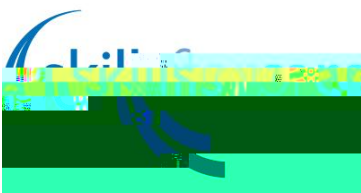




# The Care Certificate Framework

## Guidance Document



## Overall goal of the Care Certificate

The introduction of the Care Certificate will provide clear evidence to employers, patients and people who receive care and support that the health or social care worker in front of them has been trained and developed to a specific set of standards and has been assessed for the skills, knowledge and behaviours to ensure that they provide compassionate and high quality care and support. This should reflect the elements common to these workforces and meet the requirement for providers of regulated activities to ensure that their staff are suitably trained.

used here as this was the term used by Camilla Cavendish. The approach used to deliver the learning required to meet the outcomes of the Care Certificate Framework and ensuring that there is a record of the assessment decisions that is auditable would be determined by the employer.

## The Care Certificate Standards

The Care certificate standards are:

1. Understand Your Role
2. Your Personal Development
3. Duty of Care
4. Equality and Diversity
5. Work in a Person Centred Way
6. Communication
7. Privacy and Dignity
8. Fluids and Nutrition
9. Awareness of Mental Health, Dementia and Learning Disability
10. Safeguarding Adults
11. Safeguarding Children
12. Basic Life Support
13. Health and Safety
14. Handling Information
15. Infection Prevention and Control

## Who Should Undertake the Care Certificate?

Health Care Assistants, Assistant Practitioners, Care Support Workers and those giving support to clinical roles in the NHS where there is any direct contact with patients. Care Support Workers means Adult Social Care workers giving direct care in residential and nursing homes and hospices, home care workers and domiciliary care staff. These staff are referred to collectively as Healthcare Support Workers (HCSW) / Adult Social Care Workers (ASCW) in this document. Other roles may be included where achievement of **all** of the standards is possible. As some of these roles would be very different in health and social care it is up to the employer to decide whether the Care Certificate is appropriate. However, to be awarded the Care Certificate the person must meet all of the outcomes and assessment requirements for all 15 standards.









Some examples are in the table below:

place where the External Quality Assurance will look at this across multiple providers. Again employers may choose to group together to hold standardisation meetings across a geographic area.

### **Assessment of Performance**

activity and observed by the assessor unless the use of simulation is expressly allowed. Learners can practice and develop their new skills in a classroom/ skills lab or similar setting but where possible the assessment evidence must be collected during real work activity. Simulated evidence can only be used where the evidence could not reasonably be assessed in a real work situation or is unlikely to occur during the induction period for example basic life support. It is not permissible to use Skype or other forms of video evidence when assessing performance.

All performance required to meet the Standards must be assessed and no evidence of prior experience is allowed. The exception to this is Basic Life Support. Depending on the role and the Level of Basic Life Support training the individual is required to have it may be appropriate to recognise prior learning where this can be clearly evidenced and is within the recommended refresher period. Assessment of competence in Basic Life Support must be by observation in a simulated setting an appropriate training model.

As the Assessor you may also want to seek the views of work colleagues, patients or decision still lies with you on whether the person has met the outcome required.

### **Assessment of Knowledge and Understanding**

Assessment of knowledge and understanding is prefixed with verbs such as

verbal evidence such as the workbook, written questions, case studies or sound files. Again it would not be appropriate to specify in the Standards the volume of evidence needed.

employment setting (e.g. domiciliary care, residential, hospital or community healthcare setting), the learner and the outcomes to be assessed. There is no requirement for any end testing.

Assessment evidence can include but is not restricted to:

- Observation records
- Oral or written answers to questions
- Small project such as a poster presentation
- Multiple choice questions
- Record of simulated activity

Certificates of Attendance, attendance on study days or e-learning without assessment of what has been learnt is **not** evidence toward achievement of the Care Certificate.

### **Holistic Assessment**

Whilst each of the Standards in the Care Certificate is independent they are also in many instances inter-related. For example communication is an independent standard but communication skills will be used when the worker is interacting with patients and service users across almost all the other Care Certificate Standards. Similarly a Duty of Care will underpin everything the worker does. This means that whilst it is possible to assess each Standard separately it is much more efficient to use the same evidence to meet different Standards as far as possible.

This is called holistic assessment and can be used where learning or performance objectives are inter-related.

You should take every opportunity to assess holistically and proportionally. Evidence generated during the course of an assessment maybe used to evidence achievement of more than one standard in the Care Certificate. Where appropriate the same evidence may also be used towards achievement of QCF qualifications and Apprenticeships. Mapping against the NOS, NMTS/CIS and QCF units is contained in a separate document.

### **Recording Assessment Decisions**

Documentation of assessment and evidence of practice is the responsibility of the HCSW/ASCW and their employer; the evidence may recorded in a workbook, portfolio or on line. This document will be used in gathering evidence for the Care Certificate and in terms of portability can be used as evidence when changing roles or moving between employers.

It will also be a place where workers can document their continuing training, education. This methodology brings these roles in line with professional roles in both health and social care.

The recording method should also be used to gather assessment information from peers and supervisor. It should include feedback from the patient/people who receive care and support as part of an on-going appraisal and development process.



## **Quality Assurance of the Care Certificate**

The employer is responsible for assuring the quality of the teaching and assessment of the Care Certificate. The Registered Manager in Adult Social Care or named person in a health employer will sign off the HCSW/ ASCW as having successfully met all the standards to achieve the Care Certificate.

The Registered Manager/ named person must assure themselves that the standard of teaching and assessment is of sufficient quality that they can be confident that the HCSW/ASCW has fully met the standard.

The outcomes of the Care Certificate will be quality assured via the CQCs existing methodology in reviewing its essential standards.

## **Award of the Care Certificate**

Will be via the employer using the approved national template.

## **Certification**

This should be recorded by the employer and where possible made accessible via a

## Related resources

National Occupational Standards (2013)  
Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England (2013)  
Compassion in Practice  
Care Certificate Framework (Assessor Document)

**Royal College of Nursing** (2012) Position statement on the education and training of healthcare assistants HCAs March 2012

[http://www.rcn.org.uk/\\_data/assets/pdf\\_file/0005/441059/Position\\_statement\\_-\\_HCAs\\_Final\\_2.pdf](http://www.rcn.org.uk/_data/assets/pdf_file/0005/441059/Position_statement_-_HCAs_Final_2.pdf)

**Nursing and Midwifery Council.** Delegation

<http://www.nmc-uk.org/Nurses-and-midwives/Regulation-in-practice/Regulation-in-Practice-Topics/Delegation/>