



## Questions and Answers on the Implementation of the Care Certificate for the Public

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### 1. Why is the Care Certificate being introduced?

Following the report of the Francis Inquiry in 2013 which identified serious failures to provide healthcare, Camilla Cavendish was asked by the Secretary of State to review and make recommendations on the recruitment, learning and development, management and support of healthcare assistants and social care support workers, to help ensure that this workforce provides compassionate care.

The resulting report, The Cavendish Review: An Independent Review into Healthcare Assistants and Support Workers in the NHS and Social Care Settings (July 2013) found that preparation of healthcare assistants and social care support



workers for their roles providing care was inconsistent. The report recommended development of a Certificate of Fundamental Care – the “Care Certificate”.

## **2. When is the Care Certificate being introduced?**

The Care Certificate will be introduced in April 2015.

## **3. Who is the Care Certificate for?**

The certificate is intended to be one part of the induction for staff who are employed as 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” includes the following: Adult Social Care workers giving direct care in residential, nursing homes and hospices, home care workers, domiciliary care staff. These staff are referred to collectively as Healthcare Support Workers (HCSW) or Adult Social Care Workers (ASCW). Other roles in health and social care such as caring volunteers, porters, cooks or drivers that have direct contact with patients and/or service users could also undertake all or some of the Care Certificate if the employer thought it was appropriate to their role, but in order for the Care Certificate to be awarded the person must demonstrate that they have achieved all of the required competences.

## **4. What does the Care Certificate cover?**

The Care Certificate is the start of the career journey for these staff groups and is only one element of the training and education that will make them ready to practice within their specific sector. The Care Certificate builds on and replaces the Common Induction Standards (CIS) and National Minimum Training Standards (NMTS). It sets out explicitly the learning outcomes, competences and standards of care that will be expected in both sectors, ensuring that the HCSW/ASCW is caring, compassionate and provides quality care. The Care Certificate standards are listed below.

### **The Care Certificate standards:**

- 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 disabilities
10. Safeguarding Adults
11. Safeguarding Children
12. Basic Life Support
13. Health and Safety
14. Handling Information
15. Infection Prevention and Control

### **5. How will the Care Certificate be awarded?**

The Care Certificate will be awarded by the employer of any HCSW/ASCW who successfully completes all the standards. A template will be available which can be personalised by organisations awarding the Care Certificate if they wish to provide the worker with a paper certificate.

### **6. Is the award of the Care Certificate based only on knowledge?**

No, to be awarded the Care Certificate the person must acquire knowledge and demonstrate competences. Assessment of knowledge and understanding is prefixed with verbs such as “describe”, “explain”, “define”, “list” or “identify” and can be based upon written or verbal evidence such as a workbook, written questions, case studies or sound files.

Evidence of performance prefixed with words such as “demonstrate”, “take steps to”, “use” or “show” must be undertaken in the workplace during learners’ real work activity and observed by the assessor (unless the use of simulation is specifically allowed). Learners can practice and develop their skills in a classroom or similar setting but most of the assessment evidence must be collected during real work activity.

### **7. How was the Care Certificate tested?**

Across Health and Social Care 29 pilots sites tested the Care Certificate with 530 participants being involved. In Adult Social Care 16 pilots sites were recruited



involving 230 individual participants. The Care Certificate will be a robust response to ensure that organisations establish that health and care staff are competent and safe to deliver care.

The competences and standards in the draft Care Certificate were based on the Skills for Care Common Induction Standards and Skills for Health National Minimum Training Standards and Code of Conduct. Both of these standards benefited from extensive public and patient engagement. Members of the public, patients and carers were given the opportunity to comment upon the draft proposals for the Care Certificate.

## **8. How is the quality of the Care Certificate assured?**

Providers of care have a duty to ensure that people are safe, and their health and welfare needs are met. They must ensure that their staff are competent to carry out their work and are properly trained, supervised and appraised. When a new employee starts work, their employer must assess their training needs and provide appropriate induction. Employers are responsible for assuring the quality of the teaching and assessment of the Care Certificate. It is expected that employers will use the standards to ensure that staff receive the training necessary so that they can develop the knowledge and competences necessary to provide safe and compassionate care of the highest quality. Possession of the Care Certificate will be one part of the evidence that they may need to make that decision.

## **9. Will the Care Certificate replace staff induction?**

The Care Certificate does not replace all areas of learning which make up staff induction. Some knowledge and competences that new staff will be expected to have will be specific to the environment where care will be provided. For example, new staff may receive induction on how to report accidents, and what to do in case of fire which will be specific to the location in which they work. The Care Certificate programme will not focus on the skills and knowledge needed to work safely and effectively in a particular location which remains the employer's responsibility.

## **10. How long does it take to complete the Care Certificate?**

The experience of the pilot sites has shown that for full-time staff the average amount of time taken for a new employee to demonstrate the expected competences and knowledge is 12 weeks. This may vary according to the training needs of each individual and the resources available to employers.



### **11. What will the award of the Care Certificate allow new staff to do?**

It is expected that on completion, new staff will be able to provide the aspects of care as defined in the Care Certificate standards.

### **12. Can existing care workers be credited with the certificate if they have been trained according to the Common Induction/Minimum Training Standards?**

These staff will already have completed the previous training required for induction. Individual employers are responsible for judging whether the jobs of individual staff require them to meet the additional standards in the Care Certificate. If they have the competences and knowledge required by the Care Certificate the employer can choose to credit them with having obtained the Care Certificate.

### **13. If a member of staff moves to a new role or new employer do they have to study for the Care Certificate again?**

No – the certificate is designed to be portable. However, employers are expected to ensure that new staff have retained the competences required by the Care Certificate.

### **14. What can I do if I think my care is not being provided at the required standard?**

All health and social care providers must provide people with information about how to make comments and/or complaints about any aspect of care. More information about how to complain is available on the [Care Quality Commission website](#).