

## REC Policy Briefing: The Care Certificate

May 2015

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### 1. Introduction to the Care Certificate

The following note outlines the Care Certificate which [Skills for Care](#), [Skills for Health](#) and [Health Education England](#) have developed for new Healthcare Support Workers (HCSWs) and Adult Social Care Workers (ASCWs) in England. The aim of this new induction standard is to ensure that the health care and adult social care workforce has the required values, behaviours, competences and skills to provide high quality, compassionate care. As many Care Providers already have robust assessment processes in place to ensure employees are delivering the fundamentals of care to the best standards possible, the Care Certificate can be viewed as a way of standardising and formalising this process.

The Care Certificate has been launched for NHS Trusts and Social Care Employers to use from the 1 April 2015 as part of their induction process. This new induction standard replaces the earlier [National Minimum Training Standards](#) and the [Common Induction Standards](#) for all new starters in health or adult social care. It is important to note that Children's Social Care Workers fall outside the remit of the Care Certificate.

Following the [Francis Inquiry](#), Camilla Cavendish – the award winning journalist and campaigner - was asked by the then Secretary of State for Health Jeremy Hunt to review and make recommendations on the recruitment, learning and development, management and support of healthcare assistants and social care support workers. The resulting [report](#), published in July 2013, found that the preparation of healthcare assistants and social care support workers for their roles within care settings was inconsistent, and one of the recommendations was the development of this Care Certificate.

Achieving the Care Certificate is an expectation of those new to health and social care. The Care Quality Commission will check on its implementation during inspections. CQC regulated providers will be expected to ensure that the training, supervision and workplace assessment of the Care Certificate is provided for their new workers, whether temporary or permanent. There is a risk to CQC regulated Care Providers' inspection results if they do not use this induction standard. However,

it has not been made a compulsory requirement for the whole HCSW and ASCW workforce, for example existing staff in post before 01 April 2015.

## 2. Who will have to complete the Care Certificate?

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.

Other roles may be included only where achievement of all of the Care Certificate’s 15 standards and components is possible. However, it is up to your client – i.e. the NHS Trust or CQC registered Care Provider to decide whether the Care Certificate is appropriate for the worker and role in question.

The new Care Certificate is designed for HCSWs and ASCWs new to a role, organisational setting or the care sector itself. Health Education England, Skills for Health and Skills for Care have stated that the roll-out of the Care Certificate should be prioritised for “new staff, new to care”. Therefore from April 2015 not all HCSWs and ASCWs will necessarily be required by your clients to undertake this Certificate.

NHS Trusts and CQC registered Providers of health and social care services already have a duty to assess the training needs of all staff new to their organisation; this obligation extends to agency, bank or directly recruited workers.<sup>1</sup> Furthermore, every HCSW and ASCW starting within a new role (within the scope of the Care Certificate) is already expected to have training, education and assessment as part of their induction, ideally within a recommended 12 weeks of employment, although there is some flexibility (see section 4 of this briefing).

**While your clients may seek your advice on training, they are ultimately responsible for judging whether your candidates will need to take the Care Certificate to meet the requirements of the role. As NHS Trusts or CQC regulated providers they are also responsible for certifying a worker with the Care Certificate.** They are expected to assess the skills and training needs of new staff, and based on this assessment may choose to require the workers complete additional training in all, or some of the 15 standards required by the Care Certificate before certifying the worker. A self-assessment tool and mapping document have been developed to help the CQC registered Provider decide what further training, if any, may be necessary for a worker new to an assignment – before they provide care unsupervised.

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<sup>1</sup> [‘Question and Answers on the Implementation of the Care Certificate for Health and Social Care Professionals’](#), Skills for Health



Further points to note:

- The Care Certificate is designed to be portable; once a worker has attained the certificate they will not have to necessarily undertake it again every time they move to a new employer or new role. However, all employers are expected to ensure that new staff has retained the competencies required by the Care Certificate. This may require periodic refresher training – but it will be at your clients’ discretion and there is no compulsory requirement other than mandatory courses.
- It is also important to note that the Care Certificate only covers the fundamentals of care and as an induction standard it is just a first “stepping stone” for HSCWs and ASCWs; your clients may require additional training and qualifications from your candidates. Furthermore, the Care Certificate does not replace an employer’s induction process, but should only be treated as a key component of the total induction process.
- Health Education England, Skills for Care and Skills for Health envisage that many employers will utilise the standards set out by the new Certificate as a guide for all their staff (not just new starters) to ensure that the current and future workforce as a whole is meeting the essential criteria to deliver frontline care. Whilst at the present time there is no requirement for all existing staff to complete the Care Certificate, NHS Trusts and CQC registered Care Providers have flexibility in that they can consider how best to retrospectively award it using review of each workers current experience and practice.

### 3. When and how will the Care Certificate be rolled out?

The CQC is explicit in their expectation that those who employ HSCWs and ASCWs should be able to demonstrate that staff have, or are working towards, the skills set out in the Care Certificate, as the benchmark for staff induction. The CQC refers to the new Care Certificate in its guidance to providers under [Regulation 18 on staffing](#), and [Regulation 19 on fit and proper persons employed](#).

However, as previously stated, the Care Certificate is primarily designed for HSCWs and ASCWs new to health or care work. Where workers are new to an organisation or role, the Care Provider has a responsibility to assess what parts of the Care Certificate can be evidenced by past learning (using the self-assessment tool and mapping document) and identify where gaps exist and should be filled for the role in question. Recruitment Agencies could have a practical role here in providing some clarity to your clients as to the past learning your candidates have, but the assessment must be undertaken by your Client, though you can help support the process. A recruitment agencies role under the Conduct Regulations is to obtain details of the experience, training, qualifications and any authorisation which the client considers are necessary; you may advise your clients but ultimately the responsibility lies with the client.

**The Care Certificate began being rolled out from 1 April 2015; it is not a legal requirement for all HSCWs and ASCWs to have completed the Care Certificate from April 2015.** The CQC does not expect all of its registered Providers to have the Care Certificate in place on 1 April. Some providers may have already mapped what they currently do to the new standards and identified improvements they can make, others will need more time to make the transition from one induction framework to another. The CQC has permitted a further period of six months to enable their registered Providers to adapt their training and induction programmes to include the Care Certificate, with the intention that a process in place for all new starters in Care to complete the

Certificate by the autumn of 2015. Click [here](#) to view the CQC's official statement on the Care Certificate.

#### 4. What does the Care Certificate look like?

To be awarded with the Care Certificate, the worker must meet all of the outcomes and assessment requirements for all [15 standards](#), which are:

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

Some HSCWs and ASCWs new to roles or care settings may have training in all or some of these standards. It will be up to your Client to decide whether they can transfer over this training as evidence that the worker has met the standard in question.

The guidance document sets out how each standard should be assessed. Most assessment must be completed within the care setting and completed face to face. Learners can practice and develop their new skills in a classroom/skills lab or similar setting but the assessment evidence must be collected during real work activity. More information is contained in the [Care Certificate Framework Assessor Document](#). It is important to note that as many of these standards require work-based assessment and training by someone the Employer deems "occupationally competent" (see section 5).

If a recruitment agency is CQC regulated then they may be able to provide all training, supervision and workplace assessment to issue the Care Certificate – but only to the workers for which they have supervision, direction and control over. If the recruitment agency is not CQC regulated, they can assist with the training and potentially support the client to also meet the workplace assessment (i.e. by suggesting an assessor to come on-site to undertake the assessment) but they could not issue the Care Certificate. In terms of workplace assessment, the new worker should not work out of line of sight of an occupationally competent colleague until they have been signed off of having the necessary care.

A free (and optional) Care Certificate Workbook is available to download [here](#), including worksheets for candidates to fill in to demonstrate their understanding of the knowledge content of the Certificate, which Employers may wish to save alongside other staff records. This does not constitute an answer book; it is still the responsibility of each health and social care employer (both the recruitment agency and the client) to judge the competency of their workers and arrange additional training, support and supervision as required. Furthermore, the workbook covers only some of the Care Certificate; registered Care Providers will still need to provide appropriate practical training, supervision and workplace assessment.

A 12 week completion process for undertaking all the necessary training, assessment and certification has been recommended. However, this time frame remains as guidance only and is not

mandatory. Skills for Care, Skills for Health and Health Education England recognise that the suggested timeframe (12 weeks) for completing the Care Certificate is feasible for full-time employees only, and that part-time or those on low hours contracts may need longer to complete the process. They also recognise that the teaching methods chosen, previous educational achievement, and opportunities for assessment and the availability of assessors for agency workers may vary. As the Care Certificate becomes embedded, the REC is eager to gather feedback from its members as to the ease with which your candidates can access the necessary training, assessment and certification (please see section 8).

Certification should be recorded by the employer and where possible, made accessible (for example, recorded on ESR – electronic staff records – in the NHS and the NMDS-SC system for social care). Employers are encouraged to share evidence of Care Certificate completion with their temporary and permanent workers to help them show to future organisations – including recruitment agencies – what was achieved.

## 5. Who is responsible for delivering the Care Certificate?

The minimum level for quality assurance of the Care Certificate, the training and certification itself, is the responsibility of Employers. By employers, Skills for Care, Skills for Health and Health Education England mean NHS Trusts and CQC registered Care Providers employing HCSWs and ASCWs – essentially, your clients.

REC members only have to register with the CQC if their organisations carries out “regulated activity” as defined in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (“the Regulations”). More detail is available in the REC Legal Guide to starting an agency in the health and social care sector. As the majority of REC members operating in the social care sector are not CQC registered, your role in supporting HCSWs and ASCWs to undertake the Care Certificate will be collaborative.

Of course, under the [Conduct of Employment Agencies and Employment Businesses Regulations 2003](#), an employment agency or employment business should not introduce or supply a work-seeker to a client where the work-seeker is taking up a position which involves working with, caring for or attending a vulnerable person until it has obtained confirmation that the work-seeker has the experience, training, qualifications, and any authorisation which the client considers are necessary, or which are required by law or by any professional body to work in the position which the client seeks to fill.

It will be up to your Client to ultimately decide how to deliver the Care Certificate to the workers (both temp and perm) you supply or introduce. As previously mentioned, the role recruitment agencies can play in delivering the Care Certificate is limited in that any assessments will be completed face-to-face by an occupationally competent assessor. Although there is not specification that individuals delivering the training or assessment must have a particular qualification; rather it is the NHS Trust or CQC registered Care Providers’ responsibility to decide whether these individuals are “occupationally competent”.

Due to these requirements, and the fact that recruitment agencies are not involved in the supervision, direction and of their candidates, as well as the provision of care (unless CQC registered), it is not appropriate for clients to expect REC members to deliver all of the training, assessment or certification their candidates, especially where you do not have occupationally

competent trainers/assessors in your employ. However, you may be asked by your clients to support and/or collaborate on coordinating and delivering certain aspects of the training and assessment. This could involve scheduling/arranging the training and workplace assessment for your agency worker. Any trainer/assessor will need to be occupationally competent. However, the CQC registered Care Provider should ultimately provide the certification of the worker. At this stage, we are still waiting to see how feasible it will be for recruitment agencies to collaborate on the delivery of the Care Certificate. Please share your feedback or case studies with us: contact [victoria.obrien@rec.uk.com](mailto:victoria.obrien@rec.uk.com).

## 6. How will the roll-out of the Care Certificate be monitored?

The CQC has described the use of the Care Certificate as “one good way” for registered Care Providers to demonstrate to the CQC that they are meeting their standards on staff induction, support and training. However, the minimum level for quality assurance of the Care Certificate, and the certification itself, is the responsibility of your end-client (NHS Trusts or CQC registered Care Providers) alone. REC members who are not CQC registered providers will not be inspected/monitored externally to see whether their candidates have the Care Certificate.

However, as previously stated, under the [Conduct of Employment Agencies and Employment Businesses Regulations 2003](#), an employment agency or employment business should not introduce or supply a work-seeker to a client where the work-seeker is taking up a position which involves working with, caring for or attending a vulnerable person until it has obtained confirmation that the work-seeker has the experience, training, qualifications, and any authorisation which the client considers are necessary.

## 7. How does the Code of Conduct ‘fit’ with the Care Certificate?

Skills for Care and Skills for Health’s [Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England](#) is a voluntary Code, describing the behaviours and attitudes that people who use care and support services should expect to experience. In contrast, the Care Certificate describes the minimum things support workers **must know and be able to do**. For more information on the Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England, read the REC briefing, available [here](#).

## 8. Further resources

In its submission to Health Education England, Skills for Health and Skills for Care’s public consultation on the Care Certificate, the REC raised several concerns around the accessibility of the Certificate for agency HSCWs and ASCWs. In particular, we asked for greater clarity as to the division of responsibility between recruitment agencies and their clients in the delivery and funding the Certificate for agency workers, as well as its portability and external quality assurance.

Please contact the Recruitment and Employment Confederation if you have any queries or would like to share feedback on the implementation of the Care Certificate:

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You can also feedback directly to Health Education England, Skills for Health, Skills for Care at this address: [carecertificate@skillsforcare.org.uk](mailto:carecertificate@skillsforcare.org.uk)

There are a range of documents that have been developed for Employers delivering the Care Certificate and Workers. More information can be accessed on the [Skills for Care](#) and [Skills for Health](#) websites, but of note:

- [The Care Certificate Framework \(for Assessors\)](#)
- [The Care Certificate Framework: Guidance Document](#)
- [The CQC's position on the Care Certificate](#)
- ['Question and Answers on the Implementation of the Care Certificate for Health and Social Care Professionals'](#) – FAQs produced by Skills for Health, Skills for Care and Health Education England that are being updated frequently.
- [The National Template for the Care Certificate](#)
- [The Care Certificate Standards Self-Assessment Tool](#): Employers may want to use the self-assessment tool for workers prior to them workers commencing their induction. Induction can then be tailored, based on the workers self- assessment. The tool is designed to be used as part of the selection process and can be used for both new starters and where the employer wishes to award the Care Certificate to existing or if necessary identify additional training needs.

Please note that the above resources may be refreshed and revised, so do check in with the [main web page](#) for the latest resources.

Skills for Care have also worked with the [United Kingdom Home Care Association](#) to put together a guidance document and case study for home care providers delivering the Care Certificate.

- [Care Certificate assessment guidance for homecare providers](#)
- [Homecare provider case study](#)

Materials to support employers in preparing for the Certificate, including revised standards and guidance are available to download [here](#). You may also wish to sign up to Skills for Care's fortnightly e-newsletter to be kept informed of new Care Certificate related resources.

## REC Policy May 2015

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