Developing people for health and healthcare

Hints and Tips for assessing the Care Certificate in General Practice









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The following document has been produced by the Institute of Vocational Learning and Workforce Research in Health and Social Care, Bucks New University, on behalf of Health Education Thames Valley.

During the piloting phase of the Care Certificate, colleagues in General Practice felt that some of the standards and assessments were not applicable to Health Care Support Workers (HCSW) working in this setting. However, when the standards are scrutinised we believe they are all relevant to all HCSW wherever they are employed, but it may be helpful to adapt the assessment component to make it applicable to General Practice.

The following document aims to give you hints and tips as to how the standards could be assessed in this environment, ensuring the HCSW understands the importance of each individual standard and is able to identify and demonstrate the key messages within each one. We have not included the mandatory statutory standards.

This document can be used alongside the workbook and other resources available on www.skillsforhealth.org.uk

Standard 1: Understand Your Role

Outcome- The Learner is able to:	Assessment – The Learner Must:	Hints and Tips
1.1 Understand their own role	1.1c Demonstrate that they are working in accordance with agreed ways of working with their employer	A competency framework signed off by GPNs / PMs and GPs as mapped to their job description
1.2 Work in ways that have been agree with their employer	1.2d Demonstrate how to access full and up to date details of agreed ways of working that are relevant to their role	Time keeping/punctuality, uniform and appearance. Can locate job description and describe main roles and responsibilities Can name line manager and knows which tasks he/she has been assessed as competent to perform
1.4 Work in Partnership with others	1.4c Demonstrate behaviours attitudes and ways of working that can help improve partnership working.	Communicates well with other team members at appropriate times. Avoids unnecessary interruptions when colleagues are consulting. Shows flexibility towards those she is supporting, eg offering alternative appointment if necessary. Responds appropriately to requests for assistance by colleagues.
	 1.4d Demonstrate how and when to access support and advice about Partnership working Resolving conflicts 	Can state clear line of authority Has named mentor and aware is first person to approach Aware of who is responsible in practice for staff concerns Can access practice policy for staff re conflict

Standard 2: Your Personal Development

Outcome – The learner is able to	Assessment- The learner must	Hints and Tips
2.1 Agree a personal development plan	2.1d Contribute to drawing up own personal development plan	Uses Personal Development Plan and records all learning appropriately. Identifies an area where more training is required or an area would like to develop further
2.2 Develop their knowledge, skills and understanding	2.2g List the learning opportunities available to them and how they can use them to improve the way they work	Aware of In House Practice training sessions Has access to eLearning modules as identified by Practice Uses feedback from colleagues and Patients to improve performance
	2.2h Demonstrate how to record progress in relation to their personal development	Uses own or Practices or other PDP workbook, or online resource to which all learning can be uploaded. Has an agreed list of competencies which are signed off when assessed as competent.

Standard 3: Duty of Care

Outcome- The learner is able to	Assessment – The learner must;	Hints and Tips
3.3Deal with comments and complaints	3.3a Demonstrate how to respond to comments and complaints in line with legislation and agreed ways of working	Scenario type assessment Can access practice complaints procedure. Identifies correct person to inform first. Knows to make written record of any complaint received. Is aware of annual practice review of complaints and CQC requirements.
3.4 Deal with incidents, errors and near misses	3.4a describe how to recognise adverse events, incidents, errors and near misses	Is able to correctly categorise • Not labelling blood bottle before being sent to lab • Had wrong notes open when consulting but realised during the consultation • Disposed of a urine sample before it was sent and patient not treated • Found the emergency equipment not functioning when needed
3.5 Deal with confrontation and difficult situations	Demonstrate how and when to access support and advice about resolving conflicts	Scenario assessment Can identify signs a situation is becoming challenging Aware panic button use and expected response. Can access practice policy and procedure re recording of incidents

Standard 5: Work in a Patient Centred Way

Outcome – The learner is able to	Assessment – The Learner must;	Hints and Tips	
5.1 Understand person centred values	5.1c Identify ways to promote dignity in their day to day work	Demonstrates an open and positive attitude when talking with individuals Asks individual re preference and does not make assumptions eg which arm preferred for blood test, would prefer to sit or lie for procedure, uses screening curtain if individual removes any items of clothing	
5.3 Demonstrate awareness of the individuals immediate environment and make changes to address factors that may be causing discomfort or distress	5.3a Take appropriate steps to remove or minimise the environmental factors causing the discomfort or distress. This could include • Lighting • Noise • Temperature • Unpleasant odours	Ensures room is correctly prepared before calling individuals Collects patients if appropriate from waiting room Holds door ajar to help elderly, infirm, wheelchair users. Checks comfort and enquires re room temperature if patient is having to undress Opens windows and allows fresh air to circulate following malodourous procedures Uses window covering if patient in direct sunlight	
	5.3b report any concerns they have to the relevant person Can include Senior member of staff	Discusses ill-fitting clothing with patient/ carer, e.g. constrictions of foot or sock wear. Reports patients concerns re temperature in waiting room to PM	

	Carer	
	Family member	
any actions they may be	5.4a Raise any concerns directly with the individual concerned	Is able to identify behaviours that could cause distress, e.g. speaking very loudly, Waiting room information programme turned up very loud Identifies when and where most appropriate to discuss this.
minimise pain and discomfort	5.5a Ensure that where individuals have restricted movement or mobility that they are comfortable	Enquires if patients prefers to remain in wheelchair for procedure if appropriate, Uses raised bed and adjustment of backrest/ comfort aids for patients being examined / procedures on surgery couches.
	5.5b Recognise the signs that an individual is in pain or discomfort. This could include Verbal reporting from the individual	Lists several verbal and nonverbal signs and behaviour changes which could be due to pain Asked patient directly if experiencing pain and could relate that to a sign noted.
	Non-verbal communication Change in behaviour	-responds in an empathetic way when a patient reports feeling pain and takes appropriate action to try and minimise the pain
	5.5c Take appropriate action where there is pain or discomfort. This could include	Reporting post op pain not well controlled to duty GP Seeking advice for wound care if appears causing pain
	Repositioning,	care ii appears causing pain
	Reporting to PN or GP Giving prescribed pain relief	Understanding importance of compliance of pain relief

	medication Equipment or medical devices are working properly or in correct position E.g. wheelchairs prosthetics catheter tubes	medication seeking advice if compliance is not being adhered to Enquiring if patient's equipment is due service check.
	5.5d Remove or minimise any environmental factor causing pain or discomfort. These could include • Wet or soiled clothing or bed linen • Poorly positioned lighting • Noise	Helps patient to quietest area (if available) if appears distressed by noise in busy waiting room Helps patient to lie in more comfortable position on couch and alerts GP, enabling examination to take place with minimal moving around surgery, even if delays other patients Assists carer if requested to help use toilet facilities as needed Ensures direct sunlight blocked by using window dressings.
5.7 Support the individual using person centred values	5.7a Demonstrate that their actions promote person centred values including: • Individuality • Independence • Privacy • Partnership • Choice • Dignity • Respect • Rights	Is able to name the 6 Cs Can describe what role and advocate plays and when in may be necessary to be a patient advocate in General Practice Empowers an individual to make a decision even if it not in agreement with that decision Always gains consent before proceeding with any task

Standard 6: Communication

Outcome- The learner is able to:	Assessment – The Learner must:	Hints and Tips
6.1 Understand the importance of effective communication at work	6.1a Describe the different ways that people communicate	List 5 different methods of communication and give an example of when it is used in General practice
		Verbal E.g., patients explaining why they have attended
		Body Language- states a sign someone may be in pain
		-Gestures e.g. alternative to speaking if a foreign language is spoken
		Written- Communication with colleague
		Sign Language – to support patients who are deaf
6.4 Understand the principles and practices relating to confidentiality	6.4a Describe what confidentiality means in relation to their role	Understands all actions and records must not be disclosed or discussed with anyone else without permission
		Does not begin consultation until door is firmly closed
		Information about someone must only be shared with others involved in their care and support on a need to know basis.
		No patient identifiable details on E.g. samples / blood bottles/ forms should be visible to any other patient
6.5 Use appropriate verbal	6.5a Demonstrate the use of	During a consultation to
and non- verbal	appropriate verbal and non-	perform phlebotomy HCSW

communication	verbal communication:	
	VerbalToneVolumeNon-verbal	Introduced self by name and role title Smiled at patient and gave good eye contact
	 Position/proximity Eye contact Body language Touch Signs Symbols 	Indicates seat and offers Patient chance to sit and get comfortable Offers help with outer garments if necessary
	WritingObjects of referenceHuman and technical aids	Speaks at appropriate volume and sentence structure easily understood
	Communication may take place;	Appears calm and focused on patient and task in hand
	 Face to face Telephone or text Email, internet or social networks 	Explanation of procedure given and reassurance if required
	 Written reports or letters 	Patient chosen arm is made comfortable before procedure begins
		Picks up on non-verbal clues e.g. fear/anxiety
		Notes completed accurately and in a timely manner
		Confirms with patient that consultation completed.

Standard 7: Privacy and Dignity

Outcome- The learner is able to:	Assessment- The learner must:	Hints and tips
7.1 understand the principles that underpin privacy and dignity in care	7.1b List situations where an individual's privacy and dignity could be compromised	Can include Removing any items of clothing to expose area that HCSW needs to access
		Chaperoning for examinations by GP
		If accompanied by family member /carer for support or language help and needs any examination
		If Consulting room windows are not covered
		If another member of staff enters consulting room during the consultation
	7.1c Describe how to maintain privacy and dignity in the work place	Ensuring door is firmly closed and you are not interrupted during consultations
		Always having windows covered
		Use of couch curtains when patient has to remove clothing
		Use of privacy disposable cover as required
		Gaining consent to touch patient prior to any procedure
7.2 Maintain the privacy nad dignity of the individual(s) in their care	7.2b Demonstrate that the privacy and dignity of the Individual is maintained at all times being in line with	Ensuring doors are closed and screening curtain used when having to remove items of clothing
	the person's individual needs and preferences and	Always gain consent form

	providing personal care	patient before any procedure
7.6 Support the individual in active participation in their own care	7.6a Demonstrate that they can support the active participation of individuals in their care	Is able to ask patients for feedback on the care they receive, or enquire if the patient feels any care needs are not met Is aware of care planning and who to ask for further advice about access to care or appropriate services.

Standard 8: Fluids and Nutrition

Outcome – the learner is able to:	Assessment – The learner must	Hints and tips
8.1 Understand the principles of hydration and nutrition and food safety	orinciples of hydration and symptoms of poor nutrition	Can list 6 symptoms that may indicate a patient they see is malnourished
		Notices a dark urine when performing urinalysis as a potential sign of dehydration and alerts other clinician and or patient
		Enquires about fluid intake when consulting vulnerable group
8.2 Support individuals to have access to fluids in accordance with their plan	8.2d Support and Encourage individuals to drink in accordance with their plan	Knows recommended amount of fluid individuals should have per day
of care	of care	Replaces empty water bottles in waiting room
		Offers elderly patients who have attended for fasting blood tests a glass of water before leaving the surgery
8.3 Support individuals to have access to food and nutrition in accordance with	8.3d Support and encourage individuals to eat in accordance with their plan	Can name the food groups that comprise a balanced diet
their plan of care	of care	Can list signs of malnutrition
		Is aware of organisations who are able to deliver balanced premade meals to those unable to prepare meals themselves

Standard 9: Awareness of mental health, dementia and learning disability

Outcome- The learner is able	Assessment – The learner must	Hints and Tips
9.1 Understand the needs and experiences of people with mental health conditions, dementia or learning disabilities	9.1b Explain how these conditions may influence a person's needs in relation to the care that they may require	Can identify different ways of working within the surgery including having more time allocated when consulting, encouraging carer to attend with patient if appropriate
		Demonstrates can be flexible with consultation appointment times if patient arrives late
		Tries to have continuity of care in order to identify any concerns
		Reports any concerns to a senior colleague
		Follows up advice with written instructions
9.3 Understand the adjustments which may be necessary in care delivery relating to an individual who may have a mental health condition	9.3a Describe what adjustments might need to be made to the way care is provided if someone has 1 A mental health conditions such as a. Psychosis b. Depression c. Anxiety Dementia Learning Disabilities	Asks for support if patient exhibits behaviours unfamiliar to HCSW Allows Patients time to talk about and share how they are feeling Is aware of organisations who can offer support to individuals Completes a care plan consultation if asked by a patients carer Contributes relevant information to Primary Health Care Team meetings

Standard 15: Infection Prevention and Control.

Outcome- The learner is able to	Assessment – The learner must:	Hints and tips
15.1 Prevent the Spread of Infection	15.1 (c) Explain how their own health or hygiene might pose a risk to the individuals they support or work with	Know surgery policy regarding returning to work following illness Adhere to uniform policy and avoids wearing jewellery except plain wedding bands from elbow down Can describe what is meant by "good hand habits" Can identify medical conditions which make the individual more susceptible to infections Has written proof in staff record of vaccinations in accordance with UK schedule of vaccination
	15.1 (d) List common types of personal protective clothing, equipment and procedures and how and when to use them	Can identify why and when to use Uniforms, Gloves, Skin protecting paper towels, soaps and hand gels or wipes Goggles or eye protection Understands importance and considers any further vaccinations e.g. Influenza.
	15.1 (e) Explain the principles of safe handling of infected or soiled linen and clinical waste	Knows where the surgery infection control policy is held Assembles and locks sharps bins correctly

Records name and date of assembly/locking correctly on the label Keeps all sharps bins above floor level and out of the reach of children Does not re-sheath needles Handles orange /yellow clinical waste sacks carefully, ties them securely and stores them in designated locked cupboard awaiting collection Disposes of all single use couch rolls after each patient and cleans couch as per practice protocol.