The CARE CERTIFICATE

Work in a Person

Centred Way

What you need to know

THE CARE CERTIFICATE WORKBOOK

Standa5rd

**Values in Health and Social Care**

Whether or not we are aware of

it, we all live our everyday lives by a set of **values** that shape how

we think and react. Values are beliefs and ideas about how people should behave which have been formed by our childhoods, families, backgrounds, cultures, religions

and relationships. Whilst we each have our own values there are



values which are important for working in health and social care.

**Values**

Values are central to work in health and social care. They are principles that guide

workers to understand right from wrong and are about what is important when caring and supporting individuals.

Six values are now recognised as applying to health and social care workers. These are known as ‘The 6 Cs’:

• Care: having someone’s best interests at heart and doing what you can to maintain or improve their wellbeing

• Compassion: being able to feel for someone, to understand them and their situation

• Competence: to understand what someone needs and have the knowledge and skills to provide it

• Communication: to listen carefully but also be able to speak and act in a way that the person can understand

• Courage: not to have fear to try out new things or to say if you are concerned about anything

• Commitment: dedication to providing care and support but also understanding the responsibility you have as a worker.

Another way of looking at the 6 Cs is that each individual must be placed at the centre of their care and support. It must fit the individual, rather than the individual being made to fit existing routines or ways of doing things. This is known as person centred working. **Person centred values** tell you how to work in a person centred way.

**Unique**

Unique needs means that every person has got their own needs which are different from everybody else's.



**Person centred values**

These are the guiding principles that help to put the interests of the individual receiving care or support at the centre of everything we do. Examples include: individuality, independence, privacy, partnership, choice, dignity, respect and rights.

**Person centred values in practice**



In health and social care person centred values include:

**Individuality:**

Each person has their own identity, needs, wishes, choices, beliefs and values. 'One size fits all' does not work when it comes

to providing care and support.

**Choice:**

Each individual should be supported to make choices about their care and support. They should be given information in a

way that they can understand so they can make informed choices. When working with individuals who cannot express their wants, needs and wishes in words, you must find other ways of communicating. Additional training and supervision can help you to develop these skills.

**Independence:**

Promoting an individual's independence means to look at what they can do for themselves and **empowering** them to do as much as possible for themselves. It does not mean leaving someone to cope alone but agreeing the support they need and want.

**Rights:**

The Human Rights Act 1998 is the main legislation that sets out the rights of people in the UK. You have the right to speak your mind and be kept safe from harm, as well as the right to respect, dignity

and equality. You should make sure an individual's rights are respected, not only by yourself but by other people involved in their care. [www.legislation.gov.uk/](http://www.legislation.gov.uk/) ukpga/1998/42/contents

**Privacy:**

Everyone has a right to private space and time when they need it. Privacy affects how and where care and support is

given, especially when it involves personal hygiene or intimate procedures. Privacy includes

not talking to anyone about the individual's private information unless they give permission and it is on a need-to-know basis to improve their care and support.

**Empower**

This term means to give the individual you care for the confidence, voice and power

to speak out on their own behalf and to feel in control of their actions.

**Dignity:** Treating somebody in a dignified way means to treat someone with respect, valuing their individuality and their ethical and moral beliefs. In order to provide dignified care you need to have an open and positive attitude. Take time to do things their way, don’t make assumptions about how they want

to be treated and be aware of how personal care may affect their dignity.

**Respect:**

Respecting someone means believing and showing that they have importance as an individual. It means that they

have their own opinions and feelings and that even though you may not agree with them, you do respect them.

**Partnership:**

You work in partnership when you involve the individual and their family and work alongside other workers. The key to a successful partnership is good communication and trust; valuing and respecting what others have to say.

**Working in a way that promotes person centred values**

The person centred way means working together with the individual to plan their care and support to meet their unique needs.

This cuts down the risk of negative, unfair or harmful treatment and neglect.The individual is put at the centre, able to choose and control how they want their care and support to be. Person centred planning is used in social care and has four key rules:

[www.skillsforcare.org.uk/Standards/Care-Act/](http://www.skillsforcare.org.uk/Standards/Care-Act/) Learning-and-development/Person-centred- care-and-support-planning.aspx

1. The belief that an individual can plan for themselves. The focus needs to be on their strengths and abilities; for example, an individual who wants to make their own decision about which mobility aids they would like to use to support them to walk short distances rather than use their wheelchair.

2. The care plan is written in the first person to make clear that it is the individual who owns it; for example ‘I would like to try a walking frame when I am moving around the house and for short distances outside rather than using my wheelchair’.

3. The individual has as much control as possible over the choices they can make; for example, the individual is supported to try to use the walking frame.

4. The plan is there to make the individual’s life better, not to fit them into an existing service. For example, the frame is sourced that is best for them within the resources available or they are able to find a frame from somewhere else if necessary.

In health organisations the delivery of person centred care focuses on the following priorities:

• Compassion, dignity and respect – these values are essential when involving people in their own care.

• Shared decision making – this sees individuals as equal partners in their healthcare.

• Public involvement – this involves people in decisions about the design and delivery of services, for example by involving communities in making about decisions about services that will be provided.

**Promoting dignity**

Focusing on the value of every individual, respecting their views, choices and decisions, not making assumptions about how they want to be treated and working with compassion and person centred values means you are promoting their dignity.

**Compassion and care**

Putting person centred values into practice means that you are providing care that is focussed on the individual. It demonstrates to the individual that you want to care for and support them.

**The importance of finding out the history, preferences, wishes and needs of the individual**

To provide care and support that respects the individual’s wishes, needs and preferences, you will need to find out what you can about them depending on your workplace. Taking time to find out about their personal history by talking with them or reading any information you have will give you a deeper insight into their likes and dislikes.This will help the **care plan** to be put together with them.

**Care plan**

A required document that sets out in detail the way daily care and support must

be provided to an individual. Care plans may also be known as ‘plans of support’,

‘individual plans’, etc.

**The changing needs of the individual**

Care or support plans are an important source of information as they are dynamic records

that are constantly reviewed and updated in response to changing needs and preferences. A review will look with the individual at what

is working, what doesn’t work and what might need to change. For example, if an individual is unable to eat certain foods due to a new type of medication they are taking, their diet will need to change but still reflect the things they would like to eat. Care plans are also legal documents which might be needed as evidence if an individual makes a complaint.

Workers changing shifts, returning from holidays, temporary and agency workers will always have up-to-date information on the individual, enabling them to provide the

best possible person centred care. It will also enable them to know how to provide care and support for those individuals new to them.

Ask your manager for copies of different care plans to make sure you understand how they are used in your workplace.Your manager should be able to explain how these should be used. If you feel that an individual’s care plan needs to be changed, talk to your manager

or the person responsible for this in your workplace.

**Supporting individuals to plan for their future wellbeing and fulfilment, including end-of-life care**

The person centred approach uses the idea that everyone has an inner wish to fulfil their personal potential. in a safe, **non-judgemental** and compassionate place the individual can think about what is important to them and make the best decisions.

**Non-judgemental**

To be non-judgemental means to accept the individual for who they are, seeing

them as positive and capable of making their own decisions and choices.

It is important that individuals are supported to plan for their future wellbeing and fulfilment so that their quality of life is improved, even if they are only in short-term care. The Care Act 2014 describes wellbeing as relating to the following areas:

• Personal dignity (including treating someone with respect)

• Physical and mental health and emotional wellbeing

• Protection from abuse and neglect

• Control by the individual over day-to-day life (including over the way care and support is provided)

• Participation in work, education, training or recreation

• Social and economic wellbeing

• Domestic, family and personal relationships

• Suitability of living accommodation

• The individual’s contribution to society. [www.gov.uk/government/uploads/system/uploads/attachment\_data/file/315993/Care-Act-](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/315993/Care-Act-) Guidance.pdf

Individuals should be encouraged to express themselves and to change their mind about things when they want to. It is important to take time to talk about their needs, what they want and also what they don’t want. This is especially true for end-of-life-care where a person might not be able to voice their wishes as they could before. You will then need to use different ways of communicating. This may also involve working with an **advocate** who is able to express the individual’s wishes on their behalf if they are unable to communicate the information themselves. Ideally the individual will have planned ahead and expressed what they would like to happen within their care if they cannot decide for themselves anymore. This is called advance care planning (ACP) and is backed by the Mental

Capacity Act 2005. [www.legislation.gov.uk/ukpga/2005/9/contents](http://www.legislation.gov.uk/ukpga/2005/9/contents)

**Advocate**

An advocate seeks to ensure that people, particually those who are most vulnerable

in society are able to:

• Have their voice heard on issues that are important to them

• Defend and safeguard their rights

• Have their views and wishes genuinely considered when decisions are being made about their lives.

**Minimising environmental factors that may cause discomfort or distress**

The following are examples of things in the area around an individual, the environment they find themselves in, that may cause discomfort or distress:

• Lighting

• Noise

• Temperature

• Unpleasant odours.

In order to promote wellbeing the individual should feel comfortable where they are. If they find the lights are too bright, dim them where possible. If it is too noisy you might close doors or windows or adjust the volume on the TV. If possible, adjust the room temperature so that they feel comfortable and air rooms or clean away anything that might cause unpleasant smells. The important thing to remember is that you ask them about anything they are not happy with and then do what you can to make the environment the best it can be for them. If you are working at night it will be impossible to work in the dark or without any noise but you need to be careful to minimise any discomfort or stress. If you are worried that the individual’s environment is causing them distress and you cannot solve

it straight away, talk to their carer or a manager to get advice on how to make changes. Family members might be another source of information as they will know the individual better and may have solutions that you haven’t thought of.

**Being aware of actions that may be causing discomfort or distress to individuals**

As part of an individual’s care plan you may have to do things that are uncomfortable or even painful for them, for example when moving or assisting them.You will need to carry these out with the greatest care and sensitivity. Before you begin a task or touch the individual in any way, you should ask them and tell them that what you are about to do might be uncomfortable or painful. Don’t forget that consent is a vital part of care work and particularly important when you need to do things that are unpleasant. If, for example, you need to open curtains and let in bright light or make noise, it is respectful and polite to tell them so they are prepared. Always explore options with your manager if you feel that there might be other ways of approaching something to reduce discomfort or distress. You may need to get further advice and support if necessary for example requesting a referral to the GP.

Other systems within your workplace, for example **handovers** or team meetings, are good opportunities to make co-workers aware of the concerns you may have. Maybe together you can find ways of working that minimise distress and discomfort. You may also find

that your worries are shared by others and might identify a procedure that needs to be changed. Reporting your concerns is good practice as it can improve the quality of care and support.

**Handovers**

These take place at the start or end of the shift when staff teams change. Vital

information is passed to the next team to make sure that quality care continues.

**Supporting individuals to minimise pain or discomfort**

Usually, if someone feels uncomfortable they will move about until they find a more comfortable position. Individuals with limited movement or mobility might not be able to do this. You should make sure that you recognise if they need support to feel more at ease. Apart from the individual telling you that they are in pain or discomfort, there

are also non-verbal signs. The way they look, their body language such as gestures or facial expressions could be a good sign, for example doubling over, gritted teeth, pale complexion, sweating, tears or furrowed brows. Other messages could be becoming very quiet, tearful or aggressive.

If you know or suspect that someone is in pain or discomfort, work with them to try and find a way of making them more comfortable. This may be by helping them to change their position. Make sure that you do this with support from another worker if necessary and always in line with the individual’s care plan. You may notice that the equipment that

they are using is causing them discomfort or pain. Take steps to change the positioning of equipment if necessary, always with the individual’s consent. If you are unsure about what to do always check with your manager or supervisor.

There may be additional environmental factors that could be causing distress. This could include wet or soiled clothing or bed linen, poorly positioned lighting or noise. Make sure that you follow your agreed ways of working for disposing of and changing soiled bed linen. Also, with any changes you are making, talk through your actions with the individual so that they understand what you are doing and why you are doing it. This will reassure them and keep them involved.



**Supporting individuals to maintain their identity and self-esteem**

**Wellbeing** is the term used to describe feeling comfortable in one’s life. It can relate to many aspects of life:

• Spiritual - finding meaning and purpose in life (this could be through religious faith)

• Emotional - how we feel about ourselves

• Cultural - our sense of belonging

• Religious - our faith and beliefs

• Social - our relationships

• Political - peace and stability in our homeland

• Sexual - our intimacies

• Physical - leading an active life

• Mental - realising our potential and ability to contribute to society.

**Wellbeing**

A person’s wellbeing may include their sense of hope, confidence and self-esteem,

their ability to communicate their wants and needs, to make contact with others, to show warmth and affection, and to experience and show pleasure or enjoyment.

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All these aspects of wellbeing make up who we are, or our **identity.** Everyone has different feelings, attitudes and goals. Each one of these aspects also influences your self-esteem and feeling of self-worth. If you were cut off from your friends and family you would quickly feel lonely and unloved. If, on the other hand, you were leading an active life, having the choice to do what you want with lots of friends you would feel valued and self-confident. You would have a good sense of identity and self-worth.

**Identity**

Our identity refers to our view of ourselves, who we are and what makes us

who we are.

**Empathy**

This term means to see things from the individual’s perspective. Be in their shoes to

try to understand it.

In order to promote the individual’s wellbeing they need to be happy with as many aspects of their life as possible. If the individual thinks that something would help them to feel better; be positive, understanding, **empathic** and

non-judgemental. Listen to what they consider important in their lives and try enabling them to make the changes they want, for example, to be able to practice their faith.

It is important that you raise any concerns you might have about the emotional or spiritual needs of an individual. Your line manager, supervisor, a senior member of staff or the individual’s carer will know how to look into what can be done to better meet these needs by working together with those important to the individual and other services. The individual’s family should also be informed about any concerns you might have as they may have had experiences on how to help or be able to provide help themselves.

**Supporting the individual using person centred values**

You will have noticed already how all the different person centred values work together and none stand alone. Independence is associated with individuality and choice. Choice is closely linked to dignity and respect. All these values are there

to give the person power to speak up and take as much control as possible in order to live a fulfilled life.

THE CARE CERTIFICATE WORKBOOK STANDARD 5

The CARE CERTIFICATE

Work in a Person

Centred Way

(In General Practice)

What do you know now?

THE CARE CERTIFICATE WORKBOOK

Standard 5

**Activity 5.1a**

In health and social care, person centred values are the guiding principles on how to support and assist in someone’s life.

Finish the sentence below to **describe** in your own words what the word value means:

**Describe:** to describe means to create a picture with words but not simply writing a list of bullet points.

The word value...

**Activity 5.1b**

Complete the table below to answer the following questions:

1. What does the value mean?

2. How would you put the value into practice in your day-to-day work?

3. Why is it important to work in a way that promotes this value when supporting an individual?

|  |  |  |  |
| --- | --- | --- | --- |
| **Person centred value** | **1. What is it?** | **2. How would you put this into practice?** | **3. Why is it important to work in a way that promotes this when supporting an individual?** |
| Individuality |  |  |  |
| Rights |  |  |  |
| Choice |  |  |  |
| Privacy |  |  |  |
| Independence |  |  |  |
| Dignity |  |  |  |
| Respect |  |  |  |
| Partnership |  |  |  |

**Activity 5.1c**

Providing person centred care or support that

is specific to the individual’s needs, wishes and preferences will ensure that the individual is always at the centre of their care. Dignity is one of the values included in person centred care. Complete the diagram below to identify ways in which you can promote dignity in your day-to-day work. An example has been provided for you:



Supporting someone to join in an activity or discussion

Ways I can promote dignity in my work

**Activity 5.2a**

**Case study:**

Badiah has come to surgery for a blood test with her husband. She has moved to England from Laos last year. She is dressed in a traditional costume and speaks very little English.



**Describe:** to describe means to create a picture with words but not simply writing a list of bullet points.

**Describe** why it is important to find out Badiah’s history, preferences, wishes and needs in order to care for her in a person centred way:

**Activity 5.2b**

**Explain** why it is important that an Individual’s changing needs are

recorded in their medical record. Give one example of when someone’s care would need to be changed or adjusted:



**Explain:** to explain something you will need to provide a clear account of your understanding, including details like why and how.

**Activity 5.2c**

The person centred approach has the understanding that every person has a need to fulfil their personal potential. Answer the questions below to show your understanding

of the importance of supporting individuals to plan for their future wellbeing:

1. Why is it important to support individuals to plan for their future wellbeing and fulfilment?

2. What do you have to be aware of if working with individuals at the end of their life?

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**Activity 5.5b**

Usually, if a person feels uncomfortable with the way they are sitting or lying, they will move about until they find a more comfortable position. Individuals with limited movement or mobility might not be able to do this, so you need to make sure that you recognise if they need your help and assistance to feel more at ease. Name three ways in which an individual might show that they are in pain or discomfort and give one example for each.

1.

2.

3.

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**Activity 5.6a**

In order to promote the individual’s wellbeing, they need to be happy with as many aspects of their life as possible. Complete the table below to answer the following questions:

1. What does each aspect tell us about a person?

|  |  |
| --- | --- |
| **Wellbeing can relate to the following aspects of a person’s life:** | **What does each aspect tell us about a person?** |
| **Spiritual** |  |
| **Emotional** |  |
| **Cultural** |  |
| **Religious** |  |
| **Social** |  |
| **Political** |  |
| **Sexual** |  |
| **Physical** |  |
| **Mental** |  |

2. Choose one of the aspects. How may this aspect affect a person’s identity and self- esteem?

THE CARE CERTIFICATE WORKBOOK STANDARD 5

**Care Certificate *progress log, mapping and sign-off document***

**Standard Number: 5 Standard Title: Work in a Person Centred Way**

**Document guidance**

This document provides an overview of the outcomes and assessment criteria for Standard 5: Work in a Person Centred Way. It identifies the criteria within the Standard that should have been achieved upon successful completion of the underpinning knowledge within the Care Certificate workbook. Employees must demonstrate their competence in practice in order to fully achieve this Standard of the Care Certificate.

This progress log and sign-off document should be completed jointly by the employee and the manager/supervisor/assessor to confirm that all outcomes and criteria have been achieved in practice in the work setting. Supplementary evidence can be attached to demonstrate achievement and it is suggested to do so as good practice.

This document also provides an outline of the suggested mapping of outcomes and criteria within Standard 5: Work in a Person Centred Way of the Care Certificate to the recommended Qualifications and Credit Framework (QCF) unit, the National Minimum Training Standards for Healthcare Support Workers and Adult Social Care Workers in England and the Common Induction Standards. This document does not necessarily indicate direct mapping of criteria and therefore assessors and/or managers should ensure they follow the guidance below. Please note that when the term assessor is used throughout this document this could be the manager, supervisor or assessor and will be decided by the employing organisation.

This document should always be used in conjunction with the guidance provided in the Care Certificate Framework Technical Document.

**Guidance for assessors**

Assessors must ensure that the learner has produced evidence for each assessment criterion that is valid, authentic, reliable, current and sufficient. Therefore assessors **must not assume** that if the mapping document indicates a criterion could have already been achieved, the mapped criteria within the QCF unit should automatically be awarded. Learners and assessors are responsible for ensuring that the outcomes and criteria within the QCF unit and standards below have been achieved to the required standard. For reference, within the column that refers to coverage of the relevant QCF unit, a **P** indicates that the Care Certificate criteria provides partial coverage of the relevant criteria within the QCF unit, whereas an **F** indicates full coverage.

The **Assessment method used** column is included to allow assessors to provide evidence of the type of assessment method that has been used to assess the Care Certificate criteria. This is likely to be noted as the Care Certificate Workbook, however if further evidence is also provided this could include professional discussion, observation, question and answer, e-learning, witness testimony etc. This column can also be completed to evidence competency using these example assessment methods.

The **Evidence location** column is included to provide a clear signpost to where the learner’s evidence can be found. This may be within a portfolio of evidence, a continued professional development (CPD) file or electronically via e-learning or e-portfolio.

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| **Unit number** | **Unit title** | **Level** | **Credit** |
| **A/601/8140** | **Implement person centred approaches in health and social care** | **2** | **5** |
| **Y/601/8145** | **Promote person centred approaches in health and social care** | **3** | **6** |

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| **Care Certificate**  **Standard 5**  **Outcome** | **Care Certificate**  **Standard 5 Criteria** | **Knowledge/ Competence** | **Question within workbook** | **QCF unit**  **A/601/8140**  Implement person centred approaches in health and social care  **P = Partial**  **F = Full** | **QCF unit**  **Y/601/8145**  Promote  person centred approaches in health and social care  **P = Partial**  **F = Full** | **National**  **Minimum Training**  **Standards**  **Standard 3:** Effective communication  **Standard 7:** Person centred care and support | **Common Induction Standards**  **Standard 3:** Communicate effectively  **Standard 7:** Person-centred support | **Assess- ment method used** | **Evidence location** | **Sign- off initials** | **Date** |
| **5.1** Understand person centred values | **5.1a** Describe how to put person centred values into practice in their day-to-day work | **K** | **5.1a and b** | **AC1.2 – P AC1.4 – P** | **AC1.1 – P** | **3.2.2**  **7.1.1** | **S7 – 1.1** |  |  |  |  |
| **5.1b** Describe why it  is important to work in a way that promotes person centred values when providing support to individuals | **K** | **5.1a and b** | **AC1.2 – P AC1.4 – P** |  | **7.1.2** | **S7 – 1.2** |  |  |  |  |
| **5.1c** Identify ways  to promote dignity in their day-to-day work | **K** | **5.1c** | **AC2.2 – P AC4.1 – P AC5.1 – P AC6.3 – P AC6.4 – P** | **AC1.1 – P AC4.1 – P AC5.3 – P** | **7.1.3** | **S7 – 1.3** |  |  |  |  |
| **5.2** Understand working in a person centred way | **5.2a** Describe the importance of finding out the history, preferences, wishes and needs of the individual | **K** | **5.2a** | **AC1.4 – P AC2.1 – P AC6.2 – P AC6.3 – P** | **AC1.2 – P AC4.1 – P AC5.4 – P AC7.3 – P** | **3.2.1**  **3.2.2**  **7.2.1** | **S7 – 2.2** |  |  |  |  |
| **5.2b** Explain why the changing needs of  an individual must be reflected in their care and/or support plan | **K** | **5.2b** | **AC2.2 – P** | **AC1.2 – P AC2.1 – P AC2.2 – P** | **7.2.2** | **S7 – 2.3** |  |  |  |  |
| **5.2c** Explain the importance of supporting individuals to plan for their  future wellbeing and fulfilment, including end-of-life care | **K** | **5.2c** |  | **AC4.1 – P AC6.2 – P** | **7.2.3** | **S7 – 2.4** |  |  |  |  |

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| **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. | **C** |  | **AC6.4 – P** | **AC6.4 – P** | **3.1.1**  **3.1.3**  **3.3.1**  **3.3.2**  **3.3.3**  **7.2.1** |  |  |  |  |  |
| **5.3b** Report any concerns they have to the relevant person. This could include:  **•** Senior member of staff  **•** Carer  **•** Family member. | **C** |  | **AC3.2 – P AC6.4 – P** | **AC5.2 – P AC5.3 – P AC5.4 – P AC6.3 – P AC6.4 – P** | **3.1.2**  **3.4.1**  **3.4.2**  **3.4.3**  **3.4.4** | **S3 – 4.1**  **S3 – 4.3** |  |  |  |  |
| **5.4** Make others aware of any actions they may be undertaking that are causing discomfort  or distress to individuals | **5.4a** Raise any concerns directly with the individual concerned | **C** |  | **AC6.4 – P** | **AC6.4 – P** | **3.4.3**  **7.5.3** | **S3 – 4.3** |  |  |  |  |
| **5.4b** Raise any concern with their supervisor/manager | **C** |  | **AC6.4 – P** | **AC6.4 – P** | **3.4.1**  **3.4.2**  **3.4.3**  **3.4.4**  **7.5.3** | **S3 – 4.2**  **S3 – 4.3** |  |  |  |  |
| **5.4c** Raise any concerns via other channels or systems e.g. at team meetings | **C** |  | **AC6.4 – P** | **AC6.4 – P** | **3.4.1**  **3.4.2** | **S3 – 4.1**  **S3 – 4.3** |  |  |  |  |
| **5.5** Support individuals to minimise pain or discomfort | **5.5a** Ensure that where individuals have restricted movement or  mobility that they are comfortable. | **C** |  | **AC1.4 – P AC2.2 – P** | **AC6.4 – P** | **3.1.1**  **3.1.3**  **3.1.1**  **3.3.2**  **3.3.3**  **7.2.1** | **S7 – 1.1**  **S7 – 1.2**  **S7 – 2.2** |  |  |  |  |

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|  | **5.5b** Recognise the signs that an individual is in pain or discomfort. This could include:  **•** Verbal reporting from the individual  **•** Non-verbal communication  **•** Changes in behaviour. | **C** |  |  |  | **3.1.1**  **3.1.3**  **7.2.1**  **7.2.2**  **7.5.1**  **7.5.2** | **S7 – 2.2**  **S7 – 2.3** |  |  |  |  |
| **5.5c** Take appropriate action where there is pain or discomfort. This could include:  **•** Re-positioning  **•** Reporting to a more senior member of staff  **•** Giving prescribed pain relief medication  **•** Equipment or medical devices are working properly or in the correct position, e.g. wheelchairs,  prosthetics, catheter tubes. | **C** |  | **AC2.1 – P** | **AC2.1 – P AC3.2 – P AC6.4 – P** | **3.1.3**  **3.2.1**  **3.2.2**  **7.2.1**  **7.2.2**  **7.5.1**  **7.5.2** | **S7 – 2.2**  **S7 – 2.3** |  |  |  |  |
| **5.5d** Remove  or minimise any environmental factors causing pain or discomfort.  These could include.  **•** Wet or soiled clothing or bed linen  **•** Poorly positioned lighting  **•** Noise. | **C** |  | **AC2.2 – P** | **AC2.1 – P AC2.2 – P AC2.3 – P AC6.4 – P** | **3.1.3**  **3.2.1**  **3.2.2**  **7.1.1**  **7.1.2**  **7.1.3** | **S7 – 2.1** |  |  |  |  |
| **5.6** Support the individual to maintain their identity and self- esteem | **5.6a** Explain how individual identity and self-esteem are linked to emotional and spiritual wellbeing | **K** | **5.6a** | **AC5.1 – P AC5.4 – P AC6.1 – F** | **AC6.1 – P AC6.2 – P** | **7.6.1** | **S7 – 6.1** |  |  |  |  |

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|  | **5.6b** Demonstrate that their own attitudes and behaviours promote emotional and spiritual wellbeing | **C** |  | **AC4.3 – P** | **AC2.2 – P AC4.2 – P** | **7.6.2** | **S7 – 6.2** |  |  |  |  |
| **5.6c** Support and encourage individuals own sense of identity and self-esteem | **C** |  | **AC6.3 – F** | **AC4.3 – P AC4.4 – P AC6.3 – P** | **7.6.3** | **S7 6.3** |  |  |  |  |
| **5.6d** Report any concerns about the individual’s emotional and spiritual wellbeing to the appropriate  person. This could include:  **•** Senior member of staff  **•** Carer  **•** Family member. | **C** |  | **AC6.4 – P** | **AC6.4 – P** | **3.1.1**  **3.1.3**  **3.3.1**  **3.3.2**  **3.3.3**  **3.4.1**  **3.4.2**  **3.4.3**  **3.4.4**  **7.6.3** | **S3 – 4.1**  **S3 – 4.3** |  |  |  |  |
| **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. | **C** |  | **AC2.1 – P AC2.2 – P AC4.3 – P AC5.1 – P AC6.3 – P AC6.4 – P** | **AC2.1 – P AC2.2 – P AC4.2 – P AC4.3 – P AC4.4 – P AC5.1 – P AC5.2 – P** | **3.1.1**  **3.1.3**  **3.2.1**  **3.2.2**  **3.3.3**  **7.2.1** | **S7 – 1.1** |  |  |  |  |

**Declaration of completion**

I confirm that the evidence provided by the employee meets the full requirements for **Standard 5: Work in a Person Centred Way.**

**Employee signature: Name of assessor\*: Assessor\* signature:**

**Completion date:**

\*The Assessor can be your Manager, Supervisor or someone else authorised by your employing organisation. This individual provides

confirmation that all learning outcomes and assessment criteria for the Care Certificate standard identified above have been completed and signed off by an authorising person.