

**Credit Accumulation Route**

 **Submission Workbook**

**Section 1**

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| **CAR Submission Front Sheet** |

Submission Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NISCC SCR No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| Employer:  |  |  Work Tel |  |

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| --- | --- |
| Work Address: |  |

**AWARD:**

Please click here

**AREA OF WORK:**

Please click here

**REQUIREMENTS**

(Please select **all** requirements

that you are submitting):

Requirement 1 [ ]

Requirement 2 [ ]

Requirement 3 [ ]

Requirement 4 [ ]

Requirement 5 [ ]

Requirement 6 [ ]

Requirement 7 [ ]

Requirement 8 [ ]

Requirement 9 [ ]

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By submitting this piece of work, I confirm that this submission complies with the Word Count Policy and contains the following:

|  |  |  |  |
| --- | --- | --- | --- |
| **Word Count** (please specify) |  |  |  |

Statement of Confidentiality Yes [ ]  No [ ]

Statement of Consent Yes [ ]  No [ ]

Line Manager/Professional Supervisor’s Report Yes [ ]  No [ ]

**Statement of Consent**

* I confirm that informed service user/carer consent (if applicable) was given to use of their case material as evidence of my learning.
* If obtaining service user consent was not possible or if that consent was later withdrawn, I confirm that I have submitted a Practice Theme submission with no direct reference to specific case examples.
* I confirm that I have explained the purpose of gaining consent for this work and have explained clearly how it will be used.

Signed:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    (Candidate)

Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Statement of Confidentiality**

* Within this submission I have adhered to the General Data Protection Regulations 2018 in relation to the processing and confidentiality of personal data.
* I can confirm that all identifying details relating to service users, carers and their families have been removed.
* Sensitive, confidential and/or critical information about anyone, including other staff and agencies, has been anonymised.
* Names of services users, carers and other professionals referred to in this work have been anonymised by using letters (e.g. “X”) which do not correspond to the person’s actual name.

Signed:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    (Candidate)

Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Line Manager Verification**

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| Candidate Name: |  |
| Candidate Job Role: |  |
| Agency: |  |
| Area of Work: |  |
| Line Manager Name: |  |
| Line Manager Job Role: |  |
| Date of Submission: |  |
| Type of Submission:CAR PILOT 2023 |  |
| \*Professional supervisor (if applicable): |  |

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| Yes |  |  No |  |

1. Please confirm that the submission has been read in full by the line manager (and professional supervisor, if applicable):-

a) Please outline how this submission is typical of the candidate’s performance?

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b) Please confirm the candidate has undertaken the training and learning activities as outlined.

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2. Please indicate what support was offered to the candidate in the completion of their submission?

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| Planned Supervision Sessions |  |  |  |
|  |  |  |  |
| Release for Study Days |  |  |  |
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| Workload Easement |  |  |  |
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| Release for Support Sessions |  |  |  |
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| Other  |  |  |  |

If Other, Please Specify:

3. I confirm that I have checked the submission for breaches of confidentiality.

***SERIOUS BREACHES OF CONFIDENTIALITY WILL RESULT IN THE WORK BEING REFERRED***

4.I confirm that where there is reference to direct work with a service user, that service user has consented to such use of the work.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Line Manager

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidate

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date

\*If the candidate’s line manager is not a social worker the professional supervisor must contribute to the above report in consultation with the line manager

**Section 2**

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| **Introduction to Role and Context (200-300 words)** |

**NB: This section is not included in the overall wordcount.**

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**Section 3**

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| **List of Training and Learning Activities** |

**Please complete the table with the credits being used for each requirement. A separate table is required for each 100 credits being used. A maximum of 3 Requirements can be claimed per workbook.**

**Each Credit can only be used towards claiming 1 Requirement and therefore credits cannot be duplicated across tables.**

**Leadership & Strategic Award Submissions can be made on the basis of 200 credits per Requirement.**

**Please Note: training and learning activities for which you have already obtained PiP accreditation CAN NOT be used for a CAR Submission eg. PiP Approved Programmes such as IPD; Practice Teaching; ASW etc.**

**Requirment Claimed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Activity** | **Hours** | **Credits (for 1 requirement only)** |
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**Requirement Claimed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Activity** | **Hours** | **Credits (for 1 requirement only)** |
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**Requirement Claimed\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Activity** | **Hours** | **Credits (for 1 requirement only)** |
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**Section 4**

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| **Reflection** |

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| *In this section you are asked to identify the PiP Requirement(s) being claimed and to show how the credits you have accumulated meet each of these.**Please include the following in your account:** *Reflection on how the training activities listed above have impacted on/helped you to develop your practice; helped inform your knowledge and skills and highlight any ethical issues/dilemmas you may have encountered.*
* *Reference to relevant theory, legislation and policy underpinned by the Social Care Council Standards of Conduct and Practice.*
* *Make specific reference to the content of the Requirement(s) being claimed and how the learning activities and your application demonstrate competence in the Requirement(s).*

***Wordcounts:******Consolidation & Specialist Awards******1 Requirement – 1000 - 1200 words******2 Requirements –1500 - 2000 words******3 Requirements – 2500 - 3000 words******Leadership & Strategic Awards******1 Requirement – 2000 – 2500 words******2 Requirements – 3000 – 4000 words******3 Requirmeents – 4500 – 5000 words*** |
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**Section 5**

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| **Referencing** |

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| **Please use the Harvard Referencing Guidelines** |
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