



Competency Evidence Log- Community Nurse

Name of Staff member: Alison Jackson Community Nurse

Competencies to be achieved: 1-6 (plus core values)

Name and role of person gathering evidence: Gail Kindle Adult Safeguarding Manager

| Core Value/Competency | Demonstration or Evidence of competence and date (taken place within the previous six months) | Additional comments/Notes |
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| Understanding dignity, respect and human rights | 2.10.15 Representing the views of the patient at the CPA meeting | |
| Engaging in a positive approach | 2.10.2015 Being part of CPA meeting and contributing information about a patient as required | |
| 2. Understanding the types and signs of abuse, as defined by LLR Multi-agency Policy and Procedures 2015 The Care Act 2014 | O3.10.2015 AJ contacted the safeguarding team to escalate concerns in respect of a Care Home with reference to tissue viability and residents stating they were scared of the night staff. AJ demonstrated understanding that the concerns she had | AJ contacted Adult Social Care to ensure these concerns were escalated in line with the multi- agency policies and procedures |
| 3. Understand the importance of whistle blowing procedures | met the types of abuse of neglect, institutional abuse and potential physical harm. AJ felt comfortable and confident to raise concerns on behalf | |
| 5. Understand their role as defined within the multi-agency and internal policy and procedure, including how to report | of the patient in the Care Home and was aware of LPT's process to inform the safeguarding team. 14.09.2015 | |
| concerns of abuse of either adults or children using appropriate systems | AJ on receipt of advice from the safeguarding team subsequently notified Adult Social Care and has attended a strategy meeting to ensure concerns raised have been | |





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| | appropriately shared. 03.10.2015 AJ completed an incident form for LPT, in line with her own agencies policies and procedures. | |
| 4. Understand the importance of creating a safe environment in order to minimise risk | 28.09.2015 AJ stated she had previously met with the manager of the Care Home and had provided advice and guidance to the staff however the recommendations made had not been implemented and patients were still becoming at risk from increased tissue viability damage. AJ recognised she needed to escalate this concern and apply the whistle-blowing policy. | AJ is to attend further case conferences to ensure strategies to improve practice is shared with all agencies involved with the home |
| 1.Understanding the definition of an adult who may be 'at risk', as defined by LLR Multi-agency Policy and Procedures 2015, Care Act 2014 6. Awareness of legislation applicable to role and responsibilities | O3.10.2015 AJ recognised the residents in the Care Home met the criteria of a adult in need of safeguarding as the residents had a physical disability and were not provided with a voice to raise their own concerns. AJ made reference to patients lacking capacity and identified this group of patients being at risk. AJ made reference to the Mental Capacity Act and the Health and Social Care Act and demonstrated a risk assessment that is being used to support the home and the community nurses to provide consistency in care and to identify increased risk. | AJ to continue to support the Care Home with risk assessments with reference to tissue viability |
| 1 & 2 & 3& 4 & 5 & 6 | 10.10.2015 AJ has attended LPT one full day training programme which addresses all competencies. | AJ has completed the LPT audit to demonstrate learning is embedded in practice |