



PRTL Audit Submission Form Social Care Worker/Senior Care Worker

Full namePeter Anon

Employer name.....Health and Social Care Trust Day Care Centre.....
(if in employment)

Registration number...12345670.....

Complete electronically if possible and return via email to:

registration@nisc.hscni.net

If completed manually, please return to the address below:

Northern Ireland Social Care Council

7th Floor, Millennium House

19-25 Great Victoria Street

Belfast

BT2 7AQ

PRTL Audit Submission Form - Social Care Worker/ Senior Care Worker

Full name: Peter Anon

Northern Ireland Social Care Council Registration Number (SCR): 12345670

Employer name (if in employment): Day Care Centre

Description of your Social Care Role: Day Opportunities Worker

I work in a HSCT Day Centre providing personal care, helping with medication and delivering activities both in the centre and in the community for people with learning and physical disabilities. I have been in this post for five years, regularly updating mandatory training and have access to specialised training to provide a good service.

Date	Duration (Hours)	Brief description of activity	How has this activity improved your work and helped the people you support/care for?
2/02/2015	7	Emergency First Aid	This training cover CPR, how to stop bleeding the recovery position and when to seek help. I feel confident in knowing what to do in an emergency. I believe I would be clam in accessing the situation and providing the help needed.

Date	Duration (Hours)	Brief description of activity	How has this activity improved your work and helped the people you support/care for?
8/4/2015	7	Moving and Handling – missed refresher last year	As I missed refresher training last year I completed the full day course. I can use equipment safely and have the skills to move service users safely. This is very important for the people I care for.
1 st -4 th Sep 2015	37.5	MAPA Training – Managing Actual and Potential Aggression	This has improved my knowledge and skills in working with challenging behaviours and aggression. I was anxious about attending this course but I believe I am now more confident in working with and handling aggression and challenging behaviours. I have the ability to keep the service user and staff safe.
03/2/2016	7	Communication Training	This day covered basic communication skills such as listening, questioning and appropriate language. I thought I knew how to do this and was surprised to realise how I can improve. I will work on this. The afternoon gave awareness of Makaton, sign languages and assistive technologies. I especially want to become more skilled at Makaton as a number of service users who attend the centre use this.

Date	Duration (Hours)	Brief description of activity	How has this activity improved your work and helped the people you support/care for?
5/5/16	2	Team meeting/Partnership working	Part of my job entails developing activities for service users in the community. At the team meeting we discussed who we are working with and how we can improve those working relationships. A colleague gave an example of how she developed a programme in partnership with a local college. She shared the positives and challenges. I plan to discuss how I might offer a programme with my manager
7/8/2016	7	Data Protection Training	I now understand the legislation in relation to data protection and the importance of keeping information safe. I know how to access policies and procedures and .know to alert my manager if there has been a data breach.
8/10/2016	7	One day conference – Best Practice in Learning Disability Services	I was unsure about going to a conference- missing a day from work. I was surprised how much I learnt from other service providers . My manager asked me to present what I learned at the next team meeting, I did this . I was very nervous but had prepared well and was pleased how interested my colleagues were and how the believed the information would also help them deliver a better service.

Total training and learning for period of registration (Hours): **90**

Registrant Declaration

I confirm that I have undertaken the activities recorded on this form and that the details I have provided are accurate. I understand that failure to meet Post Registration Training and Learning Requirements, or the provision of false information in relation to meeting these requirements, may be considered by the Northern Ireland Social Care Council as misconduct.

Registrant Signature:Peter Anon..... **Date:**.....15/5/2017.....

Managers Signature:Betty Ross..... **Date:**.....17/5/2017.....