Examination of collaborative working/professional issues

Assessment of competences for ANP / ACP / SCP

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **NOT competent** | **Competent** | **Signature and date** |
| Collaborative working/professional issues |
| 1 | Demonstrates critical analysis of their ability to work within own professional boundaries in accordance with practitioner’s professional body |  |  |  |
| 2 | Demonstrates knowledge of the patient pathway, the multidisciplinary team and how to work effectively within this context |  |  |  |
| 3 | Demonstrates how to work effectively with other teams in the trust and external agencies within this context |  |  |  |
| 4 | Demonstrates the ability to manage the workload effectively |  |  |  |
| 5 | Contributes to strategic service development |  |  |  |
| 6 | Contributes towards protocol development and guidelines |  |  |  |
| 7 | Can work within a flexible team structure liaising with the multidisciplinary team |  |  |  |
| 8 | Works in accordance with trust policy |  |  |  |
| 9 | Maintains knowledge level and is aware of how national, trust and specialty factors affect current service delivery |  |  |  |
| 10 | Can reflect on past practice and use it to inform current and future practice |  |  |  |
| 11 | Describes core components of multidisciplinary working |  |  |  |
| 12 | Demonstrates the professional behaviours commensurate with the role and working within their code of conduct |  |  |  |
| **Assessor’s comments**: |
|  |
| **This practitioner has completed these outcomes to the appropriate standard.****Assessor’s name:****Signature and date:** | **Practitioner’s signature:****Date:** |