



E-Portfolio



Lisa Davies

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ABOUT ME

My name is Lisa Ann Davies and I am a student currently studying Nursing Studies and Health Level 4 at UWTSD. I used to work on Dewi Ward in Glangwili Hospital as a HCSW and worked there for two and a half years before joining the BANK last year to pursue the Nursing Studies course with more time being able to commit. After working alongside both children and adults over the years in a range of settings such as nursery's, schools, home care and in a hospital, they all have taught me different social and practical skills that I carry with me through my career. After succeeding in my GCSE's, I went on to college to further my knowledge in children's care, before wanting to work alongside adults and completing my health and social care level two.

When successfully taking on the role as a HCSW on Dewi Ward I underwent 3 weeks of training to prepare me for my position and had my mentor sign me off to agree I was competent to undertake the responsibility of a HCSW. In my training as well as on the ward I was taught how to fill in all relevant charts that would be used on patients such as intentional rounding charts, observation charts, stool charts, blood glucose monitoring charts, fluid input and output charts and food diaries. As Dewi Ward was a medical/diabetic ward I had to undertake a glucose monitoring course which would pass me in being able to carry out patient's blood glucose levels. As the ward accepted a range of patients including individuals with dementia and alzheimer's we were given a dementia awareness course to take for us to understand and work better alongside these patients. All evidence of this is presented throughout my portfolio. When deciding to work on the BANK I gave myself possibilities to work in different hospitals, different wards and with different professionals in their fields to expand my knowledge which will benefit me in my future goal of becoming a nurse.

EVIDENCE

- PL1A Placement Provider Agreement
- PL1B Health and Safety Questionnaire
- PL1C Student Placement Agreement
- PL1D Risk Guidance
- PL1E Risk Assessment
- PL1F Induction Checklist
- PL1G Post Placement form

- Certificates

GCSE's A*- D

Level 3 National Diploma – Children's Care Learning and Development: MPP

Essential Skills

Key Skills

Welsh Baccalaureate

Welsh Themes

Using Welsh

Level 2 - Social Care (Adults)

First Aid at Work 2012

Food Safety 2012

Blood Glucose Training

Dementia Awareness

- CV
- The Role of a HCSW
- Email of Confirmation from Mentor at Work

- Work Patient Charts – Examples

Observation Chart

International Rounding Chart

Blood Glucose Monitoring Chart

Daily Intake – Output Chart

Food Record Chart

Bristol Stool Chart

- Evidence of Hours Worked
- Future Prospects
- SMART

STUDENT PLACEMENT AGREEMENT

STUDENT CONTACT INFORMATION

Student Name:	LISA DAVIES	Student number:	1809868.
Mobile Telephone:	07746648321		
University e-mail:	1809868@student.uwtsd.ac.uk.		
Personal e-mail:	lisdavies@hotmail.co.uk.		
Emergency contact and relationship:	Deia, mother	Tel:	01269 592275.

CONFIDENTIAL STUDENT HEALTH INFORMATION:

	YES	NO
1. Do you currently have or have you previously had any form of asthma; diabetes; epilepsy; heart disease; nervous or mental illness; rheumatic fever; stroke; tuberculosis?		✓
2. Do you currently have or have you previously had any other form of serious illness or operation that may affect your or others health and safety whilst on placement?		✓
3. Are you currently receiving medical treatment and/or medication?		✓
4. Are you visually impaired/blind?		✓
5. Are you hard of hearing/deaf?		✓
6. Disability - 'a physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day duties'.		✓
Do you consider yourself to have a disability as defined in the Single Equality Act 2010?		
If the answer to any of the questions above is 'yes', please give further details as to the nature of your circumstances. Please include dates.		
Name, address and contact details of your doctor (for emergency use):		
Margaret Street, Ammanford, SA18 01269 592477.		

To protect your health and safety it is imperative that you notify us of any disability or condition that may impact upon health and safety during work placement. If you fail to disclose this it may place you at a disadvantage and impact upon your own health and safety.

PLACEMENT PROVIDER CONTACT INFORMATION

Name of organisation:	UWTSD
Placement Site Address:	SBC, HIGH STREET SA1 1NE
Workplace Supervisor (or provider contact) Name:	TANIA DAVIES
Workplace Supervisor (or contact) Position:	PROGRAMME DIRECTOR
Telephone:	01792 481196
E-mail:	Tania.davies@uwtsd.ac.uk

PLACEMENT DETAILS

Start Date:	Oct '18	End date:	May '19
Duration of Placement:	8 months	Normal Working Hours:	- optional
Outline of Placement Activity/Duties:	Personal care, feeding, social interaction, upkeep of ward.		
Outline of Placement learning/assessment focus:			
Please tick to confirm that you have current DBS approval (if applicable)	YES ☒	NO ☐	N/A ☐

UNIVERSITY PLACEMENT COORDINATOR CONTACT INFORMATION

Name of Placement Coordinator:	TANIA DAVIES
Telephone:	01792 481196
E-mail:	Tania.davies@uwtsd.ac.uk

Dear Student

Re: Work Experience Placement

Welcome to the UWTSD Placement! Quality work experience is vital to equip you for your future career and will enhance your employability. We hope you will learn from this placement the skills and competencies specific to your discipline or profession as well as more general work-related and employability skills (time management, team working, communications skills, etc.).

Would you please complete the previous sections of this document, ensuring that full and correct information is provided?

Student placements are a partnership between the student, the University and the Placement Provider in which each has specific roles and responsibilities. It is important that all three parties clearly understand the responsibilities and expectations of everyone involved and so the responsibilities are detailed below.

Prior to placement: students cannot commence a placement until they have completed all the necessary preparatory work detailed below, and received authorisation from the Placement Coordinator. Students are required to:

- a) Identify a suitable placement (with the exception of students following a professionally accredited programme).
- b) Attend placement preparation briefings, including health and safety.
- c) Complete a Disclosure and Barring Service (DBS) check, if required. The student will retain the original and submit a copy to the University. The student must make the Placement Provider aware of any issues arising from the DBS check and discuss any convictions with the Placement Coordinator.
- d) Complete the ethics approval processes, where relevant.
- e) Have a dialogue with the Placement Coordinator or Placement Tutor to clarify placement requirements, expected learning outcomes and assessment requirements.
- f) Inform the Placement Coordinator and Placement Provider of any personal factors (e.g. health, disability, linguistic or cultural) that may affect the level of risk or may require adjustments.
- g) Complete the defined placement registration and approval process in full. See Appendix PL1C Student Placement Agreement.
- h) Confirm acceptance of the arrangements and responsibilities set out in Appendix PL1C Student Placement Agreement.

During the placement the student is required to:

- a) Comply with all rules regarding health and safety requirements, and other practices and procedures of the placement organisation.
- b) Report to the University any incidents in which s/he is involved and any health and safety concerns that are not addressed by the Placement Provider, e.g. in the event that appropriate induction and health and safety training is not provided.
- c) Carry out the work programme specified by the Placement Provider under the supervision of the Workplace Supervisor.
- d) Keep a log of hours worked.
- e) Monitor his/her progress in achieving the identified learning outcomes and discuss these regularly with the Workplace Supervisor and Placement Tutor, as appropriate.

APPENDIX PL1C

- f) Conduct him/herself in an appropriate manner within the relevant ethical framework, ensuring confidentiality and treating others with respect and dignity.
- g) Act in a professional manner, including notifying the Placement Provider in a timely fashion in the event that he/she is unable to attend their placement due to illness etc.
- h) Respect any other requirements of the workplace such as dress codes.
- i) Notify their Placement Coordinator or Tutor should any issues of concern arise.
- j) Consult with the Placement Coordinator or Tutor prior to seeking any changes in the terms and duration of the placement.
- k) Complete all relevant academic coursework relating to the placement experience.

The Placement Provider will:

- a) Confirm acceptance of the arrangements and responsibilities set out in Appendix PL1A Placement Provider Agreement.
- b) Provide a safe working environment. Comply with health and safety legislation and define the liability and other insurance cover that will be provided for the activities of the student, with regard to the student and to others who could be affected by the student's actions or inactions. See Appendix PL1B Placement Provider Health and Safety Questionnaire.
- c) Provide a designated Workplace Supervisor who will:
 - a. act as the first point of contact for any problems or queries during a student's placement and contact the University immediately in cases of serious accidents, incidents or breaches of discipline involving the student;
 - b. conduct or make arrangements for the day-to-day supervision of the student including periodic progress checks and instruction regarding hazards and health and safety precautions;
 - c. provide the University with student attendance data, where required.
- d) Provide the student with a full and clear induction to the organisation and its working practices, procedures and requirements, including health and safety arrangements, how to report accidents, incidents and unsafe conditions. See Appendix PL1F Induction Checklist.
- e) Ensure that the student is fully informed about responsibilities, including those contained in any statutory legislation and/or honorary contract.
- f) Provide the student with appropriate instruction and training in working practices to enable him/her to carry out his/her duties efficiently and safely.
- g) Work with the student to identify appropriate learning outcomes for the placement (these must be agreed by the student, the Workplace Supervisor and the University).
- h) Facilitate access to the student for visits by the Placement Tutor, where appropriate.
- i) Ensure that the student is treated with respect.
- j) During and on completion of the placement, provide feedback to the University on the student's performance and confirmation of the hours in practice, where required.

The University of Wales Trinity Saint David will:

- a) Commit appropriate levels of staff and other resources to placement governance activity to ensure strategic oversight for the learning to be delivered and managed by the Placement Provider. This may include the identification of (i) a Placement Coordinator, whose duties would normally include the authorisation of placements and organising/managing the placement arrangements, in liaison with the Placement Provider and student, and (ii) a Placement Tutor, who will act as the first point of contact, visit the student on placement, where appropriate, and/or assess the student.
- b) Ensure that any placement learning that forms part of a programme of study has associated learning outcomes which:
 - are clearly defined;
 - contribute appropriately to the overall aims of the programme;
 - are appropriately assessed. In cases where it is considered appropriate for the assessment be jointly conducted by the University and the Placement Provider, the Placement Tutor will work with the Workplace Supervisor to establish and document the procedure by which this shall be achieved.
- c) Assess the suitability of a proposed placement through appropriate and proportionate placement due diligence procedures, using a risk-based assessment process. The approval process will require the Placement Coordinator to undertake a Risk Profile for each placement using the PL1D Placement Risk Profiling Guidance, and record the outcomes in Appendix PL1E Risk Assessment. This risk assessment activity will include consideration of the information supplied in Appendix PL1A Placement Provider Agreement, Appendix PL1B, Placement Provider Health and Safety Questionnaire and Appendix PL1C Student Placement Agreement.
- d) Negotiate reasonable adjustments with the Placement Provider in the case of a student assessed under the Equality Act, 2010.
- e) Provide specialist advice and guidance for students with additional support needs.
- f) Clearly define appropriate points of contact and lines of communication between the University, the Placement Provider and the student. These should include:
 - i. Mechanisms for the Placement Provider to raise concerns or complaints about any aspect of the placement, including an individual student's performance or conduct.
 - ii. University emergency contact details.
- g) Retain a full and detailed record of each placement.
- h) Provide students with appropriate briefing, including health and safety, prior to commencement of any placement.
- i) Monitor all placement activity, ensuring that milestones are established, maintained and records, and identifying and addressing issues of concern and sharing good practice.
- j) Arrange appropriate opportunities for gathering feedback from students, Placement Providers and Placement Tutors, including suggestions for improvement. See Appendix PL1G.

APPENDIX PL1C

Would you please confirm that you accept the above responsibilities by signing below?

I'd be grateful if you would return the completed version of this PL1C form to the Placement Coordinator using the contact details specified on page 2.

If you have any questions or problems, please don't hesitate to get in touch.

Yours sincerely



Tania Davies

Placement Coordinator

STUDENT PLACEMENT AGREEMENT

I confirm that I accept the responsibilities as detailed above.

Signed:	
Name in block capitals:	LISA ANN DAVIES .
Programme of study:	Nursing studies + health care .
Date:	19/3/19 .



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

PLACEMENT PROVIDER AGREEMENT

PLACEMENT PROVIDER CONTACT

INFORMATION

Name of organisation:	NHS BANK.
Placement Site Address:	St clowds Park, Carmarthen, SA31 3HB.
Workplace Supervisor Name (or other provider contact):	
Workplace Supervisor (or contact) Position:	
Telephone:	01267 239868.
E-mail:	

UNIVERSITY PLACEMENT COORDINATOR CONTACT INFORMATION

Name of Placement Coordinator:	TANIA DAVIES
Address:	UWTSD, SBC, HIGH STREET SA1 1NE
Telephone:	01792 481196
E-mail:	Tania.davies@uwttd.ac.uk

STUDENT AND PLACEMENT DETAILS

Name of student(s):	Lisa Davies		
Start Date:	may 2018.	End date:	- current
Duration of Placement:	oct '18 - May '19	Normal Working Hours:	optional.
Outline of Placement Activity/Duties:	Personal care, feeding, social interaction. upkeep of ward.		

Dear Placement Provider

Re: Work Experience Placement

Thank you for agreeing to accept our student on the work experience placement at your organisation. Quality work experience is vital to equip our students for their future careers and the University is grateful for your offer of this placement opportunity. We hope our student will learn from this placement the skills and competencies specific to their discipline or profession as well as more general work-related and employability skills (time management, team working, communications skills, etc.).

Would you please check that the Placement Provider information and placement details on page 1 are complete and correct, amending if necessary?

Student placements are a partnership between the student, the University and the Placement Provider in which each has specific roles and responsibilities. It is important that all three parties clearly understand the responsibilities and expectations of everyone involved and so the responsibilities are detailed below.

During the placement, we expect the student to prove to be an effective, safe and reliable individual. However, you will appreciate that during this period the student is under your control and therefore the primary duty of care and consequent liabilities must rest with you. As the student's Placement Provider the University requests you to treat him or her in the same way as your employees.

The University therefore requests that you as Placement Provider will:

- a) Confirm acceptance of the arrangements and responsibilities set out in Appendix PL1A Placement Provider Agreement.
- b) Provide a safe working environment. Comply with health and safety legislation and define the liability and other insurance cover that will be provided for the activities of the student, with regard to the student and to others who could be affected by the student's actions or inactions. See Appendix PL1B Placement Provider Health and Safety Questionnaire.
- c) Provide a designated Workplace Supervisor who will:
 - a. act as the first point of contact for any problems or queries during a student's placement and contact the University immediately in cases of serious accidents, incidents or breaches of discipline involving the student;
 - b. conduct or make arrangements for the day-to-day supervision of the student including periodic progress checks and instruction regarding hazards and health and safety precautions;
 - c. provide the University with student attendance data, where required.
- d) Provide the student with a full and clear induction to the organisation and its working practices, procedures and requirements, including health and safety arrangements, how to report accidents, incidents and unsafe conditions. See Appendix PL1F Induction Checklist.
- e) Ensure that the student is fully informed about responsibilities, including those contained in any statutory legislation and/or honorary contract.
- f) Provide the student with appropriate instruction and training in working practices to enable him/her to carry out his/her duties efficiently and safely.
- g) Work with the student to identify appropriate learning outcomes for the placement (these must be agreed by the student, the Workplace Supervisor and the University).
- h) Facilitate access to the student for visits by the Placement Tutor, where appropriate.
- i) Ensure that the student is treated with respect.

APPENDIX PL1A

- j) During and on completion of the placement, provide feedback to the University on the student's performance and confirmation of the hours in practice, where required.

The University of Wales Trinity Saint David will:

- a) Commit appropriate levels of staff and other resources to placement governance activity to ensure strategic oversight for the learning to be delivered and managed by the Placement Provider. This may include the identification of (i) a Placement Coordinator, whose duties would normally include the authorisation of placements and organising/managing the placement arrangements, in liaison with the Placement Provider and student, and (ii) a Placement Tutor, who will act as the first point of contact, visit the student on placement, where appropriate, and/or assess the student.
- b) Ensure that any placement learning that forms part of a programme of study has associated learning outcomes which:
 - are clearly defined;
 - contribute appropriately to the overall aims of the programme;
 - are appropriately assessed. In cases where it is considered appropriate for the assessment be jointly conducted by the University and the Placement Provider, the Placement Tutor will work with the Workplace Supervisor to establish and document the procedure by which this shall be achieved.
- c) Assess the suitability of a proposed placement through appropriate and proportionate placement due diligence procedures, using a risk-based assessment process. The approval process will require the Placement Coordinator to undertake a Risk Profile for each placement using the PL1D Placement Risk Profiling Guidance, and record the outcomes in Appendix PL1E Risk Assessment. This risk assessment activity will include consideration of the information supplied in Appendix PL1A Placement Provider Agreement, Appendix PL1B, Placement Provider Health and Safety Questionnaire and Appendix PL1C Student Placement Agreement.
- d) Negotiate reasonable adjustments with the Placement Provider in the case of a student assessed under the Equality Act, 2010.
- e) Provide specialist advice and guidance for students with additional support needs.
- f) Clearly define appropriate points of contact and lines of communication between the University, the Placement Provider and the student. These should include:
 - i. Mechanisms for the Placement Provider to raise concerns or complaints about any aspect of the placement, including an individual student's performance or conduct.
 - ii. University emergency contact details.
- g) Retain a full and detailed record of each placement.
- h) Provide students with appropriate briefing, including health and safety, prior to commencement of any placement.
- i) Monitor all placement activity, ensuring that milestones are established, maintained and records, and identifying and addressing issues of concern and sharing good practice.
- j) Arrange appropriate opportunities for gathering feedback from students, Placement Providers and Placement Tutors, including suggestions for improvement. See Appendix PL1G.

Students are required to:

Prior to placement: students cannot commence a placement until they have completed all the necessary preparatory work detailed below, and received authorisation from the Placement Coordinator. Students are required to:

- a) Identify a suitable placement (with the exception of students following a professionally accredited programme).
 - b) Attend placement preparation briefings, including health and safety.
 - c) Complete a Disclosure and Barring Service (DBS) check, if required. The student will retain the original and submit a copy to the University. The student must make the Placement Provider aware of any issues arising from the DBS check and discuss any convictions with the Placement Coordinator.
 - d) Complete the ethics approval processes, where relevant.
 - e) Have a dialogue with the Placement Coordinator or Placement Tutor to clarify placement requirements, expected learning outcomes and assessment requirements.
 - f) Inform the Placement Coordinator and Placement Provider of any personal factors (e.g. health, disability, linguistic or cultural) that may affect the level of risk or may require adjustments.
 - g) Complete the defined placement registration and approval process in full. See Appendix PL1C Student Placement Agreement.
 - h) Confirm acceptance of the arrangements and responsibilities set out in Appendix PL1C Student Placement Agreement.
-

During the placement the student is required to:

- a) Comply with all rules regarding health and safety requirements, and other practices and procedures of the placement organisation.
- b) Report to the University any incidents in which s/he is involved and any health and safety concerns that are not addressed by the Placement Provider, e.g. in the event that appropriate induction and health and safety training is not provided.
- c) Carry out the work programme specified by the Placement Provider under the supervision of the Workplace Supervisor.
- d) Keep a log of hours worked.
- e) Monitor his/her progress in achieving the identified learning outcomes and discuss these regularly with the Workplace Supervisor and Placement Tutor, as appropriate.
- f) Conduct him/herself in an appropriate manner within the relevant ethical framework, ensuring confidentiality and treating others with respect and dignity.
- g) Act in a professional manner, including notifying the Placement Provider in a timely fashion in the event that he/she is unable to attend their placement due to illness etc.
- h) Respect any other requirements of the workplace such as dress codes.
- i) Notify their Placement Coordinator or Tutor should any issues of concern arise.
- j) Consult with the Placement Coordinator or Tutor prior to seeking any changes in the terms and duration of the placement.
- k) Complete all relevant academic coursework relating to the placement experience.

APPENDIX PL1A

Would you please confirm that you accept the above responsibilities by signing below?

Also attached is the PL1B Placement Provider Health and Safety Questionnaire. Please could you arrange to complete the questionnaire with regard to your health and safety and insurance arrangements?

I'd be grateful if you would return the completed versions of this PL1A form and PL1B questionnaire either by postal mail or email to the contact details specified on page 1.

If you have any questions or problems, please don't hesitate to get in touch.

Yours sincerely



Tania Davies

Placement Coordinator

PLACEMENT PROVIDER AGREEMENT

I confirm that I accept the responsibilities as detailed above.

Signed:	
Name in block capitals:	Donna MASOE
Position:	Assistant Nurse Bank Manager
Date:	19/3/19

PLACEMENT RISK ASSESSMENT (worked example of PL1E)

Placement Provider	Student or student group	Start Date	End Date
Company: Davies and Jones Accountants Location: Llanelli, Carmar	Jack Counter	1 st May 2015	31 st Aug 2015
General Control Measures	Yes / No	Actions Necessary?	Action Completed
Has the student received sufficient briefing?	Yes		
Has the student submitted a signed PL1C Student Placement Agreement?	Yes		
Has the placement provider returned a signed PL1A Placement Provider Agreement and PV1B Health and Safety Questionnaire?	Yes		
Has this provider been used before and been reviewed?	Yes		
If yes, do any concerns remain unresolved?	No		
Risk Profiling & Further Actions Required	Risk Profile High, Med, Low	Actions Necessary?	Action Completed
Individual Student Factors - Skills, abilities, pre-existing medical conditions, disability, etc.	Low		
Work Factors - Risks associated with student's expected work activities.	Low		
Location and/or Region - Crime, civil disorder, remote working, etc.	Low		
Insurance limitations - Provider has adequate insurance in place to cover student on placement	Low		
General / Environmental Health Factors - Very hot or cold working conditions, inoculations required, etc.	Low		
Travel & Transportation - Commuting to/from work & driving for work purposes.	Low		
Safeguarding - Work with children or vulnerable adults.	Low		
Conclusion	Yes / No	Action Necessary?	Action Completed
Is a site safety visit required before placement is approved?	No		
Are risks acceptable / tolerable such that the placement can be approved?	Yes		

PLACEMENT APPROVAL

I approve this placement.

Signed:	John O'Groats		
Name in block capitals:	JOHN O'GROATS		
Position:	Placement Organisation	Date:	3 rd March 2015

PLACEMENT RISK ASSESSMENT (worked example of PL1E)

Placement Provider	Student or student group	Start Date	End Date
Company: Giles's Farm Location: Carmarthen	Annette Curtin	1 st May 2015	31 st Aug 2015
General Control Measures	Yes / No	Actions Necessary?	Action Completed
Has the student received sufficient briefing?	Yes		
Has the student submitted a signed PL1C Student Placement Agreement?	Yes		
Has the placement provider returned a signed PL1A Placement Provider Agreement and PV1B Health and Safety Questionnaire?	Yes		
Has this provider been used before and been reviewed?	Yes		
If yes, do any concerns remain unresolved?	No		
Risk Profiling & Further Actions Required	Risk Profile High, Med, Low	Actions Necessary?	Action Completed
Individual Student Factors - Skills, abilities, pre-existing medical conditions, disability, etc.	Medium. Student has declared allergies.	Student advised to see GP and inform provider of allergy issues	Yes
Work Factors - Risks associated with student's expected work activities.	High. Will be using tractor and other farm machinery and working with cattle	Check Placement Provider's risk assessments and safe systems of work for the farm and the farm's activities	Yes
Location and/or Region - Crime, civil disorder, remote working, etc.	Low		
Insurance limitations - Provider has adequate insurance in place to cover student on placement.	Medium	Check the provider's insurance re tractor driving	Yes
General / Environmental Health Factors - Very hot or cold working conditions, inoculations required, etc.	Medium. Work with cattle, hay, straw, bedding	Refer to Student Services for occupational health advice.	Yes
Travel & Transportation - Commuting to/from work & driving for work purposes.	High. Will be using tractor and other farm machinery both on and off road	Check Placement Provider's insurance cover and training and instruction to be provided.	Yes
Safeguarding - Work with children or vulnerable adults.	Low		Yes
Conclusion	Yes / No	Action Necessary?	Action Completed
Is a site safety visit required before placement is approved?	Yes	Senior lecturer in Agriculture to visit site	Yes. Visited 3/4/15
Are risks acceptable / tolerable such that the placement can be approved?	Yes	Review findings of above actions	Yes

PLACEMENT APPROVAL

I approve this placement.

Signed:	John O'Groats		
Name in block capitals:	JOHN O'GROATS		
Position:	Placement Coordinator	Date:	4 th April 2015



PLACEMENT PROVIDER HEALTH AND SAFETY QUESTIONNAIRE

Name of provider's organisation:	NHS BANK		
Placement Site Address:	Prince Phillip Hospital, Llanelli.		
Workplace Supervisor Name (or other provider contact):			
Workplace Supervisor (or contact) Position:			
Telephone:	01267 239868 .		
E-mail:			
Name of student(s):	LISA DAVIES		
Duration of Placement:	Oct '18 - May '19	Start Date:	May 2018

Dear Placement Provider

Re: Health and Safety for Work Placements

The University of Wales Trinity Saint David has a duty of care to ensure, so far as is reasonably practicable, the health and safety of our students whilst on placement. We ask for your assistance in meeting this obligation by completing this questionnaire and supplying (if requested), a copy of your health and safety policy and insurance certificates.

I'd be grateful if you would return the documents either by postal mail or email to the contact details below.

If you have any questions or problems, please don't hesitate to get in touch.

Yours sincerely

Tania Davies
Placement Coordinator
Ysgol Chwaraeon, Iechyd ac Addysg Awyr Agored / School of Sport, Health and Outdoor Education
Prifysgol Cymru Y Drindod Dewi Sant / University of Wales Trinity Saint David
Stryd Fawr / High Street
Abertawe / Swansea SA1 1NE
Ffôn / Tel: 01792 481196 (Swansea) Estyniad / Extension: 4195
Ffôn / Tel: 01267 225117 (Carmarthen)
ebost/email: tania.davies@uwtsd.ac.uk

PLACEMENT PROVIDER HEALTH AND SAFETY QUESTIONNAIRE

		Yes	No
1.	Does your organisation have a written health and safety policy? If no, please give reason:	✓	
2.	Do you have a policy regarding health and safety training for people working in your undertaking, including use of vehicles and equipment, and will you provide all necessary health and safety training for our placement student(s)? If no, please give reason:	✓	
3.	Is the organisation registered with:		
	a) The Health and Safety Executive?	✓	
	b) The Local Authority Environmental Health Department?	✓	
	c) The relevant authority in your country (if outside the UK)?	✓	
	d) The relevant National Governing Body Registration number:		
	Last assessment date:	11	
4.	Insurance (UK Placements)		
	a) Is Employer Liability Insurance held?	✓	
	b) Is Public Liability Insurance held?	✓	
	c) Will your insurance cover any liability incurred by a student as a result of attendance at your course/training sessions?		
5.	Insurance (EU/International Placements, i.e. non-UK)		
	a) Will your insurance cover liability for injuries or sickness suffered by placement students attributable to their duties with your organisation?	✓	
	b) Will your insurance cover liability incurred by the student for injuries to other parties (including their co-workers) or property damage arising from their duties with your organisation?	✓	
	c) Will your insurance cover any liability incurred by a student as a result of attendance at your course/training sessions?	✓	
6.	Risk Assessment		
	a) Have you carried out risk assessment of your work practices to identify possible risks, to employees and to others within your undertaking?	✓	
	b) Are there effective control measures in place for the risks?	✓	
	c) Are risk assessments kept under regular review?	✓	
	d) Are the results of risk assessment implemented?	✓	
	e) Will the student be undertaking any higher risk activities? (If Yes, please provide copies of your health & safety policy and insurance certificates when returning this form)	✓	
6.	Accidents and Incidents		
	a) Is there a formal procedure for reporting and recording accidents and incidents (in accordance with RIDDOR in the UK or other country legislation if an international placement)?	✓	
	b) Have you procedures to be followed in the event of serious and imminent danger to people undertaking courses/training?	✓	
	c) Will you report to the University all recorded accidents involving our students?	✓	

APPENDIX PL1B

	d)	Will you report to the University any sickness involving our students which may be attributable to the work?	✓	
7	Contact Personnel			
		Who is your nominated contact for compliance with these requirements of health and safety legislation?		
		Name: <u>Dana Masal</u>		
		Position: <u>Assistant Nurse bank Manager</u>		

CONFIRMATION

I confirm that the preceding information is correct to the best of my knowledge. I confirm also that the student will receive:

- Induction briefing on their first day of attendance.
- Appropriate training and supervision in relation to their placement.

Signed:	<u>Dmasal</u>		
Name in block capitals:	<u>Dana Masal</u>		
Position:	<u>Assistant Nurse bank manager</u>	Date:	<u>19/5/19</u>

Thank you for completing this questionnaire. Please return it as soon as possible to the Placement Coordinator (contact details on page one)

STUDENT PLACEMENT INDUCTION CHECKLIST

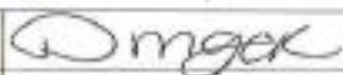
Student Name:	LISA DAVIES
Name of Placement Provider organisation:	NTIS BANK
Placement Site Address:	Prince philip hospital, Llanelli

As a minimum, the topics listed below should be included within the induction that you provide for the student on placement, preferably on their first day. Please check off the subjects as they are covered.

Health & Safety Issues	No	Yes	Date
1. Introduction to key staff members and their roles explained		✓	10/19
2. Location of welfare facilities (e.g. toilets, kitchen, rest room, showers, etc.)		✓	10/19
3. Emergency procedures		✓	10/19
4. Copy of safety policy received or location known		✓	10/19
5. Location of first aid facilities and contact for first aiders		✓	10/19
6. Fire procedures and location of fire-fighting equipment		✓	10/19
7. Accident/incident reporting and location of accident book		✓	10/19
8. Use/control measures for hazardous substances in the workplace (e.g. COSHH) – if applicable		✓	10/19
9. Display Screen Equipment Regulations and associated procedures – if applicable		✓	10/19
10. Manual handling procedures – if applicable		✓	10/19
11. Protective clothing/equipment arrangements – if applicable		✓	10/19
12. Instruction on equipment you will be using (list equipment)		✓	10/19
13. Specific training for tasks to be undertaken		✓	10/19
14. Specific information relating to risk assessments covering tasks to be undertaken		✓	10/19
15. Location of health and safety information and advice		✓	10/19
16. Specific disability related induction issues		✓	10/19
17. Other issues covered/to be covered please state:			

PLACEMENT PROVIDER CONFIRMATION

I confirm that the student has been provided with the induction specified above:

Signed:			
Print Name:	Donna Masol		
Position:	Assistant Nurse bank Manager	Date:	19/3/19

STUDENT CONFIRMATION

I confirm that I have been provided with an appropriate induction as specified above:

Signed:			
Print Name:	LISA ANN DAVIES.		
Position:	HCSW.	Date:	19/3/19

Thank you! Please return the completed checklist to the Placement Organiser within one week of the student starting placement.

Tania Davies
 Cyfarwyddwr/aig y Portfolio Iechyd / Health Portfolio Director
 Ysgol Chwaraeon, Iechyd ac Addysg Awyr Agored / School of Sport, Health and Outdoor Education
 Cyfadran Busnes a Rheolaeth / Faculty of Business and Management
 Prifysgol Cymru Y Drindod Dewi Sant / University of Wales Trinity Saint David
 Stryd Fawr / High Street
 Abertawe / Swansea
 SA1 1NE

Ffôn / Tel: 01792 481196 (Swansea)
 Estyniad/ Extension: 4196
 Ffôn / Tel: 01267 225117 (Carmarthen)
 e-bost/email: tanis.davies@uwtsd.ac.uk

For office use only

PLACEMENT COORDINATOR RECEIPT

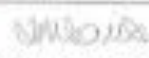
Signed:			
Print Name:			
Position:		Date of receipt:	
Action required?			

PLACEMENT RISK ASSESSMENT

Placement Provider	Student (or student group if risk factors the same)	Start Date	End Date
Company: NHS BANK Location: PPH, Llanelli	Lisa Davies	10/18	5/19
General Control Measures	Yes / No	Actions Necessary?	Action Completed
Has the student received sufficient briefing?	☒ Yes / ☐ No		
Has the student submitted a signed PL1C Student Placement Agreement?	☒ Yes / ☐ No		
Has the placement provider returned a signed PL1A Placement Provider Agreement and PV1B Health and Safety Questionnaire?	☒ Yes / ☐ No		
Has this provider been used before and been reviewed?	Yes ☒ No		
If yes, do any concerns remain unresolved?	Yes / No		
Risk Profiling & Further Actions Required	Risk Profile High, Med, Low	Actions Necessary?	Action Completed
Individual Student Factors - Skills, abilities, pre-existing medical conditions, disability, etc.			
Work Factors - Risks associated with student's expected work activities			
Location and/or Region - Crime, civil disorder, remote working, etc.			
Insurance limitations - Provider has adequate insurance in place to cover student on placement			
General / Environmental Health Factors - Very hot or cold working conditions, inoculations required, etc.			
Travel & Transportation - Commuting to/from work & driving for work purposes			
Safeguarding - Work with children or vulnerable adults			
Conclusion	Yes / No	Action Necessary?	Action Completed
Is a site safety visit required before placement is approved?	Yes / No		
Are risks acceptable / tolerable such that the placement can be approved?	Yes / No		

PLACEMENT APPROVAL

I approve this placement.

Signed:			
Name in block capitals:	TANIA DAVIES		
Position:	PROGRAMME DIRECTOR	Date:	

POST-PLACEMENT REVIEW AND FEEDBACK

Dear Participant

Many thanks for your involvement in the work placement. I hope that the experience was a valuable and rewarding one, whether you were a Placement Provider, Student or Placement Tutor. The University of Wales Trinity Saint David reviews the provision annually for enhancement purposes and so we would be pleased to hear your feedback on any aspect of the placement.

If you wish to participate, please use this form to record your views. I'd be grateful if you would return the form either in person, by postal mail or email to the contact details below.

Yours sincerely



Tania Davies
Placement Coordinator
Ysgol Chwareeon, Iechyd ac Addysg Awyr Agored / School of Sport, Health and Outdoor Education
Prifysgol Cymru Y Drindod Dewi Sant / University of Wales Trinity Saint David
Stryd Fawr / High Street
Abertawe / Swansea SA1 1NE
Ffôn / Tel: 01792 481196 (Swansea)
Estyniad / Extension: 4196
Ffôn / Tel: 01267 225117 (Carmarthen)
ebost/email: tania.davies@uwtsd.ac.uk

Name of provider's organisation:	NTIS BANK .
Name of student:	LISA DAVIES.
What were the positive aspects?	
As currently working as a HCSW I was able to carry out all tasks such as, observations, blood pressures, temperature, blood glucose etc. as I am already trained. I felt comfortable and confident in my working environment as it was a familiar setting to me, and I knew where everything was which was a positive advantage.	
Were there any problems?	
I didn't encounter any problems but if I had I knew who was in charge that could help me.	

APPENDIX PL1G

Do you have any recommendations for enhancement for the future?			
I do not have any recommendations, I was very happy within my position, everyone working there is very helpful and understanding.			
Signed:	L.A. Davies		
Name in block capitals:	LISA ANN DAVIES		
Position (please tick one):	☐ Placement Provider ☒ Student ☐ Placement Tutor	Date:	May 3 rd 2019

Thank you for completing this questionnaire. Please return it as soon as possible to the Placement Coordinator.

Certificates

Below are attached all my certificated from GCSE's to current courses within my role as a HCSW. I was pleased with my GCSE results at sixteen and wanted to follow my passion in working with children, from here I attended Ammanford College and took the Children's Care Learning and Development Level 3 course which I passed with an MPP. Looking back, I felt that I could have done better in that course. After working in schools and nurseries, here my focus changed, and I wanted to explore adult care. I landed a job as a home carer which ranged from looking after adults with special needs on day trips to the personal care role. I thoroughly enjoyed this role and felt I was ready to start an apprenticeship scheme carrying out a level two in Adult Social Care whilst working. After gaining that qualification I felt I had more to offer and was ready to expand my knowledge within the NHS hospital setting. After failing two interviews in Prince Phillip Hospital, I was successful with my third which landed me working on Dewi ward in Glangwili Hospital. I undertook three weeks training in January 2016 before starting and was under supervision with a mentor for the first two weeks on the ward. When my mentor thought I was ready to work independently I was signed off and ready to work. Within my role I attended a dementia awareness course in order to improve our communication and understanding of those with dementia, I undertook a blood glucose monitoring course which allowed me to carry out blood glucose levels on patient as the ward was medical and diabetic.



TYSTYSGRIF GYFFREDINOL ADDYSG UWCHRADD
GENERAL CERTIFICATE OF SECONDARY EDUCATION

Arholiad Mehefin 2010 June Examination

*Hyn sydd i dystio bod
This is to certify that*

LISA ANN DAVIES

AMMAN VALLEY SCHOOL, AMMANFORD

*wedi cyrraedd y safonau a nodir yn y testunau a ganlyn:
obtained the ten results shown in the following subjects:*

100/0910/3	CELF A DYLUNIO	ART & DESIGN	A*(a*)
100/2002/0	SAESNEG	ENGLISH	B(b)
100/0918/8	ECON. Y CARTREF (DATB. PLENTYN)	HOME ECON (CHILD DEVELOPMENT)	B(b)
100/0914/0	DRAMA	DRAMA	C(c)
100/2003/2	LLENYDDIAETH SAESNEG	ENGLISH LITERATURE	C(c)
100/6435/7	MATHEMATEG	MATHEMATICS	C(c)
100/2901/1	CYMRAEG AIL IAITH	WELSH SECOND LANGUAGE	C(c)
100/5814/X	GWYDDONIAETH YCHWANEGOL	ADDITIONAL SCIENCE	D(d)

TGAU(CWRS BYR)/GCSE(SHORT COURSE)			
100/0906/1	TECH.GWYBODAETH A CHYFATHREBU	INFORMATION & COMMUNICATION TEC	D(d)
100/0909/7	ASTUDIAETHAU CREFYDDOL	RELIGIOUS STUDIES	C(c)

AD Hampton

CADEIRYDD, CBAC
CHAIRMAN, WJEC

[Signature]

CADEIRYDD, Pwyllgor Arholiadau
CHAIRMAN, Examinations Committee

[Signature]

PRIF WEITHREDWR, CBAC
CHIEF EXECUTIVE, WJEC



08582 160194



Llywodraeth Cynulliad Cymru
Welsh Assembly Government



Rewarding Learning

Ofqual

Office of
Qualifications
and Examinations
Regulation



68209 10007997



TYSTYSGRIF GYFFREDINOL ADDYSG UWCHRADD
GENERAL CERTIFICATE OF SECONDARY EDUCATION

Arholiad Mehefin 2009 June Examination

Hyn sydd i dystio bod
This is to certify that

LISA ANN DAVIES

AMMAN VALLEY SCHOOL, AMMANFORD

wedi cyrraedd y safon(au) a nodir yn y testun(au) a ganlyn:
obtained the result(s) shown in the following one subject(s)

100/5813/8 GWYDDONIAETH SCIENCE C(c)

AD Hampton

CADEIRYDD, CBAC
CHAIRMAN, WJEC

[Signature]

CADEIRYDD, Pwyllgor Arholiadau
CHAIRMAN, Examinations Committee

[Signature]

PRIF WEITHREDWR, CBAC
CHIEF EXECUTIVE, WJEC



08502

160194



Uywodaeth Cynulliad Cymru
Welsh Assembly Government



Rewarding Learning



Qualifications and
Curriculum Authority



68209 : 09008355

Edexcel Level 3 BTEC National Diploma



in CHILDREN'S CARE, LEARNING AND DEVELOPMENT
WITH THE TRIPLE GRADE MERIT PASS PASS
is awarded to

LISA ANN DAVIES

who has completed an approved programme at
COLEG SIR GAR

AWARDED : JUNE 2012

THIS DOCUMENT CONSISTS OF MORE THAN ONE PAGE

68260C:R7085 :C606594: 000500222:16:01:94:ISSUED 08-JUL-2012 : QAN 500/1812/7



Isabel Sutcliffe

Isabel Sutcliffe
Responsible Officer
Pearson Education



PGS00544351 971

ALWAYS LEARNING

PEARSON



Notification of Performance

C606594 LISA ANN DAVIES

EDEXCEL LEVEL 3 BTEC NATIONAL DIPLOMA
in CHILDREN'S CARE, LEARNING AND DEVELOPMENT

QCA CODE	TITLE	VALUE	LEVEL	GRADE

COLEG SIR GAR				
H/500/4965	POSITIVE RELATIONSHIPS FOR CHILDREN'S CARE, LEARNING AND DEVELOPMENT	6.0	3	PASS
K/500/4966	POSITIVE ENVIRONMENTS FOR CHILDREN'S CARE, LEARNING AND DEVELOPMENT	6.0	3	MERIT
M/500/4967	PROMOTING CHILDREN'S DEVELOPMENT	12.0	3	PASS
T/500/4971	REFLECTING ON AND DEVELOPING PRACTICE FOR CHILDREN AGED 0-8	12.0	3	PASS
T/500/4968	SAFEGUARDING CHILDREN	6.0	3	PASS
A/500/4972	PROMOTING CHILDREN'S RIGHTS	6.0	3	PASS
F/500/4973	CHILDREN'S LEARNING ACTIVITIES AND PLAY	9.0	3	MERIT
J/500/4974	RESEARCH METHODOLOGY FOR CHILDREN'S CARE, LEARNING AND DEVELOPMENT	9.0	3	PASS
Y/500/4980	PSYCHOLOGICAL PERSPECTIVES ON CHILDREN'S BEHAVIOUR	9.0	3	PASS
K/500/4983	SUPPORTING CHILDREN'S NUMERACY SKILLS	6.0	3	PASS
M/500/4984	SUPPORTING CHILDREN'S LITERACY SKILLS	6.0	3	PASS
T/500/4985	SUPPORTING CHILDREN'S INFORMATION AND COMMUNICATION TECHNOLOGY SKILLS	3.0	3	PASS
A/500/4986	DESIGN AND TECHNOLOGY FOR THE EARLY YEARS PRACTITIONER	6.0	3	DISTINCTION
J/500/4991	MODERN BELIEFS AND RELIGIONS FOR THE EARLY YEARS PRACTITIONER	6.0	3	PASS

(CONTINUED ON NEXT PAGE)



Isabel Sutcliffe

Isabel Sutcliffe
Responsible Officer
Pearson Education



BUP00594941 302

ALWAYS LEARNING

PEARSON



Notification of Performance

C606594 LISA ANN DAVIES

EDEXCEL LEVEL 3 BTEC NATIONAL DIPLOMA
in CHILDREN'S CARE, LEARNING AND DEVELOPMENT

QCA CODE	TITLE	VALUE	LEVEL	GRADE
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(CONTINUED FROM PREVIOUS PAGE)

R/500/4993	MEETING ADDITIONAL REQUIREMENTS FOR CHILDREN'S CARE, LEARNING AND DEVELOPMENT	6.0	3	PASS
------------	---	-----	---	------

THE LEARNER HAS QUALIFIED FOR THE ABOVE AWARD WITH
THE TRIPLE GRADE MERIT PASS PASS IN JUNE 2012

68260C : R7085 : 16:01:94 : ISSUED 08-JUL-2012 : QAN 500/1812/7



Isabel Sutcliffe

Isabel Sutcliffe
Responsible Officer
Pearson Education

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BUF00594942 009

ALWAYS LEARNING

PEARSON



SGILIAU HANFODOL CYMRU ESSENTIAL SKILLS WALES

MAI/MAY 2012

*Hyn sydd i dystio bod
This is to certify that*

LISA ANN DAVIES

COLEG SIR GAR GRAIG CAMPUS

*wedi cwblhau'r canlynol yn llwyddiannus ar y lefel(au) a nodir:
has successfully completed the following at the level(s) indicated:*

50068507 CYMHWYSO RHIF /
APPLICATION OF NUMBER

LEFEL 2/LEVEL 2

M. R. Barnett

M. R. Barnett
CADEIRYDD, CBAC
CHAIRMAN, WJEC

N. Foden

N. Foden
CADEIRYDD, Pwyllgor Arholiadau
CHAIRMAN, Examinations Committee

G. E. Pierce

G. E. Pierce
PRIF WEITHREDWR, CBAC
CHIEF EXECUTIVE, WJEC



Llywodraeth Cymru
Welsh Government



Accreditation



For more information see <http://regulate.ofqual.gov.uk>



68250 68581 160194

19/10/12

682500108581T



SGILIAU ALLWEDDOL / KEY SKILLS MAI/MAY 2012

*Hyn sydd i dystio bod
This is to certify that*

LISA ANN DAVIES

COLEG SIR GAR

*wedi cwblhau'r canlynol yn llwyddiannus ar y lefel(au) a nodir:
has successfully completed the following at the level(s) indicated:*

10038395	GWEITHIO GYDAG ERAILL / WORKING WITH OTHERS	LEFEL 3/LEVEL 3
10038310	GWELLA DYSGU A PHERFFORMIAD / IMPROVING LEARNING & PERFORMANCE	LEFEL 3/LEVEL 3
10038358	DATRYN PROBLEMAU / PROBLEM SOLVING	LEFEL 3/LEVEL 3

M. R. Barnett

M. R. Barnett
CADEIRYDD, CBAC
CHAIRMAN, WJEC



Llywodraeth Cymru
Welsh Government

N. Foden

N. Foden
CADEIRYDD, Pwyllgor Arholiadau
CHAIRMAN, Examinations Committee



G. E. Pierce

G. E. Pierce
PRIF WEITHREDWR, CBAC
CHIEF EXECUTIVE, WJEC

Regulated by



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68210 68581 160194

19/10/12

682100108581T



**CYMHWYSTER BAGLORIAETH CYMRU
WELSH BACCALAUREATE QUALIFICATION**

Haf 2012 Summer

*Hyn sydd i dystio bod
This is to certify that*

LISA ANN DAVIES

COLEG SIR GAR GRAIG CAMPUS, LLANELLI

*wedi cyrraedd y safon a nodir yn y cymhwyster a ganlyn:
obtained the result shown in the following qualification:*

50018048

Lefel 3 Diploma Uwch Bagloriaeth Cymru

Level 3 Welsh Baccalaureate Advanced Diploma

M. R. Barnett

M. R. Barnett
CADEIRYDD, CBAC
CHAIRMAN, WJEC

N. Foden

N. Foden
CADEIRYDD, Pwyllgor Arholiadau
CHAIRMAN, Examinations Committee



Llywodraeth Cymru
Welsh Government

G. E. Pierce

G. E. Pierce
PRIF WEITHREDWR, CBAC
CHIEF EXECUTIVE, WJEC



68250 / 58581 160194



6825001085811



SGILIAU HANFODOL CYMRU ESSENTIAL SKILLS WALES

MAI/MAY 2012

*Hyn sydd i dystio bod
This is to certify that*

LISA ANN DAVIES

COLEG SIR GAR

*wedi cwblhau'r canlynol yn llwyddiannus ar y lefel(au) a nodir:
has successfully completed the following at the level(s) indicated:*

50068441	CYFATHREBU / COMMUNICATION	LEFEL 3/LEVEL 3
50068477	TECHNOLEG GWYBOD. A CHYF / INFO. AND COMMUNICATION TECHNOLOGY	LEFEL 3/LEVEL 3

M. R. Barnett

M. R. Barnett
CADEIRYDD, CBAC
CHAIRMAN, WJEC



Llywodraeth Cymru
Welsh Government

N. Foden

N. Foden
CADEIRYDD, Pwyllgor Arholiadau
CHAIRMAN, Examinations Committee



Accreditation

G. E. Pierce

G. E. Pierce
PRIF WEITHREDWR, CBAC
CHIEF EXECUTIVE, WJEC

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68210 68581 160194

19/10/12

682100108581T

Hyn sydd i dystio bod / This is to certify that

Lisa Ann Davies

wedi cyflawni / has achieved

1 Credyd ar Lefel Un / Credit at Level One

ar gwrs o'r enw / on a course entitled

Themâu Cymraeg / Welsh Themes

a ddarparwyd gan / provided by

Coleg Sir Gar

Teitl yr Uned Unit Title	Côd Uned Unit Code	Credyd(au) Credit(s)	Lefel Level
Defnyddio'r Gymraeg gyda Phlant - Adrodd stori	FN31CY597	1	Un / One



Janet Barlow
PRIF WEITHREDWR / CHIEF EXECUTIVE
AGORED CYMRU



Rhif y Dystysgrif/Certificate Number: 5525359 (1)

Dyddiad Cyflwyno/Issue Date: 15/01/2013

RhUD/UJLN: 5897049245

Hyn sydd i dystio bod / This is to certify that

Lisa Ann Davies

wedi cyflawni / has achieved

1 Credyd ar Lefel Dau / Credit at Level Two

ar gwrs o'r enw / on a course entitled

Using Welsh

a ddarparwyd gan / provided by

Coleg Sir Gar

Unedau a gyflawnwyd / Units achieved

Teitl yr Uned Unit Title	Côd Uned Unit Code	Credyd(au) Credit(s)	Lefel Level
Siaradwyr Cymraeg fel Ail Iaith: Defnyddio'r Gymraeg gyda Phlant - Themâu a Gweithgareddau	FN32CY528	1	Dau / Two



Janet Barlow
PRIF WEITHREDWR | CHIEF EXECUTIVE
AGORED CYMRU





Llywodraeth Cymru
Welsh Government

www.cymru.gov.uk

Dyfernir y dystysgrif hon i • This certificate is awarded to

LISA ANN DAVIES

sydd wedi llwyddo i gwblhau **Prentisiaeth Sylfaen Lefel 2** mewn
who has successfully completed the **Level 2 Foundation Apprenticeship** in

Gofal Cymdeithasol (Oedolion)

Social Care (Adults)

Sector prentisiaeth ar gyfer swyddi ym maes gofal iechyd a gofal plant a phobl ifanc.

Apprenticeship sector for occupations in social care and the care of children and young people.

Dyddiad cyflawni • Completion date
28 Gorffennaf 2015 • 28 July 2015

Cadeirydd • Chairman

Ffederasiwn Sgiliau a Safonau'r Sector Diwydiant • Federation for Industry Sector Skills & Standards

Rhif y Dystysgrif • Certificate Number : **ACW00BD3C**



Federation for
Industry Sector
Skills & Standards



CERTIFICATE OF UNIT CREDIT TOWARDS

Level 2 Diploma in Health and Social Care (Adults) for Wales and Northern Ireland

is awarded to
Lisa Ann Davies

who attended
T2 Business Solutions

and was successful in the following 17 modules

Level 2 Introduction to communication in health, social care or children's and young people's settings (3 Credits)	F/601/5465	Pass
Level 2 Introduction to personal development in health, social care or children's and young people's settings (3 Credits)	L/601/5470	Pass
Level 2 Introduction to equality and inclusion in health, social care or children's and young people's settings (2 Credits)	R/601/5471	Pass
Level 2 Introduction to duty of care in health, social care or children's and young people's settings (1 Credit)	H/601/5474	Pass
Level 2 Principles of safeguarding and protection in health and social care (3 Credits)	A/601/8574	Pass
Level 2 The role of the health and social care worker (2 Credits)	J/601/8576	Pass
Level 2 Implement person centred approaches in health and social care (5 Credits)	A/601/8140	Pass
Level 2 Contribute to health and safety in health and social care (4 credits)	R/601/8922	Pass
Level 2 Handle information in health and social care settings (1 Credit)	J/601/8142	Pass

continued

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Awarded 14 July 2015

140715/4222-22/072901/GLH7087/F/16/01/94
5897049245
5501456711/690



Sir John Armitt, CBE FREng FCGI
Chairman
The City and Guilds of London Institute



Chris Jones
Director-General
The City and Guilds of London Institute



Llywodraeth Cymru
Welsh Government



The City and Guilds of London Institute founded 1878 and incorporated by Royal Charter 1900.
The City & Guilds Group comprises City & Guilds and ILM.



CERTIFICATE OF UNIT CREDIT TOWARDS

Level 2 Diploma in Health and Social Care (Adults) for Wales and Northern Ireland

is awarded to
Lisa Ann Davies

continuation

Level 2 Support individuals to eat and drink (2 Credits)	M/601/8054	Pass
Level 2 Support individuals to meet personal care needs (2 Credits)	F/601/8060	Pass
Level 2 Move and position individuals in accordance with their plan of care (4 Credits)	J/601/8027	Pass
Level 2 Meet food safety requirements when providing food and drink for individuals (2 Credits)	T/601/9450	Pass
Level 2 Introductory awareness of sensory loss SS MU2.1 (2 Credits)	F/601/3442	Pass
Level 2 The principles of infection prevention and control (3 Credits)	U/501/6737	Pass
Level 2 Causes and spread of infection (2 Credits)	H/501/7103	Pass
Level 3 Administer medication to individuals and monitor the effects (5 Credits)	Y/501/0598	Pass

Awarded 14 July 2015

140715/4222-22/072901/GLH7087/F/16/01/94
5897049245
5501456711/690

John Armitt

Sir John Armitt, CBE FREng FCGI
Chairman
The City and Guilds of London Institute

Chris Jones

Chris Jones
Director-General
The City and Guilds of London Institute

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Llywodraeth Cymru
Welsh Government



The City and Guilds of London Institute founded 1878 and incorporated by Royal Charter 1900.
The City & Guilds Group comprises City & Guilds and ILM.





Crown Training Academy

This is to certify that

Lisa Davies

Has been awarded

By order of the Chief Executives Command by successful completion of a programme of training which concluded with an end of course assessment. This training complies with Health and Safety Executive First Aid at Work Regulations 1981, HSE Approved Training (67/07)

The Award of:

HSE Emergency First Aid at Work

Dated this

25th January 2012

Valid for 3 Years

**Mr Justin Honey-Jones
Principal & Chief Executive**



Crown Training Academy T: 01792 561273 W: www.crowntrainingacademy.co.uk

This is to certify that

Lisa Davies

Has been awarded the

Level 2 Award in Food Safety in Catering
500/5480/6

PASS

Date of Award
05 July 2012



Christopher Suter
Director of Qualifications

TRAINING CERTIFICATE

This certificate is awarded to

Lisa Davies

On Completion of Operator Training on the

StatStrip® Glucose Meter


Trainer Signature

9/6/18
Date

nova
biomedical

Behaviours that Challenge & Dementia Awareness Course



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Martin Morris
Trish Morris-Collins
R Moulson

PAMOVA
DEPARTMENT
Prevention &
Management of
Violence and
Aggression

2017

Certificate of Completion

is Presented to:

Lisa Davies

Date completed:

13/12/17

Signed:

[Signature]

PAMOVA Instructor

[Signature]

PAMOVA Instructor

PAMOVA Instructors – M Morris. T Morris-Collins. R Moulson



Lisa Davies 16/01/1994

Ammanford, Carmarthenshire

07746648321

lisadavies_@hotmail.co.uk

I have spent the past seven years in caring for both adults and children. For the past three I have been employed by the NHS as a health care support worker, I worked full time in Glangwili Hospital on Dewi ward and am currently working on the BANK for Hywell Dda Health Board as I am studying Nursing Studies and Health in University of Wales Trinity St David full time.

My current HCSW job involves caring and improving the health needs and wellbeing of the Hywel Dda population. I focus on the delivery of excellent quality health and social care and I am a valuable member of the team to improve the clinical environment to support efficient and quality services so we can be recognized as Wales' leading health care system. I have a range of skills that I have learnt over the years that I use every day in my job such as assessing patients and their breathing, monitoring heart rate, manual blood pressure and recording body temperature.

When carrying out observations I use my initiative to know what needs to be done for that patient whilst also communicating with the staff nurse to pass on sometimes critical information. I am a critical thinker, I pay attention to detail at all times and keep accurate and precise records of patients and following patient care plans. It is extremely important to use my listening skills for effective updates or any changes in patient care or social issues. Whilst working with patients I am always studying their behavior and any changes that occur I know to communicate these to the staff nurse for the patient's wellbeing. This is important when working as part of a team so all information is handed over to other staff for shifts to run smoothly and efficiently. I am a responsible individual that can be relied

on to work independently and as part of a team. I am used to working in a pressured environment, using my time management skills and knowing to priorities, meeting tight deadlines and being flexible to change that may occur.

Due to staff shortages we often reevaluate the ward and knowing the health and safety of patients and following policies and procedures. In my current role as a HCSW it has increased my interest in the nursing profession and has given me the drive to want to do my nursing degree to expand my knowledge, learn and further develop.

I use excellent rapport and interpersonal skills and am well liked by patients and colleagues. I've been described as a bright and gregarious, with a keen sense of banter and humor which helps be build professional relationships. I am a strong person and I work with a large number of elderly and frail patients so seeing death is more frequent. With my own personal experiences I can relate, understand and support families suffering with grief and loss by being helpful, empathetic and sensitive to the situation. Working so closely with patients and families I understand the importance of confidentiality in the workplace.

My initial interest started working with children whilst in school and college before I decided to further expand my knowledge and skills into adult care. I worked as a home carer for a private company caring for vulnerable adults and gained my level 2 in health and social care. It was working as a home carer that I felt very passionate about caring and changing the lives of vulnerable adults.

I am a friendly, polite and hardworking individual who is ambitious, self-motivated and determined to succeed. I have gained a wide range of skills that I use on a daily basis. I am a valuable team player, responsible and will be at the first point of patient contact. I take frequent observations and carry out glucose and ketone levels on patients, treating them with upmost dignity and respect whilst encouraging and promoting independence. I understand the importance of excellent communication with both patients and nurses for the best possible outcome of care at all times.

I feel I have developed as an individual and am able to mix with many different people from all walks of life. I'm very passionate about my job and the challenges it brings. I feel that I am more than ready to begin my nursing degree and challenge myself further, learning and developing incorporating all the skills I have already developed.

Education

- UWTSD (2018 – Present)

Nursing Studies and Health – Level 4 Grade Pending

- Welsh Government Apprenticeship (07/2014 - 07/2015)

Apprenticeships (Level 2) Social Care (Adults)

- Coleg Sir Gar - Ammanford Campus (09/2010 - 06/2012, FT)

BTEC Diploma - 200+ hours unpaid work / placements

Children's Care, Learning and Development / Merit, Pass, Pass 06/2012
BTEC L3 (17 modules)

Essential Skills Wales

- Application of Number / Pass 05/2012 WJEC L3
- Communication / Pass 05/2012 WJEC L3
- Information & Communication Technology / Pass 05/2012 WJEC L3
- Information & Communication Technology / Pass 05/2012 WJEC L3

Key Skills

- Improving Own Learning & Performance / Pass 05/2012 WJEC L3
- Problem Solving / Pass 05/2012 WJEC L3

- Working with Others / Pass 05/2012 WJEC L3

Welsh Baccalaureate

- Advanced Diploma (pre 2014) Welsh Baccalaureate Advanced Diploma
(pre 201 Level 3 06/2012 WJEC

- Ysgol Dyffryn Amman (68209, 09/2005 - 05/2010, FT)

GCSE (Grade: A*-G)

Additional Science D

Art & Design A*

Drama C

English B

English Literature C

Home Economics: Child Development B

Information & Communication Technology D

Mathematics C

Religious Studies C

Science C

Welsh Second Language C

Employment

Hywel Dda Health Board - Glangwili

Address: Dolgwilli Road, Carmarthen SA31 2AF

Nature of work: Health Care Support Worker

From January 2016 to present, full-time

Helping Hands

Address: 18 Russell Street, Llanelli SA15 1BH

Nature of work: Home Carer

From September 2013 to December 2015, full-time

Cwtch Cynnes

Address: 15 Caerbryn Road, Llanelli SA14 7PH

Nature of work: Nursery Nurse

From June 2012 to May 2013, full-time

Home Bargains

Address: 30 Quay Street, Ammanford SA18 3BS

Nature of work: Sales Assistant

From June 2010 to May 2013, part-time

The Role of a HCSW

A health care support worker (HCSW) has a highly important role of assisting registered nurses, doctors, midwives, therapists and other health care professionals to deliver high-quality person-centred care to patients (NHS Scotland, 2019). HCSW's have the awareness and ability to address the basic care needs of a patient under the direction and supervision of higher healthcare professionals and have the responsibility to undertake certain job roles within the hospital setting such as washing or assist washing and dressing patients, toileting, mobilising or repositioning patients depending on mobility status, assist with feeding, talking and making patients feel comfortable, monitoring a patient's condition by doing observations e.g. temperature, pulse, heart rate, respirations, blood glucose and weight, making beds and the upkeep on cleaning around bedsides (Health Careers, 2019). HCSW's within a GP surgery may undertake different roles such as restocking consulting rooms, basic health checks, sterilising equipment, taking and processing blood samples and take part in health promotion or health education work (Health Careers, 2019).

Skills desirable to undertake a HCSW role would be having compassion and understanding, caring and kind, cheerful and friendly, able to be hands on with patients and personal care tasks, follow instructions and listen, work independently and part of a team, using own initiative, communication, organisation and observational skills (UK Care Guide, 2013).

Email from Mentor

Email from
mentor who
signed me off
training

(No subject)

RT

Rhian Thomas <rhith24@gmail.com>

Mon 22/04/2019 17:39

You

↩ ↶ → ...

Hello I am staff nurse who worked with Lisa for roughly 18 months. I was Lisa's sign off mentor when she started on Dewi ward which was a medical/diabetic ward . I assessed her for the band 2 Healthcare support worker competence booklet. I had to assess Lisa with different tasks such as doing observations numerous times, how she communicated with patients at different times and her work/communication with colleagues. Whilst doing this it was nice to see how Lisa developed her skills and how well she communicated with patients and relatives and the rapport she built with them. I was happy to sign Lisa off her booklet and I wish all the best with her work and I feel that she will be a excellent nurse.

Staff Nurse

Rhian Thomas.

Regards.
NMC Pin 12G0274W

Example Work Charts

Below are attached documents of charts that each patient would have in their personal end of bed file that must be carried out by all nurses and HCSW's caring for that patient. Included are, observation chart, intentional rounding chart, blood glucose monitoring chart, daily input – output chart, food record chart and Bristol stool chart. They are important legal documents and under no circumstances should be missed. I have filled out these charts to the best of my ability on a patient that I cared for on that day to give an example of how information should be correctly recorded. Obvious things have been left out on the charts, for example, I have not included names and referred to the patient as 'patient 1', D.O.B or wards for confidentiality reasons. Usually the nurse would then counter sign what the HCSW's have written but on this occasion was unable to do so.

- Observation chart = An observation chart is also known as modified early warning scores (MEWS), these are used throughout the NHS for assessment of unwell patients. A MEWS charts records simple observations which highlights a patient's condition and if they require further observations. These observations can reduce fatal outcomes from early detection. A MEWS observation should be recorded at an initial assessment for unwell patients and when given instructions from a doctor may need to be checked on an hourly to four hourly bases or as part of a morning routine where the patient's medical condition dictates their heart rate, respiratory rate, blood pressure, level of consciousness and temperature (NHS, 2011). When monitoring a patient's condition, nurses need to act or be alerted if a the patients respiratory rate is 15 or above or below 8 breaths per

minute, the systolic blood pressure is below 80mmHg, diastolic blood pressure higher than 110, the heart rate is higher than 101 or lower than 50 and the patient is not fully alert and orientated (NHS, 2011). It is protocol when taking a patient's pulse to do this manually as machines will not detect volume or rhythm. Normal heart rate is between 60-100 beats per minute, Normal respiratory rate is between 12-18 breaths per minute, normal oxygen saturation above 90% taking into consideration medical history and blood pressure systolic 100-160mmHg, diastolic 60-85mmHg (NHS, 2011).

- Intentional Rounding chart = An intentional rounding/skin care bundle chart is filled out after a patient is risk assessed on their mobility and self-care level, then it is determined how often and intentional rounding chart should be filled in by registered nurses and HCSW who interact with that patient throughout the day as their condition may alter (NHS, 2012). Patients that score medium to high on the risk assessment will be monitored following skin/surface checks which ensures the patient has the correct mattress and seating cushion in line with the BCU HB guidelines (if needed), checking pressure relieving equipment is not faulty when repositioning, do not use multiple layers under skin surface, for example, incontinence pads, ensure sheets are flat and not wrinkled under the skin and the patient isn't laying on and equipment (NHS, 2012). An at-risk patient will be kept moving and repositioned in accordance with the BCU HB guidelines, all deterioration of the skin MUST be reported to nurse in charge to re-evaluate prevention strategies and all patients will be encouraged to mobilize to their ability (NHS, 2012). If a patient is incontinent staff would offer assistance with toileting according to the individual's needs, if incontinence pads are used by the patients to make sure they are clean, dry and fit the patient and do not use oil-based creams with continence products

(NHS, 2012). When it comes to personal hygiene the patient will be offered assistance unless they are immobile where then they would be asked for permission to carry out personal hygiene needs (NHS, 2012). Nutrition and hydration is important and will be documented on this chart to keep record if they are offered, have drink within reach or are nil by mouth (NHS, 2012).

- Bristol Stool Chart = Health care professionals use the Bristol stool chart to classify the type of stool pass, which helps assess how long the stool has spent in the bowel. A photo of different types of stools with their type number and short description are clearly displayed on all forms and date, times, consistency, description and volume are all monitored (Bladder and Bowel, 2016). Type one has spent the longest time in the bowel while further down the chart to type 7 as spent the least time (Bladder and Bowel, 2016). A normal stool type should be type 3 or 4 also depending on the individual's bowel habits, could be passed once every day or up to three days (Bladder and Bowel, 2016).
- Food Diary Chart = All Wales Food Record Charts are used to monitor a patient's eating and drinking habits and to ensure they are getting the correct nutrition and recommended daily amount (NHS, 2008). The food record chart consists of breakfast, mid-morning snacks, lunch, mid-afternoon snacks, dinner and supper which in each section the food/nutritional supplements/nourishing drinks offered/ special diets e.g. pureed, portion size and amount eaten is documented (NHS, 2008). The food record chart is an accurate used by health care professionals as it is highly reliable when filled out correctly. Although 'Guesstimates' by health care professionals are often relied upon to determine individual nutritional intakes, and this has been deemed to be inadequate and raising concerns as to the usefulness of

documented information. (Bartkowiak, Jones and Bannerman, 2015).

- Blood Glucose Monitoring = All staff must be trained when performing blood glucose monitoring on a patient in both the theoretical and practical aspects, including the use of the glucose measuring device and instruction of quality control (NHS, 2019). A normal blood glucose level is between approximately 4-7mmol/L, if range is lower than four or alarmingly higher than seven e.g. seventeen (depending on individual) action must be taken to stabilize that patient (NHS, 2019). A patient's hands must be washed prior to checking their blood glucose levels for accurate readings (NHS, 2019). Staff must record the date and time the test was carried out and the result given by the monitor which gives them a clear record of previous and current levels (NHS, 2019).
- Daily Intake-Output Chart = Daily intake- output charts monitor a patient's daily fluid intake normally within a 24-hour timescale and their output amount (Salleh, 2017). A patient's intake can consist of intravenous/enteral fluids and oral and the output can consist of urine, gastric, wound drainage and bowel (Salleh, 2017). All are measured accordingly and totaled up at the end for final plus or minus fluid balance (Salleh, 2017). If urine output needs to be monitored closely and perhaps hourly, often catheters are inserted for more accurate/precise readings (Salleh, 2017).

Patient identification label		Frequency of Observations – minimum frequency unless otherwise stated		Hospital : GCH	Chart Number:	 Bwrdd Iechyd Prifysgol Hywel Dda University Health Board	
Patient 1		ED/ACDU/CDU	Minimum of 4 hourly	Ward	Date & Time of admission/transfer		
		In-pt wards	Minimum of 12 hourly				
		Mental Health	Minimum of weekly				
		Community	Minimum of daily			Special Instructions:	
Year (2014)		DD/MM	2014/2014				
Use 24 hour clock		Time	10:00				
Frequency of Observations		Hours	4				
Respiratory Rate		≥25	3			3	
Observe respirations for one full minute		21-24	2	22		2	
		12-20	0	18		0	
		9-11	1			1	
		≤8	3			3	
Oxygen therapy (Record as litres)		Any O ₂	2	2		2	
O ₂ device used (see key)			0	NC		0	
Oxygen Saturation (record as %)		≥96	0	96		0	
		94-95	1			1	
		92-93	2			2	
		≤91	3			3	
		Pulse	≥161	3			3
Palpate radial pulse for one full minute		151-160	3			3	
		141-150	3			3	
		131-140	3			3	
		121-130	2			2	
		111-120	2			2	
		101-110	1			1	
		91-100	1			1	
		81-90	0			0	
		71-80	0			0	
		61-70	0			0	
		51-60	0			0	
		41-50	1			1	
		31-40	3			3	
		≤30	3			3	
Blood Pressure (record systolic and diastolic readings in relevant boxes)		≥220	3			3	
Note: measure BP manually if any of the following present: • Muscle tremors • Weak pulse • Abnormal heart rhythms • Excessive sweating • Hyper/hypotension		211-219	0			0	
		201-210	0			0	
		191-200	0			0	
		181-190	0			0	
		171-180	0			0	
		161-170	0			0	
		151-160	0			0	
		141-150	0			0	
		101-110	1			1	
		91-100	2			2	
NB: only score systolic reading		81-90	3			3	
		71-80	3			3	
		61-70	3			3	
		51-60	3			3	
		41-50	3			3	
Level of Conscious (AVPU)		Alert	0	0		0	
		Voice	3			3	
		Pain	3			3	
		Unresponsive	3			3	
		New worsening confusion	3			3	
Temperature		≥39.1	2			2	
		38.1-39	1	38.1		1	
		37.1 - 38	0			0	
		36.1 - 37	0	36.4		0	
		35.1-36	1			1	
		≤35	3			3	
Total NEWS score			6				
Urine passed= U Bowels opened= B				U/B			
Pain - Abbey(A) Nil(0) Mild(1) Moderate(2) Severe(3)			0	0			
Nausea = N Vomiting = V							
Action Required by Registered Nurse for NEWS 3 or more – To be completed for new news score of 3 or more and thereafter at least once a shift.							
Signs of new infection under 6 weeks post chemotherapy Y/N (if yes use sepsis bundle)							
Document Blood Glucose							
Increase Monitoring Frequency Y/N							
Start/Review fluid balance chart Y/N							
On Opiates - consider & document sedation score (refer to screening tool)							
Dr informed Y/N (if yes – complete SBAR)							
Glasgow Coma Scale							
Pupil size in mm	8 ●	Eye opening	Spontaneous	4			4
			To speech	3			3
			To pain	2			2
	7 ●	Verbal	Nil	1			1
			Orientated	5			5
			Confused conversation	4			4
			Inappropriate words	3			3
	6 ●	Motor	Incomprehensible sounds	2			2
			Nil	1			1
			Obeys commands	6			6
			Localise pain	5			5
	5 ●		Withdrawal to pain	4			4
			Flexion to pain	3			3
			Extension to pain	2			2
Nil			1			1	
4 ●		Total					
		Right	Size				
		Reaction					
		Left	Size				
3 ●		Reaction					
		Size					
		Reaction					
		Size					
2 ●		Reaction					
		Size					
		Reaction					
		Size					
unregistered recorder initials			JJ	10			
registered nurses reviewers initials			SH				

This document is to be used in conjunction with the patient's risk assessments and care plan.

Frequency of Patient Observation

Registered Nurse to Initial	1-2 Hourly	2-4 Hourly	Twice Daily	Daily
Skin Check/ Positioning/Surface		✓		
Continence		✓		
Mouth Care			✓	
Intentional Rounding	✓			



GIG
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Skin Bundle & Intentional Rounding

Registered Nurse to review at minimum every 4 hours or greater if patient condition changes.

Patient Identification Label:

Patient 1.

* If the patient is rolled & not repositioned, document the rationale in the nursing record of care.

X	Declined/Refused	CX	Clinical condition won't allow	AS	Asleep
---	------------------	----	--------------------------------	----	--------

Year: 2019 Date: 20/4/19

Time of Check: 0900

Patient Not on the Ward:

SKIN CHECK

A	Normal	G1	Red, Non-blanching	HEEL - R	B
B	Red, blanching	G2	Intact or Open Blister	HEEL - L	B
M	Moisture	G3	Slough, Necrosis	SACRUM	B
MBS	Moisture/broken skin	G4	Cavity to Bone	SPINAL	A
SDTI	Suspected Deep Tissue Injury	U	Un-stageable	EAR	A
		F	Covered by dressing	HIPS	A
Anti-embolic Stockings:	N/A	Not applicable	Skin check	S	
External cast:	N/A	Not applicable	Skin check	S	
Tubing:	N/A	Not applicable	Skin check	S	
Other:					
Other:					

SURFACE

DM	Dynamic Mattress	Stc	Static Cushion	H	Heel Protectors (foam)	DM
SM	Static Mattress	RP	Repose	N	No Cushion	
DC	Dynamic Cushion	AC	Alarms/power leads checked			

KEEP MOVING/POSITIONING

L	Left side	U	Upright in bed	SU	Stood Up	LIR
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CONTINENCE (Continece Bundle)

N	Continent (Skin Dry)	BO	Bowels Opened	N
AT	Assisted to toilet	I	Independent	
C	Catheter Bundle	FI	Faecal Incontinence	
		UI	Urinary Incontinence	

CONTINENCE PRODUCTS (Refer to product selection guide)

US	Urinary Sheath	PC2	Pad/Pants changed (first line)	NR
NR	None Required	PC1	1 Piece Pad Changed	
		PC	Pad Checked - no action required	

PERSONAL HYGIENE

AW	Assisted wash	B	Bath	NC	Nail Care	AW
BB	Bed bath	S	Shaved	FC	Foot Care	C
SH	Shower	C	Clothes changed	HC	Hair Care	S
I	Independent					

MOUTH CARE

MC	Mouth Care	B	Agitated/distressed/pain	MC
OM	Oral Mucosa hourly lubrication	I	Independent	

INTENTIONAL ROUNDING

NUTRITION/HYDRATION (If applicable, use in conjunction with All Wales food and fluid charts)

NBM	Nil by Mouth	O	Drink offered	D	Drink within reach	O
ONS	Oral Nutritional Supplements	EF	Enteral Feeding			

ENVIRONMENT (Please tick or use appropriate code) * If NO footwear available document actions in the record of care/relevant care plan.

	Clutter Free - no trip or slip hazards	✓
	Personal items in reach and used : call bell /glasses /hearing aid / dentures	✓
	Bed/Chair height appropriate for patient	✓
	Walking aids to hand	Yes No N/A
	Appropriate foot wear available	Yes No*

PATIENT COMFORT: Tick if you have asked patient and document concerns in the nursing record of care

	Are you comfortable?	✓
	Do you have pain?	✓
	Is there anything else I can do for you?	✓
	Initials	LD
	Reviewer Initials (Registered Nurse)	

BLOOD GLUCOSE MONITORING CHART
Ward/Dept:
Frequency of Blood Glucose Monitoring-
At least 4 times a day for first 48 hours then re-assess
Addressograph

Frequency following assessment: Date: Time: Sig:

Frequency following assessment: Date: Time: Sig:

Frequency following assessment: Date: Time: Sig:

Frequency following assessment: Date: Time: Sig:

Patient 1.

Date	Test Time	Blood Glucose Level in mmol/L	Recorder sig	Band	Reviewer sig	Band	Blood glucose mmol/l	Blood Ketone mmol/l
11-20-2014	11:20	28	W.	2			11.0	
		27						
		26						
		25						
		24						
		23						
		22						
		21						
		20						
		19						
		18						
		17						
		16						
		15						
		14						
		13						
		12						
		11						
		10						
		9						
		8						
		7						
		6						
		5						
		4						
		3						
		2						
		1						
		0						

DAILY INTAKE-OUTPUT CHART (Record MUST be recorded on Weekly Chart)					ADDRESSOGRAPH							
24 HRS FROM 6:00 ON 20/4 TO 6:00 ON 21/4					Patient 1.							
WARD												
INSTRUCTIONS FOR 24 HOURS - All intravenous/enteral fluid therapy and drugs must be administered as prescribed on the ALL WALES PRESCRIPTION CHART. The "Type" heading below refers to the particular fluid prescribed.												
INSTRUCTIONS FOR 24 HOURS												
Time	INTAKE				OUTPUT							
	Intravenous/Enteral Fluids				Oral		Urine		Gastric		Wound Drainage	Bowel
	Type Intravenous/Enteral	Vol. Set up	IV Vol. Given	E Vol. given	Vol.	Type	Vol.	Running Total	Vol.	Running Total	Vol.	Type
c/f												
6												
7												
8					200ml	H2O						
9												
10							150ml					
11												
12					200ml	milk						
13												
14							150ml	300ml				
15					200ml	SCUP						
16												
17							100ml	400ml				
12 Hr Total					600ml			400ml				
18												
19					200ml	H2O						
20							200ml	600ml				
21												
22					200ml	H2O						
23												
0							200ml	800ml				
1												
2												
3												
4												
5					200ml	H2O						
12 Hr Total					600ml			400ml				
24 Hr Total					1200ml			800ml				

TOTAL INPUT: 1200ml mls

FLUID BALANCE +/-: mls

TOTAL OUTPUT: 800ml mls

All Wales Food Record Chart

Please record all Food, Nutritional Supplements and Nourishing drinks consumed
If NONE consumed please specify the reason on the chart

Remember to:

- Record all food and drink consumed throughout the day
- Describe the type of food served e.g. beef, bread, creamed potato
- Specify the quantity and meal size actually eaten e.g. 1/2 a small bowl of soup

Addressograph Patent 1.		Ward:		Nursing:	
		Food chart requested by:		Dietitian:	
		Body wt kgs: Actual weight (kg): Reported weight (kg): Date: Weight reported by patient ☐ Weight reported by carer ☐		Date: Days: Ongoing:	
Meal/Snack	Foods/nutritional supplements/ nourishing drinks offered/special diets e.g. pureed	AMOUNT TAKEN Must be reported to and countersigned by registered nurse (RN) twice daily			
		Portion served (S,M,L)	Amount Eaten (None, 1/4, 1/2, 3/4, All)	Signed	Counter-signed by RN
Breakfast					
Cereal	weatubix	x2	All	) LD.	
Milk/sugar	milk	200ml	All		
Cooked item					
Bread/toast					
Spread					
Drinks	FLU	200ml	150ml		
Mid-morning					
Snacks					
Drinks	COFFEE	200ml	All	LD.	
Lunch					
Soup	Vegetable soup.	S	All	) LD.	
Main item	chicken pie	M	3/4		
Potato/rice	mashed potato	M	1/2		
Vegetables	carrots	M	1/2		
Pudding	carrot + custard	S	All		
Drinks	water	200ml	All		
Mid-afternoon					
Snacks	biscuit	x2	All	) LD.	
Drinks	coffee	200ml	All		
Dinner					
Soup	leek + potato soup.	S	1/2	) LD.	
Main item	fish	M	All		
Potato/rice	chips	M	All		
Vegetables	peas	M	1/2		
Pudding	ice-cream	S	3/4		
Drinks	water	200ml	All		
Supper					
Snacks					
Drinks					
Therapeutic intake e.g. oral intake trials for swallow rehabilitation such as yoghurt etc. include amount given e.g. 3 teaspoons (refer to Care Plan)					

HDUHB PAEDIATRIC STOOL CHART

THE BRISTOL STOOL FORM SCALE

NAME	Patient 1.
I.D. NUMBER	00000
DOB	11/11/11
WARD	

Type 1		Separate hard lumps, like nuts (hard to pass)
Type 2		Sausage-shaped but lumpy
Type 3		Like a sausage but with cracks on its surface
Type 4		Like a sausage or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges (passed easily)
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces ENTIRELY LIQUID

Date	Time	Bristol Stool Chart Consistency 1 - 7	Colour / Description / Smell	Volume	Signature
20/4/19	10:00.	4.	brown, smooth	S	LD.

Please continue overleaf if necessary

Version Number 1.1

Issue Date: JAN 2014

Review Date JAN 14

Developed by paediatric documentation steering group

Approved by: child and adolescent health service

PRO-P CS819

Evidence of Hours Worked

Attached are time sheets that are filled out as evidence for staff on the BANK to show hours worked at each day and what times. At the end of the shift the nurse in charge signs your timesheet to confirm you worked that shift. Without time sheets you will not get paid. Throughout all four timesheets 69 hours were worked in total.

Look Closely!
This is a copy
of the original

BANK TIME SHEET

FOR COMPLETION BY BANK MEMBER

Please complete using black pen and block capitals as per example overleaf.

Forename(s)	LIISA ANN
Surname	DAVIES
Payroll Number	25714030
Week Commencing	M O N D A Y

For example of form completion see over.

Booking Reference	Shift Date	Day	Shift start time (24 hours)	Shift end time (24 hours)	Less total break time (hours/minutes)	Total hours worked (hours/minutes)	Sick/ Work	Initial(s) and surname of recognised signatory
713181337	10/10/18	MON	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	11/10/18	TUE	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	12/10/18	WED	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	13/10/18	THU	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	14/10/18	FRI	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	15/10/18	SAT	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	16/10/18	SUN	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	17/10/18	MON	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	18/10/18	TUE	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	19/10/18	WED	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	20/10/18	THU	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	21/10/18	FRI	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	22/10/18	SAT	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	23/10/18	SUN	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	24/10/18	MON	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	25/10/18	TUE	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	26/10/18	WED	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	27/10/18	THU	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	28/10/18	FRI	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	29/10/18	SAT	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	30/10/18	SUN	07:00	14:30	00:30	06:00		LIISA ANN DAVIES
713181337	31/10/18	MON	07:00	14:30	00:30	06:00		LIISA ANN DAVIES

I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts detailed on this time sheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and the NHS Counter Fraud and Security Management Service for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Bank Member of staff Signature:

Date: 14/10/18

Total Hours

Method of payment	Please tick
Weekly	☒
Monthly	☐

Bwrdd Iechyd
Hywel Dda Health Board

Send WHITE & YELLOW COPY to: BANK OFFICE (A&C Division)/Line Manager (MH/LD Division)

Staff Member to retain BLUE COPY

FOR COMPLETION BY THE RECOGNISED WARD/DEPARTMENT SIGNATORY

I am a recognised signatory for my ward/department. I am signing below to confirm that both the grade and the shift that I am signing for are accurate. I understand that if I knowingly sign for false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and the NHS Counter Fraud and Security Management Service for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Signature of recognised signatory

Date

Signature of recognised signatory

Date

Signature of recognised signatory

Date

Signature of recognised signatory

Date

Signature of recognised signatory

Date

Signature of recognised signatory

Date

Trust authorisation (in accordance with Trust policy)

Staff Bank Authorised Signature or Line Manager

Date

Print Initials & Surname

Any questionable time sheets must be immediately brought to the attention of your Local Counter Fraud Specialist or you may report any case of fraud, in confidence, to the NHS Fraud and Corruption Reporting Line on 0800 028 40 60.

MCP 26002

BANK TIME SHEET
FOR COMPLETION BY BANK MEMBER

Please complete using black pen and block capitals as per example overleaf.

Forename(s) **LISA ANN**

Surname **DAVIES**

Payroll Number

Week Commencing **M O N D A Y** **25/03/19**

If you hold a substantive post in a NHS organisation please state your contracted hours.

For example of form completion see over.

Booking Reference	Shift Date	Day	Shift start time (24 hours)	Shift end time (24 hours)	Less total break time (hours/minutes)	Total hours worked (hours/minutes)	Sick/Work
773568	27/03/19	W	07:00	15:00	00:30	07:30	
Hospital and Location/Ward	Band Shift Worked at		Total hours worked in long hand seven hours + thirty minutes				
773571	28/03/19	T	07:00	15:00	00:30	07:30	
Hospital and Location/Ward	Band Shift Worked at		Total hours worked in long hand seven hours + thirty minutes				

I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts detailed on this time sheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and the NHS Counter Fraud and Security Management Service for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Total Hours **15:00**

Bank Member of staff Signature: *[Signature]* Date: **25/3/19**

Method of payment: ☐ Weekly ☐ Monthly ☒ Please tick

Bwrdd Iechyd Hywel Dda Health Board

Send WHITE & YELLOW COPY to: BANK OFFICE (A&C Division)/Line Manager (M&LD Division)

Staff Member to retain BLUE COPY

FOR COMPLETION BY THE RECOGNISED WARD/DEPARTMENT SIGNATORY:

I am a recognised signatory for my ward/department. I am signing below to confirm that both the grade and the shift that I am signing for are accurate. I understand that if I knowingly sign for false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and the NHS Counter Fraud and Security Management Service for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Initial(s) and surname of recognised signatory

Signature of recognised signatory *[Signature]* Date **27/3/19**

Signature of recognised signatory *R. Mouton* Date **28/3/19**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Trust authorisation (in accordance with Trust policy)

Staff Bank Authorised Signature or Line Manager: Date **/ /**

Print initials & Surname

Any questionable time sheets must be immediately brought to the attention of your Local Counter Fraud Specialist or you may report any case of fraud, in confidence, to the NHS Fraud and Corruption Reporting Line on 0800 028 40 60

MCP 26002

BANK TIME SHEET
FOR COMPLETION BY BANK MEMBER

Please complete using black pen and block capitals as per example overleaf.

Forename(s) **LISA ANN**

Surname **DAVIES**

Payroll Number **25714030**

Week Commencing **M O N D A Y** **11/02/19**

If you hold a substantive post in a NHS organisation please state your contracted hours.

For example of form completion see over.

Booking Reference	Shift Date	Day	Shift start time (24 hours)	Shift end time (24 hours)	Less total break time (hours/minutes)	Total hours worked (hours/minutes)	Sick/Work
757802	11/02/19	M	12:00	20:00	00:30	07:30	
Hospital and Location/Ward	Band Shift Worked at		Total hours worked in long hand seven hours + thirty minutes				

I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts detailed on this time sheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and the NHS Counter Fraud and Security Management Service for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Total Hours **07:30**

Bank Member of staff Signature: *[Signature]* Date: **17/2/19**

Method of payment: ☐ Weekly ☒ Monthly ☐ Please tick

Bwrdd Iechyd Hywel Dda Health Board

Send WHITE & YELLOW COPY to: BANK OFFICE (A&C Division)/Line Manager (M&LD Division)

Staff Member to retain BLUE COPY

FOR COMPLETION BY THE RECOGNISED WARD/DEPARTMENT SIGNATORY:

I am a recognised signatory for my ward/department. I am signing below to confirm that both the grade and the shift that I am signing for are accurate. I understand that if I knowingly sign for false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and the NHS Counter Fraud and Security Management Service for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Initial(s) and surname of recognised signatory

Signature of recognised signatory *L. HUGHES* Date **11/02/19**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Signature of recognised signatory Date **/ /**

Trust authorisation (in accordance with Trust policy)

Staff Bank Authorised Signature or Line Manager: Date **/ /**

Print initials & Surname

Any questionable time sheets must be immediately brought to the attention of your Local Counter Fraud Specialist or you may report any case of fraud, in confidence, to the NHS Fraud and Corruption Reporting Line on 0800 028 40 60

MCP 26002

FOR COMPLETION BY BANK MEMBER

Please complete using black pen and block capitals as per example overleaf.

For example of form completion see over.

**Bwrdd Iechyd
Hywel Dda Health Board**

Send WHITE & YELLOW COPY to: BANK OFFICE (A&C Division)/Line Manager (MH/LD Division)

Staff Member to retain BLUE COPY

FOR COMPLETION BY THE RECOGNISED WARD/DEPARTMENT SIGNATORY

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I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts detailed on this time sheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and the NHS Counter Fraud and Security Management Service for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Date: 2/11/15

Print Initials
& Surname

Any questionable time sheets must be immediately brought to the attention of your Local Counter Fraud Specialist or you may report any case of fraud, in confidence, to the NHS Fraud and Corruption Reporting Line on 0800 028 40 60.

MCP 26002

Future Prospects

I applied to further my educational learning into adult nursing and was invited to an interview at St David's Park, UWTSD which I attended and later received a conditional offer of passing my current nursing and studies course to secure my place as a student nurse this coming September.

Attached:

- Interview Invitation
- Interview Write Up
- Evidence of Conditional Offer

Interview Invitation from Swansea University

Your UCAS Personal ID number: 1088122312 /B740

Miss Lisa Davies
37 Bishop Road
Ammanford
SA18 3HA

Dear Lisa

Thank you for applying for a place on the Adult Nursing (Carmarthen Campus), BSc (Hons) programme at the College of Human and Health Sciences, Swansea University. I am pleased to be able to inform you that you have been shortlisted to attend a selection event as follows:

VENUE: College of Human and Health Sciences, Block 3, St. David's Park, Carmarthen, SA31 3HB

DATE: Wednesday, 13 February 2019

TIME: 9:30 am

**** Please confirm your attendance by completing in full and returning by e-mail the "reply slip" below. If we have not heard from you within three weeks, your application may be withdrawn. ****

Interview Write Up

I was lucky enough to be invited to an interview that I applied for at St David's Park, Carmarthen campus for adult nursing. The day consisted of a group discussion, recreating a scenario and a one to one interview. International Hellenic University (2019) describes an interview as a conversation which is undertaken by potential employer and the applicant where the employer can find out an applicant's qualifications, skills and their thoughts and feelings. Interviews are a two-way street where both employer and applicant have a specific goal which is to find the right job and find a suitable applicant (Chun, 2011). I was called for my one to one interview by a student who then took me to the interviewing room, as I arrived, I was greeted by a gentleman, he introduced himself as did I and we shook hands whilst making eye contact and took a seat opposite each other at a desk. Within the healthcare environment positive eye contact is an important aspect of human interaction (Bernard, 1997).

I noticed that in the same room there were two other separate interviews being held which gave it a more relaxed feel within the room. The interviewer had a list of questions to ask me which included why I wanted to be a nurse, what is the difference between the healthcare role and student role, have I been in any confrontational or aggressive situations with either a patient or student and what skills I could bring to the nursing environment. Although he had a range of questions pre-planned to ask me, often more questions were asked in relation to those which we engaged in conversation. Semi-structured interviews contain aspects of both structured and unstructured interviews, whilst having prepared a set of questions will also include additional questions in relation to clarify or further expand (Research Methodology, 2019).

When asking me why I wanted to be a nurse, my reply was that after being a health care support worker on Dewi ward in Glangwili hospital for the past three years I was ready to take the next step and further my knowledge and develop myself as a nurse. This brought us to engage in a conversation on the role of a healthcare support worker which led to the question of what skills I had learnt within those three years as a health care support worker. I thought back on the last three years within my role and expanded on my skills I had learnt which were working as part of a team, time management, excellent verbal communication skills with patients, families and healthcare professionals, listening skills, being empathetic, keeping accurate records, ability to work under pressure, meeting deadlines and the importance of confidentiality, dignity and respect. Yu (2008) explains how confidentiality was designed to prevent harm to come to an individual upon their personal information. Time managing in both work and personal life will help you feel more focused and in control (NHS, 2019). When asking me about the role of the student, I replied with doing personal care, carrying out observations, following and listening to your mentor to which he replied with 'and asking questions?' to which I agreed and spoke about my job and how I always ask questions within the role I am currently in. I feel that he tried to help me with my answers and my

responses as I was noticeably nervous.

When the interview began, I was very nervous and apprehensive of the questions that were going to be asked, but by the end of the interview I was very relaxed and happy overall with how the interview went. I may have tried to hide my nerves at the beginning by accidentally talking too much which I feel didn't go well. Lublin (2007) explains how being nervous and talking too much in an interview can affect your chances as some may talk too much about irrelevant information. I feel as though I spoke very quickly and possibly rushed my answers which then reflected on me not giving the answers I would have liked too. I believe that when I did relax and feel more comfortable that I was able to give myself time to think about the questions and give good appropriate answers to the questions being asked. Seager (2015) states how important being relaxed in an interview is and how breathing techniques will help us think clearly. I felt that I had prepared well for the interview by researching the course, which showed when answering the questions. Graduate Prospects (2019) states the importance of doing plenty of research when preparing for an interview as planning is key to a successful interview.

Reflecting on my interview, if I could have done anything else differently it would have been to have asked questions at the end of the interview. I would have liked to have asked more questions about the course to have known more than just what I had researched and when would be the possibility of hearing back about a place. By asking questions in an interview you show interest to your employer and show you want the job (Tibbs, 2016). I will apply the experience and skills I have learnt in this interview in future interviews such as preparing well, not speaking too much during the interview and how taking your time with questions will help you give more efficient answers. Although I had no feedback from my interview, I was offered a place to study adult nursing starting September which I am excited and very happy about.

Your choices

You have used 1 of your 5 choices

**Offers received**

Swansea University S93

Nursing (Adult) - Carmarthen B740

Campus: T
Start date: 1 Sep 2019
Start from: Year One

The university or college has offered you a place subject to conditions.
(Conditional offer)

Last updated
19 Feb 2019

View 

Give us your feedback!

I accepted!

SMART

My goal is to complete my nursing degree to the best of my ability. This goal is important to me as it's something I've always wanted to do, and it's taken me years of hard work and dedication to get on to do my degree so I want to achieve the best result I possibly can. I am involved in my goal but support from my family and friends will be crucial along the way. I feel that my goal is achievable, and I can accomplish this by putting in the time and work, concentrating and always putting in 110%. It is now the right time in my life to achieve this goal as I am now ready more than previous years and know that it will all be worthwhile in the end. I feel that I would make a great nurse and want to be guided and learn along the way to become this. I'm very motivated to achieve my goal and although knowing it will be hard, I will still always try my best. Once starting my degree, I will check my progress every six months to evaluate how I'm finding the course, how well I'm understanding all the modules and am I progressing in becoming the best nurse that I can be.

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