

Frailty Tier 1 clinical competency

Health, social care staff, volunteers and those who require general awareness of frailty.

Name:	Role:
Base:	

Competency Statement:

The participant demonstrates knowledge and skill in **Frailty** without assistance and/or direct supervision

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
The Participant will be able to:				
Capability 1 Understanding Frailty				
a. Demonstrate an awareness of frailty by being able to know what frailty is and what it means to you or someone you care for?				
b. To be able to demonstrate an awareness of the impact of living with frailty has on the person.				
c. To demonstrate an awareness of which individuals are more likely to be at a greater risk of frailty.				
d. To be aware and be able to show that frailty can change, it can get better or worse.				
e. To demonstrate an awareness that those living with frailty are more at risk of conditions such as ; <ul style="list-style-type: none"> • Confusion • Falls • Incontinence • Mobility • Side effects of medication 				
f. To demonstrate an awareness of where support and information could be obtained for families, carers and those living with frailty in both health, social and voluntary care.				
Capability 2 Frailty identification and assessment				
a. To be able to recognise the characteristics of frailty for example:				
b. <ul style="list-style-type: none"> • Weight loss • Poor nutrition and hydration • Fatigue 				

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
<ul style="list-style-type: none"> Weakness Reduced physical activity 				
<p>c. To demonstrate awareness that in living with frailty can make you more sensitive to stressors. This could cause an inability or difficulty to complete everyday tasks such as;</p> <ul style="list-style-type: none"> Mobilising Falling Loneliness and isolation Memory loss Inability to maintain normal previous tasks 				
<p>d. To know that there are ways to that health professionals can assess for frailty which can help to plan and support care.</p>				
Capability 3 Person centred approaches				
<p>a. To have an awareness in how best to support individuals to maintain their identity and self-esteem focusing on the person. Using values that include;</p> <ul style="list-style-type: none"> Individuality Independence Privacy Partnership Choice Dignity Respect and rights 				
<p>b. To have an awareness of the importance of working in partnership with patients, carers, volunteers, families and the wider health/social care teams.</p>				
<p>c. To have an awareness of who is important to the person living with frailty and who they see as 'leading' their care and support (That maybe the person themselves)</p>				
Capability 4 Communication				
<p>a. To demonstrate an awareness of differing communication styles and the importance of compassion and active listening such as;</p> <ul style="list-style-type: none"> Body language Barriers to communication Kindness Compassion 				

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
b. To demonstrate an awareness of the need to adapt verbal and non verbal communication appropriate to the individual including sufficient time to process and respond to a question,				
c. To demonstrate an awareness that the signs of distress through certain behaviours maybe a means of communicating unmet needs.				
Capability 5 Families and carers as partners in care				
a. To demonstrate an awareness of what it means to be a carer.				
b. To demonstrate an awareness of the support, services and resources that are available for families and carers, including practical and emotional support services, and know how to access them.				
c. To demonstrate an awareness that the person living with frailty maybe eligible for allowances or benefits and know where to seek advice.				
d. To demonstrate an awareness of specific processes available to support the interest of a person living with frailty, such as lasting power of attorney.				
e. To know how to access a carers assessment and subsequent support.				
Capability 6 Collaborative and Integrated working				
a. To demonstrate an awareness of the range of different agencies and professionals who may be involved with the care of individuals living with frailty.				
b. To demonstrate an awareness of who is involved in the care of the individual and who to contact with issues or questions.				

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
c. To demonstrate an awareness that health and care professionals may ask for a persons consent to share information to enable more integrated working and understand the value of giving this consent.				
Capability 7 Managing Frailty				
a. To demonstrate awareness that lifestyle choices such as smoking, obesity and inactivity can increase the risks of frailty.				
b. To demonstrate an awareness of the risks associated with social isolation for those living with frailty and their carers.				
c. To be aware of the positive and negative impacts of the home environment on those living with frailty.				
d. To demonstrate an awareness and now how to access services such as; <ul style="list-style-type: none"> • Health checks, • Free eye and hearing tests • Home safety checks. • Disability parking 				
Capability 8 Living well with Frailty				
e. To demonstrate an awareness that people living with frailty may need practical and emotional support to meet their daily needs. Such as; <ul style="list-style-type: none"> • A caring network • Voluntary and community services • Assistive technologies and/or equipment • Dementia friends 				
Capability 9 Physical and mental health and wellbeing				
a. To demonstrate an awareness to be able to support a person living with frailty in looking after their health, such as <ul style="list-style-type: none"> • Looking after feet, mouth, eyes and hearing • Getting vaccinations • Taking medicines • Personal hygiene • Attending to any changes in physical and mental 				

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
<p>health proactively</p> <ul style="list-style-type: none"> Monitor for signs of new or worsening confusion 				
Capability 10 Managing medication				
a. To demonstrate an awareness to be able to support a person living with frailty to access and take the correct medication in the correct form at the right time as prescribed.				
b. To demonstrate an awareness of the importance of regular medication review and recognise that changes in medication may be appropriate over time.				
c. To demonstrate awareness that over-the-counter medications can have negative interactions with prescribed medications.				
d. To demonstrate an awareness of sources of information and guidance regarding medication, e.g. general practitioners and community pharmacists.				
e. To demonstrate awareness that people living with frailty are more likely to experience medication side effects.				
Capability 11 Care and Support Planning				
a. To demonstrate an awareness of the importance of having the person's experiences, wishes and priorities included at all stages of care and support planning.				
b. To demonstrate an awareness to encourage and support people to express their wishes at every opportunity and make decisions based on their own experience understanding that they have the right to change their mind at any time.				
c. To demonstrate an awareness of the importance of choice in planning future care and support needs (including palliative and end of life care).				
d. To demonstrate an awareness of what a person living with frailty can do if they have a crisis, e.g.				

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
how to obtain urgent assistance.				
Domain D Underpinning principles				
a. Capability 12. Law, Ethics and Safeguarding	See local/organisational guidance			
b. Capability 13. Research and Evidence Based Practice	See local/organisational guidance			
c. Capability 14. Leadership and Transforming Services	See local/organisational guidance			

Date all elements of Competency Tool completed to level 3 _____

Name _____ Signature _____ Status _____ Date _____

I confirm that I have assessed the above named individual and can verify that he/she demonstrates competency in Frailty Competencies Tier 1.

Assessor _____ Signature _____ Status _____ Date _____

Review Dates:	Competent Yes / No	Signature of delegate	Verifier signature	Comments