

Dementia				
Task / Activity	Self-Assessment / Date	Competency Assessed Y / N	Competency Achieved	Signed off by Clinical Assessor / Date
Tier 2				
<p>Knowledge and Understanding</p> <ul style="list-style-type: none"> • Demonstrate an understanding of the causes of the different types of dementia²⁷⁰ where known, including but not limited to: <ul style="list-style-type: none"> ○ Alzheimer's ○ Vascular ○ Frontotemporal ○ Lewy body ○ Alcohol related brain damage ○ Posterior cortical atrophy ○ Huntingtons ○ Parkinsons ○ Mixed • Demonstrate an understanding of the reversible causes of cognitive decline including but not limited to:²⁷¹ <ul style="list-style-type: none"> ○ Delirium ○ Depression ○ Sensory impairment (hearing or sight loss) 				

²⁷⁰ <https://www.dementiauk.org/about-dementia/types-of-dementia/>

²⁷¹ <https://cks.nice.org.uk/topics/dementia/diagnosis/assessment/>

<ul style="list-style-type: none"> ○ Use of medications²⁷² <ul style="list-style-type: none"> ● Demonstrate an understanding of the pharmacological interventions used in the management of dementia²⁷³ <p>Patient Management</p> <ul style="list-style-type: none"> ● At Diagnosis ● Be able to use a validated cognitive testing instrument such as the GP assessment of cognition (GPCOG)²⁷⁴ ● Be able to refer a patient on to specialist dementia diagnostic service i.e. memory clinic dependent on local provision and referral criteria²⁷⁵ ● Review and ongoing management ● Inform patient of the legal requirements around driving and provide them with written information to support the decision of when to stop^{276 277} ● Be able to provide advocacy for patients who do not have capacity to make decisions about their care in line with the principles of the Mental Capacity Act 2005 (MCA)²⁷⁸ 				
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²⁷² <https://www.nice.org.uk/guidance/ng97/chapter/Recommendations#medicines-that-may-cause-cognitive-impairment>

²⁷³ <https://bnf.nice.org.uk/treatment-summaries/dementia/#:~:text=Alzheimer%E2%80%99s%20disease%20is%20the%20most%20common%20type%20of,with%20Lewy%20bodies%2C%20mixed%20dementia%2C%20and%20frontotemporal%20dementia.>

²⁷⁴ <https://www.nice.org.uk/guidance/ng97/chapter/Recommendations#diagnosis>

²⁷⁵ <https://www.nice.org.uk/guidance/ng97/chapter/Recommendations#diagnosis>

²⁷⁶ <https://www.gov.uk/dementia-and-driving>

²⁷⁷ https://www.alzheimers.org.uk/sites/default/files/2018-10/AS_NEW_Living%20with%20Dementia_Driving_ONLINE.pdf

²⁷⁸ <https://www.legislation.gov.uk/ukpga/2005/9/part/1/crossheading/independent-mental-capacity-advocate-service>

<ul style="list-style-type: none"> • Be able to make provisions to ensure that patients living with dementia have equivalent access to diagnosis, treatment and care services for any co-morbidities²⁷⁹ • Be able to ensure carers needs are separately assessed, supported and addressed and that they are linked in with local carers network if available²⁸⁰ 				
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²⁷⁹ <https://www.nice.org.uk/guidance/ng97/chapter/Recommendations#assessing-and-managing-other-long-term-conditions-in-people-living-with-dementia>

²⁸⁰ <https://www.nice.org.uk/guidance/ng97/chapter/Recommendations#supporting-carers>