



# Northern Ireland Social Care Council

## **Post Registration Training and Learning Requirements for Registered Social Care Workers**

### **Part Two - Recording Forms**

October 2004



## Post Registration Training and Learning

### Training and Learning Plan

This plan should be agreed between the Registrant and their line-manager. This is an on-going process and should be reviewed in the supervisory process.

The activities can consist of either formal accredited training (e.g. NVQs or post qualifying social work training), or informal training which includes reading, attendance at seminars, workshops, courses, presentation of case material at supervision or study which is related to your professional development and has an impact on your work.

<b>Registrant name:</b> ..... 
<b>Employing organisation:</b> ..... ..... 
<b>Workplace address:</b> ..... ..... ..... 
<b>Brief description of registrant's work/role:</b> ..... ..... ..... ..... ..... 

Identified training (development) needs	Plan to address training needs	How will this help the Registrant in their job?	Achievement timescale

**Signed:** ..... Registrant  
..... Line Manager (if available)







## Post-Registration Training and Learning Record of Achievement

<b>Registrant name:</b>		<b>NISCC registration number:</b>	
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<b>Correspondence address</b>		<b>Date of registration:</b>	
		<b>Date registration period finishes:</b>	

Date	Duration (hours or days)	Details of training and learning activity (including name of provider of training or learning activity)	State how this has contributed to your training and learning

Please photocopy as required.

Date	Duration (hours or days)	Details of training and learning activity (including name of provider of training or learning activity)	State how this has contributed to your training and learning

**Total training and learning for period of registration**

**Hours:** \_\_\_\_\_ **Days:** \_\_\_\_\_

**Registrant Declaration**

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

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please photocopy as required.

## **For further information about Post Registration Training and Learning Requirements for Registered Social Care Workers**

### **Contact:**

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