# Workplace Assessment Task 2 – Observation Form

*(This form is for the assessor’s use only)*

## **Purpose**

This *Observation Form* lists the practical skills that the candidate must demonstrate/perform while completing **Workplace Assessment Task 2.**

This form is to be completed by the candidate’s assessor to document their observations on the candidate’s performance in Workplace Assessment Task 2.

## **Task Overview**

For this task, while being observed by the assessor, the candidate is required to report the following to the designated persons according to relevant organisational procedures:

1. Existing and potential hazards, including those related to manual handling
2. Client-related risk factors and behaviours of concern
3. Risks of infection

In this task, the candidate will be assessed on:

* Their practical skills in reporting identified hazards and risks to designated persons according to organisational procedures.

## **Instructions to the Assessor**

### Before the assessment

* Organise workplace resources required for the candidate to complete this assessment.
* Provide the candidate with the workplace documents relevant to reporting the following according to organisational procedures and discuss these documents with the candidate:
  + Existing and potential hazards including those related to manual handling
  + Client-related risk factors and behaviours of concern
  + Risks of infection
* Contextualise the criteria in this observation form to reflect these procedures.
* Discuss this assessment task with the candidate, including the practical skills they need to demonstrate during this task and the criteria for satisfactorily demonstrating each skill.
* Review this form with the candidate and address any queries or concerns they may have about it.

### During the assessment

* Observe the candidate as they complete the Workplace Assessment Task.
* For each practical skill listed in this observation form:
  + Tick YES if you confirm you have observed the candidate demonstrate/perform the practical skill.
  + Tick NO if you have not observed the candidate demonstrate/perform the practical skill.
* If you ticked YES, provide the date when you observed the candidate demonstrate the skill.
* Write specific comments on the candidate’s performance in each criterion. Your feedback/insights will help address any area/s for improvement.

### After the assessment

* Complete all parts of the *Observation Form*, including the *Assessor Declaration* on the last page of this form. Your signature must be handwritten.

## **Candidate Details**

|  |  |
| --- | --- |
| Candidate name |  |
| Title/designation |  |

## **Assessor Details**

|  |  |
| --- | --- |
| Candidate is observed and assessed by |  |
| Training Organisation |  |
| Relevant qualifications held |  |

## **Context of the Assessment**

|  |  |
| --- | --- |
| Workplace/organisation |  |
| The organisation’s procedures for reporting existing and potential hazards | Assessor to list organisational procedures here |
| The organisation’s procedures for reporting manual handling hazards | Assessor to list organisational procedures here |
| The organisation’s procedures for reporting client-related risk factors and behaviours of concern | Assessor to list organisational procedures here |
| The organisation’s procedures for reporting risks of infection | Assessor to list organisational procedures here |
| Resources required for the assessment | Hazard Identification Form completed from Task 1  Risk Register Form completed from Task 1  Meeting Minutes template |

## **Candidate Assessment Briefing**

|  |  |
| --- | --- |
| Date of assessment briefing |  |

|  |  |
| --- | --- |
| **The assessor confirms:** | **YES/NO** |
| 1. They have discussed with the candidate the workplace task they are required to complete for this assessment. | YES  NO |
| 1. The candidate understands they will be assessed while completing this workplace task, as well as any document(s) they will complete as part of this task. | YES  NO |
| 1. They have discussed with the candidate instructions how they are to undertake the workplace task. | YES  NO |
| 1. They have provided the candidate guidance on how they can satisfactorily complete the task. | YES  NO |
| 1. They have discussed with the candidate the practical skills (listed below) they are required to demonstrate while completing this task. | YES  NO |
| 1. They have addressed the candidate’s questions or concerns about the workplace task and the assessment process. | YES  NO |

# Observation Form

## **Existing and Potential Hazards**

**Instructions to the Assessor:** Before the assessment, the criteria listed below must be contextualised further to reflect your organisation's procedures for reporting existing and potential hazards. Adapt or add more criteria below to ensure it reflects your organisation's procedures for reporting existing and potential hazards.

| **During the meeting:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate reports the existing hazards identified from Task 1   Assessor to contextualise the sub-criteria below to reflect the actual items discussed by the candidate related to existing hazards. Examples are provided below. |  |  |  |
| 1. The candidate discusses the existing hazards. | YES  NO |  |  |
| 1. The candidate discusses personnel who will be affected by the hazards. | YES  NO |  |  |
| 1. The candidate discusses risks associated with the hazards. | YES  NO |  |  |
| 1. The candidate discusses control measures to be implemented for the hazards. | YES  NO |  |  |
| 1. The candidate discusses the personnel who will implement the control measures. | YES  NO |  |  |
| 1. The candidate discusses when the control measures will be implemented. | YES  NO |  |  |

| **During the meeting:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate reports the potential hazards identified from Task 1   Assessor to contextualise the sub-criteria below to reflect the actual items discussed by the candidate related to potential hazards. Examples are provided below. |  |  |  |
| 1. The candidate discusses the potential hazards. | YES  NO |  |  |
| 1. The candidate discusses personnel who will be affected by the hazards. | YES  NO |  |  |
| 1. The candidate discusses risks associated with the hazards. | YES  NO |  |  |
| 1. The candidate discusses control measures to be implemented for the hazards. | YES  NO |  |  |
| 1. The candidate discusses the personnel who will implement the control measures. | YES  NO |  |  |
| 1. The candidate discusses when the control measures will be implemented. | YES  NO |  |  |
| 1. The candidate follows organisational procedures for reporting existing and potential hazards.   Assessor to specify how the candidate follows procedures. Examples are provided below. |  |  |  |
| 1. The candidate reports to the designated persons. | YES  NO |  |  |
| 1. The candidate discusses information that is consistent with the hazard identification form that they completed. | YES  NO |  |  |

## **Manual Handling Hazards**

**Instructions to the Assessor:** Before the assessment, the criteria listed below must be contextualised further to reflect your organisation's procedures for reporting manual handling hazards. Adapt or add more criteria below to ensure it reflects your organisation's procedures for reporting manual handling hazards.

| **During the meeting:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate reports the manual handling hazards identified from Task 1   Assessor to contextualise the sub-criteria below to reflect the actual items discussed by the candidate related to manual handling hazards. Examples are provided below. |  |  |  |
| 1. The candidate discusses the existing manual handling hazards. | YES  NO |  |  |
| 1. The candidate discusses the potential manual handling hazards. | YES  NO |  |  |
| 1. The candidate discusses personnel who will be affected by the hazards. | YES  NO |  |  |
| 1. The candidate discusses risks associated with the hazards. | YES  NO |  |  |
| 1. The candidate discusses control measures to be implemented for the hazards. | YES  NO |  |  |
| 1. The candidate discusses the personnel who will implement the control measures. | YES  NO |  |  |
| 1. The candidate discusses when the control measures will be implemented. | YES  NO |  |  |

| **During the meeting:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate follows organisational procedures for reporting manual handling hazards   Assessor to specify how the candidate follows procedures. Examples are provided below. |  |  |  |
| 1. The candidate reports to the designated persons. | YES  NO |  |  |
| 1. The candidate discusses information that is consistent with the hazard identification form that they completed. | YES  NO |  |  |

## **Client-related Risk Factors and Behaviours of Concern**

**Instructions to the Assessor:** Before the assessment, the criteria listed below must be contextualised further to reflect your organisation's procedures for reporting client-related risk factors and behaviours of concern. Adapt or add more criteria below to ensure it reflects your organisation's procedures for reporting client-related risk factors and behaviours of concern.

| **During the meeting:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate reports the client-related risk factors identified from Task 1.   Assessor to contextualise the sub-criteria below to reflect the actual items discussed by the candidate related to risk factors. Examples are provided below. |  |  |  |
| 1. The candidate discusses the existing client-related risk factors. | YES  NO |  |  |
| 1. The candidate discusses the potential client-related risk factors. | YES  NO |  |  |
| 1. The candidate discusses personnel who will be affected by the hazards. | YES  NO |  |  |
| 1. The candidate discusses risks associated with the hazards. | YES  NO |  |  |
| 1. The candidate discusses control measures to be implemented for the hazards. | YES  NO |  |  |
| 1. The candidate discusses the personnel who will implement the control measures. | YES  NO |  |  |
| 1. The candidate discusses when the control measures will be implemented. | YES  NO |  |  |
| 1. The candidate reports the client-related behaviours of concern identified from Task 1.   Assessor to specify the actual items discussed by the candidate related to behaviours of concern. Examples are provided below. |  |  |  |
| 1. The candidate discusses the existing client-related behaviours of concern. | YES  NO |  |  |
| 1. The candidate discusses the potential client-related behaviours of concern. | YES  NO |  |  |
| 1. The candidate discusses personnel who will be affected by the hazards. | YES  NO |  |  |
| 1. The candidate discusses risks associated with the hazards. | YES  NO |  |  |
| 1. The candidate discusses control measures to be implemented for the hazards. | YES  NO |  |  |
| 1. The candidate discusses the personnel who will implement the control measures. | YES  NO |  |  |
| 1. The candidate discusses when the control measures will be implemented. | YES  NO |  |  |

| **During the meeting:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate follows organisational procedures for reporting client-related risk factors and behaviours of concern.   Assessor to specify how the candidate follows procedures. Examples are provided below. |  |  |  |
| 1. The candidate reports to the designated persons. | YES  NO |  |  |
| 1. The candidate discusses information that is consistent with the hazard identification form that they completed. | YES  NO |  |  |

## **Risks of Infection**

**Instructions to the Assessor:** Before the assessment, the criteria listed below must be contextualised further to reflect your organisation's procedures for reporting risks of infection. Adapt or add more criteria below to ensure it reflects your organisation's procedures for reporting risks of infection.

| **During the meeting:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate reports the risks of infection identified from Task 1 |  |  |  |
| 1. The candidate discusses the existing risks of infection. | YES  NO |  |  |
| 1. The candidate discusses the potential risks of infection. | YES  NO |  |  |
| 1. The candidate discusses when the risks were identified. | YES  NO |  |  |
| 1. The candidate discusses the likelihood of the risks occurring. | YES  NO |  |  |
| 1. The candidate discusses the impact if the risks occur. | YES  NO |  |  |
| 1. The candidate discusses the risk ratings associated with the risks of infection. | YES  NO |  |  |
| 1. The candidate follows organisational procedures for reporting risks of infection   Assessor to specify how the candidate follows procedures. Examples are provided below. |  |  |  |
| 1. The candidate reports to the designated persons. | YES  NO |  |  |
| 1. The candidate discusses information that is consistent with the risk register that they completed. | YES  NO |  |  |

|  |  |
| --- | --- |
| **Assessor Declaration**  By signing here, I confirm that I have observed the candidate, whose name appears above, report hazards and risks.  I confirm that the information recorded on this *Observation Form* is true and accurately reflects the candidate’s performance during their completion of the workplace task. | |
| Assessor’s signature |  |
| Assessor’s name |  |
| Date signed |  |

End of Workplace Assessment – Observation Form