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# Table of Contents

[Introduction 5](#_Toc125005670)

[Competency-Based Assessments 6](#_Toc125005671)

[Assessing Nationally-Recognised Training 7](#_Toc125005672)

[Dimensions of Competency 9](#_Toc125005673)

[Reasonable Adjustment 9](#_Toc125005674)

[The Unit of Competency 10](#_Toc125005675)

[The Context of Assessment 11](#_Toc125005676)

[Assessment Methods 11](#_Toc125005677)

[Resources Required for Assessment 12](#_Toc125005678)

[Assessment Workbook Cover Sheet 14](#_Toc125005679)

[Practical Assessment 15](#_Toc125005680)

[Candidate Instructions 15](#_Toc125005681)

[Before Proceeding 16](#_Toc125005682)

[Simulated Assessment 18](#_Toc125005683)

[Overview 18](#_Toc125005684)

[Lotus Compassionate Care 22](#_Toc125005685)

[Case Study 1 – Abraham 23](#_Toc125005686)

[Task 1.1 – Review the Client’s Individualised Support Plan 24](#_Toc125005687)

[Task 1.2 – Meet with the Client and Their Family and Carers 24](#_Toc125005688)

[Task 1.3 – Conduct Risk Assessment 26](#_Toc125005689)

[Task 1.4 – Prepare and Assemble the Aids, Equipment, and Devices Required by the Client 30](#_Toc125005690)

[Task 1.5 – Facilitate Support Activities 32](#_Toc125005691)

[Task 1.6 – Monitor Support Activities 35](#_Toc125005692)

[Task 1.7 – Report and Refer Client’s Progress 38](#_Toc125005693)

[Case Study 2 – Henry 40](#_Toc125005694)

[Task 2.1 – Review the Client’s Individualised Support Plan 41](#_Toc125005695)

[Task 2.2 – Meet with the Client and Their Family and Carers 41](#_Toc125005696)

[Task 2.3 – Conduct Risk Assessment 43](#_Toc125005697)

[Task 2.4 – Prepare and Assemble the Aids, Equipment, and Devices Required by the Client 47](#_Toc125005698)

[Task 2.5 – Facilitate Support Activities 49](#_Toc125005699)

[Task 2.6 – Monitor Support Activities 52](#_Toc125005700)

[Task 2.7 – Report and Refer Client’s Progress 55](#_Toc125005701)

[Case Study 3 – Mobility Equipment 57](#_Toc125005702)

[Task 3.1 – Demonstrate Assistive Technologies 58](#_Toc125005703)

[Supplementary Questions 59](#_Toc125005704)

[Assessment Workbook Checklist 65](#_Toc125005705)

[Record of Assessment (Assessor’s Use Only) 69](#_Toc125005706)

# Introduction

This workbook contains the Practical Assessment.

The **Practical Assessment** is made up of the **Simulated Assessment.** This assessment tests your practical skills with respect to the requirements of the relevant unit of competency.

The Practical Assessment requires you to complete and submit workplace documents and other documentation relevant to the unit of competency.

**The evidence you submit must be your own work except where due reference is made and where you are required to submit supplementary workplace documents such as policies and procedures.**

**When completing the assessments included in this workbook:**

1. Read the instructions provided in each task carefully before attempting to complete the task. The instructions will guide you on how to answer the question or complete the task satisfactorily.
2. Follow the steps provided in each task.
   * If the question instructs you to describe, provide a description as your response. If the question instructs you to list, provide a list as your response.
   * Where there is a number of required responses, provide the required number of responses. For example, if you are asked to list three responses, provide three responses.
   * Where required, ensure that your assessor is present at the workplace to observe you as they conduct the assessment.
   * Organise and submit any required evidence for each assessment task.
3. Ensure that all your submissions for this assessment indicate your first and last name and that these submissions have been named according to the file naming convention prescribed by your assessor.

# Competency-Based Assessments

**Definition of Competency**

Assessment in this context can be defined as the fair, valid, reliable, and flexible gathering and recording of evidence to support the judgement on whether competency has been achieved. Skills and knowledge (developed in a structured learning situation, at work, or in some other context) are assessed against national standards of competence required by the industry rather than compared with the skills and knowledge of other candidates.

**The features of a competency-based assessment system are:**

* It is focused on what candidates can do and whether it meets the criteria specified by the industry as competency standards.
* Assessment should mirror the environment the candidate will encounter in the workplace.
* Assessment criteria should be clearly stated to the candidate at the beginning of the learning process.
* Assessment should be holistic. That is, it aims to assess as many elements and/or units of competency as is feasible at one time.
* In competency assessment, a candidate receives one of only two outcomes – ‘competent’ or ‘not yet competent.’
* The basis of assessment is in applying knowledge for some purpose. In a competency system, knowledge for the sake of knowledge is seen to be ineffectual unless it assists a person in performing a task to the level required in the workplace.
* The emphasis in assessment is on assessable outcomes that are clearly stated for the trainer and candidate. Assessable outcomes are tied to the relevant industry competency standards where these exist. Where such competencies do not exist, the outcomes are based upon those identified in training needs analysis.

# Assessing Nationally-Recognised Training

Developing and conducting assessment in an Australian Vocational Education and Training (VET) context is founded on the Principles of Assessment and the Rules of Evidence:

**Principles of Assessment**

1. **Assessment must be valid**
   * Assessment must include the full range of skills and knowledge needed to demonstrate competency.
   * Assessment must include the combination of knowledge and skills with their practical application.
   * Assessment, where possible, must include judgements based on evidence drawn from a number of occasions and across a number of contexts.
2. **Assessment must be reliable**
   * Assessment must be reliable and must be regularly reviewed to ensure that assessors are making decisions in a consistent manner.
   * Assessors must be trained in national competency standards for assessors to ensure reliability.
3. **Assessment must be flexible**
   * Assessment, where possible, must cover both the on- and off-the-job components of training within a course.
   * Assessment must provide for the recognition of knowledge, skills, and attitudes regardless of how they have been acquired.
   * Assessment must be made accessible to candidates through a variety of delivery modes, so they can proceed through modularised training packages to gain competencies.
   * Assessment must be mutually developed and agreed upon between the assessor and the assessed.
   * Assessment must be able to be challenged. Appropriate mechanisms must be made for reassessment as a result of challenge.
4. **Assessment must be fair**
   * The assessment process must consider the individual needs of the candidate.
   * Assessment must provide for reasonable adjustments, where appropriate, to consider the individual candidate’s needs.

*(Source: Standards for RTOs 2015, Clauses 1.8 – 1.12)*

**Rules of Evidence**

When collecting evidence, certain rules apply to that evidence. All evidence must be valid, sufficient, authentic, and current:

1. **Valid**

Evidence gathered should meet the requirements of the unit of competency. This evidence should match, or at least reflect, the type of performance that is to be assessed, whether it covers knowledge, skills, or attitudes.

1. **Sufficient**

This rule relates to the amount of evidence gathered. Enough evidence must be gathered to satisfy the requirements that the candidate be competent in all aspects of the unit of competency.

1. **Authentic**

When evidence is gathered, the assessor must be satisfied that the evidence is the candidate’s own work.

1. **Current**

This relates to the recency of the evidence and whether the evidence relates to current abilities.

*(Source: Training in Australia by M Tovey, D Lawlor)*

# Dimensions of Competency

The national concept of competency includes all aspects of work performance and not only narrow task skills. The four dimensions of competency are:

1. Task skills
2. Task management skills
3. Contingency management skills
4. Job or role environment skills

# Reasonable Adjustment

‘Reasonable adjustment’ in VET is the term applied to modifying the learning environment or making changes to the training delivered to assist a candidate with a disability. A reasonable adjustment can be as simple as changing classrooms to be closer to amenities or installing a particular type of software on a computer for a person with vision impairment.

**Why make a reasonable adjustment?**

We make reasonable adjustments in VET to make sure that candidates with disabilities have the following:

* The same learning opportunities as candidates without disabilities, and
* The same opportunity to perform and complete assessments as those without disabilities.

**Reasonable adjustment applied to participation in teaching, learning, and assessment activities can include:**

* Customising resources and assessment activities within the training package or accredited course
* Modifying the presentation medium
* Learner support
* Use of assistive/adaptive technologies
* Making information accessible both before enrolment and during the course
* Monitoring the adjustments to ensure candidate needs continue to be met

**Assistive/Adaptive Technologies**

Assistive/adaptive technology means ‘software or hardware that has been specifically designed to assist people with disabilities in carrying out daily activities’ (World Wide Web Consortium - W3C). It includes screen readers, magnifiers, voice recognition software, alternative keyboards, devices for grasping, visual alert systems, and digital note-takers.

*(Adapted Reasonable Adjustment in teaching, learning and assessment for learners with a disability - November 2010 - Prepared by - Queensland VET Development Centre)*

**IMPORTANT:**

**Reasonable adjustments made for collecting candidate assessment evidence must not impact the standard expected by the workplace, as expressed by the relevant unit/s of competency. For example, if the assessment were gathering evidence of the candidate’s competency in writing, allowing the candidate to complete the assessment verbally would not be a valid assessment method. The method of assessment used by any reasonable adjustment must still meet the competency requirements.**

# The Unit of Competency

The units of competency specify the standards of performance required in the workplace.

This assessment addresses the following unit of competency:

**CHCCCS031 - Provide individualised support (Release 1)**

1. Determine personal support requirements.
2. Provide support services.
3. Monitor support activities.
4. Complete reporting and documentation.

**A complete copy of the above unit of competency can be downloaded from the TGA website:**

<https://training.gov.au/training/details/CHCCCS031>

# The Context of Assessment

To complete the assessments in this workbook, students need to have access to their learning materials and the Internet.

The Simulated Assessment may be completed in an environment with conditions similar to that of a real workplace.

# Assessment Methods

This workbook uses the following assessment methods:

1. **Simulated Assessment**

A set of practical tasks or activities completed according to set instructions and guidelines to meet the requirements of the relevant unit. A simulated environment with scenarios is provided to complete the tasks and activities.

1. **Supplementary Questions**

A set of general and workplace questions testing the candidate’s general knowledge and understanding of the general theory behind the unit.

# Resources Required for Assessment

**The candidate will need access to the following:**

* Computer with Internet, email access, and a working web browser
* Installed software: MS Word, Adobe Acrobat Reader

**To complete this assessment, the following has been provided in this workbook:**

* Simulated direct support work environment – Lotus Compassionate Care
* Clients’ individualised support plans
* Organisational policies and procedures relevant to providing individualised support
* Legislative requirements and written direction from the health professional relevant to taking pre-packaged medication
* Lotus Compassionate Care forms and templates, including:
  + Risk management templates, e.g., hazard identification report, health and safety checklist, site safety inspection, risk register, etc.
  + Progress notes
  + Meeting minutes

**Additionally, your assessor/training organisation must organise your access to the following:**

* One volunteer to act as your supervisor
* One volunteer to act as other support staff in the workplace
* One volunteer to act as the individual support client or person requiring support
* One volunteer to act as the client’s family/carer
* Aids, devices/appliances, and equipment used by the clients

The case studies refer to the following:

* Hearing aid
* Walking stick
* Dentures
* Colostomy bag or stoma bag
* Cold compress
* Person hoist
* Slide sheet
* Hoist with slings
* Stand-up lifter

These aids, equipment, devices/appliances may be changed to other aids, equipment, devices/appliances depending on what is available in the training organisation/workplace.

* User manuals or manufacturers’ instructions for preparing and assembling these aids, devices/appliances, and equipment
* Resources to conduct a risk assessment, including but not limited to:
  + Areas to inspect
* Facilities, resources, and equipment used to provide individualised support in the following areas:
  + Dressing, undressing, and grooming
  + Eating and drinking
  + Oral hygiene
  + Showering
  + Toileting and the use of continence aids
  + Using slide sheets, hoists, slings and lifters
  + Transferring a person between bed and chair
  + Bed bathing
  + Shaving
  + Transferring a person in and out of car
  + Falls recovery
  + Taking pre-packaged medication
  + Computer, filing cabinets, cloud storage, organisation intranet, etc.

# Assessment Workbook Cover Sheet

**To the candidate:** Print this cover sheet and complete it by filling in all the required information and signing in the space provided. Your signature must be handwritten. Scan the completed cover sheet and submit it along with your evidence submissions. Use the filename: **CHCCCS031 – Part B Cover Sheet**

|  |  |
| --- | --- |
| Workbook | CHCCCS031 – Part B |
| Title | Provide individualised support (Release 1) |
| First and Last Name |  |
| Phone |  |
| Email |  |

|  |  |  |
| --- | --- | --- |
| **Please read the Candidate Declaration below, and if you agree to the terms of the declaration, sign and indicate the date in the spaces provided.**  **By submitting this work, I declare that:**   * I have been advised of the assessment requirements, have been made aware of my rights and responsibilities as an assessment candidate, and choose to be assessed at this time. * I am aware that there is a limit to the number of submissions that I can make for each assessment, and I am submitting all documents required to complete this Assessment Workbook. * I have organised and named the files I am submitting according to the instructions provided. I am aware that my assessor will not assess work that cannot be identified and may request the work be resubmitted according to the correct process. * This work is my own and contains no material written by another person except where due reference is made. I am aware that a false declaration may lead to the withdrawal of qualification or statement of attainment. * I am aware that there is a policy of checking the validity of qualifications that I submit as evidence, as well as the qualifications/evidence of parties who verify my performance or observable skills. I give my consent to contact these parties for verification purposes. | | |
| **Name:** | **Signature:** | **Date signed:** |

# Practical Assessment

## Candidate Instructions

The Practical Assessment is a set of tasks that must be completed in an environment with conditions similar to that of a real workplace.

This assessment will help the candidate demonstrate skill requirements relevant to providing individualised support.

The Practical Assessment includes the following:

1. **Simulated Assessment**

A set of practical tasks or activities completed according to set instructions and guidelines to meet the requirements of the relevant unit. A simulated environment with case study scenarios is provided to complete the tasks and activities.

1. **Supplementary Questions**

A set of general and workplace questions testing the candidate’s general knowledge and understanding of the general theory behind the unit.

## Before Proceeding

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| **IMPORTANT: You must complete this Simulated Assessment before you proceed with the assessments in the Skills Workbook.**  The unit *CHCCCS031 – Provide individualised support (Release 1)* requires you to:   * Provide personal support to people in the following tasks in **three separate instances in a real workplace**:   + Dressing, undressing, and grooming   + Eating and drinking   + Oral hygiene   + Showering   + Toileting and the use of continence aids   + Using slide sheets, hoists, slings and lifters   + Transferring a person between bed and chair   + Transferring a person from seated to standing   The above must first be demonstrated in a simulated environment before being demonstrated in a workplace.   * Provide personal support to people in the following tasks in **two separate instances in a simulated environment**:   + Bed bathing   + Shaving   + Transferring a person in and out of car   + Falls recovery and   + Assisting a person in taking pre-packaged medication   The simulation requirements are addressed in this workbook, Assessment Workbook – Part B. The real workplace assessment requirements are addressed in the Skills Workbook. |

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| This is illustrated below:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Tasks to be completed by the candidate** | **Assessment Workbook – Part B**  **(This Workbook)** | | **Skills Workbook** | | | | **Simulation 1**  **(Case Study 1)** | **Simulation 2**  **(Case Study 2)** | **Real Workplace**  **(Instance 1)** | **Real Workplace**  **(Instance 2)** | **Real Workplace**  **(Instance 3)** | | Dressing, undressing, and grooming | 🗸 |  | 🗸 | 🗸 | 🗸 | | Eating and drinking | 🗸 |  | 🗸 | 🗸 | 🗸 | | Oral hygiene | 🗸 |  | 🗸 | 🗸 | 🗸 | | Showering | 🗸 |  | 🗸 | 🗸 | 🗸 | | Toileting and the use of continence aids | 🗸 |  | 🗸 | 🗸 | 🗸 | | Using slide sheets, hoists, slings and lifters | 🗸 |  | 🗸 | 🗸 | 🗸 | | Transferring a person between bed and chair | 🗸 |  | 🗸 | 🗸 | 🗸 | | Bed bathing | 🗸 | 🗸 |  |  |  | | Shaving | 🗸 | 🗸 |  |  |  | | Transferring a person in and out of car | 🗸 | 🗸 |  |  |  | | Falls recovery | 🗸 | 🗸 |  |  |  | | Assisting a person in taking pre-packaged medication | 🗸 | 🗸 |  |  |  | |

# Simulated Assessment

## Overview

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| **This assessment is done through simulated activities and must be completed prior to the start of your vocational placement.**  **The goal of this assessment is to assess your practical knowledge and skills in the following:**   * Determining personal support requirements. * Providing support services. * Monitoring support activities. * Completing reporting and documentation.   **This assessment is made up of two case studies:**  *Case Study 1 – Abraham*   1. Task 1.1 – Review the Client’s Individualised Support Plan 2. Task 1.2 – Meet with the Client and Their Family and Carers 3. Task 1.3 – Conduct Risk Assessment 4. Task 1.4 – Prepare and Assemble the Aids, Equipment, and Devices Required by the Client 5. Task 1.5 – Facilitate Support Activities 6. Task 1.6 – Monitor Support Activities 7. Task 1.7 – Report and Refer Client’s Progress   *Case Study 2 – Henry*   1. Task 2.1 – Review the Client’s Individualised Support Plan 2. Task 2.2 – Meet with the Client and Their Family and Carers 3. Task 2.3 – Conduct Risk Assessment 4. Task 2.4 – Prepare and Assemble the Aids, Equipment, and Devices Required by the Client 5. Task 2.5 – Facilitate Support Activities 6. Task 2.6 – Monitor Support Activities 7. Task 2.7 – Report and Refer Client’s Progress |
| *Case Study 3 – Mobility Equipment*   1. Task 3.1 – Demonstrate Assistive Technologies   **You are required to:**   * Complete the tasks within the time allowed, as scheduled in-class roll. * Review the instructions in each task included in this Simulated Assessment. * Determine personal support requirements. * Provide individualised support to the client, including bed bathing, dressing, undressing, grooming, eating and drinking, etc. * Monitor support activities. * Complete reporting and documentation.   **Resources required for assessment:**  To complete this assessment, the following has been provided in this workbook:   * Simulated direct support work environment – Lotus Compassionate Care * Clients’ individualised support plans * Organisational policies and procedures relevant to providing individualised support * Legislative requirements and written direction from the health professional relevant to taking pre-packaged medication * Lotus Compassionate Care forms and templates, including:   + Risk management templates, e.g., hazard identification report, health and safety checklist, site safety inspection, risk register, etc.   + Progress notes   + Meeting minutes   Additionally, your assessor/training organisation must organise your access to the following:   * One volunteer to act as your supervisor * One volunteer to act as other support staff in the workplace * One volunteer to act as the individual support client or person requiring support * One volunteer to act as the client’s family/carer * Aids, devices/appliances, and equipment used by the clients |

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| The case studies refer to the following:   * Hearing aid * Walking stick * Dentures * Colostomy bag or stoma bag * Cold compress * Person hoist * Slide sheets * Hoist with slings * Stand-up lifter   These aids, equipment, devices/appliances may be changed to other aids, equipment, devices/appliances depending on what is available in the training organisation/workplace.   * User manuals or manufacturers’ instructions for preparing and assembling these aids, devices/appliances, and equipment * Resources to conduct a risk assessment, including but not limited to:   + Areas to inspect * Facilities, resources, and equipment used to provide individualised support in the following areas:   + Dressing, undressing, and grooming   + Eating and drinking   + Oral hygiene   + Showering   + Toileting and the use of continence aids   + Using slide sheets, hoists, slings and lifters   + Transferring a person between bed and chair |

|  |
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| * + Bed bathing   + Shaving   + Transferring a person in and out of car   + Falls recovery   + Taking pre-packaged medication * Computer, filing cabinets, cloud storage, organisation intranet, etc. |

## Lotus Compassionate Care

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| **SCENARIO**  Two people looking at a paper  Description automatically generated with low confidence A few people having a discussion  Description automatically generated with low confidence A picture containing person, person, child, posing  Description automatically generated  You are working as a support worker at Lotus Compassionate Care. Lotus Compassionate Care is committed to providing high-quality care and support to people with disability, seniors and their carers living in the Cascade Peak Community.  [Lotus Compassionate Care](https://compliantlearningresources.com.au/network/lotus-v2/)  *(Username: newusername Password: newpassword)*  As a support worker, you are required to provide individualised support to clients.  This involves:   * Determining personal support requirements * Providing support services * Monitoring support activities * Completing reporting documentation   This case study includes scenarios relevant to providing individualised support to clients.  Review each scenario carefully and respond to each appropriately by completing the tasks that follow.  To assist you in completing the tasks in this assessment, access and review the following resources:   * [Lotus Compassionate Care – Staff Handbook](https://compliantlearningresources.com.au/network/lotus-v2/policies-procedures/) * [Lotus Compassionate Care – Client Records](https://compliantlearningresources.com.au/network/lotus-v2/client-records/)   **For the purposes of this assessment, Lotus Compassionate Care is located in your state/territory.** |

## Case Study 1 – Abraham

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| **SCENARIO**  C:\Users\abigail.c\Documents\2 - Transition Developments\Individual Support\Subject 1\6 - Images\Abraham Chatzkel.jpg  Abraham is a new client at Lotus Compassionate Care.  Abraham never married and has no kids of his own. Before moving to the centre, Abraham stayed with his niece, Abigail, her husband, Jacob, and their two daughters. Abigail is a stay-at-home mother, taking care of Abraham and her two kids.  Abigail’s husband recently accepted a job in a different state and moved there with the rest of the family. Abraham does not want to move with them and prefers to spend the rest of his life in his hometown, where he has spent most of his life.  Because of this, Abraham, Abigail, and Jacob decided that it would be best for Abraham to move to Lotus Compassionate Care, where he could be fully cared for.  Due to the distance, Abigail now visits Abraham at Lotus Compassionate Care three times a month.  **For the purposes of this assessment, Lotus Compassionate Care is located in your state/territory.** |

### Task 1.1 – Review the Client’s Individualised Support Plan

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| Application  Description automatically generated with low confidence | Access and carefully review the following:   * Abraham’s individualised support/care plan.   [Lotus Compassionate Care – Client Records](https://compliantlearningresources.com.au/network/lotus-v2/client-records/)   * Organisational policies and procedures for providing individualised support.   [Lotus Compassionate Care – Staff Handbook](https://compliantlearningresources.com.au/network/lotus-v2/policies-procedures/) |

### Task 1.2 – Meet with the Client and Their Family and Carers

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| **SCENARIO**  After reviewing Abraham’s individualised care plan and relevant policies and procedures, you are now ready to meet with him and his family/carer, Abigail.  In this meeting, you will review and confirm with them the support requirements, goals, needs, and preferences recorded in Abraham’s Care Plan. |

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| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Meet with the client and their family and carer/s. 2. During your meeting, review and confirm their support requirements, goals, needs, and preferences while being observed by the assessor. 3. Use **Lotus Compassionate Care’s Meeting Minutes Template** provided along with this workbook to document the minutes of this meeting.   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan. * Practical skills relevant to confirming and clarifying the client’s personal support requirements, goals, needs, and preferences. |
|  | **OBSERVATION FORM**  Before starting this task, review the **Case Study 1 Task 1.2 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the client   + One volunteer to act as the client’s family/carer. * Advise you on the time and location of the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteers on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of the minutes from your meeting to your assessor. |

### Task 1.3 – Conduct Risk Assessment

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| **SCENARIO**  Before proceeding with the support activities, you are required to conduct a risk assessment for Abraham. This will include identifying and assessing any risks associated with Abraham’s health, safety, and wellbeing that may affect service delivery.  You will be assisting and supporting Abraham by assessing the risks present in the **bathroom** where he performs some of his activities for daily living (ADLs) – showering, shaving, dressing, undressing, grooming, etc. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Conduct risk assessment prior to facilitating the required support activities while being observed by the assessor and supervised by your supervisor (volunteer). 2. The risk assessment you conduct must include the following:  * Identifying hazards and risks associated with these hazards. * Assessing the risks identified. * Seeking assistance for the hazards and risks that are beyond the scope of your role and responsibilities. * Reporting these outcomes to the supervisor.  1. Use the **Lotus Compassionate Care Risk Assessment Templates** provided along with this workbook (e.g., Hazard Identification Form, Health and Safety Checklist, Risk Register, etc.)   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of hazards and risks in individualised support. * Practical skills relevant to risk management, including identifying hazards, assessing risks, and referring risks. |

|  |  |
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|  | **OBSERVATION FORM AND ASSESSOR’S CHECKLIST**  Before starting this task, review the following forms provided along with this workbook.   * **Case Study 1 Task 1.3 – Observation Form**   This form lists all the practical skills you need to demonstrate while completing this task.   * **Case Study 1 Task 1.3 – Assessor’s Checklist**   This form lists the criteria your submission must address to complete this task satisfactorily.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the supervisor.   + One volunteer to act as the other support staff in the organisation.   + Resources to conduct risk management, including but not limited to:     - Areas to inspect * Advise you on the time and location of the assessment. * Discuss with you the requirements listed in the Assessor’s Checklist prior to the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteers on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of your risk assessment document to your assessor. |

**Logo, company name

Description automatically generated**

#### **Site Safety Inspection Form**

|  |  |
| --- | --- |
| Inspection completed by |  |
| Location |  |
| Date completed |  |

**Risk Rating Matrix**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Likelihood of an accident occurring as a result of this hazard | Potential consequence | | | | |
| Negligible | Minor | Moderate | Major | Severe |
| 1. Almost Certain | Medium | High | High | Very High | Very High |
| 1. Likely | Medium | Medium | High | High | Very High |
| 1. Possible | Low | Medium | Medium | High | High |
| 1. Unlikely | Low | Medium | Medium | Medium | High |
| 1. Rare | Low | Low | Low | Medium | Medium |

**Site Safety Inspection Checklist**

| **AREA** | **Likelihood of risk occurring** | **Consequence of risk** | **Risk rating** | **Comments** |
| --- | --- | --- | --- | --- |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Bathroom (all bathrooms in the client’s residence) | | | | |
| Non-slip flooring. |  |  |  |  |
| Change bench provided (where necessary). |  |  |  |  |
| Bathing aids provided where appropriate. |  |  |  |  |
| Wastewater drains in the floor. |  |  |  |  |
| Adequate storage for linen and toiletries. |  |  |  |  |
| Hoist provided (where necessary) |  |  |  |  |
| Appliances (for example, hair drier) kept away from water. |  |  |  |  |
| Appliances kept out of reach of children. |  |  |  |  |
| Exhaust fans are functioning. |  |  |  |  |

|  |  |
| --- | --- |
| Other comments |  |
| Recommendations |  |

End of Site Safety Inspection Form

### Task 1.4 – Prepare and Assemble the Aids, Equipment, and Devices Required by the Client

|  |
| --- |
| **SCENARIO**  As per his care plan, Abraham will require the following aids, devices/appliances, and equipment:   * Hearing aid * Dentures * A walking stick or foldable walking stick   You will need to prepare and assemble these before proceeding with the support activities. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | While being observed by your assessor, prepare, and assemble aids, devices/appliances, and equipment required by the client.  **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan, including the aids, devices/appliances, and equipment required by the person. * Practical knowledge and skills relevant to preparing and assembling aids, devices/appliances, and equipment.   **OBSERVATION FORM**  Before starting this task, review the **Case Study 1 Task 1.4 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task. |
|  | **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + Aids, devices/appliances, and equipment used by the client:     - Hearing aid     - Dentures     - A walking stick or foldable walking stick   + User manuals or manufacturers’ instructions for preparing and assembling these aids, devices/appliances, and equipment. * Advise you on the time and location of the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Address your queries and concerns regarding this task. |

### Task 1.5 – Facilitate Support Activities

|  |
| --- |
| **SCENARIO**  After completing the necessary preparations, you are now ready to facilitate the following support activities for Abraham:   * Bed bathing * Shaving * Dressing, undressing, and grooming * Eating and drinking * Oral hygiene * Toileting and the use of continence aids * Showering * Assisting a person in taking pre-packaged medication   Additionally, for the purposes of this assessment, you will also need to demonstrate the following:   * Transferring between bed and chair * Transferring from seated to standing position * Transferring in and out of the car following safe manual handling * Assisting Abraham in falls recovery |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Facilitate the following support activities for the client while being observed by the assessor.  * Bed bathing * Shaving * Dressing, undressing, and grooming * Eating and drinking * Oral hygiene * Toileting and the use of continence aids * Showering * Assisting them in taking pre-packaged medication * Transferring between bed and chair * Transferring from seated to standing position * Transferring in and out of the car following safe manual handling * Assisting Abraham in falls recovery  1. While completing this task, ensure that you:  * Follow Abraham’s individualised support/care plan. * Follow the organisation’s policies and procedures for providing support. * Follow written directions from the health professional, i.e., the medication schedule provided.   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan and relevant service standards, policies, and procedures. * Practical skills relevant to providing individualised support. |
|  |

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| --- | --- |
|  | **OBSERVATION FORM**  Before starting this task, review the **Case Study 1 Task 1.5 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the client (Abraham)   + Aids, devices/appliances, and equipment.   + Facilities, resources, and equipment used to provide individualised support in the following areas:     - Bed bathing     - Shaving     - Dressing, undressing, and grooming     - Eating and drinking     - Oral hygiene     - Toileting and the use of continence aids     - Showering     - Assisting a person in taking pre-packaged medication     - Transferring between bed and chair     - Transferring from seated to standing position     - Transferring in and out of the car     - Falls recovery * Advise you on the time and location of the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteer/s on their role in the assessment. * Address your queries and concerns regarding this task. |

### Task 1.6 – Monitor Support Activities

|  |
| --- |
| **SCENARIO**  After facilitating the support activities for Abraham, you will need to meet with him to get his feedback and insights on the support provided.  You will also need to check for any changes in his health and wellbeing that will require updates/improvements to be made in his care plan. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Meet with the client to monitor the effectiveness of support activities while being observed by the assessor. 2. In your discussion with the client, gather and determine the following:  * The client’s feedback on support activities and whether they are meeting their needs. * Any changes or improvements that can be made in the support activities. * Any potential or actual risks to the client’s health, safety, and wellbeing. * The client’s additional needs and unmet needs. * Gaps in assistive technology, including the aids, devices, and equipment used during the support activities.  1. After meeting the client, complete the Progress Notes to document the client’s feedback on the support activities, their progress, and your observations. Use **Lotus Compassionate Care’s Progress Notes Template.**   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan, including the client’s health, safety, and wellbeing. * Practical knowledge of support activities and relevant service standards, policies, and procedures. * Practical skills relevant to monitoring support activities. |

|  |  |
| --- | --- |
|  | **OBSERVATION FORM & ASSESSOR’S CHECKLIST**  Before starting this task, review the following forms provided along with this workbook.   * **Case Study 1 Task 1.6 – Observation Form**   This form lists all the practical skills you need to demonstrate while completing this task.   * **Case Study 1 Task 1.6 – Assessor’s Checklist**   This form lists the criteria your submission must address to complete this task satisfactorily.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the client * Advise you on the time and location of the assessment. * Discuss with you the requirements listed in the Assessor’s Checklist prior to the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteer/s on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit the progress notes you completed to your assessor. |

**Logo, company name

Description automatically generated**

#### **Progress Notes**

|  |  |
| --- | --- |
| Date and time |  |

**Client information**

|  |  |
| --- | --- |
| Name |  |
| Address |  |

**Worker information**

|  |  |
| --- | --- |
| Name |  |
| Position title |  |

**Tasks or duties performed at the service**

|  |
| --- |
|  |
|  |
|  |

**Additional notes/remarks**

|  |  |
| --- | --- |
|  | |
|  | |
|  | |
| Reviewer/Health Professional’s signature |  |

End of Progress Notes

### Task 1.7 – Report and Refer Client’s Progress

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| --- |
| **SCENARIO**  After meeting with Abraham, you will need to meet with your supervisor to report the outcomes of your discussion with Abraham, including the client’s feedback on the support activities and any changes or improvements that can be made in the individualised support delivery. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Meet with your supervisor to report the outcomes of your monitoring in Task 1.6 while being observed by the assessor. 2. In this meeting, report the following to your supervisor:  * The client’s feedback on support activities and whether they are meeting their needs. * Any changes or improvements that can be made in the support activities according to the client’s feedback. * Any potential or actual risks to the client’s health, safety, and wellbeing. * The client’s additional needs and unmet needs. * Gaps in assistive technology, including the aids, devices, and equipment used during the support activities.  1. In consultation with your supervisor, determine the appropriate referrals to be made for the additional and unmet needs you have identified. 2. Referrals may be to other health professionals, e.g., the client’s general practitioner, psychologist, physiotherapist, nurse, for pain management, etc. 3. Use **Lotus Compassionate Care’s Meeting Minutes Template** provided along with this workbook to document the minutes of this meeting. 4. When completing this task, ensure to follow your organisation’s policies and procedures for reporting clients’ progress and referrals. |

|  |  |
| --- | --- |
|  | **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan and relevant service standards, policies, and procedures. * Practical skills relevant to reporting and referring outcomes of your monitoring with your client.   **OBSERVATION FORM**  Before starting this task, review the **Case Study 1 Task 1.7 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the supervisor * Advise you on the time and location of the assessment. * Discuss with you the requirements listed in the Assessor’s Checklist prior to the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteer/s on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of the minutes from your meeting to your assessor. |

## Case Study 2 – Henry

|  |
| --- |
| **SCENARIO**    Henry is 76 years old and lives with Florence, his wife, in an apartment they have had for the past 20 years. He was diagnosed with advanced colon cancer after experiencing severe abdominal pain, constipation, mobility issues and weakness. He has recently undergone surgery and requires assistance with the following:   * Changing his colostomy bag * Managing his pain * Ensuring that he takes his medication on time * Shifting to difficult positions, such as when entering his car   Due to the difficulty of managing Henry’s symptoms, Florence sought home care services from Lotus Compassionate Care.  **For the purposes of this assessment, Lotus Compassionate Care is located in your state/territory. For the purposes of this assessment, Lotus Compassionate Care is located in your state/territory.** |

### Task 2.1 – Review the Client’s Individualised Support Plan

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | Access and carefully review the following:   * Henry’s individualised support/care plan.   [Lotus Compassionate Care – Client Records](https://compliantlearningresources.com.au/network/lotus-v2/client-records/)   * Organisational policies and procedures for providing individualised support.   [Lotus Compassionate Care – Staff Handbook](https://compliantlearningresources.com.au/network/lotus-v2/policies-procedures/) |

### Task 2.2 – Meet with the Client and Their Family and Carers

|  |
| --- |
| **SCENARIO**  After reviewing Henry’s individualised care plan and relevant policies and procedures, you are now ready to meet with him and his family/carer, Florence.  In this meeting, you will review and confirm with them the support requirements, goals, needs, and preferences recorded in Henry’s Care Plan. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Meet with the client and their family and carer/s. 2. During your meeting, review and confirm their support requirements, goals, needs, and preferences while being observed by the assessor. 3. Use **Lotus Compassionate Care’s Meeting Minutes Template** provided along with this workbook to document the minutes of this meeting.   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan. * Practical skills relevant to confirming and clarifying the client’s personal support requirements, goals, needs, and preferences. |
|  | **OBSERVATION FORM**  Before starting this task, review the **Case Study 2 Task 2.2 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the client   + One volunteer to act as the client’s family/carer. * Advise you on the time and location of the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteers on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of the minutes from your meeting to your assessor. |

### Task 2.3 – Conduct Risk Assessment

|  |
| --- |
| **SCENARIO**  Before proceeding with the support activities, you are required to conduct a risk assessment for Henry. This will include identifying and assessing any risks associated with Henry’s health, safety, and wellbeing that may affect service delivery.  You will be assisting and supporting Henry by assessing the risks present in the **bathroom,** where he performs some of his activities for daily living (ADLs) – showering, shaving, dressing, undressing, grooming, etc. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Conduct risk assessment prior to facilitating the required support activities while being observed by the assessor and supervised by your supervisor (volunteer). 2. The risk assessment you conduct must include the following:  * Identifying hazards and risks associated with these hazards. * Assessing the risks identified. * Seeking assistance for the hazards and risks that are beyond the scope of your role and responsibilities. * Reporting these outcomes to the supervisor.  1. Use the **Lotus Compassionate Care Risk Assessment Templates** provided along with this workbook (e.g., Hazard Identification Form, Health and Safety Checklist, Risk Register, etc.)   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of hazards and risks in individualised support. * Practical skills relevant to risk management, including identifying hazards, assessing risks, and referring risks. |

|  |  |
| --- | --- |
|  | **OBSERVATION FORM AND ASSESSOR’S CHECKLIST**  Before starting this task, review the following forms provided along with this workbook.   * **Case Study 2 Task 2.3 – Observation Form**   This form lists all the practical skills you need to demonstrate while completing this task.   * **Case Study 2 Task 2.3 – Assessor’s Checklist**   This form lists the criteria your submission must address to complete this task satisfactorily.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the supervisor.   + One volunteer to act as the other support staff in the organisation.   + Resources to conduct risk management, including but not limited to:     - Areas to inspect * Advise you on the time and location of the assessment. * Discuss with you the requirements listed in the Assessor’s Checklist prior to the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteers on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of your risk assessment document to your assessor. |

**Logo, company name

Description automatically generated**

#### **Site Safety Inspection Form**

|  |  |
| --- | --- |
| Inspection completed by |  |
| Location |  |
| Date completed |  |

**Risk Rating Matrix**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Likelihood of an accident occurring as a result of this hazard | Potential consequence | | | | |
| Negligible | Minor | Moderate | Major | Severe |
| 1. Almost Certain | Medium | High | High | Very High | Very High |
| 1. Likely | Medium | Medium | High | High | Very High |
| 1. Possible | Low | Medium | Medium | High | High |
| 1. Unlikely | Low | Medium | Medium | Medium | High |
| 1. Rare | Low | Low | Low | Medium | Medium |

**Site Safety Inspection Checklist**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **AREA** | **Likelihood of risk occurring** | **Consequence of risk** | **Risk rating** | **Comments** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Bathroom (all bathrooms in the client’s residence) | | | | |
| Non-slip flooring. |  |  |  |  |
| Change bench provided (where necessary). |  |  |  |  |
| Bathing aids provided where appropriate. |  |  |  |  |
| Wastewater drains in the floor. |  |  |  |  |
| Adequate storage for linen and toiletries. |  |  |  |  |
| Hoist provided (where necessary) |  |  |  |  |
| Appliances (for example, hair drier) kept away from water. |  |  |  |  |
| Appliances kept out of reach of children. |  |  |  |  |
| Exhaust fans are functioning. |  |  |  |  |

|  |  |
| --- | --- |
| Other comments |  |
| Recommendations |  |

End of Site Safety Inspection Form

### Task 2.4 – Prepare and Assemble the Aids, Equipment, and Devices Required by the Client

|  |
| --- |
| **SCENARIO**  As per his care plan, Henry will require the following aids, devices/appliances, and equipment:   * Colostomy bag * Person hoist * Cold compress   You will need to prepare and assemble these before proceeding with the support activities. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | While being observed by your assessor, prepare, and assemble aids, devices/appliances, and equipment required by the client.  **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan, including the aids, devices/appliances, and equipment required by the person. * Practical knowledge and skills relevant to preparing and assembling aids, devices/appliances, and equipment.   **OBSERVATION FORM**  Before starting this task, review the **Case Study 2 Task 2.4 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task. |

|  |  |
| --- | --- |
|  | **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + Aids, devices/appliances, and equipment used by the client:     - Colostomy bag     - Person hoist     - Cold compress   + User manuals or manufacturers’ instructions for preparing and assembling these aids, devices/appliances, and equipment. * Advise you on the time and location of the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Address your queries and concerns regarding this task. |

### Task 2.5 – Facilitate Support Activities

|  |
| --- |
| **SCENARIO**  After completing the necessary preparations, you are now ready to facilitate the following support activities for Henry:   * Bed bathing * Shaving * Changing the colostomy bag * Assisting a person in taking pre-packaged medication   Additionally, for the purposes of this assessment, you will also need to demonstrate the following:   * Assisting Henry in transferring in and out of the car * Assisting Henry in falls recovery, specifically transferring from the floor to a wheelchair |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Facilitate the following support activities for the client while being observed by the assessor.  * Bed bathing * Shaving * Changing the colostomy bag * Assisting them in taking pre-packaged medication * Transferring to transfer from a wheelchair to a car * Assisting Henry in falls recovery, specifically transferring from the floor to a wheelchair. |

|  |  |
| --- | --- |
|  | 1. While completing this task, ensure that you:  * Follow Henry’s individualised support/care plan. * Follow the organisation’s policies and procedures for providing support. * Follow written directions from the health professional, i.e., the medication schedule provided.   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan and relevant service standards, policies, and procedures. * Practical skills relevant to providing individualised support.   **OBSERVATION FORM**  Before starting this task, review the **Case Study 2 Task 2.5 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the client (Henry)   + Aids, devices/appliances, and equipment.   + Facilities, resources, and equipment used to provide individualised support in the following areas:     - Bed bathing     - Shaving     - Assisting a person in taking pre-packaged medication     - Transferring in and out of the car     - Falls recovery |

|  |  |
| --- | --- |
|  | * Advise you on the time and location of the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteer/s on their role in the assessment. * Address your queries and concerns regarding this task. |

### Task 2.6 – Monitor Support Activities

|  |
| --- |
| **SCENARIO**  After facilitating the support activities for Henry, you will need to meet with him to get his feedback and insights on the support provided.  You will also need to check for any changes in his health and wellbeing that will require updates/improvements to be made in his care plan. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Meet with the client to monitor the effectiveness of support activities while being observed by the assessor. 2. In your discussion with the client, gather and determine the following:  * The client’s feedback on support activities and whether they are meeting their needs. * Any changes or improvements that can be made in the support activities. * Any potential or actual risks to the client’s health, safety, and wellbeing. * The client’s additional needs and unmet needs. * Gaps in assistive technology, including the aids, devices, and equipment used during the support activities.  1. After meeting the client, complete the Progress Notes to document the client’s feedback on the support activities, their progress, and your observations. Use **Lotus Compassionate Care’s Progress Notes Template.**   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan, including the client’s health, safety, and wellbeing. * Practical knowledge of support activities and relevant service standards, policies, and procedures. * Practical skills relevant to monitoring support activities. |

|  |  |
| --- | --- |
|  | **OBSERVATION FORM & ASSESSOR’S CHECKLIST**  Before starting this task, review the following forms provided along with this workbook.   * **Case Study 2 Task 2.6 – Observation Form**   This form lists all the practical skills you need to demonstrate while completing this task.   * **Case Study 2 Task 2.6 – Assessor’s Checklist**   This form lists the criteria your submission must address to complete this task satisfactorily.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the client * Advise you on the time and location of the assessment. * Discuss with you the requirements listed in the Assessor’s Checklist prior to the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteer/s on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit the progress notes you completed to your assessor. |

**Logo, company name

Description automatically generated**

#### **Progress Notes**

|  |  |
| --- | --- |
| Date and time |  |

**Client information**

|  |  |
| --- | --- |
| Name |  |
| Address |  |

**Worker information**

|  |  |
| --- | --- |
| Name |  |
| Position title |  |

**Tasks or duties performed at the service**

|  |
| --- |
|  |
|  |
|  |

**Additional notes/remarks**

|  |  |
| --- | --- |
|  | |
|  | |
|  | |
| Reviewer/Health Professional’s signature |  |

End of Progress Notes

### Task 2.7 – Report and Refer Client’s Progress

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| --- |
| **SCENARIO**  After meeting with Henry, you will need to meet with your supervisor to report the outcomes of your discussion with Henry, including the client’s feedback on the support activities and any changes or improvements that can be made in the individualised support delivery. |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | This part of the assessment is a **Role Play Activity.**  **STEPS TO TAKE**   1. Meet with your supervisor to report the outcomes of your monitoring in Task 2.6 while being observed by the assessor. 2. In this meeting, report the following to your supervisor:  * The client’s feedback on support activities and whether they are meeting their needs. * Any changes or improvements that can be made in the support activities according to the client’s feedback. * Any potential or actual risks to the client’s health, safety, and wellbeing. * The client’s additional needs and unmet needs. * Gaps in assistive technology, including the aids, devices, and equipment used during the support activities.  1. In consultation with your supervisor, determine the appropriate referrals to be made for the additional and unmet needs you have identified. 2. Referrals may be to other health professionals, e.g. the client’s general practitioner, psychologist, physiotherapist, nurse, for pain management, etc. 3. Use **Lotus Compassionate Care’s Meeting Minutes Template** provided along with this workbook to document the minutes of this meeting. 4. When completing this task, ensure to follow your organisation’s policies and procedures for reporting clients’ progress and referrals. |

|  |  |
| --- | --- |
|  | **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the person’s individualised support/care plan and relevant service standards, policies, and procedures. * Practical skills relevant to reporting and referring outcomes of your monitoring with your client.   **OBSERVATION FORM**  Before starting this task, review the **Case Study 2 Task 2.7 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + One volunteer to act as the supervisor * Advise you on the time and location of the assessment. * Discuss with you the requirements listed in the Assessor’s Checklist prior to the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteer/s on their role in the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of the minutes from your meeting to your assessor. |

## Case Study 3 – Mobility Equipment

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| --- |
| **SCENARIO**    In this part of the assessment, you have been requested to demonstrate the use of the following equipment to a number of trainees at Lotus Compassionate Care:   * Slide sheets * Hoist with slings * Stand-up lifter   **For the purposes of this assessment, Lotus Compassionate Care is located in your state/territory. For the purposes of this assessment, Lotus Compassionate Care is located in your state/territory.** |

### Task 3.1 – Demonstrate Assistive Technologies

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | While being observed by your assessor, demonstrate the use of the following equipment:   * Slide sheets * Hoist with slings * Stand-up lifter   To complete this task, you will need the help of a volunteers who will act as:   * The client/person you are moving * Another support worker assisting in moving the client   **YOU WILL BE ASSESSED ON YOUR**   * Practical knowledge of the instructions for using slide sheets, hoists, slings, and lifters. * Practical skills relevant to using slide sheets, hoists, slings, and lifters.   **OBSERVATION FORM**  Before starting this task, review the **Case Study 3 Task 3.1 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **YOUR ASSESSOR WILL**   * Organise access to the environment and resources required to complete this assessment, including:   + Slide sheets   + Hoist with slings   + Stand-up lifter * Advise you on the time and location of the assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Brief you on your role in this assessment. * Brief your volunteer/s on their role in the assessment. * Address your queries and concerns regarding this task. |

# Supplementary Questions

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | 1. Outline the procedures for providing support in **bed bathing**, including preparing for the bath and during the bed bath.   Base your responses on the individualised plans you followed in the case studies. |
|  | |
| **Preparing the bath** | |
| *Add more rows as needed.* | |

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| **During the bed bath** |
| *Add more rows as needed.* |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | 1. Outline the procedures for providing support in **shaving.**   Base your responses on the individualised plans you followed in the case studies. |
|  | |
| *Add more rows as needed.* | |

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| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Outline the procedures for **safe manual handling for transferring in and out of a car.** | |
|  | |
| **Transferring into a car** | | |
| *Add more rows as needed.* | | |

|  |
| --- |
| **Transferring the client out of the car** |
| *Add more rows as needed.* |

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | 1. Outline the procedures for **safe manual handling for assisting a person in falls recovery.** |
|  | |
| *Add more rows as needed.* | |

# Assessment Workbook Checklist

|  |  |
| --- | --- |
| **TO THE CANDIDATE**  When you have completed this assessment workbook, review your work, and ensure that: | |
|  | |
|  | You have completed the Simulated Assessments in this workbook: |
|  | Case Study 1 Task 1.1 |
|  | Case Study 1 Task 1.2 |
|  | Case Study 1 Task 1.3 |
|  | Case Study 1 Task 1.4 |
|  | Case Study 1 Task 1.5 |
|  | Case Study 1 Task 1.6 |
|  | Case Study 1 Task 1.7 |
|  | Case Study 2 Task 2.1 |
|  | Case Study 2 Task 2.2 |
|  | Case Study 2 Task 2.3 |
|  | Case Study 2 Task 2.4 |
|  | Case Study 2 Task 2.5 |
|  | Case Study 2 Task 2.6 |
|  | Case Study 2 Task 2.7 |
|  | Case Study 3 Task 3.1 |

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| --- | --- |
|  | You have completed the Supplementary Questions in this workbook |
|  | You have saved and submitted the following evidence: |
|  | This completed workbook |
|  | Assessment Workbook Cover Sheet signed and scanned |
|  | Case Study 1 Task 1.2 – Meeting Minutes |
|  | Case Study 1 Task 1.3 – Relevant Risk Assessment Document |
|  | Case Study 1 Task 1.6 – Progress Notes |
|  | Case Study 1 Task 1.7 – Meeting Minutes |
|  | Case Study 2 Task 2.2 – Meeting Minutes |
|  | Case Study 2 Task 2.3 – Relevant Risk Assessment Document |
|  | Case Study 2 Task 2.6 – Progress Notes |
|  | Case Study 2 Task 2.7 – Meeting Minutes |

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| **IMPORTANT:**  **You must achieve a satisfactory result in ALL assessment tasks to be deemed COMPETENT for the unit/s relevant to this workbook.**  To be deemed satisfactory in the assessments contained in this workbook, you must successfully complete all the requirements listed above according to the prescribed benchmarks provided to the assessor. |

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| --- | --- |
| **TO THE ASSESSOR**  When you have completed assessing the assessment workbook, review the candidate’s submissions against the checklist below: | |
|  | |
|  | The candidate has completed the Practical Assessments in this workbook: |
|  | Case Study 1 Task 1.1 |
|  | Case Study 1 Task 1.2 |
|  | Case Study 1 Task 1.3 |
|  | Case Study 1 Task 1.4 |
|  | Case Study 1 Task 1.5 |
|  | Case Study 1 Task 1.6 |
|  | Case Study 1 Task 1.7 |
|  | Case Study 2 Task 2.1 |
|  | Case Study 2 Task 2.2 |
|  | Case Study 2 Task 2.3 |
|  | Case Study 2 Task 2.4 |
|  | Case Study 2 Task 2.5 |
|  | Case Study 2 Task 2.6 |
|  | Case Study 2 Task 2.7 |
|  | Case Study 3 Task 3.1 |

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| --- | --- |
|  | The candidate has completed the Supplementary Questions in this workbook. |
|  | The candidate has saved and submitted the following evidence: |
|  | This completed workbook |
|  | Assessment Workbook Cover Sheet signed and scanned |
|  | Case Study 1 Task 1.2 – Meeting Minutes |
|  | Case Study 1 Task 1.3 – Relevant Risk Assessment Document |
|  | Case Study 1 Task 1.6 – Progress Notes |
|  | Case Study 1 Task 1.7 – Meeting Minutes |
|  | Case Study 2 Task 2.2 – Meeting Minutes |
|  | Case Study 2 Task 2.3 – Relevant Risk Assessment Document |
|  | Case Study 2 Task 2.6 – Progress Notes |
|  | Case Study 2 Task 2.7 – Meeting Minutes |

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| **IMPORTANT:**  **The candidate must achieve a satisfactory result in ALL assessment tasks to be deemed COMPETENT for the unit/s relevant to this workbook.**  To be deemed satisfactory in the assessments contained in this workbook, the candidate must successfully complete all the requirements listed above according to the prescribed benchmarks. |

# Record of Assessment (Assessor’s Use Only)

|  |  |
| --- | --- |
| **RECORD OF ASSESSMENT** | |
| **Candidate’s Name** |  |
| **RTO Name** |  |
| **RTO Contact Number** |  |
| **RTO Email Address** |  |
| **Assessor’s Name** |  |
| **Unit of Competency** | CHCCCS031 - Provide individualised support (Release 1) |

|  |  |  |
| --- | --- | --- |
| **Practical Assessment - Simulated Assessment** | | |
| **Case Study 1 – Abraham** | **S** | **NYS** |
| Task 1.1 |  |  |
| Task 1.2 |  |  |
| Task 1.3 |  |  |
| Task 1.4 |  |  |
| Task 1.5 |  |  |
| Task 1.6 |  |  |
| Task 1.7 |  |  |
| **Case Study 2 – Henry** | **S** | **NYS** |
| Task 2.1 |  |  |
| Task 2.2 |  |  |
| Task 2.3 |  |  |
| Task 2.4 |  |  |

|  |  |  |
| --- | --- | --- |
| **Case Study 2 – Henry** | **S** | **NYS** |
| Task 2.5 |  |  |
| Task 2.6 |  |  |
| Task 2.7 |  |  |
| **Case Study 3 – Mobility Equipment** | **S** | **NYS** |
| Task 3.1 |  |  |

|  |  |  |
| --- | --- | --- |
| **Supplementary Questions** | **S** | **NYS** |
| Question 1 |  |  |
| Question 2 |  |  |
| Question 3 |  |  |
| Question 4 |  |  |

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| --- | --- | --- |
| **Rules of Evidence** | **S** | **NYS** |
| All knowledge and skills evidence submissions are valid |  |  |
| All knowledge and skills evidence submissions are authentic |  |  |
| All knowledge and skills evidence submissions are sufficient |  |  |
| All knowledge and skills evidence submissions are current |  |  |

|  |  |
| --- | --- |
| **Signature Authentication Checklist**  This checklist will guide you in authenticating the signatures provided by the candidate in their assessment workbook and evidence submissions.  Read each checklist item and tick the box only if you confirm that the item is a true and accurate reflection of the signature authentication you have conducted. | |
| **Checklist** | **Completed** |
| I have checked the signature provided by the candidate in the Assessment Workbook Cover Sheet against the signature they provided to the Training Provider. |  |
| I confirm the signature provided by the candidate in the Assessment Workbook Cover Sheet matches the signature they provided to the Training Provider. |  |
| I confirm ALL signatures provided by the candidate in their evidence submissions match with the signature they provided to the Training Provider. |  |

|  |
| --- |
| **Third-Party Verification Log**  **Instructions for the Assessor:**  You are required to contact all third-party personnel involved in the candidate’s assessment to verify the candidate’s performance and evidence submissions and to confirm with them whether the candidate’s evidence submissions are true and accurate.  Complete this Third-Party Verification Log to document your completion of this process. When completing this log, provide all of the following required information for each third-party personnel:   * Name of third-party personnel contacted * Role in the candidate’s assessment (e.g. workplace supervisor, observer, or candidate) * Contact details (phone number or email address) * Date contacted   You must also confirm that third-party personnel have verified the candidate’s evidence submissions are true and accurate. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Third-party Contacted** | **Role in the Candidate’s Assessment** | **Contact Details (Phone number or email address)** | **Date contacted** | **Third-Party verifies evidence submissions of the candidate are true and accurate?** |
|  |  |  |  | Yes  No  Assessor’s Notes |
|  |  |  |  | Yes  No  Assessor’s Notes |
|  |  |  |  | Yes  No  Assessor’s Notes |
|  |  |  |  | Yes  No  Assessor’s Notes |

|  |  |  |
| --- | --- | --- |
| **Overall Result for the Relevant Workbook/s** | **Satisfactory** | **Not yet satisfactory** |
| Assessment Workbook – Part A (Knowledge Assessment) |  |  |
| Assessment Workbook – Part B (Simulated Assessment) |  |  |
| Skills Workbook |  |  |

|  |  |  |
| --- | --- | --- |
| **Overall Result for this Unit of Competency**  **IMPORTANT: To be deemed competent in the following unit of competency, the candidate must be marked Satisfactory in all the relevant workbook/s listed above.** | **Competent** | **Not yet competent** |
| CHCCCS031 - Provide individualised support (Release 1) |  |  |

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| --- |
| **Assessor’s comments/feedback** |
|  |

|  |  |
| --- | --- |
| **Assessor Declaration**  I declare that the results recorded in this *Record of Assessment* are true and accurate. | |
| Assessor’s name | Assessor’s signature |
| Date signed |

End of Record of Assessment (For the Assessor’s Use Only)

**End of Document**