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# Introduction

This workbook contains the Practical Assessment.

The **Practical Assessment** is made up of the **Practical Assignment and Workplace 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.

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 a 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>

# Vocational Placement

## Vocational Placement Component Included in this Unit of Competency

To complete **CHCCCS031 - Provide individualised support (Release 1)**, a vocational placement is required in a workplace, which must be a direct support work environment in at least one aged care, home and community, disability, or community service organisation. Information regarding vocational placement can be found in the Vocational Placement Student Information booklet.

The selected vocational placement workplace must be accredited. This ensures that the centre has adequate resources, which include supervisory staff and equipment to allow you to complete all the assessment tasks required by the course.

The supervisor who supervises you must have a qualification in direct support work in aged care, home and community, disability, or community service and be in a position of authority to provide you guidance and supervision as you complete your assessments in the workplace.

## Competency-Based Assessment in Vocational Placement

Competency-based assessment requires candidates to be able to demonstrate their competency consistently.

**IMPORTANT: Ensure that your Vocational Placement Supervisor is aware that they need to include comments about their observation.**

Once you have submitted your completed Skills Workbook, your Assessor will assess the evidence to determine your competence. The assessor will look at the information and comments that the supervisor has provided, and they will determine whether each task has been done satisfactorily.

To be deemed competent in each unit, you are required to achieve a satisfactory result for all of the assessment components that make up that unit. Where a ‘not yet satisfactory’ judgement is made, you will be given guidance on steps to take to improve your performance and be provided with the opportunity to resubmit evidence to demonstrate competence. Once a ‘satisfactory’ judgement has been made on all components for a unit, you will be deemed ‘competent’ in that unit.

## Who is Involved in the Candidate’s Vocational Placement and Assessment?

The following personnel are involved in the candidate’s vocational placement and assessment.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **The Candidate** |  | **The Vocational Placement Supervisor** |  | **The Assessor** |
| * Complies with relevant workplace policies and procedures and takes directions from the vocational placement supervisor * Undertakes the assessments in this Skills Workbook while demonstrating the skills relevant to the unit of competency * Is responsible for organising and submitting their evidence to their assessor for assessment. |  | * Facilitates opportunities for candidates to gain valuable workplace skills and experience a real workplace. * Instructs and supervises the candidate as they complete the assessment activities included in the Skills Workbook. * Verifies the evidence submitted by the candidate with the assessor and confirms that the evidence is authentic. * Coordinates with the assessor to organise workplace resources required for assessment, as needed. |  | * Coordinates with the vocational placement supervisor to organise workplace resources required for assessment, as needed. * Directly observes the candidate while they complete assessment tasks in the workplace. * Gathers evidence of the candidate’s competency in the relevant units. * Assesses candidate’s evidence against the defined benchmarks and makes the final judgement on whether they are Competent or Not Yet Competent. |

### Supervisor Guidelines

The role of the Vocational Placement Supervisor is to facilitate learning opportunities for, instruct, and supervise the candidate while they are in vocational placement.

|  |  |
| --- | --- |
| Diagram, icon  Description automatically generated | **TO THE SUPERVISOR**  As the vocational placement provider and supervisor, you have a responsibility to the student to:   * Provide supervised learning opportunities within a safe environment, which meet the objectives of the training plan, * Keep all of the student's details confidential and provide them with the same privacy and confidentiality afforded to staff |

|  |  |
| --- | --- |
|  | * Carry out a thorough and documented orientation and induction of the student at the commencement of the vocational placement, * Familiarise the student with the worksite, amenities, equipment, relevant staff, reporting structure, and coaching support, * Select learning experiences for the student in accordance with the training plan, and * Work with the assessor to help prepare the assessment environment within the workplace, as needed. |

### Vocational Placement Provider Guidelines

The role of the Vocational Placement Provider is to provide the candidate access to the resources required for assessment ([**outlined here**](#_Resources_Required_for)).

|  |  |
| --- | --- |
| Diagram, icon  Description automatically generated | **TO THE VOCATIONAL PLACEMENT PROVIDER:**   * The candidate’s attendance should be organised for a 7.5-hour day, wherever possible, with a lunch break of half an hour (unless otherwise arranged). The start and finish times should vary to allow the candidate to experience a variety of hours as expected in the industry. * Candidates should attend their Vocational Placement on the days that have been arranged with the Vocational Placement Provider and the Registered Training Organisation (RTO). * Candidates should become part of the team and assist others as required. * At the start of the Vocational Placement, the candidate is required to gather information to aid in their understanding of the philosophy and policies in place within the organisation. * The Vocational Placement Supervisor will supervise the candidate during their placement, observe their performance in the workplace, and provide feedback on the candidate’s performance by adding comments in the Skills Workbook. |

### Candidate Guidelines

The key role of the candidate is to learn and demonstrate knowledge and practical skills in the relevant unit of competency.

|  |  |
| --- | --- |
| Diagram, icon  Description automatically generated | **TO THE CANDIDATE**   * If you cannot attend anytime during your Vocational Placement, you must notify the Vocational Placement Provider as early as possible so that they are aware that you will not be attending. * The duties that you are assigned during your Vocational Placement will always be under the supervision of a vocational supervisor/staff member who is available to take responsibility for the client/s. * Remember that you are there to learn. * You are required to behave appropriately at all times and follow the Vocational Placement Provider guidelines, policies and procedures. * You should try to become part of the team and be involved in the day-to-day workings of the Vocational Placement Provider. * You need to present yourself in a neat and tidy manner as per the guidelines at the Vocational Placement Provider you attend, and you may be required to wear a uniform. |

|  |
| --- |
| **IMPORTANT**  **Before you start your Vocational Placement**, thoroughly read through the Skills Workbook and locate the vocational workplace forms and templates. Where required, contact your assessor for assistance.  **Before you approach your supervisor so they can review your Skills Workbook**, please ensure you are ready to direct them to the appropriate sections because they may be very busy, and this will make the process easier for both of you. |

## The Skills Workbook

To accomplish the required vocational placement component for **CHCCCS031 - Provide individualised support (Release 1)**, the candidate must complete the assessments contained in this Skills Workbook.

The candidate takes this Skills Workbook with them to be completed during their vocational placement.

This Skills Workbook contains:

* Assessment activities the candidate needs to complete during their vocational placement.
* Instructions and guidance for completing these activities satisfactorily.
* Assessment forms and templates that need to be accomplished as part of the assessment.
* List of evidence they need to provide and submit to their assessor.

A picture containing whiteboard

Description automatically generated

The candidate must review and discuss the Skills Workbooks with their vocational placement supervisor on the first day of vocational placement.

The role of the vocational placement supervisor then is to:

* Organise opportunities within the vocational placement setting where the candidate can complete these assessment activities.
* Facilitate the candidate’s access to the resources and conditions required for assessment.
* Provide instruction and guidance and supervise the candidate as they undertake these assessment activities within the vocational placement setting.
* Review and sign-off on the candidate’s evidence submissions and provide further verification and authentication to these submissions.

The Skills Workbook, along with other evidence, is then submitted by the candidate to their assessor.

The assessor uses the information within the Skills Workbooks and evidence to decide whether the candidate can be deemed satisfactory at the relevant tasks.

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### For Skills Workbook-related Questions or Concerns

Should the supervisor or candidate have any concerns or questions about the Skills Workbook, they must contact the candidate’s training organisation. A representative from the training organisation will assist with any concerns or questions.

# The Context of Assessment

To complete the assessments in this workbook, candidates need to have access to a workplace.

The Practical Assessment contained in this Skills Workbook must be completed in a direct support work environment in at least one aged care, home and community, disability, or community service organisation.

# Assessment Methods

This workbook uses the following assessment methods:

1. **Practical Assignment**

A series of written practical tests assessing the candidate’s practical knowledge and understanding of the unit of competency.

1. **Workplace Assessment**

A set of tasks or activities completed according to set instructions and guidelines to meet the requirements of the relevant unit. These tasks and activities require you to have access to a workplace.

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 Training Organisation to provide the candidate with access to/organise the following for the candidate:**

* Assessor to supervise and observe the candidate as they complete assessments, where required.
* Direct support work environment in at least one aged care, home and community, disability, or community service organisation that will allow them access to:
  + Workplace supervisor
  + Other support staff in the organisation
  + Other health professionals for referring client’s additional/unmet needs, e.g., the client’s general practitioner, psychologist, physiotherapist, or nurse, for pain management
  + Individual support clients, their family members and carer/s, as well as:
    - Volunteers to participate in simulated activities and act as individual support clients, their family members and carer/s
  + Clients’ individualised support plans/care plans.
  + Organisational policies and procedures relevant to providing individualised support, including:
    - Assembly of equipment, devices, and aids
    - Dignity of risk
    - Duty of care
    - Health and safety
    - Infection control
    - Maintaining and storing documents and reports
    - Maintaining client privacy and confidentiality
    - Providing and monitoring individualised support
    - Referrals
    - Reporting and documentation
    - Restrictive practices
    - Safe manual handling
  + Aids, devices/appliances, and equipment used by the clients, e.g., wheelchair, walking stick or cane, hearing aid, etc., as well as:
    - User manuals or manufacturers’ instructions for preparing and assembling these aids, devices/appliances, and equipment.
  + Workplace 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
  + Resources to conduct risk management, including but not limited to:
    - Areas to inspect
    - Resources to eliminate or minimise risks, e.g., personal protective equipment (PPE), cleaning equipment, etc.
  + Processes and procedures, as well as facilities, resources, and equipment used to provide individualised support in the following areas:
    - Dressing, undressing and grooming
    - Eating and drinking using required mealtime assistance techniques and equipment, ensuring the client has physical access
    - 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
  + Facilities, resources, and equipment to maintain and store individual support documentation and reports, including:
    - Individual support documentation and reports
    - Computer, filing cabinets, cloud storage, organisation intranet, etc.

**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

# Skills Workbook Cover Sheet

**To the candidate:** Print this cover sheet and declaration found on the next page. Complete both 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 SWB Cover Sheet**

|  |  |
| --- | --- |
| Workbook | CHCCCS031 Skills Workbook |
| Title | Provide individualised support (Release 1) |
| Candidate First and Last Name |  |
| Candidate Phone |  |
| Candidate Email |  |
| Vocational Placement Provider |  |
| Vocational Placement Contact Person (Supervisor) |  |
| Vocational Placement Postal Address |  |
| Vocational Placement Contact Phone No |  |

|  |
| --- |
| **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. |

|  |
| --- |
| Candidate’s name: |
| Candidate’s signature: |
| Date signed: |

End of Skills Workbook Cover Sheet

# Practical Assessment

## Candidate Instructions

The Practical Assessment is a set of tasks that must be completed in a workplace.

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

The Practical Assessment includes the following:

1. **Practical Assignment**

A series of written practical tests assessing the candidate’s practical knowledge and understanding of the unit of competency.

1. **Workplace Assessment**

A set of tasks or activities completed according to set instructions and guidelines to meet the requirements of the relevant unit. These tasks and activities require you to have access to a workplace.

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.

# Practical Assignment

## Overview

|  |
| --- |
| **The goal of this practical assignment is to assess your practical knowledge of:**   * Organisational policies and procedures relating to:   + Restrictive practices   + Infection control   + Assembly of equipment, aids, and appliances   + Privacy and confidentiality of personal information   + Monitoring support activities and identifying requirements for change   + Referrals   + Documenting and reporting   **This assessment is divided into seven tasks:**   1. Task 1 – Restrictive Practices Policies and Procedures 2. Task 2 – Infection Control Policies and Procedures 3. Task 3 – Assembly of Equipment, Aids, and Appliances Policies and Procedures 4. Task 4 – Privacy and Confidentiality of Personal Information Policies and Procedures 5. Task 5 – Monitoring Support Activities and Identifying Requirements for Change Policies and Procedures 6. Task 6 – Referrals Policies and Procedures 7. Task 7 – Documenting and Reporting Policies and Procedures   These tasks need to be done within the context of direct support in at least one aged care, home and community, disability, or community service organisation. |

|  |
| --- |
| **You are required to:**   * Access and review your organisation’s policies and procedures. * Review the instructions for each task included in this Practical Assignment. * Record your responses as required in the instructions for each task.   **Resources required for assessment:**   * Organisational policies and procedures relating to:   + Restrictive practices   + Infection control   + Assembly of equipment, aids and appliances   + Privacy and confidentiality of personal information   + Monitoring support activities and identifying requirements for change   + Referrals   + Documenting and reporting   Contact your Assessor/Training Provider to get some assistance in accessing the resources required for the assessment listed here. |

### Task 1 – Restrictive Practices Policies and Procedures

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | Summarise below your organisation’s policies and procedures relating to **restrictive practices.**  Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | | |
| Policies | |  | |
| Procedures | |  | |

### Task 2 – Infection Control Policies and Procedures

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | Summarise below your organisation’s policies and procedures relating to **infection control.**  Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | | |
| Policies | |  | |
| Procedures | |  | |

### Task 3 – Assembly of Equipment, Aids, and Appliances Policies and Procedures

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | Summarise below your organisation’s policies and procedures relating to the **assembly of equipment, aids, and appliances.**  Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

### Task 4 – Privacy and Confidentiality of Personal Information Policies and Procedures

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Summarise below your organisation’s policies and procedures relating to **privacy.**   Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Summarise below your organisation’s policies and procedures relating to the **confidentiality of personal information.**   Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

### Task 5 – Monitoring Support Activities and Identifying Requirements for Change Policies and Procedures

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Summarise below your organisation’s policies and procedures relating to **monitoring support activities.**   Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Summarise below your organisation’s policies and procedures relating to **identifying requirements for change.**   Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

### Task 6 – Referrals Policies and Procedures

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | Summarise below your organisation’s policies and procedures relating to **referrals.**  Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

### Task 7 – Documenting and Reporting Policies and Procedures

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Summarise below your organisation’s policies and procedures relating to **documentation.**   Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

|  |  |  |
| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Summarise below your organisation’s policies and procedures relating to **reporting.**   Submit a copy of these policies and procedures to your assessor for their reference. | |
|  | | |
| Policies | |  |
| Procedures | |  |

# Workplace Assessment

## Overview

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| **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   **The workplace assessment is divided into eight tasks:**   * Task 1 – Review Client’s Individualised Support Plan and Relevant Policies and Procedures * Task 2 – Meet with Client and Their Family and Carers * Task 3 – Conduct Risk Management * Task 4 – Prepare and Assemble the Aids, Equipment, and Devices Used by The Client * Task 5 – Provide Individualised Support to The Client 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 to assist the person in:     - Transferring Between Bed and Chair     - Transferring from Seated to Standing * Task 6 – Monitor Support Activities * Task 7 – Report and Refer Client’s Progress * Task 8 – Maintain and Store Documentation and Reports |

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| **IMPORTANT: These tasks must be done in the context of a direct support work environment in at least one aged care, home and community, disability, or community service organisation.**  Each task comes with a set of instructions. You are to follow and perform these instructions while being observed by the assessor and submit any required documentation.  **You are required to:**   * Complete the tasks within the time allowed, as scheduled in-class roll. * Review the instructions for each task included in this Workplace Assessment. * Determine personal support requirements. * Provide individualised support to the client in the following areas:   + Dressing, undressing and grooming   + Eating and drinking using required mealtime assistance techniques and equipment, ensuring the client has physical access   + 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 * Monitor support activities. * Complete reporting and documentation.   **Resources required for assessment:**  To complete this assessment, you will need access to the following:   * Direct support work environment in at least one aged care, home and community, disability, or community service organisation that will allow them access to:   + Workplace supervisor   + Other support staff in the organisation   + Other health professionals for referring client’s additional/unmet needs, e.g., the client’s general practitioner, psychologist, physiotherapist, or nurse, for pain management |

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| * + Individual support clients, their family members and carer/s, as well as:     - Volunteers to participate in simulated activities and act as individual support clients, their family members and carer/s   + Clients’ individualised support plans/care plans.   + Organisational policies and procedures relevant to providing individualised support, including:     - Assembly of equipment, devices, and aids     - Dignity of risk     - Duty of care     - Health and safety     - Infection control     - Maintaining and storing documents and reports     - Maintaining client privacy and confidentiality     - Providing and monitoring individualised support     - Referrals     - Reporting and documentation     - Restrictive practices     - Safe manual handling   + Aids, devices/appliances, and equipment used by the clients, e.g., wheelchair, walking stick or cane, hearing aid, etc., as well as:     - User manuals or manufacturers’ instructions for preparing and assembling these aids, devices/appliances, and equipment.   + Workplace 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 |

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| * + Resources to conduct risk management, including but not limited to:     - Areas to inspect     - Resources to eliminate or minimise risks, e.g., personal protective equipment (PPE), cleaning equipment, etc.   + Processes and procedures, as well as facilities, resources, and equipment used to provide individualised support in the following areas:     - Dressing, undressing and grooming     - Eating and drinking using required mealtime assistance techniques and equipment, ensuring the client has physical access     - 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   + Facilities, resources, and equipment to maintain and store individual support documentation and reports, including:     - Individual support documentation and reports     - Computer, filing cabinets, cloud storage, organisation intranet, etc. |

## Before Proceeding with Tasks 1 – 7

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| **IMPORTANT: You must have completed the Simulated Assessment contained in the Assessment Workbook – Part B before you proceed with this assessment.**  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 the workbook, Assessment Workbook – Part B. The real workplace assessment requirements are addressed in this Skills Workbook. |

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| This is illustrated below:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Tasks to be completed by the candidate** | **Assessment Workbook – Part B** | | **Skills Workbook**  **(This 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 | 🗸 | 🗸 |  |  |  | |

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| This Skills Workbook addresses the real workplace component of the unit of competency*.*  This real workplace component is made up of seven Workplace Assessment Tasks. You must complete these tasks:   * On three separate instances in a real workplace environment * With at least two different clients   This is illustrated below:   |  |  |  |  | | --- | --- | --- | --- | | **Instance** | **Skills Workbook** | | | | **REAL WORKPLACE** | | | | **First instance** | **Second instance** | **Third instance** | | **Client** | Client A | Client B | Client A or B (from first or second instance)  or  Client C (a different client) | | **Workplace Assessment** | Task 1 | Task 1 | Task 1 | | Task 2 | Task 2 | Task 2 | | Task 3 | Task 3 | Task 3 | | Task 4 | Task 4 | Task 4 | | Task 5 | Task 5 | Task 5 | | Task 6 | Task 6 | Task 6 | | Task 7 | Task 7 | Task 7 |   **IMPORTANT: For each task, you must submit three sets of evidence, one set of evidence for each instance.**  You must be observed by your assessor while completing Tasks 1 - 7 on each instance.  Before proceeding with Tasks 1 – 7, consult with your supervisor to plan and organise how you will complete these tasks in your workplace.  Specifically, you will need to plan and organise the following in consultation with your supervisor:   * At least two clients whom you will be supporting, as well as their families and carers. * Their individualised plan including their goals, needs, and preferences. * The aids, equipment, and devices they require.   Once these details are finalised, record them on the following pages. |

### First Instance

|  |  |  |
| --- | --- | --- |
| Client | Client A | |
| Family/Carers (tick all that apply):  They will be present throughout the support activities in Tasks 1 – 7. | The client’s: | |
| Parent  Child  Sibling  Spouse | Relative  Partner  Others (Please specify): |
| Do you have access to this client’s individualised support plan? | Yes  No  **This is required for the assessment.** | |
| Overview of the client’s support needs. |  | |
| Aids, equipment, and devices used by the client  **This is required for the assessment.** | Aids: | |
| Equipment: | |
| Devices: | |

### Second Instance

|  |  |  |
| --- | --- | --- |
| Client | Client A | Client B |
| Family/Carers (tick all that apply):  They will be present throughout the support activities in Tasks 1 – 7. | The client’s: | |
| Parent  Child  Sibling  Spouse | Relative  Partner  Others (Please specify): |
| Do you have access to this client’s individualised support plan? | Yes  No  **This is required for the assessment.** | |
| Overview of the client’s support needs. |  | |
| Aids, equipment, and devices used by the client  **This is required for the assessment.** | Aids: | |
| Equipment: | |
| Devices: | |

### Third Instance

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Client | Client A | Client B | | Client C |
| Family/Carers (tick all that apply):  They will be present throughout the support activities in Tasks 1 – 7. | The client’s: | | | |
| Parent  Child  Sibling  Spouse | | Relative  Partner  Others (Please specify): | |
| Do you have access to this client’s individualised support plan? | Yes  No  **This is required for the assessment.** | | | |
| Overview of the client’s support needs. |  | | | |
| Aids, equipment, and devices used by the client  **This is required for the assessment.** | Aids: | | | |
| Equipment: | | | |
| Devices: | | | |

## Task 1 – Review Client’s Individualised Support Plan and Relevant Policies and Procedures

|  |  |
| --- | --- |
| Application  Description automatically generated with low confidence | While being observed by your assessor, review the individualised support/care plan of the person you will be supporting and relevant policies and procedures.  **STEPS TO TAKE**   1. Access and carefully review the following:  * The individualised support/care plan of the person you will be supporting through Tasks 2 – 7. * Organisational policies and procedures for providing support, including policies and procedures for:   + Assembly of equipment, devices, and aids   + Providing and monitoring individualised support   + Duty of care   + Dignity of risk   + Maintaining client privacy and confidentiality   + Health and safety   + Infection control   + Reporting and documentation   You will need to follow these policies and procedures when completing Tasks 2 – 7.   1. Meet with your supervisor to confirm whether you have understood the individualised support/care plan, policies, and procedures correctly.   **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 confirming and clarifying the individualised support/care plan and relevant service standards, policies, and procedures. |

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|  | **OBSERVATION FORM**  Before starting this task, review the **Workplace Assessment Task 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 workplace resources required for you to complete this assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit the following to your assessor:   * A copy of the individualised plan you accessed and reviewed.   **Maintain your clients’ privacy and confidentiality. Omit their names and other information that may lead to their identification before submitting this document.**   * A copy of the organisational policies and procedures you accessed and reviewed during this task.   **Submit only one set of copies since the same policies and procedures apply in the three instances you will perform this task.** |

## Task 2 – Meet with Client and Their Family and Carers

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| Application  Description automatically generated with low confidence | While being observed by your assessor, meet with the client and their family and carer/s to review and confirm their support requirements, goals, needs, and preferences.  **STEPS TO TAKE**   1. Meet with the client and their family and carer/s. 2. During this meeting, review and confirm the following:  * The client’s support requirements * The client’s goals, needs, and preferences  1. Use your organisation’s template for recording meeting minutes. You may also use the **Generic Meeting Minutes** **Template** provided along with this workbook.   **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 **Workplace Assessment Task 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 workplace resources required for you to complete this assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of your minutes to your assessor. |

## Task 3 – Conduct Risk Management

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| Application  Description automatically generated with low confidence | While being observed by your assessor, conduct risk management prior to facilitating support activities.  **STEPS TO TAKE**   1. Conduct risk management. This must include the following:  * Identifying hazards and risks associated with these hazards. * Assessing the risks identified. * Eliminating or minimising the risks identified.   **For the purposes of this assessment, there must be evidence that you have addressed both potential risks and actual risks across the three instances required for this task.**   * 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 your organisation’s forms/templates for conducting a risk assessment before facilitating support activities.   You may also use the generic templates provided along with this workbook (e.g., Hazard Identification Form, Health and Safety Checklist, 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, eliminating and minimising risks, and referring risks   **OBSERVATION FORM**  Before starting this task, review the **Workplace Assessment Task 3 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task.  **EVIDENCE TO BE SUBMITTED**  After completing this task, submit a copy of your risk management document to your assessor. |

## Task 4 – Prepare and Assemble the Aids, Equipment, and Devices Used by The Client

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| 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.  **For the purposes of this assessment, there must be evidence that you have prepared and assembled at least two different aids, two different devices/appliances, and two different equipment across the three instances required for this task.**  **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 **Workplace Assessment Task 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 also:   * Organise workplace resources required for you to complete this assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Address your queries and concerns regarding this task. |

## Task 5 – Facilitate Support Activities with The Client

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| Application  Description automatically generated with low confidence | While being observed by your assessor, facilitate support activities for your client.  **STEPS TO TAKE**   1. Facilitate the following support activities for your client:  * Dressing, undressing, and grooming * Eating and drinking using required mealtime assistance techniques and equipment, ensuring the client has physical access * Oral hygiene * Showering * Toileting and the use of continence aids * Using slide sheets, hoists, slings, and lifters to assist the client in the following:   + Transferring between bed and chair   + Transferring from seated to standing  1. While completing this task:  * Follow the person’s individualised support/care plan. * Follow the organisation’s policies and procedures for providing support.   **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 **Workplace Assessment Task 5 – Observation Form** provided along with this workbook. This form lists all the practical skills you need to demonstrate while completing this task. |

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|  | **YOUR ASSESSOR WILL**   * Organise workplace resources required for you to complete this assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Address your queries and concerns regarding this task. |

### Supplementary Questions

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| Application  Description automatically generated with low confidence | 1. List six key processes that must be followed when facilitating any individualised support activity. |
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| Application  Description automatically generated with low confidence | 1. Outline the procedures for providing support in **dressing, undressing, and grooming.** |
|  | |
| **Dressing** | |
| *Add more rows as needed.* | |
| **Undressing** | |
| *Add more rows as needed.* | |
| **Grooming** | |
| *Add more rows as needed.* | |

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| Application  Description automatically generated with low confidence | 1. Answer the following questions about procedures for providing support in **eating and drinking.** |
|  | |
| 1. Outline the procedures for providing support in eating and drinking.   *Add more rows as needed.* | | |
| 1. List three examples of techniques you can use to engage with the client during the meal. | | |
| 1. List three examples of equipment that may be used when providing support in eating and drinking. | | |

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| Application  Description automatically generated with low confidence | 1. Outline the procedures for providing support in **mobility.** |
|  | |
| *Add more rows as needed.* | | |

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| Application  Description automatically generated with low confidence | 1. Answer the following questions about procedures for providing support in **oral care.** |
|  | |
| 1. Outline the steps for preparing for any oral care procedure.       *Add more rows as needed.* | |
| 1. Outline the procedures for supporting the client to effectively brush their teeth.       *Add more rows as needed.* | |

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| 1. Identify three other strategies that can be followed as an aid in good oral hygiene. |
| 1. Outline the steps for daily denture care:      *Add more rows as needed.* |
| 1. Outline the steps for denture removal for clients with full dentures       *Add more rows as needed.* |
| 1. Outline the steps for denture insertion.       *Add more rows as needed.* |

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| 1. List three signs to look out for to recognise ill-fitting dentures.     *Add more rows as needed.* |
| 1. Outline the steps for caring for natural teeth and gums       *Add more rows as needed.* |

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| Application  Description automatically generated with low confidence | 1. Outline the procedures for providing support in **showering.** |
|  | |
| *Add more rows as needed.* | |

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| --- | --- | --- |
| Application  Description automatically generated with low confidence | 1. Answer the following questions about procedures for providing support in **toileting and the use of continence aids.**   For your response under continence aids, select two aids and outline the procedures for providing support in the use of each. | |
|  | | |
| **Toileting** | | |
| *Add more rows as needed.* | | |
| **Use of continence aid:** | | Choose an item.  If you selected others, please specify here which continence aid: |
| *Add more rows as needed.* | | |

|  |  |
| --- | --- |
| **Use of continence aid:** | Choose an item.  If you selected others, please specify here which continence aid: |
| *Add more rows as needed.* | |

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| Application  Description automatically generated with low confidence | 1. Summarise the procedures you followed to provide support to the client in using assistive technology.   Ensure to cover aids, devices, and equipment in your response. |
|  | |
| *Add more rows as needed.* | |

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| Application  Description automatically generated with low confidence | 1. Outline the procedures you followed to ensure that the person has physical access to necessary aids, equipment and other items required for their support. |
|  | |
| *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 using slide sheets, hoists, slings, and lifters.** | |
|  | | |
| **Task** | | **Safe manual handling procedures** |
| 1. Using slide sheets | | *Add more rows as needed.* |
| 1. Using a hoist with a sling. | | *Add more rows as needed.* |

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| **Task** | **Safe manual handling procedures** |
| 1. Using lifters or standing hoists | *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 the person between bed and chair.** |
|  | |
| *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 the person from a seated to a standing position.** |
|  | |
| *Add more rows as needed.* | |

## Task 6 – Monitor Support Activities

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| Application  Description automatically generated with low confidence | While being observed by your assessor, meet with the client to monitor the effectiveness of support activities.  **STEPS TO TAKE**   1. Meet with the client and gather the following information:  * The client’s feedback on your own performance. * 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. Use your organisation’s template for recording meeting minutes. You may also use the **Generic Meeting Minutes Template** provided alongwith this workbook. 2. After your discussion with your client, accomplish Progress Notesdocumenting your clients’ progress and your observations. Use your organisation’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. |

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|  | **OBSERVATION FORM AND ASSESSOR’S CHECKLIST**  Before starting this task, review the following forms provided along with this workbook.   * **Workplace Assessment Task 6 – Observation Form**   This form lists all the practical skills you need to demonstrate while completing this task.   * **Workplace Assessment Task 6 – Assessor’s Checklist**   This form lists the criteria your submission must address to complete this task satisfactorily.  **YOUR ASSESSOR WILL**   * Organise workplace resources required for you to complete this assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Address your queries and concerns regarding this task.   **EVIDENCE TO BE SUBMITTED**  After completing this task, submit the following to your assessor:   * Meeting minutes * Progress notes you completed   **IMPORTANT: Ensure to omit the client’s name and other sensitive information that will lead to their identification before submitting these documents to your assessor.** |

## Task 7 – Report and Refer Client’s Progress

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| Application  Description automatically generated with low confidence | While being observed by your assessor, meet with your supervisor to report the outcomes of your monitoring in Task 6.  **STEPS TO TAKE**   1. In your meeting with your supervisor, report 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 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, organise and facilitate referrals for the additional and unmet needs you have identified.   Referrals may be to other health professionals, e.g., the client’s general practitioner, psychologist, physiotherapist, nurse, for pain management, etc.   1. When completing this task, ensure to follow your organisation’s policies and procedures for reporting clients’ progress and referrals. |

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|  | **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 **Workplace Assessment Task 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 workplace resources required for you to complete this assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Address your queries and concerns regarding this task. |

## Task 8 – Maintain and Store Documentation and Reports

|  |  |
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| Application  Description automatically generated with low confidence | While being observed by your assessor, maintain and store documentation and reports in accordance with your organisation’s policies and procedures.  **For the purposes of this assessment, there must be evidence that you have maintained and stored the following:**   * **At least two types or pieces of documentation, e.g., updated individualised support plan, documentation of outcomes of risk management, meeting minutes, etc.** * **At least two reports, e.g., progress notes, hazard identification report, etc.**   **YOUR ASSESSOR WILL**   * Practical knowledge of documentation and reports used in individualised support and relevant policies and procedures. * Practical skills relevant to maintaining and storing documentation and reports in the workplace.   **OBSERVATION FORM**  Before starting this task, review the **Workplace Assessment Task 8 – 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 also:   * Organise workplace resources required for you to complete this assessment. * Discuss with you the practical skills listed in the Observation Form prior to the assessment. * Address your queries and concerns regarding this task. |

# Skills Workbook Checklist

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| **TO THE CANDIDATE**  When you have completed this assessment workbook, review your work, and ensure that: | |
|  | |
|  | You have completed the Practical Assessments in this workbook: |
|  | Practical Assignment Task 1 |
|  | Practical Assignment Task 2 |
|  | Practical Assignment Task 3 |
|  | Practical Assignment Task 4.1 |
|  | Practical Assignment Task 4.2 |
|  | Practical Assignment Task 5.1 |
|  | Practical Assignment Task 5.2 |
|  | Practical Assignment Task 6 |
|  | Practical Assignment Task 7.1 |
|  | Practical Assignment Task 7.2 |
|  | Workplace Assessment Task 1 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 2 |
|  | First instance |
|  | Second instance |
|  | Third instance |

|  |  |
| --- | --- |
|  | Workplace Assessment Task 3 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 4 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 5 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 6 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 7 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 8 |

|  |  |
| --- | --- |
|  | You have saved and submitted the following evidence: |
|  | This completed workbook |
|  | Assessment Workbook Cover Sheet signed and scanned |
|  | Practical Assignment Task 1 – Copy of policies and procedures |
|  | Practical Assignment Task 2 – Copy of policies and procedures |
|  | Practical Assignment Task 3 – Copy of policies and procedures |
|  | Practical Assignment Task 4.1 – Copy of policies and procedures |
|  | Practical Assignment Task 4.2 – Copy of policies and procedures |
|  | Practical Assignment Task 5.1 – Copy of policies and procedures |
|  | Practical Assignment Task 5.2 – Copy of policies and procedures |
|  | Practical Assignment Task 6 – Copy of policies and procedures |
|  | Practical Assignment Task 7.1 – Copy of policies and procedures |
|  | Practical Assignment Task 7.2 – Copy of policies and procedures |
|  | Workplace Assessment Task 1 – Copy of individualised plan |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 1 – Copy of policies and procedures |
|  | Workplace Assessment Task 2 – Meeting minutes |
|  | First instance |
|  | Second instance |
|  | Third instance |

|  |  |
| --- | --- |
|  | Workplace Assessment Task 3 – Risk management document |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 6 – Meeting minutes |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 6 – Progress notes |
|  | First instance |
|  | Second instance |
|  | Third instance |

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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. |

|  |  |
| --- | --- |
| **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: |
|  | Practical Assignment Task 1 |
|  | Practical Assignment Task 2 |
|  | Practical Assignment Task 3 |
|  | Practical Assignment Task 4.1 |
|  | Practical Assignment Task 4.2 |
|  | Practical Assignment Task 5.1 |
|  | Practical Assignment Task 5.2 |
|  | Practical Assignment Task 6 |
|  | Practical Assignment Task 7.1 |
|  | Practical Assignment Task 7.2 |
|  | Workplace Assessment Task 1 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 2 |
|  | First instance |
|  | Second instance |
|  | Third instance |

|  |  |
| --- | --- |
|  | Workplace Assessment Task 3 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 4 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 5 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 6 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 7 |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 8 |

|  |  |
| --- | --- |
|  | The candidate has saved and submitted the following evidence: |
|  | This completed workbook |
|  | Assessment Workbook Cover Sheet signed and scanned |
|  | This completed workbook |
|  | Assessment Workbook Cover Sheet signed and scanned |
|  | Practical Assignment Task 1 – Copy of policies and procedures |
|  | Practical Assignment Task 2 – Copy of policies and procedures |
|  | Practical Assignment Task 3 – Copy of policies and procedures |
|  | Practical Assignment Task 4.1 – Copy of policies and procedures |
|  | Practical Assignment Task 4.2 – Copy of policies and procedures |
|  | Practical Assignment Task 5.1 – Copy of policies and procedures |
|  | Practical Assignment Task 5.2 – Copy of policies and procedures |
|  | Practical Assignment Task 6 – Copy of policies and procedures |
|  | Practical Assignment Task 7.1 – Copy of policies and procedures |
|  | Practical Assignment Task 7.2 – Copy of policies and procedures |
|  | Workplace Assessment Task 1 – Copy of individualised plan |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 1 – Copy of policies and procedures |

|  |  |
| --- | --- |
|  | Workplace Assessment Task 2 – Meeting minutes |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 3 – Risk management document |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 6 – Meeting minutes |
|  | First instance |
|  | Second instance |
|  | Third instance |
|  | Workplace Assessment Task 6 – Progress notes |
|  | First instance |
|  | Second instance |
|  | Third instance |

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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. |

# Task and Evidence Checklist

## Skills Workbook Assessment Tasks and Evidence

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Practical Assignment 1 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 1 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 2 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 2 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 3 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 3 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 4.1 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

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| --- | --- | --- | --- | --- | --- |
| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| Practical Assignment 4.1 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 4.2 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 4.2 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 5.1 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 5.1 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 5.2 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 5.2 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 6 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 6 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Practical Assignment 7.1 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 7.1 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 7.2 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Practical Assignment 7.2 | Copy of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 1 | Copies of policies and procedures | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 1  (First instance) | Observation Form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 1  (First instance) | Copy of individualised plan | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 2  (First instance) | Meeting minutes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 2  (First instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Workplace Assessment Task 3  (First instance) | Risk management document | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 3  (First instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 4  (First instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5  (First instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (First instance) | Meeting minutes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (First instance) | Progress notes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (First instance) | Assessor’s checklist | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (First instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 7  (First instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Workplace Assessment Task 1  (Second instance) | Observation Form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 1  (Second instance) | Copy of individualised plan | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 2  (Second instance) | Meeting minutes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 2  (Second instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 3  (Second instance) | Risk management document | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 3  (Second instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 4  (Second instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5  (Second instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Workplace Assessment Task 6  (Second instance) | Meeting minutes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (Second instance) | Progress notes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (Second instance) | Assessor’s checklist | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (Second instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 7  (Second instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 1  (Third instance) | Observation Form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 1  (Third instance) | Copy of individualised plan | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 2  (Third instance) | Meeting minutes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 2  (Third instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Workplace Assessment Task 3  (Third instance) | Risk management document | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 3  (Third instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 4  (Third instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5  (Third instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (Third instance) | Meeting minutes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (Third instance) | Progress notes | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (Third instance) | Assessor’s checklist | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 6  (Third instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 7  (Third instance) | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Workplace Assessment Task 5 – Supplementary Question 1 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 2 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 3 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 4 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 5 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 6 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 7 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 8 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

| **Assessment Task** | **Evidence** | **Check if submitted or completed** | **The candidate was directly observed by the assessor while they complete this task** | **The supervisor confirms that the evidence submitted is the candidate’s own work/from the workplace/completed by the relevant workplace personnel.** | **Assessor remarks** |
| --- | --- | --- | --- | --- | --- |
| Workplace Assessment Task 5 – Supplementary Question 9 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 10 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 11 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 5 – Supplementary Question 12 | Responses in this workbook | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |
| Workplace Assessment Task 8 | Observation form | Yes | Yes  No  N/A  Click or tap to enter a date. | Yes  No  Click or tap to enter a date. |  |

End of Task and Evidence Checklist

# 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** | | |
| **Practical Assignment** | **S** | **NYS** |
| Task 1 |  |  |
| Task 2 |  |  |
| Task 3 |  |  |
| Task 4.1 |  |  |
| Task 4.2 |  |  |
| Task 5.1 |  |  |
| Task 5.2 |  |  |
| Task 6 |  |  |
| Task 7.1 |  |  |
| Task 7.2 |  |  |

|  |  |  |
| --- | --- | --- |
| **Workplace Assessment** | | |
| **First instance** | **S** | **NYS** |
| Task 1 |  |  |
| Task 2 |  |  |
| Task 3 |  |  |
| Task 4 |  |  |
| Task 5 |  |  |
| Task 6 |  |  |
| Task 7 |  |  |
| **Second instance** | **S** | **NYS** |
| Task 1 |  |  |
| Task 2 |  |  |
| Task 3 |  |  |
| Task 4 |  |  |
| Task 5 |  |  |
| Task 6 |  |  |
| Task 7 |  |  |
| **Third instance** | **S** | **NYS** |
| Task 1 |  |  |
| Task 2 |  |  |
| Task 3 |  |  |
| Task 4 |  |  |
| Task 5 |  |  |
| Task 6 |  |  |
| Task 7 |  |  |

|  |  |  |
| --- | --- | --- |
| **Workplace Assessment** | **S** | **NYS** |
| Task 5 – Supplementary Question 1 |  |  |
| Task 5 – Supplementary Question 2 |  |  |
| Task 5 – Supplementary Question 3 |  |  |
| Task 5 – Supplementary Question 4 |  |  |
| Task 5 – Supplementary Question 5 |  |  |
| Task 5 – Supplementary Question 6 |  |  |
| Task 5 – Supplementary Question 7 |  |  |
| Task 5 – Supplementary Question 8 |  |  |
| Task 5 – Supplementary Question 9 |  |  |
| Task 5 – Supplementary Question 10 |  |  |
| Task 5 – Supplementary Question 11 |  |  |
| Task 5 – Supplementary Question 12 |  |  |
| Task 8 |  |  |

|  |  |  |
| --- | --- | --- |
| **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) |  |  |

|  |
| --- |
| **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**