# Workplace Assessment Task 1.2 – Observation Form

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

## **Purpose**

This *Observation Form* lists the practical skills that the candidate must demonstrate/perform while completing **Workplace Assessment Task 1.2.**

This form is to be completed by the candidate’s assessor to document their observations on the candidate’s performance in Workplace Assessment Task 1.2.

## **Task Overview**

For this task, while being observed by the assessor, the candidate is required to facilitate opportunities for participation that reflect the person’s needs and preferences.

To complete this task, the candidate must facilitate participation in activities related to the following needs:

* Physical
* Social
* Cultural
* Spiritual

These must be activities with their existing networks or with new potential networks as discussed in Task 1.2.

In this task, the candidate will be assessed on their:

* Practical knowledge relevant to activities that reflect the person’s needs and preferences
* Practical knowledge relevant to positive and supportive communication.
* Practical skills relevant to facilitating opportunities for participation

## **Instructions to the Assessor**

Before the assessment

* Contextualise the criteria in this observation form so that they reflect:
  + The actual workplace environment where the candidate is completing this assessment, including their workplace’s standards, policies, and procedures.
  + The simulated scenario that the candidate is responding to.
* Discuss this assessment task with the candidate, including the practical skills they need to demonstrate and the criteria for satisfactorily demonstrating each skill.
* Review this form with the candidate and address any queries or concerns they may have about it.

### During the assessment

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

### After the assessment

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

## **Candidate Details**

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

## **Assessor Details**

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

## **Context of the Assessment**

|  |  |  |
| --- | --- | --- |
| Assessment environment | Real workplace/organisation | Simulated environment |
| Mode of observation | Direct observation | Observation via video recording |
| Workplace/organisation |  | |
| Resources required for the assessment | Organisation/workplace (or similar environment) where the candidate will complete this assessment.  Individualised plan  Relevant equipment outlined in the plan  Meeting minutes from Task 1.1  Nominated persons  Nominated person’s family or carer | |
| Contextualisation | Assessor to specify below contextualisation they have done to this observation form.  State/territory legislation, regulations, and standards  Workplace systems, policies, and procedures  Others (please specify):  Summary:  Assessor to provide a summary of the contextualisation done here | |

## **Candidate Assessment Briefing**

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

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

# Observation Form

|  |  |  |  |
| --- | --- | --- | --- |
| This task is done for | Client A | Client B | Client C |

## Part I. Preparing the Support Activities

|  |  |  |  |
| --- | --- | --- | --- |
| **Before the interaction with the person:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| 1. The candidate makes sure that the activities to be facilitated are according to the preferences of the person. |  |  |  |
| 1. The candidate contacts the person’s existing network for the activities identified in the preliminary task. | YES  NO |  |  |
| 1. The candidate contacts potential new networks for activities as discussed in Task 1.1 |  |  |  |
| 1. The candidate searches for networks that provide the activity discussed in Task 1.1 | YES  NO |  |  |
| 1. The candidate looks for the network’s contact details | YES  NO |  |  |
| 1. The candidate contacts them using their preferred method to inform them about the activity and its purpose. | YES  NO |  |  |
| 1. The candidate confirms their participation in the activity. | YES  NO |  |  |

## Part II. Facilitating the Support Activities

|  |  |  |  |
| --- | --- | --- | --- |
| **During interaction with the person:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| 1. The candidate facilitates participation in activities agreed upon in Task 1.1:   **The assessor must adapt or contextualise the criteria below to reflect the activities agreed upon in Task 1.1.** |  |  |  |
| 1. Walking program |  |  |  |
| 1. The candidate welcomes the participants. | YES  NO |  |  |
| 1. The candidate explains the route of the walking activity. | YES  NO |  |  |
| 1. Painting classes |  |  |  |
| 1. The candidate hands the participants the materials. | YES  NO |  |  |
| 1. The candidate explains the goals of the painting classes. | YES  NO |  |  |
| 1. Spitirtual reminisce group |  |  |  |
| 1. The candidate welcomes the participants. | YES  NO |  |  |
| 1. The candidate explains what will be done for the day's spiritual reminisce group. | YES  NO |  |  |

| **During interaction with the person:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. Weekly picnic lunches |  |  |  |
| 1. The candidate assists the participants with their food. | YES  NO |  |  |
| 1. The canidate encourages socialisation among the participants by engaging in small talks by groups. | YES  NO |  |  |
| 1. The candidate accommodates the person’s expressions of identity as appropriate of their age or stage of life by:   **The assessor must adapt or contextualise the criteria below to reflect the person’s expressions of identity** |  |  |  |
| 1. Providing rest periods when necessary. | YES  NO |  |  |
| 1. Providing assistive technology | YES  NO |  |  |
| 1. Changing certain mechanics of an activity to make it more aligned to the person’s identity – such as making the subject of the painting activity about transgenderism. | YES  NO |  |  |

| **During interaction with the person:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate facilitates the person’s participation in an activity that reflect their individual physical, social, cultural and spiritual needs.   **Before the assessment, the assessor must adapt or contextualise the criteria below to reflect the activity that the candidate will promote. The activity must reflect the physical, cultural, social and spiritual needs of the person.** |  |  |  |
| * 1. The candidate provides relevant information regarding the person’s needs to the relevant personnel heading the painting activity. | YES  NO |  |  |
| * 1. The candidate ensures that the person understands the goal or focus of the activity. | YES  NO |  |  |
| * 1. The candidate confirms with the person if they have all of the materials and resources that they need to fully participate in the activity. | YES  NO |  |  |

| **During interaction with the person:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate promotes self-esteem and confidence through the use of positive and supportive communication. |  |  |  |
| * 1. The candidate praises the person’s efforts. | YES  NO |  |  |
| * 1. The candidate remarks at the person’s focus, demeanour and/or creativity during the activity. | YES  NO |  |  |
| * 1. The candidate verbally encourages the person to continue joining the activities in the future. | YES  NO |  |  |
| * 1. The candidate asks the person about any additional support that they need to allow them to participate more effectively in future activities. | YES  NO |  |  |

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

End of Workplace Assessment – Observation Form