# Case Study Task 4.2 Role Play – 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 **Case Study Task 4.2.**

This form is to be completed by the candidate’s assessor to document their observations on the candidate’s performance in Case Study Task 4.2.

## **Task Overview**

For this task, the candidate is required to roleplay a discussion with the supervisor (assessor) to inform them about the non-adherence or breach of standard procedures in the scenario.

In this task, the candidate will be assessed on their practical skills relevant to referring unresolved conflict to the appropriate personnel.

## **Instructions to the Assessor**

### Before the assessment

* Organise access to the environment and resources required to complete this assessment.
* Advise the candidate on the time and location of the assessment.
* Discuss with the candidate the practical skills listed in the Observation Form prior to the assessment.
* Brief the candidate on their role in this assessment.
* Review this form with the candidate and address any queries or concerns they may have about it.

### During the assessment

* Take the role of the candidate’s supervisor in the roleplay activity.

For this activity, the assessor is not required to follow any script. They may provide additional comments or ask follow-up questions. However, this is not required for the assessment.

* Observe the candidate as they complete the Case Study 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 | Simulated environment |
| Workplace/organisation | This may be the candidate's training organisation. | |
| Resources required for the assessment | Assessor to act as the candidate’s supervisor. | |

## **Candidate Assessment Briefing**

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

|  |  |
| --- | --- |
| **The assessor confirms:** | **YES/NO** |
| 1. They have discussed with the candidate the case study task they are required to complete for this assessment. | YES  NO |
| 1. The candidate understands they will be assessed while completing this case study 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 on how they are to undertake the case study task. | YES  NO |
| 1. They have provided the candidate guidance on how to complete the task satisfactorily. | 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 case study task and the assessment process. | YES  NO |

# Observation Form

| **During this task:** | **YES/NO** | **Date observed** | **Assessor’s comments** |
| --- | --- | --- | --- |
| 1. The candidate reports the non-adherence or breach of standard procedures to the supervisor.   Wording may slightly vary, however, all of the key points below must be covered for a satisfactory performance |  |  |  |
| * 1. The candidate arrived at Thelma’s house in the morning | YES  NO |  |  |
| * 1. The candidate assisted Thelma with breakfast and proceeded to assist her with medication | YES  NO |  |  |
| * 1. Upon inspection, the candidate noticed that the blister pack for her evening medication was still complete. | YES  NO |  |  |
| * 1. According to the health professional’s directions, Thelma is supposed to take this medication in the evening, and the worker, Nadine, from the previous afternoon shift should have assisted her in taking this medication | YES  NO |  |  |
| * 1. The candidate called Nadine to notify her. | YES  NO |  |  |
| * 1. Nadine explained that she only stood in for Julie, another support worker. | YES  NO |  |  |
| * 1. Julie was sick and could not report to work yesterday. | YES  NO |  |  |
| * 1. Nadine also explained she did not receive the medication instructions when Thelma was endorsed to her. | YES  NO |  |  |
| 1. The candidate explains which employer’s responsibilities were breached or not achieved.   For a satisfactory performance, although wording may slightly vary, the candidate’s response must be at least one of the following:   * Ensuring pertinent information about the client’s care/support (including medication) is endorsed properly to support workers. * Briefing the support worker (Nadine) about the client’s care/support. * Making sure pertinent information about the client’s care/support are accessible to the support workers assigned to the client. * Duty of care - ensuring the health and safety of workers while they are at work in the business or undertaking and others who may be affected by the carrying out of work, such as visitors. * The candidate may provide other responses. This is still acceptable as long as the responses are consistent with the scenario and the Lotus Compassionate Care Handbook.   **For the purposes of this assessment, the supervisor (assessor) may advise the candidate that the supervisor review the policies and procedures and investigate this matter further with Julie and Nadine’s team leads.** | YES  NO |  |  |

|  |  |
| --- | --- |
| **Assessor Declaration**  By signing here, I confirm that I have observed the candidate, whose name appears above, roleplay a discussion with their supervisor (assessor) to inform them about the unresolved conflict in the scenario.  I confirm that the information recorded on this *Observation Form* is true and accurately reflects the candidate’s performance during their completion of the case study task. | |
| Assessor’s signature |  |
| Assessor’s name |  |
| Date signed |  |

End of Case Study Assessment – Observation Form