# Workplace Assessment 3.1 – Assessor’s Checklist

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

## **Purpose**

This *Assessor’s Checklist* lists the specific criteria that the candidate’s submission for **Workplace Assessment Task 3.1** must satisfactorily meet.

This form is to be completed by the candidate’s assessor to document their assessment of the candidate’s submission in Workplace Assessment Task 3.1.

## **Task Overview**

For this task, the candidate is required to seek consent from the client and/or their family, carer or others identified by the client before commencing care activities.

In this task, the candidate will be assessed on their practical skills relevant to seeking consent before commencing support activities.

## **Instructions to the Assessor**

### Before the assessment

* Organise workplace resources required for this assessment.
* Discuss this assessment task with the candidate, including the criteria they need to meet to complete this task satisfactorily.
* Review this form with the candidate and address any queries or concerns they may have about it.

### During the assessment

* Review the candidate’sConsent Declaration.
* For each criterion listed in this checklist:
  + Tick YES if you confirm the candidate’s submission satisfactorily meets the criterion.
  + Tick NO if you confirm the candidate’s submission does not satisfactorily meet the criterion.
* Write specific comments on the candidate’s performance in each criterion. Your feedback/insights will be helpful in addressing any area/s for improvement.

### After the assessment

* Complete all parts of the *Assessor’s Checklist*, 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 assessed by |  |
| Training Organisation |  |
| Relevant qualifications held |  |

## **Context of the Assessment**

|  |  |  |
| --- | --- | --- |
| Assessment environment | Real workplace/organisation | Simulated environment |
| Workplace/organisation |  | |
| Resources required for the assessment | Consent Declaration template  Client A  Carer/family/other person that Client B identified to give consent for them | |

## **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 on 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 criteria (listed below) they are required to meet to complete the task satisfactorily. | YES  NO |
| 1. They have addressed the candidate’s questions or concerns about the workplace task and the assessment process. | YES  NO |

# Assessor’s Checklist

## **Part I. Client A**

|  |  |  |
| --- | --- | --- |
| **The candidate’s Consent Declaration submission:** | **YES/NO** | **Assessor’s comments** |
| 1. Records client’s consent to carry out the work task   This includes: |  |  |
| 1. Their name | YES  NO |  |
| 1. Their signature | YES  NO |  |
| 1. Date signed | YES  NO |  |

## **Part II. Client B**

|  |  |  |
| --- | --- | --- |
| **The candidate’s Consent Declaration submission:** | **YES/NO** | **Assessor’s comments** |
| 1. Records the consent of the client’s carer/family/other person identified by the client to carry out the work task   This includes: |  |  |
| 1. Their name | YES  NO |  |
| 1. Their signature | YES  NO |  |
| 1. Date signed | YES  NO |  |

|  |  |
| --- | --- |
| **Assessor Declaration**  By signing here, I confirm that I have thoroughly reviewed the candidate’s Consent Declaration submission for this workplace assessment task.  I confirm that the information recorded on this *Assessor’s Checklist* is true and accurately reflects the candidate’s submission for this workplace assessment task. | |
| Assessor’s signature |  |
| Assessor’s name |  |
| Date signed |  |

End of Workplace Assessment - Assessor’s Checklist