

Sheet reference no:

Date:

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Learner name. <small>(person being assessed)</small>	
Learner signature.	
Workplace name.	
Name of assessor. <small>(carrying out assessment)</small>	
Signature of assessor.	

Task (s) being observed:

What was observed. This should reflect the criteria you are saying that the learner has met:

Questions asked by assessor with learner answer:

Note.

The criteria to be met by observation are found over page.
Tick the criteria covered. More than one criteria may be ticked during a single observation.



Performance criteria

<input type="checkbox"/>	1.1c	Demonstrate that they are working in accordance with the agreed ways of working with their employer.
<input type="checkbox"/>	1.2d	Demonstrate how to access full and up to date details of agreed ways of working that are relevant to their role.
<input type="checkbox"/>	1.4c	Demonstrate behaviours, attitudes and ways of working that can help improve partnership working.
<input type="checkbox"/>	1.4d	Demonstrate how and when to access support and advice about: partnership working, resolving conflicts.
<input type="checkbox"/>	2.2f	Demonstrate how to measure their own knowledge, performance and understanding against relevant standards.
<input type="checkbox"/>	2.2h	Demonstrate how to record progress in relation to their personal development.
<input type="checkbox"/>	3.3a	Demonstrate how to respond to comments and complaints in line with legislation and agreed ways of working.
<input type="checkbox"/>	3.5d	Demonstrate how and when to access support and advice about resolving conflicts.
<input type="checkbox"/>	4.2b	Demonstrate interaction with Individuals that respects their beliefs, culture, values and preferences.
<input type="checkbox"/>	5.3a	Take appropriate steps to remove or minimise the environmental factors causing the discomfort or distress.
<input type="checkbox"/>	5.3b	Report any concerns they have to the relevant person.
<input type="checkbox"/>	5.4a	Raise any concerns directly with the individual concerned.
<input type="checkbox"/>	5.4b	Raise any concern with their supervisor / manager.
<input type="checkbox"/>	5.4c	Raise any concerns via other channels or systems e.g. at team meetings.
<input type="checkbox"/>	5.5a	Ensure that where individuals have restricted movement or mobility that they are comfortable.
<input type="checkbox"/>	5.5b	Recognise the signs that an individual is in pain or discomfort.
<input type="checkbox"/>	5.5c	Take appropriate action where there is pain or discomfort.
<input type="checkbox"/>	5.5d	Remove or minimise any environmental factors causing pain or discomfort.
<input type="checkbox"/>	5.6b	Demonstrate that their own attitudes and behaviours promote emotional and spiritual wellbeing.
<input type="checkbox"/>	5.6c	Support and encourage individuals own sense of identity and self-esteem.
<input type="checkbox"/>	5.6d	Report any concerns about the individual's emotional and spiritual wellbeing to the appropriate person.
<input type="checkbox"/>	5.7a	Demonstrate that their actions promote person centred values.
<input type="checkbox"/>	6.5a	Demonstrate the use of appropriate verbal and non verbal communication.
<input type="checkbox"/>	6.6a	Ensure that any communication aids / technologies are: Clean; Work properly; In good repair.
<input type="checkbox"/>	6.6b	Report any concerns about the communication aid / technology to the appropriate person.
<input type="checkbox"/>	7.2a	Demonstrate that their actions maintain the privacy of the individual.
<input type="checkbox"/>	7.2b	Demonstrate that the privacy and dignity of the individual is maintained at all times being in line with the person's individual needs and preferences when providing personal care.
<input type="checkbox"/>	7.2d	Report any concerns they have to the relevant person.
<input type="checkbox"/>	7.4a	Demonstrate how to support Individuals to make informed choices.
<input type="checkbox"/>	7.4c	Ensure your own personal views do not influence an individual's own choices or decisions.
<input type="checkbox"/>	7.6a	Demonstrate that they can support the active participation of individuals in their care.
<input type="checkbox"/>	7.6b	Reflect on how their own personal views could restrict the individual's ability to actively participate in their care.
<input type="checkbox"/>	7.6c	Report any concerns to the relevant person.
<input type="checkbox"/>	8.2a	Ensure drinks are within reach of those that have restrictions on their movement / mobility.
<input type="checkbox"/>	8.2b	Ensure that drinks are refreshed on a regular basis.
<input type="checkbox"/>	8.2c	Ensure that individuals are offered drinks in accordance with their plan of care.
<input type="checkbox"/>	8.2d	Support and encourage individuals to drink in accordance with their plan of care.
<input type="checkbox"/>	8.2e	Know how to report any concerns to the relevant person.
<input type="checkbox"/>	8.3a	Ensure any nutritional products are within reach of those that have restrictions on their movement / mobility.
<input type="checkbox"/>	8.3b	Ensure food is provided at the appropriate temperature and in accordance with the plan of care i.e. the individual is able to eat it.
<input type="checkbox"/>	8.3c	Ensure that appropriate utensils are available to enable the individual to meet their nutritional needs as independently as possible.
<input type="checkbox"/>	8.3d	Support and encourage individuals to eat in accordance with their plan of care.
<input type="checkbox"/>	8.3e	Know how to report any concerns to the relevant person.
<input type="checkbox"/>	10.1j	Demonstrate the importance of ensuring individuals are treated with dignity and respect when providing health and care services.
<input type="checkbox"/>	13.3c	Demonstrate how to move and assist people and objects safely, maintaining the individual's dignity, and in line with legislation and agreed ways of working.
<input type="checkbox"/>	13.6b	Demonstrate safe practices for storing, using and disposing of hazardous substances.
<input type="checkbox"/>	14.1c	Demonstrate how to keep records that are up to date, complete, accurate and legible.
<input type="checkbox"/>	15.1b	Demonstrate effective hand hygiene.