Assessment Strategy and Guidance

SVQ 2 Healthcare Support (Clinical)
Group Award Code: GD0V 22

SVQ 2 Healthcare Support (Non-clinical)
Group Award Code: GD08 22

SVQ 3 Healthcare Support (Clinical)
Group Award Code: GD0R 23

SVQ 3 Healthcare Support (Non-clinical)
Group Award Code: GD0T 23

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General introduction

This Assessment Strategy has been produced by Skills for Health in cooperation with sector representatives, the regulator and awarding body partners. It relates to the assessment of the SVQs 2 and 3 in Healthcare Support (Clinical and Non-Clinical).

It deals with assessment, evidence and quality control under the following headings:

♦ Assessment
♦ Sources of Evidence
♦ The use and characteristics of simulation
♦ External Quality Control

Candidates will be expected to demonstrate competence in the required mandatory and selected optional Units.

They must also be able to perform to the required standard over a period of time.

This strategy supersedes and replaces all previous assessment strategies and supplementary guidance. This strategy includes the generic criteria that awarding bodies must meet for the delivery of SVQs, as required by SQA Accreditation's current guidance and requirements.

Assessment

The SVQs are based on National Occupational Standards (NOS) and assess the application of skills, knowledge and understanding in a specific occupation to the standards required in the workplace.

It is anticipated that much of the evidence for the assessment for SVQ qualifications will be gathered as candidates carry out their usual duties in support of the wider healthcare team. This principle will apply to all competences, except where simulation has been deemed acceptable.

The requirements for occupational competence to assess Units may mean that some candidates have more than one assessor or have expert witnesses this may be the candidate's mentor. In such cases, there should a 'lead' assessor taking a co-coordinating role for the whole qualification and supporting the candidate (see section **2.2.4**)

2.1 Access to Assessment

All candidates should have equal access to assessment regardless of geographical location, work setting and patterns of work must be enabled and supported to undertake awards.

The awards must be delivered within the constraints of current legal practice.
The needs of under-represented groups should be addressed including those from ethnic minority communities, those experiencing disability, and those experiencing sensory impairment.

All individuals involved in the process (ie assessors, expert witnesses, verifiers,) should clearly demonstrate their commitment to equality of opportunity.

2.2 Roles and Responsibilities in the Assessment Process

Those involved in the assessment and verification of the qualification should have the following occupational expertise.

2.2.1 Assessors must:

♦ Be occupationally competent in the area of practice to which the NOS being assessed apply.
♦ Have knowledge of regulations, legislation and codes of practice for the service (where applicable).
♦ Hold or be working towards the appropriate Assessor qualification as identified by the qualifications regulator. Assessors holding older qualifications must be able to demonstrate that they are assessing to current standards.
♦ Have credible experience which is clearly demonstrable through continuing learning and development.

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2.2.2 Expert Witnesses

The use of expert witnesses is encouraged as a contribution to the provision of performance evidence presented for assessment.

The role of the expert witness is to submit evidence to the assessor as to the competence of the candidate in any given Unit. This evidence must directly relate to candidate's performance in the work place which has been seen by the expert witness.

The expert witness must:

♦ Have credible experience/occupational competence in the area being assessed
♦ Have a working knowledge of the NOS for the competences on which their expertise is based

All expert witnesses must be inducted by the centre so that they are familiar with the Standards for those Units for which they are to provide expert witness evidence. They must also understand the centre's recording requirements and will need guidance on the skills required to provide evidence for the NOS.

It is not necessary for expert witnesses to hold an assessor qualification because the qualified assessor makes all assessment decisions about the acceptability of evidence regardless of source. This would include expert witness evidence.

2.2.3 Internal Verifiers

It is crucial that internal verifiers understand the nature and context of the assessors' work and that of their candidates due to the critical nature of the work and the legal and other implications of the assessment process.

Internal Verifiers must:

♦ Be occupationally knowledgeable of healthcare settings.
♦ Have working knowledge of the requirements of the national standards they are verifying at the time any assessment is taking place
♦ Have a thorough knowledge and understanding of the role of assessors.
♦ Occupy a position that gives them authority and resources to co-ordinate the work of assessors
♦ Provide authoritative advice, call meetings as appropriate, visit and observe assessments and carry out all the other internal verification roles as defined by the relevant national occupational standard
♦ Hold or be working towards the appropriate Internal Verifier qualification as identified by the qualifications regulator. Internal verifiers holding older qualifications must be able to demonstrate that they are assessing to current standards.
♦ It is recognised that internal verifiers are expected to verify the assessment process and not reassess the evidence provided.

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2.2.4 Coordinating Assessors and Lead Assessors

In order that the requirements for occupational competence of assessors and expert witnesses can be met while allowing flexibility of delivery, candidates may have more than one assessor or expert witness involved in the assessment process.

Where more than one assessor is involved in the qualification there must be a named Assessor who is responsible for the overall co-ordination of the assessment for each candidate. This person will be responsible for integrating, planning and directing the assessment for the whole qualification.

Where more than one assessor is involved in a Unit, there must be named assessor who is responsible for the overall coordination of the assessment for that Unit. The lead assessor must ensure that the best use is made of all available evidence and will make the final judgment of competence in each Unit where other assessors have been involved.

It is expected that all assessors will work closely with internal verifiers to ensure standardised practice and judgments within the assessment process

2.2.5 Assessment Centres

Assessment centres will be responsible for maintaining up-to-date information on assessors, internal verifiers and expert witnesses and for ensuring the currency of the competence of all those involved in the assessment process.

3 Sources of Assessment

3.1 Observation of Practice

Evidence of candidates' performance will be drawn primarily from naturally occurring work activities that take place under normal working conditions in a normal work environment. Evidence of performance is expected in all Units of the qualification.

Therefore there must be evidence of observation of practice by:

♦ a qualified assessor or
♦ an expert witness

Where expert witness evidence has been used solely to evidence candidate performance in a Unit the assessor must carry out a professional discussion to ensure the assessors' final assessment decision is robust.
Knowledge to support performance should be based on practice evidence and reflection.

3.2 Other assessment methods may include:

♦ simulation (see below)
♦ direct questioning and assignments
♦ assessment of products
♦ APEL and APL
♦ Candidate's reflective accounts and personal statements
♦ Evidence by a witness testimony
♦ Professional Discussion

The above methods of assessment are not exhaustive and a number of other methods may contribute to the assessment of the qualification

3.3 Professional Discussion

It is a requirement that professional discussion, of which an auditable record has been made, between the assessor and the candidate must take place when direct observation by an assessor is not possible.

Professional Discussion is a discussion which is planned and led by the assessor and must be recorded in such a way as to create an audit trail.

It is not a question and answer session, but more of a chance for wider ranging discussions reflecting and evaluating on areas decided during the planning process.

Professional discussion provides a holistic approach to assessing knowledge and understanding and is useful in determining not only what and how a candidate is performing, but also their analytical and decision-making abilities.

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3.5 Simulations

The use of simulations is only permitted in circumstances specified within Unit guidance and should only be undertaken in the minority of cases ie, where performance is critical and:

♦ where events either never or infrequently occur and yet a high degree of confidence is needed that the candidate would act appropriately for example: (i) where there is a high risk of harm or abuse to the individuals, key people in their lives and others, (ii) where events such as medical emergencies (such as cardiac arrest) occur and competence is vital to ensure best practice and results, (iii) where cash is being handled when this does not happen routinely in the workplace

or

♦ where events happen frequently but where there is risk of harm to the candidate or service user in a real situation, for example, dealing with aggressive or abusive situations (although evidence from direct observation should be used where possible).

Where simulations are used they must replicate working activities in realistic (but not necessarily actual) workplace environments and this must be agreed with the Internal Verifier and if necessary, the External Verifier beforehand.

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4 External Quality Control

4.1 External Verification

The standard external verification model will apply to the qualifications. Awarding Bodies are responsible for the competence of external verifiers and must require them to monitor Centres' performance in accordance with regulatory requirements, sampling all aspects of the qualifications' delivery. External verification will include both assuring the quality of the centre that is responsible for making the assessment and sampling from the judgments made on a number of candidates to ensure they are of consistent quality.

Skills for Health work with awarding bodies to ensure that:

♦ the level of sampling undertaken in external verification is sufficient to guarantee consistently high standards between different Centres and between different awarding bodies
♦ there is a comprehensive strategy for sampling assessment which is applied across the UK
♦ external verification takes place using scrutiny of documents and observation of assessment/verification practice in assessment Centres subject to the need for confidentiality
♦ external verification is planned and linked to intelligence about assessment centre functioning and abilities - awarding bodies routinely look at and evaluate compliance and then alter the level of activity accordingly.

Awarding bodies must require external verifiers to take part in regular standardisation activities.

4.2 External Verifiers

The external verifier is the key link for awarding bodies in the quality assurance and verification of the assessment of candidates' performance in the workplace.

External verifiers must:

♦ have working knowledge of Healthcare settings, the regulation, legislation and codes of practice for the service they are verifying (where applicable)
♦ have working knowledge of the requirements of the national standards they are verifying at the time any assessment is taking place
♦ hold, or be working towards, the appropriate external verifier qualification as identified by the qualifications regulators. External verifiers holding older qualifications must be able to demonstrate that they are assessing to current standards.
♦ external verifiers who are not yet qualified against the appropriate competences but have the necessary occupational competence and experience, can be supported by a qualified external verifier who does not necessarily have the occupational expertise or experience.
♦ have credible experience which is clearly demonstrable through continuing learning and development

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5 General

Skills for Health will work with all stakeholders to evaluate the effectiveness of the National Occupational Standards and review them as part of the overall management programme for the qualifications.

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Key Words and Concepts

This section provides explanations and definitions of the key words and concepts used in the Units in this award. In occupational standards it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. You should read this section carefully before you begin working with the standards and refer to it if you are unsure about anything in the Units.

Communication methods: these could include; the individual's preferred spoken language; cues; the use of signs; symbols; pictures; writing; objects of reference; communication passports; repetitive behaviours; other non verbal forms of communication; human and technological aids to communication.

Forms/Methods of communication: these include the type of communication individuals, key people and others within and outside your organisation use.

Individuals: people using health, social or care services. Where individuals use advocates and interpreters to enable them to express their views, wishes or feelings and to speak on their behalf, the term individual includes individuals and their advocates or interpreters.

Key people: those people who are key to an individual's health and social well-being. Family; friends; carers; those people in individuals' lives who can make a difference to their health and well-being.

Messages: any form of communication from and about individuals, key people and other people and organisations. Messages might be information about legislation or working practices which should be passed on and which your organisation may have procedures set in place to process immediately.

Others: other people within and outside your organisation that are necessary for you to fulfill your job role

Rights: the rights that individuals have to:

♦   be respected
♦   be treated equally and not be discriminated against
♦   be treated as an individual
♦   be treated in a dignified way
♦   privacy
♦   be protected from danger and harm
♦   be supported and cared for in a way that meets their needs, takes account of their choices and also protects them
♦   access information about themselves
♦   communicate using their preferred methods of communication and language

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Risks: could include the possibility of danger; damage and destruction to the environment or goods; injury and harm to people; self-harm; bullying; abuse; reckless behavior.

Physical Health Needs: in relation to a medical condition, physical disability, diet, lifestyle.

Subsequent Action: further assessment; referral; intervention or support; advice and guidance to enable the individual to undertake the appropriate health care.

Support: you provide verbal explanation; written information; accompanying the individual or arranging for this to happen.

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Specific Guidance

To achieve the SVQ 2, candidates must achieve **6 Units**; to achieve the SVQ 3 candidates must achieve **8 Units**. The selection of Units for each award is dependent on the specific award selected.

The full selection of Units that make up each of the SVQs can be found in the Information Sheets for each award.

The following pages offer assessment guidance to candidates, assessors, expert witnesses, mentors, internal verifiers and external verifiers — in short — anyone who is involved in the assessment process.

About Scottish Vocational Qualifications (SVQs)

SVQs are work-based qualifications, which set the level of competence required by healthcare support workers in their particular field. These are called standards and they have been designed and developed by Sector Skills Councils (SSCs) through consultation with employers and practitioners from across the health and statutory and voluntary health and social care sectors.

SVQs are nationally recognised awards, which cover a wide range of health and health and social care activities. They also have levels assigned to them, which are related to the responsibilities of a person's actual job role and function.

In undertaking the SVQ 2 and SVQ 3 — the candidate would be expected to already have some experience which should include completion of induction training, and if employed for more than one year annual job review and personal development plan. They will have completed any mandatory training required for their job role and function. They will be able to work with or without direct supervision, and to take some responsibility for planning and working with individuals receiving treatment and or support. It is recommended that they have undertaken additional underpinning knowledge training.

To achieve these SVQs, candidates must provide evidence of experience from support for one or more individuals.

What does an SVQ look like?

All SVQs — follow the same format. There are:

♦ Units
♦ Elements
♦ Performance Criteria
♦ Knowledge Specification
♦ Evidence Requirements

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UNITS are simply different tasks that are familiar areas of work to all health care support workers.

Each Unit comprises **ELEMENTS** — which describe the activities workers are expected to perform.

PERFORMANCE CRITERIA (PCs) are built into each element and are **the standards** against which the work activities should be measured — and for which evidence of actual performance must be provided.

KNOWLEDGE — this requires that candidates **understand** their actions, and can integrate their knowledge and practice.

EVIDENCE REQUIREMENTS — are specific to each Unit, and detail what particular evidence is required for the Unit in order for a candidate to meet the Performance Criteria and knowledge.

It is important that these instructions are followed. So for example, if it says " the assessor or expert witness **must** observe the candidate", then observation **must** be done — simulation will not do instead.

Who's who in SVQs

The **candidate** is the person undertaking the SVQ. The responsibility of a candidate is to meet with the assessor, plan how to undertake Units and then produce evidence to demonstrate competence.

The **assessor** is the person who assesses the candidate and makes a decision if he/she is competent, based on a variety of evidence. The assessor is normally (but not always) in the same workplace as the candidate. The assessor has the responsibility to meet with the candidate regularly, to plan, support, judge and give feedback on performance.

The **expert witness** is a person who is occupationally competent in the candidate's area of work and who may see the candidate working on a daily basis – this could be the candidate's mentor, they are able to make a judgement about competence, but it is still the role of the assessor to incorporate these judgements into the final assessment decision for the whole SVQ.

The **internal verifier** is someone designated by the assessment centre to ensure that assessors are performing consistently in the use of assessment methods and assessment decisions. This can be carried out by sampling evidence on a regular basis and by ensuring that candidates are being properly supported to achieve their award.

The **external verifier** is appointed by the SQA, the Awarding Body, to ensure consistency in assessment and internal verification across all centres offering the award. Centres are normally visited by an External Verifier once a year. SQA's External Verifiers may also meet with EVs from other Awarding Bodies to ensure UK wide standardisation.

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Required Expertise of Assessors, Expert Witnesses and Internal Verifiers

Assessors

The assessor is key to the assessment process and must be:

♦ Occupationally competent – this means that each assessor must be capable of carrying out the functions covered by the competences/Units they are assessing to the standard described within them, according to current sector practice. This experience should be credible and maintained through clearly demonstrable continuing learning and development. In due course, the implementation of regulatory requirements may mean that assessors will need to hold appropriate care/health qualifications.
♦ Have knowledge of the health, social care or educational settings, the regulation legislation and codes of practice for the service (where applicable) and the requirements of the national standards at the time any assessment is taking place
♦ Hold the current assessor qualification or be working towards, an appropriate assessor qualification. Achievement of the qualification will need to be within appropriate timescales normally a period of one year.
♦ Be able to assess holistically the values that are embedded within the 2009 NHS Code of Conduct for healthcare support workers.
♦ Take the lead role in the assessment of observed candidate performance. Assessors are expected to take on this role in relation to at least the core competences of the award.

Note: **If more than one assessor is required, assessment needs to be co-ordinated. One of the assessors involved in the process will draw together all assessment decision made by specialist assessors, and the contributions from expert witnesses across the whole qualification.**

Expert Witnesses

The use of Expert Witness is encouraged as a major contribution to the assessment of evidence of the candidate's competence, and used where there are no occupationally competent assessors for occupationally specific competences. The expert witness may be the candidate's mentor.

The expert witness must have:

♦ A working knowledge of the National Occupational Standards (NOS) and the Units on which their expertise is based.
♦ Current experience and occupational competence ie within the last two years, either as a practitioner or manager for the competences/Units on which their expertise is based. This experience should be credible and clearly demonstrable through continuing learning and development. In due course the implementation

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of the regulatory requirements may mean that expert witness will need to hold appropriate Care/Health qualifications.

♦ Hold either a qualification in assessment of workplace performance for example a Unit from the Learning and Development Suite, OR have a professional work role which involves evaluating the practice of staff eg the role of mentor.

Note: Expert Witnesses should be determined and agreed in advance with the SVQ coordinator in the centre.

Internal Verifiers

The Internal Verifier is key to the quality assurance and verification of the assessment of performance evidence in the workplace

Internal Verifiers must:

♦ Be occupationally knowledgeable in respect of the competences/Units they are going to verify prior to commencing the role. It is crucial that internal verifiers understand the nature and context of the assessors' work and that of their candidates due to the critical nature of the work and the legal and other implications of the assessment process.

♦ Have working knowledge of the health, social care and education settings, the regulation, legislation and codes of practice for the service (where applicable), and the requirements of national standards at the time any assessment is taking place.

♦ Occupy a position that gives them authority and resources to co-ordinate the work of the assessors, provide authoritative advice, call meetings as appropriate, visit and observe assessments and carry out all the other internal verification roles as defined by the relevant verifier qualification.

♦ Hold the relevant verifier qualification or be working towards, the appropriate IV qualification. Achievement of the qualification must be within appropriate timescales.

Service Users and Carers

Individual Patients and **Carers** are in an advantageous position in relation to receiving a service and having direct contact and experience of healthcare support worker provision. Their views of the care received should be seen as relevant and important in the assessment of the candidate's performance, alongside other sources of evidence. Individual patients and carers may provide witness testimony about the candidate's work. Final decisions about the status of this testimony in the candidate's assessment will be made by the assessor.

Assessment Methods

There are a number of methods of assessing evidence which can be used to demonstrate a candidate's competence. These are:

♦ **DO — D**irect **O**bservation by the assessor or expert witness of real work activities.

♦ **Observation Checklist —** The specific Evidence Requirements for each of the Units provides a guide to where a checklist may be used by the assessor or expert witness to record the candidate's competence in specific aspects of practice.

♦ **EW — E**vidence provided by an **E**xpert **W**itness — this can be either observation of practice or professional discussion on a particular area of work. The expert witness could also give a candidate feedback on additional forms of evidence they wish to use in their portfolio.

♦ **PD — P**rofessional **D**iscussion is a discussion which is planned and led by the assessor and must be recorded in such a way as to create an audit trail. It is not a question and answer session, but more of a chance for wider ranging discussions reflecting and evaluating on areas decided during the planning process. Professional discussion provides a holistic approach to assessing knowledge and understanding and is useful in determining not only what and how a candidate is performing, but also their analytical and decision-making abilities.

♦ **RA — R**eflective **A**ccount by the candidate, which is a detailed description of real work activities. Sometimes this reflection on practice can take the form of a Professional Discussion (which also must be recorded).

♦ **P — P**roducts — these are usually reports and recordings made by candidates as part of their normal work duties. Projects and assignments from formal learning or in-house courses could also be considered as products, as well as Achievement of Prior Learning (APL).

♦ **Q — Q**uestioning — a small amount of questioning may be used where necessary to enable the candidate to demonstrate a specific piece of knowledge.

♦ **WT — W**itness **T**estimony — this is a statement or comment by someone who was present while the candidate was carrying out an activity (eg colleague, patient, carer or other) and can confirm that the candidate's evidence is authentic. Care and sensitivity must be exercised if patients or carers are providing this.

Note for assessors: Assessors must ensure that it is not acceptable for a portfolio to be completed in pencil — nor to delete large amounts of detail using correction fluid (eg, Tippex) as this still does not ensure confidentiality of information. In addition, too many alterations can result in a very unprofessional looking portfolio inconsistent with the role of a healthcare support worker.

It is also the assessor's responsibility to ensure confidential documents relating to individuals are not included in the portfolio but retained in a separate file stored under secure conditions.

In addition to the Evidence Requirements for each Unit of the SVQs, SQA from time to time issues 'assessment guidance' where it is thought that guidance may assist

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the process of assessing a candidate. This information is provided on the Care Scotland web pages on the SQA website, http://www.sqa.org.uk/carescotland.

Evidence

Direct Observation — The assessor/expert witness records judgments of observed practice, showing the skills demonstrated by a candidate, and records how Performance Criteria and knowledge have been evident in the candidate's practice. In some Units this recording may take the form of a checklist. **It is not acceptable for candidates to record assessor observations**: if this is done, then the evidence has the status of a Reflective Account.

Professional Discussion — A Professional Discussion is a discussion which is planned and led by an assessor and must be recorded in such a way as to create an audit trail. It is not a question and answer session, but more of a chance for wider ranging discussions reflecting and evaluating on areas decided during the planning process. Professional discussion provides a holistic approach to assessing knowledge and understanding and is useful in determining not only what and how a candidate is performing, but also their analytical and decision-making abilities.

Observation Checklist — The specific Evidence Requirements for each of the Units provides a guide to where a checklist may be used by the assessor or expert witness to record the candidate's competence in specific aspects of practice. Where this form of evidence is permitted guidance is provided in the specific Evidence Requirements for the Unit.

Reflective Account — For some of the Units in the awards candidates are required to produce reflective accounts that are written in the first person and describe their actions in completing a task. The candidate is expected to indicate the Performance Criteria, and knowledge which are demonstrated in the recording. The reflective account should always explicitly focus on the candidate's real work and not on what *might* be done.

Product — Any work product that shows how a candidate meets the Performance Criteria, and knowledge can be used as evidence. Performance Criteria that indicate that the candidate should have recorded information are best met by products. Products should be the candidate's own work. Work products containing confidential information should not be placed in the portfolio but retained in a separate file stored under secure conditions. The assessor/IV and EV require to have access to products to ensure that there is an audit trail. Candidates must note their location on the evidence index form.

Witness Testimony — If someone other than an assessor or expert witness sees the candidate carry out some work, then the assessor or expert witness can request confirmation of this from a witness. Whereas a witness can make a qualitative comment on the performance of the candidate, it is still the responsibility of the assessor to make the judgment of the Witness Testimony and to match it against the specific Performance Criteria, and knowledge.

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Simulation — Simulation can be used by the assessor or expert witness where the work task is unlikely to occur, the Unit calls for action to be taken in a first aid emergency, or where there is a situation which could lead to risk harm or danger. Simulation is where an artificial version of a situation is created to allow the candidate to demonstrate performance and knowledge in a given area by simulating the activity and judging how the candidate would deal with the task if it arose. Simulation is only permitted if the specific Evidence Requirements contained in the Unit explicitly states this is possible. **A simulated exercise is one where a situation is demonstrated (usually through role play) and the candidate is asked to respond as they would in real situations eg major incident training.**

Projects and assignments — Projects and assignments are occasionally set by assessors to allow the candidate to meet some gaps in performance and or knowledge evidence. Assignments from formal learning programmes can also be used for knowledge evidence provided they are not more than two years old.

Accreditation of prior learning (APL) — Prior achievements of the candidate can be used to evidence Performance Criteria, and knowledge, provided there is an audit trail. However if this evidence is more than two years old current practice must also be included to show that the candidate still has the skill at the time of completing the qualification. Candidates using work from an assignment must clearly indicate on the evidence the Performance Criteria and knowledge being claimed.

Knowledge — Each Unit lists the knowledge and understanding that is required to effectively carry out the specific area of work practice. Most of the knowledge should be inherent through the candidate's work and must be explicitly evidenced either through the records of observations, professional discussions, reflective accounts or by recorded answers to specific questions.

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Further Guidance on Knowledge Evidence for Candidates

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. When reading the knowledge specification for a particular Unit, **it is important to read the knowledge requirements in relation to expectations and requirements of your job role.**

Remember that knowledge is not visible therefore candidates need to explain why they have done something in a particular way in order that the assessor or expert witness can be sure they really know.

You need to provide evidence for **ALL** knowledge points in every Unit and you can claim the knowledge in a number of ways:

♦ In recorded Professional Discussion, Reflective Accounts or through questions.
♦ On assessed work from formally taught courses the Knowledge Evidence numbers should be marked in the relevant sections of the assignment. However, candidates may still have to demonstrate through questioning or discussion with the assessor or expert witness that they are still able to put this knowledge into practice, if the course work was done over two years ago.
♦ By evidence from in-house courses — provided it is clear how and on what the candidate was assessed. If there was no formal assessment, then the course content can be used along with additional questioning by the assessor or expert witness or from a witness testimony from the person who delivered the training to ascertain application of knowledge — or by a Reflective Accounts showing how you are using the knowledge you gained.
♦ Through written or oral questions by the assessor or expert witness— all of which need to be recorded.

It is essential that evidence of the candidate's ability to put their knowledge into practice is primarily recorded through Professional Discussion. Questions from pre prepared 'Question banks' are **not** acceptable as the only form of knowledge evidence.

In each case, the evidence number where a particular knowledge point is to be found should be entered into the box beside that knowledge point.

Remember, the 'amount' and 'depth' of knowledge required should be consistent with your job role.

A glossary of terms related to each specific SVQ is included in the candidate portfolio.

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How to get started

The above guidance and explanations should be sufficient to allow an assessment to commence.

The best way to fully understand an SVQ award is **simply to start!**

At the start, the assessor/expert witness and candidate should meet and draw up an *Assessment Plan*.

The first assessment plan should contain some general decisions about how often candidate and

Assessor/expert witness will meet — and where. It may be important to agree a place where meetings will not be interrupted.

Subsequent plans should be specific about what evidence is suitable for the particular Unit(s) being discussed, when this evidence will be collected and should include review dates.

It is a good idea to make a decision about which Unit or Units will be tackled first. The award has been designed to focus on the practical tasks that relate to your job role and function.
During the assessment of the award evidence will be generated for the option Units selected and the mandatory Units, it is important to look at each piece of evidence in relation to all of the Units selected.

It is encouraging to try to start with a familiar area of everyday work, and be very specific about what piece of work the assessor/expert witness could observe some guidance on suitable situations is provided in the specific Evidence Requirements at the start of each Unit. You should always leave the planning meeting with a very clear idea of what has to be written, a date should be agreed when the assessment plan for the Unit (or Units) will be reviewed and a target date set for completion.

At subsequent planning sessions it is recommended you and assessor/expert witness take a more 'holistic' view of both the job role and the assessment of competence. What this means is that you are encouraged **not** to approach the SVQ on a Unit by Unit basis, but to see how normal day to day workplace activities will provide evidence of competence for several SVQ Units. This "holistic approach" may seem complicated when you start your SVQ as in previous awards it was possible to focus on one Unit. However, by following this approach you and your assessor/expert witness will quickly become more familiar with the standards and this will enable a more holistic approach to your work.

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