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Contribute to skills assessment

Historically, people whose skills are not highly regarded by the community tend to become marginalised within that community. In order for people with a disability to achieve rightful recognition, they must be given the opportunity to develop to their full potential and maintain the quality of life they desire.

Community services workers have a key role in assisting people to develop new skills and maintain their existing skills and abilities in order to live full and fruitful lives.

To achieve this, workers in community services need an understanding of the current philosophies that underpin working with people with a disability. This includes an understanding of social role valorisation, incidental learning, the importance of individual choice and the use of the person-centred approach.

Topic 1

In this topic you will learn how to:

1A Observe the person’s skills and competencies in a manner that respects the rights of the person

1B Support engagement of family, carers or relevant other in skills assessment

1C Record observations accurately and objectively in consultation with supervisor

1D Provide feedback about changes in demonstration of skills likely to impact on skills development
Strengths-based and active support

Strengths-based support simply means that each person is treated as an individual and skill development for that person builds on the skills, abilities and strengths they already have. It recognises what they can already do well and uses that as the basis to move forward.

Active support is practical, hands-on style support, recognising that many adults learn best by doing. This can take the form of staged, step-by-step practice of new skills.

Depending on the person and the task, verbal instruction or discussion may be helpful before and after each practice session. The goal however is always for the person to actually demonstrate the new skill they have acquired, rather than merely talking about it.

Once the skill is acquired in one setting or using one type of equipment then the skill will usually need to be practiced in other contexts where the person needs the skill.

Skills development areas include:

- Life skills
- Vocational skills
- Social skills
- Personal support skills
- Relationship skills, including intimate relationships
- Physical health, including sexual health
- Safety

Organisational policies

There are several important organisational policies that you need to be familiar with to communicate appropriately at all times. It is your responsibility to be familiar with these policies as they appear in your organisation’s policy manual.

Every service provider will have a policy relating to personal rights and choice. These rights reflect governmental requirements with reference to the right to quality and respectful support regardless of gender, race, social status or sexual preference, taking into account such things as cultural background, health status and special needs.

Your organisation has documented policies to assist you to ensure the rights of people are preserved. These include policies covering access and equity, privacy and confidentiality, personal rights, dignity of risk and duty of care.

You must adhere to these policies at all times to maximise the person’s feelings of self-worth and independence.
Impact of social devaluation

Social role valorisation suggests that if a person's place in society is not valued, then that person is less likely to benefit from what society has to offer. People who are socially devalued are more likely to be treated badly, abused or neglected.

Social role valorisation argues that improving and protecting the social roles of disadvantaged people will give them greater access to social benefits and rewards.

For people with a disability, this means that the respect, sense of expectation and acceptance that most of us take for granted will only be afforded to them when the community acknowledges their valued skills and abilities.

Things we take for granted include:

- a home of our own
- family and intimate relationships
- dignity and respect
- a sense of belonging
- acceptance in the community
- opportunities for education and skills development.

Increase community understanding

Along with fostering and promoting their skills, another strategy that will help disadvantaged people and people with a disability to grow in social standing is to highlight and challenge old discriminatory attitudes and practices. An example of this is promoting Para-Olympians as athletes on par with able-bodied athletes and providing similar funding for their training and development.

As a community service worker, part of your role may be to increase community understanding of the valuable role people with a disability can and do play in the community.

The information shown here describes how you can increase community understanding and enhance the skills of people with whom you work.

<table>
<thead>
<tr>
<th>Increasing understanding</th>
<th>Enhancing the person's skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speak positively about the person and the work you do with them.</td>
<td>Encourage the person to do as much as they can for themselves.</td>
</tr>
<tr>
<td>Lobby on the person's behalf.</td>
<td>Encourage the person to increase the range of their activities.</td>
</tr>
<tr>
<td>Increase your understanding of the role the person can play in the community.</td>
<td>Help the person to develop and review their goals.</td>
</tr>
<tr>
<td>Encourage the person to participate in community forums and activities.</td>
<td>Encourage the person to develop his or her own interests and hobbies.</td>
</tr>
<tr>
<td>Educate your family, friends and the community about disability rights.</td>
<td>Model a range of skills and activities.</td>
</tr>
<tr>
<td>Model a positive attitude to disability.</td>
<td></td>
</tr>
</tbody>
</table>
1C Record observations accurately and objectively in consultation with supervisor

The purpose of any skill assessment is to develop a clear picture of a person’s capabilities in order to make planning supports responsive to their needs.

The organisation you work for will have a process and protocols for conducting assessment. Assessment is a collection of observed evidence. Evidence based assessment values what can be observed not opinion or perception. The key function of any assessment protocol is to describe what evidence is collected by whom and by what means.

Any protocol should clearly detail your role in collecting evidence and a clear process to guide your actions. This includes the required documentation used to collect and convey observations from the assessment.

The Productivity Commission Report into Disability which led to the National Disability Insurance Scheme (NDIS) criticised assessment processes in state-based services for being fragmented, not clearly assigning responsibilities and devaluing input from family and friends.

Sources of assessment

When working with (rather than for) people with a disability following person-centred approach, assessment becomes more collaborative and inclusive.

Recognition that the assessment process itself can be disempowering, has led to a focus on self-assessment. Disability groups and advocates have called for self-assessment to be the default while recognising that it is not appropriate for all people and likely not to be the only form of assessment relied upon. The different sources of assessment are detailed here.

Professional/specialist

In some cases, a disability or health specialist may be required to contribute to an assessment. Occupational therapists, speech pathologists and physiotherapists are some professionals who may be consulted.

Carer/support person

People who provide paid and unpaid support to the person will have many first hand observations of the person to contribute to a skills assessment.

Carers or support workers may however provide more support than is necessary or be blind to situations where the person could work towards managing a task themselves.

Self-assessment

The person will often be the expert in what they can achieve independently and with degrees of support. Their point of view should be balanced by those around them to correct for over or underestimation of their current ability.
Example

Review life skills
Rick is a support worker and one of the people he works with is Marita. She lives in supported accommodation and attends a day centre. One day, she announces she wants to go out to buy her lunch.

Rick is unsure whether Marita has the skills to buy her own lunch, so he asks Marita to talk him through the process to be sure she understands what is involved. He asks Marita to break it down into steps and tell him what she will do. He then asks her to show him what money she has and to tell him what it is worth.

They then role-play Marita buying her lunch with Rick as the sandwich hand. Marita orders her sandwich and counts out the right amount of money. After the role-play, Rick believes she is competent to buy her own lunch.

Rick documents the discussion he has had with Marita and makes a file note of the process he used including the role-play and question and answer technique.

Respect a person’s rights
Observing a person’s right to dignity and respect is paramount to work in community services. For people to achieve greater status in the eyes of the community, workers must model the values of respect and dignity in all interactions with them. This is part of a support worker’s professional role and also reflects current philosophies in the sector.

Showing respect for others also contributes to developing an environment of mutual respect and trust, which allows the person to reach their true potential.

Always actively involve the person in any assessment and communicate openly with them. Ask their opinion. Develop active listening skills that lead you to understand their point of view, their likes and dislikes, their want and needs. When communicating with the person, you must be patient and take the time to understand what they are saying.

To generate a relationship that respects the person’s rights, you should:

- always address the person, not others with them
- make eye contact, if culturally appropriate
- give the person time to speak, even if speech is difficult
- not assume you know what they want
- not feel that you know better than they do regarding what is right for them
- avoid using unnecessary jargon or medical terminology
- ask for permission from the person before you take any notes
- involve them in problem-solving and decision-making
- listen to their concerns and reflect their emotions back to them
- not tell them about your problems.
Support in aged care facilities
Aged care facilities often look after people with a disability. These people can be young, middle-aged or older. Their disabilities might range from:

- a physical disability such as being confined to a wheelchair
- a sensory disability such as being blind or deaf
- an intellectual disability such as having dementia
- a psychiatric one where understanding and thinking are impaired

If you work in an aged care facility you might have to help people with a disability. You need to understand the various requirements depending on the area in which you work. Some people specialise in disability work.

Just like everyone else, people with a disability are all different. You need to understand how people are affected by their disability. If you are looking after a younger person find ways to help them stay involved with the community and people their own age.

Strategies to encourage people to engage in activities
There are many strategies you can use to encourage people to engage in activities. Strategy ideas are listed here.

<table>
<thead>
<tr>
<th>Strategies for encouragement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Be a role-model</strong></td>
</tr>
<tr>
<td><strong>Demonstrate how to do something</strong></td>
</tr>
<tr>
<td><strong>Ensure mastery of skills</strong></td>
</tr>
<tr>
<td><strong>Use drama and role-plays</strong></td>
</tr>
<tr>
<td><strong>Engage in group activities</strong></td>
</tr>
<tr>
<td><strong>Join a club or take out a membership</strong></td>
</tr>
</tbody>
</table>
Formal learning

While the distinction between a formal, structured, behaviourist approach and an informal, unstructured, social constructivist approach to skills development is an over simplification, it is a useful one to keep in mind when considering the resources required for learning.

These resources include the facilities required for learning such as the buildings and rooms, the equipment such as computers, instruments and learning aids, as well as the human and capital resources; the people and the finances.

Here is a list of resources that are valued by a formal approach to learning that can be employed to support skill development of people with disabilities.

- Accessible classrooms, computer labs and others facilities such as breakout rooms, toilets and lunchrooms.
- Equipment which can capture structured learning such as workbooks, computers and storage devices.
- Staff with specialist knowledge, skills and training to manage learning and group dynamics in the classroom.
- Presentation media or equipment such as whiteboards, smartboards and data projectors.
- Assistive equipment such as text to speech software and modified input and output devices.
Here is a summary of different types of skill sets, and examples of opportunities for engagement.

**Life skills**

**Skills:**
- Problem-solving
- Time management
- Planning
- Prioritising and sequencing

**Opportunities for engagement:**
- Social clubs
- Formal training
- Committee service
- Reference group or focus group

**Vocational skills**

**Skills:**
- Literacy and numeracy skills
- Professional work skills and qualifications
- Occupational skills

**Opportunities for engagement:**
- Formal training
- Volunteer work
- Buddying or mentoring
- Work experience
- Vocational counselling

**Social skills**

**Skills:**
- Communication
- Networking
- Empathy
- Speaking in a public forum
- Speaking in a public forum

**Opportunities for engagement:**
- Joining any kind of club or association
- Formal training
- Speaker’s forum
- Public meetings
- Volunteering
- Providing peer support
Skills inventory scales

A skills inventory is most effective when it is capable of distinguishing between a range of performance levels. It is usually an artificial distinction to simply say a person can or can’t perform a skill or task. Often it is far more useful to understand what level of support is required for them to be able to perform a skill.

A skills inventory should include a scale so that the level of independence that a person has in a skills area can be richly described.

### Skills inventory five point scale

<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent</td>
<td>Person is able to complete task without any form of physical, verbal or non-verbal support including prompting. The person may rely upon natural cues in the environment or refer to a task list or written steps or procedure as a memory aid but do so independently. The person at this level will be able to deal with a range of common contingencies and solve these problems effectively.</td>
</tr>
<tr>
<td>Little support</td>
<td>Person is able to complete task with very limited physical, verbal or non-verbal support including prompting. The person may at times look for reinforcement but will be aware of natural cues in the environment to assist them and may make use of a task list or written steps with or without prompting. The person at this level will be able to deal with a limited range of basic contingencies and solve these problems effectively.</td>
</tr>
<tr>
<td>Some support</td>
<td>Person is able to complete task with varying degrees of physical, verbal or non-verbal support including prompting. The person may use physical, verbal and natural cues in the environment to complete the steps involved. The person at this level will be able to deal with only the most basic changes to routine without significant support to solve these problems effectively.</td>
</tr>
<tr>
<td>Significant support</td>
<td>Person is able to complete task or perform skills only with a high degree of physical and verbal support including prompting and reinforcement. The person at this level will be unable to deal with any unexpected occurrence without significant support to solve these problems effectively.</td>
</tr>
<tr>
<td>Full support</td>
<td>The person in unable to perform any aspect of the task without significant physical and verbal support.</td>
</tr>
</tbody>
</table>
Residential

For persons living in a residential facility, the main resources they need in order to complement existing skills include transport and transport information, information on activities in the local community, information on training opportunities and how to become involved in local community issues.

Example
Pat lives in residential accommodation in an outer suburb of Sydney. She worked for many years as a bookkeeper before developing Parkinson’s disease. She is very keen to attend the local football match each Saturday, as well as volunteer her skills. She wants to join the club but does not know who to contact. Her support worker contacts the club and finds out how Pat can become a member. Pat joins the club and becomes their treasurer.

Respite

In a respite situation, people typically say they need to access more resources in terms of additional hours, additional activities, gyms and fitness centres, and art and cultural groups.

Example
Christos wants to start going to the swimming pool. He asks his support worker to help him identify which centres have the facilities for hydrotherapy. He needs a ramp and hoist to enter the pool. Christos’s support worker helps him to look up addresses in the Yellow Pages and make a phone call to enquire whether the centres have the necessary equipment.

Recreation

For those who attend recreational activities, the support worker may be asked to help them identify new or different recreational activities, or the equipment, tools or materials for them to complete projects. Other relevant information may be about transport and transport services.

Example
Lina has an intellectual disability. She attends a recreational centre and enjoys taking part in craft activities. Lina decides she wants to take up weaving and make a big wall-hanging. Lina asks her support worker to help her. Together they contact the local weaving guild, which has a second-hand loom for sale at a reasonable price. The support worker helps Lina purchase and collect her new loom. Lina joins the weaving guild and ends up expanding her social circle as well as her craft skills.

Employment

Typically, the complementary resources a person will be looking for when they are receiving support with employment will be job vacancy information, job search skills, access to training in interview techniques, transport, and modified equipment and office space. Work-based care might also be an issue.

Example
Chrissie is vision impaired and has experienced periods of depression. Through a work-based program she has the opportunity to return to work part time as a receptionist for a not-for-profit organisation. Chrissie decides she needs assistance from her support worker to identify how the organisation can get funding from Centrelink for office modifications and special equipment for her use. Her support worker obtains brochures from Centrelink with the information.
Example

**Mobilise people to use existing strengths**

Wendy was in a serious car accident 18 months ago. She received facial burns and lost her left arm. Since the accident, she feels self-conscious in public and did not return to her job as a journalist. She has been diagnosed with depression and is receiving support services to help with home care.

Wendy slowly develops a relationship of trust with Kaleen, her support worker. Kaleen suggests Wendy go out into the community more but Wendy’s response is a flat ‘no’.

Kaleen suggests Wendy volunteer for a program where she can provide English tutoring in her own home to new migrant women. At first Wendy says she is not interested but Kaleen points out that Wendy has well-developed language skills and that she might enjoy helping people who need to learn English.

After Kaleen leaves, Wendy thinks about her suggestion and the value of giving something to others, so she phones and enquires about becoming a volunteer. Wendy tutors new migrants two afternoons a week from her home.

Practice task 8

1. Using the skills inventory you created and used in the previous practice task, create a plan for using the strengths identified by the inventory as a platform for further skills development with the person.

2. Identify at least two skills from the inventory that the person is independent in or requires little support.

3. Discuss with the person an empowerment goal such as:
   a. to become more aware of changes they want
   b. to become more connected to their community
   c. to become more confident to participate more actively.

4. Describe the identified strengths in the plan and detail the strategies you will use to mobilise these strengths to achieve their empowerment goal including how you will:
   a. focus on the outcome
   b. help the person prioritise
   c. make success more achievable
   d. help them focus their energy
   e. provide positive feedback.
2G Discuss differences experienced in implementation of skills development activities

Skills development activities may vary in success from week to week. Gains may be obvious and significant one week, but these achievements may not always be maintained into the next week.

Just as results may vary, so too can levels of engagement, cooperation, enthusiasm and responsiveness.

If communication is no barrier, the simplest and most effective way to handle any concerns you have as a support worker is to state what you have observed and to ask the person what is going on for them. This will show that you are engaged and committed to the task of helping the person achieve their goals.

If there are difficulties with communication or the person is unresponsive it may be worth pursuing your enquiry with a family member or carer. To maintain trust between yourself and the person you are supporting you should always discuss with them your intention to speak to others about them and make sure they are okay with that.

You may need to check their file to see if there are any standing instructions or written consent documents. These may cover preferred communication methods or special requirements for privacy and/or confidentiality.

Differences in skills development implementation

A common area where differences are encountered in implementing a skill development program is between different support workers.

Personal relationships exist in the midst of professional ones and it is inevitable that people will work better with some people than others. As long as progress can be made and each relationship is functional, it is not a big issue if amongst a support team there are different personal dynamics and different approaches.

A diversity of approaches is usually a good thing as long as consistency of support is not compromised.

As a support worker, you must be able to recognise when a professional relationship is becoming problematic or dysfunctional. This includes a relationship that directly involves you as well as relationships you observe that involve other support workers.
Strategies to monitor skills

Monitoring skills requires more than just looking for clues that tell a story about a person. To get a more complete picture and confirm your judgment you may also need to talk to the person and gather the views of other people who play a significant role in their care.

When observing people for changes to their skill levels, there are some simple strategies you can use to guide you and support or confirm the observations you make. These strategies are outlined here.

**Observe**

Observe:
- what the person does for themselves
- what they no longer do for themselves
- what doesn’t get done
- changes in the environment, internal factors or relationships.

**Discuss**

Discuss with the person:
- what they would like to do for themselves
- what they feel they can no longer do
- how they would like it done
- what they enjoy doing
- what they feel others can learn from them.

**Gather feedback**

Gather third-person feedback from:
- relatives and significant others
- friends and neighbours
- fellow support workers
- other health professionals.

**Consult with your supervisor**

Your duty of care does not stop once you have monitored and evaluated the success of the strategies being used and recorded these in the case notes or plan of the person. Where you are concerned for the person’s wellbeing or believe action is necessary, you should consult with your supervisor as soon as possible and bring the issue to their attention directly.

As a support worker you may have the most contact with the person of anyone in their network. Regardless of how good your rapport is with the person you should never shoulder responsibility for their wellbeing if you believe they are at any risk. Make every attempt to discuss with your supervisor in the clearest terms possible any unusual or uncharacteristic behaviour you have noticed.
<table>
<thead>
<tr>
<th>My goals</th>
<th>Priority</th>
<th>What activities / strategies will help me achieve my goals</th>
<th>What support / resources will help me achieve my goals</th>
<th>Target date</th>
<th>Actual date</th>
<th>Progress notes</th>
</tr>
</thead>
</table>
| To create a blog and post to it weekly                                  | Medium   | 1. Complete online learning course in website design  
2. Set up laptop with proper keyboard, mouse and furniture  
3. Dedicate two hours each day to designing website | 1. Equipment:  
   - Docking station and hardware  
   - Website subscription and word-processing software  
2. Staff:  
   - No help required, sourcing equipment online | May        |             | EC has completed 3 of 5 online units and completed assessment. Regularly spends 2–3 hours studying online each day. |
| Walk to the local shops independently                                  | High     | 1. Attend water aerobics class at the local pool two days a week  
2. Perform resistance exercises according to physio exercise fact sheet using exercise bench at home  
1. Commence with physical support according to OT plan to a comfortable distance and extend slowly | 1. Equipment:  
   - Pool membership  
   - Exercise bench  
2. Staff:  
   - SW to accompany classes and assist with showering and toileting according to OT plan  
   - SW to provide initial support with resistance exercises and withdraw progressively | March       |             | EC has increased participation in classes and completes the whole session when she attends.  
EC has moved from requiring physical support with exercises to needing verbal prompting.  
EC regularly walks to post box approx. halfway to shops. |
| To independently remember all the things I need to take to the shops    | High     | 1. Investigate most appropriate and manageable bag  
2. Type up list of essential items in reminder app  
3. Set reminder app for correct time | 1. Equipment:  
   - Shopping bag, basket or jeep  
   - Mobile phone and app  
2. Staff:  
   - SW to assist with sourcing shopping bag | March       |             | Shopping jeep purchased.  
Mobile app downloaded and set. |
Acknowledge the person as their own expert

One of the first things you discover when you work in aged care or disability services is that you do not have to be an expert in everything in the field. Everyone is already an expert in their own condition. They know what it is like to live with a disability and the best way of achieving independence for themselves. Your role is to support them and to draw on their expertise to do so.

Many of the people with whom you work will have acquired a wealth of medical information and understanding about their condition. As a support worker, you can validate their knowledge by listening to them and treating what they have to say as valuable.

Recognise personal expertise

It is now more widely recognised that people with a disability have greater expertise about their own condition. This idea first came to prominence through AIDS lobby groups that championed what was then a new model of care. Concepts like a person-centred approach, respecting the right to knowledge and the right to make lifestyle choices have now become the norm.

Today, health professionals work with people to support them to achieve their desired quality of life. Peer support groups and disability advocacy groups have empowered people to be recognised for their expertise.

People and their families have expertise in:
- the progression of their condition
- their symptoms and how to manage them
- what is best for the person in a holistic sense
- what matters in terms of lifestyle
- the level of pain management versus quality of life
- palliative care in the home environment
- dignity of risk.

Example

The person as expert

George is providing care to Barry, who has decided he no longer wants to use the blood pressure medication he is on because of the unpleasant side effects. He explains that the medication makes him feel so tired he can’t even walk up the steps to his house without wanting a rest.

George respects the fact that Barry knows better than anyone whether the medication is right for him. They agree that Barry will take his medication this morning and then see about changing his prescription as soon as possible. George helps Barry to make an appointment that afternoon with his GP to discuss other types of medication.

George also suggests they record it in the communication book so that all Barry’s support workers know. He will also notify his supervisor so that Barry’s care plan can be amended. Barry agrees.
Practice task 15

The withdrawal of support to enable a person to engage in experiential learning of a particular targeted skill requires a clear plan and consideration of both duty of care and dignity of risk. Use the information in this table to plan a withdrawal of support. Consider duty of care and dignity of risk.

Bear in mind that the withdrawal of support will be staged. An example is provided to get you started.

<table>
<thead>
<tr>
<th>Task, type and degree of support</th>
<th>Withdrawal of support</th>
<th>Duty of care</th>
<th>Dignity of risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Setting oven temperature</strong></td>
<td>Withdraw demonstration and practical support. Continue with verbal prompting to check the temperature against recipe.</td>
<td>Continue to provide prompting around the temperature of the oven and safe handling of dishes to avoid burns.</td>
<td>Allow the person to burn or overcook the dish as a real consequence of not accurately reading the recipe and setting the oven temperature.</td>
</tr>
<tr>
<td>Verbal cue to find login and password details in notebook. Typing in the log in address for the person. Prompting them to type in their password themselves unless two incorrect entries are made. Assistance to type in password provided if they may be locked out of the system.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Logging on to password protected network</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Re-learning how to swim</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use of a buoyancy aid (vest) and kick board to practice kicking in the pool and to strengthen legs.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Topic 4
In this topic you will learn how to:

4A Comply with the organisation’s requirements to report

4B Maintain documentation in accordance with organisation’s requirements

Complete documentation
A skills development program will usually be concerned with documenting a number of observations. These include learner achievements, successful approaches to learning, level of engagement with learning strategies and the need for learning resources.

Your organisation will have policies and procedures for recording and reporting observations and actions. You must be aware of and follow these policies to meet your duty of care to the person and others.
changed priorities or new interests that make the plan seem irrelevant
support workers who do not have the skills to assist with the tasks involved
situations that require further assistance from health professionals.

People to communicate with

When any of these issues arise, you must liaise with your supervisor, relevant health professionals and significant others so the person can be re-assessed and their plan revised.

People you may need to communicate with include:

- advocates
- behavioural consultants (for acquired brain injury)
- carers
- colleagues
- other support workers, development officers or teachers
- the person’s family or friends
- outreach workers
- programming staff
- supervisors.

Reporting methods

Your organisation will have a formal reporting method to monitor the person’s development. This usually includes lodging a form expressing your concern as well as documenting your observations in the communication book to keep other support workers informed.

If difficulties are not communicated and the situation is not re-assessed, the person may become frustrated with the learning activity and give up, or express themselves through resistant behaviour.

You need to know how to report information in a way that complies with your organisation’s requirements. You also need to make sure that you report and record all information in a timely manner so that the records for those with whom you work remain current and accurate.

Report difficulty to learn

Jerry begins a computer literacy program because he wants to use the internet. After a couple of lessons he is finding the process frustrating and announces that he does not want to attend any more. His support worker talks to Jerry and then reports her concerns to her supervisor and the computer trainer.

The computer trainer says that Jerry appears to be frustrated with his lack of fine motor skills, which makes it difficult to use the keyboard. The trainer suggests that Jerry try a voice activated computer or a specially designed mouse. Either will enable him to continue with the lessons.

All this information needs to be recorded in Jerry’s files for future reference. This includes the feedback from the trainer. It may be useful if Jerry wants to take on another course in the future and will need similar support resources.
Summary

1. The reporting requirements of an organisation include funding and legislative obligations, WHS, staff accountability and continuous improvement.

2. Some reporting requirements at the organisational level are to ensure staff accountability and to enable effective supervision.

3. Each step of the skills development planning process requires documentation and reporting.

4. Legal reporting requirements are set out in federal and state legislation and standards.

5. Any issues with a skill development program should be addressed promptly and involve relevant people, staff and family.

6. Reporting must follow organisational policies and procedures.

7. Reporting requirements not only cover when and what to record but how to record information.

8. Observations should be objective and based on facts not opinion.

9. All types of documentation must be kept up to date.

10. Observations should include the time, date and context in which they were made.

11. Action plans are a useful part of any learning plan.

12. Useful and easily understood ways of recording information include logbooks and charts.

13. Privacy and confidentiality obligations require personal information to be securely stored and only shared according to organisational policy.

14. Learning plans may be in a variety of formats and structures but should include key information about goals, strategies, measures, resources and progress.