Holistic assessment against the PCF

**ASYE Assessment Report Template**

*Part 1: You may wish to use this section for TCSW for quality assurance purposes*

This form is intended for electronic completion. The answer spaces will expand to accommodate text.

**Guidance notes on last page**

**Box 1: Identities**

<table>
<thead>
<tr>
<th>Role</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>NQSW</td>
<td>Sally Mills (FICTIONAL EXAMPLE)</td>
</tr>
<tr>
<td>Professional supervisor/assessor</td>
<td>Moira Jacobs</td>
</tr>
<tr>
<td>Line manager (if different role to above)</td>
<td>As above</td>
</tr>
<tr>
<td>Agency /employer</td>
<td>Local Authority Community Mental Health Team (Adults 18 – 65)</td>
</tr>
<tr>
<td>Date ASYE commenced</td>
<td>10 September 2012</td>
</tr>
</tbody>
</table>

**Box 2: Progressive assessment (see guidance note 1a)**

<table>
<thead>
<tr>
<th>Date</th>
<th>Strengths and areas for development</th>
<th>Action plans</th>
</tr>
</thead>
</table>
| Learning agreement | 21 September 2012 This was compiled/completed and agreed/signed by NQSW and practice assessor within three weeks of starting date. Sally completed this and brought it to supervision promptly as agreed. It demonstrated to me Sally’s commitment, reliability, accountability and professional conduct. (PCF 1) The learning agreement (LA) formed the basis for assessment of Sally’s practice for the year. Sally expressed that she was feeling quite apprehensive about managing a ‘big’ and complex caseload. As she identified her learning needs she was alerted to the fact that she was not as confident and familiar with the PCF. | Sally’s observations about her practice and learning needs were further discussed, and it was agreed:  
- that she will have a ‘protected caseload’ the numbers depending on the nature and complexity of involvement  
- that she will have the opportunity to stretch and challenge her practice but with the assured support from her practice assessor  
- regarding the PCF, Sally will familiarise herself with the nine domains, bringing three at a time for discussion in the immediate following supervision sessions, when the PCF will be spelled out with the ASYE level that Sally will be assessed against |
| **1st review** | **20 December 2012** | Whilst Sally has made an impressionable start in the job, applying, with diligence, the knowledge, skills and qualities which she brought with her at qualifying level, especially from related experiences in her final placement at a mental health centre, it soon became apparent that Sally was feeling overwhelmed by the immense amount of policy and legal documentation that inform mandatory social work in this area of practice in mental health.

With reference to domain PCF 5, Sally will need to engage more rigorously in seeking legal expertise and advice to promote and enhance better understanding of the legislative and policy frameworks that inform practice in mental health, so that she can apply this knowledge more effectively and confidently. This was raised with Sally and discussed in supervision. It has been suggested that progress can be achieved:
- through her accessing and ‘digesting’ relevant documentation and literature
- through shadowing AMHP as often as possible
- by using supervision more effectively to enhance understanding and application of legislation and policy to this area of practice
- by using case studies and direct observations for references

| **2nd review** | **20 March 2013** | Sally is coming along very well with reference to the above observation, and on the whole doing very well. But, and understandably, as Sally has begun to get to grips with relevant information and documentation for mental health service provision, she will now need to ‘fine tune’ and develop her understanding of, and the use of, a range of intervention skills (with reference to domain PCF 7) to be able to engage with and communicate effectively with service users and carers, and hence enhance her confidences in practice in this area. This has been raised and discussed in supervision and prioritised on the agenda. Sally will bring to supervision specific case study material that she has reflected on and analysed, identifying theoretical approaches and interventions in what she had done. It has been agreed that Sally will do case presentations to staff team for discussion, highlighting theoretical approaches and interventions.

| **Final assessment** | **30 August 2013** | A detailed report follows below, but summarily, Sally’s progress has been commendable. She has worked diligently in addressing the areas needing attention as identified above and has taken on board the action plans. She is more confident now in identifying appropriately legislation and policy applications to practice and working cognitively with theoretical approaches and interventions in her practice (PCF 5 and 7). This has enhanced her confidence in herself and her interactions with service users (PCF 2). |
Box 3: Minimum basis for robust judgements (see guidance note 1a)

<table>
<thead>
<tr>
<th>Does the evidence contain:</th>
<th>Confirmation &amp; examples (cross reference to box 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence of identifying and meeting learning need via:</td>
<td>• Specific learning needs identified early on in the learning agreement.</td>
</tr>
<tr>
<td>• learning agreement</td>
<td>• Monitoring and evaluation of practice with reference to the documentation of the PCF at ASYE level.</td>
</tr>
<tr>
<td>• professional supervision</td>
<td>• Ongoing positive and constructive criticism in supervision held regularly throughout the year, date and times specified.</td>
</tr>
<tr>
<td>• reviews</td>
<td>• Areas of concern and new learning identified at third month and sixth month reviews.</td>
</tr>
<tr>
<td></td>
<td>Reflective pieces of work provided insight for the consolidation of practice and areas of new learning.</td>
</tr>
<tr>
<td>Observations of a range of examples of practice</td>
<td>Four observations were made at approximately three month intervals observing:</td>
</tr>
<tr>
<td></td>
<td>1. Skills and communication styles of student’s abilities to establish rapport and communicate effectively, using verbal and non verbal skills in an initial visit to a service user’s home.</td>
</tr>
<tr>
<td></td>
<td>2. Student’s ability to advocate on behalf of service user, taking into consideration value based intervention methods and approaches –e.g. Domains 2, 3 and 4.</td>
</tr>
<tr>
<td></td>
<td>3. Students ability to share learning and be proactive in the learning of others via case study presentation. Students ability to work in collaboration and inter-professionally in the best interests of service user.</td>
</tr>
<tr>
<td>In different settings</td>
<td>At home of service user; in a hospital ward; at work place; at a residential setting.</td>
</tr>
<tr>
<td>By different observers</td>
<td>Two of which were observed by practice assessor; one by another senior practitioner; and one by another senior social care practitioner (non social work qualified).</td>
</tr>
<tr>
<td>Over the period of the programme</td>
<td>Ongoing feedback from staff in team; peers; inter-professional staff and personnel; service users and carers; use of checklists; minutes; report writing; accessing and developing CPD: in-house training; supervision notes; case study presentations; reflective written work/discussion.</td>
</tr>
<tr>
<td>Final assessment recommendation made by experienced registered social worker</td>
<td>Senior social worker who is also line manager.</td>
</tr>
</tbody>
</table>
### Box 4: Summary of evidence (see guidance note 1b)

<table>
<thead>
<tr>
<th>Evidence for final assessment (This is not a prescriptive list of evidence requirements and you may wish to add other examples)</th>
<th>Please give a summary of the pieces of evidence that were used to contribute to the final assessment. Give details (dates, type, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manager report (where the assessor is not the line manager – see attached template)</td>
<td>N/A</td>
</tr>
<tr>
<td>Learning agreement</td>
<td>This was compiled/completed and agreed /signed by NQSW and practice assessor within three weeks of starting date. Sally completed this and brought it to supervision promptly as agreed. It demonstrated to me Sally’s commitment, reliability, accountability and professional conduct. The learning agreement (LA) formed the basis for assessment of Sally’s practice for the year. It proposed, very clearly, that Sally will be allocated a ‘protected caseload’, the numbers depending on the nature and complexity of involvement; ones which will also stretch and challenge Sally’s practice, but with the assured support from her practice assessor. It also spelled out the domains of the PCF at ASYE level that Sally will be assessed against, and the dates and deadlines for the supporting evidences that were required.</td>
</tr>
</tbody>
</table>
| Interim review 1 | Gave us the opportunity to raise and discuss:  
• positive feedback  
• areas for improvement; actions to be taken;  
• opportunity for me to observe and be informed of Sally’s openness to new learning (PCF 5)  
• ability to take constructive criticism (PCF1)  
• opportunity for Sally to alert me to her learning needs  
• opportunity to assess Sally’s reflective analytical and skills and professionalism of practice  
• discussion of case study material for identifying legislation and policy matters (PCF 5)  
• discussion and feedback from DO – the use of value base and ethical considerations; rights and ADP; AOP, in interaction with service users (PCF 2 and 4) |
| Interim review 2 | Gave us the opportunity to discuss and explore progress and development:  
  - to give and receive honest feedback from each other  
  - for me to make further observances of Sally’s growth and development of practice and her professional role  
  - to identify areas for attention and further development to concentrate on further for rest of the year  
  - discussion of case study material to identify theoretical approaches and interventions  
  further feedback and discussion of DO – case presentation and demonstrating (PCF 9 and 8) |
| Supervision records – dates | This was held once a week, every Monday from 9.30am – 11.00am for the first six weeks. Then fortnightly for the next six months; and monthly for the remainder of the year. Sally and I came prepared with an agenda. This was prioritised.  
Sally was responsible for writing up the minutes of the supervision in bullet points which were sent in advance before the next meeting.  
Again this was an opportunity for me to access Sally’s abilities in record writing, accuracy and integrity of practice, amongst other qualities and skills (PCF 7); discussion and reflection of case studies; direct observations; service users’ feedback (PCF 7). |
| Direct observations – dates | Four direct observations took place, at three monthly intervals:  
  Two by practice assessor – me.  
  Two, each by different practitioners – one qualified social worker; one occupational therapist from team.  
Allowed for observation of Sally’s practice skills, knowledge and qualities within context of agenda for observation and working with service user/carer, including ADP, AOP, SU rights, working in partnership, SU choice and self determination, core social work value base (PCF 2, 3, and 4). |
| Work products (list) | Case notes; letters written to service users; and carers; inter-professional reports; interagency reports; service user and carer feedback; checklists.  
Allowed for the assessment of Sally’s ability to write as a professional:  
  - observances of professional language and communication styles – accountability working with carers and service users |
### Extended piece of critical reflection (date/s)

Four pieces of critical reflection following (i) on an assessment of needs visit; (ii) observations of a senior social worker at a multi-disciplinary meeting; (iii) ongoing support casework; (iv) AMPH shadowing – all provided evidences of:

- reflective/analytical skills (PCF 6)
- engagement with ethical and value consideration (PCF2, 3 and 4)
- application of knowledge and methods of intervention (PCF 7)
- legal and policy implementation and knowledge (PCF5)
- service user involvement and appraisal (PCF 2)

### Other

Provided evidences of

- team working
- working within an organisation and inter-professionally
- research mindedness
- working with service user (PCF 5)

### Box 5: Signatures

<table>
<thead>
<tr>
<th>Assessor</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Line manager</td>
<td></td>
</tr>
<tr>
<td>(if different role to above)</td>
<td></td>
</tr>
<tr>
<td>NQSW</td>
<td></td>
</tr>
<tr>
<td>(to confirm you have received this report)</td>
<td></td>
</tr>
</tbody>
</table>

*Continue to part 2*
Holistic assessment report, part 2 *(see guidance note 2a)*

**ASYE level descriptor:** “By the end of the ASYE social workers should have consistently demonstrated practice in a wider range of tasks and roles, and have become more effective in their interventions, thus building their own confidence, and earning the confidence of others. They will have more experience and skills in relation to a particular setting and user group, and have demonstrated ability to work effectively on more complex situations. They will seek support in supervision appropriately, whilst starting to exercise initiative and evaluate their own practice.”

<table>
<thead>
<tr>
<th>Feedback on overall capability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building on interim reviews including the progressive assessment of the NQSW’s capability please provide an overall judgment of professional capability at ASYE level, taking into account capability across all nine domains of the PCF, with reference to the level descriptor for ASYE and to the requirements for progression between levels. Link your comments to examples of the evidence presented over the course of the year. (Guideline approx. 500 words; box will expand to accommodate text.)</td>
</tr>
</tbody>
</table>
Feedback on overall capability

Sally joined the CMHT as a NQSW on 2 May 2011 and was sponsored immediately to the ASYE scheme. In the final year of her graduating course, she had a 100 days placement within a Mental Health Day Centre, provided by a local authority. Sally brought with her considerable skills, qualities and knowledge, grounded in the National Occupational Standards (NOS) of the previous competency framework, from where she obviously developed, consolidated and learnt new skills, and acquired much knowledge about social work, over the three years of study.

The feedback from staff in the team and other professionals working alongside the team – psychologists, occupational therapists, psychiatrist, doctors and CPNs – confirmed that Sally stepped into her role with enthusiasm and commitment and an air of fair confidence of herself and her practice, which helped tremendously in settling in. Sally had been introduced to the Professional Capabilities Framework in the latter part of the semester in the final year, and so she was aware that she would have to meet the capabilities within each of the nine domains, and at the level required for ASYE.

She showed willingness and openness to this new learning, and took advantage of supervision effectively querying and challenging her learning needs and what she already possessed, to enhance her own learning and development (PCF 1).
She demonstrated a sound ability to act professionally and manage her own learning (PCF 1).

Over the year, Sally was allocated cases which required working with service users who had moderate but regular support and needs from a social worker. However, one of these became complicated as the service led mandatory intervention and had to be managed by the practice assessor. Sally continued to have an input and undertook a shadowing role in the eventualities that ensued. It was a very testing time for Sally as it brought out the best in her practice and highlighted areas for development.

In summary, Sally’s work with service users demonstrated quite clearly that her practice complied with the requirements of all the domains of the PCF. Case presentations, and the discussions that followed, illustrated that Sally keenly worked with ethical and value based practice at all times (PCF 2 and 4), and ensured that her work with service users maximised their opportunities to have a voice, a choice and the opportunity to determine decisions (PCF 2). Sally invested a lot of time in reflection and analytical practice (PCF 6), as she stimulated discussions and challenged her way through some sticky issues in supervision. She is a team worker and reached out to colleagues and peers to enhance her learning and was also keen to contribute likewise to theirs as demonstrated in her input of case presentations and research (PCF 9).

At the 1st and 2nd reviews, areas for attention and development were identified and agreed (see emerging issues in 1st and 2nd interim reports) within the domains PCF 5 and PCF 7. Sally herself was instrumental in alerting and being insightful for development in these areas, and was prepared to work consistently at improvements in these areas.

At the end of her ‘probationary’ first year of practice, Sally has demonstrated, more than adequately, that she has met all the capabilities within the nine domains of the PCF at level 1, progressively, from a newly qualified stance to a more confident practitioner, who is ready to take on the challenges of meeting the capabilities for the next stage of her professional development.

Continue to holistic assessment of each domain
**Part 2 cont/d: Holistic assessment of each domain**

Please provide information to support your overall assessment against the nine domains identifying strengths and areas for development/concern. Looking at the individual capability statements may help you with making and articulating your decision. (Please delete ‘Pass’ or ‘Fail’ as required.)

**Domain 1  Professionalism: identify and behave as a professional social worker, committed to professional development**

Social workers are members of an internationally recognised profession, a title protected in UK law. Social workers demonstrate professional commitment by taking responsibility for their conduct, practice and learning, with support through supervision. As representatives of the social work profession they safeguard its reputation and are accountable to the professional regulator.

| Sally has, without a doubt, illustrated that she is a ‘serious’ social worker, and understands her role in its entirety and context. Hence, over the year, she has presented reliability, honesty and accountability, in all the work she has undertaken. I am particularly impressed with the way she has used supervision to enhance and develop new learning, and in consolidating past learning; she is open to constructive criticism, and is prepared to make changes to her practice, to be of benefit to service users and carers, other professionals and people she comes across generally. Though at the beginning, Sally found it difficult to maintain professional boundaries, as she was very eager to show willingness and helpfulness, she has now grasped the meaning and necessity to maintain and sustain sound working relationships and boundaries in her practice.  
Example  
A good example of Sally’s existing adherences to sound professional conduct is in the efforts she made from the very beginning, by producing the learning agreement on time and identifying her learning needs, honestly and with insight, and her preparedness and openness to seek support and advice about them. She highlighted within her particular areas for development her lack of confidence in managing complex cases, insufficient familiarity of the PCF, exposing her own vulnerabilities, with the intentions of bettering and developing her practice. Later on at the 1st and 2nd interim reviews, she took onboard and worked on the constructive feedback and action plans that she needed to improve in her understanding and application of legislation, policy procedures, theories and intervention methods, to substantiate effective practice.  
**Source of evidence used to support judgement**  
(Link to box 4 in part 1, above):  
- Her ability to meet deadlines – learning agreement  
- Supervision notes  
- Reports and case notes  
- Workload management | Pass |
Domain 2  Values and ethics: apply social work ethical principles and values to guide professional practice

Social workers have an obligation to conduct themselves ethically and to engage in ethical decision-making, including through partnership with people who use their services. Social workers are knowledgeable about the value base of their profession, its ethical standards and relevant law.

It is evident that Sally has incorporated the core social work value systems that underpin all areas of practice within her own, and has consistently demonstrated her compliance with its application, on a day-to-day basis, in her working relationships with service users as well as colleagues and other professionals she comes in contact with. She is astute in her observations of the ‘invisible’ disadvantages that accompany service users in this particular area of mental health, e.g. that someone who has everything he or she wants materially, can be suffering from depression, so not to judge, but to listen very carefully, and in so doing ensure that this service user has access to equal opportunities in the assessment of his or her needs. Sally is particularly vigilant in working with service users and carers, and promoting their participation in decision-making wherever possible. More importantly, I have observed that Sally will question and challenge her own value systems and willing to be challenged by peers and colleagues (PCF 2, 3 and 4).

Example

Sally’s capabilities in this area was well substantiated in one of my DO involving her interaction and work with A, a 58 year old, West Indian, single, male person, who had ongoing physical and mental health problems which necessitated constant monitoring. Sally had arranged to visit him on the hospital ward. He did not have any relative who might have been able to support him. It was being recommended that he should be placed within a residential setting for his own safety. But A was resisting this and adamantly insisting that he returned to his flat. In the DO, I saw Sally, appreciate his wishes, but gently ask him to listen to the options and reasons why it was being suggested that he was placed in a residential setting. She then also specified the sort of support she will be able to put in place. She explored some of the risks he might be putting himself in. She offered to take him out on a visit to the place of residence. She explained the personalisation agenda in user friendly language accessible to A. And finally left him with leaflets and information that he could read over and discuss with anyone else he chose, and ‘asked’ him to consider this option giving him time and space to do so. She requested and informed him that she can return again within a week to hear his decision and have any further discussions or answer any further questions. He agreed to this, and a date was set. Service user feedback quote ….'Sally made me feel calm…..She did not force me to do anything…..I felt she was looking after me and wanted the best for me….I will think about it'. This example clearly demonstrates Sally’s ability to comply with PCF 2, 3 and 4 very adequately.

Source of evidence used to support judgement  (Link to box 4 in part 1, above):

- From discussions around her work with services users in supervision
- Supervision records
- Direct observation
- Case presentations
- Feedback from service user and carers

Pass
### Domain 3  Diversity: recognise diversity and apply anti-discriminatory and anti-oppressive principles in practice

Social workers understand that diversity characterises and shapes human experience and is critical to the formation of identity. Diversity is multidimensional and includes race, disability, class, economic status, age, sexuality, gender and transgender, faith and belief. Social workers appreciate that, as a consequence of difference, a person’s life experience may include oppression, marginalisation and alienation as well as privilege, power and acclaim, and are able to challenge appropriately.

Sally is meeting this requirement more than adequately at this level. In synchronicity with the above capability, Sally is particularly committed to recognising and acknowledging differences in service users’ background and social orientation, and is willing to ensure that she provides unbiased, anti-discriminatory and anti-oppressive considerations in her work with service users and carers. She is particularly aware of the disadvantages in most terms for those who are mentally distressed and is very careful in her assessments for provisions and care for service users in this group, making sure that her service users’ rights are not violated, yet learning to work with assessing risks and planning with the service user in what is in their best interests. It is very good to see that Sally is keen to engage and communicate with colleagues and other professionals in also accessing what is best for service users.

See example above in 2

<table>
<thead>
<tr>
<th>Source of evidence used to support judgement</th>
<th>Pass</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct observation;</td>
<td></td>
</tr>
<tr>
<td>Letters to service users and carers;</td>
<td></td>
</tr>
<tr>
<td>Case presentations</td>
<td></td>
</tr>
<tr>
<td>Reflective pieces</td>
<td></td>
</tr>
<tr>
<td>Feedback from service user/carer</td>
<td></td>
</tr>
</tbody>
</table>

### Domain 4  Rights, justice and economic wellbeing: advance human rights and promote social justice and economic well-being

Social workers recognise the fundamental principles of human rights and equality, and that these are protected in national and international law, conventions and policies. They ensure these principles underpin their practice. Social workers understand the importance of using and contributing to case law and applying these rights in their own practice. They understand the effects of oppression, discrimination and poverty.

As in the above two capabilities, this is another of Sally’s strong areas of practice. At the beginning, Sally struggled a little with consistency of practice in this requirement, not because it was not within her grasp and understanding, but because she was a little overwhelmed with what she needed to know in terms of legal framework and policies that govern this area of practice. But as this was raised in supervision, Sally has made concerted efforts to familiarise herself with relevant documentation and literature to ensure that she is reaching an acceptable level of competency in this domain, which she has, and I am confident that she will acquire as she progresses.

<table>
<thead>
<tr>
<th>Source of evidence used to support judgement</th>
<th>Pass</th>
</tr>
</thead>
<tbody>
<tr>
<td>From case notes</td>
<td></td>
</tr>
<tr>
<td>Supervision</td>
<td></td>
</tr>
<tr>
<td>Direct observation</td>
<td></td>
</tr>
<tr>
<td>Feedback from colleagues and staff</td>
<td></td>
</tr>
<tr>
<td>Feedback from service users/carers</td>
<td></td>
</tr>
<tr>
<td>Domain 5</td>
<td>Knowledge: apply knowledge of social sciences, law and social work practice theory</td>
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<td>----------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Social workers understand psychological, social, cultural, spiritual and physical influences on people; human development throughout the life span and the legal framework for practice. They apply this knowledge in their work with individuals, families and communities. They know and use theories and methods of social work practice.</td>
</tr>
</tbody>
</table>

This was a domain that Sally was less confident about to start with. Sally herself had been quite insightful about her lack of confidence in the application of this requirement in her practice, and brought this up in supervision. Sally was proactive in discussing cases that she was responsible for, and from which learning took place on how theories, methods of social work intervention and legislative frameworks and policies could inform practice, and developed/is developing, the art of appropriately and creatively applying her knowledge in legal and policy matters, and other social work concepts and methods of practice, at a commendable level.

**Example**

With reference to the example in Domain 2 above, Sally took the opportunity to bring A up in her case study presentation to the team, as she felt quite uncertain about it all. In her presentation Sally sought further information around the Mental Capacity Act 2005; best Interest agenda; and personalisation agenda with reference to A, among other policies and procedures. She also queried her own biases, as she personally agrees with A and felt that he should be allowed to return to his flat, with provisions made to support him in this. She explored what the consequences would be for the team within its organisational context and remit, etc. (PCF 5 and 8).

**Source of evidence used to support judgement** (Link to box 4 in part 1, above):
- Discussions of cases in supervision
- Direct observation
- Reflective pieces of work
- Service user feedback
- Case study presentation
- Interim review

| Pass |
### Domain 6  Critical reflection and analysis: apply critical reflection and analysis to inform and provide a rationale for professional decision-making

Social workers are knowledgeable about and apply the principles of critical thinking and reasoned discernment. They identify, distinguish, evaluate and integrate multiple sources of knowledge and evidence. These include practice evidence, their own practice experience, service user and carer experience together with research-based, organisational, policy and legal knowledge. They use critical thinking augmented by creativity and curiosity.

This is clearly one of Sally’s attributes in practice. Sally is a very reflective practitioner and is demonstrating this capability to a post NQSW level of practice. It is very refreshing to observe how Sally uses her peers and colleagues to facilitate reflective and analytical thinking in discussions at meetings and on a one-to-one basis and in supervision. She engages with creativity and purpose in problem solving issues, and can achieve very practical and economical outcomes for service users as well as her organisation.

#### Example

Sally demonstrates her capabilities within this domain, succinctly, in a reflective piece which we discussed in supervision.

B is a 25 year old, white, single parent with a four year old son. Sally has been allocated to support B as she has recently been referred to the psychiatric out patients. She suffers from depression, which is managed on the whole pretty well by medication, until recently. She is currently in the first year of a social work degree programme. B discovers that she is four weeks pregnant. The demands of the course are overwhelming, and there are other problems relating to her relationships, her son, financial constrains and debt. B confides to Sally that she cannot cope and though it is against her religion (she is a catholic) she is thinking of an abortion, but cannot make up her mind what to do for the best. Sally documents her work in a reflective piece which she brings to supervision. Sally demonstrates what her thoughts and feelings are and questions her own values and dilemmas and how best she can facilitate and be of help and yet maintain B’s sense of autonomy and control of her life. Summarily, at first Sally was drawn sympathetically towards B as she identified closely with B, looking back to when she had her daughter (who is now 13), and how it was like being a single parent; also with financial constraints. Sally was more than comfortable with the idea that B was contemplating having an abortion, as Sally was considering how difficult it would be for B to bring up another child (two) on her own. Sally so much wanted to support B to obtain a degree, as she had done albeit with support from her parents.

In retrospect, Sally noted about herself, that thankfully, and to her own credit, she was a good listener, so had allowed B to ventilate and express herself as much as possible, without judging her. She also acknowledged to B that there were some serious considerations, that B has now been able to verbalise, and agreed that perhaps they could revisit and discuss further at the next meeting.

As Sally reflected on her visit and contents of the communication and her own responses, she soon realised that she had unwittingly ‘personalised’ the scenario and was getting quite emotionally involved. Her agenda was now becoming B’s agenda and vice versa. Sally also realised that she wanted to protect B as her parents did her, and was wishing for B what she had achieved for herself, financial and emotional stability. She so much wanted to assure B that ‘things can work out’ and that she will support and champion her cause for it!

However, as soon as she started to put this into context and work commitments and agency remit, Sally began to realise that a blurring of vision was taking place, and professional boundaries will be crossed. She started to ask ‘what does B want for herself?’ How might B want to proceed and how can she support, or not, B from her point of views and the organisational points of view? Soon it set Sally thinking in more objective and impersonal but professional practice approaches that would achieve best interests and best practice outcomes and results.

### Source of evidence used to support judgement

(\[Link to box 4 in part 1, above\]:
- Reflective pieces of work
- Excellent evidence in supervision

| Pass |  |
### Domain 7  Intervention and skills: use judgement and authority to intervene with individuals, families and communities to promote independence, provide support and prevent harm, neglect and abuse

Social workers engage with individuals, families, groups and communities, working alongside people to assess and intervene. They enable effective relationships and are effective communicators, using appropriate skills. Using their professional judgement, they employ a range of interventions: promoting independence, providing support and protection, taking preventative action and ensuring safety whilst balancing rights and risks. They understand and take account of differentials in power, and are able to use authority appropriately. They evaluate their own practice and the outcomes for those they work with.

I have no doubt, Sally came with a discernible and accessible knowledge, skills and qualities within her practice, which she has applied with a measurable level of consistency and acceptance for this level of practice, generally. However, her performances within this particular domain, have not been wholly consistent, at the beginning, when it became quite evident that Sally was struggling to apply appropriate methods of intervention with service users she was working with, and/or advise them appropriately, using appropriate language and communication skills, with confidence and authority.

On discussing this with Sally, it became apparent that Sally was finding it difficult because her knowledge base of legislative and policy frameworks was not up to scratch. This in turn made her feel less confident of her approach and communication style and authoritative stance she had with service users.

We were able to put this right with a supervision session concentrating on discussions to meet the above gaps in her practice. Sally demonstrated her ability to challenge her weaknesses and work on them.

Happily, in the course of the following months, Sally was able to consolidate her knowledge with practice and was soon seen to be able to improve in her working relationships with service users, communicate more effectively with them, feel confident in assessing and managing risk factors when working with service users and in appropriate decision-making in safeguarding and potential abuse situations. Sally is progressing very satisfactorily in this area of practice and is now meeting the expected level for this stage of practice, adequately.

**Source of evidence used to support judgement**  (Link to box 4 in part 1, above):

**Example**

Using the same example in Domain 6 above, and in supervision, Sally clearly identified and discussed how she used person centred approach, task and solution focused approaches; her understanding of ADP and AOP; theoretical approaches in empowerment, service user involvement; and working in partnership, networking and collaborative/inter-professional working.

She listens very attentively to what B says about her thoughts on abortion and ensures that she is non-judgmental in what she says and body language.

She empathises with B’s overwhelming demands of college life.

She explores with B her rationale for abortion, as B is undecided she discusses options and offers some very good sources that B can access for further specialist advice and information.

Sally offers to accompany B to see her tutor at U if this is what she wants.

Sally explores and discusses sources and options for financial support.

Sally then suggests that they work together on some of the proposals in the discussions above, and also sets a few manageable tasks that B might want to do by and for herself.

They agree to meet up at a certain time and date for three consecutive meetings and then review the situation.

In her reflection, Sally clearly complies with the capabilities within this domain using analytical and reflective skills to substantiate her practice and inter-working relationship with B.
### Domain 8  Contexts and organisations: engage with, inform, and adapt to changing contexts that shape practice. Operate effectively within own organisational frameworks and contribute to the development of services and organisations. Operate effectively within multi-agency and inter-professional partnerships and settings.

Social workers are informed about and pro-actively responsive to the challenges and opportunities that come with changing social contexts and constructs. They fulfil this responsibility in accordance with their professional values and ethics, both as individual professionals and as members of the organisation in which they work. They collaborate, inform and are informed by their work with others, inter-professionally and with communities.

Sally is definitely a ‘team worker’. Over the year, Sally has made a concerted effort to get to know her colleagues and how they work by showing willingness and efforts in shadowing everyone in turn. She has been proactive in approaching colleagues and inter-professional colleagues in designing and planning care packages for the service users she works with and who work with others as well in the field. Sally has met with oppositions with her plans and suggestions, but has demonstrated maturity of mind and attitude facing adversity, through supervision and conflict resolution. At all times Sally has acted with respect for persons concerned.

**Example**

Sally expressed an interest in service provision facilities, and remit from the team, and feedback from service users as to what they would like to get from social workers. So she suggested that she carried out a small scale research/study to find this out. She organised a forum consisting of service users who she worked with that met once a month (over six months) for one and a half to two hours (depending on attendances and sustainability of service users). The main objective was to give a voice to service users and obtain information from them as to what is working or not from the services they receive from the team. Sally is at the moment reviewing the information gathered and documenting its findings. Hopefully this will be very useful for the organisation and contribute to the development and appraisal of its services.

**Source of evidence used to support judgement**  (Link to box 4 in part 1, above):

- Feedback from staff and others
- Feedback from service users
- Research forum and project

| Pass |
Domain 9  Professional leadership: take responsibility for the professional learning and development of others through supervision, mentoring, assessing, research, teaching, leadership and management

The social work profession evolves through the contribution of its members in activities such as practice research, supervision, assessment of practice, teaching and management. An individual's contribution will gain influence when undertaken as part of a learning, practice-focused organisation. Learning may be facilitated with a wide range of people including social work colleagues, service users and carers, volunteers, foster carers and other professionals.

Sally has illustrated her ability to be proactive in contributing not only to her own learning but for others as well. During the course of the year, Sally has contributed to a few (four in all) case presentations, which formed the basis of discussion forums, following team meetings. She always came very well prepared and grew in confidence as she stimulated choice issues of dilemmas in practice from her case studies. Sally has also begun a small in-house research, on the emotional needs of carers. She has developed a carers' forum which meets once a month for an hour to discuss their needs.

Example – refer to Domain 8 above

Source of evidence used to support judgement  (Link to box 4 in part 1, above):
- Ability to organise and develop research group
- Contributing to team meetings
- Participating in evaluation processes of the team/department
- Communicating and engaging with other professionals

| Pass |

NQSW: Any comments you wish to make?

I agree with the contents of the report and appreciate my practice assessor’s support and encouragement during this year of my practice. I was quite apprehensive when I was contracted to work within this team, though very excited as well that I had qualified. I soon realised that I was not as confident as I thought I was and that I needed more time and support in some areas of practice to be an effective professional practitioner. These were identified in supervision using the LA as a base, and supported to address the areas that needed further development. I am very glad that I have had this year to put into practice what I had learnt on the course and develop confidence in my practice. It was difficult to be assessed again, but worthwhile. I am also alerted to areas for yet further development and look forward to my next year in employment with a greater sense of achievement and confidence.

Continue to line manager assessment report, if required
Line manager assessment report (Not applicable in this example)
(Where the line manager has not been primarily responsible for providing reflective supervision or final professional assessment.)

<table>
<thead>
<tr>
<th>Overall assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building on interim reviews including the progressive assessment of the NQSW’s capability, please provide an overall judgement of professional capability at ASYE. Where there are concerns make reference to the individual capability statements.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance management</th>
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<tr>
<td>Have performance management concerns been indicated and addressed through the interim review process?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide details of how the NQSW has been supported. Indicate if there have been issues in the provision of the level of support and reflective supervision as expected by the employer standards at ASYE with reference to the learning agreement and interim reviews.</td>
</tr>
</tbody>
</table>
Information and notes on use of the assessor report template

Principles vs Method

We have developed principles to help partnerships develop processes that are accurate, valid and robust, when undertaking assessments (see www.skillsforcare.org.uk/asye section 3: support and assessment). These have informed the development of the assessment report template (the method by which you could collect evidence and make a final decision), but all partnerships are free to adapt these forms, or to develop their own if they wish. However, if you do so, please make sure that the principles continue to influence your processes.

The principles for holistic assessment and how these apply to ASYE can be found at the web link above.

These principles, including the recommendation to provide a breadth of evidence to assure quality, underpin this template.

1a Assessment form

The first two pages of the assessment form help the assessor to record the evidence they have gathered over the ASYE programme for each NQSW. It is up to each employer working with partner organisations to decide what evidence is needed to meet the principles for holistic assessment.

You may also wish to use this front sheet to provide summary information to TCSW for quality assurance purposes, and it is possible that this report could form the core requirement for ensuring consistency of judgements internally and externally in partnership with other employers and HEIs.

1b When thinking about evidence tools, we would suggest a principle of ‘quality rather than quantity’ would be a useful guide, but clearly where the NQSW is finding the process more challenging, more evidence may need to be collected to establish whether the NQSW is making progress.

2a Assessing holistically

Assessment is intended to be across time as well as across the breadth of the PCF. The focus at the end of the year should be on whether, in the professional view of the assessor, the NQSW has reached the required ASYE level. It isn’t necessary to have an individual piece of evidence that someone has met each of the capability statements within the domains. The capability statements should be used diagnostically with the NQSW through the year to help identify areas of strength and areas for development, and provide additional monitoring in situations where there are concerns. This is why the second part of the form starts with an overall assessment of the NQSW’s capability against the PCF, before you focus on the domains and the evidence, if needed.