|  |  |
| --- | --- |
| **Name:** |  |
|  |
| **TASK:** | **CLEANING RACALS** | **Stage 1 of 2 stages in task** |
| TA; | Set up /pack up |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| A Skill level of**...A...B...C...D...E...**Indicate level using underpinning work skill guide**Requiring task skills of:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |

 |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Assistance coding;**0=no assistance/fully independent1=indirect verbal prompts/instructions2=gestural prompts3=direct verbal prompts/instructions4=model style prompting5=physical prompting MINIMAL6=physical prompting FULL assistance7=not compliant/failed taskN/A=not applicable  | OBSERVATION DATES  | Associated JSA:OHS requirementsGloves; Rubber Riggers |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Staff initials**; |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | OHS requirements;Rubber gloves, Apron. **Mop up water on floor** | ASSISTANCE REQUIRED |
| **1** | Place plug, then if applicable to that sink, place crate in bottom.  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** | Fill 2/3 sink with water, *30mm above crate*Using mainly hot water.  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** | 3/4 Fill small plastic cup with “truck wash”Obtained from 20 litre drum situated on bench near entrance to RSC laundry.  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** | Check condition of scourer & cloth if badly worn obtain new scourer or cloth from staff.  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** | **Empty & rinse out sink.**  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** | Refill if required. Following steps 1,2 & 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** | Leave crate in sink standing upright. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** | Clean apron when finished to remove excess water & rehang apron |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Comments:**

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Worker name** |  |
| **Assessed by** |  |
| **Date of Assessment** |  |
| **Nature of concern/issue**Please provide written comments/supporting evidence\* relating to the application of the wage assessment process. Highlight any concerns surrounding the assessment of competency (core/industry) and/or productivity for each individual worker. | (Attach separate sheet if more space required) |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| **Date of post assessment query** |  |
| Name of person completing post assessments  |  |
| **Title**  |  |

\* Supporting evidence refers to documented history, highlighting select items relating to your query.

This evidence will take the form of productivity records, and assistances recorded.