

102105T4COH**COMMUNITY HEALTH LEVEL 5****HE/OS/CH/CR/03/5****Maintain Community Health Information Systems****July/August 2025**

**TVET CURRICULUM DEVELOPMENT, ASSESSMENT AND CERTIFICATION
COUNCIL (TVET CDACC)**

PRACTICE ASSESSMENT

OBSERVATION CHECKLIST

Candidate's Name			
Candidate's Registration Number			
Assessor's Name			
Assessor's Identification Number			
Unit of competence			
Venue of assessment			
Date of assessment			
Items to be evaluated:	Marks available	Marks obtained	Comment(s)

Preliminaries			
1. Donned:			
i. Wore a lab coat	1		
ii. Wore a closed pair of shoes	1		
<i>(Award 1 mark each or 0, 1x2)</i>			
2. Created rapport:			
i. Greeted and welcomed the clients	1		
ii. Introduced self	1		
<i>(Award 1 mark each or 0, 1x2)</i>			
Sub-Total 1	4		
TASK 1: Identified the tools provided and their use			
3. Identified:			
i. Tool X - MOH 513- (Household Register)	1		
ii. Tool Y: MOH 100 (Referral form)	1		
<i>(Award 1 mark for each correct MOH code and name or 0, 1 x 2)</i>			
4. Explained the use of each tool:			
i. MOH 513 - For conducting household registrations.	2		
ii. MOH 100 - For conducting referrals from the community to the health facility and vice versa.	2		
<i>(Award 2 marks each or 0, 2 x 2)</i>			
Sub-Total 2	6		

TASK 2: Conducted household registration			
5. Recorded the following personal details: i. County – The Respective County of the student ii. Name of CHP – Name of the student iii. Name of Village – Village D <i>(Award 1 mark each correct entry or 0, 1 x 3)</i>	1 1 1		
6. Captured the following basic information: i. Names of household members ii. Age in completed years/Months/Days iii. Relationship to the household iv. Health Insurance Cover <i>(Award 1 mark each correct entry or</i>	1 1 1 1		
7. Captured the following Mother Inf i. Pregnant ii. Place of delivery for under 1 year. <i>(Award 1 mark for each correct entry, 1x2)</i>	1 1		
8. Captured the following Child Information: i. Child 6-59 months with MUAC (Red) indicating severe malnutrition. ii. Child 6-59 months with MUAC (Yellow) indicating moderate malnutrition. iii. Vitamin A Given. iv. Penta 3 Given v. Fully Immunized under 1 Yr vi. Measles Rubella at 2 years	1 1 1 1 1		

(Award 1 marks for each, 1x 6)			
Sub-Total 3	15		
9. Demonstrated Communication skills i. Audible ii. Eye contact (Award 1 marks for each, 1x 2)	1 1		
10. Concluded: i. Thanked the audience (Award 1 mark or 0, 1 x 1)	1		
Sub – Total 4	3		
GRAND TOTAL	28		
ASSESS UTCOME			
The candidate was found to be: Competent ☐ Not yet competent ☐ (Tick appropriately) (The candidate is competent if the candidate obtains at least 50%)			
Feedback from the candidate:			
Feedback to the candidate:			
Candidate's signature:	Date		
Assessor's signature:	Date		

Mark sheet

Unit Name (per OS)	Unit Code (per OS)	Total Marks	Marks Awarded	Percentage (%)
Maintain Community Health Information Systems	HE/OS/CH/CR/02/5			