

092206T4CPR

CHILD PROTECTION LEVEL 6

SW/OS/CP/CR/05/6/A

Provide Psycho-Social Support

March/April 2025



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

PRACTICAL ASSESSMENT

INSTRUCTIONS TO THE ASSESSOR

1. Assess the candidate as the practical progresses observing the critical areas
2. You are required to mark the practical as the candidate performs the tasks
3. You are required to take video clips at critical points
4. Ensure the candidate has a name tag and registration code at the back and front

This paper consists of 5 printed pages.

Candidates should check the question paper to ascertain that all the pages are printed as indicated and that no questions are missing.

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- Portrayed appropriate body language. - Used appropriate tone of voice. <i>(Award 1 mark each for any 4 performed tasks or 0 if not)</i>			
3. Identified relevant psychosocial assessment tools and forms: - Psychosocial support forms ✓ Bio-data form ✓ Referral form <i>(Award 2 marks for each form correctly identified and filled or 0 If not correctly identified and filled)</i> - Assessment tools ✓ The child needs assessment interview schedule ✓ Case history data ✓ Behavioural observation checklist <i>(Award 1 mark if any tools above were identified)</i>	4		
4. The candidate explained to the client: - The assessment process - Counsellor's and Client's rights a responsibilities - Confidentiality and its limitations - Referral <i>(Award 1 mark each for any information explained or 0 if none is explained)</i>	1		
Sub-Total Task 1	17		
TASK 2: Carried out Psychosocial Need Assessment			
5. Obtained client's bio-data - Name - Age - Gender - Birth order. - Occupation - Contacts - Physical address - Education background - Family background - Medical history <i>(Award 2 marks if data was obtained or 0 if not obtained)</i>	2		

(Award 2 marks for each item or 0 if not performed) - Conducted appropriate referral based on the case. ✓ Counsellor ✓ Medical doctor ✓ Social worker (Award 1 mark for each referral done and 0 if none was conducted) (If referral was done, a filled referral form MUST be presented)	3		
Sub-Total Task 3	7		
TOTAL MARKS	50		
ASSESSMENT OUTCOMES			
The candidate was found to be: Competent ☐ Not yet competent ☐ (Please tick as appropriate) (The candidate is competent if s/he gets			
Feedback from candidate:			
Feedback to candidate:			
Candidate's signature:	Date:		
Assessor's signature:	Date:		