

092205T4CPR

CHILD PROTECTION LEVEL 5

SW/OS/CP/CR/05/5/A

Provide Psycho Social Support

March/April 2025



TVET CURRICULUM DEVELOPMENT, ASSESSMENT AND CERTIFICATION

COUN

ACC)

PRACT

MENT

INSTRUCTIONS TO ASSESSOR

- Assess the candidate as the practical progresses observing the critical areas
- You are required to mark the practical as the candidate perform the tasks
- You are required to take video clips at critical points
- Ensure the candidate has a name tag and registration code at the back and front

This paper consists of FIVE (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.

OBSERVATION CHECKLIST

Candidate's Name & Registration Code			
Assessors Name & Registration Code			
Venue of Assessment			
Date of Assessment			
(Indicate the marks available and marks obtained respectively. Award marks appropriately as guided for in the items for evaluation indicated. Give a brief comment where necessary)			
Items to be Evaluated: <i>Please award marks as appropriate. Give a brief comment on your observation.</i>	Marks Available	Marks Obtained	Comments
TASK 1: Prepared to carry out Psychosocial Need Assessment			
1. Identified the assessment venue and arranged the assessment venue 3 Similar seats/chairs arranged together (2 feet apart) with a small table on the side <i>(Award 2 marks for an appropriately arranged counselling room or 0 if not appropriately arranged)</i> - Identified other elements needed in venue preparation ✓ A box of tissues/serviettes ✓ Water ✓ First Aid box ✓ Wall clock ✓ Wastepaper basket. <i>(Award 1 mark for any 3 items identified or 0 if not identified)</i>	2		
	1		

4. The candidate explained to the client: ✓ The assessment process ✓ Counsellor's and Client's rights and responsibilities ✓ Confidentiality and its limitations ✓ Referral <i>(Award 1 mark each for any information explained or 0 if none is explained)</i>	4		
Sub-Total 1	17		
TASK 2: Carried out Psychosocial Need Assessment			
5. Obtained client's bio-data • Name • Age • Gender • Birth order. • Occupation • Contacts • Physical address • Medical history <i>(Award 2 marks if data was obtained or 0 if not obtained)</i>	2		

6. Carried out psychosocial support needs assessment: a) Identified 4 psychosocial needs (Assessor to ask the candidate) ✓ Anxiety ✓ Medical checkup ✓ Stress ✓ Depression <i>(Award 1 mark each for identified needs or 0 if none is identified)</i>	4		
b) Identified 4 psychosocial support interventions based on the needs identified (Assessor to ask the candidate) ✓ Counselling ✓ Life skills training ✓ Assurance giving <i>(Award 2 marks each for any 3 interventions identified or 0 if none is identified)</i>	6		

c) Used relevant counselling skills during the assessment (Assessor to observe) ✓ Active listening ✓ Minimal prompts ✓ Unconditional positive regard ✓ Empathy ✓ Questioning ✓ Summarizing <i>(Award 2 marks each for any 3 skills used or 0 if none is applied)</i>	6		
d) Identified appropriate linkages for reintegration. (Assessor to ask the candidate) ✓ The parents/caregivers ✓ The chief/local administ ✓ Police ✓ Children department <i>(Award 2 marks each for any 3 linkages identified or 0 if none is identified)</i>	6		
Sub-Total 2	24		
TASK 3: Terminated Psychosocial Need Assessment			
7. Terminated the psychosocial need assessment; • Concluded the counselling session • Highlighted key issues <i>(Award 2 marks for each item or 0 if not performed)</i>	2		

- Conducted appropriate referral based on the case. ✓ Police ✓ Medical doctor <i>(Award 1 mark for each referral done and 0 if none was conducted)</i> <i>(If referral was done, a filled referral form MUST be presented)</i>	2 1		
Sub-Total 3	5		
GRAND TOTAL	46		
ASSESSMENT OUTCOME			
The candidate was found to be: Competen Not yet Competent <i>(Please tick as appropriate)</i> <i>(The candidate is competent if the candidate obtains at least 50%)</i> <input style="border: 1px solid black; width: 50px; height: 20px;" type="checkbox"/>			
Feedback from the Candidate:			
Feedback to the Candidate:			
Candidate Signature		Date:	
_____		_____	

Assessor's Signature	Date