## 13928 WORKPLACE ASSESSMENT

## Observation

Specific Outcome 1: Monitor the maintenance of a clean and safe reception area as per organisational requirements

Specific Outcome 2: Monitor presentation of reception area

Specific Outcome 3: Monitor the implementation of security procedures in reception area

#### Activity 1

Monitor the maintenance of the reception area in your college, place of work or any other place that you are involved in where people work, for example a sport club or your local church. Your facilitator, supervisor or the supervisor of the alternative venue has to complete and sign the following checklist:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Action: did the learner** | | **Yes** | | **No** | **Remarks** | | |
| Maintain housekeeping standards according to the policies of the workplace | |  | |  |  | | |
| Ensure that housekeeping operations did not disrupt operational services | |  | |  |  | | |
| Identify areas that did not meet the required standards | |  | |  |  | | |
| Record non-conformances | |  | |  |  | | |
| Institute actions and procedures required to rectify substandard areas | |  | |  |  | | |
| Monitor the revised procedures to ensure that minimum standards are met | |  | |  |  | | |
| Maintain the presentation of the reception area according to the standards of the organisation | |  | |  |  | | |
| Identify areas of non-conformance | |  | |  |  | | |
| Note and record areas of non-conformance | |  | |  |  | | |
| Suggest actions to rectify areas of non-conformance | |  | |  |  | | |
| Present the suggestions to management for approval to implement | |  | |  |  | | |
| Communicate the areas of improvements to the employees involved | |  | |  |  | | |
| Note and document security procedures, including the procedures for handling firearms | |  | |  |  | | |
| Brief reception personnel verbally about the security procedures | |  | |  |  | | |
| Provide a written summary of security procedures to reception personnel | |  | |  |  | | |
| Monitor security procedures | |  | |  |  | | |
| Identify discrepancies and problems | |  | |  |  | | |
| Report discrepancies and problems to ensure the safety of the workplace | |  | |  |  | | |
|  |  | |  | | |  |  |
| Supervisor signature | Date | | Learner signature | | |  | Date |

## Work sample

#### Activity 2

* Describe the improved housekeeping standards
* Describe the improved security procedures

Attach this to your POE

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Logbook 13928 | | | | |
| **Date** | **Assignment No** | **Start** | **Finish** | **Total Hours** |
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|  |  |  |  |  |
| Date | Candidate signature | Date | Mentor/supervisor signature | |

## Assessment Review

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NAME of LEARNER** | | | | | **NAME of ASSESSOR** | | | | | |
| **VENUE** | | | | | **DATE of REVIEW** | | | | | |
| **UNIT STANDARD** | | 13928 Monitor and control reception area | | | | | | | | |
| **Review Dimension** | | | | **ASSESSOR** | | **LEARNER/**  **CANDIDATE** | | **ACTION** | | |
| The principles/criteria for good assessment were achieved? | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| The assessment related to the registered unit standard? | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| The assessment was practical? | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| It was time efficient and cost-effective and did not interfere with my normal responsibilities? | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| The assessment instruments were fair, clear and understandable | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| The assessment judgements was made against set requirements | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| The venue and equipment was functional? | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| Special needs were identified and the assessment plan was adjusted | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| Feedback was constructive against the evidence required | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| An opportunity to appeal was given | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| The evidence was recorded | | | | Agree  Disagree | | Agree  Disagree | |  | | |
| **LEARNER”S DECLARATION OF UNDERSTANDING** | | | | | | | | | | |
| I am aware of the moderation process and understand that the moderator could declare the assessment decision invalid | | | | | | | | | | |
|  | | |  | | | | | |  | |
| **Learner** | **Date** | | **Assessor** | | | | **Date** | | **Moderator** | **Date** |

## Candidate Feedback Report

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Candidate's Name |  | | | | ID No. |  |
| Assessor's Name |  | | | | Reg. No. |  |
| Unit Standard Title | 13928 Monitor and control reception area | | | | | |
| **ASSESSMENT DECISION** | | | | | | |
| Source of Evidence | | C | NYC | Comments | | |
| Assessments | |  |  |  | | |
| Product | |  |  |  | | |
| Indirect Evidence | |  |  |  | | |
| Overall Assessment Decision | | | |  | | |
| Additional Notes | | | |  | | |
| Date | | | |  | | |
|  | | | |  | | |
| Signature of Assessor | | | | Signature of Candidate | | |

## Candidate Appeal Form

|  |  |  |  |
| --- | --- | --- | --- |
| Candidate's Name: | | ID No. |  |
| Assessor's Name: | | Reg. No. |  |
| Unit Standard Title: | | 13928 Monitor and control reception area | |
| Date: | |  | |
| SECTION 1 | |  | |
| Candidate's reason for disagreeing with the assessment decision |  | | |
| Assessor's rationale for the assessment decision |  | | |
| Candidate's signature |  | | |
| Assessor's signature |  | | |
| SECTION 2 |  | | |
| Moderator's decision |  | | |
| Moderator's signature |  | | |

Please send this form to:

## Assessor's Report

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Candidate's Name |  | | | | | ID No. |  |
| Assessor's Name |  | | | | | Reg. No. |  |
| Unit Standard Title | 13928 Monitor and control reception area | | | | | | |
| ASSESSMENT DECISION | | | | | | | |
| Specific Outcome | | C | | NYC | Comments | | |
| Monitor the maintenance of a clean and safe reception area as per organisational requirements | |  | |  |  | | |
| Monitor presentation of reception area | |  | |  |  | | |
| Monitor the implementation of security procedures in reception area | |  | |  |  | | |
| Overall Assessment Decision | | | | |  | | |
| Comments | | | | |  | | |
| Date | | | | |  | | |
|  | | |  | | | | |
| Signature of Assessor | | | Signature of Candidate | | | | |

## Moderator's Report

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Moderator's Name |  | | | | Reg. No. | |  |
| Assessor's Name |  | | | | Reg. No. | |  |
| Candidate's Name |  | | | | ID No. | |  |
| Unit Standard Title | 13928 Monitor and control reception area | | | | | | |
| **MODERATION DECISION** | | | | | | | |
| Specific Outcome | | | C | NYC | | Comments | |
| Monitor the maintenance of a clean and safe reception area as per organisational requirements | | |  |  | |  | |
| Monitor presentation of reception area | | |  |  | |  | |
| Monitor the implementation of security procedures in reception area | | |  |  | |  | |
| Overall Moderation Decision | | | | | |  | |
| Feedback to Assessor | | | | | |  | |
| Action Required | | | | | |  | |
| Date of Moderation | | | | | |  | |
| Signature of Moderator | |  | | | | | |
| Signature of Assessor | |  | | | | | |
| Signature of Candidate | |  | | | | | |