

Instructions and
assessment tools to
complete the
assessment for the
Strengths Model
competency

STRENGTHS MODEL COMPETENCY ASSESSMENT

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First version April 2013
Adapted from the Strengths Model Core
Competencies Evaluation Tool (Rapp &
Goscha 2011)

STRENGTHS MODEL COMPETENCY

ASSESSMENT MATRIX

PERFORMANCE AREA & CRITERIA	METHOD 1 Direct Q & As Interview with candidate	METHOD 2 Direct Q & As Interview with consumer	METHOD 3 Direct Q & As Interview with colleague	METHOD 4 Documentation
1. Strengths and Recovery values and beliefs				
1.1 Has hope and believes that all people with psychiatric disabilities can recover, reclaim and transform their lives	√		√	
1.2 Focuses on the consumers' strengths rather than deficits		√		√
1.3 Allows and enables the consumer to be the director of the helping process	√	√		
1.4 Recognises that the relationship with the consumer is primary and essential	√	√		
2. Engagement				
2.1 Effectively builds rapport and trust and has the ability to relate to a wide variety of consumers	√	√		
2.2 Assertively outreaches consumers who are difficult to engage	√	√		
2.3 Self-reflects on personal barriers to engagement with consumers as well as empathise with factors related to consumer's difficulty with engagement	√		√	
3. Strengths Assessment				
3.1 Works with the consumers to list their desires and aspirations with detail and specificity		√		√
3.2 Uses the consumer's language throughout the Strengths Assessment		√		√
3.3 Lists the consumer's talents and skills with detail and specificity		√		√
3.4 Incorporates the environmental strengths currently available to the consumer with detail and specificity		√		√
3.5 Involves the consumer in developing the Strengths Assessment		√		√
4. Goal Plan				
4.1 Establishes goals on the goal plan that are taken from the priorities section in the Strengths Assessment		√		√
4.2 Documents goals and positive action steps in the consumer's own language		√		√

PERFORMANCE AREA & CRITERIA	METHOD 1 Direct Q & As Interview with candidate	METHOD 2 Direct Q & As Interview with consumer	METHOD 3 Direct Q & As Interview with colleague	METHOD 4 Documentation
4.3 Goals are broken down in to smaller, specific, measurable action steps		√		√
4.4 Review of the goal plan with the consumer is evident and can explain the rationale when not		√		√
4.5 Uses the goal plan with almost all consumers and can explain the rationale when not used	√			√
4.6 Directly works with the consumer where possible in the goal planning process	√			√
5 Use of community and naturally occurring resources				
5.1 Consumers are receiving services in places where they live, work, and interact in the community		√		√
5.2 Consumers are assisted to access naturally occurring resources with the majority of identified goals		√		√
5.3 Consumers have goals that reflect the use of naturally occurring resources		√		√
6 Group Brainstorming				
6.1 Contributes fully as a participant in the group brainstorming process	√		√	
6.2 Demonstrates the ability to make a formal presentation at group brainstorming	√		√	
6.3 Uses ideas from brainstorming in clinical practice	√			√
7 Related tools/documentation				
7.1 Incorporates clinical risk management in to the development and implementation of the Strengths Assessment and Goal Plan	√			√
7.2 Incorporates the consumer's Strengths recovery goals in to the Mental Health Act Treatment Plan	√			√
7.3 Uses the WRAP® with consumers to support wellness and goal achievement	√			√

ASSESSMENT PLAN

ASSESSOR (s) NAME (s):	
Candidate details	St. Vincent's Mental Health Service clinicians
Assessment methods used	1) Verbal direct questions and answers through candidate and 3 rd party interviews 2) Documentation
Assessment tools used	1) Interview questions 2) Clinical documentation (consumer files & MRO)
Instructions for Assessor	<ul style="list-style-type: none"> ▪ The 1st part of the assessment will consist of a Question and Answer session with the candidate, with no time limit ▪ The 2nd part of the assessment will be a review of the documentation ▪ The 3rd part of the assessment will be interviews with consumers and colleagues ▪ Consumers and the associated files will be selected at random by the Assessors to ensure a fair process ▪ The Assessors need to have the necessary expertise and knowledge of the Strengths Model and Recovery
Conditions of Assessment	<ul style="list-style-type: none"> ▪ 75% overall assessment competency will be required. This is an average from the full assessment (all assessment parts) ▪ The number of consumer interviews and files reviewed will be a percentage of the candidate's caseload ▪ The number of colleague interviews will be determined prior to the assessment ▪ Specific competency areas such as 1 & 2 require 100% competency
Materials and resources required	Room, chairs, pens, selected consumers and staff to be invited for interview; candidates' work rosters to plan assessments; consumer files
Briefing How and when will briefing be done?	Face to face and email, followed up by and phone call, if the candidates have any questions or need to clarify anything
Are any reasonable adjustments allowed or anticipated?	None known or anticipated, but will be ascertained prior to each candidate assessment
Appeals and grievance process is...	First line is the assessor, then if remains unhappy with the assessment process or outcome, the candidate will be offered the same assessment by another assessor
Apart from candidate and Assessor (s) which other parties may be present?	Staff and consumers who will be interviewed
Following a successful assessment result with this assessment will that finalise candidate requirements? If not, what else is required?	Yes. The assessor will inform the candidate if competent after all 3 assessments are completed.
Following an unsuccessful (NYC) assessment result what will occur? (Opportunities for reassessment and/or further training?)	The candidate will be offered coaching and further training and a reassessment at an agreed time in the future. The candidate will be able to take the assessment at intervals agreed by the Line Manager and Chair of the SMIG.

DIRECT QUESTIONS & ANSWERS

① ASSESSOR WITH CANDIDATE

DATE:

Candidate Name:		Assessor Name:			
Areas of competency covered	1,2 ,4, 6 & 7	Performance Criteria covered	1.1, 1.3, 1.4; 2.1 - 2.3; 4.5, 4.6; 6.1 - 6.3; 7.1 – 7.3		
		Competent	Not yet competent	Comments	
1.1 Can you describe your beliefs about consumers you work being able to recover, reclaim and transform their lives? Expected answer to include: people can recover; recovery is individual; has hope for all consumers; uses hope-inducing language; has a positive attitude towards the consumers' future; talks about use of the Strengths Assessment and Goal Plan; talks about the consumers' ability to set and achieve goals; talks about wellness management; relapse prevention; talks about the consumer as a person; sees the consumers as partners in the recovery journey; ASK FOR EXAMPLES Answer:		<input type="checkbox"/>	<input type="checkbox"/>		
1.3 How do you enable and assist your consumers to be the director of the helping relationship? Expected answer to include: shows empathy for the consumers; involves the consumer in all decisions made; helps the consumer access all available resources; uses every opportunity to help the consumer move forward and promotes choice; empowers the consumer to set meaningful goals; recognises the consumer's skills, characteristics and attributes; any work done is for the consumer; the consumer is advocated for in all situations; assisting the consumers to work on their WRAP®; the work being done is led by the Strengths Assessment and Goal Plan and is reflected in the risk management plan Answer:		<input type="checkbox"/>	<input type="checkbox"/>		
1.4 What makes the relationship between you and your consumers primary and essential? Expected answer to include: Works with the consumer on their goals and aspirations for the future; celebrates any successes and progress with goals/steps; shows respect; empowers the consumers by assisting them to access any available and self-selected resources; makes appointments/meetings where the consumer has suggested; returns missed phone calls; does what is agreed; the relationship has clear therapeutic boundaries, purpose and direction Answer:		<input type="checkbox"/>	<input type="checkbox"/>		

	Competent	Not yet competent	Comments
<p>2.1 How do you build trust and rapport with your consumers? Expected answer to include: Working with the person and not their illness/diagnosis/label; being non-judgemental; consideration of individual needs; pacing of discussions and interactions; ; adjusting approach; hearing their story; shares any common ground with appropriate self-disclosure; shows interest in the consumer; active listening; being available; congruence; honesty; helping them set SMART goals; promoting individual choice and decision-making; providing relevant information; promoting life beyond mental health services Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>2.2 How do you work with consumers who are difficult to engage? Expected answer to include: Different methods of communication; repeatedly tries to make contact; is there for and available to the consumer maintains interest; belief in the consumer; focuses on the positive, promotes choice; hope-inducing language and behaviours; works on the consumer's goals; celebrates any successes with the consumer; understands why consumers sometimes don't want to engage (e.g. previous experience with services, history of rejection/abuse), understands negative transference, use of individual clinical supervision; Group Brainstorming; involve colleagues; seek advice; involve other supports the consumer has, including family where there is consent; there is a personality clash; the consumer clearly may benefit from working with someone else Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>2.3 How do you self-reflect on personal barriers that may prevent effective engagement with your consumers? Expected answer to include: Seek feedback from colleagues; use individual clinical supervision; management/business supervision; through presentation of consumers at Group Brainstorming; identifying and owning personal choices and beliefs; pre-existing knowledge of the consumer; colleagues attitudes towards the consumer; current stressors; recognising own prejudices and limitations Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>4.5 & 4.6 How do you use goal plans with and without the direct involvement of the consumer? Expected answer to include: Introduce the idea of goals when developing the Strengths Assessment; some consumers don't want to write down their goals so a record is kept of the person's goals on the goal planning template; feedback progress on goal achievement to the consumer; have conversations in terms the consumer will relate to and recognise Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	

	Competent	Not yet competent	Comments
<p>6.1 How do you fully participate in the group brainstorming process? Expected answer to include: Prioritises the sessions; attends regularly; seeks to make sure is not always rostered off or on wrong shift when the sessions take place; shares successes; contributes with ideas; asks questions based on the consumer's Strengths Assessment; advocates for the process and encourages others to attend; stays for the duration of the session; is on time; seeks to present consumers; takes turn to present and willing to facilitate Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>6.2 How do you present a consumer at group brainstorming? Expected answer to include: Reviews and updates the consumer's Strengths Assessment (preferably with the consumer); prepares using the presenter's worksheet; has clear brief description of the consumer's background and what has already been tried; brings a copy of the Strengths Assessment for each group member; states clearly what the consumer's goals are; doesn't talk about the consumer's diagnosis or focus on symptoms; has a clear, specific question/issue that generates the ideas from the group/session; uses hope-inducing language and positive words and phrases when talking about the consumer; follows the agreed process and doesn't get involved in any conversations, discussions or disputes with the group; writes down all ideas without censorship Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>6.3 How have you used ideas generated from group brainstorming with your consumers? Expected answer to include: Followed up on the plan taken from presenting a consumer; used ideas from other presentations; ASK FOR EXAMPLES; incorporates ideas in to the work with consumers on their Strengths Assessments and Goal Plans; gives an update at sessions on what has been used and the consumer's progress Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>7.1 How do you assess and manage risks related to the Strengths work you are doing with your consumers? Expected answer to include: Documents risk associated with what the consumer sees as a strength or sets as a goal, but if poses a risk is clearly documented in the risk assessment; how these risks will be managed is documented in the risk management plan; collaborates with the consumer openly where feasible in discussing the risks and encouraging the consumer to decide how the risks can be managed to minimise any harm to the consumer or others; documents the key elements of the conversations/discussions in the progress notes; explore any risk reduction from any direct or indirect work is doing/has done on achieving goals/goal steps; celebrate any successes/learning the consumer has identified in relation to risk factors Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	

	Competent	Not yet competent	Comments
<p>7.2 How do you make sure that the consumer's wishes are considered within the Mental Health Act Treatment Plan Expected answer to include: Talks to the consumer about what is important and what is acceptable to be in the plan; what work is currently relevant to the conditions of the plan; raises the consumer's goals at clinical reviews; discuss with the consumer's family/carers/significant others with the consumer's consent about aspects of the plan and any involvement from them Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>7.3 How do you integrate the Strengths Assessment & Goal Plan in to the WRAP®? Expected answer to include: Look at managing difficult symptoms and issues that are raised from working on the Strengths Assessment and Goal Planning; help the consumer develop the Wellness Toolbox; Relapse Prevention Plan; Crisis Planning and support persons and their roles to support goal achievement and amplify current strengths Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
ASSESSOR USE ONLY:			
<p>The candidate's underpinning knowledge as assessed by these questions was Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/></p> <p>Signed by the Assessor: Date:</p> <p>Signed by the Candidate: Date:</p>			
<p>Is there more assessment tasks required to finalise competency? Y/N. If Yes what are they?</p>			
<p>Feedback to Candidate: </p>			

DIRECT QUESTIONS & ANSWERS

2 ASSESSOR WITH CONSUMER

DATE:

Candidate Name:		Assessor Name:	
Areas of competency covered	1,2,3,4 & 5	Performance Criteria covered	1.2, 1.3, 1.4; 2.1, 2.2; 3.1 - 3.5; 4.1, 4.2, 4.3, 4.4; 5.1 - 5.3
		Competent	Not yet competent
		Comments	
<p>1.2 Does your case manager work with you on your strengths; and what you can do? Expected answer to include: My case manager helps me to see what I have in my life; what I have been able to do and have had in the past that helps; we talk about positive things; we look at what supports I have; helps me to see that I have skills and talents; there things about me and my life that are good and worthwhile; we don't talk about my illness all the time Answer:</p>		<input type="checkbox"/>	<input type="checkbox"/>
<p>1.3 How have you been enabled and assisted to be the director of your own care and treatment? Expected answer to include: My case manager believes I can recover; recovery is individual to me; uses hope-inducing language; has a positive attitude towards my future; shows empathy for me; involves me in all decisions made; helps me access all available resources; uses every opportunity to help me move forward and promotes choice; empowers me to set meaningful goals; recognises my skills, characteristics and attributes; any work done is for me and on my behalf; I am advocated for in all situations; assisting me to work on my WRAP®; the work being done is led by my Strengths Assessment and Goal Plan and is reflected in my risk management plan Answer:</p>		<input type="checkbox"/>	<input type="checkbox"/>
<p>1.4 What makes the relationship between you and case manager primary and essential to your recovery? Expected answer to include: Works with me on my goals and aspirations for the future; celebrates my successes and progress with goals/steps; shows respect; empowers me by assisting me to access any available and self-selected resources; makes appointments/meetings I have suggested; returns missed phone calls; does what is agreed; the relationship between me and my case manager has clear therapeutic boundaries, purpose and direction Answer:</p>		<input type="checkbox"/>	<input type="checkbox"/>

	Competent	Not yet competent	Comments
<p>2.1 How do you build trust and rapport with your case manager? Expected answer to include: Working with me as a person and not my illness/diagnosis/label; being non-judgemental; consideration of my individual needs; pacing of discussions and interactions; ; adjusting approach; hearing my story; shares any common ground with appropriate self-disclosure; shows interest in me; actively listens; being available; congruence; honesty; helping me to set SMART goals; promoting individual choice and decision-making; providing relevant information; promoting life beyond mental health services Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>2.2 How did your case manager work with you when you didn't really want to meet or perhaps talk about your strengths or think about your goals? Expected answer to include: Different methods of communication; repeatedly tries to make contact; is there for and available to me; maintains interest; has belief in me; focuses on the positive, promotes choice; uses hope-inducing language and behaviours; works on my goals; celebrates my successes; understands why I sometimes don't want to engage (e.g. previous experience with services, history of rejection/abuse), understands negative transference; involves other supports I have; including family and friends; I don't get on with my case manager; I want to work with someone else Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>3.1 Can you tell me what you would like for yourself in the future? Have you looked at this with your case manager? Expected answer to include: What the consumer says about the dreams and aspirations should be reflected in the current Strengths Assessment in details and be specific (using names, places etc.) Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>3.2 Can you give me an example of what is in your current Strengths Assessment? Expected answer to include: What the consumer says and how it is said (the words and phrases used) should be reflected in the Strengths Assessment Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>3.3 What do you think are your talents and skills? Have you looked at these with your case manager? Expected answer to include: The consumer will say if this has been discussed and if aware of the Strengths Assessment. Some of what the consumer says should be reflected in the Strengths Assessment Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	

	Competent	Not yet competent	Comments
<p>3.4 What do you think are the positive and useful things available to you? E.g. support people; relationships; church/place of worship; home/accommodation Expected answer to include: What the consumer says should be reflected in the Strengths Assessment Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>3.5 How have you worked on your Strengths Assessment? Expected answer to include: When I meet with my case manager; by myself at home; by chatting over a coffee; when I've been ready to do it; without even realising that's what I've been doing; through some other work I've been doing Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>4.1 Do the goals you are working on relate to what were priorities for you when developing your Strengths Assessment? Expected answer to include: The consumer may talk about something identified in the Strengths Assessment which is important and if is now/has done worked on steps to achieve it Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>4.2 Can you talk about any of your goals and how you have worked with your case manager to achieve it? Expected answer to include: Listen and check against words and language used in the consumer's Goal Plan Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>4.3 Does your case manager help you to break down your goals so that you can manage them easily and achieve them? Do you look at ways you can make sure that you know exactly how you will know if you have achieved them? Expected answer to include: We talk about what I think I can do and what I want to do. We set days and times that I think I can achieve something; sometimes I need to change the date or re-look at what my goal steps are; I know who's doing what; I don't know if I have goals but my Case Manager helps me do things and is happy for me when I do something that makes me happy and makes things better for me Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	

	Competent	Not yet competent	Comments
<p>4.4 How do you review your goal plan with your case manager? Expected answer to include: At regular intervals and when target dates are set; at each meeting; in both formal and informal settings; in conversation by reinforcement of any steps towards my recovery; reiterate what my passion is; record goal steps, timelines and comments; review who's doing what, when and where Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>4.5 & 4.6 How has your case manager used the goal plans with you? Expected answer to include: Introduced the idea of goals when developing my Strengths Assessment; I didn't want to write down my goals; my case manager gave me feedback on my progress with my goals; we look at them/what I want each time we meet or every few times Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>5.1 What services do you use where you live and in the area where you consider your community to be? Expected answer to include: The consumer will say what services currently being accessed and if at least some of them are in the local area/community Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>5.2 What resources (e.g. places, services, supports, groups) are you using to work on your goals? Expected answer to include: The consumer will say what is currently being used and how these fit in with the goals being worked on/previous goal achievement. These should include non-mental health services; community services e.g. library, swimming pool, gym; family and friends; hobbies and interests and perhaps local groups and facilities Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	

	Competent	Not yet competent	Comments
<p>5.3 What goals are you currently working on and what goals have you worked on and achieved perhaps recently? Expected answer to include: The consumer should talk about and reflect the use of naturally occurring resources in working towards goal achievement Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
ASSESSOR USE ONLY:			
<p>The candidate's underpinning knowledge as assessed by these questions was Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/></p> <p>Signed by the Assessor: Date:</p> <p>Signed by the Candidate: Date:</p>			
<p>Is there more assessment tasks required to finalise competency? Y/N. If Yes what are they?</p>			
<p>Feedback to Candidate:</p> <p>-----</p> <p>-----</p> <p>-----</p>			

DIRECT QUESTIONS & ANSWERS

3 ASSESSOR WITH CANDIDATE'S COLLEAGUE

DATE:

Candidate Name:		Assessor Name:			
Areas of competency covered	1,2 & 6	Performance Criteria covered	1.1; 2.3; 6.1, 6.2		
		Competent	Not yet competent	Comments	
<p>1.1 How does your colleague demonstrate hope and belief in the recovery of consumers in the service? Expected answer to include: has hope for all consumers; uses hope-inducing language; has a positive attitude towards the consumers' future; talks about use of the Strengths Assessment and Goal Plan; talks about the consumers' ability to set and achieve goals; talks about wellness management; relapse prevention; talks about the consumer as a person; sees the consumers as partners in the recovery journey; ASK FOR EXAMPLES Answer:</p>		<input type="checkbox"/>	<input type="checkbox"/>		
<p>2.3 How does your colleague reflect on personal barriers that may prevent effective engagement with consumers? Expected answer to include: Seek feedback from colleagues; use individual clinical supervision; management/business supervision; through presentation of consumers at Group Brainstorming; identifying and owning personal choices and beliefs; pre-existing knowledge of the consumer; colleagues attitudes towards the consumer; current stressors; recognising own prejudices and limitations Answer:</p>		<input type="checkbox"/>	<input type="checkbox"/>		
<p>6.1 How does your colleague fully participate in the group brainstorming process? Expected answer to include: Prioritises the sessions; attends regularly; (seeks to make sure is not always rostered off or on wrong shift when the sessions take place); shares successes; contributes with ideas; asks questions based on the consumer's Strengths Assessment; advocates for the process and encourages others to attend; stays for the duration of the session; is on time; seeks to present consumers; takes turn to present and willing to facilitate Answer:</p>		<input type="checkbox"/>	<input type="checkbox"/>		

	Competent	Not yet competent	Comments
<p>6.2 How does your colleague present a consumer at group brainstorming?</p> <p>Expected answer to include: Uses the presenter’s worksheet; has clear brief description of the consumer’s background and what has already been tried; brings a copy of the latest Strengths Assessment for each group member; doesn’t talk about the consumer’s diagnosis or focus on symptoms; has a clear, specific question/issue that generates the ideas from the group/session; uses hope-inducing language and positive words and phrases when talking about the consumer; follows the agreed process and doesn’t get involved in any conversations, discussions or disputes with the group; writes down all ideas without censorship</p> <p>Answer:</p>	<input type="checkbox"/>	<input type="checkbox"/>	
ASSESSOR USE ONLY:			
<p>The candidate’s underpinning knowledge as assessed by these questions was Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/></p> <p>Signed by the Assessor: Date:</p> <p>Signed by the Candidate: Date:</p>			
<p>Is there more assessment tasks required to finalise competency? Y/N. If Yes what are they?</p>			
<p>Feedback to Candidate:</p> <p>-----</p> <p>-----</p> <p>-----</p>			

DOCUMENTATION CHECKLIST

④ ASSESSOR AND CONSUMER FILE/MRO

DATE:

Candidate Name:		Assessor Name:	
Areas of competency covered	1, 3, 4, 5, 6 & 7	Performance Criteria covered	1.2, 3.1 - 3.5; 4.1 - 4.6; 5.1 - 5.3; 6.3; 7.1 - 7.3
		Competent	Not yet competent
			Comments
THE STRENGTHS ASSESSMENT & PROGRESS NOTES		<input type="checkbox"/>	<input type="checkbox"/>
1.2 Focuses on the consumers' strengths rather than deficits The Strengths Assessment has strengths identified in each domain and in each column		<input type="checkbox"/>	<input type="checkbox"/>
3.1 Works with the consumers to list their desires and aspirations with detail and specificity Specific wants and wishes in the middle/future column. Priorities are listed in the consumer's own words and are unique to the client		<input type="checkbox"/>	<input type="checkbox"/>
3.2 Uses the consumer's language throughout the Strengths Assessment "I" statements; words and phrases common to the consumer; written as the consumer would write it if not hand written by the consumer. Cross check with consumer interview		<input type="checkbox"/>	<input type="checkbox"/>
3.3 Lists the consumer's talents and skills with detail and specificity Consumers' skills and talents are defined clearly and use words and phrases common to the consumer		<input type="checkbox"/>	<input type="checkbox"/>
3.4 Incorporates the environmental strengths currently available to the consumer with detail and specificity Strengths in relation to family, friends, hobbies, interests etc. are indicated by name; what the community is for the consumer; what resources in the area are used by name		<input type="checkbox"/>	<input type="checkbox"/>
3.5 Involves the consumer in developing the Strengths Assessment The progress notes REGULARLY (within the last month) reflect a conversational approach, document clearly that work has been undertaken with the consumer and has quotes and/or paraphrased statements by the client re the Strengths Assessment; the consumer has signed the Strengths Assessment; the Strengths Assessment is written by the consumer; there is a review date on the Strengths Assessment		<input type="checkbox"/>	<input type="checkbox"/>
5.1 Consumers are receiving services in places where they live, work, and interact in the community Look for in the current strengths column. Should reflect use of services within the consumer's local community		<input type="checkbox"/>	<input type="checkbox"/>
6.3 Uses ideas from brainstorming in clinical practice The consumer's Strengths Assessment reflects use of the ideas from brainstorming sessions (e.g. use of a particular resource; making contact with/use of family supports); review of the Strengths Assessment reflects use of the ideas; check for presenter's worksheet in the consumer's files with the list of ideas; look for evidence in the progress notes		<input type="checkbox"/>	<input type="checkbox"/>

	Competent	Not yet competent	Comments
GOAL PLAN & PROGRESS NOTES			
4.1 Establishes goals on the goal plan that are taken from the priorities section on the Strengths Assessment Cross check with the Strengths Assessment priorities section. The long term goals should reflect the passion statements made by the consumer	<input type="checkbox"/>	<input type="checkbox"/>	
4.2 Documents goals and positive action steps in the consumer's own language Cross check with consumer interview	<input type="checkbox"/>	<input type="checkbox"/>	
4.3 Goals are broken down in to smaller, specific, measurable action steps Cross check with consumer interview. There are specific dates, timelines and concrete actions with comments in the comments section; actions are set to be achieved at the next meeting or before the next meeting; it is clear how the goal step has been achieved/will be achieved with clear actions to be taken; responsibility for each action is clearly identified and documented	<input type="checkbox"/>	<input type="checkbox"/>	
4.4 Review of the goal plan with the consumer is evident and can explain the rationale when not The consumers' goals or goal steps have changed; been achieved, new goals/goal steps set; the comments section reflects goal review and progress; the progress notes reflect	<input type="checkbox"/>	<input type="checkbox"/>	
4.5 Uses the goal plan with almost all consumers and can explain the rationale when not used Check through consumer file/MROs. Cross check with candidate interview. Completed and filed/MRO goal plans should be available as well as current ones	<input type="checkbox"/>	<input type="checkbox"/>	
4.6 Directly works with the consumer where possible in the goal planning process Check through consumer file/MROs. At least 75% of the case manager's current file/MROs should have a goal plan. Each goal plan should have been reviewed within the last month. Each consumer should have at least one goal plan, but consumers who have been working with the case manager for more than a few months should have more than one goal plan (if not achieving goals, then there should be review dates and different short term goals/goal steps). Completed and filed/MRO goal plans should be available as well as current ones	<input type="checkbox"/>	<input type="checkbox"/>	
5.1 Consumers are receiving services in places where they live, work, and interact in the community The goal plan should reflect specific local services the consumer is using as part of goal steps/goal achievement	<input type="checkbox"/>	<input type="checkbox"/>	
5.2 Consumers are assisted to access naturally occurring resources with the majority of identified goals There are clear, specific responsibilities in the consumer's goal plans/goal steps identifying work towards using naturally occurring resources (E.g. cafes; shops; library; housing association; non-mental health services)	<input type="checkbox"/>	<input type="checkbox"/>	
5.3 Consumers have goals that reflect the use of naturally occurring resources The steps in the goal plan should reflect specific resources that the consumer is using/is going to use. Completed/achieved goals should reflect use of these resources	<input type="checkbox"/>	<input type="checkbox"/>	
6.3 Uses ideas from brainstorming in clinical practice The consumer's Goal Plan reflects use of the ideas from brainstorming; goal steps have been reviewed and revised in light of the ideas; the comments section in the goal plans refers to the ideas and how they are going to be used	<input type="checkbox"/>	<input type="checkbox"/>	

	Competent	Not yet competent	Comments
RISK ASSESSMENT & MANAGEMENT PLAN & PROGRESS NOTES			
7.1 Incorporates clinical risk management in to the development and implementation of the Strengths Assessment and Goal Plan The consumer's current risk assessment and management plan includes any risks identified from working with the consumer on the Strengths Assessment and Goal Plan.	<input type="checkbox"/>	<input type="checkbox"/>	
MH TREATMENT PLAN			
7.2 Incorporates the consumer's Strengths recovery goals in to the Mental Health Treatment Plan Cross check that the goals have been considered (re: leave, family involvement etc.; wishes for place of treatment etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
The WRAP®			
7.3 Uses the WRAP® with consumers to support wellness, amplify strengths and goal achievement Wellness Toolbox; Relapse Prevention Plan; supports etc reflect what the consumer's has identified to achieve goals and build on current strengths	<input type="checkbox"/>	<input type="checkbox"/>	
ASSESSOR USE ONLY:			
The candidate's underpinning knowledge as assessed by these questions was Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Signed by the Assessor: Date: Signed by the Candidate: Date:			
Is there more assessment tasks required to finalise competency? Y/N. If Yes what are they?			
Feedback to Candidate:			

OVERALL ASSESSMENT

Candidate:

Comments:

Areas for improvement:

The candidate's underpinning knowledge as assessed by the assessment tools was:

Competent

Not Yet Competent

Signed by the Assessor:

Date:

Signed by the Candidate:

Date:

Overall assessment score:

Feedback to Candidate:

