**CCAST (Care and Clinical Skills Assessment Tool)**

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| **Name of Clinical/ procedural Skill:** |  | **Initial date training commenced:** |  | **Assessment Number/**  **Revalidation (R):** |  |
| **Please circle:**Simulation or Patient | | **Final Assessment:** | Y / N | **Payroll number:** |  |
| **Name of**  **Participant:** |  | **Job title**: |  | **Ward/base** |  |

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| **Category** | | **Areas of competence:** | | **Areas for improvements/ omissions/ general comments:** | | **Areas of good practice:** | | | **Level:**  **0,1,2,3,4,5** |
| **Pre- procedure** | | **ID, consent and discussion, allergies and contraindications** | |  | |  | | |  |
| **Hand hygiene and PPE** | |
| **Patient position and dignity** | |
| **Procedure** | | **Safe/ effective use of equipment** | |  | |  |
| **involve patient as appropriate** | |
| **Safe disposal of equipment as appropriate** | | **Action Plan:** | | |
| **Post- procedure** | | **Expected outcome** | |  | |  | | |  |
| **Documentation and record keeping** | |
| **IPC/ decontamination** | |
| **Dealing with complications** | | **Identify complications, seek timely advice** | |  | |  |
| **Action to Rectify** | |
| **Reporting/ record keeping** | |
| **Reflection from participant** | | **Learner to sign once given feedback:** | | | | | | | |
| **Assessor name:**  *Print name* |  | | **Assessor sign:**  *Signature* | |  | | **Assessor Qualification:** |  | |
| **Assessor payroll number:** |  | | **CCAST Clinical Skills Assessor:** | | Y / N | | **Date:** |  | |

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| **Level 0 - unable to complete/unsafe practice** | This is used when the learner is unsafe and the session should be stopped, or the assessor completes the skill. This could be a disability that prevents the skill being completed or lack of co-ordination. Further simulation training can be offered. |
| **Level 1 - Novice** | Baseline assessment the person may have no prior experience of procedure but can follow instruction. Can progress to workplace assessments. |
| **Level 2 – Advanced beginner** | Baseline/Supervised assessment/could be final assessment, acceptable performance starting to recognise the skill and requirements but not necessarily in the correct order. |
| **Level 3 – Competent** | Supervised/Final Assessment/Revalidation, mastered the skill needs more experience to gain fluidity. Is competent to practice autonomously. |
| **Level 4 – Proficient** | Final assessment/Revalidation can carry out the skill independently and can adapt to patients or procedure as it develops. |
| **Level 5 – Expert** | Revalidation, this individual has mastered the skill and does not rely on rules can think and act accordingly in a safe effective manner. Fluid, flexible and highly proficient. |