

## Guidance for Completing the Skills Log

Please use this form to record your skills in the workplace. Your co-worker, buddy, mentor can assess this.

1. Please ensure that your name, date of birth and payroll number (if you have one) are on the form so that the information can be recorded.
2. You only need to complete sections that are relevant to your new role.
3. It is your observer's responsibility to ensure they are satisfied with the level of skill demonstrated by you.
4. There may be other tasks you are unsure of and that you need demonstrate. Please add them in the empty boxes.
5. If further guidance or learning is required, please make a note in the appropriate box and speak to someone within your team.
  - For additional advice you can contact your link L&D Advisor.
6. Please email the completed form to [LD@carmarthenshire.gov.uk](mailto:LD@carmarthenshire.gov.uk)
  - This can be done by either scanning and emailing, or by taking a photograph on your smartphone.
7. Please give a copy to your manager and keep a copy for yourself.

<b>Employee Name:</b>	
<b>Payroll Number (if applicable):</b>	
<b>Date this record was issued:</b>	
<b>Date record completed:</b>	
<b>Date of Birth:</b>	

Temporary Work Location	Name of person undertaking the observation	Have the tasks below been observed and a sufficient level of skill achieved?	Yes/No	Is further guidance/learning required? Please write what is needed.	Date of Task Observed	Observer Signature	Employee/Learner Signature
		Physical roll to fit a sling in bed					
		Fitting a slide sheets under a person on the bed and using them to fit the sling					
		Hoisting a person from the bed into a chair and then back to bed.					
		Fitting a sling on a person who is sitting in the chair, fitting a sling on a person who is sitting in the chair using slide sheets.					
		Handwashing					

Temporary Work Location	Name of person undertaking the observation	Have the tasks below been observed and a sufficient level of skill achieved?	Yes/No	Is further guidance/learning required? Please write what is needed.	Date of Task Observed	Observer Signature	Employee/Learner Signature
		PPE - putting it on and taking it off					
		Respecting and promoting dignity during personal care					
		Providing personal care e.g. washing					
		Supporting oral hygiene					
		Observing/Reporting concerns e.g. discoloured skin					



