**MARK SHEET – Managing Mental Health in the Workplace**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Centre Number :** |  | | | | **Centre Name :** | |  | | | | | | |
| **Learner Registration No :** |  | | | | **Learner Name:** | |  | | | | | | |
| **INSTRUCTIONS FOR ASSESSMENT AND USE OF MARK SHEET**  Assessment must be conducted with reference to the assessment criteria (AC). In order to pass the unit, every AC must be met.  Assessors will normally award marks for every AC and then total them into a percentage. However, for greater simplicity, there is the option to not use marks at all and merely indicate with a ‘Pass’ or ‘Referral’ in the box (below right). In order to pass the unit every AC must receive a ‘Pass’.  **Where marks are awarded according to the degree to which the learner’s evidence in the submission meets each AC, every AC must be met, i.e. receive at least half marks (e.g. min 10/20). Any AC awarded less than the minimum produces an automatic referral for the submission (regardless of the overall mark achieved).**  Sufficiency descriptors are provided as guidance. If 20 marks are available for an AC and the evidence in the submission approximates to the ‘pass’ descriptor, that indicates it should attract 10 marks out of 20, if a ‘good pass’ then ca. 15 out of 20. The descriptors are not comprehensive, and cannot be, as there are many ways in which a submission can exceed or fall short of the requirements. | | | | | | | | | | 1. **Learner named above confirms authenticity of submission.** 2. **ILM uses learners’ submissions – on an anonymous basis – for assessment standardisation.  By submitting, I agree that ILM may use this script on condition that all information which may identify me is removed.**   **However, if you are unwilling to allow ILM use your script, please refuse by ticking the box: □** | | | |
| **Learning Outcome/Section 1:** Be able to identify the strengths and weaknesses of mental health initiatives in the workplace | | | | | | | | | | | | | |
| **Assessment Criteria (AC)** | | **Sufficiency Descriptors**  *[Typical standard that , if replicated across the whole submission, would produce a referral, borderline pass or good pass result]* | | | | | | | | | | **Assessor feedback on AC** | |
| AC 1.1  Analyse the organisation’s current approach towards mental health | | **Referral [ca. 4/16]** | | **Pass [8/16]** | | | | **Good Pass [ca. 12/16]** | | | |  | |
| * The organisation’s approach to mental health issues is merely defined or described with no analysis or conclusions drawn * There is no awareness shown of current developments | | * There is an analysis of the organisation’s approach to mental health and some conclusions have been drawn but these may be limited in scope * There is some awareness shown of current developments | | | | * There is a detailed analysis of the organisation’s approach to mental health and a range of conclusions have been drawn. * There is a detailed explanation of current developments | | | |
| / 16  (min. of 8) | Pass or Referral |
| AC 1.2  Assess how other organisations deliver mental health strategies and share examples of best case practices | | **Referral [ca. 4/16]** | | **Pass [8/16]** | | | | **Good Pass [ca. 12/16]** | | | |  | |
| * A description of how other organisations deliver mental health strategies is given but there is no assessment or judgement. * There is only an assessment or judgement made on one other organisation. * No examples of best case practices have been identified | | * Assessments have been conducted on two other organisations but judgements on impact may be lacking in detail * Some examples of best case practices have been identified but may lack detailed explanation | | | | * A detailed assessment is made of the mental health strategies of two other organisations with a clear focus on their impact. * Examples of best case practices have been identified and explained. | | | |
| / 16  (min. of 8) | Pass or Referral |
| **Section comments** (optional): | | | | | | **Verification comments** (optional): | | | | | | | |
| **Learning Outcome / Section 2:** Be able to carry out the legal requirements to ensure staff’s positive mental health | | | | | | | | | | | | | |
| **Assessment Criteria (AC)** | | **Sufficiency Descriptors**  *[Typical standard that , if replicated across the whole submission, would produce a referral, borderline pass or good pass result]* | | | | | | | | | | **Assessor feedback on AC** | |
| AC 2.1  Develop a plan to meet the requests for reasonable adjustments of a member of staff. | | **Referral [ca. 4/12]** | | **Pass [6/12]** | | | | **Good Pass [ca. 8/12]** | | | |  | |
| * Reasonable adjustments have been listed but no explanation has been given of their features. * Only one reasonable adjustment has been explained. * No plan has been included or the plan developed shows no use of fair and objective assessment criteria | | * At least two reasonable adjustments have been explained but may be in limited detail * A basic plan has been developed to meet the requests for reasonable adjustments from a member of staff. * The plan shows the use of fair and objective criteria although they may be limited in number | | | | * At least two reasonable adjustments have been explained in detail * A detailed plan has been developed to clearly meet the requests for reasonable adjustments from a member of staff. * The plan shows the use of a range of fair and objective criteria. | | | |
| / 12  (min. of 6) | Pass or Referral |
| AC 2.2  Describe approaches to improve and manage mental health in the workplace | | **Referral [ca 4/12]** | | **Pass [6/12]** | | | | **Good Pass [ca. 8/12]** | | | |  | |
| * The principal features of approaches that will improve **and** manage mental health in the workplace are not both addressed. | | * A limited account has been given of the principal features of approaches that will both improve **and** manage mental health in the workplace. | | | | * A detailed account has been given of the principal features of approaches that will both improve **and** manage mental health in the workplace. | | | |
| / 12  (min. of 6) | Pass or Referral |
| **Section comments** (optional): | | | | | | **Verification comments** (optional): | | | | | | | |
| **Learning Outcome / Section 3:** Be able to hold and record conversations with staff about their mental health | | | | | | | | | | | | | |
| **Assessment Criteria (AC)** | | **Sufficiency Descriptors**  *[Typical standard that , if replicated across the whole submission, would produce a referral, borderline pass or good pass result]* | | | | | | | | | | **Assessor feedback on AC** | |
| AC 3.1  Advocate for the mental health of staff as a valuable resource | | **Referral [ca. 4/12]** | | **Pass [6/12]** | | | | **Good Pass [ca. 8/12]** | | | |  | |
| * Positive mental health may be described but there is no evidence of the practical promotion of positive mental health within the workplace | | * There is evidence that positive mental health has been promoted within the workplace * A suitable communication method has been chosen and used to convey information. The activity may be limited in scope. | | | | * There is evidence that positive mental health has been actively promoted within the workplace. * A suitable communication method has been chosen and used to convey information | | | |
| / 12  (min. of 6) | Pass or Referral |
| AC 3.2  Communicate with staff about their mental health and support them to improve it | | **Referral [ca. 4/16]** | | **Pass [8/16]** | | | | **Good Pass [ca. 12/16]** | | | |  | |
| * No evidence is given of how communication has taken place with members of staff, either during or following a period of mental ill health, or the explanation is incorrect or inappropriate * There is evidence of communication with only one member of staff. * There is no evidence of support mechanisms being put in place. | | * There is limited evidence of how appropriate communication took place with two members of staff, either during or following a period of mental ill health * There is evidence of support mechanisms being put in place although the scope may be limited. | | | | * Detailed evidence is given of how communication took place with two members of staff, either during or following a period of mental ill health. * There is detailed evidence of support mechanisms being put in place. | | | |
| / 16  (min. of 8) | Pass or Referral |
| AC 3.3  Assess own mental health and its potential effect on others | | **Referral [ca. 4/16]** | | **Pass [8/16]** | | | | **Good Pass [ca. 12/16]** | | | |  | |
| * Own mental health may be described but there is no evidence of objective assessment * There is no evidence of a judgement on how own mental health may potentially affect others | | * Evidence of an objective assessment of own mental health is shown although the breadth may be limited. * A limited judgement is included of how own mental health may potentially affect others | | | | * A detailed and objective assessment of own mental health is shown showing a range of different characteristics. * A comprehensive judgement is made on how own mental health may potentially affect others. | | | |
| / 16  (min. of 8) | Pass or Referral |
| **Section comments** (optional): | | | | | | **Verification comments** (optional): | | | | | | | |
|  | | | | | | | | | **/ 100**  **TOTAL MARKS** | | | | |
| **Assessor’s Decision** | | | | | | **Quality Assurance Use** | | | | | | | |
| **Outcome** (*delete as applicable*): **PASS / REFERRAL** | | | **Signature of Assessor:**  **Date:** | | | **Outcome** (*delete as applicable*): **PASS / REFERRAL** | | | | | **Signature of QA:**  **Date of QA check:** | | |