

**Tutor Assessment for trainer registration with NBSCCCI**

**Monitoring Process**

**As part of NBSCCCI’s registration an assessment will be carried out of the trainer’s skills and abilities in delivery, in line with training criteria listed below all of these criteria are mandatory. This information will be held in the offices of the NBSCCCI and shared with your assessors for community delivery and if requested by your Church authority, with relevant members of Church personnel of your Church body.**

**Name of trainer seeking registration.........................................................................................**

**Contact Details ................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................**

**Name of Church body ..............................................................................................................**

**Name of Church authority ........................................................................................................**

**Name of Tutor ........................................................................................................................**

**Date of Assessment..............................................................................................................**

**Part 1: Observations by the assessor**

1. Were the venue and the room layout suitable for the programme and participants needs?

Yes No

Please comment

1. Did the trainer adequately cover the following

Yes No

Introductions

Aims & objectives

Expectations & concerns

Contract/limits to confidentiality

Please comment

1. Was the entire content of the programme delivered accurately?

Yes No

Please comment?

1. Were the exercises carried out in a way which met the key milestones in the manual?

Yes No

Please comment

1. Were questions from participants answered or signposted correctly?

Yes No

Please comment

1. Were the communication and facilitation skills used by the trainer throughout the session effective in encouraging active participation and learning by the participants?

Yes No

Please comment

1. Did any difficult issues arise during the training and if so how did the trainer address them?

Yes No

Please comment

1. Did the trainer have sufficient resources, handouts, etc...?

Yes No

Please comment

1. Did the trainer carry out an evaluation throughout the training session?

Yes No

Please attach completed participants evaluation

1. Did the trainer meet the competencies required to deliver this programme?

Please comment:

1. Recommendations to trainer for future delivery

**Part 2: To be completed by the assessor along with the trainer:**

1. How did you feel while delivering the training?
2. What aspects of your delivery did you feel worked well?
3. What aspects of your delivery did you feel require development?
4. What additional support/resources do you require in order to address these areas?
5. How do you think the training impacted on the participants?
6. Did anything occur during/before the session which impacted on your delivery?
7. What worked well in terms of co-delivering with your colleague? (if relevant)
8. What aspects of co-delivery require further development? (if relevant)
9. What action/s will you take between now and your next delivery?