# Guidance notes for completing a Support Worker Record of Tasks (In the workplace)

Use the four tables below to record the information required to enable us to assess your case and consider a grant for a Support Worker.

**We recommend that you discuss this with your employer and support worker if you have one**. They may be able to help you to complete the form.

**The Tables (1- 4)**

Table 1: We need you to provide details of the job tasks that you are able to undertake independently (with assistive technology where needed), i.e. tasks you can perform without the need for assistance from any potential Support Worker

Table 2: List those activities/ tasks that you need a support worker for.

Table 3: If you require support for less frequent or adhoc duties, for example, monthly meetings, annual reviews, staff presentations, training days/hours, awareness day’s etc. then list those duties on this table.

Table 4: You are asked to list the reasonable adjustments made by your employer. Please also include the result of any discussions you have had with your employer regarding your issues in work, plus any advice that they have given to you.

**Contracted hours**

For each table you are asked to enter the total number of hours per week each activity takes. Also on the bottom row you are asked to provide an overall total. Please note that we only help with contracted work hours so if you list more than your contracted hours you will need to clarify why this is so.

## Support worker Record of Tasks (Typical Week)

In order to help us identify the support that you need to do your job, we require some further information from you. Please read the instructions carefully.

### Table 1: What you can do alone.Identify the weekly tasks in the workplace that you are able to undertake without a support worker; this should not exceed your contracted weekly hours

|  |  |  |
| --- | --- | --- |
| **Task** | **Time taken (hours per Week)** | **Do you use any assistive technology etc. for this activity? If yes please clarify** |
| *For Example – Typing up reports on the PC.* | *10 hours*  | *Yes & use Dragon software* |
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| **Total hours:** |  |  |

### Table 2: What you need a support worker for…. Tell us the job tasks in the workplace that you require a support worker to perform, to enable you to do your job. Please ensure you state in the “time taken per week box” if you supervise & direct the support worker during each listed activity; or if you perform alternate duties while the support worker is undertaking it.

### If the total weekly hours of requested support exceeds your weekly contracted hours, please state why this is the case

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| --- | --- | --- | --- | --- |
| **Task (e.g. note-taking, photocopying, filing, proof reading etc.)** | **What the Support Worker will actually do in regards to this task?** | **Time taken (hours per week)** | **During this activity is the SW directed & supervised by you? Why?** | **While SW doing this activity, are you performing alternate duties? If so, what are these?** |
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| ***Total hours:*** |  |  **hours** |  |  |

### Table 3 Support worker Record of Tasks (Adhoc or less frequent tasks and duties) Please ensure you state in the “time taken box” if you supervise & direct the support worker during this particular activity; or if you perform alternate duties while the support worker is undertaking it.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Adhoc or less frequent duty/task** | **What the Support Worker will actually do in regards to this task?**  | **Time taken... (specify periodicity)** | **During this activity is the SW directed & supervised by you? Why?** | **While SW doing this activity, are you performing alternate duties? If so, what are these?** |
| For Example - To attend a formal speaking event | *The support worker will attend the speaking events to assist with travel and provide direction regarding time and names of attendees* | *50 hours per year* | *Yes as will need active support* | *Yes, I may be net working and giving a presentation* |
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| **Total hours:** |  |  |  |  |

We need to know what reasonable adjustments your employer has made to assist you with regard to your disability or medical condition(s). Please list any reasonable adjustments that your employer has made or any support they have provided in the table below.

### Table 4: Reasonable adjustments made by employer

|  |
| --- |
| *For example, work from home 2 days per week, or start at 10am instead of 9am to avoid crowded trains.* |

Did you find providing this information in this format useful? (Please delete as appropriate) Yes/No

**Please scan and email your response to your advisor, keeping the original for your records. Thank you.**

**Customer Signature: Date:**