

evidence sheet for requirement 5a

QiB No: Q_____

“befrienders receive support and supervision sessions in order to:

- > **help them fulfil their role**
- > **help protect the client**
- > **ensure that their befriending activities are relevant to the aims of the project”**

please circle the indicators for which you have included evidence:

NB: As a minimum you **must** include **at least one item of evidence** to demonstrate that you meet **each S&CP indicator** in order to achieve the QiB Award. If you want to be assessed for QiB Excellence, you must **also** include evidence for each GP indicator.

† The lists of “possible evidence” simply give you suggestions of the type of evidence that might be suitable.

| | | | |
|-----------------|---------------------------|-----------|----------------------|
| indicator i) | Safe & Competent Practice | essential | yes/ no * |
| indicator ii) | Safe & Competent Practice | essential | yes/ no * |
| indicator iii) | Safe & Competent Practice | essential | yes/ no * |
| indicator iv) | Safe & Competent Practice | essential | yes/ no * |
| indicator v) | Safe & Competent Practice | essential | yes/ no * |
| indicator vi) | Safe & Competent Practice | essential | yes/ no * |
| indicator vii) | Safe & Competent Practice | essential | yes/ no * |
| indicator viii) | Good Practice | optional | * |
| indicator ix) | Good Practice | optional | * |

* please select yes / no

what evidence have you included in your evidence folder for this requirement?

NB: Wherever appropriate, you must submit **“LIVE” evidence** - ie copies of forms which have actually been used and filled in, with any confidential information obscured. Please make sure the date the form was used is visible and that it is within any timescale specified in the indicators.

| indicator number | the name of the document you have included in your folder | evidence number | date “live” form filled in / document last reviewed |
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evidence sheet for requirement 5b

QIB No: Q_____

“projects provide resources to support volunteers in their role”

please circle the indicators for which you have included evidence:

NB: As a minimum you **must** include **at least one item of evidence** to demonstrate that you meet **each S&CP indicator** in order to achieve the QIB Award. If you want to be assessed for QIB Excellence, you must **also** include evidence for each GP indicator.

† The lists of “possible evidence” simply give you suggestions of the type of evidence that might be suitable.

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|----------------|---------------------------|-----------|--|
| indicator i) | Safe & Competent Practice | essential | <input checked="" type="radio"/> yes / <input type="radio"/> no* |
| indicator ii) | Good Practice | optional | <input type="radio"/> * |
| indicator iii) | Good Practice | optional | <input type="radio"/> * |
| indicator iv) | Good Practice | optional | <input type="radio"/> * |

* please select yes / no

what evidence have you included in your evidence folder for this requirement?

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evidence sheet for requirement 5c

QiB No: Q_____

“formal client and match reviews are conducted in order to monitor relationships and assess the success of matches”

please circle the indicators for which you have included evidence:

NB: As a minimum you **must** include **at least one item of evidence** to demonstrate that you meet **each S&CP indicator** in order to achieve the QiB Award. If you want to be assessed for QiB Excellence, you must **also** include evidence for each GP indicator.

† The lists of “possible evidence” simply give you suggestions of the type of evidence that might be suitable.

| | | | |
|----------------|---------------------------|-----------|---|
| indicator i) | Safe & Competent Practice | essential | <input checked="" type="radio"/> yes/ <input type="radio"/> no* |
| indicator ii) | Safe & Competent Practice | essential | <input checked="" type="radio"/> yes/ <input type="radio"/> no* |
| indicator iii) | Safe & Competent Practice | essential | <input checked="" type="radio"/> yes/ <input type="radio"/> no* |
| indicator iv) | Safe & Competent Practice | essential | <input checked="" type="radio"/> yes/ <input type="radio"/> no* |
| indicator v) | Safe & Competent Practice | essential | <input checked="" type="radio"/> yes/ <input type="radio"/> no* |

what evidence have you included in your evidence folder for this requirement?

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| indicator number | the name of the document you have included in your folder | evidence number | date “live” form filled in / document last reviewed |
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evidence sheet for requirement 5d

QiB No: Q_____

“contact is maintained with clients between formal reviews”

please circle the indicators for which you have included evidence:

NB: As a minimum you **must** include **at least one item of evidence** to demonstrate that you meet **each S&CP indicator** in order to achieve the QiB Award. If you want to be assessed for QiB Excellence, you must **also** include evidence for each GP indicator.

† The lists of “possible evidence” simply give you suggestions of the type of evidence that might be suitable.

| | | | | |
|---------------|---------------------------|-----------|--|--------------------------|
| indicator i) | Safe & Competent Practice | essential | <input checked="" type="radio"/> yes / <input type="radio"/> no* | * please select yes / no |
| indicator ii) | Good Practice | optional | <input type="radio"/> yes / <input checked="" type="radio"/> no* | |

what evidence have you included in your evidence folder for this requirement?

NB: Wherever appropriate, you must submit **“LIVE” evidence** - ie copies of forms which have actually been used and filled in, with any confidential information obscured. Please make sure the date the form was used is visible and that it is within any timescale specified in the indicators.

| indicator number | the name of the document you have included in your folder | evidence number | date “live” form filled in / document last reviewed |
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