

Purpose of this Assessment

This assessment forms part of Creative Support's Skilled Worker sponsorship approval process. Skilled Worker sponsorship represents a significant commitment by both the employee and the organisation, with sponsorship normally lasting up to five years. It is therefore important that we make informed decisions which support both the employee and the service throughout the sponsorship period.

Please take the time to complete this assessment as fully and accurately as possible. The questions have been specifically designed to capture the information required to make a fair, balanced and evidence-based sponsorship decision. Honest feedback, including both the applicant's strengths and any areas for development, is essential to ensure the appropriate support can be provided where required.

There are no right or wrong answers. Please answer each question objectively, based on your experience of managing the applicant, and provide examples where appropriate. HR will consider this assessment alongside all other sponsorship requirements before making a final decision.

1. Employment Details	
1.1	Employee Name:
1.2	Employee Number:
1.2	Current Service or Project:
1.3	Employees Current Job Title:
1.4	Date Employment Began:
1.5	How long have you known the employee?

2. Attendance, Timekeeping and Reliability	
2.1.	How many days were lost due to absences in the last two years?
2.2.	How many separate occasions?
2.3	Please summarise the main reasons for any absence over the last two years.
2.4	Please provide any additional comments regarding the applicant's attendance, punctuality or overall reliability.

3. Employment Record			
Please indicate whether the applicant has been subject to any of the following during their employment with Creative Support.		Yes	No
3.1	Had their probationary period extended?	☐	☐
3.2	Been subject to an investigation?	☐	☐
3.3	Been subject to disciplinary action?	☐	☐
3.4	Received complaints from colleagues?	☐	☐
3.5	Received complaints from service users?	☐	☐
3.6	Received complaints from family members?	☐	☐
3.7	Received complaints from external professionals or third parties?	☐	☐
3.8	Been subject to capability procedures?	☐	☐
3.9	If any answer is "Yes", please provide full details below.		

4.	Role Suitability
Please provide an overall assessment of the applicant's performance, conduct, values and professionalism, together with your recommendation as to whether they are suitable for Skilled Worker sponsorship. Please include examples where appropriate.	
4.1	Please describe the applicant's overall performance and conduct.
4.2	In your opinion, what makes the applicant suitable for Skilled Worker sponsorship?
4.3	Is there anything else the HR Data Compliance Team should consider when deciding whether to approve sponsorship?

5.	Visa Sponsorship Assessment		
Please complete the questions below based on your knowledge of the applicant's current service and operational requirements.			
		Yes	
		No	
5.1	Can the applicant be offered and maintained on a minimum contract of 37.5 hours per week at their current service/project?	☐	☐
5.2	Based on your knowledge of the service, do you anticipate any operational changes that may affect the applicant's ability to maintain their contractual hours during the proposed sponsorship period?	☐	☐
5.3	Do you believe the applicant has demonstrated the commitment and reliability expected of an employee being considered for a five-year Skilled Worker sponsorship?	☐	☐
5.4	If sponsorship is approved, do you have any concerns about your ability to support and manage the applicant throughout the sponsorship period?	☐	☐
5.5	Do you support this applicant being considered for Skilled Worker sponsorship?	☐	☐
5.6	If you were recruiting for this role today, would you appoint this applicant again based on their current performance?	☐	☐

6.	Professional Standards and Compliance		
Please complete the section below based on your experience of managing the applicant.			
		Yes	
		No	
6.1	Has the applicant consistently demonstrated honesty and integrity in their role?	☐	☐
6.2	Has the applicant demonstrated a willingness to follow organisational policies and procedures?	☐	☐
6.3	Has the applicant responded positively to feedback, supervision and management direction?	☐	☐
6.4	Do you have confidence in the applicant's ability to represent Creative Support professionally throughout the sponsorship period?	☐	☐

7. Assessment of Performance and Professional Behaviours				
Based on your experience of managing the applicant, please assess each of the following areas by selecting the rating that best reflects your overall assessment. Please base your assessment on the applicant's performance over the last 12 months wherever possible.				
Key	Outstanding	Good	Meets Expectations	Improvement Required
Professional Conduct				
Attendance and Reliability				
Communication				
Team Working				
Initiative				
Commitment to Person-Centred Support				
Record Keeping				
Professional Judgement & Decision Making				
Ability to follow procedures				
Overall Performance (add values WECare)				

Based on your experience of managing the applicant, please identify their key strengths and any areas for development relevant to their suitability for Skilled Worker sponsorship.			
Key Strengths		Areas for Development	
1.		1.	
2.		2.	
3.		3.	

8. Working with Vulnerable Adults:			
Please complete the questions below to confirm your assessment of the applicant's suitability to work with vulnerable adults.		Yes	No
8.1	Based on your experience of managing the applicant, are you satisfied they demonstrate the appropriate values, behaviours and professionalism required to work with vulnerable adults?	☐	☐
8.2	Do you have any safeguarding, conduct, professionalism or competency concerns that would affect the applicant's suitability to continue working with vulnerable adults?	☐	☐
8.3	Are you aware of any information that suggests the applicant may present an actual or potential risk to service users, colleagues or the organisation?	☐	☐

Manager Declaration:	
I confirm that I have completed this assessment honestly and to the best of my knowledge. The information provided reflects my own assessment of the applicant based on my experience of managing them.	
Full Name (Please Print):	
Job Title:	
Date of Completion:	
Signature:	