

ELN Self-Assessment Tool: Questionnaire ITO-O-9 – Quality of Self-Assessment

Judgement scales for each 'good practice' indicator: N/A = Not applicable; D/K = We don't know; 1 = We are not doing this yet; 2 = We have started on this but there are still significant improvements to be made; 3 = We are doing this well; there are minor improvements to be made; 4 = We are doing this very well.

L&N = Literacy and Numeracy

Topic	Good practice indicators	Prompting questions	Judgement					
			N/A	D/K	1	2	3	4
Self-Assessment	The organisation systematically collects valid and reliable evidence of the effectiveness of embedded L&N.	How well does the organisation collect evidence of the outcomes and value of embedded L&N for trainees and other stakeholders? How well do staff take responsibility for contributing to the evidence?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Embedded L&N are integral to the organisation's self-assessment framework and process.	How well are L&N embedded in the organisation's self-assessment framework and process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	All people in the organisation who have a role in and responsibility for embedded L&N engage in continuous self-assessment of their embedding L&N practices.	How well do staff and teams who have a role and responsibility for embedded L&N engage in continuous self-assessment of their embedding L&N practices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Self-assessment of embedded L&N informs the ongoing development of the organisation's embedded L&N strategic and operational plans.	How well does self-assessment of embedded L&N across the organisation inform the ongoing development of the organisation's embedded L&N strategic and operational plans?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Strengths of the organisation in regard to Self-Assessment, and evidence for these:

Click here to enter text.

Critical Actions to be taken in the organisation in regard to Self-Assessment:

Click here to enter text.

Name Organisational unit (if applicable): Click here to enter text.

Date completed: Click here to enter a date.