ELECTIONS NZ

Training Observation Checklist for Area Co-ordinators E54

Objective   To provide concise, clear and easily understood instructions to training session participants prior to election day on how to carry out specific electoral procedures.

Chief Electoral Office's Expectation of Area Co-ordinator

》➡   The Area Co-ordinator attend at least one training session in each electorate

》➡   All the area Returning Officers and their staff will have delivered training sessions to polling day staff designed to meet the objective

》➡   At the conclusion of the training session the Area Co-ordinator will have completed a Training Observation Checklist and provided feedback and any suggestions for improvement to the Returning Officer

》➡   Copies of the completed checklist are distributed to: Returning Officer   ☐
Chief Electoral Office   ☐
Area Co-ordinator to retain original   ☐

PRINT DETAILS   ....

Area Co-ordinator   **Date**   **Electorate**   **Number**

Training Observation Checklist   **E54**

A   <u>**Venue**</u>**:**   **Signposting**   *was it easy to find*   *Yes/No*   ....

           Welcome   *were trainees greeted on arrival by RO*   *Yes/No*   ....

           Materials/Resources   *were these well set out*   *Yes/No*   ....

           Housekeeping   *were all points covered*   *Yes/No*   ....

           Suitability   *sufficient space for those in attendance*   *Yes/No*   ....

                 conducive to participation/involvement   *Yes/No*   ....

           Finish   *were attendees seen safely off the premises*   *Yes/No*   ....

           Physical working conditions   *air conditioning adequate*   *Yes/No*   ....

                 lighting   adequate   *Yes/No*   ....

                 audible   adequate   *Yes/No*   ....

B   <u>**Administration**</u>   **Workbooks**   *were answers handed out on arrival*   *Yes/No*   ....

           DRO Appointment Declaration   *was form completed*   *Yes/No*   ....

Training Observation Checklist

					Comment
C **Training**	**Timekeeping**	*did session commence on time*	*Yes/No*	....
		finish on time	*Yes/No*	....
	Introduction	*was this done*	*Yes/No*	....
	Session Content	*was this outlined*	*Yes/No*	....
	Issues/Concerns	*were trainees given opportunity to raise*	*Yes/No*	....
	If Yes	*were they listed on whiteboard*	*Yes/No*	....
		were they checked at end of session	*Yes/No*	....
	Training Aids	*Whiteboard ?if used*	*Yes/No*	....
		OHP ?if used	*Yes/No*	....
		Flip Charts ?if used	*Yes/No*	....
		Visual Display Material? if used	*Yes/No*	....
	Training Guide	*were relevant points covered*	*Yes/No*	....
		was customer service focus highlighted	*Yes/No*	....
		was emphasis given on following handbook	*Yes/No*	....
	Presentation	*did RO share this*	*Yes/No*	....
	If Yes	*was it balanced*	*Yes/No*	....

<u>**Comment**</u>

<u>**C**</u>	<u>**Training cont'd**</u>	**Exercises**	*were instructions clearly explained*	*Yes/No*	....
			were checks made to ensure understanding	*Yes/No*	....
			were all group exercises carried out with oversight by RO Headquarters staff	*Yes/No*	....
			were queries raised answered promptly	*Yes/No*	....
			accurately	*Yes/No*	....
			were mistakes during exercises corrected and explained	*Yes/No*	....
		Issuing	*did groups undertake exercises for ISSUE of relative voting papers eg Ordinary/Special/Ordinary Maori/ Tangata Whenua/Local Restoration Poll*	*Yes/No*	....
			were checks as to understanding of process made	*Yes/No*	
		Count and Balance	*did groups undertake exercises for: COUNT and BALANCE process*	*Yes/No*	....
			were checks as to understanding of process conducted at completion of exercises	*Yes/No*	....

Summary   *was TRAINING session summarised*   Yes/No   ....

D   **General**   **Suggestions to RO for improvement:**

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Evaluation: **Excellent**

Very Good

Good

Improvement Required

_____   _____   **Copy to** *RO* _____

Area Co-ordinator   Date   *CEO* _____