

## Competency Standards for Caribbean Vocational Qualifications (CVQ)

### CCCSA20205 CVQ Level II in Allied Health - Geriatric Caregiver

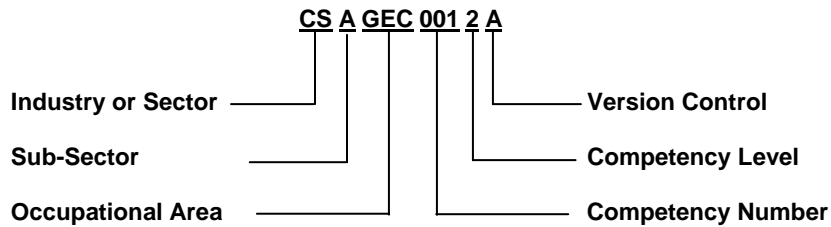
Unit Number	Unit Title	Mandatory/ Elective	Hours
CSACOR0011A	Apply basic communication skills	Mandatory	30
CSACOR0021A	Plan and organise work	Mandatory	10
CSACOR0031A	Carry out measurements and calculations	Mandatory	30
CSACOR0041A	Perform interactive workplace communication	Mandatory	10
CSACOR0061A	Participate in workplace safety procedures	Mandatory	20
CSACOR0071A	Maintain a safe, clean and efficient work environment	Mandatory	20
CSACOR0081A	Prepare bed for occupancy	Mandatory	10
CSACOR0091A	Apply basic first aid	Mandatory	40
CSACOR0101A	Contribute to a harmonious and efficient work environment	Mandatory	10
ITICOR0011A	Carry out data entry and retrieval procedures	Mandatory	40
CSAHCA0102A	Prepare medical equipment and supplies	Mandatory	20
CSAHCA0012A	Provide nutritional care	Mandatory	40
CSAGEC0012A	Provide care support to senior citizens	Mandatory	70
CSAGEC0072A	Support the elderly person to maintain their independence	Mandatory	40
CSAGEC0022A	Support elderly persons to meet their emotional and psychosocial needs	Mandatory	40
CSAGEC0032A	Support persons with disabilities in Geriatric Care	Mandatory	50
CSAGEC0042A	Provide care/support which is responsive to specific behavioural changes	Mandatory	50
CSAGEC0052A	Conduct a recreation program for persons in Geriatric Care	Mandatory	40
CSAHCA0062A	Measure vital signs	Mandatory	60
CSAHCA0042A	Attend to sanitation and hygiene care	Mandatory	50
CSAGEC0062A	Care for the dying elderly person	Mandatory	40
CSAHCA0032A	Assist care recipient with medication	Mandatory	40
CSAHCA0052A	Assess skin status/condition and implement preventative and corrective measures	Elective	30
CSAHCA0072A	Administer nursing procedure under supervision	Elective	60
CSAHCA0092A	Observe muscular coordination, report findings and assist in corrective measures	Elective	20
BSBSBM0012A	Craft personal entrepreneurial strategy	Elective	50
CSAHCA0023A	Observe, detect and respond to signs of abuse	Elective	50
CSAGEC0013A	Co-ordinate work in the aged care sector	Elective	50
CSAHCA0033A	Promote sensory and motor skills development	Elective	50
CSAHCA0043A	Maintain and control stock	Elective	30

To achieve this qualification all Mandatory competency standards and a minimum of any two (2) Level 2 and any one (1) Level 3 electives must be achieved.

Nominal Training Hours (Institutional Delivery) include total hours of Mandatory competencies and electives selected.

**Legend to Unit Code**

**Example: CSAGEC0012A**



**KEY: Man – Mandatory; CS – Community Service; A – Allied Health; BSB – Business Services (Business); SMB – Small Business Management; HCA – Health Care Assistance; GEC – Geriatric Care; ITI – Information & Communication (Information Technology)**

**CSACOR0011A: Apply basic communication skills**

Competency Descriptor:

This unit provides skills and knowledge required to apply the basic rules of spoken and written English to enhance the development of language and communication skills.

Competency Field:

Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Apply basic grammar principles	1.1	The different parts of speech are correctly identified.
		1.2	The different types of tenses and sentences are correctly identified.
		1.3	Correct use of parts of speech, tenses and subject/verb agreement is shown when constructing sentences.
		1.4	Different types of sentences are constructed correctly and coherently.
2.	Apply the rules for Mechanics, Vocabulary and Spelling	2.1	Capitalization, abbreviations and punctuation are used correctly in written exercises.
		2.2	The twelve spelling rules are identified and applied.
		2.3	Different types of sentences are correctly identified and constructed.
3.	Develop writing skills	3.1	Essential characteristics of a paragraph are identified.
		3.2	Paragraph is developed from given information.
		3.3	Types of letters are identified.
		3.4	An incident report is written to the required standard.
		3.5	Job-related forms are completed to the required standards.
4.	Develop basic communication skills	4.1	The purposes of written/oral and visual communication are correctly stated.
		4.2	Methods of non-verbal communication are identified.
		4.3	Appropriate tools and devices are used to communicate effectively in the written and verbal mode.

	4.4	The importance of listening to effective communication is indicated.
5. Use information system	5.1	Functions of a library are identified.
	5.2	Memo/electronic data bases of catalogues are correctly used.
	5.3	A variety of media is used to access information.

## RANGE STATEMENT

The Range Statement explains the scope and context of the unit of competency allowing for differences between workplaces. The scope of variables chosen for training and assessment requirements will depend on the particular work situation,

The following variables may be present

Writing skills include:

- identifying types of paragraphs
- developing paragraphs
- styles and formats of letters
- summarize paragraph/passage
- prepare and write notices
- write resume

Mechanics, Vocabulary and Spelling include:

- rules governing the use of punctuation marks
- use of abbreviations
- twelve spelling rules
- 

Grammar principles include:

- parts of speech
- parts of a sentence
- types of sentences include simple and compound
- rules for subject/verb agreement
- types of tenses include present, past, future etc.

Information systems include:

- functions of library and documentation centre
- use of catalogues in libraries/documentation centres to locate books
- use of dictionaries and encyclopedias
- use of technical handbooks, manuals, directories and maps
- use of newspapers and periodicals

Communication skills include:

- purposes/goal for written, visual and oral communication
- listening skills
- methods of non-verbal communication
- oral/written instructions
- use of telephone, fax machine, advertisement
- use of statistics and graphical presentation
- differentiating between facts and opinions

## EVIDENCE GUIDE

Competency is to be demonstrated by the ability to effectively apply basic communication skills according to the performance criteria and the range statement .

### (1) Critical Aspects and Evidence

Evidence of the following needs to be demonstrated:

- Construct sentences showing correct use of parts of speech, tenses and subject/verb agreement, punctuation and spelling.
- Demonstrate the ability to write business letters, resume, incident reports, complete forms and summarize information.
- Use appropriate tools and devices to communicate effectively in the written and verbal mode.
- Differentiate between facts and opinions.
- Access relevant information from given information system.

### (2) Pre-requisite Relationship of Units

- Nil

### (3) Underpinning Knowledge and Skills

#### Knowledge

Knowledge of:

- parts of speech and their functions
- parts of a sentence
- how to correct errors in sentences
- how to construct simple, compound and complex sentences
- rules for subject/verb agreement
- how to use different tenses
- rules for using punctuation marks, capitalization
- how to use abbreviations in written language
- the twelve spelling rules
- how to use context clues to interpret word meanings
- types of paragraphs

Knowledge

Knowledge of: (Cont'd)

- how to develop paragraphs
- letter styles and format
- how to write business letters
- how to write resume
- how to write incident reports
- how to complete forms
- how to summarize information
- basic goal/purpose of written, visual and oral communication
- the importance of listening skills in communication
- methods of non-verbal communication
- how to give oral/written instructions
- how to follow written instruction
- correct pronunciations and enunciations in oral presentations
- how to use the fax/telephone, advertisements
- how to use graphic presentation (tables, charts and graphs) in written/oral presentations
- functions of library/documentation center
- how to use catalogues in libraries/documentation center
- how to use dictionaries and encyclopedias to access information
- how to use technical handbooks, directories and maps
- how to use newspapers and periodicals
- different kinds of verbs
- different kinds and functions of phrases and clauses

Skills

The ability to:

- identify types of sentences
- use the correct forms of different kinds of verbs
- identify different kinds and functions of phrases and clauses
- construct simple, compound and complex sentences correctly
- identify and correct sentence faults
- use punctuation, capitalization and abbreviation correctly in written exercises
- interpret the meaning of words from context clues
- spell words correctly
- use words correctly both in speaking and writing
- write paragraphs that are unified, coherent and adequately developed
- write different types of essays
- write business letters and incident report
- summarize information
- discuss how non-verbal communication can be used positively and negatively
- use appropriate tools and devices to communicate effectively in written and verbal mode
- differentiate between facts and opinions
- access relevant information from various information systems
- complete forms
- use basic electronic devices

**(4) Resource Implications**

Assessment requires access to a range of opportunities defined in the Range of Variables. This includes:

- A care facility workplace
- Access to resources and equipment
- Access to the local environment

**(5) Method of Assessment**

In order to ensure consistency in performance it will be necessary to collect evidence across a range of competencies.

Evidence may be collected in a variety of ways including:

- direct observation during oral presentations
- questioning – oral\written activities
- projects related to use of information systems,
- portfolio with authenticated assessments and/or assignments from relevant training courses

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

This unit should be assessed on the job and during the training period incorporating a range of conditions over a number of assessment situations. Assessment may also be done while tasks are undertaken either individually or as part of a team under supervision.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1	Level 2	Level 3
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 1	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 1	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 1	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.



## CSACOR0021A: Plan and organise work

Competency Descriptor:

This unit deals with the skills and knowledge required to effectively plan and organise work assignments, and applies to all individuals working in the allied health sector

Construction Field:

Allied Health

### ELEMENT OF COMPETENCY

### PERFORMANCE CRITERIA

1. Identify work requirements	1.1 Instructions for work schedule and performance and quality assurance requirements are received understood and clarified where necessary.
2. Plan process to complete work	2.1 Tasks are identified, prioritised and sequenced to achieve effective completion of work.
3. Select tools and equipment	3.1 Personal protective equipment is correctly identified and selected to suit job requirements. 3.2 Appropriate tools and equipment are identified and selected for required service.
4. Demonstrate safe and efficient sequence of work	4.1 Service is provided safely in a logical and efficient sequence. 4.2 Tools, supplies and equipment are safely stored when not in immediate use.
5. Report outcomes	5.1 Verbal report is given to appropriate person on completion of service and relevant client details entered on database.
6. Clean up	6.1 Unused materials are safely stored at appropriate area. 6.2 Empty containers and waste material are removed from service area. 6.3 Service area is left clean, safe and secure on completion. 6.4 Tools and equipment are cleaned, maintained and stored.

## **RANGE STATEMENT**

Work organisation sequence may range from receiving instructions, to carrying out task, to cleaning up task.

Work plan may be either written or verbal and may include the following:

- preparation of work area
- selections of tools and equipment
- handling of materials, tools and equipment
- housekeeping requirements

Work schedule may be carried out in a singular application or in a team situation.

Work schedule and performance may have to adhere to quality assurance policy and procedures.

## **EVIDENCE GUIDE**

Competency is to be demonstrated by safe and effective preparation using any of the range of work sequences listed within the range of variables statement relative to the work environment.

### **(1) Critical Aspects and Evidence**

It is essential that competence is observed in the following aspects:

- indicate compliance with Occupational Health and Safety regulations applicable to care facility indicate compliance with organisational policies and procedures including quality assurance requirements
- carry out correct procedures prior to and during the provision of service to clients/patients
- communicate to enable efficient individual/organisational planning of work

### **(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills****Knowledge**

A knowledge of:

- policies and procedures in regard to planning and organising allocated duties
- care facility and equipment safety requirements
- equipment
- materials appropriate to the task
- products handling
- quality assurance

**Skills**

The ability to:

- follow instructions, perform tasks according to care facility procedures, plan and prioritise tasks
- use equipment correctly
- prepare and maintain work area
- select and use products according to manufacturer's instructions
- apply quality assurance

**(4) Resource Implications**

The following resources should be made available:

- access to an equip care facility with patients/clients

**(5) Method of Assessment**

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- supporting statement from supervisor or previous employer
- case study

Competency in this unit may be demonstrated concurrently.

**(6) Context of Assessment**

This unit must be assessed through practical demonstration on -the-job or in a simulated workplace environment dealing with a variety of services and a range of communication processes with clients result until competency is achieved.

The underpinning knowledge may be assessed off -the-job with the use of written or verbal items inclusive of short answer or case studies.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collecting, analysing and organising ideas and information	Level 1	
Communicating ideas and information	Level 1	
Planning and organising activities	Level 1	
Working with others and in teams	Level 1	
Use mathematical ideas & techniques	Level 1	
Solve problems	Level 1	
Using technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employ ability Skills.

## CSACOR0031A: Carry out measurements and calculations

Competency Descriptor:

This unit deals with the skills and knowledge required to perform related calculations and applies to all individuals working in the Allied Health Industry.

Competency Field:

Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Apply the four basic rules of calculation	1.1	Simple calculations are correctly performed using the four basic arithmetic rules - addition, subtraction, multiplication and division.
		1.2	An understanding of the concept of angles is correctly demonstrated.
		1.3	Simple calculation involving time, volume and length is correctly calculated.
2.	Perform basic calculations involving fractions and decimals	2.1	Simple calculations are performed involving fractions and decimals.
3.	Perform basic calculations involving percentages	3.1	Simple calculations involving profit and loss, and discounts are correctly performed.
4.	Perform basic calculations involving proportions	4.1	Simple calculations involving ratios are correctly performed.
5.	Use measurement instruments	5.1	Measurement taken to 100 % accuracy.
		5.2	Measurement instruments are used according to manufacturer's/supervisor's instructions.
		5.3	Indicator lines and/or manufacturer's and supervisor's instructions are observed when using pre-measured products.

## **RANGE STATEMENT**

Calculations may be mental/using pen and paper/calculator. All problems should have appropriate applications to the allied health industry and relate to the normal operation in this environment.

Calculations may include:

- ratio and proportion
- percentages – profit and loss, discounts
- fractions and decimals
- addition and subtraction eg. stock count
- time intervals

## **EVIDENCE GUIDE**

Competency is to be demonstrated by individual computations in accordance with the performance criteria and as related to the work environment.

### **(1) Critical Aspects of Evidence**

This unit could be assessed alone or in conjunction with any other units addressing the safety, materials handling, recording and reporting; associated with the computations being performed or other units requiring the exercise of the skills and knowledge covered by this unit.

During assessment the individual will:

- take responsibility for the quality of their own work
- perform computations in accordance with standard principles
- perform computations accurately
- use accepted mathematical procedures, practices, processes and workplace procedures

### **(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- numbers and basic arithmetic operations
- percentages
- fractions and decimals
- ratio and proportion
- costing
- interpretation of measurement and calculations
- data relative to the allied health industry
- basic measurement of angles
- basic stock valuation

Skills

The ability to:

- measure using specified instruments
- interpret measurements and calculations
- perform work related calculations
- communicate effectively
- calculate mentally
- use calculate
- count stock

**(4) Resource Implications**

The candidate will be provided with:

- all tools, equipment, materials and documentation required where necessary
- any relevant workplace procedures
- any relevant product, manufacturing specifications and or prices
- any relevant codes, standards, manuals and reference materials or tables

**(5) Method of Assessment**

The candidate will be required to orally, or in writing or by any other methods of communication:

- answer questions put by the assessor

Assessor must be satisfied that the candidate can competently and consistently perform all elements of the unit as specified by the criteria, including required knowledge.

**(6) Context of Assessment**

This unit may be assessed on the job, off the job or a combination of both. The competencies covered by this unit should be demonstrated by an individual working alone. The assessment environment should not disadvantage the candidate.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 1	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 1	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 1	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.



## CSACOR0041A: Perform interactive workplace communication

Competency Descriptor:

This unit deals with the skills and knowledge required to for effective communication in a care facility.

Competency Field:

Allied health

ELEMENT OF COMPETENCY	PERFORMANCE CRITERIA
1. Follow routine instructions and information	1.1 Instructions/information received is acted upon appropriately. 1.2 Effective questioning is used to elicit information. 1.3 Critical information is recorded for reference based on institution/s policy.
2. Communicate positively with clients/patients	2.1 Appropriate method is used for welcoming and farewelling clients/patients. 2.2 Clients/patients are listened to attentively and responsively 2.3 Conversations with the clients/patients are done to explore their interests and concerns . 2.4 Positive and respectful communication style is modelled. 2.5 Client's/patients non-verbal cues are responded to appropriately. 2.6 Client's/patient's feelings are acknowledged and accepted. 2.7 Interactions are modified in response to the client's/patient's mood.
3. Participate in workgroups and teams	3.1 Allocated tasks are identified. 3.2 Allocated tasks are completed willingly, without undue delay. 3.3 Assistance is actively sought from or provided to other team members when difficulties arise.

- 3.4 Feedback provided by others in the workgroup is encouraged, acknowledged, and acted upon.
- 3.5 Questioning is used to minimise misunderstandings.
- 3.6 Signs of potential workplace conflict are identified and conflict avoided wherever possible.
- 3.7 Participation in team problem solving is demonstrated.
- 3.8 Support is offered and provided to colleagues.
- 4. Receive and refer clients complaints
  - 4.1 Positive helpful attitude is conveyed to clients/patients when handling complaints.
  - 4.2 Complaints are handled sensitively, courteously and with discretion.
  - 4.3 Nature of complaint is established by active listening and questioning and confirmed with the client/patient.
  - 4.4 Action is taken to resolve the complaint by referring it to the appropriate person.
  - 4.5 Opportunities are taken to turn incidents of client/patient dissatisfaction into a demonstration of high quality service to clients/patients in line with institution's policy.
- 5. Apply profession ethics
  - 5.1 Standards of decorum, good manners and social behaviour are maintained according to institution's policy.
  - 5.2 A competent, professional manner/attitude is projected through non-verbal presentation.
  - 5.3 Confidentiality and tact are demonstrated.
  - 5.4 Responsibilities of employer/employee are mutually recognised and carried out.

## RANGE STATEMENT

The Range Statement explains the scope and context of the unit of competency allowing for differences between workplaces. The scope of variables chosen for training and assessment requirements will depend on the particular work situation.

The following variables may be present:

Accessibility to client/patient may include:

- proximity to client/patient
- making eye contact
- working at client's/patient's level

Clients/patients may include:

- people from a range of cultural backgrounds and physical and mental abilities
- regular and new clients/patients

This unit of competency should be demonstrated in accordance with the care facility policies and procedures in regard to:

- contact with clients/patients
- job descriptions/responsibilities
- interaction with other team members
- interaction with supervision/management
- orientation for new workers

Teams may include:

- small work teams.
- management, or other staff members.
- full-time or part-time staff

## EVIDENCE GUIDE

Competency is to be demonstrated by the ability to effectively and consistently perform interactive workplace communications according to the sector codes of practice in relation verbal and non-verbal presentation according to the performance criteria and the range statement

**(1) Critical Aspects of Evidence**

Evidence should include a demonstrated ability to efficiently and consistently:

- apply institution's policies and procedures and sector codes of practice in regard to verbal and non-verbal presentation to external and internal client contact in the appropriate context and to the level acceptable by the institution
- participate in a team situation in a courteous helpful manner, to complete allocated tasks willingly, to avoid misunderstandings and conflict where possible
- communicate with supervisors and peers and to seek assistance when necessary
- solve problems with the team
- follow routine instructions, perform tasks according to institution's procedures
- maintain standards of decorum, good manners and social behaviour and to maintain a competent professional manner
- provide a consistently welcoming client/patient environment by treating children, guardian, parents and their representative in a courteous, professional manner
- interpret the nature of client/patient complaints, refer complaints and provide service to clients/patients according to the range of variables

**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills****Knowledge**

Knowledge of:

- institution's policies and procedures in regard to verbal and non-verbal presentation, communication within the team, allocated duties and personal presentation.
- the following which aid communication within the team:
  - roles and responsibilities of self, peers and management
  - questioning/listening techniques
  - conflict resolution skills
  - negotiation skills
  - goal setting
- importance of modelling
- importance of listening
- the importance of consistent communication of guidelines for client's/patient's behaviour
- organisational standards, policies and procedures
- the following which aid self development:
  - importance of self esteem
  - stress management
  - time management.
- required literacy skills to function.
- numeracy skills in regard to workplace functions

**Skills**

The ability to:

- consistently apply institution's policies and procedures and regard to verbal and non-verbal presentation
- participate in a team situation in a courteous helpful manner, to complete allocated tasks willingly, to avoid misunderstandings and conflict where possible
- communicate with supervisors and peers and to seek assistance when necessary
- solve problem with the team
- follow instructions, perform tasks according to organization procedures, plan and prioritise tasks
- maintain standards of decorum, good manners and social behaviour and to maintain a competent professional manner
- accurately interpret the nature of client/patient complaints and make referral to the appropriate person
- apply safe work practices and emergency procedures in regard to the provision of services
- apply the following which aid communication within the team:
  - questioning/listening techniques
  - conflict resolution skills
  - negotiation skills
  - goal setting
  - collect and organise information.

**(4) Resource Implications**

Assessment requires access to a range of opportunities defined in the Range of Variables. This includes access to:

- An equip care facility with patients and staff
- Access to the local environment

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- questioning – oral \ written
- interview – supervisors, peers
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

This unit should be assessed either on the job for a range of age groups and a range of conditions over.

A number of assessment situations. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collecting, analysing and organising ideas and information	Level 1	
Communicating ideas and information	Level 1	
Planning and organising activities	Level 1	
Working with others and in teams	Level 1	
Use mathematical ideas & techniques	Level 1	
Solve problems	Level 1	
Using technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSACOR0061A: Participate in workplace safety procedures**

Competency Descriptor:

This unit covers general Occupational Health and Safety requirements in organisations and is essential for employees without managerial or supervisory responsibilities.

Competency Field: Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Follow workplace procedures for hazard identification and risk control	1.1	Hazards in the work area are recognised and reported to designated personnel according to workplace procedures.
		1.2	Workplace procedures and work instructions for assessing and controlling risks are followed accurately.
		1.3	Workplace procedures for dealing with incidents (accidents), fire and other emergencies are followed whenever necessary within the scope of responsibilities and competencies.
2.	Contribute to Occupational Health & Safety (OH&S) in the workplace	2.1	Occupational Health and Safety issues are raised with designated personnel in accordance with workplace procedures and relevant Occupational Health and Safety legislation.
		2.2	Contributions are made to participative arrangements for Occupational Health and Safety management in the workplace, within organisational procedures and the scope of responsibilities and competencies.

**RANGE STATEMENT**

The Range Statement provides advice to interpret the scope and context of this unit of competency, allowing for differences between enterprises and workplaces. It relates to the unit as a whole and facilitates holistic assessment. The following variables may be present for this particular unit:

Statutory Legislation, codes and national standards relevant to the workplace which may include:

- relevant legislation from all government agencies that affect Community and Private Health facility, especially in regard to Occupational Health and Safety and environmental issues, industrial relations and anti-discrimination
- relevant industry codes of practice
- hazard reporting procedures
- job procedures and safe work instructions and allocation of responsibilities
- emergency procedures
- accident and 'near miss' reporting and recording procedures
- consultation on Occupational Health and Safety issues
- correct selection, use, storage and maintenance procedures for use of personal protective equipment (PPE)
- control of risks

Hazards identification may include:

- checking equipment or the work station area before and during work
- workplace inspections
- on-the-job housekeeping checks

Designated personnel may include:

- supervisors
- managers
- team leaders
- designated Occupational Health and Safety Officers
- health and safety representatives
- other persons authorised or nominated by the enterprise or industry to:
  - perform specified work
  - approve specified work
  - inspect specified work
  - direct specified work

Participative arrangements may include:

- formal and informal health and safety meetings
- health and safety committees
- other committees, for example, consultative planning and purchasing
- meetings called by health and safety representatives
- suggestions, requests, reports and concerns put forward to management

Contributions may include:

- behaviour that contributes to a safe working environment
- identifying and reporting risks or hazards
- using business equipment according to guidelines
- listening to the ideas and opinions of others in the team
- sharing opinions, views, knowledge and skills

Emergencies may include:

- chemical spills
- bomb threats
- fire
- occupational violence
- earthquake
- flood
- hurricane

## EVIDENCE GUIDE

The Evidence Guide identifies the critical aspects, underpinning knowledge and skills to be demonstrated to confirm competency for this unit. This is an integral part of the assessment of competency and should be read in conjunction with the Range Statement.

In order to achieve consistency of performance, evidence should be collected over a set period of time, which is sufficient to include dealing with an appropriate range and variety of situations.



**(1) Critical Aspects of Evidence**

- Hazards are recognised and reported to designated personnel.
- All relevant workplace procedures are accurately followed.
- Hazards and risks in the workplace are communicated.
- Contribution is made to the management of Occupational Health and Safety in the workplace at level of own responsibility.

**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- relevant legislation from all government agencies that affect business operation, especially in regard to Occupational Health and Safety and environmental issues, equal opportunity, industrial relations and anti-discrimination
- ways in which OH&S is managed in the workplace including procedures for fire, emergency, accident and near miss, and control of risks
- workplace hazards
- designated personnel responsible for reporting OH&S concerns
- the meaning of OH&S signs and symbols relevant to area of work

Skills

The ability to:

- follow safe work and emergency instructions
- communicate using OH&S reporting requirements
- participate in group meetings
- understand workplace procedures and work instructions for identifying and reporting hazards
- interpret OH&S signs and symbols
- relate to people from a range of social, cultural and ethnic backgrounds and physical and mental abilities

**(4) Resource Implications**

- The learner and trainer should have access to appropriate documentation and resources normally used in the workplace.

**(5) Method of Assessment**

Competency should be assessed while work is being done under direct supervision with regular checks, but may take the form of some autonomy when working as part of a team, in order to achieve outcomes within time.

**(6) Context of Assessment**

Competency is demonstrated by performance of all stated criteria, including paying particular attention to the critical aspects and the knowledge and skills elaborated in the Evidence Guide, and within the scope as defined by the Range Statement.

Assessment should reinforce the integration of the critical employability skills and the Allied Health Common Competencies for the particular CVQ Level. Refer to the Critical Employability Skills at the end of this unit

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1	Level 2	Level 3
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 1	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 1	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 1	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

## CSACOR0071A: Maintain a safe, clean and efficient work environment

### Competency Descriptor:

This unit incorporates the Occupational Health and Safety regulations required for a health care facility. It encompasses basic first aid procedures, personal hygiene, and the provision of a caring client/patient environment.

### Competency Field: Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Comply with health regulations	1.1	Procedures and practices are implemented in a variety of care facility situations in accordance with state and local government health regulations.
		1.2	Store policies and procedures for personal hygiene are applied.
2.	Provide a relaxed and caring environment	2.1	Clients/patients are made to feel comfortable according to care facility policy.
		2.2	Clients/patients needs are responded to.
3.	Prepare and maintain work area	3.1	Reception, work areas and walkways are maintained in a safe, uncluttered and organised manner according to enterprise policy.
		3.2	All routines are carried out safely, effectively and efficiently with minimum inconvenience to clients/patients and staff.
		3.3	Waste is stored and disposed of according to local health regulations.
		3.4	Spills, food, waste, hair or other potential hazards are promptly removed from floors according to enterprise policy.
		3.5	Linen is stored, cleaned and disinfected in line with local health regulations and enterprise procedures.
		3.6	Walls, floor and working surfaces are cleaned to meet enterprise requirements and health and safety standards without causing damage.
4.	Check and maintain tools and equipment	4.1	Tools and equipment are prepared for specific services as required.

- 4.2 Tools and equipment are checked for maintenance requirements.
- 4.3 Tools and equipment are referred for repair as required.
- 4.4 Tools and equipment are stored safely and in position to comply with enterprise requirements and local health regulations.
- 5. Check and rotate stock
  - 5.1 Stock rotation procedures are carried out routinely and accurately according to enterprise procedures.
  - 5.2 Stock levels are accurately recorded according to enterprise procedures.
  - 5.3 Under or over supplied stock items are notified immediately to the care facility supervisor.
  - 5.4 Incorrectly ordered or delivered stock is referred to supervisor for return to supplier.
  - 5.5 Safe lifting and carrying techniques are maintained in line with occupational health and safety policy and government legislation.
- 6. Observe basic safety procedure
  - 6.1 Procedures to achieve a safe working environment are followed and maintained in line with occupational health and safety regulations and requirements according to enterprise policy.
  - 6.2 All unsafe situations are recognised and reported according to enterprise policy.
  - 6.3 All breakdowns in relation to machinery and equipment are reported to supervisor.
  - 6.4 Fire and safety hazards are identified and necessary precautions taken or reported according to enterprise policy and procedures.
  - 6.5 Dangerous goods and substances are identified, handled and stored according to enterprise policy and procedures and occupational health and safety regulations.
  - 6.6 Enterprise policy regarding manual handling practice is followed.

- 6.7 Participation in consultative arrangements established by enterprise for occupational health and safety is demonstrated.
7. Observe emergency
- 7.1 Enterprise policies and procedures in regard to illness or accident are identified and observed.
- 7.2 First Aid requirements are identified and observed.
- 7.3 Safety alarms are identified accurately.
- 7.4 Qualified persons are contacted in the event of accident, details correctly recorded according to enterprise policy.

## RANGE STATEMENT

Relevant enterprise policies and procedures should include:

- hazard policies and procedures
- emergency, fire and accident procedures
- personal safety procedures
- procedures for the use of personal protective clothing and equipment
- use of motor vehicles
- hazard identification
- issue resolution procedures
- job procedures
- work instructions

Legislation, codes and national standards relevant to the workplace may include:

- Labour laws of the country
- Local health regulations
- OHS and hygiene requirements
- First Aid regulations/requirements

Occupational health and safety procedures may deal with:

- clients/patients
- staff
- equipment/tools
- premises
- stock

Unsafe situations may deal with but are not restricted to:

- toxic substances
- damaged packaging material or containers
- broken or damaged equipment
- inflammable materials and fire hazards
- lifting practices
- spillages
- waste, including hair, especially on floors
- ladders
- trolleys

Emergency procedures may include: accidents, fire or store evacuation involving staff or clients/patients.

- Clients/patients and team members may include people from a range of social, cultural or ethnic backgrounds and physical and mental abilities.
- Cleaning may include counters, benches, walkways, walls, fixtures or other working surfaces.
- Products from various manufacturers' ranges.
- Linen may be cleaned on or off the premises.

## EVIDENCE GUIDE

Competency is to be demonstrated by the ability to effectively maintain a safe, clean and efficient work environment in accordance with the performance criteria and the range statement.

### (1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to consistently:

- knowledge and consistent application of salon policies and procedures and industry codes of practice in regard to Occupational Health and Safety Codes of Practice for First Aid in the Workplace
- apply safe work practices and emergency procedures in regard to the provision of services and safe use of product according to Occupational Health and Safety regulations/requirements, including First Aid as required
- apply enterprise policies and procedures and industry codes of practice in regard to the performance of cleaning procedures
- provide a consistently welcoming client/patient environment by treating clients in a courteous helpful manner, by responding to clients'/patients' needs
- clean and maintain the work area according to the range of variables
- use and maintain cleaning equipment and use and store cleaning chemicals
- check, rotate and record stock
- check and maintain tools and equipment and prepare for specific services as required
- refer tools and equipment for repair as required and store to comply with health regulations and enterprise procedures
- interpret and apply manufacturers instructions for products, tools and equipment.
- apply First Aid procedures for emergency life support
- record accident/emergency details

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- Health and Hygiene regulations/requirements
- Occupational Health and Safety and First Aid regulations/requirements.
- Enterprise policies and procedures in regard to Occupational Health and Safety Codes
- procedures to be applied in the event of fire or evacuation or in events likely to endanger staff or clients
- enterprise policies and procedures in regard to client/patient service, personal hygiene practices, preparation and maintenance of work areas, tools, equipment and the enterprise stock system
- maintenance and storage procedures for tools and equipment used
- use of stock control systems/technology

Skills

The ability to:

- recognise and respond appropriately to emergency situations
- identify and apply knowledge of reporting procedures relating to occupational Health and safety
- use and maintain cleaning equipment
- use and store cleaning chemicals

**(4) Resource Implications**

The following resources should be made available:

- care facility (simulated or actual enterprise)

**(5) Method of Assessment**

Competency shall be assessed while work is undertaken under direct supervision with regular checks, but may include some autonomy when working as part of a team

**(6) Context of Assessment**

This unit must be assessed through practical demonstration on-the-job or in a simulated workplace environment where health care services are provided.

The underpinning knowledge may be assessed off the job with the use of written or verbal items inclusive of multiple choice, short answer or project.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collecting, analysing and organising ideas and information	Level 1	
Communicating ideas and information	Level 2	
Planning and organising activities	Level 2	
Working with others and in teams	Level 2	
Use mathematical ideas & techniques	Level 1	
Solve problems	Level 2	
Using technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.



**CSACOR0081A: Prepare bed for occupancy**

Competency Descriptor:

This unit is concerned with the ability to apply bed-making practices to a range of 'beds' for occupancy and/or to apply bed-making practices when the occupant of the bed has temporarily left the bed.

Competency Field:

Allied Health

**ELEMENT OF COMPETENCY PERFORMANCE CRITERIA**

1	Prepare area for bed making	<p>1.1 Personal protective equipment is used according to enterprise policy.</p> <p>1.2 Bed height is adjusted as necessary.</p> <p>1.3 Bed and surroundings are cleared of medical and other equipment before bed is stripped where necessary.</p> <p>1.4 Bed linen is checked for displaced personal aids/equipment and such aids/equipment is placed in appropriate area/container.</p>
2	Make bed	<p>2.1 Bed linen is stripped where necessary.</p> <p>2.2 Infectious waste and soiled linen are removed and placed in appropriate container.</p> <p>2.3 Bed is disinfected according to established procedures where necessary.</p> <p>2.4 Clean bed linen is placed on bed in accordance with enterprise procedures.</p> <p>2.5 Existing bed linen is re-positioned where the occupant of the bed has temporarily left the bed.</p> <p>2.6 Reusable clean bed linen is handled according to enterprise procedures.</p> <p>2.7 Mattresses and pillows are cleaned regularly in accordance with enterprise policy.</p>

- |   |                               |     |  |
|---|-------------------------------|-----|--|
| 3 | Leave bed ready for occupancy | 3.1 | Bed height is adjusted for occupancy and brakes applied according to bed type.                           |
|   |                               | 3.2 | Bed and equipment/aids are kept accessible and bed left ready for occupancy.                             |
|   |                               | 3.3 | Damaged and/or faulty beds equipment mattresses pillows and linen are reported to appropriate personnel. |
|   |                               | 3.4 | Cleaning implements are cleaned (or disposed of appropriately) and returned to correct storage areas.    |
| 4 | Maintain personal hygiene     | 4.1 | Protective clothing is disposed of where applicable.   |
|   |                               | 4.2 | Universal precautions are carried out.   |

## RANGE STATEMENT

The Range statement provides advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Bed linen may include:

- sheets
- blankets
- quilts
- pillow cases
- under blankets
- draw sheets/mcintosh

Beds may include:

- striker bed
- maternity delivery bed
- cot
- renal chair
- balkan beam
- trolley
- paediatric bed
- isolettes etc

Equipment may include:

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• pressure care devices eg. Roho mattress<br/>egg carton mattress foam mattress</li> <li>• bedside table</li> <li>• bed end note holder</li> <li>• chair lifts</li> <li>• walking frames/sticks</li> </ul> | <ul style="list-style-type: none"> <li>• commodes</li> <li>• slings</li> <li>• splints</li> <li>• personal aids such as hearing aids, glass eyes,<br/>false teeth, breast prosthesis, false limbs</li> </ul> |
|---|--|

Infectious waste may include:

- Spectrum
- Vomit
- Faeces
- Urine
- Wound drainage

Personal protective equipment may include:

- gloves
- gown

## EVIDENCE GUIDE

Competency is to be demonstrated by effectively preparing bed for occupancy in accordance with the performance criteria and the range listed with in the range of variables statement.

### (1) Critical Aspects and Evidence

Evidence of the following needs to be demonstrated:

- ability to perform work in a safe manner
- correctly dispose of infectious waste

### (2) Pre-requisite Relationship of Units

- Nil

### (3) Underpinning Knowledge and Skills

#### Knowledge

Knowledge of:

- safe and healthy work practices including the use of personal protective equipment
- cleaning procedures for different bed types
- infection control procedures
- language and literacy skills appropriate to the role and workplace requirements
- manual handling techniques

#### Skills

The ability to:

- apply safe and healthy work practices
- use personal protective equipment appropriately
- apply infection control procedures to control infection
- make bed for occupancy

**(4) Resource Implications**

- Resource requirements include equipment such as beds and renal chairs .

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency should be assessed in the workplace or simulated workplace environment in accordance with work practices and safety procedures.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1	Level 2	Level 3
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 1	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 1	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 1	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSACOR0091A: Apply basic first aid**

## Competency Descriptor:

This unit deals with the skills and knowledge required to identify the need for and the application of first aid until the arrival of medically qualified personnel or the evacuation of the patient.

Competency Field: Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Identify the need for first aid	1.1	Initial assessment is made of extent and nature of first aid required from personal observation and/or witness reports.
		1.2	Initial assessment is reported to personnel/emergency services in accordance with workplace procedures.
2.	Ensure the safety of patient and carer	2.1	Patient is made as comfortable as possible and reassured by word, manner and actions.
		2.2	Hygiene is maintained for protection of patient and carer.
		2.3	Hazards to the patient and carer are identified and appropriate action taken to prevent further injury to either party.
3.	Assess patient and apply first aid	3.1	Patient is assessed against the DRABC (danger, response, airway, breathing, ventilation and circulation) model.
		3.2	Vital signs are measured, recorded and any changes noted and reported as appropriate.
		3.3	Treatment appropriate to the patient's injuries is provided in accordance with recognised first aid techniques.
		3.4	First aid equipment is operated/applied in accordance with recognised procedures and standards.
		3.5	Patient's condition is monitored and reported as required by workplace procedures, with treatment being modified as appropriate.
		3.6	Treatment is maintained until qualified medical assistants assume responsibility or until the patient is evacuated.
		3.7	Additional assistance is provided as requested by medical/emergency services personnel.
		3.8	Details of first aid administered are reported in accordance with workplace procedures.

- |    |               |     |  |
|----|---------------|-----|--|
| 4. | Complete work | 4.1 | First aid equipment is recovered (if practical), cleaned, inspected/tested, refurbished, replaced and stored as appropriate. |
|    |               | 4.2 | Medical waste is disposed of in accordance with workplace requirements.  |
|    |               | 4.3 | Equipment faults are reported in accordance with workplace procedures.   |
|    |               | 4.4 | Documentation is completed as required by legislative, regulatory and workplace requirements.                                |

## RANGE STATEMENT

The Range Statement provides advice to interpret the scope and context of this unit of competency, allowing for differences between school-shops and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

First aid is that assistance given to a patient who has suffered an injury or illness in the workplace. It is that assistance which is deemed necessary to attempt to resuscitate, stabilise and/or treat the patient until qualified medical personnel assume responsibility or until the patient is evacuated for appropriate medical treatment.

Work is carried out in accordance with statutory obligations, relevant health regulations and organisation insurance requirements.

Work may be conducted without supervision and guidance.

The following variables may be present for this particular unit.

First aid may include:

- cardio-pulmonary resuscitation (CPR)
- bleeding control
- spinal injury care
- basic patient management
- stabilising fractures

The provision of first aid and workplace responsibilities is to conform to:

- Occupational Health and Safety requirements
- material safety management systems
- hazardous substances and dangerous requirements
- safe operating procedures

First aid equipment may include:

- first aid kit
- personal protective equipment
- stretcher (may be improvised)
- thermometers
- mouth protective devices

Work involves:

- assessing situations
- identifying appropriate control measures
- awareness of emergency services responsibilities and responsiveness
- treating injuries
- maintaining equipment

Relevant workplace policies and procedures may include:

- risk management policies and procedures
- first aid procedures
- safe manual handling and lifting procedures
- emergency, fire and accident procedures
- materials safety procedures
- personal safety procedures
- procedures for the use of personal protective equipment
- job procedures and work instructions

Designated personnel may include:

- supervisors
- managers
- team leaders
- first aid attendants/other medically trained staff
- specified Occupational Health and Safety personnel
- other persons authorised or nominated by the school or industry to perform, approve, inspect and direct specified work

Emergency services may include support provided by:

- ambulance
- police
- fire personnel and equipment

Relevant information may include:

- OH&S and environmental requirements relating to hazards in the workplace
- obligations under relevant safety and health regulations
- local medical and emergency services
- provisions relating to roles and responsibilities of health and safety representatives and/or occupational health and safety committees

Personal protective equipment may include:

- safety glasses/goggles
- hair nets
- ear muffs/plugs
- gloves
- footwear
- protective clothing

## EVIDENCE GUIDE

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competency for this unit. This is an integral part of the assessment of competency and should be read in conjunction with the Range Statement.

### (1) Critical Aspects of Evidence

Evidence of the following needs to be demonstrated

- accurately follow workplace procedures for reporting injuries/illnesses and providing first aid in the workplace
- identify and respond to injuries/illnesses occurring in the workplace
- apply emergency response first aid
- provide appropriate treatment to and monitor patient's condition
- accurately report and document injuries and illnesses and treatment provided



**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- workplace procedures and requirements for the treatment of workplace injuries/illnesses
- reporting responsibilities and requirements
- the provision of first aid including:
  - systems of the body (respiratory, skeletal, digestive, circulatory, nervous, urinary, skin)
  - causes and management of unconsciousness
  - priorities for life support (drabc model)
  - resuscitation techniques
  - bleeding control and laceration treatment
  - patient assessment
  - principles of initial patient management
  - management and treatment of fractures and soft tissue injuries
  - management and treatment of burns
  - management and treatment of poisoning
  - management and treatment of seizures
  - management and treatment of choking

Skills

The ability to:

- collect, organise and analyse information related to workplace health and safety systems and procedures and the application of these to work situations
- communicate ideas and information on workplace safety issues including the treating and recording/reporting of workplace incidents/accidents/illnesses and interpersonal communication with casualties
- plan and organise activities including the inspection of first aid support facilities and treatment areas to ensure their completeness, adequacy, equipment and serviceability
- work with others and in a team to promote an awareness of first aid within the workplace and its provision when required
- use mathematical ideas and techniques to correctly complete measurements and calculations associated with assessment, treatment and monitoring of patient's condition
- use problem solving skills to assess and determine treatments and priorities in providing first aid to a patient
- use the workplace technology related to the reporting, recording and responding to workplace injuries and illnesses

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- first aid kit, stretchers and medical/first aid facility
- enterprise health and safety policies and procedures
- personal protective equipment
- patients

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- Direct observation / clinical sites evaluation
- Oral questioning
- Practical demonstrations
- Written test
- Course work / assignments
- Performance approval from clinical site supervisor

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Assessment may occur on the job or in a workplace simulated facility with relevant equipment, work instructions, casualties and urgency.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>• Carries out established processes</li> <li>• Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Manages process</li> <li>• Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>• Establishes principles and procedures</li> <li>• Evaluates and reshapes process</li> <li>• Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSACOR0101A: Contribute to a harmonious and efficient work environment**

Competency Descriptor:

This unit provides the knowledge and skills required to create a harmonious and efficient work environment to enhance the quality of delivery to patients.

Competency Field: Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Contribute to the work of the team	1.1	The contribution made to the work of the team is consistent with the role and area of responsibility of the worker.
		1.2	Responsibilities and duties performed are consistent with instructions given by management, agreed policies and procedures of the setting and decisions made by the team.
		1.3	Any modifications made to tasks or performance is consistent with the policies of the setting and, if possible, agreed to in advance with the appropriate person.
		1.4	Reports about progress and completion of work is given clearly at the times and frequencies as agreed.
		1.5	Responsibilities and duties are discharged in a positive manner to promote co-operation and good relationships in the team.
2.	Contribute to team meetings	2.1	Preparation for meetings enabled the worker to supply information and contribute effectively to discussion.
		2.2	Participation in meetings, planning and decision-making is consistent with the worker's own role and the role of other members of the team.
		2.3	Contribution to meetings informs and progresses the work of the team, whilst enabling the completion of business within time constraints.
		2.4	Appropriate information and views are expressed clearly and concisely.
		2.5	Response to the contributions of other team members demonstrated that other views are valued.

- 2.6 Work identified at a meeting is recorded accurately and in sufficient detail to facilitate its performance when agreed.
    - 2.7 Information given and views expressed to those outside the team are consistent with the decisions of the team, and are referred to in a manner, which is likely to promote the aims and setting of the team.
  - 3. Contribute to the development of good practice in the team
    - 3.1 Contributions to the evaluation of workers identified existing desirable work practices, as well as, changes, which might realistically be made to improve performance.
    - 3.2 Suggestions for improvement are consistent with the objectives and policies of the organisation.
    - 3.3 Improvements in practice, which are within the area of responsibility of the worker, are implemented promptly as agreed.
    - 3.4 Responses to opportunities for training and personal development is ensured and promoted willingness to adapt flexibly in the interests of improving practice.
    - 3.5 Response to unsatisfactory practice of colleagues balances the organisation's needs to improve practice with consideration for the individual.
    - 3.6 Changes agreed to on ways of working are carried out.
  - 4. Contribute to support for colleagues
    - 4.1 Comments and constructive criticisms are given to colleagues in a manner, which identifies their good practice and reinforces their self-confidence.
    - 4.2 Responses to indications of stress or need for support to colleagues encourage them to share their concerns and difficulties.
    - 4.3 Help offered to colleagues in the work context to alleviate stress or develop support are within the worker's area of responsibility and competence.
    - 4.4 Information shared with colleagues to help them identify sources of support or expertise and further training opportunities is likely to enhance their competence and ability to cope.

- 4.5 Cultural, religious beliefs and practices of colleagues are responded to ensure that diversity is valued, and that discrimination or prejudice will be challenged.
- 4.6 The policy for equal opportunity of the setting is adhered to and promoted.
- 4.7 Opportunities for communicating informally with colleagues are utilised as far as possible within the time constraints of the work setting to develop shared attitudes and to extend relationships.
- 4.8 Support is offered to colleagues experiencing discrimination helps them to assert their rights as individuals and to sustain their confidence and self esteem.
- 5. Respond to conflict in a team
  - 5.1 Solutions are proposed to reduce conflict demonstrate willingness to compromise and to amend working practices in a flexible and positive manner.
  - 5.2 Evidence of prejudice and/or discrimination on the part of a team member is challenged in a manner likely to bring about change as consistent with the policy of the setting.
  - 5.3 Support is offered to colleagues in conflict with others is consistent with organisational requirements and procedures.
- 6 Adhere to code of ethics as it applies to the industry
  - 6.1 Body language is used to promote positive wellbeing of both client and care-giver.
  - 6.2 Tone, diction, projection and language used depicted professionalism.
  - 6.3 Deportment is kept in line with Health Care Assistant dress code.

**RANGE STATEMENT**

Competent performance of the criteria must be demonstrated in the following:

Types of work:

- individual duties and responsibilities; shared or co-operative tasks

Types of structures:

- formal
- informal

Types of meetings:

- full meetings of the team; special meetings related to specific tasks; meetings of part of the team only

Types of contribution:

- presenting relevant materials and information formally, i.e. when previously requested; informally to team meeting
- in relation to individual duties and responsibilities; in relation to work of team or organisation

Types of colleagues:

- experienced colleagues; new or inexperienced colleagues

Types of conflict:

- conflict between the clients/patients
- conflict between two or more colleagues

Code of ethics include:

- Dress
- Deportment
- Attitude
- Speech/body language

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence :

Evidence of the following needs to be demonstrated:

- work is carried out within own role, responsibilities and organisational objectives in an effective manner
- worker interacts with both individuals and work groups in a co operative manner

### (2) Pre-requisite Relationship of Units

- Nil

### (3) Underpinning Knowledge and Skills

#### Knowledge

Knowledge of:

- procedures of meetings and the process of decision making
- the importance of collective responsibility
- the organisational structure and the roles within it , including those of team members
- awareness of own role in team and personal strengths and weaknesses
- aims and objectives of the team
- awareness of personal needs and the needs of others in the team
- the team's role in relation to others within and external to the organisation
- the necessity for confidentiality
- the importance of collective responsibility
- the significance of commitment and what affects it
- effective communication in a team meeting - both verbal and non-verbal
- the procedures for group meetings and the presentation of reports
- the need to appraise and evaluate the effects of meetings and of procedures
- what and how to prepare in advance
- expectations and norms for behaviour in given meetings
- the negative effects of undermining the work of the team to those outside

Knowledge (cont'd)

Knowledge of:

- current practice and objectives of the organisation
- the value of development of the team through training, consultation and the support of individuals and how this is effected
- when to bring in or suggest the use of outside resources
- the value and potential of own contribution to team development
- how to share ideas with other members of the team
- how to give and receive directions and instructions
- awareness of own role in team decision making
- awareness of own personal responsibility to follow through ideas and how to implement it
- awareness of own role in the evaluation of team development
- support systems within the organisation
- sources of information about support in the wider community
- sources of information about training
- the value of praise and positive feedback
- the nature and limits of working relationships according to the setting
- the nature and characteristics of professionalism in this field
- the different levels of communication operating within the team and the organisation
- potential areas of stress, conflict and discrimination
- understand that conflicts are a natural part of working life
- how, when and where to discuss and seek resolution of conflict
- understanding of grievance and disciplinary procedures
- the importance of not allowing conflict to affect the work of the organisation
- areas of potential conflict and a range of strategies to deal with the situation
- code of ethics as it relates to dress, speech, attitude, deportment and body language of practical nursing

Skill

The ability to:

- contribute to work of team
- seek clarification as to own responsibilities
- perform responsibilities and duties within team
- appropriately modify tasks and performance
- give reports on progress and completion of work
- adopt appropriate manner in discharge of duties and responsibilities
- prepare for team meetings
- participate in meetings, planning and decision making
- contribute to team meetings
- express appropriate views and information
- respond to contributions of other team members
- record work identified at a meeting
- give to outsiders' appropriate information and views expressed by those within the team
- make contributions to the evaluation of practice
- identify good practice



**Skill (cont'd)**

- identify the potential of changes to improve practice
- implement improvements in practice within area of responsibility
- respond to agreed changes in working opportunities for training and personal development
- respond to unsatisfactory practice of colleagues
- carry out agreed changes to work
- give comments and constructive criticisms to colleagues
- respond to indications of stress or need for support in colleagues
- offer help to colleagues
- share with colleagues information to assist identification of sources of support or expertise and further training opportunities
- ensure response to cultural and religious beliefs and practices of colleagues
- promote and adhere to policies for equal opportunities
- use opportunities for communicating informally with colleagues
- offer support to colleagues experiencing discrimination
- respond to proposed solutions to reduce conflict
- challenge evidence of prejudice and/or discrimination on the part of a team member
- offer appropriate support to colleagues in conflict with others
- conform to the ethics as it relates to dress, speech attitude, deportment and body language of practical nursing

**(4) Resource Implications**

Assessment requires access to a range of opportunities defined in the Range of Variables. This includes access to:

- A care facility workplace
- resources and equipment
- The local environment

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 2	
Work with others and in team	Level 2	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

## ITICOR0011A: Carry out data entry and retrieval procedures

### Competency Descriptor:

This unit deals with the skills and knowledge required to operate computer to enter, manipulate and retrieve data and to access information and communicate via the Internet.

Competency Field: Information Technology and Communications - Operations

### ELEMENT OF COMPETENCY PERFORMANCE CRITERIA

1. Initiate computer system	1.1	Equipment and work environment are correctly checked for readiness to perform scheduled tasks.
	1.2	The hardware components of the computer and their functions are correctly identified.
	1.3	Equipment is powered up correctly.
	1.4	Access codes are correctly applied.
	1.5	Appropriate software is selected or loaded from the menu.
2. Enter data	2.1	Types of data for entry correctly identified and collected.
	2.2	Input devices selected and used are appropriate for the intended operations.
	2.3	Manipulative procedures of Input device conform to established practices.
	2.4	Keyboard/mouse is operated within the designated speed and accuracy requirements.
	2.5	Computer files are correctly located or new files are created, named and saved.
	2.6	Data is accurately entered in the appropriate files using specified procedure and format.
	2.7	Data entered is validated in accordance with specified procedures.
	2.8	Anomalous results are corrected or reported in accordance with specified procedures.
	2.9	Back-up made in accordance with operating procedures.

- 3. Retrieve data
  - 3.1 The identity and source of information is established.
  - 3.2 Authority to access data is obtained where required.
  - 3.3 Files and data are correctly located and accessed.
  - 3.4 Integrity and confidentiality of data are maintained.
  - 3.5 The relevant reports or information retrieved using approved procedure.
  - 3.6 Formats to retrieved report or information conform to that required.
  - 3.7 Copy of the data is printed where required.
- 4. Amend data
  - 4.1 Source of data/information for amendment is established.
  - 4.2 Data to be amended is correctly located within the file.
  - 4.3 The correct data/Information is entered, changed or deleted using appropriate input device and approved procedures.
  - 4.4 The Integrity of data is maintained.
- 5. Use document layout and data format facilities
  - 5.1 Requirements for document are verified where necessary.
  - 5.2 The given format and layout are appropriately applied.
  - 5.3 Facilities to achieve the desired format and layout are correctly identified, accessed and used.
  - 5.4 Data manipulating facilities are used correctly.
  - 5.5 Format reflects accuracy and completeness.
- 6. Monitor the operation of equipment
  - 6.1 The system is monitored to ensure correct operation of tasks.
  - 6.2 Routine system messages are promptly and correctly dealt with.
  - 6.3 Non-routine messages are promptly referred in accordance with operating requirements.

	6.4	Error conditions within level of authority are dealt with promptly, and uncorrected errors are promptly reported.
	6.5	Output devices and materials are monitored for quality.
7. Access and transmit information via the Internet	7.1	Access to the Internet is gained in accordance with the provider's operating procedures.
	7.2	Evidence of the ability to negotiate web sites to locate and access specified information and other services is efficiently demonstrated.
	7.3	E-Mail is sent and retrieved competently.
8. Close down computer system	8.1	The correct shut down sequence is followed.
	8.2	Problem with shutting down computer is reported promptly.
	8.3	All safety and protective procedures are observed.
	8.4	The system integrity and security are preserved.
9. Maintain computer equipment	9.1	Cleaning materials and/or solutions used meet specified recommendation.
	9.2	The equipment is cleaned as directed.
	9.3	Wear and faults identified are promptly reported to the appropriate personnel.

## RANGE STATEMENT

This unit applies to activities associated with essential operations linked to using and maintaining basic computer equipment.

### Equipment:

- install supplied computer
- install supplied peripherals

### Work environment:

- equipment
- furniture
- cabling
- power supply

## Input devices:

- keyboard
- mouse
- scanner
- microphone
- camera

## Software systems to include for:

- word processing
- spread sheet
- internet access

## Files save on:

- network
- magnetic media
- personal PC

## Data:

- textual
- numerical
- graphical

## File operations:

Naming, updating, archiving, traversing field and records in database, use of search, sort, print

## Maintenance:

- cleaning: enclosures, screen, input devices, output devices
- checking cables, etc

## EVIDENCE GUIDE

Competency is to be demonstrated by the ability to accurately carry out basic data entry and retrieval operations on a computer system in accordance with the performance criteria and the range listed within the range of variables statement .

### (1) Critical Aspects and Evidence

It is essential that competence be observed in the following aspects:

- Initiate the use on the equipment.
- Use document layout and data format facilities.
- Locate and access data.
- Use file operations.
- Manipulate input devices.
- Key-in and format reports.
- Access to the internet.

**(2) Pre-requisite Relationship of Units**

The pre-requisite for this unit is:

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

knowledge of:

- safety for working with and around computers
- computer hardware and software systems
- procedure for initiating and closing down computer
- the operation of the data entry management system
- methods of locating files
- organisation's standards applicable to accessing files
- files operations and their applications
- file operation in database setting
- creating, locating and saving files
- using input devices
- using data checking devices
- formatting functions of software
- layout function of software
- graphic productions and manipulation
- regard for accuracy and security of information
- functions on the internet

Skills

The ability to:

- identify computer hardware
- manipulate data input devices
- access data
- use file operations
- key-in and format reports and letters
- retrieve data
- amend data
- print data
- save data
- search and receive data from the internet
- send and receive E-Mail

**(4) Resource Implications**

Files saved on network, magnetic media, personal Computer

Input devices: Keyboard, mouse, other selection devices

**(5) Method of Assessment**

Competency shall be assessed while work is undertaken under direct supervision with regular checks, but may include some autonomy when working as part of a team.

Competencies in this unit may be determined concurrently. Assessment must be in accordance with the performance criteria .

**(6) Context of Assessment**

This unit may be assessed on or off the job. Assessment should include practical demonstration either in the workplace or through a simulation. A range of methods to assess underpinning knowledge should support this

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices .

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 1	
Communicate ideas and information	Level -	
Plan and organise activities	Level 1	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 1	
Use technology	Level -	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.



**CSAHCA0102A: Prepare medical equipment and supplies**

Competency Descriptor:

This unit deals with the skills and knowledge required to prepare equipment and supplies within a health or care service environment

Competency Field:

Allied Health – Health Care Assistance

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Prepare treatment and dressing trays	1.1	Instructions are correctly interpreted and clarification sought where necessary.
		1.2	Supplies are requisitioned/sourced according to established procedures.
		1.3	Infection control measures are adhered to.
		1.4	Supplies are prepared in accurate measurements, quantities and ratios in accordance with supply list.
		1.5	Outdated, damaged and unhygienic supplies are identified, eliminated and correctly disposed of.
		1.6	Prepared trays are placed in the appropriate location and made accessible to the relevant persons.
		1.7	Universal Precautions are applied.
		1.8	Deadlines are adhered to at all times.
		1.9	Work area is left clean and hygienic.
2.	Sterilize equipment and instruments	2.1	Safety precautions and procedures are observed at all times.
		2.2	Sterilized equipment and instruments are stored to prevent contamination.
		2.3	Appropriate method of sterilization is applied to type of instrument
		2.4	Sterilization process applied is in accordance with established procedures.

- |   |                             |   |
|---|-----------------------------|---|
|   | 2.5                         | Equipment and instruments are appropriately prepared for sterilization process.                               |
|   | 2.6                         | Outdated, damaged and unhygienic supplies are identified, eliminated and correctly disposed of appropriately. |
|   | 2.7                         | Instructions are correctly interpreted and clarifications sought where necessary.                             |
| 3 | Perform stock-taking duties |   |
|   | 3.1                         | Stock is counted, labelled and recorded.  |
|   | 3.2                         | Stock is packed in designated storage area.   |

### RANGE STATEMENT

The Range Statement provides advice to interpret the scope and context of this unit of competency, allowing for differences between school-shops and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit.

Supplies may include:

- disinfectant
- germicide
- antiseptic
- scissors
- scalpel
- suture
- steri-strip
- tablets
- capsules
- lozenges
- enema
- suppository
- pessary
- syringe
- liquid medication
- gloves
- masks
- forceps

Instructions may include:

- prescriptions for patient
- supply list

Equipment /machines may include:

- Ultra sound
- Suction machine
- CT Scanner
- ECG
- Incubators
- Threadmills
- Datex
- Pulseoximeter
- Ventilator machine
- Respirator machine

Sterilization methods may include:

- boiling
- use of chemicals (immersion, wiping spraying),
- autoclaving

Electrical equipment may include:

- Nebulizer
- Suction machine
- Ultra violet lamp
- Diatherapy machine

Safety precautions may include:

- personal safety in handling items having blood and other body fluids
- avoiding being cut by sharp instruments
- protecting sensitive equipment during sterilization process
- dealing with electrically operated equipment appropriately

Designated storage area may include:

- refrigerator
- cold room
- cupboards
- shelves
- containers

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence:

Evidence of the following needs to be demonstrated:

- The ability to prepare dressing tray
- The ability to sterilize equipment and instruments and dispose after use
- The ability to perform stock-taking duties

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- outdated medication and treatment supplies
- universal precautions related to dressings and personal safety
- personal safety in handling items having blood and other body fluids, avoiding being cut by sharp instruments, protecting sensitive equipment during sterilization process, dealing with electrically operated equipment
- storage of sterilized instruments and equipment according to institution and industry guidelines
- preparing and packing dressing trays
- sterilization methods
- stock-taking procedures

Skill

The ability to:

- read, write and interpret instructions
- request / source supplies
- prepare supplies in accurate measurements, quantities and ratios
- identify outdated, damaged and unhygienic supplies
- select supplies and materials for task
- prepare equipment and instruments for sterilization process
- observe safety precautions and procedures
- sterilize equipment
- sterilize instruments
- store sterilized equipment and instruments
- keep proper records of equipment
- clean work area
- properly dispose of items after use

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Hospital equipment, supplies and chemicals
- Personal protective equipment
- Manufacturers' policies and procedure manuals
- Enterprise health and safety policies and procedures manuals

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer
- workplace documents

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>• Carries out established processes</li> <li>• Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Manages process</li> <li>• Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>• Establishes principles and procedures</li> <li>• Evaluates and reshapes process</li> <li>• Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 2	
Work with others and in team	Level 2	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAHCA0012A: Provide nutritional care**

Competency Descriptor:

This competency deals with the skills and knowledge required to provide nutritional care in a variety of settings across the developmental.

Competency Field:

Allied Health

**ELEMENT OF COMPETENCY****PERFORMANCE CRITERIA**

1. Prepare food	1.1	Food provided meet nutritional requirements of intended individuals.
	1.2	Type of food provided is in accordance with cultural, religious practices and dietary needs.
	1.3	Methods of preparation enhanced nutritional value of food and drink.
	1.4	Hygiene and safety standards are applied in the storage, preparation and serving of food and d rink.
	1.5	Individuals are involved in the preparation and serving of food in a safe and appropriate manner.
2. Prepare hot/cold beverages	2.1	Appropriate personal hygiene practices are followed.
	2.2	Fluids and beverage prepared are appropriate to the age and physical condition of individuals and in accordance with physician's instructions where given.
	2.3	Ingredients selected are consistent with medical requirements and nutritional guidelines.
	2.4	Ingredients are correctly measured and prepa red.
	2.5	Ensured that the temperature of beverage is at a safe level for consumption.
	2.6	Hygiene practices are followed which minimize the danger of contamination.
	2.7	Fluids are stored at the appropriate temperature.

- 3     Serve hot and/or cold food
  - 3.1    Meals are served promptly.
  - 3.2    Food is served at appropriate temperature and consistency.
  - 3.3    Food is presented in ways that are attractive and appetizing.
  - 3.4    Appropriate personal hygiene practices are followed.
  - 3.5    Clients are taught the relevance of therapeutic diets.
  
- 4.     Assist individuals in feeding themselves
  - 4.1    Individuals are assisted in the use of eating and drinking aids in a manner consistent with the promotion of self-reliance.
  - 4.2    Eating and drinking aids provided are appropriate to the individuals' level of development and medical or physical conditions.
  - 4.3    Appropriate personal hygiene practices are followed.
  - 4.4    Feeding utensils and apparatus are selected which are appropriate, clean and safe.
  - 4.5    The client is made comfortable and clothing protected before commencing feeding.
  - 4.6    Temperature and rate of flow of liquid is checked before each feed.
  - 4.7    Where applicable, baby is held in a position that enables him/her to bring up wind during and after feeding.
  - 4.8    Eye contact and communication reflected positive interaction with individuals and maintained during the feeding process.
  - 4.9    The hygiene and safety of the feeding apparatus is ensured during and after feeding.
  - 4.10   Feeding difficulties are brought to the attention of the appropriate person promptly.
  - 4.11   Specialized equipment used for individuals with feeding difficulties are consistent with medical advice.

- 4.12 The individual's face and mouth are carefully cleaned in a gentle manner.
- 4.13 Dietary compliance is encouraged.
- 4.14 Therapeutic diets are correctly identified and appropriately served.
- 4.15 First aid is correctly applied in the event of choking
- 5 Maintain a conducive feeding environment
  - 5.1 Enjoyment and development of language and social skills through social interaction at meal times are encouraged.
  - 5.2 Feeding routine which is consistent with requirement for the person's age weight and medical condition is maintained.
  - 5.3 Babies are held securely and comfortably and a calm and relaxed atmosphere is maintained.
  - 5.4 Clients are placed in a position and fed at a pace suitable to their condition.
  - 5.5 Accurate, relevant records are maintained in a format consistent with the requirements of the institution/home of food consumed.
  - 5.6 The feeding environment is made free from clutter and conducive to eating.
- 6 Support client/patient with acceptance and/or tolerance of nutrition care plan
  - 6.1 The acceptability and consumption of meals by the client/patient on special diets monitored and feedback are provided to the dietician.
  - 6.2 Problems which lead to poor acceptance and/or tolerance by client/patient to nutrition care plan are identified and reported and action taken when appropriate according to enterprise policies and procedures.
  - 6.3 Information regarding nutrition care plan is provided to client/patient when appropriate.



- |   |  |     |  |
|---|--|-----|--|
| 7 | Identify factors that place client/patient at nutritional risk | 7.1 | Problems which may affect client's/patient's ability to eat and/or drink are observed and recorded and the appropriate action taken according to facility policies and procedures. |
|   |  | 7.2 | Client/patient fluid and food intake are documented and reported to the appropriate person according to facility policies and procedures.  |
|   |  | 7.3 | Clients/patients who appear underweight/overweight or who report significant weight loss are referred to the dietician   |

### **RANGE STATEMENT**

The Range Statement explains the scope and context of the unit of competency allowing for differences between workplaces. The scope of variables chosen for training and assessment requirements will depend on the particular work situation. The following variables may be present

The health/residential facility policies/protocols relevant to:

- The provision of nutritional care
- Scope of caregiver's practice
- Universal precautions

Legislation, codes and national standards relevant to the workplace may include:

- Ministry of Health standard regulations for dietary service

Food may include:

- main meals,
- snacks

Eating and drinking aids may include:

- spoons, forks, drinking straws, specially designed cups, plates and utensils, mechanized feeding apparatus

Individuals may include:

- adults with and without disabilities
- the aged, the very young and babies
- diabetic persons
- convalescents, pregnant and lactating mothers
- persons on therapeutic diets

Characteristics of individuals include those with:

- no feeding difficulties, special needs which make eating difficult, special dietary requirements including allergies and nutritional disorders
- poor appetite/eating habits, tube feeds

Caregivers' preparation includes:

- washing of hands
- wearing of protective clothing
- application of universal precaution

Hot and cold beverages may include:

- fruit, artificially flavoured, milk based and egg based drinks
- hot beverages such as tea and coffee

Types of feed may be:

- pre-packaged feed
- expressed breast milk, liquids, solids
- foods eaten uncooked

## EVIDENCE GUIDE

Competency is to be demonstrated by effectively providing nutritional care in accordance with the performance criteria and the range listed within the range of variables statement.

### (1) Critical Aspects and Evidence

Evidence of the following should be demonstrated:

- The application of relevant national health policies and procedures for nutritional care
- The application of universal precautions in food preparation
- The selection and use of appropriate feeding routine
- The preparation of utensils relevant to age and types of food
- Appropriately checking temperature and rate of flow of liquid
- Appropriately supporting persons in correct position for ingestion and for burping
- Correctly feed an individual who are unable to help him/herself
- The maintenance of positive interaction during feeding
- The maintenance of sanitation of feeding equipment
- The ability to observe and report feeding difficulties
- The ability to use specialized feeding equipment
- The maintenance of accurate records

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- varying patterns of feeding for individuals of different stages of development/physical conditions
- feeding difficulties and solutions with the use of specialized equipment for individuals with special needs
- the importance of interaction/communication with individuals before, during and after feeding
- importance of a suitable environment for feeding
- importance of winding and settling the infant after feeds and how this contributes to the infant's welfare
- dangers and problems associated with food substitutes
- first aid techniques for choking
- Personal hygiene especially hand washing
- Nutritional value of common food
- Common dietary requirement associated with therapeutic cultural and religious indications
- Conditions of storing hot/cold beverages
- The nutritional value of food groups with consideration for size of portions and methods of preparation
- Ways of presenting food and drink that are attractive and easy to manage
- Strategies for coaxing individuals to eat
- Health and safety requirements in relations to food preparation and storage
- Common dietary requirements associated with religious and cultural practices
- The importance of valuing and introducing cultural and religious variations in types of food, methods of preparation, utensils and eating habits
- Causes and prevention of diarrhea, constipation, gastro-enteritis, vomiting, colic, obesity, malnutrition
- The role of mealtime interaction in social and cultural life and in shaping attitudes and behaviour
- The variety of food preferences and eating habits individuals may have and the way they may change over time
- Common food allergies and implications for diets effects of illness and emotional disturbance on appetite
- Modified diet preparation (e.g. diabetic)

Skills

The ability to:

- Practice universal precautions especially hand washing
- Prepare food in sanitary condition to meet nutritional needs of care
- Assist individuals for meal time in appropriate position, recipient's safe and clean environment with relevant aids
- Observe and report care recipients with feeding difficulties
- Apply first aid in the event of choking during feeding
- Correctly position care recipient prior to feeding
- Identify nutritional value of common foods
- Maintain personal hygiene and utilize appropriate protective gears in feeding duties

**(4) Resource Implications**

- Access to different feeding devices
- Access to a variety of care recipients with different feeding needs
- Access to Ministry of Health (M.O.H) policies/procedure guidelines

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients over a period of time.

Evidence may be collected in a variety of ways including:

- Direct observation/clinical site evaluations
- Oral questioning
- Written test
- Course work/assignments
- Performance appraisal from clinical site supervision
- Case studies
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency should be assessed in the workplace or simulated workplace environment in accordance with work practices and safety procedures.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1	Level 2	Level 3
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 2	
Solve problems	Level 2	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAGEC0012A: Provide care support to senior citizens**

Competency Descriptor:

This unit deals with the skills and knowledge required to provide care and support to older persons

Competency Field:

Allied Health – Geriatric Care

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1	Demonstrate an understanding of changes associated with ageing	1.1	Physical changes associated with ageing are taken into account when delivering services.
		1.2	Knowledge of common problems associated with ageing is utilised when delivering services.
		1.3	The older person is assisted to recognize the impact that changes associated with ageing may have on their activities of daily living and appropriate adjustments made.
		1.4	Strategies that the older person may adopt to promote healthy lifestyle practices are outlined.
		1.5	Situations of risk or potential risk associated with ageing are communicated to the older person.
2	Assist the older person to achieve maximum wellbeing	2.1	Older person's right to freedom of choice is identified and facilitated.
		2.2	Older person is assisted and encouraged to achieve maximum social and personal wellbeing.
		2.3	Assistance with the provision and use of aids is provided as appropriate.
3	Assist the older person to meet emotional, psychological and spiritual needs	3.1	Older person's self esteem and confidence is encouraged.
		3.2	Interaction between the older person, family and the community is facilitated and supported.
		3.3	Older person is supported to accommodate feelings of grief and loss.

- |   |   |     |   |
|---|---|-----|---|
| 4 | Support or assist the older person to meet their personal care needs  | 4.1 | Support or assistance provided is in accordance with the older person's service delivery plan and organisational policies, protocols and procedures.                                |
|   |   | 4.2 | Support or assistance provided with technical care activities is in accordance with the older person's service delivery plan and organisational policies, protocols and procedures. |
| 5 | Identify and provide appropriate support to the aged person           | 5.1 | All assistance and support given are in accordance with organisational procedures.  |
|   |   | 5.2 | Assistance is sought when it is not possible to provide appropriate support to the older person.  |
|   |   | 5.3 | Assistance is provided for the older person's participation in social, recreational and educational programs and activities as requested.   |
|   |   | 5.4 | All support is provided to the older person in accordance with the older person's needs, rights and self determination (UN Principles).   |
|   |   | 5.5 | Assistance is provided with celebrations and special events as requested.   |
|   |   | 5.6 | Support is provided to the older person in meeting religious, cultural, sexual, spiritual and ceremonial needs.   |
| 6 | Recognise and report changes in an older person's personal care needs | 6.1 | Appropriate use of equipment and procedures to assess the older person's needs within work is demonstrated.   |
|   |   | 6.2 | Changes in an older person's care needs are recognised and reported to supervisor.  |
|   |   | 6.3 | Situations of risk or potential risk associated with ageing are responded to appropriately and reported to a supervisor   |
|   |   | 6.4 | Changes in an older person's preferences, as a result of a change in physical appearance are reported to supervisor.  |

- |   |  |     |   |
|---|--|-----|---|
| 7 | Establish and maintain an appropriate relationship with older person | 7.1 | Self-introduction is done appropriately.  |
|   |  | 7.2 | Courtesy towards the older person is demonstrated.  |
|   |  | 7.3 | All dealings with the older person are aimed at generating a trusting relationship.         |
|   |  | 7.4 | Respect for the individual differences of the older person is demonstrated                  |
|   |  | 7.5 | The older person's own interests, rights and decision - making are supported.               |
|   |  | 7.6 | Confidentiality and privacy of older person is maintained within organizational guidelines. |

### **RANGE STATEMENT**

The Range Statement provides advice to interpret the scope and context of the unit of competency, allowing for differences between residential care homes, independent living, and day centre

Care for the older person is offered to those 60 years and over, who may be in need of care and support. The overall aim of care and support is to allow the older person to maintain their dignity, independence, participation, care and total well-being and would allow them to function at the appropriate level for their age, physical, and mental ability.

Ageing is multifaceted, therefore caring for an older person means working with other agencies and social net works such as community groups, church and family.

All persons who would work in the field of caring for the older person must be comfortable with their own ageing process.

Work in this field should be carried out in accordance with the statutory, relevant health regulations and the United Nations Principles for Older Persons to which our countries are signatures.



The following variables should be present for this particular unit.

Social and personal wellbeing may include :

- being independent ( United Nations Principle)
- maintenance of personal contacts
- control of financial affairs
- coming and going from environment within safety requirements
- observation of own customs and cultural practices
- exercising legal, social and other obligations and responsibilities
- keeping and maintaining personal possessions
- privacy
- access and entitlement to respite and other services
- maintaining community participation
- participation in programs and activities
- sharing knowledge and skills

Provision of aids may include:

- referrals
- providing information

Aids may include:

- mobility
- hearing
- speech
- vision

Psychological needs may include:

- freedom from undue stress
- self-esteem
- personal identity
- life stage development

Wellbeing may vary according to:

- level of functional independence
- service provision environment e.g. independent living, residential care facility, day centre
- health status
- safety
- worker's role

Emotional needs may include acceptance of:

- those related to death and dying
- love and affection for significant others
- frustration
- fear
- anger and annoyance
- grief and loss
- loneliness
- guilt

Aged person's self esteem and confidence may be encouraged by:

- assisting aged person with difficult tasks
- clarifying and discussing older person's abilities
- environmental adaptation
- encouraging aged person to try new activities

Spiritual needs may include:

- formal and informal religious observance
- need for private time and space for contemplation
- ceremonial observances

When self introduction occurs, the following may need to be considered :

- cultural background of aged person
- customs familiar to aged person
- any physical or mental problems which may hinder communication, such as deafness, dementia

Rights may be detailed in:

- service/outcomes standards documents
- legislation
- organisational policies and practices

Assistance may include :

- providing information and advice
- accompanying or providing specific services such as transport
- encouragement and support for decisions and actions

Needs of the aged person may include:

- physical, sexual, cognitive
- support and care
- financial
- household assistance and maintenance
- religious
- cultural
- spiritual
- ceremonial
- recreational
- social and emotional
- educational
- safety and security

Individual differences may be :

- culture
- age
- economic
- social
- gender
- physical
- experience
- emotional
- intellectual
- language
- spiritual

Short interpersonal exchanges will be appropriate to the cultural and individual differences of the aged person and may include:

- chatting in friendly manner
- inquiring about the older person's health
- short casual exchanges

Maximum wellbeing may include: (ADL & IADL)

- independent living
- observation of own customs and cultural practices

Older people may include:

- individuals living in residential aged care environments
- individuals living in the community

Contexts may include:

- older person's own dwelling
- independent living accommodation
- residential aged care facilities

## Personal care may include:

- personal hygiene:
- washing
- dressing and undressing
- grooming
- hair and nail care
- oral hygiene
- mobilisation and transfer
- elimination
- hydration and nutrition including dysphagia
- respiration
- skin maintenance
- foot care

## Simple technical skills may include:

- simple dressing
- catheter care (not including insertion or removal of tubes)
- application of prostheses
- application of anti-thrombotic stockings
- assistance with breathing devices (under the direct supervision of a health professional)
- simple eye care

## Assessment skills may include:

- taking and recording a temperature
- taking and recording a pulse rate
- taking and recording a respiratory rate
- taking and recording blood pressure
- taking and recording a blood sugar level
- measuring and recording weight
- collecting a urine, sputum or faecal specimen
- monitoring and recognizing changes in cognitive ability

## Equipment and aids may include:

- wheelchairs and other transport devices
- mobility aids
- lifting and transferring aids
- beds
- breathing devices
- thermometer
- sphygmomanometer
- scales
- stethoscope
- glucometer
- continence aids
- toileting aids
- personal audio-visual aids
- hair grooming equipment

Situations of risk or potential risk, may include:

- evidence of self-neglect
- dysphagia
- uncharacteristic or inappropriate behaviours
- impaired judgement and problem solving abilities
- cognitive impairment due to acquired brain injury
- sudden or unexpected change in client behaviour
- environmental hazards:
- slippery or uneven floor surfaces
- physical obstructions (e. g. furniture and equipment, rugs )
- poor home maintenance
- poor or inappropriate lighting
- inadequate heating and cooling devices
- inadequate security
- social rights infringements

Reporting may include:

- verbal
- telephone
- face to face
- non-verbal (written)
- progress reports
- case notes
- incident reports

## EVIDENCE GUIDE

The Evidence Guide identifies the critical aspects, knowledge and skills to be demonstrated to confirm competency for this unit. This is an integral part of the assessment of competency and should be read in conjunction with the Range Statement

### (1) Critical Aspects of Evidence

Evidence of the following needs to be demonstrated:

- accurately carry out work activities according to organizational procedure, ethical and legal framework
- identify and respond to the unique care needs of each older person according to their individuality
- establish and maintain effective communication with the older persons, significant others, priest, health care team and members of other supportive organizations
- provide appropriate care to older persons and maintain standard of care

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- United Nations Principles of Older Persons, governments position /policies, active ageing-life course approach
- Work place procedures on the rights of older persons.
- Discuss ageism myths about aging
- Successful aging
- Functional Assessment
- Depression Screening
- Physical Assessment
- Relevant policies, protocols, and practices of the organization in relation to own work activities
- The importance of social, recreational and cultural activities for older people
- Processes of ageing
- Different religious, cultural, spiritual, physical and ceremonial perspectives
- Community resources
- Social and psychological needs of the aged
- Causes, implications and treatment of dementia

Depending on the work role or services provided, specific knowledge of particular groups or issues may be required such as:

- alcohol and other drugs
- cultural diversity
- disabled elderly persons
- older persons suffering with H.I.V/ AIDS
- Risk of self harm
- Community education
- Mental health
- Common health problems of older people and their effects
- Different religious, cultural, spiritual, physical and ceremonial perspectives
- Ageing process.
- Impact of acquired brain injury (e.g. caused by stroke, substance abuse, trauma) on behaviour and functioning.
- Safety and security risks associated with ageing.
- Strategies for minimizing risks for older people.
- Impact of 'normal' ageing on an older person's ability to meet their personal care needs.
- Basic anatomy and physiology of the human body.
- Overview of the manifestations and presentation of common problems associated with ageing.
- Relevant care needs and strategies related to common problems associated with ageing.
- Skills utilized to collect data for the assessment of an older person.

Knowledge (cont'd)

Knowledge of:

- Role of caregivers
- Common equipment and aids utilized in the delivery of personal care.
- Principles and practices of confidentiality and privacy.
- Principles and practices in undertaking technical skills associated with supporting/assisting the older person to meet personal care needs.

Skills

The ability to:

Use and identify abnormalities using the following tools:

- KATZ Activities of Daily Living Assessment (ADL) Tool
- Lauton Instrumental Activity of Daily Living (IADL) Assessment Tool
- Yesavage Geriatric Depression Scale
- Mini mental Assessment Tool
- PULSES Profile
- SPICES Assessment Tool
- Apply basic counselling techniques
- Apply oral communication skills, including asking questions, providing information and expressing encouragement.
- Take part in short interpersonal exchanges that establish and develop an understanding of relationship with the older person.
- Establish and maintain a relationship that takes into account the older person's individual differences (e.g. age, abilities, cultural background)
- Read and write in order to fulfil work role in a safe manner and as specified by the organisation/service.

**(4) Resource Implications**

Competences in this unit may be assessed through access to:

- appropriate workplace where assessments can be done
- work place realistically stimulating for assessment
- relevant organizational policy, protocols and procedures
- equipment and resources normally used in the workplace

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer
- evidence gathering from care facility

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

- Assessment may be done in an appropriate simulated work place setting.
- Case studies and family reports presented for case work evaluations by peers and tutors.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>• Carries out established processes</li> <li>• Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Manages process</li> <li>• Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>• Establishes principles and procedures</li> <li>• Evaluates and reshapes process</li> <li>• Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.





## **CSAGEC0072A: Support the elderly person to maintain their independence**

### Competency Descriptor:

This unit describes the knowledge and skills required by the worker to support the older person to maintain their independence with instrumental activities of living.

### Competency Field:

Geriatric Care

<b>ELEMENT OF COMPETENCY</b>	<b>PERFORMANCE CRITERIA</b>
1. Support the older person with their instrumental activities of living	<p>1.1 Older people are encouraged to utilise support services where appropriate.</p> <p>1.2 The scope of the service to be provided is clearly explained to the older person and/or their advocate .</p> <p>1.3 The needs of the older person are identified from the service delivery plan, from consultation with supervisor and from interviewing the older person .</p> <p>1.4 The needs of the older person are respected despite religious beliefs, race, culture, etc.</p> <p>1.5 Visits and service delivery accommodates the older person's established routines and customs where possible .</p> <p>1.6 Work is performed in a manner that typified a home-like setting.</p> <p>1.7 Services are provided in a manner that enables the older person to direct the processes where appropriate.</p> <p>1.8 Support/assistance is provided in accordance with organisational policy, protocols and procedures.</p> <p>1.9 Appropriate use of equipment to support/assist the older person with activities of living within work role and responsibility is demonstrated.</p> <p>1.10 The older person is encouraged to perform his own activities independently when appropriate.</p>

- |    |  |     |  |
|----|--|-----|--|
| 2  | Recognise and report changes in an older person's ability to undertake instrumental activities of living | 2.1 | The older person's activities and environment are monitored to identify increased need for support/assistance with activities of daily living (ADL). |
|    |  | 2.2 | The older person's inability to undertake activities of living independently are identified and reported to a supervisor.                            |
|    |  | 2.3 | The older person is supported/assisted to modify or adapt the environment or activity to facilitate independence.                                    |
|    |  | 2.4 | Aids and/or equipment to support/assist the older person undertake activities of living independently are sought.                                    |
| 3. | Support the older person to maintain an environment that maximises independence, safety and security     | 3.1 | The older person is encouraged and supported/assisted to maintain their environment.   |
|    |  | 3.2 | Support is provided to promote security of the older person's environment.   |
|    |  | 3.3 | The environment is adapted or modified, in consultation with the older person to maximise safety and comfort.  |
|    |  | 3.4 | Hazards are recognised and addressed in accordance with organisational policy and relevant regulatory bodies.  |

### **RANGE STATEMENTS**

The Range Statement provides advice to interpret the scope and context of this unit of competency, allowing for differences between school-shops and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Older persons may include:

- Individuals living in residential aged care environments
- Individuals living in the community who are over 60 years

Contexts may include:

- The older person's own dwelling
- Independent living accommodation
- Residential aged care facilities

Instrumental activities of daily living may include:

- Home maintenance
- Garden maintenance
- Transport and attendance at appointments and social and recreational activities
- Domestic cleaning
- Domestic laundry
- Meal preparation
- Shopping
- Attendance to financial matters and personal correspondence

Reporting may be and include:

- Verbal
- Telephone
- Face to face
- Non-verbal (written)
- Progress reports
- Case notes
- Incident reports

Aids and equipment may include:

- Domestic appliances utilized for cleaning, laundering and meal preparation
- Gardening equipment
- Personal and security alarms
- Mobility devices

Support services may include:

- Governmental
- Non-governmental
- Social services

The needs of the older person may include:

- Physical needs:
  - Activity - Elimination of waste
  - Rest - Protection from temperature
  - Sleep - extremes
- Nutritional needs
  - Lack of appetite
  - Bad dentures
  - Decreased saliva
- Emotional needs
  - Love and affection
  - Sense of self-worth
  - Sense of achievement and recognition

Hazards may include:

- Poor or inappropriate lighting
- Slippery or uneven floor surfaces
- Physical obstructions (e.g. furniture and equipment)
- Poor home and domestic appliance maintenance
- Inadequate heating and cooling devices
- Inappropriate footwear and clothing

Tools that may be used to assess older person's ability to perform ADL may include:

- KATZ activities of daily living
- Lawton scale for instrumental activities of daily living

## EVIDENCE GUIDE

### (1) Critical Aspects of Evidence

Evidence of the following needs to be demonstrated:

- accurately follow facility procedures for the use of appropriate equipment to support/assist the older person to maintain their independence
- accurately follow facility procedure to recognize any older person's inability to perform their own activities of daily living
- accurately report and document older person's inability
- accurately follow facility procedures to adapt or modified the environment
- provide a safe environment to promote security

### (2) Pre-requisite Relationship of Units

- Nil

### (3) Underpinning Knowledge and Skills

Knowledge  
Knowledge of:

- relevant policies, protocols and practices of the organisation in relation to unit descriptor and work role
- Importance of community engagement and the ability to undertake instrumental activities of daily living for older people.
- Principles and practices of confidentiality and privacy.
- Principles and practices associated with providing services in a client's own living environment
- Strategies for supporting/assisting an older person to undertake instrumental activities of daily living independently
- Services and aids available to support independence with instrumental activities of daily living
- referral mechanisms
- safety and security risks associated with ageing
- hazards in an older person's environment
- strategies for minimising hazards in older person's environments
- older person's holistic needs
- the ageing process

**Skill**

The ability to:

- interpret international safety signs, read client's service delivery plans, make notations in clients records and complete workplace forms and records
- follow work-related instructions and directions
- seek clarification and comments from supervisors, clients and colleagues
- ask questions, clarify understanding, recognize and interpret non-verbal cues,
- provide information and express encouragement
- Identify and report older person's inability to perform their own activity of daily living
- resolve problems of limited difficulty within organisational protocols
- work effectively with clients, colleagues and supervisors
- Use tools to assess older persons ability to perform ADL

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Access to appropriate care facility where assessment can take place
- Relevant organisational policy, protocols and procedures manuals
- Access to equipment and resources normally used in the care facility

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- Direct observation / clinical sites evaluation.
- Oral questioning.
- Practical demonstrations.
- Written test.
- Course work / assignments.
- Performance approval from clinical site supervisor

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices .

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

## **CSAGEC0022A: Support elderly persons to meet their emotional and psychosocial needs**

Competency Descriptor:

This unit describes the knowledge and skills required by the worker to support the older person to meet their emotional and psychosocial needs

Competency Field:

Allied Health - Geriatric Care

<b>ELEMENT OF COMPETENCY</b>		<b>PERFORMANCE CRITERIA</b>	
1	Support the older person remain engaged with their social network and the wider community	1.1	The older person's social network is identified.
		1.2	The older person's social and recreational preferences are determined.
		1.3	The older person is encouraged and facilitated in their attendance at selected social and recreational activities.
		1.4	The need to modify or adapt social and recreational activities to meet the specific needs of the older person is recognised and reported to the appropriate person.
		1.5	The older person is provided with information about community networks and activities available to them.
2	Support the older person to meet their emotional and psychological needs	2.1	An understanding of the impact of ageing on the individual's emotional and psychological well being is demonstrated.
		2.2	The older person's self esteem and confidence is encouraged and supported.
		2.3	The older person is supported and encouraged to achieve maximum emotional well being.
		2.4	Empathy is shown to an older person who is emotionally distressed.
		2.5	Assistance is sought from an appropriate person when it is not possible to meet the emotional and psychological needs of the older person.

- |   |  |   |
|---|--|---|
| 3 | Recognise and accommodate the older person's cultural and spiritual preferences    | 3.1 Acceptance of an older person's cultural and spiritual preferences is demonstrated.   |
|   |  | 3.2 Work practices accommodated an older person's modesty and privacy according to cultural requirements.   |
|   |  | 3.3 Communication practices demonstrated cultural sensitivity.  |
|   |  | 3.4 The older person's continual participation in cultural and spiritual practices and celebrations is facilitated.                                     |
|   |  | 3.5 The older person is provided with information regarding relevant cultural and spiritual networks available in the community.                        |
| 4 | Support the older person who is experiencing loss and grief                        | 4.1 An understanding of the impact of ageing on an individual's experiences of loss and grief is demonstrated.  |
|   |  | 4.2 The stages of loss and grief are recognised.  |
|   |  | 4.3 Signs that an older person is experiencing grief are recognised and reported to an appropriate person.  |
|   |  | 4.4 Appropriate communication strategies are utilised when an older person is expressing their fears and other emotions associated with loss and grief. |
|   |  | 4.5 The older person and /or the ir support network are provided with information regarding relevant support services.                                  |
|   |  | 4.6 Particular needs are acknowledged and referral made to an appropriate individual/agency.  |
| 5 | Recognise and accommodate the older person's expressions of identity and sexuality | 5.1 An understanding of the impact of ageing on an individual's expression of identity and sexuality is demonstrated.                                   |
|   |  | 5.2 The impact of community values and attitudes regarding sexuality and ageing are recognised.   |
|   |  | 5.3 Own values and at titudes regarding sexuality are not imposed on others.  |
|   |  | 5.4 The older person is supported to express their sexuality within organisational protocols.   |



- 5.5 Different spiritual expressions of sexuality are respected.
- 5.6 Unmet needs relating to sexuality are identified and referred to an appropriate person.

## RANGE STATEMENTS

The Range Statement provides advice to interpret the scope and context of this unit of competency, allowing for differences between school -shops and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Older people may include:

- Individuals living in residential aged care environments
- Individuals living in the community who are over 60 years
- Prospective individuals to the service or services

Environments may include:

- Older person's own dwelling
- Independent living accommodation
- Residential aged care facilities
- Community centres

Emotional needs may include:

- Freedom from fear
- Freedom from anger
- Freedom from loneliness
- Freedom from guilt
- Freedom from anxiety
- Acceptance of loss
- Love and affection
- A sense of security and contentment

Psychological needs may include:

- Freedom from undue stress
- A sense of control
- Self-esteem
- Self-determination
- Personal identity
- Sense of belonging
- Life stage acceptance
- Veteran/War widow related issues

Spiritual needs may include:

- Formal and informal religious observance
- Need for privacy and an appropriate environment to reflect and/or participate in spiritual activities
- Ceremonial observances

Cultural needs may include:

- Dress and dietary observance
- Ceremonial and festive observances
- Need for continued interaction with cultural community

Sexuality and identity needs may include:

- love and affection
- touch
- physical appearance
- need for privacy and discretion
- access to assistive/protective devices

Types of loss may include:

- Significant other/s
- Independence
- Control
- Status
- Possessions
- Relationships
- Translocation
- Health

Reactions to loss may include:

- Shock
- Emotional release
- Physical distress
- Panic
- Guilt
- Hostility/destructive behaviour
- Lack of interest/apathy

Stages of grief may include:

- Denial
- Anger
- Bargaining
- Depression
- Acceptance

Appropriate communication and relationship building processes may include:

- Courtesy
- Empathy
- Non-judgemental care
- Observing and listening
- Respect for individual differences
- Cross-cultural communication

Support networks may include:

- Advocates
- Family members
- Carers
- Friends
- Clergy/pastoral care provider
- Community networks may include :
- Ethno-specific organisations
- Clubs
- Community centres
- Support groups
- Sport and recreational groups
- Community welfare groups
- Voluntary organisations

Appropriate persons/agencies may include:

- Supervisor
- Health professionals (registered nurse, doctor, social worker, diversional therapist, psychologist)
- Sex therapist
- Clergy/pastoral care provider
- National association of loss and grief
- Palliative care association
- Special associations providing support services to individuals with specific health problems/disorder
- Support group

Reporting may include:

- Verbal
- telephone
- face to face
- Non-verbal (written)
- progress reports
- case notes
- incident reports

## EVIDENCE GUIDE

### (1) Critical Aspects and Evidence

Evidence of the following needs to be demonstrated:

- accurately follow work place procedures for care of the older person
- provide appropriate support for maintaining the older person engaged with his/her social network
- accurately follow work place procedures for recognizing older person's emotional/psychosocial needs as well as appropriate follow up
- accurately follow work place procedures for identifying cultural and spiritual preferences
- provide support for the older person who is experiencing loss and grief
- provide support and understanding for meeting older person's expressions of identity and sexuality
- accurately follow work place procedures for handling older person's identity and sexuality needs
- accurately report and document all types of needs identified

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- relevant policies, protocols and practices of the organisation in relation to unit descriptor and work role
- concepts of recreation and leisure and older people
- stereotypes of older people and recreation
- strategies to facilitate continued community involvement
- developing new networks and facilitating choice
- strategies for selecting recreational and leisure activities based on preferences and abilities
- emotional and psychological needs of older people
- concepts of powerlessness and empowerment
- definition and explanation of the terms 'spirituality' and 'cultural'
- expressions of spirituality and culture
- effects of spirituality and culture on care delivery
- resources and networks that can support the cultural and spiritual needs of older people
- principle and practices of cross-cultural communication
- types of loss and stages of grief
- reactions to loss
- factors that influence the outcomes of loss and grief
- strategies for supporting an older person who is experiencing loss and grief
- strategies for accommodating cultural and spiritual customs surrounding loss and grief
- definition and explanation of the terms 'sexuality' and 'personal identity'
- expressions of sexuality
- cultural and individual differences in expressing sexuality
- beliefs and false beliefs surrounding sexuality and ageing
- issues surrounding sexuality and sexual expression in residential settings
- strategies for managing inappropriate sexual behaviour

Skills

The ability to:

- follow work-related instructions and directions and to seek clarification and comments from supervisors, clients and colleagues
- ask questions, clarify understanding and meaning, recognise and interpret non-verbal cues, adapt communication styles to meet specific needs, provide information and express encouragement and support including active listening and empathy
- resolve problems within organisational protocols
- work collaboratively with clients, social networks, colleagues, supervisors and other services/agencies
- Understand and deal with effect of ageing
- Keep the older person engaged with his/her social network regardless of his/her cultural and spiritual needs
- Recognize emotional changes
- Handle older person's needs of identity and sexuality
- To ensure cooperation from the older person

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- appropriate workplace where assessment can take place
- relevant organisational policy, protocols and procedures manuals
- indoor/outdoor area
- patient/client

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- Direct observation / clinical sites evaluation.
- Oral questioning.
- Practical demonstrations.
- Written test.
- Course work / assignments.
- Performance approval from clinical site supervisor

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team .

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices .

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 2	
Solve problems	Level 2	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAGEC0032A: Support persons with disabilities in Geriatric Care**

Competency Descriptor:

This unit addresses the competencies required to provide assistance to persons who are in Geriatric Care and have physical, cognitive and potential disabilities.

Competency Field:

Allied Health - Geriatric Care

ELEMENT OF COMPETENCY	PERFORMANCE CRITERIA
1. Identify current and potential needs of aging persons with disabilities	1.1 Specific tools are used to assess current status of clients/patients. 1.2 Future needs are assessed based on current status and continued observation. 1.3 Families and significant others are involved in identifying needs and rehabilitation plan.
2. Encourage independence of persons in Geriatric care with disabilities	2.1 Current abilities of clients and potential needs are assessed. 2.2 Independence, maintenance and use of current skills is encouraged. 2.3 Training opportunities for clients and significant others to develop needed skills are provided. 2.4 Community sources are identified which offer support to clients and promote group support using a holistic model of care.
3. Respect right of persons with disabilities in Geriatric Care	3.1 The cognitive capability of clients/patients is assessed. 3.2 Clients/patients rights to independent thought and action is supported. 3.3 Open communication with clients/patients is maintained. 3.4 Each person is recognised as an individual with specific needs and abilities.
4. Give quality care along the age continuum for aging persons with disabilities	4.1 Changes in physical, sensory or mental abilities are assessed. 4.2 Care giving strategies are modified based on identified needs.

- 4.3 Compassionate care is given based on the person's right to quality life or peaceful demise.

## RANGE STATEMENTS

The Range Statement explains the scope and context of the unit of competency allowing for differences between workplaces. The scope of variables chosen for training and assessment requirements will depend on the particular work situation,

The following variables may be present

Strategies to meet the current and future needs of the person with a disability include:

- Conducting changing needs assessments
- Conducting futures planning with the person
- Developing individual action plans with the person with a disability that address their changing needs
- Referrals to appropriate specialist services such as, occupational therapy, physiotherapy

Organisational policies and procedures may include:

- Legislation
- Disability Service standards
- Policies and procedures, such as duty of care, dignity of risk
- Budget allocations
- Individual funding plans

Appropriate community settings and forums may include:

- Generic services
- Advocacy groups
- Consumer groups

The needs of the person with a disability include:

- Psychological
- Physical
- Social
- Cognitive

Significant others may include:

- Family
- Advocates/carer
- Support person
- Team members
- Health and other professionals



## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects and Evidence

Evidence of the following needs to be demonstrated:

- the ability to identify current and potential needs of persons in geriatric care with disabilities
- the ability to encourage independence of persons in geriatric care with disabilities
- the ability to respect the rights of persons in geriatric care with disabilities

### (2) Pre-requisite Relationship of Units

- Nil

### (3) Underpinning Knowledge and Skills

#### Knowledge

Knowledge of:

- Disability Service Standards
- Organisational policy and procedures, including occupational safety and health (particularly manual health), lifestyle and futures planning, duty of care and dignity of risk
- Individual needs assessment, specifically changing needs
- Promoting successful ageing
- Stress and coping with change
- Grief and loss, bereavement
- Bereavement
- Life span development
- Contemporary views on ageing
- Impact of physical, psychological and social change on the person who is ageing
- Empowerment for people with disabilities
- Principles of Social Role Valorisation
- Issues and services available for people who are ageing
- Understanding of dementia

#### Skill

The ability to:

- Communicate effectively
- Sensitively and respectfully communicate and respond to the individual needs of people with disabilities who are in geriatric care
- Develop and maintain positive relationships
- Carry out changing needs assessments

**(4) Resource Implications**

Resource requirements include all the relevant resources commonly provided in the disability service setting.

Specific tools may include:

- Relevant organisational policy and procedure manuals, legislation and standards
- Organisational mission statement, strategic and business plan
- Other documentation relevant to the work context such as:
  - Individual routines and support plans
  - Changing needs assessment tools
  - Referrals forms

**(5) Method of Assessment**

In order to ensure consistency in performance it will be necessary to collect evidence across a range of competencies.

Evidence may be collected in a variety of ways including:

- direct observation during oral presentations
- questioning – oral/written activities
- projects related to use of information systems,
- portfolio with authenticated assessments and/or assignments from relevant training courses

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(5) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
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Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAGEC0042A: Provide care/support which is responsive to specific behavioural changes**

Competency Descriptor:

This unit will deal with the skill and knowledge required to provide care and support to persons who have demonstrated behavioural changes in a variety of settings.

Competency Field:

Allied Health - Geriatric Care

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Assess need for care and support	1.1	Initial assessment is made to identify actual and potential needs.
		1.2	Assessment is made based on mental, emotional or psychological changes.
		1.3	Person's condition is assessed in order to determine individualized responses to changes.
		1.4	Assessment is made as baseline data for providing care and referral if necessary.
		1.5	Basic assessment form is used to collect information.
		1.6	Results of assessment are reported as appropriate.
		1.7	Documentation is completed as required by facility's policies.
		1.8	Significant negative changes in behaviour are identified through observation and reported promptly.
2.	Ensure safety of client/person	2.1	Client is assessed to ascertain factors that may compromise safety.
		2.2	The environment is assessed and modifications implemented to ensure safety.
		2.3	The proper monitoring of person especially during crisis or "flare up" periods is done.
		2.4	Facility's policies and protocols are followed regarding care of persons with behavioural problems.

- 2.5 Medications are administered as ordered with supervision to aid in control of symptoms.
  - 2.6 Restraints are used according to the protocol of the facility.
  - 2.7 Difficult behaviour is managed in ways that will promote the safety and wellbeing of person.
  - 2.8 Advice is promptly sought from an appropriate person if behaviour change continues to be a concern or is beyond the worker's ability to deal with it.
- 3 Facilitate adequate nutrition
- 3.1 The need for type of nutrition required is assessed.
  - 3.2 Client/patient is assisted in meeting nutritional needs.
  - 3.3 The need for the use of eating implements is ascertained.
  - 3.4 Person's preferences are respected as it relates to selection of diet and time of eating.
  - 3.5 Significant changes in person's condition as it relates to meeting their nutritional needs are documented.
4. Provide supportive care
- 4.1 The doctor is assisted with client during regular visit.
  - 4.2 A sense of independence and productivity is encouraged in person.
  - 4.3 Social relations are maintained by identifying support network.
  - 4.4 An understanding of the impact of the behavioural changes on the individual's wellbeing is demonstrated.
  - 4.5 Client's self-esteem and confidence are encouraged and supported by promoting self care.
  - 4.6 Assistance is sought from a resource person when it is not possible to meet the emotional, mental or psychological needs of the person.
  - 4.7 Activities that promote the client's quality of life are conducted

- 4.8 The dignity of the client is maintained by being flexible and sensitive to the individual's diverse needs especially during behavioural crisis.
  - 4.9 Social, physical or environmental barriers to client's participation are identified and eliminated.
  - 4.10 The client is assisted to deal with situations that cause anxiety, disappointment and frustration.
5. Communicate effectively with client and relatives
- 5.1 The client is communicated with in a respectable manner and appropriate adjustments made to facilitate the process of communication.
  - 5.2 Understandings of the different diagnosis that relate to behavioural changes are demonstrated.
  - 5.3 Changes in person's communication patterns are anticipated based on diagnosis.
  - 5.4 Support is provided to relatives especially during times of crisis and deterioration of health of the client.
  - 5.5 Relatives are provided with information regarding support services.
  - 5.6 Simple, clear statements are used in a normal tone of voice.
  - 5.7 Sit or stand at a normal distance when speaking with the client.
  - 5.8 Positive body language is demonstrated when caring for the client.
  - 5.9 Client is allowed to express self while demonstrating active listening skills.
  - 5.10 Client is informed of specific procedures to be done to facilitate cooperation and trust.

- |    |  |   |
|----|--|---|
|    | 5.11   | Communication from the client is responded to in manner likely to make client feel valued and to enhance self - esteem. |
| 6. | Contribute information to relevant personnel | 6.1 Assistance is given in the completion of assessment tools.  |
|    | 6.2  | Demonstrate an understanding of the tools being used.   |
|    | 6.3  | Changes in person's needs, capabilities and circumstances are reported  |
| \  | 6.4  | Accurate verbal/written reports are provided to supervisor.   |
|    | 6.5  | Organizational polices/protocols are followed when doing documentation.   |
|    | 6.6  | Appropriate updates on client's condition are provided to relatives.  |

## RANGE STATEMENTS

The Range Statement explains the scope and context of the unit of competency allowing for differences within work places. The scope of variables chosen for training and assessment requirements will depend on the particular work situation.

The following variables may be present for this particular unit:

Changes in behavior may include:

- depression
- agitation
- aggression
- delirium
- dementia
- confusion
- disorientation
- \*withdrawal

Changes in behavior may be reported by:

- telephone
- face to face reports
- written notes
- client's records
- specially designed forms

Diagnoses that may be related to behavioral changes may include:

- Substance abuse or chemical imbalance
- Mental/Psychiatric conditions such as depression, anxiety-related disorders, schizophrenia and Alzheimer's Disease
- Neurological disorders such as brain tumors, strokes, senile dementia
- Complications of medical conditions such as diabetic coma, renal failure, lupus, end-stage of cancer or HIV/AIDS

Changes in behavior that are to be reported may include:

- changes in ability
- positive or negative mood changes
- inappropriate behavior based on the situation
- comments or even jokes about hurting self or others
- failure to take medication or improper use of medicine
- real or imagined physical symptoms
- regression
- excessive crying

Supportive care may include:

- responsiveness to needs
- positive attitude
- reliability of caregiver
- promotion of client's health and comfort
- preservation of client's dignity and self-worth

Promotion of quality of life may be done within the following context:

- the person's perception, goals and concerns
- person's physical health and psychological state
- level of independence and social with environment

Quality of life activities may include any activities that will promote:

- safety, security and social support
- dignity
- independence
- participation

Activities may include:

- care-related
- recreational

Restraints may include:

- Physical
- Chemical

Care recipients may include:

- infants
- children
- adolescents
- adults
- elderly



## EVIDENCE GUIDE

Competency is to be demonstrated by effectively providing care/support, which is responsive to specific behavioural changes in accordance with the performance criteria and the range listed within the range of variables statement.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects and Evidence

Evidence of the following needs to be demonstrated:

- accurately follow facility's procedures for detecting and reporting changes in behavior
- accurately follow facility's policies as it relates to use of restraints
- respond promptly to behavioral changes
- provide appropriate treatment and monitor condition
- accurately report and document findings related to behavior changes

### (2) Pre-requisite Relationship of Units

- Nil

### (3) Underpinning Knowledge and Skills

#### Knowledge

Knowledge of:

- different diagnoses and treatment that relate to behavioral changes
- mental, physical and emotional changes associated with aging
- common side effects of drugs the client is taking
- common drugs that can predispose clients to behavior changes
- safety precautions relevant to the care of the client
- comfort measures
- the importance of reporting concerns without delay
- use restraints appropriately

#### Skills

The ability to:

- apply restraints safely for appropriate duration
- communicate effectively with client and relatives
- provide care based in age and needs
- foster emotional care and support to clients
- administer medication under supervision
- know when to refer
- ascertain need for eating implements
- document and report significant findings

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- clients
- procedure and policy documents
- reports books
- client's chart/document

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices .

Levels of Competency		
Level 1.	Level 2.	Level 3.
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Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 2	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

## **CSAGEC0052A: Conduct a recreation program for persons in Geriatric Care**

### Competency Descriptor:

This unit covers the skills and knowledge necessary to conduct a recreation program consisting of a range of suitable physical recreation activities for persons in Geriatric Care.

### Competency Field:

Allied Health – Geriatric Care

<b>ELEMENT OF COMPETENCY</b>		<b>PERFORMANCE CRITERIA</b>	
1	Prepare for a recreation program	1.1	Clients/patient's status and condition are assessed to determine suitability of client in the recreation program prior to commencement.
		1.2	The client is involved in identifying element of the recreation programme
		1.3	The range of activities to be utilized in the recreation program is determined in conjunction with clients.
		1.4	Resources required for the recreation program are identified and sourced prior to commencement.
2	Establish effective communication	2.1	Instructions are communicated in a manner suitable to the client/patient and are clear, accurate and contain all relevant information.
		2.2	Clients/patients are encouraged to seek clarification of information when necessary.
		2.3	Feedback on activity technique and correct usage of equipment are communicated to the client/patient.
3	Assist persons in Geriatric Care to meet physical welfare and social needs through a recreation program	3.1	Client/patient self esteem and confidence are fostered.
		3.2	The recreation program is modified, where necessary, based on an assessment of the conditions, client's/patient's status, facilities and equipment.
		3.3	Activities within the recreation program are conducted at a level and pace to suit the capabilities of clients and/or the group.

- 3.4 Activities within the recreation program are selected to take into account the structural and functional alterations to the human body as a result of the ageing process.
- 3.5 Activities within the recreation program are selected to take into account the social interaction needs of clients/patients.
- 3.6 Assistance with the use of aids is provided as appropriate.
- 3.7 Clients/patients are briefed on safe and responsible behaviour and are made aware of rules, codes, organisational/health and safety requirements, restrictions and the need to minimise damage to equipment, patient and the environment.
- 3.8 Clients/patients are "warmed up" through the use of safe and appropriate exercises relevant to the proposed activity or session.
- 3.9 Appropriate techniques are utilized to motivate clients to maintain an appropriate heart rate.
- 3.10 Advice on general recreation issues concerning clients/patients are provided in response to enquiries from participants.
- 3.11 Sufficient time is allocated for "cooling down" and discussions with clients/patients.
- 3.12 Issued equipment are examined for damage and wear on a daily basis.
- 3.13 Clients/patients are given the opportunity to provide feedback and identify further needs and success.

## RANGE STATEMENTS

The Range statement provides advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Communication strategies may be:

- verbal
- modelling/demonstration of activities/ movements
- hand/arm signals

Emotional well-being includes:

- feelings
- state of mind
- perception of risk
- self-esteem
- self confidence

Qualitative and quantitative feedback may be obtained through the following:

- evaluation forms
- number of participants
- surveys
- complaints
- reaction
- feedback from staff
- financial information

Persons in Geriatric care may be:

- frail
- moderately active

Program:

- may be a sequence of individual sessions running sequentially or simultaneously, for individuals or groups in which the extent of instruction covers that which is required to allow the client to participate safely and effectively to maintain physical well being

Range of activities should include:

- a variety of drills,
- tasks,
- games,

Does not include:

- movements,
- tasks and activities with the aim of physical skill enhancement in order to perform competitively

Exercises and activities to facilitate physical well being of persons in Geriatric care in the following areas:

- stretching
- strengthening
- back care
- balance
- mobility
- posture
- coordination

Resources may include:

- staff
- equipment
- venues/facilities
- paperwork
- transport and logistical arrangements
- funds
- music

Session may include:

- a selection of tasks, games, activities or exercises in which the extent of instruction is to allow the older person to participate safely and effectively
- may be a component of a sequenced recreation program of individual activities

Status may vary according to:

- impact of medication
- chronological age
- physiological age
- disability
- cultural issues
- psychological condition
- social state
- special needs and considerations such as (arthritis, osteoporosis, dementia, diabetes, orthopaedic,
- continence issues, cardio respiratory, neurological conditions and musculo-skeletal conditions

Work environment varies with respect to

- size of the organisation
- location
- organisational structure
- nature of the program/s provided
- availability of resources and technology

## EVIDENCE GUIDE

Competency is to be demonstrated by effectively conducting recreation program for persons in Geriatric Care in accordance with the performance criteria and the range listed within the range of variables statement.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

**(1) Critical Aspects of Evidence**

Assessment must confirm sufficient knowledge of the factors influencing conducting of a recreation program for persons in Geriatric care.

Assessment must confirm the ability to:

- Determine the range of safe and suitable physical activities and exercises for clients/patients, both frail and moderately active
- Instruct clients/patients in the correct technique/guidelines for undertaking physical activities and improving functional ability
- Confirm prior screening of clients/patients prior to participation in a recreation program
- Provide clients/patients with appropriate advice on recreation issues within the confines of the program

**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- ageing process and the limitations and abilities of older persons
- awareness of screening of older persons for entry into recreation programs
- precautions for older persons in recreation programs
- stretching and mobility exercises and activities for persons in Geriatric Care
- strengthening exercises and activities for older persons
- posture, back care and coordination exercises and activities for persons in Geriatric Care
- chair based, floor work and balance exercises and activities for persons in Geriatric Care
- occupational Health and Safety legislation relevant to the provision of recreation services
- use of music in activity programs
- special needs, conditions and considerations of persons in Geriatric Care

Skill

The ability to:

- monitor physical activity within the confines of the recreation program
- apply organisational skills to coordinate resources necessary to conduct a recreation program
- apply appropriate communication skills to provide instructions to facilitate the participation of older persons in recreation programs
- select and instruct appropriate range of activities and exercises for persons in Geriatric Care
- modify activities for risk minimisation to older persons participating in recreation program
- conduct recreational activities with persons in Geriatric Care
- identify clients/patients who need special attention



**(4) Resource Implications**

Assessment of this competency requires access to:

- persons in Geriatric care
- appropriate exercise equipment to conduct a recreation program

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualification Framework. They relate to the seven areas of generic competency that underpin effective workplace practices .

Levels of Competency		
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Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 2	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAHCA0062A: Measure vital signs**

Competency Descriptor:

This unit deals with the skills and knowledge required to identify abnormalities in the measurement of vital body signs.

Competency Field:

Allied Health – Health Care Assistance

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1	Assess client's/patient's condition	1.1	Patient's condition is assessed to determine routine or frequent need for procedure.
		1.2	Assessment is used as baseline data for conducting procedure.
		1.3	Changes in client/patient are detected as a means of performing procedure.
		1.4	Appropriate sites for doing procedure are determined.
		1.5	Individual "norm" as it relates to vital signs is established.
		1.6	Doctor's orders are checked prior to procedure if appropriate/relevant.
2.	Monitor vital signs	2.1	Procedure is explained fully and clearly to patient/client.
		2.2	All equipment needed for the procedure is checked.
		2.3	Patient's/client's current physical condition is monitored in order to select the best area of the body to perform the procedure.
		2.4	Patient is placed in a comfortable position.
		2.5	Temperature is measured accurately.
		2.6	Blood Pressure is measured accurately.
		2.7	Pulse is measured accurately.
		2.8	Respiration is measured accurately.
		2.9	Patient is informed clearly and accurately of the completion of the procedure.

- 2.10 All relevant information is entered clearly and accurately in the necessary records.
  - 2.11 Any deviation from the normal range is reported to the appropriate person.
  - 2.12 Equipment is cleaned correctly and returned to the appropriate place of use.
  - 2.13 Accurate written report of overall procedure is submitted to the appropriate person.
3. Complete work
- 3.1 Equipment faults are reported and rectified in accordance with facility procedure.
  - 3.2 Documentation is completed as required by legislative, regulatory and facility procedure.

## RANGE STATEMENT

The Range statement provides advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Relevant information about factors

That could affect vital signs may include:

- Temperature
- Medication
- Age
- Infections
- Time of day
- Exercise
- Emotions
- Pregnancy
- Menstrual Cycle
- State of Hydration
- Sex
- Position of client (lying or sitting)
- Diet
- Obesity
- Condition of blood vessels
- Heredity
- Illness

Temperature may include:

- Environmental i.e. hot or cold

Measurements include:

- Blood Pressure
- Pulse
- Respiration
- Temperature

Personal Protective Equipment may include:

- Gloves
- Protective clothing
- Face Mask

Legislation, policies and regulatory bodies may include:

- Ministry of Health

Equipment may include:

- Thermometer in sterilizing agent
- Sphygmomameter
- Stethoscope
- Watch

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence:

Evidence of the following needs to be demonstrated:

- Accurately follow workplace procedures for measuring vital signs and reporting abnormalities.
- Provide appropriate treatment as prescribed.
- Monitor patients' vital signs as required.
- Accurately report and document results and treatment provided.

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- being under certain treatment
- ageing process
- times when readings are done
- presence of infections and/or illness
- exercise
- stressful/emotional situations
- interpretation of signs and symptoms of possible abnormal readings
- racial, gender and cultural issues
- height and weight
- developmental stages of care recipients

Skills

The ability to:

- explain procedures to patients/clients
- identify the appropriate sites for measuring blood pressure pulse and temperature
- measure vital signs accurately
- document readings
- report abnormal readings
- identify defective equipment
- observe individuals during routine care
- identify problems with diet that can altered vital signs
- identify stressful/emotional situations that can alter vital signs
- provide appropriate treatment
- educate patients about some of the factors that affect vital signs
- maintain a positive patient -caregiver relationship
- communicate appropriately with clients and colleagues
- use technical equipment
- identify appropriate cleaning solutions
- demonstrate appropriate cleaning techniques of equipment

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- thermometer
- sphygmomanometer
- stethoscope
- watch
- alcohol wipes
- tray
- note book or appropriate forms
- pen/pencil
- personal protective equipment (PPE)
- waste paper bag
- patients/clients

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote the level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>• Carries out established processes</li> <li>• Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Manages process</li> <li>• Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>• Establishes principles and procedures</li> <li>• Evaluates and reshapes process</li> <li>• Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAHCA0042A: Attend to sanitation and hygiene care**

Competency Descriptor:

This unit describes the knowledge and skills required to provide hygiene care and to maintain sanitation standards.

Competency Field:

Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Maintain sanitation standards in the workplace	1.1	Environment and equipment are made safe, secure and of suitable standards.
		1.2	Reusable equipment is cleaned before use with another patient.
		1.3	Sharps are disposed of in a puncture -resistant leak proof container labelled with a biohazard symbol.
		1.4	Mouthpieces or resuscitator bags are kept available to minimize the need for mouth -to-mouth resuscitation.
		1.5	Waste and soiled linen are placed in plastic bags and handled appropriately.
		1.6	Standards precautions are implemented.
		1.7	Body fluids and contaminated articles are handled appropriately.
		1.8	Food and drink are placed separately from where it can be exposed to blood or other materials that may be contaminated.
		1.9	Contaminated broken glassware are handled appropriately
		1.10	Specimen and specimen containers considered potentially infectious materials are secured or disposed of properly.
		1.11	Patient's items are handled appropriately.
		1.12	Occupational exposures to contaminated areas or equipment are kept minimal.



- 1.13 Any incidental contact with any source of infection is immediately reported to the appropriate person and adequate actions taken.
- 1.14 Any incidental contact with any source of infection is immediately documented.
- 2. Manage the physical care of clients
  - 2.1 Hygiene practices ensured safety and prevented cross infection.
  - 2.2 Need for secure and consistent care is met at all times.
  - 2.3 Physical care routine is sufficiently flexible to accommodate the individual needs of each client.
  - 2.4 Dressing and changing are carried out in a gentle and unhurried manner.
  - 2.5 Communication and interaction are appropriately used during physical care activities.
  - 2.6 The use of sanitary conveniences introduced is consistent with the level of development and medical condition of clients concerned.
  - 2.7 Supervision of and/or involvement with clients who are physically disabled are done to ensure their safety at all times.
  - 2.8 Any unusual condition or deviations from usual patterns of behaviour are reported as soon as possible to the appropriate person.

## RANGE STATEMENT

The Range statement provides details of the scope of the Elements and Performance Criteria to allow for differences within enterprises and workplaces, including practices, knowledge and requirements. The Range of Variables also provides a focus for assessment and relates to the unit as a whole.

The following variables may be present:

Individuals include:

- Infants
- Children
- Adults
- Convalescents
- Physically challenged
- Unconscious patients

Physical routine care may include:

- Daily care (bathing, oral hygiene)
- Feeding

Environment may include:

- Bedding
- Play and recreation areas (in and out doors) play items
- Sleeping area
- Exercise area

Reusable equipment may include:

- Bedpans
- Urinals
- Emesis basins
- Oxygen tubes and face masks
- Patient's chart
- Patient's bed
- Suction machine
- V/S equipment
- IV stand

Equipment may include:

- Bedpans
- Urinals
- Emesis basins
- Urinary drainage bags
- CPR trolley
- IV stand
- Suction machine
- Patient's chart
- Patient's bed
- Oxygen tubes and face masks
- Wheelchairs
- Stretchers
- V/S equipment: thermometer, BP machine

Sharps may include:

- Needles
- Syringes (for diabetics)
- Razors
- Blades
- Intravenous input devices (Cannula, Branula Butterfly)

Symbols of alert may include:

- Danger
- Poison
- Wet floor
- Electric power
- Biohazard

Standards precautions may include:

- Hand washing
- Use of personal protective equipment
- Patient-care equipment
- Environmental control
- Adequate disposal of linens

Body fluids may include:

- Urine
- Blood
- Saliva
- Tears
- Semen
- Faeces
- Vomitus

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence:

Evidence of the following needs to be demonstrated:

- Accurately follow facility procedures for routine care and cleaning of environment surfaces
- Accurately follow facility procedure to dispose sharps
- Accurately follow facility procedure to detect and report abnormal findings
- Accurately implement standards precautions

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- Dispose sharps and other contaminated articles
- Use of mouth-pieces or resuscitation bags
- Standards precautions
- Biohazards symbols and symbols of alert
- General health and hygiene requirements
- Need for rest for different individuals of varied ages
- The variation in sleep patterns over time between individuals
- The importance of rest/sleep or quiet periods as part of the daily routine of the home
- The emotional issues around toilet training and when and how to introduce it to babies
- Unusual conditions and symptoms of common ailments affecting the aged and infants which may need to be reported/treated
- The effect of changes in temperature and climate and implications for clothing of the aged and babies
- How to communicate respect, love and warmth; and show consideration for the feelings, desires and interests of others (empathize)

Skill

The ability to:

- ensure cleanliness of bedding and equipment
- create a safe and secure environment
- satisfy needs for secured and consistent care
- plan daily routines
- dress persons and change clothing
- introduce use of sanitary convenience
- administer medication and treatment
- maintain records
- detect abnormal findings and seek appropriate solution
- demonstrate universal precautions

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Appropriate workplace where assessment can take place
- Relevant organization policy, protocols and procedures
- Equipment and resources normally used in the workplace

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.

**CRITICAL EMPLOYABILITY SKILLS**

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>• Carries out established processes</li> <li>• Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Manages process</li> <li>• Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>• Establishes principles and procedures</li> <li>• Evaluates and reshapes process</li> <li>• Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAGEC0062A: Care for the dying elderly person**

## Competency Descriptor:

This unit deals with the skills and knowledge required to effectively care for the older adult who is dying and to provide support for relatives of the deceased.

## Competency Field:

Allied Health - Geriatric Care

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Assess need for end of life care	1.1	Initial assessment is made to identify actual and potential needs.
		1.2	Assessment is made based on physical and mental changes.
		1.3	Patient's/client's condition is assessed in order to determine individualized responses to impending death.
		1.4	Assessment is made as baseline data for providing care and referral if necessary.
2.	Support dying person/relatives	2.1	Knowledge about client/relatives regarding beliefs/values/preferences is obtained.
		2.2	Necessary resource to maintain client/relative's beliefs and provide emotional/spiritual support is secured.
		2.3	Respect for client/relatives beliefs/values/preferences is demonstrated.
		2.4	Knowledge regarding death and dying is used to support client and relatives.
		2.5	Relatives are allowed to spend time with dying client.
		2.6	Relatives' rights to privacy are respected.
		2.7	Client/relative's request for visit of clergy/spiritual leader is communicated to nurse in charge.
		2.8	The visit of clergy/spiritual leader/resource personnel is facilitated.
		2.9	Client's room is kept well lit, ventilated and pleasant.
		2.10	Pictures, flowers, religious objects and other significant items are kept within view and reach of client.

- 3. Monitor dying person
  - 3.1 All equipments needed for care are made available.
  - 3.2 Client's condition for signs of impending death is evaluated.
  - 3.3 Care is implemented based on facility's policies/protocols.
  - 3.4 Needs of dying client are met based on spiritual/cultural preferences.
  - 3.5 Physical needs are met to aid comfort and dignity.
  - 3.6 Findings are documented based on practice guidelines.
  - 3.7 Changes are reported to appropriate nursing/medical personnel.
- 4. Provide post mortem care
  - 4.1 Preparation of body is done after doctor's written declaration of death.
  - 4.2 The deceased person is carefully cleaned and groomed consistent with policy related to infectious diseases.
  - 4.3 Caregiver appropriately is attired according to established procedures for minimizing risks of infections.
  - 4.4 Cleaning and preparation of deceased person is carried out in a manner that shows sensitivity to the feelings of the deceased person, relatives and friends.
  - 4.5 The immediate environment is prepared in a manner that respects the cultural and religious beliefs of the deceased and relatives.
  - 4.6 Valuables that are to remain with the deceased person are reported and recorded accurately, legibly and completely.
  - 4.7 Where visible identification is used, it is complete and accurate.
  - 4.8 Disposal of body is done in a timely manner.
  - 4.9 Environment is appropriately cleaned after removal of body.
  - 4.10 Universal precautions are applied.

5	Care of relatives of the deceased	5.1	Impacting situations relating to the deceased person are explained sensitively in a manner, at a level, appropriately to those concerned.
		5.2	Viewing of body is confirmed with relatives and friends.
		5.3	Action is taken to prepare and dispose of body according to relatives expressed wishes.
		5.4	Family is supported through the grief process.

## RANGE STATEMENT

The range of variables explains the contexts within with the performance and knowledge requirements of this standard may be assessed. The scope of variables chosen in training assessment requirements may depend on the work situations and available resources.

The following variables may be present for this particular unit:

Care includes:

- monitoring dying process
- Cleaning
- grooming
- tagging of body

Settings may include:

- those dying at home
- hospital
- long-term facilities
- hospices

Work activities include:

- verify that the person has been certified dead by a physician

Personal Protective Equipment may include:

- gloves
- protective clothing
- face mask

Individuals include:

- older adults and relatives regardless of religious/cultural beliefs

Health and safety measures relating to:

- Infectious and contagious diseases; drainage tubes etc.,

Impacting situations include:

- cases under jurisdiction of the coroner
- financial obligations

Other equipment may include:

- tags
- body bag



Legislation, policies and regulatory bodies may include:

- Ministry of Health
- National regulations regarding death and dying
- Guidelines governing scope of practice
- Policies and protocols outlined by facility
- Universal precautions guidelines

Care of relatives may include:

- Provision of emotional and spiritual needs
- Support of beliefs etc.
- Adherence of wishes regarding the disposal of body

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence

Evidence of the following needs to be demonstrated:

- Accurately follow workplace procedures for care of the dying client.
- Provide appropriate treatment as prescribed.
- Monitor patients as required
- Accurately report and document results and treatment provided.
- Utilize universal precautions in handling the dead person.
- Provide appropriate support for dying person and relatives.

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- the six stages of dying
- factors contributing to death
- cultural and spiritual issues
- treatments available to preserve life
- ethical dilemmas related to death and dying
- universal precautions

Skills

The ability to:

- communicate appropriately with relatives and colleagues regarding signs of impending death of older person
- use knowledge to provide appropriate care to older who is dying
- monitor client's condition and implement care
- demonstrate post mortem care efficiently
- practice universal precautions
- support relatives of the deceased

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Body bags
- Tags
- Appropriate cleaning solutions
- trolley
- Note book or appropriate forms
- Pen/pencil
- Personal protective equipment (PPE)
- Waste paper bag
- Patients/clients/relatives

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAHCA0032A: Assist care recipient with medication**

Competency Descriptor:

This unit deals with relevant skills and knowledge required to provide assistance to care recipients with medication in a variety of care settings under appropriate supervision.

Competency Field:

Allied Health

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1	Prepare for medication administration	1.1	Medication plan for care recipient is reviewed with nurse / supervisor.
		1.2	Hand washing procedure is done.
		1.3	Medication, patient and treatment are appropriately identified by medication chart.
		1.4	Required equipment is assembled for procedure.
		1.5	Care recipient is made comfortable and reassured.
		1.6	Relevant information/instructions are given to care recipient.
		1.7	Medications are prepared within legal guidelines.
		1.8	Water or food is provided as needed to be taken with medications.
		1.9	Situations that are of potential risks of cross-infection among care recipients are identified and dealt with appropriately.
		1.10	Care recipients who self-medicate are assisted as required.

- |   |                       |      |   |
|---|-----------------------|------|---|
| 2 | Administer medication | 2.1  | The “Six Right” of medication is observed under appropriate supervision.  |
|   |                       | 2.2  | Medication and medication related treatment is administered as prescribed by a medical practitioner or on the instruction of supervisor.                  |
|   |                       | 2.3  | Medication and medication related treatments are appropriately identified.  |
|   |                       | 2.4  | Relevant precautions are taken to prevent drug error.   |
|   |                       | 2.5  | Appropriate positioning of care recipient is ensured depending on the route of medication.  |
|   |                       | 2.6  | Relevant precautions are taken to prevent contamination of medication and treatment.  |
|   |                       | 2.7  | Care recipients are encouraged to participate in medication administration.   |
|   |                       | 2.8  | Signs and symptoms, which might indicate adverse reaction to medication/ treatment, are recognized and brought to the attention of an appropriate person. |
|   |                       | 2.9  | The observed side effects of medications are accurately recorded and reported.  |
|   |                       | 2.10 | Records are maintained accurately, legibly and kept current.  |
|   |                       | 2.11 | Attention is given to special instructions and considerations for particular medications (such as “always take with food”).                               |
|   |                       | 2.12 | Self-administration of medications/treatment by care recipients is observed and recorded as per available protocol.                                       |
|   |                       | 2.13 | Appropriate instructions and assistance is provided for care recipients who are able to do self-administration of medications.                            |
|   |                       | 2.14 | Replacement of medications is done in a safe and timely manner in appropriate storage area(s).  |

- 2.15 Appropriate checks are done to ensure medications are taken and not hoarded or stored by care recipients.
  - 2.16 Equipment used in medication administration is disposed of or washed in appropriate solution.
  - 2.17 Hands are washed after procedure is done.
  - 2.18 First aid is applied when necessary and in accordance with given instructions.
- 3 Store medications
- 3.1 Labels are read and instructions followed with regards to appropriate storing methods.
  - 3.2 Medications used for care recipient needs are kept in one place, separate from medicines used by other residents/family members.
  - 3.3 Locked cabinets are used in care settings with young children and disoriented elderly persons.
  - 3.4 Childproof containers are used in care settings with children.
  - 3.5 Medications are kept in original containers and not mixed with other medicines during storage.
  - 3.6 Medications that require refrigeration are kept on upper shelf in the back or at appropriate temperature as stipulated on medicine container.
  - 3.7 All medications are stored away from heat, light and moisture.

**RANGE STATEMENT**

The Range statement provides advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

The units in this competency should be demonstrated in accordance with:

- prescribed guidelines that govern care settings
- regulations in regard to the responsibilities for unlicensed personnel assisting clients/residents with medications
- policies/ protocols relevant to the medication administration
- guidelines that govern scope of practice.
- universal precautions
- emergency information e.g. Hospitals, Police, other relevant numbers
- accessibility of medical facilities for emergency situations

Caregiver's preparation may include:

- washing of hands/universal precautions
- ability to read and follow instructions carefully.
- assemble needed items for administration
- appropriate preparation of care recipient.
- inventory check for appropriate medications
- appropriate storage area

Patients/clients may include:

- individuals across the developmental lifespan with/or without disabilities

Characteristics of patient/client may be:

- care recipients with special needs requiring medication treatment and for health maintenance

Types of medications may include

- Medications that sold as over-the-counter drugs (OTC) and prescribed
- drugs that may be taken by mouth;
- instilled in eye, ears or nose; inserted as pessaries or suppositories; applied as ointment or creams or injected such as insulin (with appropriate supervision).

**Types of Illnesses**

- treatment of minor ailments (cuts, bruises and simple discomfort)
- supervision of conditions documented as chronic or acute illnesses

**Six right of medication include:**

- Right documentation
- Right time
- Right patient
- Right medication
- Right medication dosage
- Right route

**Types of Equipment may include:**

- Medication tray
- cups
- spoon
- apparatus for crushing tablets
- water jug
- straw
- syringes and needles of appropriate type (insulin), alcohol
- swabs
- different type of medicines
- care recipient medication record /document, disposable gloves

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence

Evidence of the following needs to be demonstrated

- Apply relevant regulations, policies and protocols.
- Utilize universal precautions such as hand washing techniques.
- Maintain "The Six Rights" for medication administration
- Ensure appropriate supervision is available at all times
- Check for expiry dates on all medications.
- Encourage self-reliance in care recipients who do self-medication.
- Document medication after it is given/ taken.
- Know different drug classifications that are common.
- Assist with the application of first aid in the event of adverse reaction.
- Use of specialized equipment used for medication administration.
- Administer only those medications prepared by caregivers or medicines that were observed being prepared.
- Administer medication to patient



**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- the value of having adequate supervision during drug administration
- situations that can cause medication contamination or mix up
- developmental stages of care recipients and its influence on the medication administration procedure
- care recipient's predisposition to side/adverse reactions related to the presence of existing diseases
- the importance of interaction/communication during procedure
- side effects of commonly used drugs
- different routes that medications can be administered within scope of caregivers practice under supervision
- basic first aid techniques to be used in collaboration with health team in the event of a drug reaction

Skills

The ability to:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• the awareness of the importance of maintaining records of medication administered</li> <li>• storage requirements and need for proper labeling of medicines</li> <li>• chronic diseases that require long term medication and need for constant supply</li> <li>• the six right of medication</li> </ul> | <ul style="list-style-type: none"> <li>• practice universal precautions especially hand washing</li> <li>• safely prepare medication to be administered safely with supervision</li> <li>• observe care recipients who self-medicate and report unusual behavior during or after administration</li> <li>• assist with basic first aid in a safe and timely manner with supervision.</li> <li>• document pertinent data on/in appropriate record</li> <li>• practice "The six rights" of medication administration with supervision.</li> <li>• identify side / adverse effects of medication and report to appropriate person</li> </ul> |
| <ul style="list-style-type: none"> <li>• stay with care recipient until medication is swallowed.</li> <li>• store medication in appropriate areas.</li> <li>• administer medication via correct routes with supervision</li> <li>• follow policies / procedures of care settings</li> <li>• persuade patient to take medication</li> </ul>        |   |

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Exposure to medicines, equipment and appropriate records.
- Access to variety care recipients who need different medications.
- Available drug book / drug guide to check unfamiliar medications.
- Regular practice sessions in nursing labs with supervision.

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- Direct observation / clinical sites evaluation.
- Oral questioning.
- Practical demonstrations.
- Written test.
- Course work / assignments.
- Performance approval from clinical site supervisor

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

## **CSAHCA0052A: Assess skin status/condition and implement preventative and corrective measures**

### Competency Descriptor:

This unit deals with the skills and knowledge required to assess skin status, prevent, identify and implement corrective measures for skin problems as well as referral for the best treatment option.

### Competency Field:

Allied Health – Health Care Assistance

<b>ELEMENT OF COMPETENCY</b>		<b>PERFORMANCE CRITERIA</b>	
1.	Assess skin status/condition routinely.	1.1	Initial assessment is made to identify skin condition/status.
		1.2	Patient's/ client /resident skin condition is monitored and preventative measures implemented according facility procedures.
		1.3	Hydration and nutrition status are determined.
		1.4	Procedure is explained fully and clearly to patient/client/resident.
		1.5	Patient is made as comfortable as possible and reassured by words and attitude.
		1.6	Results of assessment are reported as appropriate.
		1.7	Skin is assessed for normal findings and the development of common skin conditions.
		1.8	Universal precaution measures are maintained.
2.	Maintain skin integrity	2.1	Regular care for skin is provided to keep it dry and clean.
		2.2	Immobile clients are repositioned frequently.
		2.3	Frequent and thorough skin care is provided and change of clothing for incontinent clients is done.
		2.4	Factors that may cause skin irritations are removed.
		2.5	Skin is massaged frequently, using light, circular strokes to increase circulation.

- 2.6 Safety precautions are implemented during transfers to avoid pulling or tearing of skin.
- 2.7 Adequate nutrition and hydration status of the patient are maintained.
- 2.8 Skin care products that enhance skin integrity are utilized.
- 2.9 Cross-infection during care of different clients is avoided.
- 2.10 Client is involved in care activities to foster independence.
- 3. Implement correctives measures
  - 3.1 On-going assessment is conducted for skin conditions.
  - 3.2 Care is provided for skin conditions according to medical/nursing protocol as per facility.
  - 3.3 Proper nutrition and hydration of patient is maintained.
  - 3.4 Skin care products are appropriately applied.
  - 3.5 Changes that indicate a level of deterioration in skin condition eg fevers are observed.
  - 3.6 Agencies that can aid or assist person with chronic skin conditions are contacted.
  - 3.7 Client is educated regarding care activities to facilitate involvement.
  - 3.8 Aids/equipment is used appropriately.
- 4. Record and report abnormal findings.
  - 4.1 All relevant information is entered clearly and accurately in the necessary records.
  - 4.2 All abnormal findings are reported to the appropriate person.
  - 4.3 Documentation is completed as required by facility procedures/protocols.
  - 4.4 Adequate treatment is implemented and/or patient's need for referral to other medical specialists is correctly determined.

## RANGE STATEMENT

The Range Statement provides advice to interpret the scope and context of this unit of competency, allowing for differences between school -shops and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Skin conditions may include:

- dryness
- lesions
- dehydration
- pressure ulcers
- discolouration

Personal Protective Equipment may include:

- gloves
- protective clothing

Care activities may include assistance with:

- bathing
- range of motion
- massaging
- dressing of wound/ulcer
- perineal care
- application of skin products (prescribed/ non-prescribed)

Aids equipment used in skin care may include:

- bandages
- gauze/cotton
- tape
- dressing package
- shaving equipment
- sheepskin
- bed cradle
- heel/elbow protectors
- flotation pad
- egg crate mattress
- water beds
- Stryker frame
- Foot-boards

Skin Care Products may include:

- soaps
- bath oils
- creams and lotions
- powders
- Deodorants and antiperspirants

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

**(1) Critical Aspects of Evidence:**

Evidence of the following needs to be demonstrated:

- Accurately follow facility procedure for reporting skin condition and providing the adequate treatment option.
- Accurately report and document results obtained from skin assessment as well as treatment provided.

**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning knowledge and skills:**Knowledge

Knowledge of:

- any skin condition which provides invaluable information about the patient's condition
- skin dryness which can deal with oil glands disorder
- skin lesions such as: wheals, excoriations macules, pustules, etc., which are unusual
- state of hydration to determine malnutrition
- the appearance of wrinkles or new wrinkles which may indicate effect of aging or abnormalities
- the appearance of spots which may indicate skin discolouration or presence of cancerous cells
- loss of sensitivity which is considered value information about patient's health
- the presence of pressure ulcers because this refers to an important group of factors that may indicate poor blood circulation.
- intake/output imbalances which may be the cause of any skin problems.
- different equipment and aids used in treatment of skin conditions
- skin products and available services
- universal precautions

Skills

The ability to:

- observe individuals during routine care
- note observations of person's physical appearance
- discuss abnormal findings with supervisor
- maintain a productive patient-caregiver relationship
- promote good skin hygiene
- supervise patient's diet
- communicate ideas about better ways to mobilize patients
- manage difficult behaviour related to effect of aging.
- use equipment/aids and skin products
- perform range of motion exercises
- maintain safety during care activities
- perform universal precaution activities

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Enterprise Health and Safety Policies and Procedures.
- Personal Protective Equipment.
- Patients.
- Equipment/aids /skin products

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.



## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 2	
Work with others and in team	Level 2	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAHCA0072A: Administer nursing procedure under supervision**

Competency Descriptor:

This unit will deal with skills and knowledge relevant to provide assistance to care recipients receiving treatments with supervision.

Competency Field:

Allied Health – Health Care Assistance

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1	Change non-sterile dressing	1.1	Patients for the procedure are correctly identified.
		1.2	Equipment and supplies for intended use are collected and are in proper hygiene condition.
		1.3	The procedure is explained in terms that care recipient can understand.
		1.4	The types of dressings selected are in accordance with the physician's instructions.
		1.5	The dressing procedure is in accordance with the institutions/residential settings guidelines.
		1.6	The procedure is carried out in a manner that will promote patients independence.
		1.7	Infection control and other health and safety measures are applied correctly.
		1.8	Patients' condition or behaviour, which might signify inability to tolerate the procedure, is correctly identified.
		1.9	Need for further medical attention is correctly determined and actioned.
		1.10	Privacy is maintained throughout the procedure.
		1.11	Principles of medical asepsis are applied correctly.
		1.12	Records are kept current and accurate.
		1.13	Procedure is carried out correctly.

- 
- |   |                                     |      |  |
|---|-------------------------------------|------|--|
| 2 | Administer enema                    | 2.1  | Collection of equipment and supplies is correct for intended use and are in proper hygiene condition.  |
|   |                                     | 2.2  | Patient is appropriately informed and assured.   |
|   |                                     | 2.3  | The patient's comfort and dignity are maximized at all times.  |
|   |                                     | 2.4  | Factors, which may cause undue stress or distress to the patient, are minimized.   |
|   |                                     | 2.5  | Advice is sought promptly from the appropriate member of the care team.  |
|   |                                     | 2.6  | The patient is correctly positioned for the treatment.   |
|   |                                     | 2.7  | Apparatus for treatment is correctly set up and prepared.  |
|   |                                     | 2.8  | Care recipient is monitored throughout the procedure.  |
|   |                                     | 2.9  | Procedures in post-enema phase correct and appropriate to the patient.   |
|   |                                     | 2.10 | Treatment area is left clean and free of unpleasant odour.   |
|   |                                     | 2.11 | Specimen is collected, if ordered.   |
|   |                                     | 2.12 | Relevant information on the patient reported to other members of the care team and documentation is entered accurately in the necessary records. |
|   |                                     | 2.13 | Universal precautions are adhered to.  |
|   |                                     | 2.14 | Procedures are carried out correctly.  |
| 3 | Administer Urinary Elimination Care | 3.1  | Assessment of care recipients needs is done to determined appropriate care.  |
|   |                                     | 3.2  | Appropriate equipment is selected.   |
|   |                                     | 3.3  | Care procedures relating to urinary elimination is followed correctly.   |

- 3.4 Privacy is maintained throughout the procedures.
- 3.5 Support offered to patients is sensitive to their needs and concerns.
- 3.6 Principles of medical asepsis are applied correctly.
- 3.7 Care recipients are given appropriate help to be as comfortable as possible.
- 3.8 Appropriate cleansing agent for perineum care is selected.
- 3.9 Patient's comfort is correctly assessed.
- 3.10 Appropriate cleaning agent is selected to clean urinary equipment.
- 3.11 Unusual deviation from expected content and volume of urinary output is recognized promptly and appropriate action taken.
- 3.12 Cause for concern in the patient's condition and comfort is recognized and the appropriate action taken.
- 3.13 Procedure is carried out correctly.
- 3.14 Urinary equipment is checked for correct functioning and the appropriate action taken.
- 3.15 Information recorded is relevant, clear and accurate.
- 3.16 Universal precautions are practiced at all times.

**RANGE STATEMENT**

The range of variables explains the contexts within which the performance and knowledge requirements of this standard may be assessed. The scope of variables chosen in training assessment requirements may depend on the work situations and available resources.

The following variables may be present for this particular unit:

Individuals may include:

- Individuals across the developmental lifespan with or without disabilities

Characteristics of individuals may be:

- Care recipients with special needs
- Recipients requiring medication treatment
- Recipients for health maintenance

Caregiver's preparation should include:

- Universal precautions
- Assemble needed items for administration
- Appropriate preparation of care recipient
- Inventory check for appropriate

Principles of Medical Asepsis may include:

- Hand washing
- Treats breaks in the skin immediately
- Use of Personal Protective Equipment
- Bathe or shower daily
- Assist patients with their personal hygiene
- Never use one patient's items for another patient
- Keep patient personal care items in the proper area
- Disinfect bathtubs and shower chairs after each use according to facility procedure
- Disinfect equipment that is used by more than one health care provider or patient, such as stethoscope, before and after each use
- Disinfect personal care equipment such as bedpans, urinals, and commodes, according to facility procedure
- Be careful when handling bedpans and urinals after use to prevent spills and splashes. Use a cover when transporting
- Keep food and water supplies clean. Food trays are to remain covered until they reach their destination
- Do not allow patients to keep puddings or custards from meal trays. Bacteria multiply rapidly in these foods when they are not refrigerated
- Carry soiled equipment, supplies, and linens away from your uniform so that you do not spread microorganisms from patient to patient. Dispose items according to facility policy

- Do not use anything that has touches the floor without recleaning or sterilizing it first. If you are in doubt about whether an item is clean, do not use it. The floor is considered heavily contaminate d with pathogens
- Avoid raising dust
- Do not shake linens. This scatters contaminated dust and lint.
- Clean from least soiled areas toward the most soiled
- Keep work areas such as utility rooms clean. Return clean equipment to the proper storage areas after use

Patient's condition of behaviour may include:

- Allergy
- Pain
- Attitude

Supervisor may be:

- Matron of the institution
- Sister of the ward
- Nurse in charge
- Tutor

Position to place the patient in the administration of enema:

- Sim's position

Factors that may cause stress may include:

- Patient's position
- Volume of enema
- Privacy

Equipment for administration of urinary elimination care may include:

- Urinary catheter
- Urinary condom
- Urinals
- Bedpans/commode
- Drainage bag
- Measuring jug

Equipment for non-sterile dressing may include:

- Dressing set
- Sterile and non-sterile gloves
- Incopat

Unusual deviations may include:

- Defect urine output
- Excess urine output

Solutions:

- Peroxide
- Normal saline
- Eusol

Any abnormal characteristics:

- Cloudiness
- Presence of sediment
- Foul odour
- Concentration
- Presence of blood

Universal Precautions may include:

- Hand washing
- Use of personal protective equipment
- Patient-care equipment
- Environmental control
- Adequate disposal of linens

Equipment for administration of enema may include:

- Enema kit
- Gloves
- Bedpan/commode

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence

Evidence of the following needs to be demonstrated:

- Accurately follow workplace procedures for the use of appropriate equipment in the administration of nursing procedures
- Accurately follow workplace procedures to recognize person's needs
- Monitor persons as required according to the type of nursing procedure
- Accurately report and document abnormal findings
- Provide a safe environment to promote security
- Accurately implement Standards Precautions
- Ensure appropriate supervision is available

### (2) Pre-requisite Relationship of Units

- Nil

### (3) Underpinning Knowledge and Skills

#### Knowledge

Knowledge of:

- types of dressings
- equipment needed
- standard precautions
- anatomy and physiology of genitor - urinary system
- institution's guidelines
- ethical standards
- appropriate care measures

#### Skills

The ability to:

- read and write
- follow instructions
- detect abnormal findings
- discuss abnormal findings with the supervisor
- use equipment and supplies
- detect possible equipment faults
- deal with patient's behaviour
- document findings
- collect specimens and provide adequate storage
- demonstrate universal precautions

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Appropriate workplace where assessment can take place
- Relevant organization policy, protocols and procedures
- Equipment and resources normally used in the care facility

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- Direct observation / clinical sites evaluation.
- Oral questioning.
- Practical demonstrations.
- Written test.
- Course work / assignments.
- Performance approval from clinical site supervisor

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team.



## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 1	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 2	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

## **CSAHCA0092A: Observe muscular coordination, report findings and assist in corrective measures**

### Competency Descriptor:

This unit deals with the skills and knowledge required to observe and report weakness/deficiency in muscular coordination as well as assist in corrective measures.

### Competency Field:

Allied Health – Health Care Assistance

<b>ELEMENT OF COMPETENCY</b>		<b>PERFORMANCE CRITERIA</b>	
1.	Observe and document performance on specific tasks and activities	1.1	The reasons for observing the individual are made explicit to the client/patient.
		1.2	Any necessary agreements for a planned observation are secured with clients/patients, relatives, colleagues or other professionals.
		1.3	The manner of the approach and the establishment of rapport with the individual is made to ensure the client's/patient's co-operation.
		1.4	The environment and other circumstances of the observation is arranged to keep distractions and interruptions to a minimum.
		1.5	Facilitative techniques used are consistent with the objectives of the observation.
		1.6	Recording of the individual's performance is carried out promptly, accurately, legibly and in the required format.
		1.7	Observations of client are kept confidential.
2.	Report deficiencies in muscular coordination	2.1	The results of observations are presented in forms, which assist in the evaluation of the individual's development or behaviour.
		2.2	Report of the evidence took into account factors such as pain and/or joint stiffness, which affect its reliability and validity.
		2.3	Findings of observation are reported to the supervisor and appropriate personnel.

- |   |   |     |   |
|---|---|-----|---|
|   |   | 2.4 | Possible implications of the assessment of development or behaviour for the future care of the individual within the home are worked out as soon as possible, and suggestions made to the appropriate person. |
| 3 | Assist in the implementation of corrective measures | 3.1 | Procedures for corrective measures are followed in keeping within scope of practise.  |
|   |   | 3.2 | Feedback is given on client's/patients overall performance to appropriate personnel.  |

## RANGE STATEMENT

The Range statement provides details of the scope of the Elements and Performance Criteria to allow for differences within enterprises and workplaces, including practices, knowledge and requirements. The Range Statement also provides a focus for assessment and relates to the unit as a whole.

The following variables may be present

Types of performance may include:

- social and emotional behaviour
- language and communication
- aspects of intellectual and cognitive skills
- physical abilities and skills
- self help; health condition indicators

Types of tasks and activities may include:

- response to selected materials
- stimuli and activities
- performance on a specific structured task
- off-task behaviours

Types of observational data may include:

- observations of spontaneous or naturally occurring behaviours,
- observations of performance on selected tasks and activities

Types of recording may be:

- free description
- structured description
- use of pre-coded categories
- checklists

Types of health problems may include:

- malnutrition
- failure to thrive
- apathy
- recurrent illness
- chronic conditions
- weakness
- lack of movement

Modes of presentation of observation may be:

- written descriptive accounts;
- visual/graphical representation of data;
- completion of structured profiles or other pre-coded system for recording assessment

Developmental problems may include:

- chronic conditions
- developmental delay
- behaviour problems
- deviations from developmental norm
- slow physical/emotional progress
- disabilities

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

Evidence of the following needs to be demonstrated .

### (1) Critical Aspects of Evidence:

Evidence of the following needs to be demonstrated:

- Accurately follow facility procedures to observe individuals.
- Accurately follow facility procedure to assist with corrective measures.
- Accurately report and document any muscular coordination difficulty

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- the rationale for observing individuals performance on specific tasks and activities and ways in which the information obtained can be used
- possible sources of distractions/disruptions during observation of task performance and how to minimize these
- how to communicate instructions or requests effectively to individuals of different ages and characteristics in a one to one situation
- how and why young individuals behaviour may vary across test situations and the reasons why repeated observations are sometimes necessary including links between concentration, performance and distractibility
- how to record features of off task behaviour and the context in which they occur
- the uses of technology in presenting tasks or stimuli and recording performances on specific tasks and activities
- possible cultural, social and gender based influences on responses to structured test/assessment situations
- the various roles that an observer/facilitator might play in enabling an individual to demonstrate their full potential
- the importance of standardization and consistency of tasks, context and the role of the observer/facilitator in some formal test situations
- basic knowledge of the course of physical development, sensory and intellectual development, social and emotional development and language and communication skills
- the range of developmental behaviours which might be expected of individuals at different ages and stages of development including the elderly
- what counts as significant evidence from observations and the concepts of validity and reliability
- how to summarize data from observations and assessments
- how to relate examples of observed and assessed behaviours to accepted norms of behaviour
- general care plans or individualised programmes
- how to present information associated with set goals in an effective and appropriate way
- the importance of liaising with relatives and other professionals on client's/patient's behaviour, abilities and development
- the rights of individuals when being observed and assessed
- Limitations in using observation

**Skill**

The ability to:

- obtain cooperation from relatives/guardians, colleagues and other professionals
- to secure agreements for the observation with relatives/guardians, colleagues and other professionals
- to ensure cooperation from the individual
- to ensure the environment is arranged appropriately
- to use facilitative techniques
- to record observations
- to observe confidentiality
- to present results of observations for evaluation purposes
- to make preliminary assessments of a individual's behaviour or development

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- walking support such as canes, walker, crutches
- care facility with patients having varied muscular coordination deficiencies

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**BSBSBM0012A: Craft personal entrepreneurial strategy**

## Competency Descriptor:

This unit deals with the skills and knowledge required to craft an entrepreneurial strategy that fits with the attitudes, behaviours, management competencies and experience necessary for entrepreneurs to meet the requirements and demands of a specific opportunity.

Competency Field: Small Business Operations

**ELEMENT OF COMPETENCY PERFORMANCE CRITERIA**

1. Demonstrate knowledge of the nature of entrepreneurship	1.1	Concepts associated with entrepreneurship are clearly defined.
	1.2	Factors which influence entrepreneurship in and outside of Jamaica are correctly identified and explained.
	1.3	The importance of entrepreneurship to economic development and employment is explained clearly.
	1.4	The findings of research conducted on entrepreneurial ventures and successes in the Caribbean region are clearly presented in an appropriate format.
	1.5	Differences between wage employment and entrepreneurial ventures are correctly stated.
2. Identify and assess entrepreneurial characteristics	2.1	Relevant research is carried out and required entrepreneurial characteristics identified.
	2.2	Entrepreneurial characteristics identified are assessed and ranked.
	2.3	An understanding of the process and discipline that enable an individual to evaluate and shape choices and to initiate effective action is correctly demonstrated.
	2.4	Factors that will help an entrepreneur to manage the risk and uncertainties of the future, while maintaining a future orientated frame of mind, are identified.



- |    |                                   |     |   |
|----|-----------------------------------|-----|---|
| 3. | Develop self-assessment profile   | 3.1 | Self-assessment tools/methods to identify personal entrepreneurial potential are identified and properly used.  |
|    |                                   | 3.2 | The ability to apply creativity, problem-solving techniques and principles to solve business related problems are demonstrated.   |
|    |                                   | 3.3 | Feedback from others for the purpose of becoming aware of blind spots and for reinforcing or changing existing perceptions of strengths/ weaknesses is appropriately obtained.  |
| 4. | Craft an entrepreneurial strategy | 4.1 | A profile of the past that includes accomplishments and preferences in terms of life and work styles, coupled with a look into the future and an identification of what one would like to do is developed.                |
|    |                                   | 4.2 | Commitment, determination and perseverance; orientation towards goals; taking initiative and accepting personal responsibility; recognizing management competencies and identifying areas for development are determined. |
|    |                                   | 4.3 | Written guidelines to obtain feedback that is solicited, honest, straightforward, and helpful but not all positive or negative are developed to facilitate reviews.   |
|    |                                   | 4.4 | Framework and process for setting goals which demand time, self-discipline, commitment, dedication and practice are developed.  |
|    |                                   | 4.5 | Goals established are specific and concrete, measurable, relate to time, realistic and attainable.  |
|    |                                   | 4.6 | Priorities, including identifying conflicts and trade-offs and how these may be resolved are established.   |
|    |                                   | 4.7 | Potential problems, obstacles and risks in meeting goals are identified.  |
|    |                                   | 4.8 | Specified action steps that are to be performed in order to accomplish goals are identified.  |
|    |                                   | 4.9 | The method by which results will be measured is indicated.  |

- 4.10 Milestones for reviewing progress and tying these to specific dates on a calendar are established.
- 4.11 Sources of help to obtain resources are identified.
- 4.12 Evidence of the ability to review process and periodically revise goals is demonstrated.

## RANGE STATEMENT

At this stage of the entrepreneurial process the entrepreneur must be able to conduct a self-assessment profile, examine the frame work for self assessment, develop a personal entrepreneurial strategy, identify data to be collected in the self-assessment process and learn about receiving feedback and setting goals.

Concepts associated to include:

- risk
- entrepreneurship
- macro-screening
- micro-screening
- competition
- wage employment

Influencing factors to include:

- market conditions
- markets – demand/supply
- global trends
- level of economic activities
- funding
- economic stability
- social stability
- resources availability

The entrepreneur must be able to:

- understand the extreme complexity in predicting or aligning him/herself to specific careers in an environment of constant change
- determine the kind of entrepreneur he or she wants to become based on attitudes, behaviours, competencies, experience and how these fit with the requirements and demands for a specific opportunity
- evaluate thoroughly his or her attraction to entrepreneurship
- effectively develop personal plan
- utilize available information that will enhance his or her ability to achieve success

The entrepreneur may encounter setbacks if the planning process is not effectively pursued.

Pitfalls may include:

- proceeding without effective planning which may result in commitment to uncertainty
- commitment to a premature path with the desirability of flexibility can lead to disaster
- personal plans fail for the same reasons as business plans including frustration if the plan appears not to be working immediately and the challenges of changing behaviour from an activity-oriented routine to one that is goal oriented
- developing plans that fail to anticipate obstacles, and those that lack progress milestones and reviews

## EVIDENCE GUIDE

Competency is to be demonstrated when the entrepreneur is able to undertake a personal entrepreneurial assessment exercise to determine if he or she possesses the necessary credentials to be a successful entrepreneur. This stage of the entrepreneurial process is critical since experience has shown that the founder is one of the deciding forces if the venture is to succeed and prosper.

### (1) Critical Aspects of Evidence

The entrepreneur will be assessed by his/her action in developing an orchestrated plan in order to effectively pursue the business concept.

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- personal entrepreneurial profile systems
- effective management systems: marketing, operations/productions, finance, administration, law
- how to measure feedback
- the method of developing a personal plan and a business plan
- understanding the difference between entrepreneurial culture and management culture

Skills

The ability to:

- determine barriers to entrepreneurship
- minimize exposure to risk
- exploit any available resource pool
- tailor reward systems to meet a particular situation
- effectively plan and execute activities
- use computer technology to undertake assessments

**(4) Resource Implications**

The following resources should be made available:

Personal computer with access to the internet and appropriate software that will enable one to conduct the necessary analysis using the internet

**(5) Method of Assessment**

A useful method of assessment is to determine if the venture can stand up to the test of critical evaluation.

**(6) Context of Assessment**

This stage of the entrepreneurial process is assessed when comparisons are made between actual outcomes and plans/projections.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1	Level 2	Level 3
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 1	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 1	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 1	
Use technology	Level 1	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAHCA0023A: Observe, detect and respond to signs of abuse**

## Competency Descriptor:

This unit deals with the skills and knowledge required to identify signs and symptoms of possible abuse as well as the care that an abused person should receive.

## Competency Field:

Allied Health – Health Care Assistance

ELEMENT OF COMPETENCY	PERFORMANCE CRITERIA
1. Identify signs and symptoms of possible abuse	1.1 Irregular bruises and other abrasions are identified, observed and accurately record. 1.2 Indications of deviations from routine physical care are identified and noted or reported as appropriate. 1.3 Significant negative changes in behaviour are promptly identified through observation of individuals' behaviour. 1.4 Notes are taken of explanations of injuries, abrasions or changes in behaviour offered by individuals, relatives or other caregivers accurately recorded. 1.5 All available information is considered in evaluating the significance of signs and symptoms of abuse. 1.6 Behavioural changes in patient/client that may indicate a potential abuse are observed. 1.7 Actions are taken in relation to signs and symptoms of abuse consistent with agency/ home procedures. 1.8 Judging and blaming abused individuals are avoided.
2. Care for abused or neglected individuals	2.1 Interaction with clients demonstrated responsiveness to needs and attempts at communication. 2.2 Expectations of personal and social behaviour are realistic for the level of development of client while taking into account the possible effects of abusive experiences. 2.3 Contributions are responded to in a manner likely to make client feel valued and to enhance self-esteem.

- 2.4 Non-compliance with some requests is negotiated and reassurances given that threats or physical punishment are not resorted to.
- 2.5 Difficult behaviour is managed in ways that are likely to promote the development of more acceptable alternatives without further undermining self-esteem.
- 2.6 Violent or destructive outbursts are handled in a calm, rational manner and minimum physical restraint used is consistent with maintaining safety.
- 2.7 Advice is promptly sought from an appropriate person if behaviour continues or is beyond the worker's knowledge and experience to deal with.
- 2.8 Assistance is given where necessary to develop positive relationships.
- 2.9 Caregiver is cognizant of clients' rights.
- 2.10 All information obtained from the patient is kept confidentially and only reported to the right person

## RANGE STATEMENT

The Range statement provides advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Types of abuse may include:

- Physical abuse
- Emotional abuse
- Neglect abuse
- Sexual abuse
- Verbal abuse
- Self-abuse
- Involuntary seclusion
- Social abuse
- Psychological abuse

Personal and social behaviour may include:

- Aggression
- Withdrawal
- Depression
- Self-mutilation
- Docile incontinent

Signs and/or symptoms of abuse may include:

- fingerprint bruising
- bilateral bruising
- scalds/dip marks with clear boundary
- reddening and soreness of the anus or genital area
- frozen watchfulness
- regression
- simulated sexual acts in play with other individuals or dolls etc.,
- repeated absenteeism
- a change in personality
- signs of neglect such as poor personal hygiene
- violence and aggression
- neglect and failure to thrive

Age band:

- infants,
- children,
- adolescents,
- adults,
- elderly

Routine physical care may include:

- bathing
- oral hygiene
- measuring vital signs

Level of development may include:

- Physical
- Mental

Situations in which abuse may take place may include:

- where the abused is closely involved with alleged abuser
- where the abused is left in the care of the abuser
- where the abused is threatened

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide, which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.



**(1) Critical Aspects of Evidence:**

Evidence of the following needs to be demonstrated:

- accurately follow facility procedures for detecting and reporting signs and symptoms of abuse
- accurately follow facility procedures for reporting any caregivers' behavioural changes in relation to patients/clients
- respond to signs/symptoms of abuse
- provide appropriate treatment to and monitor patient's/client's condition
- accurately report and document signs and symptoms of abuse as well as refer client/patient for appropriate treatment.

**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- physical injuries, bruises and abrasions in unusual sites or configurations compared with those likely to have been inflicted during play or other evidence of deliberate inflicted injury; inflammation, infection and bleeding of genital area and anus and other evidence of sexual activity; hair injury, toxic ingestion, burns/scalds, poor standards of hygiene, infection and infestation, weight loss or growth restriction and other physical signs of chronic neglect and failure to thrive
- self destructive behaviours, unprovoked aggression and anti-social behaviour, withdrawal and isolation, inappropriate sexual play, precocious sexual or sexualised behaviour, frozen watchfulness, eating disorders, sleep disturbance and nightmares, stress linked enuresis, regression, over-compliance and indiscriminate affection and other symptoms of behavioural disturbance (fear /phobias)
- depression, mood swings, apathy, low self esteem and other emotional indicators of possible abuse
- how to recognize, describe and record the appearance of bruises, abrasions and other injuries in different locations and on different skin types (including use of diagrams as an aid) and the importance of dating records
- a general awareness of the circumstances, lifestyles, relationships and particular pressures on families whose individuals are in the care of the worker
- ways of observing and monitoring individuals with signs and symptoms of possible abuse
- the person protection procedures of the home/ agency and how, when and to whom to report suspected abuse
- the normal rules and boundaries of information sharing and confidentiality within the home/agency and the circumstances under which these may be breached
- the importance of adhering to regulations laid down in the home with regard to person abuse
- the importance of informing supervisor of explanations given by parent/guardian/carer

Knowledge (cont'd)

Knowledge of:

- the importance of involving relatives from the early stages of enquiries
- the influence of cultural, racial and gender stereotyping on interpretation of signs and symptoms of possible abuse and how to counteract this
- ways in which development and behaviour may be affected by abuse
- sources of expert help and advice for individuals whose behaviour gives cause for concern and how and when to access them
- the importance of self esteem in cushioning the effects of abuse, indicators of low self esteem and how to promote self esteem and the development of a positive self image in individuals who may have been abused
- methods of handling and managing difficult behaviour including the basic principles of behaviour modification
- appropriate methods of communicating and negotiating with individuals
- ways of safely restraining individuals to prevent them from hurting themselves or others
- how to control oneself and remain calm under stress (self-control)
- the importance of the relationship with parents/ guardians/significant others for individuals regardless of whether the relationship has been abusive and how to help individuals and parents/guardians build more positive relationships
- types of abuse
- legal and ethical framework that relates to abuse
- agencies for referrals

Skill

The ability to:

- observe individuals during routine care giving functions and other activities
- observe individuals' behaviour to ensure that significant negative changes in behaviour are identified
- note observations of person's physical appearance (limb, skin abnormalities, bruises in various stages of healing)
- note unusual discharge/redness/soreness of anus or genital area
- note signs of bleeding in urine or from anus or genital area
- note whimpering/wincing and other manifestation of pain when held
- note withdrawal, depression and other signs of emotional disturbance
- note fear or agitation when in the presence of particular adult or caregiver
- report observations about any concerns, unexplained injuries and how these are dealt with
- record and maintain log books about behaviour pattern and any inconsistency which appears inappropriate
- note continuous /high rate of absenteeism
- observe and note abnormal simulation of sexual activities towards others
- discuss outstanding cause for concern with supervisor
- interact with a person who may have been abused or neglected
- negotiate with the abused for compliance with requests

**Skill (cont'd)**

- manage difficult behaviour in abused/neglected individuals
- handle violent or destructive outbursts
- seek advice regarding continuing concerns about a person's behaviour
- provide support and encouragement to parents/guardians
- assist the abused to develop positive relationships with parents/guardians and significant others
- build positive relationship with abused persons

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Personal Protective Equipment (PPE)
- Patients/clients.
- Procedure and policy documents
- Report books
- Telephone
- Patient chart/document
- Private area

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 1	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 1	
Solve problems	Level 2	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAGEC0013A****Co-ordinate work in the aged care sector**

## Competency Descriptor:

This unit deals with the skills and knowledge required to perform work within a legislative and ethical framework to ensure the provision of high quality service delivery, which supports the rights, and interests of aged people

## Competency Field:

Allied Health - Geriatric Care

<b>ELEMENT OF COMPETENCY</b>		<b>PERFORMANCE CRITERIA</b>	
1	Demonstrate commitment to the delivery of high quality services to elderly people	1.1	All work undertaken demonstrated an understanding of the context, models of service delivery, values and philosophy of aged care.
		1.2	All work undertaken is consistent with current policies and legislative requirements.
		1.3	All work done reflected an understanding of the issues facing aged people and their carers.
		1.4	All work in the sector demonstrated a commitment to access and equity principles.
2	Support rights, interests and needs of elderly persons	2.1	Aged person is supported and encouraged to exercise their rights and personal preferences where appropriate.
		2.2	Protocols and procedures are established and implemented for managing service delivery to reflect best practice in working in the aged care sector.
		2.3	Barriers within the organisation which impact on the delivery of a high quality service delivery are identified and addressed.
		2.4	Procedures implemented for management of service delivery are regularly updated to reflect current best practice, relevant legislative changes, and changing client needs.
3	Develop inter-sectorial collaboration with other agencies working with the aged	3.1	Knowledge of government agencies that offer aged client benefits is demonstrated.
		3.2	Knowledge of non-governmental agencies that offer services to aged-clients is demonstrated.

- 3.3 Knowledge of governmental, non-governmental and private agency services that are offered at the local levels is demonstrated.
- 3.4 Elderly persons are assisted to access governmental, non-governmental and private services.
- 3.5 The criterion to benefit from governmental, non-governmental and private services is explained to the elderly.

## RANGE STATEMENT

The Range statement provides advice to interpret the scope and context of this unit of competence, allowing for differences between enterprises and workplaces. It relates to the unit as a whole and facilitates holistic assessment.

The following variables may be present for this particular unit:

Context may include:

- statutory framework within which work takes place
- historical context of work e.g. changing attitudes to ageing; changing approaches to working with clients
- changing social context of work e.g. Client centred approach, changing government and societal views of aged care, approaches to working with clients,
- political context e.g. government policies and initiatives affecting aged care work
- private sector/ non governmental context e.g. NGO, International Agencies, Church Groups
- economic context e.g. the current economic situation as it relates to and affects aged care and the subsequent impact on client needs
- facts/myths about ageing

The underpinning values and philosophies of the sector may include:

- a holistic and client-centred approach
- community education
- promotion of mental health and wellbeing
- early intervention
- targeting of appropriate services
- commitment to meeting the needs and upholding the rights of clients
- commitment to empowering clients
- enlisting support of local community groups

Barriers may include:

- negative personal attitudes and values of staff
- organisational procedures and practices
- client service strategies
- social, cultural and religious
- physical
- economic

Policy and legislative requirements include:

- Privacy Act
- Freedom of Information Act
- Individual rights/ care recipient & care giver
- Residential Aged Care Service Standards
- National Policy on Ageing 1997
- Nurses Act
- Medical Act
- Pharmacy Act
- Poisons Act
- Medication regulations

A commitment to principles of access and equity may include:

- creation of a client oriented culture
- a non discriminatory approach to all people using the service, their family and friends, the general public and co workers
- ensuring the work undertaken takes account of and caters for differences including: cultural, physical, religious, economic, social

Rights may be detailed in:

- resident handbooks
- mission statements
- legislation
- nursing/ caregiver and organisational service standards

Issues may include:

- coming to terms with the ageing process
- access to community resources - private sector/ government, NGO
- changing needs for physical comfort, sleep and rest
- death, grieving and loss
- changes that ageing may bring to physical processes, memory, intellectual function, personality and social interaction
- need for support and care
- changes that ageing may bring which necessitates changing physical environment

Rights include principles expressed in:

- charters of rights
- outcomes standards documents
- general human rights
- freedom from discrimination
- freedom of information
- outcomes standards
- service standards

Rights may include:

- privacy
- confidentiality
- to be treated in a dignified, safe and comfortable manner
- to express own feelings
- freedom of association
- choice to participate
- access to complaint mechanisms

Needs may include:

- personal
- security
- safety
- financial
- accommodation
- social
- recreational
- physical comfort

Service delivery may include:

- care and support
- community development and education
- health promotion
- case management
- working with families
- peer support/self help
- residential services
- respite care
- home based support
- unpaid work – voluntary

Strategies may include those to address:

- management systems, staffing and organisational development
- health and personal care of the client
- client lifestyle
- physical environment and safety systems
- accreditation
- service standards
- continuous improvement
- visitors

Protocols may include:

- communication with clients
- assessment of client needs
- collection, recording and reporting of information
- processes for decision making for consideration of client needs

## EVIDENCE GUIDE

Competency is to be demonstrated by effectively co-ordinating work in the aged sector in accordance with the performance criteria and the range listed within the range of variables statement.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

### (1) Critical Aspects of Evidence

Evidence of the following needs to be demonstrated:

- Demonstrate commitment to the delivery of high quality services to aged persons
- Upholds and supports the rights, interests and needs of aged people in the workplace
- Develop inter-sectorial collaboration with other agencies working with the aged

### (2) Pre-requisite Relationship of Units

- Nil



**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- the ageing process
- holistic and client centred care
- client needs and rights including duty of care
- principles of client empowerment/disempowerment
- principles of access and equity
- current issues facing clients and existing services to address their needs and rights
- principles and practices of confidentiality
- knowledge specific to working with people from culturally and social and religious diverse backgrounds
- knowledge specific to working with people at risk of self harm
- organisational policies, practices and programs relating to the work role
- organisational occupational health and safety policies and procedures
- rights and responsibilities of the aged person
- stereotypes of ageing
- awareness of own attitudes to ageing
- awareness of discriminatory actions
- common health problems of the aged and their effects including dementia and sensory disability
- common risks to safety
- palliative care
- depending on the work role or services provided, specific knowledge of particular groups or issues may be required e.g.
- alcohol and other drugs
- cultural social and religious diversity
- risk of self harm
- women
- men
- community education
- mental health
- Basic knowledge of local and international agencies working with aged care
- Basic knowledge of NGO, working with aged care
- Basic knowledge of services offered, and how to access these for aged clients

Skills

The ability to:

- read, write , interpret basic legislative and ethical instructions
- make appropriate notations in client's records and complete relevant forms
- communicate with clients and other stakeholders
- obtain and maintain cooperation of other stake holders, colleagues, other professionals

**(4) Resource Implications**

Competences in this unit may be assessed through access to:

- National and International Rights and Conventions of care
- Simulation of realistic workplace setting for assessment

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer
- evidence gathering from National Ageing Care Organization

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

Competency may be assessed in the workplace or simulated workplace setting. Assessment should be while tasks are undertaken either individually or as part of a team under limited supervision.

## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 2	
Communicate ideas and information	Level 1	
Plan and organise activities	Level 2	
Work with others and in team	Level 1	
Use mathematical ideas and techniques	Level 2	
Solve problems	Level 3	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

## CSAHCA0033A: Promote sensory and motor skills development

Competency Descriptor:

This unit deals with the skills and knowledge required to provide sensory and motor skills development.

Competency Field:

Allied Health – Health Care Assistance

ELEMENT OF COMPETENCY		PERFORMANCE CRITERIA	
1.	Develop plan to promote sensory and motor development	1.1	Creation of a developmental programme reflects knowledge and understanding of the importance of sensory experiences in the overall development process of clients/patients.
		1.2	A stimulating environment is provided to promote sensory and motor development.
		1.3	Support is given to staff in the provision of sensory experiences for individuals do not inhibit the development of their skills and imagination.
		1.4	Flexible approaches are encouraged and supported.
		1.5	The programme provided for motor skill development ensures opportunities for individuals to develop confidence and to enjoy the activities.
		1.6	Developmental programme are provided to balances opportunities for structured activities with spontaneous responses.
		1.7	Movement and changes are within safe limits.
2.	Create developmental programme for sensory and motor skills	2.1	Programmes for stimulating physical development are appropriately designed and implemented.
		2.2	Direction and supervision of caregiver in stimulation activities are correctly instituted and maintained.
		2.3	Communication techniques are consistent with client's level of development.
		2.4	Nutritional programmes are appropriate to the needs of clients and take into account factors impacting on their development.

- 2.5 Programmes are provided to promote physical growth and development is appropriate.
- 2.6 Environment established is safe and secure.
- 2.7 Health and safety procedures are appropriately established and effectively maintained.
- 2.8 Guidelines for and supervision of caregiver are appropriately developed and effectively maintained.

## RANGE STATEMENT

The Range statement provides details of the scope of the Elements and Performance Criteria to allow for differences within enterprises and workplaces, including practices, knowledge and requirements. The Range Statement also provides a focus for assessment and relates to the unit as a whole.

The following variables may be present

Characteristics of individuals may be:

- individuals with sensory impairment of different types and those without

Sensory experiences may include:

- using sight, hearing, touch, smell and taste

Types of environment may be:

- indoors, outdoors, constructed, natural

Location may be:

- indoors, outdoors

Programmes include:

- provisions for exploration and discovery; toys, materials and activities; structured routines for play and interaction; techniques to ensure responsiveness of individuals and participation of relatives; pre-language development

Developmental programmes include:

- activities planned by staff; equipment and resources made available for use; approaches and techniques used to enhance involvement in sensory, physical, social/emotional, intellectual and language experiences

Flexible approaches include:

- the use of unplanned opportunities and adopted activities

Communication techniques include:

- The effective use of stimuli, eg. Colour, texture, touch, taste; the encouragement and reinforcement of efforts to communicate

Environmental factors include:

- an appropriate level of cleanliness, security and consistency of care; flexible routines; ongoing support to staff in the handling of and interaction with individuals; administration of treatments and medicines; ill-health or deviant behaviour; contact and communication with relatives/guardians in case of emergency

Impacting factors include:

- the facilitation of breastfeeding; communication with relatives; the introduction of complementary feeding; efficient and safe preparation of feeds; the creation of a relaxed atmosphere conducive to effective feeding; the use of specialized equipment; the encouragement of independent feeding; cultural and religious practices of families.

Physical growth and development programmes include:

- the use of space and equipment; techniques to assist the development of hand-eye coordination and motor skills; opportunities to exercise; giving praise, assistance and encouragement

Stimulating environment may include:

- Games, books, toys, music and dance, arrangement of fixtures, colours and shapes

Health and safety procedures include:

- the maintenance of equipment and clothing used for or by individuals; the containment and prevention of infection; the use of universal precautions; the storage and disposal of items to prevent contamination or accident

Guidelines for and supervision of staff ensure that:

- personal hygiene standards are maintained; care practices are sensitively and efficiently carried out; universal precautions are understood and used appropriately and that interaction with individuals is maintained

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

Evidence of the following needs to be demonstrated.

**(1) Critical Aspects of Evidence:**

Evidence of the following needs to be demonstrated.

- Accurately follow facility procedure for working with patient/client who may suffer any type of sensory and/or motor problems.
- Accurately follow facility procedure to implement developmental programs.
- Verify that the program is suitable for the type of condition the patient exhibits.
- Accurately report and document sensory and motor problems found as well as program implemented.

**(2) Pre-requisite Relationship of Units**

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- the course of sensory and motor development between birth and 12 years and how this relates to other aspects of development in children
- the idea of milestones based on normative measurements and a maturational model of development, with awareness of its limitations
- the concept of perception; the different types of perception: visual, auditory, tactile and their role in development
- the needs and rights of individuals with respect to sensory and motor development
- the possible environmental, physical, social, cultural and genetic factors which can enhance or impair sensory and motor development
- the particular differences individuals face if they experience sensory impairment
- growth and development of individuals and how this can be affected by social, emotional and physical environment
- standards of health and safety which should be maintained in the care environment
- how caring of individuals may vary with different cultures and individual needs
- the importance of designing a stimulating programme for individuals
- the practical and organizational considerations in the supervision of programme delivery
- methods of direction and supervision of staff at lower levels
- communication techniques with individuals and how to demonstrate them to staff
- infant nutrition and its importance to development
- importance of consistency of care approaches with those of relatives/primary caregivers
- developmental objectives for physical care, growth and development
- maintenance of equipment and development of environment for individuals
- health and safety issues in the care of individuals

Skill

The ability to:

- to create a developmental programme for sensory development
- to provide an environment for promoting sensory and motor development
- to give support to staff in the provision of sensory experiences
- to encourage and support flexible approaches
- to provide a programme for motor skills development
- to design and implement programmes
- to direct and supervise staff
- to use communication techniques
- to devise nutritional and physical care programmes
- to establish environment for individuals
- to provide programmes for physical development
- to establish health and safety procedures
- to develop and maintain guidelines for staff
- to detect sensory and motor difficulties
- to select the correct program that best suits the sensory/motor difficulty



**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Indoor and outdoor areas.
- Patient/client
- Any type of toys (in case of children)
- Paints
- Manual
- Audio-visual aids:
  - PC
  - Books
  - Videos

**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

It may be possible to assess more than one element or unit of competency at the same time if the appropriate situation occurs in workplace or an appropriate simulated situation is designed.

**(6) Context of Assessment**

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## CRITICAL EMPLOYABILITY SKILLS

Three levels of performance denote level of competency required to perform a task. These levels do not relate to the NCTVET Qualifications Framework. They relate to the seven areas of generic competency that underpin effective workplace practices.

Levels of Competency		
Level 1.	Level 2.	Level 3.
<ul style="list-style-type: none"> <li>Carries out established processes</li> <li>Makes judgement of quality using given criteria</li> </ul>	<ul style="list-style-type: none"> <li>Manages process</li> <li>Selects the criteria for the evaluation process</li> </ul>	<ul style="list-style-type: none"> <li>Establishes principles and procedures</li> <li>Evaluates and reshapes process</li> <li>Establishes criteria for evaluation</li> </ul>

Collect, analyse and organise information	Level 3	
Communicate ideas and information	Level 2	
Plan and organise activities	Level 3	
Work with others and in team	Level 2	
Use mathematical ideas and techniques	Level 2	
Solve problems	Level 3	
Use technology	Level 2	

Please refer to the Assessment Guidelines for advice on how to use the Critical Employability Skills.

**CSAHCA0043A: Maintain and control stock**

Competency Descriptor:

This unit describe the knowledge and skills required to monitor and maintain stock in the workplace.

Competency Field:

Allied Health

ELEMENT OF COMPETENCY	PERFORMANCE CRITERIA
1. Monitor stock levels	1.1 Stock level is monitored at agreed intervals. 1.2 Information about stock levels and usage is recorded accurately as required. 1.3 Information about the need for replenishment is recorded and passed to the appropriate person according to the procedures of the home. 1.4 Storage arrangements comply with the health and safety requirements of the home. 1.5 Storage arrangements are suitable for the nature of the stock. 1.6 Stock is monitored for hygiene, deterioration and contamination and any adjustments needed are reported to the appropriate person. 1.7 Stock is arranged in storage to maximizes ease of access for users and allows for older stock to be used in advance of new stock
2. Maintain inventory records	2.1 Office equipment, furniture and materials/equipment are accurately listed. 2.2 Inventory record is completed for each item of furniture and equipment according to procedures. 2.3 Serial number and location of equipment is verified. 2.4 Inventory is accurately updated with newly purchased items. 2.5 Items are disposed of or deleted from inventory records with appropriate notation.

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- 2.6 Inventory is periodically reviewed and verified with appropriate staff in the home.
  - 2.7 Records are kept current, accurate and legible.
  - 2.8 Safe working practices are implemented.
  - 2.9 Security procedures are implemented and maintained.
3. Prepare cost justifications
- 3.1 Need for office furniture/equipment/materials is accurately identified.
  - 3.2 Budget information is reviewed and approval for purchase is obtained.
  - 3.3 Availability of appropriate furniture/equipment/materials/equipment is researched.
  - 3.4 Advantages and disadvantages of items under consideration are identified.
  - 3.5 Compatibility with current stocks and supplies are assessed and documented.
  - 3.6 Cost justification of options is prepared in a clear and logical fashion.
  - 3.7 Cost justification included all pertinent and accurate information to facilitate decision making.
  - 3.8 Cost justification is submitted for approval in a timely manner.
  - 3.9 Confidentiality is maintained.
4. Purchase goods and services
- 4.1 Requirements for purchase of equipment, materials and supplies are monitored at regular intervals and recorded accurately according to the procedures of the home.
  - 4.2 Details of suppliers of relevant equipment and materials are accurately identified and current details of prices or quotations obtained as required by the procedures of the home.
  - 4.3 Sources of relevant equipment available are accurately identified and utilized as far as practicable and consistent with the policies of the home.

- 4.4 Decisions or recommendations to purchase are consistent with agreed policies for the home and within the constraints of budgetary allocation.
- 4.5 The procedures of the home for selecting, ordering and purchasing materials and equipment is adhered to.
- 4.6 Orders placed with suppliers are accurate and legible.
- 4.7 Ordered goods are checked against relevant documentation immediately on delivery and discrepancies queried promptly.
- 4.8 Non-delivery of any order is followed up promptly with the supplier or the appropriate person alerted.
- 4.9 Inventories of equipment amended are promptly and accurately on the acquisition or disposal of equipment.
- 4.10 Materials are marked clearly and stored safely as soon as possible after delivery.

## RANGE STATEMENT

The Range statement provides details of the scope of the Elements and Performance Criteria to allow for differences within enterprises and workplaces, including practices, knowledge and requirements. The Range of Variables also provides a focus for assessment and relates to the unit as a whole.

The following variables may be present:

Type of stock may include:

- materials for use by individuals, cleaning materials, stationery

Appropriate notation to include:

- date and basis of disposal (eg. resale, donation)

Records may include:

- manual and computerized records

Inventory record to include:

- serial number, date purchased, purchase price, information about maintenance contract, description of equipment and furniture

Appropriate personnel may include:

- users of equipment and furniture, persons responsible for equipment and furniture

Research may include:

- review of literature, visits to installation with similar equipment/furniture/materials meeting with vendor representatives

Pertinent information may include:

- price, savings related to increased output and reduced turnaround time, ease of use, quality, cost of training for effective use of equipment, warranties, maintenance requirements

Requirements for purchases may include:

- procedures of home for reordering, purchasing on cash and credit basis

Acquisition options may include:

- leasing, renting, cash purchase, credit purchase

Types of equipment/materials may include:

- new, replacement, perishable materials, durables

## EVIDENCE GUIDE

Each Unit of Competency has an Evidence Guide which relates directly to the Performance Criteria and the Range Statements. Its purpose is to guide assessment of the unit of competency in the workplace or a training programme. The following components provide information to assist this purpose.

These relate to particular knowledge and skills that are considered essential to demonstrate competency in this unit.

Evidence of the following needs to be demonstrated .

### (1) Critical Aspects of Evidence:

Evidence of the following needs to be demonstrated:

- Accurately follow workplace procedures for monitoring and maintaining stock
- Accurately follow workplace procedures to recognize the needs of the work place
- Accurately report and document abnormal findings as well as solutions implemented

### (2) Pre-requisite Relationship of Units

- Nil

**(3) Underpinning Knowledge and Skills**Knowledge

Knowledge of:

- how to record stock
- the procedures of the home for dealing with shortfalls in materials
- health and safety requirements for storage and use of materials
- materials which may deteriorate or become contaminated and how to prevent or delay this
- the importance of observing 'first in first out' in stock control
- the range of safe working practices
- the importance of security procedures
- the importance of systematic and thorough attention to organizational detail
- the need for regular review, monitoring and consistent maintenance of inventory
- methods of producing an inventory
- organizational and procedural requirements of the home as they relate to the inventory and insurance
- guidelines for the equipment and materials required
- range of products and prices available locally which can meet the requirements
- the need to justify use of imported equipment where local manufacturers cannot/do not provide
- standard/range of equipment and materials
- how locally produced furniture and equipment can meet the needs of the home
- how costs of imported products, or those purchased abroad, compare favourably with those purchased locally
- importance of planning within budgets for anticipated costs
- the procedures of the home concerning ordering or hiring equipment and materials
- how to maintain simple inventories of equipment
- suitable and safe methods of storing different types of materials
- suitable suppliers of relevant equipment and materials
- how to record stock levels

**Skill**

The ability to:

- monitor stock levels according to timetable
- record information regarding stock in the required format
- record need for replenishment
- implement arrangements for storage according to safety guidelines
- ensure stock is stored in conditions appropriate for maintenance
- monitor stock for hygiene, deterioration and contamination and to report concerns
- implement arrangements for access to stock
- list office equipment, furniture and materials/equipment
- complete inventory
- verify serial numbers and location of equipment
- update inventory records
- review inventory
- maintain records
- implement safe working practices
- implement security procedures
- identify needs
- review budget information
- research availability
- consider advantages and disadvantages
- assess and document compatibility
- prepare cost justification
- submit cost justification
- maintain confidentiality
- monitor requirements for purchasing
- maintain list of suppliers
- identify loan arrangements
- place orders with suppliers
- check purchases on delivery
- take action regarding non-delivery of purchases
- mark and store supplies

**(4) Resource Implications**

Competency in this unit may be assessed through access to:

- Appropriate workplace where assessment can take place
- Relevant organization policy, protocols and procedures
- Equipment and resources normally used in the workplace



**(5) Method of Assessment**

In order to ensure consistency in performance and identified situational variables it will be necessary to collect evidence across a range of clients.

Evidence may be collected in a variety of ways including:

- direct observation
- oral questioning
- written test
- authenticated assessments and/or assignments from relevant training courses
- supporting statement from supervisor or previous employer

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