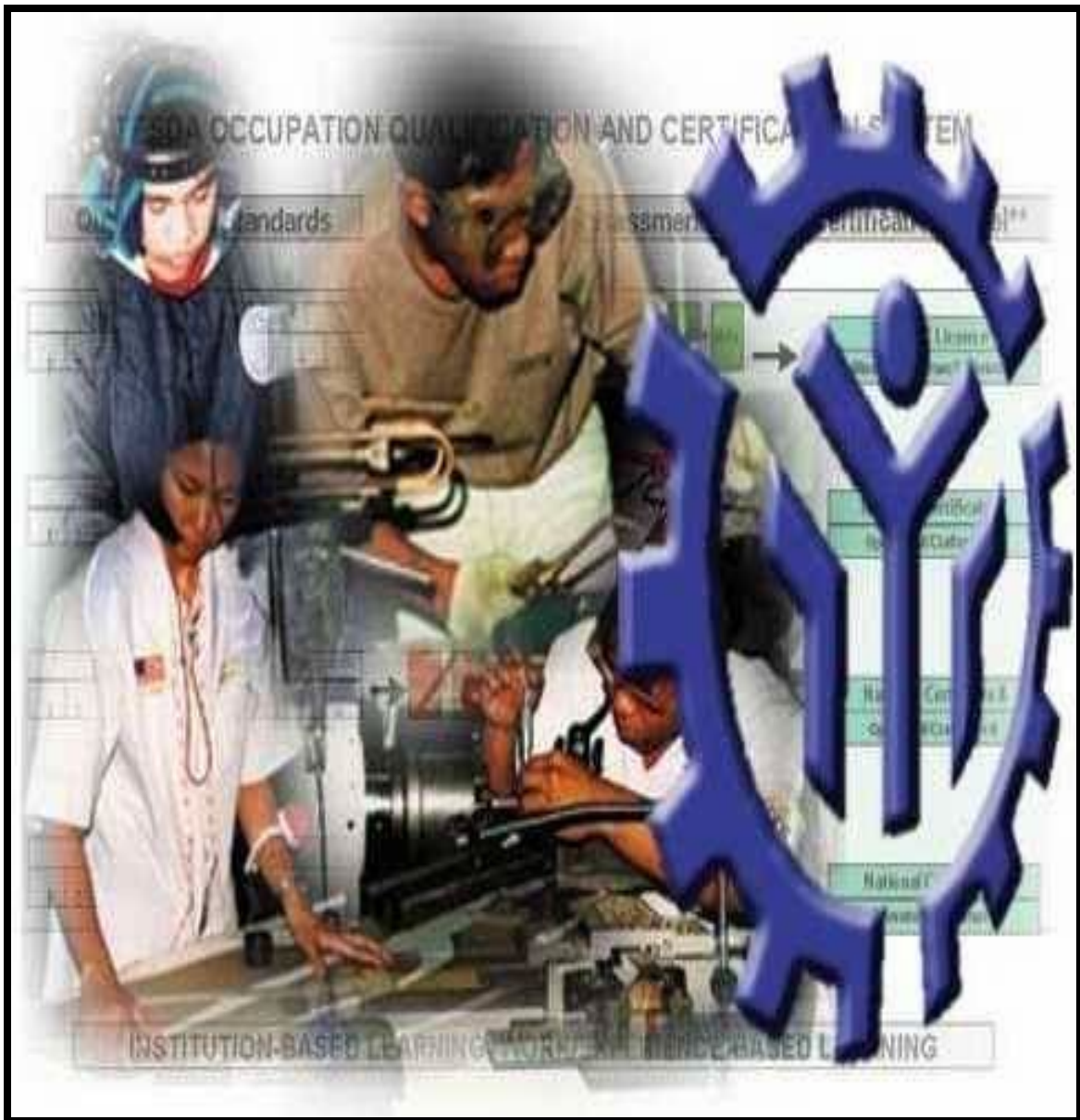


TRAINING REGULATIONS

HEALTH CARE SERVICES NC II



HEALTH, SOCIAL, AND OTHER COMMUNITY DEVELOPMENT SERVICES SECTOR

Technical Education and Skills Development Authority

East Service Road, South Superhighway, Taguig, Metro Manila

*Technical Education and Skills Development Act of 1994
(Republic Act No. 7796)*

Section 22, “Establishment and Administration of the National Trade Skills Standards” of the RA 7796 known as the TESDA Act mandates TESDA to establish national occupational skill standards. The Authority shall develop and implement a certification and accreditation program in which private industry group and trade associations are accredited to conduct approved trade tests, and the local government units to promote such trade testing activities in their respective areas in accordance with the guidelines to be set by the Authority.

The Training Regulations (TR) serve as basis for the:

1. Competency assessment and certification;
2. Registration and delivery of training programs; and
3. Development of curriculum and assessment instruments.

Each training regulations has four sections:

- Section 1 Definition of Qualification - refers to the group of competencies that describes the different functions of the qualification.
- Section 2 Competency Standards - gives the specifications of competencies required for effective work performance.
- Section 3 Training Standards - contains information and requirements in designing training program for certain Qualification. It includes curriculum design, training delivery; trainee entry requirements; tools and requirements; tools and equipment; training facilities and trainer's qualification.
- Section 4 National Assessment and Certification Arrangement - describes the policies governing assessment and certification procedure

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DEVELOPMENT SERVICES SECTOR

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TRAINING REGULATIONS FOR HEALTH CARE SERVICES NC II

SECTION 1 HEALTH CARE SERVICES NC II QUALIFICATION

The **HEALTH CARE SERVICES NC II** Qualification consists of competencies that a person must achieve to prepare and maintain beds, collect and maintain linen stocks at end-user locations, assist with patient mobility, assist in transporting patients, assist with bio-psychosocial support care of patients and handle waste in a health care environment.

The Units of Competency comprising this Qualification include the following:

UNIT CODE	BASIC COMPETENCIES
500311105	Participate in workplace communication
500311106	Work in a team environment
500311107	Practice career professionalism
500311108	Practice occupational health and safety procedures

UNIT CODE	COMMON COMPETENCIES
HCS323201	Implement and monitor infection control policies and procedures
HCS323202	Respond effectively to difficult/challenging behavior
HCS323203	Apply basic first aid
HCS323204	Maintain high standard of patient services

UNIT CODE	CORE COMPETENCIES
HCS323314	Prepare and maintain beds
HCS323315	Collect and maintain linen stocks at end-users location
HCS323316	Assist in patient mobility
HCS323317	Assist in transporting patients
HCS323318	Assist in bio-psychosocial support care of patients
HCS323319	Handle waste in a health care environment

A person who has achieved this Qualification is competent to be:

- Nursing Attendant**
- Nursing Aide**
- Hospital Assistant**
- Health Aide**

SECTION 2 COMPETENCY STANDARDS

This section gives the details of the contents of the basic, common and core units of competency required in **HEALTH CARE SERVICES NC II**.

BASIC COMPETENCIES

UNIT OF COMPETENCY : **PARTICIPATE IN WORKPLACE COMMUNICATION**

UNIT CODE : **500311105**

UNIT DESCRIPTOR : This unit covers the knowledge, skills and attitudes required to gather, interpret and convey information in response to workplace requirements.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Obtain and convey workplace information	1.1 Specific and relevant information is accessed from appropriate sources 1.2 Effective questioning , active listening and speaking skills are used to gather and convey information 1.3 Appropriate medium is used to transfer information and ideas 1.4 Appropriate non- verbal communication is used 1.5 Appropriate lines of communication with supervisors and colleagues are identified and followed 1.6 Defined workplace procedures for the location and storage of information are used 1.7 Personal interaction is carried out clearly and concisely
2. Participate in workplace meetings and discussions	2.1 Team meetings are attended on time 2.2 Own opinions are clearly expressed and those of others are listened to without interruption 2.3 Meeting inputs are consistent with the meeting purpose and established protocols 2.4 Workplace interactions are conducted in a courteous manner 2.5 Questions about simple routine workplace procedures and matters concerning working conditions of employment are asked and responded to 2.6 Meetings outcomes are interpreted and implemented
3. Complete relevant work related documents	3.1 Range of forms relating to conditions of employment are completed accurately and legibly 3.2 Workplace data is recorded on standard workplace forms and documents 3.3 Basic mathematical processes are used for routine calculations 3.4 Errors in recording information on forms/ documents are identified and properly acted upon 3.5 Reporting requirements to supervisor are completed according to organizational guidelines

RANGE OF VARIABLES

VARIABLE	RANGE
1. Appropriate sources	1.1 Team members 1.2 Suppliers 1.3 Trade personnel 1.4 Local government 1.5 Industry bodies
2. Medium	2.1 Memorandum 2.2 Circular 2.3 Notice 2.4 Information discussion 2.5 Follow-up or verbal instructions 2.6 Face to face communication
3. Storage	3.1 Manual filing system 3.2 Computer-based filing system
4. Forms	4.1 Personnel forms, telephone message forms, safety reports
5. Workplace interactions	5.1 Face to face situation 5.2 Telephone 5.3 Electronic and two way radio communication 5.4 Written including electronic ware memos, instruction and forms, non-verbal including gestures, signals, signs and diagrams
6. Protocols	6.1 Observing meeting 6.2 Compliance with meeting decisions 6.3 Obeying meeting instructions

EVIDENCE GUIDE

1. Critical aspects of competency	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Prepared written communication following standard format of the organization 1.2 Accessed information using communication equipment 1.3 Made use of relevant terms as an aid to transfer information effectively 1.4 Conveyed information effectively adopting the formal or informal communication
2. Underpinning knowledge	<ul style="list-style-type: none"> 2.1 Effective communication 2.2 Different modes of communication 2.3 Written communication 2.4 Organizational policies 2.5 Communication procedures and systems 2.6 Technology relevant to the enterprise and the individual's work responsibilities
3. Underpinning skills	<ul style="list-style-type: none"> 3.1 Follow simple spoken language 3.2 Perform routine workplace duties following simple written notices 3.3 Participate in workplace meetings and discussions 3.4 Complete work related documents 3.5 Estimate, calculate and record routine workplace measures 3.6 Basic mathematical processes of addition, subtraction, division and multiplication 3.7 Ability to relate to people of social range in the workplace 3.8 Gather and provide information in response to workplace requirements
4. Resource implications	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Fax machine 4.2 Telephone 4.3 Writing materials 4.4 Internet
5. Method of assessment	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Direct Observation 5.2 Oral interview and written test
6. Context of assessment	<ul style="list-style-type: none"> 6.1 Competency may be assessed individually in the actual workplace or through accredited institution

UNIT OF COMPETENCY : **WORK IN TEAM ENVIRONMENT**

UNIT CODE : **500311106**

UNIT DESCRIPTOR : This unit covers the skills, knowledge and attitudes to identify role and responsibility as a member of a team.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Describe team role and scope	1.1 The <i>role and objective of the team</i> is identified from available <i>sources of information</i> 1.2 Team parameters, reporting relationships and responsibilities are identified from team discussions and appropriate external sources
2. Identify own role and responsibility within team	2.1 Individual role and responsibilities within the team environment are identified 2.2 Roles and responsibility of other team members are identified and recognized 2.3 Reporting relationships within team and external to team are identified
3. Work as a team member	3.1 Effective and appropriate forms of communications used and interactions undertaken with team members who contribute to known team activities and objectives 3.2 Effective and appropriate contributions made to complement team activities and objectives, based on individual skills and competencies and <i>workplace context</i> 3.3 Observed protocols in reporting using standard operating procedures 3.4 Contribute to the development of team work plans based on an understanding of team's role and objectives and individual competencies of the members.

RANGE OF VARIABLES

VARIABLE	RANGE
1. Role and objective of team	1.1 Work activities in a team environment with enterprise or specific sector 1.2 Limited discretion, initiative and judgement maybe demonstrated on the job, either individually or in a team environment
2. Sources of information	2.1 Standard operating and/or other workplace procedures 2.2 Job procedures 2.3 Machine/equipment manufacturer's specifications and instructions 2.4 Organizational or external personnel 2.5 Client/supplier instructions 2.6 Quality standards 2.7 Occupational Health and Safety (OHS) and environmental standards
3. Workplace context	3.1 Work procedures and practices 3.2 Conditions of work environments 3.3 Legislation and industrial agreements 3.4 Standard work practice including the storage, safe handling and disposal of chemicals 3.5 Safety, environmental, housekeeping and quality guidelines

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Operated in a team to complete workplace activity 1.2 Worked effectively with others 1.3 Conveyed information in written or oral form 1.4 Selected and used appropriate workplace language 1.5 Followed designated work plan for the job 1.6 Reported outcomes
<p>2. Underpinning knowledge</p>	<ul style="list-style-type: none"> 2.1 Communication process 2.2 Team structure 2.3 Team roles 2.4 Group planning and decision making
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> 3.1 Communicate appropriately, consistent with the culture of the workplace
<p>4. Resource implications</p>	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Access to relevant workplace or appropriately simulated environment where assessment can take place 4.2 Materials relevant to the proposed activity or tasks
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Observation of the individual member in relation to the work activities of the group 5.2 Observation of simulation and or role play involving the participation of individual member to the attainment of organizational goal 5.3 Case studies and scenarios as a basis for discussion of issues and strategies in teamwork
<p>6. Context of assessment</p>	<ul style="list-style-type: none"> 6.1 Competency may be assessed in workplace or in a simulated workplace setting 6.2 Assessment shall be observed while task are being undertaken whether individually or in group

UNIT OF COMPETENCY : **PRACTICE CAREER PROFESSIONALISM**

UNIT CODE : **500311107**

UNIT DESCRIPTOR : This unit covers the knowledge, skills and attitudes in promoting career growth and advancement.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Integrate personal objectives with organizational goals	1.1 Personal growth and work plans are pursued towards improving the qualifications set for the profession 1.2 Intra and interpersonal relationships are maintained in the course of managing oneself based on performance evaluation 1.3 Commitment to the organization and its goal is demonstrated in the performance of duties
2. Set and meet work priorities	2.1 Competing demands are prioritized to achieve personal, team and organizational goals and objectives. 2.2 Resources are utilized efficiently and effectively to manage work priorities and commitments 2.3 Practices along economic use and maintenance of equipment and facilities are followed as per established procedures
3. Maintain professional growth and development	3.1 Trainings and career opportunities are identified and availed of based on job requirements 3.2 Recognitions are -sought/received and demonstrated as proof of career advancement 3.3 Licenses and/or certifications relevant to job and career are obtained and renewed

RANGE OF VARIABLES

VARIABLE	RANGE
1. Evaluation	1.1 Performance Appraisal 1.2 Psychological Profile 1.3 Aptitude Tests
2. Resources	2.1 Human 2.2 Financial 2.3 Technology 2.3.1 Hardware 2.3.2 Software
3. Trainings and career opportunities	3.1 Participation in training programs 3.1.1 Technical 3.1.2 Supervisory 3.1.3 Managerial 3.1.4 Continuing Education 3.2 Serving as Resource Persons in conferences and workshops
4. Recognitions	4.1 Recommendations 4.2 Citations 4.3 Certificate of Appreciations 4.4 Commendations 4.5 Awards 4.6 Tangible and Intangible Rewards
5. Licenses and/or certifications	5.1 National Certificates 5.2 Certificate of Competency 5.3 Support Level Licenses 5.4 Professional Licenses

EVIDENCE GUIDE

1. Critical aspects of competency	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Attained job targets within key result areas (KRAs) 1.2 Maintained intra - and interpersonal relationship in the course of managing oneself based on performance evaluation 1.3 Completed training and career opportunities which are based on the requirements of the industries 1.4 Acquired and maintained licenses and/or certifications according to the requirement of the qualification
2. Underpinning knowledge	<ul style="list-style-type: none"> 2.1 Work values and ethics (Code of Conduct, Code of Ethics, etc.) 2.2 Company policies 2.3 Company operations, procedures and standards 2.4 Fundamental rights at work including gender sensitivity 2.5 Personal hygiene practices
3. Underpinning skills	<ul style="list-style-type: none"> 3.1 Appropriate practice of personal hygiene 3.2 Intra and Interpersonal skills 3.3 Communication skills
4. Resource implications	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Workplace or assessment location 4.2 Case studies/scenarios
5. Method of assessment	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Portfolio Assessment 5.2 Interview 5.3 Simulation/Role-plays 5.4 Observation 5.5 Third Party Reports 5.6 Exams and Tests
6. Context of assessment	<ul style="list-style-type: none"> 6.1 Competency may be assessed in the work place or in a simulated work place setting

UNIT OF COMPETENCY : **PRACTICE OCCUPATIONAL HEALTH AND SAFETY PROCEDURES**

UNIT CODE : **500311108**

UNIT DESCRIPTOR : This unit covers the outcomes required to comply with regulatory and organizational requirements for occupational health and safety.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Identify hazards and risks	1.1 Safety regulations and workplace safety and hazard control practices and procedures are clarified and explained based on organization procedures 1.2 Hazards/risks in the workplace and their corresponding indicators are identified to minimize or eliminate risk to co-workers, workplace and environment in accordance with organization procedures 1.3 Contingency measures during workplace accidents, fire and other emergencies are recognized and established in accordance with organization procedures
2. Evaluate hazards and risks	2.1 Terms of maximum tolerable limits which when exceeded will result in harm or damage are identified based on threshold limit values (TLV) 2.2 Effects of the hazards are determined 2.3 OHS issues and/or concerns and identified safety hazards are reported to designated personnel in accordance with workplace requirements and relevant workplace OHS legislation
3. Control hazards and risks	3.1 Occupational Health and Safety (OHS) procedures for controlling hazards/risks in workplace are consistently followed 3.2 Procedures for dealing with workplace accidents, fire and emergencies are followed in accordance with organization OHS policies 3.3 Personal protective equipment (PPE) is correctly used in accordance with organization OHS procedures and practices 3.4 Appropriate assistance is provided in the event of a workplace emergency in accordance with established organization protocol
4. Maintain OHS awareness	4.1 Emergency-related drills and trainings are participated in as per established organization guidelines and procedures 4.2 OHS personal records are completed and updated in accordance with workplace requirements

RANGE OF VARIABLES

VARIABLE	RANGE
1. Safety regulations	May include but are not limited to: <ol style="list-style-type: none"> 1.1 Clean Air Act 1.2 Building code 1.3 National Electrical and Fire Safety Codes 1.4 Waste management statutes and rules 1.5 Philippine Occupational Safety and Health Standards 1.6 DOLE regulations on safety legal requirements 1.7 ECC regulations
2. Hazards/Risks	May include but are not limited to: <ol style="list-style-type: none"> 2.1 Physical hazards – impact, illumination, pressure, noise, vibration, temperature, radiation 2.2 Biological hazards- bacteria, viruses, plants, parasites, mites, molds, fungi, insects 2.3 Chemical hazards – dusts, fibers, mists, fumes, smoke, gasses, vapors 2.4 Ergonomics <ul style="list-style-type: none"> • Psychological factors – over exertion/ excessive force, awkward/static positions, fatigue, direct pressure, varying metabolic cycles • Physiological factors – monotony, personal relationship, work out cycle
3. Contingency measures	May include but are not limited to: <ol style="list-style-type: none"> 3.1 Evacuation 3.2 Isolation 3.3 Decontamination 3.4 (Calling designed) emergency personnel
4. Personal Protective Equipment (PPE)	May include but are not limited to: <ol style="list-style-type: none"> 4.1 Mask 4.2 Gloves 4.3 Goggles 4.4 Hair Net/cap/bonnet 4.5 Face mask/shield 4.6 Ear muffs 4.7 Apron/Gown/coverall/jump suit 4.8 Anti-static suits
5. Emergency-related drills and training	<ol style="list-style-type: none"> 5.1 Fire drill 5.2 Earthquake drill 5.3 Basic life support/CPR 5.4 First aid 5.5 Spillage control 5.6 Decontamination of chemical and toxic 5.7 Disaster preparedness/management
6. OHS personal records	<ol style="list-style-type: none"> 6.1 Medical/Health records 6.2 Incident reports 6.3 Accident reports 6.4 OHS-related training completed

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Explained clearly established workplace safety and hazard control practices and procedures 1.2 Identified hazards/risks in the workplace and its corresponding indicators in accordance with company procedures 1.3 Recognized contingency measures during workplace accidents, fire and other emergencies 1.4 Identified terms of maximum tolerable limits based on threshold limit value (TLV) 1.5 Followed Occupational Health and Safety (OHS) procedures for controlling hazards/risks in workplace 1.6 Used Personal Protective Equipment (PPE) in accordance with company OHS procedures and practices 1.7 Completed and updated OHS personal records in accordance with workplace requirements
<p>2. Underpinning knowledge</p>	<ul style="list-style-type: none"> 2.1 OHS procedures and practices and regulations 2.2 PPE types and uses 2.3 Personal hygiene practices 2.4 Hazards/risks identification and control 2.5 Threshold limit value (TLV) 2.6 OHS indicators 2.7 Organization safety and health protocol 2.8 Safety consciousness 2.9 Health consciousness
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> 3.1 Practice of personal hygiene 3.2 Hazards/risks identification and control skills 3.3 Interpersonal skills 3.4 Communication skills
<p>4. Resource implications</p>	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Workplace or assessment location 4.2 OHS personal records 4.3 PPE 4.4 Health records
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Portfolio Assessment 5.2 Interview 5.3 Case Study/Situation
<p>6. Context of assessment</p>	<ul style="list-style-type: none"> 6.1 Competency may be assessed in the work place or in a simulated work place setting

COMMON COMPETENCIES

UNIT OF COMPETENCY : **IMPLEMENT AND MONITOR INFECTION CONTROL POLICIES AND PROCEDURES**

UNIT CODE : **HCS323201**

UNIT DESCRIPTOR : This unit is concerned with infection control responsibilities of employees with supervisory accountability to implement and monitor infection control policy and procedures in a specific work unit or team within an organization. This unit does not apply to a role with organization-wide responsibilities for infection control policy and procedure development, implementation or monitoring.

ELEMENT	PERFORMANCE CRITERIA
	<i>Italicized terms</i> are elaborated in the Range of Variables
1. Provide information to the work group about the organization's infection control policies and procedures.	<p>1.1 Relevant information about the organization's infection control policy and procedures, and applicable industry codes of practice are accurately and clearly explained to the work group</p> <p>1.2 Information about identified hazards and the outcomes of infection risk assessments is regularly provided to the work group</p> <p>1.3 Opportunity is provided for the work group to seek further information on workplace infection control issues and practices</p>
2. Integrate the organization's infection control policy and procedure into work practices	<p>2.1 Infection control policy and procedures are implemented by supervisor and members of the work group.</p> <p>2.2 Liaison is maintained with person responsible for organization-wide infection control.</p> <p>2.3 The Supervisor's coaching support ensures that individuals/teams are able to implement infection control practices</p> <p>2.4 Work procedures are adopted to reflect appropriate infection control practice</p> <p>2.5 Issues raised through consultation are dealt with and resolved promptly or referred to the appropriate personnel for resolution</p> <p>2.6 Workplace procedures for dealing with infection control risks and hazardous events are implemented whenever necessary</p> <p>2.7 Employees are encouraged to report infection risks and to improve infection control procedures</p>
3. Monitor infection control performance and implement improvements in practices	<p>3.1 Infection control hazardous events are investigated promptly to identify their cause in accordance with organization policy and procedures</p> <p>3.2 Work procedures to control infection risks are monitored to ensure compliance</p> <p>3.3 Work procedures are regularly reviewed and adjusted to ensure improvements in infection control practice</p>

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>3.4 Supervisor provides feedback to team and individuals on compliance issues, changes in work procedures and infection control outcomes</p> <p>3.5 Training in work procedures is provided as required to ensure maintenance of <i>infection control standards</i></p> <p>3.6 Inadequacies in work procedures and infection control measures are identified, corrected or reported to <i>designated personnel</i></p> <p>3.7 Records of infection control risks and incidents are accurately maintained as required</p> <p>3.8 <i>Aggregate infection control</i> information reports are used to identify hazards, to monitor and improve risk control Method and to indicate training needs</p>

RANGE OF VARIABLES

VARIABLE	RANGE
1. Infection Control Policies and Procedures	This may include but not limited to: 1.1 Cleaning procedures and schedules 1.2 Cleaning agents 1.3 Cleaning equipment 1.4 Handling, storage and disposal of all types of waste 1.5 Food handling and food safety 1.6 Hygiene procedures 1.7 Infection control risk management 1.8 Infection control incident and hazard reporting 1.9 Sterilizing 1.10 Linen production and handling 1.11 Maintenance procedures 1.12 Storage requirements 1.13 Personal protective clothing 1.14 Work flows 1.15 Management of blood and body fluid spills 1.16 Single use of disposable 1.17 Aseptic techniques 1.18 Skin preparation procedures 1.19 Immunization 1.20 Needle stick injuries 1.21 Personal contact with infectious patients 1.22 Standard and additional precautions 1.23 Confidentiality 1.24 Employee training 1.25 Contractors
2. Industry Codes of Practice	2.1 National Health and Medical Research Council Guidelines for infection control 2.2 Local & National Government Guidelines and Standards 2.3 Manufacturer's recommendations and operating manuals
3. Identified hazards and the outcomes of infection risk assessments	3.1 Sharps 3.2 Glass 3.3 Waste 3.4 Human waste and human tissues 3.5 Personal contact with infectious patients 3.6 Animals, insects and vermin 3.7 Stock, including food, which has passed "used-by" dates. 3.8 Incorrect concentration of disinfectants and chemicals 3.9 Cleaning procedures 3.10 Linen handling procedures 3.11 Work flows 3.12 Use of personal protective clothing 3.13 Food safety 3.14 Personal hygiene
4. Infection Control Monitoring Procedures	4.1 Observations 4.2 Interviews 4.3 Surveys and inspections 4.4 Quality assurance activities 4.5 Review of outcomes 4.6 Data analysis

VARIABLE	RANGE
5. Designated personnel	5.1 Manager 5.2 Infection Control Coordinator 5.3 Quality Improvement Coordinator 5.4 Infection Control Committee 5.5 Occupational Health and Safety Committee
6. Aggregate infection control information	6.1 Records of needle stick injuries 6.2 Hospital-acquired infection rates 6.3 DOH healthcare standards clinical indicators 6.4 HACCP records 6.5 Hazard reports

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate</p> <p>1.1 Communicated with team and individuals on organizational policy and procedures for infection control</p> <p>1.2 Applied infection control policies and procedures which impact on work processes of the specific work unit</p> <p>1.3 Applied procedures for adopting appropriate infection practices within work unit</p> <p>1.4 Provided appropriate supervision of work group</p>
<p>2. Underpinning knowledge</p>	<p>2.1 Working knowledge, consistent with the elements of competence, of the organization's applicable infection control policy and procedures and relevant industry codes of practice</p> <p>2.2 The hierarchy risk control measures from most to least preferred, that is, elimination, engineering controls, administrative control, and lastly, personal protective equipment</p> <p>2.3 Knowledge of infection risks and control measures in specific work unit and related work processes</p> <p>2.4 The significance of patient confidentiality in relation to infection control</p> <p>2.5 The significance of other management systems and procedures for infection control</p> <p>2.6 Literacy levels and communication skills of work group members and consequent suitable communication techniques</p> <p>2.7 Organizational procedures for monitoring, training</p> <p>2.8 Basic understanding of communicable disease transmission</p>
<p>3. Underpinning skills</p>	<p>3.1 Effective communicating and interpersonal skills including:</p> <ul style="list-style-type: none"> – language competence – literacy and reading competence <p>3.2 Negotiating Skills</p> <p>3.3 Work planning and management</p> <p>3.4 Managing change of work processes</p> <p>3.5 Monitoring compliance with policy and procedures</p> <p>3.6 Maintaining and interpreting infection control records</p>
<p>4. Resource implications</p>	<p>The following resources MUST be provided:</p> <p>4.1 Workplace infection control and health and safety policies and procedures</p> <p>4.2 Waste management procedures</p> <p>4.3 Food safety procedures</p> <p>4.4 Other organizational policies and procedures</p> <p>4.5 Duties statements and/or job descriptions</p>
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <p>5.1 Observation</p> <p>5.2 Interview</p> <p>5.3 Portfolio</p> <p>5.4 Demonstration with questioning</p>
<p>6. Context of assessment</p>	<p>6.1 Assessment may be done in the workplace or in a simulated workplace setting.</p>

UNIT OF COMPETENCY : **RESPOND EFFECTIVELY TO DIFFICULT/ CHALLENGING BEHAVIOR**

UNIT CODE : **HCS323202**

UNIT DESCRIPTOR : This unit of competency covers the knowledge, skills and attitudes to effectively respond to difficult or challenging behavior of patient.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Plan responses	1.1 Responses are planned to instances of difficult or challenging behavior to maximize the availability of other appropriate staff and resources 1.2 Specific manifestations of difficult or challenging behavior are identified and strategies appropriate to these behaviors are planned as required. 1.3 Safety of self and others is given priority in responding to difficult or challenging behavior according to institutional policies and procedures.
2. Apply response	2.1 Difficult or challenging behavior is dealt with promptly, firmly and diplomatically in accordance with institutional policy and procedures . 2.2 Communication is used effectively to achieve the desired outcomes in responding to difficult or challenging behavior 2.3 Appropriate strategies are selected to suit particular instances of difficult or challenging behavior
3. Report and review incidents	3.1 Incidents are reported according to institutional policies and procedures 3.2 Incidents are reviewed with appropriate staff and suggestions appropriate to area of responsibility are made. 3.3 Debriefing mechanisms and other activities are used and participated in 3.4 Advice and assistance is sought from legitimate sources when appropriate.

RANGE OF VARIABLES

VARIABLE	RANGE
1. Planned responses	1.1 Own ability and experience 1.2 Established institutional procedures 1.3 Knowledge of individual persons and underlying causes
2. Difficult or challenging behaviors	2.1 Aggression/Assaultive behavior 2.2 Confusion or other cognitive impairment 2.3 Noisiness 2.4 Manipulative 2.5 Wandering 2.6 Self-destructive 2.7 Intoxication 2.8 Withdrawn/depressed 2.9 Negativistic 2.10 Intrusive behavior 2.11 Verbal offensiveness
3. Strategies for dealing with challenging behaviors	3.1 Diversional activities 3.2 Referring to appropriate personnel e.g. supervisor, security officer 3.3 Following established emergency response procedures
4. Selection of strategies for dealing with challenging behaviors	4.1 The nature of the incident 4.2 Potential effect on different parties, patient, staff and others 4.3 Established procedures and guidelines
5. Institutional policies and procedures	5.1 Incident reporting and documentation 5.2 Operational guidelines for handling incidents and/or cases involving difficult and challenging behavior 5.3 Debriefing of staff involved in the incident

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Identified specific manifestations of difficult or challenging behavior and strategies are planned, selected and applied as required 1.2 Maintained personal safety and the safety of others 1.3 Reported incidents, reviewed and responded quickly and effectively to contingencies 1.4 Debriefing mechanisms are used
<p>2. Underpinning knowledge</p>	<ul style="list-style-type: none"> 2.1 OSH and issues relating to difficult and challenging behavior 2.2 Patient issues which need to be referred to an appropriate health professional 2.3 Ability to interpret and follow the instructions and guidance of health professionals involved with the care of patient/client
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> 3.1 Effectively using techniques for monitoring own service area including client satisfaction 3.2 Speaking in a firm, diplomatic and culturally appropriate manner 3.3 Remaining calm and positive in adversity 3.4 Thinking and responding quickly and strategically 3.5 Remaining alert to potential incidents of difficult or challenging behavior 3.6 Monitoring and/or maintaining security equipment 3.7 Working with others and display empathy with patient and relatives
<p>4. Resource implications</p>	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Access to relevant workplace or appropriately simulated environment where assessment can take place 4.2 Relevant institutional policy, guidelines, procedures and protocols 4.3 Emergency response procedures and employee support arrangements
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Observation with questioning 5.2 Demonstration with questioning
<p>6. Context of assessment</p>	<ul style="list-style-type: none"> 6.1 Assessment may be done in the workplace or in a simulated workplace setting.

UNIT OF COMPETENCY : **APPLY BASIC FIRST AID**

UNIT CODE : **HCS323203**

UNIT DESCRIPTOR : This unit covers the knowledge, skills and attitudes required to provide an initial response where First Aid is required. In this unit it is assumed that the First Aider is working under supervision and / or according to established workplace First Aid procedures and policies

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Assess the situation	1.1 Physical hazards to self and casualty's health and safety are identified 1.2 Immediate risks to self and casualty's occupational health and safety (OSH)are minimized by controlling the hazard in accordance with OSH requirements 1.3 Casualty's vital signs and physical condition are assessed in accordance with workplace procedures
2. Apply basic first aid techniques	2.1 First Aid management is provided in accordance with established First Aid procedures 2.2 Casualty is reassured in a caring and calm manner and made comfortable using available resources 2.3 First Aid assistance is sought from others in a timely manner and as appropriate 2.4 Casualty's condition is monitored and responded to in accordance with effective First Aid principles and workplace procedures 2.5 Details of casualty's physical condition, changes in conditions, management and response are accurately recorded in line with organizational procedures 2.6 Casualty management is finalized according to his/her needs and First Aid principles
3. Communicate details of the incident	3.1 Appropriate medical assistance is requested using relevant communication media and equipment 3.2 Details of casualty's condition and management activities are accurately conveyed to emergency services/relieving personnel 3.3 Reports to supervisors are prepared in a timely manner, presenting all relevant facts according to established company procedures

RANGE OF VARIABLES

VARIABLE	RANGE
1 First Aid Management	This may include but not limited to : 1.1 Workplace policies and procedures 1.2 Industry/site specific regulations, codes 1.3 OSH 1.4 State and territory workplace health and safety requirements 1.5 Allergies the casualty may have
2 Physical Hazards	Physical hazards may include : 2.1 Workplace hazards 2.2 Environmental hazards 2.3 Proximity of other people 2.4 Hazards associated with casualty management processes
3 Risks	Risks may include: 3.1 Worksite equipment, machinery and substances 3.2 Environmental risks 3.3 Bodily fluids 3.4 Risk of further injury to the casualty 3.5 Risk associated with the proximity of the others and bystanders
4 Casualty's Condition	Casualty's condition may include but not limited to the ff: 4.1 Abdominal injuries 4.2 Allergic reactions 4.3 Bleeding 4.4 Burns-thermal, chemical, friction, electrical 4.5 Cardiac conditions 4.6 Chemical contamination 4.7 Cod injuries 4.8 Crush injuries 4.9 Dislocations 4.10 Drowning 4.11 Eye injuries 4.12 Fractures 4.13 Head injuries 4.14 Epilepsy 4.15 Minor skin injuries 4.16 Neck and spinal injuries 4.17 Needle stick injuries 4.18 Poisoning and toxic substances 4.19 Shock 4.20 Smoke inhalation
5. Equipment and Resources	Equipment and other resources may include: 5.1 Defibrillation units 5.2 Pressure bandages 5.3 Thermometers 5.4 First Aid kit 5.5 Eyewash 5.6 Thermal blankets 5.7 Pocket face masks 5.8 Rubber gloves 5.9 Dressing 5.10 Space device 5.11 Cervical collars

VARIABLE	RANGE
6. Communication system	6.1 Mobile phone 6.2 Satellite phones 6.3 HF/VHF radio 6.4 Flags 6.5 Flares 6.6 Two - way radio 6.7 Email 6.8 Electronic equipment
7. Vital signs	7.1 Breathing 7.2 Circulation 7.3 Consciousness
8. First Aid Principles	8.1 Checking the site for danger to self, casualty' and others and minimizing the danger 8.2 Checking and maintaining the casualty's airways, breathing and circulation

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Complied with institutional requirements, OSH laws infections control and manual handling procedures and relevant health regulations 1.2 Identified physical hazards of the casualty and minimized immediate risks 1.3 Assessed and monitored the physical condition of the casualty 1.4 Responded to emergency using basic life support measures. 1.5 Provided initial response where First Aid is required 1.6 Dealt with complex casualties or incident 1.7 Prepared reports to concerned personnel in a timely manner
<p>2. Underpinning knowledge</p>	<ul style="list-style-type: none"> 2.1 Basic anatomy and physiology 2.2 Company standard operating procedures (sops) 2.3 Dealing with confidentiality 2.4 Knowledge of the First Aiders' skills limitations 2.5 OSH legislation and regulations 2.6 How to gain access to and interpret material safety data sheets
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> 3.1 Resuscitation Skills 3.2 Safe manual handling of casualty 3.3 Consideration of the welfare of the casualty 3.4 Report preparation 3.5 Communication skills 3.6 Interpreting and Using listed documents
<p>4. Resource implications</p>	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Access to relevant work station 4.2 Relevant institutional policies, guidelines procedure and protocol 4.3 Equipment and materials relevant to the proposed activities
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Demonstration with questioning 5.2 Interview 5.3 Third Party report 5.4 Portfolio
<p>6. Context of assessment</p>	<ul style="list-style-type: none"> 6.1 Assessment may be done in a workplace or simulated work area setting.

UNIT OF COMPETENCY : **MAINTAIN HIGH STANDARDS OF PATIENT SERVICES**

UNIT CODE : **HCS323204**

UNIT DESCRIPTOR : This unit covers the knowledge, skills and attitudes required in the maintenance of high standards of patient services.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Communicate appropriately with patients	1.1 Effective communication strategies and techniques are identified and used to achieve best patient service outcomes 1.2 Complaints are responded to in accordance with organizational policy to ensure best service to patients 1.3 Complaints are dealt with in accordance with established procedures 1.4 Interpreter services are accessed as required 1.5 Action is taken to resolve conflicts either directly, where a positive outcome can be immediately achieved, or by referral to the appropriate personnel 1.6 Participation in work team is constructive and collaborative and demonstrates an understanding of own role
2. Establish and maintain good interpersonal relationship with patients	2.1 Rapport is established to ensure the service is appropriate to and in the best interests of patients 2.2 Effective listening skills are used to ensure a high level of effective communication and quality of service 2.3 Patient concerns and needs are correctly identified and responded to responsibly and accordingly established procedures and guidelines 2.4 Effectiveness of interpersonal interaction is consistently monitored and evaluated to ensure best patient service outcomes
3. Act in a respectful manner at all times	3.1 Respect for differences is positively, actively and consistently demonstrated in all work 3.2 Confidentiality and privacy of patients is maintained 3.3 Courtesy is demonstrated in all interactions with patients, their visitors, careers and family 3.4 Assistance with the care of patients with challenging behaviors is provided in accordance with established procedures 3.5 Techniques are used to manage and minimize aggression
4. Evaluate own work to maintain a high standard of patient service	4.1 Advice and assistance is received or sought from appropriate sources on own performance 4.2 Own work is adjusted, incorporating recommendations that address performance issues, to maintain the agreed standard of patient support

RANGE OF VARIABLES

VARIABLE	RANGE
1. Patients	This may include but not limited to: <ul style="list-style-type: none"> 1.1 Patients 1.2 Prospective patients to the service or services 1.3 Patients may be in contact with the institution through appropriate health care personnel and professionals or other advocates or agencies
2. Others with whom interaction is required in regard to patient services	<ul style="list-style-type: none"> 2.1 Other staff and team members 2.2 Service units or departments 2.3 Family members, carers and friends of patients 2.4 Professional representatives or agents of patients such as: <ul style="list-style-type: none"> – Medical specialists – Nurses – Social workers – Dietitians – Therapists – Allied health professionals – Volunteers – Teachers and/or spiritual – Community 2.5 General public
3. Communication	<ul style="list-style-type: none"> 3.1 English/Tagalog/vernacular 3.2 Sign language 3.3 Through an interpreter 3.4 Community language as required by the service / organization
4. Modes of communication:	<ul style="list-style-type: none"> 4.1 Continuing interaction with patients and clients 4.2 Verbal conversations either in person or via telephone 4.3 Written notes by post or electronic media 4.4 Worker, family member friend or professional interpreter who has relevant languages
5. Respect for difference	<ul style="list-style-type: none"> 5.1 Physical 5.2 Cognitive/mental or intellectual issues that may impact on communication 5.3 Cultural and ethnic 5.4 Religious/spiritual 5.5 Social 5.6 Age 5.7 Language literacy and numeracy abilities 5.8 Sexuality and sexual preference

VARIABLE	RANGE
6. Confidentiality and privacy of patients	6.1 Fees 6.2 Health fund entitlements 6.3 Welfare entitlements 6.4 Payment Method and records 6.5 Public environments 6.6 Legal and ethical requirements 6.7 Writing details ie medical and consent forms 6.8 Conversations on the telephone 6.9 Secure location for written records 6.10 Offering a private location for discussions 6.11 Information disclosed to an appropriate person consistent with one's level of responsibility
7. Performance monitoring	7.1 Self-monitoring 7.2 Supervisor assessment 7.3 Patient feedback

EVIDENCE GUIDE

1. Critical aspects of competency	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Communicated appropriately with patients 1.2 Handled complaints and resolved conflict, or referred matters to supervisors when required 1.3 Complied with relevant policies, protocols, guidelines and procedures of the organization 1.4 Established and maintained good interpersonal relationship with patients 1.5 Demonstrated courtesy in all interactions with patients, their visitors, and family
2. Underpinning knowledge	<ul style="list-style-type: none"> 2.1 Roles and responsibilities of self and other workers within the organization 2.2 When client/patient issues need to be referred to an appropriate health professional 2.3 Organizational policies and procedures for privacy and confidentiality of information provided by patients and others 2.4 Knowledge of cultures relevant to the particular service 2.5 Institutional policy on patient rights and responsibilities
3. Underpinning skills	<ul style="list-style-type: none"> 3.1 Establishing and maintaining relationships, taking into account individual differences 3.2 Using effective listening techniques 3.3 Using appropriate verbal and non verbal communication styles 3.4 Interpreting and following the instructions and guidance of health professionals involved with the care of patient/clients 3.5 Oral and written communication 3.6 Problem solving skills required include the ability to use available resources and prioritise workload 3.7 Dealing with conflict 3.8 Working with others and display empathy with patient and relatives
4. Resource implications	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Access to relevant workplace or appropriately simulated environment where assessment can take place 4.2 Relevant government and organizational policy, guidelines, procedures and protocols 4.3 Any relevant legislation in relation to service delivery
5. Method of assessment	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Demonstration with questioning 5.2 Interview 5.3 Third party report
6. Context of assessment	<ul style="list-style-type: none"> 6.1 Assessment may be done in a simulated workplace setting

CORE COMPETENCIES

UNIT OF COMPETENCY : **PREPARE AND MAINTAIN BEDS**

UNIT CODE : **HCS323314**

UNIT DESCRIPTOR : This unit of competency covers the knowledge, skills and attitudes required in preparing and making beds and performing after-care activities.

ELEMENT	PERFORMANCE CRITERIA
1. Prepare area for bed making	<p>1.1 Personal protective equipment is used, according to institutional policy</p> <p>1.2 Bed height is adjusted as necessary</p> <p>1.3 Bed surroundings are cleared of medical and other equipment before bed is stripped, where necessary</p> <p>1.4 Patient privacy, comfort and safety is provided at all times</p> <p>1.5 Bed linen is checked for displaced personal items, aids and equipment and such aids/equipment are placed in appropriate area/container</p>
2. Make bed	<p>2.1 Bed linen is stripped, where necessary</p> <p>2.2 Clinical waste and soiled linen are removed and placed in appropriate container</p> <p>2.3 Bed is cleaned according to established procedures, where necessary</p> <p>2.4 Clean bed linen is placed on bed in accordance with institution procedures</p> <p>2.5 Existing bed linen is remade, as needed</p> <p>2.6 Patient is asked whether he/she is comfortable, or if he/she has any preferred bed needs</p> <p>2.7 Reusable clean bed linen is handled in accordance with institution procedures</p> <p>2.8 Mattresses and pillows are cleaned and disinfected, in accordance with established procedures</p> <p>2.9 Bed height is adjusted for occupancy and brakes are applied according to bed type</p>
3. Perform after-care activities	<p>3.1 Beds and equipment/ aids are kept accessible and bed is left ready for occupancy</p> <p>3.2 Damaged and/or faulty beds, equipment mattresses, pillows and linen are reported to appropriate personnel and documented accordingly.</p> <p>3.3 Soiled linen and clinical wastes are discarded according to established protocol</p> <p>3.4 Cleaning implements are cleaned and returned to designated storage areas or disposed of appropriately.</p>

RANGE OF VARIABLES

VARIABLE	RANGE
1. Personal Protective Equipment (PPE)	PPE include but not limited to: 1.1 Gloves 1.2 Mask 1.3 Cap 1.4 Gown
2. Beds	2.1 Electro-mechanical bed 2.2 Maternity delivery bed 2.3 Hospital bed 2.4 Folding bed 2.5 Renal chair 2.6 Balkan frame 2.7 Trolley 2.8 Pediatric bed 2.9 Isolettes
3. Equipment	3.1 Pressure care devices e.g. floatation mattress, egg carton mattress, foam mattress 3.2 Bedside table 3.3 Over bed table 3.4 Bed end note holder 3.5 Chair lifts 3.6 Walking frames / sticks 3.7 Commodes 3.8 Sling 3.9 Straps 3.10 Splints 3.11 Monkey grips 3.12 Foot stool 3.13 Personal aids such as eye glasses, hearing aids, glass eyes, false teeth, breast prosthesis, false limbs
4. Bed Linen	4.1 Sheets 4.2 Blankets 4.3 Pillow cases 4.4 Under-blankets 4.5 Mattress protectors 4.6 Personal bed linen

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Prepared area for bed making 1.2 Made bed 1.3 Performed after care 1.4 Used appropriate PPE 1.5 Handled soiled linen safely 1.6 Performed bed cleaning procedures 1.7 Followed instructions according to institutional policies and guidelines
<p>2. Underpinning knowledge</p>	<ul style="list-style-type: none"> 2.1 Types of bed 2.2 Types of linen 2.3 OSH policies and procedures 2.4 Hygiene policies and procedures 2.5 Infection control policies and procedures
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> 3.1 Cleaning different types of beds 3.2 Safe manual handling techniques 3.3 Correct disposing clinical waste 3.4 Correct bed making procedures in hospital corners 3.5 Oral and written communication skills 3.6 Problem solving skills required include the ability to use available resources and priorities workload 3.7 Working with others and display empathy and courtesy with patient and their relatives
<p>4. Resource implications</p>	<p>The following resources MUST be provided;</p> <ul style="list-style-type: none"> 4.1 Access to relevant workstation 4.2 Relevant institutional policies, guidelines, procedures and protocol 4.3 Equipment and materials relevant to the proposed activities
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Demonstration with questioning 5.2 Interview 5.3 Third party report
<p>6. Context of assessment</p>	<ul style="list-style-type: none"> 6.1 Competency may be assessed in the workplace or in a simulated work setting.

UNIT OF COMPETENCY : **COLLECT AND MAINTAIN LINEN STOCKS AT END-USER LOCATIONS**

UNIT CODE : **HCS323315**

UNIT DESCRIPTOR : This unit of competency covers the knowledge, skills and attitudes required to collect soiled linen from end-user locations, deliver soiled linen to a designated holding area, distribute clean linen and maintain linen stock levels at end-user locations.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Collect soiled linen	1.1 Soiled linen is collected as scheduled from <i>end user locations</i> 1.2 Soiled linen bag is replaced in accordance with <i>institution policies and procedures</i> 1.3 Soiled linen is transported to designated holding area using appropriate <i>equipment</i> and safe handling techniques 1.4 Collection of soiled linen is carried out in a manner that minimizes the risk of cross contamination and complies with OHS policy and procedures 1.5 <i>Hazards</i> are identified and reported to supervisor 1.6 Appropriate procedures for dealing with accidents, including sharp injuries are followed correctly
2. Distribute clean linen	2.1 Clean linen is transported as scheduled to end- user locations using appropriate equipment and safe handling techniques 2.2 Linen is replaced to ensure adequate supply for users 2.3 <i>Linen stock</i> is rotated and old stock returned for reprocessing
3. Maintain linen stock levels	3.1 <i>Optimum stock levels</i> are <i>maintained</i> to ensure linen availability 3.2 Linen is requisitioned to par level quantity 3.3 Linen is stored in <i>linen storage facilities</i> and maintained according to institution requirements 3.4 <i>Linen stock records</i> are maintained according to institution requirements 3.5 Linen inventory is done according to institution policies and procedures

RANGE OF VARIABLES

VARIABLE	RANGE
1. End-User Locations	1.1 Hospital 1.2 Aged care facility 1.3 Residential accommodate 1.4 Operating room 1.5 Out-Patient Services 1.6 Central Supply Room 1.7 Health Clinics 1.8 Community health facilities
2. Institutional policies & procedures	2.1 Linen stock delivery, inventory management and stock rotation 2.2 Collection locations and procedures 2.3 Standard work practice for safe handling of soiled linen 2.4 Use of protective clothing 2.5 Notification of hazards and accidents 2.6 Data recording (manual or electronic) 2.7 Security and safe storage of clean and soiled linen
3. Equipment	3.1 Linen trolleys of various sizes 3.2 Linen bags 3.3 Baskets 3.4 Bins
4. Hazards	4.1 Exposure to heat 4.2 Sharp objects 4.3 Potentially infectious materials 4.4 Exposure to harmful chemicals
5. Maintenance of optimum linen stock levels	5.1 Review of inventory levels for each linen item 5.2 Assessment of user requirements based on past and expected utilization of linen
6. Linen Stock Records	6.1 Patients 6.2 Requisition of forms 6.3 Stock cards 6.4 Inventory forms 6.5 Philippine standards, infection control and quality standards
7. Linen storage facilities	7.1 Shelves 7.2 Racks 7.3 Trolleys 7.4 Cabinets 7.5 Linen bags

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ol style="list-style-type: none"> 1.1 Complied with institutional requirements, OSH laws, infection control and manual handling procedures and relevant health regulations 1.2 Collected soiled linen 1.3 Distributed clean linen 1.4 Maintained stock levels of linen accurately and in a timely and safe manner 1.5 Completed work systematically with attention to details, without injury to patient and self, damage to goods, equipment or risk to personnel. 1.6 Communicated effectively with user-locations in relation to linen utilization, inventory and stock levels.
<p>2. Underpinning knowledge</p>	<ol style="list-style-type: none"> 2.1 Types of linen and individual uses 2.2 Relevant OSH regulations, laws and infection control practice, institutional policies and procedures 2.3 Safety and environmental aspects related to workplace operation and manual handling, including workplace hazards 2.4 Delivery and collection schedules 2.5 Quality standards 2.6 Inventory procedures and documentation
<p>3. Underpinning skills</p>	<ol style="list-style-type: none"> 3.1 Handling linen products appropriately 3.2 Assessing and maintaining linen requirements 3.3 Selecting and using appropriate equipment 3.4 Meeting patient and institution specifications/ requirements 3.5 Communicating effectively within the workplace 3.6 Applying defined procedures i.e. OSH and infection control 3.7 Recognizing and adapting to cultural differences in the workplace, including modes of behavior and interactions among staff and others 3.8 Basic arithmetic skills 3.9 Oral and written communication skills
<p>4. Resource implications</p>	<p>The following resources MUST be provided:</p> <ol style="list-style-type: none"> 4.1 Relevant policies and procedures manuals 4.2 Institution mission statement, strategic and business plan 4.3 Other documents relevant to the work context such as: <ul style="list-style-type: none"> - organizational charts - floor plans - instructions for the use of equipment and materials relevant to the proposed activities - specific instructions for staff - workstation
<p>5. Method of assessment</p>	<p>Competency may be assessed through at least two of the following Method:</p> <ol style="list-style-type: none"> 5.1 Observation of performance 5.2 Interview 5.3 Third party report 5.4 Portfolio 5.5 Demonstration with questioning
<p>6. Context of assessment</p>	<ol style="list-style-type: none"> 6.1 Competency assessment may be done in the workplace or in a simulated workplace setting.

UNIT OF COMPETENCY : **ASSIST IN PATIENT MOBILITY**

UNIT CODE : **HCS323316**

UNIT DESCRIPTOR : This unit of competency covers the knowledge, skills and attitudes required to assist incapacitated patients in basic physical movements.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Prepare to assist with patient mobility	1.1 Requirements for assisting with patient mobility are confirmed with concerned health personnel and care plan 1.2 Equipment are selected according to prescribed plan of care 1.3 Environment is prepared according to established guidelines 1.4 Procedure is explained to patient as required using appropriate communication techniques
2. Assist with patient mobility	2.1 Patient mobility is carried out using safe handling Method and equipment as required 2.2 Appropriate action is taken to ensure patient comfort and safety throughout positioning or transfer 2.3 Communication with patients during movement is undertaken according to established procedures
3. Complete patient mobility assistance	3.1 Patient is moved to prescribed position and concerned health personnel are informed accordingly 3.2 Equipment is cleaned in accordance with established procedures 3.3 Equipment's working condition is reported immediately in accordance with established procedures

RANGE OF VARIABLES

VARIABLE	RANGE
1. Equipment	Equipment may include but not limited to : 1.1 Wheel chair 1.2 Chairlifts 1.3 Crutches 1.4 Commodes 1.5 Slings 1.6 Splints 1.7 Stretcher 1.8 Cot 1.9 Bed with side rails 1.10 Hoist with mechanical lifter
2. Environment	2.1 Hospital room 2.2 Health care facility 2.3 Home 2.4 Ambulance
3. Communication techniques	3.1 Oral 3.2 Written 3.3 Sign language
4. Safe handling Method	4.1 Assisting patient to walk 4.2 Assisting patient to change position 4.3 Placing patient to wheelchair 4.4 Assisting patient to crutches or other walking aids 4.5 Transporting patient by wheelchair or stretcher 4.6 Assisting the patient to use a hoist or mechanical lifter for transfer

EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Performed safe handling Method in assisting with patient mobility 1.2 Ensured patient privacy at all times 1.3 Implemented comfort and safety measures according to established procedures 1.4 Utilized appropriate communication techniques in instructing patients 1.5 Cleaned equipment in accordance with established procedures 1.6 Reported condition of equipment according to established procedures 1.7 Observed strict infection control guidelines
<p>2. Underpinning knowledge</p>	<ul style="list-style-type: none"> 2.1 Patient confidentiality and privacy requirements 2.2 Cleaning policy and procedures for lifting and transferring equipment 2.3 Patient condition as it relates to patient mobility 2.4 OSH procedures 2.5 Infection control guidelines 2.6 Appropriate communication techniques 2.7 Equipment use and specifications
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> 3.1 Using appropriate equipment for patient mobility 3.2 Communicating effectively with patients and concerned health care personnel 3.3 Safe handling skills 3.4 Oral and written communication skills 3.5 Dealing with conflicts 3.6 Working with others and display empathy with patient and relatives
<p>4. Resource implications</p>	<p>The following resources MUST be provided during assessment except in cases where portfolio or third-party report will be used:</p> <ul style="list-style-type: none"> 4.1 Workplace health and safety manual 4.2 Infection control manual 4.3 Standard Operating Procedures manual 4.4 Equipment manufacturer's instructions 4.5 Equipment as described in the range of variables
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Demonstration with questioning 5.2 Portfolio 5.3 Third party report
<p>6. Context of assessment</p>	<ul style="list-style-type: none"> 6.1 Competency assessment may be done in a simulated workplace setting.

UNIT OF COMPETENCY : **ASSIST IN TRANSPORTING PATIENTS**

UNIT CODE : **HCS323317**

UNIT DESCRIPTOR : This unit of competency covers the knowledge, skills and attitudes required to safely and efficiently assist in transporting patients from one location to another.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Prepare patient for transport	1.1 Transportation requirements are confirmed with appropriate health care personnel 1.2 Transport procedures are explained to patient as required 1.3 Preparations are made for the safe and efficient transport of the patient as per instructions 1.4 Equipment for transportation is readied according to requirements and checked to ensure that it is clean, complete and functional
2. Assist in patient transport	2.1 Patient is transported to designated location in accordance with established procedures 2.2 Equipment is adjusted to ensure patient comfort and safety with minimal risk to self 2.3 Patient is brought to designated location and reported to appropriate health care personnel
3. Perform post-transport procedures	3.1 Equipment is cleaned in accordance with established procedures 3.2 Equipment is returned according to standard operating procedures 3.3 Working condition of equipment is reported immediately in accordance with established procedures.

RANGE OF VARIABLES

VARIABLE	RANGE
1. Transportation requirements	These may include but not limited to: 1.1 Mode of transport 1.2 Destination 1.3 Information specific to the patient 1.4 Accompanying health professionals e.g. nurse or medical officer 1.5 Patient clothing requirements 1.6 Documentation requirements
2. Transportation equipment	2.1 Transportation equipment: <ul style="list-style-type: none"> • Wheelchair • Stretcher • Bed • Ambulance 2.2 Other equipment <ul style="list-style-type: none"> • Oxygen trolley • IV Stand • oxygen gauge • Oxygen tank • Ambu bag 3.6 Communication equipment <ul style="list-style-type: none"> • Cellular phone • 2 way radios
3. Relevant personnel	3.1 Medical officers 3.2 Nursing staff 3.3 Other health personnel

EVIDENCE GUIDE

1. Critical aspects of competency	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Confirmed the transportation requirements with appropriate health care personnel 1.2 Explained the transport procedures to the patient 1.3 Checked and reported the condition of the equipment for transportation 1.4 Adjusted equipment to ensure the patient's comfort and safety with minimal risk to self 1.5 Interpreted and followed instructions and guidance of health professionals with the care of patients 1.6 Transported and delivered patient to correct destination
2. Underpinning knowledge	<ul style="list-style-type: none"> 2.1 Patient handling procedures 2.2 Procedures for securing a patient 2.3 Infection control procedures 2.4 Patient confidentiality and privacy requirements 2.5 When patient issues need to be referred to an appropriate health professional
3. Underpinning skills	<ul style="list-style-type: none"> 3.1 Applying safe working practices, including manual handling techniques 3.2 Interpreting and following the instructions and guidance of health professionals regarding care of the patients 3.3 Reading and writing skills 3.4 Oral communications skills 3.5 Working with others and display empathy with patient and relatives
4. Resource implications	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Access to equipment used for transporting patients 4.2 Relevant policies and procedures manuals 4.3 Organizational charts 4.4 Instructions for the use of equipment
5. Method of assessment	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Observation 5.2 Demonstration with questioning 5.3 Portfolio
6. Context of assessment	<ul style="list-style-type: none"> 6.1 Assessment may be done in the workplace or in a simulated workplace setting

UNIT OF COMPETENCY : **ASSIST IN BIO-PSYCHOSOCIAL SUPPORT CARE OF PATIENTS**

UNIT CODE : **HCS323318**

UNIT DESCRIPTOR : This unit of competency covers the basic knowledge, skills and attitudes which apply to the provision of bio-psychosocial support care of patients in various healthcare situations.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Establish and maintain rapport with the patient	1.1 Initial contact is made with patient care and its appropriate time according to the care plan and / or established procedures 1.2 Courtesy is demonstrated in all communication with patients and staff in the workplace 1.3 Interpersonal exchanges are initiated with patient as appropriate 1.4 Communication is developed and maintained for effective relationship with patients 1.5 Trust and confidence of patient is consistently generated in all of the relevant work activities that are undertaken 1.6 Confidentiality and privacy of patient is consistently maintained 1.7 Patient's rights and roles in decision- making is respected
2. Obtain information regarding the bio-psychosocial needs of the patient	2.1 Patient information is obtained from the family/significant others and concerned health personnel 2.2 Patient bio-psychosocial care needs are determined and recognized 2.3 Scope, nature and frequency of patient support needs and confirmed with patient and appropriate health personnel as required 2.4 Patient information is reported as appropriate and conforms with ethico-moral, legal, professional and institutional requirements
3. Provide assistance to meet patient needs as directed	3.1 Comfort and safety measures are provided according to the care plan and direction of the health professional 3.2 Assistance and support is provided with minimum physical and emotional discomfort to patients and with minimum risk to self 3.3 Assistance is provided in emergency situations according to prescribed protocol

RANGE OF VARIABLES

VARIABLE	RANGE
1. Patients	Patients include: Individuals with impairment such as : <ul style="list-style-type: none"> - Vision impairment - Hearing impairment - Physical disability or frailty - Mental or intellectual disability - Cognitive impairment 1.1 Frail aged 1.2 Young disabled 1.3 Elderly discharge 1.4 Medical condition or illness 1.5 Other family members 1.6 A range of cultures and language backgrounds
2. Communication	Communication may include: <ul style="list-style-type: none"> 2.1 Oral 2.2 Written 2.3 Sign language 2.4 Vernacular/Filipino/English
3. Communication	May be by: <ul style="list-style-type: none"> 3.1 Telephone 3.2 Cell phone 3.3 Face to Face 3.4 Electronic media 3.5 Fax message 3.6 Letters, notes
4. Confidentiality and Privacy	4.1 Written details (medical and consent forms) 4.2 Conversation 4.3 Information disclosed to appropriate person consistent with one's level of accountability 4.4 Legal and ethical requirements
5. Patient information	5.1 Demographic details 5.2 Lifestyle practice 5.3 Patient care plan 5.4 History (medical and mental)
6. Concerned health personnel	6.1 Nurses 6.2 Doctors 6.3 Social workers 6.4 Nutritionists 6.5 Therapists 6.6 other members of the health team
7. Bio-psychosocial care needs	Bio-psychosocial care needs may include but not limited to: <ul style="list-style-type: none"> 7.1 Nutrition 7.2 Responsive to changes: physical, psychological, financial 7.3 Bio-psychosocial support system 7.4 Activities of daily living 7.5 Adjustment to illness and disability
8. Emergency situations	8.1 Falls/slipping 8.2 Choking/aspiration/suffocation 8.3 Equipment related accidents 8.4 Burns

VARIABLE	RANGE
	8.5 Depression/suicide 8.6 Acute Confusion 8.7 Poisoning 8.8 Fire 8.9 Assault 8.10 Other life threatening situations
9. Comfort and Safety Measures	Comfort and safety measures may include but not limited to: 9.1 Creating a therapeutic environment 9.2 Practicing body mechanics 9.3 Measuring and assessing cardinal signs 9.4 Personal hygiene and grooming 9.5 Cleansing/tepid sponge bath 9.6 Bed shampoo 9.7 Child/adult complete bed bath 9.8 Perineal Care 9.9 Hot and cold applications 9.10 Ensuring intake and output 9.11 Positioning and removing
10. Physical, social, emotional, spiritual and culture	10.1 Fees 10.2 Health fund entitlements 10.3 Welfare entitlements 10.4 Payment Method and records 10.5 Public environment 10.6 Legal and ethical requirements 10.7 Writing details i.e. medical and consent forms 10.8 Conversations on the telephone 10.9 Secure location for written records 10.10 Offering a private location for discussions 10.11 Information disclosed to an appropriate person consistent with one's level of responsibility

EVIDENCE GUIDE

1. Critical aspects of competency	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Established rapport with the patient 1.2 Maintained confidentiality and privacy 1.3 Complied with established policies and procedures 1.4 Communicated effectively with patients and significant others and concerned health personnel 1.5 Responded effectively to patients lifestyle and psychosocial care needs 1.6 Provided care with minimum risk to patient, self and other health personnel
2. Underpinning knowledge	<ul style="list-style-type: none"> 2.1 Basic knowledge on common diseases/ ailments of target groups i.e. diabetes, Parkinson's strokes etc 2.2 Basic life support 2.3 Infection control guidelines 2.4 Existing health services / facilities 2.5 Rights and responsibilities of patient and health personnel 2.6 Literacy and numeracy relative to delivery of patient care 2.7 Living skills (activities of daily living) 2.8 Occupational Safety and Health 2.9 HACC (home and community care) guidelines 2.10 Basic knowledge on how to handle difficult and challenging behavior 2.11 Institutional policies and procedures 2.12 Basic knowledge on impact of lifestyle change 2.13 Impact of own values and beliefs on others
3. Underpinning skills	<ul style="list-style-type: none"> 3.1 Oral and written communication skills 3.2 Exercising patience and tolerance 3.3 Using time management strategies to set priorities 3.4 Following institution policies and procedures relating to work performance 3.5 Basic problem solving skills required include the ability to use available resources and priority workload 3.6 Dealing with conflict 3.7 Working with others and display empathy with patient and significant others
4. Resource implications	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Documented patient health information 4.2 Relevant policies and procedures manuals 4.3 Patient care-related forms 4.4 Workstation
5. Method of assessment	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Third party report 5.2 Observation of work performance at workstation 5.3 Portfolio 5.4 Interview
6. Context of assessment	<ul style="list-style-type: none"> 6.1 Assessment may be done in a workplace or in a simulated workplace setting.

UNIT OF COMPETENCY : **HANDLE WASTE IN A HEALTH CARE ENVIRONMENT**

UNIT CODE : **HCS323319**

UNIT DESCRIPTOR : This unit covers the knowledge, skills and attitudes to handle and dispose of waste in a safe manner within the health care environment.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Determine job requirements	1.1 Work sheets are reviewed to determine waste handling requirements 1.2 Appropriate equipment required for waste handling tasks is selected and obtained to maximize work effectiveness and efficiency 1.3 Health care sites are organized and set up to ensure safe, effective and efficient handling of waste in accordance with workplace requirements and relevant legislation 1.4 Potential risks and hazards to work are identified and managed in accordance with workplace requirements, OSH, infection control and other relevant legislation 1.5 Reporting identified risks are followed in accordance with workplace procedures 1.6 Emergency and personal protective equipment are selected and fitted in accordance with job requirements, manufactures' specifications, workplace requirements and relevant legislation
2. Identify and segregate waste	2.1 Hazardous, dangerous and non-conforming waste is clearly identified and handled in accordance with workplace policies and procedures as well as relevant legislation 2.2 All waste are accurately identified, labeled and segregated according to waste types in accordance with workplace policies and procedures and relevant legislation 2.3 All sorted waste are carefully placed into correct waste category containers to prevent litter in work areas and avoid cross-contamination 2.4 Waste containers are frequently monitored to ensure adequate available containers and to secure containment of waste 2.5 Full waste containers are emptied or replaced promptly to minimize disruption to the workplace in accordance with policies and procedures and job requirements 2.6 Segregated waste is clearly labeled in accordance with job requirements, workplace policies and procedures and relevant legislation
3. Transport and store waste	3.1 Appropriate transport equipment is selected for waste transport activities to maximize work effectiveness and efficiency and in accordance with workplace policies and procedures and relevant legislation

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>3.2 All transport equipment are color-coded and labeled in accordance with workplace policies and procedures and relevant legislation</p> <p>3.3 Transport loads are secured and not overloaded according to workplace requirements and relevant legislation</p> <p>3.4 Waste collection rounds are performed as often as required to minimize waste overflow hazards.</p> <p>3.5 Storage areas are enclosed and secured in accordance with workplace requirement and relevant legislation</p> <p>3.6 Waste types are stored in accordance with relevant legislation and workplace requirements</p>
4. Conduct quality control activities	<p>4.1 Waste is inspected and checked to ensure that it is placed in the correct waste receptacle</p> <p>4.2 Storage areas are inspected and checked to ensure that they are secured in accordance with workplace requirements and relevant legislation</p> <p>4.3 All details of quality control activities are documented accurately and promptly in accordance with workplace requirements and relevant legislation</p>
5. Clean up work areas	<p>5.1 Waste storage sites and all equipment are cleaned to ensure safe and effective future operation in accordance with company requirements</p> <p>5.2 Waste from cleaning activities is disposed of in accordance with workplace requirements, council requirements and relevant legislation</p>

RANGE OF VARIABLES

VARIABLE	RANGE
1. Health Care sites	1.1 Hospitals 1.2 Nursing homes 1.3 Clinics 1.4 Community settings 1.5 Home settings
2. Waste categories	2.1 Clinical waste 2.2 Body fluids, blood, suctioned fluids, excretions 2.3 Sharps 2.4 Cytotoxic waste 2.5 Pharmaceutical waste 2.6 Chemical waste 2.7 Radioactive waste 2.8 Organic products 2.9 Liquid waste 2.10 General waste
3. Equipment	Equipment include but not limited to: 3.1 Barriers and warning signs 3.2 Spill kits 3.3 Mobile garbage bins and trolleys 3.4 Appropriate waste containers
4. Potential risks and hazards	4.1 Risks and hazards that could lead to injury or illness of employees, contractors, visitors or the public 4.2 Damage to plant 4.3 Vehicles or property 4.4 Harm the environment 4.5 Manual handling 4.6 Contamination 4.7 Compaction equipment 4.8 Gases and fumes 4.9 Hazardous waste i.e. sharps
5. Emergency and personal protective equipment	May include but not limited to: 5.1 Gloves 5.2 Overalls and protective clothing 5.3 Eye protection 5.4 Appropriate footwear 5.5 Fire extinguisher 5.6 First aid Kit 5.7 Spill Kit 5.8 Emergency Procedures Guide 5.9 Material Safety Data Sheet information 5.10 Breathing apparatus 5.11 Face shield or mask 5.12 Hearing protection
6. Waste characteristics	Waste characteristics may include but not limited to: 6.1 Waste streams 6.2 Waste types 6.3 Waste generation 6.4 Disposal Method 6.5 Recycling 6.6 Reuse 6.7 Contamination

VARIABLE	RANGE
7. Cleaning Method	7.1 Shoveling 7.2 Sweeping out 7.3 Vacuuming 7.4 Use of decontamination products 7.5 Water hosing 7.6 Cleaning products/fluids
8. Workplace procedures	Workplace procedures may include but not limited to: 8.1 Cleaning procedures 8.2 Quality activities 8.3 Team meetings 8.4 Incident notification 8.5 Work performance requirements 8.6 Infection control practices

EVIDENCE GUIDE

1. Critical aspects of competency	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> 1.1 Interpreted job requirements 1.2 Organized work areas and waste containers 1.3 Selected appropriate emergency and personal protective equipment 1.4 Identified potential risks, hazards to waste handling and waste non- conformances
2. Underpinning knowledge	<ul style="list-style-type: none"> 2.1 Waste types, streams and characteristics 2.2 Site waste management processes 2.3 Workplace waste management plans 2.4 Waste contaminants 2.5 Waste non-conformance procedures 2.6 Potential risks and hazards to waste sorting and containment 2.7 Sorting and transporting techniques 2.8 Containment Method 2.9 Emergency response procedures 2.10 Workplace requirements 2.11 Occupational health and safety requirements 2.12 Duty of care in provision of waste handling activities 2.13 Relevant industry standards 2.14 Relevant legislation 2.15 Relevant environmental regulations 2.16 Infection control guidelines
3. Underpinning skills	<ul style="list-style-type: none"> 3.1 Communication skills 3.2 Identifying waste streams/types/characteristics 3.3 Reading and interpreting work requirements 3.4 Organizing equipment availability 3.5 Operating Equipment 3.6 Materials handling skills 3.7 Identifying waste types 3.8 Identifying and handling waste non-conformances 3.9 Packaging and containment of waste 3.10 Methodical organization of work 3.11 Safe and efficient work practices 3.12 Using emergency and personal protective equipment
4. Resource implications	<p>The following resources MUST be provided:</p> <ul style="list-style-type: none"> 4.1 Waste collection requirements 4.2 Waste management plans 4.3 Range of wastes for identification and handling 4.4 Workplace policies and procedures 4.5 OHS requirements 4.6 Personal protective equipment 4.7 Equipment for waste handling
5. Method of assessment	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> 5.1 Demonstration with questioning 5.2 Interview 5.3 Portfolio
6. Context of assessment	<p>This unit is most appropriately assessed in the workplace or in simulated workplace environment</p>

SECTION 3 TRAINING STANDARDS

This set of standards provides the Technical and Vocational Education and Training (TVET) providers with information and other important requirements to consider when designing training programs for **HEALTH CARE SERVICES NC II**.

This includes information on curriculum design; training delivery; trainee entry requirements; tools and equipment; training facilities, trainer's qualification and institutional assessment.

3.1 CURRICULUM DESIGN

Course Title: **HEALTH CARE SERVICES**

NC Level: **NC II**

Nominal Training Duration: **996 Hours**

Course Description:

This course is designed to enhance the knowledge, skills and attitudes of **Health Care Services NC II** in accordance with industry standards. It covers the basic common and core competencies in preparing and maintaining beds, collecting and maintaining linen stocks at end-user locations, assisting with patient mobility, transport and bio-psychosocial support care of patients and handling waste in a health care environment.

BASIC COMPETENCIES (18 Hours)

Unit of Competency	Learning Outcomes	Methodology	Assessment Approach
1. Participate in workplace communication	1.1 Obtain and convey workplace information 1.2 Complete relevant work related documents 1.3 Participate in workplace meeting and discussion	<ul style="list-style-type: none">• Group discussion• Interaction	<ul style="list-style-type: none">• Demonstration• Observation• Interviews/questioning
2. Work in a team environment	2.1 Describe and identify team role and responsibility in a team 2.2 Describe work as a team member	<ul style="list-style-type: none">• Discussion• Interaction	<ul style="list-style-type: none">• Demonstration• Observation• Interviews/questioning
3. Practice career professionalism	3.1 Integrate personal objectives with organizational goals 3.2 Set and meet work priorities 3.3 Maintain professional growth and development	<ul style="list-style-type: none">• Discussion• Interaction	<ul style="list-style-type: none">• Demonstration• Observation• Interviews/questioning
4. Practice occupational health and safety	4.1 Evaluate hazard and risks 4.2 Control hazards and risks 4.3 Maintain occupational health and safety awareness	<ul style="list-style-type: none">• Discussion• Plant tour• Symposium	<ul style="list-style-type: none">• Observation• Interview

COMMON COMPETENCIES (18 Hours)

Unit of Competency	Learning Outcomes	Methodology	Assessment Approach
1. Implement and monitor infection control policies and procedures	1.1 Provide information to the work group about the organization's infection control policies and procedures 1.2 Integrate the organization's infection control policy and procedure into work practices 1.3 Monitor infection control performance and implement improvements in practices	<ul style="list-style-type: none"> • Lecturette • Brainstorming 	<ul style="list-style-type: none"> • Observation and Oral Questioning • Grid Question • Practical Exercise
2. Respond effectively to difficult/challenging behavior	2.1 Plan and respond to emergencies 2.2 Report and review incidents	<ul style="list-style-type: none"> • Lecturette • Brainstorming 	<ul style="list-style-type: none"> • Observation and Oral Questioning • Grid Question • Practical Exercise
3. Apply basic first aid	3.1 Assess the situation 3.2 Apply basic first aid techniques 3.3 Communicate details of the incident	<ul style="list-style-type: none"> • Lecturette • Brainstorming 	<ul style="list-style-type: none"> • Observation and Oral Questioning • Grid Question • Practical Exercise
4. Maintain high standard of patient services	4.1 Communicate appropriately with patients 4.2 Establish and maintain good interpersonal relationship with patients 4.3 Act in a respectful manner at all times 4.4 Evaluate own work to maintain a high standard of patient service	<ul style="list-style-type: none"> • Lecturette • Brainstorming 	<ul style="list-style-type: none"> • Observation and Oral Questioning • Grid Question • Practical Exercise

CORE COMPETENCIES
(960 Hours)

Unit of Competency	Learning Outcomes	Methodology	Assessment Approach
1. Prepare and maintain beds	1.1 Prepare the area for bed making 1.2 Perform bed making according to established institution procedures 1.3 Perform after care activities of materials and equipment used	<ul style="list-style-type: none"> • Lecturette • Brainstorming 	<ul style="list-style-type: none"> • Observation and Oral Questioning • Grid Question • Practical Exercise
2. Collect and maintain linen stocks at end-user location	2.1 Explain the workplace procedure in collecting soiled linen 2.2 Maintain linen stock levels 2.3 Collect soiled linen 2.4 Distribute clean linen	<ul style="list-style-type: none"> • Lecturette • Role Playing 	<ul style="list-style-type: none"> • Interview • Observation
3. Assist with patient mobility	3.1 Explain the workplace procedures in assisting patient with mobility 3.2 Prepare to assist with patient mobility 3.3 Assist with patient mobility 3.4 Complete patient mobility assistance	<ul style="list-style-type: none"> • Simulation • One-on-One Teaching • On-the-Job Practice • Video Tapes • Lecture 	<ul style="list-style-type: none"> • Interview • Demonstration • Return Demonstration
4. Assist in transporting patient	4.1 Explain the workplace procedures in assisting patient transport 4.2 Prepare patient for transport 4.3 Assist in patient transport 4.4 Perform post-transport care	<ul style="list-style-type: none"> • Lecture • Simulation • Role Playing 	<ul style="list-style-type: none"> • Demonstration • Third Party Report • Return Demonstration
5. Assist with bio-psycho-social care of patient	5.1 Explain the concept of bio-psycho-social support 5.2 Assist the patient in verbalizing his perceived problems related to bio-psycho-social concerns 5.3 Perform bio-psycho-social measures and procedures implemented in the institution 5.4 Educate the patient on alternatives on healthy bio-psycho-social well-being.	<ul style="list-style-type: none"> • Active Listening • Lecture • Simulation • Role Playing 	<ul style="list-style-type: none"> • Interview • Demonstration • Return Demonstration • Third Party Report
6. Handle waste in a health care environment	6.1 Explain the concepts and principles of waste management and safe handling 6.2 Determine job requirements 6.3 Identify and segregate waste 6.4 Transport and store waste 6.5 Conduct quality control activities on clean up work areas	<ul style="list-style-type: none"> • Lecture • Brainstorming • Demonstration • Experiential Learning • Simulation • One-to-One Teaching • On-the-Job Practice 	<ul style="list-style-type: none"> • Demonstration • Interview • Return Demonstration • Third Party Report

3.2 TRAINING DELIVERY

The delivery of training should adhere to the design of the curriculum. Delivery should be guided by the 10 basic principles of competency-based TVET.

- The training is based on curriculum developed from the competency standards;
- Learning is modular in its structure;
- Training delivery is individualized and self-paced;
- Training is based on work that must be performed;
- Training materials are directly related to the competency standards and the curriculum modules;
- Assessment is based in the collection of evidence of the performance of work to the industry required standard;
- Training is based both on and off-the-job components;
- Allows for recognition of prior learning (RPL) or current competencies;
- Training allows for multiple entry and exit; and
- Approved training programs are nationally accredited.

The competency – based TVET system recognizes various types of delivery modes, both on and off-the-job as long as the learning is driven by the competency standards specified by the industry.

The following training modalities may be adopted when designing training programs:

- The dualized mode of training delivery is preferred and recommended. Thus programs would contain both in-school and in – industry training or fieldwork components. Details can be referred to the Dual Training System (DTS) Implementing Rules and Regulations.
- Modular/self-paced learning is a competency-based training modality wherein the trainee is allowed to progress at his own pace. The trainer facilitates the training delivery
- Peer teaching/mentoring is a training modality wherein fast learners are given the opportunity to assist the slow learners
- Supervised industry training or on-the-job training is an approach in training designed to enhance the knowledge an skills of the trainee through actual experience in the workplace to acquire specific competencies prescribed in the training regulations.
- Distance learning is a formal education process in which majority of the instruction occurs when the students and instructor are not in the same place. Distance learning may employ correspondence study, or audio, video or computer technologies.
- Project-Based Instruction is an authentic instructional model or strategy in which students plan, implement and evaluate projects that have real world applicants.

3.3 TRAINEE ENTRY REQUIREMENTS:

Trainees or students wishing to enroll in this course qualification should possess the following requirements:

- 16 years old and above
- Must pass the trainability / aptitude test
- Can communicate effectively both orally and in written form
- Physically, emotionally and mentally fit
- Can perform basic mathematical computation

This list does not include specific institutional requirements such as educational attainment, appropriate work experience, and others that may be required of the trainees by the school or training center delivering this TVET program.

3.4 TOOLS, EQUIPMENT AND MATERIALS HEALTH CARE SERVICES NC II

Recommended list of tools, equipment and materials for the training of a maximum of 25 trainees

TOOLS		EQUIPMENT		MATERIALS	
Qty.	Description	Qty.	Description	Qty.	Description
3 pcs	Dressing tray (complete with accessories) and alcohol and betadine	3 units	Hospital bed	12 pcs	Linen (different sizes)
		3 pcs	Bedside table	6 pcs	Pillow and Pillow case
3 pcs	Sputum cap	3 pcs	Over bed	3 pcs	Rubber sheet
12 pcs	Thermometer	3 pcs	Foot stool	3 pcs	Thermal blanket
12 pcs	Mask	3 pcs	IV stand	3 pcs	Kelly pad
3 pcs	Goggles	1 unit	Wheelchair	3 rings	Rubber ring
12 pcs	Cap	1 unit	Strecher	6 pcs	Patients gown
12 pcs	Strap	1 unit	Oxygen tank and accessories	6 pcs	Draw sheet
3 pcs	Splints	3 sets	BP apparatus	6 pcs	Towel, hand towel
3 pcs	Slings	3 pcs	Commode	1 set	Waste bins (win, dry, infectious, sharp)
3 pcs	Bandages	1 set	Nebulizer	3 pcs	Bed pan
3 pcs	Crutches	1 unit	Linen trolley	3 pcs	Basin
2 sets	Feeding utensils	1 unit	Line hamper	3 pcs	Soap dish
		1 unit	Shelves	3 pcs	Urinals
		1 pc	Pert light	1 pc	Ambu man
				1 pc	Ambu Baby
				3 pcs	Plaster

3.5 TRAINING FACILITIES HEALTH CARE SERVICES NC II

The Health Care Services Learning Facility must be of concrete structure. Based on class size of **25** students / trainees, the space requirements for the teaching / learning and curriculum areas are as follows:

TEACHING / LEARNING AREAS	SIZE IN METERS	AREA IN SQ. METERS	QTY.	TOTAL AREA IN SQ. METERS
Laboratory Area	4 X 5	20	1	20
Tool Room and S/M storage Area	3 X 5	15	1	15
Learning Resources Area*	5 X 7	35	1	35
Wash Area/Comfort Room (male & female)*	2.5 X 4	10	1	10
Admin and Staff Room	5 X 5	25	1	25
Circulation Area**			1	30
Total				135
Total Workshop Area				135

3.6 TRAINER'S QUALIFICATION (TQ II)

- Must be a licensed health-service related practitioner
- Must have undergone training on Training Methodology II (TM II)
- Must be physically, emotionally and mentally fit
- Must possess good moral character
- With at least 2 years experience in the health service industry

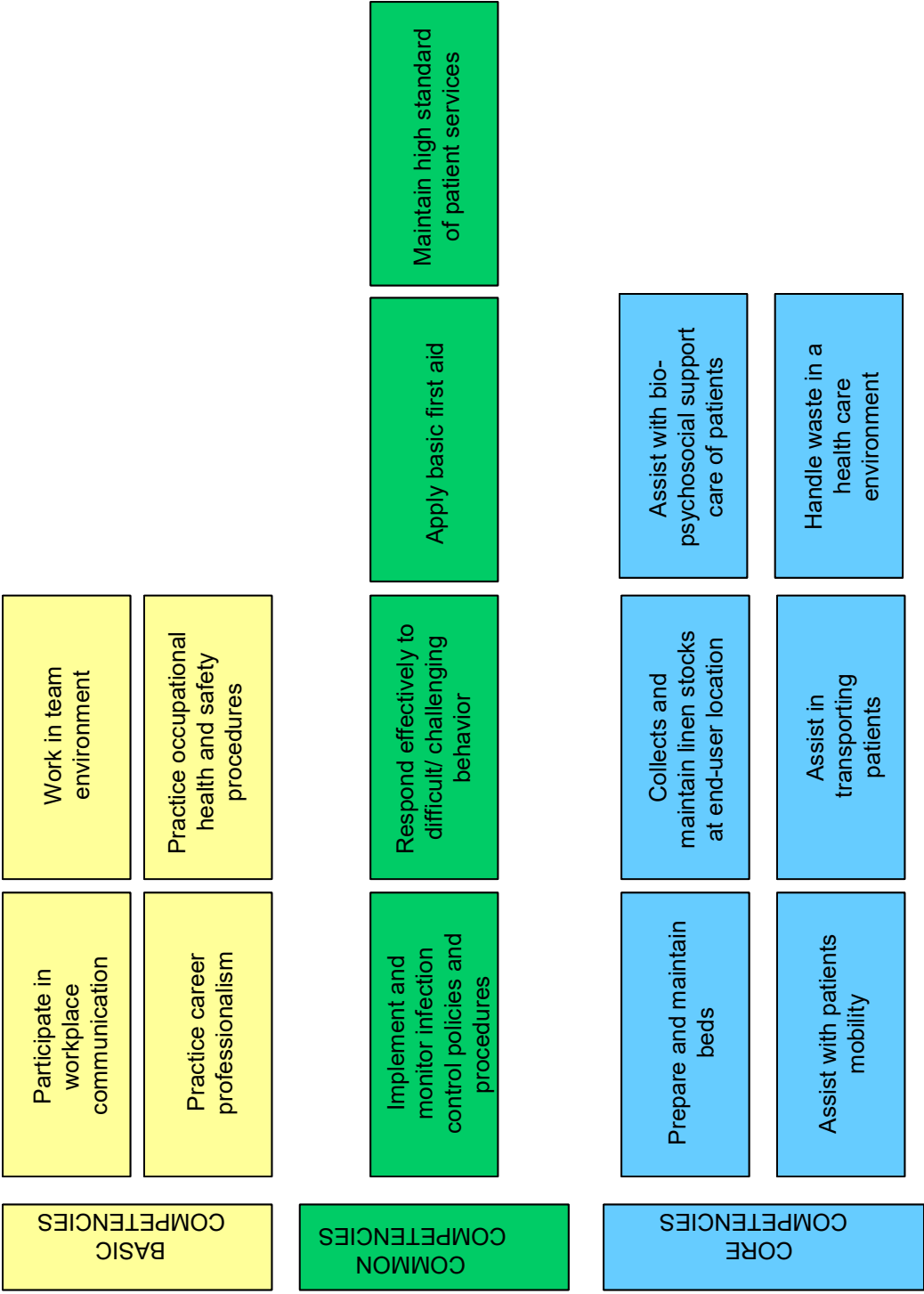
3.7 INSTITUTIONAL ASSESSMENT

Institutional assessment is undertaken by trainees to determine their achievement of units of competency. A certificate of achievement is issued for each unit of competency.

SECTION 4 NATIONAL ASSESSMENT AND CERTIFICATION ARRANGEMENTS

- 4.1 To attain the National Qualification of Health Care Services, the candidate must demonstrate competence through project-type assessment covering all units listed in Section 1. Successful candidates shall be awarded a National Certificate, NC II signed by the TESDA Director General.
- 4.2 Assessment shall focus on the core units of competency. The basic and common units shall be integrated or assessed concurrently with the core units.
- 4.3 The following are qualified to apply for assessment and certification:
 - 4.3.1 Graduates of formal, non-formal and informal including enterprise-based training programs.
 - 4.3.2 Experienced Workers (wage employed or self-employed)
- 4.4 Reassessment in a unit of competency is allowed only after one month from the date of assessment. Reassessment for a National Certificate shall be done only on the task/s that the candidate did not successfully achieve.
- 4.5 A candidate who fails the assessment for two (2) consecutive times will be required to go through a refresher course before taking another assessment.
- 4.6 The guidelines on assessment and certification are discussed in detail in the Procedures Manual on Assessment and Certification.

**COMPETENCY MAP
INSTITUTIONAL HEALTH CARE (HEALTH CARE ASSISTANT) NC II**



DEFINITION OF TERMS

SPECIFIC TERMS:

- 1) **Body Mechanics** – refers to using the body in an efficient and careful way
- 2) **Hazardous Waste** – refers to the items contaminated with blood, body fluids, or body substances that maybe harmful to others
- 3) **OSH** – refers to Occupational Safety and Health
- 4) **Commodes** – refers to movable stand containing a washbowl
- 5) **Chair Lifts** – refers to power-driven chair assembly used to transport people
- 6) **Dietitians** – refers to specialist in dietetic
- 7) **Immunization** – refers to process of increasing the state of immunity
- 8) **First Aid Kit** – refers to emergency tools used to administer treatment to injured or sick person
- 9) **Balkan frames** – refers to a device used for orthostatic correction
- 10) **Linen** – refers to materials used in draping
- 11) **Ambu bag** – refers to (Bag – Valve – mask), a device used to ventilate patients who are unable to breath
- 12) **Walking frames** – refers to orthostatic device used to support body weight
- 13) **Sling** – refers to a material or a cloth used to support the upper extremity
- 14) **Splints** – refers to a material or a piece of cloth used to immobilize a limb in the case of fracture, disease of deformity
- 15) **Trolley** – refers to a rolling device used to transport materials
- 16) **PPE** – refers to personal protective equipment
- 17) **Wheel chair** – refers to a device used to transport patient from one place to another in a sitting position
- 18) **Stretchers** – refers to a device used in transferring patients in lying position
- 19) **Pressure Bandage** – refers to a piece of material used to cover a wound and immobilize a part of the body or restrict the movement
- 20) **Thermal blanket** – refers to a material used to decrease the body temperature or keep the patient warm
- 21) **Stressors** – refers to an agent or factor that produces stress
- 22) **Choking** – refers to a person having difficulty in breathing
- 23) **Aspiration** – refers to removal of liquids or gases by means of suction
- 24) **Suffocation** – refers to suppression of ones breathing with out access of oxygen
- 25) **Depression** –refers to mental condition of gloom or sadness
- 26) **Suicide** – refers to the act of intentionally killing oneself
- 27) **Assault** – refers to violent physical or verbal attack

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