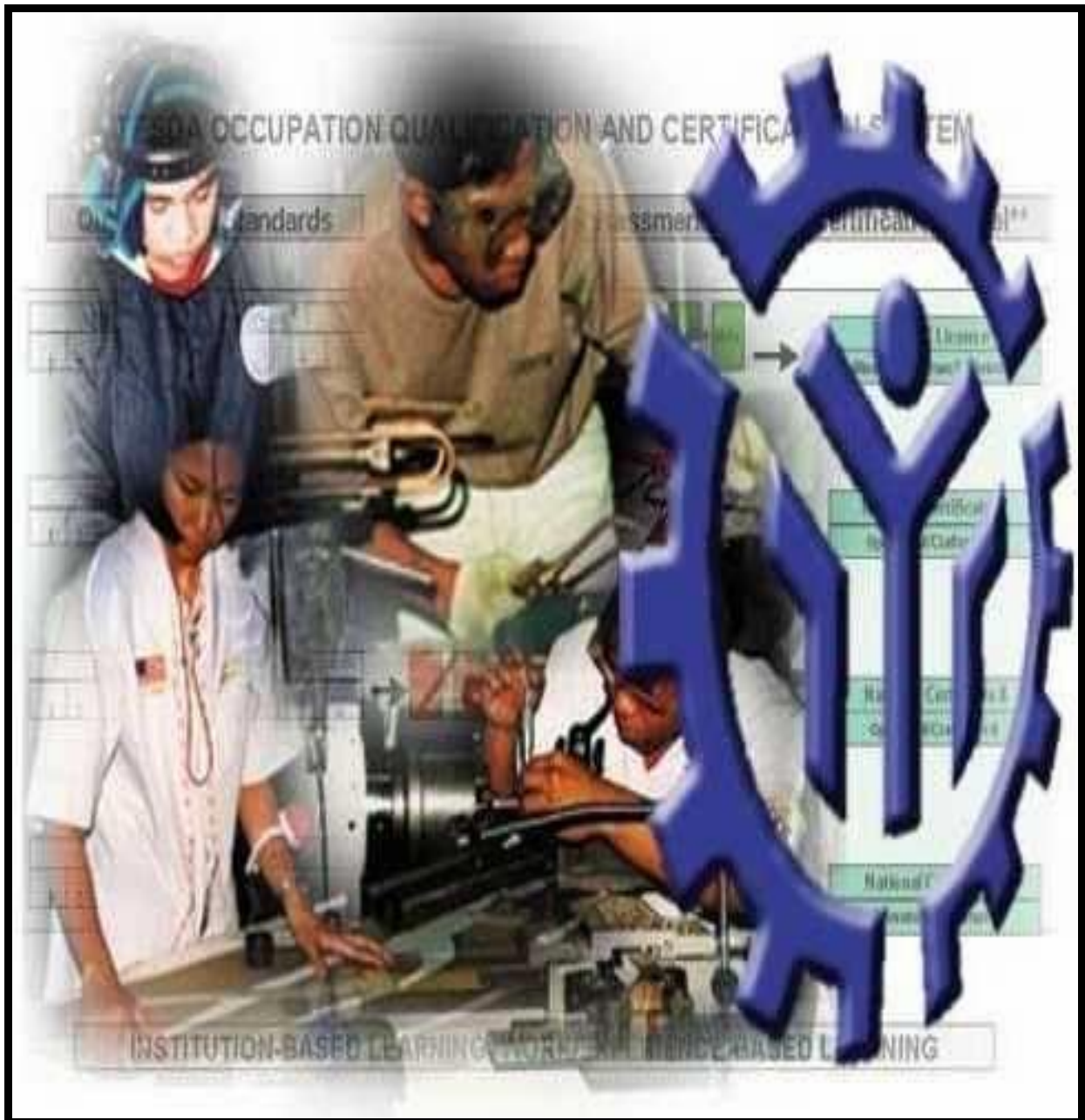
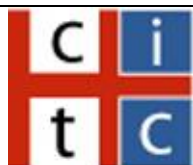


# TRAINING REGULATIONS

## BARANGAY HEALTH SERVICES NC II



### HEALTH, SOCIAL, AND OTHER COMMUNITY DEVELOPMENT SERVICES SECTOR



Health Care  
Industry Training  
Council, Inc.



Technical  
Education and  
Skills  
Development  
Authority

*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 TR 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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## TRAINING REGULATIONS FOR BARANGAY HEALTH SERVICES NC II

### SECTION 1. BARANGAY HEALTH SERVICES NC II QUALIFICATION

The **BARANGAY HEALTH SERVICES NC II** Qualification consists of competencies that a person must achieve to work within a community development framework, prepare for work in the community service industry, support community resources, provide primary/residential care, support community participation, recruit and coordinate volunteers, develop and provide health education program in the community, implement health promotion and community interventions.

The Units of Competency comprising this Qualification include the following:

<b>UNIT CODE</b>	<b>BASIC COMPETENCIES</b>
500311105	Participate in workplace communication
500311106	Work in a team environment
500311107	Practice career professionalism
500311108	Practice Occupational health and safety procedures

<b>UNIT CODE</b>	<b>COMMON COMPETENCIES</b>
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

<b>UNIT CODE</b>	<b>CORE COMPETENCIES</b>
HCS346301	Work within a community development framework
HCS346302	Prepare for work in the community service industry
HCS346303	Support community resources
HCS346304	Provide primary / residential care
HCS346305	Support community participation
HCS346306	Recruit and coordinate volunteers

HCS346307	Respond holistically to client issues
HCS346308	Develop and provide health education program in the community
HCS346309	Implement health promotion and community interventions

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

- Barangay Health Worker NC II
- Community Health Assistant NC II

## SECTION 2. COMPETENCY STANDARDS

This section gives the details of the contents of the basic, common and core units of competency required in **BARANGAY HEALTH 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.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <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 <b>appropriate sources</b> . 1.2 Effective questioning, active listening and speaking skills are used to gather and convey information. 1.3 Appropriate <b>medium</b> 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 <b>storage</b> 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 <b>protocols</b> .

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>2.4 <b>Workplace interactions</b> are conducted in a courteous manner.</p> <p>2.5 Questions about simple routine workplace procedures and matters concerning working conditions of employment are asked and responded to.</p> <p>2.6 Meetings outcomes are interpreted and implemented.</p>
3. Complete relevant work related documents	<p>3.1 Range of <b>forms</b> relating to conditions of employment are completed accurately and legibly.</p> <p>3.2 Workplace data is recorded on standard workplace forms and documents.</p> <p>3.3 Basic mathematical processes are used for routine calculations.</p> <p>3.4 Errors in recording information on forms / documents are identified and properly acted upon.</p>



## 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 interaction	5.1 Face to face 5.2 Telephone 5.3 Electronic and two way radio 5.4 Written including electronic, 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

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

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

UNIT CODE : **500311106**

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

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Describe team role and scope	1.1 The <b><i>role and objective of the team</i></b> is identified from available sources of information. 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 activities and objectives. 3.2 Effective and appropriate contributions made to complement team activities and objectives, based on individual skills and competencies and <b><i>workplace context</i></b> . 3.3 Observe protocols in reporting using standard operating procedures. 3.4 Contribute to the development of teamwork 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 judgment 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 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"> <li>1.1 Operated in a team to complete workplace activity</li> <li>1.2 Worked effectively with others</li> <li>1.3 Conveyed information in written or oral form</li> <li>1.4 Selected and used appropriate workplace language</li> <li>1.5 Followed designated work plan for the job</li> <li>1.6 Reported outcomes</li> </ul>
<p>2. Underpinning knowledge and attitude</p>	<ul style="list-style-type: none"> <li>2.1 Communication process</li> <li>2.2 Team structure</li> <li>2.3 Team roles</li> <li>2.4 Group planning and decision making</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Communicate appropriately, consistent with the culture of the workplace</li> </ul>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <ul style="list-style-type: none"> <li>4.1 Access to relevant workplace or appropriately simulated environment where assessment can take place</li> <li>4.2 Materials relevant to the proposed activity or tasks</li> </ul>
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> <li>5.1 Observation of the individual member in relation of the work activities of the group.</li> <li>5.2 Observation of simulation and or role play involving the participation of individual member to the attainment of organizational goal.</li> <li>5.3 Case studies and scenarios as a basis for discussion of issues and strategies in teamwork.</li> </ul>
<p>6. Context of assessment</p>	<ul style="list-style-type: none"> <li>6.1 Competency may be assessed in workplace or in a simulated workplace setting.</li> <li>6.2 Assessment shall be observed while task are being undertaken whether individually or in group.</li> </ul>

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.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <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 <b><i>evaluation</i></b> . 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 <b><i>Resources</i></b> 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 <b><i>Trainings and career opportunities</i></b> are identified and availed of based on job requirements. 3.2 <b><i>Recognitions</i></b> are sought / received and demonstrated as proof of career advancement. 3.3 <b><i>Licenses and/or certifications</i></b> relevant to job and career are obtained and renewed.

## RANGE OF VARIABLES

<b>VARIABLE</b>	<b>RANGE</b>
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 Appreciation 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

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



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.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Identify hazards and risks	1.1 <b>Safety regulations</b> and workplace safety and hazard control practices and procedures are clarified and explained based on organization procedures. 1.2 <b>Hazards/risks</b> 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 <b>Contingency measures</b> 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.

<p style="text-align: center;"><b>ELEMENT</b></p>	<p style="text-align: center;"><b>PERFORMANCE CRITERIA</b></p> <p><i>Italicized terms</i> are elaborated in the Range of Variables</p>
<p>3. Control hazards and risks</p>	<p>3.1 Occupational Health and Safety (OHS) procedures for controlling hazards/ risks in workplace are consistently followed.</p> <p>3.2 Procedures for dealing with workplace accidents, fire and emergencies are followed in accordance with organization OHS policies.</p> <p>3.3 <b>Personal protective equipment (PPE)</b> is correctly used in accordance with organization OHS procedures and practices.</p> <p>3.4 Appropriate assistance is provided in the event of a workplace emergency in accordance with established organization protocol.</p>
<p>4. Maintain OHS awareness</p>	<p>4.1 <b>Emergency-related drills and trainings</b> are participated in as per established organization guidelines and procedures.</p> <p>4.2 <b>OHS personal records</b> are completed and updated in accordance with workplace requirements.</p>

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Safety regulations	May include but are not limited to: <ol style="list-style-type: none"> <li>1.1 Clean Air Act</li> <li>1.2 Building Code</li> <li>1.3 National Electrical and Fire Safety Codes</li> <li>1.4 Waste management statutes and rules</li> <li>1.5 Philippine Occupational Safety and Health Standards</li> <li>1.6 DOLE regulations on safety legal requirements</li> <li>1.7 ECC regulations</li> </ol>
2. Hazards / Risks	May include but are not limited to: <ol style="list-style-type: none"> <li>2.1 Physical hazards - impact, illumination, pressure, noise, vibration, temperature, radiation</li> <li>2.2 Biological hazards – bacteria, viruses, plants, parasites, mites, molds, fungi, insects</li> <li>2.3 Chemical hazards – dusts, fibers, mists, fumes, smoke, gasses, vapors</li> <li>2.4 Ergonomics               <ul style="list-style-type: none"> <li>● Psychological factors – over exertion / excessive force, awkward / static positions, fatigue, direct pressure, varying metabolic cycles</li> <li>● Physiological factors – monotony, personal relationship, work out cycle</li> </ul> </li> </ol>
3. Contingency measures	May include but are not limited to: <ol style="list-style-type: none"> <li>3.1 Evacuation</li> <li>3.2 Isolation</li> <li>3.3 Decontamination</li> <li>3.4 (Calling designed) emergency personnel</li> </ol>

VARIABLE	RANGE
4. PPE	May include but are not limited to: 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	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 toxic 5.7 Disaster preparedness / management
6. OHS personal records	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"> <li>1.1 Explained clearly established workplace safety and hazard control practices and procedures</li> <li>1.2 Identified hazards/risks in the workplace and its corresponding indicators in accordance with company procedures</li> <li>1.3 Recognized contingency measures during workplace accidents, fire and other emergencies</li> <li>1.4 Identified terms of maximum tolerable limits based on threshold limit value –TLV.</li> <li>1.5 Followed Occupational Health and Safety (OHS) procedures for controlling hazards / risks in workplace</li> <li>1.6 Used Personal Protective Equipment (PPE) in accordance with company OHS procedures and practices</li> <li>1.7 Completed and updated OHS personal records in accordance with workplace requirements</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 OHS procedures and practices and regulations</li> <li>2.2 PPE types and uses</li> <li>2.3 Personal hygiene practices</li> <li>2.4 Hazards / risks identification and control</li> <li>2.5 Threshold Limit Value (TLV)</li> <li>2.6 OHS indicators</li> <li>2.7 Organization safety and health protocol</li> <li>2.8 Safety consciousness</li> <li>2.9 Health consciousness</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Practice of personal hygiene</li> <li>3.2 Hazards / risks identification and control skills</li> <li>3.3 Interpersonal skills</li> <li>3.4 Communication skills</li> </ul>

4. Resource implications	The following resources <b>MUST</b> be provided: 4.1 Workplace or assessment location 4.2 OHS personal records 4.3 PPE 4.4 Health records
5. Method of assessment	Competency may be assessed through: 5.1 Portfolio Assessment 5.2 Interview 5.3 Case Study / Situation
6. Context of assessment	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 : **HCS323202**

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.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <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	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. 1.2 Information about identified hazards and the outcomes of infection risk assessments is regularly provided to the work group. 1.3 Opportunity is provided for the work group to seek further information on workplace infection control issues and practices.
2. Integrate the organization's infection control policy and procedure into work practices	2.1 Infection control policy and procedures are implemented by supervisor and members of the work group. 2.2 Liaison is maintained with person responsible for organization-wide infection control. 2.3 The supervisor's coaching support ensures that individuals/teams are able to implement infection control practices. 2.4 Work procedures are adopted to reflect appropriate infection control practices.

ELEMENT	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
	<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.</p>
<p>3. Monitor infection control performance and implement improvements in practices</p>	<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> <p>3.4 Supervisor provides feedback to team and individuals on compliance issues, changes in work procedures and infection control outcomes.</p> <p><b>3.5</b> Training in work procedures is provided as required to ensure maintenance of <b><i>infection control standards.</i></b></p> <p><b>3.6</b> Inadequacies in work procedures and infection control measures are identified, corrected or reported to <b><i>designated personnel.</i></b></p> <p>3.7 Records of infection control risks and incidents are accurately maintained as required.</p> <p>3.8 <b><i>Aggregate infection control</i></b> information reports are used to identify hazards, to monitor and improve risk control methods and to indicate training needs.</p>



## RANGE OF VARIABLES

VARIABLE	RANGE
<p>1. Infection Control Policies and Procedures</p>	<p>This may include but not limited to:</p> <ul style="list-style-type: none"> <li>1.1 Cleaning procedures and schedules</li> <li>1.2 Cleaning agents</li> <li>1.3 Cleaning equipment</li> <li>1.4 Handling, storage and disposal of all types of waste</li> <li>1.5 Food handling and food safety</li> <li>1.6 Hygiene procedures</li> <li>1.7 Infection control risk management</li> <li>1.8 Infection control incident and hazard reporting</li> <li>1.9 Sterilizing</li> <li>1.10 Linen production and handling</li> <li>1.11 Maintenance procedures</li> <li>1.12 Storage requirements</li> <li>1.13 Personal protective clothing</li> <li>1.14 Work flows</li> <li>1.15 Management of blood and body fluid spills</li> <li>1.16 Single use of disposables</li> <li>1.17 Aseptic techniques</li> <li>1.18 Skin preparation procedures</li> <li>1.19 Immunization</li> <li>1.20 Needle stick injuries</li> <li>1.21 Personal contact with infectious patients</li> <li>1.22 Standard and additional precautions</li> <li>1.23 Confidentiality</li> <li>1.24 Employee training</li> <li>1.25 Contractors</li> </ul>
<p>2. Industry Codes of Practice</p>	<ul style="list-style-type: none"> <li>2.1 National Health and Medical Research Council Guidelines for infection control</li> <li>2.2 Local and National Government Guidelines and Standards</li> <li>2.3 Manufacturer's recommendations and operating manuals</li> </ul>

VARIABLE	RANGE
<p>3. Identified hazards and the outcomes of infection risk assessment</p>	<p>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</p>
<p>4. Infection Control Monitoring Procedures</p>	<p>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</p>
<p>5. Designated personnel</p>	<p>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</p>
<p>6. Aggregate infection control information</p>	<p>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</p>

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate</p> <ul style="list-style-type: none"> <li>1.1 Communicated with team and individuals on organizational policy and procedures for infection control</li> <li>1.2 Applied infection control policies and procedures which impact on work processes of the specific work unit</li> <li>1.3 Applied procedures for adopting appropriate infection practices within work unit</li> <li>1.4 Provided appropriate supervision of work group</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>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</li> <li>2.2 The hierarchy risk control measures from most to least preferred, that is, elimination, engineering controls, administrative control, and lastly, personal protective equipment</li> <li>2.3 Knowledge of infection risks and control measures in specific work unit and related work processes</li> <li>2.4 The significance of patient confidentiality in relation to infection control</li> <li>2.5 The significance of other management systems and procedures for infection control</li> <li>2.6 Literacy levels and communication skills of work group members and consequent suitable communication techniques</li> <li>2.7 Organizational procedures for monitoring, training</li> <li>2.8 Basic understanding of communicable disease transmission</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Effective communication and interpersonal skills including: <ul style="list-style-type: none"> <li>- language competence</li> <li>- literacy and reading competence</li> </ul> </li> <li>3.2 Negotiation</li> <li>3.3 Work planning and management</li> <li>3.4 Managing change of work processes</li> </ul>

	<p>3.5 Monitoring compliance with policy and procedures</p> <p>3.6 Maintaining and interpreting infection control records</p>
4. Resource Implications	<p>The following resources <b>MUST</b> 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>
5. Method of assessment	<p>Competency may be assessed through:</p> <p>5.1 Observation with questioning</p> <p>5.2 Interview</p> <p>5.3 Portfolio</p> <p>5.4 Demonstration with questioning</p>
6. Context of assessment	<p>6.1 Assessment may be done in the workplace or in a simulated workplace setting.</p>

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

UNIT CODE : **HCS323203**

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

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Plan responses	1.1 <b>Responses are planned</b> to instances of difficult or challenging behavior to maximize the availability of other appropriate staff and resources. 1.2 Specific manifestations of <b>difficult or challenging behavior</b> are identified and <b>strategies appropriate</b> 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 <b>institutional policy and procedures</b> . 2.2 Communication is used effectively to achieve the desired outcomes in responding to difficult or challenging behavior. 2.3 <b>Appropriate strategies are selected</b> to suit particular instances of difficult or challenging behavior.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
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 behavior	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"> <li>1.1 Identified specific manifestations of difficult or challenging behavior and strategies are planned, selected and applied as required</li> <li>1.2 Maintained personal safety and the safety of others</li> <li>1.3 Reported incidents, reviewed and responded quickly and effectively to contingencies</li> <li>1.4 Debriefing mechanisms are used</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 OSH and issues relating to difficult and challenging behavior</li> <li>2.2 Patient issues which need to be referred to an appropriate health professional</li> <li>2.3 Ability to interpret and follow the instructions and guidance of health professionals involved with the care of patient / client</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Effectively using techniques for monitoring own service area including client satisfaction</li> <li>3.2 Speaking in a firm, diplomatic and culturally appropriate manner</li> <li>3.3 Remaining calm and positive in adversity</li> <li>3.4 Thinking and responding quickly and strategically</li> <li>3.5 Remaining alert to potential incidents of difficult or challenging behavior</li> <li>3.6 Monitoring and/or maintaining security equipment</li> <li>3.7 Working with others and displaying empathy with patient and relatives</li> </ul>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <ul style="list-style-type: none"> <li>4.1 Access to relevant workplace or appropriately simulated environment where assessment can take place</li> <li>4.2 Relevant institutional policy, guidelines, procedures and protocols</li> <li>4.3 Emergency response procedures and employee support arrangements</li> </ul>



5. Method assessment	of Competency <b>MUST</b> be assessed through: 5.1 Observation with questioning 5.2 Demonstration with questioning
6. Context assessment	6.1 Assessment may be done in the workplace or in a simulated workplace setting.

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

UNIT CODE : **HCS323204**

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.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Assess the situation	1.1 <b><i>Physical hazards</i></b> to self and casualty's health and safety are identified. 1.2 Immediate <b><i>risks</i></b> 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 <b><i>vital signs</i></b> and physical condition are assessed in accordance with workplace procedures.
2. Apply basic first aid techniques	2.1 <b><i>First Aid management</i></b> 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 <b><i>Casualty's condition</i></b> is monitored and responded to in accordance with effective. <b><i>First Aid principles</i></b> 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.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
3. Communicable 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: <ul style="list-style-type: none"> <li>1.1 Workplace policies and procedures</li> <li>1.2 Industry / site specific regulations, codes</li> <li>1.3 OSH</li> <li>1.4 State and territory workplace health and safety requirements</li> <li>1.5 Allergies the casualty may have</li> </ul>
2. Physical Hazards	Physical hazards may include: <ul style="list-style-type: none"> <li>2.1 Workplace hazards</li> <li>2.2 Environmental hazards</li> <li>2.3 Proximity of other people</li> <li>2.4 Hazards associated with casualty management processes</li> </ul>
3. Risks	Risks may include: <ul style="list-style-type: none"> <li>3.1 Worksite equipment, machinery and substances</li> <li>3.2 Environmental risks</li> <li>3.3 Bodily fluids</li> <li>3.4 Risk of further injury to the casualty</li> <li>3.5 Risk associated with the proximity of the others and bystanders</li> </ul>
4. Casualty's condition	Casualty's condition may include but not limited to the following: <ul style="list-style-type: none"> <li>4.1 Abdominal injuries</li> <li>4.2 Allergic reactions</li> <li>4.3 Bleeding</li> <li>4.4 Burns – thermal, chemical, friction, electrical</li> <li>4.5 Cardiac conditions</li> <li>4.6 Chemical contamination</li> <li>4.7 Cod injuries</li> </ul>

VARIABLE	RANGE
	<ul style="list-style-type: none"> <li>4.8 Crush injuries</li> <li>4.9 Dislocations</li> <li>4.10 Drowning</li> <li>4.11 Eye injuries</li> <li>4.12 Fractures</li> <li>4.13 Head injuries</li> <li>4.14 Epilepsy</li> <li>4.15 Minor skin injuries</li> <li>4.16 Neck and spinal injuries</li> <li>4.17 Needle stick injuries</li> <li>4.18 Poisoning and toxic substances</li> <li>4.19 Shock</li> <li>4.20 Smoke inhalation</li> </ul>
5. Equipment and Resources	<p>Equipment and other resources may include:</p> <ul style="list-style-type: none"> <li>5.1 Defibrillation units</li> <li>5.2 Pressure bandages</li> <li>5.3 Thermometers</li> <li>5.4 First Aid Kit</li> <li>5.5 Eyewash</li> <li>5.6 Thermal blankets</li> <li>5.7 Pocket face masks</li> <li>5.8 Rubber gloves</li> <li>5.9 Dressing</li> <li>5.10 Space device</li> <li>5.11 Cervical collars</li> </ul>
6. Communication system	<ul style="list-style-type: none"> <li>6.1 Mobile phone</li> <li>6.2 Satellite phones</li> <li>6.3 HF /VHF radio</li> <li>6.4 Flags</li> <li>6.5 Flares</li> <li>6.6 Two-way radio</li> <li>6.7 Email</li> <li>6.8 Electronic equipment</li> </ul>

<b>VARIABLE</b>	<b>RANGE</b>
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"> <li>1.1 Complied with institutional requirements, OSH laws infections control and manual handling procedures and relevant health regulations</li> <li>1.2 Identified physical hazards of the casualty and minimized immediate risks</li> <li>1.3 Assessed and monitored the physical condition of the casualty</li> <li>1.4 Responded to emergency using basic life support measures</li> <li>1.5 Provided initial response where First Aid is required</li> <li>1.6 Dealt with complex casualties or incident</li> <li>1.7 Prepared reports to concerned personnel in a timely manner</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 Basic anatomy and physiology</li> <li>2.2 Company standard operating procedures (SOPS)</li> <li>2.3 Dealing with confidentiality</li> <li>2.4 Knowledge of the First Aider's skills limitations</li> <li>2.5 OSH legislation and regulations</li> <li>2.6 How to gain access to and interpret material safety data sheets</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Resuscitation</li> <li>3.2 Safe manual handling of casualty</li> <li>3.3 Consideration of the welfare of the casualty</li> <li>3.4 Preparing reports</li> <li>3.5 Communication skills</li> <li>3.6 Interpreting and using listed documents</li> </ul>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <ul style="list-style-type: none"> <li>4.1 Access to relevant work station</li> <li>4.2 Relevant institutional policies, guidelines procedures and protocol</li> <li>4.3 Equipment and materials relevant to the proposed activities</li> </ul>



5. Method of assessment	Competency may be assessed through: 5.1 Demonstration with questioning 5.2 Interview 5.3 Third party report 5.4 Portfolio
6. Context of assessment	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 <b>patients</b>	1.1 Effective <b>communication</b> 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 <b>referral to the appropriate personnel</b> . 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.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
3. Act in a respectful manner at all times	3.1 <b><i>Respect for differences</i></b> is positively, actively and consistently demonstrated in all work. 3.2 <b><i>Confidentiality and privacy of patient</i></b> is maintained. 3.3 Courtesy is demonstrated in all interactions with patients, their visitors, carers 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 <b><i>performance</i></b> . 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: <ol style="list-style-type: none"> <li>1.1 Patients</li> <li>1.2 Prospective patients to the service or services</li> <li>1.3 Patients may be in contact with the institution through appropriate health care personnel and professionals or other advocates or agencies</li> </ol>
2. Others with whom interaction is required in regard to patient services	<ol style="list-style-type: none"> <li>2.1 Other staff and team members</li> <li>2.2 Service units or departments</li> <li>2.3 Family members, carers and friends of patients</li> <li>2.4 Professional representatives or agents of patient such as:               <ul style="list-style-type: none"> <li>- Medical specialist</li> <li>- Nurses</li> <li>- Social workers</li> <li>- Dietitians</li> <li>- Therapists</li> <li>- Allied health professionals</li> <li>- Volunteers</li> <li>- Teachers and/or spiritual</li> <li>- Community</li> </ul> </li> <li>2.5 General public</li> </ol>
3. Communication	<ol style="list-style-type: none"> <li>3.1 English / Tagalog / Vernacular</li> <li>3.2 Sign language</li> <li>3.3 Through an interpreter</li> <li>3.4 Community language as required by the service / organization</li> </ol>
4. Modes of communication:	<ol style="list-style-type: none"> <li>4.1 Continuing interaction with patients and clients</li> <li>4.2 Verbal conversations either in person or via telephone</li> <li>4.3 Written notes by post or electronic media</li> <li>4.4 Worker, family member friend or professional interpreter who has relevant languages</li> </ol>

<b>VARIABLE</b>	<b>RANGE</b>
5. Respect for difference	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
6. Confidentiality and privacy of patients	6.1 Fees 6.2 Health fund entitlements 6.3 Welfare entitlements 6.4 Payment methods and records 6.5 Public environments 6.6 Legal and ethical requirements 6.7 Writing details i.e. 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

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

		<p>4.2 Relevant government and organizational policy guidelines, procedures and protocols</p> <p>4.3 Any relevant legislation in relation to service delivery</p>
5. Method of assessment		<p>Competency may be assessed through:</p> <p>5.1 Demonstration with questioning</p> <p>5.2 Interview</p> <p>5.3 Third party report</p>
6. Context of assessment		<p>6.1 Assessment may be done in a simulated workplace setting</p>



## CORE COMPETENCIES

UNIT OF COMPETENCY : **WORK WITHIN THE COMMUNITY**

### DEVELOPMENT FRAMEWORK

UNIT CODE : **HCS346301**

UNIT DESCRIPTOR : This unit reflects skills and knowledge required for working within a community development framework. A community development framework may include of a range of methods designed to strengthen and develop communities by enhancing individual and group capacity to confidently engage with community structures and to address problems and issues.

Application of a community development framework may be undertaken within the scope of or in conjunction with a range of work roles / areas in the community services industry including specific areas of service delivery, community education activities and working with groups to address issues.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
1. Operate within a community development framework	1.1 <b>Work</b> undertaken reflects a current working knowledge and understanding of community development vision and mission 1.2 Work reflects a commitment to empowering / individuals to resolve their issues through enhancing skills, accessing appropriate support and working with others in the community who share concerns and issues 1.3 Work is based on a demonstrated understanding of the interrelationships of the needs and rights of the individual, the family, the community and society.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>1.4 Work reflects a demonstrated understanding of the impact of current and changing social, political and economic contexts</p> <p>1.5 Work undertaken in the industry reflects an application of:</p> <ul style="list-style-type: none"> <li>- Accepted standards of <b><i>ethical practice</i></b></li> <li>- The principles of social justice, human rights, anti discrimination and confidentiality</li> <li>- Relevant occupational health and safety and equal employment opportunity principles and practices</li> <li>- Practices which protect confidentiality</li> <li>- The impact of worker's own value base and values within a community development framework</li> </ul>
<p>2. <b><i>Work with individuals and groups to achieve community development outcomes</i></b></p>	<p>2.1 Details of relevant individual and group issues are identified</p> <p>2.2 Relevant approaches to working with <b><i>individual</i></b> and <b><i>groups</i></b> are assessed in order to ensure needs are met</p> <p>2.3 Relevant community structures are identified and utilized to maximize outcomes for individuals and groups</p> <p>2.4 Advice and information is provided to groups and individuals as required to ensure they are fully informed about relevant issues and opportunities</p>
<p>3. Address individual issues arising when working within a community development framework</p>	<p>3.1 Appropriate interpersonal skills are employed to provide a first point of contact where individual stories are heard and understood</p> <p>3.2 The capacity to address identified individual issues is assessed</p> <p>3.3 Appropriate referrals are provided both within and outside the organization to ensure individual issues will be addressed</p>

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>3.4 Relevant facilitation skills are employed to assist individuals to identify the most <b><i>appropriate course of action</i></b> to ensure their issues are addressed</p> <p>3.5 All work reflects knowledge and understanding of the impact of applying different methods to address individual issues and meeting duty of care</p>
<p>4. Work effectively with diversity in the community</p>	<p>4.1 All work reflects the application of processes which aim to minimize the impact of own personal biases and experiences</p> <p>4.2 All work reflects respect and understanding of individual differences</p> <p>4.3 All work reflects recognition of the positive contribution of diversity in the community</p> <p>4.4 Work processes are adapted as appropriate to meet the specific cultural and linguistic needs of individuals</p>

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Work in the industry	Includes: 1.1 Voluntary 1.2 Paid work
2. Ethical practices	Includes: 2.1 Professional relationships 2.2 Financial management 2.3 Information collection, storage and Dissemination 2.4 Operation of community and other organizations
3. Working with individuals and groups to achieve community development outcomes may include engagement with various structures and patterns of work undertaken by practitioners and community members	Includes: 3.1 Community service delivery 3.2 Community projects 3.3 Community development 3.4 Community action 3.5 Community planning 3.6 Consultative and planning committees 3.7 Sector development structures
4. Appropriate course of action	Includes: 4.1 A public response / meeting 4.2 Group action 4.3 Conducting a specific project 4.4 Development of a program 4.5 Establishment of organizational arrangements
5. Community development outcomes	May include: 5.1 Building capacity to solve problems in the community and to strengthen community structures 5.2 Increased community self confidence in public activity 5.3 Increased capacity of groups and individuals to engage with community structures

<b>VARIABLE</b>	<b>RANGE</b>
<p>6. Areas of differences and diversity include:</p>	<p>6.1 Language</p> <p>6.2 Culture and cultural practices relating to:</p> <ul style="list-style-type: none"> <li>- Religion / spiritual observances</li> <li>- Family relationships</li> <li>- Status / protocol</li> <li>- Ceremonies / celebrations</li> <li>- Prohibition / taboos</li> </ul> <p>6.3 Social, economic, physical and health issues</p>

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> <li>1.1 Demonstrated the applications of community development theories and practices to all aspects of work</li> <li>1.2 Elicited a story from individuals, to test common understandings and facilitated agreement on actions to be followed based on information and assistance provided by the worker</li> <li>1.3 Reviewed and modified own work practice within a community development framework</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 The historical, social, legislative, statutory, political, economic and cultural context of work in the industry</li> <li>2.2 Philosophy and accepted practices of work</li> <li>2.3 Own biases and personal history related to work area</li> <li>2.4 Strategies for addressing individual differences</li> <li>2.5 Principles and practices of a community development work</li> <li>2.6 Work models</li> <li>2.7 Knowledge of relevant issues specific to communities</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Communication and interpersonal skills relevant to work area</li> <li>3.2 Using appropriate personal authority and influence to enhance work role</li> <li>3.3 Analyzing and assessing</li> <li>3.4 Relevant literacy standards and skills to meet reporting requirements of work area</li> <li>3.5 Reflective listening</li> <li>3.6 Referral</li> </ul>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <ul style="list-style-type: none"> <li>4.1 Access to a workplace or to an environment that accurately simulates the workplace</li> </ul>

5. Method of assessment	Competency may be assessed through: 5.1 Demonstration with questioning 5.2 Observation with questioning 5.3 Oral questioning/Interview 5.4 Portfolio
6. Context of assessment	6.1 Competency may be assessed in the workplace or in a simulated workplace and under the normal range of workplace conditions.

UNIT OF COMPETENCY : **PREPARE FOR WORK IN THE COMMUNITY**  
**SERVICE INDUSTRY**

UNIT CODE : **HCS346302**

UNIT DESCRIPTOR : This competency standard covers the skills and knowledge required to interpret legal and procedural requirements of the community services industry. It requires the ability to access industry information and applicable legislative guidelines. It also requires a knowledge of identifying and accessing future learning opportunities. These work functions would be carried out under supervision within organizational guidelines.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
<p>1. Access industry information and <b><i>applicable legislative guidelines</i></b></p>	<p>1.1 A range of legislation and procedural requirements relevant to employment in the community services industry is accessed.</p> <p>1.2 Key community services industry organizations able to provide information and assist individuals and enterprise are identified.</p> <p>1.3 Various roles are identified and current knowledge reflects an understanding of <b><i>employee and employer rights and responsibilities</i></b>.</p> <p>1.4 Own conduct and/or demonstrate a commitment to comply with applicable <b><i>legislative</i></b> and <b><i>procedural requirements</i></b>.</p>
<p>2. Identify future career / occupations opportunities in the community.</p>	<p>2.1 Key industry sectors and possible career directions in the services industry or organization are identified and discussed with <b><i>appropriate persons</i></b>.</p> <p>2.2 Personal values and attitudes regarding work and business are taken into account when planning future work / career directions.</p>



ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>2.3 Current skills and knowledge are assessed against a checklist of target competencies.</p> <p>2.4 <b>Opportunities for additional skills</b> are identified in consultation with appropriate persons.</p>
3. Work in a team at all times	<p>3.1 Courteous and helpful manner is displayed at all times.</p> <p>3.2 Allocated tasks are completed as required</p> <p>3.3 Assistance is sought when difficulties arise</p> <p>3.4 Questioning is used to clarify instructions or responsibilities</p> <p>3.5 <b>Non discriminatory attitude</b> is identified and displayed</p> <p>3.6 <b>Work and personal priorities</b> are identified and a balance achieved between competing priorities</p> <p>3.7 Time management strategies are applied to work duties</p> <p>3.8 <b>Appropriate dress and behaviour</b> are observed in the workplace.</p>

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Applicable legislation, codes, legislation and national standards of operation	May include but not limited to: 1.1. Occupational Health and Safety 1.2. Equal employment opportunity 1.3. Industrial relations 1.4. Anti-discrimination and diversity 1.5. Relevant industry Code of Practice 1.6. Award and enterprise agreements
2. Industry procedures may involve legislation relating to:	May involve legislation relating to: 2.1 Duty of care 2.2 Emergency and evacuation procedures 2.3 Privacy 2.4 Workplace practices 2.5 Human and civil rights
3. Rights and responsibilities of employees	May relate to: 3.1 Obeying lawful orders 3.2 Confidentiality and privacy rights 3.3 Safety and care with respect to Occupational Health and Safety requirements 3.4 Knowing the terms and conditions of own employment\ 3.5 Protection from discrimination and sexual harassment
4. Appropriate persons	May include: 4.1 Supervisors 4.2 Colleagues 4.3 Trainer 4.4 Assessor
5. Opportunities for additional skills	May include: 5.1 Coaching, mentoring and/or supervision 5.2 Formal/informal learning programs 5.3 Internal/external training provision 5.4 Work experience/exchange opportunities 5.5 Personal study 5.6 Career planning / development 5.7 Workplace skills assessment 5.8 Quality assurance assessments and recommendation 5.9 Recognition of Prior Learning assessment 5.10. Recognition of Current Competency assessment

<b>VARIABLE</b>	<b>RANGE</b>
6. No discriminatory attitudes	May include: 6.1 All contacts with other staff, clients or management 6.2 Verbal or non verbal communication
7. Work and personal priorities related to work / life balance and may include work and other commitments	May include: 7.1 School / homework 7.2 Home / family / parties / friends 7.3 Other jobs 7.4 Culture 7.5 Disability
8. Appropriate dress and behaviour relate to:	Relate to: 8.1 Personal dress, presentation and hygiene 8.2 Demeanor in the workplace and attitude displayed to customers and other team members 8.3 Organization requirements 8.4 Type of work 8.5 Degree of client / customer contact
9. Behaviour which contributes to a safe work environment	9.1 Discussion and negotiating problems and tasks with other team members 9.2 Sharing knowledge and skills 9.3 Identifying and reporting any risks or hazards 9.4 Using business equipment according to instructions

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> <li>1.1 Interpreted various roles in the organization particularly on processes and procedures</li> <li>1.2 Accessed, interpreted and complied with a range of legislative and procedural requirements</li> <li>1.3 Developed effective and personal relationships through the application of organizational social, ethical and operational standards and use of appropriate interpersonal styles and techniques</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 Legislation, regulations and codes or practice applicable to specific community services functions.</li> <li>2.2 Types of community services and organizations and functions</li> <li>2.3 Terms and conditions of employment</li> <li>2.4 Workplace communication channels and procedures</li> <li>2.5 Principles of effective communication</li> <li>2.6 OHS issues and requirements</li> <li>2.7 Approaches to work in the industry and a range of activities which support this</li> <li>2.8 Holistic and client-centered care</li> <li>2.9 Client needs and rights including duty of care</li> <li>2.10 Principles of access and equity</li> <li>2.11 Current issues facing clients and the sector</li> <li>2.12 Basic knowledge responsibilities in relation to child protection</li> <li>2.13 Awareness of own biases and beliefs</li> <li>2.14 Limitations of work role and responsibilities</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Communicating in a clear and concise manner in both written and verbal modes</li> <li>3.2 Requesting advice or further information</li> <li>3.3 Seeking and receiving feedback</li> <li>3.4 Working on an individual basis and within a team</li> <li>3.5 Using information technology appropriate to specific talk</li> <li>3.6 Sourcing, organizing and recording information</li> <li>3.7 Processing workplace documentation</li> <li>3.8 Estimating time to complete activities and</li> </ul>

	<p>prioritizing task</p> <p>3.9 Relating to people from a range of social, cultural and ethnic backgrounds and varying physical and mental abilities</p> <p>3.10 Identifying work requirements and process basic relevant workplace documentation</p> <p>3.11 Requesting advice, receiving feedback and working with a team</p> <p>3.12 Solving routine problems related to the workplace under direct supervision</p> <p>3.13 Relating to people from a range of social, cultural, ethnic backgrounds and physical and mental abilities</p>
4. Resource implications	<p>The following resources <b>MUST</b> be provided:</p> <p>4.1 Access to a suitable venue and equipment</p> <p>4.2 Assignment instructions, work plans and schedules, policy documents and duty statements</p> <p>4.3 Assessment instruments, including personal planner and assessment record book</p> <p>4.4 Access to registered provider of assessment services</p>
5. Method of assessment	<p>Competency may be assessed through:</p> <p>5.1 Demonstration with questioning</p> <p>5.2 Observation with questioning</p> <p>5.3 Oral questioning/Interview</p> <p>5.4 Portfolio</p>
6. Context of assessment	<p>6.1 Competency may be assessed in the workplace or in a simulated work setting.</p>

UNIT OF COMPETENCY : **SUPPORT COMMUNITY RESOURCES**

UNIT CODE : **HCS346303**

UNIT DESCRIPTOR : This unit applies to the work performed in providing and maintaining support to community groups.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Develop an information base of community resources	1.1 <b>Relevant information about the community</b> , its organizations and services is collected and stored according to the <b>organizational practices</b> so ongoing work is facilitated. 1.2 A current directory of community resources is maintained so it is useable and accessible.
2. Establish relationship with key people	2.1 Appropriate contact is established and maintained with <b>key people</b> using a range of <b>communication strategies</b> to ensure that the outcomes from work in the community is maximized. 2.2 The roles and responsibilities of key people and services are defined so that work is effective and coordinated.
3. Apply strategies for linking people	3.1 Appropriate work is undertaken to create opportunities to develop supportive connections between key people including arranging and conducting meetings. 3.2 Obstacles to effective contact between people are identified and appropriate strategies are developed to overcome these. 3.3 Appropriate levels of ongoing support is provided to promote community interaction.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
4. Maintain community facilities and resources	4.1 All relevant records are maintained and make available as required to facilitate community interaction. 4.2 Appropriate work is undertaken to ensure that maintenance of community resources is carried out according to agreed procedures and budget allocations. 4.3 Appropriate action is taken to ensure public and communal areas are accessible and meet community needs.

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Community	May include: <ul style="list-style-type: none"> <li>1.1 Individuals and groups defined by organization programs and services</li> <li>1.2 Other agencies providing services to individuals and groups</li> <li>1.3 People with specified needs and interests</li> <li>1.4 People using the organization's services / programs</li> </ul>
2. Relevant information about the community	May include: <ul style="list-style-type: none"> <li>2.1 Composition and social / cultural profile</li> <li>2.2 Cultural characteristics</li> <li>2.3 Scope defined by organization's objectives and priorities</li> <li>2.4 Size</li> <li>2.5 Nature and history of issues and interests</li> <li>2.6 Range and nature of other services</li> <li>2.7 Existing practice, process and protocol</li> <li>2.8 Data base of key people</li> <li>2.9 Details of other services / agencies</li> <li>2.10 Networks, support systems, groups</li> <li>2.11 Resources</li> <li>2.12 Protocols for communication</li> </ul>
3. Key people	May include: <ul style="list-style-type: none"> <li>3.1 People with an interest in the purpose of the organization</li> <li>3.2 Designated groups in the community</li> <li>3.3 Community leaders, representatives</li> <li>3.4 Other providers</li> <li>3.5 People using the services of the organization</li> <li>3.6 Specialist providers</li> </ul>



VARIABLE	RANGE
4. Communication strategies	4.1 Attending meetings, groups. Shift hand over. 4.2 Phone contact 4.3 Sharing information 4.4 Information newsletter 4.5 Premises, grounds, accommodation, workplace 4.6 Purpose designed and provided for the community or workplace 4.7 Exclusive use, ownership or shared of equipment and materials 4.8 Information 4.9 Personnel 4.10 Financial
5. Organization's procedures	May include: 5.1 Formally documented policies, guidelines, delegations, philosophy 5.2 Direction through supervision 5.3 Management decisions, directives 5.4 Information, data collection, proforma, reporting requirements 5.5 Formal and informal negotiated agreement

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ol style="list-style-type: none"><li>1.1 Provided a range of types of support to communities according to organizational procedures</li><li>1.2 Communicated with a range of people in the community</li><li>1.3 Maintained and accessed effective networks which contribute to the achievement of objectives</li><li>1.4 Motivated individuals and groups to work cooperatively to address common concerns</li></ol>
<p>2. Underpinning knowledge and attitudes</p>	<ol style="list-style-type: none"><li>2.1 Nature of the community and significant relationships and resources including cultural program / service objectives</li><li>2.2 Relevant agencies programs and criteria</li><li>2.3 Communication strategies</li><li>2.4 Principles of social organization and structures</li><li>2.5 Depending on the work role or services provided specific knowledge of particular groups or issues may be required, including:<ul style="list-style-type: none"><li>- Alcohol and other drugs</li><li>- Cultural and linguistic diversity</li><li>- Risk of self harm</li><li>- Women</li><li>- Men</li><li>- Community education</li><li>- Mental health</li></ul></li></ol>

<p>3. Underpinning skills</p>	<p>3.1 Oral communication competence  3.2 Asking questions, listening to information, and seeking clarification  3.3 Reading competence required if worker is using pamphlets or written information, to determine if an organization or service is relevant to a particular group  3.4 Writing skills will be needed if organizations require a written list of community facilities and resources  3.5 Documenting what is required by the organization  3.6 Encoding skills</p>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:  4.1 Access to a workplace or community or an environment that effectively simulates workplace or community conditions.</p>
<p>5. Method of assessment</p>	<p>Competency may be assessed through:  5.1 Demonstration with questioning  5.2 Observation with questioning  5.3 Oral questioning/Interview  5.4 Portfolio</p>
<p>6. Context of assessment</p>	<p>6.1 Competency may be assessed in the workplace or in a simulated work setting.</p>

UNIT OF COMPETENCY : **PROVIDE PRIMARY / RESIDENTIAL CARE**

UNIT CODE : **HCS346304**

UNIT DESCRIPTOR : This consists of knowledge, skills and attitude in providing for care and support of clients and assist their transition from primary / residential care.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
<b>1. Outline terms of placement with client in care</b>	1.1 Where appropriate, explanations are effectively communicated to clients about what they can expect from the placement; the philosophies, values and rules operating; opportunities within the placement , and strategies for maximizing benefits of the placement. 1.2 The boundaries of confidentiality are clarified with the client 1.3 Processes for resolving issues, reviewing placement and the external and internal grievance procedures are communicated in appropriate language and approach 1.4 Understanding of client rights and expectations about direct care is explored and clarified 1.5 Rules and consequences for behaviour are explained, and negotiated where appropriate with client in ways that are understandable and culturally appropriate 1.6 All relevant documentation is completed and maintained in accordance with organizational procedures.
2. Provide / mobilize domestic support	2.1 Ways of addressing daily needs are provided for and negotiated with client 2.2 All appropriate procedures are implemented to ensure the environment is clean, healthy and safe

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>2.3 Appropriate strategies are negotiated for the continued use, maintenance and/or disposal of personal possessions of the client</p>
<p>3. Provide for client education, support and development</p>	<p>3.1 A range of approaches to life skills training, including <b><i>provision of positive role models</i></b> is implemented to ensure client's specific needs are addressed.</p> <p>3.2 Assistance is provided to the client to identify and implement appropriate goals, strategies and activities so their moves to autonomy and self empowerment is enhanced.</p> <p>3.3 Appropriate arrangement are made to support client in care to undertaken relevant vocational training and/or employment.</p> <p>3.4 Appropriate processes for provision of health care education are negotiated with relevant referral agency/ organization/ department to ensure their delivery.</p> <p>3.5 Appropriate processes are negotiated with client and relevant personnel to ensure client access to a range of emotional, social and physical support mechanisms</p> <p>3.6 Appropriate relationship is established with client to ensure maximum access to development opportunities and participation in a range of services.</p>

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
4. Contribute to reintegration of client	<p>4.1 Planning for resources, services and ongoing support are negotiated with the client and significant others to ensure resettlement needs are assessed and addressed.</p> <p>4.2 Arrangements for participation in employment, counseling, education and accommodation are made with relevant parties are appropriate</p> <p>4.3 All relevant available activities, designed to assist a successful transition from care, are undertaken</p> <p>4.4 Negotiations are undertaken with all relevant parties to identify appropriate levels of contact with client, once out of care</p>

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Outline terms of placement with client in care	May include: 1.1 On the selection and implementation of an intervention either on a voluntary or involuntary basis 1.2 A voluntary seeking for support outside of statutory mandates 1.3 A preventative pro-active activity 1.4 Government, non-government and community based range of services
2. Provision of positive role models	Undertaken within requirements established by: 2.1 State and national legislation 2.2 Organization processes, procedures and standards 2.3 Organizational codes of conduct and ethical position 2.4 International conventions on the rights of children and young people

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> <li>1.1 Negotiated effective care arrangements, rights and responsibilities</li> <li>1.2 Provided a range of care services</li> <li>1.3 Provided opportunities for positive experiences, client self development and self esteem building</li> <li>1.4 Demonstrated knowledge related to applicable organization and legislative requirements</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 Relevant statutory procedures, responsibilities and rights</li> <li>2.2 Service protocols, philosophies and processes</li> <li>2.3 Resources and programs available</li> <li>2.4 Stage of grief</li> <li>2.5 Impact and signs of abuse</li> <li>2.6 Cultural protocols, systems, taboos</li> <li>2.7 Parenting models</li> <li>2.8 Budgeting practices</li> <li>2.9 Protocols in working with professional service providers</li> <li>2.10 Child development stages / models</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Effective communication</li> <li>3.2 Behaviour management</li> <li>3.3 Stress management</li> <li>3.4 Interpersonal, including: <ul style="list-style-type: none"> <li>- Assertion</li> <li>- Negotiation</li> <li>- Establishing role boundaries</li> </ul> </li> </ul>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <ul style="list-style-type: none"> <li>4.1 Access to an appropriate workplace or an environment capable of accurately simulating the workplace for assessment purposes.</li> </ul>



5. Method of assessment	Competency may be assessed through: 5.1 Demonstration with questioning 5.2 Observation with questioning 5.3 Oral questioning/Interview
5. Context of assessment	6.1 Competency may be assessed in the workplace or in a simulated work setting.

UNIT OF COMPETENCY : **SUPPORT COMMUNITY PARTICIPATION**

UNIT CODE : **HCS346305**

UNIT DESCRIPTOR : This unit of competency covers the knowledge, skills and attitude required in providing a range of opportunities for community groups and individuals to participate and design cooperative arrangements for addressing common concerns.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Work with individuals and the community to promote participation	1.1 Work is undertaken to identify key community issues to be addressed 1.2 To address community issues planning is undertaken to ensure: <ul style="list-style-type: none"><li>- Appropriate policies and <b>strategies</b> are developed</li><li>- Adequate resourcing is identified</li><li>- <b>Key people</b> are consulted</li><li>- Identified needs are addressed</li></ul> 1.3 Processes are forward looking and proactive 1.4 Appropriate interpersonal and networking skills are used to enlist support from key people and groups 1.5 <b>Opportunities</b> are provided for community input to planning provision of services 1.6 Community input and participation in services is guaranteed
2. Support existing community activities	2.1 Appropriate review of the relevance of existing <b>community activities</b> is undertaken, based on changing community needs 2.2 Relevant support and assistance is provided to existing community activities to obtain <b>additional resources</b> required for effective operation

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
	2.3 Support is provided to community groups to monitor and evaluate processes, progress and outcomes of activities. 2.4 Appropriate support is provided to community groups to become self managing in the implementation of plans.

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Working with the community	May include activities associated with: <ul style="list-style-type: none"> <li>1.1 Health promotion</li> <li>1.2 Community service delivery</li> <li>1.3 Community projects</li> <li>1.4 Community development</li> <li>1.5 Community action</li> <li>1.6 Community planning</li> <li>1.7 Consultative and planning committees</li> <li>1.8 Sector development structures</li> </ul>
2. Opportunities for consumers, community members and groups to participate	May include: <ul style="list-style-type: none"> <li>2.1 Systems within and outside the organization</li> <li>2.2 Activities at program, operative and management levels</li> <li>2.3 Formal and informal systems</li> <li>2.4 Focus groups on relevant issues</li> <li>2.5 Inviting community participation on organizational committees e.g. quality assurance committees, ethics committees</li> <li>2.6 Through publications</li> <li>2.7 Group facilitation</li> <li>2.8 Peer education / training</li> <li>2.9 Seminars and workshops</li> </ul>
3. Key people	May include: <ul style="list-style-type: none"> <li>3.1 Advocacy groups</li> <li>3.2 Policy and decision makers in the specific to community</li> <li>3.3 Individuals, groups or communities most likely to be affected by strategies or action plans</li> <li>3.4 Community leaders</li> <li>3.5 People with formal and informal representative roles</li> </ul>

<b>VARIABLE</b>	<b>RANGE</b>
4.Strategies which the worker may develop	May include: 4.1 Development of new business, employment opportunities for individuals 4.2 Establishment of advocacy groups 4.3 Health promotion activities 4.4 Development of community facilities 4.5 Strategies to increase access to facilities, services or decision making 4.6 Providing direction, advice and information
5. Information and resources	May include: 5.1 Equipment 5.2 Staff skills and time 5.3 Provision of facilities 5.4 Educational materials 5.5 Funding 5.6 Skills / administrative support 5.7 Physical, transport, venues, materials, equipment 5.8 Developmental training 5.9 Financial

## EVIDENCE GUIDE

1. Critical aspects of competency	<p>Assessment requires evidence that the candidate:</p> <p>1.1 Demonstrated the capacity to undertake a range of activities to ensure appropriate participation by groups and individuals in community based activities.</p>
2. Underpinning knowledge and attitudes	<p>2.1 Community development methods and their principles and practices</p> <p>2.2 Funding sources and their policies and strategies for encouraging community input and participation</p> <p>2.3 Budget and funding allocation</p> <p>2.4 Local, state strategies / legislation</p> <p>2.5 Health promotion</p>
3. Underpinning skills	<p>3.1 Policy development</p> <p>3.2 Report writing</p> <p>3.3 Evaluating effectiveness of community based activities</p> <p>3.4 Budgeting</p> <p>3.5 Negotiating, liaisoning, networking</p> <p>3.6 Marketing</p> <p>3.7 Facilitating</p> <p>3.8 Researching relating to the community</p>
4. Resource implications	<p>The following resources <b>MUST</b> be provided:</p> <p>4.1 Demonstration of competency will include the ability to work with key people or stakeholders in the community. Assessors are allowed for access to appropriate structures, people or organizations for assessment purposes.</p>
5. Method of assessment	<p>Competency may be assessed through:</p> <p>5.1 Demonstration with questioning</p> <p>5.2 Observation with questioning</p> <p>5.3 Oral questioning/Interview</p> <p>5.4 Portfolio</p>
6. Context of assessment	<p>6.1 Competency may be assessed in the workplace or in a simulated workplace setting.</p>

UNIT OF COMPETENCY : **RECRUIT AND COORDINATE VOLUNTEERS**

UNIT CODE : **HCS346306**

UNIT DESCRIPTOR : This unit deals with developing and supporting \ volunteer workers in an agency.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Identify the need and roles for volunteers in the organization	1.1 Potential roles for <b>volunteers</b> are identified. 1.2 <b>Roles</b> are discussed and agreed upon by management. 1.3 Role descriptions as developed. 1.4 Processes for support of volunteers are identified.
2. Recruit volunteers	2.1 Volunteers are sought through advertising in relevant media and community networks. 2.2 Interviews with potential volunteers are arranged and completed. 2.3 Selections are made and management advised. 2.4 Successful volunteers are advised of their selection. 2.5 When necessary, a waiting list of appropriate applicants is maintained. 2.6 An on-going recruitment program is implemented as required.
3. Orient volunteers to organization.	3.1 Volunteers are provided with an orientation to the organization. 3.2 Training for specific role is provided in a manner appropriate to the needs and resources of the organization.
4. Monitor performance of volunteers	4.1 Regular meetings of volunteers are established. 4.2 A review of roles and performance is regularly undertaken. 4.3 Individual support and debriefing is provided when necessary.

## RANGE OF VARIABLES

<b>VARIABLE</b>	<b>RANGE</b>
1. Volunteers	May include: 1.1 Unpaid workers who are in paid employment elsewhere 1.2 Unpaid workers who are not in paid employment
2. Roles of volunteers	May include: 2.1 Agency management 2.2 Direct service including reception, telephone advice lines, service user support



## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <p>1.1 Volunteer recruitment and coordination meets both the needs of the organization and support requirements for volunteer roles</p>
<p>2. Underpinning knowledge and attitudes</p>	<p>2.1 The impact of cultural community attitudes on appropriate roles, relationships and approaches of the volunteer worker</p> <p>2.2 The implications of differences in attitudes and values in working in the agency</p> <p>2.3 Relevant legislation and public policies relating to the employment of unpaid workers</p>
<p>3. Underpinning skills</p>	<p>3.1 Coordination of people, processes and information</p> <p>3.2 Provision of support to a diverse range of people</p> <p>3.3 Conflict resolution / negotiation and mediation</p> <p>3.4 Cross cultural communication and negotiation</p> <p>3.5 Verbal and written communication</p>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <p>4.1 Access to appropriate workplace or community where assessment can take place; or</p> <p>4.2 Simulation of realistic workplace or community setting for assessment</p>
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <p>5.1 Demonstration with questioning</p> <p>5.2 Observation with questioning</p> <p>5.3 Oral questioning/Interview</p> <p>5.4 Portfolio</p>
<p>6. Context of assessment</p>	<p>6.1 Competency may be assessed in the workplace or in a simulated work setting.</p>

UNIT OF COMPETENCY : **RESPOND HOLISTICALLY TO CLIENT ISSUES**

UNIT CODE : **HCS346307**

UNIT DESCRIPTOR : This focus of the work is assisting clients to address their own issues. On completion of this unit, the worker will be able to respond appropriately to clients that have complex issues outside and in addition to the area of immediate focus, expertise or interests of the worker and their organization. For instance, the worker might work for an agency, and possess relevant competence, in the area of child protection, but will still be able to identify when say alcohol and other drug issues are important in the life of a presenting client. Completion of the unit will also provide the worker with competencies to make decisions as to whether to refer or retain the client.

The worker will first be able to make a decision as to whether a brief intervention is appropriate (instead of an immediate referral). The worker will be able to implement and monitor brief intervention strategies in a variety of community service contexts, with the primary aim of helping the client accept the intervention.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Evaluate the <b><i>range of issues impacting on the client and on the delivery of appropriate service</i></b>	1.1 Identify <b><i>indicators of harm, neglect, abuse or risk of harm.</i></b> 1.2 Use observations, assessment tools and questioning to identify possible presenting issues.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>1.3 Seek <b><i>information from a range of appropriate sources</i></b> to determine the range of issues that may be affecting the client within organizations policies and procedures regarding autonomy, privacy and confidentiality.</p> <p>1.4 Apply organizational <b><i>procedures for collecting and analyzing client information.</i></b></p> <p>1.5 Examine all client information to determine the degree to which other issues may impact on the possible services that can be provided by the organization.</p>
<p>2. Determine the course of action to be followed</p>	<p>2.1 Assess the level of risk to the client and others directly involved including family members</p> <p>2.2 Follow organizational procedures, legal requirements and duty of care obligation to responding to indicators of risk of abuse, neglect or harm</p> <p>2.3 Check the services the organization delivers against the range of client needs to be addressed</p> <p>2.4 Refer client appropriately following organizational protocols, policies and procedures</p> <p>2.5 Apply accepted procedures to evaluate the benefit to the client of referral to another service.</p> <p>2.6 Evaluate the benefits of providing a brief intervention in facilitating the client to access other services</p> <p>2.7 Apply accepted procedures to evaluate the option of bringing in specialist support and continuing to work with the client.</p>

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>2.8 Provide the client with resources, such as written and verbal information, appropriate to their stage of change and actions to be followed.</p>
<p>3. Establish interpersonal relationship with the client that will enable all issues to be addressed</p>	<p>3.1 Facilitative communication skills are utilized to assist the client to identify areas of concern, to prioritize areas for immediate and longer term action to determine options for action and workable strategies to address their priority areas.</p> <p>3.2 Define boundaries and use communication skills that will establish a trusting and respectful relationship.</p> <p>3.3 Assist client to develop their own action plans to address their circumstances.</p> <p>3.4 <b>Relevant information</b> is shared with the client about services available, options, and health and well being issues to assist them in determining a course of action.</p> <p>3.5 Work with the client to set personal goals and explore personal strategies, to identify a hierarchy of strategies including contingency plans.</p> <p>3.6 Work with the client to identify and plan for potential consequences of their decision.</p> <p>3.7 Implement procedures to ensure all services and responses to client comply with duty of care and accepted standards of ethical behaviour.</p>
<p>4. Provide a brief intervention as required</p>	<p>4.1 Assess a client's need for intervention and the type of <b>brief intervention</b> required.</p> <p>4.2 Use brief intervention strategies which match the client's stage of change.</p> <p>4.3 Implement appropriate <b>procedures to prevent escalation of any potential emergency or crisis situation.</b></p>

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>4.4 <b>Respond appropriately to emergencies and crisis situations</b> according to organization procedures and in accordance with duty of care responsibilities.</p> <p>4.5 Comply with cultural obligations which influence the use of brief intervention with particular clients.</p> <p>4.6 Employ strategies to motivate, support and encourage the client.</p> <p>4.7 Current needs and sources of assistance are identified, and support given as appropriate.</p>
<p>5. Respond appropriately to people who are vulnerable and at significant risk</p>	<p>5.1 Apply a <b>range of information collection mechanisms and assessment tools</b> to establish the degree of risk, neglect or harm.</p> <p>5.2 Assess the priority need for intervention.</p> <p>5.3 Implement <b>appropriate procedures to prevent escalation of any potential emergency or crisis situation.</b></p> <p>5.4 Respond appropriately to emergencies and crisis situations according to organization procedures and in accordance with duty of care.</p> <p>5.5 Follow organizations policies and procedures and duty of care obligation in responding to indicators of actual or potential risk of abuse, neglect or harm.</p>

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
<p>6. Evaluate effectiveness of services provided to meet client needs</p>	<p>6.1 Client's progress or outcomes are reviewed regularly in accordance with <b><i>organizational procedures</i></b> and in consultation with clients.</p> <p>6.2 Ensure client's file notes are complete, up to date and include the client's stage of decision making on each occasion.</p> <p>6.3 Implement reflective practice strategies to ensure feedback is sought and incorporated in services delivery.</p>

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Presenting problem or issued	<p>A client with secondary or multiple issues is most likely to present 'first' to the following types of services (for an issue relevant to those services)</p> <ul style="list-style-type: none"> <li>1.1 Child protection</li> <li>1.2 Juvenile justice / youth services</li> <li>1.3 Social housing</li> <li>1.4 Employment service</li> </ul>
2. Indicators of harm, neglect, abuse or risk of harm	<ul style="list-style-type: none"> <li>2.1 Physical symptoms such as injuries or loss of weight</li> <li>2.2 Verbal and non-verbal cues</li> <li>2.3 Impairment to cognitive functioning caused by acquired brain injury such as loss of memory, inability to concentrate, plan, organize</li> <li>2.4 Reports from the individual, carers or other workers</li> </ul>
3. Harm, neglect, abuse or risk of harms	<p>Includes:</p> <ul style="list-style-type: none"> <li>3.1 Physical</li> <li>3.2 Emotional</li> <li>3.3 Cognitive</li> <li>3.4 Psychological</li> <li>3.5 Sexual</li> <li>3.6 Financial</li> </ul>
4. Appropriate sources of information would include:	<p>Include:</p> <ul style="list-style-type: none"> <li>4.1 Case notes</li> <li>4.2 File</li> <li>4.3 Other workers</li> </ul>
5. Harm, neglect, abuse or risk of harm	<p>May be from:</p> <ul style="list-style-type: none"> <li>5.1 Carers</li> <li>5.2 Workers / service providers</li> <li>5.3 Self</li> <li>5.4 Family or significant others</li> <li>5.5 Community members</li> </ul>

VARIABLE	RANGE
6. Responses to indicators of risk of abuse, neglect or harm	Include: 6.1 Intervention to remove the risk 6.2 Reporting to appropriate personnel 6.3 Investigating 6.4 Seeking specialist support / services 6.5 Referral
7. Responses to indicators of risk of abuse, neglect or harm	Determined by: 7.1 Legislation 7.2 The specific job role 7.3 Organizational procedures 7.4 Family and cultural mores
8. People who are vulnerable and at significant risk	May be 8.1 People with a disability 8.2 People with an acquired brain injury 8.3 Elderly people 8.4 People with mental health issues 8.5 Children and young people 8.6 People who are homeless 8.7 People in unequal power relationships
9. Appropriate procedures to prevent escalation of a potential emergency or crisis situation	Include: 9.1 Calming skills 9.2 Management and contain emotional responses and escalating behaviour 9.3 Identify and address source of the issue 9.4 Seek assistance from other workers, carers, family or services
10. Non presenting problems or issues	Likely to be: 10.1 Alcohol and other drugs 10.2 Mental illness 10.3 Developmental disability 10.4 Acquired Brain Injury 10.5 Abuse and risk of abuse 10.6 Domestic violence 10.7 Homelessness / inadequate housing 10.8 Unemployment 10.9 Juvenile justice issues 10.10 Communicable diseases 10.11 Financial difficulties 10.12 New arrival in the country



VARIABLE	RANGE
<p>11. Approaches to addressing specific issues include applying accepted methodologies underpinning values and philosophies of the specific area. The following notes offer a guide:</p>	<p>11.1 AOD may include knowledge of harm minimization practices, of the effects of AOD on body system and social relationships, and of the signs and symptoms of intoxication. Knowledge of groups and agencies in the community who can respond to individuals with AOD problems by providing treatment and detoxification programs is central. Also important is an awareness of personal bias, and models or perspectives on drug use i.e. disease perspective, moral perspective of both the client and of referral agencies.</p> <p>11.2 Mental health may include recognizing basic signs and symptoms of anxiety, depression, suicidal impulses, and indicators of mental illness such as hallucinations or delusion. Knowledge of appropriate referral and intervention services in the community is critical.</p> <p>11.3 Domestic violence may include an understanding of such violence as an abuse of power perpetrated both in a relationship and after separation and that such violence takes a number of forms. These include physical and sexual violence, emotional and psychological abuse and economic deprivation. Domestic violence occurs across all groups, cultures and creeds. The safety and well-being of individuals subjected to domestic violence should be of primary concern. Knowledge of groups and agencies in the community who can respond to individuals with domestic violence issues is required.</p>

VARIABLE	RANGE
	<p>11.4 Child Protection will include knowledge of relevant state mandatory reporting legislation and its application, of child development and behavioural / physical indicators of abuse, and of services in the community that respond to child protection issues, it is vital to recognize that children in families experiencing difficulties, particularly where abuse of alcohol or other drugs occurs, are more likely to be at risk of abuse. Working of families and care givers to ensure the safety of children is a priority.</p> <p>11.5 Development disability may describe individuals who have a multiplicity of disabilities including difficulty learning, thinking a reasoning, retaining information and forming social relationships. It is vital to recognize the individuality of developmental disabled persons, there rights to age appropriate consultation and to self determination. Needs arising from social isolation and the critical importance of primary care-givers in the lives of developmental disabled persons should also be recognized. Knowledge of groups and agencies in the community that can provide advocacy services is required.</p>

VARIABLE	RANGE
	<p>11.6 Juvenile justice may include knowledge of adolescent clients and their special need as individuals, within families and as part of a group, including stages of development and social issues affecting youth. Recognition of the vulnerability of young people in their dealings with authority and of the protection that should operate during an investigation or proceeding in relation to an offense is required. Knowledge of groups and agencies in the community that can provide services such as advocacy and legal advice to young people in their dealings with the justice system is essential.</p> <p>11.7 Acquired Brain Injury may include awareness of the causes and effects of ABI; understanding of the impact of cognitive impairment on the individual and families, including associated grief and loss issued; knowledge of the ABI service system; skills in working with people with challenging behaviours.</p>
<p>12. Organizational procedures for collecting and analyzing client information</p>	<p>May include written and oral input to:</p> <p>12.1 Questionnaires</p> <p>12.2 Assessment</p> <p>12.3 Client profile forms, etc.</p>

VARIABLE	RANGE
<p>13. Procedures to prevent escalation of a potential emergency or crisis situation</p>	<p>May include:</p> <ul style="list-style-type: none"> <li>13.1 Using calming communication skills</li> <li>13.2 Managing and containing emotional responses and escalating behaviour</li> <li>13.3 Discussing the situation with the client</li> <li>13.4 Negotiation and mediation</li> <li>13.5 Seeking assistance from other workers or client carers</li> <li>13.6 Providing physical and visual barriers</li> <li>13.7 Evaluating the potential risk of the emergency</li> <li>13.8 Implementing specific communication skills including questioning, reflective listening and body language</li> </ul>
<p>14. Appropriate response to emergencies and crisis situations</p>	<p>May include:</p> <ul style="list-style-type: none"> <li>14.1 Negotiating to prevent escalation</li> <li>14.2 Seeking assistance from other people or agencies</li> <li>14.3 Immediate referral</li> <li>14.4 Intervention to ensure physical safety</li> </ul>
<p>15. Other information</p>	<p>May include:</p> <ul style="list-style-type: none"> <li>15.1 The client's carers and or family</li> <li>15.2 Other agencies or workers with knowledge of the client</li> <li>15.3 Client files</li> </ul>
<p>16. Specialist support</p>	<p>May include:</p> <ul style="list-style-type: none"> <li>16.1 Health professionals</li> <li>16.2 Careers and employment advice</li> <li>16.3 Financial counseling</li> <li>16.4 Family and relationship counseling</li> <li>16.5 Child Protection officers</li> <li>16.6 Mental health professional</li> <li>16.7 AOD detox, withdrawal and support</li> <li>16.8 Child care</li> <li>16.9 Centerlink officers</li> </ul>

VARIABLE	RANGE
17. All client information	Includes: 17.1 Behaviour 17.2 Responses to questions and other information provided by client 17.3 Physical appearance and acuity 17.4 File information 17.5 Information on the client provided by family, carers, other workers, other agencies
18. Accepted procedures to evaluate the benefit to the client of referral	Includes: 18.1 Discussing options with the client, carers and family 18.2 Checking the availability of services within the organization 18.3 Checking the availability and accessibility of other services
19. Brief intervention will be focused on providing de-escalation and emotional support	19.1 One-to-one approach, private 19.2 Takes short period of time 19.3 Can be done by anyone in the team 19.4 A client led process 19.5 Opportunistic 19.6 Used for harm reduction and facilitating behaviour change 19.7 Carer respite (eg for client with ABI)
20. Organizational polices and procedures	May include: 20.1 Incident reporting and documentation 20.2 Operational guidelines for handling cases involving difficult and challenging behaviour 20.3 Record keeping 20.4 Legal responses
21. Decisions to provide a brief intervention	Will be based on: 21.1 The issues of concern to the client and the stage of decision to change is determined 21.2 Availability of resources to support the brief intervention 21.3 Agency and worker mandate and focus

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> <li>1.1 Identified the range of relevant issues that may impact on service delivery</li> <li>1.2 Developed and implemented a plan in conjunction with the client to address their issues</li> <li>1.3 Provided referral to appropriate services</li> <li>1.4 Evaluated effectiveness of services</li> <li>1.5 Operated within duty of care and organizational requirements to address client needs</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<p>Identification of the impact of issues relating to:</p> <ul style="list-style-type: none"> <li>2.1 Mental Health</li> <li>2.2 Child Protection</li> <li>2.3 Domestic Violence</li> <li>2.4 Disability</li> <li>2.5 Homelessness</li> <li>2.6 Unemployment</li> <li>2.7 AOD</li> </ul> <p>Knowledge of accepted practices and available referral agencies for working with people experiencing issues related to:</p> <ul style="list-style-type: none"> <li>2.8 Mental Health</li> <li>2.9 Child Protection</li> <li>2.10 Domestic Violence</li> <li>2.11 Disability</li> <li>2.12 Homelessness</li> <li>2.13 AOD</li> <li>2.14 Or in any form of crisis</li> </ul>

<p>3. Underpinning skills</p>	<p>3.1 Interpersonal skills to facilitate client to identify options for change and for addressing their issues.</p> <p>3.2 Case work skills to ensure effective assessment, intervention and referral.</p> <p>3.3 Client management skills to deal with complex needs and difficult or challenging behaviour.</p> <p>3.4 Information management to ensure all records are maintained, stored and accessible.</p> <p>3.5 Research skills to ensure a current and correct list of relevant services are readily available to the client.</p> <p>3.6 Provision of a brief intervention to raise awareness, share knowledge and help client to think about making changes to improve well-being.</p> <p>3.7 Crisis intervention skills.</p>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <p>4.1 Access to an appropriate workplace or an environment capable of accurately stimulating the workplace of assessment purposes.</p>
<p>5. Method of assessment</p>	<p>Competency may be assessed through:</p> <p>5.1 Demonstration with questioning</p> <p>5.2 Observation with questioning</p> <p>5.3 Oral questioning/Interview</p> <p>5.4 Portfolio</p>
<p>6. Context of assessment</p>	<p>6.1 Competency may be assessed in the workplace or in a simulated work setting.</p>

UNIT OF COMPETENCY : **DEVELOP AND PROVIDE HEALTH EDUCATION  
PROGRAM IN THE COMMUNITY**

UNIT CODE : **HCS346308**

UNIT DESCRIPTOR : Working with the community to develop and provide education projects in relevant issues.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Develop the health program education.	1.1 Project plan is developed in consultation with key people and organizations and identifies priorities and desired outcomes to address issues of concerns of target group/s. 1.2 Appropriate human, financial and physical resources are identified and secured 1.3 <b>Marketing materials</b> are prepared and disseminated to target audience and others as appropriate.
2. Organize participants to the program.	2.1 Strategies for delivery of the project are developed and implemented to ensure maximum effectiveness. 2.2 Education / <b>resource</b> materials appropriate to the context, issue and audience are developed and distributed. 2.3 Strategies are implemented to encourage full participation in the project and the expression of views and feelings about its process or content. 2.4 Project adjustments are made as required to meet the needs of specific group. 2.5 Feedback on the education project or activity is sought from participants.



<p style="text-align: center;"><b>ELEMENT</b></p>	<p style="text-align: center;"><b>PERFORMANCE CRITERIA</b>  <i>Italicized terms</i> are elaborated in the Range of Variables</p>
<p>3. Coordinate health teaching program.</p>	<p>3.1 The <b><i>education project</i></b> is assessed against the planned goals and objectives in accordance with organizational policies and procedures.</p> <p>3.2 Outcomes of <b><i>project evaluations</i></b> are discussed with <b><i>key people</i></b> and <b><i>organizations</i></b> to determine future directions.</p> <p>3.3 Education project outcomes are documented, and where necessary acted on in accordance with organizational procedures.</p>

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Education projects	May include: <ul style="list-style-type: none"> <li>1.1 Projects of varying scope and scale ranging from state wide initiatives, to specific activities               <ul style="list-style-type: none"> <li>- A single event, such as an information stall in a shopping centre</li> <li>- A multi session education and skill</li> <li>- A complex, large scale series of activities that incorporates diverse but coordinated elements, such as a statewide education campaign involving mass media information.</li> </ul> </li> </ul>
2. Key people and organizations	May include: <ul style="list-style-type: none"> <li>2.1 Target group</li> <li>2.2 Other relevant organizations</li> <li>2.3 Funding bodies</li> <li>2.4 Community support groups</li> <li>2.5 The media</li> </ul>
3. Resources	May include: <ul style="list-style-type: none"> <li>3.1 Equipment</li> <li>3.2 Staff skills</li> <li>3.3 Time</li> <li>3.4 Space</li> <li>3.5 Venue</li> <li>3.6 Educational materials</li> <li>3.7 Funding</li> </ul>
4. Marketing materials	4.1 Culturally appropriate
5. Assessment and evaluation of the education project may include:	May include: <ul style="list-style-type: none"> <li>5.1 Use of feedback</li> <li>5.2 Discussions with stakeholders, organizations and other participants</li> <li>5.3 Discussion with colleagues</li> </ul>

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> <li>1.1 Matched education activities with community needs and priorities</li> <li>1.2 Collaborated and consulted with key people and organizations</li> <li>1.3 Delivered high quality innovative educational projects</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 Needs assessment and analysis</li> <li>2.2 Goals and objectives for project selected</li> <li>2.3 Resource availability for particular projects</li> <li>2.4 Strategies and actions needed to achieve goals</li> <li>2.5 Organizational policies and procedures for dealing with the media</li> <li>2.6 Accountability requirements</li> <li>2.7 Resources and support within the community</li> <li>2.8 Government funding policies</li> <li>2.9 Knowledge of local area</li> <li>2.10 Relevant local, state and federal strategies</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Liaison and networking</li> <li>3.2 Communication</li> <li>3.3 Research skills</li> <li>3.4 Time management</li> <li>3.5 Budgeting</li> <li>3.6 Report writing</li> <li>3.7 Evaluation</li> <li>3.8 Presentation</li> <li>3.9 Marketing and promotion</li> <li>3.10 Negotiation</li> </ul>
<p>4. Resource implications</p>	<p>The following resources <b>MUST</b> be provided:</p> <ul style="list-style-type: none"> <li>4.1 Access to appropriate resources for developing, delivering and evaluating community education projects (or access to an appropriately simulated environment).</li> </ul>

## EVIDENCE GUIDE

5. Method of assessment	Competency may be assessed through: 5.1 Demonstration with questioning 5.2 Observation with questioning 5.3 Oral questioning/Interview 5.4 Portfolio
6. Context of assessment	6.1 Competency may be assessed in the workplace or in a simulated work setting.

UNIT OF COMPETENCY : **IMPLEMENT HEALTH PROMOTION AND  
COMMUNITY INTERVENTION**

UNIT CODE : **HCS346309**

UNIT DESCRIPTOR : This unit describes the competencies required to implement health promotion and community intervention. It covers the setting up, devising, coordinating, delivering and evaluating health promotion and community intervention program.

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
1. Identify community issues in preventive health care	1.1 Social research methods in analyzing demographic data of community health profile are collated. 1.2 <b>Key issues</b> in preventative health care identified. 1.3 Current responses to preventative health care are identified. 1.4 <b>Information</b> on preventative health care are accessed and applied to developing solutions to community issues. 1.5 Target populations are identified and consultation processes are determined. 1.6 Policy and funding contexts and issues are examined.
2. Work within the educational framework of health promotion	2.1 Develop an educational perspective based on a philosophical and historical understanding of preventive health care. 2.2 Preventive health care perspective is integrated into community development and capacity building. 2.3 Relevant strategies applicable for health promotion are applied in the community.

ELEMENT	PERFORMANCE CRITERIA <i>Italicized terms</i> are elaborated in the Range of Variables
	<p>2.4 Partnerships with stakeholders are planned.</p> <p>2.5 A range of techniques to engage community in health promotion activities are identified.</p> <p>2.6 Key resources for health promotion activities are accessed.</p>
3. Identify the activity / program required.	<p>3.1 The need for particular <b>program</b> is assessed from relevant evidence collected.</p> <p>3.2 A range of possible programs to meet the defined needs are identified and reviewed.</p> <p>3.3 Selection of a program type is based on client needs, organization's criteria, and availability of resources.</p>
4. Prepare activity / program plan	<p>4.1 Appropriate strategic planning activities are undertaken, to ensure client needs are met.</p> <p>4.2 Planning activities incorporate consultation with key clients and stakeholders.</p> <p>4.3 Operational arrangements for conducting the program are determined and assessed for feasibility.</p> <p>4.4 Planning activities reflect accepted good practice in working with young people.</p>

<b>ELEMENT</b>	<b>PERFORMANCE CRITERIA</b> <i>Italicized terms</i> are elaborated in the Range of Variables
5. Deliver activity / program	<p>5.1 The program is implemented in accordance with the program plan, organization guidelines and legal / statutory requirements.</p> <p>5.2 Participants are provided with access to a range of activities suited to their needs and interests.</p> <p>5.3 Flexible implementation plans are developed to suit a variety of contexts and to cope with contingencies.</p> <p>5.4 The program is adapted to the changing needs of participants as required.</p> <p>5.5 Problem in program delivery are addressed promptly.</p>
6. Evaluate activity program	<p>6.1 Criteria to judge the effectiveness of the program are defined in consultation with clients and stakeholders.</p> <p>6.2 Appropriate evaluation strategies are used routinely during and after the program and used for revision and development.</p> <p>6.3 Evaluation information is collected, organized and reported in a format which is accessible and meaningful to the clients and stakeholders.</p> <p>6.4 Reports are prepared and presented as required.</p>

## RANGE OF VARIABLES

VARIABLE	RANGE
1. Key resource information	1.1 WHO concept of Health
2. Key issues and prevention strategies affecting people's health	2.1 Nutrition 2.2 Substance use and misuse 2.3 Environmental health 2.4 Mental health 2.5 Sexual and reproductive health 2.6 Other determinants
3. Programs	3.1 Activities designed to address needs of target groups. 3.2 Activities designed to meet needs identified in research 3.3 Strategies to implement government / funding agency policy 3.4 Activities to extend the participation numbers in existing programs 3.5 Strategies to address exclusion, discrimination and alienation 3.6 Those directed at individual young people and their needs 3.7 Those directed at the general community which affect young people 3.8 Those initiated by the organization, by community groups, by other organizations, or by community leaders and decision makers 3.9 Those designed to respond to social, economic and demographic changes



<b>VARIABLE</b>	<b>RANGE</b>
4. Programs	<p>May have the following focus:</p> <ul style="list-style-type: none"> <li>4.1 Education / learning / training eg. Homework support and study</li> <li>4.2 Personal development and support eg. Life skills education</li> <li>4.3 Music and performing arts eg. Youth theatres, band, video production team</li> <li>4.4 Research, planning and management eg. Aboriginal cultural camp, scouts meeting</li> <li>4.5 Community action eg. Anti violence group</li> <li>4.6 Special interests causes eg. Young people against nuclear disarmament</li> <li>4.7 Enterprise development activities</li> <li>4.8 Employment, fund raising, small business</li> </ul>
5. Program activities	<p>May include:</p> <ul style="list-style-type: none"> <li>5.1 Discussion groups e.g. About safe sex, religious beliefs</li> <li>5.2 Sporting and recreation activities e.g. Basketball at the drop in centre, pool game, disco, bush excursion</li> <li>5.3 Structured and unstructured social activities e.g. Party, shopping, visit to cinema</li> </ul>
6. Programs are planned and implemented	<p>For the purpose of:</p> <ul style="list-style-type: none"> <li>6.1 Providing immediate support</li> <li>6.2 Promoting individual's participation and personal development</li> <li>6.3 Enabling individual to use their time constructively, have fun and develop qualities of self reliance</li> <li>6.4 Enabling young people to learn life skills, knowledge and attitudes</li> </ul>

## EVIDENCE GUIDE

<p>1. Critical aspects of competency</p>	<p>Assessment requires evidence that the candidate:</p> <ul style="list-style-type: none"> <li>1.1 Identified community issues in preventive health care</li> <li>1.2 Worked within the educational framework of health promotion</li> <li>1.3 Identified the activity/program required</li> <li>1.4 Prepared activity/program plan</li> <li>1.5 Delivered activity/program</li> <li>1.6 Evaluated activity program</li> </ul>
<p>2. Underpinning knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>2.1 A philosophical and historical understanding of preventive health care</li> <li>2.2 Knowledge of social research and data relating to health issues</li> <li>2.3 Primary health care principles</li> <li>2.4 Funding and policy environment</li> <li>2.5 A range of individual's activities and programs</li> <li>2.6 Legal and safety requirements as they relate to activities and programs</li> <li>2.7 Relevant funding sources</li> </ul>
<p>3. Underpinning skills</p>	<ul style="list-style-type: none"> <li>3.1 Oral communication skills (language competence) required to fulfill job roles as specified by the organization / service. Oral communication skills include asking questions, active listening, asking for clarification, negotiating solutions, acknowledging and responding to a range views.</li> <li>3.2 Written communication skills (literacy competence) required to fulfill job roles as specified.</li> <li>3.3 Research skills</li> <li>3.4 Database use and interpretation</li> <li>3.5 Oral and written communication skills</li> <li>3.6 Numerical skills to enable statistical interpretation</li> </ul>

	<ul style="list-style-type: none"> <li>3.7 Research and consultation</li> <li>3.8 Coordination and management of programs</li> <li>3.9 Analysis of data, information and relationships</li> <li>3.10 Advocacy</li> <li>3.11 Provision of support to a diverse range of people / organizations</li> <li>3.12 Conflict resolution / negotiation and mediation</li> <li>3.13 Cross cultural communication and negotiation</li> <li>3.14 Literacy adequate to prepare a range of appropriate resource material</li> <li>3.15 Working with and through community leaders</li> </ul>
4. Resource implications	<p>The following resources <b>MUST</b> be provided:</p> <ul style="list-style-type: none"> <li>4.1 Access to workplace or to an accurately simulated environment where assessment may take place</li> </ul>
5. Method of assessment	<p>Competency may be assessed through:</p> <ul style="list-style-type: none"> <li>5.1 Demonstration with questioning</li> <li>5.2 Observation with questioning</li> <li>5.3 Oral questioning/Interview</li> <li>5.4 Portfolio</li> </ul>
6. Context of assessment	<ul style="list-style-type: none"> <li>6.1 Competency may be assessed in the workplace or in a simulated work setting.</li> </ul>

## 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 **BARANGAY HEALTH 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: **BARANGAY HEALTH SERVICES**

NC Level: **NC II**

Nominal Training Hours: **560 Hours**

Course Description:

This course is designed to enhance the knowledge, skills and attitudes of Barangay Health Workers and Community Health Assistants in accordance with industry standards. It covers basic, common and core competencies in NC II.

#### BASIC COMPETENCIES

Unit of Competency	Learning Outcomes	Methodology	Assessment Approach
1. Participate in workplace communication	1.1 Obtain and convey workplace communication 1.2 Complete relevant work related documents 1.3 Participate in workplace meeting and discussion	<ul style="list-style-type: none"><li>• Group discussion</li><li>• Interaction</li></ul>	<ul style="list-style-type: none"><li>• Demonstration</li><li>• Observation</li><li>• Interviews</li><li>• Questioning</li></ul>
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"><li>• Group discussion</li><li>• Interaction</li></ul>	<ul style="list-style-type: none"><li>• Demonstration</li><li>• Observation</li><li>• Interviews</li><li>• Questioning</li></ul>

<b>Unit of Competency</b>	<b>Learning Outcomes</b>	<b>Methodology</b>	<b>Assessment Approach</b>
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"> <li>• Group discussion</li> <li>• Interaction</li> </ul>	<ul style="list-style-type: none"> <li>• Demonstration</li> <li>• Observation</li> <li>• Interviews</li> <li>• Questioning</li> </ul>
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"> <li>• Discussion</li> <li>• Plant Tour</li> <li>• Symposium</li> </ul>	<ul style="list-style-type: none"> <li>• Observation</li> <li>• Interviews</li> </ul>

### **COMMON COMPETENCIES**

<b>Unit of Competency</b>	<b>Learning Outcomes</b>	<b>Methodology</b>	<b>Assessment Approach</b>
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"> <li>• Lecturette</li> <li>• Brainstorming</li> </ul>	<ul style="list-style-type: none"> <li>• Observation and oral questioning</li> <li>• Grid question</li> <li>• Practical exercise</li> </ul>

<b>Unit of Competency</b>	<b>Learning Outcomes</b>	<b>Methodology</b>	<b>Assessment Approach</b>
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"> <li>• Lecturette</li> <li>• Brainstorming</li> </ul>	<ul style="list-style-type: none"> <li>• Observation and oral questioning</li> <li>• Grid question</li> <li>• Practical exercise</li> </ul>
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"> <li>• Lecturette</li> <li>• Brainstorming</li> </ul>	<ul style="list-style-type: none"> <li>• Observation and oral questioning</li> <li>• Grid question</li> <li>• Practical exercise</li> </ul>
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"> <li>• Lecturette</li> <li>• Brainstorming</li> </ul>	<ul style="list-style-type: none"> <li>• Observation and oral questioning</li> <li>• Grid question</li> <li>• Practical exercise</li> </ul>

### **CORE COMPETENCIES**

<b>Unit of Competency</b>	<b>Learning Outcomes</b>	<b>Methodology</b>	<b>Assessment Approach</b>
1. Work within a community development framework	1.1 Demonstrate commitment to central philosophies of Barangay Health Service health / Practice 1.2 Identify and describe the principles and practices of Barangay Health Services	Lecture Case studies Film showing Field visitation to Local Barangay Simulation of workplace On-the-job practice	Questioning Observation Practical exam Return demo

Unit of Competency	Learning Outcomes	Methodology	Assessment Approach
2. Prepare for work in the community service industry	2.1 Access industry information applicable legislative guidelines 2.2 Identify future career opportunities in the community 2.3 Work on an individual basis and within a team	<ul style="list-style-type: none"> <li>➤ Assignment</li> <li>➤ Instructions</li> <li>➤ Work plans and schedules</li> <li>➤ Lecture</li> <li>➤ Film showing</li> </ul>	<ul style="list-style-type: none"> <li>➤ Questioning</li> <li>➤ Observation through demonstration</li> <li>➤ Portfolio</li> </ul>
3. Support community resources	3.1 Develop an information bases of community resources 3.2 Establish relationship with key people 3.3 Apply strategies for linkages people 3.4 Maintain community resources and facilities	<ul style="list-style-type: none"> <li>➤ Lecture</li> <li>➤ Demonstration</li> <li>➤ Film showing</li> <li>➤ Role play</li> <li>➤ Case study</li> </ul>	<ul style="list-style-type: none"> <li>➤ Written tests</li> <li>➤ Oral questioning</li> <li>➤ Observation</li> <li>➤ Demonstration</li> </ul>
4. Provide primary / residential care	4.1 Outline terms of placement with client on care 4.2 Provide / mobilize domestic support 4.3 Provide for client education support and development 4.4 Contribute to reintegration	<ul style="list-style-type: none"> <li>➤ Lecture</li> <li>➤ Demonstration</li> <li>➤ Film showing</li> <li>➤ Role play</li> <li>➤ Case study</li> </ul>	<ul style="list-style-type: none"> <li>➤ Written tests and reports</li> <li>➤ Oral questioning</li> <li>➤ Observation</li> <li>➤ Return demonstration</li> </ul>

	of clients		
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<b>Unit of Competency</b>	<b>Learning Outcomes</b>	<b>Methodology</b>	<b>Assessment Approach</b>
5. Support community participation	5.1 Work with individual and the community to promote participation 5.2 Support existing community activities	<ul style="list-style-type: none"> <li>➤ Lecture</li> <li>➤ Demonstration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Observation</li> <li>➤ Third party report</li> <li>➤ Demonstration</li> </ul>
6. Recruit and coordinate volunteers	6.1 identify the needs and roles for volunteers in the organization 6.2 Recruit volunteers 6.3 Orient volunteers to organization 6.4 Monitor performance of volunteers	<ul style="list-style-type: none"> <li>➤ Lecture</li> <li>➤ Role play</li> <li>➤ Demonstration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Observation</li> <li>➤ Demonstration</li> <li>➤ Third party reports</li> </ul>
7. Develop and provide health education program in the community	7.1 Develop the health education program 7.2 Organize participant in the program 7.3 Coordinate health teaching program	<ul style="list-style-type: none"> <li>➤ Lecture sessions</li> <li>➤ Film showing</li> <li>➤ On the job training</li> </ul>	<ul style="list-style-type: none"> <li>➤ Observation</li> <li>➤ Third party report</li> <li>➤ Demonstration</li> </ul>
8. Respond Holistically to client issues	8.1 Evaluate the range of issues impacting on the	<ul style="list-style-type: none"> <li>➤ Lecture-discussion</li> <li>➤ Demonstration</li> <li>➤ Role play</li> </ul>	<ul style="list-style-type: none"> <li>➤ Observation</li> <li>➤ Demonstration</li> <li>➤ Questioning</li> </ul>



	client and on the delivery of appropriate theories 8.2 Determine the course of action to be followed	➤ Lecture-discussion	➤ Questioning ➤ Observation ➤ Demonstration
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Unit of Competency	Learning Outcomes	Methodology	Assessment Approach
	<p>8.3 Establish interpersonal relationship with the client that will enable all issues to be addressed</p> <p>8.4 Provide a brief intervention as required</p> <p>8.5 Respond appropriately to people who are vulnerable and at significant risk</p> <p>8.6 Evaluate effectiveness of services provided to meet client needs</p>	<ul style="list-style-type: none"> <li>➤ Lecture</li> <li>➤ Film showing</li> <li>➤ Role play</li> <li>➤ Return demonstration</li>   <li>➤ Lecture-demonstration</li> <li>➤ Role play</li>   <li>➤ Lecture-demonstration</li> <li>➤ Role play</li>   <li>➤ Lecture</li> </ul>	<ul style="list-style-type: none"> <li>➤ Observation</li> <li>➤ Return demonstration</li> <li>➤ Feedback from client</li>   <li>➤ Observation</li> <li>➤ Return demonstration</li> <li>➤ Observation</li> <li>➤ Return demonstration</li>   <li>➤ Questioning</li>   <li>➤ Questionnaire survey</li>   <li>➤ Feedback from client</li> </ul>
<p>9. Implement Health Promotion and community Intervention</p>	<p>9.1 Identify community issues in proactive health care</p> <p>9.2 Work within the education framework of health promotions</p> <p>9.3 Identify the activity program required</p> <p>9.4 Plan and deliver activity program</p> <p>9.5 Evaluate</p>	<ul style="list-style-type: none"> <li>➤ Lecture sessions</li> <li>➤ Role play</li> <li>➤ On the job training</li> </ul>	<ul style="list-style-type: none"> <li>➤ Observation</li> <li>➤ Demonstration</li> <li>➤ Case work reports</li> <li>➤ Third party report</li> </ul>

	activity program		
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### 3.2 TRAINING DELIVERY

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

- The training is based on curriculum developed from 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 on the collection of evidence of the performance of work to the industry required standard;
- Training is based both on the 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 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 and skills of the trainee through actual experience in the workplace to acquire specific competencies prescribed in the training regulations.

### 3.3 TRAINEE ENTRY REQUIREMENT

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
- Preferably based in a certain barangay
- With good reputation in the community

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 delivery this TVET program.

### 3.4 TOOLS, MATERIALS AND EQUIPMENT

#### LIST OF TOOLS, EQUIPMENT AND MATERIALS BARANGAY HEALTH SERVICES NC II

Recommended list of tools, equipment and materials for the training of a maximum of 25 trainees for the Barangay Health Services NC II

TOOLS		EQUIPMENT		MATERIAL	
QTY	DESCRIPTION	QTY	DESCRIPTION	QTY	DESCRIPTION
1	Monkey wrench	1	Weighing scale	1 rl	First Aid Kit
1	Screw driver	2	Oxygen gauges	1 rl	➤ cotton balls
2	Flashlight	2	Oxygen tank		➤ gauze
		1	Blood pressure apparatus		➤ elastic bandage 1 inch
		1	Stethoscope	1 bx	1 ½ inch
		1	Ambu bag	1 bx	-2 inches
		1	Cardiac board	1 bx	➤ plaster
			Cabinets (steel)	1 bx	➤ forceps
			for record	4 pc	➤ scissors
		1	Radiophone	4 pc	➤ suction catheter
				10	➤ thermometer
				4	➤ penlight
				1	➤ splints

TOOLS		EQUIPMENT		MATERIAL	
QTY	DESCRIPTION	QTY	DESCRIPTION	QTY	DESCRIPTION
				250 ml	> Drugs Ammonia Antiseptic solution Hydrogen peroxide, Betadine,
				1000 ml	
				1000 ml	70% alcohol
				1000 ml	Antipuretics
				200 tabs	Oresol –anti- disorder
				200 tabs	> Office supplies Bondpaper Folder Ballpen / pencil Paper clips Nutrition chart Growth chart Manila paper Forms (for patients' records) Weighing scale
				2 rms	
				100 pc	
				2 bxs	
				2 bxs	
				1 pc	
				1 pc	
				1 roll	
				1 pc	>Cleaning materials Broom tambo, Tingting) Floor mop Soap / detergent Waste cans (color coded) Basin
				5 pcs	
				5 pcs	
				4 pcs	
				20 bxs	
				6 pcs	
				4 pcs	

### 3.5 TRAINING FACILITIES

#### BARANGAY HEALTH SERVICES NC II

The Barangay Health Services NC II 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	AREAS IN S. METERS	QTY	TOTAL AREA IN SQ. METERS
Laboratory Area	4 x 5	20	1	20
Tool Room	3 x 5	15	1	15
Learning Resource Area	5 x 7	35	1	35
Wash Area / Comfort Room (male and female)	2.5 x 4	10	1	10
Admin. And Staff Room	4 x 5	20	1	20
Circulation Area				
Change Room				
Total Workshop Area				100

### 3.6 TRAINER QUALIFICATION

- 3.6.1 May be a licensed doctor, registered nurse or certified emergency medical technician or certified midwife with background / orientation on health care/services
- 3.6.2 Must have undergone training on Training Methodology II (TM II)
- 3.6.3 Must be physically, emotionally and mentally fit
- 3.6.4 Must possess good moral character
- 3.6.5 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 may be issued for each unit of competency.

## **SECTION 4 - NATIONAL ASSESSMENT AND CERTIFICATION ARRANGEMENTS**

- 4.1 To attain the National Qualification of **BARANGAY HEALTH SERVICES NC II**, the candidate must demonstrate competence through project-base type assessment covering all units listed in Section 1. Successful candidates shall be awarded a National Certification II (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 (waged employed or self-employed)
- 4.4 Re-assessment in a unit of competency is allowed only after one month from the date of assessment. Re-assessment 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 – HEALTH SECTOR (BARANGAY HEALTH SERVICES NC II)

## BASIC COMPETENCIES

Receive and respond to workplace communication	Work with others	Demonstrate work values	Participate in workplace communication	Work in a team environment	Practice career professionalism	Practice occupational health and safety procedures
<b>Practice housekeeping procedures (5S)</b>	Lead workplace communication	Lead small team	Develop and practice negotiation skills	Solve problems related to work activities	Use mathematical concepts and techniques	Use relevant technologies
<b>Utilize specialized communication skills</b>	Develop team and individual	Apply problem solving techniques in the workplace	Collect, analyze and organize information	Plan and organize work	Promote environmental protection	

## COMMON COMPETENCIES

Implement and monitor infection control policies and procedures	Respond effectively to difficult/challenging behavior	Apply basic first aid	Maintain high standard of patient services
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## CORE COMPETENCIES

Provide care and support to infants and toddlers	Provide care and support to children	Foster social, intellectual, creative and emotional development of children	Foster the physical development of children	Provide care and support to elderly	Provide care and support to people with special needs	Maintain a healthy and safe environment
Respond to emergency	Clean living room, dining room, bedrooms, toilet and bathroom	Wash and iron clothes, linen and fabric	Prepare hot and cold meals/food	Prepare and maintain beds	Collect and maintain linen stocks at end-users location	Assist in patient mobility
Assist in transporting patients	Assist in bio-psychosocial support care of patients	Handle waste in a health care environment	Install biomedical equipment	Perform corrective maintenance on biomedical equipment	Perform preventive maintenance on biomedical equipment	Repair biomedical equipment
Assess and refer biomedical equipment	Perform basic life support	Maintain life support equipment and resources	Implement safe access and extrication procedures in an emergency	Manage request for an ambulance service	Allocate ambulance service resources	Coordinate emergency resources
Deliver basic ambulance communication skills	Supervise on-road operations	Manage the scene of an emergency	Manage the scene of a special event	Manage routine scene	Deliver pre-hospital patient care	Deliver intensive pre-hospital patient care
Manage ambulance operations	Transport emergency patients	Transport non-emergency patients	Drive vehicles under operational conditions	Work within a holistic therapeutic massage framework	Perform therapeutic massage assessment	Plan the therapeutic massage treatment
Implement therapeutic massage treatment	Perform remedial therapeutic massage treatment	Work within a community development framework	Prepare for work in the community service industry	Support community resources	Provide primary/residential care	Support community participation
Recruit and coordinate volunteers	Respond holistically to client issues	Develop and provide health education program in the community	Implement health promotion and community interventions			

## DEFINITION OF TERMS

1. **Framework** - refers to the basic supporting idea / concept / theory.
2. **Community Development Framework** – includes a range of methods designed to strengthen and develop communities.
3. **Community Structures** – groups/ organizations in the community whether political, socio-cultural or groups in the academe who share concerns and issues.
4. **Problem solving skills** – skills needed to solve routine problems related to the workplace under direction
5. **Client-centered approach** – a non-discriminatory approach to all client, their family and friends, commitment to meeting their needs and upholding their rights as well as empowering them.
6. **Residential care** - this includes planning for resources, services and on-going support for the client and significant others to ensure resettlement needs are assessed and addressed.
7. **AOD** - alcohol and other drugs problems

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