

NATIONAL COMPETENCY STANDARD & COMPETENCY BASED TRAINING CURRICULUM FOR

NURSE ASSISTANT

(Competency Standard Code: N85S002)



Developed and Validated by;

National Apprentice & Industrial Training Authority 971, Sri Jayawardenepura Mawatha, Welikada, Rajagiriya.



Endorsed by;
Tertiary & Vocational Education Commission
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Colombo 05.

Ministry of Science, Technology, Research, Skills Development and Vocational

Training & Upcountry Heritage

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PREFACE

National Competency Standards (NCS) and curriculum are an essential element for the implementation of a unified Technical and Vocational Education & Training System for Sri Lanka and forms the basis for the National Vocational Qualification Framework of Sri Lanka, which provides for the award of nationally and internationally recognized qualifications. The NCS are developed in consultation with industry and are designed using a nationally agreed specific format to maintain uniformity and consistency of standards amongst occupations.

The NCS specifies the standards of performance of a competent worker and the various contexts in which work may take place. NCS also describe the knowledge, skills and attitudes required in a particular occupation. NCS and curriculum provide explicit advice to assessors and employers regarding the knowledge, skills and attitudes to be demonstrated by the candidates seeking formal recognition for the competencies acquired either following training or through work experience.

NCS focus on what is expected of a worker in the workplace and the curriculum focus the learning process

- NCS stress upon the ability to transfer and apply knowledge and skills to new situations and environments.
- In NCS and curriculum the emphasis is upon outcomes and upon the application of knowledge and skills, not just the specification of knowledge and skills.
- NCS and curriculum are concerned with what people are able to do and the ability to do a
 task in a range of contexts.
- NCS and curriculum include all aspects of workplace performance and not only narrow task skills. NCS can serve a number of purposes including:
 - o Providing advice to curriculum developers about the knowledge, skills and attitudes to be included in the curriculum.
 - o Providing specifications to Competency Based Assessors about the knowledge, skills and attitudes to be demonstrated by candidates.
 - Providing advice to industry about job functions, which in turn can be used for the development of job descriptions, performance appraisal systems and work flow analysis.

The lead organization for the development of NCS and curricula is the National Apprentice & Industrial Training Authority. The standards so developed are endorsed by the Tertiary & Vocational Education Commission as National Documents

There is a requirement to review the standards within the prescribed period as appropriate as and when required, with the assistance of relevant industry groups and incorporate the changes in the National Competency Standard

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Occupational Outlook

Job Description

A Nurse assistant, works under the supervision of nurses to deliver high quality care to Clients. The job requires long hours and many responsibilities, but caring for Clients on a daily basis provides some of the greatest rewards any profession could offer. Not to mention, the skills you learn as a certified Nurse assistant can prepare for a long-term career in the nursing field.

Nurse assistants perform routine tasks under the supervision of nursing and medical staff. They answer Clients' call lights; deliver messages; serve meals; make beds; and help Clients to eat, dress, and bathe. Aides also may provide skin care to Clients; take their temperature, pulse rate, respiration rate, and blood pressure; and help them to get into and out of bed and walk. They also may escort Clients to operating and examining rooms, keep Clients' rooms neat, set up equipment, store and move supplies, and assist with some procedures. Aides observe Clients' physical, mental, and emotional conditions and report any change to the nursing or medical staff.

Responsibilities:

- Help Clients with their basic needs. Generally, this means helping them bathe, dress and feed themselves
- Responsible for taking and recording Client vital signs.
- serving meals to Clients, making beds and helping clean rooms
- set up medical equipment and assist with some medical procedures
- Maintain effective communication with the client and the family for help and observe changes in a Client's condition or behavior

Nurse Assistant is an occupation with a high demand both locally and internationally. They can play an important role in health sector. Internationally there is a very high demand for Nurse Assistant. Demand for this occupation is growing in Sri Lanka also

NATIONAL COMPETENCY STANDARD & COMPETENCY BASED TRAINING CURRICULUM For NURSE ASSISTANT

(Competency Standards Code: N85S002.02)

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Note: Candidates are required to obtain a certificate in basics of first-aid including BLS (Basic Life Support) From a recognize institute

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Section 1

NATIONAL COMPETENCY STANDARD

FOR THE OCCUPATION OF

NURSE ASSISTANT

Content

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16.	Maintain effective communication with the client and the family	N85S002U16	60-62
10.	Maintain Shootive communication with the chefit and the family	14000002010	63-66

National Certificate at NVQ Level 03 in the occupation of Nurse Assistant will be awarded to those who are competent in units 1+2+3+4+5+6+7+8+9+14+16-85

National Certificate at NVQ Level 04 in the occupation of Nurse Assistant will be awarded to those who are competent in units 1+2+3+4+5+6+7+8+9+10+11+12+13+14+15+16 – N85S002Q2L4

Unit Title :	Pract	tice workplace communication and inter-cliental relations		
Unit Descriptor :	other	This unit covers the competencies required to co-operate with others, interact effectively and deal with information within the workplace		
Unit Code:	N85S	S002U01		
Element	Perfo	ormance Criteria		
Co-operate with others in performing work	1.1	Work is performed in co-operation with others in a friendly & courteous manner		
	1.2	Verbal and non-verbal communication are used appropriately		
	1.3	Ideas, opinions and interactions are shared & respected appropriately		
	1.4	Work is performed in co-operation with others and related staff appropriately		
2. Work with people of diverse backgrounds	2.1	People of a variety of backgrounds are accepted without prejudice		
	2.2	Respect for cultural, ethnic and gender differences are practised appropriately		
3. Obtain record and convey workplace	3.1	Effective questioning, active listening reading and speaking skills are used to gather information		
information	3.2	Information and ideas are transferred without distortion		
	3.3	Work place interaction is conducted in a courteous manner		
	3.4	Approved work instructions are obtained and followed in an appropriate manner		

4. Fill work related documents	4.1	Work related forms and formats are identified appropriately
	4.2	Range of forms and formats relating to work are filled, appropriately
	4.3	Reporting requirements to supervisor are completed accurately in accordance with organizational guidelines and timelines.

The performance of activities included in this unit may take place in a work place. Communication will include verbal, non-verbal, written, printed and electronic forms. It applies to individuals, groups and co-workers as well as others.

Critical Aspects:

The assessment must confirm that the candidate is able to;

- Obtaining accurate information from customer/superior/co-workers
- Accurate recording of information
- Conveying information to relevant parties accurately

The following tools, equipment & material are included within this unit.

Tools/ instruments and equipment

- Pens/pencils/rulers/calculator
- Paper/notebooks
- Telephones

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Documents/References/Standards

- Charts
- Graphics
- Memos
- Formats & Forms (Time Record sheets, Quality record sheets, and material order sheets)
- Standard Organizational Procedures and accepted ethical standards and norms

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Safety symbols & procedures
- Mother tongue in both spoken and written form
- Basic English relevant to workplace and type of work
- Organization's rules, regulations and procedures
- General norms of polite conduct
- Forms of address appropriate to customers and clients in different positions
- Basic knowledge of customs and practices of different ethnic and religious groups
- Good telephone manners
- Basic understanding of gender issues
- Basic knowledge adaptive language

- Speak clearly in mother tongue and express varied ideas
- Write clearly and legibly in mother tongue
- Read and understand simple
 English relevant to the workplace
- Write simple explanations in English language
- Communicate effectively using the telephone
- Perform simple calculations

Unit T	itle :	Apply occupational literacy and numeracy	
Unit D	escriptor :	This u	nit covers the competencies required to apply literacy and
		nume	racy to participate effectively in activities at the workplace
Unit C	ode:	N85S	002U02
Eleme	nt	Perfo	rmance Criteria
1.	Employ basic mathematics to complete work	1.1	Computation skills are demonstrated using whole numbers, fractions, decimals and percentages manually and with calculators.
	tasks and solve problems	1.2	Key concepts and principles of mathematics are applied to understand and solve workplace calculations.
		1.3	Computation skills are demonstrated
2.	Communicate ideas in writing	2.1	Adequate vocabulary is maintained for everyday tasks according to nature of work
		2.2	Written material is produced to convey intended message in familiar work context
		2.3	Appropriate units, codes and symbols are selected according to the purpose of written material
3.	Read range of written materials	3.1	Adequate vocabulary is maintained to read range of written materials according to workplace requirements
		3.2	Appropriate units, codes and symbols are interpreted for the purpose of reading
		3.3	Information is gained from text integrated with own knowledge in order to create meaning

Activities included in this unit may take place in a medical institute, and will include but not be limited to reading reports, instruction sheets, and other types of written material in the mother tongue as well as in simple English, writing in the mother tongue and in simple English sentences, and performing simple work related calculations employing basic mathematical operations.

Critical Aspects:

The assessment must confirm that the candidate is able to;

- Interpret written material accurately
- Convey ideas clearly and correctly in writing
- Adopt appropriate method in mathematical calculations

The following tools, equipment & material are included within this unit.

Tools/ instruments and equipment

- Pens/pencils
- Paper/notebooks
- Calculator

Documents/References/Standards

- Charts
- Manuals
- Memos
- Formats & Forms (Time Record sheets, Quality record sheets,
- Accepted rules of grammar and syntax
- Fundamental principles of mathematics

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Grammar, spelling and syntax in mother tongue
- Basic English grammar, spelling and syntax
- Mathematical representation of physical quantities
- Basic Mathematical operations
- Basic medical terminology

- Write clearly, legibly and correctly in mother tongue
- Read and understand simple English relevant to the workplace
- Write simple sentences in English
- Perform simple calculations

Unit Title :	Work	in teams		
Unit Descriptor :	and in	This unit covers the competencies required to work collaboratively and in cooperation with others, and identify roles & responsibilities of members of the team		
Unit Code:	N85S	002U03		
Element	Perfo	rmance Criteria		
1. Understand team role and scope	1.1	Formal and informal teams and their roles and limitations are identified in a medical institution		
	1.2	Responsibilities, characteristics and relationship of team members are explained to accomplish team goals		
2. Participate as a team member	2.1	Different forms of communication are used with team members to contribute to team objectives		
	2.2	Appropriate contribution (participation) is made to the team to meet team goals		
	2.3	Safety of team members is ensured when performed work operations appropriately		
	2.4	Different viewpoints and ideas are respected as required to meet team goals		
	2.5	Collective decisions are accepted as required to meet team goals		
3. Maintain productive group relations	3.1	Individual's role and responsibility within the team is clearly identified		
	3.2	Other's roles and responsibilities are identified and understood		
	3.3	Harmonious relations are maintained and respected within the team and with others		

The performance of activities included in this unit may take place in a medical institution and will include but not be limited to identifying individual's and other's roles and responsibilities within the team and maintaining harmonious relations.

Critical Aspects:

The assessment must confirm that the candidate is able to;

- Achieve team goals and individual goals
- Follow designated work plan for the job
- Respect to other's ideas

The following tools, equipment & material are included within this unit.

Tools/ instruments and equipment

Depending on the job assigned to the team for the purpose of assessing this unit, required tools, equipment and material will be provided.

Documents/References/Standards

- Work plans
- Manuals
- Handbooks
- General rules and norms guiding team behavior

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Simple concepts of team behaviour
- Elementary group dynamics
- Basic knowledge in social and demographic structures

- Work effectively and comfortably as a member of a team
- Patience
- Understand others
- Listening skill
- Leadership skill

Unit Title :	Pract	ice occupational safety and Infection Control Procedure	
Unit Descriptor :	and	This unit describes the performance outcomes required to identify and follow safety and emergency procedures in a medical Institution	
Unit Code:	N85S	002U04	
Element	Perfo	rmance Criteria	
1. Identify and follow safety procedures	1.1 1.2	Medical Institutional procedures relating to cliental safety are identified and followed Work place safety and hazards control practices and procedures are followed based on organizational procedures.	
	1.3	Unsafe situations and hazards are identified and reported according to Institutional procedures	
	1.4	Machinery and equipment breakdowns are identified and reported according to Institutional procedures	
	1.5	Fire hazards are identified, different fire protection equipment and material and their methods of use are also identified as required for different types of fires	
	1.6	Safety signals and symbols are identified	
	1.7	Participated at Health and Safety awareness programmes	
	1.8	Participated in periodical medical checkups to ensure proper health condition of self	
	1.9	First- aid procedures are performed as needed	
	1.10	Daily and weekly safety & health check list is followed as per organizational requirements	
	1.11	Good housekeeping practices are identified and followed.	
2. Identify and follow workplace emergency	2.1	Mechanical, electrical, chemical and biological hazards are recognized, identified and reported promptly.	
procedures	2.2	Workplace emergency procedures regarding illness and accident are identified and followed.	

2.3	Safety warning alarms and evacuation procedures are identified and followed
2.4	Firefighting appliances and equipment are located and identified for emergency use and application
2.5	Relevant clients are identified for contacting in the event of an incident.

Activities included in this unit may take place in a Medial Institution, and will include but not be limited to identifying potential hazards, taking effective preventive action to control or minimise such hazards, using fire extinguishers and maintaining records of safety related activities.

Critical Aspects:

Identify potential hazards

• Adhere to safety procedures

The following tools, equipment & material are included within this unit.

Tools/ instruments and equipment

- Safety signs and symbols
- Posters
- First aid box with essential items
- Fire protection equipment
- Cliental Protective attires

Documents/References/Standards

- Health & safety procedure manual
- •

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

Skills

Learning skills to:

Individuals must be able to demonstrate knowledge of:

basic aspects of relevant OHS legislation, including:

- Employer responsibilities employee responsibilities to participate in OHS practices
- Employee responsibility to ensure own work practices to protect the safety of self, and others
- Rules of general safety.
- Rules of fire and disaster safety.
- Rules of safety when oxygen is in use.
- Demonstrate the principles of body mechanics.
- Explain the purpose of restraints and the safety rules for use.
- Describe the nurse assistant role in a restraint reduction program.
- Explain and describe the causes of obstructed airway showing the method used to relieve the obstruction.
- Explain the chain of infection.
- Explain the differences between medical asepsis, surgical asepsis, disinfection and sterilization.
- Explain the Standard Precaution techniques, isolation precautions and their effects on the client.
- Describe nosocomial infection and the client at risk.
- Demonstrate proper hand washing.
- Describe basic life-saving measures.
- Attain CPR/ BLS certification prior to Client contact

locate sources of information relating to safety requirements.

Reading skills to:

carry out work safely.

Writing skills to:

legibly and accurately enter information into Institutional safety documents and check sheets.

- Oral communication skills to: clarify instructions inform clientele of hazards.
- Planning and organizing skills to: plan own work requirements to achieve required outcomes while working according to safety requirements.
- Self-management skills to:

Follow safety requirements without constant supervision identify and look after own safety.

 Problem solving skills to: recognize when unsure of safety procedures and seek help

recognize potential workplace hazards and take action.

Competency Unit :	Prep	pare the unit of the client
Unit Descriptor :	This unit covers the competencies required to maintain cleanliness, ventilation and lighting of the unit ensuring safety of the client, self and others preventing nosocomial infections.	
Unit Code:	N85	S002U05
Element/Task	Perf	ormance Criteria/Standards
1. Disinfect the unit	1.1	Pre-preparation activities are carried out as per standard operating procedures.
	1.2	Unit of the client is identified as per the standard operating procedures.
	1.3	Cleanliness of furniture, walls and ceiling is ensured according to the standard operating procedure.
	1.4	Sweeping and mopping of the floor with an antiseptic solution are ensured as per standard operating procedure.
	1.5	Cleaning of bathroom, toilets with antiseptic solution is ensured and kept dry as per standard operating procedure.
2. Prepare the bed and unit	2.1	Clean linen is obtained from an authorized client according to the organization procedures/client's condition
	2.2	Condition of the mattress is checked and ensured for suitability
	2.3	Bed is prepared neat and tidy after ensuring cleanliness of the bed, mattress and pillows according to the standard bed making procedures.
	2.4	Bedside locker/ cupboard is kept to a side of the client parallel to head end facilitating easy access.
	2.5	Decorative items are kept on the suitable place to obtain aesthetic value and maintained.

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.

Bed preparation may include; Admission, surgical, obstetrics, incontinent, pediatric, paraplegic / quadriplegic, cardiac

Critical Aspects:

- Precautions to avoid cross infections
- Adhere to positioning techniques

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment

- Bed/Bed side locker/cupboard
- Table
- Towel rack
- Bed table
- Foot stool / step
- Chair
- Dustbin
- Basin / bowl
- Bed pans / urinals
- Thermometer in container
- Spoon / fork
- Plate / glass/ cup / saucer
- Television / Radio
- Teaspoon
- Calling bell
- Sanitary napkins, pampers

- Bed linen
- Bath towel
- Hand towels
- Rubber sheet
- Insect control measures
- Two pillows and cases
- Sponge bags
- Soap with soap dish
- Hand lotion
- Tissues
- Dusters
- Disinfectant/ antiseptic lotion
- Telephone
- Jug
- Sputum mug
- Gloves /apron/ mask
- Water container

documents/References/Standards

- Doctor's/nurse's notes
- Organizational procedure protocol
- Check list
- Bed making procedure manual
- BHT (Bed Head Tickets)
- Material Safety Data Sheet (MSDS)
- National and International nursing guidelines
- Standard Operating Procedures (SOP)

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- · Professional ethics in nursing
- Bed making procedure and techniques
- Purpose of preparing bed
- Equipment and materials needed for client's unit
- Types of disinfectants and methods of use
- Types of beds
- Positioning, lifting, moving, ambulating client
- Knowledge of body mechanics
- Safety signs
- Methods of dusting, sweeping, disinfecting and mopping
- Relevant Occupational Health and Safety practices
- Preparation of disinfection and antiseptic lotion

- Bed making
- Identification and collection of equipment
- Follow principle of bed making procedure
- Positioning, lifting, moving of the client
- Economical use of time and energy
- Maintain correct posture of the nurse assistant
- Maintain nurse-client relationship
- Follow organizational procedure
- Use of Cliental Protective Equipment (PPE)
- Communication

Competency Unit :	Maint	ain cliental hygiene, mobility and position of the Client
Unit Descriptor :		nit covers the competencies required to attend to basic hygienic
	1 -	ces, mobility and position of the client ensuring safety, self and susing equipment and material safely.
Unit Code:	N85S	002U06
Element/Task	Perfo	rmance Criteria/Standards
Attend to oral care	1.1	Equipment, material required to attend oral care are collected.
	1.2	Equipment and material for special oral care are obtained from an authorized client
	1.3	Oral care is attended according to the basic principles of the standard procedures
	1.4	Oral appliances are applied according to the condition of the client
2. Attend to skin care / nail care / eye care	2.1	Equipment and material needed for shower bath or bed
nan care / eye care	2.2	bath are collected as required Skin care is performed according to the basic principles
		including eye care
	2.3	Nail care is performed according to the basic principles
	2.4	Skin lesions and changes are observed including those in pressure points recorded and informed to responsible clients
	2.5	Protective measures are taken when attending clients with skin diseases
	2.6	Protective measures are taken while attending to clients with
		drains and tubes as per standard sterile procedure
3. Attend to shaving	3.1	Equipment and material needed for shaving are collected as required
	3.2	Area to be shaved is identified according to the requirement
	3.3	Area is cleaned and shaved according to the principles

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4.	Attend to perineal care	4.1 4.2 4.3 4.4 4.5 4.6	Equipment and material needed to attend to perineal care are collected as required Protective measures are taken to avoid cross infections as per universal procedure Privacy of the client is maintained accordingly Perineal care is attended to as specified in the standard procedure Client is made comfortable maintaining correct posture Observations and activities are reported and recorded according to organizational procedures
5.	Attend to hair care	5.1	Equipment and materials required for hair care are collected as necessary.
		5.2	Hair is combed and braided neatly and tied if washing is not needed
		5.3	Hair is washed and dried, pediculosis treatment carried out if necessary
		5.4	Observations and activities are reported and recorded according to organizational procedures
		6.1	Client is dressed with suitable clothes to maintain privacy,
6.	Change the		comfort and image of the client.
•	clothes & bed	6.2	
	linen and the	6.2	Bed linen is changed as per standard procedures
	grooming	6.3	Grooming is carried out as per the requirement of the client
7.	Support/ carry	7.1	Client condition is identified as per instruction
	out mobility and position	7.2	Required equipment and material are collected if necessary
		7.3	Protective and safety precautions are taken
		7.4	Mobility and positioning are carried out while maintaining proper postures of the self and the client as per standard procedures
		7.5	Observations and activities are reported and recorded according to organizational procedures
		8.1	Used items are sorted as per standard procedures
8.	Perform after	8.2	Infection control procedures are carried out as per universal
	care of items		precautions
	used and	8.3	Appropriate action is taken for sorted items
	waste collected	8.4	Broken/ damaged items/ equipment are recorded and
			reported as per the standard procedures
		8.5	Observations and activities are recorded and reported and
		3.3	according to organizational procedures

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.

Basic hygienic practices may include in this unit: Mouth care, skin care, hair care, nail care,

perineal care, and eye care

Elaboration of terms in performance criteria

Appropriate action may include: disposal of waste as per the colour code, cleaning, disinfecting, replacing equipment and storing

Critical Aspects

- Maintain privacy of client
- Ensure safety measures for client and self
- Proper waste management techniques
- Reporting of unusual signs

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment

- Basin
- Bath towel / face towel
- Forceps in a bowl
- Hot water / cold water
- Mackintosh and covers
- Soap/Hand wash/Liquid soap/Body wash/Shampoo
- Nail cutters
- Cotton swabs
- Sputum mug
- Sponge cloths
- Pail for dirty water
- Covering clothes
- Tooth paste / tooth brush
- Paper bags
- Comb
- Shaving kit
- Powder / cream / cologne/oil
- Mobilizing devices and equipment
- Bed linen
- Waste bin/garbage bag(according to colour code)
- Cliental Protective Equipment (PPE)

documents/References/Standards

- Nurse's notes
- Organizational protocol
- Instructional procedures
- Charts
- Standard Operating Procedure
- Material Safety Data Sheet
- Recording and reporting standards
- Procedure manual
- Hospital waste management protocol

For special mouth care

- Mouth swabs
- Artery forceps
- Kidney tray
- Tongue depressor
- lime juice, normal saline, glycerin
- Mouth wash

For pediculosis treatment

- Prescribed Pediculosis lotion
- Triangular bandage to cover the hair

Hair wash

- Long mackintosh/ Kelley's pad
- Shampoo
- Small Jug /mug /Pail
- Paper bag
- Gloves
- Small Containers/ Gallypot
- Trough

- Paper rolls
- Hair dryer
- Grooming equipment and material
- Bath towel
- Basin
- Eye cover, eye pad, sponge cloth

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Purpose of the shower bath, sponge bath, hair wash, oral care, skin care, perineal care
- Correct usage of tools, equipment and material
- Effective intercliental relationship
- Importance of cliental hygiene
- Correct procedure in maintaining cliental hygiene
- Basic human anatomy, physiology and psychology
- Infection control and universal precautions
- Basic microbiology
- Shaving technique
- Hospital waste management
- Different positions
- Relevant Occupational Safety and Health practices
- Ergonomic practices

- Attending to hair wash, mouth care, perineal care
- Identify complications
- Keeping records
- Take preventive measures
- Relevant procedures
- Communication skills
- Care of equipment after use
- Positioning of the client
- Hospital waste management practices
- Mobilization methods
- Use of Cliental Protective Equipment

	Provide meal to the Client	
Competency Unit:		
Competency offit.		
Unit Descriptor :	This unit covers the competencies required to obtain and serve the diet by attending different methods of feeding considering nutritional requirements while maintaining hygienic condition of the diet	
Unit Code:	N85S002U07	
Element/Task	Performance Criteria/Standards	
Obtain diet according to condition of the client	 1.1 Type of diet and frequency are identified according to disease condition of the client as instructed by an authorized client 1.2 Liquid diet, semi-solid diet and beverages are prepared according to the disease condition of the client as instructed by an authorized client 1.3 Method of feeding is identified according to the condition of 	
	the client 1.4 Meal is acknowledged to meet the calorie requirement as prescribed by an authorized client and the client's preference	
	1.5 Ordered diet is obtained in time	
2. Serve the diet	2.1 Food tray is arranged accordingly	
	2.2 Suitable environment in the unit is prepared	
	2.3 Diet is served as required and observed for any discomfort2.4 Changes are recorded and reported to the authorized client	
3. Feed the client	3.1 Client is explained and cooperation obtained	
	3.2 Necessary equipment for feeding are collected and cleaned according to the feeding procedure	
	3.3 Food tray is arranged by considering client's preference and nursing procedure	
	3.4 Due drugs are collected and given as prescribed	
	3.5 The client is positioned according to the condition and the type of feeding	
	3.6 Client is fed carefully following feeding procedure	
	3.7 Changes are observed during and after feeding3.8 Changes are recorded and informed to the authorized client	
	5.5 Changes are recorded and informed to the authorized cheft	
4. Clean the client and unit after	Client is made comfortable according to the wish and the condition of the client	
feeding	4.2 Equipment are used for feeding cleaned and stored according to the standard procedure	
	4.3 Unit is cleaned as per standard procedure	

5.	Record on consumption of the	5.1	Recording is done on the nurse's notes and input- output chart maintained
	food by the client	5.2	Changes in food consumption is informed to authorized client according to the organizational procedure

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.

Critical Aspects:

- Prevent contamination
- Avoid aspiration in feeding

Types of diet included in this unit:

- Solid diet special diet, diabetic diet, low salt, low fat, high protein
- High carbohydrates, fiber rich, specially prepared diet
- Semi solid diet
- Liquid diet
- Beverages

Method of feeding

- Oral
- Tube feeding (nasal, gastrostomy, gavage)

The following equipment and material may be used for this:

For oral feeding

- Cup and saucer
- Fork and spoon
- Tray
- Feeding spoon
- Knife
- Cutlery and crockery

- Glass/plates
- Finger bowl
- Bib
- Soup bowl
- Serviette / towel / tissue

For tube feeding

- Equipment in a covered tray
- Ryles tube
- Gally pots
- Measuring jug
- Nasal wicks
- Bib / water proof material and cover
- Prepared feed in a measuring Glass
- Prepared drugs in a medicine glass
- Pair of disposable gloves

- Kidney tray
- 10 cc syringe
- Barrel of a 50 cc syringe
- Stethoscope
- Glass of water
- Gauze swabs
- Paper bag
- Litmus papers
- Plaster

The following documents may be used in this unit

- Bed Head Ticket (BHT)
- Drug chart
- Fluid balance chart
- Doctor's / Nurse's notes

The performance of this unit is expected to be carried out to the following standards

- Standard nursing procedures in feeding
- Organizational rules and regulations

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Nutrients in foods
- Types of diet
- Method of providing foods
- Equipment use
- Prevent contamination
- Signs and symptoms of choking /aspiration
- Awareness of emergency situation
- Method of preparing liquid and solid diet
- Ergonomic practices

- Collect equipment according to the type of feeding
- Clean and store equipment
- Feed client
- Follow nursing procedure
- Check tube in situ
- Position the client
- Maintain nurse client relationship
- Prepare feed
- Prepare medication
- Correct recording
- Identify symptoms of choking and aspiration
 & take immediate and appropriate actions
- Use of stethoscope
- Take emergency action
- · Preparation of liquid and solid diet
- Use of Cliental Protective Equipment

	Give Medication		
Competency Unit:			
Unit Descriptor :	medic	This unit covers the competencies required to administer medication according to the rules of administration of medication ensuring safety of the client	
Unit Code:	N85S	002U08	
Element/Task	Perfo	rmance Criteria/Standards	
Give oral medication	1.1	Medicine to be given is identified and collected under supervision of superior as per organization procedures	
	1.2	Equipment are collected according to the standard procedure	
	1.3	Client is prepared according to disease condition and nursing procedures.	
	1.4	Allergies sticker is checked and inquired according to the standard procedures	
	1.5	Drugs are administered according to the standard procedures	
	1.6	Drugs, dosage, route, time and frequency are recorded and signed on drugs charts according to the procedures	
	1.7	Client is observed for tolerance, side effects, out come and reported where appropriate	
2. Give injections (Subcutaneous	2.1	Type of drugs and dose to be injected is identified as per doctor's prescription	
Insulin)	2.2	Drugs and sterile equipment are collected from authorized clients as per organizational procedure	
	2.3	Client is explained and appropriate Injection site selected	
	2.4	Relevant dose of the drug is drawn into the "insulin syringe" maintaining sterility	
	2.5	Injections are given following the steps mentioned in the procedure manual	
	2.6	Necessary data are recorded in drug chart according to the organizational procedure and meal provided.	

		2.7	Used items are disposed according to universal precautions
		2.8	Reusable items are prepared for next usage according to standard procedure
3.	Instill eye , ear, and nasal drops	3.1	Type of drugs and dose to be instilled is identified as per doctor's prescription
		3.2	Drugs are collected from an authorized client according to the organizational procedure
		3.3	Client is given explanation and positioned according to the procedure.
		3.4	Drops are instilled as prescribed
		3.5	Necessary data are recorded in drugs chart
		3.6	Client is observed for side effects, expected outcome and reported when and where necessary
4.	Give inhalation/ nebulization /	4.1	Type of drugs and dose to be inhaled is identified as per doctor's prescription
	oxygen	4.2	Drugs are collected from an authorized client according to the organizational procedure
		4.3	Client is given explanation and positioned according to the procedure
		4.4	Necessary equipment are collected as per requirement and organizational procedure
		4.5	Inhalation / nebulization is given following standard procedure
		4.6	Oxygen is administered following standard procedure
		4.7	Client is observed, recorded and any reactions reported as per organizational procedures
5.	Apply local medication to skin	5.1	Types of cream / ointment / lotion are collected from authorized client as prescribed
		5.2	Skin area is cleaned, dried and medicine applied wearing disposable gloves, as mentioned in the guideline

6. Give Per Rectum (PR), Per Vaginal (PV) drugs	6.1	Type of drugs are collected from an authorized client as prescribed	
	6.2	Client is given explanation and equipment collected as required	
		6.3	Client is kept in left lateral position/semi lithotomy position and privacy maintained
	6.4	Suppository is inserted into rectum/ Pessary inserted to vagina according to the procedure	
		6.5	Client is advised and helped to retain until drug dissolved
		6.6	Client is observed for side effects, expected outcome

recorded and reported where appropriate

Range/Context:

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.

Administration of drug is limited to oral drugs, PR and PV drugs, subcutaneous insulin, instillation of eye, ear and nasal drops, oxygen and nebulization, skin application

Critical Aspects

- Observe vital signs and allergic reactions
- Correct use of six-rights

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment

- Pill box
- Tray
- Scissors
- Oxygen cylinder with equipment
- Mortar & pestle
- Nebulizer
- Medicine glass
- Saucer, spoons
- Inhalers
- Sterile kidney tray
- Nasal wicks
- Sputum mug
- Emergency tray
- Glucometer
- Bib
- Insulin syringe & other syringe with needle
- Serviette
- Glass of water
- Paper bag / waste bin
- Prescribed medicine
- Gloves
- Mackintosh and cover
- Tubes and Face masks
- Lubricator
- Bath towels
- Cotton swabs
- Surgical spirits
- Blood pressure apparatus
- Speculum

documents/References/Standards

- Bed head Ticket / prescription
- Drugs chart
- Organizational procedure manual
- Doctor's / Nurse's notes

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Basic knowledge on pharmacology
- Administration of medication
- procedure in various routes
- rights of medication (six)
- Barrier nursing (according to the infection control manual)
- Positioning of the client
- Basic knowledge on anatomy
- Body mechanics
- Application of oxygen
- Sign and symptoms of allergies
- Storage of drugs
- Application of apparatus

- Collect equipment according to the type of medication
- Observe, record and report side effects and clients' responses
- Use of correct dosage (six rights)
- Give nebulization
- Maintain nurse -client relationship
- Positioning client for various procedure
- Instillation of eye, ear and nasal drops
- Apply ointments
- Give steam inhalations
- Provide Oxygen inhalation
- Give subcutaneous injections
- Read Bead Head Ticket
- Administer medications
- Measure, crush medications
- Wearing of gloves
- Use of Cliental Protective Equipment

	Check	and Record Vital Signs
Competency Unit:		
Unit Descriptor :	This unit covers the competencies required to identify, observe and attend to the changes of the vital signs of the client and record & report where necessary ensuring safety of the client.	
Unit Code:	N85S	002U09
Element/Task	Perfor	mance Criteria/Standards
Check temperature, pulse	1.1	Equipment are collected to check the temperature according to the standard procedure
and respiration	1.2	Client is prepared according to the condition
	1.3	Temperature is checked and read, pulse and respiration counted accurately
	1.4	Temperature, pulse and respiration-is are recorded in the temperature chart / observation chart as per the procedure
	1.5	Any abnormality, if found, is reported to superior immediately as per the organizational procedure
	1.6	Necessary actions are taken to maintain normal body temperature where necessary as per standard procedure
	1.7	Used equipment are cleaned and stored according to organizational procedure
	1.8	Emergency situation is identified and necessary action taken
2) Check blood pressure	2.1	Equipment is collected to check blood pressure according to the standard procedure.
	2.2	Client is positioned to check blood pressure according to the condition of the client.
	2.3	Blood pressure is measured accurately as per nursing procedures
	2.4	Blood pressure is recorded in nurse's notes/observation charts as per organizational procedure.
	2.5	Any abnormality of blood pressure is reported to superior / authorized client immediately as per organizational procedure

	2.6	Used equipment are cleaned and stored according to organizational procedure
3) Measure pain level	3.1	Pain scale is introduced and explained to the client as per the procedure
	3.2	Pain level is measured by using a standard pain scale
	3.3	Pain score is recorded and informed to the authorized client as per organizational procedure to take remedial action.

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.

This includes checking vital signs of clients in any condition.

Critical Aspects:

- Check,record and report vital signs accurately
- Prevent infections
- Identify abnormal signs

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment

- Thermometer (oral / rectal)
- Stethoscope
- Sphygmomanometer Wrist watch (center second hand)
- Tray
- Cotton swabs (wet / dry)
- Rectified sprits
- Pen (blue / red) Ruler 6"
- Paper bag / waste bin Sponge clothes Bowl with water

- Warm blanket
- Over The Counter (OTC) drugs
- Pain scale
- Cliental Protective Equipment

documents/References/Standards

- Nurse's notes
- Temperature chart
- Observation chart
- Standard nursing procedure
- Organizational rules and regulations

Knowledge

- Normal body temperature, pulse, respiration and blood pressure, volume, tension, rhythm, rate of pulse
- Colour of the skin and the tongue
- Deviation of vital signs
- Prevent infections
- Method of maintaining body temperature
- Sites of taking pulse and temperature
- Knowledge on emergency situation
- Pain scale and levels.
- Relevant Occupational Safety and Health practices

- Collect equipment
- Follow nursing procedure
- Use of stethoscope
- Use of sphygmomanometer and thermometer
- Correct positioning of client
- Recording and reporting vital signs
- Maintain nurse-client relationship
- Economical use of time
- Maintain body temperature using appropriate techniques
- Clean and store equipment
- Handling emergency situation

Competency Unit :	Care	Care of an elderly client	
Unit Descriptor :	proble	This unit covers the competencies required to identify problems that may occur during old age and attend to needs ensuring safety of the client and others.	
Unit Code:	N85S	N85S002U10	
Element/Task	Perfo	mance Criteria/Standards	
1) Identify problems	Problems of aging is identified according to instruction given in relation to physical, ment social changes in old age as per the aging		
	1.2	Medical problems are identified by reviewing reports and communicating with the client	
	1.3	Weaknesses are identified by assessing the client	
	1.4	Authorized client is informed of any abnormality observed and instructions followed where necessary	
	1.5	Social and spiritual needs are discussed with the family and friends by maintaining good rapport	
2) Attend moving and lifting	2.1	Client is made comfortable and complication is avoided by moving and lifting him / her according to the nursing procedure	
	2.2	Accidents are prevented while moving the client avoiding risk factors	
	2.3	Techniques are used to move and lift the client according to requirement	
Provide meal and drugs	3.1	Food restriction and limitation is identified by reviewing medical records or discussing with the superior.	
	3.2	Meal is obtained and served timely by giving appropriate support	
	3.3	Drugs are given according to the instruction given by an authorized client	
	3.4	Side effects are reported timely to prevent complications.	

A) A(() () ()		
4) Attend to hygienic care and comfort measures	4.1	Client is assisted in bathing or skin care when necessary by considering the weather and body condition
	4.2	Client is assisted in changing dress comfortably and grooming according to her/his wish
	4.3	Unit of the client is prepared to provide comfort, rest and sleep
5) Attend to fomentation and therapeutic massage	5.1	Areas to be fomented/ therapeutic massage are identified as per given instructions
	5.2	Equipment and material are collected according to standard procedure
	5.3	Fomentation/ therapeutic massage is given to the identified area of the body while maintaining privacy
	5.4	Used equipment are cleaned and disinfected as per health and organizational procedure
	5.5	Changes are observed in the fomented/ massaged areas, recorded and reported to the authorized clients
C) Attend offering the re		
6) Attend elimination	6.1	Client is assisted in elimination of urine or stool according to the condition and standard nursing procedure
	6.2	Client is made clean and comfortable according to his /her requirement.
	6.3	Changes are observed, recorded and reported to the authorized client
7) Care of terminally ill client	7.1	Types of illness is identified referring to relevant document / information given by an authorized client
	7.2	Physical and mental condition of the client is assessed by observing and discussing with the client
	7.3	Client's needs are attended to as required
	7.4	Necessary records are maintained as required
Care of dying client and death	8.1	Signs and symptoms of approaching death are identified by observing changes of the vital signs
	8.2	Abnormalities of the client are recorded and reported to the authorized client
	8.3	Physical and mental comfort measures-are provided as appropriate

- **8.4** *Client wishes* are attended as requested
- **8.5** Dead body is prepared according to standard procedure after declaration of death
- **8.6** Identification tag is tied on the dead body
- **8.7** Valuable is recorded and handed over to the authorized client

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.

Elaboration

Client wishes may include: religious activities, legal activities, visit of friends and relatives.

Critical Aspects

- Avoid nosocomial infections / accidents / environmental hazards
- Prevent complications / joint stiffness / muscle wasting / bed sores
- Needs of dying client

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment

- Comfortable and adjustable bed with rails
- Sucker
- Sputum mugs
- · Walking aids
- Cutlery and crockery
- Comfortable chair
- Forceps
- Bed pans
- Urinals
- Thermometer
- TV/ radio
- Scissors
- Tray
- Oxygen cylinder with flow meter and equipment
- Blood pressure apparatus
- Water or air mattresses
- Wheel chair
- Facilities bath room / toilet
- Measuring cup
- Oil/cream
- Fomentation devices/ Massage equipment
- Identification tag
- Mackintosh and cover
- Face towel
- Soft bed linen
- Pillows as required
- Gloves
- Tissues
- Containers for specimen
- Powerful light and ventilation
- Floor mats
- Bed linen, blankets
- Swabs
- Cotton
- Sterile dressing pack
- Normal saline
- Antiseptic bandages
- Plaster
- Urine strips
- Water / soap
- Foot rest and steps
- Antiseptic lotion
- Cliental Protective Equipment

documents/References/Standards

- Bed Head Ticket
- Nurse's notes
- Temperature charts
- Fluid balance chart
- Drugs chart
- Client 's records
- Client reports
- Observation chart
- Standard nursing procedures
- Organizational rules and regulations

Knowledge

- Aging process
- Terminally ill /dying client
- Cross infections
- Hot and cold applications
- Sterilization / sterile techniques
- · Collecting specimens and urine testing
- Knowledge on elimination
- Oxygen supply instruments
- First aid and bandaging
- Moving and lifting of the client
- Knowledge of active passive exercises
- Body mechanics
- Cultural differences
- Knowledge of legal aspects of property belonging to the dying and dead client (last will)
- Signs and symptoms of dying client
- Indwelling catheter
- Massage techniques
- Preparation of dead body
- Inquest, postmortem, death declaration and death certification
- handing over of property
- Inform relations
- Occupational Health and Safety practices

- Collect equipment
- Prevent cross infection
- Identify the changes of the client due to aging process
- Attend to needs of the client
- Maintain nurse -client relationship
- Attend to elimination
- Collect and dispatch specimen
- Catheter and perineal care
- Give first aid
- Use techniques in lifting and moving client
- Read and understand instructions given by a medical officer
- Apply hot and cold application
- Assess client
- Clean and keep client comfortably
- Follow sterile techniques
- Fomentation hot/ cold
- Massage techniques
- Cliental Protective Equipment
- Safe handling of oxygen cylinders
- Prepare dead body

	Care of post-natal mother and newborn baby		
Competency Unit:			
Unit Descriptor :	This unit covers the competencies required to give health care to both mother and baby, identify post-natal complication of mother, problems of baby, report authorized clientele by following instructions and ensuring safety of both mother and baby		
Unit Code:	N85S0	002U11	
Element/Task	Perfor	mance Criteria/Standards	
Give post-natal care for mother	1.1	Normal bleeding is ensured by checking number of sanitary pads used and abnormalities reported	
	1.2	Normal condition of the mother is ensured by checking blood pressure, pulse, respiration and temperature using appropriate equipment according to the standard procedure	
	1.3	Colour and the necessary information of vaginal discharge are observed and recorded as per nursing procedure	
	1.4	Elimination is attended according to the condition of the mother as per standard procedure	
	1.5	Perineal care is attended according to the standard swabbing procedure, episiotomy or surgical wound is observed for healing/ infection	
	1.6 Cliental hygiene is attended according to the condition of the mother as per body bath procedure		
	1.7	Nutritional needs of the mother are attended according to the standard diet.	
	1.8 Medications are given as prescribed.		
	1.9	Ambulation is done according to the condition of the mother as per standard procedure.	
	1.10	Mother is kept in good mental condition by having good rapport with her and family members	
	1.11	Abnormal behavior of the mother is observed to identified puerperal psychosis	
	1.12	Mother is encouraged to do post- natal exercises by providing relevant documents/ leaflets and necessary information	
	1.13	Authorized client is informed of any abnormality observed and instructions followed where necessary	

Encourage breast feeding	2.1	Mother is assisted and breast prepared for feeding as instructed
	2.2	Mother is educated about the "colostrum", value of breast feeding and "on demand" feeding by having good communication with her
	2.3	Mother is assisted and educated about burping and positioning the baby after feeding
	2.4	Mother is assisted to relieve breast engorgement where necessary
	2.5	Any abnormalities of the breast and nipple are identified and reported to authorized client and instructions followed
3) Give new born care	3.1	Hands are washed and dried before handling baby as per universal precautions
	3.2	Baby is observed for colour, cry, respiration, sucking, elimination, muscle activities, cord and any abnormalities identified comparing with normal condition.
	3.3	Baby is kept warm by ensuring the safety
	3.4	Authorized client is informed if any abnormalities found and instructions followed.
	3.5	Infections are prevented by dressing baby with washed and ironed clothes
	3.6	Baby bath is attended according to the standard procedure
	3.7	Cord is kept clean and dry
	3.8	Nappies are changed according to the standard procedure
	3.9	Accidents and infections are avoided by ensuring a safe environment
1) 5		
4) Prevent infections	4.1	Infections of mother and baby are prevented by following universal precautions.
	4.2	Identified infections are recorded and reported to authorized clients

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.

This unit may include

Mother after normal delivery and normal baby, mother after caesarian section, instrumental delivery

The following equipment and material may be used for this:

For mother

- Basin
- Bed with bed linen
- Sputum mug
- Nail cutters
- Pail for dirty water
- Tray, cups, saucers
- Furniture require to unit
- Bed linen
- Sanitary pads
- Spoon, fork, flask
- Cotton swabs / forceps in a bowl

For baby

- Cream / cologne/oil
- Surgical spirits
- Hot / cold water
- Sterile cotton swabs
- Baby clothes
- Basin, soap, pail, bowl,
- Nappies, baby blanket

- Soap
- Sponge bags
- Covering clothes
- Paper bags / waste bin
- Tooth paste / tooth brush
- Comb
- Mackintosh and covers
- PPE
- Pads & taper
- Clean clothes
- Hand wash
- Wrapper, towel, oil
- · Comb/ brush, glass
- Hand towels / disposable tissue
- Baby mackintosh & cover
- Cot and cot linen
- Baby net

The following documents may be used in this unit

- Temperature chart
- Nurse's notes
- Observation chart
- Feeding chart
- Intake output chart

The performance of this unit is expected to be carried out to the following standards

- Universal precautions
- National/ International standard nursing procedure of maternal and child care

Critical Aspects

- Prevent hypothermia / infections
- Exclusive breast feeding
- Prevent accidents that can happen to new born baby
- Prevent milk aspiration of new born baby
- Observe for post-partum hemorrhage
- Identify puerperal psychosis
- Prevent breast engorgement
- Identify any physiological changes of the new born baby and mother

Knowledge

- New born baby
- Baby bath procedure
- Dressing baby
- Cord care
- Wrapping and restraining
- Observation of baby and mother for abnormal conditions
- Emergency situations
- Equipment used for special procedure
- Post-natal exercises
- Nature of Lochia
- Signs of post-partum hemorrhage
- Exclusive breast feeding / Lactation
- National Immunization programme
- Neonatal jaundice
- Reflexes of new born baby
- Aseptic techniques
- Identify stress, anxiety and psychological changes of mother
- Clinic follow up
- Body mechanism
- Episiotomy care
- Perineal care
- Maintain good rapport
- Occupational Health and Safety practices

- Give baby bath
- Changing of nappies
- Collect equipment
- Cord care
- Dressing nappies and baby clothes
- Burping the baby
- Wrapping the baby
- Apply "mummy's" restraint
- Positioning mother for breast feeding
- Provide comfort measures
- Check vital signs of mother and baby
- Expose baby to phototherapy Identify post-partum hemorrhage and Lochia
- Maintain aseptic conditions
- Use of PPE
- Identify abnormalities of baby and mother
- Reduce stress and anxiety
- Draping the mother for perineal care
- Episiotomy care
- Breast care
- Assisting to breast feeding
- Maintain correct posture

		Care of an infant and child	
Co	empetency Unit :		
Un	it Descriptor :	This unit covers the competencies required to provide care and support to an infant and child ages from one month to five years.	
Un	it Code:	N85S	002U12
Ele	ement/Task	Perfo	mance Criteria/Standards
Assist to Identify the needs of an		1.1	Nutritional requirements are identified according to the age group
	infant and a child	1.2	Control of infections is identified in relation to hygienic practices and immunization
		1.3	Social, physical and cognitive development requirements are identified in relation to the age group
		1.4	Health and safety requirement are identified in the environment
		1.5	Daily living activities are identified according to the standard procedure
		1.6	Distressed situation is identified in daily activities
2)	Assist to Plan the activities for an infant and a child	2.1	Daily routines of the infant, child are planned as per instruction given by mother/family/relevant authority
		2.2	Environment of the infant child is planned in order to facilitate positive environment for the social, physical and cognitive development.
		2.3	Proper infection control techniques are planned according to the universal infection control method
3)	Assist to Implement activities for an infant and a child	3.1	Nutritional requirement of the infant/child is fulfilled according to the nutritional advices following hygienic techniques and gradual training to introduce adult food from infant including weaning
		3.2	Environmental adjustments are made to facilitate safe and healthy environment
		3.3	Suitable activities are performed to facilitate social and cognitive development
		3.4	Daily living activities of the infant/child are performed according to the <i>standard procedures</i>

	3.5	Distress situation of the infant /child is handled by using appropriate methods
4) Assist to Evaluate the implemented activities for an infant and a child	4.1 4.2	Family feedback sheet is used to evaluate own work Advice and assistant is sought from superiors to evaluate own work

Competencies in this unit may be performed in a home or in a health institute/care center where infant/ child care is given. Infant/child ages from one month to five years

Elaboration of terms in performance criteria

Social, physical and cognitive may include: Play and sports activities, social skills, preschool activities,

Daily living activities may include: Washing, bathing, brushing, combing, sleeping, dressing, elimination of urine and stool

Distressed situation may include:

- Excessive Crying
- Appearing withdrawn
- Squirming
- Lack of eye contact
- Sleeping difficulties
- Whining
- Nervous tics (e.g. cough)
- Hunger
- Tiredness
- Anxiety
- · Demanding, arguing,

- Not playing or not playing creatively
- Repetitive display of trauma
- Aggression
- Regression
- Speech difficulties (e.g. stuttering)
- Boredom
- Clinging behavior
- Discomfort
- Fear
- Temper tantrum,
- Breath holding attacks,

Suitable activities may include:

- Imitating babies' vocalizations
- Talking
- Singing
- Laughing
- Rhymes
- Finger Games
- Holding
- Dancing
- Gentle Bouncing
- Substituting Activities
- Playing
- Distraction to an activity
- Cuddles, comfort
- Listening, talking with the infant or toddler quietly
- Use of transition object
- · Preschool activities
- Sports activities

Standard procedures may include: Following of proper sequence of event, making child gradually independent

Appropriate methods may include: Imitating baby's vocalizations, talking, singing, laughing, using rhymes, holding, dancing, gentle bouncing, substituting activities, playing, distraction, cuddling, listing, use of transition objects

Critical Aspects

- Responded to distressed infants and child in a relaxed and calm manner.
- Check vital signs
- Prevent child abuse
- Identify mile stones delays

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment

- Infants cot/bed
- Infant carrier
- Bassinet
- Baby's Layettes
- Thermometer
- Sterilizer
- Bibs
- Toys for the cot
- Story Books
- Preschool activities tools
- Blanket/comforters
- Stroller
- Bathing paraphernalia (e.g. Baby bath tub, baby toiletries, towel, etc.)
- Thermometer Tray
- Infant's/Toddler's Formula
- Nursery Rhymes
- Infants/Toddlers Toys
- · Feeding chair
- PPE

documents/References/Standards

- Infant/child notes
- Organizational procedure
- Check list
- Immunization schedule
- Relevant International standards and procedures
- Child Health Developmental Records (CHDR)

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Dependent Nature of Infants/child
- Bathing Paraphernalia and ; Types, Uses, Specification
- Procedures in Taking Vital Signs
- · Basic infant /child care
- Procedures in bathing and dressing/undressing of infants
- Infant diet and weaning foods
- Procedures in feeding
- Types and uses of clothes and underwear
- Specifications and uses of non-slip rubber mat
- Hand Washing Procedures
- Specifications of different types of Thermometer

- Communication Skills (listening, speaking, verbal and non-verbal)
- Empathy
- Intercliental Skills
- Creative Skills
- Ability to establish bonding with infant/child
- Basic measurement
- Food preparation
- Bathing techniques
- Feeding skills
- Play skills

- Social etiquettes including table etiquettes
- Signs of infants/child distress
- Child abuse
- Food preparation
- Tender loving care techniques
- Knowledge on infant and child nutrition
- CHDR
- Awareness on basic child psychology

Commeter and helt		assistance for a client with special needs including levelopmental disorders
Competency Unit :		
Unit Descriptor :	This unit covers the competencies required in providing support and assistance to maintain quality care for a client with special needs including non-developmental disorders to be able to enhance their abilities to communicate and be independent; responding to the physical, medical, health and safety, cliental care requirements of a client with differently able.	
Unit Code:	N85S	002U13
Element/Task	Perfo	rmance Criteria/Standards
Identify the needs of the client	1.1	Special needs nature of the client identified with special reference to type of the special needs, privacy, confidentiality and without prejudice
	1.2	Condition of the client identified by referring <i>medical documents</i> , <i>environmental impact</i> and nutritional needs
	1.3	Requirements of the client identified by inquiring client and relatives/ friends
	1.4	Medical complaints of the client identified by listening/observing
	1.5	Educational needs of the client identified where relevant according to the instructions/ IEP (Individualized Educational Programme)
2. Assist the client	2.1	Physical needs of the client fulfilled by assisting in relation to <i>Activities of Daily Living</i> (ADL) and <i>Instrumental Activities of Daily Living</i> (IADL)
	2.2	Social and recreational needs of the client fulfilled by assisting, as per PC 1.1 and PC 1.2
	2.3	Cultural and spiritual needs of the client fulfilled by assisting, as per PC 1.1 and PC 1.2
	2.4	Educational needs of the client fulfilled by assisting as per PC 1.5
	2.5	Vocational training of the client assisted where relevant according to the instructions

3. Minimize the dependency	3.1	Client motivated to overcome the physical disabilities in relation to ADL, IADL and recreational activities according to the instructions
	3.2	Client motivated to overcome the psychological requirements in relation to social, cultural and spiritual activities according to the instructions
	3.3	Client motivated to fulfill the requirements independently in relation to educational, occupational therapy, vocational training and rehabilitation where relevant according to the instructions
4. Evaluate the performance	4.1	Self-evaluation performed by using the check lists and other relevant records
	4.2	Outcome of the performance evaluated by using client's response from evaluation sheet/self-administered or/and interviewed questionnaire
	4.3	Outcome of the performance gets evaluated by an authorized client regularly

Competencies in this unit may be performed in an institute, care center where care is given to client with special needs, physical or psychological rehabilitation needs

Elaboration of terms in performance criteria

Medical documents may include: Bed Head Ticket (BHT), Diagnosis card, referral notes, investigation notes,

Environmental impact may include: Accident free environment, hazards (Physical, chemical, biological) free environment

Activities of daily living

All the self-help activities including;

- Bathing
- Dressing
- Combing
- Tooth brushing
- Toileting

- Positioning
- Eating
- Sleeping
- Resting
- Walking
- Grooming

Instrumental Activities of Daily Living

All the activities involving the use of instrument including; Use of

- Remote control
- Microwave
- Computer
- Telephone

- Switching of lights / fans
- Shaver / trimmer
- Electrical wheel chair

Critical Aspects

- Ensure safety factors
- Identify the type of need
- Attempt to make independent

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment

- Bed with side rails
- Handrails
- Commode
- Clock
- Activity Kit
- Night Light
- Assistive device (wheelchair, cane, walker and crutches)
- Feeding Utensils
- Reading Materials(novels, magazines)
- Cliental Protective Equipment

documents/References/Standards

- International standards and procedures
- Occupational therapy monitoring sheet

Knowledge

- Basic knowledge of different types of special needs and their effects on clients need
- Understanding of support requirements for client with special needs
- Specific knowledge on religious and cultural, spiritual issues
- Legislative provision in relation to the rights of client with disabilities
- Basic knowledge of human, social, psychological, cognitive and physical development
- Relevant support equipment (and technologies) and related occupational health and safety requirements regarding their use
- Impact of particular types of disability

- Intercliental skills appropriate to work with client with special needs
- Language skills and techniques
- Communication
- Team work
- Negotiation
- Use of equipment

	Care of wound	
Competency Unit :		
Unit Descriptor :		nit covers the competencies required to give care a client with a densuring safety and hygiene.
Unit Code:	N85S	002U14
Element/Task	Perfo	rmance Criteria/Standards
Identify the type of wound	1.1	Type of the wound is identified according to the instruction given/medical records available
	1.2	Nature of the wound is identified in relation to the distribution, odor and discharge, other associated factors such as swelling and redness of the area/region, fever, pain
	1.3	History of the client is noted in relation to the wound and general condition of the client
Clean the wound	2.1	Equipment and material needed are prepared/collected as per PC 1.1 and PC 1.2
	2.2	General hygiene of the client is ensured before starting wound dressing
	2.3	Previous dressing of the wound removed as per standard procedure after proper positioning and wearing PPE, by giving pain killers if necessary
	2.4	Wound inspection is performed to identify the changes in relation to worsening/ healing under the supervision of an authorized client
	2.5	Relevant authorities are informed regarding the condition if necessary
	2.6	Necessary specimen/s, if any, is collected as per standard procedure
	2.7	Wound is cleaned by using appropriate solutions as per standard procedure

Dress the wound		
Dioce the weart	3.1	Necessary application/s is/are applied according to the instructions
	3.2	Positioning of the affected part and covering of wound are carried out as per instructions.
	3.3	Proper disposal of the wastes of wound dressing is carried out according to the standard procedure
	3.4	Wound dressing area and the equipment are cleaned and stored as per standard procedure
	3.5	Relevant entries are made in the client's note and Nurse Assistant's notes as per organizational procedure
Educate the client		
Zudadio illo oliolii	4.1	Client is instructed of the after care of the wound in relation to next dressing, <i>Observe for changes</i> , proper positioning and ambulation, pain killers
	4.2	Intake of drugs, food and beverages are informed in relation to condition of the client according to the instruction
	4.3	Activities of daily living are instructed specially in relation to bathing, washing and elimination
Observe wound		
healing	5.1	Granule formation or slough formation is identified under the supervision of authorized client
	5.2	Removed dressing is observed for slough, discoloration
	5.3	Surrounding skin is observed for inflammatory changes
	5.4	Changes are documented, reported and informed to relevant authorities as per the standard operating procedures

Competencies in this unit may be performed in a hospital, in a home or residence of the client where client care is given.
Wound healing must be observed before the next dressing.

Elaboration of terms in performance criteria

Necessary application/S may include: antiseptic, antibacterial solution/ointment/cream/spray/tulle, colloid dressing, dry dressing,

Positioning may include: pressure point care, affected part elevation/rest, immobilization, traction, external fixator care

Observe for changes may include: Pain, Itching, swelling, odor, redness, dischargers,

colour change, loss of sensation, allergies, fever, and bleeding

Critical Aspects:

- Prevent cross infections
- Observe wound healing
- Application of dressing

Tools/ instruments and equipment /documents/References/Standards

Tools/ instruments and equipment	documents/References/Standards
 Adjustable bed Dressing trolley Bed side locker Foot stool / step Chair Dustbin Basin / bowl Thermometer in container Sterilize dressing packet Antiseptic, antibacterial solution/ Ointment/cream/spray/tule Hand towels Mackintosh Pillows and cases Hand lotion Tissues disinfectant/ antiseptic lotion PPE Traction, Colloid dressing Plasters, bandages, binders, Scissors 	 Nurse's notes Organizational protocol Check list Bed Head Ticket Material Safety Data Sheet International nursing guidelines of fundamental nursing Standard procedures

Knowledge

- Equipment and materials needed for client's unit
- Types of disinfectants and methods of use
- Positioning, lifting, moving, ambulating client
- Knowledge of body mechanics
- Disinfecting and mopping
- Universal precautions of infection control
- Bandaging methods
- Types of dressings
- Techniques of collecting / dispatching specimen of the wound
- Standard Procedures of wound dressing
- Wound classification
- Ethical conduct of the nurse assistant
- Wound healing process
- MSDS
- Wound types (acute/chronic)
- Clinical / General/ sharp waste/bio hazards

- Equipment handling
- Identification and collection of equipment
- Bed making procedure
- Arrangement of the dressing trolley
- Position, lift and move client
- Economical use of time, material, resources and energy
- Maintain correct posture
- Maintain nurse- client relationship
- Follow organizational procedure
- Use of Cliental Protective Equipment
- Cleaning, Dressing, Bandaging, using of splints

Unit Title	Assist in advanced nursing procedures	
Unit Descriptor :	This unit covers the competencies required to assist in the invasive	
	nursing procedure encountered in the institutional practice	
Unit Code:	N85S	002U15
Element/Task	Perfo	rmance Criteria/Standards
1. Assist for Physical		
examination of a client	1.1	Equipment and materials are collected and unit is arranged as per standard procedure
	1.2	Client is explained the procedure to obtain her/his cooperation
	1.3	Client is prepared by keeping suitable position while maintaining privacy
	1.4	Superior is assisted to do physical examination by understanding the psychological discomfort of the client
	1.5	Client is kept comfortably after physical examination while giving necessary information
	1.6	Superior is assisted for treating the client according to the instructions
Assist for Intra Venous (IV) access	2.1	Equipment and materials are collected and prepared as per standard procedure and the instruction given
	2.2	Client is explained and positioned as required
	2.3	Superior is assisted to draw blood while maintaining sterility
	2.4	Specimen is collected, labeled and dispatched as per standard procedure
	2.5	Superior is assisted for Intra venous cannulation as per standard procedure
	2.6	Superior is assisted for administering Intra venous drugs including solution as per standard procedure
	2.7	Proper disposal of the waste is carried out according to the standard procedure
	2.8	Client is observed for complaints and superior informed accordingly

	·		
3.	Assist for urinary catheterization	3.1	Equipment and materials are collected and prepared as per standard procedure
		3.2	Client is explained and positioned as required
		3.3	Superior is assisted for urinary catheterization by maintaining sterility
		3.4	Urinary catheter and bag are placed according to the nursing procedure
		3.5	Client is repositioned and the unit is rearranged by-while maintaining privacy
		3.6	Specimen is collected, labeled and dispatched where relevant as per standard procedure
		3.7	Proper disposal of the waste is carried out according to the standard procedure
		3.8	Procedure area is rearranged and the equipment cleaned & stored as per standard procedure
		3.9	Necessary entries made in the client's notes and nurse assistant's note

Competencies in this unit may be performed in a hospital or any other institute where client care is given.

Critical Aspects

• Maintain sterility of the procedure

Tools/ instruments and equipment / documents/References/Standards

Tools/ instruments and equipment

- Adjustable bed
- Dressing trolley
- Bed side locker
- Foot stool / step
- Chair
- **Dustbin**
- Basin / bowl
- Sterilize dressing packet Antiseptic, antibacterial solution/
- Cannula, syringes, needles, tourniquet, IV set,
- Local anesthesia
- Bed linen
- Hand towels
- Mackintosh
- Pillows and cases
- Hand lotion
- Tissues
- Disinfectant/ antiseptic lotion
- **PPE**
- Equipment and materials used for relevant procedures

documents/References/Standards

- Nurse's notes
- Organizational protocol
- Check list
- **BHT**
- Observation chart
- **MSDS**
- International nursing guidelines of fundamental nursing
- Standard procedures

Required Knowledge, Skills and Worker behavior/Attitude/Soft skills

Knowledge

- Equipment and materials needed for relevant procedures
- Types of disinfectants and methods of use
- Positioning, lifting, moving, ambulating client
- Knowledge of body mechanics
- Disinfecting and mopping
- Universal precautions
- Bandaging methods
- Types of dressings
- Techniques of collecting specimen
- Standard Procedures of dressing
- Ethical conduct of the nurse assistant
- Vital signs
- Relevant medical and surgical procedures

- Equipment handling
- Identification and collection of equipment
- Arrange the trolley in the order of use
- Position, lift and move client
- Economical use of time and energy
- Maintain correct posture
- Maintain nurse -client relationship
- Follow organizational procedure
- Able to prepare of disinfection and antiseptic lotion
- Use of Cliental Protective Equipment

Unit Title		Maint family	ain effective communication with the client and the
Unit Descriptor :		This unit covers the competencies required to maintain effective and trustful communication and relationships with the client ensuring the independence of both parties and high standards of the client service	
Un	it Code:	N85S002U16	
Ele	ement/Task	Perfo	rmance Criteria/Standards
1.	Identify communication needs of the client and the family	1.1	Communication needs are identified according to the conditions of the client by establishing the rapport
	ino rammy	1.2	Communication needs are identified according to the Background of the family by establishing the rapport
		1.3	Communication needs are identified in relation to various <i>medical demands</i>
2.	Plan the communication strategies for the identified needs	2.1	Needs are prioritized according to the medical conditions of the client
	identified fields	2.2	Demands of the family and the client is identified without compromising medical conditions
		2.3	Most suitable compromised position is planned for identified needs
		2.4	Education of the family and the client is planned in order to convince the prioritized needs
3.	Implement the communication strategies	3.1	Suitable communication strategies are used to achieve the best outcome
		3.2	Interpreter service is obtained ,if required
		3.3	Suitable action is taken to resolve conflicts and informed relevant authorities accordingly
		3.4	Privacy and confidentiality is maintained at all the time without prejudice
		3.5	Differences are respected actively and positively to gain the confidence of the client and the family

4. Evaluate the

implemented strategies

- **4.1** Client and family feedback sheets are used to evaluate own work
- **4.2** Advice and assistant are sought from superiors to evaluate own work

Range/Context:

Competencies in this unit may be performed in a hospital, care giving Centre, nursing home or in a home where client care is given.

Elaboration of terms in performance criteria

Conditions of the client may include: age group, disease process, socio economical state, education, cultural belief, language barriers

Background of the family may include: Family support, socio economical state, education, cultural belief, language barriers

Medical demands may include: immunization, clinic visits, nutrition plan, family planning, exercise and recreational plan, routine medical checkup, home visit by health cliental, counseling

Most suitable may include: agreed position between the client and family demand and the medical condition

Suitable communication strategies may include:

- Reflective listening
- · Respectful responding
- Development and establishment of empathy and rapport
- Active listening if culturally appropriate, recognition of non-verbal triggers
- Feedback
- Interpretation
- Setting role boundaries
- Negotiation
- Congruence of communication and action
- Follow up communication

Privacy and confidentiality may include:

- Medical conditions
- Fees
- Health fund entitlements
- Welfare entitlements
- Payment methods and records
- Public places
- Legal and ethical requirements
- Writing details (i.e. medical and consent forms)

- Conversations on the telephone
- Secure location for written records
- Offering a private location for discussions
- Information disclosed to an appropriate client consistent with one's level of responsibility
- Sexuality and sexual preference

Differences may include:

- Physical
- Cognitive/mental or intellectual issues that may impact on communication
- Cultural and ethnic
- Religious/spiritual
- Social
- Age and gender
- Language literacy and numeracy abilities
- Sexuality and sexual preference

Critical Aspects:

- Communicate efficiently with the client & client's family
- Maintain rapport with client and client family

Tools/ instruments and equipment / documents/References/Standards

Tools/ instruments and equipment

documents/References/Standards

- Telephone
- Log book

- Client's notes
- Organizational procedure
- Check list
- Client assessment notes
- Contact information
- International nursing standards and procedures

Knowledge

- Establish the relationship with the client
- Organizational policies & procedures
- Client's rights & responsibilities
- Confidentiality of information provided by clients and others
- Culture & customs
- Relevant legal aspects
- Code of ethics
- Basic communication models
- Basic knowledge on adaptive language

- Communication
- Reading and writing
- Numerical
- Interpretation
- Language
- Listening techniques
- Problem solving
- Dealing with conflict
- Team work

Section 2

CBT CURRICULUM FOR THE OCCUPATION OF

NURSE ASSITANT NVQ Level 4

Content				
Section 2	2: Curriculum	Code No.	Duration (Hrs)	
1.	Communication Skills for Workplace	N85S002BM01	30	68
2. 3.	Roles and Responsibilities of a Nurse Assistant Occupational Safety & Health	N85S002BM02 N85S002BM03	30 40	69 70-71
4.	Team Work	N85S002BM04	25	72
5.	Basic Anatomy and Physiology	N85S002M01	50	73-74
6.	Unit Preparation	N85S002M02	60	75
7.	Cliental Hygiene and Grooming	N85S002M03	70	76-77
8.	Nutritional needs and Techniques	N85S002M04	45	78-79
9. 10.	Eliminatory needs Vital Signs	N85S002M05 N85S002M06	40 70	80 81-82
11.	Medication	N85S002M07	70	83-84
12.	Care of Elderly Client	N85S002M08	60	85
13.	End of life care	N85S002M09	60	86
14.	Care of special needs	N85S002M10	40	87
15. 16.	Care of wound Assisting Advanced Nursing Procedures	N85S002M11 N85S002M12	60 50	88 89
17.	Care of Post Natal Mother & New Born Baby	N85S002M13	70	90-91
18.	Basics in First Aid	N85S002M14 Tota	30 I 900	92

Module Title	Communication Skills for Workplace
Module Code	M01
Module Type	Basic module
Duration (Hrs.)	30 Hours (Theory – 20 & Practical – 10)
Learning Outcomes	After completion of this module the trainee will be able to: - communicate ideas and information at the workplace effectively
Teaching- Learning activities	Theory: Process of communication Communication skills for nurse assistant Verbal and nonverbal communication Active listening Disseminating and sharing information Sharing work related information with other team members Work instructions Medical documents and records Ethico- legal responsibilities of a nurse assistant regarding medical records. Barriers of communication Plan of care (giving and taking over) Practical: Prepare a list of 250-300 medical and related terms with meanings Read and interpret guidelines/work instructions Role play – client & nurse assistant conversation in different situations Role plays and dramas Illustrated talk
	 Demonstrations Individual practices assignments
Forms of assessment	Formative Assessment + Summative Assessment

Module Title	Roles and Responsibilities of a Nurse Assistant
Module Code	M02
Module Type	Basic Module
Duration (Hrs)	30 Hours (Theory – 20 & Practical – 10)
Learning	After completion of this module the trainee will be able to:
Outcomes	- explain roles and responsibilities of a nurse assistant and
	- importance of the nurse assistant to the healthcare team.
Learning Content	Theory
	Scope of practice for a nurse assistant
	Differentiate between the hospital, long-term care facility, hospice, home, nursing/care home and assisted living situations
	Importance of a nurse assistant to the healthcare team.
	Responsibilities of a nurse assistant (client, employer and self)
	Chain of command in the supervision.
	The appropriate response to outside the scope
	Legal issues related practice, including liability, negligence, tort laws and incident reporting.
	Characteristics and ethical behavior of a nurse assistant
	Client's rights and how to promote a client's quality of life
	Practical
	Assignments: Give brief reports on selected above topics by self-studies
	Role play: Characteristics and ethical behavior during an interaction between a client/visitor/team member/ colleague/supervisor
Teaching- Learning activities	 Illustrated talk Show video clips Demonstrations Assignments
Forms of assessment	Formative Assessment + Summative Assessment

Module Title	Occupational Safety & Health
Module Code	M03
Module Type	Basic Module
Duration (Hrs)	40 Hours (Theory – 25 & Practical – 15)
Learning Outcomes	After completion of this module the trainee will be able to: - describe the importance of safety & health - work safely in a medical institution or similar environment
Learning Content	 Importance of Safety and general Precautions to be Rules of general safety and health including disasters Rules of safety when oxygen is in use Safety signs - for Danger, Warning, caution & cliental safety message Environment pollution Environmental rules and regulations Waste management (Types of wastes and harmful effects, Safe disposal of waste and used items) Principles of body mechanics and applications Manual handling procedures and ergonomic parameters Purpose of restraints and the safety rules Role of a nurse assistant in a restraint reduction program. Chain of infection. Asepsis (medical & surgical) Evacuation procedures and emergency protection area & fire exists Types of hazards and hazards control practices and procedures Accidents and incidents documentation Importance of periodical medical checkups Energy Conservation Electrical safety Basic life-saving measures. Practical Demonstration of hand washing Use of Personal Protective Equipment (PPE) Demonstration on First aid fire safety and use of fire extinguishers. Demonstration on safe handling and Safety disposal waste

	Arrange the place of work in most ergonomic way	
Teaching-Learning activities	 Illustrated talk Show video clips Demonstrations Assignments 	
Forms of assessment	Formative Assessment + Summative Assessment	

Module Title	Team Work	
Module Code	M04	
Duration (Hrs)	25 Hours (Theory 15, Practical – 10)	
Module Type	Basic Module	
Learning Outcomes	At the end of this module student will be able to;	
	Describe own roles and roles of team membersViews of others	
	 Communicate effectively among team members Contribute positively to the work in a team environment Give, receive and act upon feedback Identify conflicts 	
Learning Content	Theory:	
	 Simple concepts of team behavior Elementary group dynamics Basic knowledge in demographic and social structures 	
	Practical	
	 Scenario based role plays on team member's roles and responsibilities. Team building activities (trust, relationship, motivation etc) 	
Teaching-Learning activities	 Assignments Lecturers Role plays Case studies Team building activities Coaching and mentoring 	
Forms of assessment	Formative Assessment + Summative Assessment	

Module Title	Basic Anatomy and Physiology
Module Code	N85S002.03M01
Module Type	Core Module
Duration (Hrs)	50 Hours (Theory – 30 & Practical – 20)
Learning	After completion of this module the trainee will be able to:
Outcomes	- Identify the human body systems
	- Understand the importance of the body functions
Learning Content	Theory
	 Introduction
	Surface anatomy
	Organization of the human body
	Medical Terminology
	 the meaning of common prefixes, suffixes and root words.
	common abbreviations used in health care
	The Musculoskeletal System Introduction of the system (purpose and components) Injuries and common conditions related to the system
	The Urinary System
	Introduction of the system (purpose and components) Uring formation filtration and urination
	Urine formation, filtration and urination.Characteristics of normal and abnormal urine.
	Ratio of intake and output
	Common conditions such as urinary infections, urinary retentions and incontinence
	The Integumentary System
	 Introduction of the system (purpose and components)
	 Common abnormalities of the skin
	The Cardiovascular System
	Introduction of the system (purpose and components)
	the flow of blood through the cardiovascular system.
	function of arteries, veins and capillaries. The Beautiful System
	The Respiratory System
	Introduction of the system (purpose and components)Exchange of air
	Common respiratory problems
	The Endocrine System
	Introduction of the system (purpose and components)

	functions of major endocrine glands.
	Common endocrine diseases and conditions
	The Sensory System
	Introduction of the system (purpose and components)
	 Sensory organs and their functions.
	 Common sensory defects
	The Digestive System
	 Introduction of the system including accessory glands (purpose and components)
	Digestive process (ingestion, digestion and absorption and elimination)
	Common problems in digesting system
	The Nervous System
	 Introduction of the system (purpose and components)
	Common problems in nervous system
	Practical
	Prepare an Illustrate a poster / flash card to describe
	components and function in each systems
	, , , , , , , , , , , , , , , , , , ,
Teaching-	Illustrated talk
Learning	Show video clips
activities	Demonstrations
	assignments
Forms of	Formative Assessment & Summative Assessment
assessment	

Module Title	Unit Preparation
Module Code	N85S002.03M02
Module Type	Core Module
Duration (Hrs)	60 Hours (Theory – 30 & Practical –30)
Learning Outcomes	After completion of this module the trainee will be able to:
Outcomes	- Arrange the room clean, neat & pleasant.
	- Ensure all equipment cleaned and kept in due places.
	- Control spreading and growth of microorganisms
Learning Content	Theory
	 Essentials of healthy environment (Physical and social) Basic knowledge of microbiology
	Cross-infections and universal precautionsAntiseptics and disinfectants,
	Types of beds & bed linens
	Use of comfortable devices
	Principles of bed making & preparation of different types of beds Positioning lifting maying ambulating of a client.
	 Positioning, lifting, moving, ambulating of a client Working condition of equipment, tools, devices and instruments for
	unit preparation
	Practical
	Arrange the bed and unit
	(Admission, surgical, obstetrics, incontinent, pediatric, paraplegic / quadriplegic, cardiac)
	Adjustments of a bed and safe handling of client's appliances
	(e.g. urinary catheter, drain tubes, orthopedic devices etc.)
	Prepare a checklist for unit maintenance (environmental, application devices agreement etc)
Teaching-	sanitation, devices, equipment etc)
Learning	Illustrated talk Demonstrations
activities	DemonstrationsIndividual Practices
	Group practices
Forms of	Formative Assessment & Summative Assessment
assessment	

Module Title	Cliental Hygiene and Grooming
Module Code	N85S002.03M03
Module Type	Core Module
Duration (Hrs)	70 Hours (Theory – 35 & Practical – 40)
Learning Outcomes	After completion of this module the trainee will be able to: - perform skin care, oral care, follow bathing procedure and dressing and undressing, and nail and hair care
Learning Content	Theory Oral Hygiene Frequency and benefits of oral hygiene Safety procedures to use when providing oral care Brushing of teeth and denture care. The importance of examination of the oral cavity The importance of oral hygiene in unconscious clients. Disorders that indicate the need for frequent oral hygiene. The procedure for oral hygiene of the unconscious client. Skin Care Importance of skin care Skin problems resulting from immobility Prevention and treatment of pressure areas, decubitus (pressure) ulcers, pruritus and skin rashes Care of pressure points Perineal care The care of a client wearing prosthetic devices. The procedure for the application of a dry sterile dressing Bathing Procedures Bathing methods. Benefits of bathing. Safety measures used during bathing. Complete bed bath, tub bath, partial bath and shower Dressing and Undressing The importance of grooming and dressing properly. How to dress and undress clients with an affected arm and/or leg. How to apply elastic stockings Various types of clothing which could be used for a client who has difficulty in dressing and undressing due to disabilities effecting their mobility. Nail and Hair Care
	 Nail and Hair Care The importance of nail and hair care to the client. Situations when the nurse assistant would not be permitted to trim a client's nails. Nail and hair care.

	 Shaving Shampooing hair for a bedfast client Dry hair Foot care Identify abnormalities Assist for treatment
	 Attend to mouth care Attend to skin care / bed bath, Attend to perennial care Attend to hair care Give baths (Shower and tub bath) Undress and dress Attend to foot care
Teaching- Learning activities	 Illustrated talk Demonstrations Individual Practices Group practices
Forms of assessment	Formative Assessment & Summative Assessment

Module Title	Nutritional Needs and Techniques
Module Code	N85S002.03M04
Module Type	Core Module
Duration (Hrs)	40 Hours (Theory – 20 & Practical – 20)
Learning Outcomes	After completion of this module the trainee will be able to: - Feed the client ensuring needs of the client /and diet should be according to the instructions of an authorized client.
Learning Content	according to the instructions of an authorized client. Theory Food guide pyramid Food preferences Knowledge of nutrients Nutrient values of commonly used food Calories value of basic foods Food hygiene Preparation and storage of foods Types of food for common diseases Positioning of client with comfort measures Hand washing procedures Method of serving meals Methods of contaminating prepared food. Caring, cleaning, maintaining & placing of equipment Invalid cookery, Procedure of Naso gastric serving & feeding. Caring cutlery and crockery equipment Maintain intake-output charts and client's records Common observations (Feeding) Disposing wastes Various special diets (including semi-solids, fluids) that may be ordered for clients and give an example of a diagnosis that may require each of these diets. Dietary practices which are significant to various religion or ethnic groups. preparing, serving and feeding of the client who requires assistance. Observations of the client receiving tube feedings.
	Practical
	Feed client

	 Attend to tube feeding (This doesn't include the insertion of naso gastric tube) Record food consumption Prepare invalid food
Teaching- Learning activities	 Illustrated talk Demonstrations Individual Practices Group practices
Forms of assessment	Formative Assessment & Summative Assessment

Module Title	Eliminatory needs of the client
Module Code	N85S002.03M05
Module Type	Core Module
Duration (Hrs)	45 Hours (Theory –30 & Practical –15)
Learning Outcomes	After completion of this module the trainee will be able to:
	- Assist in eliminatory needs of the client
Learning Content	Theory
	Introduction of eliminatory needs
	Eliminatory problems and management
	Devices use in elimination (catheters, bed pans, urinals,
	incontinent pads stroma bags etc)
	Care of client with various devices
	Practical
	Assist in eliminatory needs
	Urinal and Bed Pan
	Perineal/genital care
	Catheter Care
	Insertion of Enema, Suppository and bowel cleansers
Teaching-	
Learning	a Illustrated talk
activities	Illustrated talk Demonstrations
	DemonstrationsSimulation
	Individual Practices
Forms of	Individual Practices Formative Assessment & Summative Assessment
assessment	romative Assessment α Summative Assessment

Module Title	Vital Signs
Module Code	N85S002.03M06
Module Type	Core Module
Duration (Hrs)	70 Hours (Theory – 40 & Practical – 30)
Learning Outcomes	After completion of this module the trainee will be able to: Observe and measure vital signs Monitor and maintain records of vital signs Identify and report abnormalities Demonstrate using of measuring tools and equipment Describe the handling of relevant tools and equipment
Learning Content	Theory Vital signs & abnormalities Heat production and heat loss Tools and equipment used for measuring vital signs Toypes of thermometers (analog, digital etc.) Types of blood pressure apparatus (analog, digital etc.) Types of pain measuring scales/ tools Other instruments (e.g. cardiac monitor and pulse oximeter) Methods of measuring vital signs Respiration Pain Temperature Pulse Blood pressure Documentation Types of documents and charts Concise writing Reporting Cleaning and storing Cleaning & disinfection Nursing interventions for abnormalities Care of the client with fever/ hypothermia, breathing abnormalities, pressure abnormalities and pain)

	 Practical Measuring temperature(oral, axillary, rectal, tympanic, membrane and others) Measuring of pulse and respiration Measuring blood pressure, Assessment of pain Tepid bath Cold / hot application Clearances of airway and applying airways Airway suctioning Steam inhalation, Nebulization ,Oxygen inhalation (can be covered under the module of medication)
Teaching- Learning activities	 Illustrated talk Demonstrations Simulation Individual Practices Group practices
Forms of assessment	Formative Assessment & Summative Assessment

Module Title	Medication
Module Code	N85S002.03M07
Module Type	Core Module
Duration (Hrs)	70 Hours (Theory – 40 & Practical – 30)
Learning Outcomes	After completion of this module the trainee will be able to:
	- give medication while following five rights
Learning Content	Theory
	Medical terms / abbreviations,Classification of Drugs
	Trade names and generic names of the drugs,
	Effects / Side effects and contra indications of drugs
	Reading and interpretation of drug prescription/ BHT(Bed Head Ticket)
	Methods of administrating drugs
	 Local application
	Oral and sublingual medication
	Rectal and vaginal applications Subsutance injections
	Subcutaneous injectionsEye/ Ear/ Nose instillation
	Nebulization / aerosol therapy
	Oxygen inhalation
	Steam inhalation
	Preparation of drugs (ex: syrup, crushing, measuring)
	 Safety measures of administrating drugs(5 rights and 3 checking) Documentation and drug chart
	Care of equipment and storage
	Safe keeping of drugs
	Method of disposing and discarding drugs and sharp waste
	Practical
	Oral and sublingual medication
	subcutaneous injection (insulin)
	Instillation of eye drops ,ear drops, nasal drops
	Application of ointments, cream, powder, oil, lotions, patches, gel, spray
	Warm and moist application (massage and fomentation)
	Insertion of suppositories, pessaries
	Nebulization

	Inhalation
Teaching- Learning activities	 Illustrated talk Demonstrations Simulation Individual Practices Group practices
Forms of assessment	Formative Assessment & Summative Assessment

Module Title	Care of Elderly Client		
Module Code	N85S002.03M08		
Module Type	Core Module		
Duration (Hrs)	30 Hours (Theory – 06 & Practical – 24)		
Learning Outcomes Learning Content	After completion of this module the trainee will be able to: Describe ageing population in Sri Lanka and the globe Identify the ageing process Identify Physical and mental changes and problems of an elderly client Assist in adjustment and adaptation of ageing Support to enhance daily living activities/ independence Provide care of elderly client ensuring safety and comfort Theory		
	 Ageing population in Sri Lanka and the Globe Ageing process Physical and mental changes and problems/ needs of an elderly client Associated risk factors and preventive measures Communicating with an elderly client Communicating with Client's family and relatives Promoting active ageing and quality of life an elderly client Comfort and supportive devices using for elderly care. Attending to physical care (Pain, mobility, hygiene, elimination, meal and drugs, therapy) Meeting emotional and spiritual needs of an elderly client 		
Teaching- Learning activities	Practical Pressure point care and therapeutic massage Active and Passive exercises Mobilization Safe restraints Communicating with an elderly client Illustrated talk Demonstrations Simulation Role plays Individual Practices Group practices Field visit Video		
Forms of assessment	Formative Assessment & Summative Assessment		

Module Title	End of life care	
Module Code	N85S002.03M09	
Module Type	Core Module	
Duration (Hrs)	60 Hours (Theory – 35 & Practical – 25)	
Learning Outcomes	After completion of this module the trainee will be able to:- Describe the end of life care Identify signs and symptoms of life limiting situations Perform end of life care activities	
Learning Content	Theory Changes of vital signs Sign and Symptoms of pending death Relief measures in terms of physical, emotional, spiritual care Grievance handling (Client, relatives, friends) Death confirmation process Ethical and legal aspects of caring dying Client. Dead body preparation Practical Care for terminally ill & dying client Care of dead body	
Teaching- Learning activities	 Illustrated talk Demonstrations Simulation Individual Practices Group practices 	
Forms of assessment	Formative Assessment & Summative Assessment	

Module Title	Care of Special needs		
Module Code	N85S002.03M10		
Module Type	Core Module		
Duration (Hrs)	40 Hours (Theory –30 & Practical –10)		
Learning Outcomes	After completion of this module the trainee will be able to:		
Teaching- Learning activities	Theory Clients with sensory impairment Vision impairment Hearing impairment Speech impairment Clients with neuro- muscular and skeletal impairment Impaired mobility Spinal cord injuries Autism Down's syndrome Cerebral palsy/ mentally retarded Epilepsy Alzheimer's disease Dementia Parkinson syndrome Practical Stimulating exercises Communicating with sensory impaired clients Assisting for activities of daily living Safety and security measures Assist in using special devices Illustrated talk Case scenarios Demonstrations Simulation Individual Practices		
Forms of assessment	Group practices Formative Assessment & Summative Assessment		

Module Title	Care of wound	
Module Code	N85S002.03M11	
Module Type	Core Module	
Duration (Hrs)	60 Hours (Theory –30 & Practical –30)	
Learning Outcomes	After completion of this module the trainee will be able to: - Identify different types of wound - Describe the wound healing process - Apply infection control techniques - Perform wound dressing according to the instructions - Educate clients and family on wound healing	
Learning Content	Theory Definition of wound Types and causes of wound Wound healing process Inflammation and infection Prevention of wound infections Factors affecting for wound healing Types of dressings, bandages and binders Types of agents for wound dressings Complications of wounds Practical	
Teaching- Learning activities	 Observing the changes of the skin and the wound Preparation of dressings and dressing packets Applying dressing for the clean wound Applying dressings for the infected wound Assisting to remove sutures/clips and shortening & removing drainage tubes Infection control techniques Illustrated talk Demonstrations Simulation 	
Forms of assessment	 Individual Practices Group practices Formative Assessment & Summative Assessment 	

Module Title	Assisting Advanced Nursing Procedures	
Module Code	N85S002.03M12	
Module Type	Core Module	
Duration (Hrs)	50 Hours (Theory –20 & Practical –30)	
Learning Outcomes	After completion of this module the trainee will be able to: - List out the advanced nursing procedures - Assist in physical examination - Assist to perform advanced nursing procedures - Maintain observation of pre, intra and post procedures - Explain briefly on abnormalities and malfunctions	
Learning Content	 Theory Types of advanced nursing procedures Physical and mental pre preparation while ensuring safety and comfort Initial and continuous physical examination Intra – venous access for investigation and therapeutic purpose Urinary catheterization Insertion of naso-gastric tube 	
Teaching-	Practical Skills for assisting advanced procedures while maintaining sterility Tray setting and arrange packets Illustrated talk	
Learning activities	 Demonstrations Simulation Individual Practices Group practices 	
Forms of assessment	Formative Assessment & Summative Assessment	

Module Title	Care of Post Natal Mother & New Born Baby	
Module Code	N85S002.03M13	
Module Type	Core Module	
Duration (Hrs)	70 Hours (Theory – 30 & Practical – 40)	
Learning Outcomes	After completion of this module the trainee will be able to: - Identify needs and problems of a post-natal mother - Attend to care of a post-natal mother's needs - Identify needs and problems of a new born baby - Attend to care of a new born baby	
Learning Content	Theory Procedure of baby bath Procedure of breast feeding, Umbilical care, Uncomfortable situations of the baby Precautions for aspirations Perineal/ Episiotomy care Cliental hygiene Reflexes of new born Mother & baby bonding Breast feeding Complications of breast Identify physical comfort Skin rashes Abnormal vomiting Discharges of eye, ear, nose Cleanliness of cot & Mosquito net Abnormal changes, fits, vomiting, dehydration, crying No. of times passing urine & stools per day Warm of new born Less handling, Sleep, Bathing Formula Feeding, weaning food, Limit visitors, Identify infections Ways of controlling spreading of infections Disposal of waste Puerile hygiene Complications of puerperium Nutrition of lactating mother Physical and mental comfort of postnatal mother	
	Identify post- partum complications	

Teaching- Learning activities	 Provide physical and mental comfort of mother Prevent infections of mother Observe changes of infant Assist breast feeding Provide physical comfort for new born Prevent infections of new born Assist to do post- natal exercises Illustrated talk Demonstrations Individual Practices Group practices
Forms of assessment	Formative Assessment & Summative Assessment

Module Title	Provide Basic First Aid	
Module Code	N85S002.03M14	
Module Type	Core Module	
Duration (Hrs)	30 Hours (Theory – 10 & Practical – 20)	
Learning	After completion of this module the trainee will be able to:	
Outcomes	- provide Basic First aid	
Learning Content Theory		
	 Basic knowledge of stop bleeding. Basic knowledge of fractures. Basic knowledge of applying bandage. Basic knowledge of preparing splints. Basic knowledge of burns. Prevention of complications of burns. Taking action to electric shock. Artificial respiration. Drowning. Basic knowledge for animal bites & stings. First aid treatment for faints. First aid for poisoning. Types of poisons, Choking, effects of foreign bodies. 	
	 Practical Stop Bleeding Apply Splint and Bandage Give First Aid for Burns Give First Aid for Electric Shock Give First Aid for Drowning Give First Aid for bites & stings Give First Aid for poisoning Provide Artificial respiration Dress wound 	
Teaching- Learning activities	 Illustrated talk Demonstrations Individual Practices Group practice 	
Forms of assessment	Formative Assessment & Summative Assessment	

Assessment Guide:

Forms of assessment

Assessment shall be based on evidence collected through workplace performance or a combination of evidence collected through training and work place performance.

Assessment context

This unit may be assessed on the job, off the job or a combination of on and off the job. The unit may be assessed individually.

Assessment conditions

The candidate will have access to:

- all tools, equipment, material and documentation required.

The candidate will be permitted to refer the following documents:

- material, paint and polish safety data sheets
- health and safety regulations
- product data sheet (PDS)
- company specification sheets
- manufacturer's instructional brochures and manuals

The candidate will be required to:

- orally or by other methods of communication, answer questions asked by the assessor.
 - identify superiors and clients who can be approached for the collection of competency evidence where appropriate.
 - present evidence of credit for any off job training related to this unit.

Assessors must be satisfied that the candidate can competently and consistently perform all elements of the unit as specified by the criteria and that he/she possess the required underpinning knowledge.

Special notes

During assessment, the candidate will;

- demonstrate safe work practices at all times
- communicate information about processes, events or tasks being undertaken to ensure a safe and efficient working environment.
- perform all tasks in accordance with standard operating procedures.
- perform all tasks to specifications

- take responsibility for the accuracy of his/her own work
- use accepted methods for calculation.

Tasks involved will be completed within reasonable time frames relating to typical workplace activities.

Resources required for assessment

These include material, tools and equipment listed within this unit

Tools, material and equipment require for the training program (Approximately 15 students)

No	Items	Quantity
1.	Ampules	As required
2.	Apron	15
3.	Baby cot	1
4.	Bandages	24 pack
5.	Bath thermometer	3
6.	Bed pans	3
7.	Blank papers	100
8.	Bowl	10
9.	BP apparatus	6
10.	Clean dressings of cord care	15
11.	Clean linen	Bed sheets-30,draw sheets- 15, pillow cases- 30)
12.	Clean nappies	15
13.	Clean towels	15
14.	Comfortable adjustable bed with rails	2 beds
15.	Mackintosh and cover	15
16.	Comfortable chair	3
17.	Containers for specimen	As required
18.	Cotton pad	Cotton role
19.	Cotton swabs	100
20.	Cover	3
21.	Cutlery and cookery	As required
22.	Disinfectants	100ml bottle

23.	Disposable Needles	1 box
24.	Disposable syringes	1 box
25.	Drinking water bottle	15
26.	Equipment of bathing	15 set
27.	Electronic cattle	1
28.	Face masks	3
29.	Face towel	5
30.	Forceps	2
31.	Fermentation pad	15
32.	Gauze	1 roll
33.	Glass of water	5
34.	Gloves	Box with 100 gloves
35.	Hot drink	Flask
36.	Hot water bottle	3
37.	Ice cubes or cool water	As required
38.	Injection vials	As required
39.	Kidney tray	5
40.	Mackintosh and cover	15
41.	Mask	30
42.	Measuring cups / glass,	3
43.	Medication wringers	1
44.	Medicine glass / tray	5
45.	Mosquito net	1
46.	Motar & pestle	1
47.	Nebulizer	1
48.	Normal Saline	3
49.	Oxygen cylinder	1 apparatus

1	•	100
51.	Pillows as required	4
52.	Powerful light and ventilation	3
53.	Sanitary pads	3 packets
54.	Saucepan & lid	1
55.	Saucer	5
56.	Scissor	5
57.	Serviette	Cloth serviette- 15,disposable serviette- 1 packet
58.	Small spoon	15
59.	Sputum mugs	5
60.	Stainless Steel cup with a lid	5
61.	Steam inhaler	3
62.	Sterile dressing pack	5
63.	Stethoscope	3
64.	Sticking plaster	1 roll
65.	Sucker	1
66.	Surgical spirit	1 bottle
67.	teat pippet	3
68.	Thermometer(rectal, oral, infant digital)	2
69.	Tissues	1 roll
70.	Torch	3
71.	Tray	10
72.	Urinals	3
73.	Urine strips	10
74.	Vaseline	1 bottle
75.	Walking aids	1

76.	Water / soap	Soap with box
77.	Water proof	5
78.	Wrist watch	15
79.	Cutting board	1
80.	Hot plate	1
81.	Kitchen apron	15
82.	Kitchen masks	15
83.	Kitchen gloves	1 box
84.	Food preparation items	1 set