



Occupational Standards for Caribbean Vocational Qualifications (CVQ)

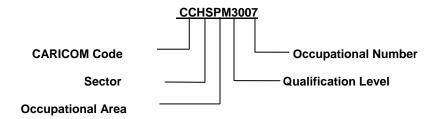
CCHSPM3007 CVQ Level 3 – Pre-Hospital Care (Paramedic)

Unit Number	Unit Title	Requirement
HS00127	Recognize and respond to a physiological or psychological human crisis (paramedic)	Mandatory
HS00128	Conduct patient assessment (paramedic)	Mandatory
HS00129	Identify and administer approved physiological and/or psychological management technique (paramedic)	Mandatory
HS00130	Recognize and administer medication (Therapeutics)	Mandatory
HS00131	Recognize healthy body systems in a health care context (paramedic)	Mandatory
HS00104	Manage the scene of an accident or mass casualty	Mandatory
HS00105	Immobilize, remove and transport patient(s)	Mandatory
HS00106	Collect, evaluate and report patients' medical history	Mandatory
HS00107	Operate and maintain ambulance	Mandatory
HS00108	Perform duties within the medico-legal framework	Mandatory
HS00109	Apply learned models of patient care to emergency situations	Mandatory
HS00143	Apply personal development principles to health care (paramedic)	
HS00117	Contribute to a harmonious and efficient work environment	Mandatory
HS00118	Deliver and monitor quality service to customers	Mandatory
HS00126	Supervise work teams	Mandatory
CSETDP0014A	Train small groups	Mandatory
HS00125	Deliver training sessions	Mandatory
HS00132	Contribute to Occupational Safety and Health (OSH) processes	Mandatory

To obtain a Caribbean Vocational Qualification (CVQ) all Mandatory Units must be achieved.

Legend to Occupational Standard code

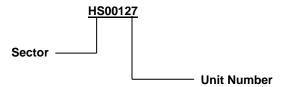
Example: CCHSPM3007



Key: <u>CC</u>- CARICOM; <u>HS</u> – Health Sector; <u>PM</u> - Pre-hospital Care (Paramedic); <u>3</u> - Level 3; <u>007</u> - Numerical sequence

Legend to Unit Code

Example: HS00127



Key: HS - Health Sector; 00127 - unit #

Country of Origin: Trinidad and Tobago

Qualification Overview

Occupational Standards can also be used to:

- Prepare job descriptions and specifications
- Determine recruitment criteria
- Appraise staff performance objectively
- Identify skill and training gaps and needs
- Conduct labour market analyses
- Develop curriculum
- Assess the effectiveness of training programmes
- Determine compensation and rewards

The benefits of acquiring the CVQ to Candidates

- Provide a basis for articulation and accreditation
- Provides a broad-based preparation for employment
- Is an alternative route to further / higher education
- Complements and has parallel standing with academic qualifications
- Provides enhanced employability and higher earning potential
- Facilitates an apprenticeship with actual work experience
- Equips candidates with the knowledge, skills and attitudes for the workplace
- Past work experience and skills can count towards achieving the CVQ
- Allows for continuity whereby if a candidate cannot complete the CVQ at a centre or school, they can continue at another approved centre
- CVQ's are recognized qualifications and facilitates free movement of labour throughout CARICOM

The benefits of the CVQ to Employers

- Provides a larger cadre of skilled employees/candidates to choose from
- Reduces cost of recruiting and selecting the ideal job candidate
- Reduces cost for training workers
- Ensures higher levels of productivity

The benefits of the CVQ to the Caribbean region:

- Produces a higher skilled workforce that is ready to adapt to ever-changing global demands
- Provides greater access for persons to achieve higher qualifications
- Contributes to the region's human resource capacity development

HS00127:

Recognize and Respond to a Physiological or Psychological Human Crisis (Paramedic)

Unit Descriptor:

This unit deals with the skills and knowledge required for responding to a human crisis. It describes the method and the work expectations associated with obtaining accurate information, documenting incoming information and responding to emergency calls, and taking approved action based on all information

ELEMENTS

PERFORMANCE CRITERIA

Candidates must be able to:

- 1 Assess incoming information Respond to a telephone or radio emergency call from a 1.1 dispatcher according to approved procedures 1.2 Complete the dispatch data section of the call record form according to approved procedures Drive ambulance to scene of emergency safely and 2 Implement correct response to 2.1 all incoming information according to stipulated rules, regulations, driving procedures and legal requirements 2.2 Read road maps in order to locate and arrive at the scene of emergency safely and in the shortest possible time 2.3 Respond safely and quickly to the address or location as directed by the radio dispatcher
 - 2.4 Inspect visually and assess the scene upon arrival to determine safety of the scene
 - 2.5 Determine the mechanism of illness or injury and the total number of patients involved in the emergency according to approved procedures
 - Determine the need for treatment priorities according to 2.6 approved procedures
 - 2.7 Radio dispatcher, special rescue team, utility services or other responding units for additional help according to approved procedures

- 2.8 Radio receiving institution, facility or on-line medical control before ambulance arrives according to approved procedures
- 2.9 Report verbally to the responding emergency medical service (EMS) unit or communication centre on the nature and extent of injuries and the number of patients involved in the emergency
- 2.10 Assess patient and treat pertinent findings according to approved procedures
- 2.11 Immobilise, remove and transport patient to the most appropriate facility using appropriate patient care technique
- 2.12 Record data on call record form according to approved procedures

RANGE STATEMENT

All range statements must be assessed.

- 1. Call record form data includes:
 - dispatch data
 - patient data
 - assessment data
 - treatment data
 - documentation of death, dying statements, homicide / suicide
 - 2. Mechanism of illness or injury includes:
 - dashboard injury
 - fall from height
 - fall on hand
 - 3. Treatment priorities include:
 - airways
 - breathing
 - circulation
 - spinal precautions

- 5. Assess scene includes:
 - objects do not pose a physical threat
 - fires do not pose an immediate threat
 - humans do not pose a physical threat
- 6. Special rescue, utility services or other responding units include:
 - fire, police, army personnel
 - paramedics
 - medical doctors
 - midwives
 - nurses
 - hospital personnel
 - allied health personnel
- 4. Emergency Medical Service communication system includes:
- Base station

- Mobile radios (transmitter/receivers)
- Portable radios (transmitter/receivers)
- Repeater/base station
- Digital radio equipment
- · Cellular telephones

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. how to evaluate safety conditions at the scene
- 2. why it is necessary to check the airway of the patient
- 3. why it is necessary to check breathing
- 4. why it is necessary to check for circulation
- 5. why it is necessary to check for other vital signs
- 6. how to take vital signs
- 7. how to perform advanced assessment and treatment procedures specific to paramedic scope of practice
- 8. how to communicate with medical control
- 9. how to communicate with receiving facility

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. Assess a variety of situations including:
 - -life-threatening situations
 - -non life-threatening situations
 - -routine situations
 - -situations that need to be referred
 - -situations where people have difficulty in communicating their needs
- b. drive an ambulance according to stipulated rules and regulations
- c. read road maps
- d. inspect and assess the scene of an emergency

- e. determine the illness or injury of the patient
- f. perform all tasks according to established procedures
- g. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

HS00128: Conduct Patient Assessment (Paramedic)

Unit Descriptor:

This unit deals with the skills and knowledge required for conducting initial (primary) and secondary patient assessment and demonstrating rapid triage skills at the paramedic level.

ELEMENTS		PER	FORMANCE CRITERIA
Candidates must be able to:			
1	Perform an initial (primary) patient assessment	1.1	Consider the need for universal precautions according to approved procedures
		1.2	Check visually for obstructions to airways according to approved procedures
		1.3	Perform chest auscultation to determine obstructions to airways and restrictions to breathing according to approved procedures
		1.4	Check blood circulation using approved instruments
		1.5	Take body temperature using approved instruments
		1.6	Check for haemorrhaging according to approved procedures
		1.7	Check visually for any disability according to approved procedures
		1.8	Record data on call record form according to approved procedures
2	Perform a secondary patient assessment	2.1	Observe patient(s) visually and identify any injuries to muscles, bones and local soft tissue structures according to approved procedures
		2.2	Identify the mechanisms of an injury according to approved procedures
		2.3	Expose areas of injury according to approved procedures
		2.4	Perform on-going patient assessment according to

- 2.5 Perform and interpret capnography readings and submit to appropriate personnel
- 2.6 Perform pulse oximetry readings and document according to approved procedures
- 2.7 Perform blood glucose testing and document according to approved procedures
- 2.8 Perform advanced airway management procedures according to organisation's approved procedures
- 2.9 Perform advanced circulatory support procedures according to organisation's approved procedures
- 2.10 Record data on call record form according to approved procedures
- 3 Demonstrate rapid triage skills for immediate transport or management of trauma patient(s)
- 3.1 Identify hazards on the accident scene according to approved procedures
- 3.2 Conduct triage, sort out and classify priorities for most immediate need of treatment according to approved procedures
- 3.3 Identify priorities based on the most critical needs for patient's survival using judgment according to approved procedures
- 3.4 Search for medical identifications as clues in providing emergency care according to approved procedures
- 3.5 Reassure patient(s) and bystanders while working in a confident and efficient manner according to approved procedures
- 3.6 Avoid misunderstandings and undue haste while working expeditiously to accomplish the task according to approved procedures
- 3.7 Record data in call record form according to approved procedures
- 4 Use electro-cardiography (ECG)
 Machine
- 4.1 Prepare the skin surface using appropriate cleaning material according to approved procedures

- 4.2 Apply electrodes to skin surface ensuring they are placed in the approved specified site
- 4.3 Record the patient's ECG using the ECG machine according to manufacturer's instructions
- 4.4 Store patient's ECG information for retrieval and obtain a print out where applicable
- 4.5 Hand over ECG information to appropriate personnel in accordance with organisation's approved personnel
- 4.6 Perform and interpret a 12 Lead ECG according to approved procedures

RANGE STATEMENT

All range statements must be assessed.

- 1. Obstructions to airways include:
- Upper airways
- Anatomical (tongue)
- Pathological (swelling)
- Foreign body
- Lower airways
- Asthma (reactive airway)
- Emphysema (airway collapse)
- Chronic bronchitis (airway inflammation)
- 2. Blood circulation includes:
- Pulse
- Blood pressure
- Skin (CTC)

- 10. Restrictions to breathing include:
 - Restrictive disorders
 - Pneumonia, pulmonary edema, near drowning
 - Restrictive disorders / traumatic
 - Pneumothorax (open and tension)
 - Haemothorax, rib fractures, flail chest, traumatic
 - Asphyxia- lack of oxygen in the blood
 - Bronchitis
 - Asthma
 - Wheezing
 - Anaphylactic reactions (Allergic)
- 11. Instruments used to check blood circulation include:
 - Blood pressure kit
 - Stethoscope
 - Pulse Oximeter
 - ECG machine and interpretation
 - Capnography
- 3. Instruments used to check body temperature include:
- Clinical thermometer
- Palm (Outer)

- 12. Check haemorrhaging includes:
 - Examination of exposure of wounds
 - Assessment of the amount of bleeding

- 4. Disability includes:
- Level of Consciousness (AVPU)
- Basic neurological assessment
- Pupillary reaction
- paralysis
- 5. Injuries to Bones include:
- fractures
- dislocations

- 6. Mechanisms of an injury include:
- Motor Vehicle Collision (MVC)
- Falls over 6 Feet
- Penetration injuries
- Blunt Injuries
- Blast /Projectiles
- Burns temperature injuries
- 7. Priorities include:
- Patients needing immediate life support
- Excessive haemorrhaging
- Chronic breathing problems

- 13. Injuries to muscles include:
 - Strains
 - Sprains
 - Torn ligaments and tendons
 - Open and closed wounds
- 14. Injuries to local soft tissues structures include:
- open and closed wounds
- abrasion
- avulsion
- amputation
- incision
- contusion
- laceration
- puncture
- crush injury
- 15. Hazards include:
 - Fire and potential fire
 - Falling objects and potential falling objects
 - Protruding objects
 - Potential violence
 - Atmospheric gas releases
 - Physical hazards
 - Traffic Hazards
- 16. Medical identifications include:
 - Identification bracelet for diabetic patient
 - Identification cards containing allergies to drugs
 - Medical Alert Bracelets /Chains /Key rings
 - Wallet Cards
 - Bystanders and Family /Friends
 - SAMPLE history
- 8. Advanced airway management includes:
- Endotracheal intubation
- Needle crycothyroidotom
- Manipulate Maghill forceps
- Needle chest decompression
- Insert rescue airways

- 9. Advanced circulatory support procedures include:
- Intravenious cannulation
- Intravenious infusion
- Basic central line infusion
- Basic phlebotomy procedures
- Manual defibrillation
- Electronic cardioversion
- External electronic cardiac pacing
- Basic cardiac monitoring
- Intramuscular injections
- Subcutaneous injections
- Intravenious medications (according to paramedic scope of practice)

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. how is information recorded
- 2. how is an Initial (Primary) Assessment conducted /performed
- 3. what is the EMT Paramedic looking for during an Initial (Primary) Assessment
- 4. how is a Secondary Assessment performed
- 5. what is the EMT-Paramedic looking for during a Secondary Assessment
- 6. how is the scene assessed for dangers
- 7. how is on-going assessment performed
- 8. what is the EMT-Paramedic looking for during an on-going assessment
- 9. how is rapid triage performed using an approved system i.e the START system
- 10. what are the advanced assessment and treatment procedures performed by a paramedic

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. perform chest auscultation
- b. perform secondary patient assessment i.e. injuries to muscles, bones and soft tissues
- c. recognise hazards on the accident scene
- d. use triage skills
- e. perform initial (primary) patient assessment used to detect and correct any immediate life threatening conditions. This will include primary survey of:
 - -danger
 - -response
 - -airway
 - -breathing
 - -circulation
- document patient and incident details correctly
- g. interpret basic ECG
- h. use capnography in pre-hospital care
- i. use medical terminology to communicate with patients, co-workers and health professionals
- j. perform all tasks according to established procedures
- k. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

HS00129:

Identify and Administer Approved Physiological and/or Psychological Management Technique (Paramedic)

Unit Descriptor:

This unit deals with the skills and knowledge required for managing medical emergencies, multiple trauma patients, cardio-vascular emergencies, neurological emergencies, obstetrical emergencies, gynaecological emergencies, paediatric emergencies, geriatric emergencies and treating a patient for emotional/mental crisis at the paramedic level.

ELEMENTS		PERFORMANCE CRITERIA			
Cand	lidates must be able to:				
1	Maintain the patency of the upper airway	1.1	Manage and mitigate environmental conditions according to standard operating procedures to ensure safety of victims, rescuers, and bystanders		
		1.2	Assess victim's condition according to approved procedures		
		1.3	Decide on and apply techniques and devices to maintain an open upper airway according to approved procedures		
		1.4	Remove foreign bodies from upper airway according to approved procedures		
2	Perform Advanced Airway Management	2.1	Manage and mitigate environmental conditions according to standard operating procedures to ensure safety of victims, rescuers, and bystanders		
		2.2	Assess victim's condition according to approved procedures		
		2.3	Decide on and apply techniques and devices to minimize breathing dysfunction according to approved procedures		
		2.4	Record data in call record form according to approved procedures		

Assess patient's condition according to approved 3 Provide care for given wounds 3.1 and environmental injuries assessment techniques and devices 3.2 Manage patient's wounds and injuries according to approved techniques based on the patient's condition 3.3 Monitor patient's condition and record vital signs according to approved procedures Record data in call record form according to approved 3.4 procedures 3.5 Provide on site information about patient to other crew members or health-care professionals according to approved procedures 3.6 Prepare patient for ambulance transportation according to approved procedures Carry out work according to approved health and safety 3.7 practices Assess patient's condition according to approved 4 Provide management for 4.1 medical emergencies assessment techniques and devices 4.2 Manage patient's medical emergency according to approved management techniques and devices based on patient's condition 4.3 Monitor patient's condition and record vital signs according to approved procedures 4.4 Complete patient's call record form according to service requirements Provide on-site information about patient to other crew 4.5 members or health-care professionals according to approved procedures Prepare patient for ambulance transportation according to 4.6 approved procedures Carry out work according to approved health and safety 4.7 practices 4.8 Provide psychological support to suicidal or potentially

dying patients according to approved procedures

5 Provide management for 5.1 Verify that the accident scene is safe and free from multiple trauma patients potential environmental hazards before entering 5.2 Assess patient's conditions using approved assessment techniques and devices for multiple trauma 5.3 Assess the mechanisms of injury according to approved procedures Manage traumatized patient's condition using approved 5.4 techniques and devices based on patient's condition 5.5 Extricate traumatized patient from vehicle according to approved procedures 5.6 Record data in patient's care report form according to service requirements 5.7 Radio, telephone for additional and health-care professionals and special rescue teams according to approved procedures Prepare on-site information about trauma patient(s) to other 5.8 crew members or health-care professionals according to approved procedures 5.9 Prepare trauma patient for ambulance transportation according to approved procedures 5.10 Provide psychological support to trauma patients, significant others and bystanders according to approved procedures Provide management for cardio-6.1 Approach patient in a calm and controlled manner 6 vascular emergencies according to approved procedures Assess patient's condition according to approved 6.2 assessment techniques and devices for cardio-vascular emergencies 6.3 Manage the cardio-vascular emergencies using approved management techniques and devices Record data in patient's care report form according to 6.4 service requirements

6.5

Radio, telephone for additional and other health-care professionals and special rescue teams according to

approved procedures

		6.6	Provide on-site information about cardio-vascular patient according to approved procedures
		6.7	Prepare cardio-vascular patient for ambulance transportation using approved techniques and devices
		6.8	Reassure patient during performance of work using approved techniques and devices
7	Provide management for neurological emergencies	7.1	Approach patient in a calm and controlled manner according to approved procedures
		7.2	Assess patient's condition using approved assessment techniques and devices for neurological emergencies
		7.3	Manage the neurological emergencies using approved techniques and devices based on patient's condition
		7.4	Record data in-patient's care report form according to service requirements
		7.5	Radio, telephone for additional and other health-care professionals and special rescue teams according to approved procedures
		7.6	Provide on-site information about patient(s) condition according to approved procedures
		7.7	Prepare patient for ambulance transportation using approved transportation techniques and devices
		7.8	Reassure patient during performance of work according to approved procedures
8	Provide management for obstetrical emergencies	8.1	Verify that the obstetrical delivery kit contains all required and approved equipment and instruments
		8.2	Complete obstetrical history survey and record information in patient's care report form according to approved procedures
		8.3	Observe patient for signs of potential newborn delivery according to approved procedures
		8.4	Prepare patient for possible newborn delivery according to approved procedures
		8.5	Deliver newborn according to approved procedures
		8.6	Maintain a warm safe environment for newborn according
		•	

			to approved procedures
		8.7	Prepare patient for rapid transport in obstetrical emergencies according to approved procedures
		8.8	Radio, telephone for additional and other health-care professionals according to approved procedures
		8.9	Provide on-site information about patient according to approved procedures
		8.10	Reassure patient during performance of work according to approved procedures
9	Provide management for gynaecological emergencies	9.1	Approach patient in a calm and careful manner according to approved procedures
		9.2	Assess patient's condition according to approved assessment techniques for gynaecological emergencies
		9.3	Manage patient's condition using approved management techniques for gynaecological emergencies
		9.4	Radio, telephone for additional and other health care professionals and special rescue teams according to approved procedures
		9.5	Collect expelled fetal tissue according to approved procedures
		9.6	Record data in-patient's care report form in accordance with service requirements
		9.7	Provide on-site information about patient's conditions according to approved procedures
		9.8	Prepare patient for ambulance transportation according to approved techniques and devices
		9.9	Reassure patient during performance of work according to approved procedures
		9.10	Provide psychological support to patient, significant others and bystanders according to approved procedures
10	Provide management for paediatric emergencies	10.1	Minimize environmental conditions to ensure the safety of rescuers, bystanders and victims according to approved procedures
		10.2	Assess patient's condition using approved assessment

techniques and devices

- 10.3 Identify and document abuse or neglect of paediatric patients according to approved procedures
- 10.4 Manage patient's condition according to approved techniques and devices and patient's condition
- 10.5 Monitor patient's condition and record vital signs according to approved procedures
- 10.6 Complete patient's report card according to standard operating procedure
- 10.7 Radio, call for additional resources or special rescue teams according to approved procedures
- 10.8 Prepare patient for ambulance vehicle transportation by securing to extrication devices according to approved procedures
- 10.9 Prepare patient for ambulance transportation according to approved techniques and devices
- 10.10 Reassure patient and significant others as work is carried out according to approved procedures
- 11 Manage a patient undergoing an emotional or possible mental crisis
- 11.1 Consider the need for additional resources when managing a patient undergoing an emotional or mental crisis
- 11.2 Assess patient's condition according to approved assessment techniques
- 11.3 Manage patient's emotional and/or mental crisis according to approved management techniques
- 11.4 Monitor patient's condition and record vital signs according to approved procedures
- 11.5 Complete patient's care report form according to service requirements
- 11.6 Provide psychological support to victims and significant others according to approved procedures
- 11.7 Provide on-site information about patient to other crew members or health-care professionals according to approved procedures

		11.8	Prepare patient for ambulance transportation according to approved techniques and devices
12	Provide care for geriatric patient	12.1	Identify and deal with common signs and symptoms associated with geriatric emergencies according to approved procedures
		12.2	Identify and deal with common medical emergencies associated with geriatric patients according to approved procedures
		12.3	Identify and deal with common trauma emergencies associated with geriatric patients according to approved procedures
		12.4	Identify and document abuse or neglect of the geriatric patient and inform approved personnel according to approved procedures
		12.5	Use approved assessment techniques for the geriatric patient according to approved procedures
		12.6	Integrate the approach, assessment, treatment and transportation of a patient according to approved procedures
		12.7	Communicate information regarding care to patient, relative or primary caregiver(s) according to approved procedures
		12.8	Confirm approach, assessment, care and transportation decisions with company approved personnel
13	Provide care for physically- challenged patient	13.1	Identify and deal with common medical emergencies associated with physically-challenged patients according to approved procedures
		13.2	Identify and deal with common trauma emergencies associated with physically-challenged patients according to approved procedures
		13.3	Identify and document abuse or neglect of the physically- challenged patient and inform approved personnel according to approved procedures
		13.4	Use approved assessment techniques for the physically- challenged patient according to approved procedures
		13.5	Integrate the approach, assessment, treatment and transportation of a patient according to approved procedures

		13.6	Communicate information to patient's parent(s) regarding care according to approved procedures
		13.7	Confirm approach, assessment, care and transportation decisions with company approved personnel
14	IV cannulation, fluid administration and management	14.1	Clean skin surface using appropriate cleaning material
		14.2	Perform cannulation of the vein using standard IV cannulation techniques
		14.3	Secure IV cannula to patient using appropriate material
		14.4	Attach equipment for fluid administration to the patient
		14.5	Administer and manage IV fluid therapy for patient

RANGE STATEMENT

All range statements must be assessed.

- 1. Environmental conditions include:
- heat, cold
- electricity
- water
- fire
- trauma
- pathogens
- violence
- 2. Techniques and devices used to maintain open upper airway include:
- Head tilt, chin lift
- Modified jaw thrust
- Chin lift
- Oropharyngeal airway devices
- Suctioning
- Oropharyngeal
- Nasopharyngeal

- 23. Victim's Conditions before maintaining patency of upper airway include:
 - Level of consciousness
 - Airway, breathing, foreign body in airway, smoke inhalation
 - Circulation
 - Heart attack, stroke
 - (Near) drowning
 - Drug overdose
 - Suffocation
 - Trauma
 - Suspected spinal injuries
 - Electric shock
 - Hypothermia
- 24. Foreign bodies include:
 - food
 - fluids (including blood)
 - tongue
 - dentures

- Combi Tubes
- Laryngeal Mask Airway (LMA)
- Endotracheal Intubation
- Nasotracheal Intubation
- Surgical airway-Needle Cricothyroidotomy
- Needle chest decompression
- Victim's Conditions before performing airway management include:
- Medical Illness
- Acute respiratory failure
- Adult respiratory disease syndrome
- Aspiration
- Chronic obstructive pulmonary disorder
- Hyperventilation syndrome
- Pleural effusion
- Pneumonia / bronchitis
- Pulmonary edema
- Pulmonary embolism
- Reactive airways disease / asthma
- Emphysema
- Traumatic Injuries
- Airway obstruction
- Aspirated foreign body
- Burns
- Diaphragmatic injuries
- Flail chest
- Hemothorax
- Penetrating injury
- Pneumothorax (simple, tension)
- Pulmonary contusion
- Toxic inhalation
- Tracheobronchial disruption
- (Near) drowning
- Pediatric Illness
- Acute respiratory failure
- Bronchiolitis
- Croup
- Cystic fibrosis
- Epiglottitis
- Sudden infant death syndrome
- Advanced circulatory support procedures include:
- Intravenious cannulation
- Intravenious infusion
- Basic central line infusion
- Basic phlebotomy procedures

25. Techniques and devices used to minimise breathing dysfunction include:

- Mouth to mouth barrier device ventilation
- Oxygen administration
- Bag-valve mask resuscitation(BVM)
- Hand held aerosol nebulizer
- Cardio-pulmonary resuscitation (CPR)
- Adjuncts
- Laryngeal Mask Airway (LMA)
- Automatic and Manual Suctioning
- Mouth to mask
- Nasal Prongs
- Non-rebreathable masks
- Combitube insertion
- Endotracheal Intubation
- Nasotracheal Intubation
- Surgical airway-Needle Cricothyroidotomy
- Mechanical ventilation
- Continuous positive airway pressure (CPAP)
- Manipulate Maghill forceps
- Needle chest decompression

- Manual defibrillation
- Electronic cardioversion
- External electronic cardiac pacing
- Basic cardiac monitoring
- Intramuscular injections
- Subcutaneous injections
- Intravenious medications (according to paramedic scope of practice)
- 5. Patient's condition for wounds and environmental injuries includes:
- Wounds
- Electrical shocks
- Heat and cold related illness
- Heat cramps, exhaustion and stroke, hypothermia
- Thermal burns
- Chemical and electrical burns
- Diving accidents
- Hazardous materials
- Embedded objects
- Airway, breathing, circulation (ABC)
- Deformities, contusions, abrasions, pain, burns, tenderness, lacerations, swelling (DCAP-BTLS)
- Tenderness, instability, crepitus (TIC)
- Signs/symptoms, allergies, medications, past history, last oral intake, events leading to incident (SAMPLE)
- Pulse, sensory, motor (PSM)
- Chief Complaint
- 6. Techniques used to manage patients' wounds and injuries include:
- Controlling haemorrhaging
- Bandaging wounds suturing and dressing
- Stabilizing and reduction of painful swollen joints and injured extremities
- Immobilizing spine
- Reducing body temperature (cooling down
- Increasing body temperature (re-warming)
- Burn dressings
- 7. Health-care professionals include:
- medical doctors

- 26. Assessment techniques and devices used for wounds and environmental injuries include:
 - Initial (primary) patient assessment
 - Secondary patient assessment
 - Patient's history
 - Equipment for injury survey
 - Baseline vital signs

- 27. Vital signs include:
 - Positive and/or negative changes in patient's condition
 - Level of consciousness utilising GCS
 - Pupillary responses
 - Respiratory rate
 - Pulse
 - · Blood pressure
 - Temperature
- 28. Health and safety practices include:
 - wearing of gloves, gowns and masks

- pathologists (forensic scientists)
- paramedics
- medical social worker
- psychologist/psychiatrist
- nurses
- 8. Patient's condition before providing basic management for medical emergencies includes:
- Ketoacidosis.
- Hypoglycemia/Hyperglycemia
- Anaphylaxis (acute allergies)
- Poisoning
- Communicable diseases (AIDS, Hepatitis)
- Assessment techniques and devices used for basic management for medical emergencies include:
- Patient's medical history, ID bands and ID Cards
- Patient's blood glucose level
- Mechanisms of injury (MOI) survey
- Nature of Illness (NOI)
- Initial (primary and secondary patient assessments
- Trends of vital signs
- Patient's oxygen saturation levels
- 10. Potential environmental hazards include:
- Fire
- Water
- Loose electrical wires
- Protruding instruments
- Falling objects and potential falling objects
- Violence
- Crime Scene
- Gas release

- disposal of swabs
- handling of bleeding patient
- washing of hands

- 29. Management techniques used to manage patient's medical emergencies include:
 - Administration of sugar containing drinks, gels, paste or IV cannulation administration and maintenance
 - Performance of chin lift and jaw thrust manoeuvres
 - Use of airway adjuncts
 - Administration of oxygen
 - Artificial ventilation with bag valve masks-100 % Oxygen
 - Artificial ventilation with portable mechanical ventilators
- 30. Multiple trauma includes:
 - Internal and external haemorrhaging
 - Fractures and dislocations (of skeletal parts)
 - Abdominal injuries
 - Head injury
 - Strains, sprains, torn ligaments and tendons (muscles)
 - Open and close wounds (contusion, laceration, puncture, crush injury, abrasion, avulsion)
 - Amputations
 - Gun Shot wounds
 - Thoracic trauma (flail chest, haemothorax, pneumothorax)
 - Burns
 - Pelvic stabilisation
- 11. Mechanisms of injury in multiple trauma

patients include:

- Head on collision
- T-Bone (lateral) collision
- Rear-end collision
- Thrown from vehicle
- Dashboard injury
- Falling directly on feet
- Fall from a height
- Fall on an outstretched hand
- Bullet (Gun shot) entry
- Knife (sharp instrument) entry
- Fire
- Electrical shocks
- Near Drowning

12. Special Rescue Teams include:

- Fire services
- Defense force
- Police
- Paramedic/EMTs
- Search and Rescue
- Disaster management

13. Cardio – vascular emergencies include:

- Abnormal Blood Pressure (low and high)
- Bleeding and Shock (hypovolemic, cardiogenic, vasodilatory, obstructive, respiratory)
- Internal Bleeding
- Heart Diseases (arteriosclerosis, ischemic chest pain, Coronary heart disease, Angina pectoris, Myocardial Infarction (heart attack)
- Heart Failure (right and left sided)
- Aneurysms (abdominal aortic and dissecting thoracic)
- Trauma to the Heart (myocardial contusion

31. Techniques and devices used to manage traumatised patient's condition include:

- External haemorrhaging control
- Opening upper airway
- Burn (thermal, chemical, electrical) treatment
- · Reducing or increasing body temperature
- Cardiopulmonary Resuscitation (CPR)
- Splints and bandages
- Suctioning of airway
- Insertion of nasopharyngeal and oropharyngeal airway
- Oxygen administration
- Use of pocket and bag-valve mask
- IV cannulation, administration and maintenance
- Endotracheal Intubation
- Nasotracheal Intubation
- Surgical airway- Needle Cricothyroidotomy
- Administration of appropriate medication
- Mechanical ventilation
- Continuous positive airway pressure (CPAP)

32. Patient's condition in cardio-vascular emergencies includes:

- Chest discomfort
- Shoulder / arm pain
- Neck / jaw pain
- Dyspnoea (difficult / laboured breathing)
- Syncope (temporary loss of consciousness)

33. Management techniques and devices used to manage cardio-vascular emergencies include:

- Reassurance, calming patient, gentle handling
- Maintenance of shock measures, maintaining body temperature
- IV cannulition, administration and maintenance
- External bleeding control
- Pressure bandage application
- Pressure devices to control external haemorrhaging

- and pericardial tamponade
- Arrhythmia (Benign, Lethal, Life threatening)
- Deep vein thrombosis
- Peripheral vascular disease
- Endocarditis
- Myocarditis
- Pericarditis
- Prolapsed mitral valve -(Regurgitation, stenosis)
- Ischemia
- Cardiomyopathies
- Atrial septal defect
- Patent ductus arteriosus
- Transposition
- Ventricular septal defect
- Aortic disruption
- Peripheral vascular disruption
- 14. Transportation techniques and devices include:
- Bio-mechanics (lifting and moving techniques)
- Extrication principles
- Safe Removal
- Immobilization techniques
- Packaging techniques
- Wheel chairs
- Stretchers
- 15. Equipment and instruments found in an obstetrical delivery kit include:
- sterile gloves
- drape sheet
- umbilical clamps
- scalpel
- blanket
- Obstetric pad and towelette
- plastic bag for placenta
- Gauze, sponge, syringe, alcohol prep and nylon ties
- Small portable suction
- 16. Obstetrical emergencies include:
- Labour and delivery complications
- Breech birth

- Cardio-pulmonary resuscitation (CPR)
- Administer medication via subcutaneous route, intramuscular, intravenous, intraosseous, endotrachael, sublingual, oral inhalation
- Medication administration- aspirin, nitroglycerine, Dextrose, Glucose, Oxygen, Bronchodilators (eg Ventolin)' Epinephrine, Atrophrine, Antihypertensive Agents, Cardiac Glycosides, Diuretics, Antidysrhythmics, Antianginal Agents, activated charcoal
- Airway adjuncts
- Automatic External Defibrillator (AED) use
- Manual Defibrillator
- Manual External Defibrillator
- Cardiac pacing

- 34. Signs of potential newborn delivery include:
 - Length of time between contractions is 2 minutes or less
 - Regular contractions that last 45-60 seconds
 - Mother needs to move her bowels
 - Mother wants to bear down and push
 - Bulging or crowning of the perineum
- 35. Management techniques for obstetrical emergencies include:
 - Reassurances, calming patient, gentleness

- Prolapsed cord
- Shoulder dystocia
- Placenta previa
- Ruptured uterus
- Abruption Placenta
- Premature rupture of membranes
- Postpartum haemorrhage
- Involuted uterus
- Retained placenta
- Pre-eclampsia
- Eclampsia
- Pregnant trauma
- Ectopic pregnancy
- Bleeding in pregnancy
- Childbirth complications
- Neonatal complications

- Appropriate positioning of patient
- Oxygen administration
- IV fluid replacement
- Administration of medication to counter post-partum hemorrhage
- Maintenance of shock measures
- Maintaining body temperatures

17. Gynaecological emergencies include:

- Abortion
- Haemorrhaging
- Pregnant trauma victim
- Rape victim
- Perineal injuries

18. Genitourinary System diseases include:

- Reproductive Disorders
- Renal / Bladder disorders
- Infection
- Obstruction
- Renal failure
- Traumatic injuries
- Traumatic Injuries
- Burns
- Lacerations / avulsions / abrasions
- Infectious and Inflammatory Illness
- Allergy / urticaria
- Infections
- Infestations

19. Resources include:

- law enforcement
- specialised psychiatric personnel
- social services
- fire services
- hazmat
- poison control

36. Management techniques for gynaecological emergencies include:

- Monitoring airway, breathing and circulation
- Oxygen administration (in case of shock)
- Elevating lower extremities
- Emotional support (rape victim and abortion victim)
- Evidence preservation (rape victim) including not treating superficial bruises or wounds

37. Health-care professionals include:

- medical doctors
- nurses
- paramedics
- psychologists/psychiatrists

38. Management techniques for gynaecological emergencies include:

- Reassurances, calming patient, gentleness
- Appropriate positioning of patient
- Oxygen administration
- IV fluid replacement
- Administration of appropriate medication
- Maintenance of shock measures
- Maintaining body temperatures

- bioterrorism
- 20. Neurologic System diseases include :
- Febrile seizures
- Generalized seizures
- Partial seizures (focal)
- Headache and Facial Pain
- Cerebrovascular Disorders
- Chronic Neurologic Disorders
- Infectious Disorders
- Traumatic Injuries
- Hematoma (epidural, subdural, subarachnoid)
- Spinal cord injury
- Pediatric (Downs syndrome, Hydrocephalus, Spina bifida)
- 21. Medical Emergencies include:

Gastrointestinal System diseases:

- Esophagus / Stomach diseases
- Liver / Gall Bladder diseases
- Pancreas diseases (Pancreatitis)
- Small / Large Bowel diseases

Musculoskeletal System diseases:

- Soft Tissue Disorders
- Amputations
- Compartment syndrome
- Contusions
- Dislocations
- Muscular dystrophies
- Sprains
- Strains
- Skeletal Fractures
- Inflammatory Disorders
- Joint abnormalities
- Osteomyelitis
- Osteoporosis

Multisystem Diseases and Injuries:

- Malignancy
- Hematologic Disorders
- Bleeding disorders
- Infectious Diseases

Bleeding control

- 39. Management techniques for neurological emergencies include:
 - Reassurances, calming patient, gentleness
 - Appropriate positioning of patient
 - Oxygen administration
 - IV fluid replacement
 - Administration of appropriate medication
 - Maintenance of shock measures
 - Maintaining body temperatures
 - Bleeding control
- 40. Management techniques for gastrointestinal emergencies include:
 - Reassurances, calming patient, gentleness
 - Appropriate positioning of patient
 - Oxygen administration
 - IV fluid replacement
 - Administration of appropriate medication
 - Maintenance of shock measures
 - Maintaining body temperatures
 - Bleeding control
- 41. Management techniques for musculoskeletal emergencies include:
 - Reassurances, calming patient, gentleness
 - Appropriate positioning of patient
 - Oxygen administration
 - IV fluid replacement
 - Administration of appropriate medication
 - Maintenance of shock measures
 - Maintaining body temperatures
 - Bleeding control
- 42. Management techniques for multisystem diseases and injuries include:

- Toxicologic Illness
- Alcohol Related disorders
- Environmental Disorders

Ears, Eyes, Nose and Throat diseases:

- Eyes Traumatic Injuries
- Eyes Medical Illness
- External, Middle and Inner Ear Disorders
- Face and Jaw Disorders
- Nasal and Sinus Disorders
- Oral and Dental Disorders
- Neck and Upper Airway Disorders

Endocrine System diseases:

- Acid-base disturbances
- Addison's disease
- Cushing's disease
- Diabetes mellitus
- Electrolyte imbalances
- Thyroid disease

22. Psychiatric Disorders include:

- Anxiety Disorders
- Acute stress disorder
- Generalized anxiety disorder
- Panic disorder
- Post-traumatic stress disorder
- Childhood Psychiatric Disorders
- Attention-deficit disorder
- Autistic disorder
- Cognitive Disorders
- Eating Disorders
- Affective Disorders
- Suicidal ideation
- Psychotic Disorders
- Delusional disorder
- Psychosocial disorders
- Antisocial disorder
- Thought disorders
- Mood disorders

- Reassurances, calming patient, gentleness
- Appropriate positioning of patient
- Oxygen administration
- IV fluid replacement
- Administration of appropriate medication
- Maintenance of shock measures
- Maintaining body temperatures
- Bleeding control

43. Management techniques for ears, eyes, nose and throat emergencies include:

- Reassurances, calming patient, gentleness
- Appropriate positioning of patient
- Oxygen administration
- IV fluid replacement
- Administration of appropriate medication
- Maintenance of shock measures
- Maintaining body temperatures
- Bleeding control

44. Management techniques for endocrine emergencies include:

- Reassurances, calming patient, gentleness
- Appropriate positioning of patient
- Oxygen administration
- IV fluid replacement
- Administration of appropriate medication
- Maintenance of shock measures
- Maintaining body temperatures

45. Management techniques for psychiatric emergencies include:

- Reassurances, calming patient, gentleness
- Appropriate positioning of patient
- Oxygen administration
- Administration of appropriate medication
- Maintaining body temperatures

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. How does the EMT-Paramedic assess the airway
- 2. What airway adjuncts can the EMT-Paramedic use
- 3. How does the EMT-Paramedic care for multiple patients
- 4. What types of proper treatment is provided to Trauma patients
- 5. How does the EMT-Paramedic identify the levels of Trauma
- 6. How does the EMT–Paramedic care for Cardio-Vascular emergencies
- 7. How does the EMT–Paramedic care for Neurological Emergencies
- 8. How does the EMT- Paramedic care for a Diabetic patient
- 9. How does the EMT- Paramedic care for Burn patients
- 10. How does the EMT- Paramedic care for Airway Emergencies
- 11. How does the EMT- Paramedic care for Obstetrical Emergencies
- 12. How does the EMT– Paramedic care for Gynaecological Emergencies
- 13. How does the EMT– Paramedic manage Paediatric Emergencies
- 14. How does the EMT- Paramedic care for Psychological patients
- 15. How does the EMT- Paramedic care for unusual situations
- 16. How does the EMT- Paramedic care for geriatric patients
- 17. How does the EMT- Paramedic care for physically-challenged patients
- 18. How does the EMT-Paramedic care for gastrointestinal patients
- 19. How does the EMT-Paramedic care for genitourinary patients
- 20. How does the EMT-Paramedic care for musculoskeletal situations
- 21 How does the EMT-Paramedic care for endocrine situations
- 22. How does the EMT-Paramedic care for patients with multisystem diseases and injuries
- 23. How does the EMT-Paramedic care for patients with ears, eyes, nose and throat diseases and injuries

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. perform basic and advanced airway management
- b. manage and deal with different types of emergencies wounds, trauma, neurological, obstetrical, gynaecological, paediatric
- c. monitor patient's conditions
- d. prepare patient for ambulance transportation
- e. demonstrate the ability to illicit relevant information e.g. patient history

- f. complete all documentation and supply all relevant patient information to receiving staff under different situations including routine, non-routine and emergency
- g. perform all tasks according to established procedures
- h. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

HS00130: Recognize and Administer Medication (Therapeutics)

Unit Descriptor: This unit deals with the skills and knowledge required for the

administration of medication according to the illness. It describes the skills required to monitor the effect of administered medication and

recognize the adverse reactions to medications.

ELEMENTS		PERFORMANCE CRITERIA		
Can	didates must be able to:			
1	Administer medications	1.1	Follow safe process for responsible medication administration according to the type of illness	
		1.2	Administer medication via different routes according to patient's condition and illness	
2	Monitor the effect of administered medication	2.1	Monitor vital signs and other parameters to determine the effect of administered medication	
		2.2	Recognize adverse reactions to administered medication and implement corrective treatment according to approved health procedures	
		2.3	Recognize deviation from normal limits and apply correct treatment measures according to approved health procedures	
		2.4	Seek medical consultation, as necessary in accordance with organizational procedures	
		2.5	Consult with medical control, as necessary in accordance with organizational procedures	

RANGE STATEMENT

All range statements must be assessed.

- 1. Routes include:
- subcutaneous
- intramuscular
- intravenous
- intraosseous
- endotracheal
- sublingual
- topical
- oral
- rectal
- inhalation

- 2. Medications include:
- those used in the treatment of the central nervous system
- the respiratory system
- affecting blood
- affecting labour, delivery and postpartum hemorrhage
- used to treat / prevent inflammatory responses and infections
- used to treat Infectious Disease
- affecting the Reproductive System
- Specific Emergency Medications
- those used in the treatment of the autonomic nervous system
- the cardiovascular system
- the gastrointestinal system
- used to treat electrolyte and substrate imbalances
- affecting Endocrine System
- used to treat poisoning and overdose
- Psychiatric Medications
- Ophthalmic Drugs

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. what are indications and contraindications of the medication
- 2. what are routes of administration of medication
- 3. what are the five rights of drug administration
- 4. how to identify the intended and adverse effects of the medication
- 5. how to counteract adverse effects of the medication
- 6. what is the duration of action of the medication

- 7. how to store and secure drugs
- 8. how to calculate drug doses
- 9. what are the techniques of medication administration
- 10. why it is important to have a reassessment of the drugs administered
- 11. how to recognize principles of pharmacology as applied to the medications

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. administer medication using various methods
- b. monitor vital signs and other parameters
- c. determine the effect of administered medication
- d. recognize adverse reactions to administered medication
- e. implement correct treatment measures to counteract adverse reactions to medication
- f. perform all tasks according to established procedures
- g. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

HS00131: Recognize Healthy Body Systems in a Health Care Context (Paramedic)

Unit Descriptor: This unit deals with the skills and knowledge required to recognize

body systems and their components and advanced knowledge of

pathology which affect the human body.

ELEMENTS

PERFORMANCE CRITERIA

Candidates must be able to:

- Apply knowledge of anatomy of the healthy human body
- 1.1 Use accepted health terminology to communicate the normal structure, function and location of the major body systems to approved personnel
- 1.2 Apply an advanced knowledge of the principles of maintaining a healthy body for approved patient care
- 1.3 Work with knowledge of the major components of each body system and their location in relation to other structures for approved patient care
- 2 Apply advanced knowledge of physiology that support healthy functioning of the body
- 2.1 Work with an advanced knowledge of how to maintain the whole body in an overall state of health
- 2.2 Work with an advanced knowledge of the relationships between body systems required to support healthy functioning
- 3 Apply advanced knowledge of pathology that affect the human body
- 3.1 Work with an advanced knowledge of pathology and diseases which affect the human body
- 3.2 Work with an advanced knowledge of the relationships between the body systems and the effect of diseases

RANGE STATEMENT

All range statements must be assessed.

- 1. Major body systems include:
- Cardiovascular system
- Respiratory system
- Musculo-skeletal system
- Endocrine system
- Nervous system
- Digestive system
- Urinary system
- Reproductive system
- Integumentary system
- The special senses smell, taste, vision, equilibrium and hearing
- Renal system
- Lymphatic system and Immune system
- 2. Pathology includes:
- Congenital
- Acquired Diseases
- Toxic
- Infection
- Vascular
- Neoplasms
- Nutritional
- Endocrine
- Immunological
- Hematological
- Metabolic
- Psychological

- 3. Support healthy functioning includes:
- Body regulation
 - Maintenance of body temperature
 - Body fluids
 - Elimination of waste
 - Maintenance of blood pressure
- Protection from infection
- Physical activity –active and passive

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. what is the structure and function of the body systems and associated components
- 2. how to maintain and recognize a healthy body system

3. how to use and articulate common health terminology related to human anatomy and

Physiology

- 4. what are the specific body parts and areas
- 5. what are the planes and sections of the body

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. apply knowledge of anatomy and physiology to health care services
- b. apply knowledge over a range of workplace applications
- c. perform all tasks according to established procedures
- d. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00104: Manage the Scene of an Accident or Mass Casualty

Unit Descriptor:

This unit deals with the skills and knowledge required for managing the scene of an accident or mass casualty. It describes the method and the work expectations associated with applying scene management techniques to organize the scene of an accident and managing the incident scene which requires ambulance services

ELEMENTS		Dri	PERFORMANCE CRITERIA		
ادادا	EMENIS	1 151	AFORMANCE CRITERIA		
Can	didates must be able to:				
1	Organise the incident scene	1.1	Confirm the ambulance vehicle has easy and safe access to incident scene according to scene management techniques		
		1.2	Classify incident according to standard operating procedures		
		1.3	Adjust resources according to requirements of the classification of the incident and patient's condition		
		1.4	Perform triage according to company approved procedures to ensure that all patients are seen and prioritised		
		1.5	Perform scene management techniques according to standard operating procedures		
		1.6	Deal with hazards at the incident scene according to the personal safety and health principles and procedures		
2	Manage the incident scene	2.1	Provide patients with optimum care required for their conditions and according to patient care procedures		
		2.2	Manage media representatives and onlookers to ensure that there is no hindrance to operations		
		2.3	Manage ambulance equipment and resources to ensure that they remain functional and available		
		2.4	Preserve forensic evidence according to company approved procedures		
		2.5	Co-operate with other approved personnel on the incident scene whilst adhering to clearly established roles and		
		2.3	there is no hindrance to operations Manage ambulance equipment and resources to ensure that they remain functional and available Preserve forensic evidence according to company approved procedures Co-operate with other approved personnel on the incident		

responsibilities

- 3 Communicate with others
- 3.1 Check communication equipment to ensure it is operating according to standard operating procedures
- 3.2 Communicate with the patient, personnel and other parties present to ensure information is clearly understood
- 3.3 Maintain confidentiality when communicating with patients and significant others according to company approved procedures

RANGE STATEMENT

All range statements must be assessed.

- 1. Standard operating procedures include:
 - type of incident
 - number of injured
 - types and severity of injuries
 - hazards present
 - spinal precautions
 - critical interventions
 - safety of EMT and patient
 - Body Substance Isolation (BSI) precaution
- 2. Classification of incidents include:
 - minor
 - major
 - mass casualties
 - disaster

- 6. Resources include:
 - human- health care personnel
 - physical extrication equipment and devices, medical equipment
 - time (management of)
 - medical equipment and transportation equipment
- 7. Classification of patient's condition includes:
 - green non-urgent
 - yellow urgent
 - red immediate
 - black deceased

- 3. Hazards include:
 - environmental (inclusive of violence and crime scene)
 - structural
 - chemical
 - electrical
 - biological
 - radiological
 - nuclear
 - explosives
- 4. Personnel includes:
 - police
 - fire Service
 - medical personnel (medical doctors, pathologists (forensic)
 - special rescue teams (search and rescue)
- 5. Communication includes:
 - verbal (direct)
 - non-verbal sign/gestures/body language
 - written
 - use of electronic media (eg. e-mail)
 - verbally using radio/ telephone/ pagers

- 8. Manage ambulance equipment and resources include:
 - staging areas for equipment established
 - staff is deployed/allocated
 - restocking and maintenance
 - unused equipment recovered
- 9. Roles and responsibilities of personnel include:
 - Incident Command System (ICS)
 - operations
 - logistics
 - planning
 - administration
 - emergency responders
 - disaster management agencies

Candidates must know and understand:

- 1. what is Incident Management
- 2. how is an accident scene managed
- 3. what equipment is required on an accident scene
- 4. how are hazards recognised
- 5. what is triage and how is it conducted
- 6. what communication is used at the accident scene

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. adhere to the principles of personal safety and health
- b. manage the scene of the incident and the media
- c. protect forensic evidence
- d. use a range of communication methods used in the workplace e.g. oral, written notes, memos, charts, diagrams, e-mail
- e. perform all tasks according to established procedures
- f. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00105: Immobilize, Remove and Transport Patient(s)

Unit Descriptor:

This unit deals with the skills and knowledge required for immobilizing, removing, and transporting patients. It describes the method and the work expectations associated with handling entrapped patients, immobilizing patients, providing aftercare for a resuscitated patient and a deceased patient.

ELEMENTS		PER	FORMANCE CRITERIA
Can	didates must be able to:		
1	Extricate or remove an entrapped patient	1.1	Evaluate scene according to safety requirements, the need for additional resources and the mechanisms of injury
		1.2	Request additional resources and assistance from special rescue team if needed
		1.3	Assess patient's condition to determine extent of injuries and the need for extrication equipment
		1.4	Move and position patient(s) according to approved lifting and moving procedures to ensure that the safety of patients and rescuers is not compromised
		1.5	Secure patient(s) to the extrication equipment while ensuring minimum risk to the patient and rescuer's safety
		1.6	Move patient(s) to ensure his/her condition(s) is (are) not compromised and his/her comfort and dignity are preserved
		1.7	Re-assess patient's condition (s) after moving and initiate further action according to company approved procedures
		1.8	Place removed patient(s) in a position according to his/her conditions
		1.9	Reassure patient(s) during performance of work according to company approved procedures
2	Immobilize a patient	2.1	Assess patient's condition using approved assessment techniques and devices

2.2 Manage patient's condition(s) using approved management techniques and devices 2.3 Treat actual and suspected fractures according to approved immobilization techniques 2.4 Lift and move patient according to approved lifting and moving techniques essential to patient care and safety 2.5 Re-assure patient(s) during execution of work according to company approved procedures 2.6 Perform work in a manner to protect the dignity of the patient(s) whilst administering care 2.7 Give on-site information to other responding crew or healthcare professionals according to company approved procedures 2.8 Transfer responsibility of patient care to other ambulance crew if necessary 3 Provide routine care during 3.1 Secure extrication devices and associated equipment to the transport transportation equipment to ensure minimum risk to patient(s) and rescuer(s) 3.2 Reassess patient(s) condition(s) after securing extrication devices and associated equipment and initiate further action if required 3.3 Position patient(s) for his/her conditions according to company approved procedures 3.4 Recognise malfunctions of intravenous catheters and infusions and implement corrective procedures 3.5 Monitor patient(s) condition(s) and record vital signs according to the condition and company approved procedures 3.6 Perform work in a manner to ensure the patient(s) dignity is protected 3.7 Maintain the comfort of the patient(s) in different road and traffic conditions according to approved driving techniques Provide aftercare for a 4.1 Obtain additional assistance if necessary to ensure resuscitated patient patient(s) chance of recovery is enhanced

- 4.2 Manage the patient's condition including continuously monitoring vital signs, cardiac output and oxygenation according to the patient's injury and approved management procedures
- 4.3 Administer patient care according to the patient's cultural, ethical and spiritual beliefs
- 4.4 Provide on-site information to the responding ambulance crew or expert rescue teams or health care professionals according to company approved procedures
- 4.5 Transfer responsibility if necessary to expert rescue teams or health care professionals on their arrival
- 5 Provide aftercare of a deceased patient
- 5.1 Administer last care for the patient according to the patient's cultural, ethical and spiritual beliefs
- 5.2 Preserve the dignity of the deceased patient according to company approved procedures
- 5.3 Complete documentation according to standard operating procedures of the health authority
- 5.4 Notify police of the death of a patient according to legal requirements
- 5.5 Counsel significant others present at scene of incident according to company approved procedures

RANGE STATEMENT

All range statements must be assessed.

- 1. Extrication equipment includes:
 - vest type
 - long board
 - short board
 - scoop stretchers

- 2. Transportation equipment includes:
 - stretchers
 - trollevs
 - wheel chairs
 - stair chairs

Candidates must know and understand:

- 1. how to recognise the need for rapid extrication
- 2. how to recognise the proper technique of extrication to be used
- 3. what proper techniques are used in extrication
- 4. what proper care must be given during transport
- 5. what post-care must be given
- 6. how to respond to death and dying

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. extricate patients under a variety of conditions and situations including lifting techniques
- b. use various types of extrication equipment
- c. extricate patients whilst ensuring the welfare of the patient and crew
- d. observe occupational safety and health requirements
- e. provide patient care under different circumstances
- f. perform all tasks according to established procedures
- g. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual

working alone or as part of a team. The assessment environment should not disadvantage the candidate

HS00106: Collect, Evaluate and Report Patients' Medical History

Unit Descriptor:

This unit deals with the skills and knowledge required for collecting, evaluating and reporting patients' medical history to approved personnel. It describes the method and the work expectations associated with preparing and communicating a patients' medical history with the patients and relatives

ELEMENTS

PERFORMANCE CRITERIA

Candidates must be able to:

- 1 Prepare a proper patient's medical history
- 1.1 Check patient(s) and scene for medical identification according to company approved procedures
- 1.2 Interview patient(s) and /or significant others to obtain the medical history of patients using approved interviewing techniques
- 1.3 Record patient(s) medical history in the correct section(s) of the patient report form according to ambulance service requirements
- 1.4 Record data from patient(s) assessments in the relevant section(s) of the patient report form according to ambulance service requirements
- 1.5 Provide on-site information on patient's medical history and conditions to crew members or health care professionals
- 1.6 Maintain confidentiality of patient's medical history and conditions according to company approved procedures
- 1.7 Secure documented information, medical history and conditions according to company approved procedures
- 2 Communicate with patient
- 2.1 Approach patient(s) in a non-threatening manner especially those with special needs
- 2.2 Use verbal and non-verbal communication methods to effectively communicate with patients and significant others
- 2.3 Re-assure patient and significant others according to company approved procedures while carrying out work

RANGE STATEMENT

All range statements must be assessed.

- 1. Record includes:
 - · patient care reports
 - refusal forms
 - electronic patient care reports
 - ECG recordings
- 2. Communication methods include:
- verbal
- non-verbal
- written

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. how to write a report properly
- 2. what approved abbreviations may be used
- 3. how is proper patient history obtained
- 4. what legal principles are to be considered in report writing
- 5. how to communicate with the patient effectively

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. collect patients' medical information correctly
- b. record information clearly
- c. communicate with patients and relatives clearly and effectively
- d. perform all tasks according to established procedures
- e. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00107: Operate and Maintain Ambulance

Unit Descriptor:

This unit deals with the skills and knowledge required for operating/driving and maintaining an ambulance. It describes the method and the work expectations associated with proper positioning of an ambulance and maintaining medical supplies in the ambulance

ELEMENTS PERFORMANCE CRITERIA Candidates must be able to: Determine location of the emergency incident before Operate the ambulance 1.1 operating and driving vehicle 1.2 Determine route to emergency incident according to appropriate, guided, directed, and driver-selection procedures 1.3 Fasten safety belts according to the legal requirements and legislation 1.4 Use methods of warning road users to allow for the right of way of the emergency vehicle according to legislative requirements and company approved operating procedures 1.5 Drive ambulance to ensure the safety of road users and minimal disruption to traffic according to legislative requirements and company approved operating procedures 1.6 Use an emergency vehicle according to legal requirements 1.7 Drive emergency vehicle according to national traffic rules and regulations Use approved driving techniques to ensure vehicle arrives 1.8 at the incident site quickly and according to road safety requirements and the nature of the incident 1.9 Operate an ambulance according to vehicle operation or training techniques during non-emergent and emergent transport

2	Position ambulance	2.1	Position vehicle at incident scene to allow ease of access to the patient and ease of egress from the incident scene
		2.2	Position vehicle to allow for the protection of patient(s), personnel, vehicle, and public property
		2.3	Position vehicle to allow for the co-operation with other emergency personnel
		2.4	Position vehicle to ensure minimum disruption to the general public
3	Maintain ambulance vehicle and equipment	3.1	Maintain vehicle exterior and interior appearance according to standard operating procedures to ensure operational readiness, and to minimize the risk of infection or cross-infection
		3.2	Check condition of the ambulance vehicle components to ensure operational readiness according to legal requirements
		3.3	Check ambulance vehicle equipment to ensure readiness for operational use according to manufacturer's operating procedures
		3.4	Complete vehicle checklist legibly and forward to company approved personnel
		3.5	Report non-functioning or damaged vehicle components or equipment to the approved personnel and according to company approved procedures
4	Restock exhausted medical supplies on ambulance vehicle	4.1	Replenish vehicle stocks of medical supplies in ambulance vehicle according to standard operating procedures
		4.2	Replace expired medical supplies according to company approved procedures
		4.3	Inspect medical supplies for contamination and implement corrective action
		4.4	Secure drugs according to standard operating procedures and legal requirements
		4.5	Complete medical supplies documentation and forward to approved personnel
5	Transport patient in an air ambulance	5.1	Prepare patient for air medical transport according to standard operating procedures

- 5.2 Deal with the stressors of flight on patient, crew and equipment to ensure safe and comfortable air medical transport
- 5.3 Create safe landing zone for rotary-wing aircraft according to company approved procedures
- 5.4 Approach stationary rotor-wing aircraft according to standard operating procedures
- 5.5 Approach stationary fixed-wing aircraft according to standard operating procedures
- 6 Transport patient in sea ambulance
- 6.1 Prepare patient for sea medical transport according to standard operating procedures
- 6.2 Deal with the stressors of sea transport, on patient, crew and equipment to ensure safe and comfortable sea medical transport
- 6.3 Create safe embarking and dis-embarking zone according to company approved procedures

RANGE STATEMENT

All range statements must be assessed.

- 1. Methods of warning road users include:
- audible warning devices (sirens)
- visual warning devices (flashing light)
- road way control devices (cones, caution tape)
- 2. Equipment includes:
- Portable and fixed suction apparatus
- Portable and fixed oxygen supply equipment
- Oxygen administration equipment
- Bag-valve mask (manual resuscitation)
- Pulse oximeter
- Saline drops and bulb suction
- Automated external defibrillator (AED)
- ECG machine
- Immobilization devices
- Obstetrical kit

- 3. Medical supplies include:
- Medication
- Gloves
- Masks
- Bandages
- Sterile burn sheets
- Gauze rolls
- Arterial tourniquet
- Cold packs
- Blankets, sheets, towels
- Triage tags
- Patient care charts, forms

- Two-way communication equipment
- Stethoscope
- Thermometer
- Folded stretcher
- Extrication equipment
- Respirator
- nebulizer

Candidates must know and understand:

- 1. what planning is required before responding to a call
- 2. what safety issues must be performed before and during transport
- 3. what legal issues must be considered while driving
- 4. what scene considerations need to be considered while parking the ambulance
- 5. what considerations are needed during transport
- 6. what inspections are needed of the ambulance
- 7. how is inventory and restocking conducted

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. drive an ambulance safely complying with traffic regulations
- b. position ambulance at the scene of the incident correctly
- c. care for patients during ambulance transportation
- d. maintain ambulance vehicle and equipment
- e. replenish used medical supplies
- f. perform all tasks according to established procedures
- g. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00108: Perform Duties within the Medico- Legal Framework

Unit Descriptor:

This unit deals with the skills and knowledge required for understanding medical control and direction in pre-hospital health care and the legal considerations of pre-hospital care.

ELEMENTS		PERFORMANCE CRITERIA	
Candidates must be able to:			
1	Use medical control and medical direction	1.1	Attend to priorities of airway, breathing, circulation and disability according to approved organisation's procedures and accurate completion of patient care reports
		1.2	Carry out instructions of standard medical orders and seek medical direction from the medical control physician
2	Adhere to legal considerations	2.1	Read and interpret sections of the legislation and adhere to legal requirements for pre-hospital care
		2.2	Perform duties within the provision of the sections of the legal requirements and legislation for pre-hospital care
		2.3	Adhere to organisation's approved quality control standards in the provision of pre-hospital care

RANGE STATEMENT

All range statements must be assessed.

- 1. Legal requirements and legislation include:
- legislation governing medical personnel
- legislation governing emergency ambulance services

Candidates must know and understand:

- 1. how are priorities handled and treated
- 2. how are standard medical orders carried out
- 3. how does the relevant legislation apply to Emergency Medical Technicians

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. use medical control in pre-hospital care
- b. use medical direction in pre-hospital care
- c. interpret legal aspects of the required legislation
- d. perform all tasks according to established procedures
- e. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00109: Apply Learned Models of Patient Care to Emergency

Situations

Unit Descriptor: This unit deals with the skills and knowledge required for applying

learned models of patient care in ambulance service operations.

ELEMENTS		PERFORMANCE CRITERIA		
Cano	Candidates must be able to:			
1	Provide patient care	1.1	Deliver patient care in situations of emergency settings and communicate rationale for the care given to approved organisation's personnel	
		1.2	Solve problems in novel situations according to organisation's approved patient's care procedures	
2	Apply learned models of patient care	2.1	Adapt patient-care to suit different situations according to approved organisation's procedures	
		2.2	Identify actual changes in patient's conditions and adjust care in operational emergency settings	

RANGE STATEMENT

All range statements must be assessed.

- 1. Situations include:
- ambulance
- emergency roompre-hospital setting

- 2. Emergency settings include:
 - airway
 - breathing
 - circulation

- neurological
- trauma
- pain (chest, abdominal)
- shortness of breath
- unconsciousness
- obstetrics
- paediatrics
- psychiatric
- geriatrics
- endocrine
- death

Candidates must know and understand:

- 1. how are priorities handled and treated
- 2. how are standard medical orders carried out
- how to anticipate possible changes to patient's conditions and describe them in advance of occurrences

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. adapt patient-care to suit different situations
- b. solve problems in dynamic situations
- c. adjust patient care when patient's condition changes
- d. perform all tasks according to established procedures
- e. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The

candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00143: Apply Personal Development Principles to Health Care

(Paramedic)

Unit Descriptor:

This unit deals with the skills and knowledge required for maintaining good physical and mental health, making decisions effectively, practicing effective interpersonal and communication skills and working in a team.

ELEMENTS		PER	PERFORMANCE CRITERIA	
Can	didates must be able to:			
1	Make decisions	1.1	Use reasonable and prudent judgment when making decisions	
		1.2	Apply effective problem solving techniques to decision making	
		1.3	Discuss tasks delegated to non-health care professionals according to approved organisation's procedures	
2	Practice effective interpersonal relations	2.1	Treat others with respect at all times and whilst carrying out duties	
		2.2	Show empathy and compassion whilst providing patient care	
		2.3	Support individuals and groups whilst manifesting and displaying coping mechanisms	
		2.4	Act assertively and adjust behaviour in order to display confidence required for patient care	
		2.5	Provide emotional support to patients, by-standers and relatives according to approved organisation's procedures	
		2.6	Display diplomacy, tact and discretion when dealing with patients, by-standers and relatives	
		2.7	Deal with situations of potential conflict using basic conflict resolution skills	

3	Practice non-verbal, verbal and written communications skills	3.1	Apply non-verbal communication to have a positive impact on others according to approved organisation's procedures
		3.2	Communicate with colleagues, patients and others using active listening techniques
		3.3	Establish trust and rapport with patients and colleagues according to approved organisation's procedures
		3.4	Identify threatening behaviour and diffuse hostility according to approved organisation's procedures
		3.5	Deliver an organized and accurate report according to approved organisation's procedures
		3.6	Deliver an organized and accurate patient history report to approved personnel and according to approved organisation's procedures
		3.7	Provide information to patient about situation and inform them of approved treatment
		3.8	Communicate effectively with patients, relatives and by- standers during stressful situations
		3.9	Communicate with patients, relatives and by-standers using medical and non-medical terminology
		3.10	Communicate with patients and relatives speaking a foreign language using appropriate techniques
		3.11	Record information and prepare a written report according to approved organisation's procedures
4	Maintain good physical and mental health	4.1	Select and perform activities and habits which maintain a balanced, healthy lifestyle
		4.2	Select and apply approved techniques for managing personal stress
		4.3	Select and use effective strategies to improve physical and mental health related to shift work
		4.4	Develop and maintain physical strength and fitness according to the requirements of professional practice using approved organisation's selected strategies
5	Function effectively in a team environment	5.1	Cooperate with team members in the health care environment

		5.2	Collaborate with other emergency response agencies to provide mutual assistance and tiered-response
6	Function as a professional	6.1	Maintain patient dignity according to cultural differences
		6.2	Maintain professionalism according to proper use of communication and language
		6.3	Dress according to the requirements of the situation and work environment
		6.4	Maintain professional interaction with patients, relatives and by-standers
		6.5	Maintain patient confidentiality according to legislative and regulatory requirements
		6.6	Utilize community support agencies and programs according to the need for additional intervention
		6.7	Maintain professional behaviour adhering to professional code of ethics and beliefs
		6.8	Perform functions as a patient advocate in the health care environment
7	Commit to on-going personal development	7.1	Perform self-evaluation to identify strengths and weaknesses
		7.2	Suggest clinical strategies to overcome practice difficulties in terms of action, assistance and time frame
		7.3	Identify activities and training programmes to upgrade knowledge and skills according to approved organisation's work practice
		7.4	Complete individual career development plan in accordance with personal development practices

RANGE STATEMENT

All range statements must be assessed.

1. Information includes:

3. Team members include:

- patient's information
- professional correspondence
 - 2. Activities and training programmes include:
 - Basic Cardiac Life Support (BCLS) (mandatory)
 - Advanced Cardiac Life Support (ACLS) (mandatory)
 - Basic Burn Life Support (BBLS)
 - Advanced Burn Life Support (ABLS)
 - Advanced Trauma Life Support (ATLS)
 - Pre-hospital Trauma Life Support (PHTLS) or International Trauma Life Support (ITLS)
 - Pediatric Advanced Life Support (PALS)
 - Advanced Medical Life Support (AMLS)
 - Basic Disaster Life Support (BDLS)
 - Advanced Disaster Life Support (ADLS)
 - Basic Offshore Safety Induction and Energy Training (BOSIET)
 - OSHA General Safety
 - Blood borne Pathogen Course

- health care team
- health care professionals
- non-clinical stakeholders

Candidates must know and understand:

- 1. what are the range of communication methods used in the workplace
- 2. how to communicate with both clients and colleagues in a range of workplace situations
- 3. how to use oral communication skills to fulfill job roles
- 4. how to use written communication skills to fulfill job roles
- 5. how to use interpersonal skills to fulfill job roles
- why it is necessary to participate in quality assurance and enhancement programs relevant to pre-hospital practice
- 7. why it is necessary to participate in professional associations for pre-hospital providers
- 8. why it is necessary to have a re-evaluation at the end of the year and re-certification based on

standard operating procedures

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. perform in a work environment or simulated work setting
- b. work in a range of health situations
- c. prepare written reports
- d. use verbal and non-verbal communication skills
- e. perform all tasks according to established procedures
- f. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00117: Contribute to a Harmonious and Efficient Work

Environment

Unit Descriptor: This unit deals with the skills and knowledge required to create a

harmonious and efficient work environment to enhance the quality

of delivery to patients.

ELEMENTS

PERFORMANCE CRITERIA

Candidates must be able to:

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

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

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

RANGE STATEMENT

All range statements must be assessed.

- Types of work include:
- individual duties and responsibilities
- shared or co-operative tasks

- 5. Types of structures include:
- formal
- informal

- 2. Types of meetings include:
- full meetings of the team
- special meetings related to specific tasks
- meetings of part of the team only
- 3. Types of colleagues include:
- experienced colleagues
- new or inexperienced colleagues
- 4. Code of ethics includes:
- dress
- deportment
- attitude
- speech/body language

- 6. Types of contribution include:
- presenting relevant materials and information formally, i.e. when previously requested; informally to team meeting
- in relation to individual duties and responsibilities
- in relation to work of team or organization
- 7. Types of conflict include:
- conflict between the clients/patients
- conflict between two or more colleagues

Candidates must know and understand:

- 1. what are the procedures of meetings and the process of decision making
- 2. what is the importance of collective responsibility
- 3. what is the organisational structure and the roles within it, including those of team members
- 4. what is the awareness of personal role in the team, team decision making and personal strengths and weaknesses
- 5. what are the aims and objectives of the team
- 6. what is the awareness of personal needs and the needs of others in the team
- 7. what is the team's role in relation to others within and external to the organisation
- 8. what is the necessity for confidentiality
- 9. what is the significance of commitment and what affects it
- 10. what is effective communication in a team meeting both verbal and non-verbal
- 11. what are the procedures for group meetings and the presentation of reports
- 12. what is the need to appraise and evaluate the effects of meetings and of procedures
- 13. what and how to prepare for meetings in advance
- 14. what are the expectations and norms for behaviour in given meetings
- 15. what are the negative effects of undermining the work of the team to those outside
- 16. what is the value of development of the team through training, consultation and the support of individuals and how is this effected
- 17. when to bring in or suggest the use of outside resources
- 18. how to share ideas, views and information with other members of the team
- 19. how to give and receive directions and instructions
- 20. what is the awareness of personal responsibility to follow through ideas and how to implement it

- 21. what is the awareness of personal role in the evaluation of team development
- 22. what are support systems within the organisation
- 23. what are the sources of information about support in the wider community
- 24. what are the sources of information about training
- 25. what is the value of praise and positive feedback
- 26. what are the different levels of communication operating within the team and the organisation
- 27. what are the potential areas of stress, conflict and discrimination and how to deal with them
- 28. how, when and where to discuss and seek resolution of conflict
- 29. how to understand grievance and disciplinary procedures
- 30. how to contribute to the work of team and team meetings
- 31. how to seek clarification as to personal responsibilities
- 32. how to appropriately modify tasks and performance
- 33. how to give reports on progress and completion of work
- 34. how to adopt appropriate manner in the discharge of duties and responsibilities
- 35. how to respond to contributions of other team members
- 36. how to record work identified at a meeting
- 37. how to give to outsiders' appropriate information and views expressed by those within the team
- 38. how to identify good practice
- 39. how to identify the potential of changes to improve practice
- 40. how to implement improvements in practice within area of responsibility
- 41. how to respond to agreed changes in working opportunities for training and personal development
- 42. how to respond to unsatisfactory practice of colleagues
- 43. how to carry out agreed changes to work
- 44. how to give comments and constructive criticisms to colleagues
- 45. how to ensure response to cultural and religious beliefs and practices of colleagues
- 46. how to promote and adhere to policies for equal opportunities
- 47. how to offer support to colleagues experiencing discrimination
- 48. how to challenge evidence of prejudice and/or discrimination on the part of a team member
- 49. how to conform to the ethics as it relates to dress, speech attitude, deportment and body language

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. perform in a work environment or simulated work setting
- b. work in a range of health situations
- c. prepare written reports
- d. perform all tasks according to established procedures
- e. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's

reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

HS00118: Deliver and Monitor Quality Service to Customers

Unit Descriptor:

This unit deals with the skills and knowledge required to ensure that products and services are delivered and maintained to standards agreed by the organization and the customer. This will be carried out in the context of the organization's policies and practices as well as legislation conventions and codes of practice.

ELEMENTS PERFORMANCE CRITERIA

Candidates must be able to:

1	Plan to meet internal and external customer requirements	1.1	The needs of customers are researched and assessed, and included in the planning process in accordance with organizational requirements
		1.2	Provision is made in plans to achieve the quality, time and cost specifications agreed with customers.
2	Deliver quality products/services	2.1	Products/services are delivered to customer specifications within the team's business plan
		2.2	Team performance consistently meets quality, safety, resource and delivery standards
		2.3	Coaching and mentoring assists colleagues to overcome difficulty in meeting customer service standards.
3	Monitor, adjust and report customer service	3.1	The organisation's systems and technology are used to monitor progress in achieving product/service targets and standards.
		3.2	Customer feedback is sought and used to improve the provision of products/services in accordance with organizational requirements
		3.3	Resources are used effectively to provide quality products/services to customers
		3.4	Decisions to overcome problems and adjust products/services are taken in consultation with designated individuals/groups

3.5 Records, reports and recommendations are managed within the organisation's systems and processes

RANGE STATEMENT

All range statements must be assessed.

- Legislation, codes and national standards relevant to the workplace include:
- award and enterprise agreements and relevant industrial instrument
- relevant legislation from all levels of government that affects business operation, especially in regard to Occupational Health and Safety and environmental issues, equal opportunity, industrial relations and antidiscrimination
- relevant industry codes of practice

- 2. Customers include:
- internal
- external
- existing sources
- new sources
- 3. Resources include:
- people
- power/energy
- information
- finance
- building/facilities
- equipment
- technology
- time

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. what are relevant legislation from all levels of government that affects business operation, especially in regard to Occupational Safety and Health and environmental issues, equal opportunity, industrial relations and anti-discrimination
- 2. what are the organisation's policies and procedures for dealing with customers
- 3. what are the principles and techniques of researching customer needs, customer relations, customer behaviour, identification and resolution of problem

- 4. how to maintain product/service quality
- 5. how to perform work to the required standard
- 6. how to access and use workplace information
- 7. what are the communication skills including researching and analyzing information and reporting
- 8. how to manage work within responsibility to achieve goals and results
- 9. how to develop and maintain communication with customers
- 10. how to make effective use of customer feedback
- 11. how to prepare and negotiate recommendations to improve customer service
- 12. how to ensure that legislation and standards are met
- 13. how to manage products/services within budget constraints
- how to use coaching and mentoring skills to provide support to colleagues
- how to relate to people from a range of social, cultural and ethnic backgrounds and physical and mental abilities

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. prepare plans to meet customer needs
- b. provide quality service consistently
- c. review and improve services following feedback
- d. report outcomes of customer service
- e. perform all tasks according to established procedures
- f. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

HS00126: Supervise Work Teams

Unit Descriptor:

This unit deals with the skills and knowledge required by the supervisor to play a key role in leading, participating in, facilitating and empowering work teams/groups within the context of the organization.

ELE	EMENTS	PERFORMANCE CRITERIA	
Cano	didates must be able to:		
1	Participate in team planning	1.1	The supervisor assists the team establish its purpose, roles, responsibilities and accountabilities in accordance with the organisation's goals, plans and objectives
		1.2	The supervisor assists the team, monitors and adjusts its performance within the organisation's continuous improvement policies and processes.
		1.3	The supervisor encourages the team to use the competencies of each member for team and individual benefit
2	Develop team commitment and co-operation	2.1	The supervisor assists the team to use open communication processes to obtain and share information
		2.2	The team makes decisions in accordance with its agreed roles and responsibilities
		2.3	The supervisor supports the team to develop mutual concern and camaraderie in accordance with the organization's continuous improvement policies and processes
3	Supervise and develop team performance	3.1	The results achieved by the team contribute positively to the organisation's business plans
		3.2	The supervisor encourages the team to exploit innovation and initiative in accordance with the organizations' goals, plans and objectives
		3.3	Team and individual competencies are monitored regularly to confirm that the team is able to achieve its goals

- 3.4 Team members share and enhance their knowledge and skills in accordance with the organization's continuous improvement policies and processes
- 4 Participate in and facilitate the work team
- 4.1 Team members participate actively in team activities and communication processes in accordance with organization's procedures
- 4.2 Individuals and teams take individual and joint responsibility for their actions in accordance with agreed roles and responsibilities
- 4.3 The team receives support to identify and resolve problems which impede its performance in accordance with the organization's continuous improvement policies and processes

RANGE STATEMENT

All range statements must be assessed.

- Legislation, codes and national standards include:
- award and enterprise agreements and relevant industrial instrument
- relevant legislation from all levels of government that affects business operation, especially in regard to Occupational Safety and Health and environmental issues, equal opportunity, industrial relations and antidiscrimination
- relevant industry codes of practice
- Teams include:
- one or a mixture of on-going work-based, project-based, task specific
- cross-functional
- full time employees
- contractors
- part time employees
- 3. OSH considerations include:

- 4. Supervisor includes:
- leader
- facilitator
- participant
- coach
- mentor
- 5. Competencies include:
- the abilities of the team members
- formally recognized
- · not formally recognized
- industry-wide
- enterprise specific
- individual specific
- Knowledge and skill development methods include:
- coaching
- mentoring
- exchange/rotation
- shadowing

- implement and monitor participative arrangements
- information to team about OSH
- the organisation's OSH policies, procedures and practices
- action learning
- · structured training programs

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. what are the relevant legislation from all levels of government that affects business operation, especially in regard to Occupational Safety and Health and environmental issues, equal opportunity, industrial relations and anti-discrimination
- 2. what are the principles and techniques associated with the organization of teams and team goal setting
- 3. how to devolve responsibility/accountability to teams and include team dynamics, conflict resolution, gaining team commitment, monitoring and assessing team performance
- 4. how to gain team commitment to the organisation's goals, values and plans
- 5. what are the forms of bias/discrimination and how to deal with them
- 6. how to access and use workplace information
- 7. how to assess the competence of the team
- 8. how to facilitate the participation of team members
- 9. how to work effectively with team members who have diverse work styles, aspirations, cultures and perspectives
- 10. how to facilitate team development and improvement
- 11. how to assess competency development requirements
- 12. how to gain the trust and confidence of colleagues
- 13. how to deal with people openly and fairly
- 14. how to use coaching and mentoring skills to provide support to colleagues
- 15. how to relate to people from a range of social, cultural and ethnic backgrounds and physical and mental abilities

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. provide leadership to team
- b. contribute positively to team performance
- c. provide coaching and mentoring support
- d. perform all tasks according to established procedures

e. report problems according to established procedures

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

CSETDP0014A: Train small groups

Competency Descriptor: This unit describes the skills and knowledge required to plan, deliver and

review training provided for the purposes of developing competency on a

one-to-one or small group basis.

Competency Field: Education and Training

ELF	EMENT OF COMPETENCY	PER	PERFORMANCE CRITERIA	
1.	Prepare for training	1.1	Specific needs for training are identified and confirmed through consultation with appropriate personnel.	
		1.2	Training objectives are matched to identified competency development needs.	
		1.3	Training approaches are planned and documented.	
2.	Deliver training	2.1	Training is conducted in a safe and accessible environment.	
		2.2	Training delivery methods are selected appropriate to training participant(s) needs, trainer availability, location and resources.	
		2.3	Strategies and techniques are employed which facilitate the learning process.	
		2.4	Objectives of the training, sequence of activities and assessment processes are discussed with training participant(s).	
		2.5	A systematic approach is taken to training and the approach is revised and modified to meet specific needs of training participant(s).	
3.	Provide opportunities for practices	3.1	Practice opportunities are provided to ensure that the participant achieves the components of competency.	
		3.2	Various methods for encouraging learning are implemented to provide diverse approaches to meet the individual needs of participants.	

4. Review training

- 4.1 Participants are encouraged to self evaluate performance and identify areas for improvement.
- 4.2 Participants' readiness for assessment is monitored and assistance provided in the collection of evidence of satisfactory performance.
- 4.3 Training is evaluated in the context of self-assessment, participant feedback, supervisor comments and measurements against objectives.
- 4.4 Training details are recorded according to enterprise and legislative requirements.
- 4.5 Results of evaluation are used to guide further training.

RANGE STATEMENT

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

The following variables may be present:

Relevant information to identify training needs includes:

- industry/enterprise or other performance competency standards
- endorsed components of relevant industry training package
- industry/workplace training practices
- job descriptions
- results of training needs analyses
- business plans of the organisation which identify skill development requirements
- standard operating and/or other workplace procedures

Appropriate personnel may include:

- team leaders/supervisors/ technical experts
- managers/employers
- training and assessment coordinators
- training participants
- representative government regulatory bodies
- union/employee representatives
- · consultative committees
- assessors

Training delivery methods and opportunities for practice may include:

- presentations
- demonstrations
- explanations
- problem solving
- mentoring
- · experiential learning
- group work
- on the job coaching
- job rotation
- a combination of the above

Components of competency include:

- task skills
- task management skills
- contingency management skills
- job/role environment skills
- transfer and application of skills and knowledge of new contents

Training sessions may include:

- one to one demonstration
- small group demonstration (2 to 5 persons)

Characteristics of training participant may include information in relation to:

- language, literacy and numeracy needs
- cultural, language, and educational background
- gender
- physical ability

- level of confidence, nervousness or anxiety
- age
- previous experience with the topic
- experience in training and assessment

Resources may include:

- time
- location
- personnel
- materials and equipment
- OHS and other workplace requirements
- enterprise/industry standard operating procedures
- finances/costs

Strategies and techniques may include:

- active listening
- targeted questioning
- points of clarification
- group discussions

EVIDENCE GUIDE

Competency in this unit needs to be assessed over a period of time, in a range of contexts and on multiple occasions involving a combination of direct, indirect and supplementary forms of evidence.

(1) Critical Aspects of Evidence

Assessment requires evidence of the following products to be collected:

- Description of the specific training need and required competency outcomes.
- Outline of the training approach and steps to be followed.
- Description of training participant(s) and delivery method(s) to be used.
- Specific resources required.
- Outline of the evidence to be collected for monitoring training participant progress.
- Trainer's self assessment of training delivery.
- Participant evaluation of training delivery.
- Evaluation of review comments against plan of training.
- Records/documentation for monitoring progress of training participant(s).
- May be collected using proformas or template.

Assessment requires evidence of the following processes to be provided:

- · How the specific training need was determined.
- How the sequence of the training was determined.
- How appropriate personnel were identified.
- Why particular delivery method(s) were selected.
- How the characteristics of training participant(s) as identified.
- How the resource requirements were established.
- How participant progress was monitored.
- Why and how the training resources were selected.

How appropriate personnel confirmed training arrangements

- How participant(s) were informed of:
 - intended training outcomes
 - competencies to be achieved
 - on and/or off the job practice opportunities
 - benefits of practices
 - learning activities and tasks
 - assessment tasks and requirements

- How constructive feedback was provided to training participant about progress toward competency to be acquired
- How training participant readiness for assessment was determined and confirmed
- How records were maintained to ensure confidentiality, accuracy and security.

Evidence may be provided verbally or in written form.

Interdependent assessment of units

This unit may be assessed in conjunction with other units that form part of a job function.

(2) Pre-requisite Relationship of Units

Nil

(3) Underpinning Knowledge and Skills

Knowledge

Knowledge of:

- competency in the units being taught
- workplace application of the relevant competencies
- identification of evidence of competency
- planning of own work including predicting consequences and identifying improvements
- application of relevant workplace policies (e.g. OHS) and any relevant legislative or regulatory requirements
- correct use of equipment, and any other processes and procedures appropriate for the training
- ethical handling of performance issues

Skills

The ability to:

- Language, literacy and numeracy required skills to:
 - conduct discussions and ask probing questions to review the training
 - gather information (in spoken or written form) for review purposes
 - make verbal recommendations for delivery of future training
 - adjust language to suit target audience (training participant/appropriate personnel)
 - complete records on training
 - provide verbal feedback & report on training outcomes
 - follow and model examples of written texts
 - promote training in verbal or written form

Communication skills appropriate to the culture of the workplace, appropriate personnel and training participants.

(4) Resource Implications

 Access to records system for training, information, and training participants and supervisory staff (where appropriate).

(5) Method of Assessment

Review of a portfolio containing the following

- Description of the specific training need and required competency outcomes.
- Outline of the training approach and steps to be followed.
- Description of training participant(s) and delivery method(s) to be used.
- Specific resources required.
- Outline of the evidence to be collected for monitoring training participant progress.
- Trainer's self assessment of training delivery.
- Participant evaluation of training delivery.
- Evaluation of review comments against plan of training.
- Records/documentation for monitoring progress of training participant(s).
 May be collected using specially designed forms/templates.

Questioning – oral/written relating to:

- How the specific training need was determined
- How the sequence of the training was determined
- How appropriate personnel were identified
- Why particular delivery method(s) were selected
- How the characteristics of training participant(s) as identified
- How the resource requirements were established
- How participant progress was monitored
- Why and how the training resources were selected
- How appropriate personnel confirmed training arrangements

How participant(s) were informed of:

- intended training outcomes
- · competencies to be achieved
- on and/or off the job practice opportunities
- benefits of practices
- learning activities and tasks
- assessment tasks and requirements

(6) Context of Assessment

Assessment may occur on the job or in a simulated workplace. Candidate workplace trainers should use competencies relevant to their area of technical expertise.

CRITICAL EMPLOYABILITY SKILLS

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

	Levels of Compete	ency
Level 1.	Level 2.	Level 3.
 Carries out established processes Makes judgement of quality using given criteria 	 Manages process Selects the criteria for the evaluation process 	 Establishes principles and procedures Evaluates and reshapes process Establishes criteria for evaluation

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

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

HS00125: Deliver Training Sessions

Unit Descriptor:

This unit deals with the skills and knowledge required to deliver training sessions as part of a training program.

ELE	EMENTS	PERFORMANCE CRITERIA		
Candidates must be able to:				
1	Prepare training participants	1.1	Training program goals and training session outcomes are explained to, and discussed with, training participants	
		1.2	The training program workplace applications, training activities and tasks are explained and confirmed with the training participants	
		1.3	Needs of training participants for competency acquisition are identified in accordance with the organisation's goals, plans and objectives	
		1.4	The series of training sessions for the training program are explained to training participants in accordance with the organizations' goals, plans and objectives	
		1.5	Ways in which the competencies are to be developed and assessed are explained to, and confirmed with, training participants in accordance with organizational procedures	
2	Present training session	2.1	Presentation and training delivery are appropriate to the characteristics of training participants and the development of the competencies	
		2.2	Presentation of training and design of learning activities emphasise and reinforce the dimensions of competency	
		2.3	Presentation and training delivery methods provide variety, encourage participation and reinforce competencies	
		2.4	Spoken language and communication strategies / techniques are used strategically to encourage participation and to achieve the outcomes of training sessions	
		2.5	Training sessions are reviewed and modified as necessary	

to meet training participants' needs and in accordance with the organizations procedures

- 3 Facilitate individual and group learning
- 3.1 The requirements for the effective participation in the learning process are explained in accordance with the organizations procedures
- 3.2 Information and advice is given to training participants during training sessions in accordance with the organizations' goals, plans and objectives
- 3.3 Training presentations are enhanced with the use of appropriate training resources
- 3.4 Clear and accurate information is presented in a sequence to foster competency development
- 3.5 Training participants are actively involved in sessions by being encouraged to ask questions, clarify points of concern and contribute comments at appropriate and identified stages
- 3.6 Training equipment and materials are used in a way that enhances learning in accordance with the organization's continuous improvement policies and processes
- 3.7 Supplementary information is provided to enhance and clarify understanding as required by individuals or the group
- 3.8 Key points are summarised at appropriate times to reinforce learning
- 3.9 Individual learning and group dynamics are monitored and managed to achieve program goals
- 3.10 Language, literacy and numeracy issues are taken into account to facilitate learning by training participants
- 4 Provide opportunities for practice and feedback
- 4.1 Process, rationale and benefits of practice of competency are discussed with training participants and in accordance with the organizations procedures
- 4.2 Practice opportunities are provided to match specific competencies to be achieved, context of the training program and specific outcomes of the training session
- 4.3 Training participants' readiness for assessment is monitored and discussed with participants in accordance with the organizations procedures

- 4.4 Constructive feedback and reinforcement are provided through further training and/or practice opportunities
- 5 Review delivery of training session
- 5.1 Training participants' review of training delivery is sought in accordance with the organizations' goals, plans and objectives
- 5.2 The delivery of training session is discussed with appropriate personnel at appropriate times in accordance with the organizations procedures
- 5.3 Trainer self assesses training delivery against program goals, session plans and assessment and competency standards
- 5.4 The reactions of relevant personnel to the delivery are sought and discussed at appropriate times in accordance with the organizations procedures
- 5.5 Adjustments to delivery, presentation and training are considered and incorporated in accordance with the organizations procedures

RANGE STATEMENT

All range statements must be assessed.

- 1. Target group includes:
- employee groups (e.g. particular classification or work area, female employees)
- groups or individuals with special training and or recognition needs
- 2. Characteristics of participants include:
- language, literacy and numeracy needs
- cultural and language background
- educational background or general knowledge
- gender
- age
- physical ability
- previous experience with the topic
- experience in training and assessment
- level of confidence, nervousness or anxiety

- 7. Appropriate personnel include:
- trainers/teachers and assessors
- team leaders, supervisors, managers, employers
- participant/employee/learner
- · technical experts
- government regulatory bodies
- union/employee representatives
- consultative committees
- users of training information such as training providers, employers, human resource departments
- statutory and accreditation authorities
- 8. Training programs include:
- enterprise based delivery
- provider based delivery, fee for service
- community based delivery

- 3. Training program include:
- national industry training packages
- enterprise training packages
- enterprise based standards
- standards of performance or curriculum
- international standards
- international programs
- 4. Training sessions include:
- theory
- demonstration
- · combination of the two
- 5. Training materials include:
- non-endorsed components of an industry
- training package
- work books
- workshop guides
- background reading materials/documents
- handouts
- industry/enterprise competency standards
- supportive policies and legislation
- 6. Dimensions of competency include:
- task skills
- task management skills
- · contingency management skills
- job/role environment skills
- transfer and application of skills and knowledge to new contexts

- school based delivery
- international programs
- · combination of the above
- 9. Target group's competencies include:
- reports on assessment of competencies
- · content analysis of curriculum vitae
- enterprise training and assessment record keeping system
- industry training and assessment recording system
- self, peer or supervisor reports
- 10. Training delivery methods include:
- face to face
- distance
- fixed schedule, partly self-paced, all self paced
- trainer centred, participant centred
- place dependent, place independent
- interactive (e.g. audio, or video conferencing, computer assisted, discussion)
- 11. Practice opportunities include:
- on the job
- off the job but located in participant's workplace
- off the job in a special demonstration area
- off the job in external training room
- work/field placements
- a combination of the above
- 12. Training activities and tasks include:
- oral presentations
- simulation activities
- project work
- group activities
- · practical demonstrations
- assignments
- laboratory work

- shadowing, coaching, mentoring
- computer based learning
- role-plays
- interviews
- discussion groups
- surveys
- action learning
- on the job learning
- off the job learning
- practical placements

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- 1. what are the relevant competency standards including industry or enterprise standards
- 2. what are the unit(s) of competency relevant to the training program
- 3. what is the design and / or customization of effective learning resources
- 4. what are the training delivery methods / strategies
- 5. how to identify and use equipment, processes and procedures relevant to unit(s) of competencies
- 6. what are the principles of adult learning and competency based training as applied to target group
- 7. what skills are required in facilitating group and individual learning in specific contexts
- what skills are required in the design of activities and tasks to facilitate learning in specific contexts
- what are the sources of assistance for participants requiring language or other particular training support
- 10. what language, literacy and numeracy skills are required to present information in a clear, logical and coherent manner
- 11. how to present technical information using language which mirrors the language used to perform the task or skill in the relevant work context
- 12. how to adjust spoken and written language to suit the audience
- 13. how to employ interaction strategies and techniques (e.g. probing questioning, active listening & constructive feedback) to encourage participation
- 14. how to prepare learning resources and materials using language and layout features to suit intended audience
- what are the communication skills appropriate to the culture of the workplace, personnel and target groups

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. deliver training sessions in a number of contexts using a range of delivery methods to competency requirements.
- b. train using training materials and resources
- c. perform self assessment of training delivery
- d. document reaction of appropriate personnel and training participants to delivery of training sessions
- e. make changes to subsequent delivery practices based on feedback by training participants and appropriate personnel

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

Contribute T	o Occup	ational	Safety	And	Health	(OSH)	Processes

HS00132 Contribute to Occupational Safety and Health (OSH) Processes

Unit Descriptor:

HS00132

This unit deals with the skills and knowledge required to contribute to occupational safety and health processes where there is responsibility for personal work outputs and possibly limited responsibility for the work output of others.

ELI	EMENTS	PER	PERFORMANCE CRITERIA	
Can	didates must be able to:			
1	Plan and conduct work safely	1.1	Plan work in accordance with relevant provisions of OSH legislation, standards, codes of practice/compliance codes and guidance material	
		1.2	Identify hazards as part of work planning and work process according health and safety requirements	
		1.3	Address identified hazards prior to starting work using judgement within defined scope of responsibilities according health and safety requirements	
		1.4	Report residual risk according to organisation procedures	
		1.5	Report incidents and injuries in line with organisation policies and procedures	
		1.6	Undertake housekeeping in work area in accordance with occupational safety and health requirements	
		1.7	Maintain and update personal knowledge of OSH issues as they apply to workplace systems, equipment and processes in accordance with organisational requirements	
		1.8	Manage levels of stress and fatigue to ensure ability to work safely and sustainably	
2	Support others in working safely	2.1	Share information on safe work practices and work procedures with others in accordance with organisational requirements	
		2.2	Check the OSH practices of less experienced members of the workgroup or other stakeholders in the work context in accordance with occupational safety and health requirements	
		2.3	Provide guidance and coaching to less experienced	

members of the workgroup to support them in working safely

- 2.4 Support others, record incidents and complete associated workplace documentation according to the organisation's procedures
- 3 Contribute to OSH participative processes
- 3.1 Raise OSH issues in accordance with organisation procedures
- 3.2 Contribute to workplace meetings, workplace inspections or other consultative activities in a constructive manner to improve safety and in accordance with organisational procedures
- 3.3 Provide assistance to workgroup members or other stakeholders to contribute to workplace safety according to the organisation's procedures
- 4 Contribute to hazard identification, OSH risk assessment and risk control activities
- 4.1 Report identified hazards and inadequacies in risk controls according to occupational safety and health requirements
- 4.2 Check the workplace for hazards using itemised checklist(s) in accordance with work procedures
- 4.3 Conduct risk assessments according to occupational safety and health requirements
- 4.4 Provide input to development and implementation of control measures in accordance with the hierarchy of control
- 5 Participate in the control of emergency situations
- 5.1 Identify emergency signals and alarms and respond to them according to emergency response procedures
- 5.2 Take initial action to control/confine emergency according to organisation procedures, and taking account of the nature and scope of the emergency
- 5.3 Implement emergency response procedures within scope of training and competence and according to organisation procedures

RANGE STATEMENT

All range statements must be assessed.

- 1. Hazard identification includes:
- before new forms of work and organisation of work are implemented
- before changes are made to workplace, equipment, work processes or work arrangements
- as part of planning major tasks or activities, such as equipment shutdowns
- following an incident report
- when new knowledge becomes available
- at regular intervals during normal operations
- prior to disposal of equipment, or materials
- 2. Organisation procedures include:
- · hazard, incident and injury reporting
- hazard identification, risk assessment and control
- consultation and participation
- quality system documentation
 - 3. Housekeeping includes:
 - workplace routines
 - personal routines designed to improve health and safety; for example, cleaning up spills, keeping walkways, exits and traffic areas clear

- 7. Risks requiring management include:
- worker fatigue or burnout requiring appropriate supervision and stress management
- injury or damage resulting from violent or aggressive behaviour, requiring strategies to defuse or avoid behaviours of concern
- risks relating to working in client's homes, requiring appropriate worker education and associated strategies
- fire in client's homes requiring workers to provide basic information on home fire safety
- risks relating to lifting and moving patients
- risks associated with disease transmission
- 8. Documentation includes:
 - hazard, incident and investigation reports
 - workplace inspection reports
 - incident investigation reports
 - minutes of meetings
 - Job Safety Analyses (JSAs) and risk assessments
 - Material safety data sheets (MSDSs) and registers
 - Employees handbooks
 - Manufacturers' manuals and specifications
 - Reports from OSH committee
 - Information from external sources on hazards and risk relevant to the work group
 - Checklists
 - schedules

4. Specific hazards include:

- alarms
- bodily fluids
- burnout (fatigue)
- chemicals
- computer use
- cytotoxic medicines and waste
- defusing violent behaviour
- egress from rooms
- managing violent behaviour on outreach and home visits
- manual handling
- moving parts of machinery
- noise
- rostering
- sharps
- trips falls etc
- underfoot hazards
- violence in the workplace
- work posture

5. Work procedures include:

- standard operating procedures
- batch specifications
- operator or manufacturer manuals
- procedures for selecting, fitting, using and maintaining personal protective equipment

6. Coaching includes:

- providing guidance and explanation on implementation of work and organisation procedures
- providing feedback
- providing encouragement
- assisting with problem solving

9. Designated persons include:

- team leaders
- supervisors
- OSH representatives
- OSH committee members
- managers
- organisation OSH personnel
- other persons designated by the organisation

10. Hierarchy of control include:

- elimination controlling the hazard at the source
- substitution e.g. replacing one substance or activity at the source
- engineering e.g. installing guards on machinery
- administration policies and procedures for safe work practices
- personal protective equipment e.g. respirators, ear plugs

11. Emergency signals and alarms include:

- machinery malfunction alarms
- fire alarms
- evacuation alarms or announcements
- reversing beepers

12. Emergency include:

- serious injury
- events requiring evacuation
- · fires and explosions
- hazardous substance and chemical spills
- explosion and bomb alerts
- security emergencies, such as armed robberies, intruders and disturbed persons
- internal emergencies, such as loss of power or water supply and structural collapse
- external emergencies and natural disasters, such as flood, storm and traffic accident

UNDERPINNING KNOWLEDGE AND SKILLS

Candidates must know and understand:

- what are basic hazard identification procedures such as workplace inspections and review of workplace data
- 2. what is hierarchy of control and its application
- 3. what are personal protective equipment (PPE) requirements including use, storage and maintenance
- 4. what are the principles of basic risk assessment
- 5. what are the roles and responsibilities of OSH representatives and OSH committees
- 6. what are the safety signs and their meanings, including signs for dangerous goods class signs; emergency equipment; personal protective equipment and specific hazards such as sharps, radiation
- what are sources of OSH information within the workplace and awareness of external sources of OSH information
- 8. what are standard emergency signals, alarms and required responses
- 9. what are the hazards of the particular work environment
- 10. what are hazard identification procedures relevant to hazards in the workplace
- 11. what are the organization and work procedures related to performance of own work, specific hazards and risk control, reporting of hazards, incidents and injuries and OSH issue resolution, consultation, use of PPE and emergency response
- 12. what are the potential emergency situations, alarms and signals and required response
- 13. how to address personal health and safety and health and safety of others
- 14. how to provide support to members of the workgroup who may be less experienced in the workplace in regard to OSH matters
- 15. how to take initiative to address hazards and manage risks at a systemic level
- 16. how to check the workplace for hazards and risks using an itemized checklist

EVIDENCE GUIDE

(1) Critical Aspects of Evidence

Evidence should include a demonstrated ability to:

- a. plan work in accordance with relevant provisions of OSH egislation and standards
- b. report incidents and injuries
- c. undertake housekeeping in work area
- d. check the OSH practices of less experienced members
- e. report identified hazards and inadequacies
- f. identify emergency signals and alarms and respond to them

(2) Method of Assessment

Assessors should gather a range of evidence that is valid, sufficient, current and authentic. Evidence can be gathered through a variety of ways including direct observation, supervisor's reports, project work, samples and questioning. Questioning techniques should not require language, literacy and numeracy skills beyond those required in this unit of competency. The candidate must have access to all tools, equipment, materials and documentation required. The candidate must be permitted to refer to any relevant workplace procedures, product and manufacturing specifications, codes, standards, manuals and reference materials.

(3) Context of Assessment

This unit may be assessed on the job, off the job or a combination of both on and off the job. Where assessment occurs off the job, that is the candidate is not in productive work, then an appropriate simulation must be used where the range of conditions reflects realistic workplace situations. The competencies covered by this unit would be demonstrated by an individual working alone or as part of a team. The assessment environment should not disadvantage the candidate

GLOSSARY OF TERMS

Occupational Standards

Occupational Standards of competence are industry-determined specifications of performance, which describe the knowledge, skills and attitudes required by a worker in the performance of a particular role in the workplace. They specify what a person should know and do in order to carry out the functions of a particular job in the work environment. They are the building blocks for all activities in a competency-based training and certification system. An Occupational Standard is made up of a qualification plan, a unit title, elements, performance criteria, range statements, underpinning knowledge and skills and evidence guide.

Qualification Plan – The Qualification Plan identifies the Mandatory units which are those units that are necessary to deem a candidate competent in the occupational area and provide flexibility in different wok environments. It also contains the Title and Level of the qualification to be awarded.

Unit Title - The unit title is a succinct statement of the outcome of the unit of competency. It reflects the major activities or functions of an individual's work as well as the discreet units of work.

Unit Descriptor - The unit descriptor communicates the content of the unit of competency and the skill area it addresses.

Elements - These are the basic building blocks of the unit of competency. They describe the tasks in which competence should be demonstrated in order to carry out the specific function.

Performance Criteria - These are the descriptions of the outcomes of performance required for successful achievement of an element. They specify the required performance in relevant tasks, roles, skills and applied knowledge that enables competent performance.

Range Statement - This describes the essential operating conditions that should be present in training and assessment, depending on the work situation, needs of the candidate, accessibility of the item and local industry contexts. It lists the parameters in which candidates much demonstrate their competence.

Underpinning Knowledge and Skills – The knowledge identifies what a person needs to know to perform the work in an informed and effective manner. The skills describe the application of knowledge to situations where understanding is converted into a workplace outcome.

Evidence Guide - The Evidence Guide is critical in assessment as it provides information to Training Providers and Assessors about how the described competency should be demonstrated. It provides a range of evidence for the Assessor to make a determination of competence and defines the assessment context. The Evidence Guide describes:

• Conditions under which competency must be assessed including variables such as the assessment environment or necessary equipment

- Suitable methodologies for conducting assessment including the potential for workplace simulation
- Resource implications, for example access to particular equipment, infrastructure or situations
- How consistency in performance must be assessed over time, various contexts and with a range of evidence

Level 1 – Directly supervised worker

Recognizes competence in a range of varied work activities performed in a variety of contexts. Most work activities are simple and routine. Collaboration with others through work groups or teams may often be a requirement. Substantial supervision is required especially during the early months evolving into more autonomy with time.

Level 2 – Supervised skilled worker

Recognizes competence in a broad range of diverse work activities performed in a variety of contexts. Some of these may be complex and non-routine and involve some responsibility and autonomy. Collaboration with others through work groups or teams and guidance of others may be required.

Level 3 – Independent/autonomous skilled worker

Recognizes competence in a broad range of complex, technical or professional work activities performed in a wide variety of contexts, with a substantial degree of personal responsibility and autonomy. Responsibility for the work of others and the allocation of resources are often a requirement. The individual is capable of self-directed application, exhibits problem solving, planning, designing and supervisory capabilities.

Level 4 – Supervisory specialist worker

Recognizes competence involving the application of a range of fundamental principles and complex techniques across a wide and unpredictable variety of contexts. Requires very substantial personal autonomy and often significant responsibility for the work of others, the allocation of resources, as well as personal accountability for analysis, diagnosis, design, planning, execution and evaluation.

Level 5 – Managerial professional worker

Recognizes the ability to exercise personal professional responsibility for the design, development or improvement of a product, process, system or service. Recognizes technical and management

competencies at the highest level and includes those who have occupied positions of the highest responsibility and made outstanding contribution to the promotion and practice of their occupation.