





## Model Curriculum Home Health Aide

SECTOR: HEALTHCARE SUB-SECTOR: ALLIED HEALTH & PARAMEDICS OCCUPATION: HOME HEALTH AIDE REF ID: HSS/Q5102, VERSION 1.0 NSQF LEVEL: 4















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# Home Health Aide

**CURRICULUM / SYLLABUS** 

This program is aimed at training candidates for the job of a "Home Health Aide", in the "Healthcare" Sector/Industry and aims at building the following key competencies amongst the learner

Program Name	<home aide="" health=""></home>		
Qualification Pack Name & Reference ID.	HSS/Q5102, version 1.0		
Version No.	1.0	Version Update Date	15 - 12 - 2015
Pre-requisites to Training	Class X preferably but Cla	ss VIII in certain cases	
Training Outcomes			





<ul> <li>a Home Health Aid.</li> <li>Verbalize Immunization schedule, roles of healthcare providers in implementation of National Immunization Program.</li> <li>Demonstrate right methods of bio medical waste management.</li> <li>Demonstrate Basic Life Support, Cardio Pulmonary Resuscitation and other actions in the event of medical and facility emergencies.</li> </ul>
<ul> <li>Demonstrate good communication, communicate accurately and appropriately in the role of Home Health Aid and demonstrate professional appearance and demeanor.</li> </ul>

This course encompasses <u>15</u> out of <u>15</u> National Occupational Standards (NOS) of "<u>Home Health Aide</u>" Qualification Pack issued by "<u>SSC: Healthcare Sector Skill Council</u>".

S.No	Module	Key Learning Outcomes	Equipment Required
1	Functions of The Home Health Aid Theory Duration (hh:mm) 03:00 Practical Duration (hh:mm) 02:00 Corresponding NOS Codes HSS/ N5116- 5124,HSS/N9603-9609	<ul> <li>Describe the functions of Home Health Aid.</li> <li>Describe patient's daily care routine.</li> <li>Understand the basic components required for the patient's comfort.</li> <li>Provide care for the patient's health needs.</li> <li>Exhibit ethical behavior.</li> <li>Present a positive personal image.</li> </ul>	Mock environment of clinic and hospital environment, home care setups with home based articles, family planning methods, emergency kits etc
2.	Personal Hygiene And Hygiene Standards Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS / N9606, HSS / N 5121	<ul> <li>Describe good health and its relation to successful living.</li> <li>Maintain good Physical Health.</li> <li>Describe the importance, use and procedure of wearing and removing Personal Protective Equipment (PPE).</li> <li>Practice Hand hygiene</li> <li>Adhere to Grooming practices</li> </ul>	PPE, self learning and understanding
3.	Patient Safety	Patient environment and its components.	Mock environment of







S.No	Module	Key Learning Outcomes	Equipment Required
	Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 05:00	<ul> <li>Create and describe the Environment in which the Patient feels safe and secure.</li> <li>Practice for the Patient's safety</li> <li>Provide care to the Patients while moving.</li> <li>Demonstrate the use of Protective devices (restraints, safety devices)</li> </ul>	ward
	Corresponding NOS Codes HSS/ N9606, HSS / N 5124		
4.	Primary Medical Care Theory Duration (hh:mm) 02:00 Practical Duration (hh:mm) 02:00 Corresponding NOS Codes Community Health	<ul> <li>Describe Health related millennium development goals</li> <li>Identify and enlist essential components of Primary Healthcare</li> <li>Discuss the common Health problems in India</li> <li>Elaborate the Health Systems Infrastructure in IndiaDescribe the Maternal Child Care</li> <li>Elucidate Infant care routine</li> <li>Describes Family Planning method.</li> <li>Describes various Epidemic</li> <li>Analyze the role of Ambulance and Emergency</li> </ul>	Visit to primary health centre
5.	Immunization Theory Duration (hh:mm) 02:00 Practical Duration (hh:mm) 02:00 Corresponding NOS Codes Community Health	<ul> <li>Transport</li> <li>Define Immunity and</li> <li>describe the importance of the need for Immunization</li> <li>Discuss the importance of Universal Immunization Program</li> <li>Describe Pulse Polio Immunization Program</li> </ul>	Immunization kit, Universal immunization schedule
6.	Biomedical Waste Management Theory Duration	<ul> <li>Segregation of Biomedical Waste at source</li> <li>Describe Color Coding &amp; type of containers for disposal of Bio-Medical Waste</li> <li>Label For transport of Bio-Medical Waste</li> </ul>	Different coded color bins, different variety of bio medical







S.No	Module	Key Learning Outcomes	Equipment Required
	(hh:mm) 05:00 Practical Duration (hh:mm) 05:00 Corresponding NOS Codes Bridge Module	<ul> <li>Containers/Bags</li> <li>Describe the various types Spillages and procedures to deal with it.</li> </ul>	waste management, Visit to treatment plan of bio medical waste etc
7.	Emergency Medical Response Theory Duration (hh:mm) 03:00 Practical Duration (hh:mm) 05:00 Corresponding NOS Codes HSS/ N 9606, HSS / N 5112	<ul> <li>Describe chain of survival</li> <li>Demonstrate CPR</li> <li>Rescue of a child</li> <li>Demonstrate two rescuer CPR</li> </ul>	Emergency situations, crash cart trolley, O2 cylinder etc
8.	Structure And Function Of Human Body Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS / N5116, HSS / N 5117, HSS / N5118, HSS / N5119, HSS / N5120	<ul> <li>Differentiate different parts of body</li> <li>Explain organization of body cells, tissues, Systems, membranes and glands</li> <li>Describe Muscular Skeletal System</li> <li>Describe Digestive System</li> <li>Describe Respiratory System</li> <li>Describe Cardio Vascular</li> <li>System</li> <li>Describe Excretory System</li> <li>Describe Nervous System</li> <li>Describe Endocrine System, Sense Organ and Reproductive System</li> </ul>	Mannequin, charts, demonstration kits of different body parts, use of internet for learning different body parts







S.No	Module	Key Learning Outcomes	Equipment Required
9.	Body Mechanics Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 06:00 Corresponding NOS Codes HSS / N5116, HSS / N 5117, HSS / N5118, HSS / N 5119, HSS / N 5120, HSS / N / 5123	<ul> <li>Describe the kinetics of joints and movements</li> <li>Describe the mechanisms that affect movements in human body</li> <li>Demonstrate general principles of movements</li> <li>Describe precaution while transferring the patient</li> </ul>	Mannequin, charts, demonstration kits of different body mechanics, internet use
10.	Medical Terminology Theory Duration (hh:mm) 02:00 Practical Duration (hh:mm) 01:00 Corresponding NOS Codes HSS / N 5116 - HSS/N 5120	<ul> <li>Well acquainted with commonly use medical terminologies in respect to their job role</li> <li>Share usage of medical terminology with peers, patient and community</li> </ul>	Internet use or reference's use for medical terms
11.	Professional Behaviour In Home-Care Setting Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 01:00 Corresponding NOS Codes HSS / N 9603, HSS / N	<ul> <li>How to maintain peaceful environment.</li> <li>Learn General and Specific etiquettes to be observed on duty.</li> <li>Describe the importance of conservation of resources in medical facility.</li> </ul>	Use of internet to adopt best practises across the world for professional etiquettes







S.No	Module	Key Learning Outcomes	Equipment Required
	9604, HSS / N 9605, HSS / N 9607		
12.	Consent, Observing And Reporting Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 01:00 Corresponding NOS Codes HSS / N 5116-5124, HSS / N 9606	<ul> <li>Explain importance of observing and reporting the conditions of patient as well as taking consent while assisting the patient.</li> <li>Explain the importance of verbally informing the person in authority.</li> <li>Explain the importance and guidelines for documentation of different observations and informed consent of the patient.</li> <li>Explain the feedback mechanism from appropriate people like concerned doctors, carers and relatives</li> </ul>	Use of internet to adopt best practises across the world for professional etiquettes, sample forms and feedback forms
13.	Documentation Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 01:00 Corresponding NOS Codes HSS / N 5124, HSS / N 9605, HSS / N 9609	<ul> <li>Understand uses and importance of various records in healthcare set up &amp; how to obtain them during homecare.</li> <li>Explain various types of records to be maintained by HHA</li> <li>Demonstrate essential components of various records and method of documentation</li> </ul>	Use of internet to adopt best practises across the world for professional etiquettes, sample forms and feedback forms
14	Patient's Rights Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm)	<ul> <li>Explain patient's rights</li> <li>Learn the role of Home Health Aid in maintaining patient's rights</li> </ul>	internet use to learn patient rights







S.No	Module	Key Learning Outcomes	Equipment Required
15	01:00 Corresponding NOS Codes HSS / N 5116-5121, HSS / N 5124, HSS / N 9606 Patients Environment Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm)	<ul> <li>Describes essential articles required for patient's environment</li> <li>Describes articles required for safe and comfortable environment for the patient.</li> <li>Describes importance of comfort for patients health</li> <li>Describes importance of cleanliness</li> </ul>	Mock environment of diagnostic lab
	02:00 Corresponding NOS Codes HSS / N 5124, HSS / N 9606, HSS / N 9609		
16	First Aid Theory Duration (hh:mm) 02:00 Practical Duration (hh:mm) 03:00 Corresponding NOS Codes HSS/N 5124, HSS / N 9603	<ul> <li>Describe what to do in medical emergencies</li> <li>Describe components of first aid kit</li> <li>Describe common emergency conditions</li> </ul>	Patient safety tools such as wheel chairs, trolleys, side rails, PPE, First Aid kit, betadine, cotton, bandages, sanitizers, disinfectants etc.
17	Emergency Medical Response– II Theory Duration (hh:mm) 04:00 Practical Duration	<ul> <li>Describes Cardio Pulmonary Resuscitation</li> <li>Describes Chain of Survival</li> <li>Rescue of a child or Infant</li> <li>Demonstrate two rescuer CPR</li> </ul>	Patient safety tools such as wheel chairs, trolleys, side rails, PPE, First Aid kit, betadine, cotton, bandages, sanitizers,







S.No	Module	Key Learning Outcomes	Equipment Required
	(hh:mm) 05:00		disinfectants etc. Mock environment of
	Corresponding NOS Codes HSS/N 9606, HSS / N 5124		home based articles, emergency kits etc, patient safety kit, sample medicines
18	ROLE OF HHA IN SPECIAL CARE – Geriatric/Paralytic/Imm obile/Patients In Convalescence Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5116-5121, HSS / N 9606, HSS / N 5123	<ul> <li>Describes care provided to ill or terminally ill patients in relation to self needs of the patient or guidance related to oral medicine administration</li> <li>Describes care provided to elderly patients and patients during convalescence in relation to self needs of the patient or guidance related to oral medicine administration.</li> <li>Demonstrate care provided to physically challenged and handicapped personnel in relation to self needs of the patient or guidance related to oral medicine administration</li> </ul>	Patient safety tools such as wheel chairs, trolleys, side rails, PPE, First Aid kit, betadine, cotton, bandages, sanitizers, disinfectants etc. Mock environment of home based articles, emergency kits etc, patient safety kit, sample medicines
19	Measurements Theory Duration (hh:mm) 03:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5116-5120, HSS / N 5124	<ul> <li>Describe methods to measure vital parameters like pulse, BP, Temperature, Respiration, Height and Weight of patient</li> <li>Describe methods to measure Intake of fluid and food &amp; output of faeces, urine &amp; vomitus of patient</li> <li>Describe how to ensure privacy to patient while taking measurement and attending patient while on sitting / standing on scale</li> <li>Describe the various special situations came across during measurements of parameters</li> <li>Understand the common symptoms visible during deviation of vital parameters from normal</li> </ul>	BP Apparatus, Thermometer, pulse oximeter, inch tape, mannequins, normal readings of vital parameter
20	Dressing	Describes steps involved while dressing	Sample dresses, patient privacy







S.No	Module	Key Learning Outcomes	Equipment Required
	Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5118	<ul> <li>Ensure patients privacy while dressing</li> <li>Describe the difference in procedure of dressing in special situations like physical disability, infant, unconscious patient, etc</li> </ul>	details, mannequins of different sizes.
21	Infection Control & Prevention Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 9606, HSS / N 9609	<ul> <li>Identification of deviation from normal health</li> <li>Explain practices to curb infection</li> <li>Explain different types of spillage and their management</li> </ul>	Hand sanitizers, PPE, Hand washing techniques, steriliser, disinfectants etc
22	Bathing Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5116	<ul> <li>Describe importance of bathing</li> <li>Detail different types of bathing, frequency and time for bathing</li> <li>Enlist points to observe during bathing which need to be reported</li> <li>Understand need of perineal care.</li> <li>Understand need of after bath care</li> </ul>	Mannequins, mock environment of home based environment, kidney tray, patient daily care articles
23	Skin Care Theory Duration (hh:mm) 04:00 Practical Duration	<ul> <li>Describe skin as largest part of body, need, and functions in Human beings</li> <li>Identify rashes, abrasions, Dryness, changes in color, pressure areas, temperature, bruise and swelling</li> <li>Identify pressure sores, understand causes for pressure</li> </ul>	Mannequins, mock environment of home based environment, kidney tray,







S.No	Module	Key Learning Outcomes	Equipment Required
	(hh:mm) 04:00 Corresponding NOS Codes HSS/N 5116, HSS / N 5117	sores (Bed sores).	patient daily care articles, bio medical waste management
24	Oral Care Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5117, HSS / N 5119	<ul> <li>Describe oral care and advantages of good oral care</li> <li>Demonstrate steps of oral care/Hygiene</li> <li>Explain oral care in case of dentures</li> <li>Explain oral care for paralytic/immobile patient</li> </ul>	Mannequins, mock environment of home based environment, kidney tray, patient daily care articles, bio medical waste management
25	Hair And Nail Care Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5117	Describes Hair & nails care	Mannequins, mock environment of home based environment, kidney tray, patient daily care articles, bio medical waste management
26	Excreta Elimination Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5120, HSS / N 9609	<ul> <li>Understand process for excreta disposal in human body</li> <li>Understand care to be provided in case of urine and bowel Incontinence or patient with urinary catheter.</li> <li>Understand the special precautions to be taken in different situations</li> <li>Observation of urine and stools for routine as well as special reporting</li> </ul>	Mannequins, mock environment of home based environment, kidney tray, patient daily care articles, bio medical waste management







S.No	Module	Key Learning Outcomes	Equipment Required
27	Nutrition And Hydration Theory Duration (hh:mm) 03:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Code HSS/N 5119	<ul> <li>Understand concept of nutrition, nutrients and calories</li> <li>Understand support to patient while feeding</li> <li>Identify discomfort of patient and report to concerned person or authority immediately</li> <li>Identify the precautions required for before fulfilling the patient preference's</li> </ul>	Mannequins, mock environment of home based environment, kidney tray, patient daily care articles, bio medical waste management, RT tubes, sample food items
28	Positioning Theory Duration (hh:mm) 02:00 Practical Duration (hh:mm) 03:00 Corresponding NOS Codes HSS/N 5116-5120, HSS / N 5123	<ul> <li>Describe importance of positioning for a patient in treatment and recovery</li> <li>Describe commonly used positions</li> </ul>	Mannequin, trolley, wheel chair, home based environment
29	Transferring Theory Duration (hh:mm) 03:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5116-5120, HSS / N 5124	<ul> <li>Describe methods of transferring patient</li> <li>Understand usage of Wheel chair, stretcher, shifting of patient from bed to stretcher etc.</li> <li>Describe care to be taken while transferring patient</li> <li>Understand the special precautions to be taken in different situations</li> </ul>	Mannequin, trolley, wheel chair, home based environment
30	Mobility	Understand importance of physical movements for well	Stretcher,







S.No	Module	Key Learning Outcomes	Equipment Required
	Theory Duration (hh:mm) 03:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/N 5116-5120	<ul> <li>being.</li> <li>Describes usage of equipment's used for mobility and their maintenance</li> <li>Describe care while patient walking.</li> </ul>	patient trolley, mannequin, home based environment
31	Fall Prevention Theory Duration (hh:mm) 03:00 Practical Duration (hh:mm) 04:00 Corresponding NOS Codes HSS/ N 5124, HSS / N 5116-5120	<ul> <li>Describe standards for prevention of patient's fall</li> <li>Describe care to be taken to avoid fall in high risk patients</li> <li>Describe measures to be taken to prevent falls</li> <li>Describe action in event of a fall incident</li> </ul>	Mannequin, patient falls prevention devices, foot rest, bed rest etc
32	Special Procedures (In Brief) Theory Duration (hh:mm) 04:00 Practical Duration (hh:mm) 03:00 Corresponding NOS Codes HSS/N 5116, HSS / N 5119, HSS / N 5120, HSS / N 9606	<ul> <li>Describe standard procedures for administration of oxygen</li> <li>Describe the special feeding &amp; elimination methods like enema, catheterization, suppositories, ryle's tube etc.</li> <li>Describe basic knowledge of IV set ups</li> <li>Describe various types of samples like urine, stool, sputum, etc. along with their collection methodology.</li> <li>Describe various routes, frequency and types of drug administration like IV, IM, Sublingual, Subcutaneous, oral, topical, TDS, BD, OD, SOS, QID, HS, etc.</li> </ul>	Mannequins, mock environment of home based environment, kidney tray, patient daily care articles, bio medical waste management, enema, Ryle's tube, suppositories, IV line samples, charts of







S.No	Module	Key Learning Outcomes				
			medicines dose			
33.	Soft Skills And Communication	<ul> <li>Understand need for customer service and service excellence in Medical service</li> <li>Understand work ethics in home set/health care set up</li> </ul>	Self-learning and understanding			
	Theory Duration (hh:mm) 08:00	Learn objection handling				
	Practical Duration (hh:mm)					
	12:00					
	Corresponding NOS Codes HSS/N 5122 &HSS/N 9604					
	Total Duration	Unique Equipment Required:				
	Theory Duration (hh:mm) 120:00 Practical Duration (hh:mm) 120:00 OJT Duration (hh:mm) 120:00	Little Anne, Ambu Mask (Adult), AED Trainer with Adult Pad, P Watch, Oxygen Cylinder, Oxygen Key, Oxygen Cylinder Trolley Bedside Locker, Cardiac Table, Bed Sheet, Pillow, Pillow Cover, Chair, Wheel Chair, Walker, Crutch, Table (3 ft by 6 ft), Cupboar Cane, Back Rest, Foot Rest, Steel Basin, Bed pan, Urinal (Male & Cushion, Sand Bag, Weighing Machine, Fire Extinguisher, Oral Tray, Artery Forcep, Dissecting Forcep, Scissor, Nail Cutter, Na Cervical Collar, Spine Board, Steel Plate, Steel Glass, Steel Bow Jug, Bath Tub, Kidney Tray, IV Stand, Measuring Glass, Measur Projector, White Board, Extension Cord, Speaker, Writing Pad, Gown, Gloves (disposable) – packet, Gloves (surgical) – packet, Bottle, Mask – packet, Shoe Cover – packet, Hair Cap – packet, Sponge Cloth, Wet Wipes – packet, Comb, Tooth Brush, Tooth Shampoo Bottle, Bath Soap, Talcum powder, Different Colur P Dustbins, Uro bag, Sample Collection Bottle, Gauze Piece (4X4, Solution Bottle, Cotton Rolls, Normal Saline Bottle, Micropore, Concentrate, Hydrogen Peroxide Bottle, Cleaning Solution (Col destroyer, Syringe Sterilizer, Needle burner, Thermometer, Syr Monitoring Machine, Call bell, Enamel basin, Hot Water Bottle, forceps, Drum, Suction Apparatus, Folley catheter, Euro bags, S Ryle's tube, Vaccutainer (red/black/violet), Tourniquet, Examina sheet, Draw Sheet <b>Class Room equipped with following arrangements:</b> Interactive lectures & Discussion	, Hospital Bed, Blanket, Student d, Stretcher, & Female), Air Care Set, Steel il Filer, Splint, I, Spoon, Steel ing Tape, Goggles, Towel, Liquid Soap Mackintosh, paste, Hair Oil, lastic Bags with ), Betadine Spatula, Blood in), Syringe ringe 50 cc/ml, B.P. Ice caps, Transfer Suction Catheter,			
		<ul> <li>Brain Storming</li> <li>Charts &amp; Models</li> <li>Activity</li> <li>Video presentation</li> </ul>				





S.No	Module	Key Learning Outcomes	Equipment Required
		Skill lab equipped with following arrangements:	
		<ul> <li>Unique equipment as enlisted at the last</li> <li>Practical Demonstration of various functions</li> <li>Case study</li> <li>Role play</li> </ul>	
		Visit to Hospital	
		Field assignment	

Grand Total Course Duration: 360:00 Hours (240Hours for Class Room & Skill Lab Training + 120 Hours OJT/Internship/Clinical or Laboratory Training)

(This syllabus/ curriculum has been approved by <u>SSC: Healthcare Sector Skill Council)</u>





### Trainer Prerequisites for Job role: "Home Health Aide" mapped to Qualification Pack: "HSS/Q5102", version 1.0

Sr. No.	Area	Details
1	Description	To deliver accredited training service, mapping to the curriculum detailed above, in accordance with the Qualification Pack <u>"HSS/Q5102"</u> .
2	Personal Attributes	Aptitude for conducting training, and pre/ post work to ensure competent, employable candidates at the end of the training. Strong communication skills, interpersonal skills, ability to work as part of a team; a passion for quality and for developing others; well-organised and focused, eager to learn and keep oneself updated with the latest in the mentioned field.
3	Minimum Educational Qualifications	<ul> <li>NSQF Level 4 certified Home Health Aide with 6 years of experience</li> <li>B.Sc. (Nursing) with one year of experience</li> <li>GNM with three years of experience</li> </ul>
4a	Domain Certification	Certified for Job Role: " <u>Home Health Aide</u> " mapped to QP: <u>"HSS/Q5102"</u> , version 1.0 with scoring of minimum 80%.
4b	Platform Certification	Recommended that the Trainer is certified for the Job Role: "Trainer", mapped to the Qualification Pack: "MEP/Q0102" with scoring of minimum 80%.
5	Experience	<ul> <li>Minimum 1 year site experience for B.Sc. (Nursing) Or</li> <li>Minimum 3 years site experience for GNM Or</li> <li>Minimum 6 years site experience for NSQF Level 4 certified Home Health Aide <u>HSS/Q5102, version 1.0</u></li> </ul>





#### ment Transforming the skill landscape

#### **Annexure: Assessment Criteria**

Assessment Criteria for Home Health Aide					
Job Role	Home Health Aide				
Qualification Pack Code	HSS/Q5102, version 1.0				
Sector Skill Council	Healthcare Sector Skill Council				

Sr. No.	Guidelines for Assessment
1.	Criteria for assessment for each Qualification Pack will be created by the Sector Skill Council. Each Performance Criteria (PC) will be assigned marks proportional to its importance in NOS. SSC will also lay
	down proportion of marks for Theory and Skills Practical for each PC
2.	The assessment for the theory part will be based on knowledge bank of questions created by the SSC
3.	Individual assessment agencies will create unique question papers for theory part for each candidate at each examination/training center (as per assessment criteria below)
4.	Individual assessment agencies will create unique evaluations for skill practical for every student at each examination/training center based on this criteria
5.	To pass the Qualification Pack, every trainee should score as per assessment grid.
6.	In case of successfully passing only certain number of NOS's, the trainee is eligible to take subsequent assessment on the balance NOS's to pass the Qualification Pack

Skills Practical and Viva (80% weightage)					
	Marks Allotted				
Grand Total-1 (Subject Domain)	400				
Grand Total-2 (Soft Skills and Communication)	100				
Grand Total-(Skills Practical and Viva)	500				
Passing Marks (70% of Max. Marks)	350				
	Theory (20% weightage)				
	Marks Allotted				
Grand Total-1 (Subject Domain)	80				
Grand Total-2 (Soft Skills and Communication)	20				
Grand Total-(Theory)	100				
Passing Marks (50% of Max. Marks)	50				
Grand Total-(Skills Practical and Viva + Theory)	600				
Overall Result	Criteria is to pass in both theory and practical individually. If fail in any one of them, then candidate is fail				
Detailed Break Up of Marks	Skills Practical & Viva				
Subject Domain	Pick any 2 NOS each of 200 marks totaling 400				







	Assessment Criteria for the Assessable Outcomes	Total	Ου	Marks	Marks Allocation	
Assessable Outcomes		Marks (400)	t Of	Viva	Skills Practical	
1. HSS/ N 5116 (Assist patient in bathing)	PC1.Maintain the patient privacy and encourage patient do as much as possible to promote independence		10	o	10	
	PC2.Identify the type of bath that is best suited as per the guidelines, based on the patient condition and comfort		50	10	40	
	PC3.Check water temperature before patient checks in		10	5	5	
	PC4.Follow standards precautions when performing perennial care or when bathing a patient with skin lesion and rashes		50	10	40	
	PC5. Dry patient skin by patting with a towel which decreases friction and prevents skin breakdown	200	4	0	4	
	PC6. Never leave a patient unattended in bath room		4	2	2	
	PC7. Wash from cleanest to dirtiest		10	2	8	
	PC8. Observe and report unusual findings to the nurse		20	2	18	
	PC9. Offer patient back rub after bathing and at bed time to stimulate circulation and relieve stress		10	10	o	
	PC10. Apply lotion to dry skin if requested		2	2	0	
	PC11. Clean tub shower chair before and after each use		20	10	10	
	PC12. Always check each patients skin after bathing		10	10	0	
	Total		20 0	63	137	
2. HSS/ N 5117 (Assist patient in grooming)	PC1. Maintain the patient's privacy and encourage patient do as much as possible to promote independence		10	0	10	
	PC2. Show patient how they look after the grooming task is finished	200	20	0	20	
	PC3. Use standard precautions and protocols for shaving and cutting nails		50	10	40	







	PC4. Perform duties gently to avoid injuries especially during shaving, brushing and hair styling		50	10	40	
	PC5. Rinse toothpaste thoroughly from the mouth after brushing		40	5	35	
	PC6. Store dentures in cool water with patients name to avoid confusion		30	5	25	
	Total		20 0	30	170	
3.HSS/ N 5118(Assist patient in dressing up)	PC1. Maintain the patient privacy and encourage patient do as much as possible to promote independence		40	10	30	
	PC2. Fasten the clothing with elastic fasteners	200	12 0	20	100	
	PC3. Ensure that the footwear fits correctly		40	10	30	
	Total		20 0	40	160	
4. HSS/ N 5119 (Support patient to eat and drink)	PC1. Make the patient comfortable and encourage eating as recommended		5	0	5	
	PC2. Check menu card to verify the diet, restrictions, likes and dislikes of the patient		30	5	25	
	PC3. Feed through spoon		5	2	3	
	PC4. Assist in elimination and oral care prior to feeding		30	5	25	
	PC5. Wash hands and mouth after feeding		30	5	25	
	PC6. Measure input and record them	200	30	5	25	
	PC7. During feeding observe and ensure that:					
	a. Elimination process is completed before feeding	-	10			
	b. Oral care and grooming is performed before feeding		10	10		
	c. The patient is comfortable when being fed		10	12	28	
	d. The food provided is according to the dietary prescription of the prescribing physician or dietician		10			







	PC8. Patient is not having symptoms of distress like coughing and regurgitation		30	6	24
	Total		20 0	40	160
5. HSS/ N 5120 (Assist patient in maintaining	PC1. Promptly respond to patients elimination needs		4	1	3
normal elimination)	PC2. Assist a mobile patient in moving to the toilet and provide support like giving toilet paper if required or stabilise the commode		50	10	40
	PC3. Wipe the patient and wash hands to prevent infection	200	50	10	40
	PC4. Use equipment correctly to prevent discomfort or injury		50	10	40
	PC5. Ensure/Maintain patients privacy at all times during the procedure	-	6	0	6
	PC6. Record changes in colour or texture of the elimination and report usual findings immediately		40	5	35
	Total		20 0	36	164
7.HSS/ N 5121 (Prevent and control infection)	PC1. Know all procedures required for infection control		30	30	0
	PC2. Follow standard precautions	-	50	10	40
	PC3. Be aware of rules to dispose of biomedical waste and sharps PC4. Follow high level of personal hygiene		50	20	30
			20	2	18
	PC5. Practice medical asepsis	200	20	2	18
	PC6. Follow infection control procedures and should ensure that:				
	o All standard precautions and procedures are followed		10		
	o Protective gears are used while getting in contact with the patient		10	6	24
	o Consider all blood, body fluids and excreta contaminated		10		
	Total		20 0	70	130
8. HSS/ N 5123( Enable	PC1. Establish a supportive	200	10	5	5







geriartic/paralytic/immo bile patients to cope with changes to their	relationship with the patient, and agree with them the roles and resposiblities of their carers			
health and well being)	PC2. Communicate with patient and their carers in an appropriate manner	10	5	5
	PC3. Encourage the patient to seek clarification of any procedures, information and advice relevant to them	10	0	10
	PC4. Obtain an informed consent of the patient for the actions undertaken on their behalf, and agree on the information which may be passes to to others	20	0	20
	PC5. Obtain information from the patient and their carers on the way in which the patient's need are met	10	0	10
	PC6. Identify any areas where support for the patient can be improved	20	10	10
	PC7. Identify and prioritise actions required if the patient's needs are not being appropriately addressed	20	0	20
	PC8. Present any concerns that cannot be resolved in an appropriate way to appropriate people	20	20	0
	PC9. Keep the patient and their carers informed about the progress in resolving any concerns, and anticipaited timescales for any outcomes	10	5	5
	PC10. Produce records and reports that are clear, comprehensive and accurate, and maintain the security and confidentiality of information	10	5	5
	PC11. Explore with the patient the nature of the changes to their health and well- being, and discuss with them and their carers about how they feel about these changes	10	10	0
	PC12. Explain clearly to the patient and their carers, the reasons for the changes to their health and well being and the consequences arising from	10	Ο	10







	them				
	PC13. Respond sensitively to any issues raised by the patient, and report any issues that cannot be resolved to the appropraite people		20	0	20
	PC14. Ensure that all the relevant agencies are provided with the information they need to help the patient and their carers to cope with the change process		10	10	0
	PC15. Support the patient and their carers to monitor the assistance they are receiving to cope with the change, and identify any areas where this can be improved		5	5	0
	PC16. Ensure that all the appropriate people are encouraged to provide feedback on how the patient and their carers are coping with change		5	5	0
	TOTAL		20 0	80	120
9. HSS/ N 5124 (Implement interventions with geriatric/paralytic/immo bile patient at risk of falls)	PC1. Communicate with patient and their carers in an appropriate manner, and encourage them to seek clarifiacations of any procedures, information and advice relevant to them		20	10	10
	PC2. Explore the needs and expectations of the patient and his/her goals for the intervention		10	10	0
	PC3. Identify current or previous interventions that the patient may have experienced and the immediate requirements of his/her plan	200	10	5	5
	PC4. Obtain the valid consent of the patient for the actions to be undertaken on his/her behalf, and agree upon the information which may be passed on to others		10	0	10
	PC5. Discuss and agree the role of the patient and his/her carers in achieving the goals of the agreed intervention		10	10	0
	PC6. Make arrangements for the intervention that are consistent with the patient's priority and his/her		10	5	5







	specific requirements							
	PC7. Ensure the environment use the intervention is suitable, and t the privacy and dignity of the pat is protected				10	5	5	5
	PC8. Implement the in safe and effective mar evidencebased practic processes	nner, usin			20	C	)	20
	PC9. Implement the in manner that is consist patient's needs and sp requirements, and enc effective participation	ent with t ecific courage t	the		10	C	)	10
	PC10. Minimise any dia patient within the con- imposed by the interve	straints			30	10	D	20
	PC11. Encourage the carers to give appropriate support to the patient throughout the intervention PC12. Monitor the effects of the intervention on the patient throughout the process, and ident any indications of increased risk			10	10	C	)	10
			entify		10	10	C	0
	PC13. Take appropriat the effects of the inter as beneficial as expect	vention a			20	10	D	10
	PC 14. Work in partner patient and his carers outcomes of the interv relation to the goals ag the outset	to assess vention ir	the		10	С	)	10
	PC 15. Produce records and reports that are clear, comprehensive, and accurate and maintain the security and confidentiality of information			10	5	;	5	
	TOTAL			20 0	99	0	110	
Grand Tot	tal-1 (Subject Domain)					4	00	·
Soft Skills and Communication			oart 2 as p	er NOS		ect dom	nd pick one field nain picked each 100	
Assessable Outcomes	Assessment Criteria	Tota	al Marks	(100)	Out	Of	Marl	ks Allocation







	for the Assessable Outcomes			Viva	Observation/ Role Play				
Part 1 (Pick one field ra	Part 1 (Pick one field randomly carrying 50 marks)								
1. Communication & Pr	oactiveness								
HSS/ N 5122: Communicate with geriartic/paralytic/im mobile patients to cope with changes to their health and well being	PC1. Introduce himself to the geriatric/paralytic/ immobile patient and their carers, and provide all the relevant information necessary to begin working with them		3	0	3				
	PC2. Ensure that the geriatric/paralytic/ immobile patient and their carers are made to feel comfortable, and that they understand that their needs are made to feel comfortable, and that they understand their needs are important and are being addressed	50	3	0	3				
	PC3. Explain to the geriatric/paralytic/ immobile patient and their carers, his/her roles and resposibilities in relation to their care, and outline the constraints that could limit the movement	20	3	O	3				
PC4. Discuss with geriatric/paralytic/ immobile patient and their carers their own roles and resposibilities for the care of the patient		3	0	3					
	PC5. Respond to any concerns that the geriatric/paralytic/im mobile patients and		10	3	7				







their carers r	night			
have about h ability to wo them	nis/her			
PC6. Encours geriatric/par- immobile pa their carers t questions an clarification issues	alytic/ tient and o ask d to seek	5	2	3
PC7. Attemp establish a ra with the geriatric/para immobile pa their carers t enables a go relationship	apport alytic/ tient and hat	8	3	5
PC8. Respon sensitively to issues raised geriatric/par immobile pa their carers	o any by the alytic/	2	0	2
PC9. Respect human right: geriatric/par immobile pa their carers	s of the alytic/	2	0	2
PC10. Provid information contact the s obtain assist required	on how to service to	5	2	3
PC11. Identif communicat differences t and try to ad these will inf communicat methods	ion hat exist, dress luence	2	1	1
PC12. Discus purpose of communicat the patient a carers, and ic	ion with nd their	2	2	0







Communication and	their preferred ways of communicating PC13. Confirm with the geriatric/paralytic/ immobile patient who they wish to be involved in the communication To Proactiveness Total	otal 50	2 50 50	0 13 13	2 37 37
2. ATTITUDE					
HSS/ N 9603 (Act within the limits of one's competence and authority)	HSS/ N 9603 (ActPC1. Adhere tovithin the limits oflegislation, protocolsone's competence andand guidelines	2	o	2	
	PC2. Work within organisational systems and requirements as appropriate to one's role		2	0	2
	PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority <b>30</b>	8	4	4	
	PC4. Maintain competence within one's role and field of practice		2	0	2
	PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice		4	2	2
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times		4	2	2







	PC7. Identify and manage potential and actual risks to the quality and safety of practice PC8. Evaluate and reflect on the quality of one's work and make continuing improvements		4	2	2
	Т	otal	30	12	18
HSS/ N 9607 (Practice Code of conduct while performing duties)	PC1. Adhere to protocols and guidelines relevant to the role and field of practice		3	1	2
	PC2. Work within organisational systems and requirements as appropriate to the role		3	1	2
	PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority		3	1	2
	PC4. Maintain competence within the role and field of practice	20	1	0	1
	PC5. Use protocols and guidelines relevant to the field of practice		4	2	2
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times		1	o	1
	PC7. Identify and manage potential and actual risks to the quality and patient		1	ο	1







	safety				
	PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem		4	2	2
	Т	otal	20	7	13
Attitud	le Total	50	50	19	31
3. Attiquete					
HSS/ N 9605 (Manage work to meet requirements)	PC1. Clearly establish, agree, and record the work requirements		10	5	5
	PC2. Utilise time effectively		10	о	10
	PC3. Ensure his/her work meets the agreed requirements	50	10	0	10
	PC4. Treat confidential information correctly		10	10	0
	PC5. Work in line with the organisation's procedures and policies and within the limits of his/her job role		10	5	5
	Т	otal	50	20	30
Attique	te Total	50	50	20	30
Part 2 (Pick one field as	per NOS marked carryin	g 50 marks)			
1. Team Work (Evaluat	e with NOS: HSS/N/5123)				
HSS/ N 9604 (Work effectively with others)	PC1. Communicate with other people clearly and effectively		3	0	3
	PC2. Integrate one's work with other people's work effectively	50	3	0	3
	PC3. Pass on essential information to other people on timely basis		3	0	3
	PC4. Work in a way that shows respect for		3	o	3







	other people				
	PC5. Carry out any commitments made to other people		6	6	o
	PC6. Reason out the failure to fulfil commitment		6	6	0
	PC7. Identify any problems with team members and other people and take the initiative to solve these problems		16	8	8
	PC8. Follow the organisation's policies and procedures		10	4	6
	T	otal	50	24	26
	Team Work Total	50	50	24	26
2. Safety management	(Evaluate with NOS: HSS	5/N/5124,5116,5117,5118,5	119,5120)		
HSS/ N 9606 (Maintain a safe, healthy, and secure working environment)	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements		6	2	4
	PC2. Comply with health, safety and security procedures for the workplace		4	0	4
	PC3. Report any identified breaches in health, safety, and security procedures to the designated person	50	4	3	1
	PC4. Identify potential hazards and breaches of safe work practices		6	4	2
	PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority		6	4	2







	PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected		6	4	2
	PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently		6	2	4
	PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person		6	4	2
	PC9. Complete any health and safety records legibly and accurately		6	2	4
	T	otal	50	25	25
	Safety Management Total	50	50	25	25
3. Waste Management	(Evaluate with NOS: HS	5/N/5120,5121)	•		
HSS/ N 9609 (Follow biomedical waste disposal protocols)	PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type		6	2	4
	PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category	50	8	4	4







PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements	4	2	2
PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste	8	4	4
PC5. Check the accuracy of the labelling that identifies the type and content of waste	4	2	2
PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal	4	4	ο
PC7. Check the waste has undergone the required processes to make it safe for transport and disposal	4	4	O
PC8. Transport the waste to the disposal site, taking into consideration its associated risks	4	2	2
PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures	4	2	2
PC10. Maintain full, accurate and legible records of information and store in correct	4	4	0







	location in line with current legislation, guidelines, local policies and protocols					
	T	otal	50	30	20	
	Waste Management Total	50	50	30	20	
	Grand Total-2 (Soft Skills and Communication) 100					
Detailed Brea	ak Up of Marks		Theory			
Subject Domain	Sele	ct any 40 PCs each carryi	ng 2 marks to	taling 8d	)	
Assessable	Assessment Criter	ia for the Assessable Ou	tcomes	М	arks Allocation	
Outcomes					Theory	
1. HSS/ N 5116 ( Assist patient in bathing)	PC1.Maintain the patient much as possible to prom	privacy and encourage particular privacy and encourage particular particular particular particular particular p	atient do as		2	
	, ,,	oath that is best suited as patient condition and con	•		2	
	PC3.Check water temperature before patient checks in				0	
	PC4.Follow standards pre care or when bathing a pa		2			
	PC5. Dry patient skin by p friction and prevents skin		0			
	PC6. Never leave a patier	nt unattended in bath roo	m	0		
	PC7. Wash from cleanest	to dirtiest		2		
	PC8. Observe and report	unusual findings to the nu	Jrse	2		
	PC9. Offer patient back rub after bathing and at bed time to stimulate circulation and relieve stress			2		
	PC10. Apply lotion to dry	skin if requested			0	
	PC11. Clean tub shower c	hair before and after each	n use		2	
	PC12. Always check each	patients skin after bathin	ıg		2	
2. HSS/ N 5117 (Assist patient in grooming)	PC1. Maintain the patient much as possible to prom	t's privacy and encourage note independence	patient do as		0	
	PC2. Show patient how t finished	PC2. Show patient how they look after the grooming task is finished				
	PC3. Use standard precautions and protocols for shaving and cutting nails				2	
	PC4. Perform duties gent shaving, brushing and ha	tly to avoid injuries especi ir styling	ally during	0		
	PC5. Rinse toothpaste th	oroughly from the mouth	after		0	







	brushing	
	PC6. Store dentures in cool water with patients name to avoid confusion	2
3.HSS/ N 5118 (Assist patient in dressing up)	PC1. Maintain the patient privacy and encourage patient do as much as possible to promote independence	0
	PC2. Fasten the clothing with elastic fasteners and ensure that the footwear fits correctly	0
	PC3. Ensure that the footwear fits correctly	2
4. HSS/ N 5119 (Support individuals	PC1. Make the patient comfortable and encourage eating as recommended	0
to eat and drink)	PC2. Check menu card to verify the diet, restrictions, likes and dislikes of the patient	2
	PC3. Feed through spoon	2
	PC4. Assist in elimination and oral care prior to feeding	2
	PC5. Wash hands and mouth after feeding	2
	PC6. Measure input and record them	2
	PC7. During feeding observe and ensure that:	2
	a. Elimination process is completed before feeding	2
	b. Oral care and grooming is performed before feeding	2
	c. The patient is comfortable when being fed	0
	d. The food provided is according to the dietary prescription of the prescribing physician or dietician	0
	PC8. Patient is not having symptoms of distress like coughing and regurgitation	2
5. HSS/ N 5120 (Assist	PC1. Promptly respond to patients elimination needs	0
patient in maintaining normal elimination)	PC2. Assist a mobile patient in moving to the toilet and provide support like giving toilet paper if required or stabilise the commode	2
	PC3. Wipe the patient and wash hands to prevent infection	2
	PC4. Use equipment correctly to prevent discomfort or injury	2
	PC5. Ensure/Maintain patients privacy at all times during the procedure	0
	PC6. Record changes in colour or texture of the elimination and report usual findings immediately	2
7.HSS/ N 5121	PC1. Know all procedures required for infection control	2
(Prevent and control infection)	PC2. Follow standard precautions	2
, 	PC3. Be aware of rules to dispose of biomedical waste and sharps	2







	PC4. Follow high level of personal hygiene	2
	PC5. Practice medical asepsis	2
	PC6. Follow infection control procedures and should ensure that:	2
	o All standard precautions and procedures are followed	0
	o Protective gears are used while getting in contact with the patient	2
	o Consider all blood, body fluids and excreta contaminated	0
8. HSS/ N 5123( Enable	PC1. Establish a supportive relationship with the patient, and agree with them the roles and resposiblities of their carers	0
geriartic/paralytic/im mobile patients to cope with changes to	PC2. Communicate with patient and their carers in an appropriate manner	0
their health and well being)	PC3. Encourage the patient to seek clarification of any procedures, information and advice relevant to them	0
	PC4. Obtain an informed consent of the patient for the actions undertaken on their behalf, and agree on the information which may be passes to to others	2
	PC5. Obtain information from the patient and their carers on the way in which the patient's need are met	0
	PC6. Identify any areas where support for the patient can be improved	2
	PC7. Identify and prioritise actions required if the patient's needs are not being appropriately addressed	0
	PC8. Present any concerns that cannot be resolved in an appropriate way to appropriate people	0
	PC9. Keep the patient and their carers informed about the progress in resolving any concerns, and anticipaited timescales for any outcomes	0
	PC10. Produce records and reports that are clear, comprehensive and accurate, and maintain the security and confidentiality of information	2
	PC11. Explore with the patient the nature of the changes to their health and well- being, and discuss with them and their carers about how they feel about these changes	0
	PC12. Explain clearly to the patient and their carers, the reasons for the changes to their health and well being and the consequences arising from them	0
	PC13. Respond sensitively to any issues raised by the patient, and report any issues that cannot be resolved to the	0







	appropraite people	
	PC14. Ensure that all the relevant agencies are provided with the information they need to help the patient and their carers to cope with the change process	2
	PC15. Support the patient and their carers to monitor the assistance they are receiving to cope with the change, and identify any areas where this can be improved	0
	PC16. Ensure that all the appropriate people are encouraged to provide feedback on how the patient and their carers are coping with change	0
9. HSS/ N 5124( Implement interventions with geriartic/paralytic/im	PC1. Communicate with patient and their carers in an appropriate manner, and encourage them to seek clarifiacations of any procedures, information and advice relevant to them	0
mobile patients at risk of falls)	PC2. Explore the needs and expectations of the patient and his/her goals for the intervention	0
	PC <sub>3</sub> . Identify current or previous interventions that the patient may have experienced and the immediate requirements of his/her plan	2
	PC4. Obtain the valid consent of the patient for the actions to be undertaken on his/her behalf, and agree upon the information which may be passed on to others	2
	PC5. Discuss and agree the role of the patient and his/her carers in achieving the goals of the agreed intervention	2
	PC6. Make arrangements for the intervention that are consistent with the patient's priority and his/her specific requirements	0
	PC7. Ensure the environment used for the intervention is suitable, and that the privacy and dignity of the patient is protected	0
	PC8. Implement the intervention in a safe and effective manner, using evidencebased practices and processes	0
	PC9. Implement the intervention in a manner that is consistent with the patient's needs and specific requirements, and encourage their effective participation	0
	PC10. Minimise any discomfort to the patient within the constraints imposed by the intervention method	0
	PC11. Encourage the carers to give appropriate support to the patient throughout the intervention	0
	PC12. Monitor the effects of the intervention on the patient throughout the process, and identify any indications of increased risk	0







	PC13. Take appropriate action where the effects of the intervention are not as beneficial as expected		0
	PC 14. Work in partnership with the patient and his carers to assess the outcomes of the intervention in relation to the goals agreed upon at the outset		0
	PC 15. Produce records and reports that are clear, comprehensive, and accurate and maintain the security and confidentiality of information		2
	Grand Total-1 (Subject Domain)		80
Soft Skills and Communication	Select any 10 PCs each carrying 2 marks total	ling 20	
Assessable	Assessment (riferia for the Assessable ()utcomes		Marks Allocation
Outcomes			Theory
1. HSS/ N 5122: Communicate with geriartic/paralytic/im mobile patients and their carers	PC1. Introduce himself to the geriatric/paralytic/ immobile patient a carers, and provide all the relevant information necessary to begin w with them		2
	PC2. Ensure that the geriatric/paralytic/ immobile patient and their carers are made to feel comfortable, and that they understand that their needs are made to feel comfortable, and that they understand their needs are important and are being addressed		2
	PC3. Explain to the geriatric/paralytic/ immobile patient and their ca his/her roles and resposibilities in relation to their care, and outline constraints that could limit the movement		0
	PC4. Discuss with geriatric/paralytic/ immobile patient and their car own roles and resposibilities for the care of the patient	ers their	0
	PC5. Respond to any concerns that the geriatric/paralytic/immobile patients and their carers might have about his/her ability to work wi	th them	0
	PC6. Encourage the geriatric/paralytic/ immobile patient and their carers to ask questions and to seek clarification on any issues		0
	PC7. Attempt to establish a rapport with the geriatric/paralytic/ imn patient and their carers that enables a good relationship	nobile	0
	PC8. Respond sensitively to any issues raised by the geriatric/paraly immobile patient and their carers	tic/	2
	PC9. Respect the human rights of the geriatric/paralytic/ immobile p and their carers	oatient	0
	PC10. Provide clear information on how to contact the service to ob assistance if required	tain	2
	PC11. Identify any communication differences that exist, and try to	address	2







	these will influence communication methods	
	PC12. Discuss the purpose of communication with the patient and their carers, and identify their preferred ways of communicating	0
	PC13. Confirm with the geriatric/paralytic/ immobile patient who they wish to be involved in the communication	0
3. HSS/ N 9603 (Act within the limits of one's competence and authority)	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice	2
	PC2. Work within organisational systems and requirements as appropriate to one's role	0
	PC <sub>3</sub> . Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority	0
	PC4. Maintain competence within one's role and field of practice	2
	PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice	2
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times	2
	PC7. Identify and manage potential and actual risks to the quality and safety of practice	2
	PC8. Evaluate and reflect on the quality of one's work and make continuing improvements	2
4. HSS/ N 9604	PC1. Communicate with other people clearly and effectively	2
(Work effectively with others)	PC2. Integrate one's work with other people's work effectively	2
	PC3. Pass on essential information to other people on timely basis	2
	PC4. Work in a way that shows respect for other people	2
	PC5. Carry out any commitments made to other people	0
	PC6. Reason out the failure to fulfil commitment	2
	PC7. Identify any problems with team members and other people and take the initiative to solve these problems	0
	PC8. Follow the organisation's policies and procedures	2
5. HSS/ N 9605	PC1. Clearly establish, agree, and record the work requirements	2
(Manage work to meet requirements)	PC2. Utilise time effectively	0
meet requirements)	PC3. Ensure his/her work meets the agreed requirements	2
	PC4. Treat confidential information correctly	2
	PC5. Work in line with the organisation's procedures and policies and within the limits of his/her job role	0
6. HSS/ N 9606 (Maintain a safe,	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements	2
healthy, and secure	PC2. Comply with health, safety and security procedures for the workplace	0







	1	
working environment)	PC3. Report any identified breaches in health, safety, and security procedures to the designated person	ο
	PC4. Identify potential hazards and breaches of safe work practices	2
	PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority	2
	PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected	O
	PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently	2
	PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person	2
	PC9. Complete any health and safety records legibly and accurately	2
7. HSS/ N 9607 (Practice Code of	PC1. Adhere to protocols and guidelines relevant to the role and field of practice	2
conduct while performing duties)	PC2. Work within organisational systems and requirements as appropriate to the role	o
	PC <sub>3</sub> . Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority	2
	PC4. Maintain competence within the role and field of practice	2
	PC5. Use protocols and guidelines relevant to the field of practice	0
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times	2
	PC7. Identify and manage potential and actual risks to the quality and patient safety	2
	PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem	2
8. HSS/ N 9609 (Follow biomedical waste disposal protocols)	PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type	2
	PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste	2
	PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements	0
	PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste	0
	PC5. Check the accuracy of the labelling that identifies the type and content of waste	0
	PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal	2





PC7. Check the waste has undergone the required processes to make it safe for transport and disposal	0
PC8. Transport the waste to the disposal site, taking into consideration its associated risks	2
PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures	2
PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols	2
Grand Total-2 (Soft Skills and Communication)	20