









# **Geriatric Care Assistant**

QP Code: HSS/Q6001

Version: 2.0

NSQF Level: 4

Healthcare Sector Skill Council | 520, DLF Tower A, 5th Floor, Jasola District Centre New Delhi - 110025









# **Contents**

HSS/Q6001: Geriatric Care Assistant	. 3
Brief Job Description	
Applicable National Occupational Standards (NOS)	
Compulsory NOS	. 3
Qualification Pack (QP) Parameters	
HSS/N6001: Implement Interventions to prioritize safety of geriatric	. 5
HSS/N6002: Assist in routine checkup and vital parameters measurement	11
HSS/N6003: Support geriatrics in maintaining daily living activities	16
HSS/N6004: Assist to cope up with the ill health conditions and promote rehabilitation	25
HSS/N9615: Maintain interpersonal relationship with patients, colleagues and others	33
HSS/N9616: Maintain professional & medico-legal conduct	39
HSS/N9617: Maintain a safe, healthy and secure working environment	45
HSS/N9618: Follow infection control policies & procedures including biomedical waste disposal	
protocols	50
Assessment Guidelines and Weightage	55
Assessment Guidelines	
Assessment Weightage	56
Acronyms	57
Glossary	58









### **HSS/Q6001: Geriatric Care Assistant**

#### **Brief Job Description**

Provides routine individualized care to geriatrics at hospitals/ home set up/old age homes/community centers etc. They assist in maintaining activities of daily living for geriatrics & work in collaboration with healthcare team, individuals and care takers to deliver the prescribed healthcare services.

#### **Personal Attributes**

The individual should be willing to work with geriatrics. The work ethics characterized by dedication, persistence, patience, coordination & empathy. He/she should be able to guide and supervise other associated staff for effective care. It is also important for the individual to have a good level of physical fitness & healthy body with well-maintained hygiene. The attributes such as cooking, driving & IT skills are preferential. English speaking with soft skills is desirable.

#### **Applicable National Occupational Standards (NOS)**

#### **Compulsory NOS:**

- 1. HSS/N6001: Implement Interventions to prioritize safety of geriatric
- 2. HSS/N6002: Assist in routine checkup and vital parameters measurement
- 3. HSS/N6003: Support geriatrics in maintaining daily living activities
- 4. HSS/N6004: Assist to cope up with the ill health conditions and promote rehabilitation
- 5. HSS/N9615: Maintain interpersonal relationship with patients, colleagues and others
- 6. HSS/N9616: Maintain professional & medico-legal conduct
- 7. HSS/N9617: Maintain a safe, healthy and secure working environment
- 8. <u>HSS/N9618</u>: Follow infection control policies & procedures including biomedical waste disposal protocols

#### **Qualification Pack (QP) Parameters**

Sector	Healthcare
Sub-Sector	Allied Health & Paramedics
Occupation	Non-direct Care









Country	India
NSQF Level	4
Credits	NA
Aligned to NCO/ISCO/ISIC Code	NCO-2015/5322.9900
Minimum Educational Qualification & Experience	12th Class OR Certificate (ANM (Auxiliary Nursing Midwifery)) OR 10th Class with 2 Years of experience of relevant experience OR Certificate-NSQF (NSQF level 3 certified Home Health Aide or Geriatric Care giver or Geriatric Care Aide) OR Certificate-NSQF (Previous relevant qualification at NSQF Level 3) with 2 Years of experience of relevant experience OR Certificate-NSQF (NSQF level 4 certified General Duty Assistant or General Duty Assistant-Advanced) with 1 Year of experience of relevant experience
Minimum Level of Education for Training in School	
Pre-Requisite License or Training	NA
Minimum Job Entry Age	21 Years
Last Reviewed On	NA
Next Review Date	28/07/2025
NSQC Approval Date	28/07/2022
Version	2.0
Reference code on NQR	2022/HLT/HSSC/06141
NQR Version	1.0









### **HSS/N6001: Implement Interventions to prioritize safety of geriatric**

#### **Description**

This OS is about working in collaboration with geriatric and with their careers, to implement interventions in the context of their safety. It covers confirming the nature, purpose and goals of the interventions, implementing the interventions and monitoring the outcomes

#### **Elements and Performance Criteria**

#### Inform about procedures & services to be provided

To be competent, the user/individual on the job must be able to:

- **PC1.** assess the requirements & apply appropriate intervention accordingly
- **PC2.** ensure effective utilization of available resources in home settings
- **PC3.** work in collaboration with healthcare team and concerned authority
- **PC4.** be well acquainted with home environment
- **PC5.** provide personal assistance, medical attention, emotional support to geriatric
- **PC6.** monitor and review information through observation to assess problems which could be managed or to be reported immediately

#### Keep the environment conducive and safe

To be competent, the user/individual on the job must be able to:

- **PC7.** take away objects that could obstruct movement or cause injuries
- **PC8.** keep the floor dry at all times to avoid tripping and falling to the ground
- **PC9.** ensure all safety aides are in working conditions
- **PC10.** use pest management techniques to keep the environment free of germs
- **PC11.** minimize any discomfort to the geriatric within the restraints due to applied interventions
- PC12. never leave geriatric unattended
- **PC13.** ensure safety and prevent from risk of fall

#### Escalations of unresolved problems as per protocol

To be competent, the user/individual on the job must be able to:

- **PC14.** escalate the problem to a concerned authority if it cannot be resolved
- **PC15.** obtain help or advice from concerned authority if the problem is outside his/her area of competence
- PC16. comply with relevant legislation, standards, policies and procedure

#### **Knowledge and Understanding (KU)**

The individual on the job needs to know and understand:

- **KU1.** legislation which relates to working with geriatric including health and safety, confidentiality, provision of services, capacity and consent, relevant mental health legislation
- **KU2.** how to interpret and apply legislation to the work being undertaken









- **KU3.** professional standards and codes of practice for the area of work within older people's services and how to interpret and apply these
- **KU4.** how to balance responsibilities as a professional with organizational and contractual requirements
- **KU5.** the nature, aims, objectives, values, policies and systems of the organization
- KU6. relevant legislation, standards, policies, procedure, human rights perspective for geriatrics
- **KU7.** how to engage with both medical team or concerned authority for support in case of requirement
- **KU8.** about social gerontology, schemes & programmes for older persons
- **KU9.** about ageing & ageing process
- **KU10.** to identify & apply appropriate interventions required as per the medical condition to ensure safety considering immobile/semi or un-conscious geriatrics, Alzheimers disease, dementia and its different manifestations etc.
- **KU11.** interventions to be taken for prevention of fall
- KU12. actions in event of a fall incident
- KU13. actions to be taken up during emergency conditions by acting as a first responder
- **KU14.** to support for activities related to tidying up elderlys room to prevent fall
- **KU15.** to know about various interventions which could be applied for geriatric safety such as side rails, brakes in wheel chair, locking wheelchair on the slope & ramp
- **KU16.** how to take care for geriatrics with assisted devices such as implantable device like external pacemaker, hearing aids, medication patch, spectacles, dentures etc.
- **KU17.** how to use Personal Protective Equipment (PPE)
- **KU18.** know about safety precautions before applying any intervention for geriatric safety
- **KU19.** the methods of obtaining valid consent and how to confirm that sufficient information has been provided on which to base the judgement
- **KU20.** the actions to take if geriatric withdraws his/her consent
- **KU21.** how to recognise when individuals are not able to exercise their rights to make informed choices
- **KU22.** the legal framework for taking decisions for, or acting on behalf of geriatric without capacity
- **KU23.** the situations when consent may not be required (e.g. under relevant mental health legislation)
- **KU24.** how to deal with issues of confidentiality
- **KU25.** basic structure and function of the body system and associated component

#### **Generic Skills (GS)**

User/individual on the job needs to know how to:

- **GS1.** write during the communication process in local or understandable manner
- **GS2.** Record the non-verbal clues during communication
- **GS3.** prepare plan of care/ status/ progress reports
- **GS4.** read about new products and services with reference to geriatric care from various forums such as websites, consultation, medical records etc









- **GS5.** read brochures, pamphlets for latest knowledge related to geriatric care
- **GS6.** question appropriately in order to understand the nature of the problem and make a use of appropriate intervention
- **GS7.** give clear instructions to geriatrics
- **GS8.** keep authorities informed about progress
- **GS9.** avoid using jargon, slang or acronyms when communicating, unless it is required
- **GS10.** interact with the geriatric and their careers
- **GS11.** use the types of communication aides that are used in older people's services
- **GS12.** at least one local language to communicate with the geriatric/ relatives
- **GS13.** work with geriatrics to develop appropriate touch & sign communication methods
- **GS14.** make decisions pertaining to the concerned area of work
- **GS15.** possess the ability to make independent decisions when circumstances warrant such action
- **GS16.** plan and organize service feedback files/documents
- **GS17.** plan the time for activities appropriately & organize the same with other team members if they are needed
- **GS18.** build customer relationships and use customer centric approach
- **GS19.** deal with cultural differences keeping effective care
- **GS20.** maintain good relationship with geriatrics to identify best ways to make them comfortable
- GS21. possess the ability and willingness to work harmoniously & patiently with others
- **GS22.** think through the problem, evaluate the possible solution(s) and suggest an optimum /best possible solution(s)
- GS23. the type of assumptions that are made about older people and their carers
- **GS24.** analyse type of assistance the geriatric and their carers require to cope with the changes to their health and well-being
- **GS25.** apply, analyse, and evaluate the information gathered from observation, experience, reasoning, or communication, as a guide to belief and action









### **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Inform about procedures & services to be provided	23	-	-	20
<b>PC1.</b> assess the requirements & apply appropriate intervention accordingly	23	-	-	20
<b>PC2.</b> ensure effective utilization of available resources in home settings	-	-	-	-
<b>PC3.</b> work in collaboration with healthcare team and concerned authority	-	-	-	-
PC4. be well acquainted with home environment	-	-	-	-
PC5. provide personal assistance, medical attention, emotional support to geriatric	-	-	-	-
<b>PC6.</b> monitor and review information through observation to assess problems which could be managed or to be reported immediately	-	-	-	-
Keep the environment conducive and safe	20	-	-	50
<b>PC7.</b> take away objects that could obstruct movement or cause injuries	20	-	-	50
PC8. keep the floor dry at all times to avoid tripping and falling to the ground	-	-	-	_
<b>PC9.</b> ensure all safety aides are in working conditions	-	-	-	-
<b>PC10.</b> use pest management techniques to keep the environment free of germs	-	-	-	-
<b>PC11.</b> minimize any discomfort to the geriatric within the restraints due to applied interventions	-	-	-	-
PC12. never leave geriatric unattended	-	-	-	-
PC13. ensure safety and prevent from risk of fall	-	-	-	-









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Escalations of unresolved problems as per protocol	20	-	-	30
<b>PC14.</b> escalate the problem to a concerned authority if it cannot be resolved	20	-	-	30
<b>PC15.</b> obtain help or advice from concerned authority if the problem is outside his/her area of competence	-	-	-	-
<b>PC16.</b> comply with relevant legislation, standards, policies and procedure	-	-	-	-
NOS Total	63	-	-	100









# **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N6001
NOS Name	Implement Interventions to prioritize safety of geriatric
Sector	Healthcare
Sub-Sector	Allied Health & Paramedics
Occupation	Non-direct Care
NSQF Level	5
Credits	TBD
Version	1.0
Last Reviewed Date	13/09/2017
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022









### HSS/N6002: Assist in routine checkup and vital parameters measurement

#### **Description**

This OS is about working in collaboration with healthcare team and geriatric for measurement of vital parameters and routine checkup

#### **Elements and Performance Criteria**

#### Assist & collaborate with healthcare team during measurement of vital parameters

To be competent, the user/individual on the job must be able to:

- **PC1.** ensure to explain the process before initiating any procedure
- PC2. make geriatric calm and comfortable
- **PC3.** ensure safety and prevent from risk of fall
- **PC4.** keep equipment ready to use and place them appropriately
- **PC5.** take the measurements & record the findings
- **PC6.** work in accordance with healthcare team and concerned authority

#### Raising an alarm in case of deviation from normal parameters

To be competent, the user/individual on the job must be able to:

- **PC7.** be well acquainted with normal values and compare with findings
- **PC8.** observe colour changes like bluish or yellowish discoloration of the skin, odour or consistency of body fluids like urine, stools, sputum
- **PC9.** distinguish between immediate and routine reporting requirements
- **PC10.** communicate the observations in an appropriate language in a timely manner to the concerned authority

#### **Knowledge and Understanding (KU)**

The individual on the job needs to know and understand:

- **KU1.** legislation which relates to working with geriatric including health and safety, confidentiality, provision of services, capacity and consent, relevant mental health legislation
- **KU2.** how to interpret and apply legislation to the work being undertaken
- **KU3.** professional standards and codes of practice for the area of work within older people's services and how to interpret and apply these
- **KU4.** social gerontology, schemes &programmes for older persons
- **KU5.** about ageing & ageing process
- **KU6.** the different type of observations and how they can impact geriatrics health
- **KU7.** to apply appropriate intervention as per case with special focus and attention for care of geriatrics with Alzheimers disease, immobile/semi or un-conscious geriatrics, geriatrics suffering with dementia its different manifestations etc
- **KU8.** how to take care for geriatrics with assisted/ implantable devices such as External/Internal pacemaker, hearing aids, medication patch, spectacles, dentures etc









- **KU9.** how to take parameters which includes height, weight, BP, Pulse, temperature, oxygen saturation (SP02), RBS (through automated machines)
- **KU10.** normal values of vital parameters such as BP, Temperature, Pulse, Respiration, Blood Glucose, SpO2
- **KU11.** different changes in skin colour, in odour & color of urine and faeces and their implications
- **KU12.** basic structure and function of the body system and associated component

### **Generic Skills (GS)**

User/individual on the job needs to know how to:

- **GS1.** write during the communication process in local or understandable manner
- **GS2.** prepare status and progress reports
- **GS3.** read about new products and services with reference to geriatric care from various forums such as websites, consultation, medical records etc
- **GS4.** keep abreast with the latest knowledge by reading brochures, pamphlets specific to geriatric care
- **GS5.** question appropriately in order to understand the nature of the problem and make a use of appropriate intervention
- **GS6.** give clear instructions to geriatrics
- **GS7.** keep authorities informed about progress
- **GS8.** avoid using jargon, slang or acronyms when communicating, unless it is required
- **GS9.** interact with the geriatric and their careers
- **GS10.** use the types of communication aides that are used in older people's services
- **GS11.** communicate with healthcare team for any insignificant changes
- **GS12.** work with geriatrics to develop appropriate touch & sign communication methods
- **GS13.** record the non-verbal cues during communication
- **GS14.** make decisions pertaining to the concerned area of work
- **GS15.** make decisions regarding urgency of requirement
- **GS16.** make decision regarding criticality of situations & interventions to be taken accordingly
- **GS17.** plan, prioritize and sequence work as per job requirements
- **GS18.** organize and analyze information relevant to work
- **GS19.** manage relationships with customers who may be stressed, frustrated, confused, or angry
- **GS20.** build customer relationships and use customer centric approach
- GS21. an individual's feelings, beliefs and values can affect the communication process
- **GS22.** deal with cultural differences keeping effective care
- **GS23.** maintain good relationship with geriatrics to identify best ways to make them comfortable and happy
- **GS24.** possess the ability and willingness to work harmoniously & patiently with others
- **GS25.** think through the problem, evaluate the possible solution(s) and suggest an optimum /best possible solution(s









- **GS26.** the type of assumptions that are made about older people and their carers arising from communication differences
- **GS27.** analyse type of assistance the geriatric and their carers require to cope with the changes to their health and well-being
- **GS28.** apply, analyse, and evaluate the information gathered from observation, experience, reasoning, or communication, as a guide to belief and action









### **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Assist & collaborate with healthcare team during measurement of vital parameters	22	20	-	20
<b>PC1.</b> ensure to explain the process before initiating any procedure	22	20	-	20
PC2. make geriatric calm and comfortable	-	-	-	-
PC3. ensure safety and prevent from risk of fall	-	-	-	-
<b>PC4.</b> keep equipment ready to use and place them appropriately	-	-	-	-
<b>PC5.</b> take the measurements & record the findings	-	-	-	-
<b>PC6.</b> work in accordance with healthcare team and concerned authority	-	-	-	-
Raising an alarm in case of deviation from normal parameters	20	20	-	10
<b>PC7.</b> be well acquainted with normal values and compare with findings	20	20	-	10
<b>PC8.</b> observe colour changes like bluish or yellowish discoloration of the skin, odour or consistency of body fluids like urine, stools, sputum	-	-	-	-
<b>PC9.</b> distinguish between immediate and routine reporting requirements	-	-	-	-
<b>PC10.</b> communicate the observations in an appropriate language in a timely manner to the concerned authority	-	-	-	-
NOS Total	42	40	-	30









# **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N6002
NOS Name	Assist in routine checkup and vital parameters measurement
Sector	Healthcare
Sub-Sector	Allied Health & Paramedics
Occupation	Non-direct Care
NSQF Level	5
Credits	TBD
Version	1.0
Last Reviewed Date	13/09/2017
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022









### HSS/N6003: Support geriatrics in maintaining daily living activities

#### **Description**

This OS is about working with geriatric for assisting during activities of daily living

#### **Elements and Performance Criteria**

#### Assist during bathing

To be competent, the user/individual on the job must be able to:

- **PC1.** ensure to maintain the privacy and encourage geriatric do independently as much as possible
- **PC2.** identify the type of bath that is best suited as per the condition, comfort and medical needs
- **PC3.** explain the procedure to geriatric before initiating
- **PC4.** check water temperature before geriatric checks in
- **PC5.** follow standards precautions when performing perennial care or when bathing a geriatric with skin lesion and rashes or bed sore
- **PC6.** dry the skin by patting with a towel
- **PC7.** never leave geriatric unattended in bath room
- **PC8.** wash from cleanest to dirtiest
- PC9. observe skin changes and report unusual findings to medical team
- **PC10.** offer back rub after bathing and at bed time to stimulate circulation and relieve stress
- PC11. apply lotion to dry skin
- PC12. clean tub shower chair before and after each use

#### Assist for grooming and dressing up

To be competent, the user/individual on the job must be able to:

- PC13. show how they look after dressing is finished
- **PC14.** use standard precautions and protocols for shaving and cutting nails
- PC15. perform duties gently to avoid injuries especially during shaving, brushing and hair styling
- **PC16.** rinse toothpaste thoroughly from the mouth after brushing
- **PC17.** store dentures in cool water
- PC18. fasten the clothing with elastic fasteners and ensure that the footwear fits correctly
- **PC19.** ensure that clothing is comfortable considering health and weather conditions
- **PC20.** provide right size of shoes and slippers with non-slip surface to avoid falls

#### Support to eat & drink

To be competent, the user/individual on the job must be able to:

- PC21. make geriatric comfortable and encourage eating as recommended
- **PC22.** follow standard precautions while assisting for feeding & assess that provided food is according to the dietary prescription
- PC23. wash hands and mouth of geriatrics after feeding
- PC24. assist in elimination and oral care prior to feeding
- **PC25.** feed through spoon









- PC26. measure input and record them
- PC27. ensure that geriatric is comfortable when being fed
- PC28. monitor and assess if food is comfortable to be taken up by geriatric
- PC29. monitor for distress like coughing and regurgitation while feeding

#### Assist for movements in & out

To be competent, the user/individual on the job must be able to:

- **PC30.** use transferring equipment correctly to avoid falls or injuries
- PC31. assess geriatric condition and estimate if additional help is required
- **PC32.** transport geriatric without causing trauma or injury
- PC33. use proper body mechanics during movements in & out
- **PC34.** focus on safety first and ensure that the geriatric is comfortable

#### Assist to maintain normal elimination

To be competent, the user/individual on the job must be able to:

- PC35. immediate respond to geriatric elimination needs
- **PC36.** assist a mobile geriatric in moving to the toilet and provide support like giving toilet paper if required or stabilize the commode
- **PC37.** wipe and wash hands to prevent infection
- PC38. use equipment correctly to prevent discomfort or injury
- **PC39.** record changes in colour or texture of the elimination and report usual findings immediately
- PC40. provide bed pan to geriatric in case needed
- **PC41.** change the diaper as required
- **PC42.** carry out the procedures for catheter changing, suppository & enema procedure, diaper change under the guidance of medical team/physician

#### **Knowledge and Understanding (KU)**

The individual on the job needs to know and understand:

- **KU1.** legislation which relates to working with geriatric including health and safety, confidentiality, provision of services, capacity and consent, relevant mental health legislation
- **KU2.** how to interpret and apply legislation to the work being undertaken
- **KU3.** professional standards and codes of practice for the area of work within older people's services and how to interpret and apply these
- **KU4.** social gerontology, schemes &programmes for older persons
- **KU5.** about ageing & ageing process
- **KU6.** to apply appropriate intervention as per case with special focus and attention for care of geriatrics with Alzheimers disease, immobile/semi or un-conscious geriatrics, geriatrics suffering with dementia its different manifestations etc
- **KU7.** how to perform bath based on condition as per protocols
- **KU8.** the importance of grooming and various functions included undergrooming
- **KU9.** how to perform and modify grooming tasks based on geriatric condition e.g. dementia, diabetes and paralysis etc.









- **KU10.** to know the importance of dressing using right techniques as per the protocols avoiding cross infection
- **KU11.** whom to inform in case of observing problems to geriatrics while feeding and elimination process
- **KU12.** ensure that the geriatric is being moved out/ transferred from/within the home or outside considering general and medical condition
- **KU13.** how to collect and record feedback about the services
- **KU14.** how to drape and undrape
- KU15. how to perform back rub
- KU16. how to give complete bed bath, partial bed bath or sitz bath
- **KU17.** during bathing observe and report any of the followinga. colour changes of the lipb. rashes, dry skin, bruises, broken skin, reddened areas, abnormal skin temperaturec. drainage, bleeding, complaints of pain and itching
- KU18. how to clean dentures and store them
- **KU19.** how to perform brushing and oral care in unconscious, semi-conscious and bed ridden geriatrics
- **KU20.** how to prepare for hair styling, cutting the nails, providing oral care
- **KU21.** how to undress & dress a geriatric with minimum discomfort
- **KU22.** dressing procedure to prevent spread of infection
- **KU23.** appropriate clothing depending upon the geriatric condition and the general environment
- **KU24.** how to manage additional equipment like catheter or IV lines while performing the dressing task
- **KU25.** the importance of balanced and healthy diet as prescribed by the physician & knowledge about common disease diet plans (Diabetes, Arthritis, Hypertension, GI problems etc.)
- **KU26.** how to take care of geriatrics with visual and auditory impairment, ill geriatrics, geriatrics in coma, geriatrics with HIV/AIDS/undergone latest surgery etc.
- **KU27.** how to wipe mouth and keep the cloths clean and prevent spilling to maintain dignity and hygiene
- KU28. how to wash hands and maintain hygiene to prevent spread of infections
- **KU29.** how to feed using spoon or through ryle's tube
- **KU30.** ability to identify symptoms like choking or uneasiness while feeding and communicate them in correct language medical authority
- KU31. how to measure intake and record it
- **KU32.** how to administer a bed pan in case needed
- **KU33.** how to assist a geriatric to use the commode
- KU34. how to check for kinks and obstruction in a indwelling catheter
- **KU35.** the process of cleaning and wiping after elimination to prevent infections
- **KU36.** how to identify change in colour, odour or texture of the elimination and report it promptly
- **KU37.** how to use equipment and techniques correctly to avoid injury or inconvenience
- **KU38.** how to maneuver smaller equipment like catheters while transferring the geriatric
- **KU39.** how to use body mechanics while transferring to prevent injury or fall
- **KU40.** how and when to use the brakes on the transferring equipment









- **KU41.** how to take care for geriatrics with assisted/ implantable devices such as external/inetrnal pacemaker, hearing aids, medication patch, spectacles, dentures etc.
- **KU42.** actions to be taken up during emergency conditions by acting as a first responder in the event of medical and facility emergencies
- KU43. how to inform in case of observing something which is clinically important e.g. bed sores
- **KU44.** basic structure and function of the body system and associated component

#### **Generic Skills (GS)**

User/individual on the job needs to know how to:

- **GS1.** write during the communication process in local or understandable manner
- **GS2.** record the non-verbal cues during communication
- **GS3.** prepare status and progress reports
- **GS4.** read about new products and services with reference to geriatric care from various forums such as websites, consultation, medical records etc
- **GS5.** keep abreast with the latest knowledge by reading brochures, pamphlets specific to geriatric care
- **GS6.** question appropriately in order to understand the nature of the problem and make a use of appropriate intervention
- **GS7.** give clear instructions to geriatrics
- **GS8.** keep authorities informed about progress
- **GS9.** avoid using jargon, slang or acronyms when communicating, unless it is required
- **GS10.** interact with the geriatric and their careers
- **GS11.** use the types of communication aides that are used in older people's services
- **GS12.** communicate with healthcare team for any insignificant changes
- **GS13.** work with geriatrics to develop appropriate touch & sign communication methods
- **GS14.** make decisions pertaining to the concerned area of work
- GS15. effectively communicate with older people and their carers
- **GS16.** possess the ability to make independent decisions when circumstances warrant such action
- **GS17.** plan, prioritize and sequence work as per job requirements
- **GS18.** organize and analyze information relevant to work
- **GS19.** manage relationships with customers who may be stressed, frustrated, confused, or angry
- **GS20.** build customer relationships and use customer centric approach
- **GS21.** how to respect individual's feelings, beliefs and values which can affect the communication process
- **GS22.** how to deal with cultural differences keeping effective care
- **GS23.** maintain good relationship with geriatrics to identify best ways to make them comfortable and happy
- **GS24.** possess the ability and willingness to work harmoniously & patiently with others
- **GS25.** think through the problem, evaluate the possible solution(s) and suggest an optimum /best possible solution(s









- **GS26.** carry out assumptions that are made about older people and their carers arising from communication differences
- **GS27.** analyse type of assistance the geriatric and their carers require to cope with the changes to their health and well-being
- **GS28.** apply, analyse, and evaluate the information gathered from observation, experience, reasoning, or communication, as a guide to belief and action









### **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Assist during bathing	20	20	-	10
<b>PC1.</b> ensure to maintain the privacy and encourage geriatric do independently as much as possible	20	20	-	10
<b>PC2.</b> identify the type of bath that is best suited as per the condition, comfort and medical needs	-	-	-	-
<b>PC3.</b> explain the procedure to geriatric before initiating	-	-	-	-
<b>PC4.</b> check water temperature before geriatric checks in	-	-	-	-
<b>PC5.</b> follow standards precautions when performing perennial care or when bathing a geriatric with skin lesion and rashes or bed sore	-	-	-	-
PC6. dry the skin by patting with a towel	-	-	-	-
<b>PC7.</b> never leave geriatric unattended in bath room	-	-	-	-
PC8. wash from cleanest to dirtiest	-	-	-	-
<b>PC9.</b> observe skin changes and report unusual findings to medical team	-	-	-	-
<b>PC10.</b> offer back rub after bathing and at bed time to stimulate circulation and relieve stress	-	-	-	-
PC11. apply lotion to dry skin	-	-	-	-
<b>PC12.</b> clean tub shower chair before and after each use	-	-	-	-
Assist for grooming and dressing up	20	20	-	10
<b>PC13.</b> show how they look after dressing is finished	20	20	-	10
<b>PC14.</b> use standard precautions and protocols for shaving and cutting nails	-	-	_	-









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
<b>PC15.</b> perform duties gently to avoid injuries especially during shaving, brushing and hair styling	-	-	-	-
<b>PC16.</b> rinse toothpaste thoroughly from the mouth after brushing	-	-	-	-
PC17. store dentures in cool water	-	-	-	-
<b>PC18.</b> fasten the clothing with elastic fasteners and ensure that the footwear fits correctly	-	-	-	-
<b>PC19.</b> ensure that clothing is comfortable considering health and weather conditions	-	-	-	-
<b>PC20.</b> provide right size of shoes and slippers with non-slip surface to avoid falls	-	-	-	-
Support to eat & drink	20	20	-	10
<b>PC21.</b> make geriatric comfortable and encourage eating as recommended	20	20	-	10
<b>PC22.</b> follow standard precautions while assisting for feeding & assess that provided food is according to the dietary prescription	-	-	-	-
<b>PC23.</b> wash hands and mouth of geriatrics after feeding	-	-	-	-
<b>PC24.</b> assist in elimination and oral care prior to feeding	-	-	-	-
PC25. feed through spoon	-	-	-	-
PC26. measure input and record them	-	-	-	-
<b>PC27.</b> ensure that geriatric is comfortable when being fed	-	-	-	-
<b>PC28.</b> monitor and assess if food is comfortable to be taken up by geriatric	-	-	-	-
<b>PC29.</b> monitor for distress like coughing and regurgitation while feeding	-	-	-	-
Assist for movements in & out	20	20	-	10









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
<b>PC30.</b> use transferring equipment correctly to avoid falls or injuries	20	20	-	10
<b>PC31.</b> assess geriatric condition and estimate if additional help is required	-	-	-	-
<b>PC32.</b> transport geriatric without causing trauma or injury	-	-	-	-
PC33. use proper body mechanics during movements in & out	-	-	-	-
<b>PC34.</b> focus on safety first and ensure that the geriatric is comfortable	-	-	-	-
Assist to maintain normal elimination	20	20	-	10
<b>PC35.</b> immediate respond to geriatric elimination needs	20	20	-	10
<b>PC36.</b> assist a mobile geriatric in moving to the toilet and provide support like giving toilet paper if required or stabilize the commode	-	-	-	-
PC37. wipe and wash hands to prevent infection	-	-	-	-
PC38. use equipment correctly to prevent discomfort or injury	-	-	-	-
<b>PC39.</b> record changes in colour or texture of the elimination and report usual findings immediately	-	-	-	-
<b>PC40.</b> provide bed pan to geriatric in case needed	-	-	-	-
PC41. change the diaper as required	-	-	-	-
<b>PC42.</b> carry out the procedures for catheter changing, suppository & enema procedure, diaper change under the guidance of medical team/physician	-	-	-	-
NOS Total	100	100	-	50









# **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N6003
NOS Name	Support geriatrics in maintaining daily living activities
Sector	Healthcare
Sub-Sector	Allied Health & Paramedics
Occupation	Non-direct Care
NSQF Level	5
Credits	TBD
Version	1.0
Last Reviewed Date	13/09/2017
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022









# HSS/N6004: Assist to cope up with the ill health conditions and promote rehabilitation

#### **Description**

This OS is about helping geriatric to cope with changes to their health and well-being. These changes can be anything from coping with a change in individual attending to them, or the loss of a partner, or the loss of their independence or ill health conditions. It is important that the health and well-being is monitored, and that any actions that are required can be identified as soon as possible

#### **Elements and Performance Criteria**

#### Promote rehabilitation of geriatric

To be competent, the user/individual on the job must be able to:

- **PC1.** establish a supportive relationship with elderly
- **PC2.** encourage rehabilitative activities in lines with medical consultation and health condition of geriatric
- **PC3.** encourage geriatric to seek clarification of any procedures
- **PC4.** obtain an informed consent of elderly for the actions undertaken on their behalf, and agree on the information which may be passed to others
- **PC5.** obtain information from geriatric and their carers on the way in which their needs are being met
- **PC6.** identify any areas where support for the geriatric can be improved
- **PC7.** identify and prioritize actions required if the needs are not being appropriately addressed
- **PC8.** present any concerns that cannot be resolved in an appropriate way to concerned authority
- **PC9.** keep the geriatric and their carers informed about the progress in resolving any concerns, and anticipated timescales for any outcomes
- **PC10.** produce records and reports that are clear, comprehensive and accurate, and maintain the security and confidentiality of information
- **PC11.** explore with geriatric the nature of the changes to their health and well-being, and discuss with them and their carers about how they feel about
- PC12. perform on-going monitoring and reassessment of geriatric health status
- **PC13.** support & promote geriatrics for community participation & social Inclusion as per their health condition

#### Administration of medication as per prescribed dose, route and frequency

To be competent, the user/individual on the job must be able to:

- **PC14.** appropriately utilize personal protective equipment (PPE)
- **PC15.** review the prescription for generic name, trade name, dose, route, frequency, expiry date before administering
- PC16. make geriatric comfortable before administering the drug
- **PC17.** perform hand washing
- **PC18.** prepare & administer medicine following 5Rs as per guidance by the physician/consultation paper









- **PC19.** record the administered medicine as per protocol
- **PC20.** assess for any discomfort and report to concerned authority immediately
- PC21. never leave geriatric unattended
- PC22. donot leave left over medicine near to geriatric or accessible
- PC23. discard unused/ expired medicines as per bio medical waste management protocols
- **PC24.** provide adequate support to the geriatrics depending upon route during drug administration
- **PC25.** report any adverse reaction or discomfort to geriatric
- PC26. encourage geriatric to take medicines on time

#### Observing and reporting changes in geriatric condition

To be competent, the user/individual on the job must be able to:

- **PC27.** observe colour changes/odour changes/consistency changes of skin, body fluids & stools
- PC28. communicate the observations in an appropriate language and construct
- PC29. differentiate between immediate and routine reporting requirements
- **PC30.** maintain, store and retain the records of medicines taken & all that reflect the clinical care
- **PC31.** take approval prior to destroying any old medical record from concerned authority

#### **Knowledge and Understanding (KU)**

The individual on the job needs to know and understand:

- **KU1.** about working with geriatric people including health and safety, confidentiality, the provision of services, the rights of older people, relevant mental health legislation
- **KU2.** the professional standards and codes of practice for the area of work within older people's services, and how to interpret and apply these standards
- **KU3.** the nature, aims, objectives, values, policies and systems of the organisation
- **KU4.** the nature, extent and boundaries of the work role and its relationship to others in the organization
- **KU5.** relevant legislation, standards, policies, procedure, human rights perspective for geriatrics
- **KU6.** social gerontology, schemes &programmes for older persons
- **KU7.** about ageing & ageing process
- **KU8.** to apply appropriate intervention as per case with special focus and attention for care of geriatrics with Alzheimers disease, immobile/semi or un-conscious geriatrics, geriatrics suffering with dementia its different manifestations etc
- **KU9.** how to take care for geriatrics with assisted devices such as implantable devices such as external pacemaker, hearing aids, medication patch, spectacles, dentures etc
- **KU10.** the knowledge, scope and limitation of geriatric aide in terms of assisting geriatrics for administration of medication
- **KU11.** actions to be taken if the geriatric withdraws his/her consent
- **KU12.** various elderly friendly home alternations as per available resources and assist elderly/carers to adopt them
- **KU13.** the situations when consent may not be required e.g. under relevant mental health condition & legislation









- **KU14.** the routes of drug administration like oral/nasal/topical or Insulin administration as per the standard protocol
- **KU15.** standard precautions while drug administration
- **KU16.** 5 Rs of drug administration
- **KU17.** the side effects of common drugs
- **KU18.** bio medical waste management for unused drugs
- **KU19.** the actions/measures to be taken if the geriatric withdraws his/her consent for drug administration
- **KU20.** actions to be taken up during emergency conditions by acting as a first responder in the event of medical and facility emergencies
- **KU21.** the changes that geriatric might go through during the process of ageing
- **KU22.** The particular needs at different stages of their life
- **KU23.** the information and guidance that is available for geriatrics and their carers, and how to access this information
- **KU24.** methods of providing support to help geriatrics for enhancing the quality of life & promote rehabilitation
- **KU25.** evidence-based practice, and its role in improving services
- **KU26.** main trends & changes relating to the health and well-being of older people
- **KU27.** the impact of social relationships and environment on the health and well-being of geriatric
- **KU28.** manifestation of discrimination through cultural, social and economic perspective
- **KU29.** how to identify and enhance functional capabilities of geriatrics who have a disabling impairment of body part
- **KU30.** the impact of the ageing process on older people's communication needs (e.g. sensory impairment, cognition and confused states)
- **KU31.** the physical/mental/social changes that older people might go through during ageing process
- **KU32.** the particular needs of different older people at different stages of their life
- **KU33.** the importance of encouraging geriatric to express their feelings about changes to their situation
- **KU34.** other professionals, networks and agencies that are available to support the change process and how to access the same
- **KU35.** basic structure and function of the body system and associated component
- **KU36.** process, condition & resources required by the body to support healthy body

#### **Generic Skills (GS)**

User/individual on the job needs to know how to:

- **GS1.** write during the communication process in local or understandable manner
- **GS2.** record the non-verbal cues during communication
- **GS3.** prepare status and progress reports
- **GS4.** read about new products and services with reference to geriatric care from various forums such as websites, consultation, medical records etc









- **GS5.** read brochures, pamphlets to update the knowledge specific to geriatric care
- **GS6.** question appropriately in order to understand the nature of the problem and make a use of appropriate intervention
- **GS7.** give clear instructions to geriatrics
- **GS8.** keep authorities informed about progress
- **GS9.** avoid using jargon, slang or acronyms when communicating, unless it is required
- **GS10.** interact with the geriatric and their carers
- **GS11.** use the types of communication aides that are used in older people's services
- **GS12.** communicate with healthcare team for any insignificant changes
- **GS13.** work with geriatrics to develop appropriate touch & sign communication methods
- **GS14.** make decisions pertaining to the concerned area of work
- **GS15.** effectively communicate with older people and their carers
- **GS16.** possess the ability to make independent decisions when circumstances warrant such action
- GS17. plan and organize service feedback files/documents
- **GS18.** manage relationships with customers who may be stressed, frustrated, confused, or angry
- **GS19.** build customer relationships and use customer centric approach
- GS20. respect an individual's feelings, beliefs and values can affect the communication process
- GS21. deal with cultural differences keeping effective care
- **GS22.** maintain good relationship with geriatrics to identify best ways to make them comfortable and happy
- GS23. possess the ability and willingness to work harmoniously & patiently with others
- **GS24.** think through the problem, evaluate the possible solution(s) and suggest an optimum /best possible solution(s
- **GS25.** make assumptions that are made about older people and their carers arising from communication differences
- **GS26.** analyse type of assistance the geriatric and their carers require to cope with the changes to their health and well-being
- **GS27.** apply, analyse, and evaluate the information gathered from observation, experience, reasoning, or communication, as a guide to belief and action









### **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Promote rehabilitation of geriatric	30	20	-	30
<b>PC1.</b> establish a supportive relationship with elderly	30	20	-	30
<b>PC2.</b> encourage rehabilitative activities in lines with medical consultation and health condition of geriatric	-	-	-	-
<b>PC3.</b> encourage geriatric to seek clarification of any procedures	-	-	-	-
<b>PC4.</b> obtain an informed consent of elderly for the actions undertaken on their behalf, and agree on the information which may be passed to others	-	-	-	-
<b>PC5.</b> obtain information from geriatric and their carers on the way in which their needs are being met	-	-	-	-
<b>PC6.</b> identify any areas where support for the geriatric can be improved	-	-	-	-
<b>PC7.</b> identify and prioritize actions required if the needs are not being appropriately addressed	-	-	-	-
<b>PC8.</b> present any concerns that cannot be resolved in an appropriate way to concerned authority	-	-	-	-
<b>PC9.</b> keep the geriatric and their carers informed about the progress in resolving any concerns, and anticipated timescales for any outcomes	-	-	-	-
<b>PC10.</b> produce records and reports that are clear, comprehensive and accurate, and maintain the security and confidentiality of information	-	-	-	-
<b>PC11.</b> explore with geriatric the nature of the changes to their health and well-being, and discuss with them and their carers about how they feel about	-	-	-	-
PC12. perform on-going monitoring and reassessment of geriatric health status	-	-	-	-









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
PC13. support & promote geriatrics for community participation & social Inclusion as per their health condition	-	-	-	-
Administration of medication as per prescribed dose, route and frequency	22	20	-	20
<b>PC14.</b> appropriately utilize personal protective equipment (PPE)	22	20	-	20
<b>PC15.</b> review the prescription for generic name, trade name, dose, route, frequency, expiry date before administering	-	-	-	-
<b>PC16.</b> make geriatric comfortable before administering the drug	-	-	-	-
PC17. perform hand washing	-	-	-	-
<b>PC18.</b> prepare & administer medicine following 5Rs as per guidance by the physician/consultation paper	-	-	-	-
<b>PC19.</b> record the administered medicine as per protocol	-	-	-	-
<b>PC20.</b> assess for any discomfort and report to concerned authority immediately	-	-	-	-
PC21. never leave geriatric unattended	-	-	-	-
<b>PC22.</b> donot leave left over medicine near to geriatric or accessible	-	-	-	-
PC23. discard unused/ expired medicines as per bio medical waste management protocols	-	-	-	-
<b>PC24.</b> provide adequate support to the geriatrics depending upon route during drug administration	-	-	-	-
<b>PC25.</b> report any adverse reaction or discomfort to geriatric	-	-	-	-
<b>PC26.</b> encourage geriatric to take medicines on time	-	-	-	-
Observing and reporting changes in geriatric condition	20	20	-	10









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
<b>PC27.</b> observe colour changes/odour changes/consistency changes of skin, body fluids & stools	20	20	-	10
<b>PC28.</b> communicate the observations in an appropriate language and construct	-	-	-	-
<b>PC29.</b> differentiate between immediate and routine reporting requirements	-	-	-	-
<b>PC30.</b> maintain, store and retain the records of medicines taken & all that reflect the clinical care	-	-	-	-
<b>PC31.</b> take approval prior to destroying any old medical record from concerned authority	-	-	-	-
NOS Total	72	60	-	60









# **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N6004
NOS Name	Assist to cope up with the ill health conditions and promote rehabilitation
Sector	Healthcare
Sub-Sector	Allied Health & Paramedics
Occupation	Non-direct Care
NSQF Level	5
Credits	TBD
Version	1.0
Last Reviewed Date	13/09/2017
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022









# HSS/N9615: Maintain interpersonal relationship with patients, colleagues and others

#### **Description**

This OS unit is about effective communication and exhibiting professional behaviorwith co-workers, patients & their family members in response to queries or as part ofhealth advice and counseling. It also describes the skills required for meeting workrequirements by allied health professionals working in a team or collaborative environment.

#### **Elements and Performance Criteria**

#### Communicating & maintaining professional behavior with co-workers and patients & their families

To be competent, the user/individual on the job must be able to:

- **PC1.** communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics without using terminology unfamiliar to them
- **PC2.** utilize all training and information at ones disposal to provide relevantinformation to the individual
- **PC3.** confirm that the needs of the individual have been met
- PC4. respond to gueries and information needs of all individuals
- **PC5.** adhere to guidelines provided by ones organization or regulatory body relating to confidentiality
- **PC6.** respect the individuals need for privacy
- **PC7.** maintain any records required at the end of the interaction

#### Working with otherpeople to meetrequirements

To be competent, the user/individual on the job must be able to:

- **PC8.** integrate ones work with other peoples work effectively
- **PC9.** utilize time effectively and pass on essential information to other people on timely basis
- **PC10.** work in a way that shows respect for other people
- **PC11.** carry out any commitments made to other people
- PC12. reason out the failure to fulfill commitment
- **PC13.** identify any problems with team members and other people and take the initiative to solve these problems

#### Establishing andmanagingrequirements

To be competent, the user/individual on the job must be able to:

- **PC14.** clearly establish, agree, and record the work requirements
- **PC15.** ensure his/her work meets the agreed requirements
- **PC16.** treat confidential information correctly
- **PC17.** work in line with the organizations procedures and policies and within the limits of his/her job role

### **Knowledge and Understanding (KU)**









The individual on the job needs to know and understand:

- **KU1.** guidelines on communicating with patients and other individuals
- **KU2.** guidelines on maintaining confidentiality and respecting need for privacy
- **KU3.** the business, mission, and objectives of the organization
- **KU4.** the scope of work of the role
- **KU5.** the responsibilities and strengths of the team and their importance to the organization
- **KU6.** the information that is considered confidential to the organization
- **KU7.** effective working relationships with the people external to the team, with which the individual works on a regular basis
- **KU8.** procedures in the organization to deal with conflict and poor workingrelationships
- **KU9.** the relevant policies and procedures of the organization
- **KU10.** how to communicate effectively (face-to-face, by telephone and in writing)
- **KU11.** how to handle stressful or risky situations when communicating with patients and/or other individuals
- **KU12.** when to ask for assistance when situations are beyond ones competence and authority
- **KU13.** how to maintain confidentiality and to respect an individuals need for privacy
- **KU14.** how to ensure that all information provided to individuals is from reliable sources
- **KU15.** disclosure of any information to unauthorized persons would subject to disciplinary action and possible termination
- **KU16.** the essential information that needs to be shared with other people
- **KU17.** the importance of effective working relationships and how these can contribute towards effective working relationships on a day-to-day basis
- **KU18.** the importance of integrating ones work effectively with others
- **KU19.** the types of working relationships that help people to work well together and the types of relationships that need to be avoided
- **KU20.** the types of opportunities an individual may seek out to improve relationships with others
- **KU21.** how to deal with difficult working relationships with other people to sort out
- **KU22.** the importance of asking the appropriate individual for help when required
- **KU23.** the importance of planning, prioritizing and organizing, timely work
- **KU24.** the importance of clearly establishing work requirement
- **KU25.** the importance of being flexible in changing priorities when the importance and urgency comes into play
- **KU26.** how to make efficient use of time, and to avoid things that may prevent work deliverables from being expedited
- **KU27.** the importance of keeping the work area clean and tidy

#### **Generic Skills (GS)**

User/individual on the job needs to know how to:

**GS1.** write effective communications to share information with the team members andother people outside the team









- **GS2.** write at least one local/ official language used in the local community
- **GS3.** report progress and results
- **GS4.** record problems and resolutions
- **GS5.** read and understand work related documents and information shared by different sources
- **GS6.** read organizational policies and procedures
- GS7. communicate essential information to colleagues face-to-face or throughtelecommunication
- **GS8.** speak at least one local language
- **GS9.** question others appropriately in order to understand the nature of the requestor compliant
- **GS10.** report progress and results
- **GS11.** interact with other individuals
- GS12. negotiate requirements and revised agreements for delivering them
- **GS13.** make decisions on information to be communicated based on needs of theindividual and various regulations and guidelines
- **GS14.** plan and organize files and documents
- **GS15.** be responsive to problems of the individuals
- **GS16.** be available to guide, counsel and help individuals when required
- **GS17.** be patient and non-judgmental at all times
- **GS18.** communicate effectively with patients and their family, physicians, and othermembers of the health care team
- **GS19.** be capable of being responsive, listen empathetically to establish rapport in away that promotes openness on issues of concern
- **GS20.** be sensitive to potential cultural differences
- **GS21.** maintain patient confidentiality
- **GS22.** respect the rights of the patient(s)
- **GS23.** understand problems and suggest an optimum solution after evaluatingpossible solutions









### **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Communicating & maintaining professional behaviorwith co-workers and patients & their families	5	-	-	-
<b>PC1.</b> communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics without using terminology unfamiliar to them	5	-	-	-
<b>PC2.</b> utilize all training and information at ones disposal to provide relevantinformation to the individual	-	-	-	-
<b>PC3.</b> confirm that the needs of the individual have been met	-	-	-	-
<b>PC4.</b> respond to queries and information needs of all individuals	-	-	-	-
<b>PC5.</b> adhere to guidelines provided by ones organization or regulatory body relating to confidentiality	-	-	-	-
PC6. respect the individuals need for privacy	-	-	-	-
<b>PC7.</b> maintain any records required at the end of the interaction	-	-	-	-
Working with otherpeople to meetrequirements	5	-	-	-
<b>PC8.</b> integrate ones work with other peoples work effectively	5	-	-	-
<b>PC9.</b> utilize time effectively and pass on essential information to other people on timely basis	-	-	-	-
<b>PC10.</b> work in a way that shows respect for other people	-	-	-	-
PC11. carry out any commitments made to other people	-	-	-	-
PC12. reason out the failure to fulfill commitment	-	-	-	-
<b>PC13.</b> identify any problems with team members and other people and take the initiative to solve these problems	-	-	-	-









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Establishing andmanagingrequirements	3	-	-	-
<b>PC14.</b> clearly establish, agree, and record the work requirements	3	-	-	-
<b>PC15.</b> ensure his/her work meets the agreed requirements	-	-	-	-
PC16. treat confidential information correctly	-	-	-	-
<b>PC17.</b> work in line with the organizations procedures and policies and within the limits of his/her job role	-	-	-	-
NOS Total	13	-	-	-









# **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N9615
NOS Name	Maintain interpersonal relationship with patients, colleagues and others
Sector	Healthcare
Sub-Sector	Social Work & Community Health, Healthcare Management, Allied Health & Paramedics
Occupation	Generic
NSQF Level	4
Credits	TBD
Version	1.0
Last Reviewed Date	16/12/2019
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022









## HSS/N9616: Maintain professional & medico-legal conduct

## **Description**

This OS unit is about recognizing the boundaries of the role and responsibilities, practice code of conduct and working within the level of competence in accordance with legislation, protocols and guidelines set up by the healthcare provider.

#### **Elements and Performance Criteria**

#### Maintain professional behavior

To be competent, the user/individual on the job must be able to:

- **PC1.** adhere to legislation, protocols and guidelines relevant to ones role and field of practice
- **PC2.** work within organizational systems and requirements as appropriate to ones role
- **PC3.** recognize the boundary of ones role and responsibility and seek supervision when situations are beyond ones competence and authority
- **PC4.** maintain competence within ones role and field of practice
- **PC5.** maintain personal hygiene and contribute actively to the healthcare ecosystem

#### Acting within the limit of ones competence and authority

To be competent, the user/individual on the job must be able to:

- **PC6.** use relevant research based protocols and guidelines as evidence to informones practice
- **PC7.** promote and demonstrate good practice as an individual and as a team member at all times
- PC8. identify and manage potential and actual risks to the quality and safety of practice
- **PC9.** evaluate and reflect on the quality of ones work and make continuingimprovements
- **PC10.** use relevant research-based protocols and guidelines as evidence to inform ones practice

#### Following the code of conduct and demonstrating best practices in the field

To be competent, the user/individual on the job must be able to:

- **PC11.** recognize the boundary of ones role and responsibility and seek supervision when situations are beyond ones competence and authority
- PC12. promote and demonstrate good practice as an individual and as a team member at all times
- **PC13.** identify and manage potential and actual risks to the quality and safety of practice
- **PC14.** maintain personal hygiene and contribute actively to the healthcare ecosystem
- **PC15.** maintain a practice environment that is conducive to the provision of medico-legal healthcare

#### **Knowledge and Understanding (KU)**

The individual on the job needs to know and understand:

- **KU1.** relevant legislation, standards, policies & procedures followed in the organization
- **KU2.** the medical procedures and functioning of required medical equipment
- **KU3.** role and importance of assisting other healthcare providers in delivering care









- **KU4.** how to engage and interact with other providers in order to deliver quality and maintain continued care
- **KU5.** personal hygiene measures and handling techniques
- **KU6.** the limitations and scope of the role and responsibilities of self and others
- **KU7.** the importance of working within the limits of ones competence and authority
- **KU8.** the importance of personally promoting and demonstrating good practice
- **KU9.** The detrimental effects of non-compliance
- **KU10.** the importance of intercommunication skills
- **KU11.** the legislation, protocols and guidelines affecting ones work
- **KU12.** the organizational systems and requirements relevant to ones role
- **KU13.** the sources of information and literature to maintain a constant access to upcoming research and changes in the field
- **KU14.** the difference between direct and indirect supervision and autonomous practice, and which combination is most applicable in different circumstances
- **KU15.** the importance of individual or team compliance with legislation, protocols, and guidelines and organizational systems and requirements
- **KU16.** how to report and minimize risks
- **KU17.** the principle of meeting the organizations needs, and how this should enable one to recognize ones own limitations and when one should seek support from others
- **KU18.** the processes by which improvements to protocols/guidelines andorganizational systems/requirements should be reported
- **KU19.** the procedure for accessing training, learning and development needs for oneself and/or others within ones organization
- **KU20.** the actions that can be taken to ensure a current, clear and accurate understanding of roles and responsibilities is maintained, and how this affects the way one work as an individual or part of a team
- **KU21.** the risks to quality and safety arising from:o Working outside the boundaries of competence and authorityo Not keeping up to date with best practiceo Poor communicationo Insufficient support o Lack of resources
- **KU22.** the importance of personal hygiene

#### **Generic Skills (GS)**

User/individual on the job needs to know how to:

- **GS1.** document reports, task lists, and schedules
- **GS2.** prepare status and progress reports
- **GS3.** record daily activities
- **GS4.** update other co-workers
- **GS5.** read about changes in legislations and organizational policies
- **GS6.** keep updated with the latest knowledge
- **GS7.** discuss task lists, schedules, and work-loads with co-workers
- **GS8.** give clear instructions to patients and co-workers









- **GS9.** keep patient informed about progress
- **GS10.** avoid using jargon, slang or acronyms when communicating with a patient
- **GS11.** make decisions pertaining to the concerned area of work in relation to job role
- **GS12.** act decisively by balancing protocols and work at hand
- **GS13.** communicate effectively with patients and their family, physicians, and othermembers of the health care team
- **GS14.** be responsive and listen empathetically to establish rapport in a way that promotes openness on issues of concern
- **GS15.** be sensitive to potential cultural differences
- **GS16.** maintain patient confidentiality
- **GS17.** respect the rights of the patient(s)









## **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Maintain professional behavior	5	-	-	-
<b>PC1.</b> adhere to legislation, protocols and guidelines relevant to ones role and field of practice	5	-	-	-
<b>PC2.</b> work within organizational systems and requirements as appropriate to ones role	-	-	-	-
<b>PC3.</b> recognize the boundary of ones role and responsibility and seek supervision when situations are beyond ones competence and authority	-	-	-	-
<b>PC4.</b> maintain competence within ones role and field of practice	-	-	-	-
<b>PC5.</b> maintain personal hygiene and contribute actively to the healthcare ecosystem	-	-	-	-
Acting within the limit of ones competence and authority	7	-	-	-
<b>PC6.</b> use relevant research based protocols and guidelines as evidence to informones practice	7	-	-	-
<b>PC7.</b> promote and demonstrate good practice as an individual and as a team member at all times	-	-	-	-
<b>PC8.</b> identify and manage potential and actual risks to the quality and safety of practice	-	-	-	-
<b>PC9.</b> evaluate and reflect on the quality of ones work and make continuingimprovements	-	-	-	-
<b>PC10.</b> use relevant research-based protocols and guidelines as evidence to inform ones practice	_	-	-	-
Following the code of conduct and demonstrating best practices in the field	7	-	-	-
<b>PC11.</b> recognize the boundary of ones role and responsibility and seek supervision when situations are beyond ones competence and authority	7	-	-	-
<b>PC12.</b> promote and demonstrate good practice as an individual and as a team member at all times	-	-	-	-









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
<b>PC13.</b> identify and manage potential and actual risks to the quality and safety of practice	-	-	-	-
<b>PC14.</b> maintain personal hygiene and contribute actively to the healthcare ecosystem	-	-	-	-
PC15. maintain a practice environment that is conducive to the provision of medico-legal healthcare	-	-	-	-
NOS Total	19	-	-	-









# **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N9616
NOS Name	Maintain professional & medico-legal conduct
Sector	Healthcare
Sub-Sector	Allied Health & Paramedics, Social Work & Community Health, Healthcare Management
Occupation	Generic
NSQF Level	4
Credits	TBD
Version	1.0
Last Reviewed Date	16/12/2019
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022









## HSS/N9617: Maintain a safe, healthy and secure working environment

## **Description**

This OS unit is about monitoring the working environment and ensuring a safe, healthy, secure and effective working conditions

#### **Elements and Performance Criteria**

## Complying the health, safety and security requirements and procedures for work place

To be competent, the user/individual on the job must be able to:

- **PC1.** identify individual responsibilities in relation to maintaining workplace health safety and security requirements
- **PC2.** comply with health, safety and security procedures for the workplace
- **PC3.** comply with health, safety and security procedures and protocols forenvironmental safety *Handling hazardous situation*

To be competent, the user/individual on the job must be able to:

- **PC4.** identify potential hazards and breaches of safe work practices
- **PC5.** identify and interpret various hospital codes for emergency situations
- **PC6.** correct any hazards that individual can deal with safely, competently and within the limits of authority
- **PC7.** provide basic life support (BLS) and first aid in hazardous situations, whenever applicable
- **PC8.** follow the organizations emergency procedures promptly, calmly, and efficiently
- **PC9.** identify and recommend opportunities for improving health, safety, and security to the designated person
- **PC10.** complete any health and safety records legibly and accurately

### Reporting any hazardous situation

To be competent, the user/individual on the job must be able to:

- **PC11.** report any identified breaches in health, safety, and security procedures to the designated person
- **PC12.** 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

#### **Knowledge and Understanding (KU)**

The individual on the job needs to know and understand:

- **KU1.** the importance of health, safety, and security in the workplace
- **KU2.** the basic requirements of the health and safety and other legislations andregulations that apply to the workplace
- **KU3.** the person(s) responsible for maintaining healthy, safe, and secure workplace
- **KU4.** the relevant up-to-date information on health, safety, and security that applies to the workplace
- **KU5.** the responsibilities of individual to maintain safe, healthy and secure workplace









- **KU6.** how to report the hazard
- **KU7.** requirements of health, safety and security in workplace
- **KU8.** how to create safety records and maintaining them
- KU9. the importance of being alert to health, safety, and security hazards in the work environment
- **KU10.** the common health, safety, and security hazards that affect people working in an administrative role
- KU11. how to identify health, safety, and security hazards
- **KU12.** the importance of warning others about hazards and how to do so until the hazard is dealt with

#### **Generic Skills (GS)**

User/individual on the job needs to know how to:

- **GS1.** report and record incidents
- **GS2.** read and understand company policies and procedures
- **GS3.** clearly report hazards and incidents with the appropriate level of urgency
- **GS4.** make decisions pertaining to the area of work
- **GS5.** plan for safety of the work environment
- **GS6.** communicate effectively with patients and their family, physicians, and othermembers of the health care team
- **GS7.** be capable of being responsive, listen empathetically to establish rapport in away that promotes openness on issues of concern
- **GS8.** identify hazards, evaluate possible solutions and suggest effective solutions
- **GS9.** analyze the seriousness of hazards
- **GS10.** analyze, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently









## **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Complying the health, safety and security requirements and procedures for work place	7	-	-	10
<b>PC1.</b> identify individual responsibilities in relation to maintaining workplace health safety and security requirements	7	-	-	10
<b>PC2.</b> comply with health, safety and security procedures for the workplace	-	-	-	-
<b>PC3.</b> comply with health, safety and security procedures and protocols forenvironmental safety	-	-	-	-
Handling hazardous situation	8	-	-	10
<b>PC4.</b> identify potential hazards and breaches of safe work practices	8	-	-	10
<b>PC5.</b> identify and interpret various hospital codes for emergency situations	-	-	-	-
<b>PC6.</b> correct any hazards that individual can deal with safely, competently and within the limits of authority	-	-	-	-
<b>PC7.</b> provide basic life support (BLS) and first aid in hazardous situations, whenever applicable	-	-	-	-
<b>PC8.</b> follow the organizations emergency procedures promptly, calmly, and efficiently	-	-	-	-
<b>PC9.</b> identify and recommend opportunities for improving health, safety, and security to the designated person	-	-	-	-
<b>PC10.</b> complete any health and safety records legibly and accurately	-	-	-	-
Reporting any hazardous situation	5	-	-	10
<b>PC11.</b> report any identified breaches in health, safety, and security procedures to the designated person	5	-	-	10









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
<b>PC12.</b> 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	-	-	-	-
NOS Total	20	-	-	30









# **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N9617
NOS Name	Maintain a safe, healthy and secure working environment
Sector	Healthcare
Sub-Sector	Social Work & Community Health, Healthcare Management, Allied Health & Paramedics
Occupation	Generic
NSQF Level	4
Credits	TBD
Version	1.0
Last Reviewed Date	31/03/2022
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022









# HSS/N9618: Follow infection control policies & procedures including biomedical waste disposal protocols

## **Description**

This OS unit is about the safe handling and management of health care waste and following infection control polices

#### **Elements and Performance Criteria**

Classification of theWaste Generated,Segregation ofBiomedical Waste,Proper collectionand storage of Waste

To be competent, the user/individual on the job must be able to:

- **PC1.** handle, package, label, store, transport and dispose of waste appropriately to minimize potential for contact with the waste and to reduce the risk to the environment from accidental release
- **PC2.** store clinical or related waste in an area that is accessible only to authorized persons
- **PC3.** minimize contamination of materials, equipment and instruments by aerosols and splatter

#### Complying with aneffective infectioncontrol protocols

To be competent, the user/individual on the job must be able to:

- **PC4.** apply appropriate health and safety measures following appropriate personal clothing & protective equipment for infection prevention and control
- **PC5.** identify infection risks and implement an appropriate response within own role and responsibility in accordance with the policies and procedures of the organization
- **PC6.** follow procedures for risk control and risk containment for specific risks. Use signs when and where appropriate
- **PC7.** ollow protocols for care following exposure to blood or other body fluids as required
- **PC8.** remove spills in accordance with the policies and procedures of the organization
- **PC9.** clean and dry all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled
- PC10. demarcate and maintain clean and contaminated zones in all aspects of health care work
- PC11. confine records, materials and medicaments to a welldesignated clean zone
- PC12. confine contaminated instruments and equipment to a welldesignated contaminated zone
- **PC13.** decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance with cleaning, disinfection and sterilization protocols
- **PC14.** replace surface covers where applicable
- **PC15.** maintain and store cleaning equipment
- **PC16.** report and deal with spillages and contamination in accordance with current legislation and procedures

Maintaining personal protection and preventing the transmission of infections from person to person

To be competent, the user/individual on the job must be able to:

**PC17.** maintain hand hygiene following hand washing procedures before and after patient contact /or after any activity likely to cause contamination









- **PC18.** cover cuts and abrasions with waterproof dressings and change as necessary
- **PC19.** change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact
- **PC20.** perform additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection

## **Knowledge and Understanding (KU)**

The individual on the job needs to know and understand:

- **KU1.** relevant up-to-date information on health, safety, and security that applies to the organization
- **KU2.** organizations emergency procedures and responsibilities for handling hazardous situations
- **KU3.** person(s) responsible for health, safety, and security in the organization
- **KU4.** good personal hygiene practice including hand care
- **KU5.** importance of and how to handle, package, label, store, transport and dispose of waste appropriately to minimize potential for contact with the waste and to reduce the risk to the environment from accidental release
- **KU6.** the importance to adhere to the organizational and national waste management principles and procedures
- **KU7.** the hazards and risks associated with the disposal and the importance of risk assessments and how to provide these
- **KU8.** the required actions and reporting procedures for any accidents, spillages and contamination involving waste
- **KU9.** the requirements of the relevant external agencies involved in the transport and receipt of your waste
- **KU10.** the importance of organizing, monitoring and obtaining an assessment of the impact the waste may have on the environment
- **KU11.** The current national legislation, guidelines, local policies and protocols which affect work practice
- **KU12.** the policies and guidance that clarify scope of practice, accountabilities and the working relationship between yourself and others
- **KU13.** identification and management of infectious risks in the workplace
- **KU14.** aspects of infectious diseases including opportunistic organisms & pathogens
- **KU15.** basic microbiology including bacteria and bacterial spores, fungi, viruses
- **KU16.** the path of disease transmission including direct contact and penetrating injuries, risk of acquisition
- **KU17.** how to clean and sterile techniques
- **KU18.** susceptible hosts including persons who are immune suppressed, have chronic diseases such as diabetes and the very young or very old
- **KU19.** routine surface cleaning procedures at the start and end of the day, managing a blood or body fluid spill
- **KU20.** sharps handling and disposal techniques









- **KU21.** effective hand hygiene including hand wash, surgical hand wash, when hands must be washed
- KU22. good personal hygiene practice including hand care
- **KU23.** how to use personal protective equipment such as: The personal clothing and protective equipment required to manage the different types of waste generated by different work activities

## **Generic Skills (GS)**

User/individual on the job needs to know how to:

- **GS1.** report and record incidents
- **GS2.** read and understand company policies and procedures to managingbiomedical waste and infection control and prevention
- **GS3.** listen patiently
- **GS4.** report hazards and incidents clearly with the appropriate level of urgency
- **GS5.** take in to account opportunities to address waste minimization, environmental responsibility and sustainable practice issues
- **GS6.** apply additional precautions when standard precautions are not sufficient
- **GS7.** consistently ensure instruments used for invasive procedures are sterile at time ofuse (where appropriate)
- **GS8.** consistently follow the procedure for washing and drying hands
- **GS9.** consistently maintain clean surfaces and limit contamination
- **GS10.** how to make exceptional effort to keep the environment and work place clean
- **GS11.** identify hazards and suggest effective solutions to identified problems pertaining to hospital waste and related infections
- **GS12.** analyze the seriousness of hazards pertaining to hospital waste and relatedinfections
- **GS13.** apply, analyze, and evaluate the information gathered from observation, experience, reasoning, or communication, as a guide to act
- **GS14.** take into account opportunities to address waste minimization, prevent infection, environmental responsibility and sustainable practice issues









## **Assessment Criteria**

Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
Classification of theWaste Generated,Segregation ofBiomedical Waste,Proper collectionand storage of Waste	5	-	-	10
<b>PC1.</b> handle, package, label, store, transport and dispose of waste appropriately to minimize potential for contact with the waste and to reduce the risk to the environment from accidental release	5	-	-	10
<b>PC2.</b> store clinical or related waste in an area that is accessible only to authorized persons	-	-	-	-
<b>PC3.</b> minimize contamination of materials, equipment and instruments by aerosols and splatter	-	-	-	-
Complying with aneffective infectioncontrol protocols	8	-	-	10
<b>PC4.</b> apply appropriate health and safety measures following appropriate personal clothing & protective equipment for infection prevention and control	8	-	-	10
<b>PC5.</b> identify infection risks and implement an appropriate response within own role and responsibility in accordance with the policies and procedures of the organization	_	-	-	-
<b>PC6.</b> follow procedures for risk control and risk containment for specific risks. Use signs when and where appropriate	_	-	_	-
<b>PC7.</b> ollow protocols for care following exposure to blood or other body fluids as required	-	-	-	-
<b>PC8.</b> remove spills in accordance with the policies and procedures of the organization	-	-	-	-
<b>PC9.</b> clean and dry all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled	_	-	-	-
<b>PC10.</b> demarcate and maintain clean and contaminated zones in all aspects of health care work	_	-	-	-
<b>PC11.</b> confine records, materials and medicaments to a welldesignated clean zone	-	-	-	-









Assessment Criteria for Outcomes	Theory Marks	Practical Marks	Project Marks	Viva Marks
<b>PC12.</b> confine contaminated instruments and equipment to a welldesignated contaminated zone	-	-	-	-
<b>PC13.</b> decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance with cleaning, disinfection and sterilization protocols	-	-	-	-
PC14. replace surface covers where applicable	-	-	-	-
PC15. maintain and store cleaning equipment	-	-	-	-
<b>PC16.</b> report and deal with spillages and contamination in accordance with current legislation and procedures	-	-	-	-
Maintaining personalprotection and preventing the transmission of infections from person to person	8	-	-	10
<b>PC17.</b> maintain hand hygiene following hand washing procedures before and after patient contact /or after any activity likely to cause contamination	8	-	-	10
<b>PC18.</b> cover cuts and abrasions with waterproof dressings and change as necessary	_	-	-	-
<b>PC19.</b> change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact	-	-	-	<u>-</u>
<b>PC20.</b> perform additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection	-	-	-	<u>-</u>
NOS Total	21	-	-	30









## **National Occupational Standards (NOS) Parameters**

NOS Code	HSS/N9618
NOS Name	Follow infection control policies & procedures including biomedical waste disposal protocols
Sector	Healthcare
Sub-Sector	Social Work & Community Health, Healthcare Management, Allied Health & Paramedics
Occupation	Generic
NSQF Level	4
Credits	TBD
Version	1.0
Last Reviewed Date	31/03/2022
Next Review Date	28/07/2025
NSQC Clearance Date	28/07/2022

## Assessment Guidelines and Assessment Weightage

#### **Assessment Guidelines**

- 1. Criteria for assessment for each Qualification Pack will be created by the Sector Skill Council. Either each element/Performance Criteria (PC) will be assigned marks proportional to its importance in NOS. SSC will also lay down proportion of marks for Theory, viva and Skills Practical for each element/PC.
- 2. The assessment for the theory part will be based on knowledge bank of questions approved by the SSC.
- 3. Individual assessment agencies will create unique question papers for theory part for each candidate/batch at each examination/training center (as per assessment criteria below).
- 4. Individual assessment agencies will create unique evaluations for skill practical & viva for every student at each examination/ training center based on these criteria.
- 5. In case of successfully passing as per passing percentage of the job role, the trainee is certified for the Oualification Pack.
- 6. In case of unsuccessful completion, the trainee may seek reassessment on the Qualification Pack.









Minimum Aggregate Passing % at QP Level: 70

(**Please note**: Every Trainee should score a minimum aggregate passing percentage as specified above, to successfully clear the Qualification Pack assessment.)

## **Assessment Weightage**

Compulsory NOS

National Occupational Standards	Theory Marks	Practical Marks	Project Marks	Viva Marks	Total Marks	Weightage
HSS/N6001.Implement Interventions to prioritize safety of geriatric	63	-	-	100	163	15
HSS/N6002.Assist in routine checkup and vital parameters measurement	42	40	-	30	112	15
HSS/N6003.Support geriatrics in maintaining daily living activities	100	100	-	50	250	15
HSS/N6004.Assist to cope up with the ill health conditions and promote rehabilitation	72	60	-	60	192	15
HSS/N9615.Maintain interpersonal relationship with patients, colleagues and others	13	-	-	-	13	10
HSS/N9616.Maintain professional & medico-legal conduct	19	-	-	-	19	10
HSS/N9617.Maintain a safe, healthy and secure working environment	20	-	-	30	50	10
HSS/N9618.Follow infection control policies & procedures including biomedical waste disposal protocols	21	-	-	30	51	10
Total	350	200	-	300	850	100









# **Acronyms**

NOS	National Occupational Standard(s)	
NSQF	National Skills Qualifications Framework	
QP	Qualifications Pack	
TVET	Technical and Vocational Education and Training	









# Glossary

Sector	Sector is a conglomeration of different business operations having similar business and interests. It may also be defined as a distinct subset of the economy whose components share similar characteristics and interests.
Sub-sector	Sub-sector is derived from a further breakdown based on the characteristics and interests of its components.
Occupation	Occupation is a set of job roles, which perform similar/ related set of functions in an industry.
Job role	Job role defines a unique set of functions that together form a unique employment opportunity in an organisation.
Occupational Standards (OS)	OS specify the standards of performance an individual must achieve when carrying out a function in the workplace, together with the Knowledge and Understanding (KU) they need to meet that standard consistently. Occupational Standards are applicable both in the Indian and global contexts.
Performance Criteria (PC)	Performance Criteria (PC) are statements that together specify the standard of performance required when carrying out a task.
National Occupational Standards (NOS)	NOS are occupational standards which apply uniquely in the Indian context.
Qualifications Pack (QP)	QP comprises the set of OS, together with the educational, training and other criteria required to perform a job role. A QP is assigned a unique qualifications pack code.
Unit Code	Unit code is a unique identifier for an Occupational Standard, which is denoted by an 'N'
Unit Title	Unit title gives a clear overall statement about what the incumbent should be able to do.
Description	Description gives a short summary of the unit content. This would be helpful to anyone searching on a database to verify that this is the appropriate OS they are looking for.
Scope	Scope is a set of statements specifying the range of variables that an individual may have to deal with in carrying out the function which have a critical impact on quality of performance required.









Knowledge and Understanding (KU)	Knowledge and Understanding (KU) are statements which together specify the technical, generic, professional and organisational specific knowledge that an individual needs in order to perform to the required standard.
Organisational Context	Organisational context includes the way the organisation is structured and how it operates, including the extent of operative knowledge managers have of their relevant areas of responsibility.
Technical Knowledge	Technical knowledge is the specific knowledge needed to accomplish specific designated responsibilities.
Core Skills/ Generic Skills (GS)	Core skills or Generic Skills (GS) are a group of skills that are the key to learning and working in today's world. These skills are typically needed in any work environment in today's world. These skills are typically needed in any work environment. In the context of the OS, these include communication related skills that are applicable to most job roles.
Electives	Electives are NOS/set of NOS that are identified by the sector as contributive to specialization in a job role. There may be multiple electives within a QP for each specialized job role. Trainees must select at least one elective for the successful completion of a QP with Electives.
Options	Options are NOS/set of NOS that are identified by the sector as additional skills. There may be multiple options within a QP. It is not mandatory to select any of the options to complete a QP with Options.