

Model Curriculum

Geriatric Care Assistant

SECTOR: Healthcare
SUB-SECTOR: Allied Health & Paramedics
OCCUPATION: Non Direct Care
REF ID: HSS/Q6001
NSQF LEVEL: 4



Certificate

CURRICULUM COMPLIANCE TO QUALIFICATION PACK – NATIONAL OCCUPATIONAL STANDARDS

is hereby issued by the

HEALTHCARE SECTOR SKILL COUNCIL

for the

MODEL CURRICULUM

Complying to National Occupational Standards of
Job Role/ Qualification Pack: 'Geriatric Care Assistant'
QP No. 'HSS/Q 6001 NSQF Level 4'

Date of Issuance: October 11th, 2018

Valid up to: October 31st, 2020

* Valid up to the next review date of the Qualification Pack



Authorised Signatory
(Healthcare Sector Skill Council)

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Geriatric Care Assistant

CURRICULUM / SYLLABUS

This program is aimed at training candidates for the job of a “Geriatric Care Assistant”, in the “Healthcare” Sector/Industry and aims at building the following key competencies amongst the learner

Program Name	Geriatric Care Assistant		
Qualification Pack Name & Reference ID. ID	HSS/Q 6001, version 1.0		
Version No.	1.0	Version Update Date	19-09-2017
Pre-requisites to Training	<p>Class XII (preferably (biology)/ANM/Home Health Aide/ General Duty Assistant / General Duty Assistant (Advanced)</p> <p>1 year of working experience in case of NSQF level 4 certified Home Health Aide or General Duty Assistant or General Duty Assistant (Advanced)</p>		
Training Outcomes	<p>After completing this programme, participants will be able to:</p> <ul style="list-style-type: none"> • Discuss & verbalize the role of a basic healthcare provider related to elderly • List the basic healthcare needs of ambulatory conscious elderly people, non-ambulatory / bed-ridden frail elderly people etc. • Build a comprehensive knowledge base on basic issues in geriatric care • Enhance their skill and capacities in counsel and manage older persons who are at home, admitted in healthcare institutions • Enhance their knowledge in resource management, advocacy and related to care of older persons • Demonstrate techniques to maintain the personal hygiene needs of an elderly patient • Practice infection control measures • Demonstrate the ability to perform clinical skills essential in providing basic healthcare to older persons • Promote safety, understand usage of protective devices and demonstrate precautions to be taken while usage of equipment and assistive devices • Demonstrate professional behavior, personal qualities and characteristics of a Geriatric Care Assistant • Demonstrate right methods of bio-medical waste management • Demonstrate techniques to assist older persons in maintaining their 		

	<p>activities of daily living.</p> <ul style="list-style-type: none"> • Demonstrate Basic Life Support, Cardio Pulmonary Resuscitation and other actions in the event of medical and facility emergencies • Demonstrate good communication, communicate accurately and appropriately in the role of Geriatric Care Assistant • Take sound decisions regarding hospitalization, or timely referral to other hospitals for various care and recognizing their limitations in knowledge and skills in these areas. • Getting along with, working with and co-operating with caregivers/family members who are also taking care of older persons • Reporting signs of severe illness/ deterioration to higher authorities as per timelines <p>Participant is not expected/should not do:</p> <ul style="list-style-type: none"> • Surgical Dressing/Oxygen Administration/Catheterization/Ryle's Tube Insertion/Tracheostomy care/Gastrostomy care/Handling patient on ventilator/ handling patient in emergency care and act within the limits of competence and authority
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Sr. No.	Module	Key Learning Outcomes	Equipment Required
		<ul style="list-style-type: none"> • Describes Hair & nails care • Understand process for excreta disposal in human body • Understand care to be provided in case of urine and bowel Incontinence or patient with urinary catheter. • Understand the special precautions to be taken in different situations • Observation of urine and stools for routine as well as special reporting • Describe the special feeding & elimination methods like enema, catheterization, suppositories, ryle's tube etc. • To apply appropriate intervention as per case with special focus and attention for Care of patients with Alzheimer's disease, immobile/semi or un-conscious patients, geriatrics suffering with dementia & its different manifestation etc. 	
13	<p>Nutrition & Hydration</p> <p>Theory Duration (hh:mm) 10:00</p> <p>Practical Duration (hh:mm) 10:00</p> <p>Corresponding NOS Code HSS/N 6001, HSS/ N 6002, HSS/ N 6003, HSS/ N 6004</p>	<ul style="list-style-type: none"> • Understand concept of nutrition, nutrients and calories • Understand support to patient while feeding • Preservation of food and Different types of food of importance to geriatric • How to follow Diet plans for elderly • Identify discomfort to geriatric and report to concerned person or authority immediately • Identify the precautions required for before fulfilling the patient preference's • To apply appropriate intervention as per case with special focus and attention for Care of patients with Alzheimer's disease, immobile/semi or un-conscious patients, geriatrics suffering with dementia & its different manifestation. • Understand the importance of special diets such as diabetic diet hypertensive diet etc. 	Mannequins, mock environment of home based environment, kidney tray, patient daily care articles, bio medical waste management, RT tubes, sample food items, Visit to old age home care
14	<p>Administration of oral Medication</p> <p>Theory Duration (hh:mm)</p>	<ul style="list-style-type: none"> • To know about rights of patients for effective administration of medication (conduct as per limits of competence & authority) • To know about storage of medication • To seek guidance of concerned 	Kidney tray, sample medicines with unopened packets, mannequins, personal protective equipment, Visit to

	PC6. Monitor and review information by observing person, materials, events, or the environment, to detect or assess problems which could be managed or reported immediately		20	10	10
	PC7. Take away objects that could obstruct movement or cause injuries		10	3	7
	PC8. Keep the floor dry at all times to avoid tripping and falling to the ground		20	10	10
	PC9. Ensure all safety aids are in working conditions		20	5	15
	PC10. Use pest management techniques to keep the environment free of germs		20	5	15
	PC11. Minimize any discomfort to the geriatric within the restraints due to applied interventions		10	3	7
	PC12. Never leave the geriatric unattended		10	2	8
	PC 13 Ensure safety and prevent from risk of fall		5	2	3
	PC14. Refer the problem to a competent internal/external specialist if it cannot be resolved		5	2	3
	PC15. obtain help or advice from specialist if the problem is outside his/her area of competence or experience		10	6	4
	PC16. comply with relevant legislation, standards, policies and procedures		10	5	5
	Total		200	67	133
2. HSS/N 6002 (Assist for routine checkup and vital parameters measurement)	PC1. Ensure to explain the process before initiating any procedure or step	200	20	15	5
	PC2. Make geriatric calm and comfortable		20	5	15
	PC3. Ensure geriatric safety and prevent from risk of fall		20	5	15
	PC4. Keep equipment's ready to use and place them appropriately		20	10	10
	PC5. take the measurements & record the findings		20	10	10
	PC6. Work in accordance with healthcare team and concerned authority		20	10	10

task is finished			
PC14. Use standard precautions and protocols for shaving and cutting nails	5	2	3
PC15. Perform duties gently to avoid injuries especially during shaving, brushing and hair styling	5	2	3
PC16. Rinse toothpaste thoroughly from the mouth after brushing	5	2	3
PC17. Store dentures in cool water	5	2	3
PC18. Fasten the clothing with elastic fasteners and ensure that the footwear fits correctly	5	2	3
PC19. Ensure that clothing is comfortable for geriatrics considering health condition and weather conditions)	5	2	3
PC20. Provide right size of shoes and slippers with non-slip surface to avoid falls	5	2	3
PC21. Make geriatric comfortable and encourage eating as recommended	5	2	3
PC22. Follow standard precautions while assisting for feeding & assess that provided food is according to the dietary prescription	5	2	3
PC23. Wash hands and mouth of geriatrics after feeding	5	1	4
PC24. Assist in elimination and oral care prior to feeding	5	2	3
PC25. Feed through spoon	5	1	4
PC26. Measure input and record them	5	2	3
PC27. Ensure that geriatric is comfortable when being fed	4	2	2
PC28. monitor and assess if food is comfortable to be taken up by geriatric	5	2	3
PC29. monitor for distress like coughing and regurgitation while feeding	5	2	3

	PC30. Use transferring equipment correctly to avoid falls or injuries		5	2	3
	PC31. Assess geriatric condition and estimate if additional help is required		5	3	2
	PC32. Transport the geriatric without causing trauma or injury		5	2	3
	PC33. Use proper body mechanics during movements in & out		5	2	3
	PC34. Focus on safety first and ensure that the geriatric is comfortable		5	2	3
	PC35. Immediate respond to geriatric elimination needs		2	1	1
	PC36. Assist a mobile geriatric in moving to the toilet and provide support like giving toilet paper if required or stabilize the commode		5	2	3
	PC37. Wipe the patient and wash hands to prevent infection		5	2	3
	PC38. Use equipment correctly to prevent discomfort or injury		5	2	3
	PC39. Record changes in colour or texture of the elimination and report usual findings immediately		5	2	3
	PC40. Provide bed pan to geriatric in case needed		5	1	4
	PC41. Change the diaper as required		2	1	1
	PC42. Carry out the procedures for catheter changing, suppository & enema procedure, diaper change under the guidance of medical team/physician		5	2	3
	Total		200	78	122
4. HSS/N 6004 Assist to cope up with the ill health conditions and promote	PC1. Establish a supportive relationship with elderly	200	5	2	3
	PC2. encourage rehabilitative activities in lines with medical consultation and health condition of geriatric		5	2	3
	PC3. Encourage geriatric to seek clarification of any procedures		5	2	3

rehabilitation	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	10	5	5
	PC5. Obtain information from geriatric and their carers on the way in which their needs are being met	10	5	5
	PC6. Identify any areas where support for the geriatric can be improved	5	2	3
	PC7. Identify and prioritise actions required if the needs are not being appropriately addressed	10	5	5
	PC8. Present any concerns that cannot be resolved in an appropriate way to appropriate people	10	5	5
	PC9. Keep the geriatric and their carers informed about the progress in resolving any concerns, and anticipated 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 geriatric the nature of the changes to their health and well-being, and discuss with them and their carers about how they feel about	10	5	5
	PC12. Perform on-going monitoring and reassessment of geriatric health status	10	5	5
	PC13. Support & promote geriatrics for community participation & social Inclusion as per their health condition	5	2	3
	PC14. Appropriate utilization of Personal protective equipment (PPE) as per drug and route of administration	10	5	5
	PC15. Review the prescription for generic / trade name, dose, route & frequency of drug/ expiry date before administering	10	7	3
	PC16. Make Geriatric comfortable before administering the drug	5	2	3

PC17. Perform handwashing	5	2	3
PC18 Prepare & administer medicine through prescribed route as per guidance by the physician/concerned authority	10	5	5
PC19. Record the administered medicine as per protocol	10	5	5
PC20. Assess for any discomfort and report to concerned authority immediately	10	5	5
PC21. Never leave geriatric unattended	5	2	3
PC22. Donot leave left over medicine near to geriatric or accessible	5	2	3
PC23. Discard unused medicines as per bio medical waste management protocols	2	1	1
PC24. Provide adequate support to the geriatric depending upon route during drug administration	5	3	2
PC25. Report any adverse reaction or discomfort to geriatric	3	2	1
PC26. encourage geriatric to take medicines on time	3	2	1
PC27. Observe colour changes/odour changes/consistency changes of skin, body fluids & stools	2	1	1
PC28. Communicate the observations in an appropriate language and construct	2	1	1
PC29. Differentiate between immediate and routine reporting requirements	2	1	1

	PC30. maintain, store and retain the records of medicines taken & all that reflect the clinical care		3	1	2
	PC31. Take approval prior to destroying any old medical record from concerned authority		3	1	2
	Total		200	98	102
5. HSS/N 9615 Maintain professional behavior with colleagues, patients and others	PC1. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics without using terminology unfamiliar to them	50	5	2	3
	PC2. Utilize all training and information at one's disposal to provide relevant information to the individual		3	1	2
	PC3. Confirm that the needs of the individual have been met		2	0	2
	PC4. Respond to queries and information needs of all individuals		2	1	1
	PC5. Adhere to guidelines provided by one's organization or regulatory body relating to confidentiality		2	1	1
	PC6. Respect the individual's need for privacy		5	2	3
	PC7. Maintain any records required at the end of the interaction		2	1	1
	PC8. Integrate one's work with other people's work effectively		2	1	1
	PC9. Utilize time effectively and pass on essential information to other people on timely basis		5	2	3
	PC10. Work in a way that shows respect for other people		2	1	1
	PC11. Carry out any commitments made to other people		2	1	1
	PC12. Reason out the failure to fulfill commitment		2	1	1

	PC13. Identify any problems with team members and other people and take the initiative to solve these problems		2	1	1
	PC14. Clearly establish, agree, and record the work requirements		2	1	1
	PC15. Ensure his/her work meets the agreed requirements		2	1	1
	PC16. Treat confidential information correctly		5	2	3
	PC17. Work in line with the organization's procedures and policies and within the limits of his/her job role		5	2	3
	TOTAL		50	21	29
6.HSS/N 9616 Maintain professional & medico-legal conduct	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice	50	5	2	3
	PC2. Work within organizational systems and requirements as appropriate to one's role		5	2	3
	PC3. Recognize the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority		10	5	5
	PC4. Maintain competence within one's role and field of practice		5	2	3
	PC5. Maintain personal hygiene and contribute actively to the healthcare ecosystem		5	2	3
	PC6. Use relevant research based protocols and guidelines as evidence to inform one's practice		5	2	3
	PC7. Promote and demonstrate good practice as an individual and as a team member at all times		5	2	3
	PC8. Identify and manage potential and actual risks to the quality and safety of practice		5	2	3
	PC9. Evaluate and reflect on the quality of one's work and make continuing improvements		5	2	3
TOTAL		50	21	29	

7. HSS/Ng617 Maintain a safe, healthy and secure working environment	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements	50	2	1	1
	PC2. Comply with health, safety and security procedures for the workplace		2	1	1
	PC3. Comply with health, safety and security procedures and protocols for environmental safety		2	1	1
	PC4. Identify potential hazards and breaches of safe work practices		5	2	3
	PC5. Identify and interpret various hospital codes for emergency situations		5	2	3
	PC6. Correct any hazards that individual can deal with safely, competently and within the limits of authority		4	2	2
	PC7. Provide basic life support (BLS) and first aid in hazardous situations, whenever applicable		5	2	3
	PC8. Follow the organization's emergency procedures promptly, calmly, and efficiently		5	2	3
	PC9. Identify and recommend opportunities for improving health, safety, and security to the designated person		5	2	3
	PC10. Complete any health and safety records legibly and accurately		5	2	3
	PC11. Report any identified breaches in health, safety, and security procedures to the designated person		5	2	3
	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		5	2	3
	Total			50	21
8. HSS/Ng609 Follow biomedical waste disposal protocols	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	50	5	2	3
	PC2. Store clinical or related waste in an area that is accessible only to authorized persons		5	2	3

PC3. Minimize contamination of materials, equipment and instruments by aerosols and splatter	2	1	1
PC4. Apply appropriate health and safety measures following appropriate personal clothing & protective equipment for infection prevention and control	2	1	1
PC5. Identify infection risks and implement an appropriate response within own role and responsibility in accordance with the policies and procedures of the organization	2	1	1
PC6. Follow procedures for risk control and risk containment for specific risks. Use signs when and where appropriate	2	1	1
PC7. Follow protocols for care following exposure to blood or other body fluids as required	2	1	1
PC8. Remove spills in accordance with the policies and procedures of the organization	2	1	1
PC9. Clean and dry all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled	5	2	3
PC10: Demarcate and maintain clean and contaminated zones in all aspects of health care work	2	1	1
PC11. Confine records, materials and medicaments to a well-designated clean zone	2	1	1
PC12. Confine contaminated instruments and equipment to a well-designated contaminated Zone	2	1	1
PC13. Decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance with cleaning, disinfection and sterilization protocols	2	1	1
PC14. Replace surface covers where applicable	3	1	2
PC15. Maintain and store cleaning equipment	2	1	1
PC16. Report and deal with spillages and contamination in accordance with current legislation and procedures	2	1	1

	PC17. Maintain hand hygiene following hand washing procedures before and after patient contact and/or after any activity likely to cause contamination		2	1	1
	PC18. Cover cuts and abrasions with water-proof dressings and change as necessary		2	1	1
	PC19. Change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact		2	1	1
	PC20. Perform additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection		2	1	1
	Total		50	23	27
Subject Domain		Pick all NOS totalling 80 marks			
National Occupational Standards (NOS)	Performance Criteria (PC)	Weightage	Marks Allocation		
			Theory		
1. HSS/N 6001 (Implement Interventions to prioritize safety of geriatric)	PC1. Understand the requirements and apply appropriate intervention accordingly	20	20		
	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, or other personal care				
	PC6. Monitor and review information by observing person, materials, events, or the environment, to detect or assess problems which could be managed or reported immediately				
	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 aids 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 the geriatric unattended		
	PC 13 Ensure safety and prevent from risk of fall		
	PC14. Refer the problem to a competent internal/external specialist if it cannot be resolved		
	PC15. obtain help or advice from specialist if the problem is outside his/her area of competence or experience		
	PC16. comply with relevant legislation, standards, policies and procedures		
	Total		
2. HSS/N 6002 (Assist for routine checkup and vital parameters measurement)	PC1. Ensure to explain the process before initiating any procedure or step	20	20
	PC2. Make geriatric calm and comfortable		
	PC3. Ensure patient safety and prevent from risk of fall		
	PC4. Keep equipment's ready to use and place them appropriately		
	PC5. take the measurements & record the findings		
	PC6. Work in accordance with healthcare team and concerned authority		
	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		
	Total		
3.HSS/N 6003 Support geriatrics for activities of daily living	PC1. Ensure to maintain the privacy and encourage geriatrics do as much as possible	20	20
	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 skin by patting with a towel		
	PC7. Never leave a 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		
	PC13. Show geriatric how they look after the & dressing is finished task 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 for geriatrics considering health condition and weather conditions)		
PC20. Provide right size of shoes and slippers with non-slip surface to avoid falls		
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		
PC30. Use transferring equipment correctly to avoid falls or injuries		
PC31. Understand Focus on geriatric for not having symptoms of distress like coughing and regurgitation while feeding condition and estimate if additional help is required		
PC32. Transport the geriatric without causing trauma		

	can be improved		
	PC7. Identify and prioritise actions required if the needs are not being appropriately addressed		
	PC8. Present any concerns that cannot be resolved in an appropriate way to appropriate people		
	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		
	PC14. Appropriate utilization of Personal protective equipment (PPE) as per drug and route of administration		
	PC15. Review the prescription for generic / trade name, dose, route & frequency of drug/ expiry date before administering		
	PC16. Make Geriatric comfortable before administering the drug		
	PC17. Perform handwashing		
	PC18 Prepare & administer medicine through prescribed route as per guidance by the physician/concerned authority		
	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 medicines as per bio medical waste management protocols		
	PC24. Provide adequate support to the geriatric depending upon route during drug administration		
	PC25. Report any adverse reaction or discomfort to geriatric		
	PC26. encourage geriatric to take medicines on time		
	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		
	Total		
5. HSS/N 9615 Maintain professional behavior with colleagues, patients and others	PC1. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics without using terminology unfamiliar to them	5	5
	PC2. Utilize all training and information at one's disposal to provide relevant information to the individual		
	PC3. Confirm that the needs of the individual have been met		
	PC4. Respond to queries and information needs of all individuals		

	PC5. Adhere to guidelines provided by one's organization or regulatory body relating to confidentiality		
	PC6. Respect the individual's need for privacy		
	PC7. Maintain any records required at the end of the interaction		
	PC8. Integrate one's work with other people's 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		
	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 organization's procedures and policies and within the limits of his/her job role		
	TOTAL		
6.HSS/N 9616 Maintain professional & medico-legal conduct	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice	5	
	PC2. Work within organizational systems and requirements as appropriate to one's role		
	PC3. Recognize the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority		

	PC4. Maintain competence within one's role and field of practice		
	PC5. Maintain personal hygiene and contribute actively to the healthcare ecosystem		
	PC6. Use relevant research based protocols and guidelines as evidence to inform one's 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 one's work and make continuing improvements		
	TOTAL		
7. HSS/N9617 Maintain a safe, healthy and secure working environment	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements	5	5
	PC2. Comply with health, safety and security procedures for the workplace		
	PC3. Comply with health, safety and security procedures and protocols for environmental safety		
	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 organization's 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		
	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		
	Total		
8. HSS/Ng609 Follow biomedical waste disposal protocols	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	5	5
	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		
	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. Follow 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 well-designated clean zone		
PC12. Confine contaminated instruments and equipment to a well-designated 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		
PC17. Maintain hand hygiene following hand washing procedures before and after patient contact and/or after any activity likely to cause contamination		
PC18. Cover cuts and abrasions with water-proof 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		
Total		

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