Federal Democratic Republic of Ethiopia OCCUPATIONAL STANDARD



## REMEDIAL MASSAGE THERAPY

**NTQF** Level V



Ministry of Education June 2011

## Introduction

Ethiopia has embarked on a process of reforming its TVET-System. Within the policies and strategies of the Ethiopian Government, technology transformation – by using international standards and international best practices as the basis, and, adopting, adapting and verifying them in the Ethiopian context – is a pivotal element. TVET is given an important role with regard to technology transfer. The new paradigm in the outcome-based TVET system is the orientation at the current and anticipated future demand of the economy and the labor market.

The Ethiopia Occupational Standards (EOS) is the core element of the Ethiopian National TVET-Strategy and an important factor within the context of the National TVET-Qualification Framework (NTQF). They are national Ethiopian standards, which define the occupational requirements and expected outcome related to a specific occupation without taking TVET delivery into account.

This document details the mandatory format, sequencing, wording and layout for the Ethiopia Occupational Standard which comprised of Units of Competence.

A Unit of Competence describes a distinct work activity. It is documented in a standard format that comprises:

- Occupational title and NTQF level
- Unit title
- Unit code
- Unit descriptor
- Elements and Performance criteria
- Variables and Range statement
- Evidence guide

Together all the parts of a Unit of Competence guide the assessor in determining whether the candidate is competent.

The ensuing sections of this EOS document comprise a description of the occupation with all the key components of a Unit of Competence:

- chart with an overview of all Units of Competence for the respective level (Unit of Competence Chart) including the Unit Codes and Unit Titles
- contents of each Unit of Competence (competence standard)
- occupational map providing the technical and vocational education and training (TVET) providers with information and important requirements to consider when designing training programs for this standards and for the individual, a career path

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## UNIT OF COMPETENCE CHART

Occupational Standard: Remedial Massage Therapy			
ccupational Code: HTH	RMT		
ITQF Level V			
HTH RMT5 01 0611 Provide Remedial Massage Treatment Within a Corporate Setting	HTH RMT5 02 0611 Remedial Massage Treatment Strategy	HTH RMT5 03 0611 Provide Specific Massage Therapies Treatments, Health Assessment and Care	
HTH RMT5 04 0611 Remedial Massage Assessment Framework	HTH RMT5 05 0611 Provide TCM Remedial Massage (An Mo Tui Na) Treatment for Women and Children	HTH RMT5 06 0611 Perform Remedial Massage Health Assessment	
HTH RMT5 07 0611 Organize and Provide Acupressure Self Treatment Training	HTH RMT5 08 0611 Perform Shieatsu Massage	HTH RMT5 09 0611 Manage Health Care Business Supervise in Health Setting	
HTH RMT5 10 0611 Monitor and Evaluate Massage Therapy Treatment	HTH RMT5 11 0611 Manage Health Care Setting	HTH RMT5 12 0611 Apply Acupuncture and Moxibustion Treatments	
HTH RMT5 13 0611 Practice Career Professionalism	HTH RMT5 14 0611 Facilitate and Capitalize on Change and Innovation	HTH RMT5 15 0611 Manage Project Quality	
HTH RMT5 16 0611 Establish and Conduct Business Relationship	HTH RMT5 17 1012 Develop and Refine Systems for Continuous Improvement in Operations		

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Occupational Standa	ard: Remedial Massage Therapy Level V	
Unit Title	Provide Remedial Massage Treatment within a Corporate Setting	
Unit Code	HTH RMT5 01 0611	
Unit Descriptor	This unit of competence describes the skills and knowledge required to administer remedial massage treatments within a corporate environment.	

El	Elements		ormance Criteria
1.	<ol> <li>Identify common Musculoskeletal injuries and</li> </ol>		Common work related musculoskeletal injuries and their causes are identified and described according to clinic guidelines
	associated treatment procedures	1.2	<i>Industry standard massage therapy principles</i> regarding procedures and/or approaches for treating <i>common musculoskeletal injuries</i> in the workplace are explained and described
		1.3	Massage therapy procedures useful and/or appropriate for application in the workplace are identified according to clinic guidelines
2.	2. Provide massage programs within a corporate		A relationship of trust is built and maintained with the corporate client, with active promotion of and strict adherence to confidentiality.
	environment	2.2	A program that suits to corporate client is developed
		2.3	Client consent for treatment is ensured from individual clients according to clinic guidelines
		2.4	Monitoring of individual client health is undertaken in line with agreement with corporate client
3.	Treat common musculoskeletal injuries in work place	3.1	A <i>treatment package</i> is developed incorporating massage techniques and/or massage therapy techniques to treat <i>common musculoskeletal injuries</i> in the workplace
		3.2	A treatment package is implemented through the <i>integration of various techniques</i> according to clinic guidelines
		3.3	Changes to the workplace and work practices which cause musculoskeletal stress is recommended
		3.4	<b>Self management programs</b> practices are established, explained, clarified and instigated according to job requirement

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		3.5	<b>Rehabilitation programs</b> are established, explained, clarified and instigated with the client according to workplace ethics and clinic guidelines
		3.6	Client is referred to <b>other health professionals</b> in relation to areas/aspects in which the therapist is not currently competent on rehabilitation programs.
4.	Provide support packages for	4.1	Self management programs are established, explained, clarified and instigated according to job requirement
	individual clients	4.2	Client is advised and taught relevant <b>self massage</b> <b>techniques</b> to assist in self management programs
		4.3	<b>Contraindications for massage</b> is explained and discussed with client
		4.4	Client is advised as per the requirement considering age and cultural conditions
5.	Market/promote corporate	5.1	Potential appropriate <i>promotional activities</i> are identified according to workplace requirement.
	massage	5.2	Promotional activities are planned to the needs of the organization
		5.3	Timelines and costs for promotion of activities are ensured that they are realistic and consistent with budget resources
		5.4	Relationships are established with targeted groups in a manner which enhances the positive image of the service
		5.5	Networks and other communication means are used to assist in the promotion of service
6.	Evaluate services/	6.1	Individual clients are asked to ascertain their level of comfort and compliance with the treatment
	treatment	6.2	Degree of improvement or changes in condition of clients is ascertained and compared with expectations of the corporate client
		6.3	Clients are provided with clear information about their level of improvement
		6.4	Treatment is assessed and reviewed as required following clinic guidelines
		6.5	Treatment progress is documented in appropriate format according to clinical requirements
		6.6	Impact of ongoing treatment in relation to the physical, mental and emotional condition and behaviour in the workplace is evaluated in conjunction with corporate client
		6.7	Individual clients are encouraged to maintain their health

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	by active involvement in their treatment and ongoing health care
6.	8 Other treatment practitioners are consulted as necessary and appropriate
6.	9 Client is referred to other health professionals if condition deteriorates

Variables	Range		
Occupational Health & Safety (OH&S)	<ul> <li>Apply infection control procedures</li> <li>Use appropriate protective and clothing for the work</li> <li>Follow occupational health and safety procedures and rules</li> <li>Confidential for client's case and problems</li> </ul>		
Tools and Equipment	<ul> <li>Telephone, notice board (poster)</li> <li>First Aid Kit</li> <li>Bathing facility</li> </ul>		
Clients	<ul> <li>May include</li> <li>Corporate organizations and companies</li> <li>Individual clients who may be:</li> <li>are usually committed and self-motivated to return</li> <li>female or male</li> <li>with or without a disability or special needs</li> <li>with or without social disadvantage</li> <li>and/or from minority ethnic and cultural groups</li> </ul>		
Common musculoskeletal injuries may include but are not limited to:	<ul> <li>local pain, sharp, dull, achy, deep, surface</li> <li>fatigue</li> <li>inflammation</li> <li>lumps and tissue changes</li> <li>rashes and changes in the skin</li> <li>edema</li> <li>mood alterations, eg, depression, anxiety</li> <li>infection</li> <li>changes in habits such as appetite elimination or sleep</li> <li>bleeding and bruising</li> <li>nausea, vomiting or diarrhoea</li> <li>temperature, hot or cold</li> <li>Endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected</li> <li>anterior triangle of the neck</li> <li>posterior triangle of the neck</li> <li>area of the sternal notch and anterior throat</li> <li>twelfth rib dorsal body</li> <li>sciatic notch</li> </ul>		

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	inquinal triangle
Contraindications for massage may include:	<ul> <li>seated, prone, supine and side recumbent lying, and through clothing as well as conventional table massage.</li> <li>These include but are not limited to:</li> <li>Passive joint movement techniques</li> <li>Joints are moved through their range of movement, i e to the point of mild tissue resistance. Passive soft tissue movement involves:</li> <li>Technique is applied with palmer surfaces of the hand, heel of hand and/or fingers</li> <li>Jostling:</li> <li>Shaking of the muscle from origin to insertion</li> <li>Gliding techniques</li> <li>Effleurage:</li> <li>Broad superficial strokes using the entire palm surface of the hands to cover large surface areas of the body</li> <li>Longitudinal stroking:</li> <li>Deep gliding movement is applied in the direction of the muscle fibres through focal pressure using any of the following; fingers, palm, heel of hands, forearm and/or knuckles</li> <li>Transverse gliding</li> <li>Cross over stroke:</li> <li>Pulling and pushing of the tissue using the hands in a criss-cross manner</li> <li>Kneading/petrissage</li> <li>Technique is applied with palm surface of the hand, heel of hand and/or fingers</li> <li>Soft tissue is mobilized with rhythmical circular rolling, squeezing or pulling movements</li> <li>Friction techniques</li> <li>Superficial tissue is moved over an underlying structure in circular, longitudinal or transverse directions</li> <li>Deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles</li> <li>Friction techniques</li> <li>Superficial tissue is moved over an underlying structure in circular, longitudinal or transverse directions</li> <li>Deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles</li> <li>Friction techniques are believed to be beneficial in releasing adherent/scar tissue Compressive techniques</li> <li>Digital pressure</li> <li>Compression: successive and rapid pressure, ie a series of short duration compressions, is applied to soft tissue between two stru</li></ul>
	Percussion: cupping, tapping, hacking, pummeling and flicking are applied rbythmically using the bands
	<ul><li>flicking are applied rhythmically using the hands</li><li>Temperature therapy</li></ul>
	Conduction, eg heat packs and immersion baths
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	<b>—</b> • •
	<ul><li>Friction</li><li>Topical applications</li></ul>
	<ul> <li>Topical applications</li> <li>Deep tissue massage techniques</li> </ul>
	<ul> <li>Myofacial release: techniques conducted on superficial</li> </ul>
	and/or deep tissues to:
	<ul> <li>Lengthen tissue</li> </ul>
	Increase range of movement
	Decrease compartment pressure
	Restore elasticity
	Manual lymphatic drainage
	• Trigger point release techniques: apply digital ischemic
	pressure and/or apply stretching after treatment. It
	incorporates:
	Ischemic pressure
	Stretching
	Stretching techniques:
	Static stretching
	Dynamic stretching
	- Proprioceptive Neuromuscular Facilitation stretching:
	contract-relax and hold-relax
Programs may	Aim/purpose/outcomes of program
include the following	Frequency of visits
	Number of individual clients
	Time allocated to individual clients
	Cost and payment
	Referral mechanisms
	Confidentiality processes
	<ul> <li>Promotion to individual clients</li> </ul>
	<ul> <li>Reporting and evaluation mechanisms</li> </ul>
Industry standard	<ul> <li>Relevant national, state/territory or local massage therapy</li> </ul>
massage therapy	organizations' and/or associations' Code of Ethics or Code
principles may	of Conduct documents/policies, regulations and guidelines
include:	Relevant national, state/territory or local government
	regulations and guidelines
	<ul> <li>Accepted preventative practices adopted by self or peers</li> </ul>
	to minimize safety hazards and risks in the same or similar
	situations
	Current and past good practice demonstrated by self or
	peers in the same or similar situation
Other health	Practitioners who can competently make assessments
professionals may	regarding conditions that may potentially be complicated by
include	the application of massage techniques
	Medical practitioners
	Physiotherapists
	Chiropractors

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Self-management	<ul> <li>Osteopaths</li> <li>Other massage therapists with current competencies in modalities outside the scope of the practitioner, eg, specializing in oriental modalities</li> <li>Naturopaths/homeopath therapists</li> <li>Podiatrists</li> <li>Yoga/relaxation/tai chi instructors</li> <li>Dentists</li> <li>Exercise therapists</li> <li>Acupuncturists</li> <li>Assisting the client in areas such as:</li> </ul>
program may include	<ul> <li>activities or tasks to avoid</li> <li>self stretches or simple exercises</li> <li>simple temperature therapy techniques</li> </ul>
	<ul> <li>self-massage techniques</li> <li>workplace activities</li> </ul>
Promotional activities may include	<ul> <li>Media announcements</li> <li>Employee functions</li> <li>Client functions</li> <li>Product launches</li> <li>Advertisements</li> <li>Web pages</li> </ul>

Evidence Guide				
Critical Aspe Competence		demonstrate Develope optimal which inv treated a demonst under the petriss effleut strokin passiv passiv friction vibrati compl pressiv tempe deep	a range of conditions/disease state trated the application of all of the t e range of variables: sage/kneading rage including cross over stroke, lo ng, gliding techniques ve joint movement techniques ve soft tissue movement n techniques ion ressive techniques including digital	olans to achieve ve quality of life s echniques listed
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Underpinning Knowledge and Attitudes	<ul> <li>musculoskeletal system</li> <li>assessed injuries and developed a treatment package incorporating packaging of advanced massage</li> <li>applied techniques and/or massage therapy techniques to treat common injuries</li> <li>implemented a treatment package through the integration of various techniques and modalities</li> <li>established, explained, clarified and instigated self-management programs</li> <li>Designed an advanced treatment plan and described it's progressions</li> <li>Palpated and identified all bones/structures and muscle groups available to palpation</li> <li>Gathered, interpreted and convey ed information through the tactile senses</li> <li>Demonstrated communicate skills and Communicated with a range of individual clients</li> <li>Communicate effectively to gain required information</li> </ul>
	<ul> <li>Relevant pathology/symptomology</li> <li>Relevant nutrition for the general well-being of clients</li> <li>Impact of workplace practices on the musculoskeletal system</li> <li>Common workplace musculoskeletal injuries</li> <li>OH&amp;S as it relates to a range of workplaces</li> <li>Understanding of the corporate environment and where massage programs may fit into this environment</li> </ul>
•	
Underpinning Skills	associated
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	environment
	<ul> <li>Treating common musculoskeletal injuries</li> </ul>
	<ul> <li>Providing support packages for individual clients</li> </ul>
	Evaluating services/treatment
	Gathering, interpreting and conveying information through the tactile senses
	<ul> <li>Demonstrating communicate skills and Communicated with a range of individual clients</li> </ul>
	Communicating effectively to gain required information
	Recording information accurately
Resource	The following resources must be provided:
Implications	Massage therapy facilities
	Massage therapy equipment
	Skilled assessors
Methods of	Competence may be assessed through:
Assessment	Interview / Written Test
	Demonstration / Observation with Oral Questioning
Context Of	Competence may be assessed in the work place or in a
Assessment	simulated work place setting

Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Remedial Massage Treatment Strategy		
Unit Code	HTH RMT5 02 0611		
Unit Descriptor	This unit describes the skills required to prepare for remedial massage treatment of a clients/patients and negotiate a treatment management plan with them.		

remedial massage principles to determine treatment strategyare determined according to assessment of client/patient and within the skills of competence of the practitioner1.2 <b>Contra-indications</b> to treatment strategy used is modified according to massage principles1.3Treatment, information and advice provided by othe health care professionals is taken into consideration i determining the strategy to be used in treatment1.4Treatment, strategy appropriate to the client/patient condition is selected and supported on the basis of established massage practice1.5Specific treatment options take into consideration possible client/patient compliance issues1.6An appropriate package of <b>massage techniques</b> is selected1.7Client/patient <b>constitution</b> is considered in selectin treatment2. Discuss the treatment strategy with the client/patient2.1Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient2.1Sufficient time is allocated to conclude sessions at pace appropriate is needs2.3Client/patient <b>compliance</b> is negotiated	Elements	Perf	ormance Criteria
determine treatment strategy1.2Complicating factors are ascertained and treatment scomplicating factors are ascertained and treatment strategy used is modified according to massag principles1.3Treatment, information and advice provided by othe health care professionals is taken into consideration i determining the strategy to be used in treatment1.4Treatment, strategy appropriate to the client/patient' condition is selected and supported on the basis of established massage practice1.5Specific treatment options take into consideratio possible client/patient compliance issues1.6An appropriate package of massage techniques is selected1.7Client/patient constitution is considered in selectin treatment2. Discuss the treatment strategy with the client/patient2.12. Discuss the treatment strategy with the client/patient2.12. Discuss the treatment2.12.1Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient2.2Treatment strategy is discussed according to th client/patient's needs2.3Client/patient compliance is negotiated	remedial massage	1.1	Appropriate <i>remedial massage principles</i> of treatment are determined according to assessment of client/patient and within the skills of competence of the practitioner
<ul> <li>health care professionals is taken into consideration i determining the strategy to be used in treatment</li> <li>1.4 Treatment strategy appropriate to the client/patient' condition is selected and supported on the basis of established massage practice</li> <li>1.5 Specific treatment options take into consideration possible client/patient compliance issues</li> <li>1.6 An appropriate package of <i>massage techniques</i> is selected</li> <li>1.7 Client/patient <i>constitution</i> is considered in selectin treatment</li> <li>2. Discuss the treatment strategy with the client/patient</li> <li>2.1 Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient</li> <li>2.2 Treatment strategy is <i>discussed</i> according to the client/patient's needs</li> <li>2.3 Client/patient <i>compliance</i> is negotiated</li> </ul>	determine treatment	1.2	complicating factors are ascertained and treatment strategy used is modified according to massage
<ul> <li>condition is selected and supported on the basis of established massage practice</li> <li>1.5 Specific treatment options take into consideration possible client/patient compliance issues</li> <li>1.6 An appropriate package of <i>massage techniques</i> is selected</li> <li>1.7 Client/patient <i>constitution</i> is considered in selectinn treatment</li> <li>2. Discuss the treatment strategy with the client/patient</li> <li>2.1 Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient</li> <li>2.2 Treatment strategy is <i>discussed</i> according to the client/patient's needs</li> <li>2.3 Client/patient <i>compliance</i> is negotiated</li> </ul>		1.3	Treatment, information and advice provided by other health care professionals is taken into consideration in determining the strategy to be used in treatment
<ul> <li>possible client/patient compliance issues</li> <li>1.6 An appropriate package of <i>massage techniques</i> is selected</li> <li>1.7 Client/patient <i>constitution</i> is considered in selectin treatment</li> <li>2. Discuss the treatment strategy with the client/patient</li> <li>2.1 Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient</li> <li>2.2 Treatment strategy is <i>discussed</i> according to the client/patient's needs</li> <li>2.3 Client/patient <i>compliance</i> is negotiated</li> </ul>		1.4	Treatment strategy appropriate to the client/patient's condition is selected and supported on the basis of established massage practice
<ul> <li>selected</li> <li>1.7 Client/patient constitution is considered in selectin treatment</li> <li>2. Discuss the treatment strategy with the client/patient</li> <li>2.1 Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient</li> <li>2.2 Treatment strategy is discussed according to th client/patient's needs</li> <li>2.3 Client/patient compliance is negotiated</li> </ul>		1.5	Specific treatment options take into consideration possible client/patient compliance issues
treatment2. Discuss the treatment strategy with the client/patient2.1 Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient2.1 Sufficient time is allocated to conclude sessions at pace appropriate to the client/patient2.2 Treatment strategy is discussed according to th client/patient's needs2.3 Client/patient compliance is negotiated		1.6	An appropriate package of <i>massage techniques</i> is selected
treatment strategy with the client/patientpace appropriate to the client/patient2.2Treatment strategy is discussed according to th client/patient's needs2.3Client/patient compliance is negotiated		1.7	Client/patient <i>constitution</i> is considered in selecting treatment
client/patient client/patient's needs 2.3 Client/patient compliance is negotiated		2.1	Sufficient time is allocated to conclude sessions at a pace appropriate to the client/patient
		2.2	
		2.3	Client/patient <i>compliance</i> is negotiated
2.4 <b>Discrepancies</b> between the practitioner's and th client/patient's perception of the condition are clarified		2.4	• •
2.5 Any perceived risks of the client/patient's condition an treatment are explained		2.5	Any perceived risks of the client/patient's condition and treatment are explained
2.6 <b>Responsibilities of practitioner and client/patien</b> within the treatment plan are discussed		2.6	<b>Responsibilities of practitioner and client/patient</b> within the treatment plan are discussed
2.7 Management of selected treatment in relation to an		2.7	Management of selected treatment in relation to any

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	other current therapies is negotiated		
	2.8 <b>Treatment evaluation strategies</b> are discussed		
Variables	Range		
Remedial massage principles refers to:	<ul> <li>Principles and practices of the remedial massage therapy framework</li> <li>Relevant code of ethics or code of conduct documents/policies, regulations and guidelines state/territory or local massage therapy organizations and/or associations</li> <li>Relevant national, state/territory or local government regulations and guidelines</li> <li>Accepted preventative practices adopted by self or peers to minimize safety hazards and risks in the same or similar situations</li> </ul>		
Current and past good practice demonstrated by self or peers in the same or similar situation Contraindications to treatment and possible complicating factors may include:	<ul> <li>Massage therapists are not expected to diagnose any conditions but must be able to recognize the indications and contra-indications of conditions</li> <li>Massage is contra-indicated in all infectious diseases suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner</li> <li>Always refer for diagnosis when symptoms do not have a logical explanation.</li> </ul>		
Indications for referral include:	<ul> <li>Pain local, sharp, dull, achy, deep, surface</li> <li>Fatigue</li> <li>Inflammation</li> <li>Lumps and tissue changes</li> <li>Rashes and changes in the skin</li> <li>Edema</li> <li>Mood alterations, eg depression, anxiety</li> <li>Infection</li> <li>Changes in habits such as appetite elimination or sleep</li> <li>Bleeding and bruising</li> <li>Nausea, vomiting or diarrhoea</li> <li>Temperature-hot or cold</li> <li>Endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected Anterior triangle of the neck</li> <li>Posterior triangle of the neck</li> <li>Axillary area</li> <li>Medial epicondyle</li> <li>Lateral epicondyle</li> <li>Area of the sternal notch and anterior throat</li> <li>Umbilicus area</li> </ul>		

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• Sciatic notch         • Inguinal triangle         • Popliteal fossa         Massage techniques:         • To be performed in a variety of positions, ie standin seated, prone, supine and side recumbent lying, at through clothing as well as conventional table massage. This may include:         • Passive joint movement techniques         • Joints are moved through their range of movement, ie the point of mild tissue resistance         • Passive soft tissue movement         • Technique is applied with palmer surfaces of the har heel of hand and/or fingers         • Jostling: shaking of the muscle from origin to insertion         • Gliding techniques         • Effleurage: broad superficial strokes using the enti palmer surface of the hands to cover large surface are of the body are exhibited         • Longitudinal stroking: deep gliding movement is applied the direction of the muscle fibres through focal pressu using fingers, palm, heel of hands, forearm and/ knuckles         • Transverse gliding         • Cross over stroke: pulling and pushing of the tissue usin the hands in a criss-cross manner is exhibited         • Kneading         • Technique is applied with palm surface of the hand, heel hand and/or fingers         • Soft tissue is mobilized with rhythmical circular rollin squeezing or pulling movements         • Tratsverse gliding is superficial tissue is moved over an underlying structure circular, longitudinal or transverse directions         • Digital pressure       Soft tissue is	<b>F</b>	Γ			
•       Inguinal triangle         •       Popliteal fossa         Massage       •       To be performed in a variety of positions, ie standin seated, prone, supine and side recumbent lying, at through clothing as well as conventional table massage. This may include:         •       Passive joint movement techniques         •       Joints are moved through their range of movement, ie the point of mild tissue resistance         •       Passive soft tissue movement         •       Technique is applied with palmer surfaces of the hand hand and/or fingers         •       Jostting: shaking of the muscle from origin to insertion         •       Gliding techniques         •       Effleurage: broad superficial strokes using the entitipalmer surface of the hands to cover large surface are of the body are exhibited         •       Longitudinal stroking: deep gliding movement is applied the direction of the muscle fibres through focal pressus using fingers, palm, heel of hands, forearm and/knuckles         •       Transverse gliding         •       Cross over stroke: pulling and pushing of the tissue usit the hands in a criss-cross manner is exhibited         •       Kneading         •       Technique is applied with palm surface of the hand, heel hand and/or fingers         •       Soft tissue is moved over an underlying structure circular, longitudinal or transverse directions         •       Soft tissue is moved over an un					
Popliteal fossa Massage techniques:     To be performed in a variety of positions, ie standin seated, prone, supine and side recumbent lying, an through clothing as well as conventional table massage. This may include:     Passive joint movement techniques     Joints are moved through their range of movement, ie the point of mild tissue resistance     Passive soft tissue movement     Technique is applied with palmer surfaces of the har heel of hand and/or fingers     Jostling: shaking of the muscle from origin to insertion     Gliding techniques     Effleurage: broad superficial strokes using the enti palmer surface of the hands to cover large surface are of the body are exhibited     Longitudinal stroking: deep gliding movement is applied the direction of the muscle fibres through focal pressu using fingers, palm, heel of hands, forearm and/ knuckles     Transverse gliding     Cross over stroke: pulling and pushing of the tissue usi the hands in a criss-cross manner is exhibited     Kneading     Technique is applied with palm surface of the hand, heel hand and/or fingers     Soft tissue is mobilized with rhythmical circular rollin squeezing or pulling movements     Superficial tissue is moved over an underlying structure circular, longitudinal or transverse directions     Deep repetitive movements     Superficial tissue is moved to be beneficial releasing adherent/scar tissue     Compressive techniques     Digital pressure     Compression: successive and rapid pressure - a series short duration compressions, is applied to soft tissu between two structures, ie underlying bone structures at therapist's hand, or hand     Percussion: cupping, hacking, pummelling an ticking are applied mythmically using the hands     Petrissage     Temperature therapy     Conduction, eg heat packs and immersion baths     Radiation, eg ray lamps					
Massage techniques: <ul> <li>To be performed in a variety of positions, ie standin seated, prone, supine and side recumbent lying, at through clothing as well as conventional table massage. This may include:</li> <li>Passive joint movement techniques</li> <li>Joints are moved through their range of movement, ie the point of mild tissue resistance</li> <li>Passive soft tissue movement</li> <li>Technique is applied with palmer surfaces of the har heel of hand and/or fingers</li> <li>Jostling: shaking of the muscle from origin to insertion</li> <li>Gliding techniques</li> <li>Effleurage: broad superficial strokes using the enti palmer surface of the hands to cover large surface are of the body are exhibited</li> <li>Longitudinal stroking: deep gliding movement is applied the direction of the muscle fibres through focal pressu using fingers, palm, heel of hands, forearm and/ knuckles</li> <li>Transverse gliding</li> <li>Cross over stroke: pulling and pushing of the tissue usin the hands in a criss-cross manner is exhibited</li> <li>Kneading</li> <li>Technique is applied with palm surface of the hand, heel hand and/or fingers</li> <li>Soft tissue is mobilized with rhythmical circular rollin squeezing or pulling movements</li> <li>Superficial tissue is moved over an underlying structure circular, longitudinal or transverse directions</li> <li>Deep repetitive movements of short amplitude are applie usually with thumbs, fingers and knuckles</li> <li>Friction techniques</li> <li>Digital pressure</li> <li>Compression: s</li></ul>		<b>5</b>			
techniques:       seated, prone, supine and side recumbent lying, and through clothing as well as conventional table massage. This may include:         Passive joint movement techniques       Joints are moved through their range of movement, ie the point of mild tissue resistance         Passive soft tissue movement       Technique is applied with palmer surfaces of the hand heel of hand and/or fingers         Josting: shaking of the muscle from origin to insertion       Gliding techniques         Effleurage: broad superficial strokes using the entipalmer surface of the hands to cover large surface are of the body are exhibited         Longitudinal stroking: deep gliding movement is applied the direction of the muscle fibres through focal pressu using fingers, palm, heel of hands, forearm and/knuckles         Transverse gliding       Cross over stroke: pulling and pushing of the tissue usit the hands in a criss-cross manner is exhibited         Kneading       Technique is applied with palm surface of the hand, heel hand and/or fingers         Soft tissue is mobilized with rhythmical circular rollin squeezing or pulling movements         Friction techniques       Superficial tissue is moved over an underlying structure circular, longitudinal or transverse directions         Deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles       Friction techniques are believed to be beneficial releasing adherent/scar tissue         Compressive techniques       Digital pressure - a series short duration compressions, is applied to soft tissubetween two structures, ie underlying bone structu					
<ul> <li>Technique is applied with palm surface of the hand, heel hand and/or fingers</li> <li>Soft tissue is mobilized with rhythmical circular rollin squeezing or pulling movements</li> <li>Friction techniques</li> <li>Superficial tissue is moved over an underlying structure circular, longitudinal or transverse directions</li> <li>Deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles</li> <li>Friction techniques are believed to be beneficial releasing adherent/scar tissue</li> <li>Compressive techniques</li> <li>Digital pressure</li> <li>Compression: successive and rapid pressure - a series short duration compressions, is applied to soft tissue between two structures, ie underlying bone structures are therapist's hand, or hand to hand</li> <li>Percussion: cupping, tapping, hacking, pummelling an flicking are applied rhythmically using the hands</li> <li>Petrissage</li> <li>Temperature therapy</li> <li>Conduction, eg heat packs and immersion baths</li> <li>Radiation, eg ray lamps</li> </ul>	5	<ul> <li>To be performed in a variety of positions, ie standing, seated, prone, supine and side recumbent lying, and through clothing as well as conventional table massage. This may include:</li> <li>Passive joint movement techniques</li> <li>Joints are moved through their range of movement, ie to the point of mild tissue resistance</li> <li>Passive soft tissue movement</li> <li>Technique is applied with palmer surfaces of the hand, heel of hand and/or fingers</li> <li>Jostling: shaking of the muscle from origin to insertion</li> <li>Gliding techniques</li> <li>Effleurage: broad superficial strokes using the entire palmer surface of the hands to cover large surface areas of the body are exhibited</li> <li>Longitudinal stroking: deep gliding movement is applied in the direction of the muscle fibres through focal pressure using fingers, palm, heel of hands, forearm and/or knuckles</li> <li>Transverse gliding</li> <li>Cross over stroke: pulling and pushing of the tissue using the hands in a criss-cross manner is exhibited</li> </ul>			
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<ul> <li>Deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles</li> <li>Friction techniques are believed to be beneficial releasing adherent/scar tissue</li> <li>Compressive techniques</li> <li>Digital pressure</li> <li>Compression: successive and rapid pressure - a series short duration compressions, is applied to soft tissubetween two structures, ie underlying bone structures and therapist's hand, or hand to hand</li> <li>Percussion: cupping, tapping, hacking, pummelling and flicking are applied rhythmically using the hands</li> <li>Petrissage</li> <li>Temperature therapy</li> <li>Conduction, eg heat packs and immersion baths</li> <li>Radiation, eg ray lamps</li> </ul>	Friction techniques	• Superficial tissue is moved over an underlying structure in			
compressive techniquesDigital pressure• Digital pressure • Compression: successive and rapid pressure - a series short duration compressions, is applied to soft tiss between two structures, ie underlying bone structures and therapist's hand, or hand to hand • Percussion: cupping, tapping, hacking, pummelling and flicking are applied rhythmically using the hands • Petrissage • Temperature therapy • Conduction, eg heat packs and immersion baths • Radiation, eg ray lamps		• Deep repetitive movements of short amplitude are applied usually with thumbs, fingers and knuckles			
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flicking are applied rhythmically using the hands <ul> <li>Petrissage</li> <li>Temperature therapy</li> <li>Conduction, eg heat packs and immersion baths</li> <li>Radiation, eg ray lamps</li> </ul>		<ul> <li>Compression: successive and rapid pressure - a series of short duration compressions, is applied to soft tissue between two structures, ie underlying bone structures and</li> </ul>			
		<ul> <li>Percussion: cupping, tapping, hacking, pummelling and flicking are applied rhythmically using the hands</li> <li>Petrissage</li> <li>Temperature therapy</li> <li>Conduction, eg heat packs and immersion baths</li> </ul>			
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Techniques conducted on superficial and/or deep tissues to:	<ul> <li>Friction</li> <li>Topical applications</li> <li>Deep tissue massage techniques</li> <li>Myofascial release</li> <li>Lengthen tissue</li> <li>Reduce adhesions</li> <li>Increase range of movement</li> <li>Decrease compartment pressure</li> <li>Restore elasticity</li> <li>Manual lymphatic drainage</li> <li>Trigger point release techniques</li> <li>Apply digital ischemic pressure and/or apply stretching after treatment. It incorporates ischemic pressure and stretching</li> <li>Stretching techniques: <ul> <li>Static stretching</li> <li>Dynamic stretching</li> <li>Proprioceptive neuromuscular facilitation stretching</li> <li>Contract-relax</li> <li>Hold-relax</li> <li>Muscle energy technique</li> </ul> </li> </ul>
Client/patient constitution refers to:	<ul> <li>Tolerance of pain</li> <li>Muscle tone</li> <li>Fitness</li> <li>Mental attitude</li> <li>Age, fragility</li> </ul>
Client/patient compliance refers to:	<ul> <li>Ability to follow instructions or suggestions</li> <li>Willingness/motivation to follow instructions or suggestions</li> </ul>
Discrepancies may include:	<ul> <li>Client/patient is unaware of the immediate danger of their condition</li> <li>Client/patient is over anxious about their condition</li> <li>Client/patient is unaware of maintaining causes acting on their condition</li> <li>Practitioner is unaware of some implications of the client/patient 's condition</li> <li>Practitioner and client/patient have different views of what the main problem is</li> </ul>
Discussion may include:	<ul> <li>Face to face discussion</li> <li>Electronic communication</li> <li>Telephone discussion</li> </ul>
Practitioner responsibilities may include:	<ul> <li>Isolating the sick person</li> <li>Provide advice on public health matters</li> <li>Commitment to the treatment plan</li> <li>Discussing relevant contra-indications or potential complications to treatment</li> </ul>
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	<ul> <li>Review of treatment plan</li> </ul>	
Client/patient responsibilities may include:	<ul> <li>Following instruction/advice during and post treatment</li> <li>Advising practitioner of any relevant contraindications potential complications to treatment</li> <li>Advising practitioner of compliance issues</li> <li>Commitment to the treatment plan</li> </ul>	or
Treatment evaluation strategies may include:	<ul> <li>Discussion and review of response to treatment</li> <li>Reviewing achievement of treatment goals</li> <li>Monitoring time frame for achieving treatment goals</li> </ul>	

Evidence Guide	
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills includes the ability to:</li> <li>Demonstrated ability to identify treatment options and establish treatment regimes</li> <li>Demonstrated ability to prepare treatment plans</li> <li>Identified bone landmarks, structures and individual muscles through palpation.</li> <li>Transcribed assessment findings and treatment in a patient history using accepted medical terminology</li> <li>Demonstrated communication and negotiation skills</li> <li>Communicate effectively with clients</li> <li>Apply assessment framework</li> <li>Demonstrated ability to read medical reports</li> <li>Demonstrated ability to read medical reports</li> <li>Demonstrated ability to comprehend common medical terminology</li> </ul>
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of:</li> <li>Awareness of critical information required for diagnosis and treatment according to massage therapy framework</li> <li>the organization of the body</li> <li>the systems and regions of the body</li> <li>the structure and function of the particular system, classification of joints and types and ranges of motion</li> <li>the structure and function of the nervous system</li> <li>regional anatomy</li> <li>the structure and function of the respiratory system</li> <li>the reproductive system</li> <li>the endocrine system</li> <li>the structure and function of the nervous system</li> <li>the structure and function of the nervous system</li> <li>the structure and function of the nervous system</li> <li>the structure and function of the respiratory system</li> <li>the structure and function of the nervous system</li> </ul>

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Underpinning Skills	<ul> <li>pathology and symptomology</li> <li>structure and function of anatomical systems</li> <li>the principles of human movement and biomechanics</li> <li>Technical and practical knowledge of treatment</li> <li>indications for massage</li> <li>possible reactions and contraindications for massage</li> <li>the organization of the body</li> <li>the systems and regions of the body</li> <li>the structure and function of the articular system, classification of joints and types and ranges of motion</li> <li>the structure and function of the nervous system</li> <li>regional anatomy</li> <li>the structure and function of the respiratory system</li> <li>the structure and function of the nervous system</li> <li>the structure and function of the cardiovascular system</li> <li>the structure and function of the cardiovascular system</li> <li>the structure and function of the cardiovascular system</li> <li>pathology and symptomology</li> <li>possible obstacles to treatment</li> <li>community resources and support services</li> <li>ethical and legal implications of enquiry and treatment</li> <li>transcribe assessment findings and treatment in a patient history using accepted medical terminology</li> <li>identify and describe a treatment outcome using accepted medical terminology</li> <li>use equipment and technology effectively and safely</li> <li>identify prominent bones/structures and major muscle groups through palpation</li> </ul>
Resource Implications	<ul> <li>Resource requirements may include:</li> <li>An appropriately stocked and equipped clinic or simulated clinic environment</li> <li>Relevant texts or medical manuals</li> <li>Anatomical models</li> <li>Relevant paper-based/video/electronic assessment instruments</li> <li>Appropriate assessment environment</li> </ul>
Methods of Assessment	<ul> <li>Appropriate assessment environment</li> <li>Competence may be assessed through:</li> <li>Interview / Written Test</li> <li>Demonstration / Observation with Oral Questioning</li> </ul>
Context Of Assessment	Competence may be assessed in the work place or in a simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V				
Unit Title	Provide Specific Massage Therapies Treatments, Health Assessment and Care			
Unit Code	HTH RMT5 03 0611			
Unit Descriptor	This unit of competence describes the skills and knowledge required to provide specialized remedial massage, treatment for specific client groups and common conditions/disease states in accordance with the age, gender and mental health needs of the client. This unit requires a high level knowledge of remedial, Thai aromatherapy massage treatments.			

Elements	Performance Criteria			
1. Provide specific care for children and adolescents	1.1	<i>The <b>case</b></i> with specific reference to the age, gender and/or particular state of the client is taken into consideration		
	1.2	<b>Consent</b> is obtained from a parent/guardian/care giver prior to commencing assessment according to standard guidelines relating to age		
	1.3	An assessment relevant to the presenting symptoms and the age, gender and/or particular state of the client is conducted		
	1.4	The health of the client is assessed according to standard guidelines relating to age, and with regard to conditions common to their age, gender and/or <i>particular state</i>		
	1.5	Specific consideration is given to any deviations from the <i>normal percentiles or developmental norms</i> for the age group according standards of operation		
	1.6	Any deviations from the <i>normal percentiles, mental</i> and emotional development norms and physiological features for the age group are recorded		
	1.7	A <i>Treatment plan</i> is developed and implemented according to findings and potential sensitivities		
	1.8	Findings, treatment plan and <i>therapeutic expectations</i> are <i>d</i> ocumented according to <i>clinic guidelines</i>		
	1.9	Necessary steps are taken to ensure the client's dignity is maintained at all times		
	1.10	Factors those likely to have a negative impact on assessment are identified in consultation with the client and strategies are implemented to minimize the effects of these factors wherever possible		

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	1.11	Treatment plan is implemented the according to		
		standard guidelines relating to age, and with regard to conditions common to their age, gender and/or <i>particular</i> state		
		Follow up visit/s is/are organized and documented according to clinic guidelines		
		Responses are documented according to clinic guidelines and treatment is adjusted accordingly		
2. Provide specific assessment and care for adult		The <b>case</b> with specific reference to the age, gender and/or particular state of the client is taken into consideration		
females/males		Consent is obtained from a parent/guardian/care giver prior to commencing assessment according to workplace guideline		
		An assessment relevant to the presenting symptoms and the age, gender and/or particular state of the client is conducted		
		The health of the client is assessed according to standard guidelines relating to age, and with regard to conditions common to their age, gender and/or particular state		
		Specific consideration is given to the reproductive system and function		
		Physical examination is conducted with special regard to <i>common conditions</i> of the female/male and findings documented according to clinic guidelines		
		Physical examination is conducted with special regard to common conditions of women in various <i>life stages</i> and according to local and national regulations		
		Potential sensitivities of the client is anticipated, and relevant approach is adapted accordingly and steps are taken to ensure the client's dignity is maintained at all times		
		Factors those likely to have a negative impact on assessment are identified in consultation with the client and strategies are implemented to minimize the effects of these factors wherever possible		
		A <i>treatment plan</i> is developed and implemented according to findings		
		Findings of the treatment plan and therapeutic expectations are documented according to clinic guidelines		
	2.12	Follow up visit/s is/are organized and documented		
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				ing to clinic guidelines		
		2.13		conses are documented according to clinic elines and treatment is adjusted accordingly		
3. Provide geriatric care		eriatric 3.1		<b>se with</b> special reference to the <b>a</b> <b>lual</b> and with special consideration memory, cognitive ability and care n into consideration according to c	to the client's requirements	
		3.2		alth of the client is assessed with s eration to conditions relating to agi		
		3.3	comm	al examination is conducted with s <b>on conditions</b> of aging and docun ing to clinic guidelines		
		3.4	relevar	<b>ial sensitivities</b> of the client is and at approach is adapted accordingly o ensure the client's dignity is main	and steps are	
			assess and str	s those likely to have a negative im ment are identified in consultation ategies are implemented to minimi actors wherever possible	with the client	
		3.6		<b>ment plan</b> is developed and imple ing to findings	emented	
	are 3.8 <b>Fol</b>		3.7 Findings, treatment plan and therapeutic expectations are documented according to clinic guidelines			
				Follow up visit/s is organized and documented according to clinic guidelines		
		3.9	Responses are documented according to clinic guidelines and treatment is adjusted accordingly			
4.	Manage the specialized	4.1		edge of remedial massage is used ppropriate treatment strategy	to select the	
	remedial massage treatment	4.2		s which may interfere with the e atment are taken into account	ffectiveness of	
		4.3		le treatment reactions are taken in ing to clinic guidelines	to account	
		4.4	Contra-indications are taken into account and necessary measures are taken according to clinic guidelines and treatment plan			
		4.5	<b>Consent for treatment</b> is ensured prior to treatment according to clinic guidelines			
		4.6		ons to treatment (adverse or othervized and <i>responded to</i> promptly it	,	
4.7 Assessments results and recommendations are recorded				ons are recorded		
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		and he	adled in appropriate form appordin	a to
			andled in appropriate form accordin vorkplace guidelines	gio
	4	enquir	nent plan is explained to the client a ies are responded to and appropriate are used	
	4		nent is provide according to treatment of the treatment of the professional ethics	ent plan
	4		nent plan is reviewed and continuin ated with the client	g care is
5. Provide assess palliativ	ment and	<i>indivi</i> expec	ase with specific reference to the <b>ag</b> dual with special consideration to fe tations and care requirements are t leration	ears, needs,
	5		i information on the disease, prognand relevant tests	osis, potential
	5		nt is obtained from the client or gua commencing assessment accordines	U U
	5	consid painfu	<i>itality of the client</i> is assessed wit leration to current needs and any d l symptoms according to standard g g age and gender	istressing or
	5		sessment relevant to the presenting e, gender and/or particular state of cted	
	5	expec	ic consideration is given to the clier ations, any distressing or painful sy liate and future care requirements	-
	5		ation on the medical diagnosis, pro ial risks and relevant tests is obtain	•
	5	releva	<i>tial sensitivities</i> of the client is and nt approach is adapted accordingly to ensure the client's dignity is main	and steps are
	5	asses: and st	.9 Factors those likely to have a negative impact on assessment are identified in consultation with the clier and strategies are implemented to minimize the effects these factors wherever possible	
	5.10 A treatment plan is developed and implemented according to findings			emented
	5		gs, treatment plan and <i>therapeutic</i> cumented according to clinic guide	-
	5	5.12 <b>Follo</b> v	<b>v up visit/s</b> is organized and docur	nented
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			according to clinic guidelines
		5.13	Responses are documented according to clinic guidelines and treatment is adjusted accordingly
		5.14	Strategies for continued support and communication is negotiated with the client and careers through the dying process
		5.15	<b>Other supportive treatments</b> or services are referred to if appropriate
6.	Provide specialized	6.1	Client history is taken with special consideration to client mental health and care requirements
	remedial massage mental health care	6.2	Specialized remedial massage treatment plan is developed according to findings
		6.3	The treatment plan is implemented as appropriate/ accordingly

Variables	Variables Range			
Occupational & Safety (OH				
Tools and Equipment		<ul><li>First Aid I</li><li>Bathing face</li></ul>		
Common conditions May include:InjuriesOver exertionOver exertionOver- or improper consumption of foods of Pain - local sharp, dull, achy, deep, surfact Migraines, headachesMigraines, headachesRashesOedemaUrinary and defecation disordersSleepBleeding and bruisingNausea, vomiting or diarrhoeaTemperature – hot/coldVaricose veinsSprains, bruises or whiplash injuries				
	A treatment plan • may include : •		of prescribed/non prescribed drug assage guidance on breast and/or alterna and the weaning of children g the importance of breast feeding	tive feeding
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Particular state may include: Follow up visit may include:	formula/s Toilet trai postpartu Using the Removing impede p Research influences b. Aroma treatment presentin Counselir Informatio methods Informatio practices Advice or and/or dia Advice or Referral t Pre pube Non preg Pregnant Climactic Peri meno Post meno Neonate Post-pubo Lactating Senescer Regular p hourly, da Monthly p SOS, face Effective Clinic cor	hing of allopathic medication for iatils therapy t according to the phase/stage of d g complaint ng on on breastfeeding and/or alternation and weaning on on toilet training or bladder repre- to on methods of contraception an n personal hygiene, infection contra- etary supplements n removing obstacles to cure to other health care professional/su- scent female female female female female opausal female (birth to 28 days) or infancy nt escent female nce phone or face to face contact/consu- ally or weekly depending on client's phone/long distance or face to face to face or phone/long distance cor nsultations te or email communications	cises in the ctors likely to rogenic isease and tive feeding ogramming d safe sex of and nutrition
Actual responses		ion sustained ion short lived avation	Version 1
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or response           Other supportive treatment or services may include:         TCM - herbs, acupuncture etc Body work – massage, reiki, kinesiology etc           Remedial therapy include:         Remedial therapy Acupuncture           Cancer or AIDS support foundations Local palliative care associations           Coursellors         Nursing community care services           Case taking may include specific reference to:         mental and/or developmental issues specific to age group, gender, and/or particular state           social issues specific to age group, gender, and/or particular state         mental and/or emotional issues specific to age group, gender, and/or particular state           Social issues specific to age group, gender, and/or particular state         social issues specific to age group, gender, and/or particular state           Isvel of understanding of relevant issues and options         access to care and/or support services           known pathology and associated medical treatments and tests         means           Informed consent according to local and national regulations and legal guidelines         appropriate adult be present during any examination           Normal percentiles or developmental norms may refer to:         apgrascore, birth weight         series of measurements           height, weight and head circumference measurements         height, weight and head circumference measurements         height, weight and head circumference measurements           height, weight and head circumference measuremen		prolonged aggravation				
Other supportive treatment or services may include: <ul> <li>TCM - herbs, acupuncture etc</li> <li>Body work - massage, reiki, kinesiology etc</li> <li>Remedial therapy</li> <li>Acupuncture</li> <li>Cancer or AIDS support foundations</li> <li>Local palliative care associations</li> <li>Counsellors</li> <li>Nursing community care services</li> </ul> Case taking may include specific reference to: <ul> <li>physical and/or developmental issues specific to age group, gender, and/or particular state</li> <li>social issues specific to age group, gender, and/or particular state</li> <li>social issues specific to age group, gender, and/or particular state</li> <li>family and personal medical history</li> <li>level of dependence and requirements for care</li> <li>level of understanding of relevant issues and options</li> <li>access to care and/or support services</li> <li>known pathology and associated medical treatments and tests</li> </ul> Consent                          means						
treatment or services may include: Body work – massage, reiki, kinesiology etc Remedial therapy Acupuncture Cancer or AIDS support foundations Local palliative care associations Counsellors Physical and/or particular state may include specific reference to: Physical and/or particular state mental and/or particular state social issues specific to age group, gender, and/or gender, and/or particular state social issues specific to age group, gender, and/or particular state family and personal medical history level of dependence and requirements for care level of understanding of relevant issues and options access to care and/or support services known pathology and associated medical treatments and tests Consent Normal percentiles or developmental norms may refer to: Normal percentiles or developmental norms may refer to: Therapeutic expectations may include: Palliation of incurable condition Progression of disease Protection from contacted disease Clinic guidelines may include: Procedures and guidelines Procedures and guidelines Procedures and guidelines Procedures and guidelines Procedures and language development Progression of disease Procedures and guidelines Procedures an	Other supportive					
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<ul> <li>No response</li> <li>Protection from contacted disease</li> <li>Clinic guidelines may include:</li> <li>Procedures and guidelines</li> <li>Purpose or mission statement</li> <li>Code of ethics or practice</li> </ul>	include:					
• Protection from contacted disease         Clinic guidelines may include:       • Procedures and guidelines         • Purpose or mission statement         • Code of ethics or practice		-				
Clinic guidelines may include: <ul> <li>Procedures and guidelines</li> <li>Purpose or mission statement</li> <li>Code of ethics or practice</li> </ul> Page 24 of 98         Ministry of Education         Massage Therapy         Version 1           Page 24 of 98         Ministry of Education         Massage Therapy         Version 1           Page 24 of 98         Ministry of Education         Massage Therapy         Version 1		No response				
may include: <ul> <li>Purpose or mission statement</li> <li>Code of ethics or practice</li> </ul> Page 24 of 98       Ministry of Education       Massage Therapy       Version 1		Protection from contacted disease				
may include: <ul> <li>Purpose or mission statement</li> <li>Code of ethics or practice</li> </ul> Page 24 of 98       Ministry of Education       Massage Therapy       Version 1	Clinic guidelines	Procedures and guidelines				
Code of ethics or practice     Ministry of Education Massage Therapy Version 1	may include:	•				
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	•	Agreed p	ractice	
Assessment		Vital sign	S	
vitality may include		Physical		
	•	Energy le		
	•	Sleep pat	ttern	
	•		y to drugs and/or aromatherapy oil	
Other suppor	tive •	•	rk –massage, Reiki, kinesiology, et	С
treatment or services may	•	Remedia		
include	•	Aromathe Acupunct		
		•	r AIDS support foundations	
	•		liative care associations	
	•	Counseld		
	•	Nursing c	community care services	
	•	Lactation	consultants	
Specific situa	tion •			
may include:	•	Remote l	ocation	
	•	Desire/ne	eed for alternative to routine immur	ization
	•		eed for acute self-care	
Specialized	•	•	igh level of remedial massage know	5
remedial mas	saye		xtrapolation of case study informati earch including literature reviews a	
Includes:	•	-	ent of research, as a tool in providi	
	•		ge and understanding of the remed	
			t of conditions/disease states of pa	
		•	with specific needs	
		•	all treatment or care delivered mee	
		•	ents of relevant legislation and reg	
	•		ting with or referring to other health nals as required	1 care
Factors which	ו ו		edical treatment being undertaken	
interfere with	-		ysical and psychological readiness	and/or wellness
effectiveness	-	Cultural f		
treatment ma include:	y •		dications to treatment	
	•		tment activity	
Responses to reactions may			treatment accordingly	
include:		0	appropriate expertise	
	•		to clinic guidelines for response to	accidents and
		emergen		
		<ul> <li>use of first aid procedures according to appropriate first aid</li> </ul>		
		training		
	•		g local emergency services	
			(or directing to) information materi	al
enquiries may include:			g questions	
	•	toilowing	up with further information	
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	providing of referrals
Assessment of the case may include:	<ul> <li>antenatal, birth and post natal period information, apgar score, birth weight and feeding method and frequency</li> <li>family history, maternal and paternal Growth and growth patterns</li> <li>height, weight and head circumference measurements</li> <li>changes in the pattern of growth over a series of measurements</li> <li>recognize major milestones in development</li> <li>relate the major milestones in personal and social skills fine motor skills, general motor skills and language development to a simplified standard milestone chart</li> </ul>
Life stages refers to:	<ul> <li>Children, Adolescence (puberty to adulthood), Adulthood, Old Age</li> <li>Pregnancy and post natal period for women</li> <li>Pre-menopausal and post menopausal state for women</li> </ul>

Evidence Guide	
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability to:</li> <li>Demonstrated an understanding of underpinning values and philosophies in the massage framework</li> <li>Demonstrated interpersonal and questioning skills <ul> <li>age - appropriate communication skills in a one-to-one and group setting</li> <li>explained relevant services and case management program</li> <li>Provided client with required information</li> <li>identified correctly client information needs</li> <li>Communicate information through written or verbal media</li> <li>Explained treatment plan and responded to client's enquiries</li> <li>ensured consent for treatment prior to treatment</li> </ul> </li> <li>Conducted an age specific external physical examination with minimal internal examination: eyes, ears, mouth and throat</li> <li>Selected the most appropriate treatment strategy and provided the treatment in an age specific manner</li> <li>recorded details of client treatment according to clinic guidelines</li> <li>provided specific care according to the age and gender and specific care needs of the client</li> <li>Provided palliative treatment honestly and with compassion and respect for the individual and careers</li> <li>Conducted basic external physical examination and internal</li> </ul>

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	Conducted symptoms	of ears, eyes and throat d assessment relevant to the pres and the age, gender and/or partic	0
Underpinning Knowledge and Attitudes	<ul> <li>any developed</li> <li>the requirement</li> <li>the or requirement</li> <li>developed findings</li> <li>document</li> <li>document<td>d an age/gender specific assessm deviations from the normal percer- elopmental norms for the age grou- reproductive system and function, client's memory, cognitive ability a irements, and client's fears, expectations, any dis ful symptoms, immediate and futu- irements d and implemented treatment plan ed findings, treatment plan and the ons organized and documented fol ed responses and adjusted treatment d strategies for continued support a cation with the client and careers th cass factors which may interfere with the timent contra-indications and measures the d treatment plan, provided treatment d continuing care with the client d physical examination is with spe conditions of life stages and handled assessments results indations in appropriate form ferrals and other documentation skill of: ilosophies, principles and practice rapy, Thai massage, Remedial ma shiatsu and reflexology irements in the workplace f alternative and complementary the ues in natural medicine control procedures</td><td>ent ntiles or ip , nd care stressing or re care according to erapeutic low up visit/s ient accordingly and nrough the ie effectiveness o be taken nt and cial regard to and of ssage, Swedish herapies</td></li></ul>	d an age/gender specific assessm deviations from the normal percer- elopmental norms for the age grou- reproductive system and function, client's memory, cognitive ability a irements, and client's fears, expectations, any dis ful symptoms, immediate and futu- irements d and implemented treatment plan ed findings, treatment plan and the ons organized and documented fol ed responses and adjusted treatment d strategies for continued support a cation with the client and careers th cass factors which may interfere with the timent contra-indications and measures the d treatment plan, provided treatment d continuing care with the client d physical examination is with spe conditions of life stages and handled assessments results indations in appropriate form ferrals and other documentation skill of: ilosophies, principles and practice rapy, Thai massage, Remedial ma shiatsu and reflexology irements in the workplace f alternative and complementary the ues in natural medicine control procedures	ent ntiles or ip , nd care stressing or re care according to erapeutic low up visit/s ient accordingly and nrough the ie effectiveness o be taken nt and cial regard to and of ssage, Swedish herapies
	<ul> <li>the print</li> <li>the heat female</li> <li>anatom develop puberty</li> <li>clinical</li> </ul>	nciples and tools of shiatsu practic	ales and al neonatal s relating to d aging to the disease
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	Aromathorany
	Aromatherapy
	<ul> <li>common conditions affecting children, males, non-</li> </ul>
	pregnant and pregnant females, and the aged
	<ul> <li>common infectious and recognizable diseases</li> </ul>
	<ul> <li>common physical manifestations of terminal diseases</li> </ul>
	<ul> <li>allopathic treatments for a range of common conditions</li> </ul>
	allopathic management strategies for terminal conditions
	<ul> <li>legislative requirements pertaining to the treatment of</li> </ul>
	minors
	legislative requirements pertaining to recognizable
	diseases
	<ul> <li>legislative requirements pertaining to palliative care</li> </ul>
	<ul> <li>basic counselling and grief counselling with special</li> </ul>
	reference to death and dying
	Remedial massage
	how to select best treatment within best current practice
	<ul> <li>and understanding of methods of managing and</li> </ul>
	preparing for treatment
	<ul> <li>supplementary measures in the management of the</li> </ul>
	conditions e.g. dietary considerations and exercise
	<ul> <li>the possible responses to treatments</li> </ul>
	<ul> <li>contra-indications of treatment</li> </ul>
	<ul> <li>a range of alternative and complementary therapies</li> </ul>
	<ul> <li>medical reports and diagnostic procedure</li> </ul>
	research priorities
	<ul> <li>research issues and their uses</li> </ul>
	<ul> <li>relevant reference works and information sources</li> </ul>
	statistical analysis
Underpinning Skills	Ability and practical skills to:
	<ul> <li>Provide specific care for children and adolescents</li> </ul>
	<ul> <li>Provide specific assessment and care for adult</li> </ul>
	females/males Provide geriatric care
	0
	Manage the specialized remedial massage treatment     Dravide an active access and a allistive access
	Provide specific assessment and palliative care
	Provide specialized remedial massage mental health care
	Apply OHS requirements in the workplace
	Describe and use a range of alternative and complementary
	therapies
	Apply infection control procedures
	<ul> <li>Select the most appropriate treatment strategy and</li> </ul>
	provided the treatment in an age specific manner
	Record details of client treatment
	Provide specific care according to the age and gender and
	specific care needs of the client
	Provide palliative treatment
	Conduct basic external physical examination and internal
	inspection of ears, eyes and throat

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Resource Implications	<ul> <li>Resources essential for assessment include:</li> <li>Relevant texts or medical manuals</li> <li>Appropriate assessment environment</li> <li>Skilled assessors</li> <li>Measuring tape, measuring blocks and scales</li> <li>Basic physical examination equipment</li> <li>Age specific toys</li> <li>Infection control equipment</li> </ul>
Methods of Assessment	<ul> <li>Competence may be assessed through:</li> <li>Interview / Written Test</li> <li>Demonstration / Observation with Oral Questioning</li> </ul>
Context Of Assessment	Competence may be assessed in the work place or in a simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Remedial Massage Assessment Framework		
Unit Code	HTH RMT5 04 0611		
Unit Descriptor	This unit covers the skills required to interpret information gathered in the health assessment and make and review an accurate assessment over the course of remedial massage treatment.		

EI	Elements		Performance Criteria		
1.	Analyze and interpret	1.1	Results of the health assessment are correlated with case history		
	information received	1.2	<b>Signs and symptoms</b> of condition in the client/patient are recognized and identified as prerequisites or contra- indication for treatment/care		
		1.3	Information gathered is assessed and assigned priorities in consultation with the client/patient using the knowledge and experience and theoretical principles applied by the practitioner		
		1.4	Information is gathered, recorded and organized in a way which can be interpreted readily by other professionals		
		1.5	<b>Body patterns</b> are analyzed and differentiated by assessing signs and symptoms		
		1.6	Condition is identified according to stage and related implications (eg acute/chronic) by applying principles of assessment		
			Professional judgment is used to draw sound conclusions and prognosis from the data collected		
			All assessment signs and symptoms are elicited in a thorough and objective manner to avoid premature conclusions on the treatment plan		
		1.9	The client/patient's progress is systematically monitored in order to confirm the clinical impression		
		1.10	History and clinical data is effectively combined to obtain a differential assessment, prognosis and treatment plan		
2.	Inform the client/patient	2.1	Discuss rationale of the treatment assessment plan/prognosis is discussed with the client/patient		
		2.2	Respond to client/patient enquiries using language the client/patient understands		
		2.3	Discuss referral and collaborative options with the		

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	client/patient if necessary		
Variables	Range		
Signs and symptoms of condition may include:	<ul> <li>Physical evidence</li> <li>Behavioural evidence</li> <li>States of disorder</li> <li>Sensations</li> <li>Onset</li> <li>Duration</li> <li>Location</li> <li>Causation</li> <li>Direction of chief complaint</li> <li>Ameliorating and aggravating factors</li> <li>Symptom qualities (intensity, severity, nature of complaint)</li> <li>Non-verbal signs and symptoms</li> <li>Functional and pathological disturbances</li> </ul>		
Body patterns may refer to:	<ul> <li>Posture</li> <li>Range of movement</li> <li>Muscle strength</li> <li>Contra-lateral comparisons</li> </ul>		

Evidence Guide	Evidence Guide				
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability to:</li> <li>Demonstrated consideration of the impact of client/patient vitality on selected treatment</li> <li>Demonstrated communication and negotiation skills</li> <li>Demonstrated ability to provide advice</li> <li>Perform health assessment</li> <li>Communicate effectively with clients</li> <li>Demonstrated ability to identify treatment options and establish treatment regimes</li> <li>Demonstrated ability to prepare treatment plans</li> <li>Demonstrated ability to understand and discuss medical reports and other data relevant to the case</li> <li>Demonstrated ability to prescribe treatment according to the time-frame appropriate to the client/patient condition and the treatment selected</li> </ul>				
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of :</li> <li>data analysis techniques</li> <li>referral process</li> <li>Establishment of urgency for treatment required</li> <li>legal and ethical considerations in treating clients/patients with massage</li> <li>lifestyle factors relevant to treatment of specific conditions and diseases</li> </ul>				

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	<ul> <li>possible obstacles and contraindications to treatment</li> <li>community resources and support services</li> <li>the situation and referral patterns of trigger points</li> <li>signs and symptoms of common musculoskeletal disorders</li> <li>Comprehensive knowledge of anatomy and physiology</li> <li>the role of massage in enhancing growth</li> <li>pain and chronic pain syndromes</li> <li>the processes of aging</li> <li>the role of massage in alleviating depression and anxiety</li> <li>the role of massage in enhancing attentiveness</li> <li>the role of massage in auto-immune disorders</li> <li>the role of massage in auto-immune disorders</li> <li>supplementary measures in the management of the condition/ system (dietary considerations, exercise)</li> <li>child growth and development</li> <li>medical reports and diagnostic procedures</li> <li>methods of preparing treatment and management plans</li> <li>the correct preparations required for specific treatment</li> <li>disease process</li> <li>the contribution of the different schools of thought and historical theories of clinical practice</li> <li>the ethical and legal implications of the practice of massage</li> </ul>
Underpinning Skills	<ul> <li>The ethical and legal implications of the practice of massage</li> <li>Demonstrate skills to:</li> <li>identify bone landmarks, structures and individual muscles through palpation.</li> <li>prioritize presenting conditions</li> <li>Interpersonal and questioning skills</li> <li>transcribe assessment findings and treatment in a patient</li> </ul>
	<ul> <li>transcribe assessment indings and treatment in a patient history using accepted medical terminology</li> <li>identify and describe a treatment outcome using accepted medical terminology</li> <li>access and interpret up-to-date information</li> </ul>
Resource Implications	<ul> <li>Resource requirements may include:</li> <li>An appropriately stocked and equipped clinic or simulated clinic environment</li> <li>Relevant texts or medical manuals</li> <li>Relevant paper-based assessment instruments</li> <li>Appropriate assessment environment</li> </ul>
Methods of Assessment	<ul> <li>Competence may be assessed through:</li> <li>Interview / Written Test</li> <li>Demonstration / Observation with Oral Questioning</li> </ul>
Context Of Assessment	Competence may be assessed in the work place or in a simulated work place setting

Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Provide TCM Remedial Massage (An Mo Tui Na) Treatment for Women and Children		
Unit Code	HTH RMT5 05 0611		
Unit Descriptor	This unit describes the skills required to administer TCM Remedial Massage treatment specific to the needs of women and children in accordance with the philosophy and practices of a TCM Remedial Massage therapeutic framework.		

El	Elements F		ormance	e Criteria	
1.	1. Assess females according to a			patient's condition is discussed and entation is referred to appropriate	
	TCM Remedial Massage	1.2	Client/p	patient is assessed	
	framework	1.3	Client/p	patient comfort and privacy is ensu	red at all times
		1.4		ting signs and symptoms are asse I framework	ssed according
		1.5	Assess	ment is discussed with the client/p	atient
2.	Assess children according to a	2.1		patient's condition is discussed and entation is referred to appropriate	
	TCM Remedial Massage	2.2	Client/p	patient is assessed	
	framework	2.3	Client/p	patient comfort and privacy is ensu	red at all times
		2.4		ting signs and symptoms are asse Remedial Massage framework	ssed according
				ment is discussed with the client/p ant others	atient and/or
3.	<ol> <li>Provide support for women's</li> </ol>		<i>TCM R</i> provide	t <b>emedial Massage women's heal</b> ed	th treatment is
	health	3.2		patient is positioned correctly to op t and support while allowing optime niques	
				ist maintains appropriate postures ed distribution of body weight thro ent	
			•	ist maintains client-focused attenti atment session	on throughout
				ent sequence, location and degree is determined by assessment indi	
4.	Provide care for children	4.1 TCM Rer provided		emedial Massage children's health d	n treatment is
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4.2	Client/patient is positioned correctly to optimize their comfort and support while allowing optimum application of techniques
4.3	Therapist maintains appropriate postures to ensure a controlled distribution of body weight throughout the treatment
4.4	Therapist maintains client-focused attention throughout the treatment session
 4.5	Treatment sequence, location and degree of pressure applied is determined by assessment indications

Variables	Range
Assessment may include:	<ul> <li>Assessment of physical features on:</li> <li>Palpation</li> <li>Observation</li> <li>Listening and smelling</li> <li>Taking of blood pressure, temperature, radial pulse rate and quality</li> <li>Percussion</li> <li>Listening to heart and chest sounds using a stethoscope</li> <li>TCM pattern differentiation</li> <li>Discussion/questioning</li> <li>Any other method in which the practitioner has been trained to a competent standard</li> <li>Procedure which is conducted according to legislative and regulatory requirements</li> </ul>
TCM Remedial Massage women and children's health treatment may include the following methods:	<ul> <li>Acupressure</li> <li>An mo</li> <li>Tui na</li> <li>Gua sha</li> <li>Moxibustion</li> <li>Cupping</li> <li>A range of TCM Remedial Massage sequences and techniques</li> </ul>

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Evidence Guide			
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability o:</li> <li>Ability to work or model work which demonstrates an understanding of underpinning values and philosophies in the TCM Remedial Massage framework</li> <li>Knowledge of the philosophies, principles and tools of TCM Remedial Massage practice</li> <li>Demonstrated ability to correctly identify client/patient information needs</li> <li>Demonstrated ability to provide client/patient with required information about their condition</li> <li>Demonstrated ability to appropriately record details of client/patient enquiries according to clinic guidelines</li> <li>Demonstrated ability to provide treatment appropriately to the needs of the client/patient</li> </ul>		
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of:</li> <li>Knowledge of the theory of (introduction to) gynecology and obstetrics according to TCM Topics would include:</li> <li>The development of TCM gynecology and obstetrics</li> <li>Gynecological and obstetric TCM physiology, pathology, etiology, differentiation of gynecological conditions</li> <li>Contraindications and precautions</li> <li>Therapeutic principles and methods</li> <li>Pre and post-partum disorders</li> <li>Gestational disorders</li> <li>The treatment of pain, anxiety and other conditions during labour;</li> <li>The TCM Remedial Massage therapist as part of the neonatal health practitioner team</li> <li>Birth options and settings</li> <li>Gestational disorders</li> <li>Cultural perspectives on birth and birthing</li> <li>Knowledge of the theory of pediatric development according to TCM</li> <li>Knowledge of the theory of pediatric massage according to TCM</li> <li>Topics would include: <ul> <li>The development of TCM pediatrics</li> <li>Pediatric TCM physiology, pathology, diagnosis, differentiation of pediatric conditions;</li> <li>Contraindications and precautions</li> <li>Therapeutic principles and methods according to TCM</li> </ul> </li> </ul>		
	<ul> <li>Relevant texts or medical manuals</li> <li>Relevant paper-based/video assessment instruments</li> </ul>		
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	Appropriate assessment environment	
	Skilled assessors	
Resource	Resources essential for assessment include:	
Implications	An appropriately stocked and equipped clinic or simulated	
	clinic environment	
	Relevant texts or medical manuals	
	Relevant paper-based assessment instruments	
	Appropriate assessment environment	
Methods of	Competence may be assessed through:	
Assessment	Interview / Written Test	
	Demonstration / Observation with Oral Questioning	
Context Of	Competence may be assessed in the work place or in a	
Assessment	simulated work place setting	

Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Perform Remedial Massage Health Assessment		
Unit Code	HTH RMT5 06 0611		
Unit Descriptor	This unit covers the skills required to observe the condition of the client/patient and gather information relevant to the case to enable correct assessment, planning and provision of a remedial massage.		

EI	Elements		ormance Criteria
1.	Determine the scope of the	1.1	Results of the health assessment are correlated with case history
	assessment and the client/patient's needs	1.2	<b>Signs and symptoms</b> of condition in the client/patient are recognized and identified as prerequisites or contra- indication for treatment/care
		1.3	Information gathered is assessed and assigned priorities in consultation with the client/patient using the knowledge and experience and theoretical principles applied by the practitioner
		1.4	Information is gathered, recorded and organized in a way which can be interpreted readily by other professionals
		1.5	<b>Body patterns</b> are analyzed and differentiated by assessing signs and symptoms
		1.6	Condition is identified according to stage and related implications (eg acute/chronic) by applying principles of assessment
		1.7	Professional judgment is used to draw sound conclusions and prognosis from the data collected
		1.8	All assessment signs and symptoms are elicited in a thorough and objective manner to avoid premature conclusions on the treatment plan
		1.9	The client/patient's progress is systematically monitored in order to confirm the clinical impression
		1.10	History and clinical data is effectively combined to obtain a differential assessment, prognosis and treatment plan
2.	Obtain and record an accurate history of the client/patient	2.1	Discuss rationale of the treatment assessment plan/prognosis is discussed with the client/patient
		2.2	Respond to client/patient enquiries using language the client/patient understands
		2.3	Discuss referral and collaborative options with the client/patient if necessary

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3. Manage the health		3.1	Results of the health assessment are correlated with case history
assessm	ent	3.2	<b>Signs and symptoms</b> of condition in the client/patient are recognized and identified as prerequisites or contra-indication for treatment/care
		3.3	Information gathered is assessed and assigned priorities in consultation with the client/patient using the knowledge and experience and theoretical principles applied by the practitioner
		3.4	Information is gathered, recorded and organized in a way which can be interpreted readily by other professionals
		3.5	<b>Body patterns</b> are analyzed and differentiated by assessing signs and symptoms
		3.6	Condition is identified according to stage and related implications (eg acute/chronic) by applying principles of assessment
		3.7	Professional judgment is used to draw sound conclusions and prognosis from the data collected
		3.8	All assessment signs and symptoms are elicited in a thorough and objective manner to avoid premature conclusions on the treatment plan
		3.9	The client/patient's progress is systematically monitored in order to confirm the clinical impression
		3.10	History and clinical data is effectively combined to obtain a differential assessment, prognosis and treatment plan
4. Prepare client for	the	4.1	Discuss rationale of the treatment assessment plan/prognosis is discussed with the client/patient
assessm	ent	4.2	Respond to client/patient enquiries using language the client/patient understands
		4.3	Discuss referral and collaborative options with the client/patient if necessary
5. Make a compreh	ensive	5.1	Results of the health assessment are correlated with case history
assessment of the client/patient		5.2	<b>Signs and symptoms</b> of condition in the client/patient are recognized and identified as prerequisites or contra- indication for treatment/care
		5.3	Information gathered is assessed and assigned priorities in consultation with the client/patient using the knowledge and experience and theoretical principles applied by the practitioner
		5.4	Information is gathered, recorded and organized in a way which can be interpreted readily by other professionals
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5.5	<b>Body patterns</b> are analyzed and differentiated by assessing signs and symptoms
5.6	Condition is identified according to stage and related implications (eg acute/chronic) by applying principles of assessment
5.7	Professional judgment is used to draw sound conclusions and prognosis from the data collected
5.8	All assessment signs and symptoms are elicited in a thorough and objective manner to avoid premature conclusions on the treatment plan
5.9	The client/patient's progress is systematically monitored in order to confirm the clinical impression
5.10	History and clinical data is effectively combined to obtain a differential assessment, prognosis and treatment plan

Variables	Range
Factors likely to have a negative impact on assessment may include:	<ul> <li>Language difficulties</li> <li>Disabilities</li> <li>Emotional trauma</li> <li>Lack of privacy or focus due to additional parties being present</li> <li>Cultural or gender factors</li> </ul>
Other health care professional may include:	<ul> <li>Podiatrists</li> <li>Osteopaths</li> <li>Energy therapists</li> <li>Physiotherapists</li> <li>Chiropractors</li> <li>Medical practitioners</li> <li>Registered nurses</li> <li>Social workers</li> <li>Alternative health practitioners</li> <li>Counselors</li> </ul>
Other allied health care professionals Client history may include:	<ul> <li>Date of presentation</li> <li>Identifying personal details</li> <li>Source of referral (if applicable)</li> <li>Main presenting complaint or reason for massage</li> <li>Presenting symptom picture</li> <li>General state of health: <ul> <li>Physical</li> <li>Emotional</li> <li>Allergies</li> <li>Dietary picture</li> <li>Sleep pattern</li> </ul> </li> </ul>

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<b></b>				
	Exercise			
	Leisure activities			
	Childhood and adult illness			
	Accidents, injuries, operations			
	Hospitalizations			
	<ul> <li>Occupational history and environment</li> </ul>			
	Other current medical/alternative health care treatment			
	Medication, supplements and natural prescriptions			
	current and previous			
	Previous occurrence of presenting complaint			
	Social lifestyle including social drug usage			
	Family history			
Potential	Gender			
sensitivities may	Ethnicity			
include:	Language			
	Religious beliefs			
	Cultural heritage			
	Sexuality			
	Ability			
	Presenting disease state and personal history			
Physical	Active movements			
assessment will	Passive movements			
include	Resisted movements			
attention to:	Functional movements			
	Palpatory findings			
	Swelling			
	Instability			
	Parasthesia			
	Characteristics of pain			
procedures may	Observation			
include:	Discussion			
	Temperature			
	Pulse			
	Palpation			
	Percussion			
	Range of motion tests			
	Muscle strength tests			
	Orthopaedic tests			
	Observation of variations of posture			
	Any other method in which the practitioner has been trained			
	to a competent standard			
	Procedure which is conducted according to legislative and			
	regulatory requirements			
Contra-indications to	<ul> <li>Massage therapists are not expected to diagnose any</li> </ul>			
treatment	conditions but must be able to recognize the indications and			
may include:	contra-indications of conditions			
	Massage is contra-indicated in all infectious diseases			
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referral include:	<ul> <li>suggested by fever, nausea and lethargy until a diagnosis is received and recommended by a medical practitioner</li> <li>referral for diagnosis when symptoms do not have a logical explanation</li> <li>Pain-local, sharp, dull, achy, deep, surface</li> <li>Fatigue</li> <li>Inflammation</li> <li>Lumps and tissue changes</li> <li>Rashes and changes in the skin</li> <li>Oedema</li> <li>Mood alterations, eg depression, anxiety</li> <li>Infection</li> <li>Changes in habits such as appetite elimination or sleep</li> <li>Bleeding and bruising</li> <li>Nausea, vomiting or diarrhoea</li> <li>Temperature - hot or cold</li> <li>Endangerment sites are areas where nerves and blood vessels lie close to the skin and are not well protected</li> <li>Anterior triangle of the neck</li> <li>Axillary area</li> <li>Medial epicondyle</li> <li>Lateral epicondyle</li> <li>Area of the sternal notch and anterior throat</li> <li>Umbilicus area</li> <li>Twelfth rib dorsal body</li> <li>Sciatic notch</li> <li>Inguinal triangle</li> <li>Popliteal fossa</li> </ul>
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Evidence Gu	lide		
Critical Aspects of CompetenceCritical evidence of knowledge and skills include the ability to • Demonstrated observation skills • Ability to observe and identify variations of • posture • Demonstrated record keeping skills • Demonstrated communication skills			e the ability to:
Underpinning Knowledge and Attitudes		e knowledge of: signs and symptoms of disease ty to use terminology correct to epic practice d assessment procedures and optic ess of critical information required fo at according to massage therapy fra	ons or diagnosis and
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	<ul> <li>history, philosophy and beliefs of massage therapy within a health framework</li> </ul>
	<ul> <li>best practice massage therapy principles</li> </ul>
	<ul> <li>Understanding of physiology and anatomy according to massage therapy</li> </ul>
	<ul> <li>Knowledge of structure and function of</li> </ul>
	<ul> <li>anatomical systems appropriate to massage therapy and</li> </ul>
	the scope of practice
	<ul> <li>Understanding of the fundamental principles of</li> </ul>
	biomechanics and functional anatomy
	<ul> <li>the situation and referral patterns of trigger points</li> </ul>
	<ul> <li>child growth and development</li> </ul>
	<ul> <li>pain and chronic pain syndromes</li> </ul>
	<ul> <li>the processes of aging</li> </ul>
	<ul> <li>symptom otology and pathology according to remedial massage therapy</li> </ul>
	<ul> <li>bioenergetics concepts and the</li> </ul>
	cardio-respiratory concepts in relation to exercise
	<ul> <li>environmental physiology and the effects of drugs on the individual</li> </ul>
	<ul> <li>technical and practical knowledge of treatment</li> </ul>
	<ul> <li>indications, possible reactions and contra-indications to</li> </ul>
	treatment
	<ul> <li>temperature control, homeostasis, feedback mechanisms,</li> </ul>
	neurological, psychological and psychogenic foundations
	and issues in relation to remedial therapy
	<ul> <li>ethical and legal implications of enquiry</li> </ul>
Underpinning Skills	Skills include the ability to :
	<ul> <li>perform testing and assessment procedures</li> </ul>
	<ul> <li>gather and interpret information through the tactile senses</li> </ul>
	<ul> <li>recognize and adjust to contraindications for treatment</li> </ul>
	• identify prominent bones/structure and physic and postural
	muscles
	<ul> <li>palpate prominent bones/structure and phasic and postural muscles</li> </ul>
	<ul> <li>read medical test results or documents</li> </ul>
	<ul> <li>discuss and observe treatment protocols</li> </ul>
	<ul> <li>manage time throughout consultation and treatment</li> </ul>
	<ul> <li>use equipment and resources competently and safely</li> </ul>
	<ul> <li>use equipment and resources competently and safety</li> <li>communicate effectively with client/patient/ other health</li> </ul>
	<ul> <li>communicate enectively with client/patient/ other nealth practitioners</li> </ul>
	transcribe assessment findings and treatment in a patient
	history using accepted medical terminology
	Skills in applying advanced assessment techniques
	<ul> <li>read medical reports</li> </ul>
	<ul> <li>comprehend common medical terminology</li> </ul>

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Resource	Resource requirements may include:
Implications	<ul> <li>An appropriately stocked and equipped clinic or simulated clinic environment</li> </ul>
	Relevant assessment instruments
	<ul> <li>Appropriate assessment environment</li> </ul>
	Skilled assessors
Methods of	Competence may be assessed through:
Assessment	Interview / Written Test
	<ul> <li>Demonstration / Observation with Oral Questioning</li> </ul>
Context Of	Competence may be assessed in the work place or in a
Assessment	simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V		
Unit Title	Organize and Provide Acupressure Self Treatment Training	
Unit Code	HTH RMT5 07 0611	
Unit Descriptor	This unit covers required skills, knowledge and attitudes to perform Acupressure massage therapy to the needs of individual clients and communities. The unit includes techniques of Acupressure self treatment training to treat human body abnormalities for needy people depending to age and sex group.	

Elen	Elements		Performance Criteria		
g	1. Describe the general concepts	1.1	Definitions of Acupressure massage therapy treatments are provided		
n	of acupressure nassage herapy.	1.2	An overview of the historical development of acupressure massage therapy is provided		
	norapy.	1.3	<i>The central philosophies of</i> acupressure massage therapy treatments are Identified and explained		
		1.4	The meridian theory basis of acupressure massage therapy treatments is explained		
		1.5	<b>Other philosophies relating</b> to acupressure massage therapy techniques are identified and explained		
a a	<ol> <li>Obtain, record and analyze an accurate history of the client</li> </ol>	2.1	Required information is gathered from the client for the client's history in a respectful way in a purposeful, systematic and diplomatic manner		
0		2.2	Patient is requested to submit previous medical records or process medical checkup prior to commencement and before completion of treatment		
		2.3	Information is gathered, recorded and organized in standard format in a way which can be interpreted readily by other professionals		
			Treatment, information and advice provided by other health care professionals are taken into consideration in determining the strategy to be used in treatment as work place procedures		
			Information gathered is assessed and assigned priority in consultation with the client using knowledge, experience and theoretical principles		
	3. Perform treatment to		Factors which may interfere with the effectiveness of the treatment are explained to the client		
	common ailments	3.2	Factors likely to have an influence on the treatments are identified during the consultation process		
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3.3	Strategies are implemented to minimize the effect of actors which may interfere with the effectiveness of the treatment
3.4	The procedures on how <i>treatment is delivered</i> and managed are explained to the client
3.5	The patient is requested to monitor reactions and contact practitioner as required
3.6	Patient consent for treatment is ensured before the treatment
3.7	Reactions to treatment are recognized and respond to promptly if necessary
3.8	Time, location and content of future sessions are explained clearly to the client according to work place procedure
3.9	Treatment progress and recommendations are fully documented according to clinic requirements

Variables	Range
Occupational Health & Safety (OH&S)	<ul> <li>Apply infection control procedures</li> <li>Use appropriate protective and clothing for the work</li> <li>Follow occupational health and safety procedures and rules</li> <li>Confidential for client's case and problems</li> </ul>
Tools and Equipment	<ul> <li>Massage table,</li> <li>Picture,</li> <li>Pillow,</li> <li>cushion,</li> <li>Mattress,</li> <li>Sheets,</li> <li>Computers,</li> <li>Projector ,</li> <li>weighing scale,</li> <li>BP apparatus</li> <li>Stethoscope,</li> <li>Thermometer,</li> <li>OHS equipment and personal protective devices,</li> <li>Overcoat,</li> <li>uniforms</li> </ul>

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Evidence Guide	
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability to:</li> <li>Described development and background of acupuncture</li> <li>Definition and terminology of acupressure</li> <li>of acupressure</li> <li>Applied techniques of acupressure</li> <li>Applied infection control procedures</li> <li>Applied occupational health and safety procedures and rules</li> <li>Described the general concepts of acupressure massage therapy.</li> <li>Gathered, recorded and analyzed history of the client</li> <li>Conducted treatment to common ailments</li> </ul>
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of:</li> <li>Historical background of acupuncture</li> <li>Definition and terminology of acupressure</li> <li>Development of acupressure</li> <li>Techniques of acupressure-kneading, stroking, pinching, rubbing, point –pressing, patting</li> <li>Infection control procedures</li> <li>Occupational health and safety procedures and rules</li> <li>The general concepts of acupressure massage therapy.</li> <li>Gathering, recording and analyzing history of the client</li> <li>Treatment to common ailments</li> </ul>
Underpinning Skills	<ul> <li>Demonstrate skills to:</li> <li>Describe the general concepts of acupressure massage therapy.</li> <li>Gather, record and analyze an accurate history of the client Conduct treatment to common ailments</li> <li>Apply infection control procedures and OH &amp;S requirements</li> </ul>
Resource Implications	<ul> <li>Resources essential for assessment include:</li> <li>Access to relevant workplace or appropriately</li> <li>Simulated environment where assessment can take place</li> <li>Skilled assessors</li> </ul>
Methods of Assessment	<ul> <li>Competence may be assessed through:</li> <li>Interview / Written Test</li> <li>Demonstration / Observation with Oral Questioning</li> </ul>
Context Of Assessment	Competence may be assessed in the work place or in a simulated work place setting

Occupational Standard: Remedial Massage Therapy Level V	
Unit Title	Perform Shiatsu Massage
Unit Code	HTH RMT5 08 0611
Unit Descriptor	This unit of competence describes the skills and knowledge required to prepare a client for treatment and negotiate a treatment management plan with them over the course of treatment required, and administer client shiatsu treatment according to the philosophy and practices of a shiatsu therapeutic framework.

Elements	Performance Criteria	
1. Select the therapeutic techniques to	1.1	Appropriate <i>therapeutic principles</i> of treatment are determined according to assessment of client and within the skills of competence of the practitioner
determine treatment	1.2	<b>Contraindications to treatment and possible</b> <b>complicating factors</b> and treatment used are modified according to aromatherapy principles
	1.3	Treatment information and advice provided by other health care professionals are taken into consideration in determining the strategy to be used in treatment and
	1.4	Treatment strategy which is appropriate to client condition and supported by established <i>shiatsu</i> practice is selected according to organization standard
	1.5	Specific treatment options given possible <i>client</i> <i>compliance</i> issues are taken into consideration according to workplace requirement
	1.6	Appropriate <i>shiatsu techniques</i> are selected according to organization procedure
	1.7	<i>Client constitution</i> in selecting <i>shiatsu treatment</i> is considered and applied according to workplace and treatment requirements
2. Discuss the treatment with the client within the treatment plan	2.1	The <i>mode of administration</i> and management of the treatment are explained to the client
	2.2	Treatment strategy is discussed and client's <i>compliance</i> with treatment strategy is negotiated according to the client's needs and organization procedure
	2.3	Sufficient time is allocated to conclude sessions at a pace appropriate to the client
	2.4	<b>Discrepancies</b> between the practitioner's and the client's perception of the condition are clarified according to workplace organization procedures

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	2.5	Any perceived risks of the client's condition and treatment are explained according to workplace ethics
	2.6	<b>Responsibilities of practitioner and client</b> are discussed according to workplace guidelines within the treatment plan
	2.7	Management of selected treatment is negotiated in relation to any other current therapies according to company policy
	2.8	<i>Treatment evaluation strategies</i> are discussed and consent for treatment is obtained according to workplace guidelines/
	2.9	Client is referred to other health professional if appropriate according to workplace procedures
<ol> <li>Analyze and interpret</li> </ol>	3.1	Results of the health assessment are correlated with case history
information received	3.2	<b>Signs and symptoms of condition</b> in the client are recognized and identified as pre-requisites or contraindication for treatment/care
	3.3	Information gathered is evaluated and priorities for treatment are assigned in consultation with the client using the knowledge and experience and theoretical principles applied by the practitioner
	3.4	Information is gathered, recorded and organized in a way which can be interpreted readily by other professionals
	3.5	<b>Body patterns</b> are analyzed and differentiated by assessing signs and symptoms and given priority for treatment
	3.6	Condition is identified according to stage and related implications (eg acute/ chronic) by applying principles of assessment
	3.7	Condition is identified according to stage and related implications (eg empty/ full) by applying the eight principles of diagnosis
	3.8	Professional judgment is used to draw sound conclusions and prognosis from the data collected
	3.9	All assessment signs and symptoms are extracted in a thorough and objective manner to avoid premature conclusions on the treatment plan
	3.10	Client's progress is systematically monitored in order to confirm the clinical impression
	3.11	History and clinical data are combined effectively to obtain a differential assessment, prognosis and treatment plan

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4. Manage shiatsu treatment		fors which may interfere with the ef treatment are explained to the client	fectiveness of
		procedures on how <i>treatment is delive</i> aged are explained to the client	ered and
		client is requested to monitor reaction titioner as required	ns and contact
		nt consent is ensured for treatment be ment	fore the
	4.5 Shia	tsu is provided according to the treatn	nent plan
		ctions to treatment are recognized and aptly if necessary	d responded to
	expla	e, location and content of future session ained clearly to the client according to edure	
	docu	tment progress and recommendations mented according to clinic requireme ment recommendations	
5. Apply therapeutic		onale of the treatment assessment pla ussed with the client	an/prognosis is
techniques		<b>nt enquiries</b> are responded to using I t understands	anguage the
		rral and collaborative options are disc t if necessary	cussed with the
		ual perpendicular pressure directed fr ed to the body	om the hara is
		condition and response of the client a nual feedback to the initial assessme	
	cont	<b>shiatsu treatment</b> is ensured that it in act with all major body regions within a frame	
	and	nts is positioned correctly to optimize t support while allowing optimum shiats niques	
	cont	opriate postures are maintained to en rolled distribution of body weight throu ment according to work requirement	
		used attention is maintained throughou ion according to professional requiren	
		tment sequence, location and degree ed are determined by <b>assessment ir</b>	
	5.11 Cclie	ents reactions are observed and respo	ond to and
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	mode of administration of the treatment is varied appropriately
	5.12 Shiatsu treatment is adjusted according to individual client needs and reactions and the presence of complicating factors
6. Advise and resource the	6.1 Client is educated in relevant and practical techniques for promotion and maintenance of optimum health
client	6.2 Client queries are answered with clarity using appropriate language
	6.3 Honesty and integrity is maintained when explaining treatment plans and recommendations to the client according to workplace and organization requirement
	6.4 Appropriate interpersonal skills are used when explaining treatment plans and recommendations to the client.
	6.5 Client independence and responsibility in treatment are promoted wherever possible
	6.6 Monitoring of client health is undertaken in line with treatment plan
	6.7 Treatment progress is documented according to clinic requirements
7. Review treatment	7.1 Treatment progress is evaluated with the client according to workplace procedure
	7.2 Effects of previous treatment are identified and recorded according to workplace procedure and treatment plan
	7.3 Client progress after each session is assessed and previous treatment plan is review based on treatment result
	7.4 The need for ongoing and/or additional treatment is evaluated with the client
	7.5 Changes to the plan is negotiated with the client to ensure optimal outcomes

Range
Apply infection control procedures
<ul> <li>Use appropriate protective and clothing for the work</li> </ul>
• Follow occupational health and safety procedures and rules
<ul> <li>Confidential for client's case and problems</li> </ul>
Telephone, notice board (poster)
First Aid Kit
Bathing facility
<ul> <li>towel and cleaning cloth</li> </ul>

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Contra-indications to treatment and possible complicating factors may include: Shiatsu techniques may include:	<ul> <li>Infection or infectious diseases</li> <li>Pain - local sharp, dull, achy, deep, surface</li> <li>Fatigue</li> <li>Inflammation</li> <li>Lumps and tissue changes</li> <li>Rashes and changes in the skin</li> <li>Oedema</li> <li>Mood alterations, e.g., depression, anxiety</li> <li>Changes in habits such as appetite elimination or sleep</li> <li>Bleeding and bruising</li> <li>Nausea, vomiting or diarrhoea</li> <li>Temperature – hot/cold</li> <li>a range of shiatsu sequences and techniques:</li> <li>Tsubo/acu-point techniques</li> <li>Moxibustion</li> </ul>
	<ul> <li>Stretching, posture and exercise techniques</li> <li>Elbows, feet, knees, ball of thumb, hand pressure techniques</li> <li>Meridian stretching techniques</li> <li>Namikoshi, barefoot, and oshashi shiatsu zen shiatsu sequences and techniques</li> <li>Hara diagnosis, to nification/dispersion and whole body sequence</li> <li>Lifestyle and dietary advice</li> <li>Demonstration and explanation of suggested yoga postures, stretches and movements</li> <li>Dietary strategy – selection of specific foods preparation and combinations</li> <li>Advice on medicinal drinks, poultices and meals</li> <li>Spiritual and emotional counselling</li> <li>Relaxation techniques</li> <li>Meditation</li> <li>Tai qi</li> <li>Qi gong/yoga</li> </ul>
Client constitution	<ul> <li>refers to:</li> <li>Genetic foundation</li> <li>Body type</li> <li>Fitness</li> <li>Mental attitude</li> </ul>
Client compliance refers to	<ul> <li>Ability to follow instructions or suggestions</li> <li>Willingness to follow instructions or suggestions</li> </ul>
Discrepancies may include	<ul> <li>Winingness to follow instructions of suggestions</li> <li>Client is unaware of the immediate danger of their condition</li> <li>Client is over anxious about their condition</li> <li>Client is unaware of maintaining causes acting on their condition</li> <li>Practitioner is unaware of some implications of the client 's condition</li> </ul>
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		oner and client each have a different in problem is	view of what	
Practitioner		g the sick person		
responsibilities		•		
include:	-	ng advice on public health matters		
include.		riate hygienic or sexual behavior		
		ng modifiable/communicable disease	to a registered	
	doctor			
	Comm	tment to the treatment plan		
	Discus	sing relevant contra-indications or po	tential	
	compli	cations to treatment		
	Reviev	ing of treatment plan		
		ve response to client feedback and/or	· feedback	
Client		ng instruction/advice during and post		
responsibilities		• • •		
include:		g practitioner of any relevant contrain		
include.		al complications to treatment		
		g practitioner of compliance issues		
		tment to the treatment plan		
Treatment		sing and reviewing of response to tre	atment	
evaluation	Reviev	ving achievement of treatment goals		
strategies ma	y 🛛 🔸 Monito	ring time frame for achieving treatme	nt goals	
include:		5	5	
Factors which	Other	nedical treatment being undertaken		
interfere with t	_	physical and psychological readines	s and/or	
effectiveness of				
treatment may		I and/or religious factors		
include:	•••••••	-indications to treatment		
		eatment activity		
	Overea	•		
	Intoxic	ation		
The way treatr		ement for feedback and interaction		
is delivered ma	ay 🛛 🕨 Variou	s shiatsu techniques		
include:	Variati	<ul> <li>Variations in application intensity</li> </ul>		
	Requir	ement of specified positioning of clier	nt	
Reactions may	/ • Pain a	nd/or discomfort		
include:		ack – verbal, tactile, visual		
	Emotio			
		ar spasms		
		rature discomfort		
Consent for • Informed		ed consent according to the local and	national	
treatment refers to: • regulation		ions and legal guidelines		
		ng treatment accordingly		
		g appropriate expertise		
include:		<ul> <li>Discussing reaction with the client</li> </ul>		
		-	oppidente and	
		ng to clinic guidelines for response to	accidents and	
emergeno				
	● Mainta	ining a senior First Aid certificate		
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	•		g local emergency services response to client feedback and/or	· complaints
Shiatsu treatr may include:		a range o Tsubo/ac Moxibusti Stretching Elbows, f technique Meridian Namikosl sequence Hara diag sequence Lifestyle a Demonsti postures, Relaxatio	of shiatsu sequences and technique su-point techniques ion g, posture and exercise techniques eet, knees, ball of thumb, hand pre es stretching techniques hi, barefoot, and oshashi shiatsu ze es and techniques gnosis, tonification/dispersion and v e and dietary advice ration and explanation of suggeste stretches and movements on techniques	es essure en shiatsu whole body
Appropriate postures refers to:	•	<ul> <li>Balanced distribution of body weight</li> <li>Ability to apply direct perpendicular contact pressure to appropriate areas of the body</li> <li>Comfort and safety</li> <li>Relaxation of the body</li> </ul>		pressure to
Assessment indications ind	clude:	Meridian Namikosł indication Palpatory Masunag Hara (abo indication	and point locations and indications hi, empirical or experimental point l s v evidence or feedback responses a meridian system and indications dominal) palpation diagnosis syste	ocations and
Advise and resource the client refers to:		Providing materials Referring Providing Stress ma Environm Advising Providing relevant i Providing	relevant literature or information	n client of nals
Practical techniques that promote and maintain optimal• Postural i Discussion prevention		Postural i Discussic preventio	improvement strategies on of causes of condition and suggen on strategies Illow-up activities and/or strategies	estion of
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Evidence G	uide	
Critical Aspe Competence	<ul> <li>Identir regim</li> <li>Prepa</li> <li>Identir group</li> <li>Gather sense</li> <li>Prepa princi</li> <li>Treate prese</li> <li>Incorp frame</li> <li>Demototreatm</li> <li>Used effect</li> <li>A cas</li> </ul>	red and implement treatment plans ied prominent bones/structures and major muscle is through palpation red and interpreted information through the tactile s red the client for treatment according to shiatsu les d individual according to the condition and the nee of complicating factors. orated philosophies and beliefs of a shiatsu
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Underpinning Knowledge a Attitudes	client res Reviewe delivered and regu Manage Demons Vritten r and othe Used eq Demonstrat symptom possible commun traditiona the impo nutrition, physiolo symptom structure the princ possible ethical a Technica Awarene treatmer Knowled anatomic Understa biomech Technica Knowled anatomic Knowled anatomic Knowled the anatomy the four anatomy	d of treatment plan d All treatment or care consistent wi ilatory requirements time throughout consultation and tr trated communication and negotiati eferrals, appraisal letters for insura- er documentation <u>uipment and resources competently</u> e knowledge of: nology obstacles to treatment ity resources and support services al dietetics ortance of breathing, exercise, hara hygiene and personal healthcare s gy and anatomy nology and pathology e and function of anatomical system tiples of human movement and bion reactions and contra-indications to nd legal implications of enquiry and al and practical knowledge of treatm ess of critical information required for a according to shiatsu therapy fram lge of history, philosophy and beliefs framework anding of physiology and anatomy lge of fundamental structure and fur cal systems anding of the fundamental principles anics al and practical knowledge of treatm lge of possible reactions and contra it lge of legal and regulatory implication the structure so and physiology of the body system to process methods of diagnosis (si zhen) r and physiology of the body system to principles of differentiation (ba gan	th legislative eatment on skills nce companies <u>y and safely</u> strengthening trategies s hechanics treatment treatment treatment or diagnosis and ework s of the shiatsu hction of s of hent -indications to ons of treatment
	and path	nods of differentiation which further i nology of disease ern differentiation in the formulation	
	principle	S	
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	<ul> <li>relevant testing and assessment options and procedures</li> <li>signs and symptoms of condition disease process</li> <li>Knowledge and understanding of types of further investigation available</li> <li>Knowledge of the contribution of the different schools of thought and historical theories of clinical practice</li> </ul>
Underpinning Skills	<ul> <li>Demonstrate skills to:</li> <li>Identify signs and symptoms of condition disease process</li> <li>Apply the four methods of diagnosis (si zhen)</li> <li>select the therapeutic techniques to determine treatment</li> <li>analyze and interpret information received</li> <li>manage shiatsu treatment</li> <li>apply therapeutic techniques</li> <li>Undertake relevant testing and assessment options and procedures</li> <li>communicate effectively with clients</li> <li>advise and resource the client</li> </ul>
	<ul> <li>discuss the treatment with the client within the treatment plan</li> <li>review treatment</li> </ul>
Resource	Resources essential for assessment include:
Implications	<ul> <li>An appropriately stocked and equipped clinic or</li> <li>simulated clinic environment</li> </ul>
	<ul> <li>Relevant texts and manuals</li> <li>- Skilled assessors</li> </ul>
Methods of	Competence may be assessed through:
Assessment	Interview / Written Test
	Demonstration / Observation with Oral Questioning
Context Of	Competence may be assessed in the work place or in a
Assessment	simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V		
Unit Title	Manage Health Care Business Supervise in Health Setting	
Unit Code	HTH RMT5 09 0611	
Unit Descriptor	This unit of competence describes the skills and knowledge required to supervise workers in a health setting It involves working with a work group to optimize client safety and comfort whilst completing job expectations and outputs; and to manage a business requirements of a practice within the health care environment.	

Elements	Perf	erformance Criteria		
<ol> <li>Facilitate understanding of the work group's</li> </ol>	1.1	•	ation's mission and goals, legislat ory requirements are communicate	
purpose / information needs	1.2		s of information and resources tha group/practitioner performance a	
neeus	1.3		tion needs of the work group/prac d to according to organization polic	
	1.4	Releva distribu	nt information and/or resources an	e secured and
	1.5	importa	roup/practitioner is assisted to unc nce of <i>client safety and comfort</i> f the organization	
	1.6	contribu	roup/practitioner is assisted to unc ution to the organization's goals, ir and comfort	
	1.7	risks to	roup/practitioner is assisted to iden client safety and comfort and deve ement plan	
	1.8	operatio	roup/practitioner is s to supported onal plan to meet expected output client safety and comfort	
	1.9	about e	sion is conducted with work group/ quipment and consumable quality ments, both current and anticipate	and currency
	1.10		tion on options for equipment is re to meet practice requirements	esearched and
	1.11	Information about qualities of practice consumables is gathered as per organizational guidelines		
	1.12		enefit analysis of equipment and m rency requirements and options a	
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	requirements of a practice	4.2	Practice requirements are identified and implemented to <i>meet location and regional needs</i>
4.	Manage the client related	4.1	Practice requirements are identified to address the safety and comfort needs of specific client groups
		3.7	Deviations to performance and threats to client safety and comfort and solutions are documented and reported to an appropriate person
deviations.		3.6	Work group and/or individual are/is empowered to address performance deviations
	3.5	Work group problem solving access is facilitated to deal with all performance deviations and threats to client safety and comfort	
	3.4	Reporting processes are established for work group performance	
	3.3	Work group/practitioner is assisted to establish strategies to monitor work performance in a context of client safety and comfort	
	3.2	Work group/practitioner is supported to identify indicators of possible deviations from work group goals and client safety and comfort	
3.	Manage performance	3.1	Work group/practitioner is supported to develop strategies to monitor performance
	2.7	Required <i>resources</i> are secured to meet work group goals in a context of client safety and comfort	
	2.6	Work group/practitioner is supported to <i>complete job functions</i> in a manner consistent with goals and client safety and comfort	
		2.5	Individuals understanding on their roles, responsibilities and contribution to client safety and comfort are ensured for effectiveness
		2.4	Equipment maintenance and renewal requirements are included in budget development and monitoring
		2.3	An equipment maintenance and renewal plan and costing are prepared based on current and anticipated information
operational plan	2.2	Work group/practitioner is consulted on manufacturer guidelines and maintenance records to determine a replacement protocol for equipment	
im	Develop and implement	2.1	Discussion is conducted with work group/practitioner to determine the current and future needs of the practice
			and completed with reference to budgetary and planning constraints

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		4.3	<b>Communication requirements</b> are develop and implemented to meet client needs
		4.4	Information suitable to client language and comprehension needs is identified and secured
		4.5	Systems are developed and implemented to ensure that other client support needs are met, where required
		4.6	Relevance and currency of client related requirements of a practice are monitored
5. Manage appointment scheduling requirements	appointment scheduling	5.1	Appointment scheduling requirements are analyzed to best balance <i>client appointment needs</i> with practitioner time and needs
	5.2	Client scheduling practices that best balance client needs and practitioner needs are implemented and monitored	
care pra requirem (excludir practition	Monitor duty of care practice	6.1	Risk of harm or injury to clients, staff, contractors and suppliers are identified
	requirements (excluding practitioner specific	6.2	Practitioners are consulted about reasonable and appropriate action to mitigate the likelihood of harm and injury
	requirements)	6.3	Risk mitigation strategies are implemented accordingly
		6.4	Records of all actions that support attention to duty of care are maintained in standard format

Variables	Range
Tools and Equipment	Computers, communication facilities
Actions to support client safety and comfort may include:	<ul> <li>Communicating effectively, including communicating risk, obtaining consent, involving the client as a partner in health care and being culturally respectful</li> <li>Identifying, preventing and managing adverse events and near misses</li> </ul>
	<ul> <li>Use of evidence and information to promote best practice and enhance client safety</li> <li>Working safely</li> <li>Being ethical</li> <li>Continuing learning</li> <li>Addressing issues specific to the client and/or client group</li> </ul>
A risk management plan may include but is not limited to:	<ul> <li>Identification of possible threats to client safety and comfort</li> <li>Strategies to mitigate risk</li> <li>Response plan for breaches of client safety and comfort</li> </ul>

Supporting work group to complete job functions may include:	<ul> <li>Clear communication of expectations</li> <li>Modelling</li> <li>Mentoring</li> <li>Training</li> <li>Responding appropriately and in a timely fashion to deviations to performance and threats to client safety and comfort</li> <li>Facilitate problem solving on an individual and work group level</li> </ul>
Resources may include:	<ul> <li>Information,</li> <li>Equipment,</li> <li>Materials</li> </ul>
Strategies for monitoring performance may include:	<ul> <li>Self monitoring</li> <li>Measurement against defined job functions</li> <li>Client satisfaction</li> <li>Peer monitoring</li> </ul>
Specific client group needs may include	<ul> <li>Child friendly environment</li> <li>Access and comfort for aged clients</li> <li>Access and comfort for clients with a disability</li> <li>Indigenous Australian appropriate environment</li> <li>Access and comfort for specific conditions</li> </ul>
Regional requirements may include	<ul> <li>Comfort requirements for clients travelling long distances</li> <li>Warmth</li> <li>Coolness</li> <li>Flexible appointment requirements</li> <li>Hours of operation</li> </ul>
Communication requirements may occur in:	<ul> <li>Appointment reminders</li> <li>Review times for chronic conditions</li> <li>Systems to ensure clients are aware of special requirements eg fasting, supply of specimens</li> </ul>
Information May include:	<ul> <li>Condition specific information</li> <li>General well being information</li> <li>Language relevant information</li> <li>Age appropriate information</li> <li>Comprehension level appropriate information</li> </ul>
Client appointment needs include:	<ul> <li>Adequate contact with the practitioner</li> <li>Appointment times that address client comfort needs e.g., due to fasting' fluid intake etc</li> <li>Minimal waiting time</li> </ul>
Additional support needs may include	<ul> <li>Assistance organizing referrals, where necessary</li> <li>Assistance organizing other supports, eg home care</li> <li>Information about the cost and availability of equipment and aids</li> </ul>

Evidence Guide	
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability to:</li> <li>Communicated with and facilitated work group to: <ul> <li>establish operational goals, in a context of client safety and comfort</li> <li>establish performance monitoring strategies</li> <li>participate in problem solving of deviations to performance and threats to client safety and comfort</li> </ul> </li> <li>Monitored and reported team performance</li> <li>Collated information about qualities of practice consumables</li> <li>Undertook a cost benefit analysis relating to quality and currency requirements of equipment and materials</li> <li>Identified viable options for the practice in relation to equipment and materials in line with budgetary and planning constraints</li> <li>Implemented risk mitigation strategies to address identified risks for practice</li> <li>Monitored and recorded actions that support attention to duty of care</li> <li>Developed and managed practice budgets relating to equipments</li> <li>Prepared an equipment maintenance and renewal plan and costing</li> <li>Managed appointment scheduling to address client and practitioner needs</li> </ul>
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of:</li> <li>Organization's mission and goals</li> <li>Legislative and regulatory requirements of the work group's functions</li> <li>Requirements for client safety and comfort</li> <li>Principles and processes for goal setting and monitoring</li> <li>Principles and processes of risk management</li> <li>Organization's performance monitoring policies and procedures</li> <li>Principles and processes of performance management</li> <li>Sources of information and/or resources relevant to the work groups performance and client safety and comfort</li> <li>Practice policies, procedures and systems relevant to delivery of client services</li> <li>Practice security procedures and systems</li> <li>Practicioner requirements -information, equipment and other resources</li> <li>Client requirements- in relation to information, appointment scheduling, available support services and specific service delivery issues</li> </ul>
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	<ul> <li>Quality, cost and associated requirements relating to equipment and consumable resources relevant to the practice</li> <li>Requirements relating to storage, handling, maintenance and currency of equipment and consumable resources</li> <li>Practice appointment scheduling and client follow up systems and procedures</li> <li>Potential risks relevant to the practice and associated risk mitigation strategies</li> <li>Practice policies and procedures in relation to addressed duty of care and service delivery requirements</li> </ul>
Underpinning Skills	Ability and practical skills to:
	<ul> <li>facilitate understanding of the work group's purpose /</li> <li>information needs</li> </ul>
	<ul> <li>develop and implement operational plan</li> </ul>
	manage performance deviations.
	manage the client related requirements of a practice
	manage appointment scheduling requirements
	monitor duty of care practice requirements
	<ul> <li>apply problem solving skills</li> </ul>
Resource	Resources essential for assessment include:
Implications	<ul> <li>Access to relevant workplace or appropriately</li> </ul>
	<ul> <li>Simulated environment where assessment can take place</li> </ul>
	<ul> <li>Relevant legislation, regulations and guidelines mission statement and goals</li> </ul>
	Client safety and comfort requirements for a range of work contexts
	Skilled assessors
Methods of	Competence may be assessed through:
Assessment	Interview / Written Test
	Demonstration / Observation with Oral Questioning
Context Of	Competence may be assessed in the work place or in a
Assessment	simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Monitor and Evaluate Massage Therapy Treatment		
Unit Code	HTH RMT5 10 0611		
Unit Descriptor	This unit of competence describes the skills and knowledge required to monitor and evaluate a range of massage treatments provided as a part of a treatment plan for each client.		

El	Elements		formance Criteria
1.	Monitor the progress of each	1.1	Monitoring of client health is undertaken in line with treatment plans
	client	1.2	Treatments are assessed and reviewed as required as per work requirement
		1.3	Progress is documented in standard format according to clinic requirements
2.	Monitor treatments	2.1	Expected outcomes of treatments are considered and client is asked for feedback according to clinic requirements
		2.2	The client is monitored to assess the appropriate and timely application of additional massage techniques according to clinical requirements
		2.3	Client is referred to other health professionals if appropriate according to clinic guideline
		2.4	Client progress is reviewed after each session according to clinic guideline
3.	Evaluate the effectiveness of treatments	3.1	A relationship of trust with the client is built and maintained with active promotion of and strict adherence to confidentiality
		3.2	Clients are asked to ascertain their level of comfort and compliance with the treatment in accordance with work ethics and requirement
		3.3	Degree of improvement or changes in the client's condition is measured and compared with expectations in the treatment plan
		3.4	Client is provided with clear information about their level of improvement in relation to their treatment plan
		3.5	Impact of ongoing treatments is evaluated in relation to client's physical, mental and emotional condition and behavior

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	3.6	Information from client is used in the review of treatment plans in accordance with work ethics and requirement
	3.7	Clients are encouraged to maintain their health by active involvement in their treatment and plan of care
	3.8	Other practitioners are consulted with as necessary and appropriate and with client permission
4. Determine continuation and/or revision treatments	5.1	Changes in client treatment /condition are communicated to client, implemented and documented in standard format as per clinic guideline
	5.2	Revision of treatments is communicated to other team members if applicable as per clinic guideline

Variables		Range		
Occupational & Safety (OH		<ul> <li>Use appre</li> <li>Follow oc</li> <li>Confident</li> </ul>	ection control procedures opriate protective and clothing for t cupational health and safety proce tial for client's case and problems	
Tools and Equipment		<ul><li>First Aid I</li><li>Bathing fa</li></ul>	acility gy treatment beds d pillow	
Information a the progress treatment ma gathered by :	ofa iy be	<ul> <li>Observati</li> <li>Questioni</li> <li>Interpretir</li> <li>Other me</li> </ul>	ion ing ng client observations dical reports <td>her health</td>	her health
Review client progress may include:	-	<ul> <li>Physical</li> <li>Mental/er</li> <li>Behaviou</li> </ul>		
As appropriation		Where the	e client has provided written permi	ssion
Treatment pla may include:	an	<ul> <li>Shahitsu</li> <li>Swedish</li> <li>Remedia</li> <li>Aromathe</li> <li>Thai mas</li> <li>Other cor</li> <li>Other ma</li> </ul>	gy treatments treatments massage treatments al treatments erapy treatments saage treatments mplementary health treatments instream health treatments to other health professionals	
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	<ul> <li>Monitoring regime</li> <li>Evaluation of care</li> </ul>
Health care monitoring may include:	<ul> <li>Scheduling using paper-based or computer-based systems</li> <li>Client follow-up visits</li> <li>Client re-assessments and review of treatment</li> </ul>
Criteria for evaluation of treatment plan may include:	<ul> <li>Degree of improvement or change in client condition either:</li> <li>observed;</li> <li>client reported; or</li> <li>medically assessed</li> <li>Client's level of comfort</li> </ul>

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Evidence Guide	
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability to:</li> <li>assessed client health in line with treatment plan and reviewed treatment.</li> <li>documented progress and reviewed after each session</li> <li>evaluated impact of ongoing treatment in relation to client's physical, mental and emotional condition and behaviour</li> <li>implemented and documented changes in client treatment /condition</li> <li>Reviewed client's condition in relation to treatments provided, taking prior history into consideration</li> <li>Referred clients for further assessment, treatments and/or counseling as required</li> <li>Communicated effectively with clients</li> <li>Evaluated: <ul> <li>outcomes of client sessions</li> <li>client's level of compliance</li> <li>holistic impact of sessions on client's physical, mental and emotional condition and behaviour</li> </ul> </li> </ul>
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of:</li> <li>Organization policies and procedures relating to client confidentiality</li> <li>Knowledge of the interaction of other treatments</li> <li>Realistic expectations of client condition</li> <li>Relevant criteria for evaluation of effectiveness of plan of care</li> <li>Knowledge of referral processes and procedures</li> <li>legal and ethical considerations relevant to practice within a massage framework</li> <li>possible precautions/contraindications to treatment</li> <li>anatomy and physiology of the body systems</li> <li>relevant assessment options and procedures</li> </ul>

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	<ul> <li>common disease states and functional problems of each body system</li> <li>the clinical indications of treatment relevant to specific circumstances, first aid and injuries</li> <li>First Aid and CPR</li> <li>the possible responses and contra-indications to treatment</li> <li>and understanding of methods of preparing treatment and management plans</li> <li>the contribution of the different schools of thought and historical theories of clinical practice</li> <li>Basic understanding of the interaction of complementary therapies</li> <li>legislative and regulatory requirements</li> <li>common medical terminology</li> <li>basic nutritional principles</li> </ul>
	<ul> <li>Organization policies and procedures relating to client confidentiality</li> </ul>
	the interaction of other treatments with Reflexology
	OH&S requirements
Underpinning Skills	Ability and practical skills to:
	<ul> <li>monitor the progress of each client</li> </ul>
	monitor treatments
	evaluate the effectiveness of treatments
	determine continuation and/or revision treatments
	communicate effectively with clients
	<ul> <li>apply OH&amp;S requirements</li> </ul>
	implement organization policies and procedures relating to client confidentiality
Resource	Resources essential for assessment include:
Implications	<ul> <li>A fully stocked and equipped clinic or simulated Clinic environment</li> </ul>
	Relevant texts or medical manuals
	Relevant paper-based/video assessment Instruments
	Appropriate assessment environment
	Skilled Assessors
Methods of	Competence may be assessed through:
Assessment	Interview / Written Test
-	Demonstration / Observation with Oral Questioning
Context Of	Competence may be assessed in the work place or in a
Assessment	simulated work place setting

Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Manage Health Care Setting		
Unit Code	HTH RMT5 11 0611		
Unit Descriptor	This unit of competence describes the skills and knowledge required to supervise workers in a health setting It involves working with a work group to optimize client safety and comfort whilst completing job expectations and outputs; and to manage a business requirements of a practice within the health care environment.		

Elements	Perf	ormance Criteria
<ol> <li>Facilitate understanding of the work group's</li> </ol>	1.1	Organization's mission and goals, legislative and regulatory requirements are communicated to the work group
purpose / information needs	1.2	Sources of information and resources that may contribute to work group/practitioner performance are identified
neeus	1.3	Information needs of the work group/practitioner is respond to according to organization policy
	1.4	Relevant information and/or resources are secured and distributed
	1.5	Work group/practitioner is assisted to understand the importance of <i>client safety and comfort</i> to the overall goals of the organization
	1.6	Work group/practitioner is assisted to understand its contribution to the organization's goals, including client safety and comfort
	1.7	Work group/practitioner is assisted to identify possible risks to client safety and comfort and develop a <i>risk management plan</i>
	1.8	Work group/practitioner is s to supported to develop an operational plan to meet expected outputs, in a context of optimal client safety and comfort
	1.9	Discussion is conducted with work group/practitioner about equipment and consumable quality and currency requirements, both current and anticipated
	1.10	Information on options for equipment is researched and secured to meet practice requirements
	1.11	Information about qualities of practice consumables is gathered as per organizational guidelines
	1.12	Cost benefit analysis of equipment and material quality and currency requirements and options are analyzed
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			and completed with reference to budgetary and planning constraints
2.	Develop and implement operational plan	2.1	Discussion is conducted with work group/practitioner to determine the current and future needs of the practice
		2.2	Work group/practitioner is consulted on manufacturer guidelines and maintenance records to determine a replacement protocol for equipment
		2.3	An equipment maintenance and renewal plan and costing are prepared based on current and anticipated information
		2.4	Equipment maintenance and renewal requirements are included in budget development and monitoring
		2.5	Individuals understanding on their roles, responsibilities and contribution to client safety and comfort are ensured for effectiveness
		2.6	Work group/practitioner is supported to <i>complete job functions</i> in a manner consistent with goals and client safety and comfort
		2.7	Required <i>resources</i> are secured to meet work group goals in a context of client safety and comfort
3.	performance deviations.	3.1	Work group/practitioner is supported to develop strategies to monitor performance
		3.2	Work group/practitioner is supported to identify indicators of possible deviations from work group goals and client safety and comfort
		3.3	Work group/practitioner is assisted to establish strategies to monitor work performance in a context of client safety and comfort
		3.4	Reporting processes are established for work group performance
		3.5	Work group problem solving access is facilitated to deal with all performance deviations and threats to client safety and comfort
		3.6	Work group and/or individual are/is empowered to address performance deviations
		3.7	Deviations to performance and threats to client safety and comfort and solutions are documented and reported to an appropriate person
4.	Manage the client related	4.1	Practice requirements are identified to address the safety and comfort needs of specific client groups
	requirements of a practice	4.2	Practice requirements are identified and implemented to <i>meet location and regional needs</i>
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		4.3	<b>Communication requirements</b> are develop and implemented to meet client needs
		4.4	<i>Information</i> suitable to client language and comprehension needs is identified and secured
		4.5	Systems are developed and implemented to ensure that other client support needs are met, where required
		4.6	Relevance and currency of client related requirements of a practice are monitored
5.	Manage appointment scheduling requirements	5.1	Appointment scheduling requirements are analyzed to best balance <i>client appointment needs</i> with practitioner time and needs
		5.2	Client scheduling practices that best balance client needs and practitioner needs are implemented and monitored
6.	Monitor duty of care practice requirements (excluding practitioner specific requirements)	6.1	Risk of harm or injury to clients, staff, contractors and suppliers are identified
		6.2	Practitioners are consulted about reasonable and appropriate action to mitigate the likelihood of harm and injury
		6.3	Risk mitigation strategies are implemented accordingly
		6.4	Records of all actions that support attention to duty of care are maintained in standard format

Variables	Range
Tools and Equipment	Computers, communication facilities
Actions to support client safety and comfort may	<ul> <li>Communicating effectively, including communicating risk, obtaining consent, involving the client as a partner in health care and being culturally respectful</li> </ul>
include:	<ul> <li>Identifying, preventing and managing adverse events and near misses</li> </ul>
	<ul> <li>Use of evidence and information to promote best practice and enhance client safety</li> </ul>
	Working safely
	<ul><li>Being ethical</li><li>Continuing learning</li></ul>
	<ul> <li>Addressing issues specific to the client and/or client group</li> </ul>
A risk management plan may include but	<ul> <li>Identification of possible threats to client safety and comfort</li> <li>Strategies to mitigate risk</li> </ul>
is not limited to:	Response plan for breaches of client safety and comfort
Supporting work	Clear communication of expectations
group to	Modelling

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complete job functions may include:	<ul> <li>Mentoring</li> <li>Training</li> <li>Responding appropriately and in a timely fashion to deviations to performance and threats to client safety and comfort</li> <li>Facilitate problem solving on an individual and work group level</li> </ul>
Resources may include:	<ul> <li>Information, -Equipment, -Materials</li> </ul>
Strategies for monitoring performance may include:	<ul> <li>Self monitoring</li> <li>Measurement against defined job functions</li> <li>Client satisfaction</li> <li>Peer monitoring</li> </ul>
Specific client group needs may include	<ul> <li>Child friendly environment</li> <li>Access and comfort for aged clients</li> <li>Access and comfort for clients with a disability</li> <li>Indigenous Australian appropriate environment</li> <li>Access and comfort for specific conditions</li> </ul>
Regional requirements may include	<ul> <li>Comfort requirements for clients travelling long distances</li> <li>Warmth</li> <li>Coolness</li> <li>Flexible appointment requirements</li> <li>Hours of operation</li> </ul>
Communication requirements may occur in:	<ul> <li>Appointment reminders</li> <li>Review times for chronic conditions</li> <li>Systems to ensure clients are aware of special requirements eg fasting, supply of specimens</li> </ul>
Information May include	<ul> <li>Condition specific information</li> <li>General well being information</li> <li>Language relevant information</li> <li>Age appropriate information</li> <li>Comprehension level appropriate information</li> </ul>
Client appointment needs include:	<ul> <li>Adequate contact with the practitioner</li> <li>Appointment times that address client comfort needs e.g., due to fasting' fluid intake etc</li> <li>Minimal waiting time</li> </ul>
Additional support needs may include	<ul> <li>Assistance organizing referrals, where necessary</li> <li>Assistance organizing other supports, eg home care</li> <li>Information about the cost and availability of equipment and aids</li> </ul>

Evidence Guide	
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability to:</li> <li>Communicated with and facilitated work group to: <ul> <li>establish operational goals, in a context of client safety and comfort</li> <li>establish performance monitoring strategies</li> <li>participate in problem solving of deviations to performance and threats to client safety and comfort</li> </ul> </li> <li>Monitored and reported team performance</li> <li>Collated information about qualities of practice consumables</li> <li>Undertook a cost benefit analysis relating to quality and currency requirements of equipment and materials</li> <li>Identified viable options for the practice in relation to equipment and materials in line with budgetary and planning constraints</li> <li>Implemented risk mitigation strategies to address identified risks for practice</li> <li>Monitored and recorded actions that support attention to duty of care</li> <li>Developed and managed practice budgets relating to equipments</li> <li>Prepared an equipment maintenance and renewal plan and costing</li> <li>Managed appointment scheduling to address client and practitioner needs</li> </ul>
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of:</li> <li>Organization's mission and goals</li> <li>Legislative and regulatory requirements of the work group's functions</li> <li>Requirements for client safety and comfort</li> <li>Principles and processes for goal setting and monitoring</li> <li>Principles and processes of risk management</li> <li>Organization's performance monitoring policies and procedures</li> <li>Principles and processes of performance management</li> <li>Sources of information and/or resources relevant to the work groups performance and client safety and comfort</li> <li>Practice policies, procedures and systems relevant to delivery of client services</li> <li>Practice security procedures and systems</li> <li>Practicioner requirements - information, equipment and other resources</li> <li>Client requirements- in relation to information, appointment scheduling, available support services and specific service delivery issues</li> </ul>
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	<ul> <li>Quality, cost and associated requirements relating to equipment and consumable resources relevant to the practice</li> <li>Requirements relating to storage, handling, maintenance and currency of equipment and consumable resources</li> <li>Practice appointment scheduling and client follow up systems and procedures</li> <li>Potential risks relevant to the practice and associated risk mitigation strategies</li> <li>Practice policies and procedures in relation to addressed duty of care and service delivery requirements</li> </ul>
Underpinning Skills	Ability and practical skills to:
	<ul> <li>facilitate understanding of the work group's purpose /</li> <li>information needs</li> </ul>
	<ul> <li>develop and implement operational plan</li> </ul>
	manage performance deviations.
	<ul> <li>manage the client related requirements of a practice</li> </ul>
	<ul> <li>manage appointment scheduling requirements</li> </ul>
	<ul> <li>monitor duty of care practice requirements</li> </ul>
	<ul> <li>apply problem solving skills</li> </ul>
Resource	Resources essential for assessment include:
Implications	<ul> <li>Access to relevant workplace or appropriately</li> </ul>
	<ul> <li>Simulated environment where assessment can take place</li> </ul>
	<ul> <li>Relevant legislation, regulations and guidelines mission statement and goals</li> </ul>
	<ul> <li>Client safety and comfort requirements for a range of work contexts</li> </ul>
	Skilled assessors
Methods of	Competence may be assessed through:
Assessment	Interview / Written Test
	Demonstration / Observation with Oral Questioning
Context Of	Competence may be assessed in the work place or in a
Assessment	simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V		
Unit Title	Apply Acupuncture and Moxibustion Treatments	
Unit Code	HTH RMT5 12 0611	
Unit Descriptor	This unit of competence deals with knowledge, skills and attitudes necessary to perform Acupuncture and Moxibustion to the needs of individual clients and communities. The unit involves identification and application of the theory and principles of acupuncture and moxibustion, the mechanism treatment of human body abnormalities for needy people depending to age and sex group.	

Elements	Perf	Performance Criteria		
1. Describe the general	1.1	Definitio are prov	ns of acupuncture and moxibustic	on treatments
concepts of acupuncture and moxibusti	0n 1.2		view of the historical development sture and moxibustion treatments	
	1.3		<b>tral philosophies of</b> treatments d and explained	techniques are
	1.4		idian theory basis of acupuncture tion treatments is explained	e and
	1.5	techniqu	<i>hilosophies relating</i> to massage les are identified and explained in fessional ethics and workplace gu	n accordance
2. Obtain, record and analyze a accurate histo of the client	n	client's h	d information is gathered from the history in a respectful way ensurin ed in a purposeful, systematic and	ng all enquiries
	2.2	are iden strategie	<i>likely to have an influence</i> on the tified during the consultation process are implemented to minimize the ctors wherever possible as per woment	ess and ne effect of
	2.3	or proce	s requested to submit previous m ss medical check up prior to com pre completion of treatment	
standa		standard	ion is gathered, recorded and org I format in a way which can be in professionals	
	2.5	health c determir	nt, information and advice provid are professionals are taken into c ning the strategy to be used in tre ocedures	onsideration in
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		2.6	Information gathered is assessed and assigned priority in consultation with the client using knowledge, experience and theoretical principles
3.	Determine precautions and	3.1	Signs and symptoms of conditions are recognized and identified as a pre-requisite for treatment/care
	contra- indications	3.2	<b>Precautions/contra-indications</b> to acupuncture and moxibustion treatments are observed, and recorded in standard format and incorporated into treatment plan
		3.3	Clients are advised to seek medical treatment when found necessary
4.	Inform the patient	4.1	Patient is addressed appropriately in accordance with to professional ethics and workplace procedures
		4.2	The services able to be provided and the limits of available services are explained clearly to the patient in accordance with workplace procedures
		4.3	Patient's expectations of services are explored and clarified ethically
		4.4	Personal abilities, level of professional competence and parameters of role are explained to the client
		4.5	The rationale of the treatment plan is discussed with the patient in accordance workplace rules
5.	Determine the direction and	5.1	Patient is informed about methods and techniques applied in fixing and inserting needles
	depth of the needle insertion	5.2	Patient's doubts are made clear before commencement of the treatments
		5.3	Patient is explained about treatment procedures and signs of discomfort during treatments
6.	Apply needling using the correct	6.1	Appropriate needle size is selected and applied as per job instruction and professional ethics
	steps	6.2	Appropriate depth of needles is maintained during fixing and checked throughout treatments
		6.3	Patient is informed about duration taken for treatment
		6.4	Patient is asked to ascertain his/her level of comfort and compliance with the treatment
		6.5	Manipulation methods of reinforcing and reducing are applied throughout the treatment as required
		6.6	Needles are removed from the body of patient at adjusted clock
		6.7	Treatment areas are cleaned with ball of cotton applying OH&S requirements

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6.		Effects of previous treatment are identified and recorded according to workplace procedure and treatment plan
6.		Patient is provided with clear information about their level of improvement in relation to their treatment plan
6.		Impact of ongoing treatments is evaluated in relation to patient's physical, mental and emotional condition and behavior
6.	.11	Used needles are disposed after treatment of the patient is completed

Variables	Range
Occupational Health & Safety (OH&S)	<ul> <li>Apply infection control procedures</li> <li>Use appropriate protective and clothing for the work</li> <li>Follow occupational health and safety procedures and rules</li> <li>Confidential for client's case and problems</li> </ul>
Tools and Equipment	<ul> <li>Massage table, Picture, Pillow, cushion, Mattress, Sheets, Computers, Projector ,weighing scale, BP apparatus and, Stethoscope, Thermometer, OHS equipment and personal protective devices, Overcoat, uniforms, needles acupuncture, forceps, electrical acupuncture apparatus, moxa-stick</li> </ul>
Materials	cotton balls, Alcohol, small trays,

Evidence Guide	
Critical Aspects of Competence	<ul> <li>Critical evidence of knowledge and skills include the ability to:</li> <li>Described the general concepts and historical background of acupuncture and moxibustion</li> <li>Demonstrated client's safety in inserting and manipulation the needle</li> <li>Demonstrated the correct direction and depth of the needle insertion</li> <li>Applied correct method of inserting and manipulating needle after insertion</li> </ul>
Underpinning Knowledge and Attitudes	<ul> <li>Demonstrate knowledge of:</li> <li>Historical background of acupuncture</li> <li>General terminology in acupuncture</li> <li>client safety</li> <li>practice needling</li> <li>Inserting and manipulation the needle</li> <li>Method of inserting needle</li> <li>Manipulation after insertion</li> <li>The manipulation methods reinforcing and reducing</li> </ul>

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	Acupuncture sensation and therapeutic effects
	The direction and depth of the needle insertion
Underpinning Skills	Demonstrate skills to:
	<ul> <li>analyze an accurate history of the client</li> </ul>
	<ul> <li>identify precautions and contra-indications</li> </ul>
	<ul> <li>communicate effectively with patient</li> </ul>
	determine the direction and depth of the needle insertion
	<ul> <li>apply needling using the correct steps</li> </ul>
	apply infection control procedures and OH &S requirements
Resource	Resources essential for assessment include:
Implications	<ul> <li>Access to relevant workplace or appropriately</li> </ul>
	Simulated environment where assessment can take place
	Skilled assessors
Methods of	Competence may be assessed through:
Assessment	Interview / Written Test
	Demonstration / Observation with Oral Questioning
Context Of	Competence may be assessed in the work place or in a
Assessment	simulated work place setting

Occupational Standard: Remedial Massage Therapy Level V	
Unit Title	Practice Career Professionalism
Unit Code	HTH RMT5 13 0611
Unit Descriptor	This unit covers the knowledge, attitudes and skills in promoting career growth and advancement.

Elements	Per	formance Criteria
1. Integrate personal	1.1	Personal growth and work plans are pursued towards improving he qualifications set for the profession
objectives with organizational goals	1.2	Intra- and interpersonal relationships is are maintained in the course of managing oneself based on performance <i>evaluation</i>
	1.3	Commitment to the organization and its goal is demonstrated in the performance of duties
2. Set and meet work priorities	2.1	Competing demands are prioritized to achieve personal, team and organizational goals and objectives.
	2.2	<i>Resources</i> are utilized efficiently and effectively to manage work priorities and commitments
	2.3	Practices along economic use and maintenance of equipment and facilities are followed as per established procedures
3. Maintain professional	3.1	<i>Trainings and career opportunities</i> are identified and availed of based on job requirements
growth and development	3.2	<b>Recognitions</b> are -sought/received and demonstrated as proof of career advancement
	3.3	Licenses and/or certifications relevant to job and career are obtained and renewed

Variable	Range
Evaluation	performance appraisal
	<ul> <li>psychological profile</li> </ul>
	aptitude tests
Resources	• human
	financial
	<ul> <li>technology, hardware and software</li> </ul>
Training and career	<ul> <li>participation in training program</li> </ul>
opportunities	<ul> <li>serving as resource persons in conference/workshops</li> </ul>
	continuing education
Recognition	recommendations
	citations

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	<ul> <li>certificate of appreciation</li> <li>commendations / awards</li> </ul>
	<ul> <li>tangible and intangible rewards</li> </ul>
Licenses and/or	<ul> <li>professional licenses</li> </ul>
certificates	<ul> <li>support level licenses</li> </ul>

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Evidence Guide	
Critical Aspects of	Assessment must show evidence that the candidate:
Assessment	<ul> <li>attained job targets within key result areas (KRAs)</li> </ul>
	<ul> <li>maintained intra - and interpersonal relationship in the course of managing oneself based on performance evaluation</li> </ul>
	<ul> <li>completed trainings and career opportunities which are based on the requirements of the industries</li> </ul>
	<ul> <li>acquired and maintained licenses and/or certifications according to the requirement of the qualification</li> </ul>
Underpinning	Demonstrates knowledge of:
Knowledge and Attitudes	<ul> <li>work values and ethics (Code of Conduct, Code of Ethics, etc.)</li> </ul>
	company policies
	<ul> <li>company operations, procedures and standards</li> </ul>
	<ul> <li>fundamental rights at work including gender sensitivity</li> </ul>
	personal hygiene practices
Underpinning Skills	Demonstrates skills on:
	<ul> <li>appropriate practice of personal hygiene</li> </ul>
	<ul> <li>intra and Interpersonal skills</li> </ul>
	communication skills
Resource Implications	The following resources must be provided: variety of information, communication tools, simulated workplace
Methods of	Competence may be assessed through:
Assessment	Interview / Oral Questioning
	Observation/Demonstration with Oral Questioning
Context of Assessment	Competence may be assessed in the work place or in a simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V		
Unit Title	Facilitate and Capitalize on Change and Innovation	
Unit Code	HTH RMT5 14 0611	
Unit Descriptor	This unit specifies the outcomes required to plan and manage the introduction and facilitation of change; particular emphasis is on the development of creative and flexible approaches, and on managing emerging opportunities and challenges.	

Elements Performance Criteria		ormance Criteria	
1. Participate in planning		1.1	<i>Manager</i> contributes effectively to the organization's planning processes to introduce and facilitate change
,introduc facilitatin change	•	1.2	Plans to introduce change are made in consultation with <i>appropriate stakeholders</i>
		1.3	Organization's objectives and plans introduced to change are communicated effectively to individuals and teams
2. Develop and flexit	ole	2.1	Variety of approaches to managing workplace issues and problems are identified and analyzed
approach solutions		2.2	Varity of approaches identified and to analyze work place issues
		2.3	Risk factors identified and action initiated to manage risks to achieve organizational benefit
		2.4	<i>Risks</i> are identified and assessed, and action initiated to manage these to achieve a recognized benefit or advantage to the organization
		2.5	Workplace is managed in a way which promotes the development of innovative approaches and outcomes
			Resource managed effectively to improve productivity and services
		2.7	Creative and responsive approaches to resource management improve productivity and services, and/or reduce costs
3. Manage emerging challenge	-	3.1	Individuals and teams are supported to respond effectively and efficiently to changes in the organization's goals, plans and priorities
opportun	ities	3.2	Coaching and mentoring assist individuals and teams to develop competencies to handle change efficiently and effectively
		3.3	Opportunities are identified and taken as appropriate, to make adjustments and to respond to the changing needs of customers and the organization
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3.4	<i>Information needs</i> of individuals and teams are anticipated and facilitated as part of change implementation and management
3.5	Recommendations for improving the methods and techniques to manage change are identified, evaluated and negotiated with appropriate individuals and groups

Variables	Range		
Manager	A person with frontline management roles and		
	responsibilities, regardless of the title of their position		
Appropriate stakeholders may refer to:	<ul> <li>Those individuals and organizations who have a stake in the change and innovation being planned, including:</li> <li>organization directors and other relevant managers</li> <li>teams and individual employees who are both directly and indirectly involved in the proposed change</li> <li>union/employee representatives or groups</li> <li>OHS committees</li> <li>other people with specialist responsibilities</li> <li>external stakeholders where appropriate – such as clients, suppliers, industry associations, regulatory and licensing agencies</li> </ul>		
Risks may refer to:	<ul> <li>any event, process or action that may result in goals and objectives of the organization not being met</li> <li>any adverse impact on individuals or the organization</li> <li>various risks identified in a risk management process</li> </ul>		
Information needs may include:	<ul> <li>new and emerging workplace issues</li> <li>implications for current work roles and practices including training and development</li> <li>changes relative to workplace legislation, such as OHS, workplace data such as productivity, inputs/outputs and future projections</li> <li>planning documents</li> <li>reports</li> <li>market trend data</li> <li>scenario plans</li> <li>customer/competitor data</li> </ul>		

Evidence Guide			
Competence • Planning t • Developin		must show evidence that the can the introduction and facilitation of g creative and flexible approache emerging challenges and opport	change es and solutions
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Underpinning Knowledge and Attitudes	<ul> <li>Relevant legislation from all levels of government that affects business operation, especially in regard to occupational health and safety and environmental issues, equal opportunity, industrial relations and anti-discrimination</li> <li>the principles and techniques involved in: <ul> <li>change and innovation management</li> <li>development of strategies and procedures to implement and facilitate change and innovation</li> <li>use of risk management strategies: identifying hazards,</li> </ul> </li> <li>assessing risks and implementing risk control measures <ul> <li>problem identification and resolution</li> <li>leadership and mentoring techniques</li> <li>management of quality customer service delivery</li> <li>consultation and communication techniques</li> <li>the sources of change and how they impact</li> </ul> </li> <li>factors which lead/cause resistance to change</li> <li>approaches to managing workplace issues</li> </ul>
Underpinning Skills	Demonstrate skills on:
	Communication skills
	Planning work
	Managing risk
Resources	The following resources must be provided:
Implication	<ul> <li>Workplace or fully equipped assessment location with necessary tools, equipment and consumable materials</li> </ul>
Methods of	Competence may be assessed through:
Assessment	Interview/Written Test
	Observation/Demonstration with Oral Questioning
	Capability to develop project assessed
Context of Assessment	Competence may be assessed in the work place or in a simulated work place setting

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Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Manage Project Quality		
Unit Code	HTH RMT5 15 0611		
Unit Descriptor	This unit specifies the outcomes required to manage quality within projects. It covers determining quality requirements, implementing quality assurance processes, and using review and evaluation to make quality improvements in current and future projects.		

Elements	Performance Criteria
1. Determine quality requirements	1.1 <b>Quality objectives,</b> standards and levels are determined, with input from stakeholders and guidance of a higher project authority, to establish the basis for quality outcomes and a <b>quality management plan</b>
	1.2 Established <i>quality management methods, techniques</i> <i>and tools</i> are selected and used to determine preferred mix of quality, capability, cost and time
	1.3 Quality criteria are identified, agreed with a higher project authority and communicated to stakeholders to ensure clarity of understanding and achievement of quality and overall project objectives
	1.4 Agreed quality requirements are included in the project plan and implemented as basis for performance measurement
2. Implement quality assurance	2.1 Results of project activities and product performance are measured and documented throughout the project life cycle to determine compliance with agreed quality standards
	2.2 Causes of unsatisfactory results are identified, in consultation with the client, and appropriate actions are recommended to a higher project authority to enable continuous improvement in quality outcomes
	2.3 Inspections of quality processes and <b>quality control</b> results are conducted to determine compliance of quality standards to overall quality objectives
	2.4 A quality management system is maintained to enable effective recording and communication of quality issues and outcomes to a higher project authority and stakeholders

3.	<ol> <li>Implement project quality improvements</li> </ol>		Processes are reviewed and agreed changes implemented continually throughout the project life cycle to ensure continuous improvement to quality
		3.2	Project outcomes are reviewed against performance criteria to determine the effectiveness of quality management processes and procedures
		3.3	Lessons learned and recommended <i>improvements</i> are identified, documented and passed on to a higher project authority for application in future projects

Variable	Range		
Quality objectives may include:	<ul> <li>requirements from the client and other stakeholders</li> <li>requirements from a higher project authority</li> <li>negotiated trade-offs between cost, schedule and performance</li> <li>those quality aspects which may impact on customer satisfaction</li> </ul>		
quality management plan may include:	<ul> <li>established processes</li> <li>authorizations and responsibilities for quality control</li> <li>quality assurance</li> <li>continuous improvement</li> </ul>		
Quality management methods, techniques and tools may include	<ul> <li>brainstorming</li> <li>benchmarking</li> <li>charting processes</li> <li>ranking candidates</li> <li>defining control</li> <li>undertaking benefit/cost analysis</li> <li>processes that limit and/or indicate variation</li> <li>control charts</li> <li>flowcharts</li> <li>histograms</li> <li>pareto charts</li> <li>scattergram</li> <li>run charts</li> </ul>		
Quality control may include:	<ul> <li>monitoring conformance with specifications</li> <li>recommending ways to eliminate causes of unsatisfactory</li> <li>performance of products or processes</li> <li>monitoring of regular inspections by internal or external agents</li> </ul>		
Improvements may include:	<ul> <li>formal practices, such as total quality management or continuous improvement</li> <li>improvement by less formal processes which enhance both the product quality and processes of the project, for example client surveys to determine client satisfaction with project team performance</li> </ul>		
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Evidence Gu	uide					
Critical Aspe Competence		A person who demonstrates competence in this unit must be able to provide evidence that they have taken responsibility for quality management of projects. This will include evidence of managing the work of others within the project team with respect to quality.				
		<ul> <li>Products that could be used as evidence include:</li> <li>documentation produced in managing projects such as:</li> <li>lists of quality objectives, standards, levels and measurement criteria</li> <li>records of inspections, recommended rectification actions and quality outcomes</li> <li>management of quality management system and quality management plans</li> <li>application of quality control, quality assurance and continuous improvement processes</li> <li>records of quality reviews</li> <li>lists of lessons learned and recommended improvements</li> </ul>				
	<ul> <li>Processes that could be used as evidence include:</li> <li>how quality requirements and outcomes were determ projects</li> <li>how quality tools were selected for use in projects</li> <li>how team members were managed throughout project respect to quality within the project</li> <li>how quality was managed throughout projects</li> <li>how problems and issues with respect to quality and during projects were identified and addressed</li> <li>how projects were reviewed with respect to quality management</li> <li>how improvements to quality management of projects been acted upon</li> </ul>					
Underpinning Knowledge a Attitudes		<ul> <li>Broad knowledge and understanding of:</li> <li>the principles of project quality management and their application</li> <li>acceptance of responsibilities for project quality management</li> <li>use of quality management systems and standards</li> <li>the place of quality management in the context of the project life cycle</li> <li>appropriate project quality management methodologies; and their capabilities, limitations, applicability and contribution to project outcomes</li> <li>attributes: <ul> <li>analytical</li> <li>able to maintain an overview</li> <li>communicative</li> </ul> </li> </ul>		lity management ndards ext of the project hodologies; and		
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	positive leadership
Underpinning Skills	<ul> <li>Demonstrate skills required includes the:</li> <li>ability to relate to people from a range of social, cultural and ethnic backgrounds, and physical and mental abilities</li> <li>project management</li> <li>quality management</li> <li>planning and organizing</li> <li>communication and negotiation</li> <li>problem-solving</li> <li>leadership and personnel management</li> <li>monitoring and review skills</li> </ul>
Resources Implication	<ul><li>The following resources must be provided:</li><li>access to workplace documentation</li><li>real or simulated workplace</li></ul>
Methods of Assessment	<ul><li>Competence may be assessed through:</li><li>Interview/Written Test</li><li>Observation/Demonstration with Oral Questioning</li></ul>
Context of Assessment	Competence may be assessed in the real workplace or in a simulated workplace setting

Occupational Standard: Remedial Massage Therapy Level V		
Unit Title	Establish and Conduct Business Relationships	
Unit Code	HTH RMT5 16 0611	
Unit Descriptor	This unit covers the skills, attitudes and knowledge required to manage business relationship with customers within the constructions industry context.	

Elements		Performance Criteria		
1.	1. Establish contact		Welcoming customer environment is maintained	
	with customer	1.2	Customer is greeted warmly according to enterprise policies and procedures	
		1.3	Effective service environment is created through verbal and non-verbal presentation according to enterprise policies and procedures	
		1.4	Customer data is maintained to ensure database relevance and currency	
		1.5	Information on customers and service history is gathered for analysis	
		1.6	<b>Opportunities</b> to maintain regular contact with customers are identified and taken up	
2.	Clarify needs of customer	2.1	Customer needs are determined through questioning and active listening	
		2.2	Customer needs are accurately assessed against the products/services of the enterprise	
		2.3	Customer details are documented clearly and accurately in required format	
	2.5 M u		Conduct negotiations in a business-like and professional manner	
			Maximize benefits for all parties in the negotiation through use of established <b>techniques</b> and in the context of establishing long term relationships	
		2.6	Communicate the results of negotiations to appropriate colleagues and stakeholders within appropriate timeframes	
3.	Provide information and advice	3.1	Features and benefits of products/services provided by the enterprise are described/recommended to meet customer needs	

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	3.2 3.3	Information to satisfy customer needs is provided Alternative sources of information/advice are discussed with the customer
4. Foster and maintain business relationships	4.1	Pro-actively seek, review and act upon information needed to maintain sound business relationships.
	4.2	Honor agreements within the scope of individual responsibility.
	4.3	Make adjustments to agreements in consultation with the customer and share information with appropriate colleagues.
	4.4	Nurture relationships through regular contact and use of effective interpersonal and communication styles.

Variables	Range
Opportunities to maintain regular contact with customers may include:	<ul> <li>informal social occasions</li> <li>industry functions</li> <li>association membership</li> <li>co-operative promotions</li> <li>program of regular telephone contact</li> </ul>
Negotiation techniques	<ul> <li>identification of goals, limits</li> <li>clarification of needs of all parties</li> <li>identifying points of agreement and points of difference</li> <li>preparatory research of facts</li> <li>active listening and questioning</li> <li>non-verbal communication techniques</li> <li>appropriate language</li> <li>bargaining</li> <li>developing options</li> <li>confirming agreements</li> <li>appropriate cultural behavior</li> </ul>

Evidence Gu	Evidence Guide				
Critical Aspe		It is essentia	It is essential that competence is fully observed and there is		
Competence		ability to transfer competence to changing circumstances and to respond to unusual situations in the critical aspects of:			
		<ul> <li>consistently applying enterprise policies and procedures and industry codes of practice in regard to customer service</li> </ul>			
		<ul> <li>providing a quality service environment by treating customers in a courteous and professional manner through all stages of the procedure</li> </ul>			
• using			ective questioning/active listening a	nd observation	
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	skills to identify customer needs		
	<ul> <li>communicating effectively with others involved in or affected by the work</li> </ul>		
	<ul> <li>maintaining relevant and current customer databases in accordance with enterprise policies and procedures</li> </ul>		
	<ul> <li>ability to build and maintain relationships to achieve successful business outcomes</li> </ul>		
Underpinning	Demonstrate knowledge and attitudes on:		
Knowledge and Attitudes	<ul> <li>Operational knowledge of enterprise policies and procedures in regard to:         <ul> <li>customer service</li> <li>dealing with difficult customers</li> </ul> </li> </ul>		
	maintenance of customer databases		
	<ul> <li>allocated duties/responsibilities</li> </ul>		
	<ul> <li>General knowledge of the range of enterprise</li> </ul>		
	merchandise and services, location of telephone		
	extensions and departments/sections		
	<ul> <li>Basic operational knowledge of legislation and statutory requirements, including consumer law, trade practices and fair trading legislation</li> </ul>		
	• Basic operational knowledge of industry/workplace codes of		
	practice in relation to customer service		
	Negotiation and communication techniques appropriate to		
	negotiations that may be of significant commercial value		
Underpinning Skills	<ul> <li>Demonstrate skills on:</li> <li>Use workplace technology related to use of customer database</li> </ul>		
	<ul> <li>Collect, organize and understand information related to collating and analyzing customer information to identify needs</li> </ul>		
	<ul> <li>Communicate ideas and information</li> </ul>		
	Plan and organize activities concerning information for		
	database entries		
	Use mathematical ideas and techniques to plan database cells and size		
	Establish diagnostic processes which identify and		
	recommend improvements to customer service		
Resources	The following should be made available:		
Implication	a workplace or simulated workplace		
<ul> <li>documentation, such as enterprise policy and procedur</li> </ul>			
	manuals relating to customer service		
Methods of Competence may be assessed through:			
Assessment	Interview / Written Test		
	Observation/Demonstration with Oral Questioning		
Context of Assessment	Elements of competence contain both knowledge and practical components. Knowledge components may be assessed off the		
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job. Practical components should be assessed on the job or in a
simulated work environment.

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Occupational Standard: Remedial Massage Therapy Level V			
Unit Title	Develop and Refine Systems for Continuous Improvement in Operations		
Unit Code	HTH RMT5 17 1012		
Unit Descriptor	This unit of competency covers the skills, knowledge and processes required to ensure that continuous improvement systems do not stultify and continue to improve along with other operational systems in an organization. This unit is about improving the process yield/unit of effort or cost, reducing process variation and increasing process reliability, upgrading, enhancing or refining process outputs, and includes developing a culture of reviewing and sustaining change ensuring improvements are maintained and built on.		

Elements	Performance Criteria
1. Establish parameters of	1.1 Describe <i>organization systems</i> that impact on continuous improvement
current internal improvement	1.2 Identify current <i>relevant metrics</i> and their values
systems	1.3 Check that metrics are collected for all improvements
	1.4 Determine yield of current improvement processes
	1.5 Review results of improvements
2. Distinguish breakthrough	2.1 Identify all <i>improvements</i> which have occurred over an agreed period of time
improvement processes	2.2 Distinguish between <i>breakthrough improvements</i> and continuous improvements
	2.3 Determine the timing of breakthrough improvement processes
	2.4 Analyze factors controlling the <i>timing</i> and selection of breakthrough improvements
	2.5 Analyze <i>continuous improvements</i> to identify cases where breakthrough improvements were required
	2.6 Validate findings with process/system owners and obtain required approvals
	2.7 Improve timing/selection of breakthrough improvements
	2.8 Improve other factors limiting the gains from breakthrough improvements
3. Develop continuous improvement	3.1 Check that levels of delegated authority and responsibility are appropriate for continuous improvement from the shop floor
practice	3.2 Ensure all personnel have appropriate capabilities for
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		continuous improvement processes
	3.3	Ensure personnel and systems recognize potential breakthrough improvement projects
	3.4	Ensure sufficient resources are available for the operation of continuous and breakthrough improvement processes
	3.5	Check that relevant information flows from improvement changes to all required areas and stakeholders
	3.6	Check data collection and metrics analysis capture changes which result from improvement actions
	3.7	Check that improvement changes are standardized and sustained
	3.8	Check review processes for routine continuous improvements
	3.9	Remove or change factors limiting gains from improvements
	3.10	Modify systems to ensure appropriate possible changes are referred to other improvement processes
	3.11	Institutionalize breakthrough
4. Establish parameters of	4.1	Review <i>value stream</i> systems that impact on improvement
current external improvement system	4.2	Review procedures for deciding improvement methodologies Identify current relevant metrics and their values, as appropriate
	4.3	Determine yield of current improvement processes
	4.4	Review results of improvements
5. Explore opportunities for	5.1	Review mechanisms for consultation with value stream members
further development of value stream	5.2	Develop mechanisms for further improving joint problem solving
improvement processes	5.3	Develop mechanisms for increased sharing of organizational knowledge
	5.4	Obtain support and necessary authorizations from process/system owners
	5.5	Capture and standardize improvements
	5.6	Improve factors limiting gains from continuous improvements

6. Review systems for compatibility with improvement strategy	6.1	Review all systems which impact or are <i>impacted on improvements</i> and the improvement system
	6.2	Analyze relationships between improvement systems and other relevant systems
	6.3	Analyze practices caused by and results from the systems
	6.4	Negotiate changes to the systems to improve the outcomes from improvement systems
	6.5	Obtain necessary approvals to implement changes
	6.6	Monitor the implementation of the changes

Variable	Range		
Competitive systems an practices	Competitive limited to: lean ope agile ope preventa monitorin Control a Resourc Planning statistica three sig JIT, kant systems supply, v 5S continuo breakthre cause/ef overall e takt time process problem run charf standard current r Competi as to tak – stage pract – the s – the s	erations ative and predictive maintenance ap ng and data gathering systems, such and Data Acquisition (SCADA) soft e Planning (ERP) systems, Materia g (MRP) and proprietary systems al process control systems, includin ma ban and other pull-related operation value, and demand chain monitorin us improvement (kaizen) ough improvement (kaizen) ough improvement (kaizen blitz) fect diagrams quipment effectiveness (OEE) mapping solving ts l procedures eality tree tive systems and practices should ie into account: e of implementation of competitive	pproaches ch as Systems ware, Enterprise als Resource ag six sigma and ns control g and analysis be interpreted so systems and
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Code of practice and standards	Where reference is made to industry codes of practice, and/or Ethiopian/international standards, the latest version must be used		
Organization systems	<ul> <li>Organization systems may include:</li> <li>problem recognition and solving</li> <li>operational/process improvement</li> <li>improvement projects</li> <li>product/process design and development</li> <li>processes for making incremental improvements</li> </ul>		
Relevant metrics	<ul> <li>Relevant metrics include all those measures which might be used to determine the performance of the improvement system and may include:</li> <li>hurdle rates for new investments</li> <li>KPIs for existing processes</li> <li>quality statistics</li> <li>delivery timing and quantity statistics</li> <li>process/equipment reliability ('uptime')</li> <li>incident and non-conformance reports</li> <li>complaints, returns and rejects</li> </ul>		
Process	<ul> <li>Improvement process yield may be regarded as:</li> <li>the benefit achieved for the effort invested</li> </ul>		
improvement yield Breakthrough improvements	<ul> <li>The benefit achieved for the enort invested</li> <li>Breakthrough improvements include:</li> <li>those which result from a kaizen blitz or other improvement project or event and are a subset of all improvements</li> </ul>		
Timing of breakthrough improvements	<ul> <li>Timing of breakthrough improvements includes:</li> <li>frequency (which should be maximized) and duration (which should be minimized) of events/projects</li> </ul>		
Continuous improvement	Continuous improvement is part of normal work and does not require a special event to occur (although may still require authorizations) and contrasts with breakthrough improvement/kaizen blitz which occurs by way of an event or		
Resources for improvement Capturing value stream	project         Resources for improvements include:         • improvement budget         • guidelines for trialing of possible improvements         • mechanism for approvals for possible improvements         • business case guidelines for proposed improvements         • indicators of success of proposed improvement         • mechanisms for tracking and evaluation of changes         • forum for the open discussion of the results of the implementation         • mechanisms for the examination of the improvement for additional improvements         • organization systems to sustain beneficial changes         Capturing value stream improvements includes:         • revised contractual arrangements		
improvements	<ul> <li>revised contraction analigements</li> <li>revised specifications</li> </ul>		
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	<ul> <li>signed agreements</li> <li>other documented arrangements which formalize the raised base line</li> </ul>	
Systems impacting improvements	Systems which impact/are impacted on improvements and the improvement system include: • office • purchasing • rewards (individual or team at all levels) • sales • marketing • maintenance	
Orregizational	<ul> <li>process/product</li> <li>transport and logistics</li> </ul>	
Organizational knowledge	<ul> <li>Organizational knowledge should:</li> <li>be able to be quantified or otherwise modified to make its outcomes measurable or observable</li> <li>be able to be expressed in an accessible and distributable form appropriate to the organization operations and stakeholders</li> </ul>	
Improvements	<ul> <li>vements</li> <li>Improvements may:         <ul> <li>be to process, plant, procedures or practice</li> <li>include changes to ensure positive benefits to stakeholders are maintained</li> </ul> </li> </ul>	
Manager	<ul> <li>Manager may include:</li> <li>any person who may have either a permanent or an ad hoc role in facilitating the function of multiple teams in a workplace, departments or entire organizations</li> </ul>	

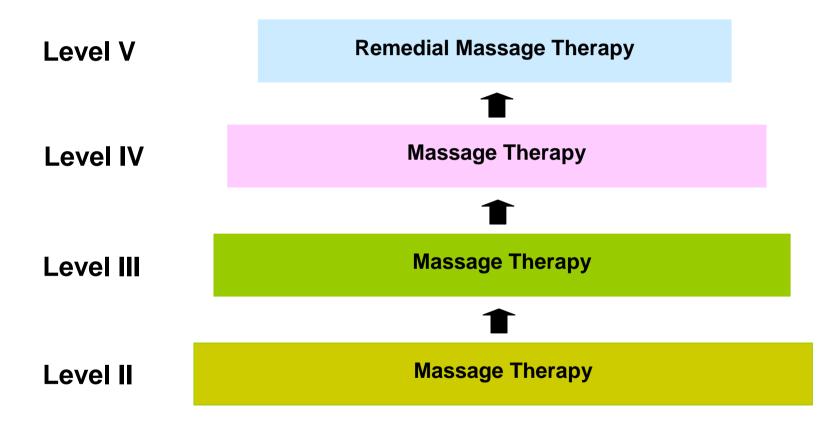
	Evidence C	Guide				
	Critical Asp Competenc		<ul> <li>A person who demonstrates competency in this unit must be able to provide evidence of the ability to:</li> <li>critically review current continuous improvement processes</li> <li>establish ongoing review of continuous improvement processes</li> <li>implement improvements in the practice of continuous improvement</li> <li>better align internal and external systems</li> <li>gather data through interviews with stakeholders</li> <li>review existing data</li> <li>obtain additional data through a variety of techniques</li> <li>communicate and negotiate at all levels within the organization</li> </ul>		ement processes provement f continuous olders techniques	
	Underpinning Knowledge and Attitudes		<ul> <li>Demonstrates knowledge of:</li> <li>competitive systems and practices tools, including:</li> <li>value stream mapping</li> <li>5S</li> </ul>			
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Underpinning Skills	<ul> <li>kaizen a</li> <li>setting o</li> <li>identifica</li> <li>continuo impleme whole or</li> <li>difference continuo</li> <li>organiza</li> <li>approval</li> <li>cost/ben</li> <li>methods</li> <li>advantag methods</li> <li>custome</li> <li>define, n (DMAIC)</li> </ul>	proofing	ng strategies for a nent and ure ange lication media, es and audiences
Underpinning Skills Underpinning Skills Demonstration undertaken making of nature a contexts communi- stream a numerad analyzin value str determine for captu collection from a va analyzin competiti and deter relating in practices solving here related to implement negotiati informat continuo		king self-directed problem solving a on issues of a broad and/or highly so nd in highly varied and/or highly so icating at all levels in the organizate and to audiences of different levels by g current state/situation of the orga- ream hing and implementing the most ap- uring value stream improvements g and interpreting data and qualitate ariety of sources g individually and collectively the in- tive systems and practices tools in ermining strategies for improved im mplementation and use of competi- s and continuous improvement to con- highly varied and highly specialized o competitive systems and practices intation and continuous improvement ing with stakeholders, where requir- ion required for implementation and us improvements, including manag- ream members, employees and me	specialized becialized tion and value of literacy and anization and propriate method tive information itive information plementation plementation tive systems and sustomer benefit problems es ent to root cause red, to obtain d refinement of gement, unions,
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	<ul> <li>reviewing relevant metrics, including all those measures which might be used to determine the performance of the improvement system, including:         <ul> <li>key performance indicators (KPIs) for existing processes</li> <li>quality statistics</li> <li>delivery timing and quantity statistics</li> <li>process/equipment reliability ('uptime')</li> <li>incident and non-conformance reports</li> <li>implementing continuous improvement to support systems and areas, including maintenance, office, training and human resources</li> </ul> </li> </ul>
Resources Implication	<ul> <li>Access may be required to:</li> <li>workplace procedures and plans relevant to work area</li> <li>specifications and documentation relating to planned, currently being implemented, or implemented changes to work processes and procedures relevant to the assessee</li> <li>documentation and information in relation to production, waste, overheads and hazard control/management</li> <li>reports from supervisors/managers</li> <li>case studies and scenarios to assess responses to contingencies</li> </ul>
Methods of Assessment	<ul> <li>Competence in this unit may be assessed by using a combination of the following to generate evidence:</li> <li>demonstration in the workplace</li> <li>suitable simulation</li> <li>oral or written questioning to assess knowledge of principles and techniques associated with change management</li> <li>In all cases it is expected that practical assessment will be combined with targeted questioning to assess underpinning knowledge</li> </ul>
Context of Assessment	Assessment of performance must be undertaken in a workplace using or implementing one or more competitive systems and practices.

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## Acknowledgement

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This occupational standard was developed on June 2011 at Adama, Ethiopia.

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