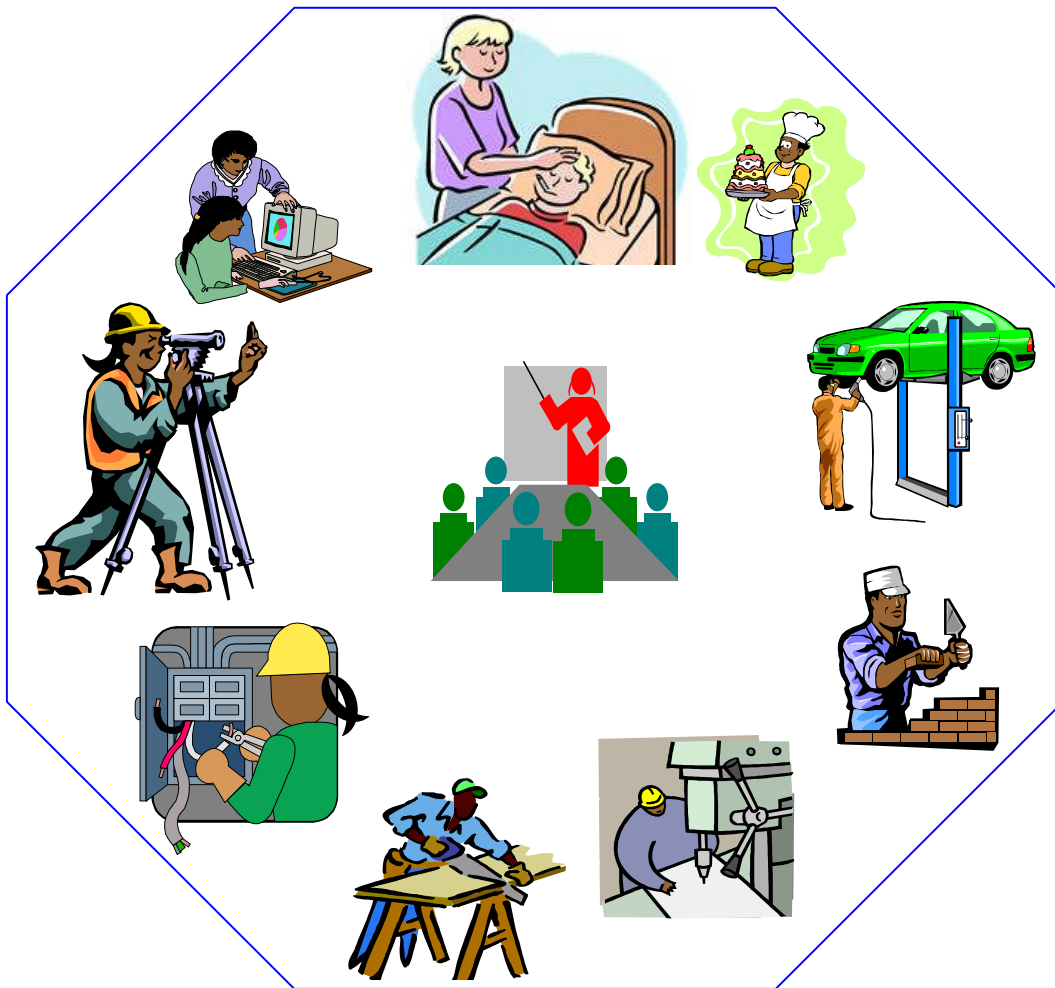**Federal Democratic Republic of Ethiopia**

OCCUPATIONAL STANDARD

GERIATRIC NURSING

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 Ethiopian 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

UNIT OF COMPETENCE CHART

Occupational Standard: Geriatric Nursing
Occupational Code: HLT GRN

NTQF Level V

HLT GRN5 01 0611 Plan, Monitor and Manage Geriatric Nursing	HLT GRN5 02 0611 Practice in the Contemporary Aged Care Environment	HLT GRN5 03 0611 Practice in the Domiciliary Health Care Environment
HLT GRN5 04 0611 Manage Clients and Other Experiencing Loss and Grief	**HLT GRN5 05 0611** Provide Nursing Care for Clients Requiring Palliative Care	**HLT GRN5 06 0611** Assess and Diagnose and Prescribe to the Scope
HLT GRN5 07 0611 Maintain an effective health work environment	**HLT GRN5 08 0611** Communicate in Complex or Difficult Situations	**HLT GRN5 09 0611** Develop and implement strategies to enhance client safety
HLT GRN5 10 0611 Implement and monitor compliance with legal and ethical requirements	**HLT GRN5 11 0611** Facilitate and Capitalize on Change and Innovation	**HLT GRN5 12 0611** Manage Quality Systems and Procedures
HLT GRN5 13 0611 Develop a Disaster Plan	**HLT GRN5 14 1012** Develop and Refine Systems for Continuous Improvement in Operations	

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Plan, Monitor and Manage Geriatric Nursing**
Unit Code	**HLT GRN5 01 0611**
Unit Descriptor	This unit describes the skills and knowledge required to plan, manage and monitor neonatal health care system

Elements	Performance Criteria
1. Develop plan for geriatric health program	1.1 A geriatric health program is planned as part of organizational health care system.
	1.2 **Strategic plans** are accessed and priorities/issues are identified for the program.
	1.3 Geriatric Nursing **priorities** are identified in consultation with the family or significant others.
	1.4 Work plan is prepared to address organizational and **client** priorities.
	1.5 Budget implications are identified and solicited funding to implement the **plan**
2. Manage the plan	2.1 Geriatric health care system is managed as per the guide line of the health sector.
	2.2 Geriatric care is given as per the standard.
	2.3 Adequate follow-up is implemented during management.
	2.4 Resources are utilized efficiently.
	2.5 Relevant existing resources are identified for implementation of the program
	2.6 Holistic and culturally sensitive health issues are ensured accordingly
3. Monitor the program	3.1 Ongoing geriatric health care systems are monitored and evaluated periodically as per the institutional guideline.
	3.2 Geriatric health care provision is ensured accordingly.
	3.3 Resource utilization is monitored as per the plan and organizational policy.
	3.4 Appropriate and corrective measures were taken to solve problems encountered.

Variables	Range
Resources may include:	- Health facility - Human - financial and physical - Required human resources are: - Neonatology - Nurses, - GP, - Geriatrtologists and others - Medical equipments - Pulsi oxymeter, - Cardiac monitor, - Oxygen source , - Oxygen mask, - Ambu bag, - Suction tube , - NG tube, etc. - Financial resource
Stake holder	Family ,significant other ,MOH, and other agencies working on geriatric health
Strategic plans may include:	- Health strategic or development plans - Government strategic plans - Organizational strategy plans
Holistically	Is health service which includes social cultural, spiritual, physical and others?
Client	- Elderly - Family
Plans may include	- Team/ individual plans - Operational plans - Sector plans - Annual plans - Other planning documents

Evidence Guide	
Critical Aspects of Competence	Critical aspects for assessment and evidence required to demonstrate: - Develop plan for geriatric health program - Manage the plan - Monitor the program

Underpinning Knowledge and Attitudes	Essential knowledge includes: • Principles of planning and monitoring geriatric heath care system, including risk assessment • Leadership in geriatric nursing • Relevant organizational policy and guideline development components and principles. • Techniques in developing plan of action. • Theories, principles and concepts of geriatric nursing • Client networking, financing, cost estimation and planning process • Local client Health Plans
Underpinning Skills	Essential skills includes: • Communication skill • Basic geriatric nursing skills • Research skill • geriatric equipments operation skill (cardiac monitor, etc) • Problem solving skills
Resource Implications	Access to equipment and resources and space
Methods of Assessment	Competence may be assessed through: • Interview/Written Test • Observation/Demonstration with Oral Questioning
Context of Assessment	• Competence may be assessed in the work place or in a simulated work place setting • This unit should be assessed with other frontline management units taken as part of this qualification and as applicable to the candidate's leadership role in a work teams

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Practice in the Contemporary Aged Care Environment**
Unit Code	**HLT GRN5 02 0611**
Unit Descriptor	This competency unit describes the skills and knowledge required to implement principles of aged care nursing, enabling the enrolled nurse to provide holistic nursing care to aged clients at an advanced level.

Elements	Performance Criteria
1. Address the health care needs of the elderly in the health care environment	1.1 Physical and psychological effects of aging on the human body are understood and managed accordingly. 1.2 The physical and psychosocial factors are assessed and evaluated in health of elderly clients. 1.3 Funding arrangements for aged care and extended care environment are applied. 1.4 Documentation requirements are addressed to assist the funding that has *impacts on the aged care* provision. 1.5 Crisis situations are recognized and emergency management is implemented as required. 1.6 Physically and psychologically safe environment for the older client is provided. 1.7 Older person experiencing sensory loss is communicated effectively.
2. Assess health care needs of older clients	2.1 A holistic assessment of the client in consultation/ collaboration with the authorized health personnel is performed. 2.2 In-depth understanding of anatomy, physiology and patho-physiology are incorporated into geriatric nursing practice as applied to the ageing process and clinical manifestations of ageing. 2.3 The physical and psychosocial impact of ageing on the clients' activities of daily living is discussed. 2.4 Common problems and complications that may encounter in the client are identified. 2.5 Clients, family and health team members are communicated effectively.
3. Contribute to plan appropriate care for the older client	3.1 Contemporary assessment tools are used accurately. 3.2 A database of resource personnel to assist in decision making for the older client is established. 3.3 Problem-solving framework is used to plan appropriate nursing management strategies in consultation/collaboration with the authorized health

	personnel.
	3.4 An individualized plan of care is developed for the older client in consultation/collaboration with the client and the health care team.
	3.5 The care plan is designed to reflect the clients' current nursing need to maximize the older client's function and minimize potential complications.
	3.6 Understanding of risk management principles in planning client care is applied.
	3.7 Planned care and therapeutic interventions aim to assist client/s to achieve optimal health outcomes are ensured.
	3.8 Plan of care are reviewed regularly and modified to reflect changes in the condition of older client.
	3.9 Aged care client needs requiring research are identified to improve nursing practice.
	3.10 Evidence based practice to the care of clients is implemented.
4. Assist to perform clinical nursing skills that are appropriate to the management of the older client	4.1 *Nursing interventions are* prioritized according to client's need.
	4.2 Nursing interventions are modified using critical thinking and problem solving approaches to reflect changes in the client's condition.
	4.3 Nursing interventions are updated to assist client, and identified significant others to meet the expected outcomes, including health promotion and/or education.
	4.4 The nursing interventions those failed to address the client needs are monitored and reviewed in consultation/collaboration with the health care team.
	4.5 Appropriate pre-, intra- and post-diagnostic procedures are undertaken in line with the organizational policies and procedures.
	4.6 Medications are administered based on sound knowledge of principles of drug actions and side effects in accordance with the health unit policies and procedures.
	4.7 Rehabilitation principles that underpin appropriate nursing interventions for the older client are ensured as required.
5. Assess the needs of clients experiencing loss and grief	5.1 The effects of grief on the physical, emotional, cognitive, behavioral, social and spiritual domains of a person's experience are understood.
	5.2 Client's knowledge of their condition, self management and therapies is reviewed.
	5.3 Determinants impacting or potentially impacting on the client's experience of grief and on identified significant other/s are recognized.
	5.4 The potential or actual manifestations of a complicated grief reaction are recognized.
	5.5 The significant other's knowledge of the client's condition, management and therapies is reviewed.

	5.6 Counseling skills are used to encourage clients and/or significant other/s to verbalize grief experience.
	5.7 Client and/or significant others experiencing loss and grief are supported.
	5.8 Effective communication skill is used to break adverse news or assist a health care team member and/or significant other/s.
6. Provide support for peers and colleagues	6.1 The symptoms of stress and professional career which burnout in peers and colleagues are recognized.
	6.2 Appropriate support, safety and welfare measures for peers and colleagues are implemented.

Variables	Range
Multidisciplinary health care team members could include:	• Aged care client and their significant others • Medical and nursing staff • Social workers • Physiotherapists • Occupational therapists • Speech pathologists • Dietician • Podiatrists • Community services • Transitional rehabilitation services
Health care settings could include:	• Residential aged care facilities • Extended care settings • Hospital – private or public • Short stay centres • Respite centres • Community • Day Centres
Assessment of impact of ageing process may include:	• Performance of activities of daily living • Loss or limitation to physical function • Impact on sexuality, relationships, self image, body image • Grief and loss • Coping mechanisms • Personal and community support mechanisms • Level of communication • Maintenance/improvement of quality of life • Maintenance/improvement of lifestyle • Impact of secondary disease processes
Age related adjustments and transitions could include:	• Role changes • Retirement • Multiple losses • Loneliness • Depression and suicide

	• Fear of death • Changes in body image
Disease processes include:	• Alterations in sensory function • Alterations in cardiac function • Alterations in respiratory function • Alterations in neurological function • Alterations in musculoskeletal function • Alteration in genitourinary function • Alteration in endocrine Function • Alteration in renal function • Oncological disorders • Pressure ulcers
Plans of care may include:	• Nursing care plans • Clinical pathways • Treatment plans • Medical notes • Community referrals • Admission and transfer • Rehabilitation plans
Legal and ethical issues include:	• Rights and responsibilities of older person • Consent • Power of attorney • Medical Power of attorney • Advocacy • Elder abuse • Restraint • Advanced health directives • Ethical principles • Legislation affecting older person • Research and the older person
Specific nursing interventions/clinical skills could include:	• Foundation nursing interventions • Complex nursing interventions • Management of elimination (urinary and bowel) needs including – insertion of indwelling catheters, irrigation of indwelling catheters • Management of permanent and temporary mechanical ventilation including suctioning and bagging • Wound care • Skin care including – assessment and management of skin care • Health teaching in relation to client care needs • Pain management • Manual handling • Coordination of clinical care • Assessment of oxygen saturation levels • Rehabilitative care practices
Evaluation of	• Level of independence in performance of activities of daily

planned care includes:	living • Participation in rehabilitation programs • Self management of symptoms

Evidence Guide	
Critical Aspects of Competence	A person who demonstrates competence in this standard must be able to provide evidence that they are able to: • Address the health care needs of the elderly in the health care environment • Asses health care needs of older client • Contribute to planning appropriate care for the older client • Assist to perform clinical nursing skills appropriate to the management of the older client • Assess the needs of clients experiencing loss and grief Provide support for peers and colleagues
Underpinning Knowledge and Attitudes	• Specialized in-depth knowledge of anatomy, physiology and pathophysiology of chronic disease • Specialized knowledge of clinical manifestations of chronic disease states • Specialized knowledge and execution relating to emergency care of older clients • Principles of health assessment • Health – illness continuum • Legislation related to aged care and extended care practice, including: • Aged Care Act and criteria for admission to aged care facilities • workplace health and safety legislation • Legal standards for practice • Philosophy underpinning aged care and extended care management • Philosophy of loss and grief • Medical terminology • Organization policy and procedure • Research strategies and methodologies • Reflective practice • Critical thinking and problem solving • Evidence based practice • Participating as a member of the health care team • Factors influencing growth and development • Factors influencing self esteem • Culturally appropriate health promotion activities for clients with respiratory problems • Cultural and spiritual beliefs and practices

	• Client rights and responsibilities • Participating as a member of the health care team • Diagnostic tests and their meanings • Emergency and first aid management • Admission and transfer to acute care environments

Underpinning Skills	Ability to:
	• Use appropriate communication skills (non-verbal, openness, sensitivity, nonjudgmental attitudes):
	    ➢ Oral communication skills (language competence) required to fulfill job roles as specified by the organization/service, including interviewing techniques, asking questions, active listening, asking for clarification
	    ➢ Written communication skills (literacy competence) required to fulfill job roles as specified by organization/service, ranging from reading and understanding client documentation to completion of written reports
	• Use interpersonal skills to work with others, use sensitivity when dealing with people and relate to persons from differing cultural, social and religious backgrounds
	• Demonstrate accountability for personal outputs and broad client group outcomes
	• Apply clinical nursing skills, including:
	  fundamental and complex nursing interventions
	    ➢ Acute care of aged care client
	    ➢ Physical assessment
	    ➢ Neurological function
	    ➢ Specimen collection
	    ➢ Medication administration as per jurisdictional and legal requirements
	    ➢ Emergency medications
	    ➢ Chest pain assessment and management
	    ➢ Addressing pressure area care needs
	    ➢ Addressing pain management needs
	• Assessment, observation and documentation of
	    ➢ Neurovascular observations
	    ➢ Blood glucose monitoring
	    ➢ Pain scale or analogue observations
	    ➢ Nutritional status and hydration
	    ➢ Respiratory function
	    ➢ Skin integrity recognized and addressed
	    ➢ Needs of client and significant others in relation to grief and loss
	    ➢ Religious and cultural needs of client and significant others
	• Maintain effective symptom management
	• Apply principles of documentation to document planned nursing interventions

	- Apply principles of rehabilitation - Maintain evidence based practice in line with current literature and work of professional bodies associated with aged care clients - Apply professional standards of practice: - ENA code of conduct and ethics - Ethiopian enrolled nurse competency standards - Sate/territory Nurse Regulatory Nurses Act - State/territory Nursing and Midwifery Regulatory Authority standards of practice - Scope of Nursing Practice Decision Making Framework
Resource Implications	Where, for reasons of safety, access to equipment and resources and space, assessment takes place away from the workplace, simulations should be used to represent workplace conditions as closely as possible.
Methods of Assessment	Competence may be assessed through: - Interview/Written Test - Observation/Demonstration with Oral Questioning
Context of Assessment	- Competence may be assessed in the work place or in a simulated work place setting - This unit should be assessed with other frontline management units taken as part of this qualification and as applicable to the candidate's leadership role in a work teams

Occupational Standard: Geriatric Nursing Level V	
Unit Title	Practice in the Domiciliary Health Care Environment
Unit Code	**HLT GRN5 03 0611**
Unit Descriptor	This competency unit describes the skills and knowledge required by the enrolled nurses to perform nursing interventions to assist clients in a domiciliary health care environment.

Element	Performance Criteria
1.Work as part of the *multidisciplinary health care team* in the *domiciliary health care* environment	1.1 Appropriate support to the role of the multi-disciplinary health care team in managing care needs of clients in the domiciliary health care environment is contributed. 1.2 Effective team work and supportive group dynamics are contributed and achieved when working with health care colleagues. 1.3 Appropriate relationships with other member of the health care team are established. 1.4 The philosophical framework for managing care for the client in the domiciliary health care environment is incorporated into practice. 1.5 The role of emergency service personnel, referring agencies and other hospital department staff as contributors to the initial/emergency care needs of the client in the domiciliary health care environment is recognized.
2. Recognize the impact of a health problem on the client in the domiciliary healthcare environment	2.1 The clinical manifestations of health problems affecting the client requiring domiciliary health care are recognized. 2.2 Information gained from assessment of the client with the appropriate members of the health care team is discussed. 2.3 The physical, psychological and social impacts of a health problem on the activities of daily living for the client requiring domiciliary health care with the client and/or their family are discussed with client consent. 2.4 Actual or potential problems of the client requiring domiciliary health care are identified in consultation/collaboration with the authorized health personnel. 2.5 A problem solving approach is used to assess the impact of health problems on client requiring domiciliary health care in achieving activities of daily living in consultation/collaboration with the authorized health personnel.
3. Contribute to planning care for the client requiring domiciliary health care	3.1 Clinical data is gathered and recorded according to the organizational policy for inclusion in a plan of care. 3.2 Information and data on the activities of daily living for the client requiring domiciliary health care are contributed. 3.3 Changes in client's condition are accurately gathered,

	documented and reported to the appropriate health care team members.
	3.4 Health teaching plans for the client in the domiciliary health care environment are contributed to and supported.
4. Perform *nursing interventions* that support client's health care needs	4.1 Nursing interventions are done based on the predetermined plans of care.
	4.2 Nursing interventions are ensured to reflect client's needs and individuality.
	4.3 Nursing interventions are ensured to perform with dignity, privacy and respect for the client
	4.4 Consideration of cultural and religious issues in performing nursing interventions is reflected.
	4.5 The client and/or their family are encouraged to assist with the nursing interventions as appropriate.
	4.6 The physical, psychological and social needs are considered in performing nursing interventions.
	4.7 Nursing interventions are used to assist the client to meet their activities of daily living.
	4.8 Nursing interventions are identified and prioritized according to the client needs.
	4.9 Gender and age issues are considered in performing nursing interventions.
	4.10 Nursing interventions are implemented in accordance with the legal, professional, ethical and organizational requirements.
	4.11 Emergency situations are recognized and acted upon according to the organizational policy and procedure and within the legal and professional requirements.
	4.12 Health teaching plans for the client in the domiciliary health care environment are contributed and supported.
5. Assist to *evaluate the outcomes* of planned domiciliary health care	5.1 Client response to nursing interventions and progress toward planned goals are monitored, documented and reported to the appropriate members of the health care team
	5.2 Appropriate first aid/emergency treatment in response to adverse reactions or complications is initiated.
	5.3 First aid/emergency treatment and client response to the treatment are documented and reported.

Variables	Range
Multi-disciplinary health care team members could include:	• Client and their significant others • Medical staff • Nursing staff • Social workers • Physiotherapists • Occupational therapists • Speech pathologists

	• Dietician • Prosthetics • Podiatrists • Drug and alcohol services • Emergency Services • Community services • Transitional rehabilitation services
Domiciliary health care settings could include:	• Day clinic • Long stay centers • Short stay centers • Medical clinic • Attached to residential aged care facilities • Respite centers • Community centers • Schools • Client's home or workplace • Supported Residential Services (SRS)
Plans of care could include:	• Nursing care plans • Discharge plans • Medical notes • Treatment plans • Manual and electronic storage systems
Evaluation of planned care Includes:	• Level of independence in performance of activities of daily living • Access and use of community support services • Participation in rehabilitation programs • Monitoring of clients response to procedures • Clarification of clients understanding of health teaching, discharge planning or return appointment schedule • Clients understanding of health care needs and treatment • Regimes
Specific nursing interventions/clinical skills include:	• Wound care • Skin care including – assessment and management of skin care • Health teaching in relation to client care needs • Pain management • Removal of sutures/staples (as ordered) • Manual handling • Use of mobility aids • Assistance with meeting activities of daily living • Coordination of clinical care • Rehabilitative care practices • Emergency resuscitation skills

Evidence Guide

Critical Aspects of Competence	This unit describes the essential skills and knowledge and their required to:
	• Work as part of the multidisciplinary health care team in the domiciliary health care environment
	• Recognize the impact of a health problem on the client in the domiciliary healthcare environment
	• Contribute to planning care for the client requiring domiciliary health care
	• Perform nursing interventions that support client health care needs
	• Assist to evaluate the outcomes of planned domiciliary health care
Underpinning Knowledge And Attitudes	*Essential knowledge:*
	• Specialized in-depth knowledge of anatomy and physiology and pathophysiology of clinical manifestations
	• Clinical manifestations of a diverse range of health conditions
	• Philosophy underpinning of domiciliary health care
	• Confidentiality and privacy
	• Organizational policy and procedure
	• Workplace Health and Safety legislation
	• Legal and ethical issues related to practice
	• Health – illness continuum
	• Client rights and responsibilities
	• Infection control
	• Principles of documentation
	• Participating as a member of the health care team
	• Age specific requirements erg children, young adult, older adult.
	• Medical terminology
	• Diagnostic tests and their meanings
	• Advocacy
	• Nursing management of the client with a diverse range of health conditions
	• Reflective practice
	• Evidence based practice
	• Critical thinking and problem solving
	• Emergency and first aid management of condition/injuries
	• Literature and professional bodies associated with domiciliary health care management
	• Community and in-hospital services available for medical condition clients
Underpinning Skills	Essential Skills ability to:
	• Use language, literacy and numeracy competence required to communicate effectively with client, group, colleagues and to record or report client outcomes
	• Apply principles of health assessment

	- Apply principles of documentation to document planned nursing interventions - Facilitate activities of daily living Use communication skills for: - Interviewing - Counseling - Recognized and address needs of client and significant others in relation to grief and loss - Manage administration of medications as per jurisdictional and legal requirements - Apply clinical nursing skills to address pain management needs - Maintain effective symptom management - Use prosthetic aids and devices appropriately - Undertake health teaching and health promotion to address specific needs of client and significant others - Undertake fundamental and complex clinical nursing interventions Apply professional standards of practice: - ENA code of conduct and ethics - National enrolled nurse competency standards - State/territory Nurse Regulatory Nurses Act - State/territory Nursing and Midwifery Regulatory Authority Standards of practice - Scope of nursing practice decision making framework
Resource Requirements	Where, for reasons of safety, access to equipment and resources and space, assessment takes place away from the workplace, simulations should be used to represent workplace conditions as closely as possible.
Method of Assessment	Competence may be assessed through: - Interview / Written Test - Demonstration / Observation with Oral Questioning
Context of Assessment	Assessment may occur on the job or in a workplace simulated facility with process equipment, materials and work instructions

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Manage Clients and Others Experiencing Loss and Grief**
Unit Code	**HLT GRN5 04 0611**
Unit Descriptor	This competency unit describes the skills and knowledge required by the Enrolled Nurses to address requirements of an extended role in the assessment and management of clients and their significant others experiencing loss and grief This unit emphasizes the importance of recognizing and managing personal, workplace and professional stress of self and colleagues in caring for those experiencing loss and grief.

Element	Performance Criteria
1. Assess the needs of those experiencing loss and grief	1.1 The effects of grief on the physical, emotional, cognitive, behavioral, social and spiritual domains of a person's experience are identified.
	1.2 Knowledge of client and their significant others in relation to the *client's* condition, management requirements and therapies are reviewed.
	1.3 Determinants impacting or potentially impacting on the experience of grief of the client and their significant others are determined.
	1.4 Potential or actual manifestations of a complicated grief reaction are recognized.
	1.5 Needs of client and significant others experiencing loss and grief in consultation/ collaboration with the authorized health personnel and health care team are assessed.
2 Plan management of clients and significant others experiencing loss and grief	2.1 A reflective, problem solving approach is used to analyze the assessment of grief status of client and significant others.
	2.2 An individualized plan is developed to provide ongoing care, support and education to the client and/or significant others within the health care facility and on discharge in consultation/collaboration with authorized health personnel and health care team.
	2.3 According to client's progress in consultation/collaboration with the authorized health personnel and health care team Training Package on care plan is analyzed, evaluated and modified.

3.	Implement strategies to manage the grief of clients and significant others	3.1	Counseling skills are used to encourage clients and/or significant others to verbalize grief experience.
		3.2	Client and/or significant others experiencing loss and grief are supported.
		3.3	Specific communication skills are used in the event of having to break adverse news or assist a health care team member to break adverse news to a client and/or significant others.
		3.4	Critical incident strategies are implemented in the event of a crisis situation.
		3.5	Support, safety and welfare measures in the event of a complicated grief reaction are implemented.
		3.6	Relevant additional resources related to loss and grief are identified and accessed as required.
		3.7	Available resources with client and/or significant others are discussed.
4.	Develop and implement strategies to manage own stress	4.1	Specific personal and workplace stressors are identified within the context of the nursing profession.
		4.2	Physical, behavioral, interpersonal and attitudinal symptoms of professional career burnout are recognized and responded appropriately
		4.3	To relieve stress and prevent professional career burnout routine relevant resources/activities are identified, accessed and incorporated.
5.	Provide support for peers and colleagues	5.1	Symptoms of stress and professional career burnout in peers and colleagues are recognized.
		5.2	Appropriate support, safety and welfare measures for peers and colleagues Health Training Package are implemented.

Variables	Range
Clients may include:	• Elderly • Professional colleagues • Client family members • Client friends • Client careers • Professional peers and colleagues

Age and gender	• Maturation and psychological development

considerations could include:	• Self esteem • Gender specific coping strategies
Health care settings may include :	• Acute • Chronic • Rehabilitation • Aged care • Respite • Mental health • Community • Clinic • Prison
Health considerations could include:	• Physical health • Psychological health
Cultural considerations could include:	• Religious beliefs • Cultural beliefs and practices (including non ethnic definitions of culture) • Views on loss and grief • Culturally appropriate nursing actions • Need for interpreter/support services

Evidence Guide	
Critical Aspects of Competence	This unit describes the essential skills and knowledge required to: • Assess the needs of those experiencing loss and grief • Plan management of clients and significant others experiencing loss and grief • Implement strategies to manage the grief of clients and significant others • Develop and implement strategies to manage own stress • Provide support for peers and colleagues
Underpinning Knowledge and Attitudes	Essential knowledge required includes: • How to assess the needs of those experiencing loss and grief • Models of grief management • Stress management • Management of clients and significant others experiencing loss and grief • Strategies to manage the grief of clients and significant others • Strategies to manage own stress
Underpinning Skills	• Apply knowledge of various models of grief in practice

	- Respond appropriately to a range of clients in a range of loss and grief contexts - Assess a client at risk of a complicated grief reaction - Formulate a strategy to care for the safety of a client at risk of a complicated grief reaction - Formulate strategies for communicating with and caring for clients experiencing grief - Formulate strategies to reduce occupational stress - Locate and utilize resources related to loss and grief - Work as an effective member of a multi-disciplinary team - Apply advanced communication skills - Apply counseling skills - Work within a reflective practice and problem solving framework Apply professional standards of practice: - ENA code of conduct and ethics - National enrolled nurse competency standards - State/territory Nurse Regulatory Nurses Act - State/territory Nursing and Midwifery Regulatory Authority standards of practice - Scope of nursing practice decision making framework
Resource Requirements	Resource implications may include: - Access to appropriate workplace or simulation of realistic workplace setting where assessment can be conducted - Access to equipment and resources normally used in the workplace
Method of Assessment	Competence may be assessed through: - Interview / Written Test - Demonstration / Observation with Oral Questioning
Context of Assessment	- Assessment May occur on the job or in a workplace simulated facility with process equipment, materials and work instructions. - Evidence must include observation of performance in the work environment or in a simulated work setting.

Occupational Standard: Geriatric Nursing Level V	
Unit Title	Provide Nursing Care for Clients Requiring Palliative Care
Unit Code	**HLT GRN5 05 0611**
Unit Descriptor	This unit of competency describes the skills and knowledge required in providing palliative care clients with life-limiting illness and their family.

Elements	Performance Criteria
1. Recognize the special needs of clients requiring a *palliative approach* to care	1.1 A holistic assessment of the client is undertaken in consultation/collaboration with the registered nurse. 1.2 The principles of *palliative care* and the palliative approach are applied. 1.3 Work with knowledge of pathophysiological changes associated with a life-limiting illness and an understanding of the needs of clients with such an illness. 1.4 The impact of life-limiting illness on their activities of daily living is discussed with the client/family career. 1.5 An understanding of the physiology of dying is used to support clients and family as they experience the dying process. 1.6 Clients' needs are ascertained and respected in relation to lifestyle, social context, emotional and spiritual choices, and document these in line with the care plan. 1.7 The client career his/her family and/or significant other are supported to ensure their freedom to discuss spiritual and cultural issues in an open and nonjudgmental way within scope of their own practice and responsibilities. 1.8 An awareness of psychosocial impact of palliative care is created on a client's family and significant others.
2. Contribute to the care plan for the client at the end-of-life	2.1 An individualized care plan is developed in consultation/collaboration with a registered nurse. 2.2 Work in consultation/collaboration with other members of the health care team in providing care. 2.3 Emotional support is provided to client and family through effective communication. 2.4 The legal and ethical implications of implementing advanced care directives are addressed. 2.5 Changes are monitored to the *advanced care directives* as they are reviewed regularly by appropriate staff member and support the implementation of these changes.
3.Implement nursing interventions for *clients* with life-limiting illness	3.1 Care is provided according to the developed care plan, documenting and reporting any changes. 3.2 Nursing interventions are performed to manage the activities of daily living or complications of life-limiting

	illness in consultation/collaboration with a registered nurse.
	3.3 A supportive environment is provided to the client, family, career and those involved in end-of-life care.
	3.4 Information that is accurate, timely and respects the wishes of client and/or family is provided.
	3.5 Observations of pain and other discomforts are documented and promptly reported to the appropriate member of staff.
	3.6 The dignity of the client is supported in undertaking all activities at the end-of-life as well as after death.
	3.7 Any signs of deterioration or imminent death are identified and reported to the appropriate member of the staff in line with the health care guidelines.
4. Assist in evaluating the effectiveness of planned interventions	4.1 Nursing interventions are modified to suit client responses in consultation/collaboration with the registered nurse.
	4.2 Client responses of nursing interventions are monitored and documented.
	4.3 The effectiveness of the implemented strategies that address client's needs is evaluated, documented and reported.
	4.4 Any ethical issues or concerns are reflected and discussed with the appropriate person if necessary.
5. Provide support and services to client and family at the end of-life and after death	5.1 Resources available for self, client, family requiring bereavement care are identified, accessed and/or discussed.
	5.2 Grieving family is referred to the appropriate counseling resources as required
	5.3 Care of the body is undertaken with dignity and respect by taking into account the individual's customs, culture, religion, spiritual practices and choices of clients.

Variables	Range
Palliative approach aims to:	• Improve the quality of life for individuals with a life-limiting illness and their families, by reducing their suffering through early identification, assessment and treatment of pain, physical, psychological, social, and spiritual problems. A palliative approach is not delayed until the end stages of an illness. Instead a palliative approach provides a focus on active comfort care and a positive approach to reducing an individual's symptoms and distress, which facilitates residents and their families understanding that they are being actively supported through this process. Underlying the philosophy of a palliative approach is a positive and open attitude towards death and dying.
Palliative care means	• An approach that improves the quality of life of clients and their families facing the problem associated with a life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable

	assessment and treatment of pain and other problems physical, psychological and spiritual (WHO 2002)
Advanced care planning refers to:	• The process of preparing for likely scenarios near end of life and usually includes assessment of, and dialogue about a person's understanding of their medical history and condition, values, preferences and personal and family resources. Advanced care planning elements are the written directive and an appointment of a substitute decision maker. Access through state and territory legislation or guidelines on advanced care planning
Advanced care directive:	• Is sometimes called a 'living will' and describes one's future preferences for medical treatment. It contains instructions that consent to, or refuse, the future use of specified medical treatments. It becomes effective in situations where the client no longer has capacity to make legal decisions. Access through state and territory legislation or guidelines on advanced care planning. Completion of an advance care directive should be one component of the broader advance care planning process. Documenting advanced care directives is not compulsory as the person may choose to verbally communicate their wishes to the doctor or family, or appoint a substitute decision maker to make decisions on their behalf. Examples of advance care directives are: ➢ Medical treatment preference, including those influenced by religious or other values and beliefs'. ➢ Particular conditions or states that the person would find unacceptable should these be the likely result of applying life-sustaining treatment, for example severe brain injury with no capacity to communicate or self-care. ➢ How far treatment should go when the client's condition is 'terminal', 'incurable' or 'irreversible' (depending on terminology used in specific forms). ➢ The wishes of someone without relatives to act as their 'person responsible' in the event they became incompetent or where there is no one that person would want to make such decisions on their behalf.
Legal implications of advanced care directive:	• A nominated substitute decision maker that the treating clinician may seek out to discuss treatment decisions • Other non-medical aspects of care that is important to the person during their dying phase • Access through state and territory legislation or guidelines on advanced care directives
End–of-life ethical decisions may include:	• Ongoing discussion with the client, family, doctor, guardian and organization to ensure that the client's and/or family's wishes are up-to-date.

Client's lifestyle choices may include:	• Personal supports and relationships • Social activities • Emotional supports • Cultural and spiritual supports • Sexuality and Intimacy supports
Life limiting illness describes	• Illnesses where it is expected that death will be a direct consequence of the specified illness. This definition is inclusive of both a malignant and non-malignant illness. Life limiting illnesses might be expected to shorten an individual's life expectancy
Client:	• May also refer to resident or client throughout this document.
Ethical issues may include:	• Decisions regarding medical treatment • Conflict that may occur in relation to personal values and decisions made by or for the client
Health promotion strategies may include:	• School topics — personal and sexual health, nutrition drugs, mental health • Community outreach — breast feeding mothers • Mass media — advertising campaigns • Social marketing • Immunization • Public education • Genetic counseling • Screening
Client education strategies may include:	• Discussions about relevant issues regarding health • One-on-one guidance/supervision • Small groups • Demonstrations • Referrals to appropriate health professional • Contact with self-help group
Risk factors may include:	• Alcohol and substance abuse • Drug abuse • Stress • High blood pressure • Smoking • Obesity • Poor nutrition • Elimination problems • Lack of exercise • Interpersonal conflict • Loneliness • Poor sleep

Evidence Guide

Critical Aspects of Competence	A person who demonstrates competence in this standard must be able to: • Recognize the special needs of clients requiring a *palliative approach* to care • Contribute to the care plan for the client at end-of-life • Implement nursing interventions for *clients* with life limiting illness • Assist in evaluating the effectiveness of planned interventions • Provide support and services to client and family at end of life and after death

Underpinning Knowledge and Attitudes	*Essential knowledge include:*
	 • Relevant policies, protocols and practices of the organization in relation to the provision of palliative care
	 • Understanding of pathophysiological process
	 • Effects of life-limiting illnesses on the activities of daily living
	 • Equipment used in the assessment, planning, implementation and evaluation of client needs and activities of daily living
	 • Relevant resources available to those requiring bereavement support
	 • The palliative approach to care of clients and their family
	 • Diverse cultural, religious and spiritual factors underpinning client choices at end of life
	 • Own role and responsibilities, and those of other team members involved in delivery of palliative care
	 • Impact of loss and grief on clients, family, careers and staff members
	 • State and Territory legislation on advanced care planning and advanced care directives
	 • Ethical and legal issues related to a palliative care approach
	 • Basic information about the use of pain relieving medication for staff, client and their family and within level of responsibility
	 • Hydration and nutrition requirements during palliative care and at end-of-life
	 • Various signs of imminent death/deterioration of human anatomy and physiology in relation to:
	    ➢ Nursing interventions
	    ➢ Complex nursing interventions
	    ➢ Clinical nursing skills and symptom management
	    ➢ Working within a reflective practice framework
	    ➢ End of life care
	    ➢ Grief/loss for family and client and grief counseling
	    ➢ Social and community support systems

	➢ Self care and self reflection ➢ Personal coping strategies and values and attitudes ➢ Loss of personal life goals ➢ Regulations and legislation ➢ Advanced care directives ➢ Organ donation ➢ Request for autopsy ➢ Customs, religious, cultural and spiritual beliefs

Underpinning Skills	*Essential skills include* ability to:
	• Use oral communication skills (language competence) required to fulfill job roles as specified by the organization/service. Oral communication skills include interviewing techniques, asking questions, active listening, asking for clarification
	• Use written communication skills (literacy competence) required to fulfill job roles as specified by organization/service. The level of skill may range from reading and understanding client documentation to completion of written reports
	• Use interpersonal skills, including working with others, using sensitivity when dealing with people and relating to persons from differing cultural, social and religious backgrounds
	• Perform nursing interventions, including:
	  ➢ Assessment, observation, reporting and recording of pain
	  ➢ Observation of, reporting and reporting and recording of pain management strategies
	  ➢ Assessment, observation, reporting and recording of symptoms
	  ➢ Observation of, reporting and reporting and recording of symptom management strategies
	  ➢ Non-medication management of pain symptoms
	  ➢ Hot towels sponging
	  ➢ Basic hand, foot and back massage
	  ➢ Basic complementary therapies
	  ➢ Bowel management in opioid induced constipation
	  ➢ Wound care modalities particular to the terminally ill client
	  ➢ Pressure area care modalities particular to the terminally ill client
	  ➢ Management of the dying client and their families/careers
	• Apply professional standards of practice:
	  ➢ ENA code of conduct and ethics
	  ➢ National enrolled nurse competency standards
	  ➢ State/territory Nurse Regulatory Nurses Act
	  ➢ State/territory Nursing and Midwifery Regulatory Authority standards of practice

	➤ State/territory legislation regarding 'Consent to medical treatment and palliative care Act ➤ Scope of nursing practice decision making framework
Resource Implications	• Where, for reasons of safety, access to equipment and resources and space, assessment takes place away from the workplace, simulations should be used to represent workplace conditions as closely as • Possible, prior to assessment in the workplace
Methods of Assessment	Competence may be assessed through: • Interview/Written Test • Observation/Demonstration with Oral Questioning
Context of Assessment	• Competence may be assessed in the work place or in a simulated work place setting • This unit should be assessed with other frontline management units taken as part of this qualification and as applicable to the candidate's leadership role in a work teams

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Assess, Diagnose and Prescribe to the Scope**
Unit Code	**HLT GRN5 06 0611**
Unit Descriptor	This unit addresses the geriatric nurse to assess diagnose and prescribe to the scope.

Elements	Performance Criteria
1. Assess the patient	1.1 Health status of elderly is assessed based on the protocols.
	1.2 Appropriate instruments were used during the assessment.
	1.3 Appropriate skills and methods of assessment of the elderly are used.
	1.4 Risk factor and magnitude of the problem are identified.
	1.5 ***Social and environmental*** *factors* were considered during assessment.
2. Diagnose the patient	2.1 ***Common elderly*** health problems are diagnosed as per the guideline.
	2.2 ***Cases are referred*** to others /senior health care professionals as required
3. Prescribe medication to the scope	3.1 Appropriate treatment / medications are selected for the identified cases.
	3.2 ***Medications*** /treatment are selected based on the environmental, social and cultural aspects
	3.3 Proper handling, usage and storage of the prescribed medications are adequately explained
	3.4 The patient's families are explained when to return back for follow up.

Variables	Range
Common elderly health problems include:	• Visual ,hearing, and mobility impairment • Musculoskeletal disorders • Nutritional problem • Psychosocial problem • Self care deficiency etc
Cases to be referred may include:	• Elderly in critical condition • Elderly who require further assessments and management

	• Elderly whose case is beyond the scope of the health care provider within the facility
Equipments and materials	• Stethoscope • Wheelchair • Crunch • Visual aids • Hearing aids • Indoor games • Occupational therapy aids • Physical support equipments • Spatula • Coaches • Torch • Thermometer • B/P apparatus • Scale • Meter • NG tube • Nasal catheter • Butterfly needle • Suction tube • Medication cup • Specimen collection equipment as required • Others
Social and environmental factors are:	• Culture • Socio-economic status • Physical environment • Others
Medications	• Tetracycline eye ointment 1% • Antibiotics • Diuretics • Antihypertensive • Antideabetics • Nutritional supplements • IV fluids • Antipyretics • Others

Evidence Guide	
Critical Aspects of Competence	A person who demonstrates competence in this standard must be able to provide evidence that they are able to • Assess the patient • Diagnose the patient • Prescribe medication to the scope

Underpinning Knowledge and Attitudes	Essential knowledge must include:
	• Body organization and function of elderly
	• History taking and physical examination of elderly
	• Common health problems of elderly
	• Pharmacology relevant to gerontology
	• Nursing diagnosis relevant to gerontology
	• Relevant medical/medication terminology and approved medication abbreviations used in gerontology
	• Organization policies and procedures, guidelines and protocols, including workplace health and safety policies to ensure safe practice e.g. management of sharps
	• Ethical guidelines including confidentiality, duty of care and public safety
	• Application of guidelines to individual needs of clients(i.e. therapeutic interventions, hygiene, dignity, esteem, physical, cultural and cognitive restrictions)are:
	  ➢ Relevant path physiology
	  ➢ Factors influencing medication actions
	  ➢ Major medication groups
	  ➢ Documentation associated with medication administration
	  ➢ Systems of medication delivery and medication administration devices (e.g. pumps and syringe drivers) within the scope of own role
	• State/territory legislative requirements relating to medication administration
	• Legal requirements for practice parameters of enrolled nurse relating to the administration of medications, including legal requirements of each route of administration
	• Methods of storage, handling and usage of medications
	• Role of the health care team in the administration of medications
	• An awareness of the role of complementary therapies
	• Substance incompatibilities, including:
	  ➢ Anaphylactic reactions
	  ➢ Adverse reactions
	  ➢ Contraindications

	➤ Precautions ➤ Side effects - An understanding of the pharmacology of medications including: ➤ Pharmacodynamics ➤ Pharmacokinetics ➤ Pharmacotherapeutics ➤ Toxicology - People's perception of pain and principles and strategies to alleviate pain
Underpinning Skills	Essential skills must include the ability to: - Interpersonal skills required include: ➤ Working with others, ➤ Empathy with patient and relatives, ➤ Using sensitivity when dealing with people, ➤ An ability to relate to persons from differing cultural, social and religious backgrounds - Problem solving skills required include an ability to use tools and techniques to solve problems, analyze information and make decisions that require discretion and confidentiality
Resource Implications	Resource implications includes: - Access to appropriate workplace where assessment can take place - Simulation of realistic workplace setting for assessment Relevant organizational policy, guidelines, procedures and protocols
Methods of Assessment	Competence may be assessed through: - Interview/Written Test - Observation/Demonstration with Oral Questioning
Context of Assessment	- Competence may be assessed in the work place or in a simulated work place setting - This unit should be assessed with other frontline management units taken as part of this qualification and as applicable to the candidate's leadership role in a work teams

Occupational Standard: Geriatric Nursing Level V	
Unit of competence	Maintain an effective health work environment
Unit Code	**HLT GRN5 07 0611**
Unit Descriptor	This unit of competence describes the skills and knowledge required to maintain an effective work environment in a health setting by monitoring, coordinating and promoting the implementation of ethical, safe and effective work practices in line with the established work requirements.

Element	*Performance Criteria*
1. Promote ethical work practices	1.1 Decision-making is monitored to ensure ethical guidelines are followed and underlying ethical complexity is recognized. 1.2 Understanding and compliance with the principles of duty of care and legal responsibilities are ensured in all work undertaken. 1.3 Ensure appropriate action is taken to address any breach or non adherence to the standard procedures or adverse event. 1.4 Work practices are monitored to ensure the confidentiality of any client matter in line with the *organizational policy and procedure*. 1.5 Respect for rights and responsibilities of others is promoted through the considered application of work practice. 1.6 Knowledge and understanding of employee and employer's rights and responsibilities are applied and promoted in all work practices. 1.7 Potential conflict of interest in the workplace is identified, and action is taken to avoid and/or address
2. Support culture of effective communication	2.1 *Communication issues* in the workplace are monitored and addressed. 2.2 Oral and written communication in the workplace is monitored to ensure the confidentiality of client and staff matters 2.3 Workplace communication is monitored to support the accuracy and understanding of information provided and received. 2.4 Recognition of individual and cultural differences in the workplace is promoted, and any adjustments to the communication needed are supported to facilitate the achievement of the identified outcomes. 2.5 A client-centered approach to health care is promoted and supported throughout the interpersonal communication with clients and colleagues 2.6 Interpersonal differences in the workplace is promoted and assisted with the resolution of conflict.
3. Maintain a positive approach to health in the	3.1 Work practices are monitored to ensure that they contribute to maintain an effective and client-centered approach to health. 3.2 Implementation of work practices is monitored to ensure

	clients are included in shared decision making as partners in health care.
	3.3 A workplace culture of promoting good health is supported and maintained by sharing health information.
workplace	3.4 Workplace focus is done on preventing ill health and minimizing risk
	3.5 Workplace focus on processes and procedures is monitored and maintained to manage stress and prevent fatigue.
4. Monitor professional work standards	4.1 Implementation of organizational policies and procedures related to awards, standards and legislative requirements of staff is monitored.
	4.2 Areas for *improving work practices* are identified and supported in the implementation in line with the organizational policies and procedures.
	4.3 Compliance with relevant accreditation standards applying to work undertaken is monitored, and issues are addressed,
	4.4 Staff understanding and focus on achieving organizational goals and objectives in work undertaken is monitored
	4.5 Staff efforts are monitored and supported to respond positively improve work practices and procedures.
	4.6 Issues requiring mandatory notification are identified and reported appropriately.
5. Work in the health industry context	5.1 Effective relationships with workers from different sectors and levels of the industry are established in line with the work role and requirements.
	5.2 Knowledge of the roles and functions of various health care structures, organizations and systems is applied.
	5.3 Knowledge of current issues influencing the health care system, including health issues is maintained.
6. Take opportunities to develop own competence	6.1 Own skills/knowledge is/are monitored in relation to the ongoing and changing work requirements.
	6.2 Areas for personal development are identified in line with the health industry developments, organizational requirements and personal interest.
	6.3 Initiative is taken to access and/or create development opportunities to support organizational need and personal career development.
	6.4 Available formal and informal skill/knowledge development and maintenance activities are undertaken

Variable	Range statement
Requirements of own work role may include:	• Level of responsibility • Organization guidelines • Individual awards and benchmarks • Legislation relevant to work area • Accreditation standards

Organizational policy on confidentiality may relate to:	• Storage of records • Destruction of records • Access to records • Release of information • Verbal and written communication
Organizational procedures, policies, awards, standards and legislation may include:	• Federal legislation • Quality management policy and practice • Current Ethiopian Standards • Aged care accreditation standards • Accreditation and service provision standards of other relevant industry organizations • Relevant health regulations and guidelines, policies and procedures, including child protection
Communication strategies may include:	• Active listening • Appropriate language • Appropriate communication aids • Appropriate modes of communication • Appropriate demeanor and body language • Appropriate tone and presentation • Observation • Questioning, clarifying, advising • Providing appropriate and accurate information
Promoting positive client relationship may include	• Acknowledging and greeting courteously • Identifying client needs and attending to them in a timely manner • Handling complaints sensitively, courteously and as per practice protocols • Demonstrating respect for clients' time
A client-centered approach to health includes:	• Putting clients and careers at the centre of service delivery • Including clients in decision-making relating to their health care • Involving clients in discussions about service delivery options and issues • Obtaining client consent to examine, treat or work with them • Effective customer service
Employee rights and responsibilities may relate to:	• Duty of care responsibilities • Leave entitlements • Attendance requirements • Obeying lawful orders • Confidentiality and privacy of organization, client and colleague information • Adherence to OHS • Protection from discrimination and sexual harassment in the workplace • The right to union representation
Issues requiring mandatory notification may include:	• Protection of children and others identified to be at risk • Issues defined by jurisdictional legislation and/or regulatory requirements • Issues specifically identified by under organization policies

Improved work practices may relate, for example to:	• Enhancing outcomes for clients
	• Enhancing sustainability of work, such as efficient and effective work practices in relation to:
	   ➢ Use of power
	   ➢ Use of resources, including for administration purposes
	   ➢ Waste management and recycling practices
	• Enhancing safety of staff and client

Identifying and implementing improved work practices may include:	• Reporting and implementing suggested improvements • Seeking and addressing customer feedback • Monitoring tasks • Responding to surveys and questionnaires • Assessing/observing/measuring environmental factors • Checking equipment
Employer rights and responsibilities may relate to:	• Legislative requirements for employee dismissal i.e. Workplace Relations Act • Legislative requirements to provide a safe work environment free from discrimination and sexual harassment • Enterprise workplace agreements
Designated knowledge/skill development may relate to:	• Hazard control • OHS • Manual handling • First Aid • Cultural awareness • Infection control • Cardiopulmonary resuscitation emergency response and notification protocols • Fire emergency response procedures for notification and containment of fire, use of fire fighting equipment and fire safety procedures • Security procedures • Quality improvement policy and practice • Discrimination, harassment and bullying in the workplace • Formal and informal resolution of grievances • Waste management • Customer service • Communication, conflict resolution • Others

Evidence Guide	
Critical Aspects of Competence	A candidate must be able to demonstrate the ability to: • Explain duty of care, confidentiality of information and ethical decision-making • Explain and apply principles underpinning client-centered health care and client safety • Describe role, function and objectives of the organization, and relevance to specific workplace requirements • Explain relevant organization procedures, policies, awards, standards and legislation and their application in the workplace • Analyze implementation of workplace procedures and their outcomes to identify areas for improvement • Apply high level decision-making and problem solving skills as required to monitor decision-making processes and provide constructive input to assist others • Create and promote opportunities to enhance sustainability in the workplace • Apply high level communication skills as required by specific work

Underpinning Knowledge and Attitudes	Demonstrates knowledge and understanding of:
	• Details of accreditation processes and quality improvement practices
	• Implications of relevant legislation, including:
	   ➢ Access and equity
	   ➢ Anti-discrimination
	   ➢ Infection control
	   ➢ OHS
	   ➢ Privacy
	• Meaning of duty of care, confidentiality of information and ethical decision-making in relation to own and others' work duties and responsibilities; what constitutes a breach of these and potential ramifications of such breaches
	• Principles underpinning client-centered health care
	• Principles of client safety
	• Organization procedures relating to:
	   ➢ Emergency response
	   ➢ Fire safety
	   ➢ Safe disposal of goods/waste
	   ➢ Security
	   ➢ Sustainability in the workplace, including environmental, economic, workforce and social sustainability
	• Role, function and objectives of the organization, and relevance to specific workplace requirements
	• Terms and conditions of employment for staff members
	• Understanding of relevant organization procedures, policies, awards, standards and legislation and their application in the

	workplace

Underpinning Skills	Skills include the ability to:
	• Apply knowledge of the ramifications of breaches of duty of care, confidentiality, ethical guidelines and other relevant policies and legislation
	• Apply understanding of good personal hygiene and risk associated with poor hygiene
	• Identify own responsibilities within the workplace
	• Analyze implementation of workplace procedures and their outcomes to identify areas for improvement
	• Apply functional literacy skills needed for written and oral information about workplace requirements
	• Apply high level decision-making and problem solving skills as required to monitor decision-making processes and provide constructive input to assist others
	• Create and promote opportunities to enhance sustainability in the workplace
	• Use high level communication skills as required by specific work role, including:
	   ➢ Interpreting and implementing complex verbal and/or written instructions
	   ➢ Providing information and ensuring understanding
	   ➢ Reporting incidents in line with organization requirements
	   ➢ Seeking clarification of information provided by others

Resources Implication	The following resources MUST be provided. • Access to real or appropriately simulated situations, including work areas, materials and equipment, • Documentation and information on workplace practices and OHS practices. • Specifications and work instructions • Approved assessment tools • Certified assessor /Assessor's panel
Methods of Assessment	Competence may be assessed through: • Practical assessment by direct observation of tasks through simulation/Role-plays • Written exam/test on underpinning knowledge • Questioning or interview on underpinning knowledge • Project-related conditions (real or simulated) and require evidence of process • Portfolio Assessment (e.g. Certificate from training providers or employers) Assessment methods must confirm the ability to access and correctly interpret and apply the essential underpinning knowledge

Context of Assessment	Competence may be assessed in the work place or in a simulated work place setting. This competence standard could be assessed on its own or in combination with other competencies relevant to the job function.

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Communicate in Complex or Difficult Situations**
Unit Code	**HLT GRN5 08 0611**
Unit Descriptor	This unit involves communication where there are special difficulties in conveying or receiving information in the context of providing ambulance services. This unit includes conveying complex information (e.g. to members of allied medical, paramedical or emergency services), communication with patients, bystanders or members of the public where there is a language, social, cultural or religious barrier or physical handicap and communication in situations where there is an obstructive emotional disturbance.

Element	Performance Criteria
1. Convey complex information	1.1 Information is conveyed clearly and accurately.
	1.2 Recipient's understanding of the information is monitored and the ***mode of communication*** is adjusted according to the needs of the situation.
	1.3 Interaction done is consistent with the urgency of the situation presented and in accordance with the standard local ambulance operation procedure.
2. Communicate with allied non-service personnel	2.1 Information is conveyed clearly and readily clarified when necessary.
	2.2 Ambulance requirements are communicated clearly and in a manner that reflects an appropriate level of authority.
	2.3 Direction, advice and assistance are sought when required and followed as appropriate to the situation.
	2.4 ***Information*** is conveyed timely and in accordance with the needs of the situation.
	2.5 Difficulties in ***written and oral communication*** are recognized and resolved using the appropriate communication skills and techniques.
	2.6 Role and authority of allied personnel are clarified and respected.
3. Overcome barriers to communication	3.1 ***Barriers to effective communication*** are detected by continuous monitoring of the situation and using ***communication equipment.***

	3.2 Situation needs are identified, clarified and confirmed using the appropriate communication skills and techniques.
	3.3 Actions are done in accordance with the relevant local ambulance standard operation procedure.
	3.4 Discretion and confidentiality are observed and members of the public are treated with respect at all times.
	3.5 Individual situations/problems are treated in a caring but firm manner combining sensitivity and openness with a confident, reassuring manner combining sensitivity and openness with a confident, reassuring manner.
	3.6 Interaction done is consistent with the urgency of the situation presented and in accordance with the service policy and procedures.
	3.7 Conflict (and potential for conflict) is dealt with in a manner that prevents escalation.

Variables	Range
Modes of communication may include, but are not limited to:	• Oral and written communication • Use of interpreters • Sign language • Use of personnel with special communication skills
Written and oral communication should:	• Avoid unnecessary jargon • Conform with service policy and procedures • Focus on the receiver's needs • Keep stakeholders informed
Oral communication may include, but is not limited to:	• Answering requests and enquiries • Questioning, clarifying and confirming information • Conveying instructions, descriptions and explanations • Consulting and advising
Written communication may include, but is not limited to:	• Reports • Patient care documentation • Correspondence
Communication equipment may include, but is not limited to:	• Radio • Telephone • Computer • Fax • Pager • Mobile data terminal
Barriers to effective communication may include, but are not	• Language difficulties • Differing terminology/jargon • Hearing difficulties

limited to:	• Speech impediments • Religious, social or cultural factors • Emotional state

Complex information may: include, but is not limited to:	• Patient condition and implications • Ambulance requirements • Ambulance equipment • Incident history • Emergency procedures • Human resources requirements

Evidence Guide	

Critical Aspects Of Assessment	Critical aspects of assessment must include:
	• Observation of performance in the work environment or in a simulated work setting
	• Observation must include:
	  ➢ Communication under pressure
	  ➢ Interpersonal interaction in a variety of complex or difficult work situations
	  ➢ Communication relating to standard prehospital patient care

Underpinning Knowledge and Attitudes	Essential knowledge required includes: • Standard local ambulance operation procedure • Operation of communication equipment • Service communication codes and systems

Underpinning Skills	Essential skills required include:
	• Oral communication skills (language competence) required to fulfill job roles as specified by the organization/service. Advanced oral communication skills include:
	  ➢ Interviewing techniques,
	  ➢ Asking questions,
	  ➢ Active listening,
	  ➢ Asking for clarification from patient or other persons at the scene,
	  ➢ Negotiating solutions,
	  ➢ Acknowledging and responding to a range of views.
	• Written communication skills (literacy competence) required to fulfill job roles as specified by organization/service. The level of skill may range from reading and understanding incident reports and case management materials to preparing handover reports for receiving agency staff.
	• Interpersonal skills required include:
	  ➢ Working with others,
	  ➢ Empathy with patient and relatives,
	  ➢ Using sensitivity when dealing with people,

	> An ability to relate to persons from differing cultural, social and religious backgrounds • Problem solving skills required include an ability to use tools and techniques to solve problems, analyze information and make decisions that require discretion and confidentiality
Resource Requirements	Resource implications may include: • Access to appropriate workplace or simulation of realistic workplace setting where assessment can be conducted • Access to equipment and resources normally used in the workplace
Method of Assessment	Competence may be assessed through: • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	• Assessment may occur on the job or in a workplace simulated facility with process equipment, materials and work instructions. • Evidence must include observation of performance in the work environment or in a simulated work setting.

Occupational Standard: Geriatric Nursing	
Unit of competence	**Develop and implement strategies to enhance client safety**
Unit Code	**HLT GRN5 09 0611**
Unit Descriptor	This unit describes the skills and knowledge required to develop and implement communication strategies to enhance the inclusion of clients and careers in planning and delivering health care services and to support honest communication with clients related to risk and adverse events

Element	Performance Criteria
1. Promote partnerships between client and service provider	1.1 Strategies are developed for staff to include clients and careers in planning and delivering health care services. 1.2 Opportunities for staff are identified and supported to involve clients and careers in their care and treatment. 1.3 Staff is assisted and supported to clarify and respect the **rights of clients** and careers through all stages of tests, procedures and treatments. 1.4 Staff is assisted and supported to clarify and respect the choices of clients and careers in planning the delivery of health care services. 1.5 Ways in which clients, careers and the community can contribute to improving health care services are identified. 1.6 Staff is supported to ensure clients and careers are encouraged to ask questions and provide feedback about the delivery of health care services. 1.7 Staff is provided with strategies and techniques to ensure clients and careers are effectively educated about their condition, treatments and available health care services. 1.8 Staff is provided with appropriate training and resources to support the provision of culturally and linguistically appropriate services. 1.9 Environments and structures are created to support optimal client and community involvement in health service planning and delivery.
2. Enhance client understanding of risk	2.1 Clients and careers are provided with quality information related to risks, their health, proposed treatments and the ongoing service delivery. 2.2 Clients are supported as required to make informed decisions about proposed treatments and ongoing service delivery. 2.3 Provision of information about the beneficial and harmful effects of care and treatments is supported according to the individual circumstances and priorities. 2.4 Staff understanding is ensured that the importance of obtaining **consent** from both ethical and risk management perspectives.

3. Manage communication related to adverse events	3.1 Clear processes are established for managing adverse events and near misses within the scope of work role.
	3.2 Open disclosure guidelines are developed based on the National Open Disclosure Standard.
	3.3 Staff knowledge of the open disclosure guidelines and how they apply to their work role are ensured.
	3.4 Staff is supported to apply open disclosure guidelines when clients suffer adverse events and/or near misses.
	3.5 Clients and careers are supplied with information about the available support services.
	3.6 Emotional and trauma support services are provided to clients, careers and staff who have been involved in an adverse event or near miss.
	3.7 Information about learning from adverse events and near misses throughout the organization is disseminated.
	3.8 Community awareness of the occurrence of adverse events encouraged to enhance client involvement in health care services
4. Evaluate effectiveness of client safety strategies	4.1 Regular organization self-assessments in relation to cultural and linguistic competence are conducted.
	4.2 Effectiveness of strategies is evaluated to involve clients and careers in planning and delivery of health care services.
	4.3 Effectiveness of strategies is evaluated to prevent, manage and communicate adverse events and near misses.
	4.4 Client's feedback is sought on an ongoing basis and incorporates into evaluation strategies.
	4.5 Opportunities are identified for improvements in practices and processes impacting client safety.
	4.6 Feedback and recognition are provided to staff to establish and maintain behavior and attitudes that support and enhance client safety

Variable	Range statement
Client's rights may include:	• Treatment with reasonable care and skill
	• Right to refuse medical treatment
	• Confidentiality of information
	• Access to information held about them including medical records, registers
	• Right not to be discriminated against
	• Right to make a complaint
	• Right to be involved in decisions regarding treatment and care
Legal obligations and requirements may relate to:	• Privacy
	• Consent to medical treatment
	• Duty of care
	• Release of patient information, including medical and other clinical records
	• Coroners Act

	• Child protection • Industrial relations • Trade practices • Poisons legislation • Retention of human tissue • Equal Employment Opportunity • Occupational health and safety • Infection control • Contractual obligations • Licensing laws
Consent of client may include:	• Written • Verbal • Implied
Available support services may include:	• Emotional support • Advocacy • Complaint information

Evidence Guide	
Critical Aspects of Competence	A candidate must be able to demonstrate the ability to: • Explain effective methods for educating clients about their conditions • Explain how to apply decision support service models to accommodate decisions based on individual preferences or cultural and religious beliefs • Explain own to evaluate the beneficial and harmful effects of care and treatments • Evaluate effectiveness of client safety strategies • Manage communication relating to adverse events • Enhance client understanding of risk • Promote partnerships between client and service provider
Underpinning Knowledge and Attitudes	Demonstrates knowledge and understanding of: • Effective methods for educating clients about their conditions • How client decisions are influenced by the way risk information is presented • How clients can be involved in educating health care providers • How to apply decision support service models to accommodate decisions based on • individual preferences or cultural and religious beliefs • How to engage consumers, clients and carers at every level of health care service delivery and involve them in health improvement activities • How to evaluate the beneficial and harmful effects of care and treatments • Key principles underpinning partnerships with consumers, clients and careers • Models and characteristics of treatment decision-making

	• National Open Disclosure Standard • Relative effectiveness of methods for communicating risk information to clients and careers • Role and responsibilities of the organization in open disclosure • Role of clinical risk management and quality improvement processes in open disclosure
Underpinning Skills	Skills include the ability to: • Evaluate effectiveness of client safety strategies • Manage communication relating to adverse events • Enhance client understanding of risk • Promote partnerships between client and service provider • Actively seek suggestions from clients and careers on improvements to health care • Develop a variety of methods to foster routine collaboration between health care providers and their clients and careers • Establish clear processes for managing adverse events and near misses in their organization • Foster community awareness of the role clients and the community can play in improving health care and making the health care system safe • Incorporate principles of open disclosure into organization guidelines • Integrate risk information into client information materials • Provide guidance and coaching to clients in decision-making, communicating with others, accessing support and handling pressure • Provide reports to staff about the importance of engaging clients and careers in health care delivery • Provide training to staff in the appropriate use of decision aids • Promote opportunities to address waste minimization, environmental responsibility and sustainable practice issues, including practices to ensure efficient use of resources
Resources Implication	The following resources MUST be provided. • Access is required to real or appropriately simulated situations, including work areas, materials and equipment, • Documentation and information on workplace practices and OHS practices. • Specifications and work instructions • Approved assessment tools • Certified assessor /Assessor's panel
Methods of Assessment	Competence may be assessed through: • Practical assessment by direct observation of tasks through simulation/Role-plays • Written exam/test on underpinning knowledge • Questioning or interview on underpinning knowledge • Project-related conditions (real or simulated) and require evidence of process • Portfolio Assessment (e.g. Certificate from training providers or

	employers) Assessment methods must confirm the ability to access and correctly interpret and apply the essential underpinning knowledge
Context of Assessment	Competence may be assessed in the work place or in a simulated work place setting. This competence standard could be assessed on its own or in combination with other competencies relevant to the job function.

Occupational Standard: Geriatric Nursing Level V	
Unit of competence	**Implement and monitor compliance with legal and ethical requirements**
Unit Code	**HLT GRN5 10 0611**
Unit Descriptor	This unit describes the skills and knowledge required to implement and monitor compliance with legal and ethical requirements relevant in the work area.

Element	Performance Criteria
1. Maintain ethical work practices	1.1 Duty of **confidentiality** is fulfilled to the client, both at law and under professional code of ethics. 1.2 The collection, use and **disclosure of client information** is ensured in consistent with information privacy principles. 1.3 The **rights of clients** are recognized and respected throughout all stages of tests/procedures. 1.4 The minimum standard of professional conduct is ensured that it adheres to relevant industry code of practice. 1.5 Ethical issues or breaches of **ethical practice** are referred to the management or ethics committees in accordance with the organizational policies and procedures. 1.6 Duty of care in all aspects of work is exercised to ensure client's safety. 1.7 Client complaints are handled sensitively and in line with the organizational policies and procedures. 1.8 All works are performed within the boundaries of responsibility, and problems are referred to the supervisor and/or other appropriate health professional. 1.9 **Work practices are monitored** to ensure that they reflect **principles of ethical practice.**
2. Maintain appropriate documentation	2.1 The nature and requirements of referral and/or request are ensured that they are correctly identified. 2.2 Documentation within clients' medical records is completed in accordance with the national legislation, and organizational policies and procedures. 2.3 Reports and documentation are verified/ensured whether they address requirements of legislation, and organizational policies and procedures. 2.4 Policies and procedures are implemented to safe guard client information from unauthorized access or disclosure

3. Maintain compliance with legal requirements	3.1 Fulfillment of statutory obligations and requirements are ensured.
	3.2 Consent of client is obtained for each test/procedure, as required.
	3.3 Authorities are notified of client information as required by law.
	3.4 Release of information contained within client records is completed in accordance with the legislation and organizational policies and procedures.
	3.5 Duty of care is met in all aspects of own work role.
	3.6 Clients are provided with access to information about themselves in accordance with the legislation or other statutory provisions.
	3.7 The right of every client is considered, so that the client s are treated fairly and equitably.
	3.8 Compliance of duty of care with legal obligations and requirements are monitored.

Variable	Range statement
Confidentiality of client information must include:	• Verbal • Written i.e. medical records, referral/request • Video/audio tapes • Radiographic films and images • Computer files
Disclosure of client information may include:	• When a client consents to disclosure • When other health care workers need to know information to complete appropriate treatment and care • When disclosure of information is required by law e.g. some infectious diseases, suspected or known child abuse
Client's rights may include:	• Treatment with reasonable care and skill • Right to refuse medical treatment • Confidentiality of information • Access to information held about them including medical records, registers • Right not to be discriminated against • Right to make a complaint • Right to be involved in decisions regarding treatment and care
Legal obligations and requirements may relate to:	• Privacy • Anti-Discrimination • Consent to medical treatment • Duty of care • Release of client information, including medical and other clinical records • Coroners Act • Child protection • Industrial relations

	• Trade practices • Poisons legislation • Retention of human tissue • Equal Employment Opportunity • Occupational health and safety • Infection control • Contractual obligations • Licensing laws
Consent of client may include:	• Written • Verbal • Implied
Notification of authorities of client information must include:	• Certain infectious diseases • Suspected or known child abuse • If it is deemed to be in the public's best interest
Monitoring of ethical work practice and legal compliance may involve:	• Audits • Inspections and reviews • Quality Assurance activities

Evidence Guide	
Critical Aspects of Competence	A candidate must be able to demonstrate the ability to:
Underpinning Knowledge and Attitudes	knowledge and understanding requirements include: • Client rights and responsibilities • Industry code(s) of practice where applicable • Law of consent to medical treatment • Legal and ethical requirements and responsibilities as they relate to specified work role(s) • Organization policy and procedures for complaints handling • Relevant federal, state, territory and local government legislation affecting role and duties

Underpinning Skills	Skills include the ability to:
	• Apply reading and writing skills (literacy competence) required to fulfill job roles in a
	• Safe manner and as specified by the organization, at a level of skill that includes:
	   ➢ Reading and interpreting organization policy and procedure manuals and industry codes of practice
	• Apply oral communication skills-language competence required to fulfill job roles in a safe manner and as specified by the organization.
	Assessors should look for skills in:
	   ➢ Asking questions
	   ➢ Clarifying workplace instructions when necessary
	   ➢ Listening to and understanding workplace instructions

	> Providing clear information
	• Conduct compliance monitoring activities
	• Demonstrate, model and monitor work activities in compliance with legal and ethical requirements and organization policies and procedures, including:
	   > Demonstrating respect for clients' rights
	   > Meeting requirements for provision of duty of care
	   > Working in accordance with legislation relevant to the workplace and specific work functions
	• Take into account requirements and imperatives relating to waste minimization, environmental responsibility and sustainable practice
	• Use effective verbal and non verbal communication skills with a range of internal and external persons,
	• Use problem solving skills as required to interpret and apply policy in the workplace, develop procedures and monitor practices

Resources Implication	The following resources MUST be provided. • Access is required to real or appropriately simulated situations, including work areas, materials and equipment, • Documentation and information on workplace practices and OHS practices. • Specifications and work instructions • Approved assessment tools • Certified assessor /Assessor's panel
Methods of Assessment	Competence may be assessed through: • Practical assessment by direct observation of tasks through simulation/Role-plays • Written exam/test on underpinning knowledge • Questioning or interview on underpinning knowledge • Project-related conditions (real or simulated) and require evidence of process • Portfolio Assessment (e.g. Certificate from training providers or employers) Assessment methods must confirm the ability to access and correctly interpret and apply the essential underpinning knowledge.
Context of Assessment	Competence may be assessed in the work place or in a simulated work place setting. This competence standard could be assessed on its own or in combination with other competencies relevant to the job function.

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Facilitate and Capitalize on Change and Innovation**
Unit Code	**HLT GRN5 11 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
1. Participate in planning the introduction and facilitation of change	1.1 **Manager** contributes effectively to the organization's planning processes to introduce and facilitate change.
	1.2 Plans to introduce change are made in consultation with the **appropriate stakeholders**.
	1.3 Organization's objectives and plans to introduce change are communicated effectively to individuals and teams.
2. Develop creative and flexible approaches and solutions	2.1 Variety of approaches to manage workplace issues and problems are identified and analyzed.
	2.2 **Risks** are identified and assessed, and action initiated to manage these to achieve a recognized benefit or advantage to the organization.
	2.3 Workplace is managed in a way which promotes the development of innovative approaches and outcomes.
	2.4 Creative and responsive approaches to resource management improve productivity and services, and/or reduce costs.
3. Manage emerging challenges and opportunities	3.1 Individuals and teams are supported to respond effectively and efficiently to changes in the organization's goals, plans and priorities.
	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.
	3.4 **Information needs** of individuals and teams are anticipated and facilitated as part of change implementation and management.
	3.5 Recommendations for improving the methods and

Variables	Range
techniques to manage change are identified, evaluated and negotiated with the appropriate individuals and groups.	
Manager	A person with frontline management roles and responsibilities, regardless of the title of their position.
Appropriate stakeholders may refer to:	Those individuals and organizations who have a stake in the change and innovation being planned, including: • Organization directors and other relevant managers • Teams and individual employees who are both directly and indirectly involved in the proposed change • Union/employee representatives or groups • OHS committees • Other people with specialist responsibilities • External stakeholders where appropriate - such as clients, suppliers, industry associations, regulatory and licensing agencies
Risks may refer to:	• Any event, process or action that may result in goals and objectives of the organization not being met • Any adverse impact on individuals or the organization • Various risks identified in a risk management process
Information needs may include:	• New and emerging workplace issues • Implications for current work roles and practices including training and development • Changes relative to workplace legislation, such as OHS, workplace data such as productivity, inputs/outputs and future projections • Planning documents • Reports • Market trend data • Scenario plans • Customer/competitor data

Evidence Guide	
Critical Aspects of Competence	Assessment must show evidence that the candidate: • Planning the introduction and facilitation of change • Developing creative and flexible approaches and solutions • Managing emerging challenges and opportunities
Underpinning Knowledge and Attitudes	• 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 • The principles and techniques involved in are: ➢ Change and innovation management

	➢ Development of strategies and procedures to implement and facilitate change and innovation ➢ Use of risk management strategies: identifying hazards, - Assessing risks and implementing risk control measures ➢ Problem identification and resolution ➢ Leadership and mentoring techniques ➢ Management of quality customer service delivery ➢ Consultation and communication techniques ➢ Record keeping and management methods ➢ The sources of change and how they impact - Factors which lead/cause resistance to change - Approaches to managing workplace issues
Underpinning Skills	Demonstrate skills on: - Communication skills - Planning work - Managing risk
Resources Implication	The following resources must be provided: Workplace or fully equipped assessment location with necessary tools, equipment and consumable materials
Assessment Methods	Competence may be assessed through: - Interview/Written Test - Observation/Demonstration with Oral Questioning
Context of Assessment	Competence may be assessed in the work place or in a simulated work place setting

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Manage Quality Systems and Procedures**
Unit Code	**HLT GRN5 12 0611**
Unit Descriptor	This unit covers the skills, attitudes and knowledge required to ma implementation of a quality assurance system and procedures within enterprise.

Elements	Performance Criteria
1. Maintain quality system framework in work area	1.1 Quality assurance policy for work area is confirmed, documented and comm to all levels of the workplace.
	1.2 Sampling techniques are developed which reflect the needs of the work are
	1.3 Quality circles or other relevant aspects of quality assurance systems are e or maintained for the work area.
	1.4 Facilitation for monitoring of work teams is organized to ensure compliance standards.
	1.5 Quality assurance system for work area is developed and maintained in acc with *OHS practices.*
	1.6 Strategies for communicating quality information with work teams are estab
2. Establish and maintain quality documentation system	2.1 Quality documentation requirements are identified including records of impr plans and initiatives.
	2.2 Documentation related to quality outcomes and standards is prepared and maintained.
	2.3 Document control system is established and maintained.
3. Implement structured training program in accordance with quality system requirements	3.1 Roles and duties of relevant personnel are analyzed.
	3.2 Training needs in relation to quality are identified.
	3.3 Suitable training programs are identified to meet these needs
	3.4 Suitable training programs are organized
	3.5 Effects of training on quality outcomes are assessed and further action take necessary to address quality performance.
	3.6 Training records are maintained.
4. Evaluate the quality system	4.1 Regular audits are conducted of the work area's quality system, its policies procedures.
	4.2 New procedures or work instructions are developed as required
	4.3 Improvements in the quality system are implemented and monitored.
Variable	**Range**

Quality assurance systems	may include: • Quality assurance system is a structured and formalized system[...] identification and elimination of hazards and other OHS risk factors a[...] setting the procedures to eliminate faults and variation in order to a[...] standards of quality and efficiency • Quality assurance for a textile and clothing work area may involve testing[...] dyes, color fastness finishes, yarns or other materials or finished textile a[...] products
OHS practices	OHS practices must include hazard identification and control, risk assess[...] implementation of risk reduction measures specific to the tasks described by[...] and may include: • Manual handling techniques • |Standard operating procedures • Personal protective equipment • Safe materials handling • Taking of rest breaks • Ergonomic arrangement of workplaces • Following marked walkways • Safe storage of equipment • Housekeeping • Reporting accidents and incidents • Other OHS practices relevant to the job and enterprise

Evidence Guide	
Critical Aspects of competence	Assessment must confirm appropriate knowledge and skills to: • Ensure all relevant personnel are aware of quality assurance system and[...] • Monitor quality performance of work teams and ensure compliance • Collect and analyze quality data • Determine quality procedures • Implement quality improvement strategies • Evaluate and assess effectiveness of quality system and procedures • Maintain accurate records
Underpinning Knowledge and Attitudes	Demonstrates knowledge of: • Principles of quality and the application and delegation of responsibilities • Organization quality systems and appropriate national and international q[...] protocols • Enterprise standard operating procedures • The organization business goals and key performance indicators • The principles of process improvement • The principles of policy and procedure development • The principles of data management and documentation • Appropriate quality methodologies to measure quality of textile and clothi[...] • Sampling techniques for textile and clothing products • Safety and environmental aspects of production and quality processes • Workplace practices and reporting processes • Relevant OHS legislation and codes of practice

	• Hazard identification and control measures associated with managing qua... procedures
Underpinning Skills	Demonstrates skills to: • Establish and implement a quality system and procedures for the work ar... • Determine implementation requirements and prepare implementation plan... • Monitor performance • Investigate and apply methods to eliminate causes of unsatisfactory perf... • Assess results • Prepare reports • Communicate effectively within the workplace, including liaising with othe... • Establish or interpret procedures, where required • Determine report requirements and present information in appropriate for... • Read, interpret and follow information on job instructions, specifications, ... • Operating procedures, patterns, charts, tickets, order forms and other ap... material • Carry out work in accordance with OHS practices • Sequence operations • Clarify and check task related information • Analyze quality data or charts
Resource Implications	Access is required to real or appropriately simulated situations, including work ... equipment, and to information on workplace practices and OHS practices.
Method of Assessment	Competence may be assessed through: • Interview / Written Test • Observation/Demonstration
Context of Assessment	• Assessment may occur on the job or in an appropriately simulated enviro...

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Develop a Disaster Plan**
Unit Code	**HLT GRN5 13 0611**
Unit Descriptor	This unit describes the competencies required to develop in consultation with other agencies and key people, which sets out the roles and responsibilities of workers and others in the community, for responding to a disaster.

Elements	**Performance Criteria**	
1. Liaise with relevant government agencies	1.1	Government policies which affect the organization are identified and documented.
	1.2	***Government agencies*** are consulted with in relation to different roles in the local ***disaster*** plan.
2. Identify and liaise with appropriate community organizations	2.1	***Community organization*** is identified and an information database is developed.
	2.2	Contact is established through a variety of communication strategies.
	2.3	Restrictions to effective liaison are identified and processes are developed to promote communication with other agencies.
3. Incorporate legislative requirements for disaster planning and relief into a plan	3.1	Information on ***legislative requirements*** and ***resources*** is collected from the key people and organizations.
	3.2	Roles and responsibilities of other organizations are clarified.
	3.3	Plan is written.
	3.4	A promotions strategy is established and implemented.
4. Coordinate volunteer support	4.1	Volunteers are sought for disaster plan designated roles, via identified organizations and public processes.
	4.2	Roles and responsibilities are clarified.
	4.3	Team leaders are identified by discussion with organizations.
	4.4	Meetings are held to discuss disaster plan and personnel requirements.
5. Ensure training	5.1	Training requirements for volunteers and staff are

	established.
for volunteers and staff	5.2 Training programs are developed.
	5.3 Promotion of training is undertaken.
	5.4 Training schedule is developed and promoted.
	5.5 Training is provided.
	5.6 Training is evaluated and modified as required.
6. Evaluate and modify disaster plan	6.1 ***Key people*** are consulted about effectiveness of the disaster plan.
	6.2 The ***disaster plan*** is adapted to meet community needs.
	6.3 The amended disaster plan is distributed to key people.
	6.4 Additional training is provided as required.

Variables	Range
Government agencies may include:	• State /Territory Health Department • Police • Social Security • Local Government • Emergency Services
Disasters may include:	• Floods • Cyclones • Fires • Earth quakes • Nuclear accidents • Riots, raids
Community organizations may include:	• Government and non-government agencies • Health care service providers • Other service providers • Trades people • Community groups who provide care to the community
Legislative requirements:	• Clinical practice may be governed by Federal, State or Territory legislation, which defines workers' roles and responsibilities. • Implementation of the competency standards must reflect the legislative framework in which a health worker operates. This may reduce the Range of Variables in practice and assessment. • Lack of resources, remote locations and community needs often require health workers to operate in situations which do not constitute "usual practice". Because of this, health workers may need to possess more competencies than described by "usual practice circumstances".

	• Lack of resources or the environment in which the health worker works does not negate the requirement for the worker to work within a legislative framework, and be enabled by the employer to do so.

Resources may include:	• Premises • Grounds • Accommodation • Workplace equipment • Materials • Plant vehicles • Exclusive use • Occupation
Key people will include:	• Those within and external to organization • Community leaders and representatives • Agencies /service representatives • Trade and professional services
A disaster plan(s) is/are:	• Guidelines and/or plans for responding to various types of disaster, detailing the roles and responsibilities of workers, resource needs and sources and situation management strategies

Evidence Guide	

Critical Aspects of Competence	Critical aspects for assessment and evidence required to demonstrate this competency unit:
	• Observation of performance in a work context is essential for assessment of this unit
	• Consistency of performance should be demonstrated over the required range of workplace situations and should occur on more than one occasion and be assessed by a registered mental health nurse
	• Observations must include:
	  ➢ Knowledge of mental health disorders
	  ➢ Principles of mental health assessment, including risk assessment
	  ➢ Nursing management of mental health disorders, specific medications and interventions within the defined scope of practice
	  ➢ Communication skills

Underpinning Knowledge and Attitudes	Essential knowledge includes: • Relevant policies, protocols and procedures of the organization • Relevant Federal, State and Local government policies, guidelines and legislation relating to disaster management • Relevant equipment and technology

	• Local resources, suppliers and trades people • Existing disaster plans (developed by other organizations who service the Community • Project development • Local disaster planning processes and networks • Community networks • Community views on disaster management
Underpinning Skills	Essential skills includes: • Communication and liaison • Networking • Human Resource Management • Negotiation • Small group facilitation • Planning • Training
Resource Implications	For reasons of safety, access to equipment and resources and space, assessment takes place away from the workplace; simulations should be used to represent workplace conditions as closely as possible.
Methods of Assessment	Competence may be assessed through: • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	• Competence may be assessed in the work place or in a simulated work place setting • The workplace is recommended for assessment including by supervisor and peers, by observation and inquiries, and from written and other sources. • Off-the-job role plays and exercises may also be used

Occupational Standard: Geriatric Nursing Level V	
Unit Title	**Develop and Refine Systems for Continuous Improvement in Operations**
Unit Code	**HLT GRN5 14 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 current internal improvement systems	1.1 Describe **organization systems** that impact on continuous improvement
	1.2 Identify current **relevant metrics** and their values
	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 improvement processes	2.1 Identify all **improvements** which have occurred over an agreed period of time
	2.2 Distinguish between **breakthrough improvements** and continuous improvements
	2.3 Determine the timing of breakthrough improvement processes
	2.4 Analyze factors controlling the **timing** and selection of breakthrough improvements
	2.5 Analyze **continuous improvements** 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 practice	3.1 Check that levels of delegated authority and responsibility are appropriate for continuous improvement from the shop floor
	3.2 Ensure all personnel have appropriate capabilities for

		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 current external improvement system	4.1	Review *value stream* systems that impact on improvement
	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 further development of value stream improvement processes	5.1	Review mechanisms for consultation with value stream members
	5.2	Develop mechanisms for further improving joint problem solving
	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 *impacted on improvements* 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 and practices	Competitive systems and practices may include, but are not limited to:
	 • lean operations
	 • agile operations
	 • preventative and predictive maintenance approaches
	 • monitoring and data gathering systems, such as Systems Control and Data Acquisition (SCADA) software, Enterprise Resource Planning (ERP) systems, Materials Resource Planning (MRP) and proprietary systems
	 • statistical process control systems, including six sigma and three sigma
	 • JIT, kanban and other pull-related operations control systems
	 • supply, value, and demand chain monitoring and analysis
	 • 5S
	 • continuous improvement (kaizen)
	 • breakthrough improvement (kaizen blitz)
	 • cause/effect diagrams
	 • overall equipment effectiveness (OEE)
	 • takt time
	 • process mapping
	 • problem solving
	 • run charts
	 • standard procedures
	 • current reality tree
	 • Competitive systems and practices should be interpreted so as to take into account:
	   − stage of implementation of competitive systems and practices
	   − the size of the enterprise
	   − the work organization, culture, regulatory environment and the industry sector

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	Organization systems may include:

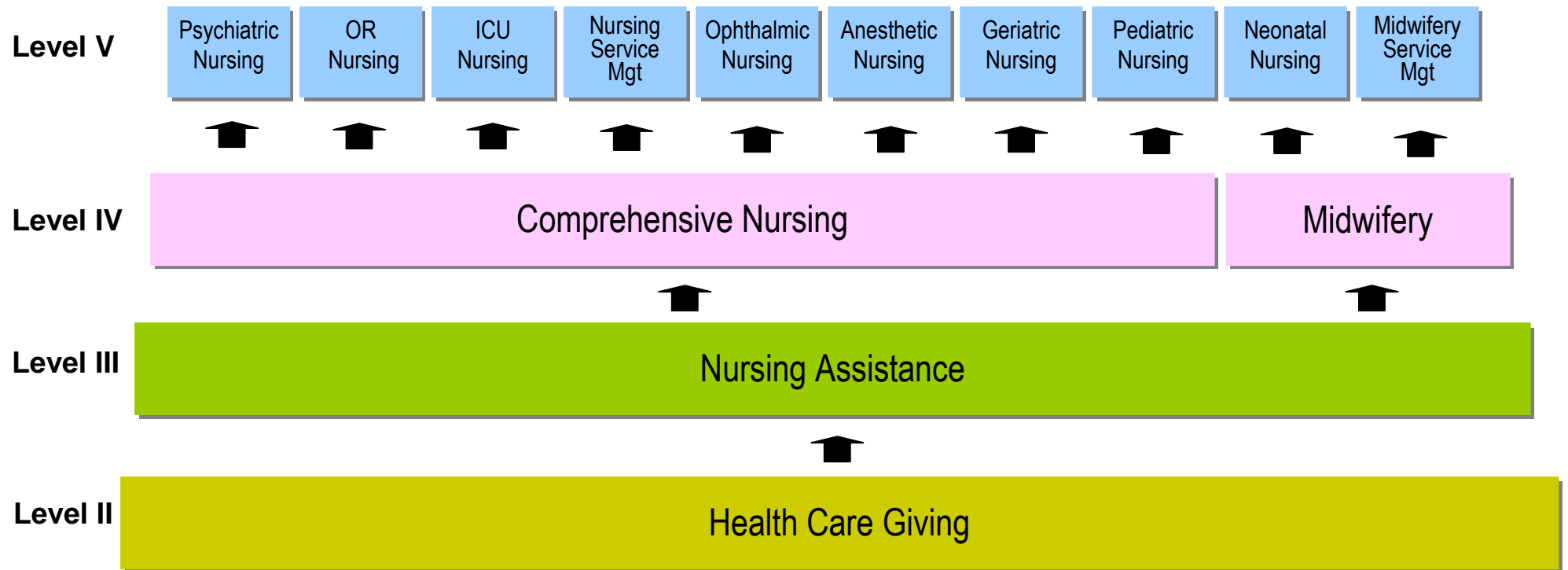| systems	• problem recognition and solving • operational/process improvement • improvement projects • product/process design and development • processes for making incremental improvements
Relevant metrics	Relevant metrics include all those measures which might be used to determine the performance of the improvement system and may include: • hurdle rates for new investments • KPIs for existing processes • quality statistics • delivery timing and quantity statistics • process/equipment reliability ('uptime') • incident and non-conformance reports • complaints, returns and rejects
Process improvement yield	Improvement process yield may be regarded as: • the benefit achieved for the effort invested
Breakthrough improvements	Breakthrough improvements include: • those which result from a kaizen blitz or other improvement project or event and are a subset of all improvements
Timing of breakthrough improvements	Timing of breakthrough improvements includes: • frequency (which should be maximized) and duration (which should be minimized) of events/projects
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 project
Resources for improvement	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	Capturing value stream improvements includes: • revised contractual arrangements • revised specifications • signed agreements • other documented arrangements which formalize the raised base line
Systems impacting	Systems which impact/are impacted on improvements and the

improvements	improvement system include: • office • purchasing • rewards (individual or team at all levels) • sales • marketing • maintenance • process/product • transport and logistics
Organizational knowledge	Organizational knowledge should: • be able to be quantified or otherwise modified to make its outcomes measurable or observable • be able to be expressed in an accessible and distributable form appropriate to the organization operations and stakeholders
Improvements	Improvements may: • be to process, plant, procedures or practice • include changes to ensure positive benefits to stakeholders are maintained
Manager	Manager may include: • 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

Evidence Guide	
Critical Aspects of Competence	A person who demonstrates competency in this unit must be able to provide evidence of the ability to: • critically review current continuous improvement processes • establish ongoing review of continuous improvement processes • implement improvements in the practice of continuous improvement • better align internal and external systems • gather data through interviews with stakeholders • review existing data • obtain additional data through a variety of techniques • communicate and negotiate at all levels within the organization
Underpinning Knowledge and Attitudes	Demonstrates knowledge of: • competitive systems and practices tools, including: • value stream mapping • 5S • Just in Time (JIT) • mistake proofing • process mapping • establishing customer pull

		• kaizen and kaizen blitz
		• setting of KPIs/metrics
		• identification and elimination of waste (muda)
		• continuous improvement processes including implementation, monitoring and evaluation strategies for a whole organization and its value stream
		• difference between breakthrough improvement and continuous improvement
		• organizational goals, processes and structure
		• approval processes within organization
		• cost/benefit analysis methods
		• methods of determining the impact of a change
		• advantages and disadvantages of communication media, methods and formats for different messages and audiences
		• customer perception of value
		• define, measure, analyze, improve, and control and sustain (DMAIC) process
Underpinning Skills		Demonstrates skills to:
		• undertaking self-directed problem solving and decision-making on issues of a broad and/or highly specialized nature and in highly varied and/or highly specialized contexts
		• communicating at all levels in the organization and value stream and to audiences of different levels of literacy and numeracy
		• analyzing current state/situation of the organization and value stream
		• determining and implementing the most appropriate method for capturing value stream improvements
		• collecting and interpreting data and qualitative information from a variety of sources
		• analyzing individually and collectively the implementation of competitive systems and practices tools in the organization and determining strategies for improved implementation
		• relating implementation and use of competitive systems and practices and continuous improvement to customer benefit
		• solving highly varied and highly specialized problems related to competitive systems and practices implementation and continuous improvement to root cause
		• negotiating with stakeholders, where required, to obtain information required for implementation and refinement of continuous improvements, including management, unions, value stream members, employees and members of the community
		• reviewing relevant metrics, including all those measures which might be used to determine the performance of the improvement system, including: − key performance indicators (KPIs) for existing processes

	– quality statistics – delivery timing and quantity statistics – process/equipment reliability ('uptime') – incident and non-conformance reports – implementing continuous improvement to support systems and areas, including maintenance, office, training and human resources
Resources Implication	Access may be required to: • workplace procedures and plans relevant to work area • specifications and documentation relating to planned, currently being implemented, or implemented changes to work processes and procedures relevant to the assessee • documentation and information in relation to production, waste, overheads and hazard control/management • reports from supervisors/managers • case studies and scenarios to assess responses to contingencies
Methods of Assessment	Competence in this unit may be assessed by using a combination of the following to generate evidence: • demonstration in the workplace • suitable simulation • oral or written questioning to assess knowledge of principles and techniques associated with change management In all cases it is expected that practical assessment will be combined with targeted questioning to assess underpinning knowledge
Context of Assessment	Assessment of performance must be undertaken in a workplace using or implementing one or more competitive systems and practices.

Sector: Health
Sub-Sector: Nursing Care

Level V	Psychiatric Nursing	OR Nursing	ICU Nursing	Nursing Service Mgt	Ophthalmic Nursing	Anesthetic Nursing	Geriatric Nursing	Pediatric Nursing	Neonatal Nursing	Midwifery Service Mgt

Level IV — Comprehensive Nursing | Midwifery

Level III — Nursing Assistance

Level II — Health Care Giving

Acknowledgement

We wish to extend thanks and appreciation to the Ministry of Health, partners, academe and government agencies who donated their time, expertise and resource to the development of this occupational standard

We would like also to express our appreciation to the Experts of Ministry of Education (MoE) and Engineering Capacity Building Program (ecbp) who made the development of this occupational standard possible.

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