

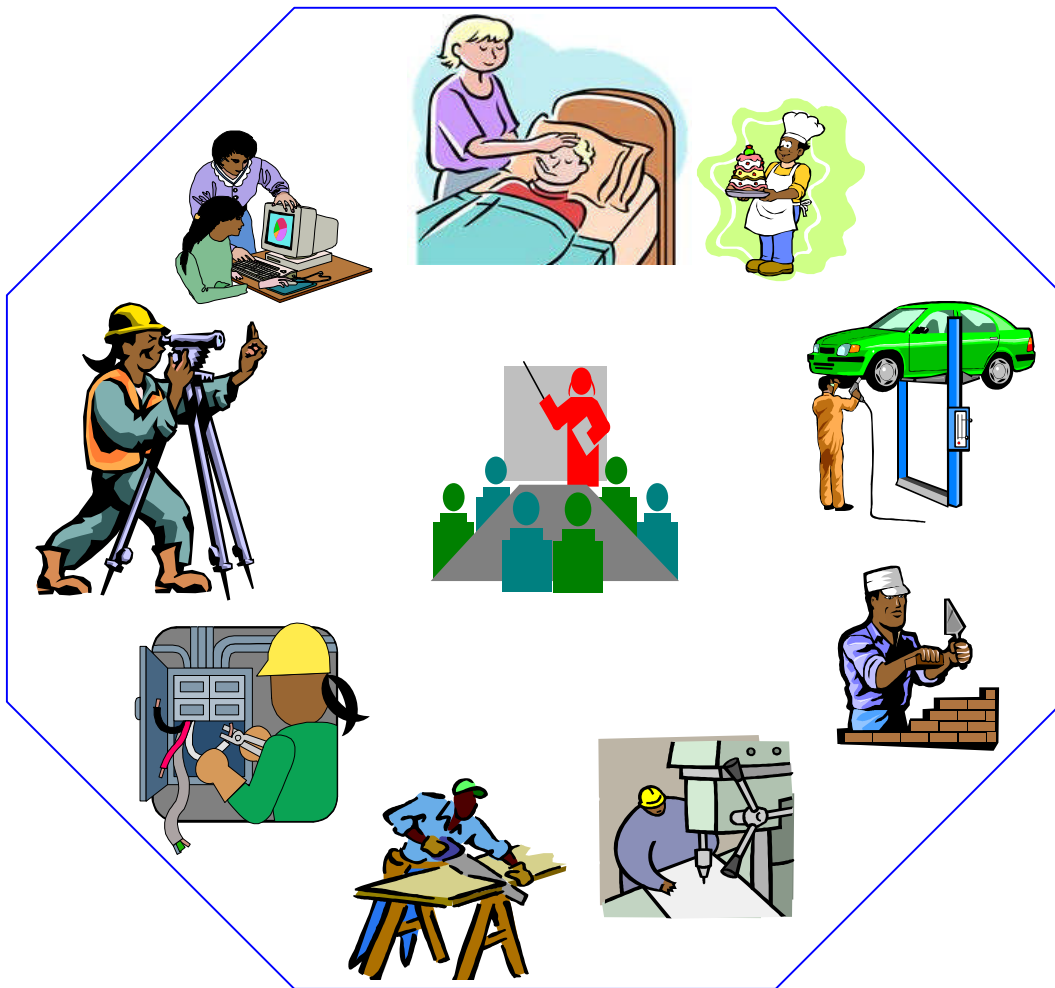
Federal Democratic Republic of Ethiopia
OCCUPATIONAL STANDARD



OPERATING ROOM 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 Ethiopia Occupational Standard which comprised of Units of Competence.

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

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

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

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

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

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UNIT OF COMPETENCE CHART

Occupational Standard: Operating Room Nursing		
Occupational Code: HLT ORN		
NTQF Level V		
HLT ORN5 01 0611 Plan, Monitor, Supervise, Coordinate and Evaluate OR Nursing Service	HLT ORN5 02 0611 Manage Intra-operative Equipment and Technical Support	HLT ORN5 03 0611 Implement Specialist Access and Egress Procedures
HLT ORN5 04 0611 Provide Routine Care and Handling of Equipment within the Operating Suite	HLT ORN5 05 0611 Assist with Preparation of Clients for Operative Procedures	HLT ORN5 06 0611 Practice in the Peri operative Nursing Environment
HLT ORN5 07 0611 Insure High Quality Infection Prevention Standard	HLT ORN5 08 0611 Communicate in Complex or Difficult Situations	HLT ORN5 09 0611 Develop a Disaster Plan
HLT ORN5 10 0611 Identify and Perform the Fundamental Ethical Standards and Values	HLT ORN5 11 0611 Manage quality	HLT ORN5 12 0611 Contribute to Policy Development
HLT ORN5 13 0611 Facilitate and Capitalize on Change and Innovation	HLT ORN5 14 0611 Develop and implement strategies to enhance client safety	HLT ORN5 15 0611 Maintain an effective health work environment
HLT ORN5 16 1012 Develop and Refine Systems for Continuous Improvement in Operations		

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Plan, Monitor, Supervise, Coordinate and Evaluate OR Nursing Service
Unit Code	HLT ORS 5 01 0611
Unit Descriptor	This unit describes the skills and knowledge required to plan, manage and monitor operating room nursing care.

Elements	Performance Criteria
1. Develop plan for operating room health program	<p>1.1 Operating room nursing care program is planned as part of organizational health care system.</p> <p>1.2 Strategic plans are accessed and priorities/issues are identified for the program.</p> <p>1.3 Operating room nursing care priorities are identified in consultation with the family or significant others.</p> <p>1.4 Work plan are Prepared to address organizational and Client priorities.</p> <p>1.5 Budget implications are identified and solicited funding to implement the plan.</p>
2. Manage the plan	<p>2.1 Operating room nursing health care system is managed as per the guideline of the health industry.</p> <p>2.2 Operating room nursing care is received by clients as per the standard.</p> <p>2.3 Adequate follow-up is implemented during management.</p> <p>2.4 Resources are utilized efficiently.</p> <p>2.5 Relevant existing resources are identified for implementation of the program.</p> <p>2.6 Holistic and culturally sensitive health issues are ensured accordingly</p>
3. Monitor the program	<p>3.1 Ongoing operating room nursing care systems are monitored and evaluated periodically as per the institutional guide line.</p> <p>3.2 Operating room nursing health care provision is ensured accordingly.</p> <p>3.3 Resource utilization is monitored as per the plan and organizational policy.</p>

	3.4 Appropriate and corrective measures were taken to solve problems encountered.
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Variables	Range
Resources may include but not limited to:	<ul style="list-style-type: none"> • Health facility • Required human resources • Equipments <ul style="list-style-type: none"> ➤ Endoscopic equipment ➤ Diathermy ➤ Arthroscopic equipment ➤ Lasers ➤ Monitors and Camera Tower ➤ Printers Videos ➤ Lithoplast ➤ Lithoclast/Lithotripter ➤ Saws/Drills ➤ Orthopedic surgical equipment ➤ Microscopes ➤ Gas Cylinders ➤ Warming equipment ➤ Tourniquet ➤ Insufflators/ Laparoflater/ Hystroflator ➤ Electrical and air -powered equipment ➤ Calf compressors/stimulators ➤ ultrasonic surgical aspirator ➤ Cryogen ➤ Headlights ➤ Light Sources ➤ Smoke Evacuators ➤ Suction Equipment ➤ Operating table and attachments ➤ Exsanguinations ➤ Electro-surgical unit ➤ Anti-embolus equipment ➤ Air/electric Power Sources for Drills/Saws ➤ Phacoemulsification machine ➤ Fire Extinguisher ➤ Single Lens reflect/Digital Cameras ➤ Gel pads ➤ Fluid Management Systems ➤ Optical tracking Devices ➤ Cell Saver ➤ Warming equipment ➤ Drains ➤ Catheters

	<ul style="list-style-type: none"> ➤ Intravenous lines ➤ Intravenous Pressure Bags ➤ Financial resource
Stake holder	Family ,significant other ,MOH, and other agencies working on neonatal health
Strategic plans may include:	<ul style="list-style-type: none"> • Health strategic or development plans • Government strategic plans • Organizational strategy plans
Holistically	<ul style="list-style-type: none"> • Is health service which includes social cultural, spiritual, physical and others?
Resources	<ul style="list-style-type: none"> • Human, financial and physical
Client	<ul style="list-style-type: none"> • Surgical patient • Family
Plans may include	<ul style="list-style-type: none"> • Team/ individual plans • Operational plans • Sector plans • Annual plans • Other planning documents

Evidence Guide	
Critical Aspects of Competence	<p>Critical aspects for assessment and evidence required to demonstrate this competency unit</p> <ul style="list-style-type: none"> • Develop plan for operating room care program • Manage the plan • Monitor the program
Underpinning Knowledge and Attitudes	<p>Essential knowledge includes:</p> <ul style="list-style-type: none"> • Principles of planning and monitoring operating room care system, including risk assessment • Leadership in operating room care • Relevant organizational policy and guideline development components and principles. • Techniques in developing plan of action. • Theories, principles and concepts of neonatal nursing • Client networking, financing, cost estimation and planning process

	<ul style="list-style-type: none"> Local client Health Plans
Underpinning Skills	<p>Essential skills includes:</p> <ul style="list-style-type: none"> Communication skill Advanced operating room care skills Research skill Operating room care equipments operation skill Problem solving skills
Resource Implications	<p>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.</p>
Methods of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> Interview / Written Test Demonstration / Observation with Oral Questioning
Context of Assessment	<ul style="list-style-type: none"> 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: Operating Room Nursing Level V	
Unit Title	Manage Intra-operative Equipment and Technical Support
Unit Code	HLT ORS 5 02 0611
Unit Descriptor	This unit describes the knowledge and skills required to manage equipment and technical support during operative procedures. Work is performed within a defined range of functions and known routines and procedures, The work requires a range of well developed skills where discretion and judgment is required, and individuals take responsibility for the quality of their outputs.

Element	Performance Criteria
1. Monitor the performance of instruments and equipment used	<p>1.1 Instruments and Equipments are observed\checked to ensure correct operation.</p> <p>1.2 Warning devices are switched on and are registered that the equipment is safe.</p> <p>1.3 Ensure that Gas, electrical, vacuum supplies are made adequate for the procedure at hand and/or back-up supply is available, in cooperation with operating room technical support staff.</p> <p>1.4 Equipment is observed whilst in use and, if fault develops, action is taken immediately to avoid danger to patients, staff and equipment.</p> <p>1.5 Established procedures are followed to rectify faulty equipment.</p>
2. Attach and detach patient's attachments as required	<p>2.1 Personal protective equipment is used.</p> <p>2.2 Appropriate patient attachments are selected and equipment is attached safely and securely to appropriate sites.</p> <p>2.3 Patients attachments are planned to avoid repositioning during theatre procedures</p> <p>2.4 Patient's attachments are safely detached when no longer required with minimum risk of damage to patient, staff or equipment.</p>

	2.5 Counter-traction is provided during orthopedic and plastic procedures and manipulations.
3.Connect irrigation as directed	<p>3.1 Correct irrigation is selected for operative procedure under the guidance of the surgical team in correct sequence as required.</p> <p>3.2 Irrigation type, sterile integrity and expiry date are checked.</p> <p>3.3 Irrigation is connected to the sterile field using the correct aseptic techniques.</p> <p>3.4 Irrigation is changed using the aseptic techniques.</p> <p>3.5 Volume, type and number of irrigation bags are communicated to scrub nurse.</p> <p>3.6 Used irrigation bags/giving sets are disposed according to the organizational policy and procedures.</p>
4.Adjust surgical equipment	<p>4.1 Surgical equipment is turned on/off under the direction of surgical team and within manufacturers' guidelines.</p> <p>4.2 Surgical equipment is connected to electrical, vacuum, gas supply as required, and in accordance with the standard operating procedures.</p> <p>4.3 Surgical equipment settings are adjusted to suit the surgical medical staff and in consultation with the anesthetic medical staff as required and within manufacturers guidelines.</p> <p>4.4 Readings are communicated to surgical/anesthetic medical staff as required.</p> <p>4.5 Alarms/warnings, abnormal readings and equipment usage times are communicated to medical/surgical staff as required.</p> <p>4.6 Sterile equipment/lines are passed from the surgical team and connected to surgical equipment using aseptic technique.</p> <p>4.7 Surgical equipment is disconnected/ reconnected, moved and adjusted during medical emergencies, repositioning of patient and/or change of surgical procedure in coordination with medical and nursing staff.</p>

Variables	Range
Equipment may	<ul style="list-style-type: none"> Endoscopic equipment

include, but is not limited to:	<ul style="list-style-type: none"> • Diathermy • Arthroscopic equipment • Lasers • Monitors and Camera Tower • Printers Videos • Lithoplast • Lithoclast/Lithotripter • Saws/Drills • Orthopaedic surgical equipment • Microscopes • Gas Cylinders • Warming equipment • Tourniquet • Insufflator/ Laparoflater/Hystroflator • Electrical and air -powered equipment • Calf compressors/stimulators • ultrasonic surgical aspirator • Cryogen • Headlights • Light Sources • Smoke Evacuators • Suction Equipment • Operating table and attachments • Exsanguinators • Electro-surgical unit • Anti-embolus equipment • Air/electric Power Sources for Drills/Saws • Phacoemulsification machine • Fire Extinguisher • Single Lens reflect/Digital Cameras • Gel pads • Fluid Management Systems • Optical tracking Devices • Cell Saver • Warming equipment • Drains • Catheters • Intravenous lines • Intravenous Pressure Bags
Patient attachments may	<ul style="list-style-type: none"> • Anti-embolism equipment • Diathermy earth-plate and lead

include:	<ul style="list-style-type: none"> • Traction devices • Knee Splints • Ted Stockings • Tourniquets
Personal protective equipment may include:	<ul style="list-style-type: none"> • Gown • Gloves • Mask • Head cover • Protective eyewear • Apron • Lead Gown • Shoe cover /OR shoes
Sterile equipment/lines may Include but not limited to:	<ul style="list-style-type: none"> • Irrigation lines • Drill/saw/reamer electrical cords/hoses • Insufflators /Hystroflator/ Laporaflator gas tubing • Suction tubing • Mono-polar/ bi-polar diathermy/phaco leads • Camera lead • Light source fibre-optic cord • Endoscopic Shaver cord • Traction devices • Smoke evacuators • Cranial arc leads • Probe leads
Surgical team may include:	<ul style="list-style-type: none"> • Professional or Registered Operating room \Scrub nurse, • Staff \ circulating nurse • Nurse Anesthetist • Surgeon • Anaesthetist or Anesthesiologist • Other Medical Practitioner • Perfusionist • Other Operating Theatre staff and students
Surgical and operating room equipment	<ul style="list-style-type: none"> • Phacoemulsification machine • Endoscopic equipment • Diathermy • Arthroscopic equipment • Operating chairs • Operating tables and accessories • Positioning aids and equipment • Lasers • Monitors and Camera Tower

	<ul style="list-style-type: none"> • Theatre Lights • Printers Videos • Lithoclast/Lithotripter/ Lithoplast • Surgical instruments for different types of surgery • Saws/Drills • Orthopaedic surgical equipment • Orthopaedic frames • Microscopes • Warming equipment • Tourniquet • Insufflator/ Laparoflator/Hystroflator • Electrical and air -powered equipment • Calf compressors/stimulators • Cell Saver • Cryogen • Headlights • Light Sources • Smoke Evacuators • Suction Equipment
<p>Operative procedure may include but not limited to:</p>	<ul style="list-style-type: none"> • Gastro-intestinal surgery • Surgery of the liver, biliary tract • Repair of hernias • Gynecologic surgery and cesarean birth • Genitourinary surgery • Thyroid and parathyroid surgery • Breast surgery • ophthalmic surgery • Otologic surgery • Rhinologic and sinus surgery • Laryngologic and head and neck surgery • Orthopedic surgery • Neurosurgery • Plastic and reconstructive surgery • Thoracic surgery • Vascular surgery • Cardiac surgery <p>Surgery with special consideration</p> <ul style="list-style-type: none"> • Ambulatory surgery • Pediatric surgery

	<ul style="list-style-type: none"> • Geriatric surgery • Trauma surgery
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Evidence Guide	
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Critical Aspects of Competence	<p>Critical aspects of assessment must include:</p> <ul style="list-style-type: none"> • Ability to identify basic and routine faults and problems with surgical equipment • Follow Procedures for timely set-up, troubleshooting, and shut-down of equipment • Patient Confidentiality • Correct procedure for the adjustment of surgical equipment • Correct procedures for attachment and detachment of relevant equipment from patients in the operating room • Correct sequencing for the movement and connection of surgical equipment in relation to sterile equipment placement, anesthetic and surgical team requirements • Ability to work as part of a team • Manual handling procedures • Overview of sterilization methods • Procedures for maintenance of sterility • Identify the range and purpose of a range of operating theatre equipment • Boundary of role in relation to maintenance- of operating theatre equipment • Recognize hazards related to the use of each item of a range of operating theatre equipment
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Underpinning Knowledge and Attitudes	<p>Essential knowledge must include:</p> <ul style="list-style-type: none"> • Intra-operative patient and staff safety concerning the settings of surgical equipment • Principles for establishing and maintaining the integrity, safety, and efficiency of the sterile field throughout the surgical procedure. • Hazards associated with administration of medication, fluids, blood and blood products, and anesthetic agents • Medico-legal requirements relevant to role and scope of work practice • Manufacturer’s Instructions of Surgical equipment • Hazards and Precautions of Surgical equipment • Basis principles of electricity
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	<ul style="list-style-type: none"> • Medical terms used in the operating room relevant to the OR nurse's role • Anatomy and physiology relevant to safe use of surgical equipment • Patient positioning aides and attachments • Functions of relevant equipment • Range of positions required for operative procedures • Hazards and precautions of various patient positions • Overview of operating room air-conditioning and ventilation systems and their impact on the nurse's role and work practices • Infection control procedures • Occupational health and Safety procedures
Underpinning Skills	<p>Essential skills must include:</p> <ul style="list-style-type: none"> • Aseptic technique • Manual Dexterity during medical emergencies • Communication with other health professionals • Ability to work cooperatively in a team environment • Maintenance of patient dignity and privacy • Problem solving skills required include an ability to use available resources • Ability to deal with difficult co-workers and conflict • Ability to work with others and display empathy with patient and relatives
Resource Requirements	<p>Resource implications includes:</p> <ul style="list-style-type: none"> • Access to appropriate workplace where assessment can take place • Simulation of realistic workplace setting for assessment • Relevant organizational policy, guidelines, procedures and protocols
Method of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	<p>This unit will be most appropriately assessed in the workplace or in a simulated workplace and under the normal range of workplace conditions.</p>

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Implement Specialist Access and Egress Procedures
Unit Code	HLT ORN5 03 0611
Unit Descriptor	This unit involves implementing specialized procedures necessary to overcome major obstacles to safe access and egress at the scene of an incident. This unit may or may not require the use of specialized equipment. It refers to situations that stretch the resources and ingenuity of personnel involved to a limit beyond the requirements of routine procedures.

Element	Performance Criteria
1. Assess the situation/incident	<p>1.1 Situation/incident is assessed by taking into account all factors, including physical and emotional obstacles and communication barriers impacting on safe access/egress.</p> <p>1.2 Situation is assessed by taking into account the need for specialized knowledge, personnel and/or equipment.</p> <p>1.3 The type of specialized knowledge, personnel and/or equipment is determined in line with the needs of the situation/incident.</p> <p>1.4 The type of specialized knowledge, personnel and/or equipment is determined based on the patient care and welfare.</p>
2. Implement necessary procedures to overcome major obstacles and enable safe access and egress	<p>2.1 Specialized knowledge, personnel and/or equipment are requested or arranged according to the assessed need.</p> <p>2.2 Access/egress plan is implemented using the specialized equipment, personnel and/or knowledge necessary to complete the task and ensure patient welfare.</p> <p>2.3 Means of safe access and egress are negotiated and maintained according to the National OHS Acts, as well as Service policies and procedures.</p> <p>2.4 Actions are undertaken in accordance with the standard operation procedure.</p>

3. Monitor specialized access and egress procedure	<p>3.1 Access/egress procedure is monitored constantly to ensure welfare of patient and safety of personnel.</p> <p>3.2 Condition of patient is monitored constantly.</p> <p>3.3 All factors, which might impact on the effectiveness and safety of the procedure are monitored constantly.</p> <p>3.4 All reasonable steps are taken and resources used to ensure continued safety and patient welfare.</p> <p>3.5 Access/egress plan is modified as necessary.</p> <p>3.6 Additional resources are identified and arranged as necessary to complete procedure.</p>

Variables	Range
Physical obstacles may include but are not limited to:	<ul style="list-style-type: none"> • Stairway • Debris • Wreckage • Live power • Water • Confined space • Leaking oxygen and other gases (Gaseous or toxic environment) • Fire • Breakdown in communication lines • Power cut
Physiologic obstacles may include but are not limited to:	<ul style="list-style-type: none"> • Suffocation • Smoke inhalation • Injury • Loss of consciousness
Atmospheric obstacles:	<ul style="list-style-type: none"> • Weather – aircraft/helicopter evacuation
Equipment to enable safe access and egress may include, but are not limited to:	<ul style="list-style-type: none"> • Spine board • Stretcher • Carry sheet • Lifting equipment • Rescue equipment

	<ul style="list-style-type: none"> • Ropes, cutting, climbing equipment • Fire extinguisher
Modes of transport may include, but is not limited to:	<ul style="list-style-type: none"> • Road ambulances • Clinic cars • Buses • Helicopter
Procedures necessary to overcome obstacles may include, but are not limited to:	<ul style="list-style-type: none"> • Removal of wreckage, debris • Use of ropes, pulleys, abseiling

Evidence Guide	
Critical Aspects of Assessment	<p>Critical aspects of assessment must include:</p> <ul style="list-style-type: none"> • Observation of performance in the work environment or a simulated situation • Awareness and implementation of access/egress plans under a variety of conditions requiring specialist equipment and/or procedures • Proper use of various types of access/egress equipment including specialist equipment, in a variety of situations • Recognition that patient welfare is paramount in access and egress procedures • Recognition and observance of OHS requirements • Ingenuity in overcoming difficult access/egress situations
Underpinning Knowledge and Attitudes	<p>Essential knowledge required includes:</p> <ul style="list-style-type: none"> • Dangers associated with various hazardous situations • National and local policies and procedures related to access and egress • OHS policies and procedures relevant to access and egress • Patient care under these circumstances • Relevant specialist equipment and its uses • Factors which may affect safe access/egress and patient welfare
Underpinning Skills	<p>Essential skills required include:</p> <ul style="list-style-type: none"> • Oral communication skills (language competence) required

	<p>to fulfill job roles as specified by the organization/service.</p> <ul style="list-style-type: none"> • Oral communication skills include: <ul style="list-style-type: none"> ➤ 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 • Interpersonal skills required include: <ul style="list-style-type: none"> ➤ Working with others, ➤ Empathy with patient and relatives • Problem solving skills required include: <ul style="list-style-type: none"> ➤ An ability to use available resources, ➤ Analyze information ➤ Make decisions that ensure patient welfare and their safe access/egress using specialized procedures
<i>Resource Implications</i>	<i>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.</i>
Methods of Assessment	<p>Competence may be accessed through:</p> <ul style="list-style-type: none"> • 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

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Provide Routine Care and Handling of Equipment and instrument within the Operating room Suite
Unit Code	HLT ORN5_04_0611
Unit Descriptor	This unit of competency describes the skills and knowledge required to provide basic maintenance support, equipment and instrument set-up and handling, and other routine duties in relation to operating theatre equipment. Work performed requires a broad knowledge, a range of well developed skills and the ability to apply known solutions to a range of predictable situations. Individuals use discretion and judgment, and take responsibility for their own outputs. All tasks are conducted in accordance with the organizational policies and procedures including Occupational Health and Safety (OHS) and infection control guidelines.

Element	Performance Criteria
1. Select and prepare operating room equipment for use by the operating team	<p>1.1 Equipment and equipment consumables required are identified for each theatre case by referencing with the operating theatre team, operating list and surgeon preferences.</p> <p>1.2 Equipment and consumables are set up, positioned and checked correctly in accordance with the organizational policy, procedures and manufacturer's specifications.</p> <p>1.3 Components are assembled, connected and tested as required.</p> <p>1.4 Equipment is re-positioned during theatre procedures as required.</p> <p>1.5 The use of theatre equipment is documented if required.</p> <p>1.6 Equipment is withdrawn from use and replaced if considered not safe for use.</p>
2. Provide operational and maintenance support to the operating room equipment	<p>2.1 Minor equipment problems are identified and corrected.</p> <p>2.2 Ensure equipment is referred to a maintenance specialist for the appropriate maintenance.</p> <p>2.3 Maintenance log book is maintained as required by the organizational policy and procedure.</p>

	<p>2.4 Equipment is scheduled for maintenance according to the needs of the operating room.</p> <p>2.5 Maintain communication with relevant operating theatre staff in relation to equipment maintenance</p>
3. Disassemble and store operating room equipment safely	<p>3.1 Shut-down procedures are followed in accordance with the manufacturer's recommendations</p> <p>3.2 Equipment is correctly assembled and disassembled as required.</p> <p>3.3 Equipment is cleaned in accordance with the organizational policy, procedures and manufacturer's recommendation.</p> <p>3.4 Equipment is stored safely in accordance with the manufacturer's recommendation.</p>
4. Orient theatre team to operate theatre equipment	<p>4.1 Instruction on equipment operation is provided to individual members of the theatre team as required.</p> <p>4.2 Provide in-service training on basic equipment operation as required.</p>
5. Participate in operating theatre equipment evaluations	<p>5.1 Participate as required in team evaluations of equipment being considered for potential purchase.</p> <p>5.2 Equipment assessed from a theatre technician's perspective.</p> <p>5.3 Advice is provided to the team evaluation as required.</p>
6. Maintain surgical instruments in good working condition	<p>6.1 Correct procedure is used for cleaning, decontaminating and sterilizing surgical instruments and equipment.</p> <p>6.2 Functioning of each instrument is checked prior to sterilization.</p> <p>6.3 Ensure that faulty equipment is repaired or replaced before packing.</p> <p>6.4 Appropriate instruments are packed for each surgical procedure according to institutional policies and guidelines.</p>
7. Correct handling of instruments and operating room equipment during surgery	<p>3.1 The instrument table is set up.</p> <p>3.2 Appropriate instrument is identified and hand over according to the surgeon's need.</p> <p>3.3 Aseptic technique is maintained while handling powered surgical instruments during surgery</p> <p>3.4 Aseptic technique is used throughout the surgical procedure.</p> <p>3.5 Ensure a correct initial and final instrument and swab count is carried out and documented.</p>

	<p>3.6 Correct procedure is used for dismantling the instrument table.</p> <p>3.7 The procedure is document according to institutional policy.</p>
8. Prevent injury and minimize hazards in the operating room	<p>8.1 Hazards are recognized <i>in the OR</i> environment and take advantage of every opportunity to reduce risk and promote safety.</p> <p>8.2 Equipment is checked according to the manufacturer recommendations, ensure proper functioning, take corrective action and report when faulty equipment and/or environmental hazards are detected.</p>

Variables	Range
Operating theatre may be:	<ul style="list-style-type: none"> • A general hospital operating room • women's or pediatric hospital • Day surgical unit or day procedure unit
Operating room equipment includes but is not limited to:	<ul style="list-style-type: none"> • Phacoemulsification machine • Endoscopic equipment • Diathermy • Arthroscopic equipment • Operating chairs • Operating tables and accessories • Positioning aids and equipment • Traction kits • Knee immobilizers • Shoulder straps • Cervical straps • Lasers • Monitors and camera tower • Theatre lights • Printers videos • Lithoplast • Lithoclast/lithotripter • Saws/drills • Orthopedic surgical equipment • Orthopedic frames • Microscopes • Gas cylinders, regulators and flow meters

	<ul style="list-style-type: none"> • Warming equipment • Tourniquet • Insufflators/Laparoflater • Electrical and air-powered equipment • Calf compressors/stimulators • Light sources • Waste receptacles • Gel pressure care pads • Hair clippers • Pat slide • Image intensifier/lead gowns • Cell saver • Cryogen • Headlights • Light sources • Smoke evacuators • Suction equipment • Resuscitation cot/porta cot
Equipment consumables may include:	<ul style="list-style-type: none"> • Paper • Video cassettes • Diathermy plates • ECG dots • Fluids • Plasters • Stockinet • Camera film • Absorbent under pads • Suction liners/tubing • Pat slide spray • Insufflators filters • Globes • TED stockings • Waste bags
Surgical instruments may include:	<ul style="list-style-type: none"> • Cutting and dissecting instruments such as scalpels, scissors • Grasping and holding instruments such as forceps • Clamping and occluding instruments such as artery clamps, crushing clamp • Exposing and retracting instruments such as retractors and spatulas

	<ul style="list-style-type: none"> • Suturing and stapling instruments such as needle holders, stapler • Viewing such as speculums, endoscopes • Measuring instruments such as rulers, depth gauge trial sizers • Suctioning and aspirating instrument tips such as Yankauer tip, Frazier tip, Trocar and cannula • Dilating and probing instruments • Accessory instruments such as mallet • Micro instrumentation are used for improved outcome of surgical intervention, the instruments are very fine and delicate and used for cutting, exposure, gross and fine fixation and suture and needle manipulation which are designed to hand movement under the microscope • Powered instruments (air powered or electrically powered) such as saws, drills, dermatomes and nerve stimulators
<i>aseptic technique may include:</i>	<ul style="list-style-type: none"> • Destroying or elimination of microorganisms by sterilization using different ways: <ul style="list-style-type: none"> ➤ Steam sterilization ➤ Chemical sterilization ➤ Disinfection ➤ Pasteurization
Possible hazards in the operating theater may include be	<ul style="list-style-type: none"> • Electrocutation • Fire • Burns • Mechanical injury to patient and personnel • Explosion • Contamination and infection of personnel from splatters • Irradiation • Muscle and back injury while shifting a patient • Chemical injury due to exposure to toxic sterilizing, preservative and anesthetic agents

Evidence Guide	
Critical Aspects of Competence	Critical aspects of assessment must include: <ul style="list-style-type: none"> • Performance observed in the work environment or a

	<p>simulated situation</p> <ul style="list-style-type: none"> • Awareness and implementation of operating room technique requiring specialist equipment and/or procedures • Surgical instruments and equipment are Properly used in a variety of surgical intervention • Patient welfare is Recognize as paramount in access and egress procedures • OHS requirements recognized and observed • Ingenuity overcome in difficult access/egress situations
<p>Underpinning Knowledge and Attitudes</p>	<p>Essential knowledge must include: This includes knowledge of:</p> <ul style="list-style-type: none"> • Anatomy and physiology relevant to operating room nurse • Functions of relevant equipment • Infection control procedures • Medical terms used in the operating room relevant to the worker's role • Medico-legal implications of operating room nursing role and work procedures • Occupational health and safety procedures • Risks and precautions in relation to anesthetic procedures relevant to the operating room nursing • Risks and precautions in relation to client positioning: use of equipment, aids and attachments for client positioning
<p>Underpinning Skills</p>	<p>Essential skills must include the ability to: <i>Essential skills:</i></p> <ul style="list-style-type: none"> • Use manual handling procedures • Work as part of a team with operating room health professionals. In addition, the candidate must be able to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role. This includes the ability to: • Communicate with health professionals • Deal with difficult co-workers and conflict • Solve problems including the ability to use available resources • Undertake preparation of clients for application of relevant equipment • Use oral communication skills as required to fulfill job roles in a safe manner and as specified by the organization • Use reading and writing skills as required to fulfill job roles • Work cooperatively in a team environment

	<ul style="list-style-type: none"> • Work with others and display empathy with client and relatives
Resource Requirements	<p>Resource implications includes:</p> <ul style="list-style-type: none"> • Access to appropriate workplace where assessment can take place • Simulation of realistic workplace setting for assessment • Relevant organizational policy, guidelines, procedures and protocols
Method of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	<p>This unit will be most appropriately assessed in the workplace or in a simulated workplace and under the normal range of workplace conditions.</p>

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Assist with Preparation of Clients for Operative Procedures
Unit Code	<u>HLT ORS 5 05 0611</u>
Unit Descriptor	<p>This unit of competency describes the skills and knowledge required to provide pre- and intra- operative care to the client. Work is performed within a defined range of functions, known routines and procedures, and in coordination with the operating room team. The work requires a range of well developed skills where discretion and judgment is required, and individuals take responsibility for the quality of their outputs. All activities are carried out in accordance with the procedures, surgeons' preference, organization policies, and infection control guidelines in collaboration with the rest of the operating room team.</p>

Element	Performance Criteria
1. Prepare client in accordance with the organizational policy and procedure	<p>1.1 Pre-operative visit is done by the peri-operative nurse a day before:</p> <ul style="list-style-type: none"> • Giving psychosocial support to enhance coping mechanism and decrease anxiety • Giving factual information and clarification of misunderstandings • Enquiring informed consent before any procedure • Reviewing critical data before the plan of care for the

	<p>procedure</p> <ul style="list-style-type: none"> • Applying antiembolic stockings when relevant • Encouraging patient to void if not catheterize • Considering of patient's welfare and individualized need • Comforting the patient in pre-surgical holding area <p>1.2 Personal protective equipment is used correctly</p>
<p>2. 2. Assist with client transfer</p>	<p>2.1 Correct operating table and table orientation identified before client is transferred.</p> <p>2.2 Prepare clients as required prior departure inform relevant personnel of actions to be performed and transport to OR</p> <ul style="list-style-type: none"> • Detach equipment not required • Safely and correctly adjust equipment attached to client during transfer • Maintain a safe working area and clear passage at all times and follow correct manual handling procedures • Minimize client discomfort • Re-connect and position equipment once <i>transfer</i> is completed • Maintain client's dignity before, during and after transfer
<p>3. Position clients for operative procedure</p>	<p>3.1 Client is informed of positioning procedure, reassure and seek co-operation as required</p> <p>3.2 Ensure relevant equipment is available and correctly positioned.</p> <p>3.3 Individual client's needs are taken into account and confirm with relevant personnel.</p> <p>3.4 Client is protected from injury during the positioning procedures.</p> <p>3.5 Correct manual handling procedures are followed and assistance is sought if required.</p> <p>3.6 <i>Client is safely positioned</i> to meet the requirements of the anesthetist, surgeon and the client's condition.</p> <p>3.7 Confirmation of correct position is sought from the anesthetist and surgeon.</p> <p>3.8 Client is hold in correct position as required by anesthetist and surgeon.</p> <p>3.9 Client's dignity is maintained.</p>

<p>4. Apply sterile technique while preparing the patient for surgery</p>	<p>4.1 Application of sterile technique to maintain level of sterility and disinfection accordingly</p> <p>4.2 Follow principles of sterile techniques:</p> <ul style="list-style-type: none"> • In preparation for invasive procedure by sterilization of necessary materials and supplies • In preparation of the sterile team to handle sterile supply and intimately contact the surgical site by scrubbing, gowning and gloving • In the creation and maintenance of the sterile field including handing of instrument and stich, skin preparation and draping of the patient • In the maintenance of sterility throughout the entire surgical procedure
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Variables	Range
<i>Prepare</i>	Preparation of patient include: <ul style="list-style-type: none"> • Putting hospital gown • Removal of jewelry, dentures and removable bridges • All removable Prosthesis (eye, extremity, contact lenses, hearing aids, eye glasses) removed for safe keeping • Hair braided and covered
<i>relevant personnel may include:</i>	<ul style="list-style-type: none"> • Anesthetist • Surgeon • The scrub nurse • Circulate nurse • Other relevant personnel • Support staff
<i>Protect may include:</i>	<ul style="list-style-type: none"> • Protecting the patient from any possible injury while transferring, positioning and cleaning
<i>sterile technique may include but not limited to:</i>	<ul style="list-style-type: none"> • Chemical sterilization • Dry heat sterilization • Steam sterilization
<i>Disinfection may include but not limited to:</i>	<ul style="list-style-type: none"> • Chemical disinfection according to the level e.g. high, intermediate and low • Physical disinfection e.g. boiling water (optional)

Evidence Guide	
Critical Aspects of Competence	<p>Critical aspects of assessment must include:</p> <ul style="list-style-type: none"> • The individual being assessed must provide evidence of specified essential knowledge as well as skill • Consistency of performance should be demonstrated over the required range of situations relevant to the workplace • Where, for reasons of safety, space, or access to equipment and resources, assessment takes place away from the workplace, the assessment environment should represent workplace conditions as closely as possible <p>Context of and specific resources for assessment:</p> <ul style="list-style-type: none"> • Access to appropriate workplace where assessment can take place and relevant organization policy, guidelines, procedures and protocols • Simulation of realistic workplace setting assessment • Method of assessment • Observation of simulation and/or observation of work activities while preparing clients for operative procedures • Discussion of physical and/or behavioral contingency scenarios involving duty of care • Authenticated transcripts of relevant qualification education/training courses/ • Recognition of relevant life/work experience • Written assignments/projects or questioning should be used to assess knowledge • Authenticated reports of experience in preparation of clients for operative procedures
Underpinning Knowledge and Attitudes	<p>Essential knowledge must include:</p> <p>The candidate must be able to demonstrate essential knowledge required to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role</p> <p>This includes knowledge of:</p> <ul style="list-style-type: none"> • Anatomy and physiology relevant to the operating room nurse for safe and specific usage of instrument and supply while assisting the surgeon and client handling • Functions of relevant equipment • Infection control procedures • Medico-legal implications of operating room nurse role and work procedures • Occupational health and safety procedures

	<ul style="list-style-type: none"> • Range of positions required for operative procedures as per anesthetics and surgeon preference • Risks and precautions in relation to anesthetic procedures relevant to the operating room nurse role • Risks and precautions in relation to client positioning • Use of equipment, aids and attachments for client positioning
Underpinning Skills	<p>Essential skill must include: This includes skills to:</p> <ul style="list-style-type: none"> • Demonstrate client transfer techniques • Follow organization policy and procedures for client confidentiality and privacy • Use client positioning techniques and identify hazards • Use correct procedures for attachment and detachment of relevant equipment from clients in the operating room • Use manual handling procedures • Work as part of a team in the operating room environment • Effectively do the task outlined in elements and performance criteria of this unit, • Manage the task and manage contingencies in the context of the identified work role This includes the ability to: <ul style="list-style-type: none"> ➤ Communicate with other health professionals ➤ Deal with difficult co-workers and conflict ➤ Maintain the client's dignity and privacy ➤ Maintain work practices which address the comfort, Dignity and needs of clients ➤ Solve problems including the ability to use available resources ➤ Take into account opportunities to address environmental safety, responsibility and sustainable practice ➤ Undertake preparation of clients for application of relevant equipment • Work cooperatively in a team environment • Work with others and display empathy with client and relatives
Resource Requirements	<p>Resource implications includes:</p> <ul style="list-style-type: none"> • Access to appropriate workplace where assessment can take place • Simulation of realistic workplace setting for assessment

	<ul style="list-style-type: none"> • Relevant organizational policy, guidelines, procedures and protocols
Method of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	<p>This unit will be most appropriately assessed in the workplace or in a simulated workplace and under the normal range of workplace conditions.</p>

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Practice in the Peri-operative Nursing Environment
Unit Code	HLT ORS 5 06 0611
Unit Descriptor	This competency unit describes the skills and knowledge required to enable the peri-operative nurse to anticipate needs of the patient and surgical team and rapidly initiate appropriate nursing intervention. Peri-operative nursing care is part of patient advocacy of doing for the patient what needs to be done to provide a safe and caring environment.

Element	Performance Criteria
1. Work as part of the multi-disciplinary health care in the peri-operative	<p>1.1 The multi-disciplinary health care team is supported appropriately in managing care needs of clients in the peri-operative environment.</p> <p>1.2 Positive outcome of care is attained within the peri-operative environment by working as a team effectively and having a good communication skill.</p> <p>1.3 The philosophical framework for managing care is incorporated into practice for the client in the peri-operative environment.</p> <p>1.4 The role of emergency service personnel, referring agencies and other hospital department staff as contributors is recognized to the initial/emergency care needs of the client in the peri-operative environment.</p>
2. Contribute to the assessment of clients undergoing surgical intervention	<p>2.1 Medical record is reviewed; important findings are validated by corroborating with patient. Information is analyzed, interpreted and prioritized. A holistic assessment of the client is performed using the assessment parameters that are monitored throughout peri-operative care.</p> <p>2.2 Data collected is synthesized and clinical judgment about the patient is labeled as nursing diagnosis. It can be actual or risk for based on the patient assessment and peri-operative nurse's clinical judgment.</p> <p>2.3 Generic outcomes are identified that applies to all patients undergoing operative or other invasive procedures. Additional outcomes are identified based on individual</p>

	<p>patient assessment and nursing diagnosis.</p> <p>2.4 Nursing intervention is implemented and should be specific, realistic and measurable.</p> <p>2.5 Significant findings are recognized in physiological and/or psychological variables promptly by dealing with it or report to the appropriate health team members.</p>
<p>3. Contribute to planning care for peri-operative client</p>	<p>3.1 An individualized plan of care is developed for client in the peri-operative environment in consultation/collaboration with the client and the health care team.</p> <p>3.2 Nursing care plan that reflects specific nursing care requirements is ensured in accordance with the health unit policy.</p> <p>3.3 Information is incorporated into a plan for the patient's care to maximize physical function and minimize potential complications.</p> <p>3.4 Care plan that reflects client's current nursing needs is ensured, and nursing actions are designed.</p> <p>3.5 Understanding of risk management principles is demonstrated in planning client's care.</p> <p>3.6 Nursing interventions are identified to achieve the identified outcomes.</p> <p>3.7 Requirements of client (and identified significant other/s) for health promotion and education are identified to enhance the implementation of nursing care plan.</p> <p>3.8 Regular review of plan of care is carried out and modified to reflect changes in the client's condition.</p> <p>3.9 Ensure health teaching and discharge planning is incorporated into practice in line with the established policies and procedures for discharge/transfer.</p>
<p>4. Perform clinical nursing actions appropriate to the care of peri-operative clients</p>	<p>4.1 Nursing plan of care is carried out; and nursing interventions are prioritized according to the client's needs.</p> <p>4.2 Nursing interventions are modified using critical thinking and problem solving approaches to reflect changes in the client's condition.</p> <p>4.3 Equipment is checked according to the manufacturer's recommendations, proper functioning ensured and</p>

	<p>corrective action taken and reported when faulty equipment and/or environmental hazards are detected.</p> <p>4.4 Gather equipment and supplies, participate in guide/supervise patient preparation, transfer to OR bed, anesthesia induction, antimicrobial skin preparation, draping, patient positioning, monitoring of physiologic alterations during surgery and patient discharge(transfer from OR bed discharge to post anesthesia/postoperative unit).</p> <p>4.5 Monitor nursing interventions, identify any that fail to address client needs and revise them in consultation/collaboration with the health care team.</p> <p>4.6 Environmental hazards and client risk factors are recognized and a safe environment appropriate for the age specific population is maintained.</p> <p>4.7 The principles of infection control are applied to all activities within the peri-operative environment, applying a surgical conscience at all times.</p> <p>4.8 Medication administration is ensured is based on the sound knowledge of principles of drug actions and side effects in accordance with the health unit policies and procedures.</p>
<p>5. Evaluate effectiveness of nursing interventions and planned care in the peri-operative environment</p>	<p>5.1 Evaluate responses of client/s and identified significant other/s to nursing interventions, and modify and document in accordance with the health unit policy</p> <p>5.2 Determine whether outcomes were met; incorporate outcomes that have been met and those that are pending in report to nurse in post anesthesia/postoperative unit).</p> <p>5.3 Client understanding of their condition, medications and therapeutic regimes is assessed prior to discharge/transfer.</p> <p>5.4 Client's acceptance of specific health promotion initiatives is evaluated prior to discharge/transfer.</p> <p>5.5 Understanding of identified significant other/s in relation to current condition of client and their ongoing management is assessed and reviewed.</p> <p>5.6 Appropriate emergency response to adverse reactions or peri-operative complications is identified and initiated as required.</p> <p>5.7 Any emergency treatment is reported and documented, and the client's response to the treatment is seen.</p>

Variables	Range
Multidisciplinary health care team members may include:	<ul style="list-style-type: none"> • Nurses: Registered OR nurse, staff nurse, nursing assistants • Surgeons and assistants • Anesthesiologist and Anesthetists • Support Staff including, SSD Technical Aids, cleaners, Porters, Stockroom Assistants, Clerical Support. • Allied health staff including, radiographers and physiotherapists, lab technicians, prosthetic and orthodontic technicians, etc
Clients may include:	<ul style="list-style-type: none"> • Inpatients • Outpatients ranging from neonates to the frail aged client
Health care setting may include:	<ul style="list-style-type: none"> • Peri-operative • Hospital setting • Free standing Day Surgery/Ambulatory Care facility
Client assessment may include:	<ul style="list-style-type: none"> • Performance of activities of daily living • Loss of physical function • Perceptions of pain • Accompanying trauma or injury • Self image and body image concerns • Impact on family or significant others • Expectations of surgical procedure • Expectations of post operative procedures • Levels of mobility • Presence of co-morbidities and previous medical history • Skin integrity • Previous surgical intervention • Fear and anxiety associated with surgical intervention • Psycho social considerations • Physiological alterations associated with surgical intervention • Pre-operative, Intra-operative and Postoperative

	<p>complications</p> <ul style="list-style-type: none"> • Level of client knowledge regarding their surgical experience
<p>Assessment parameters may include:</p>	<ul style="list-style-type: none"> • Physiologic • Medical diagnosis • Surgical site and procedure • Result of diagnostic studies • Laboratory tests • Review of systems • Mobility range of motion • Elimination pattern (e.g. continence) • Sleep, rest, exercise patterns • Medication • substance abuse • Psychosocial • Cognition (e.g. mental status) • Cultural and religious beliefs • Perception/ Insight of procedure • Expectations of care • Prosthetics(internal or external) • Sensory impairments • Allergies • Skin condition • Nutritional and metabolic status • Height and weight • Vital signs • Knowledge base (e.g. Informed consent) • Readiness to learn • Ability to understand and retain teaching Stress level (e.g. anxiety, fear) • Coping mechanisms • Support from family or significant others • Attitude and motivation(e.g. health management) • Affective responses(ability to express feelings(• Speech characteristics(e.g. language) • Non-verbal behavior

<p>Planning appropriate care may include:</p>	<ul style="list-style-type: none"> • Peri-operative nursing records • Nursing care plans • Treatment plans • Discharge plans • Community referrals • Health teaching • Rehabilitation plans
<p>Evaluation of planned outcomes may include:</p>	<ul style="list-style-type: none"> • Monitoring of clients response to surgical procedure • Clarification of client understanding of health teaching, discharge planning or return appointment schedule • Client understanding of care needs post discharge
<p>Actual and potential problems may include but are not limited to:</p>	<ul style="list-style-type: none"> • Altered breathing pattern • Altered state of consciousness • Ineffective air way clearance • Altered fluid and Electrolyte balance • Fluid volume excess • Decreased cardiac out put • Allergy/impaired skin integrity • Alteration of nervous system • Altered elimination pattern • Impaired physical mobility • Altered body temperature • Altered elimination pattern • Risk for infection • Altered nutrition less than body requirement
<p>Clinical nursing skills may include but are not limited to:</p>	<ul style="list-style-type: none"> • Airway management • Use of suction equipment • Maintenance of normothermia • Preoperative nursing assessment • Preparing the client for anesthesia and surgical intervention • Work as a team on the surgical field • Manage and supply the instruments according to the specific procedure and the surgeon's need • Practice in the various roles of the peri-operative nurse

	<ul style="list-style-type: none"> • Positioning of the client for surgical intervention • Medication management • Urinary catheterization • Physiological monitoring equipment • Role in transfusion / fluid management • Assessment and monitoring of hemodynamic status and fluid replacement therapies • Handover to post anesthesia care unit or recovery room • Principles of decontamination and sterilization • Material resource management • Aseptic technique • Management of the client in the post anesthetic care unit • Caring for the immediate post-operative client • Preparation of the peri-operative environment • Discharge planning considerations • Handover and documentation • Client education
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Evidence Guide	
Critical Aspects of Competence	<p>Critical aspects for assessment and evidence required to demonstrate this competency unit:</p> <ul style="list-style-type: none"> • Work as part of the multi-disciplinary health care in the peri-operative environment • Assessment of clients undergoing surgical intervention • Planning care for peri-operative client • Perform clinical nursing actions appropriate to care of peri-operative clients • Evaluate effectiveness of nursing interventions and planned care in the peri-operative environment
Underpinning Knowledge And Attitudes	<p>Essential knowledge includes:</p> <ul style="list-style-type: none"> • Adequate knowledge of anatomy, physiology and pathophysiology related to a diverse range of surgical conditions • Existing standards relating to electrical hazards, radiation hazards, and sharps disposal • Principles of health assessment

	<ul style="list-style-type: none"> • Philosophy of peri-operative nursing • Be aware of potential problems which can occur during surgical intervention and measures should be taken • Complications of surgical procedures and their management • Emergency and first aid treatment of surgical procedures • Legislative requirements for practice, including Nurses Act, Organ and Tissue Transplantation Act, Freedom of Information Act and Occupational Health and Safety Act • Medical terminology • Confidentiality and privacy • Organization policy and procedure • Infection control policies and procedures specific to peri-operative environment • Surgical asepsis • Principles of effective documentation • Workplace health and safety legislation • Health-illness continuum • Client rights and responsibilities • Assist in the use of complex technologies, such as anesthetic machines, lasers, and endoscopic equipment • Reflective practice • Client advocacy • Health teaching • Grief and loss • Basic knowledge of medication management – pharmacodynamics and pharmaco - kinetics • Participating as a member of the health care team • Factors influencing self esteem • Cultural and spiritual beliefs and practices • Literature and professional bodies associated with peri-operative care and management
Underpinning Skills	<p>Essential skills to:</p> <ul style="list-style-type: none"> • Effective communication skill with client, group, colleagues and relevant others. • Apply relevant admission and discharge tools according to

	<p>organization policy</p> <ul style="list-style-type: none"> • Apply relevant health unit assessment tools according to organization policy • Apply cognitive processes to reflect problem solving and analysis in the planning, implementation, and evaluation of care to clients • Use education and teaching strategies relating to health promotion and practical task applications • Demonstrate accountability for personal outputs and broad client group outcomes • Use Information technology systems • Apply clinical nursing skills, including: <ul style="list-style-type: none"> ➢ Pre-procedure baseline observations ➢ Facilitation of activities of daily living ➢ Admission and discharge procedures ➢ Preparation of the client for a surgical procedure ➢ Administration of pre operative, post operative medications ➢ Electrocardiography ➢ Oral suctioning ➢ wound management ➢ Management of intravenous therapy including blood replacement ➢ Management of surgical drains ➢ Collection of specimens for pathology studies ➢ Support scrub nurse ➢ Material resource monitoring ➢ Intra operative observations ➢ Post operative observations including neurovascular and neurological ➢ Maintenance of patent airway ➢ Administration of oxygen ➢ Monitoring of blood glucose level ➢ Maintenance of fluid balance ➢ Management of skin integrity ➢ Recovery of client post anesthetic ➢ Pain management ➢ Emergency management of post operative complications
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	<ul style="list-style-type: none"> ➤ Deep breathing and coughing ➤ Incentive spirometry ➤ Care of the unconscious client ➤ Insertion of indwelling catheter ➤ Application of anti-embolism stockings • Diligent application of infection control procedures in the peri-operative environment • Apply professional standards of practice: <ul style="list-style-type: none"> ➤ State/territory Nursing and Midwifery Regulatory Authority standards of practice ➤ Scope of nursing practice decision making framework
Resource Requirements	<ul style="list-style-type: none"> • Assessment must be completed in the workplace. • Relevant guidelines, standards and procedures
Method of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	<p>Assessment may occur on the job or in a workplace simulated facility with process equipment, materials and work instructions</p>

Occupational Standard: Operating Room Nursing Level V	
Unit of competence	Insure High Quality Infection Prevention Standard
Unit Code	HLT ORN5 07 0611
Unit descriptor	This unit describes the skills and knowledge required to the application of aseptic technique. Surgical aseptic principles and practices are the foundation for infection control in achieving optimal primary wound healing, prevent surgical infection and minimize the length of recovery from surgery. The unit also describes the knowledge of cause of infection; and methods of controlling infection in the peri operative environment using precautions. The unit oversees the adherence to establish infection control guidelines and duty of care throughout the operating room work environment. This unit applies to a role with broad responsibilities for development, implementation and monitoring of infection control policy and procedures.

Element	Performance Criteria
1. Identify potential cause of infection and destroy or eliminate	<p>1.1 Relevant information is gathered and cause of infection identified.</p> <p>1.2 Awareness is developed to potential microorganisms.</p> <p>1.3 Relevant procedures are followed to eliminate or destroy potential microorganisms in the peri-operative environment.</p>
2. Ensure infection control measures met in the peri-operative environment	<p>2.1 Insure standard precaution is used during the entire operative care.</p> <p>2.2 Relevant information and resources are provided to enable effective method of controlling of infection.</p> <p>2.3 Insure the engineering practice or the layout of the operating room are met the criteria for infection control.</p>
3. Establish aseptic practice to control infection	<p>3.1 Established standards of aseptic technique in the operative room environment are ensured and maintained.</p> <p>3.2 Insure traffic is controlled during the surgical intervention.</p> <p>3.3 Insure sterile surgical attire, surgical hand scrub, Gowning, gloving, skin preparation, and draping are established according to the principle of aseptic technique.</p> <p>3.4 Method of disposal for soiled and used items is maintained using standard precaution.</p> <p>3.5 Types, way and method of disposal of waste e.g. soiled gauze and bandage, papers, sharps and removed tissue, fluid</p>

	or body part are identified to prevent hazard .
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Variable	Range statement
<i>Microorganisms may include:</i>	<ul style="list-style-type: none"> • Bacteria • Fungi • Protozoa • Algae • viruses
<i>cause of infection may include:</i>	<ul style="list-style-type: none"> • staphylococci • enterococci • Pseudomonads • Streptococci • Mycobacterium tuberculosis • virus
<i>Precautions may include:</i>	<ul style="list-style-type: none"> • Universal precaution (e.g. gown, glove, masks and protection) to all people regardless of their presumed infection status. • Standard precaution is a single set of precaution incorporating the major feature of both universal precaution and body substance isolation. • Enhanced precaution include air borne infection isolation precaution (formerly transmission based)
<i>aseptic technique may include:</i>	<ul style="list-style-type: none"> • Restrict microorganisms in the environment, on equipment, supplies, and prevent normal body flora from contaminating surgical wound.
<i>methods of controlling infection may include:</i>	<p>Environment of care</p> <ul style="list-style-type: none"> • Design surgical suite to minimize and control the spread of infectious organisms. <p>Work practice</p> <ul style="list-style-type: none"> • Sterilization according to sterility assurance level(SAL) for elimination or distraction of all microbial life using: <ul style="list-style-type: none"> ➤ Steam sterilization ➤ Chemical sterilization ➤ Dry heat sterilization ➤ Disinfection (a process of eliminating many of the pathogenic organisms except bacterial spores from inanimate objects) ➤ Pasteurization
<i>aseptic principles and</i>	<ul style="list-style-type: none"> • Surgical aseptic principles

<i>practices may include but not limited to:</i>	<ul style="list-style-type: none"> • Traffic control • Surgical attire • Surgical hand scrub • Gowning • Gloving • Patient skin disinfection and preparation • Creating the sterile field with surgical drapes • Removing soiled gown, gloves and mask • Operating room environment cleaning
<i>Hazards and risks may include:</i>	<ul style="list-style-type: none"> • Infectious waste • Sharps
<i>Waste may include:</i>	<ul style="list-style-type: none"> • Linen or drape • Gowns • masks • Clothing • Towels • Soiled packs and gauze • Paper • Removed body part, tissue or fluid •
<i>Linen may include but not limited to:</i>	<ul style="list-style-type: none"> • Gown • Drape • Towel
<i>Protective clothing include:</i>	<ul style="list-style-type: none"> • Safety glasses • Gloves • Gowns • Masks • Head cover • Plastic aprons • Protective shoes

Evidence Guide

Critical aspects of competence	<p>A candidate must be able to demonstrate the ability to:</p> <ul style="list-style-type: none"> • Explain how infection is spread and measures to manage and monitor infection control • Describe potential cause of infection in operating room environment • Implement and monitor strategies to address infection control across a work environment • Communicate and maintain workplace policies and procedures
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	<ul style="list-style-type: none"> • Implement cross infection and prevention strategies • Integrate learning from the broader health profession into improved work practices • Provide leadership in the development and communication of policies and procedures
Underpinning Knowledge and Attitudes	<p>Demonstrates knowledge and understanding of:</p> <ul style="list-style-type: none"> • How infection is spread • Measures to manage and monitor infection control • OHS implications of work • Potential hazards in a health environment • Processes for managing and developing effective workplace policies and procedures relating to infection control • Time management strategies to set priorities
Underpinning Skills	<p>Skills include the ability to:</p> <ul style="list-style-type: none"> • Develop, implement and monitor strategies to address infection control across a work environment • Communicate and maintain workplace policies and procedures relating to work performance in relation to infection control and duty of care, including: <ul style="list-style-type: none"> ➤ Helping others achieve planned outcomes ➤ Managing unsatisfactory performance and use of discipline as necessary ➤ Minimizing disruption to the work environment ➤ Safe and competent use of technology • Develop staff on OHS and hazard identification • Implement cross infection and prevention strategies • Integrate learning from the broader health profession into improved work practices • Manage problems relating to infection control • Provide leadership in the development and communication of policies and procedures • Use effective communication skills to ensure application and maintenance in the workplace of: <ul style="list-style-type: none"> ➤ Procedures appropriate to the cleaning area and purpose ➤ Selection and use of appropriate equipment and chemicals for cleaning and sanitizing in the workplace ➤ Standard and additional precautions
Resources Implication	<p>The following resources MUST be provided.</p> <ul style="list-style-type: none"> • Access to real or appropriately simulated situations, including work areas, materials and equipment, • Documentation and information on workplace practices and OHS practices.

	<ul style="list-style-type: none"> • Specifications and work instructions • Approved assessment tools • Certified assessor /Assessor's panel
Methods of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • 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) <p>Assessment methods must confirm the ability to access and correctly interpret and apply the essential underpinning knowledge</p>
Context of assessment	<p>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 competences relevant to the job function.</p>

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Communicate in Complex or Difficult Situations
Unit Code	HLT ORN5 08 0611
Unit Descriptor	This unit involves communication where there are special difficulties in conveying or receiving information in the context of providing peri-operative nursing services. This unit includes conveying complex information with patients, family members or significant others, 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	<p>1.1 Information is conveyed clearly and accurately.</p> <p>1.2 Recipient's understanding of the information is monitored and the mode of communication is adjusted according to the needs of the situation.</p> <p>1.3 Interaction is conducted consistent with the urgency of the situation presented and in accordance with the standard peri-operative nursing procedure.</p>
2. Communicate with allied non-service personnel	<p>2.1 Information is conveyed clearly and readily clarified when necessary.</p> <p>2.2 Ambulance requirements are communicated clearly and in a manner that reflects an appropriate level of authority.</p> <p>2.3 Direction, advice and assistance are sought when required and followed as appropriate to the situation.</p> <p>2.4 Information conveyed is timely and in accordance with the needs of the situation.</p> <p>2.5 Difficulties in written and oral communication are recognized and resolved using the appropriate communication skills and techniques.</p> <p>2.6 Role and authority of allied personnel are clarified and respected.</p>
3. Overcome barriers to	3.1 Barriers to effective communication are detected by continuous monitoring of the situation and using

communication	<p><i>communication equipment.</i></p> <p>3.2 Situation needs are identified, clarified and confirmed using the appropriate communication skills and techniques.</p> <p>3.3 Actions are undertaken in accordance with relevant local ambulance standard operation procedure.</p> <p>3.4 Discretion and confidentiality are observed and members of the public are treated with respect at all times.</p> <p>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.</p> <p>3.6 Interaction is conducted in consistent with the urgency of the situation presented and in accordance with the service policy and procedures.</p> <p>3.7 Conflict (and potential for conflict) is dealt with in a manner that prevents escalation.</p>
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Variables	Range
Modes of communication may include, but are not limited to:	<ul style="list-style-type: none"> • Oral and written communication • Use of interpreters • Sign language • Use of personnel with special communication skills
Written and oral communication should:	<ul style="list-style-type: none"> • 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:	<ul style="list-style-type: none"> • 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:	<ul style="list-style-type: none"> • Reports • Patient care documentation • Correspondence
Communication equipment may include, but is not limited to:	<ul style="list-style-type: none"> • Radio • Telephone • Computer • Fax

	<ul style="list-style-type: none"> • Pager • Mobile data terminal
Barriers to effective communication may include, but are not limited to:	<ul style="list-style-type: none"> • Language difficulties • Differing terminology/jargon • Hearing difficulties • Speech impediments • Religious, social or cultural factors • Emotional state
Complex information may include, but is not limited to:	<ul style="list-style-type: none"> • Patient condition and implications • Ambulance requirements • Ambulance equipment • Incident history • Emergency procedures • Human resources requirements

Evidence Guide	
Critical Aspects of Assessment	<p>Critical aspects of assessment must include:</p> <ul style="list-style-type: none"> • Observation of performance in the work environment or in a simulated work setting • Observation must include: <ul style="list-style-type: none"> ➢ Communication under pressure ➢ Interpersonal interaction in a variety of complex or difficult work situations ➢ Communication relating to standard of OR patient care
Underpinning Knowledge and Attitudes	<p>Essential knowledge required includes:</p> <ul style="list-style-type: none"> • Standard operating room operation procedure • Operation of communication equipment • Communication systems
Underpinning Skills	<p>Essential skills required include:</p> <ul style="list-style-type: none"> • Effective communication skill as qualified OR nurse required to fulfill job roles as specified by the organization/service. • Acknowledging and responding to a range of views. • Written communication skills required to preparing handover reports for receiving agency staff. • Interpersonal skills required include: <ul style="list-style-type: none"> ➢ Empathy with patient and relatives, ➢ Using sensitivity when dealing with people, ➢ An ability to relate to persons from differing cultural, social and religious backgrounds

	<ul style="list-style-type: none"> • 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	<p>Resource implications may include:</p> <ul style="list-style-type: none"> • 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	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	<ul style="list-style-type: none"> • 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: Operating Room Nursing Level V	
Unit Title	Develop a Disaster Plan
Unit Code	HLT ORN5_09_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	<p>1.1 Government policies which affect the organization are identified and documented.</p> <p>1.1 <i>Government agencies</i> are consulted with in relation to different roles in the local <i>disaster</i> plan.</p>
2. Identify and liaise with the appropriate community organizations	<p>1.2 <i>Community organization</i> is identified and an information database is developed.</p> <p>1.3 Contact is established through a variety of communication strategies.</p> <p>1.4 Restrictions to effective liaison are identified, and processes are developed to promote communication with other agencies.</p>
3. Incorporate legislative requirements for disaster planning and relief into a plan	<p>3.1 Information on legislative requirements and resources is collected from the key people and organizations.</p> <p>3.2 Roles and responsibilities of other organizations are clarified.</p> <p>3.3 Plan is written.</p> <p>3.4 A promotions strategy is established and implemented.</p>
4. Coordinate volunteer support	<p>4.1 Volunteers are sought for disaster plan designated roles, via identified organizations and public processes.</p> <p>4.2 Roles and responsibilities are clarified.</p> <p>4.3 Team leaders are identified by discussion with organizations.</p> <p>4.4 Meetings are held to discuss disaster plan and personnel requirements.</p>

5. Ensure training for volunteers and staff	5.1 Training requirements for volunteers and staff are established. 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 the effectiveness of the disaster plan. 6.2 The disaster plan is adapted to meet the 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:	<ul style="list-style-type: none"> • State /Territory Health Department • Police • Social Security • Local Government • Emergency Services
Disasters may include:	<ul style="list-style-type: none"> • Floods • Cyclones • Fires • Earth quakes • Nuclear accidents • Riots, raids • Explosion
Community organizations may include:	<ul style="list-style-type: none"> • Government and non-government agencies • Health care service providers • Other service providers • Trades people • Community groups who provide care to the community
Legislative requirements:	<ul style="list-style-type: none"> • Clinical practice may be governed by Federal, State or Territory legislation, which defines workers' roles and responsibilities. • Implementation of the competency standards must reflect

	<p>the legislative framework in which a health worker operates. This may reduce the Range of Variables in practice and assessment.</p> <ul style="list-style-type: none"> • 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.
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Resources may include:	<ul style="list-style-type: none"> • Premises • Grounds • Accommodation • Workplace equipment • Materials • Plant vehicles • Exclusive use • Occupation
Key people will include:	<ul style="list-style-type: none"> • Those within and external to organization • Community leaders and representatives • Agencies /service representatives • Trade and professional services
A disaster plan(s) is:	<ul style="list-style-type: none"> • 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	<p>Critical aspects for assessment and evidence required to demonstrate this competency unit:</p> <ul style="list-style-type: none"> • 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

	<ul style="list-style-type: none"> • Observations must include: <ul style="list-style-type: none"> ➤ Knowledge of operating room nursing technique ➤ Principles of operating room nursing assessment, including risk assessment ➤ Nursing management of patient go through surgical intervention within the defined scope of practice • Communication skills
Underpinning Knowledge and Attitudes	<p>Essential knowledge includes:</p> <ul style="list-style-type: none"> • 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	<p>Essential skills includes:</p> <ul style="list-style-type: none"> • Communication and liaison • Networking • Human Resource Management • Negotiation • Small group facilitation • Planning • Training
Resource Implications	<p>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.</p>
Methods of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	<ul style="list-style-type: none"> • 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: Occupational Standard: Operating Room Nursing Level V	
Unit of competence	Identify and Perform the Fundamental Ethical Standards and Values
Unit Code	HLT ORN5 10 0611
Unit Descriptor	This unit describes the skills and knowledge required to implement and monitor compliance with the legal and ethical requirements relevant in the operating room work environment.

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

	<p>2.3 Reports and documentation are verified/ensured whether they address requirements of legislation, and organization policies and procedures.</p> <p>2.4 Policies and procedures are implemented to safe guard client information from unauthorized access or disclosure.</p>
3. Maintain compliance with legal requirements	<p>3.1 Fulfillment of statutory obligations and requirements are ensured.</p> <p>3.2 Consent of client is obtained for each test/procedure, as required.</p> <p>3.3 Authorities are notified of client information as required by law.</p> <p>3.4 Release of information contained within client records is completed in accordance with the legislation and organizational policies and procedures.</p> <p>3.5 Duty of care is met in all aspects of own work role.</p> <p>3.6 Clients are provided with access to information about themselves in accordance with legislation or other statutory provisions.</p> <p>3.7 The right of every client is considered, so that the clients are treated fairly and equitably.</p> <p>3.8 Compliance of duty of care with legal obligations and requirements is monitored.</p>

Variable	Range statement
<i>Confidentiality of client information must includes:</i>	<ul style="list-style-type: none"> • Verbal • Written i.e. medical records, referral/request • Video/audio tapes • Radiographic films and images • Computer files
<i>Disclosure of client information may include:</i>	<ul style="list-style-type: none"> • 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 eg some infectious diseases, suspected or known child abuse
<i>Client's rights may include:</i>	<ul style="list-style-type: none"> • 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

	<ul style="list-style-type: none"> • Right to make a complaint • Right to be involved in decisions regarding treatment and care
<i>Legal obligations and requirements may relate to:</i>	<ul style="list-style-type: none"> • Privacy • Anti-Discrimination • Consent to medical treatment • Duty of care • Release of client information, including medical and other clinical records • Child protection • Poisons legislation • Retention of human tissue • Occupational health and safety • Infection control • Contractual obligations • Licensing laws
<i>Consent of client may include:</i>	<ul style="list-style-type: none"> • Written • Verbal • Implied
<i>Notification of authorities of client information must include:</i>	<ul style="list-style-type: none"> • Certain infectious diseases • Suspected or known child abuse • If it is deemed to be in the public's best interest
<i>Monitoring of ethical work practice and legal compliance may involve:</i>	<ul style="list-style-type: none"> • Audits • Inspections and reviews • Quality Assurance activities

Evidence Guide

Critical Aspects of Competence	<p>A candidate must be able to demonstrate the ability to:</p> <ul style="list-style-type: none"> • negligence as it applies to care givers • Discuss informed consent • Describe the importance of patient care documentation • List several method of documentation of patient care • Identify potential events that could lead to legal action
Underpinning Knowledge and Attitudes	<p>knowledge and understanding requirements include:</p> <ul style="list-style-type: none"> • Client rights and responsibilities • Organizational code of practice where applicable • Law of consent to medical treatment • Legal and ethical requirements and responsibilities as they

	<p>relate to operating room nursing environment role(s)</p> <ul style="list-style-type: none"> • Organizational policy and procedures for complaints handling • Relevant federal, state, territory and local government legislation affecting role and duties
Underpinning Skills	<p>Skills include the ability to:</p> <ul style="list-style-type: none"> • Safe manner and as specified by the organization, at a level of skill that includes: <ul style="list-style-type: none"> ➢ Implementing organization policy and procedure manuals and professional code of practice • Assessors should look for Communication skills in: <ul style="list-style-type: none"> ➢ 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: <ul style="list-style-type: none"> ➢ Demonstrating respect for clients' rights ➢ Meeting requirements for provision of duty of care ➢ Working in accordance with legislation relevant to the workplace • Use problem solving skills as required to interpret and apply policy in the workplace, develop procedures and monitor practices
Resources Implication	<p>The following resources MUST be provided.</p> <ul style="list-style-type: none"> • 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	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • 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

	<ul style="list-style-type: none"> • Portfolio Assessment (e.g. Certificate from training providers or employers) <p>Assessment methods must confirm the ability to access and correctly interpret and apply the essential underpinning knowledge</p>
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: Operating Room Nursing Level V	
Unit Title	Manage Quality
Unit Code	HLT ORN5 11 0611
Unit Descriptor	This unit specifies the outcomes required to manage quality within projects. It covers determining quality requirements, implementing quality assurance processes, and using review and evaluation to make quality improvements in current and future projects.

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

	2.4 A quality management system is maintained to enable effective recording and communication of quality issues and outcomes to a higher project authority and stakeholders.
3. Implement project quality improvements	<p>3.1 Processes are reviewed and agreed, and changes implemented continually throughout the project life cycle to ensure continuous improvement to quality.</p> <p>3.2 Project outcomes are reviewed against the performance criteria to determine the effectiveness of quality management processes and procedures.</p> <p>3.3 Lessons learned and recommended, and improvements are identified, documented and passed on to a higher project authority for application in future projects</p>

Variable	Range
Quality objectives may include:	<ul style="list-style-type: none"> • Requirements from the client and other stakeholders • Requirements from a higher project authority • Negotiated trade-offs between cost, schedule and performance • Those quality aspects which may impact on customer satisfaction
quality management plan may include:	<ul style="list-style-type: none"> • Established processes • Authorizations and responsibilities for quality control • Quality assurance • Continuous improvement
Quality management methods, techniques and tools may include:	<ul style="list-style-type: none"> • Brainstorming • Benchmarking • Charting processes • Ranking candidates • Defining control • Undertaking benefit/cost analysis • Processes that limit and/or indicate variation • Control charts • Flowcharts • Histograms

	<ul style="list-style-type: none"> • Pareto charts • Scatter gram • Run charts
Quality control may include:	<ul style="list-style-type: none"> • Monitoring conformance with specifications • Recommending ways to eliminate causes of unsatisfactory • Performance of products or processes • Monitoring of regular inspections by internal or external agents
Improvements may include:	<ul style="list-style-type: none"> • Formal practices, such as total quality management or continuous improvement • Improvement by less formal processes which enhance both the product quality and processes of the project, for example client surveys to determine client satisfaction with project team performance

Evidence Guide	
Critical Aspects of Competence	<p>A person who demonstrates competence in this unit must be able to provide evidence that they have taken responsibility for quality management of projects. This will include evidence of managing the work of others within the project team with respect to quality. Products could be used as evidence.</p> <p>Documentation produced in managing projects such as:</p> <ul style="list-style-type: none"> • Lists of quality objectives, standards, levels and measurement criteria • Records of inspections, recommended rectification actions and quality outcomes • Management of quality management system and quality management plans • Application of quality control, quality assurance and continuous improvement processes • Records of quality reviews • Lists of lessons learned and recommended improvements <p>Processes that could be used as evidence include:</p> <ul style="list-style-type: none"> • How quality requirements and outcomes were determined for projects • How quality tools were selected for use in projects • How team members were managed throughout projects with respect to quality within the project • How quality was managed throughout projects • How problems and issues with respect to quality and arising during projects were identified and addressed • How projects were reviewed with respect to quality management • How improvements to quality management of projects have been acted upon
Underpinning Knowledge and Attitudes	<p>Broad knowledge and understanding of:</p> <ul style="list-style-type: none"> • The principles of project quality management and their application • Acceptance of responsibilities for project quality management • Use of quality management systems and standards • The place of quality management in the context of the project life cycle • Appropriate project quality management methodologies; and their capabilities, limitations, applicability and contribution to project outcomes

	<ul style="list-style-type: none"> • Attributes: <ul style="list-style-type: none"> ➤ Analytical ➤ Attention to detail ➤ Able to maintain an overview ➤ Communicative ➤ Positive leadership
Underpinning Skills	<ul style="list-style-type: none"> • Ability to relate to people from a range of social, cultural and ethnic backgrounds, and physical and mental abilities • Project management • Quality management • Planning and organizing • Communication and negotiation • Problem-solving • Leadership and personnel management • Monitoring and review skills
Resources Implication	<p>The following resources must be provided:</p> <ul style="list-style-type: none"> • Access to workplace documentation • Real or simulated workplace
Methods of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview/Written Test • Observation/Demonstration with Oral Questioning
Context of Assessment	<p>Competence may be assessed in the real workplace or in a simulated workplace setting</p>

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Contribute to Policy Development
Unit Code	HLT ORN5 12 0611
Unit Descriptor	This unit covers the development and analyzing policies which have impact on the client group and the work of the organization.

Element	Performance Criteria
1. Review the existing policies	<p>1.1 Relevant organizational and other policies are identified and assessed for their relevance and effectiveness to the organization's objectives.</p> <p>1.2 Clients and other stakeholder are consulted about their views on policies.</p> <p>1.3 Reviews of policies are documented and presented in a format that is appropriate to the purpose of the review, the context, and the receiver.</p>
2. Contribute to the research for policy advice	<p>2.1 Research and consultation strategies appropriate to the worker's role in the research process are identified planned and implemented within the time frames, resource constraints and agreed processes.</p> <p>2.2 Research and consultation outcomes are collated, reported and presented in a format that is appropriate to the research process, the purpose of the research, the context and the receiver.</p> <p>2.3 Factors impacting on the quality or outcomes of the research or consultation are identified and incorporated in reports.</p>
3. Provide briefing materials on policy issues	<p>3.1 Briefing materials are prepared as required in a format that is appropriate to the audience, the purpose and the context.</p> <p>3.2 On the worker's and organization's role and expertise are drawn on for briefing materials.</p> <p>3.3 Reasoned argument and evidence are incorporated into briefing materials.</p>

4. Promote informed policy debate	<p>4.1 Strategies to stimulate informed debate appropriate to the worker's role in policy development, community education or client service delivery are identified in consultation with the other workers and management.</p> <p>4.2 Strategies to stimulate informed debate are implemented within the time frames, resource allocations and agreed processes.</p> <p>4.3 Where necessary, strategies are implemented to translate policy materials into language/s easily understood by clients and other stakeholders.</p> <p>4.4 Strategies are developed which enable exchange of views and information between policy initiators, clients and other stakeholders.</p>
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Variables	Range
Research undertaken could be:	<ul style="list-style-type: none"> • Survey • Qualitative • Quantitative
Information gathering and consultation techniques may include:	<ul style="list-style-type: none"> • Interview structured, semi-structured and unstructured, group and individual • Conversation by phone or face to face • Observation and listening • Collection of materials, e.g. Printed material and videos • Attendance at workshops, meetings and forums • Questionnaires and other basic survey instruments
Strategies to promote informed debate will involve:	<ul style="list-style-type: none"> • Employing a range of communication styles, modes and media • Employing any of the consultation techniques identified in the Range Statement • Employing networking strategies

Evidence Guide	
Critical Aspects of Competence	<p>Critical aspects of assessment includes:</p> <ul style="list-style-type: none"> • Application to policies within own organization • Application to policies within networks or associations • Policies directly related to own work role and areas of

	<p>expertise</p> <ul style="list-style-type: none"> • Application for target groups relevant to the organization • Involvement with stakeholders relevant to the organization and the policy issue under consideration
Underpinning Knowledge	<p>Essential knowledge required includes:</p> <ul style="list-style-type: none"> • Organizational policies impacting on the worker, the organization and its target groups • Government and other policies impacting on the issue under consideration, and the organization and its target groups • The contexts for policies, people and the organization • Research and consultation techniques • The limits of the worker's own role and competence and the organization's role
Underpinning Skills	<p>Essential skills required includes:</p> <ul style="list-style-type: none"> • Analysis of evidence and arguments • Reasoning, including identification of implications and consequences of particular courses of action • Applied consultation and research methodologies • Report writing, including translation of complex concepts into simple language or images • Public speaking addressing a group • Group participation
Resource Requirements	<p>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.</p>
Method of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview / Written Test • Demonstration / Observation with Oral Questioning
Context of Assessment	<p>This unit is most appropriately assessed in the workplace or in a simulated workplace and under the normal range of workplace conditions.</p>

Occupational Standard: Operating Room Nursing Level V	
Unit Title	Facilitate and Capitalize on Change and Innovation
Unit Code	HLT ORN5 13 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	<p>1.1 Manager contributes effectively to the organization's planning processes to introduce and facilitate change.</p> <p>1.2 Plans to introduce change are made in consultation with appropriate stakeholders.</p> <p>1.3 Organization's objectives and plans to introduce change are communicated effectively to individuals and teams.</p>
2. Develop creative and flexible approaches and solutions	<p>2.1 Variety of approaches to manage workplace issues and problems are identified and analyzed.</p> <p>2.2 Risks are identified and assessed, and action initiated to manage these to achieve a recognized benefit or advantage to the organization.</p> <p>2.3 Workplace is managed in a way which promotes the development of innovative approaches and outcomes.</p> <p>2.4 Productivity and services, and/or reduce costs are improved Creative and responsive approaches to resource management.</p>
3. Manage emerging challenges and opportunities	<p>3.1 Individuals and teams are supported to respond effectively and efficiently to changes in the organization's goals, plans and priorities.</p> <p>3.2 Competencies are developed to handle change efficiently and effectively by coaching and mentoring individuals and teams.</p> <p>3.3 Opportunities are identified and taken as appropriate to make adjustments and to respond to the changing needs of customers and the organization.</p>

	<p>3.4 Information needs of individuals and teams are anticipated and facilitated as part of change implementation and management.</p> <p>3.5 Recommendations for improving the methods and techniques to manage change are identified, evaluated and negotiated with the appropriate individuals and groups.</p>
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Variables	Range
Manager	A person with frontline management roles and responsibilities, regardless of the title of their position
Appropriate stakeholders may refer to:	<p>Those individuals and organizations who have a stake in the change and innovation being planned, including:</p> <ul style="list-style-type: none"> • 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:	<ul style="list-style-type: none"> • 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:	<ul style="list-style-type: none"> • 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	<p>Assessment must show evidence that the candidate:</p> <ul style="list-style-type: none"> • Planning the introduction and facilitation of change • Developing creative and flexible approaches and solutions • Managing emerging challenges and opportunities
Underpinning Knowledge and Attitudes	<ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> ➢ 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 <ul style="list-style-type: none"> ➢ 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	<p>Demonstrate skills on:</p> <ul style="list-style-type: none"> • Communication skills • Planning work • Managing risk
Resources Implication	<p>The following resources must be provided:</p> <ul style="list-style-type: none"> • Workplace or fully equipped assessment location with necessary tools, equipment and consumable materials
Methods of Assessment	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Interview/Written Test • Observation/Demonstration with Oral Questioning
Context of Assessment	<p>Competence may be assessed in the work place or in a simulated work place setting</p>

Occupational Standard: Operating Room Nursing	
Unit of competence	Develop and implement strategies to enhance client safety
Unit Code	HLT ORN5 14 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	<p>1.1 Strategies are developed for staff to include clients and careers in planning and delivering health care services.</p> <p>1.2 Opportunities for staff are identified and supported to involve clients and careers in their care and treatment</p> <p>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.</p> <p>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.</p> <p>1.5 Ways in which clients, careers and the community can contribute to improving health care services are identified.</p> <p>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.</p> <p>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.</p> <p>1.8 Staff is provided with the appropriate training and resources to support the provision of culturally and linguistically appropriate services.</p> <p>1.9 Environments and structures are created to support optimal client and community involvement in health service planning and delivery.</p>

<p>2. Enhance client understanding of risk</p>	<p>2.1 Clients and careers are provided with quality information related to risks involved, their health, proposed treatments and ongoing service delivery.</p> <p>2.2 Clients are supported as required to make informed decisions about proposed treatments and ongoing service delivery.</p> <p>2.3 Provision of information about the beneficial and harmful effects of care and treatments is supported according to the individual circumstances and priorities.</p> <p>2.4 Staff understanding is ensured that the importance of obtaining consent from both ethical and risk management perspectives.</p>
<p>3. Manage communication related to adverse events</p>	<p>3.1 Clear processes are established for managing adverse events and near misses within the scope of work role.</p> <p>3.2 Open disclosure guidelines are developed based on the National Open Disclosure Standard.</p> <p>3.3 Staff knowledge of the open disclosure guidelines and how they apply to their work role is ensured.</p> <p>3.4 Staff is supported to apply open disclosure guidelines when clients suffer adverse events and/or near misses.</p> <p>3.5 Clients and careers are supplied with information about the available support services.</p> <p>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.</p> <p>3.7 Information about learning from adverse events and near misses throughout the organization is disseminated.</p> <p>3.8 Community awareness of the occurrence of adverse events is encouraged to enhance client involvement in health care services.</p>
<p>4. Evaluate the effectiveness of client's safety strategies</p>	<p>4.1 Regular organization self-assessments in relation to cultural and linguistic competence are conducted.</p> <p>4.2 The effectiveness of strategies is evaluated to involve clients and careers in planning the delivery of health care services.</p> <p>4.3 The effectiveness of strategies is evaluated to prevent, manage and communicate adverse events and near misses.</p> <p>4.4 Client feedback is sought on an ongoing basis and incorporated into the evaluation strategies.</p> <p>4.5 Opportunities are identified for improvements in practices and processes impacting client's safety.</p> <p>4.6 Feedback and recognition is provided to the staff to establish and maintain behavior and attitudes that support and enhance client's safety.</p>

Variable	Range statement
<i>Client's rights may include:</i>	<ul style="list-style-type: none"> • 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
<i>Legal obligations and requirements may relate to:</i>	<ul style="list-style-type: none"> • 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
<i>Consent of client may include:</i>	<ul style="list-style-type: none"> • Written • Verbal • Implied
<i>Available support services may include:</i>	<ul style="list-style-type: none"> • Emotional support • Advocacy • Complaint information

Evidence Guide	
Critical Aspects of Competence	<p>A candidate must be able to demonstrate the ability to:</p> <ul style="list-style-type: none"> • 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

	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> • individual preferences or cultural and religious beliefs • How to engage consumers, clients and careers 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	<ul style="list-style-type: none"> • 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

	<p>health care system safe</p> <ul style="list-style-type: none"> • 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	<p>The following resources MUST be provided.</p> <ul style="list-style-type: none"> • 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	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • 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) <p>Assessment methods must confirm the ability to access and correctly interpret and apply the essential underpinning knowledge</p>
Context of Assessment	<p>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.</p>

Occupational Standard: Operating Room Nursing Level V	
Unit of competence	Maintain an effective health work environment
Unit Code	HLT ORN5 15 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	<p>1.1 Decision-making is monitored to ensure the ethical guidelines are followed and underlying ethical complexity is recognized.</p> <p>1.2 Understanding and compliance with the principles of duty of care and legal responsibilities is ensured in all works undertaken.</p> <p>1.3 Ensure appropriate action is taken to address any breach or non adherence to the standard procedures or adverse event.</p> <p>1.4 Work practices are monitored to ensure the confidentiality of any client matter in line with the organizational policy and procedure.</p> <p>1.5 Respect for rights and responsibilities of others is promoted through considered application of work practices.</p> <p>1.6 Knowledge and understanding of employee and employer rights and responsibilities are applied and promoted in all work practices.</p> <p>1.7 Potential conflict of interest in the workplace is identified, and action is taken to avoid and/or address.</p>
2. Support the culture of effective communication	<p>2.1 Communication issues in the workplace are monitored and addressed.</p> <p>2.2 Oral and written communication in the workplace is monitored to ensure the confidentiality of client and staff matters.</p> <p>2.3 Workplace communication is monitored to support the accuracy and understanding of information provided and received.</p> <p>2.4 Recognition of individual and cultural differences in the workplace is promoted and any adjustments to communication needed are supported to facilitate the achievement of the identified outcomes.</p>

	<p>2.5 A client-centered approach to health care is promoted and supported throughout interpersonal communication with clients and colleagues.</p> <p>2.6 Interpersonal differences in the workplace are promoted and assisted with the resolution of conflict.</p>
3. Maintain positive approach to health in the workplace	<p>3.1 Work practices are monitored to ensure they contribute to maintain an effective and client-centered approach to health.</p> <p>3.2 Implementation of work practices is monitored to ensure clients are included in shared decision making as partners in health care.</p> <p>3.3 A workplace culture of promoting good health is supported and maintained by sharing health information.</p> <p>3.4 Workplace focus on preventing ill health and minimizing risk</p> <p>3.5 Workplace focus on processes and procedures is monitored and maintained to manage stress and prevent fatigue</p>
4. Monitor professional work standards	<p>4.1 The implementation of organization policies and procedures relating to awards, standards and legislative requirements of staff is monitored.</p> <p>4.2 Areas for improving work practices are identified and supported the implementation in line with the organizational policies and procedures.</p> <p>4.3 Compliance with relevant accreditation standards applying to work undertaken is monitored, and issues are addressed.</p> <p>4.4 Staff understanding and focus on achieving organization goals and objectives in work undertaken is monitored.</p> <p>4.5 Staff efforts are monitored and supported to respond positively to improve work practices and procedures.</p> <p>4.6 Issues requiring mandatory notification are identified and reported appropriately.</p>
5. Work in the health industry context	<p>5.1 Effective relationships with workers from different sectors and levels of the industry are established in line with the work role and requirements.</p> <p>5.2 Knowledge of the roles and functions of various health care structures, organizations and systems are applied.</p> <p>5.3 Knowledge of current issues influencing the health care system including health issues is maintained.</p>
6. Take opportunities to develop their own competence	<p>6.1 Own skills/knowledge is monitored in relation to the ongoing changing work requirements.</p> <p>6.2 Areas for personal development are identified in line with the health industry developments, organizational requirements and personal interest.</p> <p>6.3 Initiative is taken to access and/or create development opportunities to support organizational need and personal</p>

	<p>career development.</p> <p>6.4 Available formal and informal skill/knowledge development and maintenance activities are undertaken.</p>
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Variable	Range statement
<i>Requirements of own work role may include:</i>	<ul style="list-style-type: none"> • Level of responsibility • Organization guidelines • Individual awards and benchmarks • Legislation relevant to work area • Accreditation standards
<i>Organization policy on confidentiality may relate to:</i>	<ul style="list-style-type: none"> • Storage of records • Destruction of records • Access to records • Release of information • Verbal and written communication
<i>Organization procedures, policies, awards, standards and legislation may include:</i>	<ul style="list-style-type: none"> • 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
<i>Communication strategies may include:</i>	<ul style="list-style-type: none"> • 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
<i>Promoting positive client relationship may include:</i>	<ul style="list-style-type: none"> • 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
<i>A client-centered approach to health</i>	<ul style="list-style-type: none"> • Putting clients and careers at the centre of service delivery • Including clients in decision-making relating to their health care

<i>includes:</i>	<ul style="list-style-type: none"> • Involving clients in discussions about service delivery options and issues • Obtaining client consent to examine, treat or work with them • Effective customer service
<i>Employee rights and responsibilities may relate to:</i>	<ul style="list-style-type: none"> • 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
<i>Issues requiring mandatory notification may include:</i>	<ul style="list-style-type: none"> • 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
<i>Improved work practices may relate, for example to:</i>	<ul style="list-style-type: none"> • Enhancing outcomes for clients • Enhancing sustainability of work, such as efficient and effective work practices in relation to: <ul style="list-style-type: none"> ➢ Use of power ➢ Use of resources, including for administration purposes ➢ Waste management and recycling practices • Enhancing safety of staff and client
<i>Identifying and implementing improved work practices may include:</i>	<ul style="list-style-type: none"> • Reporting and implementing suggested improvements • Seeking and addressing customer feedback • Monitoring tasks • Responding to surveys and questionnaires • Assessing/observing/measuring environmental factors • Checking equipment
<i>Employer rights and responsibilities may relate to:</i>	<ul style="list-style-type: none"> • 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
<i>Designated knowledge/skill development may relate to:</i>	<ul style="list-style-type: none"> • Hazard control • OHS • Manual handling • First Aid

	<ul style="list-style-type: none"> • Cultural awareness • Infection control • Cardiopulmonary resuscitation emergency response and notification protocols • Fire emergency response procedures for notification and containment of fire, use of firefighting 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
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Evidence Guide	
Critical Aspects of Competence	<p>A candidate must be able to demonstrate the ability to:</p> <ul style="list-style-type: none"> • 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	<p>Demonstrates knowledge and understanding of:</p> <ul style="list-style-type: none"> • Details of accreditation processes and quality improvement practices • Implications of relevant legislation, including: <ul style="list-style-type: none"> ➤ Access and equity

	<ul style="list-style-type: none"> ➤ 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: <ul style="list-style-type: none"> ➤ 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
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Underpinning Skills	<p>Skills include the ability to:</p> <ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> ➢ 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	<p>The following resources MUST be provided.</p> <ul style="list-style-type: none"> • 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	<p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • 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) <p>Assessment methods must confirm the ability to access and correctly interpret and apply the essential underpinning knowledge</p>

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.
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Occupational Standard: Operating Room Nursing Level V	
Unit Title	Develop and Refine Systems for Continuous Improvement in Operations
Unit Code	HLT ORN5 16 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	3.1 Check that levels of delegated authority and responsibility are appropriate for continuous improvement from the shop floor

practice	<p>3.2 Ensure all personnel have appropriate capabilities for continuous improvement processes</p> <p>3.3 Ensure personnel and systems recognize potential breakthrough improvement projects</p> <p>3.4 Ensure sufficient resources are available for the operation of continuous and breakthrough improvement processes</p> <p>3.5 Check that relevant information flows from improvement changes to all required areas and stakeholders</p> <p>3.6 Check data collection and metrics analysis capture changes which result from improvement actions</p> <p>3.7 Check that improvement changes are standardized and sustained</p> <p>3.8 Check review processes for routine continuous improvements</p> <p>3.9 Remove or change factors limiting gains from improvements</p> <p>3.10 Modify systems to ensure appropriate possible changes are referred to other improvement processes</p> <p>3.11 Institutionalize breakthrough</p>
4. Establish parameters of current external improvement system	<p>4.1 Review value stream systems that impact on improvement</p> <p>4.2 Review procedures for deciding improvement methodologies Identify current relevant metrics and their values, as appropriate</p> <p>4.3 Determine yield of current improvement processes</p> <p>4.4 Review results of improvements</p>
5. Explore opportunities for further development of value stream improvement processes	<p>5.1 Review mechanisms for consultation with value stream members</p> <p>5.2 Develop mechanisms for further improving joint problem solving</p> <p>5.3 Develop mechanisms for increased sharing of organizational knowledge</p> <p>5.4 Obtain support and necessary authorizations from process/system owners</p> <p>5.5 Capture and standardize improvements</p> <p>5.6 Improve factors limiting gains from continuous improvements</p>
6. Review systems for compatibility with	<p>6.1 Review all systems which impact or are impacted on improvements and the improvement system</p> <p>6.2 Analyze relationships between improvement systems</p>

improvement strategy	<p>and other relevant systems</p> <p>6.3 Analyze practices caused by and results from the systems</p> <p>6.4 Negotiate changes to the systems to improve the outcomes from improvement systems</p> <p>6.5 Obtain necessary approvals to implement changes</p> <p>6.6 Monitor the implementation of the changes</p>
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Variable	Range
Competitive systems and practices	<p>Competitive systems and practices may include, but are not limited to:</p> <ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> – 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 systems	<p>Organization systems may include:</p> <ul style="list-style-type: none"> • problem recognition and solving • operational/process improvement • improvement projects • product/process design and development • processes for making incremental improvements
Relevant metrics	<p>Relevant metrics include all those measures which might be used to determine the performance of the improvement system and may include:</p> <ul style="list-style-type: none"> • 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	<p>Improvement process yield may be regarded as:</p> <ul style="list-style-type: none"> • the benefit achieved for the effort invested
Breakthrough improvements	<p>Breakthrough improvements include:</p> <ul style="list-style-type: none"> • those which result from a kaizen blitz or other improvement project or event and are a subset of all improvements
Timing of breakthrough improvements	<p>Timing of breakthrough improvements includes:</p> <ul style="list-style-type: none"> • frequency (which should be maximized) and duration (which should be minimized) of events/projects
Continuous improvement	<p>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</p>
Resources for improvement	<p>Resources for improvements include:</p> <ul style="list-style-type: none"> • 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	<p>Capturing value stream improvements includes:</p> <ul style="list-style-type: none"> • revised contractual arrangements • revised specifications • signed agreements • other documented arrangements which formalize the raised base line

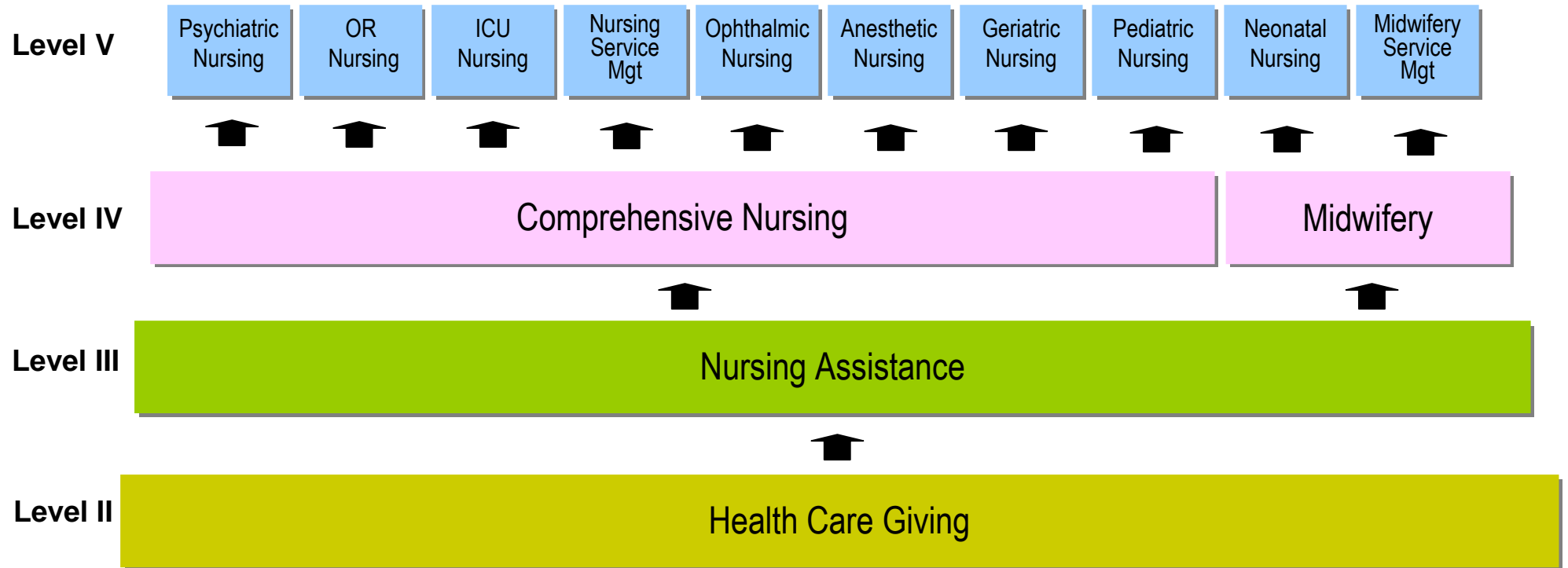
Systems impacting improvements	Systems which impact/are impacted on improvements and the improvement system include: <ul style="list-style-type: none"> • office • purchasing • rewards (individual or team at all levels) • sales • marketing • maintenance • process/product • transport and logistics
Organizational knowledge	Organizational knowledge should: <ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> • be to process, plant, procedures or practice • include changes to ensure positive benefits to stakeholders are maintained
Manager	Manager may include: <ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> • competitive systems and practices tools, including: • value stream mapping • 5S • Just in Time (JIT) • mistake proofing • process mapping 		
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	<ul style="list-style-type: none"> • 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	<p>Demonstrates skills to:</p> <ul style="list-style-type: none"> • 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:

	<ul style="list-style-type: none"> – 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	<p>Access may be required to:</p> <ul style="list-style-type: none"> • 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	<p>Competence in this unit may be assessed by using a combination of the following to generate evidence:</p> <ul style="list-style-type: none"> • demonstration in the workplace • suitable simulation • oral or written questioning to assess knowledge of principles and techniques associated with change management <p>In all cases it is expected that practical assessment will be combined with targeted questioning to assess underpinning knowledge</p>
Context of Assessment	<p>Assessment of performance must be undertaken in a workplace using or implementing one or more competitive systems and practices.</p>

Sector: Health
Sub-Sector: Nursing Care



Acknowledgement

We wish to extend thanks and appreciation to the many representatives of business, industry, academe and government agencies who donated their time and expertise to the development of this occupational standard.

We would like also to express our appreciation to the Experts of Ministry of Health, 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.

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