



QUALIFICATIONS PACK - OCCUPATIONAL STANDARDS FOR ALLIED HEALTHCARE

What are Occupational Standards (OS)?

- OS describe what individuals need to do, know and understand in order to carry out a particular job role or function
- OS are performance standards that individuals must achieve when carrying out functions in the workplace, together with specifications of the underpinning knowledge and understanding



Contents

1.	Introduction and Contacts	.P.01
2.	Qualifications Pack	P.02
3.	Glossary of Key Terms	P.04
4.	OS Units	P.09
5.	Assessment Criteria	P.73

Introduction

Qualifications Pack-Vision Technician

SECTOR: HEALTH

SUB-SECTOR: Allied Health & Paramedics

OCCUPATION: Vision Technician

REFERENCE ID: HSS/ Q 3001

ALIGNED TO: NCO-2004/3224.2

Vision Technician: Vision technician in the healthcare industry is also known as

Eye Technician.

Brief Job Description: Vision Technician performs administrative and certain clinical duties. Administrative duties include scheduling appointments, maintaining medical records and clinical duties include taking and recording vital signs and medical histories, preparing patients for examination, and dispensing ophthalmic prescription.

Personal Attributes: This job requires individuals to have patience, manual dexterity and confidence. The basic requirements for becoming Vision technician are analytical skills, mechanical aptitude, good vision, coordination and self-disciplined. The work ethics characterized by dedication and persistence and the ability to deal tactfully with patients are some essential qualities to become a successful vision technician.





Qualifications Pack Code	HSS / Q 3001		
Job Role	Vision technician		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Sub-sector	Allied Health & Paramedics	Last reviewed on	22/05/13
Occupation	Vision technician	Next review date	22/12/16
NSQC Date	19 May 2015		

Job Role	Vision Technician		
Role Description	Performs administrative and certain clinical duties i.e. scheduling appointments, maintaining medical records, recording vital signs and medical histories, preparing patients for examination, and dispensing ophthalmic prescription		
NSQF level	3		
Minimum Educational	Preferred Class XII in Science , but Class X is also considered in certain		
Qualifications	situations		
Maximum Educational Qualifications	Not Applicable		
Minimum Age	18 Years		
Experience	Not Applicable		





	Compulsory:	
	HSS / N 3001: Obtain the case history	
	HSS / N 3002 : Measure visual acuity	
	HSS / N 3003 : Assess refractive status	
	HSS / N 3004: Dispense spectacles and dispense optical prescription	
	<u>accurately</u>	
	HSS / N 5505 : Store medical records	
Applicable National	HSS / N 5506: Maintain confidentiality of medical records	
Occupational Standards (OS)	HSS / N 9601 : Collate and communicate health information	
,	HSS / N 9603 : Act within the limits of your competence and authority	
	HSS / N 9606: Maintain a safe, healthy and secure environment	
	HSS / N 9607: Practice Code of conduct while performing duties	
	HSS / N 9609 : Follow biomedical waste disposal protocols	
	HSS / N 9610 : Follow infection control policies and procedures	
	Optional: N.A.	
Performance Criteria	As described in the relevant OS units	





Keywords /Terms	Description		
Astigmatism	Astigmatism is the visual defect in which the unequal curvature of one or		
	more refractive surfaces of the eye, usually the cornea, prevents light		
	rays from focusing clearly at one point on the retina, resulting in blurred		
Cara Skills/Canaria	vision.		
Core Skills/Generic Skills	Core Skills or Generic Skills are a group of skills that are essential to learning and working in today's world. These skills are typically needed in		
SKIIIS	any work environment. In the context of the OS, these include		
	communication related skills that are applicable to most job roles.		
Description	Description gives a short summary of the unit content. This would be		
	helpful to anyone searching on a database to verify that this is the		
	appropriate OS they are looking for.		
Farsightedness	Farsightedness also known as Hyperopia , long-sightedness or		
	hypermetropia, is a defect of vision caused by an imperfection in the eye		
	(often when the eyeball is too short or the lens cannot become round		
	enough), causing difficulty focusing on near objects, and in extreme cases		
Facinatas	causing a sufferer to be unable to focus on objects at any distance.		
Focimeter	Focimeter is an optical instrument for determining the vertex power, axis direction and optical centre of an ophthalmic lens.		
Function	Function is an activity necessary for achieving the key purpose of the		
Tunction	sector, occupation, or area of work, which can be carried out by a person		
	or a group of persons. Functions are identified through functional		
	analysis and form the basis of OS.		
Glaucoma	Glaucoma is a group of eye diseases characterized by damage to the optic		
	nerve usually due to excessively high intraocular pressure (IOP). This		
	increased pressure within the eye, if untreated can lead to optic nerve		
	damage resulting in progressive, permanent vision loss, starting with		
	unnoticeable blind spots at the edges of the field of vision, progressing to		
Intra o cular proceura	tunnel vision, and then to blindness.		
Intraocular pressure	Intraocular pressure the pressure exerted against the outer coats by the contents of the eyeball		
Invasive procedures	Invasive procedures are diagnostic or therapeutic technique that		
invasive procedures	requires entry of a body cavity or interruption of normal body functions.		
Job role	Job role defines a unique set of functions that together form a unique		
	employment opportunity in an organization.		
Knowledge and	Knowledge and Understanding are statements which together specify the		
Understanding	technical, generic, professional and organizational specific knowledge		
	that an individual needs in order to perform to the required standard.		
National Occupational	NOS are Occupational Standards which apply uniquely in the Indian		
Standards (NOS)	context.		
	Nearsightedness is a defect of the eye that causes light to focus in front		
Nearsightedness	of the retina instead of directly on it, resulting in an inability to see		
	distant objects clearly. It is often caused by an elongated eyeball or a		
Occupation	misshapen lens. Also called Myopia.		
Occupation	Occupation is a set of job roles, which perform similar/related set of		

सत्यमेव जयते government of india ministry of skill development



	functions in an industry.		
Occupational Standards (OS)	OS specify the standards of performance an individual must achieve when carrying out a function in the workplace, together with the knowledge and understanding they need to meet that standard consistently. Occupational Standards are applicable both in the Indian and global contexts.		
Ocular adnexae	Ocular adnexae are the adjacent structures of the eye such as the lacrimal apparatus, the extraocular muscles and the eyelids, eyelashes, eyebrows and the conjunctiva.		
Ophthalmic	Pertaining to eye		
Organisational Context	Organisational Context includes the way the organization is structured and how it operates, including the extent of operative knowledge managers have of their relevant areas of responsibility.		
Performance Criteria	Performance Criteria are statements that together specify the standard of performance required when carrying out a task.		
Qualifications Pack Code	Qualifications Pack Code is a unique reference code that identifies a qualifications pack.		
Qualifications Pack(QP)	Qualifications Pack comprises the set of OS, together with the educational, training and other criteria required to perform a job role. A Qualifications Pack is assigned a unique qualification pack code.		
Refractive error	Refractive error is a defect in the ability of the lens of the eye to focus an image accurately, as occurs in nearsightedness and farsightedness.		
Scope	Scope is the set of statements specifying the range of variables that an individual may have to deal with in carrying out the function which have a critical impact on the quality of performance required.		
Sector	Sector is a conglomeration of different business operations having similar businesses and interests. It may also be defined as a distinct subset of the economy whose components share similar characteristics and interests.		
Sub-functions	Sub-functions are sub-activities essential to fulfil the achieving the objectives of the function.		
Sub-Sector	Sub-sector is derived from a further breakdown based on the characteristics and interests of its components.		
Technical Knowledge	Technical Knowledge is the specific knowledge needed to accomplish specific designated responsibilities.		
Tonography	Tonography is recording of changes in intraocular pressure due to sustained pressure on the eyeball.		
Tonometry	Tonometry is measurement of tension or pressure, particularly intraocular pressure.		
Topical anesthetics	Any of various drugs that are applied directly to the surface of a part of the body and produce topical anesthesia.		
Unit Code	Unit Code is a unique identifier for an OS unit, which can be denoted with either an 'O' or an 'N'.		
Unit Title	Unit Title gives a clear overall statement about what the incumbent should be able to do.		
Vertical	Vertical may exist within a sub-sector representing different domain areas or the client industries served by the industry.		
Visual acuity	Sharpness of vision, especially as tested with a Snellen chart. Normal visual acuity based on the Snellen chart is 20/20.		





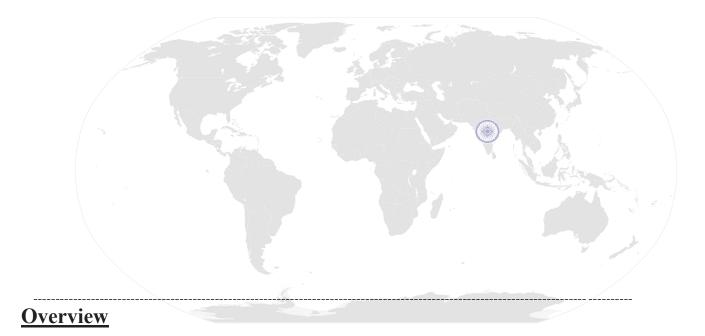
Visual field	The space or range within which objects are visible to the immobile eyes at a given time. Also called field of vision.		
Keywords /Terms	Description		
ERG	Electroretinogram		
IOP	Intraocular pressure		
LogMAR	Logarithm of the Minimum Angle of Resolution		
NOS	National Occupational Standard(s)		
NVEQF	National Vocational Education Qualifications Framework		
NVQF	National Vocational Qualifications Framework		
ОСТ	optical coherence tomography		
OHTS	Ocular Hypertension Treatment Study		
OS	Occupational Standard(s)		
QP	Qualifications Pack		







National Occupational Standards



This Occupational Standard describes the knowledge, understanding and skills required of an individual to obtain clinical history from a patient prior to examination and treatment.







пээ/ № 5001.				
Unit Code	HSS/ N 3001			
Unit Title (Task)	Obtain the case history			
Description	This OS unit is about taking clinical history from a patient prior to examination and treatment.			
Scope	This unit/ task covers the following: • Effectively recording the patient's optometric histories and ensuring that the patient is comfortable and responding to any relevant concern of the patient.			
Performance Criteria (F	PC) w.r.t. the Scope			
Element	Performance Criteria			
	To be competent, the individual on the job must be able to:			
	PC1. Obtain and record the history of patient having ocular and/or visual symptoms including the onset, course of the disease, diagnostics conducted and treatment			
	PC2. Obtain and record the history of patient's past ocular diseases and conditions, including history of surgery to eye or ocular adnexae, and details of birth history/ pregnancy where appropriate			
	PC3. Obtain and record a family history of diseases affecting eye or vision, and any relevant general medical conditions or diseases			
	PC4. Obtain and record details of social history including occupation and details of exposure to industrial or occupational hazards			
	PC5. Obtain and record a history of patient's current and past general health and trauma, including any surgical procedures			
	PC6. Obtain and record a history of current medications for ocular conditions and general medical conditions			
	PC7. Obtain and record a history of any allergies or other adverse reactions to treatment			
Knowledge and Unders	PC8. Identify area of concern and inform relevant professional if appropriate			
A. Organisational	The individual on the job needs to know and understand:			
Context				
(Knowledge of the Healthcare	 KA1. Personal role, responsibilities and level of competence for history taking KA2. Requirement for confidentiality of information as per the protocol of organisation 			
provider/ Organisation and	KA3. The purpose and relevant protocols for obtaining and documenting patient history			
its processes) B. Technical	KA4. Requirement for accurate and legible recording of information The individual on the job needs to know and understand:			
Knowledge	KB1. That the information should include the onset, nature and duration of the			







	,	
	problem including diagnosis; diagnostic procedures (Ocular and general), visual difficulties, and chief complaint; visual and ocular history, including family ocular history; general health history, pertinent review of systems, pregnancy and birth history, and family medical history; medication usage and medication allergies; social history; and vocational, educational, and a vocational vision requirements (i.e., needs assessment) KB2. Should be able to identify ophthalmic emergencies KB3. The anxieties or concerns which patients or their attendants may experience and how to alleviate them KB4. The relevance of patient history to ocular and systemic disease KB5. The symptoms of common diseases affecting the visual system and the relationship between ocular/visual and non- ocular symptoms and diseases of	
	the visual system and systemic disease	
	KB6. Ocular/visual manifestations of systemic disease	
Skills (S)	KB7. The basic use of computers	
	Writing Skills	
A. Core Skills/ Generic Skills	Writing Skills The individual on the job needs to know and understand how to:	
	 SA1. Write at least one local/ official language used in the local community SA2. Record relevant information pertaining to the patient in a format which is understandable and useable SA3. Write clinical notes on patients' intake and assessment forms to record their concerns, health histories, clinical observations, visual acuity test results, diagnoses, treatment plans and recommendations for follow-up SA4. Obtain patient consent wherever required 	
	Reading Skills	
	The individual on the job needs to know and understand how to: SA5. Read reports from family physicians and specialists to whom they have referred, for information on patients' general health, test results, diagnoses, medications, prognoses, recommended treatments and follow-up plans SA6. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA7. Read notes and comments on patients' history, intake and assessment forms.	
Oral Communication (Listening and Speaking skills)		
	The individual on the job needs to know and understand how to: SA8. Communicate effectively with the patient, taking into accounts his/her physical, emotional, intellectual, social and cultural background SA9. Question patients appropriately in order to understand the nature of the	
	compliant or request SA10. Take a structured, efficient, accurate history from patients with or without	







1133/ N 3001.	Obtain the case history		
	any ophthalmic and / or systemic problems and needs		
	SA11. Give clear instructions to patients		
	SA12. Keep patient informed about progress		
	SA13. Avoid using jargon, slang or acronyms when communicating with a patient		
	SA14. Communicate with health professionals such as family physicians and		
	ophthalmologists to discuss specific cases or to request consultations for		
	patients. For example, they may discuss increases in intraocular pressure with		
	patients' family doctors to determine appropriate treatments and follow-up		
	plans		
	SA15. Communicate effectively with patients and their attendants keeping cultural		
	and special needs in mind		
B. Professional Skills			
	The individual on the job needs to know and understand how to:		
	SB1. Make decisions about optometric methods and tools. For example, they		
	follow established protocols and use their specialized knowledge to decide		
	which tests to use. They consider best practices, patients' needs, the		
	conditions of their eyes		
	Plan and Organise		
	The individual on the job needs to know and understand how to:		
	SB2. Organise routine patient visits within highly structured appointment schedules		
	SB3. Shuffle or reschedule appointments to deal with emergencies and unusually		
	time-consuming investigations		
	SB4. Determine priority cases and decide how to adjust their schedules to provide		
	efficient and quality patient care		
	Patient Centricity		
	The individual on the job needs to know and understand how to:		
	SB5. Communicate effectively with patients and family		
	SB6. Listen in a responsive and empathetic manner to establish rapport		
	SB7. Promote openness on issues of concern		
	SB8. Show sensitivity to potential cultural differences		
	Problem Solving		
	The individual on the job needs to know and understand how to:		
	SB9. Think through problems, evaluate the possible solution(s) and suggest an		
	optimum /best possible solution(s)		
	SB10. Deal with patient until attended by other care providers and try to address		
	any concerns with acquired clinical knowledge		
	SB11. Identify immediate or temporary solutions to resolve delays		
	Analytical Thinking		
	7 Harytical Fillinding		







The i	The individual on the job needs to know and understand how to:			
SB12	. Integrate historical, physical, social, and ancillary data into differential diagnoses and treatment plans			
SB13	. Understand indications for various diagnostic tests and treatment modalities			
SB14. Make concise, prompt, cogent, and thorough presentations based on values of data collection				
SB15	. Work and learn independently			
SB16				
Critic	Critical Thinking			
The u	ser/individual on the job needs to know and understand how to:			
SB17	. Assess the health and functionality of patients' eyes and the severity of their conditions based on the patients' case histories, external and internal eye examinations, and tonometry measurements			









.....

NOS Version Control

NOS Code	HSS/ N 3001		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
Occupation	Vision technician	Next review date	22/12/16







HSS/ N 3002:

Measure visual acuity

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an individual to perform test of visual acuity including distant and near vision with and without optical correction. It includes the assessment of visual acuity in patients of different ages including children, patients with communication difficulties and with a range of refractive error and ocular disease.







Unit Code	HSS/ N 3002		
Unit Title (Task)	Measure visual acuity		
Description	This OS relates to the performance of tests of visual acuity including distant and near vision with and without optical correction. It includes the assessment of visual acuity in patients of different ages including children, patients with communication difficulties and with a range of refractive error and ocular disease. Visual acuity relates to the ability to perceive details presented with good contrast. Visual acuity measurement describes the function of one small central retinal area that has the highest resolving power.		
Scope	 The unit/task considers the following: Quantifying the degree of high-contrast vision loss and, in many cases, clearly identifying the patient's visual impairment. Should be able to work in diverse settings eg. Indoor and outdoor 		
Performance Criteria	(PC) w.r.t. the Scope		
Element	Performance Criteria		
	PC1. Confirm patient's existing use of optical correction PC2. Confirm patient's understanding of procedure and requirements for compliance PC3. Identify any cultural and special needs that may influence performance of test PC4. Perform tests for visual acuity consistent with personal role, responsibilities and level of competence PC5. Select appropriate visual acuity test according to patients age, cooperation, ability and any cultural and special needs PC6. Position and align patient at the correct distance from the test chart PC7. Change distance from test chart if appropriate PC8. Ensure the chart is correctly illuminated for test purpose PC9. Instruct patient clearly, including wearing of current optical correction appropriate to the test distance PC10. Ensure correct use of occluder PC11. Ensure correct use of pinhole PC12. Accurately record results and patient responses		
Knowledge and Unde			
A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)	The user/individual on the job needs to know and understand: KA1. Requirements for accurate and legible recording of information KA2. Relevant protocols for procedure and their correct interpretation		







B. Technical	The user/individual on the job needs to know and understand:			
Knowledge				
	KB1.	Requirements and protocols for maintenance and calibration of equipment		
	KB2.	The principles of and relationship between visual acuity measurement and		
		refractive error and how to estimate refractive error from unaided visual		
		acuity		
	KB3.	Reasons for altering test distance		
	KB4.	Different types of refractive error and their correction		
	KB5.	The non-refractive causes of reduced visual acuity and how they affect the		
		measurement of visual acuity		
	KB6.	How to identify a spectacle optical prescription by inspection		
	KB7.	The range of tests for visual acuity, including Snellen, LogMAR, E-test,		
		Sheridan-Gardiner and tests for near vision		
	KB8.	The principles and use of pinhole to correct reduced visual acuity and its limitations		
	KB9.	How to measure visual acuity in patients with language or communication difficulties or illiteracy		
	KB10.	How to measure visual acuity in patients with low vision		
	KB11.	The basic use of computers		
	KB12.	Measuring visual acuity also allows the optometrist to:		
		Assess eccentric viewing postures and skills		
		 Assess scanning ability (for patients with restricted fields) 		
		Assess patient motivation		
		• Teach basic concepts and skills (i.e., to eccentrically view) relevant to the rehabilitation process		
	KB13.	Evaluate abnormalities detected by screening, to identify risk factors for		
		disease, to detect and diagnose sight- and health-threatening disease, and to		
		initiate a plan of treatment as necessary and to address the following goals:		
		Identify risk factors for ocular disease		
		Identify risk factors for octain disease Identify systemic disease based on associated ocular findings		
		Identify factors that may predispose to visual loss		
		Determine the health status of the eye, visual system and related		
		structures, and assess refractive errors		
		 Discuss the nature of the findings of the examination and their 		
		implications with the parent/caregiver, primary care physician and, when		
		appropriate, the patient		
		 Initiate an appropriate management plan (e.g., treatment, counselling, 		
		further diagnostic tests, referral, follow-up, early intervention services)		
Skills (S)				
A. Core Skills/	Writin	g Skills		







Generic Skills	The user/ individual on the job needs to know and understand how to:				
	SA1. Accurately record results and patient responses				
	Pooding Skills				
	Reading Skills				
	The user/individual on the job needs to know and understand how to:				
	SA2. Read notes and comments on patients' history, intake and assessment forms				
	Oral Communication (Listening and Speaking skills)				
	The user/individual on the job needs to know and understand how to:				
	SA3. Confirm patient's existing use of optical correction				
	SA4. Confirm patient's understanding of procedure and requirements for				
B. Professional Skills	Decision Making				
b. Troicssional skins	The user/individual on the job needs to know and understand how to:				
	The dser/marviadar on the job fleeds to know and dilderstand flow to.				
	SB1. Select appropriate visual acuity test according to patients age, co-operation,				
	ability and any cultural and special needs				
	Plan and Organise				
	The user/individual on the job needs to know and understand:				
	SB2. Position and align patient at the correct distance from the test chart				
	SB3. Change distance from test chart if appropriate				
	SB4. Ensure the chart is correctly illuminated for test purpose				
	Patient Centricity				
	The user/individual on the job needs to:				
	SB5. Perform tests for visual acuity consistent with personal role, responsibilities				
	and level of competence				
	SB6. Instruct patient clearly, including wearing of current optical correction				
	appropriate to the test distance				
	Problem Solving				
	The user/individual on the job needs to know and understand how to:				
	SB7. Interpret the patient needs related to the procedure				
	Analytical Thinking				
	Not Applicable				







	Critical Thinking			
	The user/individual on the job needs to know and understand how to:			
	SB8. Apply, analyse, and evaluate the information gathered from observation,			
	experience, reasoning, or communication, as a guide to belief and action			









.....

NOS Version Control

NOS Code	HSS/ N 3002		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
Occupation	Vision technician	Next review date	22/12/16





Assess refractive status

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an individual to measure the refractive error. Individuals performing refraction must, as a minimum, be able to perform autorefraction and understand the principles of retinoscopy and subjective refraction.







Unit Code	HSS/ N 3003			
Unit Title				
(Task)	Assess refractive status			
Description	This OS relates to the measurement of refractive error. Individuals performing refraction must, as a minimum, be able to perform autorefraction and understand the principles of retinoscopy and subjective refraction.			
Scope	 Improving the visual acuity, visual function, and visual comfort in patients with a refractive error by correcting the refractive error when appropriate, by addressing the following goals: Determine the patient's visual needs. Identify and quantify any refractive errors. Discuss with the patient the nature of the refractive error, appropriate alternatives for correction, and the risks and benefits of each approach. Inform patients, especially those with high refractive errors, about the potentially increased incidence of associated pathologic conditions. Correct symptomatic refractive errors with spectacles, contact lenses, or surgery as desired by the informed patient and as deemed appropriate by the physician. Provide the patient with follow-up care and management of any side effects or complications resulting from the correction provided. 			
Performance Criteria (F	PC) w.r.t. the Scope			
Element	Performance Criteria			
	PC1. Confirm patient's existing use of optical correction PC2. Confirm patient's understanding of procedure and requirements for compliance PC3. Instill mydriatic or cycloplegic drops or ointments as indicated, according to personal role and responsibilities and local protocols PC4. Position and align patient correctly PC5. Measure refractive error for distance with an autorefractor PC6. Document refraction accurately, with correct notation in patient record PC7. Transpose the optical prescription as needed PC8. Perform additional measurements of refractive error consistent with personal role, responsibilities and level of competence			
Knowledge and Unders	tanding (K)			
A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and	 The user/individual on the job needs to know and understand: KA1. Personal role, responsibilities and level of competence for performing procedures KA2. Requirements for accurate and legible recording of information KA3. Relevant protocols for procedure and their correct interpretation 			







B. Technical	The user/individual on the job needs to know and understand:				
Knowledge					
	KB1. Requirements and protocols for maintenance and calibration of equipment				
	KB2. Different types of refractive error and their correction				
	KB3. Principles and methods of objective and subjective measurement of refractive				
	error				
	KB4. Indications and contraindications for medications used for cycloplegic				
	refraction and possible adverse effects				
	KB5. Optical prescription notation, and how to transpose an optical prescription				
	KB6. Possible consequences of inaccurate measurement and recording of				
	refractive error				
	KB7. Changes in corneal curvature and refraction that can be induced by contact				
	lens wear				
	· · · · · · · · · · · · · · · · · · ·				
	and how to estimate refractive error from unaided visual acuity				
	KB9. How to perform and be skilled in different types of retinoscopy: mirror, spot,				
	streak and autorefractrometry				
	KB10. The basic use of computers				
Skills (S)					
A. Core Skills/	Writing Skills				
Generic Skills	The user/ individual on the job needs to know and understand how to:				
Control Chang					
	SA1. Record observations made during the procedure				
	SA2. Document refraction accurately, with correct notation in patient record				
	SA3. Transpose the optical prescription as needed				
	Reading Skills				
	The user/individual on the job needs to know and understand how to:				
	SA4. Read notes and comments on patients' history, intake and assessment forms.				
	They review patients' health histories, clinical notes, test results, prescriptions				
	and treatment programs prior to and during their appointments.				
	Oral Communication (Listening and Speaking skills)				
	Oral Communication (Listening and Speaking Skins)				
	The user/individual on the job needs to know and understand how to:				
	The aser, marriage on the job needs to know and anderstand now to				
	SA5. Confirm patient's existing use of optical correction				
	SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for				
	SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for compliance				
	SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for compliance SA7. Interact with patients during eye examinations. They explain diagnoses and				
	SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for compliance SA7. Interact with patients during eye examinations. They explain diagnoses and discuss the pros and cons of various treatment options. During optometric				
	SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for compliance SA7. Interact with patients during eye examinations. They explain diagnoses and discuss the pros and cons of various treatment options. During optometric testing, they question patients about their lifestyles, general health status,				
	 SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for compliance SA7. Interact with patients during eye examinations. They explain diagnoses and discuss the pros and cons of various treatment options. During optometric testing, they question patients about their lifestyles, general health status, medical history, occupations and hobbies to recommend the most 				
	 SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for compliance SA7. Interact with patients during eye examinations. They explain diagnoses and discuss the pros and cons of various treatment options. During optometric testing, they question patients about their lifestyles, general health status, medical history, occupations and hobbies to recommend the most appropriate types of glasses or contact lenses. Optometrists must reassure 				
	 SA5. Confirm patient's existing use of optical correction SA6. Confirm patient's understanding of procedure and requirements for compliance SA7. Interact with patients during eye examinations. They explain diagnoses and discuss the pros and cons of various treatment options. During optometric testing, they question patients about their lifestyles, general health status, medical history, occupations and hobbies to recommend the most 				





HSS/ N 3003	Assess retractive status
	SA8. Communicate with health professionals such as family physicians and ophthalmologists to discuss specific cases or to request consultations for patients. For example, they may discuss increases in intraocular pressure with patients' family doctors to determine appropriate treatments and follow-up plans
B. Professional Skills	Decision Making
	The user/individual on the job needs to know and understand how to:
	SB1. Make decisions about optometric methods and tools. For example, they follow established protocols and use their specialized knowledge to decide which tests to use. They consider best practices, patients' needs, the conditions of their eyes, costs and patients' preferences to select treatment options such as type of lens and degree of magnification. SB2. Decide when to refer patients to specialists. They consider the urgency and severity of patients' problems and the normal development of their diseases.
	Plan and Organise
	The user/individual on the job needs to know and understand:
	SB3. Optometrists organise routine patient visits within highly structured appointment schedules
	Patient Centricity
	The user/individual on the job needs to know and ensure that:
	SB4. Position and align patient correctly
	SB5. Perform additional measurements of refractive error consistent with personal role, responsibilities and level of competence
	SB6. Measure refractive error for distance with an autorefractor
	Problem Solving
	The user/individual on the job needs to know and understand how to:
	SB7. Treat patients who have unexplained symptoms or provide information that is inconsistent with optometric test results. They may repeat tests to confirm their accuracy, consult the Compendium of Pharmaceutical Specialties to see if patients' medications could cause the unexplained symptoms, consult colleagues or refer patients to their family doctors or specialists to reach reliable diagnoses
	Analytical Thinking
	The user/individual on the job needs to know and understand how to:
	SB8. Interpret the observations and report them SB9. Estimate the size and position of abnormalities noted during eye examinations (Numerical Estimation)
	Critical Thinking
	The user/individual on the job needs to know and understand how to:
	- 111 , In a just the day to this and an animal to the total







SB10. Assess the health and functionality of patients' eyes and the severity of their conditions SB11. Analyse the reason for variation in readings of autorefractor and take
appropriate measures









Assess refractive status

NOS Version Control

NOS Code	HSS/ N 3003		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
Occupation	Vision technician	Next review date	22/12/16









Dispense spectacles and dispense optical prescription accurately

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an individual for determination of spectacles and contact lenses prescription.







Unit Code HSS/ N 3005 **Unit Title** Dispense spectacles and dispense optical prescription accurately (Task) Description This OS relates to Dispensing spectacles and dispensing optical prescription accurately. Scope This unit/task covers the following: Ascertaining the presence of such conditions as near-sightedness, farsightedness, or astigmatism. Providing appropriate treatment (e.g., prescribing eyeglasses and contact lenses, low vision aids, and, as discussed above, topical medications for the eve). Performance Criteria (PC) w.r.t. the Scope **Performance Criteria Element** To be competent, the user/individual on the job must be able to: PC1. Confirm patient's existing use of optical correction PC2. Measure optical prescription of spectacles, including distance, intermediate, near and prismatic corrections of visual aids PC3. Transpose optical prescription as needed PC4. Document optical prescription accurately, with correct notation in patient record **Knowledge and Understanding (K)** The user/individual on the job needs to know and understand: A. Organisational Context KA1. Personal role, responsibilities and level of competence for performing (Knowledge of the investigations Healthcare KA2. Requirements for accurate and legible recording of information provider/ Organisation and its processes) **B.** Technical The user/individual on the job needs to know and understand: Knowledge KB1. Requirements and protocols for maintenance and calibration of equipment KB2. How to maintain and calibrate focimeter How to identify the type of spectacle optical prescription by inspection KB3. KB4. How to identify spectacle correction by neutralisation of lenses KB5. Optical prescription notation and how to transpose an optical prescription Principles of focimetry and different types of focimeters KB6. KB7. Principles of optics relevant to lenses and prisms and correction of refractive error KB8. Different methods for measuring and documenting optical prescriptions in bifocals, trifocals, varifocals and contact lenses

How to identify the optical centre of a lens and lens decentration

KB9.







	KB10. How to identify and measure the power and orientation of a prism
	incorporated into a lens
	KB11. Possible consequences of inaccurate measurement and recording of optical
	prescriptions
	KB12. What are the different types of lenses (varifocal, bifocal and single vision
	lenses and advise the patients accordingly
	KB13. The basic use of computers
Skills (S)	
A. Core Skills/	Writing Skills
Generic Skills	The user/ individual on the job needs to know and understand how to:
	SA1. Document optical prescription accurately, with correct notation in patient record
	SA2. Complete optical prescription forms. They enter data such as patients'
	prescriptions for each eye including the sphere, cylinder, axis, prism and type
	of lenses required
	SA3. Write e-mail to colleagues, suppliers and patients. For example, they write
	short messages to colleagues on professional issues such as legislation, and
	queries to suppliers about products such as contact lenses.
	SA4. Enter data on intake and assessment forms. They record patients' health
	histories, diagnoses, clinical observations, eye health and visual acuity test
	results, recommended treatments and follow-up plans. They may mark eye
	diagrams to indicate patients' fields of vision, types of sight and corneal
	thickness
	Reading Skills
	The user/individual on the job needs to know and understand how to:
	SA5. Read product descriptions from contact lens manufacturers, pharmaceutical
	companies and optical laboratories to stay informed about new products
	SA6. Read instructions, warnings and other text on the labels of products such as
	contact lenses.
	SA7. Read short reports from family physicians and specialists to whom they have
	referred patients for information on patients' general health, test results,
	diagnoses, medications, prognoses, recommended treatments and follow-up
	plans
	SA8. Refer to data in tables and lists. For example, use conversion tables to
	determine required prescriptions when switching patients from eyeglasses to
	contact lenses. They scan product lists to identify the most appropriate
	brands of contact lenses to meet patients' needs. They review the water
	content, oxygen permeability, diameter, available prescription power and
	care instructions for various brands and types of contact lenses
	Oral Communication (Listening and Speaking skills)







.....

The user/individual on the job needs to know and understand how to:

- SA9. Confirm patient's existing use of optical correction
- SA10. Answer questions that the patient may have

B. Professional Skills

Decision Making

The user/individual on the job needs to know and understand how to:

SB1. Make decisions about optometric methods and tools. For example, they follow established protocols and use their specialized knowledge to decide which tests to use. They consider best practices, patients' needs, the conditions of their eyes, costs and patients' preferences to select treatment options such as type of lens and degree of magnification

Plan and Organise

The user/individual on the job needs to know and understand how to:

- SB2. Document the procedure completion and any observations
- SB3. Ensure that all the necessary equipment required to perform a particular task are handy

Patient Centricity

The user/individual on the job needs to know and understand how to:

SB4. Use patient centric approach and make the patient feel comfortable

Problem Solving

The user/individual on the job needs to know and understand how to:

SB5. Find that patients are unhappy with their glasses and contact lenses. For example, some patients may claim they cannot see well with their new glasses or that their contact lenses irritate their eyes. Optometrists schedule follow-up examinations to investigate the causes of the patients' complaints. For adaptation complaints, they may suggest patients continue to use the new glasses or contact lenses. If there are measurement errors, optometrists write new prescriptions for the glasses and contact lenses

Analytical Thinking

The user/individual on the job needs to know and understand how to:

- SB6. Interpret observations and report them
- SB7. Measure optical prescription of spectacles, including distance, intermediate, near and prismatic corrections of visual aids with manual and automatic focimeters

Critical Thinking

The user/individual on the job needs to know and understand how to:







SB8. Judge the suitability of prescribing contact lenses for particular clients. They

for their opinions

SB9. Interpret the results of vision tests such as retinoscopy and visual acuity and determine whether patients have glaucoma by measuring the pressure within their eyes, examining the optic nerves of their eyes and measuring their visual fields. Optometrists may evaluate patients' abilities to change focus, perceive colour and depth correctly

reach judgements by gathering information from files and conversations with clients. They also take measurements and may consult parents and caregivers





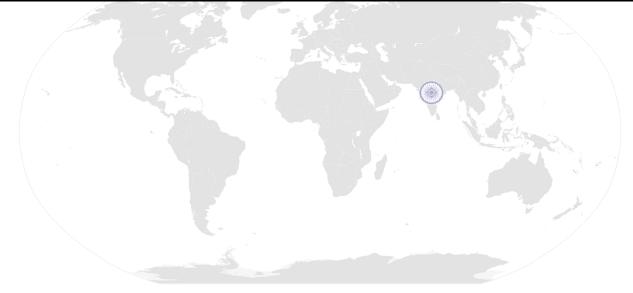




Dispense spectacles and dispense optical prescription accurately

NOS Version Control

NOS Code	HSS/ N 3004		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
Occupation	Vision technician	Next review date	22/12/16





HSS / N 5505:

Store medical records

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of a Medical records and health information technician to store and retain the medical records.







Unit Code	HSS/ N 5505 Store medical records					
Unit Title (Task)						
Description	This OS unit is about Medical records and health information technician storing and retaining the medical records for future reference					
Scope This unit/task covers the following: Storage and retention of medical records for future reference						
Performance Crite	erformance Criteria (PC) wrt the Scope					
Element	Performance Criteria					
Knowledge and U A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)	PC1. Retain and store the medical records as per the organisation protocol and review them for completion PC2. Know how to store the medical records PC3. Retain all records that reflect the clinical care provided to a patient, including provider notes, nurses' notes, diagnostic testing and medication lists PC4. Enter the laboratory results in the report carefully PC5. Know how to maintain and store the old records PC6. Take approval prior to destroying any old medical record **Moderstanding (K)** The user/individual on the job needs to know and understand: KA1. Relevant legislation, standards, policies, and procedures followed by the provider KA2. The importance of maintaining confidentiality of the patient information KA3. How to dress appropriately as per the guidelines of the healthcare provider KA4. How to follow established protocols as defined in organisation's policy while keeping and maintaining the medical records					
B Technical Knowledge	 The user/individual on the job needs to: KB1. Use correct code KB2. Ensure that all data is present if not then ask the concerned person KB3. Check that all laboratory results are same as those in laboratory reports and no information is missing KB4. Regularly update the reports KB5. Know the storage duration of different files i.e. for normal cases, death case and medico-legal case, and for cases related to transplant KB6. Arrange records properly in shelves in numeric order to facilitate easy retrieval when required KB7. Take special care to reserve the safety of records and protect them from insects, termites and prevent them from being exposed to heat, fire, dampness and dust 					

Skills (S) (Optional)







A.	Core Skills/	Writing Skills					
	Generic Skills	The user/ individual on the job needs to know and understand how to:					
		SA1. Write medical reports clearly and concisely and in a proper format SA2. Use effective written communication strategies SA3. Ensure that laboratory results are accurately documented and retained in accordance with existing legislation					
		Reading Skills					
		The user/individual on the job needs to:					
		SA4. Understand written sentences and paragraphs in work related documents SA5. Read the lab results and medical reports provided by nurse					
		Oral Communication (Listening and Speaking skills)					
		Oral Communication (Listening and Speaking skins)					
		The user/individual on the job needs to know and understand how to:					
		SA6. Practice effective communication with colleagues and other health professionals while maintaining a professional attitude					
		SA7. Seek out and listen to colleagues and other health professionals					
		SA8. Communicate with the concerned person if the information provided or the					
		medical records are not complete					
В.	Professional	Decision Making					
	Skills	The user/individual on the job needs to know and understand:					
		SB1. How to arrange the file management area for easy access and efficiency					
		SB2. Where to file documents and how to classify or code files based on notes					
		accompanying the documents and classification rules and policies					
		SB3. How to decide what requests merit priority and how to classify and file reports for					
		the ease of retrieval by records staff and other personnel					
		Plan and Organise					
		The user/individual on the job needs to know and understand how to:					
		CD4. Develop exception and plans to priorities, organics, and accomplish work					
		SB4. Develop specific goals and plans to prioritise, organise, and accomplish work Patient Centricity					
		The user/individual on the job needs to know and understand:					
		The user/maividual on the job needs to know and understand:					
		SB5. How to maintain patient confidentiality					
		Problem Solving					
		The user/individual on the job needs to:					
		SB6. Sometimes cope with a lost file by attempting to locate it and by checking					
		probable locations					
		Analytical Thinking					







The user/individual on the job needs to know and understand how to:

SB7. Follow medical records and diagnoses, and then decide how best to code them in a patient's medical records

Critical Thinking

The user/individual on the job needs to know and understand how to:

- SB8. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently
- SB9. Demonstrate the ability to adapt to rapidly changing situations, e.g.: responds appropriately to critical situations, retains composure in stressful situations, applies existing skills to new situations









NOS Version Control

NOS Code	HSS/ N 5505		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
Occupation	Vision technician	Next review date	22/12/16





Maintain confidentiality of medical records

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of a Medical records and health information technician to maintain confidentiality of medical records.







Maintain confidentiality of medical records

Unit Code	
Unit Title	HSS/ N 5506 Maintain confidentiality of medical records
(Task)	Maintain Connuentiality of medical records
Description	This OS unit is about the Medical records and health information technician maintaining
	confidentiality of medical records
Scope	This unit/task covers the following:
	Maintaining confidentiality of medical records
Performance Crite	ria (PC) wrt the Scope
Element	Performance Criteria
	To be competent, the user/individual on the job must know:
	PC1. How to maintain the confidentiality of the medical records
	PC2. That patient information should not be disclosed to any unauthorised person
	PC3. While releasing any information related to patient record follow the organisation
	policy and procedure and should have written consent by authorised person
	PC4. Medical Records in the department are kept secured and in strict confidentiality
Knowledge and Un	derstanding (K)
A. Organisation	The user/individual on the job needs to know and understand:
al	
Context	KA1. Relevant legislation, standards, policies, and procedures followed by the provider KA2. The importance of maintaining confidentiality of the patient information
(Knowledge of the Healthcare	KA3. How to dress appropriately as per the guidelines of the healthcare provider
provider/	KA4. How to follow established protocols as defined in organisation's policy while
Organisation	keeping and maintaining the medical records
and its	
processes)	
B. Technical	The user/individual on the job needs to know and understand:
Knowledge	
	KB1. Medical Records can be taken out of Medical Records Department only by
	authorised persons KB2. If the file/s are required for a purpose, other than patient appointment, the
	persons requesting the file/s should have written consent available
	KB3. To ensure maximum security against loss, tampering and from use by any
	unauthorised individual:
	No unauthorised persons should be allowed to enter medical records department on the basis access to medical records and of the
	department or to have access to patient medical records out of the department
	Patients or their relatives will not be allowed to carry the patient files or to
	keep them in their possessions
	KB4. Disclosure of information contained in the medical records are a breach of
	confidentiality
	KB5. Disclosure of any information to unauthorized persons would subject to disciplinary action and possible termination
	מוזיבוףוווומו אַ מבנוטוו מווע איטיטוטוב גבוווווומנוטוו







Maintain confidentiality of medical records

Skills (S) (Optional) A. Core Skills/ Generic The user/ individual on the job needs to know and understand how to	
Generic The user/individual on the job, needs to know and understand how to	
The user/individual on the ich needs to know and understand how to	
Skills The usery individual off the job fleeds to know and understand now to	0:
SA1. Write medical reports clearly and concisely and in a proper fo	rmat
SA2. Use effective written communication strategies	
SA3. Ensure that laboratory results are accurately documented and	d retained in
accordance with existing legislation	
Reading Skills	
The user/individual on the job needs to:	
SA4. Understand written sentences and paragraphs in work related	d documents
SA5. Read the lab results and medical reports provided by nurse	
Oral Communication (Listening and Speaking skills)	
The user/individual on the job needs to know and understand how to	:
SA6. Practice effective communication with colleagues and other h	ealth professionals
while maintaining a professional attitude	icultii professionals
SA7. Seek out and listen to colleagues and other health professional	als
SA8. Communicate with the concerned person if the information p	
medical records are not complete	
B. Professional Decision Making	
Skills The user/individual on the job needs to know and understand:	1 1 1
SB1. How to arrange the file management area for easy access and	efficiency
SB2. Where to file documents and how to classify or code files base	-
accompanying the documents and classification rules and poli	
SB3. How to decide what requests merit priority and how to classif	y and file reports for
the ease of retrieval by records staff and other personnel	
Plan and Organise	
The user/individual on the job needs to know and understand how to):
SB4. Develop specific goals and plans to prioritise, organise, and ac	complish work
Patient Centricity	
The user/individual on the job needs to know and understand:	
SB5. How to maintain patient confidentiality	
Problem Solving	
The user/individual on the job needs to:	
SB6. Attempting to locate a file which may have been misplaced by locations	checking probable







Maintain confidentiality of medical records

Analytical Thinking

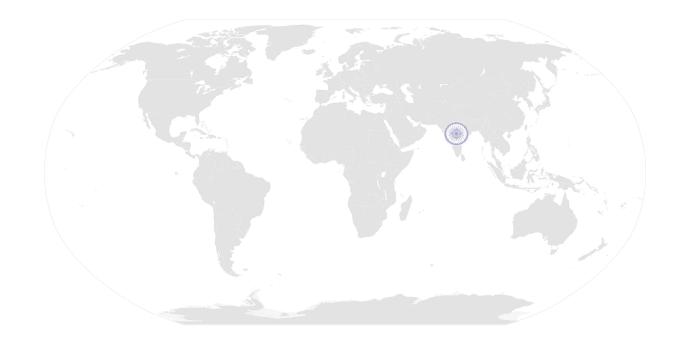
The user/individual on the job needs to know and understand how to:

SB7. Follow medical records and diagnoses, and then decide how best to code them in a patient's medical records

Critical Thinking

The user/individual on the job needs to know and understand how to:

- SB8. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently
- SB9. Demonstrate the ability to adapt to rapidly changing situations, e.g.: responds appropriately to critical situations, retains composure in stressful situations, applies existing skills to new situations





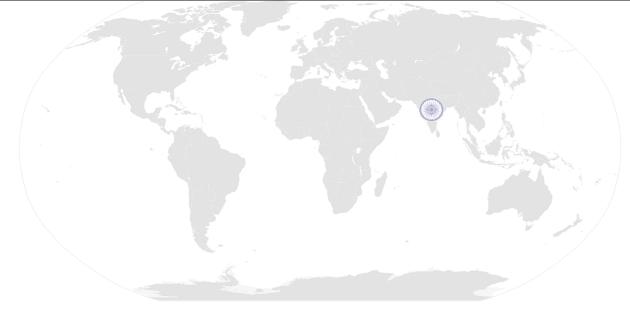




Maintain confidentiality of medical records

NOS Version Control

NOS Code	HSS/ N 5506		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
Occupation	Vision technician	Next review date	22/12/16









National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an Allied Health Professional to collate and communicate health related information.







Unit Code	HSS/ N 9601		
Unit Title			
(Task)	Collate and Communicate Health Information		
Description	This OS unit is about collating and communicating health information to community members, their family or others in response to queries or as part of health advice and counselling. This OS unit applies to all allied health professionals required to communicate health related information to patients, individuals, families and others		
Scope	This unit/task covers the following: • Communicating with individuals, patients, their family and others about health issues		
Performance Criteria (PC) w.r.t. the Scope		
Element	Performance Criteria		
	PC1. Respond to queries and information needs of all individuals PC2. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics PC3. Communicate with individuals at a pace and level fitting their understanding, without using terminology unfamiliar to them PC4. Utilise all training and information at one's disposal to provide relevant information to the individual PC5. Confirm that the needs of the individual have been met PC6. Adhere to guidelines provided by one's organisation or regulatory body relating to confidentiality PC7. Respect the individual's need for privacy PC8. Maintain any records required at the end of the interaction		
Knowledge and Under	standing (K)		
A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)	The user/individual on the job needs to know and understand: KA1. Guidelines on communicating with individuals KA2. Guidelines on maintaining confidentiality and respecting need for privacy KA3. Guidelines of the organisation/ health provider on communicating with individuals and patients		
B. Technical Knowledge	The user/individual on the job needs to know and understand:		







	KB1. How to communicate effectively		
	KB2. When to ask for assistance when situations are beyond one's competence and authority		
	KB3. How to maintain confidentiality and to respect an individual's need for privacy		
	KB4. How to ensure that all information provided to individuals is from reliable		
	sources KB5. How to handle stressful or risky situations when communicating with		
	individuals		
	KB6. Difficulties that can occur when communicating with individuals and family members in stressful situations and how to manage these		
Skills (S)			
A. Core Skills/	Writing Skills		
Generic Skills	The user/ individual on the job-needs to know and understand how to:		
	SA1. Write at least one local/ official language used in the local community		
	SA2. Maintain any records required after the interaction		
	Reading Skills		
	The user/individual on the job needs to know and understand how to:		
	SA3. Read instructions and pamphlets provided as part of training		
	Stell Head mod determs and paintprincts provided as part of draining		
	Oral Communication (Listening and Speaking skills)		
	The user/individual on the job needs to know and understand how to:		
	SA4. Speak at least one local language		
	SA5. Communicate effectively with all individuals		
	S. S. Communicate effectively with an individuals		
B. Professional Skills	Decision Making		
	The user/individual on the job needs to know and understand how to:		
	SB1. Make decisions on information to be communicated based on needs of the		
	individual and various regulations and guidelines		
	Plan and Organise		
	The user/individual on the job needs to know and understand:		
	Not applicable		







Patient Centricity

The user/individual on the job needs to know and understand how to:

SB2. Be responsive to problems of the individuals
SB3. Be available to guide, counsel and help individuals when required
SB4. Be patient and non-judgemental at all times

Problem Solving

The user/individual on the job needs to know and understand how to:

SB5. Create work-around to overcome problems faced in carrying out roles and duties

Analytical Thinking

Not applicable

Critical Thinking

Not applicable

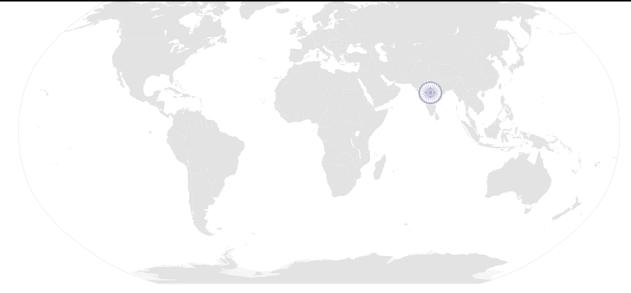






NOS Version Control

NOS Code	HSS/ N 9601		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
		Next review date	22/12/16









National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health Professional to recognise the boundaries of the role and responsibilities and working within the level of competence in accordance with legislation, protocols and guidelines

Unit Code







HSS/ N 9603: Act within the limits of one's competence and authority

HSS/ N 9603

|--|

Unit Title (Task)	Act within the limits of one's competence and authority
Description	This OS unit is about recognising the boundaries of the role and responsibilities and working within the level of competence in accordance with legislation, protocols and guidelines This is applicable to all Allied Health Professionals working in an organised, regulated environment
Scope	This unit/task covers the following: Acting within the limit of one's competence and authority; Knowing one's job role Knowing one's job responsibility Recognising the job role and responsibilities of co workers Reference: 'This National Occupational Standard is from the UK Skills for Health suite [SFHGEN63, Act within the limits of your competence and authority] It has been tailored to apply to healthcare in India and has been reproduced with their permission'.
Performance Criteria (F	PC) wrt The Scope
Element	Performance Criteria
	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice PC2. Work within organisational systems and requirements as appropriate to one's role PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority PC4. Maintain competence within one's role and field of practice PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice PC6. Promote and demonstrate good practice as an individual and as a team member at all times PC7. Identify and manage potential and actual risks to the quality and safety of practice PC8. Evaluate and reflect on the quality of one's work and make continuing improvements
Knowledge and Unders	
A. Organisational Context	The user/individual on the job needs to know and understand:







(Knowledge of the Healthcare provider/ Organisation and its processes)	KA1. The relevant legislation, standards, policies, and procedures followed in the organisationKA2. The medical procedures and functioning of required medical equipmentKA3. Role and importance of assisting other healthcare providers in delivering care
B. Technical Knowledge	KB1. The boundaries of one's role and responsibilities and other team members KB2. The reasons for working within the limits of one's competence and authority KB3. The importance of personally promoting and demonstrating good practice KB4. The legislation, protocols and guidelines effecting one's work KB5. The organisational systems and requirements relevant to one's role KB6. The sources of information that can be accessed to maintain an awareness of research and developments in one's area of work KB7. The difference between direct and indirect supervision and autonomous practice, and which combination is most applicable in different circumstances KB8. The risks to quality and safety arising from: Working outside the boundaries of competence and authority Not keeping up to date with best practice Poor communication Insufficient support Lack of resources KB9. The importance of individual or team compliance with legislation, protocols, and guidelines and organisational systems and requirements KB10. How to Report and minimise risks KB11. The principle of meeting the organisation's needs, and how this should enable one to recognise one's own limitations and when one should seek support from others KB12. The processes by which improvements to protocols/guidelines and organisational systems/requirements should be reported KB13. The procedure for accessing training, learning and development needs for oneself and/or others within one's organisation KB14. The actions that can be taken to ensure a current, clear and accurate understanding of roles and responsibilities is maintained, and how this affects the way one work as an individual or part of a team
Skills (S)	
A. Core Skills	Writing Skills
/Generic Skills	The user/ individual on the job needs to know and understand how to:
	SA1. Document reports, task lists, and schedules SA2. Prepare status and progress reports SA3. Record daily activities SA4. Update other co-workers
	1







	Reading Skills		
	The user/individual on the job needs to know and understand how to:		
	SA5. Read about changes in legislations and organisational policies SA6. Keep updated with the latest knowledge		
	Oral Communication (Listening and Speaking skills)		
	Crair community (Listermany and Spearing Smill)		
	The user/individual on the job needs to know and understand how to:		
	SA7. Discuss task lists, schedules, and work-loads with co-workers		
	SA8. Give clear instructions to patients and co-workers		
	SA9. Keep patient informed about progress		
	SA10. Avoid using jargon, slang or acronyms when communicating with a patient		
B. Professional Skills	Decision Making		
	The user/individual on the job needs to know and understand how to:		
	SB1. Make decisions pertaining to the concerned area of work in relation to job role		
	Plan and Organise		
	Not applicable		
	Patient Centricity		
	The user/individual on the job needs to know and understand how to:		
	SB2. Communicate effectively with patients and their family, physicians, and other		
	members of the health care team		
	SB3. Be responsive and listen empathetically to establish rapport in a way that		
	promotes openness on issues of concern		
	SB4. Be sensitive to potential cultural differences		
	SB5. Maintain patient confidentiality		
	SB6. Respect the rights of the patient(s)		
	Problem Solving		
	Not applicable		
	Analytical Thinking		
	Not applicable		
	Critical Thinking		
	Not applicable		







NOS Version Control

NOS Code	HSS/ N 9603		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
		Next review date	22/12/16









National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health Professional to monitor the working environment, and making sure it meets health, safety and security requirements.







Unit Code	HSS/ N 9606		

Unit Code	HSS/ N 9606		
Unit Title (Task)	Maintain a safe, healthy, and secure working environment		
Description	This OS unit is about monitoring the working environment and ensuring a safe, healthy, secure and effective working conditions This OS unit applies to all Allied Health professionals working within an organised workplace		
Scope	 This unit covers the following: Complying the health, safety and security requirements and procedures for workplace Handling any hazardous situation with safely, competently and within the limits of authority Reporting any hazardous situation and breach in procedures to ensure a safe, healthy, secure working environment 		
Performance Criteria (F	PC) wrt The Scope		
Element	Performance Criteria		
	To be competent, the user/ individual on the job must be able to: PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements PC2. Comply with health, safety and security procedures for the workplace PC3. Report any identified breaches in health, safety, and security procedures to the designated person PC4. Identify potential hazards and breaches of safe work practices PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person PC9. Complete any health and safety records legibly and accurately		
Knowledge and Unders	27.7		
A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)	To be competent, the user/ individual on the job needs to know and understand: KA1. The importance of health, safety, and security in the workplace KA2. The basic requirements of the health and safety and other legislations and regulations that apply to the workplace KA3. The person(s) responsible for maintaining healthy, safe, and secure workplace KA4. The relevant up-to-date information on health, safety, and security that applies to the workplace KA5. How to report the hazard KA6. The responsibilities of individual to maintain safe, healthy and secure workplace		







B. Technical Knowledge	To be competent, the user / individual on the job needs to know and understand: KB1. Requirements of health, safety and security in workplace		
	KB2. How to create safety records and maintaining them		
	KB3. The importance of being alert to health, safety, and security hazards in the work environment		
	KB4. The common health, safety, and security hazards that affect people working in an administrative role		
	KB5. How to identify health, safety, and security hazards		
	KB6. The importance of warning others about hazards and how to do so until the hazard is dealt with		
Skills (S)	nazard is dealt with		
A. Generic Skills	Writing Skills		
	To be competent, the user/ individual on the job needs to know and understand how		
	to:		
	SA1. Report and record incidents		
	Reading Skills		
	To be competent, the user/ individual on the job needs to know and understand how		
	to:		
	SA2. Read and understand company policies and procedures		
	Oral Communication (Listening and speaking skills)		
	To be competent, the user/ individual on the job needs to know and understand how to:		
	SA3. Clearly report hazards and incidents with the appropriate level of urgency		
B. Professional Skills	Decision Making		
	To be competent, the user/ individual on the job needs to know and understand how		
	to:		
	SB1. Make decisions pertaining to the area of work		
	Plan and Organise		
	To be competent, the user / individual on the job needs to know and understand how		
	to:		
	SB2. Plan for safety of the work environment		
	Patient Centricity		
	To be competent, the user / individual on the job needs to know and understand:		
	SB3. Communicate effectively with patients and their family, physicians, and other members of the health care team		
	SB4. Be capable of being responsive, listen empathetically to establish rapport in a		
	1 304. De capable of being responsive, listen empathetically to establish rapport in a		







- SB5. Be sensitive to potential cultural differences
- SB6. Maintain patient confidentiality
- SB7. Respect the rights of the patient(s)

Problem Solving

To be competent, the user/ individual on the job needs to know and understand how to:

SB8. Identify hazards, evaluate possible solutions and suggest effective solutions

Analytical Thinking

To be competent, the user needs to know and understand how to:

SB9. Analyse the seriousness of hazards

Critical Thinking

To be competent, the user needs to know and understand how to:

SB10. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently

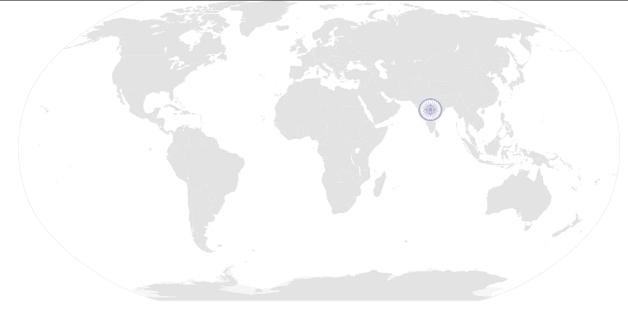






NOS Version Control

NOS Code	HSS/ N 9606		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
		Next review date	22/12/16









National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an Allied Health professional to practice code of conduct setup by the healthcare provider







Unit Code	HSS/ N 9607
Unit Title (Task)	Practice Code of conduct while performing duties
Description	This OS unit is about following the rules, regulations and the code of conduct setup by the healthcare provider The Allied health professional must adhere to the protocols and guidelines relevant to the field and practice This OS unit applies to all Allied health professionals working in an organised environment and to whom specific regulations and codes of conduct apply
Scope	Recognising the guidelines and protocols relevant to the field and practice Following the code of conduct as described by the healthcare provider Demonstrating best practices while on the field
Performance Criteria (F	PC) wrt The Scope
Element	Performance Criteria
	PC1. Adhere to protocols and guidelines relevant to the role and field of practice PC2. Work within organisational systems and requirements as appropriate to the role PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority PC4. Maintain competence within the role and field of practice PC5. Use protocols and guidelines relevant to the field of practice PC6. Promote and demonstrate good practice as an individual and as a team member at all times PC7. Identify and manage potential and actual risks to the quality and patient safety PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem
Knowledge and Unders	
A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)	To be competent, the user/ individual on the job needs to know and understand: KA1. Relevant legislation, standards, policies, and procedures followed in the hospital KA2. How to engage and interact with other providers in order to deliver quality and maintain continued care KA3. Personal hygiene measures and handling techniques
B. Technical Knowledge	To be competent, the user / individual on the job needs to know and understand: KB1. The limitations and scope of the role and responsibilities along with an understanding of roles and responsibilities of others KB2. The importance of working within the limits of one's competence and authority







	·
	KB3. The detrimental effects of non-compliance KB4. The importance of personal hygiene KB5. The importance of intercommunication skills KB6. The legislation, protocols and guidelines related to the role KB7. The organisational systems and requirements relevant to the role KB8. The sources of information and literature to maintain a constant access to upcoming research and changes in the field KB9. The difference between direct and indirect supervision and autonomous practice, and which combination is most applicable in different circumstances KB10. Implications to quality and safety arising from:
Skills (S)	
A. Core Skills /Generic Skills	Writing Skills To be competent, the user/ individual on the job needs to know and understand how to: SA1. Document reports, task lists, and schedules with co-workers SA2. Prepare status and progress reports related to patient care SA3. Update the physician and the other co-workers Reading Skills To be competent, the user/ individual on the job needs to know and understand how to: SA4. Read about procedures, regulations and guidelines related to the organisation and the profession SA5. Keep updated with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities
	Oral Communication (Listening and speaking skills)







	To be competent, the user/ individual on the job needs to know and understand how to: SA6. Interact with patients SA7. Give clear instructions to patients, patients relatives and other healthcare providers SA8. Avoid using jargon, slang or acronyms, while communicating with a patient			
B. Professional Skills	Decision Making			
	To be competent, the user/ individual on the job needs to know and understand how to: SB1. Make decisions based on applicable regulations and codes of conduct when possible conflicts arise			
	SB2. Act decisively by balancing protocols and work at hand			
	Plan and Organise			
	Not applicable			
	Patient Centricity			
	To be competent, the user / individual on the job needs to know and understand how to: SB3. Communicate effectively with patients and their family, physicians, and other members of the health care team SB4. Maintain patient confidentiality SB5. Respect the rights of the patient(s) SB6. Respond patients' queries and concerns SB7. Maintain personal hygiene to enhance patient safety Problem Solving Not applicable Analytical Thinking			
	Critical Thinking			
	Not applicable			







NOS Version Control

NOS Code	HSS/ N 9607		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
		Next review date	22/12/16







Manage biomedical waste

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an Allied Health professional to manage biomedical waste







Follow biomedical waste disposal protocols

Unit Code	HSS/ N 9609		
Unit Title (Task)	Follow biomedical waste disposal protocols		
Description	This OS unit is about the safe handling and management of health care waste. This unit applies to all Allied Health professionals.		
Scope	This unit/task covers the following: Classification of the Waste Generated Segregation of Biomedical Waste Proper collection and storage of Waste Reference: 'The content of this National Occupational Standard is drawn from the UK Skills for Health NOS [SFHCHS212 Disposal of clinical and non-clinical waste within healthcare and SFHCHS213 Implement an audit trail for managing waste within healthcare]'		
Performance Criteria (F	C) w.r.t. the Scope		
Element	Performance Criteria		
Vnovilodge and Lindow	 PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements PC4. Segregation should happen at source with proper containment, by using different color coded bins for different categories of waste PC5. Check the accuracy of the labelling that identifies the type and content of waste PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal PC7. Check the waste has undergone the required processes to make it safe for transport and disposal PC8. Transport the waste to the disposal site, taking into consideration its associated risks PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols 		
Knowledge and Unders			
A. Organisational Context	The user/individual on the job needs to know and understand:		







Follow biomedical waste disposal protocols

(Knowledge of the	KA1. Basic requirements of the health and safety and other legislations and
Healthcare	regulations that apply to the organisation
provider/	KA2. Person(s) responsible for health, safety, and security in the organisation
Organisation and	KA3. Relevant up-to-date information on health, safety, and security that applies to
its processes)	the organisation
(KA4. Organisation's emergency procedures and responsibilities for handling
D. Tarabadaal	hazardous situations
B. Technical	The user/individual on the job needs to know and understand:
Knowledge	VD4 . How to estadouico wasta according to maticual local and expenientianal
	KB1. How to categorise waste according to national, local and organisational guidelines
	KB2. The appropriate approved disposal routes for waste
	KB3. The appropriate containment or dismantling requirements for waste and
	how to make the waste safe for disposal
	KB4. The importance to adhere to the organisational and national waste
	management principles and procedures
	KB5. The hazards and risks associated with the disposal and the importance of risk
	assessments and how to provide these
	KB6. The personal protective equipment required to manage the different types of waste generated by different work activities
	KB7. The importance of working in a safe manner when carrying out procedures
	for biomedical waste management in line with local and national policies and
	legislation
	KB8. The required actions and reporting procedures for any accidents, spillages
	and contamination involving waste
	KB9. The requirements of the relevant external agencies involved in the transport
	and receipt of your waste
	KB10. The importance of segregating different types of waste and how to do this
	KB11. The safe methods of storage and maintaining security of waste and the
	permitted accumulation times
	KB12. The methods for transporting and monitoring waste disposal and the appropriateness of each method to a given scenario
	KB13. How to report any problems or delays in waste collection and where to seek
	advice and guidance
	KB14. The importance of the organisation monitoring and obtaining an assessment
	of the impact the waste has on the environment
	KB15. The current national legislation, guidelines, local policies and protocols
	which affect work practice
	KB16. The policies and guidance that clarify your scope of practice, accountabilities
	and the working relationship between yourself and others
Skills (S)	
A. Core Skills/	Writing Skills
Generic Skills	The user/ individual on the job needs to know and understand how to:
	SA1 Papart and record incidents
	SA1. Report and record incidents







Follow biomedical waste disposal protocols

	Reading Skills				
	The user/individual on the job needs to know and understand how to:				
	SA2. Read and understand company policies and procedures for managing biomedical waste				
	Oral Communication (Listening and Speaking skills)				
	The user/individual on the job needs to know and understand how to:				
	SA3. Report hazards and incidents clearly with the appropriate level of urgency				
B. Professional Skills	Decision Making				
	The user/individual on the job needs to know and understand how to:				
	SB1. Make decisions pertaining to the area of work				
	SB2. Exhibit commitment to the organisation and exert effort and perseverance				
	Plan and Organise				
	The user/individual on the job needs to know and understand how to:				
	SB3. Organise files and documents				
	SB4. Plan for safety of the work environment				
	SB5. Recommend and implement plan of action				
	Patient Centricity				
	The user/individual on the job needs to know and understand:				
	SB6. How to make exceptional effort to keep the environment and work place				
	clean				
	Problem Solving				
	The user/individual on the job needs to know and understand how to:				
	SB7. Identify hazards and suggest effective solutions to identified problems of				
	waste management				
	Analytical Thinking				
	The user/individual on the job needs to know and understand how to:				
	SB8. Analyse the seriousness of hazards and proper waste management				
	Critical Thinking				
	The user/individual on the job needs to know and understand how to:				
	SB9. Evaluate opportunities to improve health, safety and security				
	SB10. Show understanding and empathy for others				







HSS/ N 9609: Follow biomedical waste disposal protocols

NOS Version Control

NOS Code	HSS/ N 9609		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
	4100	Next review date	22/12/16









National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health professional to comply with infection control policies and procedures.







Unit Code	HSS/ N 9610				
Unit Title (Task)	Follow infection control policies and procedures				
Description	This OS unit is about complying with infection control policies and procedures. It is applicable to workers who are responsible for workplace procedures to maintain infection control. This unit applies to all Allied Health professionals.				
Scope	This unit/task covers the following:				
	 Complying with an effective infection control strategy with an effective infection control strategy that ensures the safety of the patient (or end-user of health-related products/services) Maintaining personal protection and preventing the transmission of infections from person to person 				
Performance Criteria (l					
Element	Performance Criteria				
Element	Performance Criteria				
	PC1. Preform the standard precautions to prevent the spread of infection in accordance with organisation requirements PC2. Preform the additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection PC3. Minimise contamination of materials, equipment and instruments by aerosols and splatter PC4. Identify infection risks and implement an appropriate response within own role and responsibility PC5. Document and report activities and tasks that put patients and/or other workers at risk PC6. Respond appropriately to situations that pose an infection risk in accordance with the policies and procedures of the organization PC7. Follow procedures for risk control and risk containment for specific risks PC8. Follow protocols for care following exposure to blood or other body fluids as required PC9. Place appropriate signs when and where appropriate PC10. Remove spills in accordance with the policies and procedures of the organization PC11. Maintain hand hygiene by washing hands before and after patient contact and/or after any activity likely to cause contamination PC12. Follow hand washing procedures PC13. Implement hand care procedures PC14. Cover cuts and abrasions with water-proof dressings and change as necessary PC15. Wear personal protective clothing and equipment that complies with Indian Standards, and is appropriate for the intended use				







H22/ N 3610:	Follow infection control policies and procedures			
	PC16. Change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact PC17. Demarcate and maintain clean and contaminated zones in all aspects of health care work			
	PC18. Confine records, materials and medicaments to a well-designated clean zone PC19. Confine contaminated instruments and equipment to a well-designated			
	contaminated zone PC20. Wear appropriate personal protective clothing and equipment in accordance with occupational health and safety policies and procedures when handling waste			
	PC21. Separate waste at the point where it has been generated and dispose of into waste containers that are colour coded and identified			
	PC22. Store clinical or related waste in an area that is accessible only to authorised persons			
	PC23. Handle, package, label, store, transport and dispose of waste appropriately to minimise potential for contact with the waste and to reduce the risk to the environment from accidental release			
	PC24. Dispose of waste safely in accordance with policies and procedures of the organisation and legislative requirements			
	PC25. Wear personal protective clothing and equipment during cleaning procedures PC26. Remove all dust, dirt and physical debris from work surfaces			
	PC27. Clean all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled PC28. Decontaminate equipment requiring special processing in accordance with			
	quality management systems to ensure full compliance with cleaning, disinfection and sterilisation protocols			
	PC29. Dry all work surfaces before and after use PC30. Replace surface covers where applicable			
Vaculadas and Hadays	PC31. Maintain and store cleaning equipment			
Knowledge and Unders	The user/individual on the job needs to know and understand:			
A. Organisational Context	The user/marviadar on the job fleeds to know and understand.			
(Knowledge of the	KA1. The organisation's infection control policies and procedures			
Healthcare	KA2. Organisation requirements relating to immunisation, where applicable			
provider/	KA3. Standard precautions			
Organisation and its processes)	KA4. Good personal hygiene practice including hand care			
B. Technical Knowledge	The user/individual on the job needs to know and understand:			
	KB1. Additional precautions			
	KB2. Aspects of infectious diseases including:			
	- opportunistic organisms			
	- pathogens KB3. Basic microbiology including:			
	- bacteria and bacterial spores			







	- fungi				
	- viruses				
	KB4. How to clean and sterile techniques				
	KB5. The path of disease transmission:				
	- paths of transmission including direct contact and penetrating injuries				
	- risk of acquisition				
	- sources of infecting microorganisms including persons who are carriers, in				
	the incubation phase of the disease or those who are acutely ill				
	KB6. Effective hand hygiene:				
	- procedures for routine hand wash				
	- procedures for routine hand wash				
	·				
	- when hands must be washed				
	KB7. Good personal hygiene practice including hand care				
	KB8. Identification and management of infectious risks in the workplace				
	KB9. How to use personal protective equipment such as:				
	- guidelines for glove use				
	- guidelines for wearing gowns and waterproof aprons				
	- guidelines for wearing masks as required				
	- guidelines for wearing protective glasses				
	KB10. Susceptible hosts including persons who are immune suppressed, have				
	chronic diseases such as diabetes and the very young or very old				
	KB11. Surface cleaning:				
	 cleaning procedures at the start and end of the day 				
	-managing a blood or body fluid spill				
	- routine surface cleaning				
	KB12. Sharps handling and disposal techniques				
	KB13. The following:				
	- Follow infection control guidelines				
	- Identify and respond to infection risks				
	- Maintain personal hygiene				
	- Use personal protective equipment				
	- Limit contamination				
	- Handle, package, label, store transport and dispose of clinical and other				
	waste				
	- Clean environmental surfaces				
Skills (S)					
A. Core Skills/	Writing Skills				
Generic Skills	The user/ individual on the job needs to know and understand how to:				
	SA1. Consistently apply hand washing, personal hygiene and personal protection				
	protocols				
	SA2. Consistently apply clean and sterile techniques				
	SA3. Consistently apply protocols to limit contamination				
	Reading Skills				







	The user/individual on the job needs to know and understand how to:					
	SA4. Follow instructions as specified in the protocols					
	Oral Communication (Listening and Speaking skills)					
	The user/individual on the job needs to know and understand how to:					
	SA5. Listen patiently					
	SA6. Provide feedback (verbal and non-verbal) to encourage smooth flow of					
B. Professional Skills	information Decision Making					
	The user/individual on the job needs to know and understand how to:					
	SB1. Take into account opportunities to address waste minimisation,					
	environmental responsibility and sustainable practice issues					
	SB2. Apply additional precautions when standard precautions are not sufficient					
	Plan and Organise					
	The user/individual on the job needs to:					
	SB3. Consistently ensure instruments used for invasive procedures are sterile at					
	time of use (where appropriate)					
	SB4. Consistently follow the procedure for washing and drying hands					
	SB5. Consistently limit contamination					
	SB6. Consistently maintain clean surfaces and manage blood and body fluid spills					
	Patient Centricity					
	The user/individual on the job needs to know and understand how to:					
	SB7. Be a good listener and be sensitive to patient					
	SB8. Avoid unwanted and unnecessary communication with patients					
	SB9. Maintain eye contact and non-verbal communication					
	Problem Solving					
	The user/individual on the job needs to know and understand how to:					
	SB10. Communicate only facts and not opinions					
	SB11. Give feedback when required					
	Analytical Thinking The user/individual on the job needs to know and understand how to:					
	SB12. Coordinate required processes effectively					
	Critical Thinking					
	The user/individual on the job needs to know and understand how to:					
	SB13. Apply, analyse, and evaluate the information gathered from observation,					
	experience, reasoning, or communication, as a guide to belief and action					







SB14. Take into account opportunities to address waste minimisation, environmental responsibility and sustainable practice issues









NOS Version Control

NOS Code	HSS/ N 9610		
Credits(NSQF)	TBD	Version number	1.0
Industry	Health	Drafted on	12/05/13
Industry Sub-sector	Allied Health and Paramedics	Last reviewed on	22/05/13
		Next review date	22/12/16







CRITERIA FOR ASSESSMENT OF TRAINEES

Job Role	Vision Technician
Qualification Pack	
<u>Code</u>	HSS/ Q 3001
Sector Skill Council	Healthcare Sector Skill Council

Guidelines for Assessment

- 1. Criteria for assessment for each Qualification Pack will be created by the Sector Skill Council. Each Performance Criteria (PC) will be assigned marks proportional to its importance in NOS. SSC will also lay down proportion of marks for Theory and Skills Practical for each PC
- 2. The assessment for the theory part will be based on knowledge bank of questions created by the SSC
- 3. Individual assessment agencies will create unique question papers for theory part for each candidate at each examination/training center (as per assessment criteria below)
- 4. Individual assessment agencies will create unique evaluations for skill practical for every student at each examination/training center based on this criteria
- 5. To pass the Qualification Pack, every trainee should score as per assessment grid.
- 6. In case of successfully passing only certain number of NOS's, the trainee is eligible to take subsequent assessment on the balance NOS's to pass the Qualification Pack

Skills Practical and Viva (80% weightage)				
	Marks Alloted			
Grand Total-1 (Subject Domain)	400			
Grand Total-2 (Soft Skills and communication)	100			
Grand Total-(Skills Practical and Viva)	500			
Passing Marks (80% of Max. Marks)	400			
Theory (20% we	ightage)			
	Marks Allotted			
Grand Total-1 (Subject Domain)	80			
Grand Total-2 (Soft Skills and communication)	20			
Grand Total-(Theory)	100			
Passing Marks (50% of Max. Marks)	50			





Grand Total-(Skills Practical and Viva + Theory)		600				
	Overall Result		Criteria is to pass in both theory and practical individually. If fail in any one of them, then candidate is fail			
D	etailed Break Up of Marks		Skills	Practical & V	iva	
	Subject Domain	Pick any	2 NOS ea	nch of 200 ma	rks totaling 400	
Assessable	Assessment Criteria for the	Total	Out	Mark	s Allocation	
Outcomes	Assessable Outcomes	Marks (400)	Of	Viva	Skills Practical	
1.HSS / N 3001 : Obtain the case history	PC1. Obtain and record the history of patient having ocular and/or visual symptoms including the onset, course of the disease, diagnostics conducted and treatment	200	30	20	10	
	PC2. Obtain and record the history of patient's past ocular diseases and conditions, including history of surgery to eye or ocular adnexae, and details of birth history/ pregnancy where appropriate		30	20	10	
	PC3. Obtain and record a family history of diseases affecting eye or vision, and any relevant general medical conditions or diseases		20	20	10	
	PC4. Obtain and record details of social history including occupation and details of exposure to industrial or occupational hazards		20	10	10	
	PC5. Obtain and record a history of patient's current and past general health and trauma, including any surgical procedures		30	20	10	
	PC6. Obtain and record a history of current medications for ocular conditions and general medical conditions		30	10	20	
	PC7. Obtain and record a history of any allergies or other adverse reactions to treatment		30	10	20	





	PC8. Identify area of concern and inform relevant professional if		10	3	7
	appropriate				,
	Total		200	113	97
2. HSS / N 3002 :	PC1. Confirm patient's existing use of optical correction		10	5	5
Measure visual acuity	PC2. Confirm patient's understanding of procedure and requirements for compliance		10	5	5
	PC3. Identify any cultural and special needs that may influence performance of test		10	5	5
	PC4. Perform tests for visual acuity consistent with personal role, responsibilities and level of competence		25	10	15
	PC5. Select appropriate visual acuity test according to patients age, cooperation, ability and any cultural and special needs	200	25	10	15
	PC6. Position and align patient at the correct distance from the test chart		10	3	7
	PC7. Change distance from test chart if appropriate		10	3	7
	PC8. Ensure the chart is correctly illuminated for test purpose		10	3	7
	PC9. Instruct patient clearly, including wearing of current optical correction appropriate to the test distance		20	15	5
	PC10. Ensure correct use of occluder		25	10	15
	PC11. Ensure correct use of pinhole		25	10	15
	PC12. Accurately record results and patient responses		20	10	10
	Total		200	89	111
3.HSS / N 3003 : Assess	PC1. Confirm patient's existing use of optical correction		20	10	10
refractive status	PC2. Confirm patient's understanding of procedure and requirements for compliance	200	40	20	20
	PC3. Instill mydriatic or cycloplegic drops or ointments as indicated, according to personal role and		30	10	20





	responsibilities and local protocols				
	PC4. Position and align patient correctly		20	10	10
	PC5. Measure refractive error for distance with an autorefractor		30	10	20
	PC6. Document refraction accurately, with correct notation in patient record		20	10	10
	PC7. Transpose the optical prescription as needed		20	5	15
	PC8. Perform additional measurements of refractive error consistent with personal role, responsibilities and level of competence		20	5	15
	Total		200	80	120
4. HSS / N 3004 :	PC1. Confirm patient's existing use of optical correction		30	10	20
Prescribe spectacles and dispense optical	PC2. Measure optical prescription of spectacles, including distance, intermediate, near and prismatic corrections of visual aids	200	70	30	40
prescription accurately	PC3. Transpose optical prescription as needed		70	30	40
	PC4. Document optical prescription accurately, with correct notation in patient record		30	15	15
	Total	1	200	85	115
5. HSS / N 5505 : Store medical records	PC1. Retain and store the medical records as per the organisation protocol and review them for completion		20	10	10
	PC2. Know how to store the medical records		30	10	20
	PC3. Retain all records that reflect the clinical care provided to a patient, including provider notes, nurses' notes, diagnostic testing and medication lists	200	60	20	40
	PC4. Enter the laboratory results in the report carefully		40	20	20
	PC5. Know how to maintain and store the old records		30	10	20





	PC6. Take approval prior to destroying any old medical record		20	10	10
	Total		200	80	120
6. HSS / N	Total		200	80	120
5506 : Maintain confidentiality	PC1. How to maintain the confidentiality of the medical records		50	20	30
of medical records	PC2. That patient information should not be disclosed to any unauthorised person		50	20	30
	PC3. While releasing any information related to patient record follow the organisation policy and procedure and should have written consent by authorised person	200	50	30	20
	PC4. Medical Records in the department are kept secured and in strict confidentiality		50	30	20
	Total		200	70	130
7. HSS/ N	PC1. Preform the standard				
9610 (Follow infection control	0 (Follow precautions to prevent the spread of infection in accordance with		5	0	5
policies and procedures)	PC2. Preform the additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection	200	5	0	5
	PC3. Minimise contamination of materials, equipment and instruments by aerosols and splatter		5	5	0
	PC4. Identify infection risks and implement an appropriate response within own role and responsibility		20	10	10
	PC5. Document and report activities and tasks that put patients and/or other workers at risk		5	0	5
	PC6. Respond appropriately to situations that pose an infection risk in accordance with the policies and procedures of the organization		5	0	5
	PC7. Follow procedures for risk control and risk containment for specific risks		10	0	10





		T	T	
PC8. Follow protocols for care				
following exposure to blood or other		10	0	10
body fluids as required				
PC9. Place appropriate signs when		20	10	10
and where appropriate		20	10	10
PC10. Remove spills in accordance				
with the policies and procedures of		5	0	5
the organization				
PC11. Maintain hand hygiene by				
washing hands before and after		5	0	5
patient contact and/or after any		ر	U	3
activity likely to cause contamination				
PC12. Follow hand washing		5	0	5
procedures		3	U	J
PC13. Implement hand care	5	0	5	
procedures			U	5
PC14. Cover cuts and abrasions with				
water-proof dressings and change as		5	5	0
necessary				
PC15. Wear personal protective				
clothing and equipment that		_	0	r
complies with Indian Standards, and		5		5
is appropriate for the intended use				
PC16. Change protective clothing and				
gowns/aprons daily, more frequently		_	0	5
if soiled and where appropriate, after		5	0	
each patient contact				
PC17. Demarcate and maintain clean				
and contaminated zones in all				
aspects of health care work				
PC18. Confine records, materials and				
medicaments to a well-designated		20	10	10
clean zone				
PC19. Confine contaminated				
instruments and equipment to a well-				
designated contaminated zone				
PC20. Wear appropriate personal				
protective clothing and equipment in				
accordance with occupational health	5	0	5	
and safety policies and procedures				
when handling waste				
PC21. Separate waste at the point				
where it has been generated and		_	5 0	_
dispose of into waste containers that		5		5
are colour coded and identified				
		·		





Juttomes	Assessable Outcomes	(100)		Viva	Role Play
Assessable Outcomes	Assessment Criteria for the Assessable Outcomes	Total Marks	Out		Allocation Observation/
Sof	t Skills and Communication		field from each part 1 & 2 randomly each carrying 50 marks totaling 100		-
	Total		200	55	145
	equipment		5	5	0
	applicable PC31. Maintain and store cleaning				
	PC30. Replace surface covers where		5	0	5
	PC29. Dry all work surfaces before and after use		5	0	5
	with cleaning, disinfection and sterilisation protocols				
	PC28. Decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance		5	0	5
	PC27. Clean all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled		5	0	5
	PC26. Remove all dust, dirt and physical debris from work surfaces		5	0	5
	PC25. Wear personal protective clothing and equipment during cleaning procedures		5	0	5
	PC24. Dispose of waste safely in accordance with policies and procedures of the organisation and legislative requirements		5	5	0
	PC23. Handle, package, label, store, transport and dispose of waste appropriately to minimise potential for contact with the waste and to reduce the risk to the environment from accidental release		5	0	5
	PC22. Store clinical or related waste in an area that is accessible only to authorised persons		5	5	0





HSS/ N 9603 (Act within the limits of	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice		4	0	4
one's competence and authority)	PC2. Work within organisational systems and requirements as appropriate to one's role		4	0	4
	PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority		14	7	7
	PC4. Maintain competence within one's role and field of practice	50	4	0	4
	PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice		6	3	3
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times		6	3	3
	PC7. Identify and manage potential and actual risks to the quality and safety of practice		6	3	3
	PC8. Evaluate and reflect on the quality of one's work and make continuing improvements		6	3	3
	Total		50	19	31
HSS/ N 9607 (Practice Code of	PC1. Adhere to protocols and guidelines relevant to the role and field of practice		6	2	4
conduct while performing duties)	PC2. Work within organisational systems and requirements as appropriate to the role		6	2	4
	PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority	50	6	2	4
	PC4. Maintain competence within the role and field of practice		4	0	4
	PC5. Use protocols and guidelines relevant to the field of practice		10	5	5
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times		4	0	4





	PC7. Identify and manage potential and actual risks to the quality and patient safety		4	0	4
	PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem		10	5	5
	Total		50	16	34
2. Communicat	ion Skills				
HSS/ N 9601 (Collate and	PC1. Respond to queries and information needs of all individuals		4	4	0
Communicate Health Information)	PC2. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics		10	0	10
	PC3. Communicate with individuals at a pace and level fitting their understanding, without using terminology unfamiliar to them	50	10	0	10
	PC4. Utilise all training and information at one's disposal to provide relevant information to the individual		10	10	0
	PC5. Confirm that the needs of the individual have been met		4	4	0
	PC6. Adhere to guidelines provided by one's organisation or regulatory body relating to confidentiality		4	4	0
	PC7. Respect the individual's need for privacy		4	4	0
	PC8. Maintain any records required at the end of the interaction		4	4	0
	Total		50	30	20
	Communication Total	50	50	30	20
Part 2 (Pick one 1. Safety mana	e field as per NOS marked carrying 50 m	arks)			
HSS/ N 9606 (Maintain a safe, healthy, and secure	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements		6	2	4
working environment)	PC2. Comply with health, safety and security procedures for the workplace	50	4	0	4
	PC3. Report any identified breaches in health, safety, and security		4	3	1





	procedures to the designated person				
	PC4. Identify potential hazards and breaches of safe work practices		6	4	2
	PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority		6	4	2
	PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected		6	4	2
	PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently		6	2	4
	PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person		6	4	2
	PC9. Complete any health and safety		6	2	4
	records legibly and accurately Total		50	25	25
2. Waste Mana					I.
HSS/ N 9609 (Follow biomedical waste disposal	PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type	50	6	2	4
protocols)	PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste		8	4	4
	PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements		4	0	4
	PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste		8	4	4
	PC5. Check the accuracy of the labelling that identifies the type and		4	2	2





content	of waste				
for any r	nfirm suitability of containers required course of action iate to the type of waste		4	4	0
the requ	eck the waste has undergone lired processes to make it transport and disposal		4	4	0
disposal	nsport the waste to the site, taking into ration its associated risks		4	4	0
and con	oort and deal with spillages tamination in accordance rent legislation and res		4	4	0
PC10. M legible r store in current	aintain full, accurate and ecords of information and correct location in line with legislation, guidelines, local and protocols		4	4	0
	Total		50	32	18
Grand Total-2 (Soft S	kills and communication)		1	100	
	Detailed Break Up of	Marks			Theory
	Subject Domain	ı			Pick all NOS totalling 80 marks
National Occupational Standards (NOS)	Assessment Criteria	a for the Asse	ssable Ou	itcomes	Weightage
1.HSS / N 3001 : Obtain the case history	PC1. Obtain and record the his visual symptoms including the diagnostics conducted and trope PC2. Obtain and record the his and conditions, including hist adnexae, and details of birth PC3. Obtain and record a fam	e onset, cours eatment istory of patie cory of surgery history/ pregi	ent's past to eye on	ocular diseases r ocular ere appropriate	16
	vision, and any relevant gene PC4. Obtain and record detail and details of exposure to inc	ral medical co Is of social his	onditions tory inclu	or diseases ding occupation	





	PC5. Obtain and record a history of patient's current and past general health and trauma, including any surgical procedures PC6. Obtain and record a history of current medications for ocular conditions and general medical conditions PC7. Obtain and record a history of any allergies or other adverse reactions to treatment PC8. Identify area of concern and inform relevant professional if appropriate	
32. HSS / N 3002 :	TOTAL	16
Measure visual acuity	PC1. Confirm patient's existing use of optical correction PC2. Confirm patient's understanding of procedure and requirements for compliance	
	PC3. Identify any cultural and special needs that may influence performance of test	
	PC4. Perform tests for visual acuity consistent with personal role, responsibilities and level of competence	
	PC5. Select appropriate visual acuity test according to patients age, cooperation, ability and any cultural and special needs	
	PC6. Position and align patient at the correct distance from the test chart	10
	PC7. Change distance from test chart if appropriate	
	PC8. Ensure the chart is correctly illuminated for test purpose	
	PC9. Instruct patient clearly, including wearing of current optical correction appropriate to the test distance	
	PC10. Ensure correct use of occluder	
	PC11. Ensure correct use of pinhole	
	PC12. Accurately record results and patient responses	
	TOTAL	10
.HSS / N 3003 : Assess refractive status	PC1. Confirm patient's existing use of optical correction	10





	PC2. Confirm patient's understanding of procedure and requirements for compliance	
	requirements for compliance	
	PC3. Instill mydriatic or cycloplegic drops or ointments as indicated, according to personal role and responsibilities and local protocols	
	PC4. Position and align patient correctly	
	PC5. Measure refractive error for distance with an autorefractor	
	PC6. Document refraction accurately, with correct notation in patient record	
	PC7. Transpose the optical prescription as needed	
	PC8. Perform additional measurements of refractive error consistent with personal role, responsibilities and level of competence	
	TOTAL	10
	PC1. Confirm patient's existing use of optical correction	
HSS / N 3004 : Prescribe spectacles and dispense optical	PC2. Measure optical prescription of spectacles, including distance, intermediate, near and prismatic corrections of visual aids	16
prescription	PC3. Transpose optical prescription as needed	
accurately	PC4. Document optical prescription accurately, with correct notation in patient record	
	TOTAL	16
	PC1. Retain and store the medical records as per the organisation protocol and review them for completion	
	PC2. Know how to store the medical records	
HSS / N 5505 : Store medical records	PC3. Retain all records that reflect the clinical care provided to a patient, including provider notes, nurses' notes, diagnostic testing and medication lists	10
	PC4. Enter the laboratory results in the report carefully	
	PC5. Know how to maintain and store the old records	
	PC6. Take approval prior to destroying any old medical record	
	TOTAL	
HSS / N 5506 : Maintain confidentiality of medical records	PC1. How to maintain the confidentiality of the medical records	
	PC2. That patient information should not be disclosed to any unauthorised person	10
medicarrecords	PC3. While releasing any information related to patient record follow the organisation policy and procedure and should have written consent by authorised person	





	PC4. Medical Records in the department are kept secured and in strict confidentiality	
	Total	10
	PC1. Preform the standard precautions to prevent the spread of infection in accordance with organisation requirements	
	PC2. Preform the additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection	
	PC3. Minimise contamination of materials, equipment and instruments by aerosols and splatter	
	PC4. Identify infection risks and implement an appropriate response within own role and responsibility	
	PC5. Document and report activities and tasks that put patients and/or other workers at risk	
HSS/ N 9610: Follow infection control	PC6. Respond appropriately to situations that pose an infection risk in accordance with the policies and procedures of the organization PC7. Follow procedures for risk control and risk containment for	. 8
	specific risks PC8. Follow protocols for care following exposure to blood or other	
policies and procedures	body fluids as required	
	PC9. Place appropriate signs when and where appropriate PC10. Remove spills in accordance with the policies and procedures of the organization	
	PC11. Maintain hand hygiene by washing hands before and after patient contact and/or after any activity likely to cause contamination	
	PC12. Follow hand washing procedures	
	PC13. Implement hand care procedures	
	PC14. Cover cuts and abrasions with water-proof dressings and change as necessary	
	PC15. Wear personal protective clothing and equipment that complies with Indian Standards, and is appropriate for the intended use	
	PC16. Change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact	





Grand Total-1 (Subject Domain)		
	Total	8
	PC31. Maintain and store cleaning equipment	
	PC30. Replace surface covers where applicable	
	PC29. Dry all work surfaces before and after use	
	compliance with cleaning, disinfection and sterilisation protocols	
	accordance with quality management systems to ensure full	
	PC28. Decontaminate equipment requiring special processing in	
	water solution before and after each session or when visibly soiled	
	PC26. Remove all dust, dirt and physical debris from work surfaces PC27. Clean all work surfaces with a neutral detergent and warm	
	Dispose of waste safely in accordance with policies and procedures of the organisation and legislative requirements	
	PC23. Handle, package, label, store, transport and dispose of waste appropriately to minimise potential for contact with the waste and to reduce the risk to the environment from accidental release	
	PC22. Store clinical or related waste in an area that is accessible only to authorised persons	
	PC21. Separate waste at the point where it has been generated and dispose of into waste containers that are colour coded and identified	
	PC20. Wear appropriate personal protective clothing and equipment in accordance with occupational health and safety policies and procedures when handling waste	
	PC19. Confine contaminated instruments and equipment to a well-designated contaminated zone	
	PC18. Confine records, materials and medicaments to a well-designated clean zone	
	PC17. Demarcate and maintain clean and contaminated zones in all aspects of health care work	





Soft Skills and Communication		Select all NOS totalling 20
National Occupational Standards (NOS)	Assessment Criteria for the Assessable Outcomes	Weightage
HSS/ N 9603 (Act within the limits of one's competence and authority)	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice PC2. Work within organisational systems and requirements as appropriate to one's role PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority PC4. Maintain competence within one's role and field of practice PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice PC6. Promote and demonstrate good practice as an individual and as a team member at all times PC7. Identify and manage potential and actual risks to the quality and safety of practice PC8. Evaluate and reflect on the quality of one's work and make continuing improvements	4
	TOTAL	4
HSS / N 9601 : Collate and communicate health information	PC1. Respond to queries and information needs of all individuals PC2. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics PC3. Communicate with individuals at a pace and level fitting their understanding, without using terminology unfamiliar to them PC4. Utilise all training and information at one's disposal to provide	4
	relevant information to the individual PC5. Confirm that the needs of the individual have been met	





	PC6. Adhere to guidelines provided by one's organisation or regulatory body relating to confidentiality	
	PC7. Respect the individual's need for privacy	
	PC8. Maintain any records required at the end of the interaction	
	TOTAL	4
HSS/ N 9607 (Practice	PC1. Adhere to protocols and guidelines relevant to the role and field of practice PC2. Work within organisational systems and requirements as	
	appropriate to the role PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority	4
Code of conduct while performing duties)	PC4. Maintain competence within the role and field of practice	4
	PC5. Use protocols and guidelines relevant to the field of practice	
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times	
	PC7. Identify and manage potential and actual risks to the quality and patient safety	
	PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem	
	TOTAL	4
HSS/ N 9606 (Maintain a safe, healthy, and secure working environment)	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements PC2. Comply with health, safety and security procedures for the workplace PC3. Report any identified breaches in health, safety, and security procedures to the designated person	
	PC4. Identify potential hazards and breaches of safe work practices	4
	PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority	
	PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected	
	PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently	





	PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person	
	PC9. Complete any health and safety records legibly and accurately TOTAL	4
	PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type	
	PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste	
	PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements	
	PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste	
9609	PC5. Check the accuracy of the labelling that identifies the type and content of waste	4
	PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal	
	PC7. Check the waste has undergone the required processes to make it safe for transport and disposal	
	PC8. Transport the waste to the disposal site, taking into consideration its associated risks	
	PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures	
	PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols	
	TOTAL	4
	Grand Total-2 (Soft Skills and Comunication)	20