
Human Services Curriculum Framework Stage 6 Syllabus

based on the CHC Community Services Training Package
(version 9.3) and HLT Health Training Package (version 9.2)

for implementation from 2024

updated July 2024

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Released October 2023, updated July 2024

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Published by

NSW Education Standards Authority
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D2024/234253 D2024/234256

Acknowledgements

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1 Introduction to the Human Services Curriculum Framework

Industry curriculum frameworks (Frameworks) provide students with the opportunity to gain industry-recognised national vocational qualifications under the Australian Qualifications Framework (AQF) as part of their NSW Higher School Certificate (HSC).

HSC courses within Frameworks count as Board Developed unit credit for the HSC. Frameworks include an HSC examination which provides the opportunity for students to have this HSC examination mark contribute to the calculation of their Australian Tertiary Admission Rank (ATAR).

1.1 AQF VET qualifications available in the Human Services Curriculum Framework

The Human Services Curriculum Framework is based on qualifications and units of competency contained in the nationally endorsed *CHC Community Services Training Package* and *HLT Health Training Package*.

The AQF VET qualifications available in the Human Services Curriculum Framework are:

- CHC33021 Certificate III in Individual Support (Ageing)
- CHC33021 Certificate III in Individual Support (Disability)
- HLT33021 Certificate III in Allied Health Assistance
- HLT33115 Certificate III in Health Services Assistance
- HLT33115 Certificate III in Health Services Assistance (Assisting in nursing work in acute care).

1.2 Industry context – human services

Together, community services and health are Australia's largest and fastest growing industry. Wherever there are people, there are jobs in community services and health. Work is available across a diverse range of occupations and in a range of situations – such as in hospitals, in the community, assisting people in their own homes, in local government or not-for-profit community and welfare organisations. The workforce is characterised by both paid and unpaid work.

Community service and health providers continue with new models of service delivery, driving the demand for specific skills and changing roles, and ongoing need to invest in workforce planning and development activities to support recruitment, development and retention of appropriately skilled workers. With many services spanning both industries, cross-industry skilling, flexible career pathways and cooperation ensure quality client care and seamless service.

The community services and health industries assist and support individuals, families and communities in need, contributing to their wellbeing and quality of life. Work in these industries reflects a complex interrelationship of duty of care, ethical behaviours and personal values in the context of provision of high quality service to clients. Work practices include strategies to empower individuals and groups, promote individual independence, and to respect the rights and dignity of clients and colleagues.

1.3 HSC VET course and AQF VET qualification completion requirements

The requirements for the completion of an HSC VET course are different to the requirements for AQF VET qualification completion. Registered Training Organisations (RTOs) need to ensure that delivery of courses meets HSC course requirements and complies with Training Package rules.

1.3.1 HSC VET course requirements

HSC VET courses in the Human Services Curriculum Framework are made up of:

- units of competency
 - associated HSC mandatory units of competency
 - associated HSC stream units of competency
 - HSC elective units of competency
- HSC outcomes and content
- mandatory HSC work placement requirements.

For a student to be considered to have satisfactorily completed a course within the Human Services Curriculum Framework they must meet the:

- HSC VET course requirements (refer to Sections 2.2–2.5 of this syllabus)
- requirements for satisfactory course completion. There must be sufficient evidence that the student has:
 - followed the course developed by NESAs
 - applied themselves with diligence and sustained effort to the set tasks and experiences provided in the course
 - achieved some or all of the course outcomes
 - undertaken the mandatory work placement.

Refer to the NESAs [Assessment Certification Examination \(ACE\) Rules 14.6.1, 14.2.1, 4.1.2](#).

1.3.2 AQF VET qualification requirements

To receive AQF VET qualifications, students must meet the assessment requirements of the *CHC Community Services Training Package* and/or *HLT Health Training Package* (training.gov.au).

AQF VET qualifications are determined by the qualification rules for each Training Package, referred to as *qualification packaging rules*. The qualification packaging rules describe the number and range of core and elective units of competency required for eligibility for an AQF VET qualification.

Units of competency should be selected to meet qualification packaging rules for the intended qualification pathway. Selection of units of competency should also be guided by the job outcome sought and local industry requirements.

Qualification packaging rules for each AQF VET qualification available through the Human Services Curriculum Framework are contained in the *CHC Community Services Training Package* or *HLT Health Training Package*. Refer to the [Status of units of competency for qualifications in the Human Services Curriculum Framework](#) document to see how qualifications can be achieved through the Framework.

1.4 HSC VET course delivery

HSC VET courses can only be delivered by an RTO with the relevant qualification and units of competency on their scope of registration. Scope of registration can be checked at training.gov.au.

RTOs offering training programs for the delivery and assessment of the Human Services HSC VET courses must meet the requirements of the VET Quality Framework, the [CHC Community Services Training Package](#) and/or [HLT Health Training Package](#) and the HSC course.

NESA's curriculum, assessment and credentialing requirements are contained in the [ACE Rules](#). Information specific to VET is in [ACE Rule Group 14](#).

Non-government schools outsourcing delivery of HSC VET courses to external providers also need to refer to the [NSW Registered and Accredited Individual Non-government Schools Manual](#) or [NSW Registration Systems and Member Non-government Schools Manual](#).

1.5 Outcomes and content

The HSC outcomes and content for this Framework are defined in:

- the units of competency (refer to Section 2.5 of this syllabus)
- HSC Content focus areas (refer to Section 3 of this syllabus).

1.6 Assessment requirements and advice

HSC VET courses are competency-based. NESA and the VET Quality Framework require that a competency-based approach to assessment is used. For more advice on appropriate assessment practice in relation to the Human Services Curriculum Framework see [Assessment and Reporting in Human Services](#).

An integrated or holistic approach to course delivery and assessment should be adopted.

2 Course structures and requirements

2.1 Human Services HSC VET courses

This Framework specifies the range of industry-developed units of competency from the *CHC Community Services Training Package* and *HLT Health Training Package* for inclusion in the HSC. It describes how these units of competency are arranged in HSC VET courses to gain unit credit for the HSC.

The Human Services Curriculum Framework contains the following courses:

- Human Services (240 indicative hours) – see Section 2.2 of this syllabus
- Human Services (360 indicative hours) – see Section 2.3 of this syllabus
- Human Services Specialisation Study (60 indicative hours) – see Section 2.4 of this syllabus.

Table 1 Human Services HSC courses and qualification outcomes

Qualification	Course	Human Services 240-hour course	Human Services 360-hour course	Human Services Specialisation Study 60-hour course
Certificate III in Individual Support (Ageing or Disability)		Statement of Attainment	Statement of Attainment	✓ (in combination with the 360-hour course only)
Certificate III in Allied Health Assistance		✓		✓ (in combination with the 240-hour course only)
Certificate III in Health Services Assistance		Statement of Attainment		✓ (in combination with the 240-hour course only)
Certificate III in Health Services Assistance (Assisting in nursing work in acute care)		Statement of Attainment	✓ (if required)	✓ (in combination with the 240-hour course only)

2.1.1 Unit credit for the Higher School Certificate

To facilitate flexibility of VET in the HSC, courses within the Human Services Curriculum Framework may be delivered as Preliminary, as HSC or as a combination of Preliminary and HSC units.

The HSC credit units will be allocated to students' Preliminary and/or HSC patterns of study as required.

The pattern of study (NESA course number) entered in Schools Online should reflect the delivery of the HSC VET course over successive years. For example, delivery of the 240 HSC indicative hour course over 2 years should be entered as 2 units x 2 years. Students will be credentialled for the HSC credit units entered each calendar year, provided they have satisfactorily completed the course requirements for that calendar year as determined by the school, college or RTO.

Table 2 HSC credit units for Human Services HSC courses

HSC VET course	HSC credit units
Human Services (240 indicative hours)	4
Human Services (360 indicative hours)	6
Human Services Specialisation Study (60 indicative hours)	1

2.1.2 NESA course numbers

27121 – Human Services (240 indicative hours)

Pattern of study: 2 units x 2 years

Enter this NESA course number for both Year 11 (Preliminary) and Year 12 (HSC) in Schools Online.

27122 – Human Services (240 indicative hours)

Pattern of study: 4 units x 1 year

Enter this NESA course number for either Year 11 (Preliminary) or Year 12 (HSC) in Schools Online.

27129 – Human Services (360 indicative hours)

Pattern of study: 3 units x 2 years

Enter this NESA course number for both Year 11 (Preliminary) and Year 12 (HSC) in Schools Online.

27123 – Human Services Specialisation Study (60 indicative hours)

Pattern of study: 1 unit x 1 year

Enter this NESA course number for either Year 11 (Preliminary) or Year 12 (HSC) in Schools Online.

2.1.3 HSC examination number

27199 – Human Services HSC examination

Enter this NESA course number in Schools Online as a Year 12 (HSC) entry in the year the examination is undertaken.

2.1.4 Allocation of HSC indicative hours of credit

Units of competency drawn from Training Packages are not defined in terms of duration. The amount of time required by individual students to achieve competency will vary according to their aptitude and experience. Where a training program is designed for delivery by an RTO, the RTO will specify the length of the training program according to the delivery strategies and/or curriculum resources chosen.

However, for the purposes of the HSC, VET courses must be described in terms of their indicative hours. For this reason, indicative hours for unit credit towards the HSC have been assigned to each unit of competency within the Framework. It is emphasised that the assignment of indicative hours does not imply that all students will fulfil all requirements of a unit of competency within these hours. RTOs may determine that additional or fewer hours are required for the achievement of particular competencies. However, this does not alter the HSC indicative hours allocated, only the delivery hours.

Students may need to spend additional time practising skills in a work environment and completing projects and assignments, in order to fulfil Training Package assessment requirements.

The HSC indicative hours assigned to each unit of competency are listed in Section 2.5 of this syllabus.

2.1.5 Work placement requirements

Work placement is a mandatory HSC requirement within this Framework. The CHC and HLT Training Packages also specify requirements for work placement for some qualifications and units of competency. The minimum work placement hours assigned to HSC courses in this Framework reflect the industry-determined requirements according to the qualification being undertaken.

Work placement is to be undertaken in an appropriate community services/health work environment.

Students should be at least 16 years old to undertake the work placement for this Framework as they will be in a work environment with vulnerable people and duty of care requires a substantial level of maturity. Any variation from this requirement must be with the explicit approval of the school or college, RTO and host employer.

Students undertaking courses as part of a school-based traineeship will meet the mandatory work placement hour requirements through the on-the-job training component of the traineeship.

Recognition of prior learning (RPL) may be granted for mandatory work placement requirements¹. Students' outside employment (ie not under the auspices of the school) may be recognised towards the requirement for work placement in a VET course ([ACE Rule 14.4.2](#)).

Non-completion of work placement is grounds for withholding the HSC course. Schools and colleges are advised to follow the procedure for issuing 'N' determinations as outlined in [ACE Rule 4.2](#).

Students must complete the following work placement for Human Services Curriculum Framework courses.

Table 3 Minimum work placement hours for Human Services HSC courses

Qualification entered	Minimum work placement requirement		
	Human Services 240-hour course	Human Services 360-hour course	Human Services Specialisation Study 60-hour course
Certificate III in Individual Support (Ageing or Disability)	120 hours	120 hours	no additional hours required
Certificate III in Allied Health Assistance	120 hours		no additional hours required
Certificate III in Health Services Assistance	80 hours		no additional hours required
Certificate III in Health Services Assistance (Assisting in nursing work in acute care)	80 hours	80 hours	no additional hours required

For more information see [Work Placement in Human Services](#).

¹ Where RPL has been granted, RTOs need to be aware that the assessment conditions for some units of competency require skills to be demonstrated in a relevant workplace.

2.1.6 Industry-specific requirements

Students undertaking courses within Human Services may be required to:

- undergo occupational assessment, screening and vaccination (www.health.nsw.gov.au)
- apply for a Working with Children Check (www.ocg.nsw.gov.au)
- undertake a National Police Check (www.police.nsw.gov.au).

2.2 Human Services (240 indicative hours)

AQF VET qualifications

The Human Services (240 indicative hours) course provides a pathway to the following qualifications:

- [HLT33021 Certificate III in Allied Health Assistance](#)

Statement of Attainment towards:

- [CHC33021 Certificate III in Individual Support \(Ageing\)](#)
- [CHC33021 Certificate III in Individual Support \(Disability\)](#)
- [HLT33115 Certificate III in Health Services Assistance](#)
- [HLT33115 Certificate III in Health Services Assistance \(Assisting in nursing work in acute care\)](#)

Course structure

This course consists of:

- 4 mandatory focus areas (containing 9 associated units of competency)
- 3 stream focus areas (each containing one associated unit of competency):
 - Allied health
 - Individual support, independence and wellbeing
 - Nursing assistance in acute care
- a range of elective units of competency from the HSC elective pool
- HSC Content – for the mandatory and stream focus areas.

(See Section 2.5 and Section 3 of this syllabus.)

Course requirements

Students **must** attempt:

- 6 associated HSC mandatory units of competency (totalling 145 – 150 HSC indicative hours) with 4 mandatory focus areas (HSC Content)
- one associated HSC stream unit of competency with one stream focus area (HSC Content)
- HSC elective units of competency from the streams not already undertaken and/or the HSC elective pool to bring the course total to a minimum of 240 HSC indicative hours
- a minimum of 80 or 120 hours of work placement depending on the qualification being undertaken (see Section 2.1.5).

Human Services HSC examination

An external written HSC examination will be conducted for the 240 indicative hour course and 360 indicative hour course (refer to Section 4 of this syllabus).

The HSC Content (focus areas) for the HSC examination is detailed in Section 3 of this syllabus.

2.3 Human Services (360 indicative hours)

AQF VET qualifications

The Human Services (360 indicative hours) course provides a pathway to the following qualifications:

- [HLT33115 Certificate III in Health Services Assistance \(Assisting in nursing work in acute care\)](#)²

Statement of Attainment towards:

- [CHC33021 Certificate III in Individual Support \(Ageing\)](#)
- [CHC33021 Certificate III in Individual Support \(Disability\)](#)

Course structure

This course consists of:

- 4 mandatory focus areas (containing 9 associated units of competency)
- 2 stream focus areas (each containing one associated unit of competency):
 - Individual support, independence and wellbeing
 - Nursing assistance in acute care
- a range of elective units of competency from the HSC elective pool
- HSC Content – for the mandatory and stream focus areas.

(See Section 2.5 and Section 3 of this syllabus.)

Course requirements

Students **must** attempt:

- 6 associated HSC mandatory units of competency (totalling 145 – 150 HSC indicative hours) with 4 mandatory focus areas (HSC Conte
- one associated HSC stream unit of competency (totalling 35 or 40 HSC indicative hours) with one stream focus area (HSC Content)
- HSC elective units of competency from the streams not already undertaken and/or the HSC elective pool to bring the course total to a minimum of 360 HSC indicative hours
- a minimum of 80 or 120 hours of work placement depending on the qualification being undertaken (see Section 2.1.5).

Human Services HSC examination

An external written HSC examination will be conducted for the 240 indicative hour course and 360 indicative hour course (refer to Section 4 of this syllabus).

The HSC Content (focus areas) for the HSC examination is detailed in Section 3 of this syllabus.

² For students undertaking Certificate III in Health Services Assistance (Assisting in nursing work in acute care), the 360-hour course would only be required if the selection of elective units of competency meant that the qualification could not be completed within the 240-hour Human Services course + 60-hour Human Services Specialisation Study course.

2.4 Human Services Specialisation Study (60 indicative hours)

Course eligibility

Students need to be currently entered in, or have completed the:

- Human Services (240 indicative hours) course with an enrolment in Certificate III in Allied Health Assistance, Certificate III in Health Services Assistance, or Certificate III in Health Services Assistance (Assisting in nursing work in acute care), or
- Human Services (360 indicative hours) course with an enrolment in Certificate III in Individual Support (Ageing or Disability)

to undertake the Human Services Specialisation Study course.

The Human Services Specialisation Study provides students with the opportunity to complete the:

- Certificate III in Allied Health Assistance qualification that they commenced in the 240-hour Human Services course
- or
- Certificate III in Health Services Assistance or Certificate III in Health Services Assistance (Assisting in nursing work in acute care) qualification that they commenced in the 240-hour Human Services course
- or
- Certificate III in Individual Support (Ageing or Disability) qualification that they commenced in the 360-hour Human Services course.

AQF VET qualifications

The Human Services Specialisation Study (60 indicative hours) course provides a pathway to the following qualifications:

- [CHC33021 Certificate III in Individual Support \(Ageing\)](#)
- [CHC33021 Certificate III in Individual Support \(Disability\)](#)
- [HLT33021 Certificate III in Allied Health Assistance](#)³
- [HLT33115 Certificate III in Health Services Assistance](#)
- [HLT33115 Certificate III in Health Services Assistance \(Assisting in nursing work in acute care\)](#)

Course structure

The Human Services Specialisation Study consists of units of competency from the alternate streams and/or the HSC elective pool.

(See Section 2.5 of this syllabus.)

Course requirements

Students **must** attempt a minimum of 60 HSC indicative hours of units of competency not already undertaken from the streams and/or the HSC elective pool.

³ For students undertaking Certificate III in Allied Health Assistance, the 60-hour Specialisation Study would only be required if the selection of elective units of competency meant that the qualification could not be completed within the 240-hour Human Services course.

2.5 Human Services units of competency

Details of units of competency listed in Sections 2.5.1 – 2.5.3 are available in the *CHC Community Services Training Package* and/or *HLT Health Training Package* at training.gov.au.

2.5.1 Associated mandatory units of competency and focus areas for the 240-hour and 360-hour courses

Attempt the following units of competency:

Healthy body systems

Unit code	Unit title	HSC indicative hours
CHCCCS041	Recognise healthy body systems	30
	OR	
HLTAAP001	Recognise healthy body systems	30
	OR	
HLTAHA049	Recognise impact of health conditions ⁴	30

Industry context

Unit code	Unit title	HSC indicative hours
CHCCOM005	Communicate and work in health or community services ⁵	30

Safety

Unit code	Unit title	HSC indicative hours
HLTAID011	Provide First Aid	20
HLTINF006	Apply basic principles and practices of infection prevention and control	30
HLTWHS001	Participate in workplace health and safety	15
	OR	
HLTWHS002	Follow safe work practices for direct client care	20

Work

Unit code	Unit title	HSC indicative hours
CHCCOM005	Communicate and work in health or community services	refer above
CHCDIV001	Work with diverse people	20

⁴ Assessment Requirements state *Evidence of the ability to ... perform the activities outlined in the performance criteria of this unit during a period of at least 120 hours of allied health assistance work. At least 60% of this work must be carried out in an allied health workplace. The remaining 40% may be carried out in a simulated environment, if an allied health workplace is unavailable.*

⁵ The underpinning knowledge of this associated unit of competency is also addressed in the HSC focus area Work.

2.5.2 Associated stream units of competency and focus areas for the 240-hour course and 360-hour course

Attempt the unit of competency from ONE of the following streams:

Allied health

Unit code	Unit title	HSC indicative hours
HLTAHA027	Assist with an allied health program ⁶	35

OR

Individual support, independence and wellbeing

Unit code	Unit title	HSC indicative hours
CHCCCS040	Support independence and wellbeing ⁷	35

OR

Nursing assistance in acute care

Unit code	Unit title	HSC indicative hours
HLTAIN001	Assist with nursing care in an acute care environment ^{8*}	40

* For students enrolled in HLT33115 Certificate III in Health Services Assistance (Assisting in nursing work in acute care) through this Framework, RTOs must deliver HLTAIN001.

For students enrolled in HLT33115 Certificate III in Health Services Assistance through this Framework, an RTO may choose to deliver an alternative unit of competency to HLTAIN001, provided the unit of competency is listed as an HSC elective (see Section 2.5.3 of this syllabus); it is appropriate to the qualification; and all aspects of the HSC Content in the Nursing assistance in acute care focus area is covered (as outlined in Section 3.7 of this syllabus). Where an alternative unit of competency is delivered, the minimum work placement requirement is 80 hours, to be undertaken in an appropriate health work environment.

PLUS a selection of units of competency from the streams not already undertaken and/or the HSC elective pool to bring the course total to a minimum of 240 or 360 HSC indicative hours.

⁶ Assessment requirements state *Evidence of the ability to ... perform the activities outlined in the performance criteria of this unit during a period of at least 120 hours of allied health assistance work. At least 60% of this work must be carried out in an allied health workplace. The remaining 40% may be carried out in a simulated environment, if an allied health workplace is unavailable.*

⁷ Assessment requirements state *Evidence of the ability to ... perform the activities outlined in the performance criteria of this unit during a period of at least 120 hours of direct support work in at least one aged care, home and community, disability or community service organisation.*

⁸ Assessment requirements state *there must be evidence that the candidate has performed the activities outlined in the performance criteria of this unit during a period of at least 80 hours of work.*

2.5.3 HSC elective pool

Unit code	Unit title	HSC indicative hours
<u>BSBFLM312</u>	<u>Contribute to team effectiveness</u>	15
<u>BSBTWK201</u>	OR <u>Work effectively with others</u>	
<u>BSBMED301</u>	<u>Interpret and apply medical terminology appropriately</u>	25
<u>BSBMED302</u>	<u>Prepare and process medical accounts</u>	25
<u>BSBMED303</u>	<u>Maintain patient records</u>	15
<u>BSBTEC201</u>	<u>Use business software applications</u>	15
<u>BSBWOR301</u>	<u>Organise personal work priorities and development</u>	20
<u>BSBPEF301</u>	OR <u>Organise personal work priorities</u>	
<u>CHCADV001</u>	<u>Facilitate the interests and rights of clients</u>	25
<u>CHCAGE001</u>	<u>Facilitate the empowerment of older people</u>	35
<u>CHCCCS038</u>	OR <u>Facilitate the empowerment of people receiving support</u>	40
<u>CHCAGE005</u>	<u>Provide support to people living with dementia</u>	35
<u>CHCAGE011</u>	OR <u>Provide support to people living with dementia</u>	40
<u>CHCAGE007</u>	<u>Recognise and report risk of falls</u>	10
<u>CHCAGE008</u>	<u>Implement falls prevention strategies</u>	20
<u>CHCAGE013</u>	<u>Work effectively in aged care</u>	20
<u>CHCCCS002</u>	<u>Assist with movement</u>	15
<u>CHCCCS010</u>	<u>Maintain a high standard of service</u>	20
<u>CHCCCS012</u>	<u>Prepare and maintain beds</u>	10

Unit code	Unit title	HSC indicative hours
CHCCCS015	Provide individualised support	20
	OR	
CHCCCS031	Provide individualised support	45
CHCCCS020	Respond effectively to behaviours of concern	15
CHCCCS026	Transport individuals	10
CHCCCS042	Prepare meals	15
CHCDIS011	Contribute to ongoing skills development using a strengths-based approach	30
CHCDIS012	Support community participation and social inclusion	30
CHCDIS020	Work effectively in disability support	20
CHCDIV002	Promote Aboriginal and/or Torres Strait Islander cultural safety	25
CHCGRP001	Support group activities	20
CHCLEG001	Work legally and ethically	30
CHCPAL003	Deliver care services using a palliative approach	30
CHCPRP005	Engage with health professionals and the health system	15
HLTAIN002	Provide non-client contact support in an acute care environment	20
HLTHPS006	Assist clients with medication	45

3 HSC Content

The HSC Content for this Framework is organised into focus areas. Each focus area prescribes the scope of learning for the HSC. This is drawn from the associated units of competency.

Students undertaking the 240 or 360 indicative hour course from the Human Services Curriculum Framework must address all of the mandatory focus areas plus one stream focus area.

The Human Services Curriculum Framework mandatory focus areas are:

- Healthy body systems
- Industry context
- Safety
- Work.

The Human Services Curriculum Framework stream focus areas are:

- Allied health
- Individual support, independence and wellbeing
- Nursing assistance in acute care.

The associated mandatory or stream units of competency for each of the focus areas are outlined in Section 2.5.1 and 2.5.2 of this syllabus.

The HSC examination in Human Services is based on the HSC Content in this Framework (refer to Section 4 of this syllabus).

3.1 Healthy body systems – mandatory focus area

3.1.1 Outcomes

The student:

- describes the anatomy and physiology of human body systems and their associated components
- understands relationships between body systems required to support healthy functioning
- explains the fundamental principles of maintaining a healthy body
- communicates using precise industry terminology appropriate to the audience and situation.

3.1.2 Associated unit of competency

The scope of learning for the HSC must be read and delivered in conjunction with the following associated unit of competency:

- [CHCCCS041 Recognise healthy body systems](#)

or

- [HLTAAP001 Recognise healthy body systems](#)

or

- [HLTAHA049 Recognise impact of health conditions](#)

The application and elements for each of these units of competency are provided below.

CHCCCS041 Recognise healthy body systems

Application This unit describes the performance outcomes, skills and knowledge required to work with basic information about healthy body systems and the impacts of ageing and disability. It includes recognising and reporting any changes in healthy bodies involving people who are ageing or living with disability.

Elements

1. Work with information about the human body
2. Recognise and promote ways to support healthy functioning of the body.

Assessment requirements for [CHCCCS041 Recognise healthy body systems](#) are detailed in the Training Package.

HLTAAP001 Recognise healthy body systems

Application This unit describes the skills and knowledge required to work with basic information about the human body and to recognise and promote ways to maintain healthy functioning of the body.

Elements

1. Work with information about the human body
2. Recognise and promote ways to support healthy functioning of the body.

Assessment requirements for [HLTAAP001 Recognise healthy body systems](#) are detailed in the Training Package.

HLTAHA049 Recognise impact of health conditions

Application This unit describes the skills and knowledge required to recognise the impact of health conditions of a person undertaking an intervention or therapy program. Work includes using a basic understanding of the human body to assist in interpreting information about person's health status to promote ways to maintain a healthy functioning of the body.

- Elements*
1. Receive delegation and gather information
 2. Obtain information regarding the person's health status
 3. Confirm physical health status and discuss healthy functions of the body
 4. Recognise variations from normal physical health status.

Assessment requirements for [HLTAHA049 Recognise impact of health conditions](#) are detailed in the Training Package.

3.1.3 Scope of learning for the HSC

major body systems and associated components

- sources of information about the human body
- define anatomy and physiology
- outline basic anatomy and physiology:
 - cells
 - tissues
 - organs
 - systems
- basic anatomical terms and their use, including:
 - anatomical position
 - anterior and posterior
 - cranial and caudal
 - extension and flexion
 - medial and lateral
 - proximal and distal
 - protraction and retraction
 - superficial and deep
 - superior and inferior
- location, structure and function(s) of the major body systems and associated components:
 - cardiovascular
 - cells, tissues and organs
 - digestive
 - endocrine
 - immune
 - integumentary
 - lymphatic
 - musculo-skeletal
 - nervous, including sensory systems of the eye and ear
 - reproductive
 - respiratory
 - the special senses (smell, taste, vision, equilibrium and hearing)
 - urinary
- interrelationship between the major components of each body system, associated components and other structures

body systems and health

- indicators of good health and poor health
- awareness of Aboriginal and Torres Strait Islander health and wellbeing
- acknowledge the importance of maintaining healthy body systems, and how the interactions between each body system affect and support healthy functioning of the body

body systems and health, continued

- homeostasis:
 - principles of homeostasis
 - interactions between body systems to maintain homeostasis
 - relationship between homeostasis imbalance and disease
- processes, conditions and resources required to support healthy functioning body systems:
 - balanced diet
 - body regulation:
 - blood glucose level
 - elimination of wastes from the body
 - fluid and electrolyte (including pH) balance
 - maintenance of:
 - blood glucose level
 - blood pressure
 - body temperature
 - pulse rate
 - respiratory rate
 - protection from infection
 - physical activity:
 - active
 - passive
 - sleep
- health status and physical condition:
 - indicators of body system issues and changes, including:
 - appetite regulation
 - bone health
 - bowel health
 - cognitive changes
 - continence
 - dehydration
 - dementia
 - dysphagia
 - food intolerance
 - malnutrition
 - mental health
 - mood
 - oral health and hygiene
 - pain and discomfort
 - skin integrity
 - weight regulation
 - signs and symptoms of common diseases that impact on body system functioning, including:
 - cancer
 - cardiovascular diseases
 - diabetes
 - malnutrition
 - musculoskeletal conditions
 - neurological conditions
 - obesity

body systems and health, continued

- effect of ageing, disability and mental health issues on body systems, physical health and wellbeing
- use individual health information when carrying out work tasks within scope of practice and job role to:
 - recognise changes in a person's health status and physical, psychological and mental health condition and escalate concerns
 - report to supervisor or health professional according to workplace policy and procedures
 - provide appropriate care interventions based on diagnosis, treatment and management
- purpose and intent of the national framework for advance care planning:
 - role in delivering person-centred care
 - ethical considerations and best practice principles
 - stages of planning:
 - conversation
 - document (advance care directive and advance care plan)
 - access and enact document

terminology

- correct use of industry terminology:
 - in a range of oral and written communications
 - across routine tasks
 - appropriate for the audience:
 - client
 - colleague(s)
 - family and community
 - other professionals
- health and medical terminology:
 - used when referring to:
 - body systems
 - investigations and procedures
 - medical conditions and diseases
 - medical and therapy equipment and instruments
 - medications
 - referrals
 - fundamental word structure:
 - common prefixes
 - word roots
 - suffixes
 - combining forms
 - accepted abbreviations for terms and processes
- internal and external sources of information about health and medical terminology
- application of workplace policy, procedures and protocols in relation to the use of terminology when recording and reporting

3.2 Industry context – mandatory focus area

3.2.1 Outcomes

The student:

- understands the nature of the community services/health industry
- explains working within the legal and ethical framework of community services/health work and service delivery
- demonstrates an understanding of working in the industry to ensure quality client care and/or service delivery.

3.2.2 Associated unit of competency

The scope of learning for the HSC must be read and delivered in conjunction with the following associated unit of competency:

- [CHCCOM005 Communicate and work in health or community services](#)

The application and elements for this unit of competency is provided below.

CHCCOM005 Communicate and work in health or community services

Application This unit describes the skills and knowledge required to communicate effectively with clients, colleagues, management and other industry providers.

- Elements*
1. Communicate effectively with people
 2. Collaborate with colleagues
 3. Address constraints to communication
 4. Report problems to supervisor
 5. Complete workplace correspondence and documentation
 6. Contribute to continuous improvement.

Assessment requirements for [CHCCOM005 Communicate and work in health or community services](#) are detailed in the Training Package.

3.2.3 Scope of learning for the HSC

sources of information

- sources of information relating to:
 - current and emerging information on the community services/health industry:
 - digital media
 - industry bodies and professional association(s)
 - journals
 - mentor or coach
 - networks
 - special interest group(s)
 - union(s)
 - work responsibilities:
 - colleagues
 - manager, supervisor or team leader
 - job/position description
 - role/duty statement
 - workplace manual(s)
- strategies for understanding and clarifying work instructions

nature of the industry

- interrelationship between the community services and health industries, including Aboriginal and Torres Strait Islander community-controlled health services
- sectors/departments within the community services/health industry:
 - primary function
 - services provided
 - occupational areas
 - examples of organisations/businesses/agencies (if applicable)
- interrelationship between sectors/departments and effect on an individual's work and client outcomes
- industry approaches to care and service delivery:
 - models of service delivery including:
 - person-centred
 - rights-based
 - team:
 - interdisciplinary
 - multidisciplinary
 - inter-agency
 - underpinning principles and characteristics
 - how work is organised and undertaken
 - models of funding, including activity-based funding
 - interrelationships with services outside the community services/health industry
 - role of support services
- industry terminology relating to role and service provision

working in the industry

- compliance and what it means for the client, the worker and the industry
- values, principles and ethics that underpin the community services/health industry and the delivery of care:
 - industry-wide
 - workplace specific
- current contemporary issues influencing community/health work and implications for the provision of care and delivery of service
- awareness of recent reforms and plans and implications for the community services/health industry and provision of care and delivery of service, including:
 - Aboriginal and Torres Strait Islander health plan
 - aged care reform
 - Australia's disability strategy
 - national disability insurance scheme
 - national disability reform agenda
 - royal commission into aged care quality and safety
 - royal commission into violence, abuse, neglect and exploitation of people with disability
- work standards in the community services/health industry:
 - appreciate the value of work standards
 - consequences of failure to comply with work standards
 - general work standards expected
 - work standards for a specific job role
 - importance of seeking opportunities to improve work practices and client outcomes
- accreditation in the community services/health industry:
 - purpose of and requirements for accreditation
 - consequences of failure to comply with accreditation requirements
- effect of change within the community services/health workplace on the client, the worker and the organisation

employment

- career pathways across the community services and health industries and the knowledge and skills required for different job roles
- types of employment in the community services/health industry:
 - full-time
 - part-time
 - casual
 - contract
 - agency
- differences between an award, agreement and contract and how they apply to workers across the community services/health industry
- investigation of the employment terms and conditions for a specific job role
- working knowledge of employee and employer rights and responsibilities in relation to employment

employment, continued

- primary role/function(s) of a range of key industry bodies for both employers and employees:
 - employer and employee groups
 - professional associations
 - unions
- purpose of a code of conduct and value for the industry, worker and client
- purpose and value of the scope of practice for the industry, worker and client
- industry currency:
 - importance of maintaining currency
 - individual and workplace strategies to maintain currency, including professional development

legal and ethical issues

- difference between legal and ethical
- broad knowledge of the legal and ethical framework in community services/health work and service delivery
- legal and ethical issues affecting the industry:
 - issues including:
 - access, equity and equality
 - child protection:
 - indicators of risk
 - adult disclosure
 - conflict of interest
 - dignity of risk
 - discrimination
 - duty of care
 - human rights
 - informed consent
 - mandatory reporting
 - privacy, confidentiality and disclosure
 - translation
 - work role boundaries:
 - responsibilities
 - limitations
 - interrelationship of the legal and ethical aspects of these issues
 - effect of these legal and ethical issues and resulting obligations for the client, the worker and the industry
 - workplace policy and procedures related to these legal and ethical issues
- legislative requirements:
 - difference between an act, regulation and code of practice
 - purpose and intent of legislative requirements relating to a particular sector/department of the community services/health industry
 - application of legislative requirements for a specific workplace and individual practice
- what constitutes a breach of ethical and legal obligations and the potential ramifications of such a breach

3.3 Safety – mandatory focus area

3.3.1 Outcomes

The student:

- explains safe work procedures and practices for the community services/health industry
- demonstrates an understanding of work health and safety (WHS) compliance in the community services/health industry
- applies risk management in a community service/health workplace
- explains infection prevention and control strategies
- applies infection prevention and control policy and procedures to appropriate industry standard and for a specific community services/health workplace and job role
- applies first aid principles in response to emergency situations and in the management of injuries
- describes workplace policy and procedures that ensure the safety of clients, colleagues and the community services/health worker.

3.3.2 Associated units of competency

The scope of learning for the HSC must be read and delivered in conjunction with the following associated units of competency:

- [HLTAID011 Provide First Aid](#)
 - [HLTINF006 Apply basic principles and practices of infection prevention and control](#)
- and
- [HLTWHS001 Participate in workplace health and safety](#)
- or
- [HLTWHS002 Follow safe work practices for direct client care](#)

The application and elements for each of these units of competency are provided below.

HLTAID011 Provide First Aid

Application This unit describes the skills and knowledge required to provide a first aid response to a casualty in line with first aid guidelines determined by the Australian Resuscitation Council (ARC) and other Australian national peak clinical bodies. This unit applies to all persons who may be required to provide a first aid response in a range of situations, including community and workplace settings

Elements

1. Respond to an emergency situation
2. Apply appropriate first aid procedures
3. Communicate details of the incident
4. Review the incident.

Assessment requirements for [HLTAID011 Provide First Aid](#) are detailed in the Training Package.

HLTINF006 Apply basic principles and practices of infection prevention and control

Application This unit describes the skills and knowledge required to apply basic infection prevention and control principles in work settings, including implementing standard and transmission-based precautions and responding to risks.

- Elements*
1. Identify the role of infection prevention and control in the work setting
 2. Follow standard and transmission-based precautions for infection prevention and control in the work setting
 3. Respond to potential and actual exposure to infection risks within scope of own role.

Assessment requirements for [HLTINF006 Apply basic principles of infection prevention and control](#) are detailed in the Training Package.

HLTWHS001 Participate in workplace health and safety

Application This unit describes the skills and knowledge required for workers to participate in safe work practices to ensure their own health and safety, and that of others.

- Elements*
1. Follow safe work practices
 2. Implement safe work practices
 3. Contribute to safe work practices in the workplace
 4. Reflect on own safe work practices.

Assessment requirements for [HLTWHS001 Participate in workplace health and safety](#) are detailed in the Training Package.

HLTWHS002 Follow safe work practices for direct client care

Application This unit describes the skills and knowledge required for a worker to participate in safe work practices to ensure their own health and safety, and that of others in work environments that involve caring directly for clients. It has a focus on maintaining safety of the worker, the people being supported and other community members.

- Elements*
1. Follow safe work practices for direct client care
 2. Follow safe work practices for manual handling
 3. Follow safe work practices for infection control
 4. Contribute to safe work practices in the workplace
 5. Reflect on own safe work practices.

Assessment requirements for [HLTWHS002 Follow safe work practices for direct client care](#) are detailed in the Training Package.

3.3.3 Scope of learning for the HSC

work health and safety (WHS)

- meaning of health, safety and duty of care
- acknowledge that WHS is everyone's responsibility in the workplace and the implications of this responsibility
- concept of 'participation' and 'consultation' in relation to WHS
- primary role/function of key bodies/authorities involved in WHS:
 - SafeWork NSW
 - Safe Work Australia
 - local councils
 - unions
 - professional associations
- sources of workplace WHS information:
 - internal, including:
 - colleagues
 - health and safety representative (HSR)
 - WHS committee and WHS officers
 - WHS induction process
 - workplace policy and procedures documentation
 - external, including:
 - legislation and government regulations
 - professional associations
 - Safe Work Australia, SafeWork NSW, local councils
 - unions
- importance of acting within level of authority/scope of responsibility in relation to WHS in the workplace:
 - taking initiative
 - problem-solving
 - decision-making

WHS compliance

- difference between an act, regulation, code of practice and standard (Australian, industry and workplace)
- purpose and intent of WHS legislation and codes of practice and their application to the community services/health industry and workplace and a specific job role:
 - WHS legislation:
 - *Work Health and Safety Act 2011* (NSW) (as amended)
 - *Work Health and Safety Regulation 2011* (NSW) (as amended)
 - codes of practice related to:
 - first aid in the workplace
 - hazardous manual tasks
 - hazardous chemicals
 - psychosocial hazards at work

WHS compliance, continued

- WHS consultation, cooperation and coordination
- work environment and facilities
- WHS rights, duties and responsibilities of the person conducting a business or undertaking (PCBU), officer and worker (as defined in the legislation)
- consequences of failure to observe (non-compliance) WHS workplace policy and procedures and legislative requirements
- safety signs and symbols used in the community services/health industry and their use in the workplace:
 - including signs for:
 - dangerous goods classifications
 - emergency equipment
 - evacuation procedures
 - handwashing
 - outbreak management
 - personal protective equipment (PPE)
 - poisons
 - receptacles for waste
 - respiratory etiquette
 - specific hazards, such as sharps and radiation
 - appropriate placement and positioning
 - legislative requirements
 - meaning of colour and shape
- community services/health industry and workplace requirements for monitoring and reporting in relation to workplace safety, including:
 - accreditation
 - audits
 - risk assessment
- describe how, when and to whom to report:
 - types:
 - formal and informal
 - written
 - verbal
 - reporting to appropriate persons and via Incident Management Systems
- purpose and importance of monitoring and reporting

WHS consultation and participation

- opportunities for workers to provide input into WHS consultation and participation processes:
 - formal and informal discussion
 - meeting
 - survey
 - training
 - WHS audit
 - WHS inspection

WHS consultation and participation, continued

- requirements (including election/formation) of a health and safety committee or health and safety representative (HSR) and their role and responsibilities in the workplace
- role and responsibilities of relevant personnel in WHS consultation and participation:
 - PCBU
 - manager/supervisor/team leader
 - self
 - other workers
 - union
- importance of identifying and reporting:
 - WHS issues and concerns
 - workplace hazards
 - unsafe work practices
 - breaches of health and safetyand examples of each for the community services/health industry and workplace

safe work procedures and practices

- safe work procedures and practices and their purposes, including:
 - PPE:
 - selection and use
 - techniques and sequence for applying, fitting and removing
 - maintenance and storage
 - safe disposal
 - manual handling principles and techniques:
 - when working individually, in pairs and with a team:
 - moving
 - lifting, carrying and placing items down
 - working with equipment
 - loading/unloading
 - bending and twisting
 - using mechanical aids/lifting equipment and assistive devices
 - recommended weight limits
 - minimal lift approach when moving or transferring clients
 - housekeeping:
 - clean-up procedures
 - consideration of WHS and the environment
- importance of safe work procedures and practices
- appropriate selection of safe work procedures and practices for a specific workplace and individual job role within the community services/health industry

risk management

- difference between a hazard and a risk
- risk management and its application in the community services/health workplace:
 - hazard identification:
 - potential hazards to self, colleagues, clients and visitors

risk management, continued

- range of hazards:
 - biological
 - human factors (self, client and others)
 - manual handling
 - materials
 - tools and equipment
 - work processes and practices
 - workplace settings
- risk assessment
- risk control using a hierarchy, including:
 - eliminate the risk
 - minimise the risk:
 - substitution
 - modification
 - isolation
 - engineering control
 - other controls:
 - administrative
 - safe work practices
 - PPE
- monitor and review

infection prevention and control

- concept of infection prevention and control and its importance
- chain of infection:
 - source of infectious agent
 - reservoir
 - portal of exit and entry
 - mode of transmission
 - susceptible host
- causative agents:
 - bacteria and bacterial spores
 - fungi
 - parasites
 - viruses
- difference between:
 - infection and colonisation
 - micro-organisms and pathogens:
 - contribution to health
 - cause of disease
 - multi-resistant organisms
- disease transmission:
 - sources of infecting micro-organisms, including:
 - blood and body fluids
 - food, water and soil
 - people, animals and birds

infection prevention and control, continued

- other vectors (insects or parasites)
- waste and its disposal
- modes of transmission:
 - direct, including:
 - contact
 - airborne
 - droplet
 - indirect, including:
 - penetrating injuries
 - surface or object contamination
 - vectors (animal, insect or parasite)
- risk of acquisition
- factors that increase susceptibility to infection:
 - age
 - immune status
 - medications and comorbidities
 - surgery
 - wounds or devices
- principles underlying infection prevention and control
- infection prevention and control in the community services/health workplace:
 - precautions:
 - standard
 - transmission-based
 - risk management
 - personal hygiene, including:
 - management and laundering of work clothes
 - not attending work when ill
 - personal care and cleanliness
 - safe respiratory and cough etiquette
 - use of clean clothing or uniform
 - hand hygiene, including:
 - when required
 - product:
 - liquid soap and water
 - alcohol-based hand rub
 - technique
 - precautions where there are breaks in the skin or skin conditions
 - safe and effective use of PPE including mask, gloves, gown, apron and protective eyewear or face shield
 - waste management and disposal:
 - types (clinical, related and general)
 - regulatory requirements
 - sharps handling and disposal techniques
 - management of blood and body fluid spills
 - cleaning:
 - clean and contaminated zones
 - routine environment and equipment cleaning

infection prevention and control, continued

- enhanced cleaning
- disinfection and sterilisation
- equipment reprocessing procedures
- minimise/limit contamination
- procedures and their timing
- requirements for immunisation:
 - regulatory and industry
 - workplace
- regulatory requirements for infection prevention and control and their application to the community services/health industry workplace and a specific job role:
 - guidelines
 - standards
- workplace policy and procedures for:
 - managing exposure incidents
 - recording, documenting and reporting risks and incidents, including mandatory notification to public health authority

incidents, accidents and emergencies

- meaning of incident, accident and emergency
- a range of incidents, accidents and emergencies common to the community services/health industry
- distinguish between a manageable first aid situation and an emergency situation
- a range of potential injuries common to a community services/health workplace and their cause(s)
- strategies to reduce workplace accidents, injury or impairment
- implications of the cost of workplace injury:
 - economic
 - human
 - organisational
 - social
- responding to incidents, accidents and emergencies:
 - emergency situations
 - seeking assistance
 - emergency contact numbers:
 - 000 if outside hospital
 - 2222 statewide if in hospital
 - emergency signals, alarms and exits:
 - location
 - use
 - procedures to follow:
 - notification
 - workplace policy and procedures:

incidents, accidents and emergencies, continued

- evacuation
 - security reporting
 - reporting
- role of personnel in an emergency
- basic process of fighting a fire and use of firefighting equipment:
 - fire blanket
 - fire extinguishers
 - fire hose and reel
- principles of first aid:
 - established:
 - chain of survival
 - DRSABCD:
 - danger
 - response
 - send for help
 - airway
 - breathing
 - CPR
 - defibrillator – automated external defibrillator (AED) (if available)
 - Australian Resuscitation Council (ARC) guidelines
 - general:
 - assessment
 - management
 - seek assistance
 - access equipment/resources
 - monitor
 - reassure
- signs, symptoms and management of a range of injuries and conditions:
 - injuries:
 - abdominal
 - bites and stings
 - bleeding
 - burns
 - crush
 - eye and ear
 - fractures and dislocations
 - head, neck and spinal
 - minor skin/wound care
 - needle stick
 - protruding object
 - soft tissue
 - conditions:
 - medical:
 - allergic reactions
 - anaphylaxis
 - asthma and other respiratory conditions
 - cardiac conditions, including chest pain

incidents, accidents and emergencies, continued

- diabetes
- epilepsy
- seizures
- stroke
- other:
 - altered state of consciousness, including unconsciousness
 - casualty with no signs of life
 - choking
 - drowning
 - febrile convulsions
 - hypothermia, hyperthermia, dehydration and heat stroke
 - poisoning and toxic substances
 - shock
 - substance misuse
- apply the principles of first aid and management of injuries and conditions
- legal, ethical and social considerations for the first aider
- responsibilities of a first aider
- importance of post-incident, accident or emergency debriefing for first aiders and rescuers
- application of workplace policy and protocols and regulatory requirements when recording and reporting in relation to incidents, accidents and emergencies

3.4 Work – mandatory focus area

3.4.1 Outcomes

The student:

- examines the nature of working in the industry
- describes effective communication when working with others
- evaluates diversity and its effect on the community services/health industry/workplace and worker, as well as provision of client care and/or service
- applies respectful work practices and effective strategies to address and eliminate discrimination in the workplace
- explores how conflict may be avoided or effectively managed by individuals and management in a range of situations common to community services/health work environments.

3.4.2 Associated units of competency

The scope of learning for the HSC must be read and delivered in conjunction with the following associated units of competency:

- [CHCCOM005 Communicate and work in health or community services](#)
- [CHCDIV001 Work with diverse people](#)

The application and elements for each of these units of competency are provided below.

CHCCOM005 Communicate and work in health or community services

Application This unit describes the skills and knowledge required to communicate effectively with clients, colleagues, management and other industry providers.

- Elements*
1. Communicate effectively with people
 2. Collaborate with colleagues
 3. Address constraints to communication
 4. Report problems to supervisor
 5. Complete workplace correspondence and documentation
 6. Contribute to continuous improvement.

Assessment requirements for [CHCCOM005 Communicate and work in health or community services](#) are detailed in the Training Package.

CHCDIV001 Work with diverse people

Application This unit describes the skills and knowledge required to work respectfully with people from diverse social and cultural groups and situations, including Aboriginal and/or Torres Strait Islander Peoples.

- Elements*
1. Reflect on own perspectives
 2. Appreciate diversity and inclusiveness, and their benefits
 3. Communicate with people from diverse backgrounds and situations
 4. Promote understanding across diverse groups.

Assessment requirements for [CHCDIV001 Work with diverse people](#) are detailed in the Training Package.

3.4.3 Scope of learning for the HSC

working with others

- importance of developing collegial relationships with others involved in the provision of care and delivery of service
- concept of worker/client partnership
- role of those who may be involved in the provision of care and delivery of service:
 - carers
 - clients
 - colleagues/co-workers/staff
 - community members
 - family/relatives
 - government or regulatory authority
 - multi-disciplinary team
 - support workers
 - visitors
 - volunteers
 - other service providers
- workplace protocols and procedures in relation to establishing contact, communication and working with supervisor(s), colleagues, clients and others
- teamwork:
 - definition of team and teamwork
 - characteristics of effective teamwork
 - communication skills within teams
 - benefit of teamwork to the community services/health workplace
 - examples of teams in a community services/health workplace and their area(s) of responsibility
- how optimal client care and/or service delivery can be delivered through the implementation of teamwork

communication

- communication in the workplace:
 - communication process/cycle
 - workplace examples of types of communication:
 - verbal
 - non-verbal
 - written
 - effective verbal, non-verbal and written communication
 - communication techniques:
 - effective questioning and listening
 - motivational versus coercion
 - collaboration versus confrontation
 - de-escalation
 - influences on communication:
 - age
 - disability

communication, continued

- emotional state
- environment
- health
- language, culture and/or religion
- relationships and power
- barriers to communication and strategies to overcome these barriers in relation to the delivery of service and provision of care
- a range of communication methods and equipment, including digital media, used in a community services/health workplace for the delivery of service and provision of care:
 - general features
 - benefits
 - selection
 - use
- communication with clients:
 - concept of the therapeutic relationship
 - legal and ethical considerations
 - principles of client safety in the communication process
 - role of communication in building trust and confidence between client and carer
 - selection of augmentative communication aids (as necessary)

the community services/health worker

- community services/health worker:
 - personal attributes and work ethic valued by the industry
 - interpersonal skills beneficial to an individual working in a community services/ health environment
 - importance of personal presentation and standards of personal hygiene
 - personal presentation standards required for a specific community services/health workplace and job role
 - value of self-awareness and reflection in the health/community services worker
- how personal values, opinions and ethics of the worker can affect client care and service delivery
- duties and responsibilities:
 - for a specific job role within the community services/health industry
 - relationship between individual roles and the role of the team in client care and service delivery
 - difference between individual and workplace goals and plans
- role, function and objectives of a workplace within the community services/health industry and their relevance/relationship to a specific work role
- continuous improvement:
 - definition
 - role of employees in continuous improvement, auditing and accreditation
 - implications of not:
 - adhering to a quality improvement program
 - meeting accreditation requirements

the community services/health worker, continued

- feedback:
 - value of feedback to an individual worker, the workplace and the industry
 - types of feedback:
 - formal and informal
 - direct and indirect
 - strategies for obtaining and interpreting feedback from supervisor(s), colleagues and clients
 - how to deal with positive and negative feedback
 - responsibility of a worker to use personal reflection, seek feedback and improve
- performance management:
 - definition
 - key components
 - why, when and how performance management is used in the community services/ health industry
- the connection between evaluating work performance and improving work practices
- strategies to maintain current knowledge and skills and enhance ongoing professional development

work practices

- how work practices are implemented and maintained in accordance with industry standards and workplace policy, guidelines and procedures
- effect of poor work practices on colleagues, clients, a workplace and the industry
- awareness of emerging technologies affecting work practices, client care and service delivery in the community services/health industry
- working sustainably:
 - current environmental issues affecting the community services/health industry
 - definition of 'environmentally sustainable work practice'
 - strategies to work in an environmentally sustainable manner in a community services/health workplace

recording and reporting

- recording and reporting in a community services/health work environment:
 - purpose and use of a range of written and electronic documentation
 - workplace and legal requirements for the completion of documentation, including those relating to:
 - client records
 - mandatory notification/reporting
 - confidentiality
 - privacy
- lines of communication and reporting typical to a health/community services workplace
- mandatory reporting and the circumstances in which reports should be made and who is responsible

recording and reporting, continued

- appropriate reporting and referral mechanisms in the provision of care and service delivery:
 - appropriate persons
 - supporting services/agencies
- importance of and standard procedures for information management:
 - access to records and release of information
 - document maintenance
 - document storage
 - maintaining document inventories

diversity

- concepts of:
 - cultural awareness
 - cultural competence
 - cultural safety
 - diversity
 - inclusiveness
 - inclusive work practices
- effect of own culture on different people and groups
- features of diversity in Australia and how this effects different areas of work and life:
 - political
 - social
 - economic
 - cultural
- key areas of diversity and their characteristics:
 - age
 - culture, race and ethnicity
 - disability
 - gender
 - religious or spiritual beliefs
 - sexual orientation or identity
- key aspects and diversity of Australia's Aboriginal and/or Torres Strait Islander cultures
- potential needs of marginalised groups and factors that contribute to those needs
- legal and ethical considerations when working with diversity:
 - issues related to:
 - access
 - discrimination
 - human rights
 - appropriate action in response to infringement of rights
- workplace diversity:
 - benefit of workplace diversity
 - need for acceptance and understanding in the workplace

diversity, continued

- acknowledge the importance of respecting differences and adopting a sensitive approach when dealing with verbal and non-verbal communication in the workplace
 - awareness of legislation that supports inclusion, including *Disability Discrimination Act 1992* (Australian Government) (as amended)
 - proactive strategies for promoting workplace diversity and accommodating diverse needs in the workplace, including:
 - develop plans to incorporate inclusive practices in work tasks
 - modify verbal and non-verbal communication to accommodate individual differences
 - reasonable adjustments to facilitate participation by people with disability
 - socially and culturally appropriate work practices
 - effective communication skills:
 - cross-cultural
 - with people with disability
 - workplace diversity and inclusion policy and procedures
- range of support services available to the community services/health worker and workplace when engaging in a diverse community

anti-discrimination

- principles of equal employment opportunity (EEO)
- anti-discrimination in the workplace:
- principles
 - intent of anti-discrimination legislation
 - rights and responsibilities of employers and employees in relation to anti-discrimination
 - workplace policy and procedures relating to anti-discrimination
- bullying and harassment in the workplace:
- direct and indirect
 - types (verbal, physical, psychological, sexual)
 - rights and responsibilities of employers and employees in relation to bullying and harassment
 - workplace policy and procedures relating to bullying and harassment
- strategies to eliminate bias and harassment in the workplace
- consequences, including legal ramifications, of discriminatory workplace behaviour
- recourse available to individuals in the event of inappropriate workplace behaviour

misunderstandings and conflict

- difference between being passive, aggressive and assertive
- causes of misunderstandings and conflict when working with others and in the provision of care and/or delivery of service
- the extent to which conflict can be a positive or negative experience
- conflict management:
- conflict-resolution techniques
 - effective communication

misunderstandings and conflict, continued

- different approaches to conflict management including problem-solving, negotiation and mediation
- workplace policy and procedures regarding management of conflict
- identification of:
 - own response to misunderstandings and conflict and evaluate personal approach to management and resolution of conflict
 - when it is appropriate to seek assistance when misunderstandings or conflict arise and whose assistance should be sought when conflict escalates

3.5 Allied health – stream focus area

3.5.1 Outcomes

The student:

- describes the role, responsibilities and boundaries of allied health workers
- analyses the implications of a primary health care approach and its application to allied health therapies
- explains the protocols, processes and procedures involved in assisting allied health professionals to conduct therapy activities
- understands the importance of working according to workplace policy and procedures and within the legal and ethical framework for the health industry.

3.5.2 Associated unit of competency

The scope of learning for the HSC must be read and delivered in conjunction with the following associated unit of competency:

- [HLTAHA027 Assist with an allied health program](#)

The application and elements for this unit of competency is provided below.

HLTAHA027 Assist with an allied health program

Application This unit describes the skills and knowledge required to provide assistance to an Allied Health Professional. Work includes following treatment plans for therapeutic interventions or conducting programs.

- Elements*
1. Receive delegation and gather information
 2. Prepare for therapy activity
 3. Provide assistance with therapy activity
 4. Provide feedback to treating health professionals
 5. Assist in the maintenance of therapy equipment and resources.

Assessment requirements for [HLTAHA027 Assist with an allied health program](#) are detailed in the Training Package.

3.5.3 Scope of learning for the HSC

allied health services

- main allied health disciplines:
 - dietetics
 - diversional/recreational therapy
 - occupational therapy
 - physiotherapy
 - podiatry
 - psychology and clinical psychology
 - radiography
 - social work
 - speech pathology
- settings in which allied health services are provided:
 - aged care
 - community health
 - disability support
 - hospital
 - mental health
 - outpatient programs
- roles and responsibilities of personnel in relation to the provision of allied health services:
 - allied health professional
 - allied health assistant
 - other health team members, including:
 - interpreters
 - medical
 - nursing
 - paid carers
- clients of allied health services:
 - general knowledge of the main client populations
 - basic understanding of human behaviour, including social and interpersonal behaviour
- social determinants that influence the health outcomes of individuals including:
 - early life
 - education
 - employment
 - housing
 - income
 - residential environment
 - social exclusion
 - social capital

allied health therapies

- differences and interrelationships between:
 - dietetics
 - occupational therapy
 - physiotherapy
 - speech pathology

allied health therapies, continued

- goals and limitations of therapy associated with:
 - dietetics
 - occupational therapy
 - physiotherapy
 - speech pathology
- for a particular client population:
 - a range of therapy tasks and programs appropriate for client needs
 - significance of individualised plans in the treatment of clients

primary health care approach

- meaning of a 'primary health care approach'
- implications of a primary health care approach for the work practices of an allied health care worker
- holistic health as a concept focusing on wellbeing rather than disease or its absence
- processes for involving both the client and community in the planning and provision of health care
- a range of strategies for preventing illness and promoting good health
- allied health interventions, including:
 - individual therapy and group therapy
 - human rights-based approach
 - models:
 - biopsychosocial
 - medical
 - principals of choice and control
 - reablement
 - screening and assessment tools to determine health, wellbeing and function

delivery of care and support

- recognition that allied health assistants always work under the supervision of allied health professionals:
 - reasons why supervision is necessary
 - specific areas of the worker's practice that are subject to supervision
 - types of supervision:
 - direct
 - indirect
 - remote
 - role of delegation and workplace processes for delegation to tasks
 - communication protocols between the allied health assistant and their supervisor(s)
- characteristics of effective service delivery to clients:
 - accommodates client needs, preferences and difference
 - delivered in accordance with legal and ethical requirements
 - involves and empowers the client:
 - principles of empowering the client, including:
 - older person

delivery of care and support, continued

- people living with disability
- people living with a serious mental illness
- the therapy activity:
 - general precautions that should be followed during every activity
 - a range of therapy tasks typical to a specific therapy and for a particular client population
 - processes used by the allied health assistant to:
 - receive delegation and gather information
 - assess client readiness, including minimum health status required for participation
 - communicate the goals of treatment
 - check client understanding of proposed procedure or activity
 - gain client consent to proceed
 - prepare the client for treatment
 - assist in delivery of the therapy prescribed by the allied health professional
 - monitor the client for changes which may affect the prescribed therapy
 - provide feedback before, during and on completion of therapy activity to the to the client and treating health professional/supervisor
 - importance of, and techniques for, maintaining client:
 - comfort
 - confidentiality
 - dignity
 - privacy
 - safety
 - for a range of commonly used therapy equipment:
 - application in particular therapy programs
 - use in accordance with manufacturer and supervisor instructions
 - routine checks and maintenance
 - techniques for making simple adaptations
 - difference between therapy materials and therapy aids
 - workplace practices for maintaining stock levels of materials and aids
 - construction of simple materials and aids
- application of safe work procedures and practices during therapy activities
- sources of information about allied health services and ways in which this information is disseminated to clients
- role of evidence-based practice and principles of access and equity in the provision of allied health care services

reporting and recording

- workplace policy and procedures:
 - applying to record-keeping and client documentation
 - for reporting to supervising allied health professional(s)
- workplace practices for recording:
 - client bookings
 - information and data

3.6 Individual support, independence and wellbeing – stream focus area

3.6.1 Outcomes

The student:

- considers basic human needs when providing care and support to older clients or clients with a disability
- analyses the contribution of physical and emotional and psychological wellbeing to the independence of older clients or clients with a disability
- explores services and strategies that promote and build independence in older clients or clients with a disability
- applies work practices that respect individual difference when caring for and supporting diverse clients
- understands the importance of working according to workplace policy and procedures and within the legal and ethical framework for the community services industry.

3.6.2 Associated unit of competency

The scope of learning for the HSC must be read and delivered in conjunction with the following associated unit of competency:

- [CHCCCS040 Support independence and wellbeing](#)

The application and elements for this unit of competency is provided below.

CHCCCS040 Support independence and wellbeing

Application This unit describes the skills and knowledge required to provide individualised services in ways that support independence, as well as physical and emotional wellbeing.

- Elements*
1. Recognise and support individual differences
 2. Promote independence
 3. Support physical wellbeing
 4. Support social, emotional and psychological wellbeing.

Assessment requirements for [CHCCCS040 Support independence and wellbeing](#) are detailed in the Training Package.

3.6.3 Scope of learning for the HSC

client needs

- human development across the lifespan:
 - the major life stages:
 - prenatal
 - infancy
 - early childhood
 - mid-childhood
 - adolescence
 - young adulthood
 - mid-adulthood
 - late adulthood
 - key developmental changes at each stage
- difference between:
 - needs and preferences
 - primary and secondary needs
- Maslow's hierarchy of needs
- basic human needs and their interrelationship:
 - cultural
 - physical
 - psychological
 - sexual
 - social
 - spiritual
- examples of needs related to health and wellbeing commonly associated with different life stages

wellbeing

- aspects of an individual's wellbeing, including:
 - career/occupation
 - cultural
 - emotional and psychological
 - environmental
 - financial
 - physical
 - social
 - spiritual
- importance of wellbeing for promoting and supporting independence among clients
- physical wellbeing of clients including:
 - relationship between good health and physical wellbeing:
 - requirements for the maintenance of good health:
 - exercise
 - hygiene
 - lifestyle choices
 - mental health

wellbeing, continued

- nutrition and hydration
 - oral health
 - daily habits that contribute to a healthy lifestyle
- how changes in an individual's physical condition may affect physical wellbeing:
 - causes of change:
 - ageing and/or life stage
 - new or altered circumstances
 - indicators of change
 - implications of these changes for an individual's independence
- emotional and psychological wellbeing of clients:
 - promoted by the community services/health worker through strategies including:
 - development of client's self-esteem and confidence
 - use of safe and predictable routines
 - encouraging client participation in:
 - physical, social, cultural and/or spiritual activities
 - new and/or existing networks
 - ensuring client's environment is safe and healthy
 - positive and supportive communication with clients
 - concept of self-actualisation and its relationship to emotional and psychological wellbeing
 - application of self-actualisation when working with clients in community service settings
 - variations in the emotional or psychological condition of clients:
 - causes
 - emotional concerns and issues and their indicators
 - mental health issues and their indicators
 - risk and protective factors in relation to mental health
 - restrictive practices:
 - meaning and examples
 - ethical considerations
 - legislative and regulatory requirements
 - workplace policy, procedures and documentation requirements
 - alternative behaviour support strategies
 - indicators that clients may be experiencing neglect and abuse:
 - financial
 - physical
 - psychological
 - sexual

individual difference

- meaning of personal identity and personal preference
- ways in which individuals choose to express difference
- how aspects of individual difference may be related to an individual's:
 - culture
 - sexuality
 - social preference
 - spirituality

individual difference, continued

- how individual differences may be interrelated
- effect of individual differences on support provided to clients
- importance of respecting personal identity and personal preference when delivering care and support to clients
- issues that arise in residential settings regarding the expression of sexuality
- strategies for the management of inappropriate behaviour in relation to sexuality and sexual expression
- community values and attitudes, including myths and stereotypes, related to personal expressions of difference
- effect on diverse clients of these community values, attitudes, myths and stereotypes
- identification of own responses to difference and reflect on personal approach to caring for and/or supporting diverse clients

client independence

- importance of encouraging independence in clients
- services in the community services and health industries that promote and support independence:
 - a range of service delivery models and/or standards
 - availability and access
- significance of individualised care and/or support plans for encouraging independence in clients
- strategies to develop client independence:
 - encourage self-determination
 - identify client's:
 - capacity for self-care
 - strengths
 - provide opportunities for client to utilise own strengths
 - facilitate and support client access to support services, resources, networks and activities

delivery of care and support

- provision of care and support to clients within the context of an individualised plan
- characteristics of effective service delivery to clients:
 - accommodates client needs, preferences and difference
 - delivered in accordance with legal and ethical requirements
 - involves and empowers the client
- workplace policy and procedures and legislative requirements for reporting in relation to the delivery of care and support
- describe how, when and to whom to report about:
 - variations in client's:

delivery of care and support, continued

- physical condition
- emotional or psychological wellbeing
- instances of possible abuse and/or neglect
- hazards affecting the safety of a client
- situations beyond the scope of the worker's responsibility
- reporting to appropriate personnel and/or organisation(s)

3.7 Nursing assistance in acute care – stream focus area

3.7.1 Outcomes

The student:

- describes the role, responsibilities and boundaries of nursing care workers in acute care environments
- analyses the importance of the nursing care plan for the delivery of care and support in acute care environments
- explains the principles, procedures and practices involved in assisting clients with daily living activities and personal care needs
- understands the importance of working according to workplace policy and procedures and within the legal and ethical framework for the health industry.

3.7.2 Associated unit of competency

The scope of learning for the HSC must be read and delivered in conjunction with the following associated unit of competency:

- [HLTAIN001 Assist with nursing in an acute care environment](#)*

The application and elements for this unit of competency is provided below.

- * For students enrolled in HLT33115 Certificate III in Health Services Assistance through this Framework, an RTO may choose to deliver an alternative unit of competency to HLTAIN001 provided all aspects of the HSC Content in the Nursing assistance in acute care focus area are covered as outlined in Section 3.7.3 of this syllabus.

HLTAIN001 Assist with nursing in an acute care environment

Application This unit describes the skills and knowledge required to provide nursing care assistance in an acute care environment.

- Elements*
1. Assist with the delivery of nursing care to clients in an acute care environment
 2. Support the client to meet personal care needs in an acute care environment
 3. Work in a team environment
 4. Work effectively under supervision.

Assessment requirements for [HLTAIN001 Assist with nursing in an acute care environment](#) are detailed in the Training Package.

3.7.3 Scope of learning for the HSC

delivery of care and support

- understanding of what constitutes an acute care environment
- primary role, responsibilities and limitations of personnel who work in an acute care environment:
 - assistant in nursing
 - enrolled nurse
 - registered nurse
 - health care team
 - multidisciplinary team
- recognition that nursing care assistance is carried out under the supervision of registered nurses
- difference between providing support, assistance and technical care
- principles for delivering care and support:
 - workplace protocols for:
 - maintaining client confidentiality, privacy and dignity
 - communicating with clients and their carers
 - explaining the purpose of any procedure or activity
 - checking client understanding of the proposed procedure or activity
 - obtaining client consent before proceeding with any procedure or activity, including what constitutes consent
 - legal and ethical considerations related to service delivery in acute care settings
- the nursing care plan:
 - purpose
 - plan development:
 - information required
 - importance of incorporating client preferences into the plan where possible
 - examples of nursing care plans:
 - typical content
 - variations in format
 - knowledge of programs for the management of:
 - client personal care
 - continence including the use of continence aids
 - infection control
 - skin integrity including:
 - processes to maintain skin integrity
 - causes of its loss
 - subsequent implications for the client
 - plan implementation:
 - roles and responsibilities of various personnel
 - work role boundaries
 - workplace protocols and procedures in relation to lines of referral and reporting
- equipment and aids commonly used:
 - in the delivery of personal care
 - to assist with the mobility of clients

delivery of care and support, continued

- a range of prostheses commonly encountered in acute care environments
- knowledge of how to apply prostheses correctly
- technical skills associated with:
 - application of anti-thrombosis stockings
 - assistance with breathing devices
 - catheter care
 - shallow wound care
- application of safe work procedures and practices when delivering care and support

client needs

- range of human needs:
 - cognitive
 - cultural
 - educational
 - nutritional
 - physical
 - psychological
 - safety and security
 - sexual
 - social
 - spiritual
- personal care needs associated with daily living activities of clients in acute care environments:
 - dressing and undressing
 - eating and drinking
 - eye and nail care
 - grooming and hair
 - oral health
 - showering
 - toileting
 - washing
- workplace procedures and practices to support and/or assist clients with daily living activities and other personal care needs

clinical information and data

- assessment tools used to collect clinical information and data
- protocols for the collection of clinical information and data:
 - explain why information is being sought
 - obtain client consent before collecting information
 - identify client preferences related to their care for inclusion in the nursing care plan
- equipment commonly used to collect and record clinical information and data
- workplace procedures and practices for:
 - taking and recording:

clinical information and data, continued

- blood glucose levels
 - blood pressure
 - pulse oximetry
 - pulse rate
 - respiratory rate
 - temperature
 - collecting urine, sputum and faecal specimens
 - measuring and recording weight
 - recognising changes in consciousness
 - recording fluid and food intake and output
- workplace policy and procedures for collecting and recording clinical information and data

reporting and record-keeping

- types of reports:
- verbal
 - written
 - electronic
- workplace practices for reporting on:
- changes in client condition
 - difficulties in:
 - carrying out work instructions
 - providing client support and assistance
 - clinical data collected to a registered nurse
- client records and documentation typically kept in acute care environments
- importance of:
- accuracy in reporting and record-keeping
 - reporting within appropriate timeframes
- workplace policy and procedures applying to record-keeping

4 HSC examination

The Human Services Curriculum Framework includes an HSC examination which provides the opportunity for students to have this HSC examination mark contribute to the calculation of their Australian Tertiary Admission Rank (ATAR).

The Human Services HSC examination can contribute up to 2 units towards the calculation of a student's ATAR.

Students who have completed the Human Services (240 indicative hours) course or Human Services (360 indicative hours) course are eligible to sit for the Human Services HSC examination.

Students who want to sit for the Human Services HSC examination must be entered for both the Human Services (240 indicative hours) course or Human Services (360 indicative hours) course and the Human Services examination in Schools Online.

For the HSC examination specifications, which describe the format of the external HSC examination, see [Assessment and Reporting in Human Services](#).

The HSC examination is independent of the competency-based assessment undertaken during the course and has no impact on student eligibility for AQF VET qualifications.

4.1 Examinable outcomes and content

The HSC examination in Human Services is based on the HSC Content (focus areas) in this Framework.

The HSC Content is detailed in Section 3 of this syllabus.

4.2 Relationship of the 240-hour course and 360-hour course structure to the HSC examination

For a description of the relationship between the Human Services (240 indicative hours) course and Human Services (360 indicative hours) course structure, the HSC Content and the HSC examination see [Assessment and Reporting in Human Services](#).

5 Other important information

5.1 Exclusions

Where there is significant overlap between an HSC VET course and other HSC VET or general education courses, NESA has an exclusion between the courses. Exclusions are generally applied at a course level rather than at the unit of competency level.

In this Framework, students can only undertake the Human Services (240 indicative hours) course or the Human Services (360 indicative hours) course.

Schools should check all [course exclusions](#) when determining an appropriate pattern of study for their students.

5.2 Recognition of credit transfer and prior learning (RPL) within VET courses

Students who have current knowledge, skills or experience relevant to a VET course may be granted credit towards the course requirements ([ACE Rule 14.4.2](#)).

Find out more about arrangements for [credit transfer and RPL within VET courses](#), including processes, application form and examples of possible scenarios.

5.3 School-based trainees

Read information about provision for [school-based trainees within the HSC](#).

Information on requirements and arrangements for NSW school-based traineeships is available on the NSW government website under [Apprentices and trainees](#).

5.4 Industries related to human services

VET qualifications consist of technical skills that prepare you for work or further study in a specific job or industry, as well as employability skills that can be applied across a range of industry (or career) pathways.

Industries related to this course include, but are not limited to the following outlined on the [Your Career](#) website:

- [Accommodation and Food Services](#)
- [Health Care and Social Assistance](#)

5.5 Students with disability

Students with disability may access a VET course in one of 2 ways:

- by undertaking the course under regular course arrangements, or
- by undertaking selected units of competency within the course that have been identified through the collaborative curriculum planning process.

For more information see [VET courses and students with disability](#) and [collaborative curriculum planning](#) advice.

5.6 Students in Years 9 and 10 (Stage 5)

In certain circumstances students in Years 9 and 10 (Stage 5) may access Stage 6 VET courses. Further information is available in the [Stage 5 VET section](#).

6 Glossary

AQF	<p>Australian Qualifications Framework</p> <p>The AQF is the policy framework that defines all qualifications recognised nationally in post-compulsory education and training in Australia. The AQF comprises titles and guidelines that define each qualification, as well as the principles and protocols covering cross-sectoral qualification links and the issuing of qualifications and statements of attainment.</p>
Australian Apprenticeships	<p>Australian Apprenticeships encompass all apprenticeships and traineeships. They combine time at work with training and can be full-time, part-time or school-based.</p> <p>www.apprenticeships.gov.au</p>
competency	<p>The broad concept of industry competency concerns the ability to perform particular tasks and duties to the standard of performance expected in the workplace. Competency requires the application of specified skills, knowledge and attitudes relevant to effective participation in an industry, industry sector or enterprise.</p>
core units of competency	<p>Units of competency required by the Training Package to be eligible for an AQF VET qualification.</p>
elements of competency	<p>The basic building blocks of a unit of competency which describe the key activities or elements of the work covered by the unit.</p>
focus areas	<p>HSC Content is organised into focus areas. HSC Content prescribes the scope of learning for the HSC.</p>
mandatory units of competency	<p>Units of competency that must be studied for an HSC VET course.</p>
recognition of prior learning (RPL)	<p>The result of an assessment of an individual's formal, non-formal and informal learning to determine the extent to which that individual has achieved the required learning outcomes, competency outcomes, or standards for entry to, and/or partial or total completion of, a qualification.</p>
RTO	<p>Registered Training Organisation</p> <p>A training organisation registered by a registering body in accordance with the VET Quality Framework, within a defined scope of registration (including school system RTOs, TAFE NSW and other providers).</p>
scope of registration	<p>The particular services and products an RTO is registered to provide. The RTO's scope defines the specific AQF VET qualifications, units of competency and accredited courses it is registered to provide, and whether it is registered to provide:</p> <ul style="list-style-type: none">▪ both training delivery and assessment services, and to issue the relevant AQF VET qualifications and statements of attainment, or▪ only assessment services, and to issue the relevant AQF VET qualifications and statements of attainment.

Stage 5	In NSW, Stage 5 relates to Years 9 and 10 of schooling.
Stage 6	In NSW, Stage 6 relates to Years 11 and 12 of schooling.
Statement of Attainment	May be issued in the vocational education and training sector by an RTO when an individual has completed one or more units of competency from nationally recognised qualification(s)/course(s).
training.gov.au	http://training.gov.au The national register for recording information about RTOs, Training Packages and accredited courses.
Training Package	A nationally endorsed, integrated set of competency standards, assessment guidelines and AQF VET qualifications for a specific industry, industry sector or enterprise.
training plan	A documented program of training and assessment required for an apprenticeship/traineeship training contract. It is developed by an RTO in consultation with the parties to the contract as the basis for training and assessing a person undertaking an apprenticeship or traineeship.
unit of competency	Specification of industry knowledge and skill and the application of that knowledge and skill to the standard of performance expected in the workplace.
VET	Vocational Education and Training
VET qualification	Formal certification in the VET sector by an RTO that a person has satisfied all requirements of the units of competency or modules that comprise an AQF VET qualification, as specified by: <ul style="list-style-type: none"> ▪ a nationally endorsed Training Package, or ▪ an accredited course that provides training for the qualification.
VET Quality Framework	The VET Quality Framework comprises: <ul style="list-style-type: none"> ▪ the Standards for Registered Training Organisations ▪ the Fit and Proper Person Requirements ▪ the Financial Viability Risk Assessment Requirements ▪ the Data Provision Requirements, and ▪ the Australian Qualifications Framework.