





STUDENT ASSESSMENT BOOKLET

HLTINF001 COMPLY WITH INFECTION PREVENTION AND CONTROL POLICIES AND PROCEDURES

| Student first name: _ | | | |
|-----------------------|------|------|--|
| | | | |
| Student last name: | | | |



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ASSESSMENT OVERVIEW

This Student Assessment Booklet includes all your tasks for assessment of HLTINF001 Comply with infection control policies and procedures.

ABOUT YOUR ASSESSMENTS

This unit requires that you complete 4 assessment tasks. You are required to complete all tasks to demonstrate competency in this unit.

| Assessment Task | About this task |
|--------------------------------------|---|
| Assessment Task 1: Written questions | You must correctly answer all 33 questions to show that you understand the knowledge required of this unit. |
| Assessment Task 2: Case study | You are to read the three case studies and complete the questions that follow. |
| Assessment Task 3: Role play | You are to demonstrate the ability to clean up a simulated bodily fluid spill (vomit). |
| Assessment Task 4: Journal | You are to complete a journal about how they follow infection control procedures at work. |

Supporting resources

You may like to look at the following websites, books and documents for more information about the topics related to this unit:

- Croft, H 2013, The Australian Carer 3rd edn, Pearson Australia, Frenchs Forest, NSW
- Model WHS Regulations, http://www.safeworkaustralia.gov.au/sites/swa/about/publications/pages/ model-whs-regulations
- Australian Guidelines for the Prevention and Control of Infection in Healthcare:
 https://www.nhmrc.gov.au/_files_nhmrc/publications/attachments/cd33_infection_control_healthcare_14 0616.pdf

How to submit your assessments

When you have completed each assessment task you will need to submit it to your assessor.

Instructions about submission can be found at the beginning of each assessment task.

Assessment Task Cover Sheet

At the beginning of each task in this booklet, you will find an Assessment Task Cover Sheet. Please fill it in for each task, making sure you sign the student declaration.

Your assessor will give you feedback about how well you went in each task, and will write this on the back of the Task Cover Sheet.

Make sure you photocopy your written activities before you submit them – your assessor will put the documents you submit into your student file. These will not be returned to you.

Assessment appeals

You can make an appeal about an assessment decision by putting it in writing and sending it to us. Refer to your Student Handbook for more information about our appeals process.

Assessment plan

The following outlines the requirements of your final assessment for this unit. You are required to complete all tasks to demonstrate competency in this unit.

Your assessor will provide you with the due dates for each assessment task. Write them in the table below.

| Assessment Requirements Due date | | |
|--|--|--|
| 1. Written questions | | |
| 2. Case study | | |
| 3. Role play | | |
| 4. Journal | | |
| | | |
| AGREEMENT BY THE STUDENT | | |
| Read through the assessments in this booklet before you fill out and sign the agreement below. Make sure | | |

you sign this before you start any of your assessments. Have you read and understood what is required of you in terms of assessment? ☐ Yes □ No Do you understand the requirements of this assessment? ☐ Yes □ No Do you agree to the way in which you are being assessed? ☐ Yes □ No Do you have any special needs or considerations to be made for this assessment? ☐ Yes □ No If yes, what are they? Do you understand your rights to appeal the decisions made in an assessment? ☐ Yes □ No Student name: __ Student signature: _____ Date: _____ Assessor name: ___ Assessor signature: _____ Date: _____

ASSESSMENT TASK COVER SHEET - ASSESSMENT TASK 1

Students: Please fill out this cover sheet clearly and accurately for this task.

Make sure you have kept a copy of your work.

Name:

Date of birth:

Student ID:

Unit:

HLTINF001 Comply with infection control policies and procedures

Student to complete

Resubmission? Student initials Sufficient/ insufficient Date

Written questions

STUDENT DECLARATION

| declare that these tasks are my own work. | | |
|---|--|--|
| None of this work has been completed by any other person. | | |
| have not cheated or plagiarised the work or colluded with any other student/s. | | |
| have correctly referenced all resources and reference texts throughout these assessment tasks. | | |
| I understand that if I am found to be in breach of policy, disciplinary action may be taken against me. | | |
| | | |
| Student signature: | | |
| Student name: | | |
| Date: | | |

ASSESSOR FEEDBACK Assessors: Please return this cover sheet to the student with assessment results and feedback. A copy must be supplied to the office and kept in the student's file with the evidence.

Date: _

Assessor signature:

Assessor name:

ASSESSMENT TASK 1: WRITTEN QUESTIONS



TASK SUMMARY:

- This is an open book test you can use the Internet, textbooks and other documents to help you with your answers if required.
- You must answer all 33 questions correctly.
- Write your answers in the space provided.
- If you need more space, you can use extra paper. All extra pieces of paper must include your name and the question number/s you are answering.
- You may like to use a computer to type your answers. Your assessor will tell you if you can email them the file or if you need to print a hard copy and submit it.

WHAT DO I NEED IN ORDER TO COMPLETE THIS ASSESSMENT?

- Access to textbooks and other learning materials.
- Access to a computer and the Internet (if you prefer to type your answers).

WHEN DO I DO THIS TASK?

- You will do this task in your own time.
- Write in your due date as advised by your assessor:

WHAT DO I NEED TO DO IF I GET SOMETHING WRONG?

If your assessor marks any of your answers as incorrect, they will talk to you about resubmission. You will need to do one of the following:

- Answer the questions that were incorrect in writing.
- Answer the questions that were incorrect verbally.

Provide a definition and one example of the following terms.

| Term | Definition | Example |
|--------------------|------------|---------|
| Hazard | | |
| | | |
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| | | |
| Risk | | |
| | | |
| | | |
| | | |
| | | |
| Risk control | | |
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| | | |
| | | |
| | | |
| Risk | | |
| management process | | |
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Explain the requirements of PPE under Regulation 44–47 of the Model WHS Regulations. You can access the Regulations at http://www.safeworkaustralia.gov.au/sites/swa/about/publications/pages/model-whs-regulations.)

QUESTION 3

Complete the missing fields (hazard type or consequence) in the table below.

| Hazard | Potential harm/consequence |
|------------|--|
| Loud noise | |
| | |
| | |
| | |
| | Can cause shock, burns, fire or even death |
| | |
| | |
| | |
| Stress | |
| | |
| | |
| | |

| Hazard | Potential harm/consequence |
|-----------------------|--|
| | Can cause respiratory infections or illness, cancer, acid burns or dermatitis |
| Manual tasks | |
| Working from a height | |
| | If hit or caught, can cause fractures, bruises, dislocations, lacerations, serious injury or death |
| Infectious material | |

Explain each of the following precaution types and provide an example for each.

| Precaution type | Explanation and example |
|--------------------|-------------------------|
| Contact precaution | |
| | |
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| | |

| Precaution type | Explanation and example |
|--|--|
| Droplet precaution | |
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| Airborne precaution | |
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| QUESTION 5 | |
| In one short paragraph, exp Healthcare. | plain the Australian Guidelines for the Prevention and Control of Infection in |
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Provide the relevant AS/NZ Standard for the following PPE items:

| PPE item | AS/NZ Standard |
|----------|----------------|
| Gloves | |
| | |
| Eyewear | |
| | |
| Gowns | |
| | |
| Masks | |
| | |

QUESTION 7

Describe how each of the following standard precautions are used to prevent infectious agents spreading from one person to another.

| Standard precaution | How it is used to stop infection spreading |
|---------------------|--|
| Cough etiquette | |
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| | |
| | |
| Handling of waste | |
| | |
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| Standard precaution | How it is used to stop infection spreading |
|---------------------|--|
| Handling of linen | |
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| | |
| Aprons/gowns | |
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Provide at least three infection control methods you can use at work for each of the following.

| Tasks | Infection control methods |
|------------------|---------------------------|
| Food preparation | |
| | |
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| Tasks | Infection control methods |
|--|---------------------------|
| General cleanliness in the workplace (i.e. housekeeping) | |
| Cleaning up bodily fluid spills | |
| Disposing of infectious waste | |

| QUESTION 9 | |
|------------------------------|--|
| Explain the purpose of a b | acterial spore. |
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| QUESTION 10 | |
| | pathogens, provide one example of the disease they can cause. |
| | |
| Pathogen | Disease |
| Bacteria | |
| | |
| Viruses | |
| Virases | |
| | |
| Protozoa | |
| | |
| Funci | |
| Fungi | |
| | |
| | |
| | om the following website and use as your guide to answer questions 11–17. |
| https://www.health.gov.a | u/resources/publications/coronavirus-covid-19-guidelines-for-outbreaks-in- |
| residential-care-facilities. | |
| QUESTION 11 | |
| | land's account of the describes the collaboration of the |
| | lemic currently effecting the global community. |
| What are the symptoms to | TOOK TOT? |
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Personal hygiene procedures must be followed to protect against COVID-19 and prevent the virus spreading. Draw a line to match the following areas of the body to the specific COVID-19 hygiene practice required.

| Body area | Hygiene strategy |
|-----------|---|
| 1. Mouth | a) Avoid touching your eyes, nose and mouth |
| 2. Hands | b) Increase the amount of fresh air available by opening windows or adjusting air conditioning |
| 3. Face | c) Cover your coughs and sneezes with your elbow or a tissue |
| 4. Lungs | d) Washing your hands thoroughly with soap and water whenever you cough, sneeze or blow your nose, prepare food or eat, care for someone sick, touch your face, or use the toilet. Follow service hand washing policy |

| QUESTION 13 |
|-------------|
|-------------|

Provide the infection control methods needed for COVID-19 for the following:

| Procedure | Infection control method |
|------------------------|--------------------------|
| Using tissues | |
| | |
| | |
| Using hand sanitizers | |
| | |
| | |
| Using surfaces | |
| | |
| | |
| Personal items carried | |
| at work | |
| | |

QUESTION 14

| QUESTION 15 | | |
|----------------|-----------------|---|
| ist the steps | for social dist | ancing in the workplace to stop the spread of COVID-19. |
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| QUESTION 16 | | |
| Self-isolation | due to COVID | -19 includes not leaving your home for 14 days. Who must self-isolate? |
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| QUESTION 17 | | |
| Circle True or | False for the | following self-isolation requirements for COVID-19. |
| TRUE | FALSE | Do not leave your home/hotel unless it is an emergency |
| TRUE | FALSE | You can go to public places such as work or shopping centres |
| TRUE | FALSE | Do not let visitors in – only people who usually live with you should be in your home |
| TRUE | FALSE | If you live in a house you can go outside into your yard |
| TRUE | FALSE | If you live in an apartment you cannot go outside to common areas |
| | | |
| QUESTION 18 | | |
| | ist five examp | les of when you should wash your hands in the workplace. |
| Example 1: | | |

| Example 2: | | | | |
|--------------------------------------|--------------------------|--------------------------|-----------|--|
| Example 3: | | | | |
| Example 4: | | | | |
| Example 5: | | | | |
| QUESTION 19 Using a step-by-step app | roach, explain how to wa | ush and rub your hands i | properly. | |
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QUESTION 20 There are two types of pre-surgical hand scrubs: a five-minute timed scrub a numbered stroke method. Choose one of these pre-surgical hand scrubs and provide a step-by-step outline of the procedure:

Fill out the table below about the 5 moments for hand hygiene.

| Moment | When? | Why? |
|------------------------------------|-------|------|
| Before touching a patient | | |
| Before clean/ aseptic procedure | | |
| After body fluid exposure risk | | |
| After touching a patient | | |

| Moment | When? | | Why? |
|-------------------------------------|----------------|--------------------------------|--|
| After touching patient surroundings | | | |
| | | | |
| QUESTION 22 | | | |
| Research workplace refollow them. | equirements fo | r hand hygiene for each of the | e following and write down how you would |
| Skin | | | |
| | | | |
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| | | | |
| Fingernails | | | |
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| Jewellery/watches | | | |
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QUESTION 23 Provide an outline of routine surface cleaning procedures in a client care facility.

| JESTION 24 | |
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| ovide a step-by-step overview for disposing needle/syringes into a sharps container. | |
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Explain the process of infection using the following elements:

- Pathogen
- Reservoir
- Portal of exit
- Means of transmission
- Portal of entry
- The susceptible host.

You may draw a diagram to help explain your response (attach it to this page) or fill out the table below.

| ———————— | no help explain your response (attach it to this page) of this out the table below. |
|----------------|---|
| Pathogen | |
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| Reservoir | |
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| Portal of exit | |
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| Means of transmission | |
|-----------------------|--|
| Portal of entry | |
| The susceptible host | |

| Provide at least five risk factors associated with contracting a health-care associated infection (I | H V I) |
|---|---------|
| Trovide at least live risk factors associated with contracting a riealth-care associated infection (i | 1 1/\\) |

| i iovide di leasi live | e hisk lactors associated with contracting a nearth care associated infection (1774). |
|------------------------|---|
| Risk factor 1: | |
| | |
| Risk factor 2: | |
| | |
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| Risk factor 3: | |
| | |
| Risk factor 4: | |
| | |
| | |
| Risk factor 5: | |
| | |
| | |
| QUESTION 27 | |
| | el 'single use only' and 'single patient use' mean? |
| Single use only: | |
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| | |
| Single patient use: | |
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| QUESTION 28 | |
|----------------------|--|
| What does the Austra | alian/New Zealand Standard 4187:2014 refer to? |
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| QUESTION 29 | |
| | e between harmless microorganisms and pathogens. |
| | s between namiess microorganisms and pathogens. |
| Harmless | |
| microorganisms: | |
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| | |
| Pathogens: | |
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| An infectious agent or mic | crobe can be exogenous | or endogenous. | What is the difference | between the two |
|----------------------------|------------------------|----------------|------------------------|-----------------|
| types of microbes? | | | | |

| , , | |
|---|---|
| Exogenous: | |
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| Endogenous: | |
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| QUESTION 31 | |
| | ving terms with their correct definition |
| A. Colonisation | A noticeable impairment of bodily functions |
| B. Infection | 2. Bacteria is present without evidence of infection |
| C. Disease | 3. The active process where bacteria is causing damage to cells or tissue |
| D. Source | 4. The origin of the infectious agent |
| Ourgroup | |
| QUESTION 32 A human can be the source of | contagious infection during which three stages? |
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| QUESTION 33 |
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| What are the 3 main shapes of bacteria? |
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| What do I need to hand in for this task? | Have I completed this? | |
|--|------------------------|--|
| Your answers to each question | | |

ASSESSMENT TASK COVER SHEET - ASSESSMENT TASK 2

Students: Please fill out this cover sheet clearly and accurately for this task.

Make sure you have kept a copy of your work.

Name:

Date of birth:

Student ID:

Unit:

HLTINF001 Comply with infection control policies and procedures

Student to complete

Assessor to complete

| Student to complete | Assessor to complete | | | |
|---------------------|----------------------|------------------|-----------------------------|------|
| Assessment Task | Resubmission? Y/N | Student initials | Sufficient/ insufficient | Date |
| Case study | | | | |

STUDENT DECLARATION

| I d | eclare that these tasks are my own work. |
|--|--|
| None of this work has been completed by any other person. | |
| I have not cheated or plagiarised the work or colluded with any ot | her student/s. |
| I have correctly referenced all resources and reference texts throu | ghout these assessment tasks. |
| I understand that if I am found to be in breach of policy, disciplinar | ry action may be taken against me. |
| | |
| Student signature: | |
| Student name: | |
| Date: | |

ASSESSOR FEEDBACK Assessors: Please return this cover sheet to the student with assessment results and feedback. A copy must be supplied to the office and kept in the student's file with the evidence.

| Assessor signature: | | |
|---------------------|--|--|
| 5 | | |
| Assessor name: | | |

ASSESSMENT TASK 2: CASE STUDY



TASK SUMMARY:

You are to read the case study and complete the questions that follow.

WHAT DO I NEED IN ORDER TO COMPLETE THIS ASSESSMENT?

- Access to a computer (if you prefer type out your answers).
- Risk assessment control form (provided)
- Risk assessment control matrix (provided).

WHEN DO I DO THIS TASK?

- You will do this task in your own time.
- Write in the due date as advised by your assessor:

WHAT DO I NEED TO DO IF I GET SOMETHING WRONG?

If your assessor marks any of your answers as incorrect, they will talk to you about resubmission. You will need to do one of the following:

- Answer the questions that were incorrect in writing.
- Answer the questions that were incorrect verbally.

INSTRUCTIONS:

Read the case study and answer the questions.

CASE STUDY 1

Sarah has just started her new role as a disability support worker at SupportingU, a local residential disability care service. The managing director, Michelle, received a referral from a friend to hire Sarah to fill a maternity leave position.

Sarah has the necessary qualification and experience in the field, and as the residence is quite busy Michelle decides to consider Sarah to work on a one-month probationary trial period.

It has been nearly a month since Sarah started working at the residential facility and Michelle has recently been informed by another support worker that, upon a number of occasions whilst tending to the patients, Sarah does not wear the required gloves when administering medication and performing cleaning duties. She has also been reported to not wash her hands.

This news is particularly concerning as Sarah has been coughing and sniffing over the last few days, displaying onset of flu-like symptoms. Some of the staff aware of this issue are concerned of infections or the flu spreading, especially since the residence is rather small and close contact with each other is quite likely.

Michelle is quite surprised with this news as the residence has very strict guides on hand hygiene policy, which must be followed at all times. There have been a few small posters put up around the residence as reminders, and hand sanitiser solution in every room – although there has been no sure way of monitoring that all staff are adhering to this process.

Now, at one month into Sarah's role, Michelle decides to conduct a direct observation of Sarah treating her next patient.

Sarah is on duty for her next client with Michelle directly observing. Michelle notes down the following during her observation:

Sarah did not wear the required gloves when feeding the client, nor did she follow proper clean-up procedures. The client was given their medication and put to bed, however Sarah did not change the client's linen as scheduled. Sarah did not wash her hands once during the observation.

Through direct observation, Michelle has now been able to confirm that Sarah did not follow the correct hand hygiene or clean up procedures.

| Yo | u are required to do the following: |
|----|---|
| 1. | Complete a risk assessment using the template provided at the end of this task. |
| 2. | What hazards have been identified after completing the risk assessment? |
| | |
| 3. | Who is at risk in this scenario? |
| | |

| 4. | What infections could potentially occur? |
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| 5. | What PPE would be required to help minimise the risks? |
| J. | What is a would be required to help minimise the risks. |
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| 6. | What is Michelle's responsibility for infection prevention and control as the manager of the residential care facility? |
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| 7. | Who could Michelle seek advice from to discuss work health and safety issues? |
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| 8. | What sustainable procedures, practices or initiatives could Michelle implement at the clinic to help control potential infection outbreaks? Provide at least three examples. |
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| 9. | What type of training would need to occur for better hand hygiene? Provide three examples. |
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| 10. | What documentation would be required to support these initiatives? Provide five examples. |
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| 11. | Review The 5 Moments for Hand Hygiene Program by Hand Hygiene Australia and explain how this would be a beneficial initiative for Michelle's workplace to participate in. |
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| 12. | Who is responsible for monitoring and maintaining these procedures? |
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| 13. | Imagine you identified a laceration on Sarah's hands that was bleeding. Explain the hand care procedure you would follow. |
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| 14. | | ah was suffering from cold and flu. Explain the procedures for respiratory hygiene and cough etiquette nis situation. |
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| C | ASE S | STUDY PART 2A |
| | | been nearly three months since Michelle had the issue with hand hygiene at the residential facility Il has been going well since. Michelle has recently been informed of the COVID-19 Outbreak in the |
| _ | | l community. Ile and the management team need to develop procedures immediately to ensure the facility is |
| | | eting residents, staff and visitors. |
| 15. | | wnload the PDF file from the following website and use as your guide to answer questions 15–18. s://www.health.gov.au/resources/publications/coronavirus-covid-19-guidelines-for-outbreaks-in- |
| | resi | dential-care-facilities |
| | The | updated procedures need to have guidelines for: |
| | • | Identifying a potential COVID-19 outbreak and the steps to take |
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| | • | How to manage Visitors |
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| nfection control procedures, including PPE required | | | | | |
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| effection control procedures, including PPE required | | | | | |
| fection control procedures, including PPE required | | | | | |
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| fection control procedures, including PPE required | | | | | |
| fection control procedures, including PPE required | _ | | | _ | |
| | nfection control pr | ocedures, including PP | E required | | |
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| 16. | What type of training would need to occur to ensure the procedures are followed correctly? |
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| 17. | What key factors would need to be considered when adapting the Risk Management Plan for COVID-19? |
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| C | ASE STUDY PART 2B |
| | here is now news of an elderly client in the residential care facility who has suspected COVID-19. They have been tested and are awaiting results. |
| 18. | Outline the procedures that will need to be followed, including: |
| | How to care for the client in the residential care facility |
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| What do I need to hand in for this task? | Have I completed this? |
|--|------------------------|
| Your answers to this case study | |
| Risk Assessment Control Form | |

| Risk Assessment Control form | | | | | | |
|---------------------------------|-----|-------------------------|----------|--|--|--|
| Location | | Site supervisor/manager | Michelle | | | |
| Completed by | | Date | | | | |
| Description of work task/activi | ty: | | | | | |
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| Hazaı | Hazard identification and initial risk rating | | | | Control measures and | actions | |
|--------|---|------------------------------------|-------------------|--|--------------------------------------|-------------------|------|
| Hazard | Potential harm | Likelihood of harm occurring | Risk level rating | Current control measures and their effectiveness | Further action/ controls required | Who's responsible | Date |
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| На | zard identification and i | initial risk rating | | | Control measures a | and actions | |
|--------|---------------------------|------------------------------------|----------------------|--|--------------------------------------|-------------------|------|
| Hazard | Potential harm | Likelihood of harm occurring | Risk level rating | Current control measures and their effectiveness | Further action/ controls required | Who's responsible | Date |
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| На | zard identification and i | initial risk rating | | | Control measures a | and actions | |
|--------|---------------------------|------------------------------------|----------------------|--|--------------------------------------|-------------------|------|
| Hazard | Potential harm | Likelihood of harm occurring | Risk level rating | Current control measures and their effectiveness | Further action/ controls required | Who's responsible | Date |
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RISK ASSESSMENT RATING MATRIX

Use this table to determine the current risk for each identified hazard.

| | | | | LIKELIHOOD | | |
|-------------|---|--|--|-----------------------------------|--|--|
| | | RARE | UNLIKELY | POSSIBLE | LIKELY | ALMOST CERTAIN |
| | | The event will only occur in exceptional circumstances | The event is not likely to occur in a year | The event may occur within a year | The event is likely to occur within a year | The event is almost certain to occur within a year |
| | SEVERE/CATASTROPHIC (Accidental death / serious injury) | MEDIUM | HIGH | EXTREME | EXTREME | EXTREME |
| SCE | MAJOR (serious injury) | MEDIUM | | HIGH | EXTREME | EXTREME |
| CONSEQUENCE | MODERATE (Lost time due to workplace injury) | LOW | MEDIUM | HIGH | HIGH | HIGH |
| CON | MINOR (Minor workplace injury – no lost time) | LOW | LOW | MEDIUM | MEDIUM | MEDIUM |
| | MINIMAL (no injury) | LOW | LOW | LOW | LOW | LOW |

RISK LEVELS

Resolution at each level involves reducing the risk level to a lower level of risk

- Extreme requires immediate assessment with management consideration. A detailed plan, regular monitoring and reporting is required with a target resolution within 1 month timeframe
- High requires immediate assessment with senior staff consideration, planning and reporting. Target resolution should ideally be within 3 months
- Medium reviewing of existing controls and planning required. Resolution timeframe should be within 1 year

Low - the risk may be tolerable and controlled if managed with high quality process and procedures.

ASSESSMENT TASK COVER SHEET - ASSESSMENT TASK 3

Students: Please fill out this cover sheet clearly and accurately for this task.

Make sure you have kept a copy of your work. Name: Date of birth: Student ID: Unit: HLTINF001 Comply with infection control policies and procedures Student to complete Assessor to complete Student Sufficient/ Resubmission? **Assessment Task** Y/N initials insufficient Date Role play STUDENT DECLARATION I _____ declare that these tasks are my own work. None of this work has been completed by any other person. I have not cheated or plagiarised the work or colluded with any other student/s. I have correctly referenced all resources and reference texts throughout these assessment tasks. I understand that if I am found to be in breach of policy, disciplinary action may be taken against me. Student signature: Student name: _____

ASSESSOR FEEDBACK Assessors: Please return this cover sheet to the student with assessment results and feedback. A copy must be supplied to the office and kept in the student's file with the evidence.

| Assessor signature: | | |
|---------------------|--|--|
| J | | |

Date: _____

Assessor name:

ASSESSMENT TASK 3: ROLE PLAY



TASK SUMMARY:

You are required to follow procedures to clean up a bodily fluid spill (vomit).

WHAT DO I NEED IN ORDER TO COMPLETE THIS ASSESSMENT?

- Access to your workplace.
- An area in which you can demonstrate clean-up procedures.
- A bodily fluids spill kit.
- 2 x spill area warning signs.
- PPE.
- Disinfectant.
- Clinical waste bags and ties.
- Clinical waste receptacle.
- Hand-washing facilities
- Substance to simulate vomit (your assessor will provide).

WHEN DO I DO THIS ASSESSMENT?

- You will do this task during your assessor's visit to your workplace.
- Write in the date of your assessor's workplace visit:

WHAT DO I NEED TO DO IF I GET SOMETHING WRONG?

If your assessor sees that you have not shown appropriate skills or knowledge, they will give you some feedback and you will need to do the specific task again.

INSTRUCTIONS:

Your service has been suffering from a gastro-enteritis outbreak.

A client announces that they feel sick, and they suddenly vomit on the floor.

You have been instructed to take action to clean the area and prevent further spread of infection.

For this task your assessor will use a substance to simulate vomit.

- 1. Using your workplace's policies and procedures and a bodily fluids spill kit, clean up the vomit and wash the area.
- 2. Once you have cleaned up properly, correctly dispose of the contaminated materials as per procedure.
- 3. As you work, you are to explain to your assessor what you are doing. Remember to communicate professionally and appropriately with your assessor during this time.

Your assessor will ask you a number of verbal questions about infection control procedures after you have completed the task.

Your assessor will be looking to see that you can:

- Read, understand and follow procedures and guidelines to safely dispose of contaminated waste For example, correct use of the spill kit, use of PPE, consideration of others' health and safety, etc.
- Respond to a situation in which additional precautions are required to prevent transmission of infection For example, correct hand hygiene procedures, use of disinfectant etc.
- Read, understand and follow procedures and guidelines to safely dispose of contaminated waste For example, use of correct bags or containers, disposing in the correct place, etc.
- Follow organisation procedures when selecting the right PPE
- Correctly place warning signs
- Identify any risks to clients and report and record these
- Identify, separate and maintain clean and contaminated zones
- Demonstrate correct hand washing procedure before and after the clean up.

| What do I need to hand in for this task? | Have I completed this? | |
|--|------------------------|--|
| You do not need to submit anything for this task | NA | |