No. 1309 12 December 2008



SOUTH AFRICAN QUALIFICATIONS AUTHORITY (SAQA)

In accordance with Regulation 24(c) of the National Standards Bodies Regulations of 28 March 1998, the Standards Generating Body (SGB) for

Ancillary Health Care

registered by Organising Field 09 – Health Sciences and Social Services, publishes the following Qualification and Unit Standards for public comment.

This notice contains the titles, fields, sub-fields, NQF levels, credits, and purpose of the Qualification and Unit Standards. The full Qualification and Unit Standards can be accessed via the SAQA web-site at www.saqa.org.za. Copies may also be obtained from the Directorate of Standards Setting and Development at the SAQA offices, SAQA House, 1067 Arcadia Street, Hatfield, Pretoria.

Comment on the Qualification and Unit Standards should reach SAQA at the address below and *no later than 12 January 2009*. All correspondence should be marked **Standards Setting** – SGB for **Ancillary Health Care** and addressed to

The Director: Standards Setting and Development

SAQA

Attention: Mr. E. Brown
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Private Bag X06
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D. MPHÜTHING

ACTING DIFECTOR: STANDARDS SETTING AND DEVELOPMENT



QUALIFICATION: National Certificate: Ancillary Health Care

SAQA QUAL ID	QUALIFICATION TITLE			
64769	National Certificate: Ancill	ary Health Care		
ORIGINATOR		PROVIDER		
SGB Ancillary Health Care				
QUALIFICATION TYPE	FIELD	SUBFIELD		
National Certificate	9 - Health Sciences and Social Services	Promotive Health and Developmental Services		
ABET BAND	MINIMUM CREDITS	NQF LEVEL	QUAL CLASS	
Undefined	140	Level 3	Regular-Unit Stds Based	

This qualification replaces:

Qual ID	Qualification Title	NQF Level	Min Credits	Replacement Status
49128	National Certificate: Community Health Work	Level 3	120	Will occur as soon as 64769 is registered

PURPOSE AND RATIONALE OF THE QUALIFICATION Purpose:

A learner who has achieved this qualification will integrate a range of awareness and competencies to practice the roles of health promoter, health provider and health net-worker within a community development context.

Learners who complete this qualification will have a better self and social awareness and will possess a range of thinking and problem solving skills. In addition, they will possess the competence required to perform community health functions in a complex developing world context. They will have the skills required for employment by a range of health, social and other sector employers and will be in possession of a recognised qualification.

Qualified learners in this field will provide a service that will assist communities to better manage their own health and wellness. They will have the skills to work as team members and as providers of support services within a multi-disciplinary health care team. Practitioners will generally carry out their role within the context of the client's home, a community care centre and/or the broader community.

Rationale:

The South African Government is committed to combining the national human resource development strategy with the rapid upgrading of service delivery to all of the nation's communities.

Integral to this strategy are initiatives to strengthen the ability of communities to empower themselves to participate in the political, economic, social and development spheres of South African life. Two key components in this empowerment are the ability of communities to integrate with and access state services, and their abilities to further the health and wellness of community members.

Source: National Learners' Records Database

There is no doubt from the international experience of Community Health Workers (CHW) that they play a vital role in improving the basic health status of communities. In South Africa, the important supportive role of CHWs in the provision of health care services has been extensively documented. This contribution is further exemplified in those parts of the country where there is a shortage of professional health workers to provide the necessary health care services based on identified needs.

The Department of Health is leading the implementation of a multi-professional team-based approach to health care delivery, where each member of the team has a defined role to ensure that there is no duplication and overlapping of functions. This process will also ensure that no single member of the team dominates but that different members of the team will lead at different times depending on the services to be rendered.

RECOGNIZE PREVIOUS LEARNING?

Y

LEARNING ASSUMED IN PLACE

- > Communication at NQF Level 2.
- > Mathematical Literacy at NQF Level 2.

Recognition of Prior Learning:

This qualification can be achieved wholly or in part through recognition of prior learning in terms of the defined exit level outcomes and/or individual unit standards. Evidence can be presented in various ways, including verified international and/or previous local qualifications, products, reports, testimonials mentioning functions performed, work records, portfolios, videos of practice and performance records. All such evidence will be judged in accordance with the general principles of assessment described above and the requirements for integrated assessment.

The structure of this Unit Standard based Qualification makes the Recognition of Prior Learning possible. Learners who are able to demonstrate competence in the knowledge, skills, values and attitudes implicit in this Qualification and/or any of its constituent Unit Standards must receive the appropriate credits. Assessment of Prior Learning must be done by means of Integrated Assessment.

Recognition of Prior Learning may allow for:

- > Accelerated access to further learning at this or other levels on the NQF.
- > Gaining of credits towards a Unit Standard.
- > Obtaining in whole or in part of this Qualification.

All recognition of Prior Learning is subject to quality assurance by the relevant ETQA or an ETQA that has a Memorandum of Understanding with the relevant ETQA.

Access to the Qualification:

Access to this Qualification is open, bearing in mind the Learning Assumed to be in Place itemised below.

QUALIFICATION RULES

The Qualification is made up of Unit Standards classified as Fundamental, Core and Elective. A minimum of 140 credits is required to complete the Qualification.

Fundamental Component:

Source: National Learners' Records Database

Qualification 64769

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All the Fundamental Unit Standards, totaling 36 credits, are compulsory.

- > Unit Standards to the value of twenty credits in Communication including oral and written communications. The Communication component also includes communication in occupational learning programmes.
- > Sixteen credits in Mathematical Literacy have also been included in the Fundamental Component.
- > These Fundamental Unit Standards will add value to learners both socially and economically in terms of their ability to operate as literate and numerate workers in a global economy.

Core Component:

All the Unit Standards in the Core Component, totaling 64 credits, are compulsory.

The Unit standards in the Core Component will equip the learner with the essential skills and knowledge required to effectively perform the Ancillary Health Care function. The Core Unit Standards consist of competencies relevant to problem solving to achieve health care objectives, participating in teams or groups to maximise ancillary health care services, providing information about HIV and AIDS treatment options, and assisting in facilitation and implementation of primary health care projects within the community via home based care, promoting nutritional programmes, identifying and referring abused persons and managing the prevention of fatigue in workplace.

Elective Component:

Learners are required to select Unit Standards from the Elective Component that total at least 40 credits.

These Unit Standards continue from the Core Component in focusing on learning areas pertinent to the core functions of Ancillary Health Care and will enable learners to gain specialist knowledge and skills, particularly in the stream of learning that complements the job context. It is recommended that the learner focus on one stream of Ancillary Health Care, e.g., Rehabilitation, and do all the unit standards related thereto to make the learning more relevant to own context in conjunction with the core standards that provide an integral foundation to the chosen Electives.

EXIT LEVEL OUTCOMES

- 1. Implement primary health care to achieve objectives identified within own work context and community.
- 2. Assist in facilitation and implementation of primary health care projects within the community.

Critical Cross-Field Outcomes:

- a) Identify and solve problems related to community health work in effectively assist in implementing community health care programmes.
- b) Work effectively with others as a member of a team, group, organisation or community to promote primary health care in the community and participate in effectively in community health care projects.
- c) Organise and manage oneself and one's activities responsibly to ensure that all primary health care functions in relation to own job context are organized and administered effectively, within given timeframes and according to overall community programme requirements.
- d) Collect, organise and critically evaluate information relating to health care developments, trends, legislation and own community programme plans in order to effectively perform one's own function in primary health care programmes.

- e) Communicate effectively using visual, mathematics and language skills in the modes of oral and/or written persuasion to engage stakeholders and promote primary health care within the community.
- f) Use science and technology effectively and critically showing responsibility towards the environment and the health of others in order to effectively communicate and administer all functions relating to own primary health care working context.
- g) Demonstrate an understanding of the world as a set of related systems by recognising that problem-solving contexts relating to primary health care not exist in isolation and that a variety of external factors, including political, socio-economic, capacity, resources, budgets and community needs will affect how a community health project is planned and administrated.

ASSOCIATED ASSESSMENT CRITERIA

Assessment Criteria for Exit Level Outcome 1:

- 1.1 Reactions arising from traumatic events are recognised and managed in a proactive way.
- 1.2 Fatigue is recognised in the workplace and steps are taken to manage and prevent this.
- 1.3 Information is provided about HIV and AIDS and treatment options to support community care and education programmes.
- 1.4 Nutritional programmes are planned and promoted in order to improve community health and awareness relating to nutritional programmes.
- 1.5 Support relating to home based care is provided within context of own community projects.

Assessment Criteria for Exit Level Outcome 2:

- 2.1 Community needs assessments are evaluated to determine priority health care projects within the community.
- 2.2 Health care projects are identified and planned and stakeholders are identified and engaged in consultation with the community to ensure effective impact of primary health care projects.
- 2.3 Health care projects are implemented, monitored and evaluated in line with priority needs in own work context.

Integrated Assessment:

Because assessment practices must be open, transparent, fair, valid, and reliable and ensure that no learner is disadvantaged in any way whatsoever, an integrated assessment approach is incorporated into the Qualification. Learning, teaching and assessment are inextricably linked. Whenever possible, the assessment of knowledge, skills, attitudes and values shown in the unit standards should be integrated.

Assessment of the communication, language, literacy and numeracy should be conducted in conjunction with other aspects and integrated into the various unit standards that make up this Qualification.

A variety of methods must be used in assessment and tools and activities must be appropriate to the context in which the learner is working. Where it is not possible to assess the learner in the workplace or on-the-job, simulations, case studies, role-plays and other similar techniques should be used to provide a context appropriate to the assessment.

The term 'Integrated Assessment' implies that theoretical and practical components should be assessed together. During integrated assessments the assessor should make use of formative and summative assessment methods and assess combinations of practical, applied, foundational and reflective competencies.

Assessors and moderators should make use of a range of formative and summative assessment methods. Assessors should assess and give credit for the evidence of learning that

has already been acquired through formal, informal and non-formal learning and work experience.

Assessment should ensure that all specific outcomes, embedded knowledge and critical cross-field outcomes are evaluated. The assessment of the critical cross-field outcomes should be integrated with the assessment of specific outcomes and embedded knowledge.

INTERNATIONAL COMPARABILITY

There are no internationally recognised qualifications for ancillary health care workers. This qualification, as an outcomes' based education programme, is uniquely South African and is appropriate for the unique requirements in this country. It can be adapted to neighbouring (SADC) and other third-world countries.

Countries affected by the global shortage in the health sector workforce have responded with initiatives using community health workers and have created facilitative training initiatives for them. However much ancillary health training is reactive in response to regional needs rather than proactive as this qualification attempts to be. Although the content of qualifications and skills programmes vary from country to country based on current urgent needs, they are comparable in content and level. Common themes enable community health workers to act as a bridge between the community and the health care system and deal directly with some simpler community based problems.

The academic background and training of community health workers vary widely in different regions. According to the World Health Organization community health workers should have a level of basic education that enables them to read, write, and do simple mathematical calculations.

Globally, community health workers provide basic health services to a large number of populations, including poor people from rural areas. However, their efficiency is limited by lack of knowledge and skill. Continuing medical education and training programmes should provide problem oriented education, which would enable community health workers to conduct programmes and provide primary health care.

Nepal, India, Bangladesh, Brazil, South East Asia:

Countries and continents using Community Health Workers include, but are not limited to, Nepal, India, Bangladesh, Brazil, South East Asia and Africa.

United States of America, Canada and the United Kingdom:

In some parts of the United States of America (USA), Canada and the United Kingdom (UK), in response to changing demographics and an influx of immigrants from diverse regions (Cambodia, Vietnam, and Thailand) ancillary health care programmes to and training for community health workers have also been introduced.

An example of such a programme is that of the United the Minnesota Department of Health. This organisation uses bilingual community health workers to act as health guides or bridges between the health care system and patients in immigrant communities. Their roles include informal counselling, social support, and health education, enrolment in health insurance programmes, advocacy, and referral and follow up services. Community health worker programs have been found to be cost effective and to improve health outcomes among minority and immigrant populations. Training programmes have been developed by the Healthcare Education Industry Partnership and the BlueCross Blueshield Foundation and are presented at a number of institutions for example The Minneapolis Community and Technical College, which provides a Community Health Worker Enhanced Role Certificate consisting of 17 Credits made up as follows:

Course No: Course Name: Credits:

- > HCCC 1010; Behaviours for Success in Health Careers; 0.50 credits.
- > HCCC 1020; Communication in Healthcare; 1.00 credits.
- > HCCC 1030; Awareness and Sensitivity to Client Needs; 0.50 credits.
- > HCCC 1040; Respecting Client and Staff Diversity; 0.50 credits.
- > HCCC 1050; Healthcare Safety and Standard Precautions; 0.50 credits.
- > HCCC 1060; Legal Issues in Health Care; 0.50 credits.
- > HCCC 1070; Ethics; 0.50 credits.
- > HCCC 1080; Nursing Assistant Skill Set; 2.00 credits.
- > CMHW 1000; The Community Health Worker: Role, Advocacy and Outreach; 3.00 credits.
- > CMHW 1015; Organization and Resources: Community and Personal Strategies; 2.00 credits.
- > CMHW 1025; Teaching and Capacity Building; 2.00 credits.
- > CMHW 1035; Community Health Worker: Legal and Ethical Responsibilities; 1.00 credits.
- > CMHW 1045; Community Health Worker Coordination, Documentation and Reporting; 1.00 credits.
- > CMHW 1055; Communication Skills and Cultural Competence; 2.00 credits.

Other states with diversity issues utilising such programmes include, but are not limited to, Texas and California.

Africa:

In much of Africa ancillary health care worker training is project based training as part of international aid projects. In Kenya, the community based HIV/AIDS Prevention and Support Project used and trained community health workers using a 'cascading' method. A group of 250 master trainers trained larger groups of trainers who trained even larger groups of community health workers and HIV/AIDS counsellors in community home-based care. Through this process almost 1,500 community health workers were trained and provided continuing support to over 71,000 primary care givers. Community health workers taught primary caregivers simple nursing skills such as the proper way to turn a client, how to wash the client in bed, nutritional needs, proper storage of drugs and monitoring adherence, and the importance of encouragement and avoiding stress. Community health workers also helped patients and their families identify resources such as food security and financial support provided by local community and faith-based organizations.

Conclusion:

Although most countries comprising the South African development Community (SADC) are aware of the needs that can be met by such programmes, South Africa seems to be taking the lead in this regard. There is no doubt that this Qualification, once registered, will be taken up by the various SADC countries, as well as by various formal and informal providers of community health services.

ARTICULATION OPTIONS

This Qualification articulates horizontally with:

> ID 49993 National Certificate: Auxiliary Nursing, NQF Level 3.

It articulates vertically with:

- > ID 64697: Further Education and Training Certificate: Community Health Work, NQF Level 4.
- > ID 58396: Further Education and Training Certificate: Community Development: HIV/AIDS Support, NQF Level 4.

Source: National Learners' Records Database

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MODERATION OPTIONS

- > Anyone assessing a learner or moderating the assessment of a learner against this Qualification must be registered as an assessor with a relevant Education, Training, Quality Assurance (ETQA) Body or with an ETQA that has a Memorandum of Understanding with the relevant ETQA.
- > Any institution offering learning that will enable the achievement of this Qualification must be accredited as a provider with the relevant ETQA or with an ETQA that has a Memorandum of Understanding with the relevant ETQA.
- > Moderation of assessment will be overseen by the relevant ETQA or by an ETQA that has a Memorandum of Understanding with the relevant ETQA, according to the ETQA's policies and guidelines for assessment and moderation.
- > Moderation must include both internal and external moderation of assessments at exit points of the Qualification, unless ETQA policies specify otherwise.

CRITERIA FOR THE REGISTRATION OF ASSESSORS

For an applicant to register as an assessor for this Qualification, the applicant must:

- > Be accredited as an assessor by the relevant ETQA or ETQA that has a Memorandum of Understanding in place with the relevant ETQA.
- > Hold at least the National Diploma: Nursing, NQF Level 5 and have actual experience in community health work.

NOTES

This qualification replaces qualification 49128, "National Certificate: Community Health Work", Level 3, 120 credits.

UNIT STANDARDS

	ID	UNIT STANDARD TITLE	LEVEL	CREDITS
Fundamental	119472	Accommodate audience and context needs in oral/signed communication	Level 3	5
Fundamental	9010	Demonstrate an understanding of the use of different number bases and measurement units and an awareness of error in the context of relevant calculations	Level 3	2
Fundamental	9013	Describe, apply, analyse and calculate shape and motion in 2-and 3-dimensional space in different contexts	Level 3	4
Fundamental	119457	Interpret and use information from texts	Level 3	5
Fundamental	9012	Investigate life and work related problems using data and probabilities	Level 3	5
Fundamental	119467	Use language and communication in occupational learning programmes	Level 3	5
Fundamental	7456	Use mathematics to investigate and monitor the financial aspects of personal, business and national issues	Level 3	5
Fundamental	119465	Write/present/sign texts for a range of communicative contexts	Level 3	5
Core	244608	Demonstrate ability to lead a team or group	Level 2	3
Core	244611	Apply problem-solving techniques to make a decision or solve a problem in a real life context	Level 3	2
Core	244578	Describe how to manage reactions arising from a traumatic event	Level 3	2
Core	260577	Explain the management of fatigue in the workplace	Level 3	3
Core	260558	Identify and refer an abused person	Level 3	6
Core	260597	Provide information about HIV and AIDS and treatment options in community care and support situations	Level 3	8
Core	260598	Provide support relating to home based care	Level 3	16
Core	260406	Assist in facilitating and implementing primary health care projects within the community	Level 4	12
Core	260383	Plan and promote nutritional programmes to improve health	Level 4	12
Source: National I	earners! Pecarde	Database Qualification 64769	19/11/2008	Page 7

Source: National Learners' Records Database Qualification 64769 19/11/2008 Page 7

	ID	UNIT STANDARD TITLE	LEVEL	CREDITS
Elective	260600	Assist and support a client with a breathing problem	Level 3	3
Elective	254222	Demonstrate stress management techniques as a self- help tool	Level 3	4
Elective	260599	Facilitate the optimal functioning of the person with a psychiatric disorder by promoting activities of daily living	Level 3	12
Elective	260601	Maintain the optimal functioning of a person with dementia	Level 3	14
Elective	260602	Promote independence in an adult with a physical disability	Level 3	9
Elective	260559	Promote optimal functioning in activities for daily living for a child with a disability	Level 3	9
Elective	117507	Develop and implement a client ARV treatment plan	Level 4	6
Elective	260380	Facilitate the optimal functioning of the client with intellectual disability	Level 4	15
Elective	260382	Institute preventive measures to reduce the potential impact of disasters	Level 4	15
Elective	11473	Manage individual and team performance	Level 4	8

LEARNING PROGRAMMES RECORDED AGAINST THIS QUALIFICATION None

Source: National Learners' Records Database



UNIT STANDARD:

Identify and refer an abused person

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE			
260558	Identify and refer an abused	Identify and refer an abused person			
ORIGINATOR		PROVIDER			
SGB Ancillary Heal	th Care				
FIELD		SUBFIELD			
9 - Health Sciences	and Social Services	Preventive Health			
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS		
Undefined	Regular	Level 3	6		

This unit standard replaces:

USID	Unit Standard Title	NQF Level	Credits	Replacement Status
117504	Identify and support the abused child	Level 4	6	Will occur as soon as 260558 is registered

SPECIFIC OUTCOME 1

Describe the signs of possible abuse.

SPECIFIC OUTCOME 2

Describe knowledge of the reporting procedures and sources of referral pertaining to the abused person.

SPECIFIC OUTCOME 3

Support an abused person.

	ID	QUALIFICATION TITLE	LEVEL
Core	64769	National Certificate: Ancillary Health Care	Level 3



UNIT STANDARD:

Promote optimal functioning in activities for daily living for a child with a disability

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE			
260559	Promote optimal functioning i disability	Promote optimal functioning in activities for daily living for a child with a disability			
ORIGINATOR		PROVIDER			
SGB Ancillary Health	n Care				
FIELD		SUBFIELD			
9 - Health Sciences	and Social Services	Preventive Health			
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS		
Undefined	Regular	Level 3	9		

This unit standard does not replace any other unit standard and is not replaced by another unit standard.

SPECIFIC OUTCOME 1

Identify the different medical conditions that give rise to disabilities in children.

SPECIFIC OUTCOME 2

Identify normal sequence of developmental stages in the child and signs of abnormal or retarded childhood development in accordance with average child development charts.

SPECIFIC OUTCOME 3

Facilitate and monitor the child's mobility according to level of development.

SPECIFIC OUTCOME 4

Select methods to help the child participate in ADL according to relevant developmental level.

SPECIFIC OUTCOME 5

Assist in implementing and monitoring a child's treatment plan.

ID	QUALIFICATION TITLE	LEVEL
Elective 64769	National Certificate: Ancillary Health Care	Level 3



UNIT STANDARD:

Explain the management of fatigue in the workplace

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE			
260577	Explain the management of f	atigue in the workplace			
ORIGINATOR		PROVIDER			
SGB Ancillary Heal	th Care				
FIELD		SUBFIELD			
9 - Health Sciences	and Social Services	Preventive Health			
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS		
Undefined	Regular	Level 3	3		

This unit standard does not replace any other unit standard and is not replaced by another unit standard.

SPECIFIC OUTCOME 1

Identify and explain the causes of fatigue.

SPECIFIC OUTCOME 2

Demonstrate an understanding of the prevention of fatigue.

SPECIFIC OUTCOME 3

Explain how to cope with fatigue in a work situation.

ID	QUALIFICATION TITLE	LEVEL
Core 64769	National Certificate: Ancillary Health Care	Level 3



UNIT STANDARD:

Provide information about HIV and AIDS and treatment options in community care and support situations

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE			
260597	Provide information about HIV and AIDS and treatment options in community care and support situations				
ORIGINATOR		PROVIDER			
SGB Ancillary Heal	th Care				
FIELD		SUBFIELD			
9 - Health Sciences	and Social Services	Preventive Health			
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS		
Undefined	Regular	Level 3	8		

This unit standard replaces:

US ID	Unit Standard Title	NQF Level	Credits	Replacement Status
117493	Provide information about HIV and AIDS and treatment options in community care and support situations	Level 3	6	Will occur as soon as 260597 is registered

SPECIFIC OUTCOME 1

Describe the rights of people who are infected with and affected by HIV and AIDS.

SPECIFIC OUTCOME 2

Explain the importance of knowing own HIV status and the implications for taking a test for HIV.

SPECIFIC OUTCOME 3

Explain ways to reduce the transmission of HIV from a pregnant HIV positive woman to her child.

SPECIFIC OUTCOME 4

Explain post-HIV exposure prophylaxis (PEP).

SPECIFIC OUTCOME 5

Explain the importance of early treatment for opportunistic infections.

SPECIFIC OUTCOME 6

Discuss access to antiretroviral (ARV) therapy and the advantages and disadvantages of ARV treatment.

QUALIFICATIONS UTILISING THIS UNIT STANDARD

	ID	QUALIFICATION TITLE	LEVEL
Core	64769	National Certificate: Ancillary Health Care	Level 3

Source: National Learners' Records Database

Unit Standard 260597

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UNIT STANDARD:

Provide support relating to home based care

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE			
260598	Provide support relating to he	Provide support relating to home based care			
ORIGINATOR	•	PROVIDER			
SGB Ancillary Heal	th Care				
FIELD		SUBFIELD			
9 - Health Sciences	and Social Services	Preventive Health			
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS		
Undefined	Regular	Level 3	16		

This unit standard replaces:

US ID	Unit Standard Title	NQF Level	Credits	Replacement Status
117004	Provide support relating to home based care	Level 3	16	Will occur as soon as 260598 is registered

SPECIFIC OUTCOME 1

Provide information relating to disease and disability to individuals and groups.

SPECIFIC OUTCOME 2

Assess the health status of the client.

SPECIFIC OUTCOME 3

Assist in the management of the client's daily living activities.

SPECIFIC OUTCOME 4

Assist in the maintenance of the client's health status.

SPECIFIC OUTCOME 5

Provide psychosocial support and refer when necessary.

SPECIFIC OUTCOME 6

Assess and take responsibility for personal well-being.

	ID	QUALIFICATION TITLE	LEVEL
Core	64769	National Certificate: Ancillary Health Care	Level 3
Elective	64749	National Certificate: Community Health Work	Level 2



UNIT STANDARD:

Facilitate the optimal functioning of the person with a psychiatric disorder by promoting activities of daily living

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE			
260599	Facilitate the optimal functioning of the person with a psychiatric disorder by promoting activities of daily living				
ORIGINATOR		PROVIDER			
SGB Ancillary Healt	h Care				
FIELD		SUBFIELD			
9 - Health Sciences	and Social Services	Preventive Health			
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS		
Undefined	Regular	Level 3	12		

This unit standard does not replace any other unit standard and is not replaced by another unit standard.

SPECIFIC OUTCOME 1

Identify a person with a possible psychiatric disorder.

SPECIFIC OUTCOME 2

Determine the different disabilities experienced by the client with a psychiatric disorder.

SPECIFIC OUTCOME 3

Assist the client to participate in activities of daily living.

SPECIFIC OUTCOME 4

Monitor and evaluate the client's well being.

	ID	QUALIFICATION TITLE	LEVEL
Elective	64769	National Certificate: Ancillary Health Care	Level 3



UNIT STANDARD:

Assist and support a client with a breathing problem

SAQA US ID	UNIT STANDARD TITLE				
260600	Assist and support a client wi	Assist and support a client with a breathing problem			
ORIGINATOR		PROVIDER			
SGB Ancillary Heal	th Care				
FIELD		SUBFIELD			
9 - Health Sciences	and Social Services	Preventive Health			
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS		
Undefined	Regular	Level 3	3		

This unit standard does not replace any other unit standard and is not replaced by another unit standard.

SPECIFIC OUTCOME 1

Manage a client with breathing problems.

SPECIFIC OUTCOME 2

Assist a person with difficulty in breathing to improve breathing.

SPECIFIC OUTCOME 3

Assist a person with a breathing problem to carry out activities of daily living.

	ID	QUALIFICATION TITLE	LEVEL
Elective	64769	National Certificate: Ancillary Health Care	Level 3



UNIT STANDARD:

Maintain the optimal functioning of a person with dementia

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE				
260601	Maintain the optimal function	Maintain the optimal functioning of a person with dementia				
ORIGINATOR		PROVIDER				
SGB Ancillary Healt	h Care					
FIELD		SUBFIELD				
9 - Health Sciences	and Social Services	Preventive Health				
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS			
Undefined	Regular	Level 3	14			

This unit standard replaces:

US ID	Unit Standard Title	NQF Level	Credits	Replacement Status
116988	Maintain the optimal functioning of a client with dementia	Level 3	10	Will occur as soon as 260601 is registered

SPECIFIC OUTCOME 1

Demonstrate an understanding of dementia.

SPECIFIC OUTCOME 2

Obtain client history records from family.

SPECIFIC OUTCOME 3

Demonstrate knowledge of the rights of people with dementia.

SPECIFIC OUTCOME 4

Communicate with the person with dementia.

SPECIFIC OUTCOME 5

Create a safe environment for the person with dementia.

SPECIFIC OUTCOME 6

Develop programmes for activities of daily living.

SPECIFIC OUTCOME 7

Understand and minimize problem behaviour and mood disorders.

	ID	QUALIFICATION TITLE	LEVEL
Elective	64769	National Certificate: Ancillary Health Care	Level 3



UNIT STANDARD:

Promote independence in an adult with a physical disability

SAQA US ID	UNIT STANDARD TITLE	UNIT STANDARD TITLE		
260602	Promote independence in an	Promote independence in an adult with a physical disability		
ORIGINATOR		PROVIDER		
SGB Ancillary Heal	th Care			
FIELD		SUBFIELD		
9 - Health Sciences and Social Services		Preventive Health		
ABET BAND	UNIT STANDARD TYPE	NQF LEVEL	CREDITS	
Undefined	Regular	Level 3	9	

This unit standard does not replace any other unit standard and is not replaced by another unit standard.

SPECIFIC OUTCOME 1

Identify the different medical conditions that give rise to physical disability.

SPECIFIC OUTCOME 2

Determine the different physical disabilities and associated problems experienced by the client.

SPECIFIC OUTCOME 3

Select and implement appropriate interventions to facilitate the client's mobility.

SPECIFIC OUTCOME 4

Select and implement methods to help the person with a physical disability to participate in activities of daily living.

SPECIFIC OUTCOME 5

Evaluate the client's well being on an ongoing basis.

QUALIFICATIONS UTILISING THIS UNIT STANDARD

	· ID	QUALIFICATION TITLE	LEVEL
Ele	ective 64769	National Certificate: Ancillary Health Care	Level 3

Source: National Learners' Records Database

Unit Standard 260602

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