

# VCE VET HEALTH

## SUPPLEMENTARY ADVICE



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## Abbreviations

AHA	allied health assistant
NDIS	National Disability Insurance Scheme
PPE	personal protective equipment
PSA	patient services assistant
SWL	structured workplace learning
UOC	unit of competency
VCE	Victorian Certificate of Education
VET	Vocational Education and Training
WHS	workplace health and safety

# Overview

This publication was produced to improve the quality of training and assessment for VCE VET Health and, thus, to enable students to reach their desired learning outcomes. It is intended to support teachers by providing a range of program suggestions. It can be used as a resource tool to evaluate delivery and improve knowledge of the health industry.

# Section 1: The health industry

## Labour trends

Each year, the Australian Department of Education, Skills and Employment publishes employment projections by industry, occupation, skill level and region. These projections are designed to provide a guide to the future direction of the labour market. The latest report, published in November 2019, covers employment trends to May 2024. It provides insight into future changes faced by the Australian labour market and the types and locations of jobs.

The report indicates that, while a number of service industries have made substantial contributions to employment growth in the last five years, healthcare and social assistance is Australia's largest and fastest-growing industry. By 2024, the healthcare and social assistance industry is projected to make the most substantial contribution to Australia's employment growth (up by 252,600 or 15.0 per cent). Of note is the 17.1 per cent increase in employment for social assistance services, which includes aged-care and disabilities support, and youth and welfare counselling services. The area of allied health services (trained professionals who are not doctors, dentists or nurses) is also expected to significantly increase by 16.6 per cent, in addition to hospital work, residential care and child care.

Among the factors influencing this trend are Australia's aging population and an increased demand for childcare and home-based services. The implementation of the National Disability Insurance Scheme (NDIS) has also significantly affected the allied health workforce structure and work roles. This new fee-for-service model of delivery means that there is more demand for allied health professionals and has created opportunities for allied health assistants (AHAs) to be more involved in client interactions. Data has not yet been formally collated but some services are reporting up to three times as many client visits. The *Australian Disability Workforce Report* is the first public analysis of NDIS-related trends in the disability workforce and indicates a rapidly growing sector, with more casual employees than the aged-care workforce.

The introduction of VCE VET Health into Victorian secondary schools provides students with the opportunity to explore a range of health environments and to consider further VET or university qualifications that will lead to sustained employment.

# Meeting the demand

In Australia, it is likely that the future supply of allied health professionals will not meet the demand. Factors such as an aging population, employment retention, trends for more flexible part-time work and reduced education funding contribute to this prediction.

In order to meet industry demands, allied health professionals are delegating responsibilities to qualified AHAs in order to be able to concentrate on more complex service coordination and clinical duties. This means that the AHA is seen as an integral part of the healthcare team and is encouraged to further develop skills through the completion of VET training such as a Certificate IV in Allied Health Assistance.

With the inclusion of a vocational pathway, a new workforce is emerging.

Table 1: Industry projections – five years to May 2024 for healthcare and social assistance

ANZSIC 06 Code	Industry	Employment level May 2019 ('000)	Department of Education, Skills and Employment		
			Projected employment level May 2024 ('000)	Projected employment growth five years to May 2024	
				('000)	(%)
<b>Q</b>	<b>Health Care and Social Assistance</b>	<b>1689.0</b>	<b>1941.5</b>	<b>252.6</b>	<b>15.0</b>
84	Hospitals	454.4	515.4	61.0	13.4
840	Hospitals	454.4	515.4	61.0	13.4
85	Medical and Other Health Care Services	532.6	618.6	86.0	16.1
850	Medical and Other Health Care Services, nfd	32.7	37.9	5.1	15.7
851	Medical Services	198.6	232.1	33.6	16.9
852	Pathology and Diagnostic Imaging Services	56.8	63.1	6.3	11.0
853	Allied Health Services	215.4	251.1	35.7	16.6
859	Other Health Care Services	34.1	39.4	5.3	15.6
86	Residential Care Services	258.0	288.1	30.1	11.6
860	Residential Care Services	258.0	288.1	30.1	11.6
87	Social Assistance Services	441.8	517.3	75.5	17.1
870	Social Assistance Services, nfd	6.7	6.7	0.0	0.0
871	Child Care Services	147.4	165.9	18.6	12.6
879	Other Social Assistance Services	284.6	341.5	56.9	20.0
Q0	Health Care and Social Assistance, nfd	0.3	0.3	0.0	0.0
Q00	Health Care and Social Assistance, nfd	0.3	0.3	0.0	0.0

(Source: Labour Market Information Portal – Industry projections five years to May 2024)

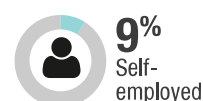
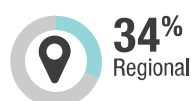
## Community and personal service workers

**1,322,400**

EMPLOYED AT NOVEMBER 2018

↑ **15.7%** SINCE NOV 2013

PROJECTED TO GROW BY **17.5%** OVER THE FIVE YEARS TO MAY 2023



EDUCATIONAL ATTAINMENT



(Source: Australian Jobs 2019, Department of Jobs and Small Business

<https://docs.employment.gov.au/system/files/doc/other/australianjobs2019.pdf>. Section: Jobs by occupation)

Table 2: Occupation matrix for Health and Community Services – includes a summary of statistical information for around 330 occupations, which can provide useful background

Occupation	Employ't	5 year change to	Working Part-time	Female	Aged 15 – 24 years	Unemploy't Rate 2018	Median Earnings	No Post-school Qual	Projected Employ't Change	
	'000	'000								%
<b>Health and Community Services</b>										
Aged and Disabled Carers (CP)	175.9	47.2	36.6	63	80	10	Below Average	\$\$	18	39.3
Ambulance Officers and Paramedics (CP)	16.8	3.8	29.6	6	40	5	Below Average	\$\$\$\$\$	-	19.9
Anaesthetists (P)	5.4	2.8	104.9	12	26	1	Below Average	\$\$\$\$\$	-	16.6
Child Care Centre Managers (M)	15.6	1.1	7.7	34	89	3	Below Average	\$\$\$	-	20.9
Child Carers (CP)	143.9	14.6	11.3	54	96	25	Average	\$	18	17.6
Chiropractors and Osteopaths (P)	3.6	-1.0	-22.7	58	52	0	Below Average	\$	-	18.6
Counsellors (P)	24.6	4.9	24.6	53	73	3	Below Average	\$\$\$	-	17.8
Dental Assistants (CP)	25.3	5.7	29.1	45	98	24	Average	\$	24	6.6
Dental Hygienists, Technicians and Therapists (CP)	6.6	-1.0	-13.7	32	66	5	Below Average	\$\$\$	-	2.7
Dental Practitioners (P)	15.1	1.5	11.2	26	44	1	Below Average	\$\$\$\$\$	-	16.7
Enrolled and Mothercraft Nurses (CP)	29.0	7.1	32.4	61	89	7	Below Average	\$\$\$	-	7.6
Generalist Medical Practitioners (P)	69.2	12.7	22.5	24	48	2	Below Average	\$\$\$\$\$	-	12.2
Health and Welfare Services Managers (M)	28.2	8.2	40.9	15	69	1	Below Average	\$\$\$\$	26	21.8
Massage Therapists (CP)	17.1	4.0	30.0	69	82	6	Below Average	-	31	20.2
Medical Imaging Professionals (P)	23.0	7.9	52.5	32	67	7	Below Average	\$\$\$\$\$	-	11.3
Medical Technicians (TT)	35.3	4.3	13.9	38	70	8	Below Average	\$\$	24	0.6
Midwives (P)	18.5	3.3	21.5	58	98	5	Below Average	\$\$\$\$	-	16.6
Ministers of Religion (P)	19.2	0.5	2.8	38	27	1	Below Average	\$	-	3.1
Nurse Educators and Researchers (P)	6.6	0.4	6.7	36	92	0	Below Average	\$\$\$\$\$	-	16.9
Nurse Managers (P)	15.5	1.3	9.1	23	78	1	Below Average	\$\$\$\$\$	-	19.0
Nursing Support and Personal Care Workers (CP)	98.9	8.0	8.8	53	78	14	Below Average	\$\$	20	11.6
Nutrition Professionals (P)	7.0	0.4	6.7	49	93	10	Below Average	\$\$	-	17.6
Occupational & Environmental Health Professionals (P)	30.2	5.2	21.0	12	43	3	Average	\$\$\$\$\$	10	9.2
Occupational Therapists (P)	18.5	5.6	43.8	34	86	8	Below Average	\$\$\$\$	-	14.6
Optometrists and Orthoptists (P)	6.9	2.6	61.8	33	69	9	Below Average	\$\$\$\$	-	9.7
Personal Care Consultants (CP)	6.9	2.0	40.7	75	85	3	Below Average	-	75	14.4
Pharmacists (P)	32.0	12.1	61.0	35	66	11	Below Average	\$\$\$\$	-	7.5
Physiotherapists (P)	23.7	4.4	22.5	34	67	12	Below Average	\$\$\$\$	-	24.9
Podiatrists (P)	3.6	-0.7	-16.7	43	71	4	Below Average	\$\$\$\$	-	17.2
Practice Managers (CA)	22.8	5.7	33.2	39	89	4	Below Average	\$\$\$	28	10.3
Psychiatrists (P)	4.8	2.7	128.8	15	39	0	Below Average	\$\$\$\$\$	-	-0.1
Psychologists (P)	33.4	10.8	47.7	45	84	3	Below Average	\$\$\$\$	-	30.2
Registered Nurses (P)	278.9	42.6	18.1	46	88	8	Below Average	\$\$\$\$	-	18.4
Social Professionals (P)	14.2	3.0	26.3	66	60	6	Below Average	\$\$\$\$	-	3.1
Social Workers (P)	37.7	11.0	41.2	29	84	2	Below Average	\$\$\$\$	-	8.0
Specialist Physicians (P)	9.7	2.5	34.9	23	36	0	Below Average	\$\$\$\$\$	-	7.6
Speech Pathologists and Audiologists (P)	11.2	1.8	18.6	28	93	19	Below Average	\$\$\$	-	38.3
Surgeons (P)	5.6	-0.8	-12.2	7	13	1	Below Average	\$\$\$\$\$	-	2.0
Welfare Support Workers (CP)	59.5	5.5	10.2	29	74	5	Below Average	\$\$\$	17	11.7
Welfare, Recreation and Community Arts Workers (P)	29.2	8.9	43.8	31	77	8	Average	\$\$\$	21	30.4

CP = Community and Personal Services workers, M = Managers, P = Professionals, TT = Technical and Trades workers

# Essential skills and knowledge

The health sector has many challenges and opportunities for new entrants. There are over 20 different health professions defined within allied health and there is significant variation across and within these professions.

The VCE VET Health program is a combination of three qualifications in Health Training Packages, which reflects the diversity of skills required for this industry. Students could work in many different health services.

Successful training aims to provide broad competency domains that are transferable and relevant for work in hospitals, clinics, aged care and community care settings. Such skills need to apply to clients with diverse needs and characteristics. There is an expectation that health workers are able to maintain the currency of their knowledge and skills through 'lifelong learning'. As approaches to healthcare change and advance, so too must the health workforce. There is an increasing emphasis on demonstrating competence in the workplace, with training being the start of the learning journey, rather than the end point.

VCE VET Health introduces students to essential skills that can be arranged in five key areas. Skills from these domains overlap in every client interaction.

## Communication

Workplace communication is a common theme in many of the program units of competency (UOCs) and applies to all interactions in healthcare. Students are required to understand and communicate with their clients and the healthcare team. They need to select and apply the best communication strategy, recognise potential barriers to clear communication and establish effective, professional client relationships. As care is delivered by a multidisciplinary team, it is essential that students understand the role of, and are equipped to communicate with, each team member. They need to write client notes effectively and to comprehend information in everyday health documentation and understand the terminology used by health professionals. Conflict management also forms part of the communication skills they will need to form. The sector uses specific language and protocols to ensure that care meets legislative requirements in a demanding and busy environment.

## Patient-centred care

Healthcare is driven by the aim to provide patient-centred care. This approach requires the skills to work in a collaborative way that matches the care to the client's goals. Entrants to the sector need to see the client holistically and focus on both physical and emotional wellbeing. Values such as being non-judgmental, and recognising and respecting cultural differences, are part of this model. Clients are in control of their care and staff need the skills to inform, advise and support their decisions. This involves awareness of a person's healthcare rights and the skills of listening, knowing when to access other health professionals and being responsive to feedback.

## Working safely

Whether making a bed, assisting a client to walk, or using a computer, the ability to work safely in many different situations and health contexts is essential. Staff practices need to ensure the safety of their own health, their clients and co-workers. Entrants to the sector will work under supervision, but they still have a responsibility to recognise and report potential hazards, and to conduct duties within the scope of their role and what they have been trained to do. They do not need to be able to recite legislation but do need to know how to interpret legislation and work within organisation policies and procedures. In addition to formal training programs, workers need to receive role-specific training at the worksite to be competent and confident in particular work tasks.

## Problem-solving

A busy health environment can be complex and selecting the best course of action can be difficult. While staff do work under supervision, they still need to be able to show initiative to report concerns or call for assistance. They need to be able to apply skills in various contexts to many different clients and take a flexible approach to their work. Many decisions are made by a healthcare team, so having the skills and confidence to contribute to this process is important. Engaging in further studies or reflecting on your own performance to improve client outcomes also requires problem-solving skills.

## Technical or clinical skills

The entry level clinical skills that may apply to VCE VET Health include:

- assisting clients with movement procedures
- applying infection control measures, such as wearing personal protective equipment (PPE) and performing hand hygiene correctly and at the right time
- applying a first aid response
- taking clinical measurements under supervision
- undertaking administrative duties such as making client appointments or billing clients
- using assistive devices and clinical equipment
- using digital technology or ICT skills when working in e-health or telehealth.

Along with these necessary clinical skills is the capacity to be able to expand on these skills or adapt to new applications. The health industry is increasingly investing in technology to enhance and refine clinical care. Clients have complex needs and employers in the industry are looking for innovative employees who can recognise the need for evidence-based service delivery and flexibility.

New staff face many challenges when they enter healthcare. These skills are required to be able to work in a busy health environment:

- Being able to effectively communicate with other healthcare professionals and patients is essential, including actively and fully listening to your patients.
- You must be able to multitask and prioritise your work.
- You think on your feet every day and have to problem-solve calmly and rationally.

Finally, patients deserve your empathy and compassion.

*P Semple, Registered Nurse,  
St Vincent's Hospital, Melbourne*

# Roles of the allied health assistant and patient services assistant

The following information refers to the practice boundaries for the allied health assistant (AHA) and patient services assistant (PSA). It details the functions and responsibilities of these two roles and their importance to the healthcare team.

## Allied health assistants

AHAs work under the supervision of allied health professionals. They are trained to perform tasks delegated by these professionals, who are then able to perform more complex duties. Delegation can be defined as the process by which an allied health professional allocates work to an AHA who is deemed competent to undertake that task.

AHAs are required to receive information about their clients from their supervisor and are then delegated specific elements of the treatment or care plan. They need to understand what is expected of them and be able to seek clarification about their responsibilities, as required. They do not interpret diagnostic test results or plan treatment. They are actively involved in team meetings and progress reports, and would be expected to engage in appropriate professional development activities.

AHAs commonly work with dietitians, physiotherapists, podiatrists, occupational therapists and speech pathologists. They can be known as rehabilitation assistants, therapy assistants, therapy aides, technicians and support workers. The work role is varied, depending on the healthcare setting and the discipline that they support. The degree of supervision they receive is determined by their level of training and experience specified in their position description.

Examples of direct work	Examples of indirect work
Implementing therapy programs designed by professionals	Ordering stock
Supporting and supervising patients with Activities of Daily Living (ADLs)	Administration support such as client appointments
Assisting with patient transfers and movement	Equipment maintenance
Supervising and conducting exercise programs	Cleaning

Further information can be found in *Supervision and delegation framework for allied health assistants* (Victorian Department of Health, 2012).

When delegating tasks to an AHA, it is recommended that the workplace keeps records of the staff member's qualifications and experience and professional development activities. Allied health consists of many disciplines and it is possible that the person has not been exposed to the expected task. The supervisor must then provide detailed instructions and supervision or recommend a learning activity to enable the AHA to acquire the necessary skills or knowledge.

## Patient services assistants

PSAs work primarily in hospitals under the direction of nurses and patient support services managers. They are part of a team that provides ancillary support to nursing, medical and allied health staff to ensure that a patient's needs are met. Their duties are varied and support clinical care. The role might include:

- delivering meals to patients
- transporting patients in beds and trolleys to appointments and procedures
- making beds
- restocking supplies
- delivering messages and courier services
- cleaning and maintaining clinical equipment
- undertaking basic personal care
- assisting in emergency situations.

With PSAs undertaking these roles, it means that client care is more efficient and health professionals can focus on more complex cases. They work directly and indirectly with clients and the range of duties is extensive.

Examples of direct work	Examples of indirect work
Assisting patients with basic personal care	Restocking intravenous trolleys and medical consumables
Accompanying patients to appointments	Collecting and delivering items, such as X-rays and specimens
Assisting with patient transfers and repositioning	Removing rubbish and linen, and cleaning ward areas and patient equipment

In addition, PSA staff are expected to be able to participate in ward and team meetings and liaise with unit managers and other managers in the hospital. Position descriptions include the requirement to participate in professional development activities to maintain the necessary level of competence for the role.

Underpinning both roles is the requirement to apply principles such as upholding client privacy and confidentiality and maintaining a duty of care.

AHAs are being readily utilised within the NDIS to support allied health professionals such as occupational therapists, speech therapists and physiotherapists with patient care programming, treatment plans and therapeutic support. For AHAs to be able to work effectively and efficiently within the NDIS, they need to have sound knowledge and understanding of medical terminology and disability types. It is necessary for the assistant to understand the impact of the disability on the person. This role involves the assistant working within a multidisciplinary team and with participants and their families.

*Donna Wagon, Social Worker,  
Moe Life Skills Community Centre*

# Changes in the health industry

Australians are living longer, which is placing growing demand on our health system and creating new approaches to healthcare. A healthier aging population requires health services that are flexible, person-centred and able to manage issues, such as the increasing rates of chronic disease. Advances in medical research and technology will continue to change healthcare. Diseases can be diagnosed earlier through genomic testing and there are better treatment and prevention options for people.

Employers are seeking a health workforce that is well trained and able to work in a team environment.

## Health promotion and education

To address health system challenges, health programs must focus more on illness prevention and client education. Health workers at all levels are expected to be able to provide evidence-based advice as they work with clients; it is no longer the sole responsibility of the general practitioner or nurse educator. Training must focus on following workplace protocols, in addition to how and where to locate further information. This approach inherently leads to reflective self-assessment practices and the need for workers to drive their own professional development.

## New technology

Technology is changing the way clients access health services and interact with health workers. People are accessing advice via their mobile phones and computers, and appointments are conducted via applications such as Skype. Clients can be screened, monitored and treated without visiting the clinic. Wearable technology can provide information, such as vital sign readings, to the health professional without interrupting the client's day. Video calling technology means that specialists can link together in teams to manage a client without leaving their workplace.

New technology changes the skills and knowledge required to deliver training and education programs. The HLT Health Training Package needs to be continually reviewed to keep up with these new approaches. Classrooms will need to embrace different learning activities that simulate the expected healthcare environment. For example, instead of observing whether a student can use a fax machine, they will be observed interacting with a patient by Skype or other videoconferencing technologies.

## Coordinated care

To address issues such as chronic disease management, there has been an increased emphasis on team-based care. Collaborative centres for healthcare are emerging with the general practitioner's clinic being able to offer access to many different health disciplines. This creates the need for a flexible, adaptive support worker who is able to effectively work across disciplines.

Training will need to be extensive enough to expose the student to this environment and provide multidisciplinary knowledge and opportunities for teamwork.

## Client-centred care

While community care organisations have been implementing goal-directed care planning for some time, the introduction of the consumer-directed NDIS system places a different emphasis on this care model. Clients expect to be able to choose their health service, negotiate a cost and establish their health goals according to their preferred lifestyle. This approach highlights the needs for training that addresses legal and ethical issues, client service standards and complex communication skills.

There is also an expectation that all Australians will have full access to the care they require when they need it. Fully using and expanding roles, such as the AHA and PSA, is pivotal to seamless service delivery to clients.

# Pathways from a VCE VET Health program

The VCE VET Health program has been designed to introduce students to the health workforce at entry level and explore the sector's diversity.

Following the completion of the program, there are many potential future study options in both the VET and university sectors.

## VET Health and Community Services Certificates II–IV:

- Provide introductory skills and training
- Students learn industry-specific knowledge and skills in communication, numeracy, literacy and teamwork

## VET Health and Community Services Diplomas:

- Prepare students for industry, enterprise and paraprofessional careers

VET courses at the certificate IV, diploma and advanced diploma level can provide students with a pathway into the higher education sector. In addition to helping students meet entry requirements, VET diploma courses can also provide credit towards some higher education courses. For example, students who graduate with a diploma may receive up to two or three semesters of credit towards a related bachelor degree. The exact amount of credit granted depends on the institution, the degree and the VET qualification completed.

Course details and pathways are further explained on the My Skills website. The qualifications and units in the VCE VET Health program are recognised throughout Australia. Students can explore other specific health areas such as aged care, community services and nursing. On completion of the program, students will have acquired vital skills and knowledge across different health sectors. Students can undertake additional units to those already completed or complete a placement requirement.

In general, the core UOCs can be transferred to many other community services and health qualifications at the same education level or higher. The electives have been chosen to stimulate interest and specialised skills for a specific workplace and situation.

Students undertaking **HLT23215 Certificate II in Health Support Services** can select a specific elective and specialise in a particular work area, such as food services, laundry or grounds maintenance.

Figure 1 highlights some of the related qualifications that students can pursue following the completion of a VCE VET Health program. This is not a definitive list but rather demonstrates some of the potential pathways.

Figure 2 shows four examples of learning journeys.

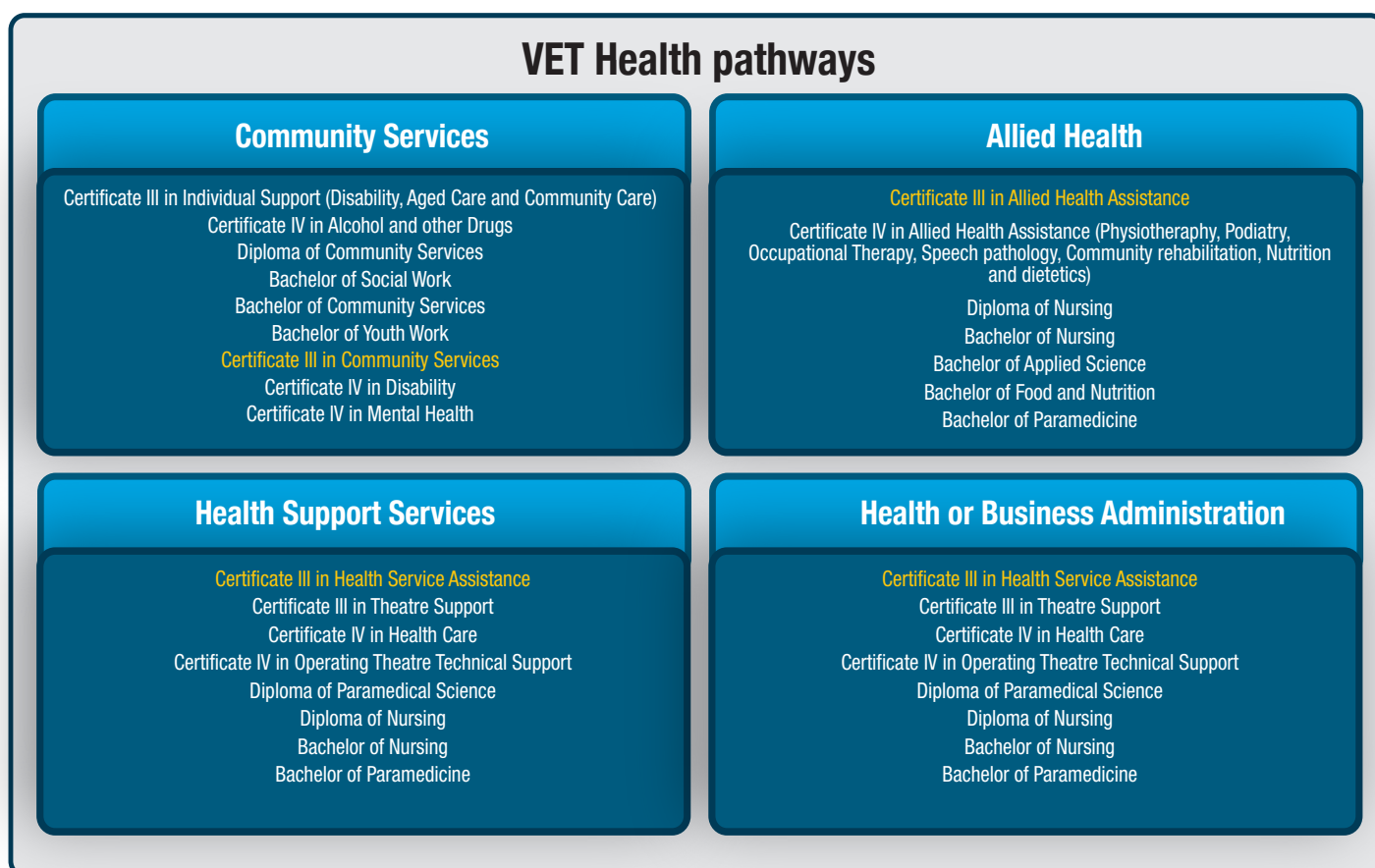
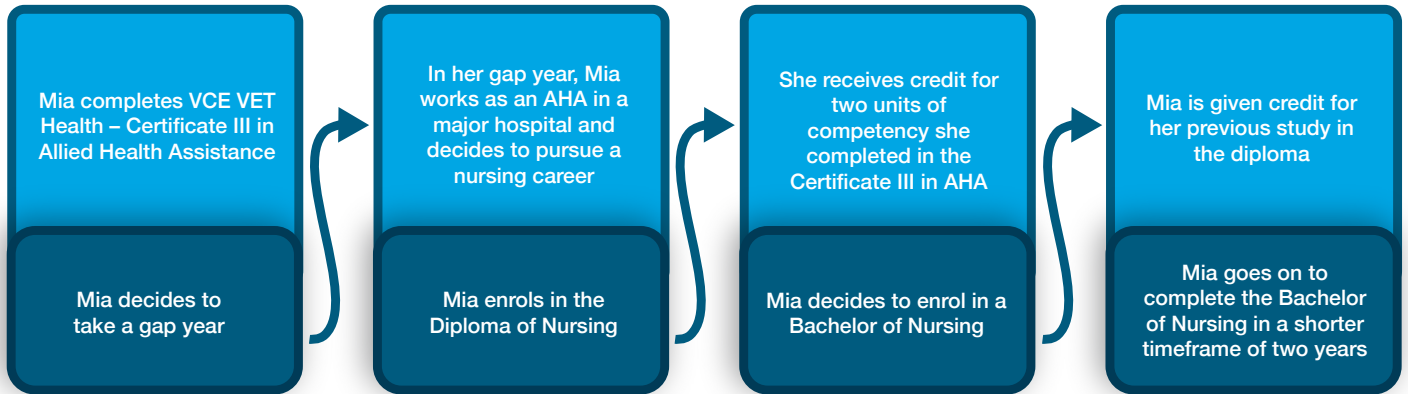


Figure 1: Some of the related qualifications students can pursue after completing the VCE VET Health program

## Examples of learning journeys

### Mia's learning journey



### Sunita's learning journey

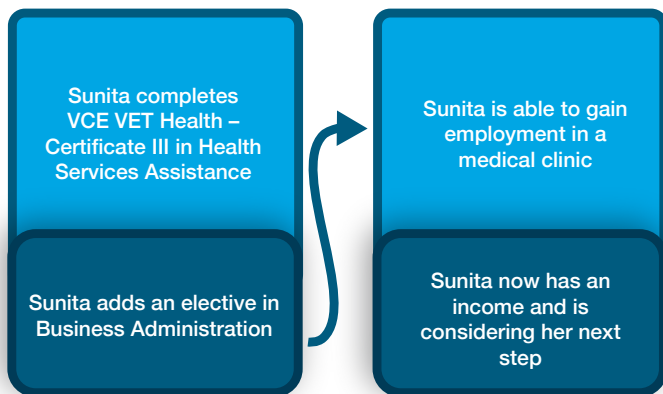
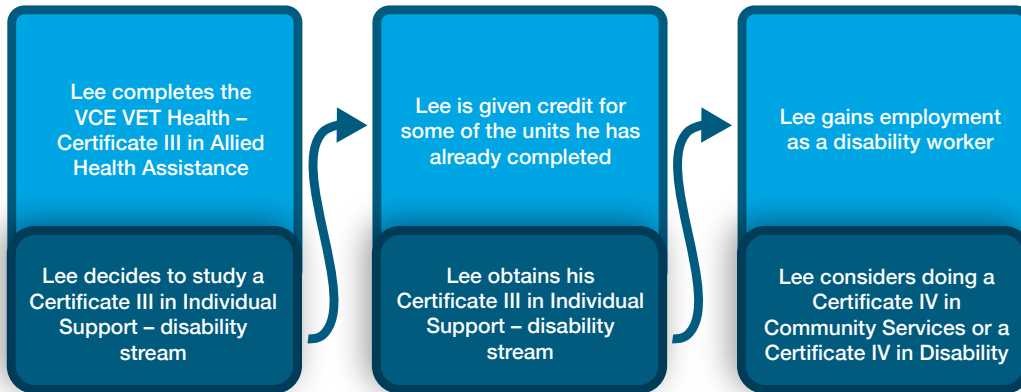
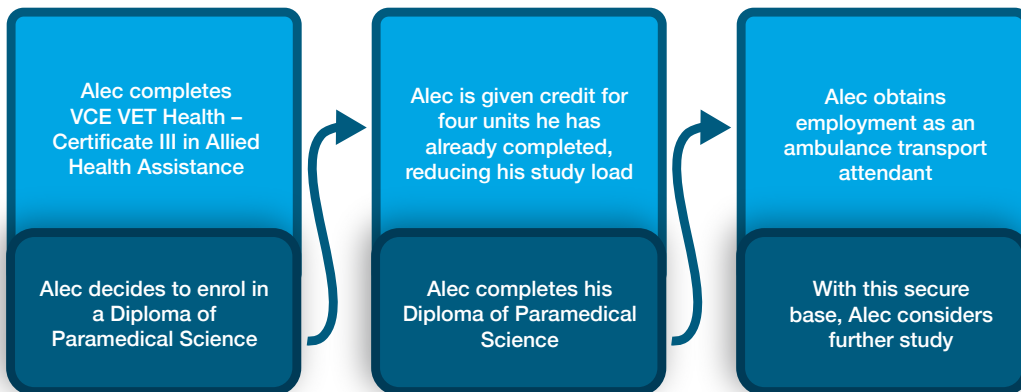


Figure 2: Examples of students' learning journeys

### Lee's learning journey



### Alec's learning journey



# Section 2: Learning activities

This section provides suggestions on learning activities and approaches for the compulsory units in Year 1 and Year 2 of the VCE VET Health program.

The introduction of creative, fun and interactive activities in class encourages students to think 'outside the box' and problem-solve. Simulation and role-play can draw together many skills, allowing the teacher to provide immediate positive feedback.

Case study analysis is often used in health education as it reflects a holistic approach to care and the need to consider many factors when interacting with clients.

Students often enjoy social learning environments where discussion and group work is encouraged. Every class is different, but the overall approach to delivery is to provide experiential, practical training that is linked closely to real health situations and takes the student beyond school.

## Year 1: Units 1 and 3

### HLTWHS001 Participate in workplace health and safety

This unit must be completed before the student undertakes structured workplace learning (SWL). It might be the first time a student receives training in workplace safety or is introduced to policies and procedures, and concepts such as hazard identification. Here are some ideas for classroom activities. The WorkSafe Victoria website is also a useful source of information about safety issues specific to the health sector.

#### Examples of learning activities

- Hide hazards in the classroom and ask students to hunt for them. Hazards can be items stained with red food dye to simulate blood, fake vomit, an overfilled linen skip, a bedpan containing fake excrement, an overfilled sharps bin, a frayed electrical cord, furniture clutter, water on the floor and broken equipment.
- Purchase small extinguishers. Wearing safety glasses, go outside and allow students to use the extinguisher. Foam can be collected in a bucket.
- Brainstorm ideas about the potential hazards associated with a home visit. Ask groups to list as many hazards as possible and provide a prize for the winning group.
- If you have access to mobility aids, such as a lifting hoist, demonstrate their use in class and ask students to list the risks associated with using this equipment.
- Ask students to wear glasses smeared with petroleum jelly when walking through a cluttered room to demonstrate environmental hazards and simulate vision loss.

### Detailed example: Emergency evacuation role-play

Conduct a mock emergency evacuation with students undertaking particular roles and responsibilities. For a fire evacuation, you will need to appoint a fire warden and student observers. The observers report on the evacuation process and facilitate the debriefing process. Use the hospital emergency codes and sample policies and procedures that are used in a hospital.



#### Materials

The hospital emergency codes, based upon Australian Standard (AS) 4083–2010 *Planning for emergencies: Healthcare facilities*, include:

- fire/smoke (response colour code 'red')
- medical emergency (response colour code 'blue')
- bomb threat (response colour code 'purple')
- infrastructure and other internal emergencies (response colour code 'yellow').

Before the evacuation, consider purchasing equipment, such as a hard hat, handheld speaker and high-visibility safety vest, and ask students to develop an emergency management plan in groups. Involve the health and safety representative from the school as a guest speaker.

## CHCCOM005 Communicate and work in health or community services

This unit has an extensive list of performance criteria and knowledge evidence. There are many different activities that can be done in class that demonstrate skills required to be able to effectively communicate in a health environment. Learning activities should be contextualised to reflect this sector with the use of appropriate workplace documents and language. A well-constructed role-play can lead to discussions about types of communication, barriers, body language and how to present information. Consider using blindfolds or earbuds to simulate vision and hearing impairments. Darken the classroom or introduce a lot of noise to simulate the environmental impact on communication. Simple games, such as Chinese whispers using medical terminology, can also be effective. Include technology skills, such as being able to email and text effectively or apply telehealth.

The Victorian Department of Health and Human Services provides checklists and strategies for communicating with clients in hospitals and aged care.

### Examples of learning activities

- Present a series of words and phrases, such as 'This material is outdated' and 'I'll get back to you in a bit'. Ask the group to write down what the words and phrases mean to them. The words and phrases mean different things to different people and that's why communication must be specific.
- Give each student a sheet of paper and ask them to close their eyes and follow your instructions. Start giving instructions about what to do with the piece of paper. Once you have given a number of instructions (at least 10) tell students to open their eyes and unfold their piece of paper. Although they have received the same instructions and had the same starting material, each student will have a different result.
- Ask students to pass a ball back and forth to one another. Firstly, ask students to put on a blindfold and indicate that they are not allowed to speak. Next, ask them to remain blindfolded but indicate that they are allowed to speak to one another. Lastly, remove all communication obstacles.

Detailed example: Communication barrier game



### Materials

Cardboard tubes from cling wrap containers cut in half (about 10 cm).

Divide the class into groups of three. One person is the client, and one person holds the tube and sits directly opposite the client's ear. The other person sits directly in front of the client. The student with the tube places the tube close to the client's ear and repeatedly states strange statements to the client, such as 'You can fly', 'The earth will end' and 'He is after you'. The student facing the client conducts a five-minute intense conversation with the client about any topic. Ensure that the client's concentration is maintained and ask questions that require a response. Swap roles so that everyone has a chance to be the client.

Ask the students to describe how they felt when role-playing as the client. Discuss the exercise as an example of the constraints to effective communication. Ask the students to describe the client's body language and non-verbal cues during the conversations.

## BSBWOR301 Organise personal work priorities and development

The focus of this unit is on employability skills, such as organising work schedules, obtaining feedback on your work performance and maintaining the required levels of competence. Relate classes to real-life situations and scenarios that happen in the workplace. Provide students with workplace documents, such as policies or procedures or sample position descriptions. Invite speakers, such as a human resources manager or AHA from a busy clinic, to class to further explain the health environment and how best to manage time.

### Examples of learning activities

- Using a position description for an AHA or PSA, ask the student to develop a work plan.
- Ask students to develop a survey tool that measures hospital patient satisfaction levels.
- Ask students to research the latest technological devices in healthcare and prepare a short presentation.
- Role-play a performance appraisal scenario or a scenario where a patient complains about a health service.
- Link the unit to work placement. For example, ask students to develop goals from their placement and then evaluate their performance.
- Ask students to complete their own learning plans.

### Detailed example: Priority line up

Create A4 laminated cards that state a series of workplace tasks that an AHA might have to complete in a healthcare setting, such as:



- check in clients and file their histories
- take a break at 11.15am
- collect and test urine samples
- restock and clean the examination rooms
- receive pathology results and file in patient histories
- check Medicare details and rebook clients
- print out order of appointments for the doctors
- answer the telephone
- prepare invoices
- tidy the waiting room
- disinfect the examination tables between clients.

Ask the students to line up the cards in the order they should be performed.

The rest of the group can analyse decisions and provide feedback. This exercise could lead into discussions about the health workplace. The teacher can facilitate discussions through asking questions, such as:

- What would you do if you were struggling to complete all tasks?
- What would you do if you felt you were being asked to do something outside your position description or that you had never done before?
- What technology might help you complete this work?

## CHCCCS020 Respond effectively to behaviours of concern

This unit explores how best to work with clients who exhibit challenging behaviours. Role-plays and case studies work well and allow students to brainstorm ideas. Video clips can also demonstrate some of the behaviours that students may observe on placement. Personal safety forms part of training. Managing aggression is detailed on the WorkSafe Victoria website via resources such as the 'Occupational violence and aggression against healthcare workers' brochure and occupational violence and aggression case studies.

### Examples of learning activities

Ask students to work through case studies in groups and complete a behaviour management flow chart for their clients.

- Act as a client who has dementia and demonstrate behaviours such as stealing a student's pencil case. Ask students to practise their skills in responding to your behaviour.
- Invite a speaker, such as a nurse who works in dementia care, a teacher from a specialist school where clients have developmental issues or a security officer who works in the emergency department of a hospital.
- Students develop a poster on three behaviours of concern, outlining potential triggers, management strategies and safety strategies for the client and health worker. This could be completed in groups and presented to the rest of the class.

### Detailed example: Role-play

Students work in groups of three playing the worker, client and observer and rotate through each role. Prepare a script and instructions for a scenario, such as an angry client who has been waiting a long time to see the doctor, or a client in a waiting room who is very noisy or displays inappropriate behaviour towards other clients.



The teacher would facilitate student reflection on the role-play with questions such as:

- What did the healthcare worker do well?
- What could have been done differently?
- What other strategy could have been used in this situation?

Ask the student playing the client for feedback concerning the health worker's response; for example, was the feedback clear, reassuring and effective?

This example allows for the demonstration of communication skills inherent to the role of healthcare worker.

## CHCCCS002 Assist with movement

This unit can be highly interactive, with students demonstrating specific movement procedures and learning new skills. Access to a simulation lab or range of mobility aids is required. Role-play and simulations using mannequins are recommended for the acquisition of skills. Sessions that include a physiotherapist or exercise physiologist will complement the delivery of this unit. There are many different learning activities that could be demonstrated by students.

### Examples of learning activities

- Ask students to assist a client in a wheelchair. Ask the student to wear a blindfold so that specific student communication strategies are required.
- Ask students to research and compare mobility equipment from supplier websites.
- Arrange an excursion to a mobility aid supplier showroom. Representatives might also visit schools and demonstrate a range of aids.
- Ask students to examine operational instructions or brochures about a piece of equipment.
- Plant a mobility aid that is broken or in need of maintenance and ask students to take action.
- Ask students to devise protocols for the safe use of a piece of equipment and cleaning instructions.
- Visit a simulation lab and ask students to perform a range of procedures, such as repositioning a client in bed, using a hoist, assisting a client with crutches or using a patient turning/transfer aid to transfer a client into a chair.
- Role-play the use of a walking frame or different types of crutches, with students taking turns at being the client.
- Use a first-aid mannequin and slide sheets on desks to simulate how they can be applied.
- Role-play getting in and out of a car using a grab handle and swivel seat.

### Detailed example: In-home assessment

Ask students to develop a checklist for completing an in-home assessment and apply the checklist to a student's own home or the school. Construct a case study to link to this assessment where client capacity is described. Consider client range of movement, sitting and standing tolerance, walking tolerance, lifting capacity, endurance and the ability to perform activities of daily living.



The key headings on the checklist could be:

- type of home
- type of flooring
- general presentation of the home
- outdoor areas
- assistive equipment in use
- bedroom and bathroom layout and access
- potential hazards
- lighting
- ventilation.

This activity could lead to further exploration of aids and appliances available to assist clients maintain independence and the role of an occupational therapist.

## CHCCCS010 Maintain a high standard of service

This unit reiterates the communication skills required for the establishment of a respectful relationship with a client and also introduces students to the concept of evaluating their work and health service standards.

### Examples of learning activities

- Role-play interviewing staff from a clinic or hospital, asking questions about the service standards and the client rights. This could be an incursion or excursion.
- Brainstorm ideas about healthcare standards. Ask each student to write on a 'sticky' note an expected standard of treatment in a health facility. Place the notes on a wall to create a wall of standards.
- Debates around client rights versus worker rights can be engaging.

### Detailed example: Four corners

Display a question or statement about a topic around the four corners of the classroom, such as:

- People with disability have the right to make decisions about their lives.
- Knowing our rights reduces the risk of others restricting or abusing them.



Label each question or statement with 'Agree', 'Strongly agree', 'Disagree' or 'Strongly disagree'.

Ask students to go to the corner of the classroom that has the question or statement they most agree with. If students agree with more than one question or statement, ask them to pick one corner. If they don't agree with any of the questions or statements, they should go to the middle of the room. Once in position, students should discuss with others why they chose their response, to help clarify their thinking. Ask the students to share and record evidence that supports the claim and why they don't support the other claims.

## CHCDIV001 Work with diverse people

This unit has an extensive list of performance criteria and knowledge evidence and is a core unit from many community services qualifications. There are many online resources to assist students and teachers to embrace multiculturalism and tolerance, such as the website Making multicultural Australia for the 21st century.

The National Indigenous Australians Agency also provides information about Australia's health programs and plans for Indigenous Australians.

### Examples of learning activities

- Arrange a Harmony Day or multicultural feast.
- Invite an Auslan speaker to class to speak about 'deaf culture'.
- Ask student groups to deliver presentations on different cultures.
- Arrange an excursion to a culturally specific location, such as a synagogue or mosque.
- Visit a cultural museum, such as the Islamic Museum of Australia, the Chinese Museum or the Immigration Museum, or access outreach programs.
- Invite speakers, such as interpreters or cultural representatives.
- Review the Universal Declaration of Human Rights and discuss or debate Australia's immigration policies.

### Detailed example: Giving instructions

Give students written instructions in a foreign language and ask them to follow the instructions. Students experience what it must be like for a person from a non-English speaking background to enter a clinic and sign a document.



Ask students to develop four simple actions that will ensure that clients understand instructions. The activity could be extended to include discussion about interpreter services.

## HLTINF001 Comply with infection prevention and control policies and procedures

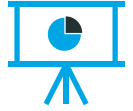
This is a core unit from the Health Training Package that is required for many qualifications. Students are required to understand basic microbiology and how infections are spread. They learn how to apply practices that minimise the risk of infection, and skills that are transferable in any healthcare setting.

Prepare an infection control set for use in class. It should contain items such as a range of PPE, glow-in-the-dark hand hygiene training product, sterile dressing packs, examples of packed sterile equipment, hand sanitiser, cleaning equipment, sample policies and procedures, and a blood spill kit. Encourage students to complete an online hand hygiene module from Hand Hygiene Australia.

### Examples of learning activities

- Ask students to correctly apply sterile gloves and gowns.
- Ask students to correctly remove and dispose of gloves that are stained with blood (red ink or tomato sauce).
- Ask students to clean equipment according to a sample policy.
- Simulate a body fluid spill and ask students to clean up the spill using a spill kit.
- Design health facility posters or brochures that promote correct hand hygiene or cough etiquette.
- Perform hand hygiene with sink and water, and hand sanitiser. Use glow-in-the-dark hand hygiene training product to highlight areas on the hands that were omitted.
- Ask students to correctly open a sterile packet or dressing pack.

### Detailed example: What disease is that?



Students prepare a short presentation on a disease reported in the news, explaining how the infection was transmitted. Ask the student to relate it to the chain of infection model.

Ask students to select from a list of topics or news headlines. Headlines concerning health risks and outbreaks can be accessed online and appear daily.

Students research facts about the disease, such as what it is, what the symptoms are, how it is spread, who is at risk, and how it is prevented, diagnosed and treated.

This example could also be performed as group work or a classroom poster.

## Year 2: Units 3 and 4

### **BSBMED301 Interpret and apply medical terminology appropriately**

Effective use of medical terminology is essential in healthcare, as it is used every day in health records, documentation and professional conversations. Provide students with a range of workplace documents, such as vital signs charts and medication charts, to expose them to the terms used in healthcare. Terms can be as simple as understanding the 24-hour clock or metric measurements. Adopt a write, review, repeat methodology to new terms in class and ask the students to pronounce the words.

This unit complements *HLTAAP001* Recognise healthy body systems. The two units can be delivered together. For example, when delivering content for a particular body system, provide students with a list of abbreviations and terms pertaining to that system.

There are many online resources and textbooks to assist learning. Some texts are self-directed and others include resources, such as mobile quizzes, flash cards, interactive games, exercises, animations and audio programs.

#### **Examples of learning activities**

- Construct a word wall for students and add to it as students study a body system.
- Make crossword puzzles and word clouds with students.
- Conduct polling quizzes from Kahoot! or other game-based learning platform.
- Students create case studies or handover sheets for each other.
- Play medical terminology bingo. Students might create their own cards.
- Sequence a medical terminology quiz after each body system.
- Use student-generated test questions.
- Assist students to form online or face-to-face study groups that test each other on the abbreviations and terms. Structure this around the delivery of each body system.
- Create short case studies, handover scenarios and examples of client notes to examine and decode in class.
- Print out a large list of prefixes, root words, suffixes, acronyms, abbreviations and all their meanings, cut them out individually, then scatter them over the floor and ask students to pair the matching ones. This can also become a race between individuals or teams.

To teach medical terminology, we labelled anatomical structures then added medical terms to the labelled structures as a way of building on prior knowledge. This serves also as good revision. Students were provided with a 'cheat sheet' of the most common terms, abbreviations, diseases and associated words for each system. Students were able to fill in a table of 20+ words per system and break words into root, prefix and suffix to obtain the word meaning. Giving them the 'most common' words allows them a point of focus in an otherwise endless list of words. It is really important to make the focus words explicit – itis, logy, ectomy, a, an, scope, scopy, etc.

Try an old-fashioned quiz in which students download a buzzer on their phones, get into groups and answer questions. To make it interesting throw in additional rules like the team to get the next question can stop a team from playing the next question, can take half of another team's point or earns double points.

If you have a prize (chocolate or a canteen voucher) this is a great release, fun and great revision.

— Kelly Fenton, St Joseph's College, Echuca

## HLTAAP001 Recognise healthy body systems

This unit can be delivered with the medical terminology unit. Concepts from both units can be introduced in Year 1 of the program. It provides students with basic knowledge of the normal structure, function and location of the major body systems and use of correct medical terminology. Students can gain an awareness of the relationships between the major organs of each body system and what is required to support healthy functioning. As a result, this knowledge is applied in a health environment and enables the AHA or PSA to work effectively in a multidisciplinary team.

There are many anatomy and physiology texts and online resources available to assist teachers, but few are aimed at the right level for this unit and focus on healthy functioning. The maintenance of a healthy body and the homeostatic process also form part of the required knowledge. Texts can tend to concentrate on content, whereas learning that is problem-solving and relevant to the health environment is more likely to produce better results.

### Examples of learning activities

- Provide one or two images of a body system and ask students to create 'cheat sheets' for each system as they label the images.
- Create flashcards for each system. There are many free websites that provide flashcards.
- Determine prior knowledge at the start of each body system with a short quiz.
- Orientate students to each system by using common terms and analogies to describe information. For example, 'the lymphatic system is like a garbage collector' or 'the eye works like a camera'.
- Write chain notes at the end of the class and ask students to note one thing that they have learnt in an envelope. Gather notes and use for revision or topic summaries.
- Revise each topic at the start of each class by asking students a list of questions. This encourages self-correction and identifies areas in need of further study.
- Provide worksheets for each body system periodically. This helps with revision of a topic that was taught some months earlier.
- Represent physiology and body processes schematically and with images. Ask students to create their own flowcharts for use in revision or to share with the rest of the class.
- Assist students to create a glossary for each body system. Turn the glossary into a matching game.
- Summarise large amounts of content with a flowchart at the end of the lesson.
- Use anatomical models for labelling.
- Access YouTube videos from Visible Body to demonstrate processes, such as digestion and swallowing.
- Memory tools can be useful. For example, 'MIS' for the order of 'malleus, incus, stapes'.
- Using modelling clay or other craft material to construct a three-dimensional model of a body system or organ.
- Ask students to draw ideas and processes.

# Sample delivery sequence

When considering the delivery sequence of VCE VET Health there are many factors to consider. Students develop skills over a two-year program. Delivery can balance student workload each year by linking units together and avoiding duplication. Rather than clustering units, you can commence units at the same time. This approach helps to reduce repetition and to identify core skills and knowledge required before students attend SWL. Always allow time in the delivery timetable for revision and briefings about SWL.

The nature of the units should be incorporated in the delivery sequence. Some units have scored assessment, others do not. Some units have comprehensive knowledge evidence, whereas others are more skill-based. Examine the nominal hours allocated to the units as a guide to the anticipated workload and number of sessions required for the unit.

*HLTWHS001* Participate in workplace health and safety is normally the first unit of the program, as it introduces students to the health environment and prepares them for SWL. It should be followed by *HLTINF001* Comply with infection prevention and control policies and procedures and *CHCCOM005* Communicate and work in health or community services. These three units form strong foundation skills that prepare students for the workplace and help them begin to understand client needs and how to communicate with health professionals.

The scored units are delivered in the second year of the program but some information can be included in the Year 1 units. For example, when delivering *CHCCCS002* Assist with movement, the musculoskeletal system can be introduced, and when delivering *HLTINF001* Comply with infection prevention and control policies and procedures, the immune system can be presented. Scored units are more complex and have more content than the units in Year 1.

Term 4 can be shortened, so plan for fewer units or less complex units at this time. At the end of Year 1, conduct an exam modelled on the Year 2 exam. This will provide invaluable course feedback and helps prepare students for Year 2. Set aside some time for the inclusion of Year 2 work and set some self-directed learning activities in the break.

The following tables suggest a delivery sequence and training strategies that arrange information in an order that acknowledges common themes and builds competence for a two-year program. Further information can be found in the *VCE VET Health Program Booklet*.

## Certificate III in Allied Health Assistance – partial completion

### Year 1: Term 1 delivery sequence

Topic	Delivery mode	Learning resource	Other advice
<b>HLTWHS001 Participate in workplace health and safety (Core)</b>			
<ul style="list-style-type: none"> <li>• Safe work practices</li> <li>• Legislation</li> <li>• Identify and report incidents</li> <li>• Safety signs</li> <li>• Workplace health and safety (WHS) meetings</li> <li>• Emergency procedures</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face or online</li> </ul>	<ul style="list-style-type: none"> <li>• Learner guide</li> <li>• PowerPoint</li> <li>• Hazard and incident forms</li> <li>• Workplace policies</li> <li>• Internet</li> <li>• Audit checklist</li> <li>• Textbook</li> <li>• Sample signs</li> </ul>	<ul style="list-style-type: none"> <li>• Provide opportunities for practical activities</li> <li>• Introduce hand hygiene and the use of PPE, especially if students are going on placement early</li> </ul>
<b>HLTINF001 Comply with infection prevention and control policies and procedures (Core)</b>			
<ul style="list-style-type: none"> <li>• Hand hygiene</li> <li>• Using PPE</li> <li>• Cleaning spills</li> <li>• Standard precautions</li> <li>• Additional precautions</li> <li>• Chain of infection</li> <li>• Causes of infection</li> <li>• Microbes</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face</li> </ul>	<ul style="list-style-type: none"> <li>• Learner guide</li> <li>• PowerPoint</li> <li>• Hazard and incident forms</li> <li>• Workplace policies</li> <li>• Internet – online hand hygiene module</li> <li>• Competency checklists</li> <li>• Textbook</li> <li>• PPE, cleaning items</li> <li>• Body fluid spill kit</li> <li>• Glow-in-the-dark hand hygiene training product, sterile equipment samples, dressing packs</li> <li>• Student logbook</li> </ul>	<ul style="list-style-type: none"> <li>• Must be assessed in a health workplace</li> <li>• Provide opportunities for practical activities</li> </ul>
<b>CHCCOM005 Communicate and work in health or community services (Core)</b>			
<ul style="list-style-type: none"> <li>• Verbal and non-verbal communication and communication techniques</li> <li>• Legal and ethical considerations</li> <li>• Influences on communication</li> <li>• Constraints to communication</li> <li>• Industry terminology</li> <li>• Person-centred service delivery</li> <li>• Use of digital media</li> <li>• Overview of the community services industry and multidisciplinary team</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face</li> </ul>	<ul style="list-style-type: none"> <li>• Learner guide</li> <li>• PowerPoint</li> <li>• Workplace policies</li> <li>• Internet</li> <li>• Competency checklists</li> <li>• Textbook</li> <li>• Sample policies and procedures</li> <li>• Equipment for simulations</li> <li>• Video clips demonstrating poor communication</li> <li>• Samples of progress notes, client histories, hospital forms, email communication</li> </ul>	<ul style="list-style-type: none"> <li>• Role-plays where students demonstrate skills</li> </ul>

Consider adding the elective *HLTAID003* Provide first aid to the sequence before students go on SWL. This will affect the delivery sequence. The communication unit may need delivery across two terms.

## Year 1: Term 2 delivery sequence

Start to introduce some electives. Where students have completed or are doing SWL, link learning to their experiences in the workplace.

Topic	Delivery mode	Learning resource	Other advice
<b>BSBWOR301 Organise personal work priorities and development (Elective)</b>			
<ul style="list-style-type: none"> <li>• Prioritising tasks at work</li> <li>• Using business technology</li> <li>• Managing and recognising stress at work</li> <li>• Technical and interpersonal skills – reflecting and improving</li> <li>• Receiving and giving feedback</li> <li>• Professional development of skills</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face</li> </ul>	<ul style="list-style-type: none"> <li>• Learner guide</li> <li>• PowerPoint</li> <li>• Workplace policies and forms, such as a performance appraisal, work plan or professional development</li> <li>• Internet access for research of health technology</li> <li>• Applications, such as Skype</li> </ul>	<ul style="list-style-type: none"> <li>• Content lends to role-plays, class discussions and presentations. Consider a speaker from human resources or a professional health organisation to explain professional development</li> </ul>
<b>CHCCCS002 Assist with movement (Elective)</b>			
<ul style="list-style-type: none"> <li>• Revisit skills learnt in Term 1 for infection control and client communication</li> <li>• Preparing a client for movement, legal and ethical considerations, checking, storing and cleaning equipment</li> <li>• Assisting a client with movement procedure</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face</li> </ul>	<ul style="list-style-type: none"> <li>• Learner guide</li> <li>• PowerPoint</li> <li>• Workplace policies and forms, workplace health and safety manual</li> <li>• Workplace procedures for assisting clients</li> <li>• Competency checklists</li> <li>• Range of mobility aids</li> <li>• Cleaning equipment</li> <li>• Hand sanitiser</li> </ul>	<ul style="list-style-type: none"> <li>• Best suited in a simulation lab where access to a range of equipment in a ward environment is provided</li> <li>• Incorporates skills learnt in Term 1 for communication and infection control</li> <li>• Students perform six movement procedures</li> </ul>
<b>CHCCCS010 Maintain a high standard of service (Core)</b>			
<ul style="list-style-type: none"> <li>• Introduce topics that will be discussed next term such as human rights, behaviours of concern, use of interpreters and cultural diversity</li> <li>• Revisit communication principles and focus on respect</li> <li>• How to evaluate work and manage client complaints</li> <li>• Service standards and healthcare rights</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face or online</li> </ul>	<ul style="list-style-type: none"> <li>• Learner guide</li> <li>• PowerPoint</li> <li>• Workplace policies and forms</li> <li>• Complaints and customer feedback forms</li> </ul>	

### Year 1: Term 3 delivery sequence

Topic	Delivery mode	Learning resource	Other advice
<b>CHCCCS020 Respond effectively to behaviours of concern (Elective)</b>			
<ul style="list-style-type: none"> <li>Identify behaviours of concern</li> <li>Develop strategies to manage behaviours</li> <li>Evaluate work</li> <li>Communication strategies</li> <li>How to evaluate work and manage client complaints</li> </ul>	<ul style="list-style-type: none"> <li>Face to face</li> </ul>	<ul style="list-style-type: none"> <li>Learner guide</li> <li>PowerPoint</li> <li>Workplace policies and forms</li> <li>Behaviour management plans</li> <li>Videos and clips</li> </ul>	<ul style="list-style-type: none"> <li>Case-study analysis and role-plays work with this unit</li> </ul>

### Year 1: Term 4 delivery sequence

Topic	Delivery mode	Learning resource	Other advice
<b>CHCDIV001 Work with diverse people (Core)</b>			
<ul style="list-style-type: none"> <li>Reflect on own perspectives</li> <li>Professional relationships that respect diversity</li> <li>Communication with people from diverse backgrounds – how to promote understanding</li> <li>Legal and ethical considerations</li> <li>Human rights, characteristics of diversity</li> </ul>	<ul style="list-style-type: none"> <li>Face to face or online</li> </ul>	<ul style="list-style-type: none"> <li>Learner guide</li> <li>PowerPoint</li> <li>Workplace policies and forms</li> <li>Videos and clips</li> </ul>	<ul style="list-style-type: none"> <li>Case-study analysis, role-plays, speakers, incursions, excursions and project-based learning work well with this unit</li> </ul>

## Year 2 delivery sequence

*HLTAAP001* Recognise healthy body systems and *BSBMED301* Interpret and apply medical terminology appropriately can be delivered together. For example, when learning about the cardiovascular system, students can learn the corresponding medical terms and abbreviations. The special elective can also be incorporated into this applied approach. As part of their elective, students can learn how to measure pulse and blood pressure once they are confident in their knowledge of the cardiovascular system. They then write reports and record measurements using the correct medical terms and abbreviations. This structure is repeated for every body system.

Students build on knowledge and medical terms when they are repeated in the correct context.

Topic	Delivery mode	Learning resource	Other advice
<b>HLTAAP001 Recognise healthy body systems</b>			
<ul style="list-style-type: none"> <li>• Normal structure, function and location of the 11 major body systems</li> <li>• Organisation of the body</li> <li>• Interrelationships between major components of each body system and other structures</li> <li>• Processes, conditions and resources required by the body to support healthy functioning</li> <li>• Maintenance of body temperature, fluid and electrolyte imbalance</li> <li>• Maintenance of blood pressure</li> <li>• Elimination of wastes</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face or online</li> </ul>	<ul style="list-style-type: none"> <li>• Anatomical models</li> <li>• Internet</li> <li>• Learner guide</li> <li>• Textbook</li> <li>• PowerPoint presentation</li> <li>• Apps and video clips</li> <li>• Anatomical diagrams and flow charts</li> <li>• Workplace documents, such as fluid balance charts, medication charts, handover sheets and vital signs charts</li> </ul>	<ul style="list-style-type: none"> <li>• Short sharp bursts of content</li> <li>• Review body systems periodically</li> <li>• Link to terminology</li> <li>• Vary learning strategies</li> <li>• Use 3D representation online</li> <li>• Incorporate self-correcting opportunities</li> </ul>
<b>BSBMED301 Interpret and apply medical terminology appropriately</b>			
<ul style="list-style-type: none"> <li>• Fundamental word structure used in medical terms</li> <li>• Medical terms used by medical specialists</li> <li>• Diagnostic tests</li> <li>• Abbreviations, acronyms</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face or online</li> </ul>	<ul style="list-style-type: none"> <li>• Workplace documents, such as fluid balance charts, medication charts, handover sheets and vital signs charts</li> <li>• Internet</li> <li>• Learner guide</li> <li>• Textbook</li> <li>• PowerPoint presentation</li> <li>• Apps and video clips</li> <li>• Anatomical diagrams</li> <li>• Online dictionary</li> </ul>	<ul style="list-style-type: none"> <li>• Case-study analysis can demonstrate the interrelationships between body systems</li> </ul>
<b>HLTHPS001 Take clinical measurements (Or another special elective)</b>			
<ul style="list-style-type: none"> <li>• Basic anatomy and physiology</li> <li>• Legal and ethical considerations when undertaking clinical measurements</li> <li>• Preparing a client for clinical measurements</li> <li>• Undertaking clinical measurements: <ul style="list-style-type: none"> <li>• blood glucose</li> <li>• urinalysis</li> <li>• vital signs</li> <li>• colour blindness and visual acuity</li> <li>• audiometry</li> <li>• spirometry and peak flow</li> </ul> </li> <li>• Infection control</li> </ul>	<ul style="list-style-type: none"> <li>• Face to face</li> </ul>	<ul style="list-style-type: none"> <li>• Workplace documents, such as fluid balance charts, medication charts, handover sheets and vital signs charts</li> <li>• Range of clinical equipment required for each measurement</li> <li>• Learner guide</li> <li>• Policy procedure manual</li> <li>• Checklists</li> <li>• PowerPoint</li> <li>• Textbook</li> <li>• Internet</li> <li>• Clips demonstrating clinical procedures</li> </ul>	<ul style="list-style-type: none"> <li>• Review communication, infection control and safe use of equipment learnt in Year 1</li> </ul>

## Clustering units of competency

Clustering UOCs can enable you to more fully reflect the workplace. Clustering can be defined as the process of grouping competencies into combinations that have meaning and purpose related to work functions and needs in an industry or enterprise.

It offers opportunities for holistic evidence collection. It allows for collection of evidence that focuses on whole work activities rather than subtasks or components of a work activity. You begin to see how a student might perform in the workplace by an integration of skills. Clustering can be an efficient and effective approach to assessment. It can also reduce the duplication of effort as course units often contain repeated knowledge, skills and performance requirements. Before applying this approach, carefully examine the UOCs and establish the unit intention, application and all evidence requirements. Students may benefit from repeating or reviewing information or skills as they are new to the health industry.

Examples of units that could be clustered together are shown below.

**Example 1** CHCCOM005 Communicate and work in health and community services and CHCCCS020 Respond effectively to behaviours of concern

Common knowledge or skills	Delivery details
<ul style="list-style-type: none"> <li>• Use of verbal and non-verbal communication.</li> <li>• Reporting problems to the supervisor.</li> <li>• Demonstration of a range of communication techniques.</li> <li>• Recognises influences on communication.</li> <li>• Workplace documentation.</li> <li>• Collaboration with colleagues.</li> <li>• Referring to other support organisations.</li> <li>• Planning responses with a multidisciplinary team.</li> <li>• Selection of appropriate communication strategies.</li> </ul>	<p>Case study or role-play where the client has a behaviour of concern. The student needs to demonstrate appropriate communication skills. Could extend to the management of a potential conflict.</p> <p>Include knowledge of specific community service organisations to support clients with behaviours of concern</p> <p>Links to student experiences on SWL in aged care and other health workplaces. Enables an applied approach to the communication unit. Training is aligned to a real-life scenario, in this case a client with a communication barrier.</p> <p>Use of a behaviour management tool or progress notes or incident form again reflects the workplace. Less abstract concepts.</p>

**Example 2** HLTAHA001 Assist with an allied health program and CHCCCS002 Assist with movement

Common knowledge or skills	Delivery details
<ul style="list-style-type: none"> <li>• Preparation of the client for a movement procedure or program.</li> <li>• Preparation and safe use of the equipment required for the program.</li> <li>• Program planning and administration, such as documentation.</li> </ul>	<p>Providing appropriate communication to the client and supervisor. Role-play and practical demonstration of skills suit both units. The student can plan an exercise program that involves several procedures and can use specific equipment. Draws together a range of skills and knowledge as the student interacts with the client.</p> <p>It does, however, limit exposure to a therapeutic program. Students are focused on an exercise program, rather than other types of allied health programs.</p>

**Example 3** CHCCCS026 Transport individuals and CHCCCS002 Assist with movement

Common knowledge or skills	Delivery details
<ul style="list-style-type: none"> <li>• Preparation of the client for a movement procedure or transport.</li> <li>• Preparation and safe use of the equipment required for the transport.</li> <li>• Providing appropriate communication to the client and supervisor.</li> <li>• Care of the equipment, cleaning and storage.</li> <li>• Safe use of equipment.</li> <li>• Using correct movement techniques.</li> </ul>	<p>Role-play and practical demonstration of skills suit both units. The student could demonstrate how to transport a client in a wheelchair or trolley and how to transfer the client from the trolley on a bed. The skills overlap with both units, as does the preparation. The knowledge evidence is also similar.</p> <p>Both units are suited for role-play demonstration in a simulation lab.</p>

**Example 4** HLTINF001 Comply with infection prevention and control policies and procedures and CHCCCS012 Prepare and maintain beds

Common knowledge or skills	Delivery details
<ul style="list-style-type: none"> <li>• Students can apply knowledge of WHS and infection control procedures as they make beds, including:               <ul style="list-style-type: none"> <li>• accessing policies and procedures</li> <li>• safe handling of soiled linen</li> <li>• hand hygiene</li> <li>• clinical waste disposal.</li> </ul> </li> </ul>	<p>Both units are suited for delivery in a simulation lab. Making beds builds on the theoretical knowledge taught in the infection control unit and also incorporates some of the key concepts in the WHS unit. The simulation lab can be arranged with simulated soiled linen on the beds, instructions for bed making and the requirement for students to safely clean the bed. They demonstrate how to operate a high/low bed safely and could also be asked to communicate their work to a client in a role-play.</p>

**Example 5** CHCCOM005 Communicate and work in health or community services and CHCCCS010 Maintain a high standard of service

Common knowledge or skills	Delivery details
<ul style="list-style-type: none"> <li>• Selecting and applying communication strategies.</li> <li>• Reporting problems to the supervisor.</li> <li>• Completing workplace documentation, such as a feedback form.</li> <li>• Demonstration of a range of communication techniques.</li> <li>• Establishing respectful relationships.</li> <li>• Using an interpreter service.</li> <li>• Maintaining confidentiality.</li> </ul>	<p>Role-play or case-study analysis would enable students to demonstrate key understanding of the overlapping themes.</p> <p>Students could workshop a conflict in a health service that infringes on a client's rights and reflects poor service standards. The process and communication methods, including documentation of the incident, meet unit requirements.</p>

# Chunking information

Chunking information is a method where long complex information is grouped or chunked into more manageable pieces. This assists memory and is particularly useful in anatomy and physiology, which have a high volume of content and the requirement to decode medical terms.

Chunking can mean placing material into smaller chapters, smaller paragraphs or using summary tables. This helps students to create conceptual patterns.

How information is presented and organised is also an example of chunking information.

Here are some ideas where complex information is linked together to enhance understanding.

## Building an understanding of medical terminology

Divide medical terms into their component parts and learn the meaning of each part. Use the understanding of each part and add two or three new words to this.

Represent the medical term as a flow diagram with colour-coded parts. Patterns begin to form.

New words have been built into the same root word.

GASTR/O/ENTER/O/LOGY

GASTR/O/ENTER/ITIS

GASTR/O/SCOPE

GASTR/IC

## Summary table

Topic	Summary
Function of the kidney	<ul style="list-style-type: none"><li>• Filtration – blood enters the kidneys and passes through the capillary network to be filtered. Water and solutes pass through the renal tubules, while large molecules, such as proteins, remain in the bloodstream</li><li>• Reabsorption – water and other essential substances are returned to the blood</li><li>• Secretion – wastes are secreted to become urine for elimination</li></ul>
Key terms (add to your glossary)	<ul style="list-style-type: none"><li>• Nephron</li><li>• Renal artery</li><li>• Capillary network</li><li>• Renal tubule</li><li>• Filtration</li><li>• Reabsorption</li><li>• Secretion</li><li>• Glomerulus</li></ul>

## Chunking lists

Topic	Summary
Growth hormone Prolactin Follicle stimulating hormone Thyroid stimulating hormone Oxytocin Antidiuretic hormone	<b>Anterior pituitary</b> Growth hormone Prolactin Follicle stimulating hormone Thyroid stimulating hormone  <b>Posterior pituitary</b> Oxytocin Antidiuretic hormone

## Chunking processes

Formation of urine can be divided into three processes:

1. Filtration
2. Reabsorption
3. Secretion.

### Filtration

Blood enters the kidneys and passes through the capillary network to be filtered. Water and solutes pass through the renal tubules, while large molecules such as proteins remain in the bloodstream.

### Reabsorption

Water and other essential substances are returned to the blood.

### Secretion

Wastes are secreted to become urine for elimination.

# Improving exam performance

Students can commence learning content from the examinable units in Year 1. At this early stage, they can adopt a systematic method of note taking. Notes can be arranged in sections or folders pertaining to each body system and accompanied by a glossary of terms for each one. Include labelled diagrams of body organs.

Units such as *HLTINFO01* Comply with infection prevention and control policies and procedures and *CHCCCS002* Assist with movement will contain technical words and abbreviations that can be included in student notes.

Consider introducing an exam at the end of Year 1 that resembles the VCAA format but tests content from the current UOCs.

## Strategies for exam preparation

### Reviewing

Provide time to conduct periodic reviews where students complete worksheets or work through a case study or short quiz. This refreshes knowledge learnt at the start of the year and highlights gaps in knowledge. End each class with a quick online quiz.

Encourage students to create concept or mind maps to organise information. For example, in *HLTAAP001* Recognise healthy body systems, place a system in the middle of the map and draw a line to key information in the branches. The information is focused on key topics that need to be remembered for the exam. Every item in the map is, in effect, the centre of another map. Each word and idea has numerous links to other ideas and concepts.

### Recall tips

Recognising material does not automatically mean that students are able to recall it later in an exam. Suggestions to assist recall include:

- Instruct students to write or word process key terms in their own words.
- Learn flowcharts and diagrams, especially for each body system. Make large diagrams for your walls, such as representing homeostatic processes in schematics.
- Look for common concepts and themes and create a special notes section for this. For example, homeostasis will be repeated, so link it to each body system.
- Create acronyms or a mnemonic device to help students remember terms, functions and processes. It might be a song or a funny sentence.
- Use cards to help with learning definitions. Make a list of definitions. Write each subject word on one side of a card and the definition on the other side.

### Study groups

Encourage students to form study groups where particularly difficult topics are workshopped. They can correct each other's work or develop tests for each other. The group can do a practice exam using a past paper or sample paper from the VCAA website and self-correct. This is good practice for understanding the format of the exam questions and ensuring you spend the right amount of time on each question or section.

### Exam preparation plan

Work with the class to develop an exam preparation plan. It should contain:

- a list of important study materials, such as flash cards to assist recall and YouTube clips to explain processes
- sample exam questions to work through that resemble the VCAA exam questions
- chapters in the text to review
- timelines and how many hours to study
- a summary list of content for each unit. Summaries should be easy to read and well organised and in a logical order. Use highlighting, colour coding, headings, bullets and tables to help your memory
- due dates for chapter or topic summaries.

### Practice exams

The practice exams provide a formal opportunity for students to undertake an exam in the same conditions that will be experienced when sitting the VCAA exam. This identifies known and unknown material, and students learn how best to manage allocated time for reading and writing. It exposes students to a greater array of questions that may appear on the actual exam.

# Maintaining sector knowledge

The health industry is constantly changing. As the industry changes and grows it is important to keep abreast of the innovation, technologies and trends that impact on the industry. Below is a list of websites to assist you with maintaining, updating and enhancing your professional skills and knowledge in the health industry.

## Aged care

- My Aged Care
- Aged Care Quality and Safety Commission
- Dementia Australia
- Alzheimer's and Dementia Resources
- National Aged Care Alliance
- Aged & Community Services Australia
- Aging and Aged Care

## Disability and NDIS

- Victorian Department of Health and Human Services
- Australian Department of Social Services
- National Disability Services
- Diversity Australia (introduction to disability awareness)
- Scope Australia

## Mental health

- Mental Health Australia
- Beyond Blue
- Headspace
- ReachOut
- Black Dog Institute

## Professional allied health organisations

- Optometry Australia
- Audiology Australia
- Speech Pathology Australia
- Occupational Therapy Australia
- Diversional and Recreation Therapy Australia
- Australian Physiotherapy Association
- Australian Music Therapy Association
- Allied Health Professions Australia
- Osteopathy Australia
- Australian Chiropractors Association
- Australian Podiatry Association
- Dental Hygienists Association of Australia
- Dental Health Services Victoria
- Australian Association of Social Workers
- Australian Psychological Society
- Exercise and Sports Science Australia
- Dietitians Association of Australia

## Infection control guidelines

- Infection control guidelines – published by the Victorian Department of Health and Human Services

## WHS topics

- WorkSafe Victoria

## Supervision and delegation framework for allied health assistants

- [www2.health.vic.gov.au/about/publications/policiesandguidelines/Supervision-and-delegation-framework-for-allied-health-assistants](http://www2.health.vic.gov.au/about/publications/policiesandguidelines/Supervision-and-delegation-framework-for-allied-health-assistants)

## Health organisations

- Stroke Foundation
- Diabetes Australia
- The Royal Children's Hospital Melbourne
- Heart Foundation
- Musculoskeletal Australia
- Institute for Respiratory Health
- Continence Foundation of Australia
- Australian Dietary Guidelines – available via [eatforhealth.gov.au](http://eatforhealth.gov.au)
- Exercise guidelines – published by Fitness Australia

## Free health resources

- [Physiotherapyexercises.com](http://Physiotherapyexercises.com) – published by the New South Wales Department of Health
- My Health Career
- Autism Spectrum Disorders and Comorbid Mental Health Conditions Manual – published by Orygen
- Head to Health – published by the Australian Department of Health
- Department of Health – Resources – published by the Australian Department of Health

# Equipment and resources

This section recommends equipment for use when delivering units from the VCE VET Health program.

Additional resources have also been included.

## HLTWHS001 Participate in workplace health and safety

### Equipment

- samples of PPE purchased from any hospital supplier
- workplace incident and hazard forms
- sample signs
- policies and procedures
- manual handling codes

### Resources

- Healthcare and hospitals; and Working safely in community services – published by WorkSafe
- Comcare – further information about WHS, including hazards in a virtual office

## HLTINF001 Comply with infection prevention and control policies and procedures

### Equipment

- samples of PPE, such as dressing packs, hand sanitiser and other equipment, purchased from any hospital supplier
- sterile equipment
- glow-in-the-dark hand hygiene training product
- policies and procedures
- body fluid spill kit
- cleaning items

### Resources

- Australian Infection Prevention and Control Guidelines and Infection Prevention and Control eLearning Modules – published by the Australia Commission on Safety and Quality in Health Care
- HHA Learning Management System – published by Hand Hygiene Australia
- Cleaning and waste disposal procedures – infection control – published by the Victorian Department of Health and Human Services

## CHCCCS002 Assist with movement

### Equipment

- slide sheets
- wheelchair
- hoist
- stand transfer machine
- frame
- walking stick
- highchair
- swivel cushion
- patient turning/transfer aid
- mobility aids

### Resources

- Falls and Balance – free online module on falls risks, includes case studies, part of the Victorian Geriatric Medicine Training Program
- Mobility and self-care – published by the Victorian Department of Health and Human Services
- Many hospital suppliers provide mobility aids

## CHCCCS026 Transport individuals

### Equipment

- wheelchair
- stretcher
- trolley
- bed
- intravenous stands
- oxygen
- mobility aids

### Resources

- Falls and Balance – free online module on falls risks, includes case studies, part of the Victorian Geriatric Medicine Training Program
- Mobility and self-care – published by the Victorian Department of Health and Human Services
- YouTube clips for skills demonstrations

## HLTHPS001 Take clinical measurements

### Equipment

- stethoscopes
- Ishihara test for colour blindness
- automatic and manual sphygmomanometer
- range of thermometers
- peak flow meter and mouthpieces
- measuring tape
- height measure
- visual acuity chart
- digital scales
- spirometer
- urinalysis test strips
- blood glucose testing kits
- audiometer
- clinical charts, client forms
- disposable gloves
- checklist, policies and procedures
- hand sanitiser

### Resources

- *Essential clinical skills: Enrolled nurses*, J Tollefson, G Watson and E Jelly, Cengage Learning, 2019
- *Health Services Assistance – Supporting nursing in acute care*, K Austin and G Arnott, Cengage Learning, 2017 – content for many units and some procedures
- Ask an allied health professional, such as an audiologist or optometrist, to visit and demonstrate equipment. Alternatively, students can book an interview with them and visit the clinic.
- Visit or hire a simulation centre.

## HLTAAP001 Recognise healthy body systems

### Equipment

- anatomical models of organs, such as the eye, ear, kidney and heart
- anatomical posters
- flash or cue cards
- 3D apps
- games and quizzes
- YouTube clips and discovery channels

### Resources

- Get Body Smart – an interactive website for teaching and learning the basic principles of human anatomy and physiology
- What is a cell? – available from wisegeek.com
- Anatomical directional terms and body planes – available from ThoughtCo.
- Anatomy and physiology for dummies cheat sheet – anatomical position terms, planes of the body, cavities, organ systems
- *Atlas of human anatomy*, Frank H Netter – contains an extensive collection of anatomical drawings
- Cell overview – published by Rader's biology4kids.com
- All systems are go! – published by the American Association for the Advancement of Science via ScienceNetlinks.com
- Interactive body: Organs – interactive game published by the BBC
- The elements of a homeostatic control system – drag and drop exercise published by Benjamin Cummings (Pearson) and based on *Human anatomy and physiology* by Elaine N Marieb and Katja Hoehn

## **BSBMED301 Interpret and apply medical terminology appropriately**

### **Equipment**

- online dictionaries
- workplace documents, such as fluid balance charts, medication charts, handover sheets and vital signs charts

### **Resources**

- Recommendations for terminology, abbreviations and symbols used in medicines documentation – published by the Australian Commission on Safety and Quality in Health Care
- Australian health thesaurus – published via healthdirect
- What did my doctor say? – published by the Medical Library Association
- Medical abbreviations translated – published by the Pulmonary Hypertension Association of Australia

## **Role-play equipment: Communication unit and others**

### **Equipment**

- blindfolds
- cotton wool
- glasses to simulate vision loss
- client progress notes
- reading glasses – Vision Australia supplies for free
- client histories – contact supplier of client histories and purchase a full set of forms used in hospitals

### **Resources**

- Victorian Simulation Alliance – guidance on role-play development
- Vision Australia

## **Useful course textbooks**

- *Supporting nursing in aged care*, K Austin and G Arnott, Cengage Learning, 2017
- *Medical terminology: A short course*, DE Chabne, Elsevier, 8th edition, 2017
- *An introduction to medical terminology for healthcare*, A Hutton, Elsevier Health Sciences, 5th edition, 2016
- *Illustrated guide to medical terminology*, J Davies, Cengage Learning, 2nd edition, 2015
- *Ross and Wilson: Anatomy and physiology in health and illness*, A Grant and A Waugh, Elsevier, 13th edition, 2018

# References

- Alonsagay, AI 2018, 'What are Australia's most in-demand skills for 2019?', Upskilled website, 27 December 2018, <[www.upskilled.edu.au/skillstalk/most-in-demand-skills-2019-australia](http://www.upskilled.edu.au/skillstalk/most-in-demand-skills-2019-australia)>
- Austin, K & Arnott, G 2017, *Health Services Assistance – Supporting Nursing in Acute Care*, Cengage Learning Australia
- Australian Government Department of Employment, Skills, Small and Family Business 2019, *Industry Employment Projections 2019 Report*, Labour Market Information Portal, <<http://lmip.gov.au/default.aspx?LMIP/GainInsights/EmploymentProjections>>
- Australian Government Department of Employment, Skills, Small and Family Business 2019, *2019 Employment Projections – for the five years to May 2024*, Labour Market Information Portal, <[lmip.gov.au/default.aspx?LMIP/GainInsights/EmploymentProjections](http://lmip.gov.au/default.aspx?LMIP/GainInsights/EmploymentProjections)>
- Australian Government Department of Health 2020, 'The Australian health system', Department of Health website, <[www.health.gov.au/about-us/the-australian-health-system](http://www.health.gov.au/about-us/the-australian-health-system)>
- Australian Government Department of Jobs and Small Business 2019, *Australian Jobs 2019*, Department of Jobs and Small Business, Canberra, <[australianjobs.employment.gov.au](http://australianjobs.employment.gov.au)>
- Board of Studies New South Wales 2020, Making multicultural Australia for the 21st century website, <[www.multiculturalaustralia.edu.au](http://www.multiculturalaustralia.edu.au)>
- Duckett, S, Breadon, P & Farmer, J 2014, *Unlocking skills in hospitals: better jobs, more care*, Grattan Institute, Carlton, <[grattan.edu.au/wp-content/uploads/2014/05/810-unlocking-skills-in-hospitals.pdf](http://grattan.edu.au/wp-content/uploads/2014/05/810-unlocking-skills-in-hospitals.pdf)>
- Medical Specialist Training Steering Committee 2006, Appendix E, Reference Group 3 Report: '2. Background, changing training needs and the trainee of the future', in *Expanding Settings for Medical Specialist Training, MSTSC Report 2006*, Canberra, <[www1.health.gov.au/internet/publications/publishing.nsf/Content/work-edu-spectr-mstsc-rept-toc--work-edu-spectr-mstsc-rept-app-e--work-edu-spectr-mstsc-rept-app-e-2](http://www1.health.gov.au/internet/publications/publishing.nsf/Content/work-edu-spectr-mstsc-rept-toc--work-edu-spectr-mstsc-rept-app-e--work-edu-spectr-mstsc-rept-app-e-2)>
- National Disability Services 2018, *Australian Disability Workforce Report, 3rd edition, July 2018*, National Disability Services, Sydney, <[www.nds.org.au/images/workforce/ADWR\\_Third\\_Edition\\_July\\_2018.pdf](http://www.nds.org.au/images/workforce/ADWR_Third_Edition_July_2018.pdf)>
- National Indigenous Australians Agency 2020, 'Health and wellbeing', NIAA website, <[www.niaa.gov.au/indigenous-affairs/health-and-wellbeing](http://www.niaa.gov.au/indigenous-affairs/health-and-wellbeing)>
- Standards Australia 2010, Australian Standard (AS) 4083–2010 *Planning for emergencies: Health care facilities*, SAI Global Ltd, Sydney, <<https://www.standards.org.au/standards-catalogue/sa-snz/health/he-026/as--4083-2010>>
- United Nations General Assembly 1948, *Universal Declaration of Human Rights, 10 December 1948*, <[www.un.org/en/universal-declaration-human-rights/index.html](http://www.un.org/en/universal-declaration-human-rights/index.html)>
- Victorian Government Department of Health 2012, *Supervision and delegation framework for allied health assistants*, Melbourne, <[www2.health.vic.gov.au/about/publications/policiesandguidelines/Supervision-and-delegation-framework-for-allied-health-assistants](http://www2.health.vic.gov.au/about/publications/policiesandguidelines/Supervision-and-delegation-framework-for-allied-health-assistants)>
- Victorian Government Department of Health and Human Services 2015, *Victorian Assistant Workforce Model (Allied Health)*, Melbourne, <[www2.health.vic.gov.au/Api/downloadmedia/%7BE4214316-E4F8-41B6-97D6-D5709A08610D%7D](http://www2.health.vic.gov.au/Api/downloadmedia/%7BE4214316-E4F8-41B6-97D6-D5709A08610D%7D)>
- WorkSafe Victoria 2020, 'Occupational violence and aggression against healthcare workers' brochure, WorkSafe website, <[www.worksafe.vic.gov.au/resources/occupational-violence-and-aggression-against-healthcare-workers-brochure](http://www.worksafe.vic.gov.au/resources/occupational-violence-and-aggression-against-healthcare-workers-brochure)>
- WorkSafe Victoria 2020, Occupational violence and aggression case studies, WorkSafe website, <[www.worksafe.vic.gov.au/resources/occupational-violence-and-aggression-case-studies](http://www.worksafe.vic.gov.au/resources/occupational-violence-and-aggression-case-studies)>



