



PROGRAM OF STUDY

Support for assistive services in health and social services institutions (DVS 5905)

TRAINING SECTOR: HEALTH SERVICES

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Three job analysis workshops for the occupations of orderly (préposée/préposé aux bénéficiaires [PAB]) and health and social services assistant (HSSA) were held via videoconference on the following dates: October 5, 2023, for the occupation of health and social services assistant in home-care settings; October 11, 2023, for the occupation of orderly in short-term and critical care settings, and October 12, 2023, for the occupation of orderly in long-term care centres. The Ministère de l'Éducation would like to thank the following individuals who participated in one or several of these workshops.

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Introduction to the Program

In vocational training, a program of study presents the competencies required to practise a given trade or occupation at entry level on the job market. The training provided allows students to acquire a degree of versatility that will be useful in their career and personal development.

In vocational training, a program of study presents the competencies required to practise a trade or occupation at entry level on the job market. The training provided allows workers to acquire a degree of versatility that will be useful in their career and personal development.

A program consists of a coherent set of competencies to be developed. It outlines the knowledge and broad orientations to be favoured during training. The competencies correspond to the tasks of the trade or occupation or to activities related to work, vocational or personal life, depending on the case. Learning is acquired in a specific achievement context and targets the ability to act, succeed and evolve.

Programs include compulsory objectives and content. For behavioural competencies, the compulsory components include the statement of the competency, the elements of the competency, the achievement context and the performance criteria. For situational competencies, they include the statement of the competency, the elements of the competency, the learning context, the instructional guidelines and the participation criteria.

For information purposes, programs also provide a grid of competencies, educational aims, a summary of competency-related knowledge and know-how, and guidelines. They also specify the suggested duration of each competency. All optional components of a program may be enriched or adapted according to the needs of the students, the environment and the workplace.

Program Components

Program Objectives

Program objectives consist of the expected outcome at the end of training as well as a general description of a given trade or occupation. They also include the four general goals of vocational training.

Educational Aims

Educational aims are broad orientations to be favoured during training in order to help students acquire intellectual or motor skills, work habits or attitudes. Educational aims usually address important aspects of career and personal development that have not been explicitly included in the program objectives or competencies. They serve to orient appropriate teaching strategies to contextualize students' learning, in keeping with the dimensions underlying the practice of a trade or occupation. They help guide educational institutions in implementing the program.

Competency

A competency is the ability to act, succeed and evolve in order to adequately perform tasks or activities related to one's working or personal life, based on an organized body of knowledge and skills from a variety of fields, strategies, perceptions, attitudes, etc.

A competency in vocational training can be defined in terms of a behaviour or a situation, and includes specific practical guidelines and requirements for learning.

1. Behavioural Competency

A behavioural competency describes the actions and the results expected of the student. It consists of the following features:

- The *statement of the competency* is the result of the job analysis, the orientations and general goals of vocational training and other determinants.
- The *elements of the competency* correspond to essential details that are necessary in order to understand the competency and are expressed in terms of specific behaviours. They refer to the major steps involved in performing a task or to the main components of the competency.
- The *achievement context* corresponds to the situation in which the competency is exercised at entry level on the job market. The achievement context attempts to recreate an actual work situation but does not describe a learning or evaluation situation.
- The *performance criteria* define the requirements to be respected. They may refer to elements of the competency or to the competency as a whole. When associated with a specific element, performance criteria are used to judge whether a competency has been acquired. When associated with the competency as a whole, the criteria describe the requirements for performing a task or activity and provide information on the expected level of performance or the overall quality of a product or service.

2. Situational Competency

A situational competency describes the situation in which students are placed to acquire learning, and allows for actions and results to vary from one student to another. It consists of the following features:

- The *statement of the competency* is the result of the job analysis, the orientations and general goals of vocational training and other determinants.
- The *elements of the competency* outline the essential aspects of the competency and ensure a better understanding of the competency with respect to the expected outcome. The elements of the competency are fundamental to the implementation of the learning situation.
- The *learning context* provides a broad outline of the learning situation designed to help the students develop the required competency. It is normally divided into three key phases of learning: information, participation and synthesis.
- The *instructional guidelines* provide reference points and means for teachers to ensure that learning takes place and that the context in which it occurs is always the same. These guidelines may include general principles or specific procedures.
- The *participation criteria* describe requirements that the students must meet when participating in learning activities. They focus on how the students take part in the activities, rather than on the results obtained. Participation criteria are normally provided for each phase of the learning situation.

Competency-Related Knowledge and Know-How

Competency-related knowledge and know-how, together with related guidelines, are provided for information purposes. Competency-related knowledge and know-how define the essential and meaningful learning that students must acquire in order to apply and continue to develop the competency. They are in keeping with the job market and are accompanied by guidelines that provide information about the field of application, level of complexity and learning content. They generally encompass learning associated with knowledge, skills, attitudes, etc.

Duration

The total duration of the program is compulsory and must be observed. It consists of teaching time, which includes time for the evaluation of learning and for enrichment or remedial activities, depending on the students' needs. The duration indicated for a given competency refers to the amount of time needed to develop the competency.

The amount of teaching time corresponds to the amount of time allotted to training, which is established during program development as the average amount of time needed to acquire a competency and evaluate learning. This duration is helpful in organizing training.

Credit

A credit is a unit used for expressing the quantitative value of each competency. One credit corresponds to 15 hours of training.

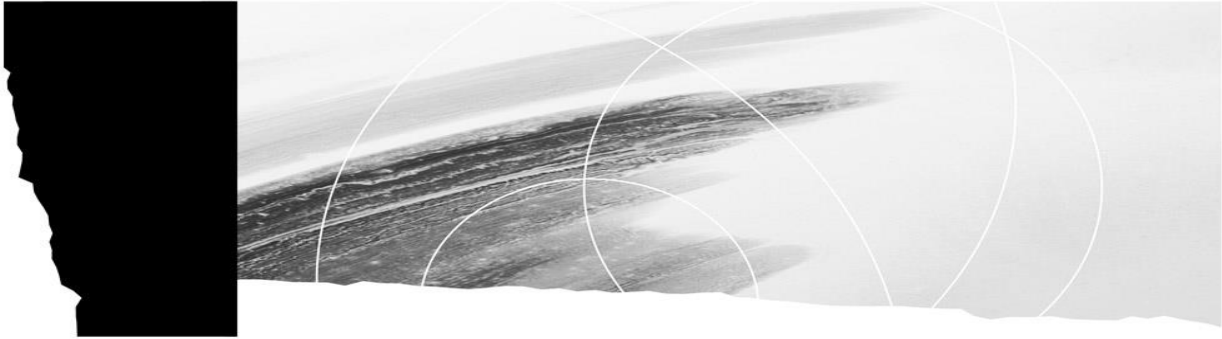
Aspects of Program Implementation

Program-Based Approach

The program-based approach is founded on a comprehensive view of a program of study and its components (e.g. objectives, educational aims, competencies). It requires concerted action among all players involved from the initial stages of program design and development to program implementation and evaluation. It consists in ensuring that all of the actions and activities proposed are based on the same aims and take into account the same orientations. For students, the program-based approach makes training more meaningful as it presents learning as a coherent whole.

Competency-Based Approach

In vocational training, the competency-based approach is based on a teaching philosophy that is designed to help students mobilize their own individual sets of resources in order to act, succeed and evolve in different contexts, according to established performance levels with all the required knowledge and know-how. The competency-based approach is carried out in situations that are relevant to the students' working life and personal life.



Summary of the Program

5905	Support for Assistive Services in Health and Social Services Institutions
Year of approval: 2025	
Certification:	Diploma of Vocational Studies
Type of program:	Initial training
Number of credits:	47
Number of competencies:	14
Total duration:	705 hours

To be eligible for admission to the *Support for Assistive Services in Health and Social Services Institutions* program leading to an DVS, candidates must meet one of the following requirements:

- Persons must hold a Secondary School Diploma or its recognized equivalent.
OR
- Persons who are at least 16 years of age on September 30 of the school year in which they begin their training and have earned Secondary III credits in language of instruction, second language and mathematics in the programs of study established by the Minister, or have been granted recognition for equivalent learning.
OR
- Persons who are at least 18 years of age upon entry into the program must have the following functional prerequisites: the successful completion of the general development test and ENG-3103-3, or recognition of equivalent learning.

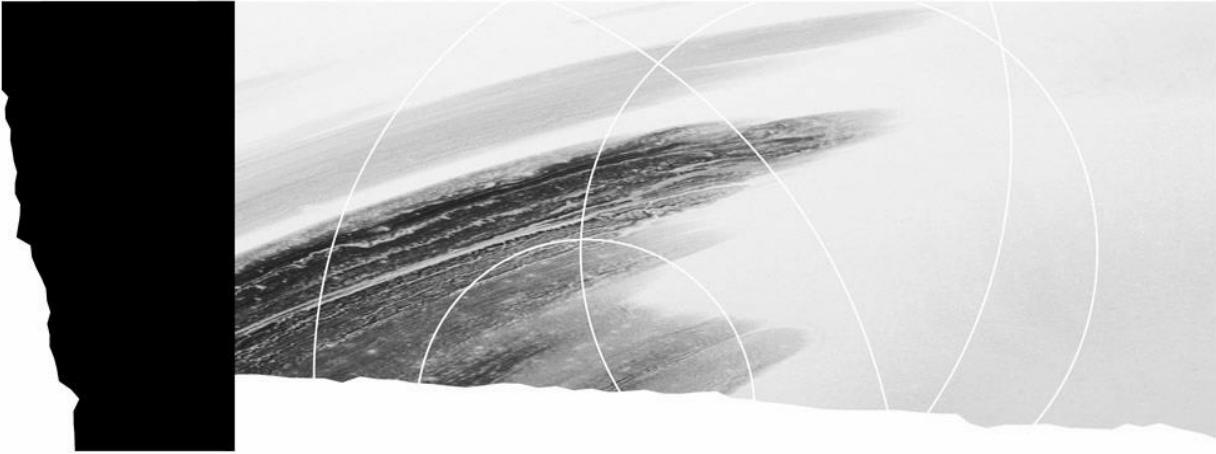
The duration of the *Support for Assistive Services in Health and Social Services Institutions* program is 705 hours, which includes 330 hours spent on the specific competencies required to practise the occupation and 375 hours on general, work-related competencies. The program of study is divided into 14 competencies which vary in length from 15 hours to 90 hours. The total hours allocated to the program include time devoted to teaching, evaluation of learning and enrichment or remedial activities.

Specific Features of the Program

This program targets two occupations: Orderly (PAB) and Health and social services assistant (HSSA). It covers the following workplaces in health and social services institutions: long-term and short-term care centres, including critical care centres, as well as local community service centres (CLSCs) for home-care services.

The program focuses, among others, on the legislative, regulatory and normative aspects in force, on the rules of hygiene and asepsis, and on the health and safety rules to protect clients, the workers themselves and others. It also focuses on consideration of the client as a whole, on activities that enable continuity of care and on communication and collaboration.

Competency	Code	Number	Duration	Credits
Analysis of the Occupations, Legislative and Ethical Aspects	753702	1	30	2
Communication, Collaboration and Family, Social and Cultural Realities	753714	2	60	4
Prevention and Control of Infections and Contamination	753722	3	30	2
Needs of Clients With Physical Illnesses and Disabilities	753733	4	45	3
Relational Approaches	753743	5	45	3
Personal Assistive Services Related to Activities of Daily Living in the Context of Long-Term Care	753756	6	90	6
Palliative and End-of-Life Care	753762	7	30	2
First Aid	753772	8	30	2
Interventions With Clients Experiencing a Loss of Autonomy in a Long-Term Care Centre	753785	9	75	5
Limits With Respect to Administering Medications and Providing Invasive Assistive Care Related to Activities of Daily Living	753791	10	15	1
Tasks Related to Assistive Services in the Context of Short-Term and Critical Care	753804	11	60	4
Interventions in Short-Term Care Institutions or in Critical Care Settings	753815	12	75	5
Tasks in the Context of Home Care	753823	13	45	3
Entering the Workforce	753835	14	75	5



Part I

Program Objectives

Educational Aims

**Statements of the Competencies and
Grid of Competencies**

Harmonization

Program Objectives

The *Support for Assistive Services in Health and Social Services Institutions* vocational training program prepares students to practise the occupations of orderly (préposée et préposé aux bénéficiaires [PAB]), and health and social services assistant (HSSA).

PABs may work in various health and social services institutions such as in short-term or critical care units in hospitals (HCs), residential and long-term care centres (CHSLDs), rehabilitation centres (RCs), university institutes, and outpatient services. HSSAs provide home-care services through the local community service centres (CLSCs) and health and social services institutions.

Both occupations are controlled by current laws, regulations and standards, as well as by the policies, procedures and protocols of health and social services institutions.

Based on an intervention plan and a work plan, among others, PABs and HSSAs perform a set of tasks and activities that provide care to people of all ages, including newborns. Their work consists in providing support to these clients to help compensate for their disabilities and maintain or encourage their autonomy in carrying out their activities of daily living (ADL). In long-term care, PABs work mainly with seniors but also with adults who are experiencing a loss of autonomy.

PABs and HSSAs also have to plan their work and collaborate in activities related to the continuity of care and provide personal assistive care services related to ADL. They also collaborate in activities related to palliative and end-of-life care. They also carry out tasks related to the cleaning, disinfection and storage of equipment and materials, and the cleaning and tidying up of the surroundings. As part of their work, PABs and HSSAs are constantly concerned with preventing and controlling infections and contamination. They are equally concerned with preventing risks to the health and safety of clients, themselves and others, and with protecting the environment.

More specifically, PABs also carry out tasks related to the admission, departure, transfer and discharge of clients, in both short-term and long-term centres.

HSSAs may work in home settings or in alternative living environments. For home care, HSSAs help to support clients in organizing their living environment, taking into consideration family, social and cultural issues. They encourage the process of socializing clients and integrating them into occupational and community activities. HSSAs also provide non-invasive assistive care related to ADL (non-regulated activities).

PABs and HSSAs perform task-related essential activities which are ever-present in their work. These include interacting with clients and their entourage and establishing a professional relationship of trust, adapting their approach to different types of clients and dealing with family, social and cultural realities. Furthermore, they must adapt to different situations and work environments.

PABs and HSSAs work in interdisciplinary teams, within their scope of practice and responsibilities and respecting those of other intervenors. They communicate their observations about the client's condition, behaviours and needs and those of their entourage as well as about the situation, if applicable. In this way, they play a role in planning services, monitoring clients, and developing and carrying out care plans and intervention plans.

PABs and HSSAs must inform the professional concerned about changes in the client's condition or emergency situations.

Practising this occupation requires an extraordinary ability to adapt to the variety of clients and needs, multiple types of illnesses and disabilities, changing contexts, and equipment specific to each workplace. This requires that they act in accordance with strict professional ethics, and well-developed senses of responsibility and organization. Furthermore, their sense of observation enables them to pay careful attention to changes in the overall health of the client.

In practising their occupation, PABs are constantly adapting to changing situations because they deal with clients whose health is unstable. This means that they must intervene with prudence and discernment, and pay special attention to changes in the client's overall health. They must also manage stress, and demonstrate flexibility and an excellent ability to adapt. This requires that they act in accordance with strict professional ethics, and well-developed senses of responsibility, observation and organization.

The program goals of the *Support for Assistive Services in Health and Social Services Institutions* are based on the general goals of vocational training. These goals are as follows:

- To help students develop effectiveness in the practice of a trade or occupation, that is:
 - to teach students to perform roles, functions, tasks and activities associated with the trade or occupation upon entry into the job market
 - to prepare students to progress satisfactorily on the job (which implies having the technical and technological knowledge and skills in such areas as communication, problem solving, decision making, ethics, health and safety)
- To help students integrate into the workforce, that is:
 - to familiarize students with the job market in general, and with the specific context of their chosen trade or occupation
 - to familiarize students with their rights and responsibilities as workers
- To foster students' personal development and acquisition of occupational knowledge, skills, perceptions and attitudes, that is:
 - to help students develop their autonomy and ability to learn and acquire effective work methods
 - to help students understand the principles underlying the techniques and the technology used in the trade or occupation
 - to help students develop self-expression, creativity, initiative and entrepreneurial spirit
 - to help students adopt the attitudes required to successfully practise the trade or occupation, and instill in them a sense of responsibility and a concern for excellence
- To promote job mobility, that is:
 - to help students develop positive attitudes toward change
 - to help students develop the means to manage their careers by familiarizing them with entrepreneurship

Educational Aims

Educational aims encourage teachers to act in a given way whenever appropriate situations present themselves. These aims are constant and help students develop habits, attitudes and behaviours that help them integrate into the job market.

The educational aims of the *Support for Assistive Services in Health and Social Services Institutions* program are as follows:

- The ability to act in compliance with the laws, regulations and standards in force
- The ability to act in accordance with the rules and ethics of the occupations targeted and adopt the professional behaviours expected in the field of health and social services
- The ability to respect the dignity of clients and their entourage and consider each one as a whole
- The ability to respect the confidential nature of the information disclosed to them and demonstrate discretion
- The ability to adopt an approach that is focused on the needs of clients and those of their entourage
- The ability to become aware of the impact of their work on the health and safety of clients and on the quality of the environment
- The ability to establish and maintain harmonious working relationships
- The ability to watch over their own health and safety as well as that of clients and others

Statements of the Competencies

List of Competencies

- Analyze the occupations.
- Adopt relational approaches that encourage communication and collaboration.
- Prevent and control infections and contamination.
- Establish links between the client's condition and needs, and the changes and interventions required.
- Adapt their approach to the client's condition, behaviours or clinical reality.
- Provide personal assistive services related to activities of daily living in the context of long-term care.
- Adapt their approach and personal assistive services in the context of palliative and end-of-life care.
- Administer first aid and apply emergency measures.
- Intervene with clients experiencing a loss of autonomy in long-term care centres.
- Ascertain their limits with respect to administering medications and providing invasive assistive care related to activities of daily living.
- Perform tasks related to assistive services in the context of short-term and critical care.
- Provide assistive care to clients in short-term care institutions or critical care settings.
- Perform HSSA-related tasks in the context of home care.
- Enter the workforce in a long-term care centre, short-term care centre, critical care centre or in the context of home care.

Grid of Competencies

The grid of competencies shows the relationship between general competencies, which correspond to work-related activities, and specific competencies, which are required to practise the particular trade or occupation.

The grid shows the correlations between the elements that appear on the horizontal axis and those that appear on the vertical axis. The symbol (○) indicates a correlation between a general and a specific competency. Shaded symbols indicate that these relationships have been taken into account in the acquisition of specific competencies. The logic used in constructing the grid influences the course sequence. Generally speaking, this sequence follows a logical progression in terms of the complexity of the learning involved and the development of the students' autonomy. The vertical axis presents the specific competencies in the order in which they should be acquired and serves as a point of departure for determining how all of the competencies will be taught.

GRID OF COMPETENCIES														
SUPPORT FOR ASSISTIVE SERVICES IN HEALTH AND SOCIAL SERVICES INSTITUTIONS	Competency number	Type of Competency	Duration (in hours)	GENERAL COMPETENCIES										TOTAL
				Analyze the occupations.	Adopt relational approaches that encourage communication and collaboration.	Prevent and control infections and contamination.	Establish links between the client's condition and needs, and the changes and interventions required.	Adapt their approach to the client's condition, behaviours or clinical reality.	Provide personal assistive services related to activities of daily living in the context of long-term care.	Adapt their approach and personal assistive services in the context of palliative and end-of-life care.	Administer first aid and apply emergency measures.	Ascertain their limits with respect to administering medications and providing invasive assistive care related to activities of daily living.		
SPECIFIC COMPETENCIES	Competency number	Type of Competency	Duration (in hours)	1	2	3	4	5	6	7	8	10	375	
				B	B	B	B	B	B	B	B	B		
				30	60	30	45	45	90	30	30	15		
Intervene with clients experiencing a loss of autonomy in long-term care centres.	9	B	75	○	●	●	●	●	●	●	○			
Perform tasks related to assistive services in the context of short-term and critical care.	11	B	60	○	●	●	●	●	●	●	○			
Provide assistive care to clients in short-term or critical care settings.	12	B	75	○	●	●	●	●	●	●	○			
Perform HSSA-related tasks in the context of home care.	13	B	45	○	●	●	●	●	●	●	●	●		
Enter the workforce in a long-term care centre, short-term care centre, critical care centre or in the context of home care.	14	S	75	○	○	○	○	○	○	○	○	○		
Duration of the program			330										705	

Links between the general and specific competencies

- : Existence of a link
- : Application of a link

Harmonization

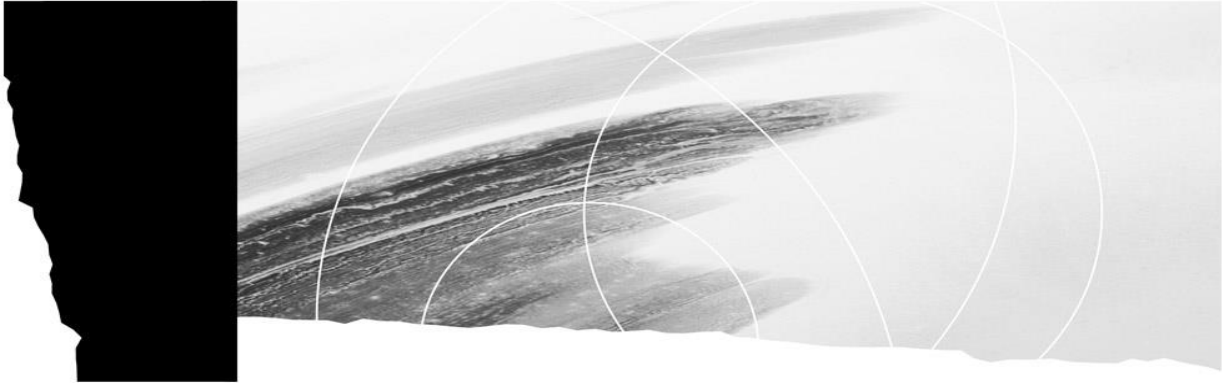
Harmonization of vocational and technical programs is a Ministerial orientation. It involves establishing similarities and continuity between secondary- and college-level programs within a particular sector or between sectors in order to avoid overlap in program offerings, to recognize prior learning and to optimize the students' progress.

Harmonization establishes consistency between training programs and is especially important in ensuring that the tasks of a trade or occupation are clearly identified and described. Harmonization makes it possible to identify tasks requiring competencies that are common to more than one program. Even if there are no common competencies, training programs are still harmonized.

Harmonization is said to be "inter-level" when it focuses on training programs at different levels, "intra-level" when it focuses on programs within the same educational level, and "inter-sector" when carried out between programs in various sectors.

An important aspect of harmonization is that it allows the common features of competencies to be identified and updated as needed. Common competencies are those that are shared by more than one program; once acquired in one program, they can be recognized as having been acquired in another. Competencies with exactly the same statement and elements are said to be identical. Common competencies that are not identical but have enough similarities to be of equal value are said to be equivalent.

Harmonization of the *Support for Assistive Services in Health and Social Services Institutions* program has resulted in identifying competencies that are shared with other programs. Detailed information on the harmonization of this program and its results is presented in the document entitled *Tableaux d'harmonisation Soutien aux services d'assistance en établissement de santé et de services sociaux*.



Part II

Program Competencies

Competency 1 Duration 30 hours Credits 2

Behavioural Competency

Statement of the Competency

Analyze the occupations.

Achievement Context

- For the occupations of PAB and HSSA practised in different care settings in health and social services institutions (in home settings for the HSSAs as well as in long-term and short-term care centres, including critical care centres for PABs).
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - recent data on the occupations of PAB and HSSA.
- Using:
 - digital and technological tools
 - necessary reference works and documents.

Elements of the Competency

1 Distinguish between the occupations of PAB and HSSA and describe their main characteristics.

- Correct distinction between the different workplaces in the public, private and community networks in the health and social services sector.
- Correct distinction between the tasks related to the occupations of PAB and HSSA.
- Association of the main tasks and the different sectors of activity.
- Accurate identification of the working conditions and requirements associated with each of the occupations.
- Accurate understanding of the limits of the scope of practice of the occupations.

2 Associate the skills, attitudes and professional behaviours expected and the ethical rules with work situations.

- Accurate connection of the professional skills and attitudes with the different tasks of the occupations.
- Accurate identification of the professional behaviours expected in exercising the occupations of PAB and HSSA.
- Accurate connection between the ethical rules of the occupation and work situations.

- | | | |
|---|---|--|
| 3 | Associate the practice of the occupations with the legislative, regulatory and normative aspects. | <ul style="list-style-type: none"> • Accurate identification of the laws, regulations and standards in the health and social services sector with respect to the occupations of PAB and HSSA. • Accurate connection between the laws, regulations and standards and work situations. |
| 4 | Associate the risks to the health and safety of clients, themselves and others with the rights and obligations set out in the legislative and regulatory framework. | <ul style="list-style-type: none"> • Accurate identification of the risks to the health and safety of clients, themselves and others with respect to the occupations of PAB and HSSA. • Connection made between the rights and obligations of workers and the legislative and regulatory framework for occupational health and safety. |
| 5 | Take measures to preserve and maintain their personal and professional equilibrium in exercising the occupations of PAB and HSSA. | <ul style="list-style-type: none"> • Accurate identification of the causes of stress and its impacts on their mental and physical health. • Accurate recognition of physical and emotional signs that they have reached their limits. • Determination of realistic and relevant means to: <ul style="list-style-type: none"> – prevent stress and improve their ability to manage it – maintain personal and professional equilibrium. |

For the competency as a whole:

- Appropriate use of the terminology associated with the occupations.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Terminology and abbreviations associated with the health sector
- 1 Distinguish between the occupations of PAB and HSSA and describe their main characteristics.
- Organization of the health and social services network: organization, types of institutions (CISSS, CIUSSS, unaffiliated institutions), mission of the institutions, types of clients served.
 - Workplaces in the public, private and community networks in the health and social services sector.
 - Characteristics of the job market and the occupations.

- Roles and tasks of PABs and HSSAs in the various care settings: respective roles, common tasks, specific tasks, work settings.
 - Working conditions: probationary period, verification of judicial records, and vaccinations.
 - Working conditions and remuneration: hourly rate and annual salary, fringe benefits, requirements with regard to the schedule and availability, work shifts.
 - Requirements of the occupation: physical requirements (wearing of personal protective equipment [PPE], standing for a long time, tight spaces, noise, odours, heat, repetitive movements, etc.) and mental requirements such as managing stress.
 - Continuing professional development: importance of keeping their knowledge and skills up to date.
 - Limits of the scope of practice of the occupations.
- 2 Associate the skills, attitudes and professional behaviours expected and the ethical rules with work situations.
- Cognitive, motor, kinesthetic and perceptual skills.
 - Professional attitudes: autonomy, empathy, positivity, interpersonal communication, good judgment, ability to adapt, openness, ability to work in a team, organizational skills, ability to listen, resilience and emotional maturity.
 - Professional behaviours expected: respect for the client, consideration of the person as a whole, a sense of responsibility, confidentiality and discretion, decorum, concern for their health and safety and that of clients and others, and the ability to take a critical look at themselves, etc.
 - Institutional policies on the promotion and demonstration of civility in the workplace.
 - Rules of professional ethics connected with work situations: human rights, responsibilities of PABs and HSSAs, situations of an ethical nature and social networks.
 - Rules and code of conduct of health and social services institutions.
 - Interventions in situations of an ethical nature.
 - Information security: rules and confidentiality, and personal information.
- 3 Associate the practice of the occupations with the legislative, regulatory and normative aspects.
- Laws, regulations and standards in the health and social services sector:
 - *Act respecting health services and social services*
 - *Charter of human rights and freedoms* (CQLR, c. C-12)
 - *Regulation respecting the certification of private seniors' residences.*
- 4 Associate the risks to the health and safety of clients, themselves and others with the rights and obligations set out in the legislative and regulatory framework.
- Rights and responsibilities of workers associated with the *Act respecting occupational health and safety*, the *Act respecting industrial accidents and occupational diseases* and the *Act respecting health services and social services*.
 - Rights and obligations of employers.
 - Risks to the health and safety¹ of clients, themselves and others.
 - Principal means of preventing occupational health and safety risks.

¹ The means of preventing risks to the health and safety of clients are covered later on in the competencies concerned.

- 5 Take measures to preserve and maintain their personal and professional equilibrium in exercising the occupations of PAB and HSSA.
- Stress factors in the workplace.
 - Physical, psychological, emotional and psychosocial manifestations and signs linked to stress and to personal and professional imbalance.
 - Signs that they have reached their limits: fatigue, sadness, impatience and decline in vigilance.
 - The *Act respecting labour standards* and policies of institutions with regard to harassment in the workplace.
 - Ways to assess their ability to deal with stress.
 - Ways of preventing and managing stress.
 - Helpful attitudes and behaviours in stressful situations.
 - Measures to maintain personal and professional equilibrium and prevent imbalance.

Competency 2 Duration 60 hours Credits 4

Behavioural Competency

Statement of the Competency

Adopt relational approaches that encourage communication and collaboration.

Achievement Context

- In everyday situations encountered by PABs and HSSAs that require communication and collaboration in care settings (in home settings as well as in long-term and short-term care centres, including critical care centres).
- For all types of oral and written communications.
- For all types of clients.
- With the client and the client's entourage, the care team and the interdisciplinary team.
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force.
- Using:
 - digital and technological tools (care planning software, communication tools, etc.)
 - necessary reference works and documents.

Elements of the Competency

- 1 Establish a professional relationship of trust with the client and the client's entourage.

Performance Criteria

- Accurate identification of basic principles of communication as well as the factors that facilitate and those that interfere with communication.
- Appropriate connection made between verbal and non-verbal communication techniques and various situations.
- Accurate identification of characteristics and behaviours conducive to establishing a professional relationship of trust.
- Careful observation of the client's emotional state and the reactions of the client and their entourage.

- 2 Note information related to the family and social context of the client and of the client's entourage in order to ensure continuity of care.
 - Relevant association between the way the family functions and the nature of family relations.
 - Accurate recognition of factors likely to disrupt family relations and their possible consequences.
 - Accuracy of observations concerning the client's behaviours and those of their entourage.
 - Use of relevant means to identify signs of abuse and problematic social situations.
 - Transmission of relevant information to the professionals concerned.

- 3 Identify information related to the specific multicultural characteristics of the client and their entourage.
 - Accurate recognition of the consequences of social integration problems.
 - Accurate recognition of the specific characteristics of a multicultural clientele that have an impact on the provision of assistive services.
 - Accurate recognition of the attitudes and behaviours to adopt that foster inclusiveness with respect to multicultural aspects, diversity and Indigenous cultural safety.
 - Transmission of relevant information to the professionals concerned.

- 4 Adapt their communication style and approach to different types of clients and their entourages.
 - Use of appropriate techniques and approaches for facilitating communication with a child or adolescent.
 - Use of techniques and approaches adapted to seniors.
 - Adaptation of vocabulary and language level to the client and their entourage.
 - Use of appropriate techniques and approaches for facilitating communication with a client who has sensory impairments.
 - Use of appropriate techniques and approaches for facilitating communication with an aphasic client.

- 5 Help clients to participate in occupational activities.
- Accurate recognition of the impacts of occupational inactivity on the client.
 - Accurate distinction made between the roles and responsibilities of the members of the care team and the interdisciplinary team with respect to occupational activities.
 - Noting of relevant information pertaining to the client's capabilities, limitations, interests and social integration difficulties.
 - Use of means adapted to the client that enable an occupational activity to be carried out.
 - Carefully phrased offer of accompaniment appropriate to an occupational activity in accordance with the client's condition.
- 6 Collaborate with the care team and the interdisciplinary team.
- Accurate distinction made between the roles, expertise and responsibilities of the members of the care team and the interdisciplinary team.
 - Accurate recognition of the consequences of not complying with the consensus and with decisions made by the team.
 - Accurate recognition of activities related to the continuity of care and their impacts on and importance to the client and their entourage.
 - Accurate recognition of the various sources of pertinent information related to the continuity of care.
 - Accurate recognition of the procedures with regard to means of communication related to the continuity of care.
 - Proper use of the most common terminology and abbreviations related to the occupation.
 - Demonstration of attitudes and adoption of appropriate behaviours that promote teamwork.
- 7 Interact in work situations that involve conflict or are problematic.
- Accurate recognition of situations likely to have an adverse effect on the quality of the work and their possible consequences.
 - Demonstration of attitudes and adoption of an appropriate approach and behaviours that promote the prevention and resolutions of situations that involve conflict or are problematic.
 - Use of appropriate means to prevent and deal with work situations that involve conflict or are problematic.

For the competency as a whole:

- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Observance of the rules of civility and politeness as well as those associated with the use of professional language.
- Demonstration of attitudes and behaviours that promote harmonious and respectful interpersonal relationships.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Civility in the workplace: definitions, rules of civility, respectful and civil behaviours, importance of adopting respectful and civil behaviours and attitudes, definition of incivility, consequences of incivility.
 - Rules of politeness and discretion.
 - Appropriate forms of address.
 - Attitudes and behaviours to be adopted and to be avoided.
 - Demonstration of openness and attentive listening.
 - Demonstration of respect for the client: relational approach and dignity.
 - Consideration of the person as a whole: biological, psychological, sociological, cultural and spiritual aspects as well as those linked to diversity and Indigenous cultural safety.
 - Demonstration of a sense of responsibility: judgment and problem solving.
 - Confidentiality.
 - Demonstration of concern for the health and safety of the client, themselves and others: respect for their personal limits.
- 1 Establish a professional relationship of trust with the client and the client's entourage.
- Basic elements of communication
 - Communication techniques: process (sender, receiver, message, context, answer, etc.), nature (verbal or non-verbal), obstacles and difficulties that affect communication (language, age difference, prejudices and stereotypes, etc.)
 - Verbal and non-verbal communication techniques: echoing, rephrasing, silence, open and closed questions, etc.
 - Verbal and non-verbal signs indicating that the client is receptive or not.
 - Characteristics of a professional relationship of trust.
 - Means to use to establish a professional relationship of trust: consideration of the client's age and opinions, offering choices, keeping promises, meeting needs, age-appropriate treatment of the client.
 - Ways of demonstrating interest in the client: listening, asking questions, eye contact, body language and attitudes.
 - Reactions to watch for: emotional and relational signs.

- 2 Note information related to the family and social context of the client and of the client's entourage in order to ensure continuity of care.
 - Main types of families: traditional, blended, extended and single-parent.
 - Family set-up and how it affects the nature of family relations: roles of members, rules and expectations.
 - Impacts of certain events likely to disrupt family relations, such as mourning, illness, taking over responsibility for a parent, separation.
 - Impacts of certain problems on family relations: family violence, sexual abuse, negligence and weak parenting skills.
 - Impact of the social environment on the client and family: economic, cultural and relational aspects.
 - Importance of informal caregivers in the entourage surrounding the person in need of care and services.
 - Working relationship between the client and informal caregiver: role and responsibilities of the informal caregiver, influence on the client, impact on the life of each of them, helpful and harmful behaviours.
 - Definition and signs of various forms of abuse: physical, institutional, psychological and financial.
 - Risk and vulnerability factors: conflicts, isolation, situation of dependency, advanced age and illiteracy.
 - Personal and relational consequences of abuse: withdrawal into oneself, permanent after-effects and suicidal thoughts.
 - Identification of signs of a social problem: abuse, dependence, violence and weak parenting skills.
 - The roles of the different workers depending on the problematic situation.

- 3 Identify information related to the specific multicultural characteristics of the client and their entourage.
 - Manifestations of difficulties affecting the client's social integration.
 - Environmental factors linked to social integration problems: marginality and social prejudices.
 - Consequences of social integration problems: loss of self-esteem and isolation.
 - Specific characteristics of a multicultural clientele: family relations, religion, habits, values, beliefs, customs and language barriers.
 - Indigenous cultural safety: continuum of cultural safety and humility.
 - Best practices with respect to inclusion.
 - Means of communication to favour or avoid, depending on the culture of the client and their entourage.

- 4 Adapt their communication style and approach to different types of clients and their entourages.
 - Specific characteristics of communicating with a child or an adolescent.
 - Specialized approach to senior care (approche adaptée à la personne âgée [AAPA]) in hospital settings: needs and specific characteristics of seniors and intervention strategies.
 - Adaptation of language level to the situation, the client's comprehension level, age, etc.
 - Needs of clients who have sensory impairments and clients who are aphasic.
 - Specific techniques and approaches to facilitate communication for clients who have sensory impairments and clients who are aphasic.

- 5 Help clients to participate in occupational activities.
 - Impacts of inactivity on the physical, cognitive, emotional and social levels.
 - Role and responsibilities of the care team and the interdisciplinary team: support, target needs, suggest activities and resources, directed activities.
 - Recognition of the experiential knowledge possessed by the client's entourage.
 - Client's interests, establishment's resources, institutional policies, available budget.

- 6 Collaborate with the care team and the interdisciplinary team.
 - Role, expertise, responsibilities and scope of practice, if applicable, of the members of the care and interdisciplinary teams, depending on the setting: nursing assistant, nurse, doctor, pharmacist, respiratory therapist, occupational therapist, physiotherapist, etc.
 - Sources of information related to the continuity of care, depending on the different settings: care plan and work plan, therapeutic nursing plan (TNP), interdisciplinary intervention plan and communication tools.
 - Various means of transmitting information to the people concerned or the team: interdepartmental report, communication tools.
 - Importance of communication to ensure the continuity of care and safety of the client: change in the client's emotional state, client's discourse, information provided by the client's entourage.
 - Timing of communication of information: after observing a significant change in the client or when leaving the premises.
 - Use of the most common terminology and abbreviations related to the occupations.
 - Characteristics of the partnership approach.
 - Professional behaviours that facilitate teamwork: punctuality, attendance, proper language, respect for the opinions of others and listening.
 - Rules for ensuring the team works well: climate and understanding the tasks of each member.
 - Effective coordination of their activities with those of other team members.
 - Demonstration of being open-minded, flexible and receptive in dealing with team members.
 - Importance of maintaining satisfactory relationships with team members in situations involving great stress.

- 7 Interact in work situations that involve conflict or are problematic.
 - Definition and characteristics of a conflict, and types of interpersonal conflicts (disengagement, decision-making method, leadership style and power-seeking).
 - Sources of problematic work situations that could result in conflicts at work.
 - Means to prevent and deal with work situations that involve conflict or are problematic and means to de-escalate a conflict.
 - Importance of listening, flexibility and open-mindedness with regard to a differing point of view.
 - Means designed to help express oneself clearly and respectfully.
 - Conflict resolution process, search for a consensus-based solution and means of intervention that are appropriate for the situation.
 - Communication techniques in situations involving conflict.
 - Techniques for defusing difficult situations.

Competency 3 Duration 30 hours Credits 2

Behavioural Competency

Statement of the Competency

Prevent and control infections and contamination.

Achievement Context

- In everyday situations encountered by PABs and HSSAs that present risks connected to the prevention and control of infections and contamination in various care settings (in home settings as well as in long-term and short-term care centres, including critical care centres).
- For all types of clients.
- Using measures designed to prevent and control infections and contamination in various care settings.
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - based on verbal and written information and instructions
 - manufacturers' instructions.
- Using:
 - personal protective equipment (PPE)
 - the necessary equipment, devices, materials and products
 - signage concerning additional precautions
 - necessary reference works and documents such as practice guides and technical data sheets.

Elements of the Competency

- 1 Detect the risks of infection and contamination.

Performance Criteria

- Accurate identification of systemic and localized manifestations of an inflammation and an infection.
- Relevant establishment of connections between the modes of transmission and the contamination.
- Accurate identification of factors that make people vulnerable to pathogens and infection.
- Accurate identification of situations that present risks of infection and contamination.

- 2 Apply the basic practices for preventing and controlling infections and contamination.
 - Accurate identification of situations requiring the application of basic practices.
 - Accurate identification of the consequences of not complying with basic practices.
 - Proper application of basic practices including the rules for hand hygiene at opportune moments.
 - Compliant choice, putting on, wearing, removal, disposition and disposal of throw-away or reusable PPE, in the appropriate places and at the appropriate times.

- 3 Take additional precautions for certain pathogenic agents or infections.
 - Correct interpretation of pictograms related to additional precautions.
 - Correct application of additional precautions at the appropriate times and in the required places.
 - Accurate identification of the consequences of not taking additional precautions.
 - Appropriate preparation, installation and organization of the required equipment and materials linked to additional precautions.
 - Full stocking of required materials in the appropriate places and at the opportune times.

- 4 Prevent risks associated with the handling, disposition and disposal of soiled and contaminated equipment, devices and materials, and of instruments with sharp points and cutting edges.
 - Accurate recognition of the consequences of improper handling of:
 - soiled and contaminated equipment, devices and materials
 - instruments with sharp points and cutting edges.
 - Compliance with handling procedures for:
 - soiled and contaminated equipment, devices and materials
 - instruments with sharp points and cutting edges.
 - Correct application of procedures intended to prevent cross-contamination.
 - Compliant and environmentally friendly disposition and disposal of soiled and contaminated materials and instruments with sharp points and cutting edges at the appropriate times and in the appropriate places.

- 5 Prevent risks related to the cleaning, disinfection and storage of equipment, devices, materials, and the surroundings.
- Accurate interpretation of the hazardous materials information sheets, guidelines and manufacturers' instructions.
 - Accurate recognition of the consequences of not complying with the guidelines and the cleaning and disinfection methods.
 - Compliance with guidelines and schedules associated with cleaning, disinfection and maintenance of the equipment, devices, materials, personal effects and work surfaces.
 - Observance of cleaning and disinfection methods.
 - Cleanliness of the equipment and devices.
 - Proper and secure storage of the equipment, devices and materials and tidying up of the surroundings.
 - Full stocking of required materials in the appropriate places and at the opportune times.
- 6 Prevent other risks to the health and safety of clients, themselves and others that are linked to the prevention and control of infections.
- Correct understanding of the rules and standards in force with regard to personal and professional hygiene.
 - Correct identification of the consequences of non-compliance with rules and standards for decorum related to the occupation.
 - Compliance with protocols and procedures in the case of an incident or accident.
 - Compliance with guidelines, standards and protocols related to the prevention and control of infections.
 - Compliant and ergonomic handling of the equipment, devices and materials.
 - Observance of methods intended to prevent contamination of clean equipment, devices and materials.
 - Reporting of situations that pose a risk to health and safety to the professional concerned at opportune times.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.

- Observance of the limits of the scope of practice of the occupation.
- Compliance with verbal and written instructions.
- Clear, concise and accurate transmission of relevant information to the people concerned at the opportune times.
- Transmission of relevant information to the client and their entourage.
- Proper use of the terminology and abbreviations related to the occupation.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Terminology specific to the competency.
- Demonstration of a sense of responsibility: judgment, honesty in reporting cases of contagion, and collaboration with the care and interdisciplinary teams.
- Decorum: professional attire, proper language and respectful discourse.

1 Detect the risks of infection and contamination.

- The human body's defence mechanisms: systemic and localized manifestations of inflammation and infection.
- Factors likely to increase a client's vulnerability to infection and pathogenic agents.
- Factors likely to increase a client's resistance to infection and pathogenic agents.
- Chain of transmission of pathogenic agents or infection (cycle of infection: infectious agent, source [reservoir], routes of transmission, modes of transmission, entry into the body and susceptible host).
- Situations presenting risks of contamination, infection or transmission of pathogenic agents.

2 Apply the basic practices for preventing and controlling infections and contamination.

- Definition and constituent elements of basic practices.
- Importance of consulting workplace guidelines and protocols.
- Connections between modes of transmission and basic practices.
- Indications and methods with regard to basic practices: washing of hands (soap, antimicrobial agent, indications and times required for hand washing, methods associated with the washing of hands), wearing of the proper PPE for the situation (gloves, gown, mask), care items, handling of instruments that have sharp points and cutting edges, soiled and contaminated bedding and linens.
- Importance of applying basic practices and of the consequences of non-compliance.

3 Take additional precautions for certain pathogenic agents or infections.

- Connections between routes of transmission and the precautions to be taken, instructions regarding the taking of these precautions.
- Additional precautions to be taken to prevent direct contact, droplet and airborne transmission.

- Precautions to be taken in cases of combined routes of transmission: additional precautions to prevent droplet and direct contact, and airborne transmission and direct contact.
 - Specific precautions to be taken to protect immunosuppressed clients.
 - Interpretation of the additional precautions sheets in various workplaces.
 - Impacts of these precautions on the client and the consequences of not taking them.
 - Types of PPE and their indications: regular mask, high-power filter mask, long-sleeved gown.
 - Methods and rules associated with the putting on, wearing, removal, disposition and disposal of PPE.
 - Preparation, installation and organization of equipment and materials for the different settings: preparation of PPE, posting of information sheets and organization of the work area.
 - Stocking of required materials in the appropriate places and at the opportune times.
- 4 Prevent risks associated with the handling, disposition and disposal of soiled and contaminated equipment, devices and materials, and of instruments with sharp points and cutting edges.
- Situations involving risk in the workplace: forgotten needles, non-compliance with precautions to be taken, heavy workload, clients' hygiene habits, etc.
 - Workplace protocols: storage areas, contaminated materials, responsible and environmentally friendly waste management.
 - Handling of biofluids such as blood, feces, urine or secretions.
 - Protocols for the handling and disposition of soiled and contaminated equipment, devices and materials, and of instruments with sharp points or cutting edges.
 - Measures for preventing cross-contamination: distance between what is clean and what is soiled, appropriate disposal and storage places for materials, equipment and routes reserved for transporting soiled materials, equipment and routes reserved for transporting clean and sterile materials, sequence and measures to be observed when providing several assistive services consecutively to the same client, sequence and measures to be observed when providing assistive services to more than one client in the same room.
 - Disposal of biomedical waste in a responsible and environmentally friendly manner.
 - Impacts of non-compliance with these standards on contamination of the environment, materials, devices and tools as well as on the health and safety of clients.
- 5 Prevent risks related to the cleaning, disinfection and storage of equipment, devices, materials, and the surroundings.
- Biofilm: definition, proliferation factors, consequences and impacts on clients, themselves and others, prevention methods.
 - Principles associated with cleaning and disinfection and their indications.
 - Risks associated with using cleaning and disinfecting products.
 - Types, characteristics, indications, contraindications and use of cleaning and disinfecting products: order of application, dilution, manufacturers' instructions, contact time, storage, disposition and disposal.
 - Impacts of inadequate cleaning on disinfection.
 - Methods for disposing of hazardous materials in a safe and environmentally friendly manner.
 - Workplace Hazardous Materials Information System (WHMIS).
 - Guidelines associated with cleaning and disinfection of the equipment, devices, materials, personal effects and surroundings, depending on the setting: cleaning of shelves, telemetry, and water bottles at the bedside.
 - Cleaning and disinfection methods in accordance with the protocols and procedures in force: steps to take before, during and after performing the task.
 - High-touch zones in the surroundings: elevator buttons, call buttons, telephones, sinks, door knobs and bed rails.

- 6 Prevent other risks to the health and safety of clients, themselves and others that are linked to the prevention and control of infections.
- Rules and standards in force with regard to personal and professional hygiene: attire.
 - Consequences of non-observance of professional decorum with regard to attire, changing attire, shoes, finger nails and jewellery.
 - Immediate reporting of certain contaminations such as blood and other biofluids: protocols to follow in case of contact with biofluids.
 - Actions to take in the case of an incident or accident: definition and types of incidents and accidents, importance of reporting incidents and accidents and liability in this regard, relevant information to be communicated depending on the incident or accident, filing of the *Rapport de déclaration d'incident ou d'accident* (declaration of an incident or accident report, form AH-223) of the Ministère de la Santé et des Services sociaux, protocols to follow in cases of incidents and accidents.
 - Standards, protocols and guidelines to be respected with regard to the prevention and control of infections: measures to be taken if there are symptoms of infection, of skin lesions, vaccinations for health professionals and respiratory etiquette.
 - Ergonomic methods to use when moving heavy loads: equipment, devices, boxes of materials and bags of soiled linen.
 - Importance of keeping the areas clean and uncluttered, safe organization of the surroundings and work area as well as the storage in those areas.
 - Methods for preventing contamination of the clean equipment, devices and materials: handling, transportation and storage.
 - Reporting to the professional concerned.

- 3 Observe a client with cardiovascular, respiratory, urinary and reproductive system diseases.
 - Accurate identification of the characteristics of normal breathing.
 - Accurate observations on the appearance of the urine.
 - Accurate identification of the main observable manifestations related to cardiovascular, respiratory, urinary and reproductive system diseases.
 - Relevant connection between the client's condition and their needs.
 - Accuracy of observations noted.
 - Appropriate identification of the objective and subjective signs and symptoms that must be reported immediately.

- 4 Observe a client with digestive, endocrine, immune and lymphatic system diseases.
 - Accurate identification of the general signs of dehydration and malnutrition.
 - Accurate observations on the quality of the feces.
 - Accurate identification of the main observable manifestations related to digestive, endocrine, immune and lymphatic system diseases.
 - Accurate recognition of signs of discomfort associated with cancer treatments.
 - Relevant connection between the client's condition and their needs.
 - Accuracy of observations noted.
 - Appropriate identification of the objective and subjective signs and symptoms that must be reported immediately.

- 5 Make connections between the client's condition, the interventions and the instructions from the professionals concerned.
 - Relevant connections made between the interventions in the care plan and the instructions received and the client's condition.
 - Accurate identification of the consequences of not following the instructions from the professionals concerned.
 - Relevant connections made between precautions and measures to take and the client's condition.
 - Relevant connections made between the interventions and the manifestations observed and the client's needs.

For the competency as a whole:

- Compliance with laws, regulations and standards in force.
- Observance of the limits of the scope of practice of the occupation.
- Consideration of the client as a whole².
- Noting of pertinent information related to the client in the appropriate documents.
- Clear, concise and accurate transmission of information to the people concerned at the opportune times.
- Proper use of the terminology and abbreviations related to the occupation.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
- Terminology specific to the competency.
- Respect for the client: decision-making and functional autonomy.
- Demonstration of a sense of responsibility: development of autonomy, judgment and limits of the scope of their practice.
- Demonstration of concern for the health and safety of the client, themselves and others: vigilance and situations to be reported immediately.

1 Identify the client's needs.

- Repercussions of health problems or changes on the needs of the client, depending on their age group: isolation, academic delay, distortion of body image, loss of autonomy, dependency, diminishing physical, sensory and psychomotor capacities.
- Disruptive events: illness, accident, separation, caring for a sick or aging parent, grief and change of living environment.
- Changes and consequences associated with normal aging in seniors: AINÉES signs, intervention methods and strategies.
- Needs in accordance with the age group: child, adolescent, adult, senior.
- Client needs, depending on their condition: nourishment, hydration, elimination, sleep, safety, hygiene, mobility and occupational activities.

² Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety

- 2 Observe a client with musculoskeletal, nervous and sensory system diseases.
 - Objective and subjective signs of pain and discomfort.
 - Characteristics of healthy skin: colour and warmth.
 - Characteristics of signs of skin lesions: dermatitis (eczema), psoriasis, cellulite, lesions from scratching and presence of parasites.
 - Characteristics of the early warning signs of pressure sores.
 - Main observable manifestations related to musculoskeletal, nervous and sensory system diseases
 - arthritis and osteoarthritis
 - osteoporosis and fractures
 - cerebrovascular accident
 - multiple sclerosis
 - Parkinson's disease
 - cerebral palsy
 - eye diseases (glaucoma and cataracts).
 - Needs associated with musculoskeletal, nervous and sensory system diseases: mobility, nourishment, elimination, keeping skin healthy and safety.
 - Objective and subjective signs and symptoms that must be reported immediately.

- 3 Observe a client with cardiovascular, respiratory, urinary and reproductive system diseases.
 - Characteristics of normal breathing.
 - Appearance of the urine: colour, odour, frequency and quantity.
 - Main observable manifestations related to cardiovascular, respiratory, urinary and reproductive system diseases
 - chronic obstructive pulmonary diseases
 - respiratory infections (infection of the upper respiratory tract and pneumonia)
 - heart failure
 - angina and myocardial infarction
 - high blood pressure and orthostatic hypotension
 - urinary tract infection
 - kidney failure
 - renal lithiasis and renal colic
 - cystocele and uterine prolapse
 - prostatic hypertrophy
 - Needs associated with cardiovascular, respiratory, urinary and reproductive system diseases: mobility, nourishment and hydration, elimination, keeping skin healthy and safety
 - Objective and subjective signs and symptoms that must be reported immediately.

- 4 Observe a client with digestive, endocrine, immune and lymphatic system diseases.
 - General signs of dehydration and malnutrition.
 - Quality of the feces: frequency, quantity and quality.
 - Main observable manifestations related to digestive and endocrine, immune and lymphatic system diseases:
 - diabetes, signs of hypoglycemia
 - gastroenteritis
 - gastrointestinal ulcer
 - hepatitis and cirrhosis
 - cancer.
 - Signs of discomfort associated with cancer treatments.
 - Needs associated with digestive and endocrine, immune and lymphatic system diseases: nourishment and hydration, safety, keeping skin healthy and elimination.
 - Objective and subjective signs and symptoms that must be reported immediately.

- 5 Make connections between the client's condition, the interventions and the instructions from the professionals concerned.
 - Connections between the interventions in the work plan, instructions received and the client's condition: positioning, mobility, elimination schedule and specific characteristics of intervention.
 - Consequences of not following the instructions from the professionals concerned.
 - Precautions and measures to take depending on the client's condition: positioning, hydration, vigilance and helping the client to move.
 - Impact of multipathology on the client.

Competency 5 Duration 45 hours Credits 3

Behavioural Competency

Statement of the Competency

Adapt their approach to the client's condition, behaviours or clinical reality.

Achievement Context

- For everyday situations encountered by PABs and HSSAs working in different care settings (in home settings as well as in long-term and short-term care centres, including critical care centres).
- For all types of clients
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - verbal and written information and instructions.
- Using:
 - documents and information concerning the client and the continuity of care (care plan, work plan, nurses' instructions, etc.)
 - necessary reference works and documents.

Elements of the Competency

- 1 Observe a client with neurodevelopmental disorders, severe neurocognitive disorders and mental health problems.

- 2 Use an adapted approach and means intended to prevent inappropriate behaviours and to encourage collaboration on the part of the client with neurodevelopmental disorders.

Performance Criteria

- Accurate identification of the main manifestations associated with:
 - neurodevelopmental disorders
 - severe neurocognitive disorders
 - mental health disorders.
- Relevant connection between the client's condition, reactions, behaviours, needs and the situation.
- Accuracy and relevance of observations made.

- Accurate identification of the client's capabilities and needs.
- Accurate identification of factors likely to result in inappropriate behaviours.
- Proper choice and careful use of concrete means of preventing inappropriate behaviours.
- Proper choice and careful use of means to facilitate the provision of personal assistive services for ADL.
- Appropriateness of the approach adopted.

- 3 Use an adapted approach and means intended to reduce the impacts of the behaviours and reactions on the part of a client with mental health problems and encourage collaboration on their part.

 - Accurate understanding of the importance of applying the instructions in the intervention plan and the consequences of not following them.
 - Consideration of the information concerning the client's condition and the situation.
 - Accurate identification of the client's needs.
 - Proper choice and careful use of concrete means to reduce the impact of behaviours and reactions associated with the client's condition.
 - Proper choice and careful use of concrete means to facilitate the provision of personal assistive services for ADL.
 - Appropriateness of the approach adopted.
- 4 Use an adapted basic approach and means intended to prevent behavioural and psychological symptoms of dementia (BPSD) and to encourage collaboration on the part of the client with severe neurocognitive disorders.

 - Accurate identification of the client's capabilities and needs.
 - Accurate identification of factors likely to trigger BPSD.
 - Careful use of the basic approach with a client presenting BPSD.
 - Proper choice and careful use of concrete means to prevent BPSD and facilitate the provision of services.
- 5 Use an adapted approach and means intended to reduce BPSD and to encourage collaboration on the part of the client with severe neurocognitive disorders.

 - Accurate identification of the client's manifestations, reactions, behaviours and needs.
 - Careful use of an approach adapted to the client's behaviours and reactions and to the situation.
 - Careful use of concrete means to reduce BPSD and facilitate the provision of services.
 - Correct application of the process to be followed in cases where the client refuses personal assistive services.
- 6 Use an adapted approach and means intended to develop or maintain the client's autonomy and capabilities.

 - Consideration of the information concerning the client's level of autonomy and capabilities.
 - Accurate understanding of the importance of adhering to the schedules and timetables of activities and the consequences of not adhering to them.
 - Careful use of means adapted to the client's condition.
 - Careful use of means intended to maintain the client's cognitive abilities.
 - Appropriateness of the approach adopted.

- 7 Take action with clients experiencing a crisis episode or manifesting aggressive behaviours.
- Accurate recognition of warning signs of a crisis episode.
 - Correct recognition of a crisis episode, specific behaviours and signs of aggressiveness.
 - Accurate identification of risky behaviours and suicidal tendencies.
 - Immediate reporting of any crisis situation, suicidal thoughts or specific behaviours to the professional concerned.
 - Appropriate and cautious use of means intended to prevent or de-escalate a crisis situation.
 - Appropriateness of the approach adopted.

For the competency as a whole:

- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Compliance with verbal and written instructions.
- Consideration of the client as a whole.
- Appropriate establishment of a professional relationship of trust.
- Relevant observations made on the client's condition.
- Clear, concise and accurate transmission of relevant information to the people concerned at the opportune times.
- Proper use of the terminology and abbreviations related to the occupation.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Reporting of observations about the behaviours, reactions and condition of the client and the situation to the professional concerned.
- Relevant information to be noted: sudden change in behaviours or habits and atypical behaviours.
- Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
- Terminology specific to the competency.
- Respect for the client: relational approach, respect for the client's dignity and potential.
- Sense of responsibility: development of autonomy through the choices to be made, judgment, problem solving and communication with the care and interdisciplinary teams.
- Confidentiality and discretion: with regard to private life and secrets confided.
- Decorum: professional attire, proper language and respectful discourse.
- Health and safety of the client, themselves and others: vigilance and respect for personal limits.

- 1 Observe a client with neurodevelopmental disorders, severe neurocognitive disorders and mental health problems.
 - Main manifestations associated with neurodevelopmental disorders: disorder or disease causing intellectual disabilities (e.g. trisomy 21) and pervasive developmental disorder (e.g. autism spectrum disorder [ASD]).
 - Main manifestations associated with severe neurocognitive disorders: degenerative disorder of the nervous system (e.g. Parkinson's disease), Alzheimer's disease, vascular dementia, Lewy body dementia (Review of Competency 4).
 - Main manifestations associated with mental health problems: psychotic disorders, mood disorders, anxiety disorders, somatoform disorders, and personality and behaviour disorders.
 - Manifestation of certain disorders involving stages of progression: Reisberg scale, cognitive regression and cycles of bipolar disorder.
 - Triggers, risk factors, genetic aspect and disrupted lifestyle habits.
 - Consequences for the client and their environment: physical, intellectual, emotional, family and social aspects; prejudices; neglect of everyday and domestic activities.

- 2 Use an adapted approach and means intended to prevent inappropriate behaviours and to encourage collaboration on the part of the client with neurodevelopmental disorders.
 - Client's stage of development: physical, cognitive, social and emotional.
 - Client's capabilities and needs in accordance with their condition: level of autonomy.
 - Importance of routines, rituals and lifestyle habits.
 - Factors likely to trigger inappropriate behaviours: a task that is too difficult, fatigue and lack of motivation.
 - Approaches and means of preventing inappropriate behaviours: presence, availability, withdrawal, change in activity and intentional ignoring.
 - Means of facilitating the provision of personal assistive services for ADL: consideration of the client's stage of development as well as their routines and rituals.

- 3 Use an adapted approach and means intended to reduce the impacts of the behaviours and reactions on the part of a client with mental health problems and encourage collaboration on their part.
 - Consequences of non-compliance with instructions connected with the intervention plan: overstepping limits and inconsistent interventions.
 - Concern for the client's condition: physical, intellectual, emotional and social signs, ability to listen and level of anxiety.
 - Means of reducing the impact of behaviours and reactions: approaches to adopt in cases of delirium, hallucination, suicidal thoughts and inappropriate behaviours.
 - Problem-solving process: become aware of the problem, observe the situation, look for solutions, choose the way to adapt their intervention, and plan their intervention, staying within the limits of the scope of practice of the occupation.
 - Appropriate choice of means to facilitate the provision of personal assistive services for ADL: staying within the established limits, choice of moment.

- 4 Use an adapted basic approach and means intended to prevent behavioural and psychological symptoms of dementia (BPSD) and to encourage collaboration on the part of the client with severe neurocognitive disorders.
 - Client's capabilities and needs: stage of the dementia and level of autonomy.
 - Definition of BPSD and observable behavioural symptoms.
 - Factors likely to trigger behavioural and psychological symptoms of dementia: inadequate strategy (80% of BPSD), unmet needs, pain, physical environment, social environment and change of routine.
 - Importance of respecting lifestyle habits, routines and instructions in the work plan or the intervention plan: information on the client's life story.
 - Basic approach with a client presenting behavioural and psychological symptoms of dementia: adapted basic approach.
 - Means of preventing the appearance of behavioural and psychological symptoms of dementia: appropriate approach, layout of premises, increased surveillance, recreational or occupational activities, entertainment, change in location, safe and secure areas for wandering and exercise program.

- 5 Use an adapted approach and means intended to reduce BPSD and to encourage collaboration on the part of the client with severe neurocognitive disorders.
 - Problem-solving process: become aware of the problem, observe the situation, look for solutions, choose the way to adapt their intervention, and plan their intervention.
 - Approach adapted to the client's behaviours and reactions and to the situation.
 - Use of means that encourage collaboration: reformulation, validation, diversion, decisional strategy, adapted active listening and therapeutic touch.
 - Process to be followed in cases where the client refuses personal assistive services: change the way the request is made, come back later, etc.

- 6 Use an adapted approach and means intended to develop or maintain the client's autonomy and capabilities.
 - Client's potential in terms of their capabilities, limitations, preferences and interests.
 - Consequences of not adhering to the schedules and timetables of activities: isolation and BPSD.
 - Means adapted to the client's condition: means of promoting social integration, simplification of tasks, experimentation with new situations and involvement of the client's entourage.
 - Means intended to maintain the client's cognitive abilities: means of stimulation and occupational activities.

- 7 Take action with clients experiencing a crisis episode or manifesting aggressive behaviours in a situation.
 - *Act respecting the protection of persons whose mental state presents a danger to themselves or to others.*
 - Warning signs of a crisis situation: anxiety, physical and verbal manifestations.
 - Characteristics and manifestations of delirium.
 - Crisis episode, specific behaviours and signs of aggressiveness: violence, delirium, aggressiveness and suicidal tendencies.

- Situations that must be reported immediately.
- Analysis of dangerous situations and the risks of the client doing violence to themselves or being violent with others: physical and human environment, level of escalation and the client's condition.
- Means intended to prevent and de-escalate a crisis situation: means of protecting the client, themselves and others, and suicide prevention.
- Method of intervening in a cautious way: personal capabilities with regard to the situation, intervention protocol, depending on the workplace, verbal and non-verbal communication techniques to avoid escalation and maintain security.
- Preventing risks to the health and safety of the client, themselves and others.

Competency 6 Duration 90 hours Credits 6

Behavioural Competency

Statement of the Competency

Provide personal assistive services related to activities of daily living in the context of long-term care.

Achievement Context

- For everyday situations encountered by PABs with respect to personal assistive services related to the activities of daily living in the context of long-term care.
- With clients experiencing partial or total loss of autonomy (semi-autonomous and non-autonomous clients).
- In collaboration with other health care professionals.
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - manufacturers' instructions
 - verbal and written information and instructions.
- Using:
 - the necessary equipment, devices, materials and products
 - digital and technological tools (e.g. care planning software)
 - documents and information concerning the client and the continuity of care (work plan, communication tools, etc.)
 - necessary reference works and documents.

Elements of the Competency

- 1 Perform tasks related to planning their work and to the continuity of care throughout the shift.

Performance Criteria

- Recognition of relevant information associated with the organization and operation of long-term care centres.
- Consideration of relevant information associated with the planning and organization of work.
- Careful consideration of relevant information concerning the client's condition.
- Careful planning of the work and appropriate adjustment of priorities.
- Accurate recording of relevant information in the required documents and forms.
- Correct performance of other activities related to the continuity of care.

- 2 Provide personal assistive services related to the mobility and transferring of clients.
 - Accurate understanding of the consequences of not respecting the timetable, the guidelines related to mobility and the walking program.
 - Consideration of relevant information concerning the mobility and transferring of clients.
 - Correct performance of all the verifications required.
 - Respect for the holistic approach to the work situation.
 - Appropriate choice and proper execution of procedures related to helping a client move and transfer, depending on the client's condition.
 - Compliance with fall-prevention protocols and guidelines in force.

- 3 Provide personal assistive services related to the positioning and comfort of the client.
 - Accurate understanding of the consequences of not respecting the timetable, the guidelines related to the positioning and comfort of the client.
 - Consideration of relevant information concerning the positioning and comfort of the client.
 - Correct performance of the verifications required.
 - Proper carrying out of procedures related to the positioning and comfort of the client in accordance with the guidelines, the client's condition and the situation.
 - Use of appropriate means to verify the client's comfort.
 - Use of appropriate means to prevent pressure sores.

- 4 Use control measures and alternatives to restraints.
 - Consideration of relevant information with respect to means of restraint and measures that replace restraints.
 - Correct performance of the verifications required.
 - Compliant installation of restraints and alternatives to restraints in accordance with the rules in force.
 - Compliance with protocols in force with regard to the required monitoring and supervision of the client.

- 5 Provide personal assistive services related to personal and oral hygiene as well as body care.
 - Consideration of relevant information with respect to personal assistive care related to hygiene.
 - Correct performance of the verifications required.
 - Correct performance of procedures related to the client's personal and oral hygiene.
 - Correct performance of procedures related to body care.
 - Careful noting and diligent reporting of relevant observations concerning the client's condition.
 - Appropriate and compliant actions with regard to the condition, maintenance, use and proper operation of devices and materials belonging to the client.

- 6 Provide personal assistive services with regard to elimination.
 - Consideration of relevant information with respect to personal assistive care related to elimination.
 - Correct performance of the verifications required.
 - Correct performance of procedures related to elimination, including the proper positioning of the client.
 - Careful use of means to maintain or restore continence.
 - Correct recording of the quantity of output.

- 7 Provide personal assistive services with regard to dressing and undressing.
 - Consideration of relevant information concerning dressing and undressing.
 - Correct performance of the verifications required.
 - Appropriate choice of clothing in collaboration with the client and their entourage.
 - Proper performance of procedures related to dressing and undressing, depending on the client's condition.

- 8 Provide personal assistive services with regard to nourishment and hydration.
 - Consideration of relevant information concerning eating and drinking.
 - Correct performance of the verifications required.
 - Appropriate choice of means to create an environment that encourages eating a meal.
 - Proper installation and positioning of the client, depending on the client's condition.
 - Correct application of methods related to eating and drinking.
 - Correct recording of the quantity of intake.

- 9 Carry out cleaning and disinfection activities related to personal assistive services.
- Consideration of relevant information.
 - Correct performance of all the verifications required.
 - Compliance with guidelines and schedules associated with cleaning and disinfection of the equipment, devices, materials, personal effects and work surfaces.
 - Observance of cleaning and disinfection methods.
 - Cleanliness of the equipment and devices.
- 10 Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings.
- Correct performance of all the verifications required.
 - Appropriate maintenance of the equipment and materials.
 - Compliant and environmentally friendly disposition of soiled and contaminated materials, and of instruments with sharp points or cutting edges.
 - Proper storage of the equipment, devices and materials and tidying up of the surroundings.
 - Full and proper stocking of required materials in the appropriate places and at the opportune times.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Correct application of measures to prevent and control infections in long-term care.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Observance of principles for moving people safely (principes de déplacement sécuritaire de personnes [PDSP]).
- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Compliance with verbal and written instructions.
- Consideration of the client as a whole.
- Proper preparation of the equipment and materials required in accordance with the personal assistive services.
- Respect for the client's capabilities and autonomy.
- Respect for the client's privacy.

- Clear, concise and accurate transmission of information to the people concerned at the opportune times.
- Transmission of relevant information to the client and their entourage.
- Use of the terminology and abbreviations related to the occupation.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Measures designed to prevent and control infections and contamination in long-term care settings.
 - Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
 - Respect for the client's pace.
 - Transmission of information to the client and their entourage.
 - Terminology specific to the competency.
 - Respect for the client: relational approach, client's autonomy and potential, and privacy.
 - Decorum: professional attire, proper language and respectful discourse.
 - Health and safety of the client, themselves and others: PDSP, communication with colleagues.
- 1 Perform tasks related to planning their work and to the continuity of care throughout the shift.
- Organization and operation of long-term care centres.
 - Planning and organization of the work: managing priorities, consideration of the information on the client's condition and of the instructions.
 - Planning of the work depending on the tasks and adjusting priorities throughout the day: client's lifestyle habits and reactions.
 - Information related to the client's condition: observation of the condition of the skin, emotional state and the client's reactions and behaviours.
 - Recording of information according to the standards in the required documents and forms: stool records, diet report and incident/accident report.
 - Other activities related to the continuity of care: responding to client needs and call buttons as well as noting and reporting changes in the client's condition.

- 2 Provide personal assistive services related to the mobility and transferring of clients.
 - Consequences of not being mobile: constipation, muscular atrophy and pressure sores.
 - Relevant information on helping clients to move and on transferring clients: verbal and written instructions.
 - Respect for the holistic approach to the work situation: client, time, task, surroundings, equipment.
 - Organizational practices of the Association paritaire pour la santé et la sécurité du travail du secteur affaires sociales (ASSTSAS).
 - Principles for moving people safely (principes de déplacement sécuritaire de personnes [PDSP]): continuum of assistance to the client, type of assistance, establishment of contact and verification of capabilities.
 - Precautions to be taken when assisting the client to walk and in transferring the client: choice of footwear, walk belt, compliance with instructions and schedule.
 - Use of orthopedic devices: cane and walker.
 - Choice of procedures for assisting the client to move and to transfer the client, depending on the client's condition and the situation.
 - Procedures related to helping the client move: natural movements, posture, grip and movement.
 - Transferring procedures: assisting the client out of an armchair or wheelchair, transferring the client into the bath, bed, armchair or wheelchair.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services.
 - Use and maintenance of equipment and materials: patient lift, geriatric chair, manual or motorized sit-to-stand lift.
 - Protocols and guidelines governing the prevention of falls.

- 3 Provide personal assistive services related to the positioning and comfort of the client.
 - Consequences of non-compliance with the schedule and guidelines: pain, discomfort, increased use of medications and pressure sores.
 - Information and verifications regarding the client's positioning and comfort: client's capabilities, safety, surroundings, integrity and use of the equipment, devices and materials.
 - Procedures related to the positioning and comfort of the client in accordance with the guidelines, the client's condition and the situation: clients who have special needs, clients with restraints and bedridden clients.
 - Positioning in a wheelchair and in bed: positioning strap, gel cushion and non-slip mats on the wheelchair.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services.
 - Ways to verify the client's comfort: attentive observation of body language.
 - Use of equipment and materials: mattress, pillows, positioning equipment and materials.
 - Means of preventing pressure sores: positioning, moving and use of equipment and materials associated with preventing pressure sores.

- 4 Use control measures and alternatives to restraints.
 - Information on means of restraint and alternatives to restraints.
 - Legal framework surrounding professional practice: concept of consent with regard to fundamental rights, ethical and legal aspects, obligation to closely monitor the client, concern for the impact of restraint on the client and use of restraint as a last resort.
 - Control measures: restraints and isolation.
 - Isolation: measures to control the surroundings, bracelet, half-door, door-locking system and bed rails.
 - Distinction between restraints and alternatives to restraints.
 - Risks associated with using control measures and their impacts on the client: risk of accident, skin lesions, withdrawal, deconditioning and anxiety.
 - Installation of physical restraints.
 - Installation and verification of alternatives to restraints: TABS (motion detection) system, pressure-sensitive mattress and carpets.
 - Compliance with protocols in force with regard to the required monitoring and supervision of a client in restraints and in isolation.
 - Needs of the client in restraints: hydration and frequent repositioning.
 - Observations of client's behaviour and the condition of their skin.

- 5 Provide personal assistive services related to personal and oral hygiene as well as body care.
 - Rules for respecting the client's privacy: close doors, draw curtains, cover up the client as the process goes on, look discretely.
 - Preparation and use of the required equipment, devices and materials and preparation of the work area.
 - Set of verifications required: verbal and written instructions, level of autonomy, holistic approach to the work situation.
 - Procedures related to the client's personal and oral hygiene; dental prosthesis, natural teeth and dental implants.
 - Types of baths: complete, partial, in bed, in a therapeutic tub, at a washbasin, on a shower stretcher and in a shower.
 - Procedures related to body care: beard, nails and hair.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services.
 - Noting of observations of the client's conditions: healthy skin, client's reactions and capabilities.
 - Condition, maintenance, use and proper operation of devices, equipment and materials belonging to the client: dental prosthesis, hearing aid, razor and glasses.

- 6 Provide personal assistive services with regard to elimination.
 - Preparation and use of the required equipment, devices and materials and preparation of the work area.
 - Set of verifications required: verbal and written instructions, level of autonomy, holistic approach to the work situation.
 - Procedures related to elimination: changing of continence briefs and installation of a condom catheter.
 - Proper positioning of the client on a commode chair or a bedpan.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services.
 - Means to maintain or restore continence: elimination schedule and use of protection.
 - Means to maintain healthy skin: application of barrier cream.
 - Recording of output in the required documents.

- 7 Provide personal assistive services with regard to dressing and undressing.
 - Set of verifications required: verbal and written instructions, level of autonomy, holistic approach to the work situation.
 - Choice of clothing: client's preferences and comfort, and adapted garments.
 - Client's night wear and day wear.
 - Involvement of the client and their entourage in the choice of clothing.
 - Procedures related to dressing and undressing, depending on the client's condition: hemiplegic client, state of health and level of autonomy.
 - Putting on of compression stockings.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services.

- 8 Provide personal assistive services with regard to nourishment and hydration.
 - Required information: condition of the client, dysphagia and sensory impairments.
 - Preparation and use of the required equipment, devices and materials and preparation of the surroundings.
 - Set of verifications required: verbal and written instructions, level of autonomy, holistic approach to the work situation, temperatures of the food, compliance with diet report and textures.
 - Means to create an environment that encourages eating a meal.
 - Means to help the client maintain their autonomy: adapted utensils, adapted dishware, preparation of the tray.
 - Proper installation and positioning of the client, depending on the client's condition.
 - Precautions to be taken: pace, positioning, hydrating liquid versus dehydrating liquid and preparation of the tray.
 - Feeding and hydration methods.
 - Means that provide reminders about hydrating and encouragement to do so.
 - Correct recording of the quantity of intake in the required documents.

- 9 Carry out cleaning and disinfection activities related to personal assistive services.
 - Review of Competency 3.
 - Set of verifications required: verbal and written instructions, schedule, correct product, dilution and contact time.
 - Cleaning and disinfection methods: bath, shower stretcher and work areas.

- 10 Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings.
 - Review of Competency 3.
 - Set of verifications required: stocking schedule, verification of materials and list of materials to be restocked.
 - Environmentally friendly disposition of soiled and contaminated materials: lingerie and incontinence briefs.
 - Handling of contaminated materials and clean materials.
 - Storage of the equipment, devices and materials and tidying up of the surroundings: verification of the cleanliness and tidiness and of the storage areas.
 - Stocking of required materials: missing materials, handling and principles of ergonomics.
 - Protocol and procedures for reporting defects.

Competency 7 Duration 30 hours Credits 2

Behavioural Competency

Statement of the Competency

Adapt their approach and personal assistive services in the context of palliative and end-of-life care.

Achievement Context

- For everyday situations encountered by PABs and HSSAs in providing palliative and end-of-life care in different settings (in home settings as well as in long-term and short-term care centres, including critical care centres).
- For all types of clients of all ages.
- With the client and the client's entourage, the care team and the interdisciplinary team.
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - verbal and written information and instructions from the professionals concerned (palliative care intervention plan, work plan).
- Using:
 - digital and technological tools (e.g. care planning software, communication tools)
 - necessary reference works and documents.

Elements of the Competency

- 1 Identify the aspects that characterize the palliative and end-of-life care approach.

Performance Criteria

- Accurate connection made between the legal and regulatory framework and their role and responsibilities, including elements related to medical aid in dying (MAID).
- Correct distinction between the role and responsibilities of the care team and those of the interdisciplinary team.
- Accurate understanding of the principles underlying the palliative and end-of-life care approach.
- Accurate identification of the stages of grief.
- Realistic comparison of their perception of death and the palliative care and end-of-life care approach.

- 2 Adapt their approach and offer support to the client and their entourage.
 - Adoption of attitudes that help create an atmosphere of trust and caring for the client and their entourage.
 - Consideration of the needs, wishes and reactions of the client and their entourage, including those related to loss and the stages of grief.
 - Support adapted to the client and their entourage with respect to losses at the end of life and the stages of grief.
 - Careful use of means to create an appropriate caring atmosphere.
 - Accurate distinction between verbal and non-verbal behaviours to adopt or avoid.
 - Careful use of means to encourage collaboration on the part of the client's entourage.
 - Appropriateness of the approach adopted.

- 3 Use means to alleviate and soothe the client's discomforts in accordance with the evolution of their condition and needs.
 - Consideration of relevant information concerning the condition and needs of the client.
 - Appropriate connections made between the client's main physical and psychological changes and signs of discomfort.
 - Accurate identification of manifestations associated with the last phase of end of life.
 - Appropriateness of means used to prevent and soothe various physical discomforts.
 - Correct application of means to prevent pressure sores.
 - Careful use of means to encourage collaboration on the part of the client's entourage.
 - Careful and diligent reporting of changes in the client's condition to the professional concerned.

- 4 Apply the appropriate rules, protocols and procedures and offer support to the client's entourage following the death of the client.
 - Accurate identification of the rules, protocols and procedures to follow after the death of the client.
 - Correct use of means to place and prepare the deceased's body and the surroundings before receiving their entourage.
 - Respect for the dignity of the deceased client.
 - Empathetic listening to the emotions expressed by the client's entourage.
 - Correct application of rules, protocols and procedures in force with respect to post-mortem care.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Observance of principles for moving people safely (principes de déplacement sécuritaire de personnes [PDSP]).
- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Compliance with verbal and written instructions.
- Consideration of the client as a whole.
- Appropriate establishment of a professional relationship of trust characterized by empathy.
- Clear, concise and accurate transmission of information to the people concerned at the opportune times.
- Transmission of relevant information to the client and their entourage.
- Use of the terminology and abbreviations related to the occupation.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
- Holistic biological, psychological, social and spiritual approach with regard to the client and their needs.
- Respect for the client: relational approach, dignity and privacy.
- Individualized interdisciplinary intervention plans.
- Terminology specific to the competency.
- Sense of responsibility: judgment, collaboration with the team and the client's entourage.
- Confidentiality and discretion.
- Demonstration of decorum: proper language and respectful discourse.
- Other professional behaviours expected in palliative care: respect, open-mindedness, availability, empathy, non-judgmental.
- Health and safety of clients, themselves and others: rules to be applied, personal and professional limits, management of their stress and emotions.

- 1 Identify the aspects that characterize the palliative and end-of-life care approach.
 - Legal and regulatory framework: laws and regulations governing palliative and end-of-life care.
 - Legal and regulatory framework governing MAID.
 - Principles that underlie palliative and end-of-life care and medical aid in dying.
 - Role and responsibilities of members of the care team and those of the interdisciplinary team.
 - Principles underlying the palliative care approach: view of death as a normal process, alleviation of pain and other physical symptoms, integration of physiological and spiritual aspects, etc.
 - Stages of grief and their manifestation in children, adolescents, adults and seniors.
 - Examination of their perception of death and how they feel about it: past experiences, values, fears, beliefs, etc.

- 2 Adapt their approach and offer support to the client and their entourage.
 - Attitudes that help create an atmosphere of trust and caring for the client and their entourage: inclusive approach with regard to diversities, empathy, active listening, availability and appropriate atmosphere (Review of Competency 2).
 - Reactions of the client and their entourage: announcement of the prognosis, stages of the grief process, disruption in family functioning, two-fold position of a loved one who wants to offer and obtain support at the same time.
 - Consideration of needs: response to questions, available support resources, consideration of individual, family and cultural values and choices as well as mortuary rites.
 - Consideration of the needs, wishes and reactions of the client and their entourage: cultural or religious aspects (Review of Competency 2).
 - Accompaniment of the client and their entourage through the stages of grief: inclusive approach, respect for the client and their entourage, respect for the personal journey and a different approach depending on the age group (e.g. pediatric client).
 - Multiple end-of-life losses: autonomy, body image and certain relationships.
 - Means of creating an appropriate and caring atmosphere.
 - Behaviours to adopt or avoid: respect for the client's life story and the choices made by the client and the client's entourage.
 - Means to encourage collaboration on the part of the client's entourage: concern for what the members of the entourage are experiencing.

- 3 Use means to alleviate and soothe the client's discomforts in accordance with the evolution of their condition and needs.
 - Main physical and psychological changes in the client: association with the signs of discomfort, physical losses, changes in the respiratory and digestive systems and loss of autonomy.
 - Signs of discomfort, pain and agony.
 - Client's needs: biological, psychological, social and spiritual.
 - Manifestations associated with the last phase of end of life: manifestations of agony.
 - Means used to soothe various physical discomforts: oral care, positioning and moving, reduction of ambient noise, ensuring of the client's privacy.
 - Means encouraging collaboration on the part of the client's entourage: physical and emotional limits of members of the entourage.
 - Collaboration with the team for reporting changes in the client's clinical conditions.

- 4 Apply the appropriate rules, protocols and procedures and offer support to the client's entourage following the death of the client.
- Rules, protocols and procedures following the death of the client: reporting, handing over of the client's personal effects, documents to be given to the members of the entourage and information to be communicated to the funeral home.
 - Protocol to follow when a client dies at home.
 - Means for preparing the deceased's body and the surroundings in order to receive their entourage: preparation and positioning of the deceased's body before receiving their entourage.
 - Reception of the client's entourage: appropriate reactions, communication, information and attitudes.
 - Consideration of the multicultural differences, the differences in values and beliefs of the members of the entourage after the client's death.
 - Rules, protocols and procedures in force in the particular workplace with regard to post-mortem care: shroud, identification of the body, securing of the client's possessions, etc.

Competency 8 Duration 30 hours Credits 2

Behavioural Competency

Statement of the Competency

Administer first aid and apply emergency measures.

Achievement Context

- For clients of all ages.
- Alone or in collaboration with other intervenors.
- Based on:
 - laws and regulations in force
 - standards set by recognized bodies
 - policies, protocols and procedures in force
 - based on verbal and written information and instructions
 - manufacturers' instructions.
- Using:
 - the required equipment, devices and materials
 - necessary reference works and documents.

Elements of the Competency

Performance Criteria

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| <p>1 Apply techniques for maintaining and restoring vital functions (CPR, COA, AED³).</p> <p>2 Intervene in cases of hemorrhage or state of shock.</p> <p>3 Intervene in cases of musculoskeletal injury.</p> | <ul style="list-style-type: none"> • Accurate evaluation of vital functions. • Appropriate choice of technique for the situation: <ul style="list-style-type: none"> – clearing of obstructed airways – artificial respiration – cardiac massage and use of an automated external defibrillator (AED). • Rapid and correct use of different techniques.
<ul style="list-style-type: none"> • Accurate identification of types of hemorrhage. • Accurate identification of the signs related to a state of shock. • Rapid and appropriate use of pressure, elevation and rest. • Correct use of measures aimed at preventing contamination by blood.
<ul style="list-style-type: none"> • Accurate identification of manifestations of musculoskeletal injury. • Correct use of means of stabilizing and immobilizing an injured limb. • Proper positioning in cases of spinal trauma. |
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³ CPR: cardiopulmonary resuscitation
 COA: clearing of obstructed airways
 AED: automated external defibrillator

- 4 Intervene in cases of eye injury.
 - Accurate identification of types of injury.
 - Rapid and appropriate eye irrigation.
 - Appropriate choice of means of preventing the injury from being aggravated when a foreign body has penetrated the eye.

- 5 Intervene in cases of various wounds.
 - Accurate identification of types of wounds.
 - Proper positioning of the client in accordance with the type and location of the wound.
 - Correct use of means of preserving a severed body part.
 - Rapid and correct intervention in the case of a thoracic wound.
 - Correct choice of means of preventing contamination and hypothermia in the case of an open abdominal wound.

- 6 Intervene in cases of problems related to heat or cold.
 - Accurate identification of manifestations of various problems related to heat or cold.
 - Rapid and appropriate intervention in cases of hypothermia, heat exhaustion and heat stroke.
 - Correct use of means of alleviating pain and preventing infection and contamination in the case of burns.

- 7 Intervene in cases of poisoning.
 - Accurate identification of manifestations of different types of poisoning.
 - Appropriate choice of measures to take for different types of poisoning.

- 8 Intervene in cases of allergic reaction.
 - Accurate identification of manifestations of allergic reactions.
 - Correct application of first-aid techniques in cases of allergic reaction.
 - Accurate assessment of the limits of the scope of practice with respect to the administration of adrenaline using an auto-injector.

- 9 Intervene in cases of medical problems.
 - Accurate identification of manifestations related to various medical problems.
 - Rapid and appropriate intervention in the case of thoracic pain.
 - Use of appropriate means of preventing injury during convulsions.
 - Rapid and appropriate intervention in the case of hypoglycemia.

- 10 Apply emergency measures in different care settings.
- Accurate identification of situations requiring the application of emergency protocols.
 - Accurate identification of their role and responsibilities with regard to emergency measure protocols.
 - Accurate identification of the role and responsibilities of other intervenors.
 - Accurate connections between their role and the specific characteristics of interventions in accordance with the workplace.
 - Complete and immediate reporting of the situation to the professional concerned.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Effective communication to reassure the victim and their entourage.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Respect for the client: reassuring relational approach
- Sense of responsibility: effectiveness and collaboration with the other intervenors

- 1 Apply techniques for maintaining and restoring vital functions (CPR, COA, AED⁴).
- Distinguishing the steps of the general emergency plan.
 - Identification of dangerous situations.
 - Communication with emergency services (e.g. 911).
 - Checking of vital signs: taking the pulse, if applicable.
 - Location of anatomical structures such as the respiratory tract, lungs and heart.

⁴ CPR: cardiopulmonary resuscitation

COA: clearing of obstructed airways

AED: automated external defibrillator

- Consideration of specific instructions applicable to infants, children and adults when clearing airway obstructions, giving artificial respiration, using an automated external defibrillator (AED) and performing cardiopulmonary resuscitation.
 - Equipment and materials used: mask and automated external defibrillator.
- 2 Intervene in cases of hemorrhage or state of shock.
- Observation of the signs of internal and external hemorrhage.
 - Observation of signs of shock.
 - Use of available equipment and materials.
- 3 Intervene in cases of musculoskeletal injury.
- Location of anatomical structures.
 - Observation of the manifestations of different types of injuries such as open or closed fractures, sprains, spinal fractures and cranial fractures.
 - Use of available equipment and materials for stabilizing or immobilizing the victim.
- 4 Intervene in cases of eye injury.
- Use of a variety of techniques such as eye irrigation, application of a wet bandage and immobilization of the head.
- 5 Intervene in cases of various wounds.
- Observation of different types of wounds.
 - Use of a variety of techniques such as application of a compression bandage, a waterproof dressing or a triangular bandage.
- 6 Intervene in cases of problems related to heat or cold.
- Observation of different types of burns and frostbite.
 - Observation of manifestations of hypothermia and hyperthermia.
 - Use of a variety of techniques such as modification of the victim's surroundings, hydration, gradual warming or application of dry or wet bandages.
- 7 Intervene in cases of poisoning.
- Identification of the different types of poisoning.
 - Observation of the manifestations of poisoning.
 - Taking of the necessary precautions based on the risks.
 - Knowledge of the Workplace Hazardous Materials Information System (WHMIS) (Review of Competency 3).
- 8 Intervene in cases of allergic reaction.
- Observation of the manifestations of a local or systemic allergic reaction and of anaphylactic shock.
 - Use of a variety of techniques such as the administration of adrenaline using an auto-injector and positioning of the victim.
 - Administration and regulation.

9 Intervene in cases of medical problems.

- Observation of the manifestations of various medical problems such as myocardial infarction, angina, stroke, convulsions, hypoglycemia and transient brain ischemia.
- Use of a variety of techniques, depending on the problem identified: positioning of the victim and assistance in administering nitroglycerin.

10 Apply emergency measures in different care settings.

- Situations requiring the application of emergency protocols: fires, escapes, cardiopulmonary arrest and aggressiveness.
- Recognition of the intervention level and of their responsibilities.
- Decision to take action or not.
- Role and responsibilities of intervenors.
- Specific characteristics of interventions depending on the setting: different codes and protocols depending on the setting.
- Protocols, procedures and decision algorithm with regard to home care.

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| <p>3 Note observations related to the situation as well as to the client as a whole.</p> | <ul style="list-style-type: none"> • Demonstration of attentiveness and vigilance. • Complete notes on relevant observations, including those related to the client's emotional state and manifestations of discomfort. • Promptness in reporting any important change to the people concerned. |
| <p>4 Adapt their approach to the client's situation and that of their entourage while still establishing a professional relationship of trust.</p> | <ul style="list-style-type: none"> • Consideration of the needs and reactions of the client and their entourage. • Consideration of relevant information provided by the client and their entourage. • Use of an appropriate approach and means to establish a professional relationship of trust with the client and their entourage. • Appropriate support of the client during occupational activities. • Careful use of means to encourage collaboration on the part of the client's entourage. • Appropriateness of the approach adopted. |
| <p>5 Provide personal assistive services related to ADL.</p> | <ul style="list-style-type: none"> • Careful preparation and appropriate use of the equipment, materials and work area required, depending on the personal assistive services. • Appropriate application of procedures related to personal assistive services related to ADL, depending on the context and the condition of the client. • Provision of personal assistive services within a realistic time frame. • Respect for the client's capabilities, level of autonomy and pace. • Regular verification of the client's well-being and comfort. |
| <p>6 Carry out activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces.</p> | <ul style="list-style-type: none"> • Compliance with guidelines and schedules associated with cleaning and disinfection of the equipment, devices, materials, personal effects and work surfaces. • Observance of cleaning and disinfection methods. • Cleanliness of the equipment, devices and work surfaces. |

7 Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings.

- Compliance with guidelines and schedules associated with the maintenance of the equipment, devices, materials and the client's personal effects.
- Secure and environmentally friendly disposition of materials and biofluids.
- Meticulous, appropriate and secure maintenance and storage.
- Accurate reporting of defects found.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Observance of principles for moving people safely (principes de déplacement sécuritaire de personnes [PDSP]).
- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Compliance with verbal and written instructions.
- Observance of the limits of the scope of practice of the occupation.
- Correct performance of all the verifications required.
- Consideration of the client as a whole.
- Transmission of relevant information to the client and their entourage.
- Use of the terminology and abbreviations related to the occupation.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Verifications required: client's comfort, safety, condition, needs, capabilities and identity.
- Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
- Terminology specific to the competency.
- Respect for the client: relational approach, client's dignity, capabilities and privacy.
- Sense of responsibility: autonomy, effectiveness, judgment, honesty, problem solving and collaboration with the care team.
- Confidentiality and discretion.

- Decorum: professional attire, proper language and respectful discourse.
 - Health and safety of clients, themselves and others: rules to be applied, PDSP, personal and professional limits, management of their stress and emotions
- 1 Plan their work for their entire shift.
 - Methods of organizing work in a living environment: communication tools (bath schedule, level of care, admissions, transfers, specific instructions (e.g. nothing by mouth [NPO]) and the setting's routine.
 - Taking of note of information and specific details about each assigned client: annotations on the checklist or work plan.
 - Information to be gathered: work priorities, schedules, goals of the therapeutic nursing plan (if applicable), instructions of the care team, client's physical and emotional state and types of services to be provided.
 - Sources of information: documents concerning the client, communication tools and care team.
 - Planning of their work: physical organization of the setting, placement of equipment and materials, and establishment of work priorities.
 - Compliance with the work plan and instructions: schedules for getting the client up, meals, activities and bath.
 - Adjustment of the work plan in accordance with the situation, priorities, unexpected events and instructions: in accordance with the client's habits and choices.
 - Follow-ups on the checklist or work plan through annotations made throughout the shift.
 - 2 Carry out activities related to the continuity of care.
 - Familiarity with the client's life story and lifestyle habits.
 - Participation in meetings of the care and the interdisciplinary teams: active listening, answers to questions.
 - Clear, concise and accurate transmission of information to the people concerned at the opportune times: client's reactions, changes in their condition, difficulties with moving, observations and inappropriate behaviours.
 - Recording of information in the required documents: stool sheet and diet report.
 - Collaboration with members of the care team: suggestion of means intended to improve the client's situation.
 - 3 Note observations related to the situation as well as to the client as a whole.
 - Attention and vigilance: measures for alternatives to restraints and for preventing falls.
 - Observations to be noted: client's needs and emotional state, objective or subjective manifestations of discomfort, reactions, behaviours and sudden atypical change in the client's condition.
 - Observable reactions and behaviours: level of collaboration, signs of openness to receiving help, interest in the activities of daily life, reactions and needs expressed by the client.
 - 4 Adapt their approach to the client's situation and that of their entourage while still establishing a professional relationship of trust.
 - Approach to introducing themselves: explanation of their role, the assistive care to be provided and the goals targeted.
 - Demonstration of interest in the client by asking questions and listening to what the client has to say about their preferences, interests, capabilities, family and friends.
 - Demonstration of interest in the client's life story and respect for their lifestyle habits.
 - Basic approach to clients with severe neurocognitive disorders (Review of Competency 5).

- Means of establishing a professional relationship of trust with the client and the client's entourage: creating a caring atmosphere, and availability (Review of competencies 2 and 5).
 - Admission: welcoming of the client and their entourage, transmitting of information to the client and their entourage, tour of the premises and instructions to be communicated.
 - Accompaniment of the client during occupational activities: preparation of the client, respect for the schedule, consideration of the client's preferences, collaboration with the recreation and directed activities technician.
 - Approach adapted to the client's condition and the situation: Behavioural and psychological symptoms of dementia (BPSD) and refusal.
 - Means to encourage collaboration on the part of the client's entourage: procedures associated with assistive services, respectful attitude and reassuring approach.
- 5 Provide personal assistive services related to ADL.
- Verification of the equipment, devices and materials before use.
 - Respect for the holistic approach to the work situation: client, time, task, surroundings, equipment (Review of Competency 6).
 - Client's capabilities, autonomy and pace: client's condition and the type of assistance provided.
 - Adaptation of assistive service procedures: choice and performance of transfer manoeuvres, other procedures depending on the client's condition.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services (Review of Competency 6).
 - Realistic time frame given the degree of difficulty of the assistive services provided.
 - Regular verification of the client's well-being and comfort: privacy and dignity.
- 6 Carry out activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces.
- Verifications required: type of products, contact time and manufacturer's instructions.
 - Cleaning and disinfection of the equipment, devices, materials, personal effects and work surfaces in accordance with the guidelines.
 - Cleanliness of the equipment, devices and work surfaces.
- 7 Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings.
- Maintenance of the client's equipment, devices, materials and personal effects in accordance with the guidelines and workplace: maintenance of hearing aids, glasses, dental prostheses.
 - Disposition of materials and biofluids in the proper places.
 - Maintenance and storage of equipment, materials and tidying up of the work area.
 - Stocking of required materials in the appropriate places and at the opportune times: laundry cart and clean utility.

Competency 10 Duration 15 hours Credits 1

Behavioural Competency

Statement of the Competency

Ascertain their limits with respect to administering medications and providing invasive assistive care related to activities of daily living.

Achievement Context

- Within the limits of the regulations in force
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - the *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*
 - based on verbal and written information and instructions
 - care methods in force.
- Using:
 - the necessary equipment, devices and materials
 - information concerning the client and the continuity of care (work plan, instruction sheet, etc.)
 - necessary reference works and documents.

Elements of the Competency

- 1 Consider the legal, regulatory and normative framework in force with regard to the administration of medications.

Performance Criteria

- Correct identification of the legal, regulatory and normative framework with regard to the administration of medications.
- Correct identification of the policies, protocols and procedures governing the administration of medications.
- Clear distinction of the roles and responsibilities of the nurse, the nursing assistant and the health care aide.
- Accurate identification of the consequences of not complying with the requirements linked to the administration of medications.
- Accurate connection made between the *Règle de soins nationale sur les activités de soins confiées à des aides-soignants* and the legal and regulatory framework.

- 2 Consider the legal, regulatory and normative framework in force with regard to the administration of invasive assistive care related to the activities of daily life (regulated activities).
 - Correct identification of the legal, regulatory and normative framework with regard to regulated activities related to invasive assistive care related to ADL.
 - Correct identification of the policies, protocols and procedures governing invasive assistive care related to ADL.
 - Clear distinction of the roles and responsibilities of the nurse, the nursing assistant and the health care aide.
 - Accurate identification of the consequences of not complying with the requirements related to invasive assistive care related to ADL.
 - Accurate connection made between the *Règle de soins nationale sur les activités de soins confiées à des aides-soignants* and the legal and regulatory framework.

- 3 Identify the methods of administering medications for the permitted routes of administration, in accordance with the legal and regulatory framework in force.
 - Accurate identification of the permitted routes of administration.
 - Correct connection between the routes of administration and the forms of medications.
 - Correct identification of the rules and precautions governing the administration of medications.

- 4 Apply the rules and procedures governing the administration of medications for the permitted routes of administration, in accordance with the legal and regulatory framework in force.
 - Accurate interpretation of the guidelines and instructions.
 - Accurate identification of care methods.
 - Accurate interpretation of the rules and procedure governing storage, preservation and disposal of prescription medications.
 - Correct performance of procedures related to the administration of medications.
 - Accurate recording of relevant information on the appropriate forms or in the appropriate registers.
 - Accurate identification of situations that need to be reported immediately to the professional concerned.

- 5 Identify the rules to be respected with regard to invasive assistive care services related to ADL, in accordance with the legal and regulatory framework in force.
- Accurate identification of invasive care.
 - Accurate interpretation of the *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*.
 - Accurate interpretation of the guidelines and instructions.
 - Correct identification of the rules and precautions governing the administration of invasive assistive care related to ADL.
 - Accurate identification of the information to be recorded on the appropriate forms or in the appropriate registers.
 - Accurate identification of situations that need to be reported immediately to the professional concerned.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Compliance with laws, regulations and standards in force.
- Compliance with the *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*.
- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Compliance with verbal and written instructions.
- Consideration of the client as a whole.
- Clear, concise and accurate transmission of information to the people concerned at the opportune times.
- Use of the terminology and abbreviations related to the occupation.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- *Professional Code*: sections 39.7 and 39.8.
 - Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
 - Terminology specific to the competency.
 - Sense of responsibility: judgment with respect to the limits of their intervention and collaboration with the professional concerned.
 - Decorum: professional attire, proper language and respectful discourse.
 - Health and safety of the client, themselves and others: legal, regulatory and normative framework to be respected, staying within their personal and professional limits.
- 1 Consider the legal, regulatory and normative framework in force with regard to the administration of medications.
 - Legal, regulatory and normative framework with regard to the administration of medications: clinical activities covered, persons concerned, clientele, places and sector of activity covered.
 - *Act to amend the Professional Code and other legislative provisions as regards the health sector*.
 - *Professional Code*: Sections 39.8 and 39.9.
 - The *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*: listing of reserved activities, conditions of application and measures governing reserved activities.
 - Conditions governing the application of the legal framework in authorized institutions.
 - Definition of the administration of medications.
 - Policies, protocols and procedures governing the administration of medications: right to refuse to provide care, request for additional training, follow-up register and care techniques.
 - Responsibilities of the establishment with respect to training and supervision.
 - Roles and responsibilities of the nurse, the nursing assistant and the health care aide.
 - Information required: the organization's rules and procedures; resources available such as the professionals to contact, the intervention plan, the service request, instruction sheets and availability of care techniques.
 - Personal responsibilities, rights and obligations: distinction between health professionals, informal caregivers, health care aides; responsibilities of the institution, the professional in charge; civil liability; integrity and honesty with regard to their training and supervision needs; right to refuse to provide care if the request does not comply with the legal framework.
 - Consequences of not complying with the requirements linked to the administration of medications: situations involving risk.
 - Incident and accident report: responsibilities.
 - 2 Consider the legal, regulatory and normative framework in force with regard to the administration of invasive assistive care related to the activities of daily life (regulated activities).
 - Legal, regulatory and normative framework: clinical activities covered, persons concerned, clientele, places and sector of activity covered.
 - *Act to amend the Professional Code and other legislative provisions as regards the health sector*.
 - *Professional Code*: Sections 39.7 and 39.9.
 - The *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*: listing of reserved activities, conditions of application and measures governing reserved activities.
 - Conditions governing the application of the legal framework in establishments.

- Policies, protocols and procedures governing the regulated activities: right to refuse to provide care, request for additional training, follow-up register and care techniques.
 - Responsibilities of the establishment with respect to training and supervision.
 - Personal responsibilities, rights and obligations: distinction among health professionals, informal caregivers, health care aides; meaning and nature of regulated and non-regulated activities; details on the context of the intervention; responsibilities of the establishment, the professional in charge; civil liability; integrity and honesty with regard to their training and supervision needs; right to refuse to provide care if the request does not comply with the legal framework.
 - Situations involving risk that could lead the worker to overstep their responsibilities: work overload; inappropriate request made by the employer; pressure from the establishment, a member of the work team, the client or their entourage and incorrect interpretation of an instruction sheet.
- 3 Identify the methods of administering medications for the permitted routes of administration, in accordance with the legal and regulatory framework in force.
- Permitted routes of administration according to the regulatory framework in force.
 - Interpretation of the *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*.
 - Forms of medication and indications: cream, ointment, spray, patch and tablet.
 - Best principles of use for the administration of medications.
 - Rules and precautions governing the administration of medications: situations involving risk, consequences of not complying with a care method.
 - Ways of reacting to potential problems such as an unstuck skin patch or contaminated ophthalmological drops.
 - The *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*: supervisory measures for reserved activities, administration of prescription medications.
- 4 Apply the rules and procedures governing the administration of medications for the permitted routes of administration, in accordance with the legal and regulatory framework in force.
- Interpretation of the guidelines and instructions: recognized terminology and abbreviations.
 - Verification of the client's identity and best principles of use for the administration of medications.
 - Procedures to follow, precautions to take and equipment and materials to use:
 - for the various forms of medication
 - for the subcutaneous administration of insulin.
 - Rules and procedure governing storage, preservation and disposal of prescription medications: confidentiality, environmentally friendly and responsible disposition.
 - Observations and elements to report.
 - Communication of the appropriate information when a client refuses to take a medication.
 - Recording of medications administered and observations on the appropriate forms or in the appropriate registers.
 - Examples of situations requiring the assistance of a professional before and during the administration of a medication: change in the client's state of health, unusual situation, insufficient experience and training.

- 5 Identify the rules to be respected with regard to invasive assistive care services related to ADL, in accordance with the legal and regulatory framework in force.
- The *Règle de soins nationale sur les activités de soins confiées à des aides-soignants*: supervisory measures for reserved activities.
 - Interpretation of the guidelines and instructions: recognized terminology and abbreviations.
 - Procedures to follow, and equipment and materials that may be used.
 - Observations and elements to report.
 - Communication of the appropriate information when a client refuses a care service.
 - Rules for making notes for the recording of information in the required documents and forms.
 - Examples of situations requiring the assistance of a professional before and during the provision of non-invasive assistive care: change in the client's state of health, unusual situation, insufficient experience and training.

Competency 11 Duration 60 hours Credits 4

Behavioural Competency

Statement of the Competency

Perform tasks related to assistive services in the context of short-term and critical care.

Achievement Context

- In everyday situations encountered by PABs related to short-term care and critical care.
- For all types of clients.
- In collaboration with the care team and the interdisciplinary team.
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - manufacturers' instructions
 - verbal and written information and instructions from the professionals concerned.
- Using:
 - the necessary equipment, devices, materials and products
 - digital and technological tools (care planning software, communication tools, etc.)
 - documents and information concerning the client and the continuity of care (work plan, recording tools, etc.)
 - necessary reference works and documents.

Elements of the Competency

- 1 Carry out activities related to planning and organization throughout the shift.

Performance Criteria

- Consideration of the organization and operation of the care unit.
- Careful noting of relevant information about the client, their condition and the planning of the work.
- Careful planning of their shift.
- Proper preparation of the equipment and material in accordance with the assistive services to be provided.
- Appropriate adjustment of priorities in accordance with unexpected events or instructions.

- 2 Carry out activities related to the continuity of care.
 - Careful noting of relevant observations about the client, their condition and their entourage.
 - Precise calculation of relevant data to enter on the required documents.
 - Accurate recording of relevant information in the appropriate documents and at the opportune moments.
 - Immediate reporting to the professional concerned of any changes in the client's condition.

- 3 Adapt personal assistive services related to helping the client move, positioning of the client and transfers.
 - Proper execution of procedures related to helping a client to move, positioning and transfers, taking into account the client's condition, the situation and the guidelines.
 - Careful and correct application of procedures related to transfers, taking into account the client's condition, the situation and the guidelines.
 - Proper preparation of the client for accompanying them during medical explorations, appointments or transfers.

- 4 Adapt personal assistive services related to hygiene care, dressing and undressing, eating, drinking and elimination.
 - Careful and correct application of procedures related to personal assistive services related to ADL, taking into account the client's condition, the situation and the guidelines.
 - Use of appropriate means to take into account the client's emotional state and signs of discomfort and pain.

- 5 Carry out activities related to admitting the client.
 - Correct noting of relevant information related to the admission of the client.
 - Compliant and safe preparation of the room and appropriate installation of the equipment, devices and materials for a new admission.
 - Appropriate collaboration with the care team.
 - Transmission of complete and relevant information to the client and their entourage.
 - Accurate and complete recording of relevant information in the required documents.

- 6 Carry out activities related to discharges and transfers.
- Consideration of relevant information concerning the transfer or departure of the client.
 - Complete verification that the client or their entourage has picked up all their personal effects.
 - Compliant disposition in the appropriate places of soiled or throw-away equipment and materials.
 - Compliant removal of bedding and towels, and disposition in the appropriate places.
 - Observance of cleaning and disinfection methods.
 - Appropriate collaboration with the care team.
- 7 Perform other tasks associated with the occupation of PAB.
- Appropriate preparation and distribution of the equipment, devices, materials and products required by the care providers in accordance with the situation.
 - Compliance with guidelines and protocols with regard to laboratory analyses.
 - Compliant application of protocols and guidelines related to inventory management.
 - Full stocking of required materials in the appropriate places and at the opportune times.
- 8 Carry out activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces.
- Correct application of procedures related to the pre-cleaning and preparation of medical devices before they are transported to the medical device reprocessing unit.
 - Cleanliness of the equipment and devices.
- 9 Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings.
- Rigorous and environmentally friendly disposition of materials, biofluids, instruments with sharp points or cutting edges and biomedical wastes.
 - Appropriate and meticulous maintenance of the equipment and materials.
 - Proper and meticulous storage of the equipment, devices and materials and tidying up of the surroundings.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Correct application of measures to prevent and control infections in short-term care or critical care settings.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Observance of principles for moving people safely (principes de déplacement sécuritaire de personnes [PDSP]).

- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Compliance with verbal and written instructions.
- Consideration of the client as a whole.
- Respect for the client's level of autonomy and capabilities.
- Correct performance of all the verifications required.
- Clear, concise and accurate transmission of relevant information to the people concerned at the opportune times.
- Transmission of relevant information to the client and their entourage.
- Use of the terminology and abbreviations related to the occupation.
- Polite, respectful and diligent response to the client's requests or those of their entourage made by their pressing of the call button.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Careful and strict application of basic practices: best times for handwashing.
- Terminology specific to the competency.
- Verifications required: client's comfort, safety, condition, capabilities and identity.
- Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
- Respect for the client: relational approach, the client's potential and privacy.
- Sense of responsibility: autonomy, effectiveness, judgment, honesty and problem solving.
- Decorum: professional attire, proper language and respectful discourse.
- Health and safety of the client, themselves and others: guidelines to be respected and application of PDSPs.

- 1 Carry out activities related to planning and organization throughout the shift.
 - Organization and operation of the care unit: specific details for short-term care and critical care, vulnerability of the clients and urgent need to take action.
 - Relevant information to note: client's condition, interdepartmental reports, instructions from the professionals concerned.
 - Interpretation of instructions specific to the workplace: work plan, communication tools.
 - Planning of their work shift: schedule, types of assistive services, meeting with the client, admission, transfer and discharge.
 - Preparation of the equipment and materials: verifications required.
 - Elements to consider in setting priorities for the work to be performed, taking into account unexpected events.
 - Adjustment of priorities because of unexpected events.

- 2 Carry out activities related to the continuity of care.
 - Observations to be noted: client's emotional state, dynamics with their entourage, condition of the client's skin, manifestations of pain and discomfort, changes in the client's condition (Review of Competency 4).
 - Precise calculation of relevant data to enter on the required documents: basic mathematical operations, percentages and fractions.
 - Recording of information in the required documents: diet report, intake and output report.
 - Elements to be reported immediately to the professional concerned.

- 3 Adapt personal assistive services related to helping the client move, positioning of the client and transfers.
 - Verifications required: client's condition, instructions from the care team, equipment, devices and materials in place.
 - Procedures associated with moving and positioning of the client: presence of equipment, devices and materials, electrodes connected to a cardiac monitor, restraints, bandage, brace, splint, cast and traction.
 - Instructions: getting the client up for the first time, post-operative moving of the client, moving of the client in general and positioning of the client in critical care.
 - Procedures associated with transferring the client: bed-wheelchair, bed-commode chair, stretcher-bed; presence of equipment, devices and materials.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services (Review of Competency 6).
 - Guidelines: positioning, moving, loading and type of assistance.
 - Proper preparation of the client for accompanying them during medical explorations, appointments or transfers: preparation of materials and follow-up on the equipment, devices and materials in place.
 - Guidelines and protocols: transfer onto a stretcher or into a wheelchair, preparation protocol, instructions from the care team.

- 4 Adapt personal assistive services related to hygiene care, dressing and undressing, eating, drinking and elimination.
 - Verifications required: condition of the client, fasting, fluid restriction, diet, texture, equipment and devices in place, and instructions from the care team.
 - Procedures associated with personal assistive services related to ADL, taking into account the client's condition, the situation and the guidelines: age of the client, presence of equipment, devices and materials, hygiene care for a client with electrodes connected to a cardiac monitor, emptying of a urine collector bag, pre-surgery hygiene care and shaving, pneumatic leggings and changing a child's underpants.
 - Steps to be taken before, during and after carrying out the procedures related to personal assistive services (Review of Competency 6).
 - Means to take into account the client's emotional state and signs of discomfort and pain: observation of body language, attention and vigilance.

- 5 Carry out activities related to admitting the client.
 - Information related to admitting a client: depending on the setting, the type of clientele, needs in the areas of equipment, devices and materials.
 - Preparation of the room: installation of the equipment, devices and materials, availability and cleanliness of the room.
 - Collaboration with the care team: roles of members of the care team.
 - Information to be communicated to the client and their entourage: how the care unit operates.
 - Relevant information in the required documents: measurement of the height and weight of the client. Verification and storage of personal effects: clients in the emergency department, clients with neurocognitive disorders or mental health problems, unconscious client and in critical care.

- 6 Carry out activities related to discharges and transfers.
 - Information on the transfer or departure of the client: preparation and accompaniment.
 - Procedures for handing over personal effects depending on the setting.
 - Procedure for handling and disposition of the equipment, soiled or throw-away materials: removal and disposition of bedding (Review of Competency 3).
 - Cleaning and disinfection methods (Review of Competency 3).
 - Collaboration with the care team: roles of the members of the care team, notification of the person concerned that the cleaning and disinfection of the room may begin.

- 7 Perform other tasks associated with the occupation of PAB.
- Preparation and distribution of the equipment, devices, materials and products required by the care providers in the case of emergencies, client being disorganized, breakages or lack and minor surgery.
 - Equipment, devices and materials required: categories, sizes, uses and characteristics.
 - Materials required, depending on the situation.
 - Guidelines and protocols with regard to laboratory analyses: moving of the client, conservation, transportation, appropriate moment and urgent (STAT).
 - Guidelines: transportation and distribution of equipment, materials and requested items to the different places where they are required (other care units or departments, etc.)
 - Protocols and guidelines associated with managing inventory: list of materials, materials and products to be replaced in the appropriate places and at the appropriate times, careful handling, preparation of treatment rooms and collaboration with other workers (clerk and storekeeper).
 - Storage and rotation of sterile materials and verification of expiry dates.
 - Refilling of required materials: trays being used in the care unit (for taking samples and dressings), PAB cart (clean materials) and cart for additional precautions.
- 8 Carry out activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces.
- Review of Competency 3.
 - Verifications required: correct product and contact time.
 - Procedures for pre-cleaning and preparing medical devices.
 - Procedures for transportation to the medical device reprocessing unit.
 - Cleanliness of the equipment and devices: cleaning and disinfection methods.
- 9 Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings.
- Review of Competency 3.
 - Verifications required: schedule and guidelines.
 - Procedures for handling and disposing of soiled and contaminated materials, biofluids, instruments with sharp points or cutting edges and biomedical wastes.
 - Maintenance of the equipment, devices and materials.
 - Storage of the equipment, devices and materials and tidying up of the surroundings.
 - Procedures for reporting defects.

Competency 12 Duration 75 hours Credits 5

Behavioural Competency

Statement of the Competency

Provide assistive care to clients in short-term care institutions or critical care settings.

Achievement Context

- In short-term care institutions or in critical care settings.
- For clients of all ages who require short-term or critical care.
- In collaboration with the care team and the interdisciplinary team.
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - verbal and written information and instructions from the professionals concerned.
- Using:
 - the necessary equipment, devices and materials
 - information concerning the client and the continuity of care (work plan, communication tools, etc.)
 - necessary reference works and documents.

Elements of the Competency

1 Plan their work for their entire shift.

Performance Criteria

- Taking of complete notes of relevant information and specific characteristics for each of the assigned clients.
- Correct setting of work priorities.
- Efficient planning of their work.
- Compliance with the work plan and instructions received for each assigned client.
- Appropriate adjustment of the work plan in accordance with the situation, priorities, unexpected events and instructions.

- 2 Carry out activities related to the continuity of care.
 - Active participation in meetings of the care and the interdisciplinary teams.
 - Clear, concise and accurate transmission of relevant information to the people concerned at the opportune times.
 - Accurate recording of relevant information in the required documents.
 - Effective collaboration with members of the care team and of the interdisciplinary team.
 - Careful reporting of information requiring immediate action.
- 3 Note observations related to the situation as well as to the client as a whole.
 - Complete notes on relevant observations, including those related to the client's emotional state and manifestations of discomfort.
 - Demonstration of attentiveness and vigilance.
 - Promptness in meeting the client's needs.
- 4 Adapt their approach to the client's condition and situation and that of their entourage while still establishing a professional relationship of trust.
 - Consideration of the needs and reactions of the client and their entourage.
 - Consideration of relevant information provided by the client and their entourage.
 - Use of an appropriate approach and means to establish a professional relationship of trust with the client and their entourage.
 - Appropriateness of the approach adopted, including AAPA (specialized approach to senior care).
- 5 Adapt personal assistive services related to ADL to the client and the situation.
 - Respect for the instructions and information regarding the client's condition.
 - Careful preparation and appropriate use of the equipment, materials and work area required, depending on the personal assistive services.
 - Efficient and appropriate execution of procedures related to personal assistive services related to ADL, adapted to the client and the situation.
 - Respect for the client's capabilities and autonomy.
- 6 Carry out other tasks associated with the occupation of PAB in a short-term care institution or a critical care setting.
 - Consideration of information pertinent to the task.
 - Correct performance of the preliminary steps.
 - Compliance with the procedures and guidelines related to the task to be performed.
 - Compliance with the time frames and deadlines related to the task to be performed.

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| 7 | Carry out activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces. | <ul style="list-style-type: none"> • Compliance with the guidelines and schedule for the cleaning and disinfection of the equipment, devices, materials and work surfaces. • Cleanliness of the equipment, devices and work surfaces. |
| 8 | Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings. | <ul style="list-style-type: none"> • Rigorous and environmentally friendly disposition of materials, biofluids and biomedical wastes. • Meticulous and proper storage and tidying up. • Accurate reporting of defects found. |

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Compliance with rules to ensure the health and safety of the client, themselves and others.
- Observance of principles for moving people safely (principes de déplacement sécuritaire de personnes [PDSP]).
- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Compliance with verbal and written instructions.
- Observance of the limits of the scope of practice of the occupation.
- Consideration of the client as a whole.
- Correct performance of all the verifications required.
- Respect for the client's capabilities and autonomy.
- Transmission of relevant information to the client and their entourage.
- Use of the terminology and abbreviations related to the occupation.
- Polite, respectful and diligent response to the client's requests or those of their entourage made by their pressing of the call button.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Terminology specific to the competency.
- Verifications required: client comfort, safety, condition, capabilities and identity.
- Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
- Respect for the client: relational approach, respect for the client's dignity, autonomy and potential, privacy.
- Sense of responsibility: autonomy, effectiveness, judgment and problem solving.
- Confidentiality and discretion.
- Decorum: professional attire, proper language and respectful discourse.
- Health and safety of the client, themselves and others: rules to be applied, PDSP, personal limits, management of their stress and emotions.

1 Plan their work for their entire shift.

- Ways of organizing work, schedule and specifics.
- Taking of notes on information and specific details about each assigned client in the required documents: annotations on the checklist or work plan.
- Information and specific details to be gathered: work priorities, treatment schedules, means of medical exploration and consultations, goals of the therapeutic nursing plan (if applicable), guidelines, client's physical and emotional state and the services to be provided.
- Sources of information: documents concerning the client, communication tools and care team.
- Planning of their work: physical organization of the setting, placement of equipment and materials, and establishment of work priorities.
- Compliance with the work plan and instructions: schedules for getting the client up, meals and consultations.
- Adjustment of the work plan in accordance with the situation, priorities, unexpected events and instructions: follow-ups by means of annotations on the checklist or work plan.

2 Carry out activities related to the continuity of care.

- Participation in meetings of the care and the interdisciplinary teams: active listening, answers to questions.
- Clear, concise and accurate transmission of relevant information to the people concerned at the opportune times: client's reactions, changes in the client's condition, observations and inappropriate behaviours.
- Recording of information in the required documents: stool sheet, intake and output report, and diet report.
- Collaboration with members of the care team: suggestion of means intended to improve the client's situation.
- Careful reporting of information requiring immediate action.

- 3 Note observations related to the situation as well as to the client as a whole.
 - Verifications required: well-being and comfort of the client, needs and safety.
 - Observation of reactions and behaviours of the client, according to their condition.
 - Observation of signs of discomfort and pain.
 - Attention and vigilance: regular surveillance rounds, situations requiring a team intervention.
 - Diligent response to the client's needs: response to the requests of the client or those of their entourage made by their pressing of the call button.
 - Changes in the client's behaviours or health condition: abnormal clinical manifestations, suicidal comments, agitation, aggressiveness, risk of running away, the reversible nature of certain conditions, such as delirium, brought on by the illness.
 - Sources of potential danger to health and safety in the environment in which the client is located.

- 4 Adapt their approach to the client's condition and situation and that of their entourage while still establishing a professional relationship of trust.
 - Approach to introducing themselves: explanation of their role, the assistive care to be provided and the goals targeted.
 - Demonstration of interest in the client by asking questions and listening to what the client has to say about their capabilities, needs and emotional state.
 - Means of establishing a professional relationship of trust with the client and the client's entourage: creating a caring atmosphere, and availability (Review of Competency 2).
 - Approach adapted to the client's condition and the situation: refusal and anxiety.
 - Approach adapted to the type of client: age of the client (Review of Competency 2).
 - AAPA (specialized approach to senior care) in a hospital setting: way to prevent functional decline in the client (Review of competencies 2 and 4).

- 5 Adapt personal assistive services related to ADL to the client and the situation.
 - Instructions and information regarding the client's condition: verbal instructions from the care team, presence of equipment, devices and materials.
 - Preparation and use of the equipment, materials and work area required, depending on the personal assistive services.
 - Verifications required: instructions about the condition of the person, opportune time, comfort, diet and the integrity of the equipment, devices and materials.
 - Execution of procedures related to personal assistive services related to ADL: adaptation to the client and the situation (Review of Competency 11).
 - Steps to be taken before, during and after providing the care: care method.
 - Type of assistance required, respect for the client's autonomy.
 - Reasonable time frames and deadlines related to the task or work activity to be performed.

- 6 Carry out other tasks associated with the occupation of PAB in a short-term care institution or a critical care setting.
 - Other tasks: client admission, discharge and transfer, helping the care team provide care (positioning), transport of specimens for laboratory analysis, transport of requests, filling of carts, etc. (Review of Competency 11).
 - Consideration of relevant information concerning the transfer or departure of the client: preparation and accompaniment.
 - Preparation of the room: installation of the equipment, devices and materials, availability and cleanliness of the room.
 - Information to be communicated to the client and their entourage: how the care unit operates.
 - Collaboration with the care team: roles of the members of the care team, notification of the person concerned that the cleaning and disinfection of the room may begin.
 - Procedures for handing over personal effects.
 - Procedure for handling and disposition of the equipment, soiled or throw-away materials: removal and disposition of bedding when clients depart or are transferred (Review of Competency 3).
 - Cleaning and disinfection procedures when clients depart or are transferred (Review of Competency 3).
 - Procedures and instructions related to the task or work activity to be performed: preparation for a means of medical exploration.
 - Reasonable time frames and deadlines related to the task or work activity to be performed.

- 7 Carry out activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces.
 - Review of Competency 3.
 - Verifications required: correct product and contact time.
 - Cleaning and disinfection of equipment and materials.
 - Cleanliness of the equipment and devices: cleaning and disinfection methods.

- 8 Perform tasks related to the disposition, maintenance and storage of equipment, devices and materials, and the cleaning and tidying up of the surroundings.
 - Review of Competency 3.
 - Compliant performance of required verifications: schedule, instructions.
 - Procedures for handling and disposing of soiled and contaminated materials, biofluids, instruments with sharp points or cutting edges and biomedical wastes.
 - Maintenance of equipment and materials.
 - Storage of the equipment, devices and materials and tidying up of the surroundings.
 - Reporting defects.

Competency 13 Duration 45 hours Credits 3

Behavioural Competency

Statement of the Competency

Perform HSSA-related tasks in the context of home care.

Achievement Context

- For everyday situations encountered by HSSAs in the context of home care.
- For all types of clients.
- In collaboration with the work team, interdisciplinary team and with the client's entourage and informal caregivers.
- Based on:
 - laws, regulations and standards in force
 - policies, protocols and procedures in force
 - verbal and written information and instructions from the professionals concerned.
- Using:
 - the necessary equipment, devices and materials
 - digital and technological tools (e.g. communication tools)
 - documents and information concerning the client and the continuity of care (work plan, recording tools, etc.)
 - necessary reference works and documents.

Elements of the Competency

- 1 Carry out activities related to planning and organization throughout the shift.

Performance Criteria

- Recognition of relevant information associated with the organization and operation of home-care services.
- Noting of pertinent information related to the client and the planning of the work.
- Careful planning of their shift and travel.
- Proper planning, checking and preparation of the equipment and materials to be brought for the visits to be made.
- Appropriate planning and follow-ups on appointments.
- Appropriate adjustment of priorities in accordance with unexpected events and instructions.

- 2 Carry out activities related to the continuity of care.
 - Careful and complete noting of relevant information about the client and their condition.
 - Careful noting of relevant observations concerning the client, their entourage and the situation.
 - Correct performance of other activities related to the continuity of care.
 - Appropriate use of means of communication.
 - Accurate recording of relevant information in the appropriate documents.

- 3 Adapt their approach to the client's condition and situation and that of their entourage while still establishing a professional relationship of trust.
 - Noting of the needs and reactions of the client and their entourage.
 - Consideration of relevant information provided by the client and their entourage.
 - Use of an appropriate approach and means to establish collaboration and a professional relationship of trust with the client and their entourage.
 - Appropriateness of the approach adopted.
 - Careful proposal and proper application of guidelines related to occupational activities.

- 4 Adapt personal assistive services related to ADL.
 - Consideration of relevant information and observations concerning the condition of the client.
 - Proper execution of procedures related to helping a client to move, positioning and transfers, depending on the client's condition and the situation.
 - Proper carrying out of procedures related to other personal assistive services related to ADL, depending on the condition of the client and the situation.
 - Adapted and proper use of the equipment, devices and materials in accordance with the situation.
 - Proper and relevant adaptation of personal assistive services related to ADL.

- 5 Provide non-invasive assistive care related to ADL (non-regulated activities).
- Accurate recognition of non-regulated activities.
 - Accurate distinction between the distribution of medications and the administration of medications.
 - Correct application of procedures and precautions concerning the distribution of medications.
 - Correct execution of procedures related to non-regulated activities.
 - Compliance with the instructions from the professionals concerned.
 - Accurate and complete recording of relevant information in the appropriate documents.
- 6 Prevent or intervene in situations involving a risk to the client, themselves and the people around.
- Careful noting of observations with regard to situations involving risk.
 - Relevant suggestion of means to ensure that the client and the surroundings are safe.
 - Compliant use of means of preventing situations involving health and safety risks.
 - Appropriate and complete declaration of situations involving risk.
 - Compliance with intervention protocols and procedures depending on the setting.
 - Careful reporting of any changes or relevant observations to the professional concerned.
- 7 Adapt activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces to the context of home care.
- Proper adaptation of cleaning and disinfection methods to the context of home care.
 - Cleanliness of the equipment, devices and work surfaces.
- 8 Adapt activities related to the disposition, maintenance and storage of equipment and materials, and the tidying up of the surroundings.
- Environmentally friendly disposition of soiled and contaminated materials, biofluids and biomedical waste.
 - Proper adaptation of disposition, maintenance and storage methods to the context of home care.
 - Maintenance and storage appropriate to the situation.

For the competency as a whole:

- Compliance with the rules of hygiene and asepsis.
- Correct application of measures to prevent and control infections in home-care settings.
- Compliance with rules to ensure the health and safety of the client, themselves and others.

- Observance of principles for moving people safely (principes de déplacement sécuritaire de personnes [PDSP]).
- Compliance with laws, regulations and standards in force.
- Compliance with policies, protocols and procedures in force.
- Observance of the limits of the scope of practice of the occupation.
- Compliance with verbal and written instructions.
- Consideration of the client as a whole.
- Correct performance of all the verifications required.
- Clear, concise and accurate transmission of relevant information to the people concerned at the opportune times.
- Use of the terminology and abbreviations related to the occupation.
- Transmission of relevant information to the client and their entourage.
- Demonstration of attention and vigilance with regard to the client's behaviours and lifestyle habits, to those of the people around them and the surroundings.
- Adoption of expected professional behaviours.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each element of the competency, along with their related guidelines.

For the competency as a whole:

- Procedures related to measures to prevent and control infections and contamination depending on the setting: in case the client and members of their entourage present symptoms, adaptation in accordance with the equipment and materials in the home.
- Verifications required: client comfort, safety, condition, capabilities and identity.
- Compliance with verbal and written instructions: instructions in the interdisciplinary team's intervention plan, walking program, occupational and community activities, and passive and active exercises.
- Physical, emotional, intellectual, social and spiritual aspects, including multicultural aspects, diversity and Indigenous cultural safety.
- Attention and vigilance: signs of abuse and observation of the family dynamic.
- Terminology specific to the competency.
- Respect for the client: relational approach, the client's potential and privacy.
- Sense of responsibility: judgment, honesty, problem solving and collaboration with the team.
- Decorum: professional attire, proper language and respectful discourse.
- Health and safety of the client, themselves and others: rules to be applied and PDSP.

- 1 Carry out activities related to planning and organization throughout the shift.
 - Organization and operation of home-care services: specifics linked to home care.
 - Relevant information to note: client's condition, reports and notes from other workers, instructions from the professionals concerned and the interdisciplinary team's intervention plan.
 - Planning of their shift and travel: procedures for entering the home, planning of the route and schedule in accordance with the instructions from the team leader.
 - Planning, checking and preparation of the equipment and materials to be brought for the visits to be made: choice of the equipment and materials required and ways to facilitate transport.
 - Planning and follow-up of appointments: contact with the client to confirm the appointment and communication tools.
 - Handling of telephone calls: wording of clear, relevant information and a complete, professional message.
 - Appropriate adjustment of priorities in accordance with unforeseen events or instructions: flat tire, bad weather, visit longer than expected, traffic on the road and change in the client's condition.
 - Reporting of changes in the schedule to the team leader.

- 2 Carry out activities related to the continuity of care.
 - Careful and complete noting of relevant information about the client and their condition: capabilities and autonomy and instructions in the interdisciplinary team's intervention plan.
 - Observations concerning the client, their entourage and the situation: reactions and behaviours of the client and their entourage; changes in the client's condition or situation.
 - Observations concerning the client's emotional state, reactions and behaviours, lifestyle habits and manifestations of pain and discomfort.
 - Other activities related to the continuity of care: communication notebook left at the home to enable transmission of information to colleagues.
 - Communication means: text messages, email, telephone calls.
 - Electronic messages: coherent and clear wording of messages, standard spelling and appropriate classification of message.
 - Recording of information in the required documents: appropriate places, times, use of recognized terminology and abbreviations, standard spelling.

- 3 Adapt their approach to the client's condition and situation and that of their entourage while still establishing a professional relationship of trust.
 - Needs and reactions of the client and their entourage: attention and vigilance.
 - Transmission of observations to the work team and to the interdisciplinary team with the goal of targeting the available community resources.
 - Definition of an informal caregiver.
 - Information transmitted by the client and their entourage: change in behaviours, diminishing capabilities of the client and burnout of members of the entourage, including the informal caregiver.
 - Approach and means to establish collaboration and a professional relationship of trust with the client and their entourage (Review of Competency 2).
 - Demonstration of methods to the client's entourage for personal assistive services related to ADL.
 - Occupational activities: consideration of the preferences and needs of the client, of the need for respite for the entourage and time management.
 - Guidelines related to occupational activities: available community resources, respite and day centres.

- 4 Adapt personal assistive services related to ADL.
 - Verifications required: client's capacities, surroundings, equipment and materials available.
 - Procedures related to helping a client to move, positioning and transfers: steps to be taken before, during and after carrying out the procedures.
 - Situations: confined spaces, equipment breakdowns, lack of material and organization of time.
 - Procedures related to personal assistive services related to ADL: steps to be taken before, during and after carrying out the procedures.
 - Equipment and devices in place in the home: bed, conventional bath, patient lift and manual sit-to-stand lift.
 - Set-up of the work area to avoid constrained postures for themselves and clients.
 - Consideration of the situation in order to pinpoint the problem and seek solutions and ways to intervene.

- 5 Provide non-invasive assistive care related to ADL (non-regulated activities).
 - Identification of non-regulated activities:
 - taking of vital signs (measuring blood pressure and heart rate with an electronic apparatus)
 - taking of temperature in the mouth using a digital thermometer
 - measuring of capillary blood sugar level
 - installation of a nasal cannula or an oxygen mask if the flow has already been preadjusted
 - collection of urine and feces samples
 - maintenance and emptying of a urine collection bag and collecting apparatus for a stoma
 - application of a dry protective dressing and a transparent adhesive film
 - putting on of compression stockings
 - measuring of urine
 - installation of a continuous positive airway pressure (CPAP) device
 - installation of a bilevel positive airway pressure (BPAP) device
 - installation of an oxygen concentrator.
 - Distinction between the distribution of medications and the administration of medications (Review of Competency 10).
 - Procedures and precautions concerning the distribution of medications: verifications to be done.
 - Procedures related to non-regulated activities: steps to be taken before, during and after carrying out the procedures.
 - Interpretation of instructions from the professional concerned: recognized terminology and abbreviations.
 - Recording of relevant information in the required documents: rules and observations.

- 6 Prevent or intervene in situations involving a risk to the client, themselves and the people around.
 - Observation of the client's condition, the surroundings and the client's entourage.
 - Situations involving risk: categories of risk.
 - Situations associated with uncleanliness: Diogenes syndrome, uncleanliness, unsafe environment, unhygienic conditions; presence of cockroaches or bedbugs, second-hand smoke, companion animals and snow-covered yard.
 - Examples of situations involving risks in order to learn how to determine the degree of urgency and necessity of intervening, calling on the team or calling for help from the outside.
 - Suggestion and use of means to ensure that the client and the surroundings are safe: uncluttering, grab bars, safety equipment and materials.
 - Protocols and procedures for declaring situations involving risk: to whom and how.
 - Intervention protocols and procedures depending on the setting: bedbugs, danger for the client, violence and disorganization.

- 7 Adapt activities related to the cleaning and disinfection of the equipment, devices, materials and work surfaces to the context of home care.
 - Review of Competency 3.
 - Verifications required: choice of available products.
 - Adaptation of cleaning and disinfection methods: availability of products and materials.
 - Alternatives to using cleaning and disinfecting products: various possibilities for using available materials and products.
 - Cleanliness of the equipment, devices and work surfaces: depending on the situation.

- 8 Adapt activities related to the disposition, maintenance and storage of equipment, devices and materials, and the tidying up of the surroundings.
 - Review of Competency 3.
 - Verifications required: availability of materials.
 - Procedures for disposition of soiled and contaminated materials, biofluids and biomedical waste.
 - Procedures related to maintenance and storage for home care: depending on the situation.
 - Procedures for transport in the car or other.

Competency 14 Duration 75 hours Credits 5

Situational Competency

Statement of the Competency

Enter the workforce in a long-term care centre, short-term care centre, critical care centre or in the context of home care.

Elements of the Competency

- Take steps to obtain a practicum position.
- Perform tasks associated with the occupation of PAB or the occupation of HSSA.
- Integrate into the work team.

Learning Context

Information Phase

- Learning about the terms and conditions of the practicum and the information and documents related to it.
- Learning about the physical environment of the practicum setting.
- Informing themselves about the rules and practices in force, and the organization of work in the practicum setting.
- Informing themselves about the role and tasks of a PAB or HSSA in the practicum setting.

Participation Phase

- Finding health and social services institutions, including CLSCs for home care and alternative living environments, that are able to meet their expectations and needs.
- Observing practices associated with the occupation of PAB or the occupation of HSSA.
- Performing different tasks and activities associated with the occupation of PAB or the occupation of HSSA or help perform them in compliance with:
 - the rules of hygiene and asepsis
 - the rules to ensure the health and safety of clients, themselves and others
 - the PSDP
 - the laws, regulations and standards
 - the policies, protocols and procedures
 - the limits of the scope of practice of the occupation.
- Interacting with colleagues, people responsible for supervision, clients and their entourages as well as with the care team and the interdisciplinary team.
- Keeping a log of tasks and activities carried out during the practicum.

Synthesis Phase

- Produce a report on their practicum experience that includes:
 - a self-assessment of their participation
 - a summary of their experience
 - a description of tasks performed and observed as well as the connections between them and the training received
 - their strengths and areas needing improvement as well as the means to do so.

Instructional Guidelines

- Provide the student with the documents and resources needed to carry out the practicum.
- Assign the student to a practicum setting or provide them with a list of care settings likely to accept interns (place, size and type of institution and clientele, rules, tasks to be performed, etc.).
- Ensure that the practicum setting is conducive to the integration of the student, if applicable.
- Maintain close collaboration between the vocational training centre and the practicum setting.
- Ensure that interns are properly supported and guided by a supervisor in the practicum setting.
- Ensure that interns are provided with daily support and guidance by teaching staff at the vocational training centre.
- Intervene in the case of difficulties or problems.

Participation Criteria

Information Phase

- Consult the documents and the resources needed to carry out the practicum.
- Gather information about the workplace and the tasks to be performed during the practicum.

Participation Phase

- Take steps to obtain a practicum in the workplace or learn about the practicum setting to which they are assigned.
- Participate in the task and work activities in compliance with the limits of the scope of practice of the occupation and the legal, regulatory and normative aspects.
- Integrate into the care team.
- Follow the rules of the practicum setting.
- Adopt the professional behaviours expected.

Synthesis Phase

- Produce a report on their practicum by presenting:
 - a self-assessment of their participation
 - a summary of their experience
 - the tasks and operations performed during the practicum
 - their strengths and areas needing improvement as well as the means to do so.

Suggestions for Competency-Related Knowledge and Know-How

The following is a summary of the knowledge, skills, strategies, attitudes and perceptions related to each phase of the learning context, along with their related guidelines.

Information Phase

- Conditions and information with regard to the practicum: goals and duration, supervision, requirements and participation criteria, etc.
- Information about the practicum setting: policies of the institution, dress code, decorum, schedule, meals, breaks, set-up and organization of work, location of equipment and materials, etc.

- Information related to tasks carried out in a practicum setting: plan their work; collaborate in activities related to the continuity of care and services; provide personal assistive services related to the movement, positioning and transfer of the client and to other activities of daily living, etc.
- Practicum agreement: statement of the terms and conditions, acceptance of the agreement by all parties, etc.

Participation Phase

- Observe various activities and participate in them: work context or setting, schedules, tasks and work activities, responsibilities, etc.
- Adopt attitudes and behaviours that promote integration into the workforce: soft skills and know-how, professional behaviours, etc.
- In performing tasks and staying within the limits of the scope of practice of the occupation, importance of the legal, regulatory and normative framework; policies, procedures and protocols; rules related to ethics and professional behaviours expected; the code of conduct of the institution, work methods as well as rules related to occupational health and safety for clients, themselves and others; and those related to hygiene, asepsis and to PDSP (principes de déplacement sécuritaire de personnes / principes for moving people safely).
- Log: content of a typical report, report on tasks and activities performed, completed and observed, new learning, etc.

Synthesis Phase

- Report format: written document, oral presentation, audio or video document, individual or group meeting, etc.
- Importance of objectivity in the report.

