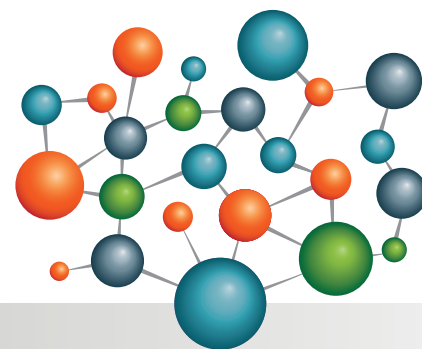


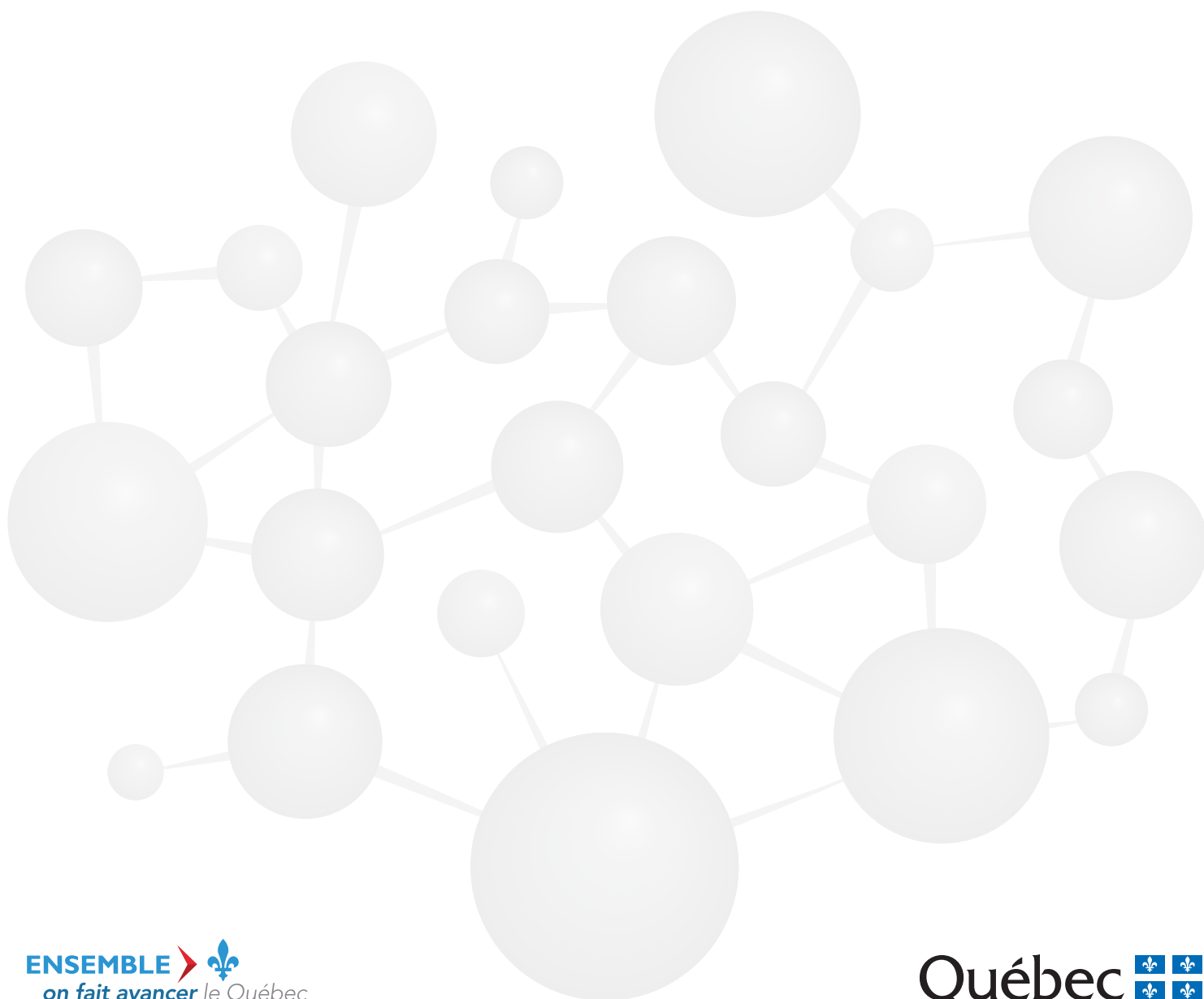
PROGRAM OF STUDY

INSTITUTIONAL AND HOME CARE ASSISTANCE (DVS 5858)

Training Sector:
HEALTH SERVICES



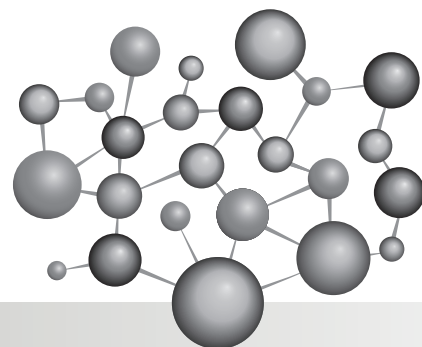
MINISTÈRE DE L'ÉDUCATION ET DE L'ENSEIGNEMENT SUPÉRIEUR



PROGRAM OF STUDY

INSTITUTIONAL AND HOME CARE ASSISTANCE (DVS 5858)

Training Sector:
HEALTH SERVICES



MINISTÈRE DE L'ÉDUCATION ET DE L'ENSEIGNEMENT SUPÉRIEUR



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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.

A program is 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.

According to the Education Act,¹ every program “shall include compulsory objectives and contents and may include optional objectives and contents that shall be enriched or adapted according to the needs of students who receive the services.” 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 corresponding components.

For information purposes, programs also provide a grid of competencies, educational aims, a summary of competency-related knowledge and know-how, and tables on the health and safety risks in the workplace. 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 Goals

Program goals 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 goals 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, 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 *Education Act*, CQLR., c. I-13.3, s. 461

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, strategies, attitudes, perceptions, 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.

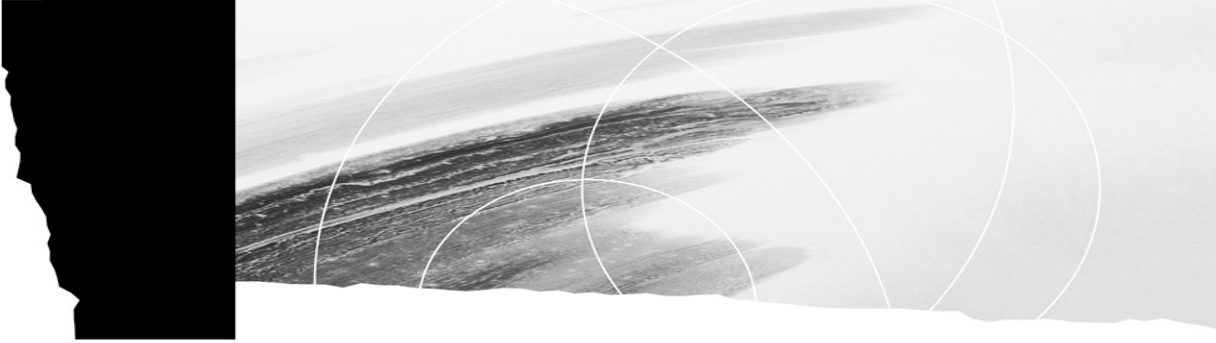
Aspects of Program Implementation

Program-Based Approach

The program-based approach is founded on a comprehensive view of a program of study and its components (e.g. goals, 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 (e.g. skills, strategies, attitudes, perceptions).



5858

INSTITUTIONAL AND HOME CARE ASSISTANCE

Year of approval: 2017

Certification:	Diploma of Vocational Studies
Number of credits:	58 credits
Number of competencies:	15 competencies
Total duration:	870 hours

To be eligible for admission to the *Institutional and Home Care Assistance* program, 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.

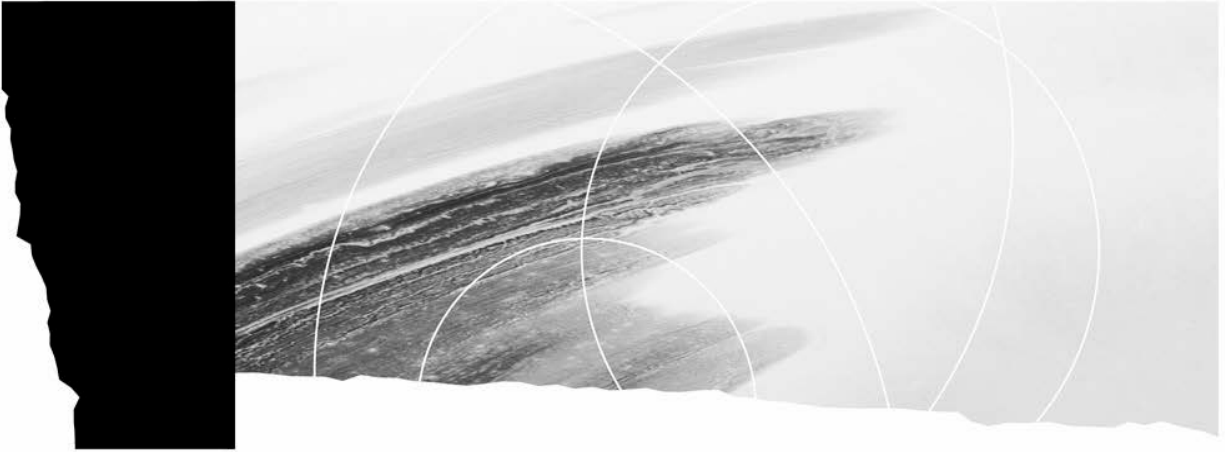
OR

- Persons who are at least 18 years of age in the school year in which they begin their training and have the following functional prerequisites: the successful completion of the general development test (GDT) and the specific language of instruction prerequisites for the program (i.e. ENG 3101-1 and ENG 3102-2) or recognition of equivalent learning.

The duration of the program is 870 hours, which includes 435 hours spent on the specific competencies required to practise the trade or occupation and 435 hours on general, work-related competencies. The program of study is divided into 15 competencies which vary in length from 30 to 120 hours. The total hours allocated to the program include time devoted to teaching, evaluation of learning and enrichment or remedial activities.

Specifics of the Program

Competency	Code	Number	Hours	Credits
The Occupation and the Training Process	751702	1	30	2
Helping Relationship	751714	2	60	4
Relational Approaches	751724	3	60	4
Needs of Clients With Physical Illnesses and Disabilities	751734	4	60	4
Activities of Daily Living	751745	5	75	5
Prevention of Infections and Contamination	751752	6	30	2
Basic Daily Care Procedures	751768	7	120	8
Situations Involving Risk	751772	8	30	2
Care in the Home or Alternative Living Environments	751787	9	105	7
Family, Social and Cultural Contexts	751794	10	60	4
End-of-Life Care	751802	11	30	2
Medications and Basic Invasive Care	751813	12	45	3
Care Related to the Client's Clinical Reality	751824	13	60	4
First Aid	751832	14	30	2
Short-Term Assistive Care	751845	15	75	5



Part I

Program Goals

Specific Features of the Program

Educational Aims

Glossary

Statements of the Competencies

Grid of Competencies

Harmonization

Program Goals

The *Institutional and Home Care Assistance* program prepares students to practise the trade or occupation of care attendant in the health and social services sector. Graduates may work in positions that bear various job titles² in the public, private and community networks.

In general, the occupation of attendant involves helping and caring for clients of all ages who have physical, psychological or psychosocial illnesses or disabilities. The purpose is to help clients compensate for their disabilities and to assist them in maintaining or regaining their autonomy and health.

To be more specific, the tasks of attendants consist in providing care, supporting or guiding clients in organizing and carrying out activities of daily living, primarily those involving moving around, hygiene, elimination, comfort, dressing, nourishment and hydration. Attendants may be called upon to provide occupational therapy activities or to facilitate the process of socializing clients and integrating them into their environments. In all cases, attendants work to prevent infections, contamination and accidents. Most of the tasks carried out by attendants require that they first establish a relationship of trust with the client and the client's family and friends, a prerequisite for providing care. These tasks then require attendants to adapt their assistive care to the client's condition, family and friends, and physical surroundings.

Attendants work alone or with colleagues, depending on the workplace. They work in an existing team respecting each team member's scope of practice. Their contribution consists in communicating, when needed, their observations about the clients they have met, and to make suggestions, if applicable. The information communicated may concern the client's physical condition, emotional state, lifestyle habits, human and physical surroundings, and his or her family, social or cultural realities. In this way, attendants play a role in identifying the changing needs of clients, planning services for them and providing their ongoing care.

Practising this occupation requires an extraordinary ability to adapt to the variety of clients and needs, the large number and different types of illnesses and disabilities, changing contexts, and equipment specific to each workplace. It also requires the ability to act ethically, prudently and with good judgment and to pay close attention to variations in the client's overall state of health.

The program goals of the *Institutional and Home Care Assistance* program 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 in the different workplaces covered by the program (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 work force, 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

² When the current program of study was published, the most common titles were home care attendant and patient service attendant. The short form, "attendant," is used in this document for the sake of brevity.

- To foster students' personal development and acquisition of occupational knowledge, skills, perceptions and attitudes, that is:
 - to help students develop their versatility, autonomy and resourcefulness, and their 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

Specific Features of the Program

This program was designed around the competency profile sought by employers in order to offer assistance services in all types of environments and to all types of clients.

Guiding principles

- Work situations of the two main positions, i.e. home care attendant and patient service attendant (see the integrative diagram in the appendix)
- Intervention contexts: 1) home; 2) alternative living environment; 3) care facility
- Sufficient autonomy and resourcefulness to enable the person to provide care in these three contexts
- Professional behaviours sought by employers
- Two of the cornerstones of the occupation: the **relational aspect**, considered to be a prerequisite condition for providing services, and the **technical aspect** of the assistive care to be provided³
- Laws and policies of government health services and social services in force when the program of study was developed

Fundamental characteristics of the program of study

- It is structured to take into account the three intervention contexts mentioned above in order to ensure versatility
- It covers the three outcomes of the training: a helping relationship, compliant and adapted assistive care, and effective participation in teamwork
- It enables students to develop a professional conscience and work ethics through the various professional behaviours that run as a common thread (see the *Educational Aims* section)
- It ensures a transverse development of the desired behaviours in the area of workplace health and safety
- It enables students to develop the ability to adapt their interventions to the client's life situation and the specific demands of each context, through practical training in the workplace

³ Marie-Emmanuelle Laquerre, *Travailler en soutien à domicile dans un contexte pluriethnique. Quand faire, c'est être* (Québec : Presses de l'Université du Québec, 2015), 305. Book based on the author's doctoral dissertation.

The Ministère is aware that the health and social services field is constantly evolving in terms of the legal and regulatory framework, administrative structures, science and technology. It is therefore up to educational institutions to monitor this evolution and update the competency-related knowledge, skills, attitudes and perceptions over time.

It is recommended that, along with the in-class development of the competencies needed for the different intervention contexts, versatility should be developed by varying the workplaces in which the future graduates receive their practical training.

Educational Aims

The aim of the *Institutional and Home Care Assistance* program is to help students develop attitudes and behaviours that representatives from education and the field deem essential to the practice of the occupation:

1. The ability to respect the dignity of clients and consider each one as a whole
2. The ability to perform tasks responsibly as a member of the work team
3. The ability to respect the confidential nature of the information disclosed by clients and exercise discretion
4. The ability to comply with the rules and protocols of the occupation
5. The ability to watch over their own health and safety as well as that of clients
6. The ability to reflect on themselves and their practices
7. The ability to act in accordance with professional ethics in special situations

Glossary

This section provides the definitions of certain terms used in the program of study. The terms associated with professional behaviours are defined first, followed by those associated with the workplaces and by other terms that might be confusing.

Terms associated with professional behaviours

1. **Respect for the client:** the ability to build a relationship with clients, taking into consideration the fact that everyone has the right to unconditional respect, regardless of the client's age, gender, physical or mental health, beliefs, values, social status or ethnic origin. It is respect for human dignity. To be more specific, it is also the ability to perform one's tasks taking into consideration the person as a whole, his or her privacy, capacity to make decisions and functional autonomy.
2. **Sense of responsibility:** the ability to perform their role and tasks autonomously and effectively by offering quality service, in collaboration with the team, and being careful to report anomalies honestly. A sense of responsibility also implies exercising good judgment in solving problems while remaining within the legal framework and complying with the protocols and policies of their workplace. Having good judgment is particularly important in this occupation because negligence or poor decisions may result in harm to the client.
3. **Confidentiality and discretion:** ability to refrain from discussing clients' health conditions with anyone other than the work team and, even then, to communicate nothing more than relevant personal information, and recorded observations and facts. It is also the ability to exercise discretion with regard to their personal lives and those of clients.
4. **Professional decorum:** ability to comply with the rules and protocols of the occupation or the workplace regarding professional attire, proper language and respectful discourse.
5. **Health and safety for themselves and clients:** ability to remain vigilant with regard to clients' physical and psychological health, the safety of the places where clients find themselves, the risks of communicable illnesses to which clients are exposed, and their movements. It is also the ability to protect their own health as workers by being attentive to their physical and mental limits, and managing their emotions and stress so they can act calmly and in compliance with workplace health and safety rules.
6. **Self-development:** ability to think honestly about their actions and behaviours during their training and throughout their careers. This ability serves mainly to help them maintain their physical and emotional equilibrium, adapt to different situations and ask for support, as required.
7. **Ethical situations:** situations that go against the values and rules of conduct specific to the field, described in the different codes of ethics of the occupation and workplaces.

Workplaces

- **Home:** normally and primarily occupied by one or more individuals of the same household, such as a single-family home or an apartment
- **Alternative living environment:** replaces the home. It could be a long-term care establishment, a family residence or something in between (e.g. group residence, rooming house, supervised apartment, foster home or seniors' residence), a rehabilitation centre, or youth centre that provides lodging
- **Care facility:** an establishment offering short-term medical care

Activities of daily living, domestic activities and occupational activities

- **Activities of daily living:** the daily activities carried out by clients in order to look after themselves. These activities are associated with self-care and include dressing, eating, moving around and personal hygiene and grooming
- **Domestic activities:** the daily tasks performed by a person inside and around the home, including using the telephone, preparing meals, managing finances and housekeeping
- **Occupational activities:** activities carried out by a person in order to take part in social life or keep themselves busy. These activities are linked to recreation and hobbies
- **Non-regulated activities and exceptions to reserved activities**
- **Non-regulated activities:** care activities that are not reserved for a health care professional within the scope of the laws governing the profession because they are considered to be non-invasive technical activities that pose no risk or danger
- **Exceptions to reserved activities:** care activities that are exceptions to those covered by the laws governing the profession. In the *Professional Code*, these are activities that are not reserved for a health care professional when they are performed in places identified by the law, under certain conditions

Holistic approach and relational approach

- **Holistic approach:** based on the philosophy that a person must be understood as a whole and that the biological, intellectual, emotional, spiritual and psychosocial aspects of a human being are all interconnected. "Using this approach involves understanding someone in all the dimensions of his or her life, including his or her identity, history, living conditions, needs, interpersonal relationships and social networks, abilities, strengths, resources." (Relais-Femmes, *L'intervention en contexte de milieu de vie*, 2009, 5. *Translation*)
- **Relational approach:** a client-based approach to working with clients and their family and friends. Simultaneously encompassing interpersonal relations, communication and interaction, this approach is connected with the helping relationship without, however, reaching the superior degree of complexity of a therapeutic relationship

Scope of practice

Scope of practice refers to the set of professional activities exercised in accordance with specific standards and objectives by a person who has received the necessary training and authorizations to that effect. A concise description of the scope of practice of attendants is found in the section entitled *Program Goals*.

Occupation

The term “occupation” refers to clearly-defined work, manual or not, performed for an employer or by a self-employed person, from which a person earns his or her livelihood. In programs of study, the term “occupation” is used generically and covers all the usual meanings: trade, profession and occupation.⁴ It is in no way related to the definition given in the *Professional Code*.

Clinical reality

Clinical reality is specifically related to manifestations and subjective symptoms of various illnesses and disabilities, such as pain or discomfort, expressed by the client.

Assistive care

Assistive care hinges on the service relationship, which encompasses the two cornerstones of the occupation.

- The **relational aspect** refers to the interpersonal relationships between the attendant and the client, and the attendant and the client’s family and friends. It is associated with the helping relationship but does not include the therapeutic relationship, which is more complex
- The **technical aspect** of assistive care, relating to methods, ways of doing things, protocols, etc.

Neurodevelopmental disorders

“Neurodevelopmental disorders” is a category of disorders listed in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5). This category includes intellectual disability, global developmental delay, social communication disorder, autism spectrum disorder, and attention-deficit/hyperactivity disorder (ADHD) with or without hyperactivity.

⁴ Ministère de l'Éducation, du Loisir et du Sport and Commission des partenaires du marché du travail/Ministère de l'Emploi et de la Solidarité sociale. *Cadre de référence et instrumentation pour l'analyse d'une profession* (Québec, May 2007), 4.

Statements of the Competencies

List of Competencies

- Determine their suitability for the occupation and the training process.
- Establish a helping relationship.
- Adopt relational approaches with clients with cognitive impairments, mental health problems or neurodevelopmental disorders.
- Determine the appropriate means to respond to the needs of clients with physical illnesses and disabilities.
- Provide care related to activities of daily living (ADL).
- Prevent infections and contamination.
- Provide assistive care related to daily activities.
- Deal with situations involving risk.
- Work with clients who require assistive care at home or in alternative living environments.
- Deal with family, social and cultural contexts.
- Provide assistance to clients in palliative and end-of-life care.
- Consider the rules and procedures for administering medications and basic invasive care involved in assistance with activities of daily living.
- Provide assistive care related to the client's clinical reality.
- Administer first aid.
- Provide assistive care to clients requiring short-term 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 *Institutional and Home Care Attendant*, as well as the major steps in the work process.

The general competencies appear on the horizontal axis and the specific competencies, on the vertical axis. The symbol (○) indicates a correlation between a general and a specific competency. The symbol (Δ) indicates a correlation between a specific competency and a step in the work process. 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

INSTITUTIONAL AND HOME CARE ASSISTANCE SPECIFIC COMPETENCIES	Competency number	Type of competency	Duration (in hours)	GENERAL COMPETENCIES										WORK PROCESS						TOTAL
				Determine their suitability for the occupation and the training process	Establish a helping relationship	Adopt relational approaches with clients with cognitive impairments, mental health problems or neurodevelopmental disorders	Determine the appropriate means to respond to the needs of clients with physical illnesses and disabilities	Prevent infections and contamination	Deal with situations involving risk	Deal with family, social and cultural contexts	Provide assistance to clients in palliative care	Consider the rules and procedures for administering medications and basic invasive care involved in assistance with activities of daily living	Administer first aid	Become familiar with data and instructions	Plan their work	Develop a relationship with client	Provide services	Perform tasks related to maintaining and tidying up materials, equipment and the work area	Ensure follow-up to the intervention	
	Competency number	Type of Competency	Duration (in hours)	1 S	2 B	3 B	4 B	6 B	8 B	10 B	11 B	12 B	14 B							
				30	60	60	60	30	30	60	30	45	30							435
Provide care related to activities of the clients' daily lives	5	B	75	O	●	●	●	O	O	O	O	O	O	▲	▲	▲	▲	△	▲	
Provide assistive care related to daily activities	7	B	120	O	●	●	●	●	O		O	O	O	▲	▲	▲	▲	▲	▲	
Work with clients who require assistive care at home or in alternative living environments	9	B	105	O	●	●	●	●	●	O	O	O	O	▲	▲	▲	▲	▲	▲	
Provide assistive care related to the client's clinical reality	13	B	60	O	●	●	●	●	●	●	●	O	O	▲	▲	▲	▲	▲	▲	
Provide assistive care to clients requiring short-term care	15	B	75	O	●	●	●	●	●	●	●		O	▲	▲	▲	▲	▲	▲	
Total of duration			435																	870

Links between the general competencies and the specific competencies

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

Links between the work process and the specific competencies

- △: Existence of a link
- ▲: Application of a link

Harmonization

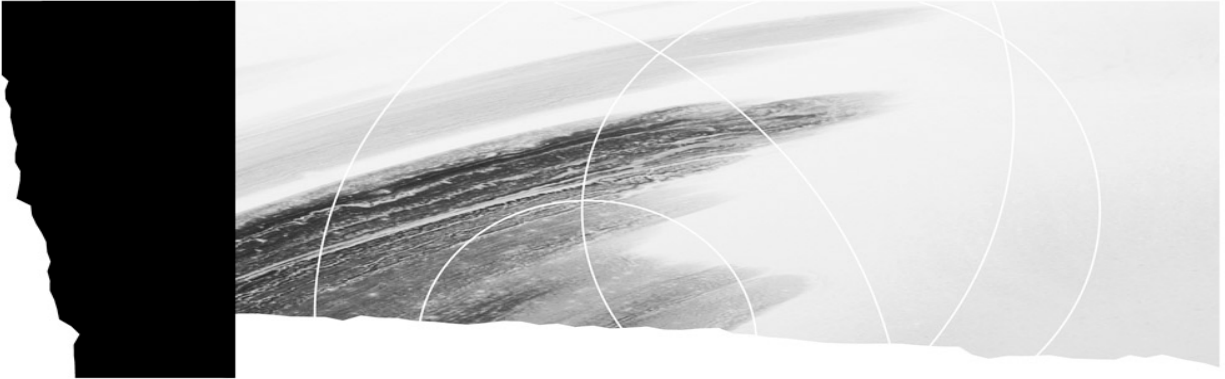
The Ministère de l'Éducation et de l'Enseignement supérieur harmonizes its vocational and technical programs by establishing similarities and continuity between secondary- and college-level programs within a particular sector or between sectors in order to avoid overlap in program offerings, to recognize 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 *Institutional and Home Care Assistance* 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, Assistance à la personne en établissement et à domicile*.



Part II

Program Competencies

Competency 1 Duration 30 hours Credits 2

Situational Competency

Statement of the Competency

Determine their suitability for the occupation and the training process.

Elements of the Competency

- Become familiar with the realities of the occupation
- Understand the training program
- Confirm their career choice

Learning Context

Information Phase

- Learning about the job market in the public, private and community health care networks
- Learning about professional practice by consulting job analysis reports⁵
- Learning about the health and safety risks associated with the physical and psychological aspects of the occupation
- Learning about the current legal and regulatory framework
- Learning about the program of study
- Learning about professional behaviours and the associated terms defined in the glossary, relating to the educational aims
- Learning about job prospects and resources available for the job search

Participation Phase

- Organizing the information gathered about professional practice, the legal and regulatory framework, and the workplace health and safety risks
- Making connections between professional practice and the program of study
- Discussing the information gathered as well as their perceptions of the occupation as practiced in the various work situations: home, alternative living environments and care facilities
- Presenting their perception of professional behaviours to be developed and the importance of these behaviours
- Becoming involved in finding ways to further their educational success
- Taking stock of the job opportunities in this field
- Checking the resources available for the job search and possibilities for entrepreneurship

Synthesis Phase

- Assessing their aptitudes, preferences, interpersonal skills, attitudes, and physical and psychological limitations
- Comparing their assessment with the requirements of the occupation and the training process
- Taking stock of the reasons behind their decision to continue with or withdraw from the training program

⁵ Ministère de l'Éducation, du Loisir et du Sport. *Préposée et préposé aux bénéficiaires en établissement de santé* (2004); *Auxiliaires familiales et sociales et auxiliaires familiaux et sociaux* (2005); *Assistance à la personne – Rapport de l'atelier d'actualisation des analyses de profession* (2013).

Instructional Guidelines

- Ensure the availability of up-to-date information
- Encourage students to become familiar with the job analysis reports for the occupation and the workplace health and safety chart found in the appendix
- Organize meetings with specialists in the field or visits to workplaces
- Promote discussions in a climate of openness and respect
- Make connections between the attitudes and behaviours expected during the training and those required in the workplaces
- Provide students with the means to assess their career choice objectively and honestly
- Provide students with information on the support resources available at the educational institution and in the community
- Provide the support and guidance required for students' self-evaluation
- Provide students with resources to help them in their job search

Participation Criteria

Information Phase

- Gather information on most of the topics to be covered

Participation Phase

- Demonstrate regular attendance and punctuality
- Demonstrate attentive listening and respect for peers
- Express their views on the occupation and on the training program, relating them to the information they have gathered
- Emphasize the importance of professional behaviours

Synthesis Phase

- Write an objective report that sums up the result of their process.
- Justify their decision to continue with or withdraw from the program.

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

- Note-taking techniques: selection of points to record, common abbreviations and organization of information

Information to be gathered on the job market

- Job market in public, private and community networks in the health and social services field: mission of the organizations, types of clients served, remuneration and working conditions
- Work settings for care attendants:
 - Home: normally and primarily occupied by one or more individuals of the same household, such as a single-family home or an apartment
 - Alternative living environment: replaces the home. It could be a long-term care establishment, a family residence or something in between (e.g. group residence, rooming house, supervised apartment, foster home or seniors' residence), a rehabilitation centre, or youth centre that provides lodging

- Care facility: an establishment offering short-term medical care
- Information on the health and social services field: organization of services; types of services, clientele and service providers
- Potential employers include public or public-private establishments in the health and social services network, private residences, private agencies and community organizations; opportunity for self-employment

Information to be gathered on professional practice

- Information from the above-mentioned job analysis reports and other reference sources
- Workplace health and safety chart: categories of risks, including their sources, effects on human health and preventive measures
- Scope and limits of responsibilities inherent in the occupation, depending on the setting: working in a team, roles, tasks, limits of scope of practice, collaboration with various care providers

Information to be gathered on the current legal and regulatory framework

- Laws and various publications and their impact on the work (to be updated over time):
 - *Act respecting health services and social services*
 - *Act respecting occupational health and safety*
 - *Act respecting industrial accidents and occupational diseases*
 - *Act to amend the Professional Code and other legislative provisions as regards the health sector*
 - Codes of ethics of professional associations
 - Publications of the Ministère de la Santé et des Services sociaux
 - Publications of the Association paritaire pour la santé et la sécurité du travail du secteur affaires sociales (ASSTSAS)
- Workplaces: institutional committees, professional associations, special institutional committees in health and social services, and unions

Information to be gathered on the program of study

- Exit profile described in the *Program Goals*
- Competencies to be developed
- Professional behaviours: demonstration of respect for the client, a sense of responsibility, confidentiality and discretion, decorum, concern for the health and safety of themselves and clients, self-development and appropriate response to situations of an ethical nature
- Learning and evaluation requirements

Participation Phase

- Organize and present information on the job market, occupation and training program: concern for conciseness, appropriate technical terms, basic grammar and spelling rules
- Apply the rules governing group discussions: active participation, attentive listening, and respect for others and for differing opinions
- Job search resources: portfolio, organizations, training, etc.

Synthesis Phase

- Write a report: content, rules of presentation and evaluation criteria
- Be open to comments

Competency 2 Duration 60 hours Credits 4

Behavioural Competency

Statement of the Competency

Establish a helping relationship.

Achievement Context

- In home settings, alternative living environments and care facilities
- With the client and his or her family and friends
- Based on information on the client's condition and needs
- Using information on the activities and services available in the environment

Elements of the Competency**Performance Criteria**

- | | |
|--|---|
| <ol style="list-style-type: none"> 1. Consider the client's needs. | <ul style="list-style-type: none"> • Accurate identification of the repercussions of the illness on the needs of the client, depending on his or her age group • Accurate identification of events likely to have an impact on the client's needs • Accurate assessment of the repercussions of aging on the emotional needs of elderly clients |
| <ol style="list-style-type: none"> 2. Establish a relationship with the client and his or her family and friends. | <ul style="list-style-type: none"> • Correct assessment of signs that the client is open to receiving help • Clear and accurate description of their role |
| <ol style="list-style-type: none"> 3. Develop an atmosphere of trust. | <ul style="list-style-type: none"> • Recognition of positive and negative factors • Adoption of appropriate attitudes and behaviours |
| <ol style="list-style-type: none"> 4. Communicate with the client. | <ul style="list-style-type: none"> • Identification of the particular characteristics of interventions, in accordance with the client's age group • Appropriate use of verbal and non-verbal communication techniques • Careful observation of the client's reactions • Identification of appropriate ways of resolving relational problems |
| <ol style="list-style-type: none"> 5. Adapt how they communicate with a client who is aphasic or has sensory impairments. | <ul style="list-style-type: none"> • Use of appropriate techniques for facilitating communication with an aphasic client • Use of appropriate techniques for facilitating communication with a client who has sensory impairments |
| <ol style="list-style-type: none"> 6. Examine their communication skills. | <ul style="list-style-type: none"> • Realistic determination of their strengths and weaknesses • Identification of concrete means for improving how they communicate |

7. Take measures to maintain their emotional equilibrium.
 - Recognition of physical and emotional signs that they have reached their limits
 - Determination of realistic and relevant means to maintain personal and professional equilibrium

For the competency as a whole:

- Concern for the client as a whole
- Demonstration of attitudes that help communication, such as openness, showing interest and listening
- Observance of the limits of the scope of practice
- Demonstration of confidentiality and discretion
- Adoption of behaviours to maintain decorum

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach and respect for the client's dignity
- Demonstration of a sense of responsibility: judgment, problem solving and limits of the scope of practice
- Demonstration of confidentiality and discretion
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: respect for their personal limits
- Demonstration of self-development: honest self-assessment

1. Consider the client's needs.

- Elements of the holistic approach: biological, intellectual, emotional, spiritual and psychosocial
- Basic needs of the client
- Needs in accordance with the age group: child, adolescent, adult, senior
- Disruptive events: illness, accident, caring for a sick or aging parent, grief and change of living environment
- Repercussions of disruptive factors on people who need care or are aging: vulnerability, insecurity, isolation and loss of independence
- Myths and prejudices about aging in terms of personal, social and cultural aspects

2. Establish a relationship with the client and his or her family and friends.

- Welcome and integration of the client into his or her living environment
- Verbal and non-verbal signs indicating that the client is, or is not, open to receiving help
- Way of introducing themselves to client
- Ways of demonstrating interest in the client: listening, asking questions, eye contact, body language and attitudes
- Importance of family caregivers among those around the person who needs care

3. Develop an atmosphere of trust.
 - Specific attitudes and behaviours that show respect for the client and concern for his or her dignity, and facilitate the development of the helping relationship: openness, demonstration of interest, listening, empathy and courtesy
 - Potential difficulties: distrust and judgment
 - Ways and means to build trust
 - Consideration of family caregivers
4. Communicate with the client.
 - Verbal and non-verbal communication techniques: echoing, rephrasing, silence, questions, etc.
 - Reactions to watch for: emotional and relational signs, signs of a situation that may require immediate intervention
 - Means to use: consideration of the client's age and opinions, offering choices, keeping promises, meeting physical needs, age-appropriate treatment of the client
 - Strategies for solving relational problems such as refusal to communicate or lack of cooperation
5. Adapt how they communicate with a client who is aphasic or has sensory impairments.
 - Needs and specific characteristics of their intervention
 - Specific techniques to facilitate communication
6. Examine their communication skills.
 - Underlying attitude: being honest with themselves
 - Self-assessment of their intervention: achievements and aspects to be improved, questions to clarify the nature of client care or relationships as well as their personal limits
 - Concrete means for improving the helping relationship: personal investment and receptivity to comments
7. Take measures to maintain their emotional equilibrium.
 - Professional situations likely to result in an emotional load or stress
 - Channeling of their emotions and stress:
 - Recognition of their physiological and psychological reactions
 - Role of emotions as sources of information in different situations
 - Identification of internal and/or external sources of stress
 - Ways to channel their emotions and stress
 - Signs that they have reached their limits: fatigue, sadness, impatience and decline in vigilance
 - Means to achieve personal and professional balance: training, support from the team and employee assistance program

Competency 3 Duration 60 hours Credits 4

Behavioural Competency

Statement of the Competency

Adopt relational approaches with clients with cognitive impairments, mental health problems or neurodevelopmental disorders.

Achievement Context

- In home settings, alternative living environments and care facilities
- Based on information on the client's condition and on verbal and written instructions
- Using documents based on the laws and policies applicable to these clients

Elements of the Competency

Performance Criteria

- | | |
|--|--|
| 1. Observe the condition of the client. | <ul style="list-style-type: none"> • Identification of the main manifestations and subjective symptoms • Accurate establishment of links between these manifestations and their consequences for the client and his or her family and social environment • Quality of their verbal and written observations communicated to the people concerned • Rapid reporting of any significant change to the people concerned |
| 2. Establish a relationship of trust with clients with mental health problems. | <ul style="list-style-type: none"> • Consideration of the client's current condition and needs • Appropriate choice of means of facilitating the provision of assistive care • Proper establishment of the necessary limits |
| 3. Establish a relationship of trust with clients with cognitive impairments. | <ul style="list-style-type: none"> • Consideration of the client's current condition and needs • Appropriate choice of means of managing the behavioural and psychological symptoms of dementia • Appropriate choice of means of facilitating the provision of assistive care |
| 4. Establish a relationship of trust with clients with neurodevelopmental disorders. | <ul style="list-style-type: none"> • Consideration of the client's stage of development • Consideration of the client's routines and rituals • Accurate identification of factors likely to result in inappropriate behaviours • Appropriate means of preventing inappropriate behaviours • Appropriate choice of means of facilitating the provision of assistive care |

- | | |
|---|--|
| 5. Encourage clients to achieve their full potential. | <ul style="list-style-type: none"> • Consideration of the client's abilities, limitations and preferences • Consideration of difficulties with the client's social integration • Use of means adapted to the client's condition |
| 6. Consider the legislation and policies applicable to these clients. | <ul style="list-style-type: none"> • Correct identification of the different laws and policies applicable to these clients • Identification of client rights |

For the competency as a whole:

- Consideration of the client as a whole
- Respect for the client's dignity
- Demonstration of tolerance
- Helpful attitude with regard to communication
- Observance of the limits of the scope of practice
- Demonstration of confidentiality and discretion
- Demonstration of vigilance
- Careful examination of their prejudices with regard to the clients

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach, respect for the client's dignity and potential
- Demonstration of a sense of responsibility: development of autonomy through the choices to be made, judgment, problem solving, limits of the scope of practice, laws and policies, and communication with the team
- Demonstration of confidentiality and discretion: within the scope of the law and with regard to private life and secrets confided
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: vigilance and respect for personal limits
- Demonstration of self-development: honest self-assessment of their prejudices

1. Observe the condition of the client.
 - Clinical manifestations for the target client groups: mental health problems, cognitive impairments and neurodevelopmental disorders
 - Manifestations of certain disorders involving stages of progression: Reisberg scale, cognitive regression and cycles of bipolar disorder
 - Main causes: triggers, risk factors, genetic aspect and disrupted lifestyle habits
 - Consequences for the client and his or her environment: physical, intellectual, emotional, family and social aspects; prejudices; neglect of everyday and domestic activities

- Nature of the aspects to observe: physical, psychological, family, social and environmental, as well as lifestyle habits
 - Quality of the observations to be communicated: real, solid facts; objectivity, relevance, precision, readability and neatness of notes; terminology
 - Data input: concepts essential to using software commonly employed in the health and social services sector, entry of various types of data
 - Choice of the person to speak to on the team and follow-up
2. Establish a relationship of trust with clients with mental health problems.
 - Main mental health problems
 - Concern for the client's condition: physical, intellectual, emotional and social signs, ability to listen and level of anxiety
 - Anxiety: physical, intellectual, emotional and social signs
 - Situations appropriate for the use of touch
 - Means of facilitating the provision of assistive care: approaches to adopt in cases of delirium, hallucination, suicidal thoughts and inappropriate behaviours
 - Means of implementing the limits required for interventions: goals pursued, danger of abuse of power and ways of instituting limits
 - 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
 3. Establish a relationship of trust with clients with cognitive impairments.
 - Main cognitive impairments such as Alzheimer's disease, vascular dementia or frontotemporal dementia
 - Understanding the difference between dementia and delirium
 - Information on the client's life story
 - Factors likely to trigger behavioural and psychological symptoms of dementia: pain, physical environment, social environment and change of routine
 - Means of preventing or reducing the behavioural and psychological symptoms of dementia and facilitating the provision of assistive care
 - Alternatives to restraints: layout of premises, increased surveillance, recreational or occupational activities, entertainment, change in location, safe and secure areas for wandering and exercise program
 4. Establish a relationship of trust with clients with neurodevelopmental disorders.
 - Client's stage of development: cognitive, moral, social and emotional
 - Main types of disorders: autism spectrum disorders, intellectual disability, attention-deficit disorder with or without hyperactivity, etc.
 - Routines and rituals: nature, objectives, importance and the consequences of not following them
 - Factors likely to trigger inappropriate behaviours: a task that is too difficult, fatigue and lack of motivation
 - Means of preventing or controlling inappropriate behaviours: presence, affection, withdrawal, change in activity and intentional ignoring
 - Means of communicating and facilitating the provision of assistive care: consideration of the client's stage of development as well as his or her routines and rituals

5. Encourage clients to achieve their full potential.
 - Client's potential in terms of their abilities, limitations, preferences and interests
 - Means of stimulation and occupational therapy activities
 - Means of promoting social integration: appropriate attire, socially acceptable behaviours, simplification of tasks, experimentation with new situations, involvement of families or informal caregivers
6. Consider the legislation and policies applicable to these clients.
 - *Charter of Human Rights and Freedoms*
 - *Act respecting the protection of persons whose mental state presents a danger to themselves or to others*
 - Human rights: capacity to consent or make a complaint, free and informed consent, protective supervision, mandate in case of incapacity, respect, security and confidentiality
 - Limits of the scope of practice

Competency 4 Duration 60 hours Credits 4

Behavioural Competency

Statement of the Competency

Determine the appropriate means to respond to the needs of clients with physical illnesses and disabilities.

Achievement Context

- In home settings, alternative living environments and care facilities
- In collaboration with the team
- Based on the client's condition and needs
- Based on verbal and written instructions

Elements of the Competency**Performance Criteria**

- | | |
|--|---|
| <p>1. Observe clients with a cardiorespiratory disease.</p> | <ul style="list-style-type: none"> • Identification of the main manifestations of heart failure, chronic obstructive pulmonary disease, arterial and venous insufficiency, and high blood pressure • Identification of the characteristics of normal breathing • Identification of the needs that have changed due to the illness |
| <p>2. Observe clients with a musculoskeletal disease.</p> | <ul style="list-style-type: none"> • Identification of the main manifestations of arthritis and osteoporosis • Identification of the manifestations of discomfort and pain • Identification of the main signs of edema and inflammation • Identification of the needs that have changed due to the illness |
| <p>3. Observe clients with a nervous and sensory system disease or disability.</p> | <ul style="list-style-type: none"> • Identification of the main manifestations of a cerebrovascular accident, multiple sclerosis, Parkinson's disease, spinal cord injuries, cerebral palsy and eye diseases • Identification of the characteristics of healthy skin • Identification of the early warning signs of pressure sores • Identification of the needs that have changed due to the illness or disability |
| <p>4. Observe clients with a digestive system disease.</p> | <ul style="list-style-type: none"> • Identification of the main manifestations of hepatitis, gastroenteritis and a gastrointestinal ulcer • Identification of the general signs of dehydration and malnutrition • Accurate observation of the quality of the feces • Identification of the needs that have changed due to the illness |

5. Observe clients with a genitourinary disease.
 - Identification of the main manifestations of a urinary infection, renal failure, prostatic hypertrophy and ptosis of the uterus or bladder
 - Accurate observation of the appearance of the urine
 - Identification of the needs that have changed due to the illness
6. Observe clients with an endocrine system disease.
 - Identification of the main manifestations of diabetes, hypothyroidism and hyperthyroidism
 - Identification of the signs of hyperglycemia and hypoglycemia
 - Identification of the needs that have changed due to the illness
7. Observe clients with an immune system disease.
 - Identification of the main manifestations of AIDS
 - Identification of the main manifestations of a cancer
 - Identification of the needs that have changed due to the illness
8. Consider the impact of physical and physiological changes associated with aging on the needs of an elderly client.
 - Identification of physical and physiological changes associated with normal aging
 - Accurate assessment of the impact of physical and physiological changes on the behaviour and needs of the client
9. Choose the precautions and means to take in different situations.
 - Consideration of the information on the client's condition and the instructions received
 - Appropriate choices based on the manifestations observed and the client's needs

For the competency as a whole:

- Consideration of the client as a whole
- Observance of the limits of the scope of practice
- Demonstration of vigilance
- Correct identification of manifestations and subjective symptoms that must be reported immediately

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: holistic approach, decision-making and functional autonomy
- Demonstration of a sense of responsibility: development of autonomy, judgment and limits of the scope of practice
- Demonstration of concern for the health and safety of themselves and the clients: vigilance and cases to be reported immediately

1. Observe clients with a cardiorespiratory disease.

- Terminology specific to this competency
- Application of previously acquired knowledge with respect to the holistic approach
- Use of technology to search for information about the diseases seen while acquiring this competency
- How the human body works
- Location of the main organs of the cardiorespiratory system
- Main functions of the cardiorespiratory system
- General manifestations and subjective symptoms of the main impairments of the cardiorespiratory system
- Connections between the manifestations of various diseases and the organs involved
- Types of breathing and breathing rhythms
- Altered needs associated with cardiorespiratory diseases (review of basic needs)

2. Observe clients with a musculoskeletal disease.

- Location of the main organs of the musculoskeletal system
- Main functions of the musculoskeletal system
- General manifestations and subjective symptoms of the main impairments of the musculoskeletal system
- Manifestations of pain: rigidity and facial grimacing
- Main areas affected by edema
- Needs associated with musculoskeletal diseases

3. Observe clients with a nervous and sensory system disease or disability.

- Location of the main organs of the nervous and sensory system
- Main functions of the nervous and sensory system
- General manifestations and subjective symptoms of the main impairments of the nervous and sensory system
- Characteristics of healthy skin: colour, elasticity, hydration and hair
- Early warning signs of pressure sores: redness, pain and skin colour
- Needs associated with nervous and sensory system diseases or disabilities

4. Observe clients with a digestive system disease.

- Location of the main organs of the digestive system
- Main functions of the digestive system
- General manifestations and subjective symptoms of the main impairments of the digestive system

- General signs of dehydration and malnutrition: loss of skin elasticity, desquamation, weight loss and dry mucous membranes
 - Characteristics of feces
 - Needs associated with digestive system diseases
5. Observe clients with a genitourinary disease.
- Location of the main organs of the genitourinary system
 - Main functions of the genitourinary system
 - General manifestations and subjective symptoms of the main impairments of the genitourinary system
 - Characteristics of normal urine
 - Needs associated with genitourinary system diseases
6. Observe clients with an endocrine system disease.
- Location of the main organs of the endocrine system
 - Main functions of the endocrine system
 - General manifestations and subjective symptoms of the main impairments of the endocrine system
 - Main signs of hypoglycemia and hyperglycemia: fatigue, irritability and diaphoresis
 - Needs associated with endocrine system diseases
7. Observe clients with an immune system disease.
- Main functions of the immune system
 - General manifestations and subjective symptoms of AIDS: fatigue, predisposition to infections and thinness
 - General manifestations and subjective symptoms of a cancer: fatigue and weight loss
 - Needs associated with immune system diseases
8. Consider the impact of physical and physiological changes associated with aging on the needs of an elderly client.
- Physical and physiological changes associated with normal aging: decline in sensory and psychomotor functions
 - Connections between the consequences of these changes and the client's needs: decline in the carrying out of everyday and domestic activities, possible decrease in the ability to participate in recreational activities and social life
 - Needs associated with these changes and support needed to continue adapted activities
9. Choose the precautions and means to take in different situations.
- Impact of multipathology on the client
 - Prejudices associated with certain diseases or disabilities
 - Unmet client needs in connection with the various diseases and their manifestations: difficulty sleeping, feeding oneself and communicating
 - Source of information concerning the residual capacities of the client and the level of assistance required
 - Precautions and means to take to address the client's unmet needs: positioning, passive exercises and hydration
 - Precautions to take in the area of workplace health and safety
 - Instructions to take into consideration

Competency 5 Duration 75 hours Credits 5

Behavioural Competency

Statement of the Competency

Provide care related to activities of daily living (ADL).

Achievement Context

- In home settings and alternative living environments
- Interacting with the team
- With clients of all ages with various diseases or disabilities
- In different situations
- Based on information on the client's condition and verbal and written instructions
- Using materials and equipment needed to help the client walk
- Using relevant documentation

Elements of the Competency**Performance Criteria**

- | | |
|--|--|
| 1. Prepare for the visit. | <ul style="list-style-type: none"> • Thorough, relevant taking of notes on the client, his or her needs and the organization's instructions • Correct understanding of the latitude they have with regard to the instructions received • Compliance with the terms and conditions for the visit |
| 2. Make contact with the client. | <ul style="list-style-type: none"> • Application of traditional rules in the way they introduce themselves • Reassuring attitude |
| 3. Establish a relationship of trust. | <ul style="list-style-type: none"> • Attentive listening • Consideration of the client's needs • Use of an approach adapted to the client and the context |
| 4. Participate in finding means to respond to the client's emotional, occupational, social or personal organizational needs. | <ul style="list-style-type: none"> • Consideration of the client's degree of autonomy • Correct application of the problem-solving process • Involvement of the client to the best of his or her ability • Proper choice of means, given the situation • Obtainment of the client's agreement • Validation of selected means with the people concerned |
| 5. Use the selected means. | <ul style="list-style-type: none"> • Use of an approach adapted to the client and the context • Involvement of the client to the best of his or her ability |

- Consideration of the client's well-being, health and safety
 - Support adapted to the needs of the client and situation
 - Demonstration of autonomy
6. Adopt professional behaviour in ethical situations.
- Proper judgment with regard to compromising situations
 - Appropriate decision with regard to the situation
 - Emphasis on the importance of reporting these situations
7. Interact with the team.
- Adopt behaviours conducive to teamwork
 - Respect for consensus and decisions made by the team
 - Clear, relevant verbal and written information transmitted to the people concerned
 - Communication of information at a timely moment
 - Concern for transmitting information regarding the continuity of services

For the competency as a whole:

- Consideration of the client as a whole
- Respect for the client's dignity
- Observance of the limits of the scope of practice
- Compliance with the organization's policies and instructions
- Demonstration of confidentiality and discretion
- Adoption of behaviours to maintain decorum
- Proper management of their stress and emotions

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach, respect for the client's dignity and potential
- Demonstration of a sense of responsibility: personal autonomy, judgment, honest communication of information, problem solving, limits of the scope of practice and collaboration with the team
- Demonstration of confidentiality and discretion
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: vigilance, respect for personal limits, management of their stress and emotions
- Demonstration of self-development: honest assessment of their intervention
- In ethical situations: see the situations presented in point 6 below

Examples of daily living situations:

- Emotional: disruptive event, anxiety, problem with a loved one and solitude
- Occupational: meaningful activities that provide cognitive and sensory stimulation or engage the emotional memory
- Social: integration and socialization
- Personal organization: helping the client to organize himself or herself
- Other: support given to the client's family and friends

1. Prepare for the visit.

- Application of the knowledge and skills previously acquired in Competency 1 with respect to note taking
- Application of previously acquired knowledge with respect to taking the client's needs into consideration
- Information to be gathered on the client's needs and profile
- Sources of information: team, client's family and friends, person in charge, available documentation and instructions
- Latitude allowed: restrictions, right to leave the premises, etc.
- Arrangements for the visits to be made depending on the type of living environment: making appointments, consulting schedules and consulting the person in charge

2. Make contact with the client.

- Strategy for introducing themselves to the client: role, purpose of the visit, etc.
- Techniques aimed at reassuring the client: answers to the client's questions, respect for his or her pace and demonstration of interest in the client

3. Establish a relationship of trust.

- Application of the previously acquired competency with respect to the helping relationship
- Application of the previously acquired competency with respect to relational approaches to be used for a specific type of client
- Consideration of the client's life story
- Consideration of the client's specific needs in terms of emotional, psychological or physical aspects

4. Participate in finding means to respond to the client's emotional, occupational, social or personal organizational needs.

- Use of the problem-solving process and creativity techniques
- Use of technology to search for information
- Approach to find and choose means in collaboration with the client, in accordance with his or her potential
- Factors to be taken into consideration in choosing means: client's potential, preferences, interests, lifestyle habits, context, values, beliefs, etc.
- Validation with the person in charge of the team: suggestions, discussions and openness to receiving comments

5. Use the selected means.

- Application of previously acquired competencies with regard to relational approaches and the needs of clients with an illness or physical disability
- Basic safety concepts (concepts relating to transferring clients and the principles for moving clients safely are not included as they will be seen later):
 - Use of a wheelchair, walker, etc.
 - Principles for accompanying clients as they walk
- Adaptation of their intervention or activities provided in accordance with the situation
- Observation of the client's well-being, health and safety

6. Adopt professional behaviour in ethical situations.

- Overview of the different codes of ethics in force in the workplaces
- Vigilance with respect to compromising situations for the attendant
- Reflection on various situations:
 - With regard to the client: client's refusal to cooperate, report of violence, negligence or abuse by a family member
 - With regard to the attendant: abuse of power, conflict of interest, professional disinterest and conflicting values
- Reflection about various situations involving organization of the work: lack of staff, request for intervention that is outside their responsibilities, insufficient information on the client's condition
- Importance of reporting this type of situation, method for doing so and persons to whom it should be reported
- Consequences for the attendant, clients and work team
- Connection with the behaviour to adopt
- Personal and professional limits

7. Interact with the team.

- Role of work teams depending on the workplace, the team's characteristics, each team member's scope of practice, tools such as the care plan, therapeutic nursing plan or service requisition
- 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, procedures and task
- Problems likely to affect teamwork and possible solutions
- Consequences of not complying with the consensus and with decisions made by the team
- Sources of information available in the workplace: care plan, handwritten or computerized client files, and colleagues
- Various means of transmitting information to the people concerned or the team
- Information to be transmitted: client's profile, need identified, means chosen, outcome and questions
- Importance of communication to ensure the continuity of assistive care and safety of the client:
 - change in the client's emotional state
 - statements made
 - information provided by the family or family and friends
- Timing: after observing a significant change in the client or when leaving the premises
- Self-assessment of their actions: achievements and aspects to be improved, questions to clarify the nature of client care or relationships as well as their personal limits and honesty

Competency 6 Duration 30 hours Credits 2

Behavioural Competency

Statement of the Competency

Prevent infections and contamination.

Achievement Context

- In home settings, alternative living environments and care facilities
- Based on verbal and written information and instructions
- Using the necessary equipment, materials and products
- Using documentation on measures for preventing infections and contamination

Elements of the Competency**Performance Criteria**

- | | |
|---|--|
| 1. Detect the manifestations of inflammation or potential infection. | <ul style="list-style-type: none"> • Identification of systemic and localized manifestations • Diligent, clear and accurate transmission of information to the people concerned |
| 2. Apply the basic practices for preventing and controlling infections. | <ul style="list-style-type: none"> • Identification of the modes of transmission of infectious agents • Proper application of basic practices including the rules for hand hygiene • Proper use of protective equipment and materials |
| 3. Take additional precautions for certain pathogenic agents. | <ul style="list-style-type: none"> • Full compliance with instructions • Identification of the consequences of not taking additional precautions |
| 4. Handle contaminated materials. | <ul style="list-style-type: none"> • Accurate identification of the risks of contamination in the workplace • Correct application of procedures for handling contaminated materials and excreta • Proper disposal of excreta and biomedical waste • Immediate reporting of any contamination |
| 5. Clean contaminated equipment and materials. | <ul style="list-style-type: none"> • Appropriate choice of cleaning and disinfecting products • Strict application of cleaning and disinfecting procedures • Proper storage of cleaned equipment and materials • Accurate identification of risks associated with using cleaning and disinfecting products |

For the competency as a whole:

- Compliance with current laws, instructions and protocols
- Compliance with the scope of practice
- Compliance with the rules of hygiene, asepsis, health and safety
- Adoption of behaviours to maintain decorum

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.

Details on the professional behaviours to be developed:

- Demonstration of a sense of responsibility: judgment, honesty in reporting cases of communicable illnesses, limits of the scope of practice, laws and protocols, and collaboration with the team
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: rules of hygiene and asepsis

1. Detect the manifestations of inflammation or potential infection.

- Application of the previously acquired competency with respect to illnesses and physical disabilities
- Terminology specific to this competency
- The human body's defence mechanisms: systemic and localized manifestations
- Factors likely to increase a client's vulnerability to infection
- Factors likely to increase a client's resistance to infection
- Cycle of infection: infectious agent, reservoir, routes of transmission, modes of transmission and host
- Explanations to be given to the client in accordance with the scope of practice, if applicable

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

- Importance of consulting workplace instructions and protocols
- Connections between modes of transmission and basic practices
- Indications and methods with regard to basic practices: washing of hands (soap, antimicrobial agent), wearing gloves, a gown and a mask, handling sharp instruments, soiled bedding and linens
- Disposal of hazardous materials

3. Take additional precautions for certain pathogenic agents.

- Connections between routes of transmission and the precautions to be taken: airborne transmission, direct contact and droplet contact
- Precautions to be taken in cases of combined routes of transmission: droplet and direct contact, airborne transmission and direct contact
- Additional precautions to be taken to prevent airborne, direct contact and droplet transmission
- 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

4. Handle contaminated materials.

- Situations involving risk in the workplace: forgotten needles, non-compliance with precautions, heavy workload, clients' hygiene habits, etc.
- Workplace protocols: storage areas, identification of contaminated materials, waste management, sterilization of care materials, etc.
- Biofluids such as blood, feces, urine or secretions
- Sections of laws requiring immediate reporting of certain contaminations such as blood and other biofluids

5. Clean contaminated equipment and materials.

- Types and use of cleaning and disinfecting products
- Workplace Hazardous Materials Information System (WHMIS)
- Cleaning and disinfecting techniques
- Alternatives to using cleaning and disinfecting products: various possibilities for using available materials and products

Competency 7 Duration 120 hours Credits 8

Behavioural Competency

Statement of the Competency

Provide assistive care related to daily activities.

Achievement Context

- In home settings, alternative living environments and care facilities
- With clients who are experiencing a partial or total loss of autonomy
- Interacting with the team
- Based on information on the client's condition and on verbal and written instructions
- Using appropriate equipment and materials
- Using documentation about hygiene, asepsis, health and safety

Elements of the Competency

Performance Criteria

- | | |
|--|--|
| 1. Plan the work. | <ul style="list-style-type: none">• Taking of complete and relevant notes with respect to the information and instructions given• Relevant clarification of tasks to be performed• Correct setting of priorities• Proper preparation of the equipment and material in accordance with the care to be provided |
| 2. Establish a relationship with the client. | <ul style="list-style-type: none">• Reassuring introduction• Special attention paid to the client's physical and emotional state |
| 3. Assist the client to move. | <ul style="list-style-type: none">• Correct choice and execution of moving techniques• Appropriate use of equipment and materials• Observance of the precautions to be taken in assisting the client to walk and in transferring the client |
| 4. Provide hygiene care. | <ul style="list-style-type: none">• Proper choice and performance of hygiene care procedures• Careful observation of the condition of the client's skin• Proper use of the equipment, materials and work area |
| 5. Provide elimination care. | <ul style="list-style-type: none">• Proper choice and performance of elimination care• Taking into consideration of appropriate means to maintain or restore continence |

- Proper use of the equipment, materials and work area
- 6. Provide comfort care.
 - Appropriate choice of means of preventing pressure sores
 - Proper use of the equipment, materials and work area
 - Proper positioning of the client
 - Correct changing of bed linens
 - Verification of client's comfort
- 7. Provide assistance with dressing.
 - Appropriate choice of clothing
 - Correct application of dressing techniques according to the client's condition
 - Respect for the client's preferences
- 8. Provide assistance with eating and drinking.
 - Appropriate choice of means to create an environment that encourages eating a meal
 - Appropriate use of materials
 - Respect for the client's pace
 - Proper positioning of the client
 - Proper use of the equipment, materials and work area
- 9. Maintain and tidy up the premises.
 - Correct performance of tasks
 - Meticulous, proper maintenance and tidying up
 - Appropriate reporting of defects found
- 10. Transmit their observations to the team.
 - Relevance and accuracy of their observations
 - Transmission of the information to the people concerned, depending on the workplace
 - Timely transmission of information

For the competency as a whole:

- Consideration of the client as a whole
- Respect for the client's privacy, especially when providing hygiene care, elimination care or assistance with dressing
- Observance of the limits of the scope of practice
- Adoption of behaviours to maintain decorum
- Compliance with rules of hygiene, asepsis, health and safety
- Observance of principles for moving clients safely

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach, respect for the client's autonomy, potential and privacy
 - Demonstration of a sense of responsibility: choices made autonomously, judgment, problem solving, setting priorities for efficiency
 - Demonstration of decorum: professional attire, proper language and respectful discourse
 - Demonstration of concern for the health and safety of themselves and the clients: rules to be applied, principles for moving clients safely, measures and precautions to take
 - Demonstration of self-development: self-assessment of their achievements and aspects to be improved, and asking questions to clarify the nature of client care or relationships as well as their personal limits and honesty
1. Plan the work.
 - Terminology specific to this competency
 - Application of the previously acquired competency with respect to illnesses and physical disabilities
 - Organization of work as a team member or alone, depending on the workplace
 - Preparations for the interventions to be carried out
 - Application of previously acquired knowledge with respect to the verbal and written information to gather
 - Elements to take into consideration when setting priorities for the work to be done
 - Use of the holistic approach, especially for the client's various needs, physical and psychological state, and decision-making and functional autonomy
 - Review of the problem-solving process
 - Adaptation of care to clients of all ages
 2. Establish a relationship with the client.
 - Application of two previously acquired competencies with respect to the helping relationship
 - Explanations and information provided to the client and his or her family and friends, if applicable
 3. Assist the client to move.
 - Principles for moving clients safely:
 - Level of assistance
 - Natural movements
 - Principles of positioning, holding and movement
 - Moving manoeuvres such as assisting the client out of an armchair or wheelchair or transferring the client into the bath, bed, armchair or wheelchair
 - Equipment: patient lift, bath seat, transfer chair, shower trolley, etc.
 - Precautions to take when assisting the client to walk insofar as the activities of daily life are concerned
 4. Provide hygiene care.
 - Rules for respecting the client's privacy: close doors, draw curtains, cover the client, look discretely

- Preparation and use of required equipment and materials
 - Characteristics of healthy skin
 - Procedures: bath, oral hygiene care, hearing aids and glasses, nails, beard, hair
 - Types of baths: complete, partial, in bed, in a traditional or therapeutic tub, at a washbasin, on a shower stretcher, in a shower
5. Provide elimination care.
- Methods that promote elimination and continence: hydration, diet, comfort, specific interventions that are part of the care plan or the therapeutic nursing plan
 - Use of protective underwear or a condom catheter
 - Use of a bedpan, urinal bottle and commode chair
6. Provide comfort care.
- Comfort care:
 - Factors that may cause pressure sores and means to prevent them
 - Types of positioning in bed and in a chair
 - Methods for making a bed in accordance with the client's condition and the living environment
 - Verification of the client's comfort
7. Provide assistance with dressing.
- Concern for the client's comfort and preferences
 - Techniques for assisting the client to dress and undress
 - Putting on of compression stockings
8. Provide assistance with eating and drinking.
- Elements to take into consideration to make it easier for a client to eat a meal, such as adapted utensils
 - Positioning of the client
 - Partial or complete assistance, taking into consideration the client's abilities and pace
 - Means to promote hydration
 - Constant observation of the client's reactions
 - Verification that the content of the meals provided conform to what is contained in the client's diet plan
9. Maintain and tidy up the premises.
- Application of the previously acquired competency with respect to infections and contamination
 - Maintenance and tidying up of equipment, materials and the work area
 - Functioning of the equipment and materials
 - Procedure to apply in case of defects
10. Transmit their observations to the team.
- Types of information and the people to whom it should be transmitted, depending on the workplace
 - Importance of transmitting the information when they observe a significant change in the client's condition
 - Timely moment for transmitting information

Behavioural Competency

Statement of the Competency

Deal with situations involving risk.

Achievement Context

- Alone, in the client's home and in complex situations
- Interacting with the team, as needed
- Based on information on the client's condition
- Using care equipment and materials
- Using protocols and instructions with regard to the measures to take

Elements of the Competency

Performance Criteria

- | | |
|---|--|
| 1. Observe the situation. | <ul style="list-style-type: none"> • Recognition of situations involving risk and of abnormalities • Correct determination of the level of emergency • Correct decision on whether to intervene themselves or not |
| 2. Provide care in confined spaces or with inadequate equipment and materials. | <ul style="list-style-type: none"> • Concrete explanation of the problematic situation • Correct determination of the means to take • Compliance with the employer's intervention protocol |
| 3. Prevent dangerous situations and uncleanliness. | <ul style="list-style-type: none"> • Concrete explanation of the problematic situation • Correct determination of the means to take • Compliance with the employer's intervention protocol |
| 4. Take action with clients experiencing a crisis episode or manifesting aggressive behaviours. | <ul style="list-style-type: none"> • Recognition of warning signs of an episode of aggressive behaviour • Appropriate use of measures designed for protecting themselves, the client and others present • Compliance with the employer's intervention protocol • Appropriate use of verbal and non-verbal communication in order to avoid escalation |

For the competency as a whole:

- Observance of the limits of the scope of practice
- Adoption of behaviours to maintain decorum
- Demonstration of vigilance
- Compliance with rules designed to ensure their own safety and that of the client

- Promptness in intervening or reporting the dangerous situation
- Proper management of their stress and emotions

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach and holistic approach
 - Demonstration of a sense of responsibility: judgment, problem solving, limits of the scope of practice, protocols and collaboration with the team
 - Demonstration of decorum: professional attire, proper language and respectful discourse
 - Demonstration of concern for the health and safety of themselves and the clients: safety rules, vigilance, managing their stress and emotions
1. Observe the situation.
 - Emphasis on prevention
 - Observation of the client's condition and that of the surroundings and the others present
 - Review of the six categories of risk in the *Grille de santé et de sécurité au travail*⁶ studied in the competency *Determine their suitability for the occupation and the training process*
 - Categories reviewed: ergonomic, safety and psychosocial risks
 - For each category reviewed: sources of risks, effects on health and safety, and means of prevention
 - 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
 - Role and responsibilities of the attendant in situations involving risk
 - Collaboration with the team: reporting of observed risks and team efforts for prevention
 2. Provide care in confined spaces or with inadequate equipment and materials.
 - Situations: confined spaces, missing or damaged equipment and materials, and time management issues
 - Analysis of the situation to target the problem
 - Research to find solutions and intervention methods for each case studied
 - Set-up of the work area to avoid constrained postures for themselves and clients
 - Strategies for providing assistive care in confined spaces
 - Reminder about the equipment and materials to be used in the home as well as the models tailored to the client's degree of autonomy
 - Protocols of different organizations
 3. Prevent dangerous situations and uncleanliness.
 - Situations: Diogenes syndrome, uncleanliness, unsafe environment, unhygienic conditions; presence of cockroaches or bedbugs, second-hand smoke, pets and snow-covered yard
 - Analysis of the situation to target the problem
 - Protocols of different organizations

⁶ Ministère de l'Éducation, de l'Enseignement supérieur et de la Recherche. *Actualisation des analyses de profession. Auxiliaires aux services de santé et sociaux. Préposées et préposés aux bénéficiaires* (2015).

4. Take action with clients experiencing a crisis episode or manifesting aggressive behaviours.
 - Situations: crisis, violence and attack
 - Factors: illness, history of alcoholism, violence or drug addiction
 - Warning signs: anxiety, physical and verbal manifestations
 - Analysis of dangerous situations and the risks of the client doing violence to himself or herself or being violent with others: physical and human environment, level of escalation and the client's state
 - Intervention approach: personal capabilities with regard to the situation, intervention protocol, verbal and non-verbal communication techniques to avoid escalation and maintain security
 - Protocols of different organizations

Competency 9 Duration 105 hours Credits 7

Behavioural Competency

Statement of the Competency

Work with clients who require assistive care at home or in alternative living environments.

Achievement Context

- With a client experiencing partial or total loss of autonomy
- In collaboration with the team
- Based on information on the client's condition and on verbal and written instructions
- Using a schedule or worksheet
- Using available equipment and materials, depending on the workplace
- Based on the policies, instructions and code of ethics of the workplace, as applicable
- Using a form to make a report

Elements of the Competency**Performance Criteria**

- | | |
|--|---|
| 1. Plan the work. | <ul style="list-style-type: none"> • Consideration of how the work is organized, depending on the workplace • Taking of complete and relevant notes on each client assigned to them • Relevant clarification of the work to be done • Correct setting of priorities |
| 2. Observe the client. | <ul style="list-style-type: none"> • Demonstration of vigilance • Full report of observations • Verification of the client's comfort, if applicable • Promptness in reporting any important change to the people concerned |
| 3. Adapt their approach to the condition of the client and the situation of his or her family and friends. | <ul style="list-style-type: none"> • Correct determination of the approach to adopt • Reassuring introduction • Demonstration of interest in the client's life story • Use of appropriate techniques for building a helping relationship |
| 4. Adapt their help and assistive care to the client's condition. | <ul style="list-style-type: none"> • Respect for the instructions and information regarding the client's condition • Maintenance and development of the client's potential • Respect for the client's pace • Respect for the client's privacy • Appropriate use of the equipment, materials and workspace • Appropriate application of assistive care procedures in accordance with the context |

- Regular verification of the client's well-being
- Provision of care within a realistic time frame
- 5. Adopt professional behaviour in ethical situations.
 - Proper judgment with regard to compromising situations
 - Appropriate decision with regard to the situation
- 6. Maintain and tidy up the premises.
 - Correct performance of tasks
 - Meticulous, proper maintenance and tidying up
 - Accurate reporting of defects found
- 7. Transmit their observations to the team.
 - Active contribution to team meetings
 - Quality of observations transmitted
 - Concern for ensuring the transmission of information with regard to the continuity of assistive care
- 8. Suggest modifications that are likely to improve the client's condition.
 - Concise and careful writing of a report
 - Rigorous preparation of their presentation
 - Relevance of questions and comments with respect to the client
 - Relevant and realistic suggestions
 - Clear and respectful affirmation of their point of view

For the competency as a whole:

- Consideration of the client as a whole
- Demonstration of autonomy
- Compliance with applicable policies, instructions and work procedures
- Observance of the limits of the scope of practice
- Adoption of behaviours conducive to teamwork
- Demonstration of confidentiality and discretion
- Adoption of behaviours to maintain decorum
- Compliance with rules of hygiene, asepsis, health and safety
- Observance of the principles for moving clients safely
- Proper management of their stress and emotions
- Objective and constructive self-evaluation

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach, respect for the client's dignity, potential, autonomy and privacy
- Demonstration of a sense of responsibility: autonomy, effectiveness, judgment, honesty, problem solving, limits of the scope of practice and collaboration with the team
- Demonstration of confidentiality and discretion
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: rules to be applied, principles for moving clients safely, personal and professional limits, management of their stress and emotions
- Demonstration of self-development: self-assessment
- In ethical situations: see the situations presented in point 5 below

1. Plan the work.

- How the work is organized, depending on the workplace
- Specific characteristics of care in the home and in various alternative living environments and applicable protocols
- Approach to adopt in alternative living environments and review of the legal framework for professional practice
- Current regulations regarding clients and the places where services are provided
- Specific characteristics of interventions with clients with cognitive impairments
- Following and annotating the schedule or worksheet
- Organization of the physical premises and placement of equipment and materials
- Sources of information: documentation with regard to the client, team leader and colleagues
- Information to be gathered: work priorities, schedules, goal of the intervention plan instructions, client's physical and emotional state and services to be provided
- Equipment specific to different living environments

2. Observe the client.

- Application of previously acquired competencies with respect to basic needs
- Observations: physical, psychological, familial, social and environmental aspects, and lifestyle
- Observable reactions and behaviours: level of collaboration, signs of openness to receiving help, interest in the activities of daily life, facial expressions and needs expressed by the client
- Verbal and non-verbal communication by the client

3. Adapt their approach to the condition of the client and the situation of his or her family and friends.

- 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 his or her preferences, interests, abilities, family and friends
- Application of the principles of a helping relationship for the client and his or her family and friends: echoing, eye contact, appropriate level of language and attentive listening

4. Adapt their help and assistive care to the client's condition.
 - Types of help: supportive care and attention, walking with the client and occupational therapy activities
 - Level of assistance required, depending on the client's level of autonomy
 - Helping the client start moving, positive comments and demonstration of interest in the client
 - Encouragement of the client in carrying out his or her activities
 - Verification of the equipment and materials before using them
 - Adaptation of previously seen assistive care procedures: choice and performance of moving manoeuvres as well as other care procedures in accordance with the client's condition
 - Involvement of client's family and friends in assistive care activities in accordance with their abilities and limits
 - Provision of care within a realistic time frame given the complexity of the care activities
5. Adopt professional behaviour in ethical situations.
 - Vigilance with respect to compromising situations for clients, the attendant and the organization of the work in the home or alternative living environment
 - Impacts of these situations on themselves, clients and the work team
 - Links to the professional behaviour to adopt
 - Personal and professional limits
6. Maintain and tidy up the premises.
 - Maintenance and tidying up of equipment, materials and the work area
 - Specific details regarding maintenance and storage, depending on the workplace
7. Transmit their observations to the team.
 - Quality of observations to be transmitted: true and concrete facts, objectivity, relevance, accuracy, neat and legible notes, and appropriate terminology
 - Types of information to transmit:
 - Changes in the client's physical or emotional condition
 - Statements made
 - Client's behaviours and reactions when receiving assistive care or during other activities
 - Information provided by the family or friends
 - Observations during activities of daily living
 - Progress with regard to the objectives of the intervention plan for daily activities
 - Times to transmit information:
 - After observing a significant change in the client's condition
 - At the end of the day or shift
 - When leaving the premises
 - During team meetings
 - Continuity of assistive care:
 - Communication tool for use with the family or colleagues, such as a communication notebook
 - Information collected to be transmitted at the end of the day or the beginning of the following shift
 - Client safety and safe surroundings
 - Specific details with respect to equipment or material resources

8. Suggest modifications that are likely to improve the client's condition.
 - Elements to be taken into consideration: objective of the intervention or care plan, client's needs and capabilities
 - Types of information to communicate in the report: profile of the client, identified need, chosen means, outcomes and questions
 - Suggestions made to the team with regard to the client:
 - Safety
 - Quality of life
 - Requests and needs
 - Capabilities and limits observed, primarily during activities of daily living
 - Proposals limited to the scope of practice
 - Self-assessment: achievements and aspects to be improved, questions to clarify the nature of client care or relationships as well as their personal limits and honesty

Competency 10 Duration 60 hours Credits 4

Behavioural Competency

Statement of the Competency

Deal with family, social and cultural contexts.

Achievement Context

- In home settings, alternative living environments and care facilities
- In collaboration with team members
- With all types of clients and all age groups
- Based on information on the client's condition and on verbal and written instructions

Elements of the Competency**Performance Criteria**

- | | |
|--|---|
| 1. Observe the family context. | <ul style="list-style-type: none"> • 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 consequences • Relevant observations concerning the informal caregiver's behaviours |
| 2. Observe the specific sociocultural aspects. | <ul style="list-style-type: none"> • Accurate recognition of social integration difficulties affecting the client • Accurate recognition of the specific characteristics of a multicultural clientele that have an impact on the provision of services |
| 3. Observe signs of abuse. | <ul style="list-style-type: none"> • Accurate recognition of the different types of abuse • Accurate recognition of factors contributing to the development of abuse • Accurate recognition of the personal and relational consequences of abuse |
| 4. Observe manifestations of addiction. | <ul style="list-style-type: none"> • Accurate recognition of the different types of addiction • Accurate recognition of factors contributing to the development of an addiction • Accurate recognition of the effects of an addiction on behaviours |
| 5. Detect signs of a problematic situation. | <ul style="list-style-type: none"> • Demonstration of vigilance with regard to the client's behaviours, environment and lifestyle and to the people around him or her • Relevance of signs detected • Demonstration of vigilance with regard to ethical situations |

- Correct decision on whether to intervene themselves or not
 - Quality of observations transmitted verbally and in writing
6. Intervene in a problematic situation.
- Consideration of information on the client's condition
 - Consideration of the legal framework applicable to the problematic situation
 - Accurate recognition of the responsibilities and limits of their occupation
 - Choice of the appropriate moment to intervene
 - Appropriate adaptation of their interventions to the context
 - Appropriate collaboration with the interdisciplinary team

For the competency as a whole:

- Respect for the client
- Adoption of behaviours to maintain decorum
- Promptness in reporting any situation likely to put the client in danger
- Careful examination of prejudices towards the client and his or her informal caregiver

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach and respect for the client's dignity
- Demonstration of a sense of responsibility: judgment, problem solving, limits of the scope of practice and collaboration with the team
- Demonstration of confidentiality and discretion
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: promptness in reporting anomalies
- Demonstration of self-development: honest self-assessment
- In ethical situations: vigilance

1. Observe the family context.
 - The elements as a whole: holistic approach and collaboration of the informal caregiver
 - Awareness of their own prejudices and those of the client's entourage, and distancing themselves from them
 - Main types of families: traditional, blended, extended and single-parent
 - Family set-up and how it affects the nature of family relations: roles and functioning of members

- Working relationship of 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
 - Consequences of certain events likely to disrupt family relations, such as illness or taking over responsibility for a parent
 - Consequences of certain problems on family relations: family violence, sexual abuse and weak parenting skills
 - Consequences of poverty: diet, social life and housing
 - Impact of the social environment on the client and family: economic, cultural and relational aspects
2. Observe the specific sociocultural aspects.
 - 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.
 3. Observe signs of abuse.⁷
 - Different types of abuse that clients may experience: financial, physical, sexual, psychological or emotional abuse, and violation of their rights
 - Systemic or institutional abuse: abuse of authority, lack of personalized care, poorly trained staff and violation of rights
 - Ageism: discrimination based on a person's age
 - Factors and consequences linked to the development of violence or abuse: low self-esteem, situation of dependency or addiction, family dynamics and financial situation
 4. Observe manifestations of addiction.
 - Different forms of addiction: overuse of medications, drugs or alcohol, mixing of alcohol and medications, gambling, Internet addiction and sex addiction
 - Specific characteristics of elderly clients
 - Factors and consequences linked to the most prevalent addictions: history and lifestyle
 5. Detect signs of a problematic situation.
 - Careful observation: change in lifestyle habits, relationships between the client and his or her family and friends
 - Analysis of various situations
 - Application of previously acquired knowledge and know-how with respect to the transmission of observations
 - Legal aspect of writing up observation notes, and writing rules
 - 6 Intervene in a problematic situation.
 - Application of the previously seen problem-solving process: become aware of the problem, observe the situation, look for solutions, choose how to adapt their intervention, plan an intervention within the limits of the scope of practice
 - Application of previously acquired knowledge and know-how with respect to teamwork, ethics, managing their stress and emotions, confidentiality and discretion

⁷ In this program of study, the term "abuse" refers to all forms of abuse of any type of client.

- Approach strategies designed to facilitate the intervention
- Government responsibilities in the area of family and social services: federal and provincial responsibilities, family and social policies, assistance programs and services
- Use of technology to research information on the subject
- Effects of the problematic situation on the assistive care to be provided: client's condition, aggressiveness or apathy, refusal of services or limited cooperation, control of information or withdrawal of client, interference from an informal caregiver
- Resources in matters of cultural diversity and family and social problems: community, public and private networks
- Family assistance resources: support for parents in exercising their roles, observation and monitoring of the environment, respite and childcare
- Responsibilities and limits of their occupation, given the legal framework of the problem: obligation to report abuses, professional responsibilities
- Self-assessment: achievements and aspects to be improved, questions to clarify the nature of the care or relationships as well as their personal limits and honesty

Competency 11 Duration 30 hours Credits 2

Behavioural Competency

Statement of the Competency

Provide assistance to clients in palliative and end-of-life care.

Achievement Context

- In home settings, alternative living environments and care facilities
- In collaboration with the team
- Based on information on the client's condition and on verbal and written instructions

Elements of the Competency**Performance Criteria**

- | | |
|---|---|
| <ol style="list-style-type: none"> 1. Make connections between their perception of death and the palliative and end-of-life care approach. 2. Establish a relationship of trust with the client and his or her family and friends. 3. Consider the needs of the client and his or her family and friends. 4. Respond to the needs of the client and his or her family and friends. 5. Adopt professional behaviour in situations of an ethical nature. 6. Provide post-mortem care. | <ul style="list-style-type: none"> • Understanding of the principles underlying the palliative care approach • Realistic comparison of their perception of death and the palliative care approach • Demonstration of empathy and compassion • Adoption of attitudes that promote an atmosphere of trust • Accurate identification of changes to different systems in the terminal phase • Accurate identification of the manifestations of agony • Accurate identification of the stages of grief • Careful observation of the reactions of the client and his or her family and friends • Appropriate response to the information needs of the client and his or her family and friends • Appropriate use of means of alleviating various physical discomforts • Appropriate use of means of alleviating moral suffering • Respect for the client's privacy • Consideration of the collaboration of the client's family and friends • Correct assessment of the consequences on the personal level • Identification of behaviours to adopt or avoid • Empathetic listening to the emotions expressed by the client's family and friends • Respect for the dignity of the deceased client • Application of appropriate rules or protocols |
|---|---|

7. Examine their attitudes regarding the assistive care provided.
 - Realistic determination of their strengths and weaknesses
 - Accurate determination of means of improving their attitude
 - Accurate identification of their role

For the competency as a whole:

- Consideration of the client as a whole
- Observance of the limits of the scope of practice
- Close collaboration with the team and the family and friends
- Demonstration of confidentiality and discretion
- Adoption of behaviours to maintain decorum
- Compliance with rules of hygiene, asepsis, health and safety

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach, respect for the client's dignity and privacy
 - Demonstration of a sense of responsibility: judgment, problems, limits of the scope of practice, collaboration with the team and the client's family and friends
 - Demonstration of confidentiality and discretion
 - Demonstration of decorum: professional attire, proper language and respectful discourse
 - Demonstration of concern for the health and safety of themselves and the clients: rules to be applied, personal and professional limits, management of their stress and emotions
 - Demonstration of self-development: honest self-assessment
 - In situations of an ethical nature: see the situations presented in point 5 below
1. Make connections between their perception of death and the palliative and end-of-life care approach.
 - Knowledge of guidelines and policies with respect to palliative and end-of-life care and keeping their knowledge of the subject up-to-date
 - Use of technology to search for information on the subject
 - Examination of their perception of death and how they feel about it: past experiences, values, fears, beliefs, etc.
 - Recognition of the 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.
 - Distinction among the ways of doing things in different workplaces

2. Establish a relationship of trust with the client and his or her family and friends.
 - Attitudes: respect for silence, availability and concern for what the client's family and friends are experiencing
 - Respect for the client's life story and the choices made by the client and his or her family and friends
 - Application of the previously acquired competency with respect to the helping relationship
 - Quality of presence and respect for the client's personal journey
 - Collaboration of the client's family and friends
3. Consider the needs of the client and his or her family and friends.
 - Biological, intellectual, emotional, spiritual and psychological dimensions of the client and his or her family and friends
 - Sources of discomfort and unmet needs
 - Symptoms associated with the changes in the respiratory and digestive systems
 - Signs of pain and agony
 - Reactions of the client and his or her family and friends: 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
4. Respond to the needs of the client and his or her family and friends.
 - Consideration of needs: response to questions, available support resources, consideration of individual, family and cultural values and choices as well as mortuary rites
 - Means of alleviating physical discomfort
 - Means of alleviating psychological suffering: presence, alternative therapies and spiritual support
 - Physical and emotional limits of family and friends
 - Collaboration with the team for reporting changes in the client's clinical conditions
5. Adopt professional behaviour in situations of an ethical nature.
 - Types of situations: euthanasia, assisted suicide and artificial prolongation of life
 - Consequences of these situations on the personal level
 - Types of personal and professional behaviour to adopt or avoid
6. Provide post-mortem care.
 - Preparation of the deceased's body before receiving his or her family and friends
 - Reception of the client's family and friends: appropriate reactions, communication, information and attitudes
 - Compliance with the specific rules and protocols of the particular workplace: shroud, identification of the body, securing of the client's possessions, etc.
 - Protocol to follow when a client dies at home
7. Examine their attitudes regarding the assistive care provided.
 - Honest examination of their strengths and weaknesses
 - Exploration of ways to assist a client at the end-of-life: maintenance of their emotional distance, ways of releasing their emotional burden and discussion with their peers
 - Ways of managing their stress and emotions previously acquired in competencies with respect to the helping relationship and relational approaches
 - Physical and emotional signs that they have reached their limits: fatigue, sadness and impatience
 - Strategies to maintain personal and professional balance: training, support from the team and employee assistance program

Competency 12 Duration 45 hours Credits 3

Behavioural Competency

Statement of the Competency

Consider the rules and procedures for administering medications and basic invasive care involved in assistance with activities of daily living.

Achievement Context

- Within the legal framework of the *Act to amend the Professional Code and other legislative provisions as regards the health sector*
- Based on the care plan and instructions
- Based on the documentation concerning the rules and procedures in the workplace
- Using the necessary equipment and materials

Elements of the Competency**Performance Criteria**

- | | |
|---|--|
| 1. Become familiar with the request. | <ul style="list-style-type: none"> • Completeness of the information gathered • Accurate interpretation of instructions • Relevant clarification of the care to provide with the person in charge |
| 2. Determine the limits of their intervention. | <ul style="list-style-type: none"> • Accurate distinction of activities requiring training by the facility because of their reserved status • Accurate recognition of situations involving risk • Accurate determination of situations requiring a professional's assistance |
| 3. Interpret the rules and procedures for administering medications. | <ul style="list-style-type: none"> • Consideration of the client as a whole • Complete identification of the precautions to take for each route of administration • Exact identification of the instructions and procedures written on the medication containers • Correct explanation of the steps involved to the client |
| 4. Interpret the rules and procedures for providing basic invasive care involved in assistance with activities of daily living. | <ul style="list-style-type: none"> • Consideration of the client as a whole • Complete identification of the precautions to take for each type of care to be provided • Exact identification of the instructions and procedures to follow in accordance with the type of care to be provided • Accurate identification of the procedure to follow in accordance with the type of care to be provided |

5. Put away medications and materials after use.
 - Correct, safe storage of medications
 - Meticulous maintenance of materials and equipment used
 - Safe disposal of non-reusable materials
 - Full compliance with procedures for cleaning equipment and materials
 - Proper storage of equipment and materials
6. Transmit relevant information to the people concerned.
 - Precise, thorough recording of information on the appropriate sheet or document
 - Immediate transmission of information, if necessary

For the competency as a whole:

- Compliance with the rules and procedures of the workplace
- Observance of the limits of the scope of practice in accordance with the legal framework
- Compliance with rules of hygiene, asepsis, health and safety
- Critical assessment of their training needs

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: holistic approach
 - Demonstration of a sense of responsibility: judgment with respect to the limits of their intervention and collaboration with the team
 - Demonstration of decorum: professional attire, proper language and respectful discourse
 - Demonstration of concern for the health and safety of themselves and the clients: rules to be applied, respect for personal and professional limits
 - Demonstration of self-development: self-assessment
1. Become familiar with the request.
 - Terminology specific to this competency
 - *Act to amend the Professional Code and other legislative provisions as regards the health sector*
 - The parameters of the Act with respect to non-regulated activities and exceptions to reserved activities
 - Application of previously acquired competencies with respect to physical illnesses and disabilities, infection and contamination
 - Information required: the organization's rules and procedures; resources available such as the professionals involved, the care plan, the service request, instruction sheets or care techniques notebook
 - Interpretation of an instruction sheet

2. Determine the limits of their intervention.
 - Impact of the de-professionalization of the administration of medications and provision of invasive care
 - Responsibilities of the facility with respect to training and supervision
 - Consequences of non-compliance with the legal framework: the endangerment of clients and the possibility of lawsuits
 - Clients requiring invasive care: clients who have lost autonomy but whose state of health is stable
 - Conditions governing the application of the legal framework in facilities
 - Personal responsibilities, rights and obligations: distinction among health professionals, informal caregivers, non-professionals; meaning and nature of regulated and non-regulated activities; details on the context of the intervention; responsibilities of the facility, the professional in charge as well as the care attendant; civil liability of the care attendant; 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 attendant to overstep his or her responsibilities: work overload; inappropriate request made by the employer; pressure from the facility, a member of the work team, the client or his or her family and friends
 - Examples of situations requiring the assistance of a professional before and during the provision of care: change in the client's state of health, unusual situation, insufficient experience and training
3. Interpret the rules and procedures for the administration of medications.
 - Distinction between the distribution of medications and the administration of medications
 - Forms of medication: cream, ointment, spray, patch and tablet
 - Permitted routes of administration: oral, topical, transdermal, ophthalmic, by inhalation, auricular, vaginal, rectal and, for insulin only, subcutaneous
 - Procedures to follow, precautions to take and equipment and materials to use:
 - for the various forms of medication
 - for administering insulin using the subcutaneous route
 - Ways of dealing with potential problems such as an unstuck skin patch or contaminated eyedrops
4. Interpret the rules and procedures for providing basic invasive care involved in assistance with activities of daily living.
 - Procedures to follow, precautions to take and equipment and materials to use:
 - related to breathing in the case of tracheotomies
 - in cases of intermittent or continuous feeding by bolus, by using gravity, a pump or a syringe
 - related to intestinal elimination: stimulation of the anal reflex, rectal curettage, Fleet enema, taking temperature rectally and changing a collecting apparatus for an intestinal stoma
 - related to urinary elimination in cases of bladder catheterization or intermittent catheterization or to observe the urine
 - Ways of dealing with potential problems with respect to each type of care
5. Put away medications and materials after use.
 - Storage conditions in accordance with premises, primarily to keep children and cognitively-impaired adults safe
 - Procedure to follow for maintaining, preserving and storing, based on the materials used

6. Transmit relevant information to the people concerned.
 - Observations and elements to report
 - Transmission of the appropriate information in the case of a refusal to receive care
 - Rules for making notes regarding exceptions to reserved activities on an instruction sheet

Competency 13 Duration 60 hours Credits 4

Behavioural Competency

Statement of the Competency

Provide assistive care related to the client's clinical reality.

Achievement Context

- In home settings, alternative living environments and care facilities
- In collaboration with the team
- For non-invasive assistive care
- Based on information on the client's condition and on verbal and written instructions
- Using the appropriate equipment and materials
- Using information based on the legal framework regarding restraints

Elements of the Competency**Performance Criteria**

- | | |
|--|--|
| 1. Plan the work. | <ul style="list-style-type: none"> • Thorough, complete taking of notes on the information and instructions provided • Relevant clarification of the assistive care to be provided • Correct setting of priorities • Appropriate preparation of the equipment, materials and work area in accordance with the assistive care to be provided • Correct application of work procedure |
| 2. Establish a relationship with the client or integrate the client into the care unit, whichever applies. | <ul style="list-style-type: none"> • Adoption of attitudes that encourage an atmosphere of trust • Relevant integration of the client into the care unit • Paying of particular attention to the client's physical and emotional state |
| 3. Adapt assistive care procedures to the situation. | <ul style="list-style-type: none"> • Conscientious distribution of medications • Correct performance of preoperative shaving • Accurate measurements of intake and output • Adapted performance of assistive care procedures • Correct performance of non-regulated activities • Appropriate use of equipment and materials • Respect for the client's privacy |
| 4. Use means of restraint, as needed. | <ul style="list-style-type: none"> • Compliance with policies regarding restraint • Appropriate use of restraints • Careful, frequent monitoring of the restrained client • Observance of the recommended frequency for changing the client's position |

- 5. Maintain and tidy up the premises.
 - Correct performance of tasks
 - Meticulous, proper maintenance and tidying up
 - Appropriate reporting of defects found
- 6. Communicate their observations to the team.
 - Relevance and accuracy of observations
 - Transmission of the information to the people concerned
 - Timely transmission of the information
 - Openness to comments received

For the competency as a whole:

- Consideration of the client as a whole
- Demonstration of autonomy
- Observance of the limits of the scope of practice
- Adoption of behaviours to maintain decorum
- Compliance with the rules of hygiene and asepsis, health and safety
- Observance of the principles for moving clients safely
- Objective and constructive self-assessment

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach, respect for the client's condition (potential) and privacy
- Demonstration of a sense of responsibility: autonomy, effectiveness, judgment, honesty, problem solving, limits of the scope of practice and collaboration with the team
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: rules to be applied and principles for moving clients safely
- Demonstration of self-development: self-assessment of their intervention

1. Plan the work.
 - Terminology specific to this competency
 - Information on the client's condition
 - Application of previously acquired knowledge and know-how with respect to the verbal and written information to gather
 - Interpretation of an instruction sheet specific to the workplace
 - Types of assistive care to be provided
 - Preparations for the interventions to be carried out
 - Application of the work process described in the grid of competencies for this program of study in order to develop effectiveness
 - Elements to consider in setting priorities for the work to be performed, taking into account unexpected events

2. Establish a relationship with the client or integrate the client into the care unit, whichever applies.
 - Application of the previously acquired competency with respect to the helping relationship
 - Preparation of the room
 - Integration of the client into the care unit, being careful to ensure that he or she is comfortable, measurement of height and weight
 - Transmission of information to the client about his or her surroundings
 - Placement of the client in accordance with his or her condition
3. Adapt assistive care procedures to the situation.
 - Review of the competency covering medications and invasive assistive care with respect to the parameters of the Act
 - Distribution of medications: procedures to follow and precautions to take
 - Providing care in accordance with the need: preoperative shaving, measurement of intake and output, taking of temperature in the mouth or under the armpit, taking blood pressure using an easy-to-use electronic apparatus
 - Application of previously seen rules for respecting privacy
 - Application of procedures associated with non-regulated activities such as the following:
 - Collection of a urine or stool sample
 - Application of a dry protective dressing and a transparent adhesive film
 - Maintenance and emptying of a urine collection bag, collecting apparatus for an intestinal or digestive stoma
 - Administration of oxygen through nasal cannulas or a mask
 - Use of an oxygen concentrator or oxygen cylinder
 - Capillary blood sugar level
 - Use of continuous positive airway pressure (CPAP) and bi-level positive airway pressure (BPAP) devices in connection with sleep apnea.
 - Precautions and means to take in the areas of hygiene, asepsis, health and safety
 - Use of care equipment and materials, taking into consideration the client's condition and the space: stretcher, patient lift, wheelchair and suction equipment
 - Adaptation of assistive care associated with the activities of daily life (movements, hygiene, comfort, dressing) to the client's clinical condition:
 - intravenous
 - nasogastric tube
 - urinary catheter
 - oxygen tube
 - Recording of data
4. Use means of restraint, as needed.
 - Importance of complying with workplace policies as well as with instructions received
 - 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
 - Set up of a physical restraint
 - Needs of the client in restraints: hydration and frequent repositioning
 - Observation of client's behaviour and the condition of his or her skin

5. Maintain and tidy up the premises.
 - Application of knowledge and know-how from previously acquired competencies
6. Communicate their observations to the team.
 - Making notes on instruction sheets for non-regulated activities
 - Types of information to be transmitted verbally or in writing
 - Self-assessment: achievements and aspects to be improved, questions to clarify the nature of client care or relationships as well as their personal limits and honesty

Competency 14 Duration 30 hours Credits 2

Behavioural Competency

Statement of the Competency

Administer first aid.

Achievement Context

- In home settings, alternative living environments and care facilities
- With clients of all ages
- Alone or in collaboration with the team
- Based on the Basic Life Support (BLS) course for health professionals⁸
- Based on current laws, codes, charters and regulations
- Using available equipment and materials

Elements of the Competency**Performance Criteria**

- | | |
|--|--|
| 1. Apply techniques for maintaining and restoring vital functions. | <ul style="list-style-type: none"> • Accurate evaluation of vital functions • Correct technique for taking the person's pulse • Appropriate choice of technique for clearing obstructed airways, artificial respiration, cardiac massage or use of an automated external defibrillator (AED) • Rapid and correct use of different techniques |
| 2. Intervene in cases of hemorrhage or state of shock. | <ul style="list-style-type: none"> • Accurate identification of types of hemorrhage • Accurate recognition of a state of shock • Rapid and appropriate use of pressure, elevation and rest • Correct use of measures aimed at preventing contamination by blood |
| 3. Intervene in cases of musculoskeletal injury. | <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 |
| 4. Intervene in cases of eye injury. | <ul style="list-style-type: none"> • 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 |

⁸ Heart & Stroke Foundation

- | | |
|--|--|
| 5. Intervene in the case of various wounds. | <ul style="list-style-type: none"> • 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. | <ul style="list-style-type: none"> • 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. | <ul style="list-style-type: none"> • 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. | <ul style="list-style-type: none"> • Accurate identification of manifestations of allergic reaction • 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 use of adrenaline |
| 9. Intervene in cases of other medical problems. | <ul style="list-style-type: none"> • 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 |

For the competency as a whole:

- Demonstration of a calm attitude and self-control
- Effective communication to reassure the victim and his or her family and friends
- Observance of the limits of the scope of practice
- Compliance with the general emergency plan
- Compliance with the facility's intervention protocols
- Clear, precise transmission of information to the person in charge

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: reassuring relational and holistic approaches
- Demonstration of a sense of responsibility: autonomy, effectiveness, judgment, limits of the scope of practice, protocols and collaboration with the team
- Demonstration of concern for the health and safety of themselves and the clients: for the competency as a whole

For the competency as a whole:

- Recognition of situations in daily living that pose a risk for injuries such as burns, cuts or falls, and the ways of preventing them
 - Application of previously acquired knowledge with respect to infections, contamination and safety
 - Application of the previously acquired competency with respect to illnesses and physical disabilities
1. Apply techniques for maintaining and restoring vital functions.
 - Distinguishing of the steps of the general emergency plan
 - Identification of dangerous situations
 - Communication with emergency services (e.g. 911)
 - Assessment of the victim's state of consciousness, breathing and visible signs of circulation
 - Location of anatomical structures such as the respiratory tract, lungs and heart
 - Consideration of specific instructions applicable to infants, children and adults when clearing airway obstructions, giving artificial respiration, using an AED and performing cardiopulmonary resuscitation
 - Materials and equipment used: mask and AED
 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 materials and equipment
 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 materials and equipment 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 the case 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, application of dry or wet bandages
7. Intervene in cases of poisoning.
 - Identification of the 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)
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 other 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

Competency 15 Duration 75 hours Credits 5

Behavioural Competency

Statement of the Competency

Provide assistive care to clients requiring short-term care.

Achievement Context

- In various care units
- In collaboration with the team
- Based on information on the clients' condition and on verbal and written instructions
- Using the care equipment and materials specific to each unit
- Based on the policies, instructions and code of ethics of the workplace, as applicable

Elements of the Competency**Performance Criteria**

- | | |
|--|--|
| 1. Plan the work. | <ul style="list-style-type: none"> • Consideration of how the work is organized in the care unit • Taking of relevant, complete notes for each of the assigned clients • Consideration of the schedule for treatments and diagnostic tests • Appropriate setting of work priorities on their worksheet • Correct application of the work process |
| 2. Observe the client's condition. | <ul style="list-style-type: none"> • Recognition of the manifestations of pain • Recognition of the client's physical and emotional state • Recognition of the client's unmet needs |
| 3. Adapt their approach to the client's situation and that of his or her family and friends. | <ul style="list-style-type: none"> • Proper determination of the approach to take • Reassuring introduction • Use of appropriate means to establish a helping relationship • Appropriate demonstration of interest in the client |
| 4. Adapt the assistive care to the client's situation. | <ul style="list-style-type: none"> • Respect for the levels of assistance required by the client • Respect for the client's privacy • Appropriate use of the equipment and materials • Proper application of assistive care procedures • Exact measurement of intake and output • Appropriate use of means to make the client comfortable • Effective provision of care |

- | | |
|---|---|
| 5. Participate in monitoring the client and premises. | <ul style="list-style-type: none"> • Demonstration of attentiveness and vigilance • Exhaustive identification of elements that may pose a danger • Promptness in meeting the client's needs • Promptness in reporting any important change to the people concerned • Accurate identification of situations requiring individual or team intervention |
| 6. Adopt professional behaviour in ethical situations. | <ul style="list-style-type: none"> • Proper judgment with regard to compromising situations • Appropriate decision with regard to the situation |
| 7. Maintain and tidy up the premises. | <ul style="list-style-type: none"> • Correct performance of tasks • Meticulous, proper maintenance and tidying up • Accurate reporting of defects in equipment or materials |
| 8. Transmit their observations and suggestions to the team. | <ul style="list-style-type: none"> • Relevant, accurate observations • Concern for transmitting information needed to ensure the continuity of the assistive care • Relevant, realistic suggestions regarding the client's needs |

For the competency as a whole:

- Consideration of the client as a whole
- Demonstration of autonomy
- Observance of the limits of the scope of practice
- Compliance with laws, regulations, standards and protocols in effect in the workplace
- Active contribution to the work team
- Openness to comments received
- Demonstration of confidentiality and discretion
- Adoption of behaviours to maintain decorum
- Compliance with rules of hygiene, asepsis, health and safety
- Observance of the principles for moving clients safely
- Objective and constructive self-assessment

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.

Details on the professional behaviours to be developed:

- Demonstration of respect for the client: relational approach, holistic approach, respect for the dignity, situation, potential and privacy of the client

- Demonstration of a sense of responsibility: autonomy, effectiveness, judgment, problem solving, limits of the scope of practice, laws and regulations, and collaboration with the team
- Demonstration of confidentiality and discretion
- Demonstration of decorum: professional attire, proper language and respectful discourse
- Demonstration of concern for the health and safety of themselves and the clients: rules to be applied, principles for moving clients safely, personal limits, managing of their stress and emotions
- Demonstration of self-development: honest self-assessment
- In ethical situations: see the situations in point 6 below

1. Plan the work.

- Different ways of organizing the physical space and the work in care units and using technology to search for information on the subject
- Specifics of teamwork in a short-term care unit: collaboration and responding to requests
- Autonomy, initiative and resourcefulness: adjustment of the schedule as needed, client turnover and unforeseen circumstances
- Preparation of the worksheet and annotation of it throughout the shift
- Relevant data to take into consideration when providing short-term assistive care
- Concrete adaptation to the different unforeseen circumstances encountered in care units

2. Observe the client's condition.

- Objective and subjective manifestations of pain
- Reactions and behaviour of the client, depending on his or her condition
- Observation of signs of discomfort
- Application of the previously acquired competency with respect to physical illnesses and disabilities

3. Adapt their approach to the client's situation and that of his or her family and friends.

- Application of the previously acquired competency with respect to the helping relationship in care units
- Adaptation of their approach in accordance with changes in the client's conditions
- Demonstration of concern and compassion

4. Adapt the assistive care to the client's situation.

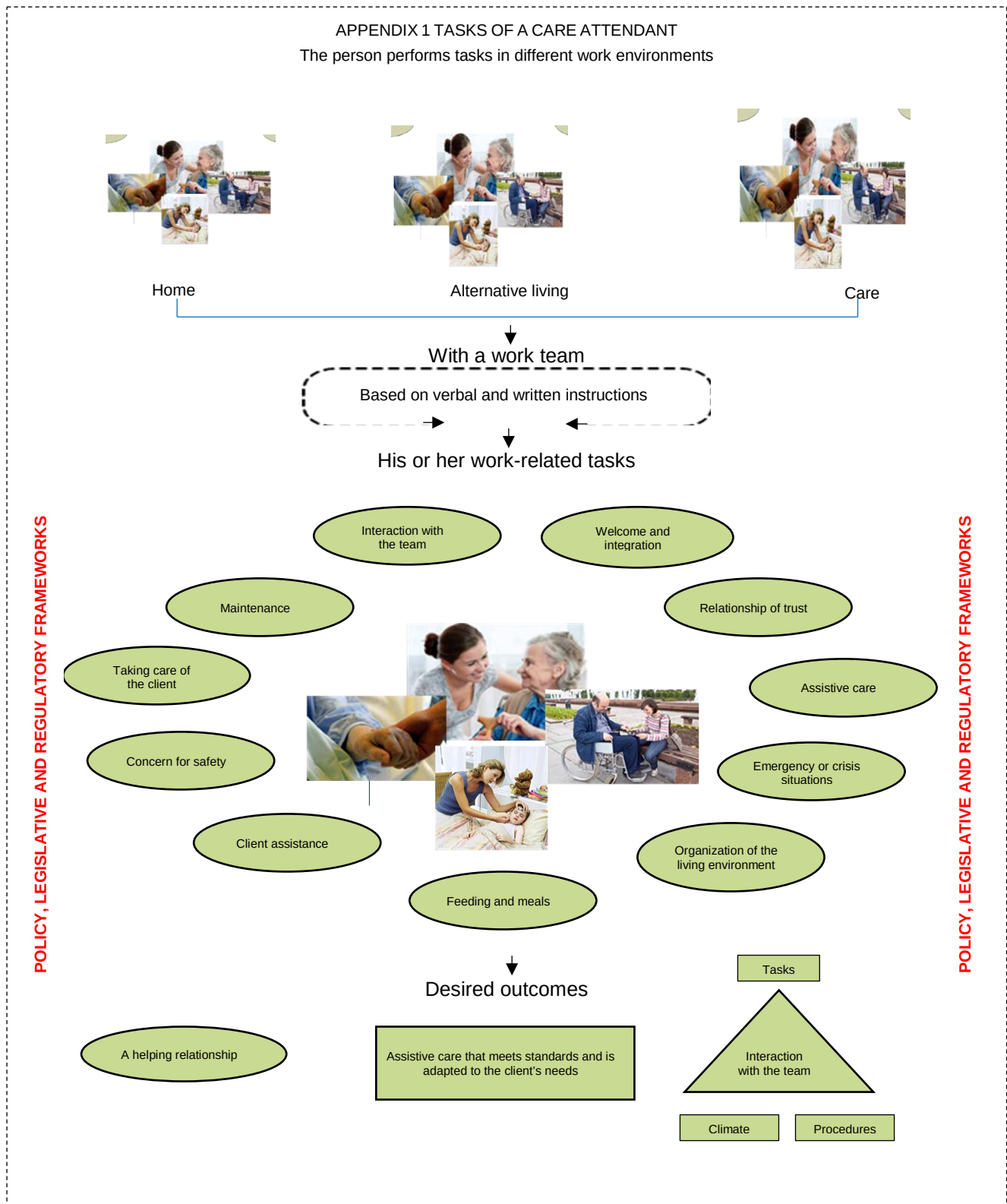
- Application of previously acquired competencies with respect to the activities of daily life and care related to the client's clinical reality
- Precautions and means to take in the areas of hygiene, asepsis, health and safety
- Care devices: tractions, various pumps, nasogastric tube, etc.
- Adaptation of care in accordance with changes in the client's condition and the various unforeseen circumstances encountered in care units
- Preparation of the room for the client's arrival in the care unit: preparation of the equipment and materials, familiarization with the physical environment and space

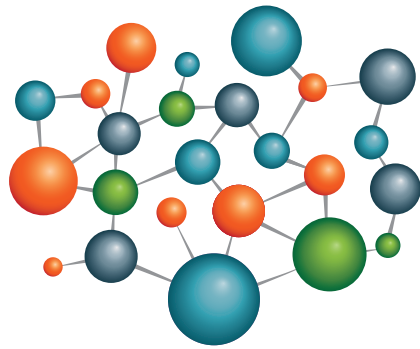
5. Participate in monitoring the client and premises.

- Attention and vigilance: regular rounds, situations requiring a team intervention
- 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 person is located

6. Adopt professional behaviour in ethical situations
 - Vigilance with regard to compromising situations for the client, themselves and the organization of work in the care unit
 - Links with the professional behaviour to adopt
 - Personal and professional limits
7. Maintain and tidy up the premises.
 - Maintenance and storage of equipment and materials specific to this competency
 - Application of previously acquired competencies with respect to infections and contamination for assistive care related to the activities of daily life and care related to the client's clinical reality
8. Transmit their observations and suggestions to the team.
 - Importance of transmitting the information to the right person at the right time
 - Rigour in the communication of the information
 - Application of the previously acquired competency with respect to care in a home setting and in alternative living environments
 - Self-assessment: achievements and aspects to be improved, questions to clarify the nature of client care or relationships as well as their personal limits, ability to manage their stress and emotions, and honesty

Appendix 1 Tasks of a Care Attendant





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