

# Trainee's Assessment

**Demonstrate knowledge of infection control requirements  
in a health or disability setting**

**US 20826 V3**

Level 2    Credits 3

Name \_\_\_\_\_

careerforce

## Trainee's assessment

This trainee's assessment contains:

- Instructions for the trainee
- Assessment tasks
- Checklist for practical demonstrations
- Feedback form
- Assessment result sheet

## Tips for the trainee

Before you start this assessment you must read the instructions.

The following colours show different areas of this assessment:

- **Green boxes:** sections to be filled out and usually signed – by you or someone else such as an assessor, verifier or supervisor.
- **Purple boxes:** areas for the assessor to write in. Please do not write in these boxes.
- **Blue boxes:** tasks where you are asked to give a written or spoken answer.
- **Grey boxes:** tasks where your answer is a demonstration or oral presentation.

**A person assessed as competent in this unit standard is able to:**

	<b>Outcome</b>	<b>Task and evidence</b>
Describe how infection is caused and passed on.	1	One – Written or spoken answer (Blue)
Demonstrate hand hygiene procedures.	2	Two – Demonstration (Grey)
Describe infection control precautions (saftey measures).	2	Three – Written or spoken answer (Blue)
Describe procedures for disposing of body fluids and waste.	2	Three – Written or spoken answer (Blue)
Describe how to handle soiled items.	2	Three – Written or spoken answer (Blue)
Describe first aid measures for contact exposure to blood or bodily fluids.	2	Three – Written or spoken answer (Blue)
Report risks of infection..	3	Four – Written or spoken answer (Blue)

## Instructions for the trainee

- Your answers to the assessment tasks need to show the assessor that you have a full understanding of the topic. The assessor may require you to discuss your responses.
- This assessment is “open book”, which means that you can use any information you wish when you are completing this assessment. This information may include learning materials, books, the internet, and your organisation’s policies and procedures.
- Your answers can be written or spoken. You are also asked to demonstrate practical tasks.
  - When you write your answer, use pen in the space provided. Initial any alterations you make. Please write your name on any additional pages and attach them to the assessment.
  - When you answer verbally, the assessor will make full notes of your answer in the space provided in this assessment or may use a digital voice recorder.
  - When you are asked to carry out a practical task, your assessor or verifier will observe you and complete a checklist. The assessor/verifier may require you to perform the task on more than one occasion.

- For any documents you supply, remove all identifying details of the people receiving services or support.
- You need to show that your work complies with your organisation’s policies and procedures.
- If you require assistance with any aspect of the assessment, please contact your assessor.

### Definitions of terms

The word **trainee** in this assessment refers to the person being assessed. Other terms that may be used are candidate, student or employee.

**Person** refers to a person accessing services in a health or disability setting in either a residential care facility or in a private home – the person’s own or a friend’s, group’s, or family member’s. Other terms used for the person being supported include client, consumer, individual, resident, service user or tūrora.

An **organisation’s policies and procedures** are the policies and procedures of the trainee’s employer and include ethical codes, standards and other organisational requirements.

**Workplace assessor** or **assessor** means the person who will assess the trainee.

A **verifier** is a workplace supervisor or manager who understands the assessment, works closely with the trainee, and can confirm the trainee has performed the task competently.

### Abbreviations

**ER** refers to the evidence requirements of the unit standard – the evidence (descriptions, explanations, documents etc) that you must provide, and/or the actions that you must do or demonstrate.

**MER** means “more evidence required”.

### References

- Careerforce workbook – 20826 V3 Demonstrate knowledge of infection control requirements in a health or disability setting.
- Your organisation’s policies and procedures.

**Question 1:** Describe each of **four** causes of infection.

Cause 1

Cause 2

Cause 3

Cause 4

**Assessor's use only**  
Notes and decision:



Infection can be passed on by direct, indirect, airborne and vector-borne contact.

**Question 2:** What is the cause of **four** of the following infections?

**Sample answer: What causes the flu (influenza)?**

*Virus*

**What causes a bladder infection?**

**What causes cold sores (herpes)?**

**What causes head lice?**

**What causes an infected (streptococcal) throat?**

**What causes athlete's foot?**

**What causes ringworm?**

**Assessor's use only**

Notes and decision:



**Question 3:** Describe each type of contact and give **one** example of an infection that can be passed on this way.

1. Direct contact means:

Give **one** example of an infection that can be passed on by this way.

2. Indirect contact means:

Give **one** example of an infection that can be passed on by this way.

**Assessor's use only**

Notes and decision:



3. Airborne contact means:

Give **one** example of an infection that can be passed on by this way.

4. Vector-borne contact means:

Give **one** example of an infection that can be passed on this way.

Assessor's use only  
Notes and decision:



## Assessor's feedback on the trainee's performance

<b>Task One:</b> Achieved <input type="radio"/> More evidence required <input type="radio"/>	Assessor's name:	Date:
<b>Reassessment:</b> Achieved <input type="radio"/> More evidence required <input type="radio"/>	Assessor's name:	Date:

An observer will fill in this checklist as you carry out this practical task. The observer may be your assessor or a verifier who can confirm that you have competently performed the task. When doing this task you must work within your organisation's policies and procedures.

**Assessor's/verifier's use only**  
Notes and decision:



## Demonstration of hand hygiene procedures

Show or describe where **two** hand-washing facilities are located in your workplace.

**1**

**2**

Demonstrate hand-washing procedures

Two large light purple rectangular areas for notes and decisions, each containing a white circle on the right side.

## Hand hygiene procedures

Demonstrate hand-washing procedures using alcohol-based hand rubs

Assessor's/verifier's use only  
Notes and decision:



Verifier's name:  
(if different from assessor)

Verifier's signature:  
(if different from assessor)

## Assessor's feedback on the trainee's performance

Task Two: Achieved

More evidence required

Assessor's name:

Date:

Reassessment: Achieved

More evidence required

Assessor's name:

Date:

**Question 1:** What are **two** infection control precautions (safety measures) a support worker would use in a particular care situation? Choose **two** different care situations. Examples might be showering, toileting, assisting with food and fluids.

Safety measures include cleaning hands, wearing gloves, apron, gown, goggles or glasses, mask, hat, and using alcohol hand rubs.

**Two** infection control precautions a support worker would use.

**Care situation 1** (state situation):

Precaution 1

Precaution 2

**Care situation 2** (state situation):

Precaution 1

Precaution 2

**Assessor's use only**  
Notes and decision:



Large empty area for assessor notes and decision, featuring two white circular markers on the right side.

**Question 2:** How would a support worker dispose of (get rid of) **three** of the items below that are soiled with body fluids or waste?

- Dressings
- Contenance pads
- Urine drainage bags or colostomy bags
- Gloves
- Sanitary products
- Contents of urinals, pans or commodes
- Other (identify)

**Sample answer:**

*Colostomy bags and urine drainage bags – emptied (where possible), sealed in plastic bag and put in the rubbish.*

**Item 1**

**Item 2**

**Item 3**

**Assessor's use only**

Notes and decision:



**Question 3:** How should a support worker handle soiled gowns, bedding and clothing?

You should refer to your organisation's policies and procedures or similar documents for your responses.

**Handling soiled items**

*Sample answer: For soiled bedding, fold linen in on itself.*

**Bedding**

**Gowns**

**Clothing**

**Assessor's use only**

Notes and decision:



Three large, light purple rectangular boxes stacked vertically, each containing a white circle on the right side, intended for assessor notes and decisions.

**Question 4:** What emergency first aid measures/procedures should a support worker follow after contact with another person's blood or bodily fluids?

You should refer to your organisation's policies and procedures or similar documents for your responses.

**What emergency first aid measures should a support worker follow after contact with...?**

*Sample answer: After contact with a needle, clean the wound with soap and water.*

**Needles and other sharps.**

**First aid measures**

**Assessor's use only**

Notes and decision:



**Body fluid splashes on skin.**

A **splash** is where body fluid makes contact with your skin or gets into your eyes, mouth or nose.

**First aid measures**

**Blood and body fluid spills (not on skin) on floor or other surfaces.**

A **spill** is where blood or other body fluids are presenting a risk to people, for example, on the floor or a surface other people may touch such as a table or toilet seat.

**First aid measures**

**Assessor's use only**

Notes and decision:



## Assessor's feedback on the trainee's performance

Task Three: Achieved <input type="radio"/>	More evidence required <input type="radio"/>	Assessor's name:	Date:
Reassessment: Achieved <input type="radio"/>	More evidence required <input type="radio"/>	Assessor's name:	Date:

**Question 1:** How do you report risks of infection? You should refer to your organisation's policies and procedures or similar documents for your response.

### Reporting procedure for an identified risk of infection

What is the risk of infection you have identified?

How should it be reported?

**Assessor's use only**  
Notes and decision:



## Assessor's feedback on the trainee's performance

<b>Task Four:</b> Achieved <input type="radio"/> More evidence required <input type="radio"/>	Assessor's name:	Date:
<b>Reassessment:</b> Achieved <input type="radio"/> More evidence required <input type="radio"/>	Assessor's name:	Date:

## Instructions for the trainee

### When you have finished the assessment

- Please give your completed assessment and any additional material to your assessor. You might like to make a copy for your records.
- When you have been assessed as having achieved this unit standard, the results will be sent to Careerforce for registering credits on the New Zealand Qualifications Framework.
- Your assessor will give your assessment material back to you. Please keep it safe.
- If you wish to appeal against the assessment result or process, you should complete an "Appeal of Trainee Assessment Result Form". This form can be downloaded from the Shortcuts/Forms/Trainee Forms section of the Careerforce website [www.careerforce.org.nz](http://www.careerforce.org.nz)
- **Please complete the trainee's declaration below.**

### Trainee's declaration

I was told about and understood the assessment requirements.

I have prepared my answers myself.

I agree that this document can be photocopied for the purpose of moderation, as part of quality control processes.

I agree that once the assessment decision has been made, my personal details and results will be sent to Careerforce for registering credits on the New Zealand Qualifications Framework.

Trainee's signature:

Trainee's name (please print):

Date:

# US 20826 V3 – Demonstrate knowledge of infection control requirements in a health or disability setting

Please complete this feedback form to help us to improve our assessments.

Please respond to the questions with a tick in the relevant circle and with comments in the boxes

	Yes	No	Sometimes
Did you think the assessment booklet was well laid out?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Did you find the assessment questions easy to understand?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What did you most like about this assessment?

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What did you least like about this assessment?

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If you could change something to improve this assessment, what would it be?

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Additional comments:

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Contact details (optional)

Name:

Workplace:

Phone:

Email:

When you have completed this page, please pull it out, fold it in three, secure it with tape and send it (Freepost) to:  
Senior Educational Support Administrator, Careerforce, PO Box 25 255, Christchurch 8144 Fax (03) 371 9285

# US 20826 V3 – Demonstrate knowledge of infection control requirements in a health or disability setting

Level 2 Credits 3

**Assessment result sheet** (completed by assessor)

Trainee's information	
Name:	
Employer:	
NZQA/NSI number (ROL):	Date of birth:

## Trainee's performance summary

Assessment tasks	Achieved
Task One	<input checked="" type="radio"/>
Task Two	<input checked="" type="radio"/>
Task Three	<input checked="" type="radio"/>
Task Four	<input checked="" type="radio"/>

## Comments/feedback to the trainee

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## Assessment result

I have assessed the trainee and confirm:

The requirements have been met to demonstrate competency in 20826 V3.

Name:	Assessor's number:
Signed:	Date:

For the credits to be registered on the New Zealand Qualifications Framework, send a copy of this form to:  
Training Support Team, Careerforce, PO Box 25 255, Christchurch 8144