



Oil Seed and Pulse Processing

Level-II

**Based on September 2019, Occupational
standards (OS) Version2**

Module Title: Applying First Aid

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LG #10

LO #1 Assess the situation

Instruction sheet

This learning guide is developed to provide you the necessary information regarding the following content coverage and topics:

- Identifying and minimizing hazards
- Occupational health and safety requirements
- Minimizing risk to self and casualty's health and safety
- Assessing casualty
- Identifying injuries, illnesses and conditions

This guide will also assist you to attain the learning outcomes stated in the cover page.

Specifically, upon completion of this learning guide, you will be able to:

- Identify and minimizing hazards
- Occupational health and safety requirements
- Minimize risk to self and casualty's health and safety
- Assess casualty
- Identify injuries, illnesses and conditions

Learning Instructions:

1. Read the specific objectives of this Learning Guide.
2. Follow the instructions described below.
3. Read the information written in the information Sheets
4. Accomplish the Self-checks
5. Perform Operation Sheets
6. Do the "LAP test"



Information Sheet 1 Identifying and minimizing hazards

1.1 Introduction

Source or situation with the potential for harm in terms of human injury or ill-health, damage to property, the environment, or a combination of these

Hazards may include:

- Physical hazards
- Biological hazards
- Chemical hazards
- **Biological**
 - ✓ Bacteria
 - ✓ Parasites
 - ✓ Viruses
 - ✓ Mold
 - ✓ Yeast
- **Chemical**
 - ✓ Cleaning agents
 - ✓ Sanitizers
 - ✓ Polishes
 - ✓ Lubricants
- **Physical**
 - ✓ Staples
 - ✓ Jewelry
 - ✓ Hair
 - ✓ Glasses
 - ✓ stones
 - ✓ strings
 - ✓ Woo

1.2 Minimize hazards in the industries are:

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I Implement either Hazard Analysis Critical Control Point (HACCP) and ISO 22000

Principle 1 - Identify any hazards that must be prevented, eliminated or reduced to acceptable levels.

Principle 2 - Identify the critical control points (CCP) to control identified hazards.

Principle 3 - Establish critical limits that should be respected to ensure that each CCP is under control.

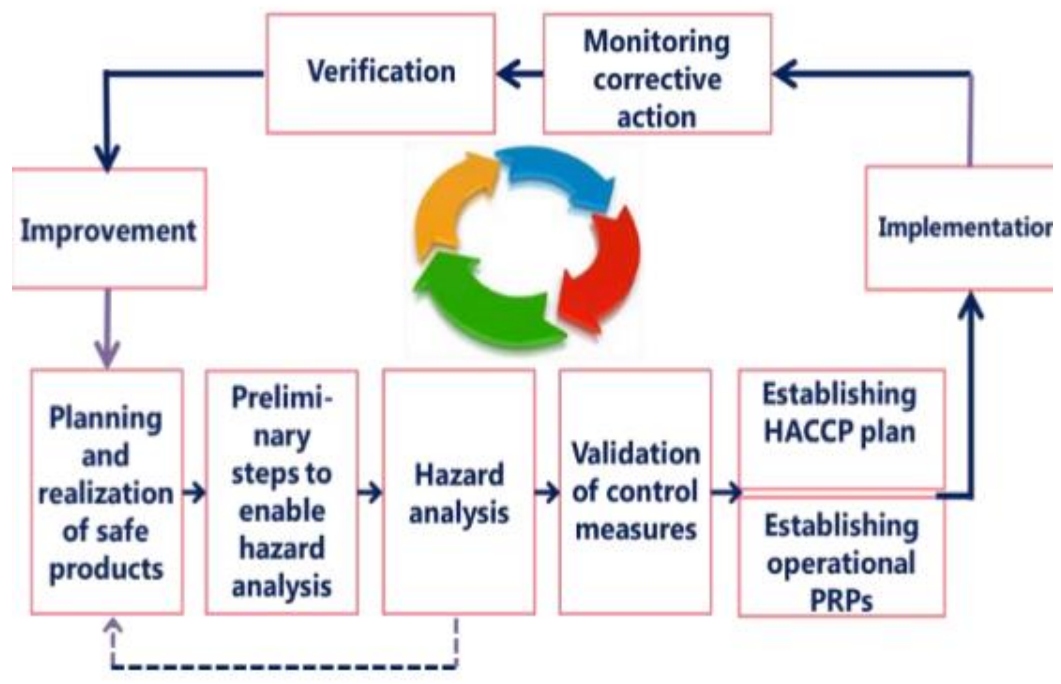
Principle 4 – Establish a monitoring system to assure that CCP are under control

Principle 5 – Establish corrective actions when monitoring indicates that a critical control point is not under control.

Principle 6 – Establish verification procedures that confirm proper functioning of the HACCP system.

Principle 7 – Organize documents regarding all procedures and records related to these principles and to their application.

❖ Steps in implementing ISO 22000





- I Avoid oil adulteration**
- II produce/train skilled manpower/ technologists**
- III Implement KAIZEN**
- IV Start oil fortification (protection)**



Self-check 1	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

1. Define the following? (3 points)
 - a. Immediate working area
 - b. Sustainability
 - c. Hazard
 - d. Safety
2. Explain principles of establishing the work area? (5 points)

Note: Satisfactory rating - 15 points Unsatisfactory - below 15 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 2 Occupational health and safety requirements

2.1 Occupational health and safety requirements

According to world health organization (WHO, 1995), occupational safety and health can be defined as a multidisciplinary activity aiming at:

- ✓ Protection and promotion of the health of workers by eliminating occupational factors and conditions hazardous to health and safety at work.
- ✓ Enhancement of physical, mental and social well-being of workers and support for the development and maintenance of their working capacity, as well as professional and social development at work
- ✓ Development and promotion of sustainable work environments and work organizations

The ILO/WHO definition of occupational health is “The promotion and maintenance of the highest degree of physical, mental social well-being of workers in all occupation” and the WHO considers occupational health service to be responsible for the total of worker and, if possible, his or her family.

- **The discipline covers the following key components:**

- ✓ The availability of occupational health and safety regulations at workplace
- ✓ The availability of active and functional occupational health and safety committee at workplace
- ✓ Monitoring and control of factory hazards to health
- ✓ Supervision and monitoring of hygiene and sanitary facilities for health and welfare of the workers
- ✓ Inspection of health safety of protective devices
- ✓ Pre-employment, periodical and special health examination.
- ✓ Performance of adaptation of work to man
- ✓ Provision of First Aid
- ✓ Health education and safety training to the worker

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- ✓ Advice to employers on the above mentioned items
- ✓ Reporting of occupational deaths, diseases, injuries, disabilities ,hazards and their related preventive measures at working

- According to a statement by occupational health institutes collaborating with the WHO (1995) the most important challenges for occupational health for the future will be:
 - ✓ Occupational health problems linked to new information technologies and automation;
 - ✓ New chemical substances and physical energies;
 - ✓ Health hazards associated with new biotechnologies;
 - ✓ Transfer of hazardous technologies;
 - ✓ Aging working populations; special problems of vulnerable and underserved groups (e.g. Chronically ill and handicapped), including migrants and the unemployed; and,
 - ✓ Problems related to growing mobility of worker populations and occurrence of new occupational diseases of various origins.

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Self Check 2	Written Test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations.

Instruction I: Give short answer. (15 point)

1. Protection and promotion of the health of workers by eliminating occupational factors and conditions hazardous to health and safety at work
2. Write down the three steps used to manage health and safety at work?(4points)
3. Discuss the merit of reporting workplace hazards? (3points)

You can ask you teacher for the copy of the correct answers.

Note: Satisfactory rating – 10 points Unsatisfactory - below 10 points





Information Sheet 3 Minimizing risk to self and casualty's health and safety

3.1 Risk factors

Definition of terms:-

Risk is the possibility that somebody could be harmed by these and other hazards and the indication of how serious the harm can be.

Risk factor is a variable associated with an increased risk of disease or infection . Or any attribute, characteristic or exposure of an individual that increase the likelihood of developing a disease or injury.

Unfortunately our home is the place where accidents are most likely to occur. Everyone should be aware of the dangers in the home so that accidents can be avoided. The purpose of this information sheet is to raise awareness of the type of accidents that may occur in the home and what steps you can take to prevent them.

3.2 Fire

Fire is a process in which substances combine chemically with oxygen from the air and typically give out bright light, heat, and smoke, combustion or burn.

Fires can start suddenly and spread quickly, damaging your home and furniture and putting lives in danger.**Actions to do when in a house fire**

i. Get The Fire Extinguisher.

If you hear the sound of the fire alarm in your home do not ignore it, go for your fire extinguisher as a one stop preventive measure. This singular act can help curb the fire instantly, but if your effort proves abortive after using the fire extinguisher, leave the scene immediately. Fire extinguishers are very important and should be installed in every house, no matter if private or commercial.



Figure 1 Fire extinguisher

ii. Raise an Alarm

Inform others in the house of the fire situation by screaming out loud; do not rely on smoke detectors and alarm to inform others, they might sometimes malfunction due to battery faults and other reasons.

iii. Call the local emergency number

Pick up your phone and call the fire department after leaving the property, do not stop inside the house searching for your mobile device as you could get caught up in the flames. Rush out, and ask neighbors or passer-by to help you call the fire department.

iv. Leave Valuables behind.

When in a fire, never delay to find the best possible escape route from a burning house to find valuables. You could always notify the fire safety officers when they arrive of such valuables describing their last known location

v. Stop, Drop and Roll.



If your clothes catches fire, do not run, simply drop to the floor and roll over your back to extinguish the fire. Always crawl and remain close to the ground to keep you away from the high temperature, and thick smoke from the fire. Stay low, until you escape the burning house.

vi. Cover Your Nose.

Cover your nostril with a shirt or a damp towel during a house fire, this will prevent smoke from entering your lungs. Also cover the faces of children as much as possible, especially when helping out to get them to safety.

Lastly do not run into a room filled with smoke or flames, doing that means running into massive danger.

3.3 Electric

Many accidents and fatalities involve electricity - it must be treated with respect.

3.4 Heating and cooking

Safety is especially important when choosing and using heating products

3.5 Medicines and Cleaners

Chemical preparations of any sort, whether in the form of medicines or household cleaners should always be treated with caution.

- **Safety measures**

Fire Safety

Fires can start suddenly and spread quickly, damaging your home and furniture and putting lives in danger. They are caused in a variety of ways, but there are a few simple hints you can follow to prevent them starting.

- ✓ Keep all fires and heaters well guarded, especially open fires.
- ✓ Keep portable heaters and candles away from furniture and curtains. Position safely where they cannot be knocked over
- ✓ Don't dry or air clothes over or near the fire, or the cooker



- ✓ Do not smoke in bed
- ✓ Many fires start in the kitchen, especially fat fires. Never leave a pan unattended when deep fat frying and watch for overheating.
- ✓ If there are children around, keep matches and lighters well out of reach
- ✓ Fit approved smoke detectors on each floor. Choose a smoke alarm that is mains operated or one with a long life battery
- ✓ Plan your escape route. Remember Get **out**, stay **out** and call the fire brigade out!

Electrical Safety

Many accidents and fatalities involve electricity - it must be treated with respect. Here are some tips.

- ✓ Do not use appliances with worn or damaged flexes. Don't wire flexes together.
- ✓ Keep portable mains-operated appliances out of the bathroom.
- ✓ Have electric blankets serviced and checked regularly
- ✓ If an appliance appears faulty stop using it and have it checked at once
- ✓ Consider having a RCD (residual current device) for whole house protection. These are especially valuable when power tools are used
- ✓ Look for the CE mark when you buy electrical equipment
- ✓ Never overload an electric socket.

Heating and Cooking safety

Safety is especially important when choosing and using heating products.

- ✓ All fuel-burning appliances use up fresh air as they burn, and give off waste gases including the deadly carbon monoxide (CO). Never block air vents or airbricks and service appliances annually
- ✓ Be aware of symptoms of CO poisoning such as drowsiness and flu like symptoms
- ✓ If you use a chimney or flue, or bring one back into use, have it swept at least once a year, or more frequently if you burn wood
- ✓ Never block any outside grilles or rest anything against it



- ✓ If a gas flame, which normally burns blue, burns orange this may be a built up of carbon monoxide. Have your appliance checked immediately
- ✓ Check the pilot regularly on gas cookers and water heaters to make sure it has not gone out
- ✓ When buying gas appliances look for the British Standards safety mark or British Seal of Approval and beware of second hand bargains and cowboy installers
- ✓ If you suspect a gas leak, open the windows, turn off the supply and call your gas supplier. Don't operate switches as a spark could ignite the gas
- ✓ Always keep a special watch on young children and elderly people when fires and heaters are in use.



Self Check- 3	Written Test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations.

Instruction I: Give short answer.

1. Mention the risk factor? (5 point)
2. Discuss how to minimize risk. (5 point)

You can ask you teacher for the copy of the correct answers.

Note: Satisfactory rating – 5 points Unsatisfactory - below 5 points



Information Sheet 4 Assessing casualty

4.1 Assessing casualty

The best method for assessing a casualty in an emergency situation is to perform a quick primary survey followed by a more thorough secondary survey. A primary survey is a quick assessment of a casualty to find and correct any life-threatening issues.

The primary survey is a quick way to find out how to treat any life threatening conditions a casualty may have in order of priority. We can use DRABC to do this (Danger, Response, Airway, Breathing and Circulation).

- Danger – any hazards to yourself or bystanders?
- Response – is the casualty unconscious?
- Shout for help – if they are unconscious, shout for further help but do not leave their side
- Airway – open the airway by tilting the head back and lifting the chin
- Breathing – check for normal breathing for up to 10 seconds
- Circulation – perform cpr and use a defibrillator if the victim isn't breathing



Self-Check – 4	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Mention and discuss assessing a casualty (5 point)
2. Discuss the merit of assessing a casualty? (5 point)

Note: Satisfactory rating - 5 points Unsatisfactory - below 5 points
 You can ask you teacher for the copy of the correct answers.



Information Sheet 5 Identifying injuries, illnesses and conditions

5.1 Injuries, illnesses and conditions parameters for environmental aspects

Some jobs are naturally more hazardous than others, and the oil and gas industry is one of the nation’s most dangerous. The same report found that the rate of injury and illness among oil and gas workers was five times that of the general worker population.

5.2 Most Common Workplace Injuries

Oil workers are prone to all manner of injury, due to the natural hazards of the job. But the most common types of injury are not what you might think. Here are the highlights: Driving is the Most Dangerous Job in the Oil Industry. Most oil workers are not killed in the field or on the rig itself, but on the highway. Oil and gas workers have been killed on the road in the past decade. One of them was timothy Roth, who boarded a truck after a 17 hour shift with three coworkers to begin the long 4 hour commute home to West Virginia. Just ten minutes into their journey, the driver fell asleep, crashing the vehicle and killing Mr. Roth. Stories like these are not uncommon, as workers are expected to pull long shifts hours away from their homes. Oil field employees are not subject to the regulations that keep truck drivers from working long shifts on the road, which pressures employees to make long commutes home after shifts that can be 20 hours or longer.

Machine-Related Injuries

Oil companies use heavy machinery and hazardous equipment, which leads to workplace injury. Derricks, heavy lifts, hoists, drillers, and loading and unloading materials can all cause trauma or crush injuries. Additionally, machines used in drilling are loud and can cause hearing loss or even loss of balance when they disturb the inner ear. Operators must wear appropriate protective gear, such as earplugs and gloves while operating equipment.

Unfortunately, combining the hazardous equipment with long shifts and worker fatigue can be a recipe for disaster. Workers can suffer crush injury, dismemberment, or even

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death from being caught in pumps and compressors. Oil companies have a duty to follow OSHA regulations to minimize the risk of these types of injuries by checking their equipment often and making sure employees have proper safety gear and breaks.

Illness from Chemical Exposure Chemical exposure is common in the oil fields. The processes involved in drilling can release noxious chemicals into the work area. Most notably, oil refineries can release hydrofluoric acid, which can scar lungs and cause death by asphyxiation. It's so noxious that it can permeate the skin and react with calcium deep within our bones.

Prolonged exposure to other chemicals in refineries and wells can lead to respiratory problems, brain injury, paralysis, leukemia, and other kinds of cancer. In the short term, workers who are exposed to oil industry chemicals report headache, nausea, fatigue, eye irritation, and chemical burns. It's essential to wear proper protection and respiratory masks when working both on the rig and in the refinery.

Oil workers can also be killed in fires and explosions, as oil is filled with highly combustible gasses. These accidents can happen with little warning, and are hard to prevent (though they are relatively rare). Employers must have a proper fire prevention plan in place, and take every precaution necessary to avoid a tragedy.

5.3 illness

Illness: is a feeling, an experience of unhealthy which is entirely personal, interior to the person of the patient. Often it accompanies disease, but the disease may be undeclared, as in the early stages of cancer or tuberculosis or diabetes. Sometimes illness exists where no disease can be found. Traditional medical education has made the deafening silence of illness in the absence of disease unbearable to the clinician.

5.4 Workers illness:

Workers illnesses are diseases mostly infects small age population known as children, infants and neonates.

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5.5 Symptoms of Illness

A child should be checked and observed for illness throughout the day.

- ✓ Severe coughing – child gets red or blue in the face (makes high-pitched croupy or whooping sounds after he coughs)
- ✓ Breathing trouble – especially important in an infant under six months old
- ✓ Yellowish skin or eyes
- ✓ Pinkeye (tears, redness of eyelid lining, irritation, followed by swelling and discharge of pus)
- ✓ Unusual spots or rashes
- ✓ Infected skin patch(s) – crusty bright yellow, dry, or gummy areas of skin
- ✓ Feverish
- ✓ Unusual behavior – cranky, less active than usual, cries more, looks unwell
- ✓ Frequent scratching of scalp or skin
- ✓ Gray or white bowel movement
- ✓ Unusually dark, tea-colored urine
- ✓ Sore throat or trouble swallowing
- ✓ Headache
- ✓ Vomiting
- ✓ Loss of appetite



Self-Check – 5	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Write the main injuries aspects? (5 points)
2. ----- is a feeling, an experience of unhealthy which is entirely personal, interior to the person of the patient. (10 points)

Note: Satisfactory rating - 5 points Unsatisfactory - below 5 points
 You can ask you teacher for the copy of the correct answers.



LG #11	LO2: Apply first aid procedures
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Instruction sheet

This learning guide is developed to provide you the necessary information regarding the following **content coverage** and topics:

- Providing information and adopting a communication style
- Preparing resources and equipment
- Responding to the casualty in
- Determining and explaining first aid procedures
- Applying first aid management
- Ethiopian Resuscitation Council (ERC) Guidelines
- Providing and establishing first aid management and principles
- Seeking first aid assistance
- Manufacturer/supplier's instructions
- Local policies and procedures
- Operating first aid equipment
- Contextualisation of specific requirements
- Using a safe manual handling techniques
- Monitoring casualty's condition
- Finalizing casualty management
- Vital signs

This guide will also assist you to attain the learning outcomes stated in the cover page.

Specifically, upon completion of this learning guide, **you will be able to:**

- Provide information and adopting a communication style
- Prepare resources and equipment
- Respond to the casualty in
- Determine and explaining first aid procedures



- Apply first aid management
- Ethiopian Resuscitation Council (ERC) Guidelines
- Provide and establish first aid management and principles
- Seek first aid assistance
- Manufacturer/supplier's instructions
- Local policies and procedures
- Operate first aid equipment
- Contextualisation of specific requirements
- Use a safe manual handling techniques
- Monitor casualty's condition
- Finalize casualty management
- Vital signs

Learning Instructions:

1. Read the specific objectives of this Learning Guide.
2. Follow the instructions described below.
3. Read the information written in the information Sheets
4. Accomplish the Self-checks
5. Perform Operation Sheets
6. Do the "LAP test"





Information Sheet 1 Providing information and adopting a communication style

1.1. communication

Communication is derived from 'communes' which means commonness or sharing. Communication is not just about talking to someone. It is an active process in which information (including ideas, specifications, goals, feelings, work orders, and so on) is exchanged among two or more people. is any verbal or non-verbal behavior which gives people an opportunity to send their thoughts and feelings, and to have these thoughts and feelings received by someone else. Communication needs to be clear and effective in order to achieve its aim. When it is not, all kinds of problems can result.

1.2. Ineffective Communication

If people working together are not able to communicate well, it can lead to confusion, unhappiness, frustration and annoyance. It can also mean that an organization's goals will not be met.

1.3. Effective Communication

When a sender elicits an intended response from his/her receiver, communication is effective. When a sender elicits intended response repeatedly, he/she is not only an effective communicator but also a successful and influential communicator.

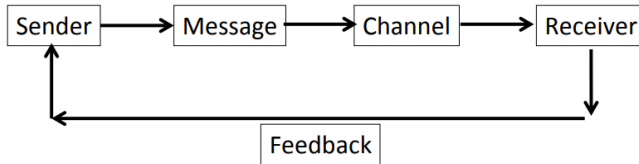
1.4. Elements of Communication

- Listening
- Seeking clarification
- Body language
- Blocking and barriers
- General attitude



Communication Process

SMCR Model



- **Sender must know:**

- ✓ Objectives
- ✓ Audience
- ✓ Interests & needs

- **Receiver must know:**

- ✓ Single person or Group of people
- ✓ Controlled audience
- ✓ Uncontrolled audience

- **Message must be:**

- ✓ In line with the objective(s)
- ✓ Meaningful
- ✓ Based on felt needs
- ✓ Clear and understandable
- ✓ Specific and accurate
- ✓ Timely and adequate
- ✓ Fitting the audience
- ✓ Culturally and socially acceptable

- **Channel**

- ✓ Interpersonal communication

- ✓ Message
- ✓ Channels of communication
- ✓ Limitations
- ✓ Mass media
- ✓ Traditional or folk media

- **Feedback**

- ✓ Flow of information from the audience to sender
- ✓ Opportunity to the sender to modify his message

1.5. Types of Communication channel.

The types of communication channels are grouped into three main groups: formal, informal and unofficial. A formal communication channel transmits organizational information, such as goals or policies and procedures. Messages in a formal communication channel follow a chain of command.



Self-Check -1	Written Test
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Directions: Answer all the questions listed below. Use the Answer sheet provided in the Next page (Each 1pt)

1. What a communication mean.
2. List materials used for communication.
3. Write 5 elements of communication.
4. Write the difference between effective and non- effective communications.
5. List at least 6 care givers tips of communication used to interact more effectively in home care.

Note: Satisfactory rating : 5 points

Unsatisfactory :- below 5 points

You can ask you teacher for the copy of the correct answers.

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Information Sheet 2 Preparing resources and equipment

2.1 The meaning of key terms

First aid is the immediate treatment or care given to a person suffering from an injury or illness until more advanced care is provided or the person recovers.

First aider is a person who has successfully completed a nationally accredited training course or an equivalent level of training that has given them the competencies required to administer first aid.

First aid equipment includes first aid kits and other equipment used to treat injuries and illnesses.

First aid facilities include first aid rooms, health centres, clean water supplies and other facilities needed for administering first aid.

High risk workplace means a workplace where workers are exposed to hazards that could result in serious injury or illness and would require first aid. Examples of workplaces that may be considered high risk are ones in which workers: „

- Use hazardous machinery (for example, mobile plant, chainsaws, power presses and lathes) „
- Use hazardous substances (for example, chemical manufacture, laboratories, horticulture, petrol stations and food manufacturing) „
- Are at risk of falls that could result in serious injury (for example, construction and stevedoring) „
- Carry out hazardous forms of work (for example, working in confined spaces, welding, demolition, electrical work and abrasive blasting) „
- Are exposed to the risk of physical violence (for example, working alone at night, cash handling or having customers who are frequently physically aggressive) „
- Work in or around extreme heat or cold (for example, foundries and prolonged outdoor work in extreme temperatures).
- **Low risk workplace** means a workplace where workers are not exposed to hazards that could result in serious injury or illness such as offices, shops or



libraries. Potential work related injuries and illnesses requiring first aid would be minor in nature.

2.2 First aid equipment

First aid equipment, facilities and first aiders must be accessible to workers whenever they work, including those working night shifts or overtime.

2.2.1 First aid kits

All workers must be able to access a first aid kit. This will require at least one first aid kit to be provided at their workplace. The first aid kit should provide basic equipment for administering first aid for injuries including: „

- Cuts, scratches, punctures, grazes and splinters „
- Muscular sprains and strains „
- Minor burns „
- Amputations and/or major bleeding wounds „
- Broken bones „ eye injuries „
- Shock.

The contents of first aid kits should be based on a risk assessment. For example, there may be higher risk of eye injuries and a need for additional eye pads in a workplace where: „

- Chemical liquids or powders are handled in open containers „
- Spraying, hosing or abrasive blasting operations are carried out „
- There is any possibility of flying particles causing eye injuries „
- There is a risk of splashing or spraying of infectious materials „
- Welding, cutting or machining operations are carried out.

2.2.2 Design of kits

First aid kits can be any size, shape or type to suit your workplace, but each kit should:

- Be large enough to contain all the necessary items „

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- Be immediately identifiable with a white cross on green background that is prominently displayed on the outside ,,
- Contain a list of the contents for that kit ,,
- Be made of material that will protect the contents from dust, moisture and contamination.



Self-Check – 2	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Write the merits of first aid equipment? (5 points)
2. Write down components of first aid kit? (5 points)
3. Mention first aid? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 3 Responding to the casualty in a culturally sensitive , respectful manner aware manner

3.1 Responding to the casualty in a culturally sensitive , respectful manner aware manner

When offering first aid, it is important to remember that the casualty you are about to assist may live by customs, traditions or values that may be different to your own. Be aware and be sensitive to their specific needs. For example, it would be more appropriate for a female first-aider to attend to the sprained ankle of a female casualty for many cultures. Sometimes it would not be respectful to remove clothing from a casualty who has suffered a burn. In this case leave the clothing and cool the burn underneath by using cool, running water over the clothing.

Following are some simple strategies for talking to a casualty:

- Speak slowly and clearly.
- Use short and simple sentences.
- Maintain normal volume.
- Use different words to express the same idea.
- Priorities and sequence your instructions.
- Avoid jargon.
- Respond to expressed emotions.

In dealing with a casualty be empathic, unbiased and non-judgmental. Do not think in stereotypes. Do not let your personal biases and opinions impact on the way you interact with the casualty, regardless of their race, culture, religion, gender, age, disability or even the way they look. If we treat some people differently based on any of the areas then we are being discriminative.



Self-Check – 3	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

- 1 Define environmental sustainability? (5pts)
- 2 Mention pillars of sustainability? (5 points)
- 3 Write ways of management for environmental issues? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 4 Determining and explaining first aid procedures

4.1 Introduction

This quick primer on common basic first aid procedures can help get you through a minor crisis, at least until the paramedics arrive or you can get to medical treatment.

4.2 Basic First Aid for Bleeding

Almost all bleeding can be controlled. Mild bleeding will usually stop on its own. If severe bleeding is not controlled, it may lead to shock and eventually death.



Figure 2 First Aid for Bleeding

Steps to take if you are faced with bleeding right now:

- I Cover the wound with gauze or a cloth.
- II Apply direct pressure to stop the blood flow.
- III Don't remove the cloth. Add more layers if needed. The cloth will help clots form to stop the flow.

4.3 Basic First Aid for Burns

The first step to treating a burn is to stop the burning process. Chemicals need to be cleaned off. Electricity needs to be turned off. Heat needs to be cooled down with running water. Sunburn victims need to be covered up or go inside. No matter what caused the burns or how bad they are, stopping the burn comes before treating the burn. The severity of a burn is based on depth and size.



Figure 3 First Aid for Burns

Take these first aid steps for Burns:

- I Flush the burned area with cool running water for several minutes. Do not use ice.
- II Apply a light gauze bandage.
- III Do not apply ointments, butter, or oily remedies to the burn.
- IV Take ibuprofen or acetaminophen for pain relief if necessary.
- V Do not break any blisters that may have formed.

4.4 Basic First Aid for Nosebleeds

Most of us have had a bloody nose at some time in our lives. It simply means bleeding from the inside of the nose due to trauma. The biggest cause of a nosebleed is digital trauma – otherwise known as picking it



Figure 4 First Aid for Nosebleeds



4.5 Basic First Aid for electrical hazard

The danger from an electrical shock depends on the type of current, how high the voltage is, how the current traveled through the body, the person's overall health and how quickly the person is treated. An electrical shock may cause burns, or it may leave no visible mark on the skin. In either case, an electrical current passing through the body can cause internal damage, cardiac arrest or other injury. Under certain circumstances, even a small amount of electricity can be fatal.

4.6 Basic First Aid for chemical hazard

There are some situations where the benefits of emergency oxygen outweigh the potential risks associated with maintaining and storing oxygen cylinders in the workplace. Emergency oxygen may be beneficial following exposure to chemicals that interfere with the body getting the necessary levels of oxygen to sustain life and health, including chemicals that:

- Displace oxygen in the air, reducing the amount of oxygen available for breathing (e.g., helium, argon, methane, carbon dioxide or nitrogen).
- Reduce the ability of blood to transport oxygen (e.g., carbon monoxide poisoning, or methemoglobinemia – presence of an oxidized form of hemoglobin in the blood that does not transport oxygen).
- Compromise the use of oxygen by body tissue, as with cyanide or hydrogen sulfide toxicity.
- Interfere with the ability of oxygen to cross through the lungs to the blood stream, as occurs with pulmonary edema, a potentially fatal accumulation of fluid in the lungs. Ammonia, phosgene and chlorine are examples of chemicals that can cause pulmonary edema.
- Provoke a severe asthma attack (e.g., toluene diisocyanate).

Additional training of first aid providers is required since basic first aid training courses do not include oxygen administration. First aid providers must be familiar with the laws that govern the use of oxygen administration in their workplace.

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4.7 HEAT BURNS

Heat burns from different sources, e.g. flame, friction, scalding or solar radiation, are generally treated in the same manner. This involves:

- Cool the burned area under cold water for 20 minutes.
- Gently remove any clothing and jewellery from the burned area. DO NOT try to remove any clothing that is sticking to it.
- If the area cannot be immersed (kept under water) – such as the face – you can use a towel, sheets or clothes that have been soaked in water. Change/rewet these regularly as they will absorb heat from the burn.
- Cover the burn with a sterile, non-stick dressing and loosely bandage in place. If this is not available or the burn covers a large area use a dry, clean sheet or other material that is not fluffy.
- Minimise shock.

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Self-Check – 4	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Mention and explain types of prevention? (5 points)
2. Discuss the benefits of prevention? (5 points)
3. Explain barriers of prevention? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points
 You can ask you teacher for the copy of the correct answers.





Information Sheet 5 Applying first aid management

5.1 The role of a first aider

If you think someone needs your help, these are the seven things you need to do as a first aider:

- Assess the situation quickly and calmly:
- Safety: Are you or they in any danger? Is it safe for you to go up to them?
- Scene: What caused the accident or situation? How many casualties are there?
- Situation: What's happened? How many people are involved and how old are they? What do you think the main injuries could be?
- **Protect yourself and them from any danger:**
 - ✓ Always protect yourself first - never put yourself at risk
 - ✓ Only move them to safety if leaving them would cause them more harm
 - ✓ If you can't make an area safe, call for emergency help
 - ✓ Prevent infection between you and them:
 - ✓ Wash your hands or use alcohol gel
 - ✓ Wear disposable gloves
 - ✓ Don't touch an open wound without gloves on
 - ✓ Don't breathe, cough or sneeze over a wound or a casualty
 - ✓ Comfort and reassure:
 - ✓ Stay calm and take charge of the situation
 - ✓ Introduce yourself to them to help gain their trust
 - ✓ Explain what's happening and why
 - ✓ Say what you're going to do before you do it



- **Assess the casualty:**
 - ✓ If there's more than one casualty, help those with life-threatening conditions first .Start with the Primary Survey and deal with any life-threatening conditions Then, if you've dealt with these successfully, move on to the Secondary Survey
- **Give first aid treatment:**
 - ✓ Priorities the most life-threatening conditions
 - ✓ Then move on to less serious ones
 - ✓ Get help from others if possible
- **Arrange for the right kind of help:**
 - ✓ Call for an ambulance if you think it's serious
 - ✓ Take or send them to hospital if it's a serious condition but is unlikely to get worse
 - ✓ For a less serious condition call for medical advice
 - ✓ Suggest they see their doctor if they're concerned about a less serious condition
 - ✓ Advise them to go home to rest, but to seek help if they feel worse
 - ✓ Stay with them until you can leave them in the right care.

- **Cold related injuries**

Cold-related injuries, such as hypothermia and frostbite, occur when low temperatures damage the body. Frostbite is a common injury caused by exposure to extreme cold or by contact with extremely cold objects (especially those made of metal). It occurs when tissue temperature falls below the freezing point (0°C/32°F), or when blood flow is obstructed. In mild cases, the symptoms include inflammation of the skin in patches accompanied by slight pain. In severe cases, there could be tissue damage without pain, or there could be burning or prickling sensations resulting in blisters.

Toes, fingers, ears and nose are at greatest risk because these areas do not have major muscles to produce heat.



- **First aid for frostbite includes:**

- ✓ If possible, move the victim to a warm area.
- ✓ Gently loosen or remove constricting clothing or jewellery that may restrict circulation.
- ✓ Loosely cover the affected area with a sterile dressing. Place some gauze between fingers and toes to absorb moisture and prevent them from sticking together.
- ✓ Quickly transport the victim to an emergency care facility.
- ✓ Do not attempt to rewarm the affected area on site (but do try to stop the area from becoming any colder) - without the proper facilities tissue that has been warmed may refreeze and cause more damage.
- ✓ Do not rub area or apply dry heat.
- ✓ Do not allow the victim to drink alcohol or smoke.



Self-check 5	Written test
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Instruction :- Answer the following questions correctly .

- 1 Write the rolls of first aider/caregiver during first aid management ?

Note: Satisfactory rating :- 5 points Unsatisfactory :- below 5 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 6 Ethiopian Resuscitation Council (ERC) Guidelines

6.1 Introduction

First aid interventions seek to “preserve life, alleviate suffering, prevent further ill. Below you will find some basic guidelines to help you help yourself and others during a medical crisis.

Below you will find some basic guidelines to help you help yourself and others during a medical crisis. The information presented here is to be used as an introduction to First Aid. It is not intended as a substitute for professional medical advice and care, treatment by trained emergency personnel, or first aid and CPR training. If you are in a life- or limb-threatening emergency, call for medical help immediately.

- **First aid guide lines**

- ✓ Remain calm, be aware of your surroundings, and closely evaluate the scene to protect yourself and others from further injury.
- ✓ Do not move a critically injured person unless instructed by emergency medical professionals.
- ✓ Do not try to drive someone who is critically ill or injured to a hospital unless there is no way to summon emergency help.
- ✓ Call an emergency center or ask someone else to call:
- ✓ If you think there is a medical emergency,
- ✓ If the crisis could get worse left untreated or not treated properly.
- ✓ Listen carefully to the emergency dispatcher's questions. Answer them calmly and quickly.
- ✓ Remain on the line until the dispatcher tells you it's okay to hang up.
- ✓ Ask someone to wait outside to meet emergency personnel if it is safe to do so.
- ✓ Paramedics may want to know a brief summary of the circumstances that caused the emergency. Remain calm and cooperative as they gather information.



NOTE: Information here and in the links within this section is not a substitute for professional medical advice and care, treatment by trained emergency personnel, or first aid and CPR training. If you believe a life- or limb-threatening emergency exists, call for medical help immediately.

6.2 Emergency warning signs

Look for these emergency warning signs that indicate a person could suffer major harm or die without immediate care. Call an emergency center immediately if one or more of these signs are present.

- ✓ Prolonged chest pain (lasting two or more minutes)
- ✓ Uncontrolled bleeding
- ✓ Difficulty breathing or shortness of breath
- ✓ Choking or vomiting blood
- ✓ Severe pain
- ✓ A weak or nonexistent heartbeat when checking for a pulse on the neck alongside the Adam's apple
- ✓ Sudden weakness, change in vision, or dizziness
- ✓ Persistent vomiting or diarrhea
- ✓ Confusion or difficulty arousing

6.3 Legislative requirements in first aid

The Health and Safety (First-Aid) Regulations require employers to provide adequate and appropriate equipment, facilities and personnel to ensure their employees receive immediate attention if they are injured or taken ill at work. Legislative Requirements” means, as to any Person, any requirement under a Permit and any Governmental Rule, in each case applicable to or binding upon such Person or any of its properties or to which such Person or any of its properties is subject

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- **What are the legal requirements for health and safety in the workplace?**

This Act places a legal duty on employers to ensure, so far as reasonably practicable, the health, safety, and welfare of employees, and to ensure that employees and others are kept safe. Under the Act you have an obligation to ensure any potential risk of work-related violence is eliminated or controlled.

- **What legislation covers confidentiality?**

Confidentiality of information is a key part of maintaining dignity for those using health and social care services. The Data Protection Act(DPA) requires public bodies and their data controllers to comply with a range of data protection principles

6.4 The responsibilities of employer

- Employers are legally required to arrange for the immediate care of any staff who have an accident or become ill while they are at work.
- They assess their first aid needs based on the hazards and risks involved in their workplace

6.5 Employers' legal duties

- Adequate and appropriate equipment, facilities and personnel to ensure their employees receive immediate attention if they are injured or taken ill at work.

6.6 General requirements for workplaces

- There are interpretive guidelines produced to explain what each **requirement** may mean for your workplace, your work, or others at your workplace. The interpretive guidelines cover:
 - ✓ Workplaces and workplace facilities
 - ✓ Providing information, instruction, training and supervision for workers
 - ✓ Personal protective equipment (PPE)
 - ✓ Monitoring worker exposure
 - ✓ Monitoring worker health, Workplace first aid and Workplace emergency plans



Self-Check – 6	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

- 1 Discuss the guideline of Ethiopian resuscitation council? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 7 Providing and establishing first aid management and principles

7.1 Introduction

First aid is an important part of everyday life at home, industrial work, at play. Everyone should learn first aid and be willing to administer basic care until emergency assistance arrives. Not every incident requiring first aid is a life-and-death situation. First aid knowledge is commonly used to manage minor injuries at home or work.

7.2 The purpose of basic principles of first aid is to:

- **Preserve life** – This includes the life of the casualty, bystander and rescuer.
- **Protect the casualty from further harm** – Ensure the scene is safe.
- **Provide pain relief** – This could include the use of ice packs or simply applying a sling.
- **Prevent the injury or illness from becoming worse** – Ensure the treatment you provide does not make the condition worse.
- **Provide reassurance.**

7.3 principles

Basic principles of first aid include:

- ✓ Safe response to emergencies for the benefit of casualties, bystanders and rescuers
- ✓ Securing the emergency site to reduce further harm to the casualty
- ✓ Using appropriate first aid procedures and techniques
- ✓ Safely moving the casualty, minimizing pain and helping stabilize the condition
- ✓ Providing reassurance and guidance to the casualty
- ✓ Communication with bystanders and emergency services personnel

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Self-Check – 7	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

1. Define Preserve life? (5pts)
2. Provide pain relief? (5 points)
3. Discuss basic principles of first aid? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 8 Seeking first aid assistance

8.1 Introduction

If you do find yourself in a situation where the casualty needs urgent first aid or medical attention, the sooner you raise the alarm the sooner help will arrive. Do not leave the casualty. Call for help. Depending on the workplace set-up, you may be able to call for help, or you may have to use an intercom or telephone. Find out your workplace procedures regarding getting help. In most workplaces there will be enough staff working nearby that you can quite easily raise the alarm. You may be able to call out to the person closest to you to either get the first aid kit, the supervisor or any qualified first aider, depending on whom you are working with and where the first aiders are.

In all first aid situations, there can be a need to call on others who are not professional medical people to help you provide the basic first aid necessary. In addition to volunteers, assistance at the scene may be sought from other staff and colleagues, members of the public, friends or family members of casualty.

When seeking first aid assistance from others, you should never be afraid to ask for help. Most people are prepared to help even if they do not know what to do. They will do what you ask them to do. A vital thing they can do is to confirm professional medical help is on the way

8.2 seek assistance to others

They cannot always handle the situation all by you, seeking assistance from others is a good idea because they can be asked to:

- Give information about causes of the incident and injury.
- Provide directions to emergency services to help them get quickly to the scene
- Contact friends or relatives of the casualty, so they can attend and perhaps provide history about the casualty
- Help move the casualty and protect the casualty from further injury

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- Communicate with emergency services to provide them with updates
- Communicate with emergency services to obtain advice
- Record verbal information you give them – vital signs and condition of casualty
- Obtain first aid requisites for you including fetching bandages or slings from the first aid room/main office.

If one person refuses to help, ask someone else. Never assume just because one person has refused, everyone will refuse.

Always identify potential helpers as soon as possible when you arrive on the scene.

Ask questions such as:

- “Does anyone have first aid experience or qualifications?”
- “Can anyone here help me if I need help?”
- “Does anyone have a cell phone?”

It is best to have people ready to help and not need to use them than it is to not have identified possible helpers, and then find you do need them. When you have identified helpers, thank them. Ask them to stand where you can communicate readily with them. Then, give them a job – get them to hold something, take notes, control the crowd or provide shade.

Obtaining assistance for others must be done in a ‘timely manner’. This means you must do it as soon as you identify a need for help from others. For example, you may be dealing quite competently with a casualty but suddenly find changes in the environment or condition of the casualty. As soon as this is identified, action must be taken to obtain help from others immediately. Do whatever is needed – call out, ask bystanders or use your cell phone to call for help.



Self-Check – 8	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Mention and explain types of prevention? (5 points)
2. Discuss when seeking first aid assistance from others, (5 points)
3. Explain barriers of prevention? (5 points)



Information Sheet 9 Manufacturer/supplier's instructions

9.1 Manufacturer instructions

The manufacturing sector is considered high-risk due to the operation of heavy machinery. Employers have a duty of care to protect their staff by adhering to the Health & Safety (First Aid) Health and Safety (First-Aid) Regulations of 1981.

9.2 The benefits of learning first aid

Far too often individuals have lost their lives because they didn't receive medical attention in time. Qualified first aiders will be able to recognise and treat a number of symptoms, taking swift and appropriate action so that the casualty has the best chance of recovery possible. First aid treatment stops minor accidents from becoming major incidents. From Fire Safety to Manual Handling, Food Safety to learning, we provide a suite of courses that can improve the safety of your workplace.

9.3 Food industry first aid kits

First Aid requirements for businesses that handle food be they small foodservice businesses such as Cafes and Restaurants, Grocery stores of all sizes and large-scale food-processing industries such as edible oil, frozen-food processors and factory kitchens turning ingredients into packaged foodstuffs from tinned foods to pre-prepared salads.

Aero healthcare has food standards approved first aid kits – all our food-grade first aid kit contents comply with new ISO 19001 and OSHA 1910.151(b) regulations – in tough metal cabinets sized to suit your clients needs. The cabinets can be carried or wall mounted and is key-lockable for security. All our cabinets are available with private labeling to promote your business or your clients. Our Food Industry kits contain Aero Healthcare’s famous metal detectable and waterproof adhesive bandages and tape that are colored blue – making them easy to identify as blue is the only color which does not naturally occur in food.

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These First Aid Kits are the ideal solution for any business where food handling takes place. All kit contents are refilled with our *Instant Restock* system: you can refill and service your client's kits quickly with a single order of refill pouches designed to fit into each cabinet. For a free quote and for more details on the contents and regulations met, select a First Aid Kit from the list below

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Self-Check – 9	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. -----Is considered high-risk due to the operation of heavy machinery? (5 points)
2. Why apply food industry first aid kits? (5 points)

Note: Satisfactory rating – 5 points Unsatisfactory - below 5 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 10 local policies and procedures

10.1 Work place policy

Work place Policies and Procedures are a major part of protecting the safety, health and welfare of people engaged in work or employment.

- Workplace safety policies – The workplace can be dangerous. Having effective workplace safety policies in place provides protection for both the company and the employees.
- These policies cannot just mitigate the damage of lawsuits but provide guidance to employees which act as preventative measures; stopping incidents occurring in the first place.
- Policy: The overall guideline. This would be the actual working document.
 - ✓ This is the specifics of what needs to be done and how the employer will achieves its goal.
 - ✓ Safe work practices are generally written methods that define how tasks are performed while minimizing risks to people, equipment, materials, environment, and processes. OHS Policies and Procedures are a major part of protecting the safety, health and welfare of people engaged in work or employment.
 - ✓ Employers are required by law to provide a “safe system of work”. What that means is the employer needs a method of communicating, duplicating and implementing safe work environment. This begins with OHS Policy.
- An OHS Policy Manual would typically include;
 - ✓ Drugs and Alcohol, sexual harassment policy,
 - ✓ Environmental Policy
 - ✓ First Aid Policy
 - ✓ Manual Handling
 - ✓ Personal Protective Equipment
 - ✓ Privacy
 - ✓ Smoke Free Workplace
 - ✓ Stress and Fatigue Policy
 - ✓ Falls Prevention Policy and Procedure



- ✓ Chemical Emergency Management Policy etc.

Employer (institutes) can prepare this policy as part of its commitment to a safer and more supportive organizational climate and to the prevention and reduction of the incidence and effects of domestic violence, sexual violence, and stalking at the workplace.

10.2 Lack of OSH protection for domestic workers (care givers) the following events may occur

- Domestic violence,
- Sexual violence, and
- Stalking are workplace issues even if incidents occur elsewhere
- Domestic violence,
- Sexual violence,
- Stalking cross economic,
- Educational,
- Cultural,
- Age,
- Gender,
- Racial,
- Religious lines and occur in a wide variety of contexts.

Therefore, the employer will take every appropriate measure to prevent and/or address such violence

10.3 First Aid Policy

Purpose and Scope

The purpose of first aid policy is to guide the provision of first aid to people suffering injury or illness. First aid services are an important element of work health and safety, facilitating first initial treatment for: -

- Injuries that may occur in the workplace (including home); and
- Acute personal sickness that may impact on staff members, consumers or others while at premises.

10.4 Policy Implementation

- **Ensures effective implementation of first aid through: -**
 - ✓ Staff having access to policies and procedures relating to first aid
 - ✓ Provision of tailored training to persons with specific tasks

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- ✓ Record of first aid activities, including first aid training provided and undertaken, information provided to consumers and use of PPE
- ✓ Mechanisms for monitoring compliance with first aid.

- **Personal Protection**

First aiders are to assume that all blood and other body fluids are infectious and are aware of standard precautions in relation to managing blood and other body fluids, including wearing gloves when administering first aid. Cross infection is managed while providing first aid by wearing gloves and washing hands with soap and water:

- ✓ Before and after contact with an ill or injured person
- ✓ After contact with blood or and/or other body fluids or contaminated items
- ✓ When protective gloves are removed

10.5 Work place procedures

Safe Work Procedures are documented procedures for performing tasks. The purpose of a safe work procedure is to reduce the risk to health and safety in the workplace and reduce the likelihood of an injury by ensuring that employees know how to work safely when carrying out the tasks involved in their jobs.

- **Review associated legislative requirements:**

Some task/activities are governed by legislative requirements. These must be considered when developing a safe work procedure to ensure any legal requirements are included. Record the sequence of basic job steps: write down the steps that make up the task/activity.

- **Record potential hazards of each step:**

- ✓ Next to each step identify what may have potential to cause injury or disease
- ✓ Identify ways of eliminating and controlling the hazards
- ✓ list the measures that need to be put in place to eliminate or control any likely risk.
- ✓ Test the procedure: Observe staff/student following the safe work procedure



- ✓ Obtain approval: Before the safe work procedure can be used it must be approved by each approver nominated.
- ✓ Monitor and review: Make sure the activity is supervised to ensure the documented process is being followed



Self-Check – 10	Written test
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Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page:

1. What are the events may occur due to lack of OSH protection for domestic workers(Home caregivers) ?
 - a. _____
 - b. _____
 - c. _____

2. When caregivers to wear gloves and washing hands with soap and water during their activities ?
 - a. _____
 - b. _____
 - c. _____

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 11 Operating first aid equipment

11.1 Introduction

First-aid kit should be tailored to the specific medical needs of household, but there are some items every first-aid kit should contain, such as a thermometer (see list). Local drug store should have all the ingredients need for a basic first-aid kit, and probably sells pre-assembled kits as well in case they don't want to start from scratch." Industry wants to make sure you are looking at a kit that has good ingredients. Not every pre-made kit has good things that are really helpful," Bradley says. The contents of your first-aid kit will vary by your needs but should have all of these basics:

- A first-aid manual: So you'll know how to use the contents of your kit.
- Adhesive bandages of assorted sizes: To cover minor cuts and scrapes.
- Triangular bandages: To wrap injuries and make an arm sling.
- Rolls of gauze and two-inch and four-inch pads: To dress cuts and scrapes.
- Sterile scissors: To cut tape, gauze, clothes or other needs.
- Adhesive tape: To hold gauze in place when dressing large wounds.
- Latex-free gloves: To reduce the risk of infection when treating wounds.
- Instant cold compress: For sprains, aches and sore joints.
- Thermometer: To monitor your temperature when you feel ill.
- Aspirin: In case of chest pain. But read the warnings, especially for children.

11.2 Essentials of first aid

- Adhesive bandages of various sizes
- Triple-antibiotic ointment
- Sunscreen
- Lip salve
- Antiseptic hand wipes or soap
- Moleskin for blisters
- Dimenhydrinate (Dramamine) or meclizine for nausea
- Ibuprofen or acetaminophen for pain relief

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- Diphenhydramine or fexofenadine for allergies
- Moist towelettes for cleaning hands when restrooms aren't available



Figure 5 Workplace first aid kit



Self-Check – 11	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

1. Define operate first aid? (5pts)
2. Mention essentiality of first aid? (5 points)
3. Write the content of first aid? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 12 Contextualization of specific requirements
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12.1 Introduction

There is nothing specified in legislation (i.e. either the Act or the regulations) regarding what first aid facilities an employer must provide. However, there is guidance to be found in the Compliance Code for first aid in the workplace.

12.2 Five major Areas of First Aid

- **Major injury or trauma:** Scissors, gauze pads, tourniquet, mouth barrier ,
- **Minor injury (such as a cut or scrape):** Adhesive bandages, antiseptic spray, cold compress
- **Eye care:** Eyewash stations, refill solution
- **Employee Comfort:** Cold relief, allergy relief, headache relief, antacids
- **Burn Care:** Burn dressing, burn spray, burn cream

12.3 Occupational standard hazard analyses (OSHA)

Occupational standard hazard analyses (OSHA) does not require specific first aid kits for general industry, but states in 29 CFR 1910.151(b), “Adequate first aid supplies shall be readily available.” All industries are required to comply with OSHA regardless of the type of work performed by employees; however, the hazards and related first aid required would be different for offices (low-risk environment) than, for example, steel mills (high-risk environment).

In other words, your first aid program must correspond to the hazards which can be reasonably expected to occur in the workplace. Thus, you should evaluate the potential work-related hazards and provide for first aid accordingly.

Below are some OSHA First Aid best practices:

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- Conduct a risk assessment and design a first aid program specific to your worksite(s)
- Estimate Emergency Medical Response times for all locations and all times of day and night
- Put policies and procedures in writing, and communicate to all employees on a regular basis
- Address first aid training needs. First-aid courses should be individualized to the needs of the workplace. First-aid training should be repeated periodically to maintain and update knowledge and skills. Outdated training and reference materials should be replaced or removed.
- Designate a first aid leader. Give a specific person the responsibility for choosing the types and amounts of first-aid supplies and for maintaining these supplies.
- Supplies should reflect the kinds of injuries that occur at your workplace
- Supplies must be stored in an area where they are readily available for emergency access.
- Review the first-aid program periodically to determine if it continues to address the needs of the workplace.
- Monitor changes in workplace safety, health hazards, and worker schedules. Training, supplies, equipment and first-aid policies should be added or modified to account for any of these changes at your company.
- Consider an automated external defibrillator (AED) when selecting first-aid supplies and equipment.
- Consult with the local fire and rescue service or emergency medical professionals may be beneficial.



Table 1 First Aid Cabinet Requirement

Quantity	Item	Size
16	Adhesive bandage	1x3
1	Adhesive tape	2.5 yds
10	Antibiotic treatment application	1/57oz
10	Antiseptic application	1/57oz
1	Breathing barrier	
1	Burn dressing, gel soaked	4x4
10	Burn treatment	1/32 oz
1	Cold pack	
2	Eye covering	
1	Eye wash	1oz
1	First aid Guide	
6	Hand sanitizer	9 g
2	Pair exam glove	
1	Roller bandage	2x4 yds
1	Scissors	
2	Sterile pad	3x3
2	Trauma pad	5x9
1	Triangular bandage	40x40x56



Self-Check – 12	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Mention five major Areas of First Aid ? (5 points)
2. Discuss the Occupational standard hazard analyses (OSHA)



Information Sheet 13 Using a safe manual handling techniques

13.1 Introduction

Manual handling is an activity which requires the use of force exerted by a person to lift, lower, pull, push, move, carry, restrain or hold any object, person or even animal. It is an activity that is required of all people both at home and at work.

Manual handling covers a wide range of activities including: lifting, pushing, and pulling, holding, restraining, throwing and carrying. It includes repetitive tasks such as packing, typing, assembling, cleaning and sorting, using hand-tools, operating machinery and equipment, and handling.

The backbone is particularly vulnerable to manual handling injuries. Safety suggestions include controlling risk factors in the workplace, in addition to personal controls:

- Lift and carry heavy loads correctly by keeping the load close to the body and lifting with the thigh muscles.
- Never attempt to lift or carry loads if you think they are too heavy.
- Pushing a load (using your body weight to assist) will be less stressful on your body than pulling a load.
- Use mechanical aids or get help to lift or carry a heavy load whenever possible.
- Organize the work area to reduce the amount of bending, twisting and stretching required.
- Take frequent breaks.
- Cool down after heavy work with gentle, sustained stretches.
- Improve your fitness – exercise regularly to strengthen muscles and ligaments, and reduce excess body fat.
- Warm up cold muscles with gentle stretches before engaging in any manual work.



13.2 Moving a person without a spinal injury

- Use the human crutch method.
- ✓ If the person is conscious and can move on their own, this method might be the most effective. It can be used if the person has an injury to only one leg.
- ✓ Crouch with your knees bent and back straight next to the injured person on the side of the injury. Have the person sit up and wrap their arm over your shoulder. Slowly stand, allowing the injured person to support themselves with their good leg. You will support their weight on the side with the injury. Hold their hand around your shoulders with the hand furthest from them. Put your other hand around their waist.
- ✓ Help them balance as they hop to safety. This enables them to minimize the amount of weight that must go on the injured leg.

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Self-Check – 13	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Mention and explain manual handling? (5 points)
2. Discuss moving a person without a spinal injury ? (5 points)
3. Explain barriers of manual handling? (5 points)



Information Sheet 14 Monitoring casualty's condition

14.1 Monitoring casualty's condition

While you are treating the casualty you need to monitor their condition. You should also keep a record of any changes that you see as well as what first aid you have provided. This could include medication taken, how long a person is unconscious, use of CPR, first aid procedures, breathing and circulation problems. Keep monitoring the casualty's vital signs including:

- Body temperature.
- Pulse (or heart rate).
- Blood pressure.
- Respiratory rate

It is important to monitor and record these vital signs as they can change rapidly with the casualty going in and out of consciousness. The casualty's condition can get better or worse according to the treatment you are providing. If there are no life signs, you need to perform CPR. If you are in a remote area or unusual situation, you might be able to move the casualty to hospital yourself, as long as they are not in a life-threatening situation. Usually, though, a casualty should not be moved as this could make their condition worse or cause more pain.

Why should You monitor your blood pressure at home?

For people with hypertension, home monitoring allows your doctor to monitor how much your blood pressure changes during the day, and from day to day. This may also help your doctor determine how effectively your blood pressure medication is working.



Self-Check – 14	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

- 1 Monitoring casualty's condition ? (5 points)
- 2 Why should monitor your blood pressure at home? (5 points)

Note: Satisfactory rating – 5 points Unsatisfactory - below 5 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 15 Finalizing casualty management

15.1 Introduction

To be a good first aider you need to study, learn and be trained in first aid management. Its need to be able to recognize and manage life-threatening illnesses and injuries like loss of consciousness, heart conditions, allergies, bleeding, bites and many more. This information will be available in your organization’s emergency and first aid policies and procedures.

15.2 Finalize casualty management

On completion of any casualty management scenario you might be required to:

- Clean up the immediate area
- Take immediate action to prevent recurrence of the accident
- Complete workplace illness/injury forms
- Seek opportunities to debrief with a work colleague, friend, family member or professional counselor
- Restock any first aid kits/supplies.



Self-Check – 15	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Write the merits of taking corrective actions? (5 points)
2. Write down steps of clean up for making corrective action? (5 points)
3. Mention corrective action facilities? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 16 Vital signs

16.1 What are vital signs?

- **Vital signs:** are measurements of the body's most basic functions. The four main vital signs routinely monitored by medical professionals and health care providers include the following:

- ✓ Body temperature
- ✓ Pulse rate
- ✓ Respiration rate (rate of breathing)
- ✓ Consciousness

Vital signs are useful in detecting or monitoring medical problems. Vital signs can be measured in a medical setting, at home, at the site of a medical emergency, or elsewhere.

- **Body temperature:**

The normal body temperature of a person varies depending on gender, recent activity, food and fluid consumption, time of day, and, in women, the stage of the menstrual cycle. Normal body temperature can range from 97.8 degrees F (or Fahrenheit, equivalent to 36.5 degrees C, or Celsius) to 99 degrees F (37.2 degrees C) for a healthy adult. A person's body temperature can be taken in any of:- Orally, Rectally, Axillary, By ear, By skin.

- **Pulse rate**

The pulse rate is a measurement of the heart rate, or the number of times the heart beats per minute. Taking a pulse not only measures the heart rate, but also can indicate the following:

- ✓ Heart rhythm
- ✓ Strength of the pulse

- **How to check your pulse**

As the heart forces blood through the arteries, you feel the beats by firmly pressing on the arteries, which are located close to the surface of the skin at certain points of the

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body. The pulse can be found on the side of the neck, on the inside of the elbow, or at the wrist. For most people, it is easiest to take the pulse at the wrist. If you use the lower neck, be sure not to press too hard, and never press on the pulses on both sides of the lower neck at the same time to prevent blocking blood flow to the brain. When taking your pulse:



Fig:- 3.1 :- How to take the pulse rate without any equipment.

- **Respiration rate**

The respiration rate is the number of breaths a person takes per minute. The rate is usually measured when a person is at rest and simply involves counting the number of breaths for one minute by counting how many times the chest rises. Respiration rates may increase with fever, illness, and other medical conditions. When checking respiration, it is important to also note whether a person has any difficulty breathing.

Normal respiration rates for an adult person at rest range from 12 to 16 breaths per minute.



- **Blood pressure**

Blood pressure is the force of the blood pushing against the artery walls during contraction and relaxation of the heart. Each time the heart beats, it pumps blood into the arteries, resulting in the highest blood pressure as the heart contracts. When the heart relaxes, the blood pressure falls.

- Blood pressure is categorized as normal, elevated, or stage 1 or stage 2 high blood pressure:

- ✓ **Normal** blood pressure is systolic of less than 120 and diastolic of less than 80 (120/80)
- ✓ **Elevated** blood pressure is systolic of 120 to 129 **and** diastolic less than 80
- ✓ **Stage 1** high blood pressure is systolic is 130 to 139 **or** diastolic between 80 to 89
- ✓ **Stage 2** high blood pressure is when systolic is 140 or higher **or** the diastolic is 90 or higher

- **What special equipment is needed to measure blood pressure?**

Either an aneroid monitor, which has a dial gauge and is read by looking at a pointer, or a digital monitor, in which the blood pressure reading flashes on a small screen, can be used to measure blood pressure.



Self-Check – 16	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

1. Define vital signs? (5pts)
2. How to check your pulse
3. What special equipment is needed to measure blood pressure? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers



Operation Sheet 1

Techniques of providing bleeding control

Steps first aid measures for bleeding control

1. Wash your hands to avoid infection and put on gloves
2. Lay on the injured person down and cover the person to prevent loss of body heat.
3. Remove any obvious dirt or debris from the wound.
4. Apply pressure directly on the wound until the bleeding stops
5. Squeeze a main artery if necessary
6. Immobilize the injured body part once the bleeding has stopped
7. If continuous pressure hasn't stopped the bleeding and bleeding is extremely severe, a tourniquet may be used until medical help arrives or bleeding is controllable

Operation Sheet 2

Techniques of providing nasal bleeding control

Steps first aid measures for nasal bleeding control

1. Lean forward, not back.
2. Pinch the nose just below the bridge. Don't pinch the nostrils closed by pinching lower.
3. Check after five minutes to see if bleeding has stopped. If not, continue pinching and check after another 10 minutes.
4. You can also apply a cold pack to the bridge of the nose while pinching

Operation Sheet 3

Techniques of providing fracture

Steps first aid measures for fracture

1. Wash hand and Wear gloves
2. Don't move the person except if necessary
3. Stop any bleeding
4. Immobilize the injured area

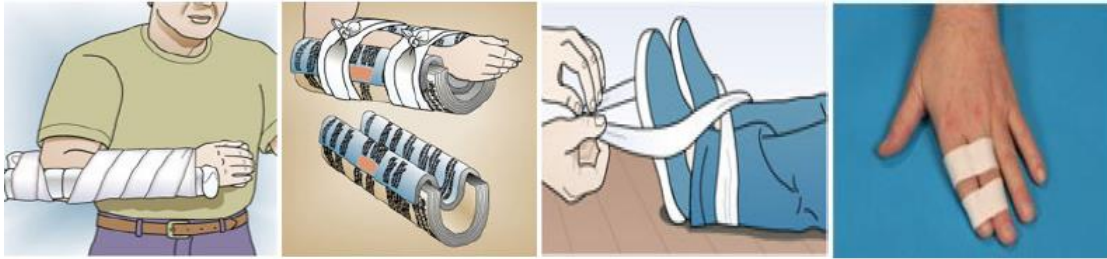


Figure 6 Applying of splint

5. Apply ice packs to limit swelling and help relieve pain until emergency personnel arrive



Figure 7 Treat for shock

Operation Sheet 4	Techniques of providing dislocation
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Steps first aid measures for dislocation

1. For dislocations, splint and provide care as you would for fracture.
2. For sprains, use RICE procedure - R=rest, I=Ice, S=compression and E=elevation
3. In both cases seek medical care (Referral).



Figure 8 Treat of dislocation

Operation Sheet 5	Techniques of providing minor Burn
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A. Steps first aid measures for minor burn

1. Flush the burned area with cool running water for several minutes. Do not use ice.
2. Apply a light gauze bandage.
3. Do not apply ointments, butter, or oily remedies to the burn.
4. Take ibuprofen or acetaminophen for pain relief if necessary.
5. Do not break any blisters that may have formed

Operation Sheet 5	Techniques of providing minor Burn
--------------------------	---

B. Steps first aid measures for major (sever) Burn

1. Don't remove burned clothing.
2. Don't immerse large severe burns in cold water.
3. Check for signs of circulation (breathing, coughing or movement).
4. Elevate the burned body part or parts..
5. Cover the area of the burn.



Operation Sheet 6	Techniques of providing drowning
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Steps first aid measures for drowning

- 1 Get Help (call for help)
- 2 Move the Person
- 3 Check for Breathing
- 4 If the Person is Not Breathing, Check Pulse
- 5 If There is No Pulse, Start CPR

Operation Sheet 7	Techniques of providing drowning
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Procedure first Aid for electrical hazard

- 1 Turn off the source of electricity, if possible.
- 2 Not, move the source away from you and the person, using a dry, non-conducting object made of cardboard, plastic or wood.
- 3 Begin CPR if the person shows no signs of circulation, such as breathing, coughing or movement.
- 4 Try to prevent the injured person from becoming chilled.
- 5 Apply a bandage. Cover any burned areas with a sterile gauze bandage, if available, or a clean cloth. Don't use a blanket or towel, because loose fibers can stick to the burns



LAP Test	Practical Demonstration
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Name _____ Date _____

Time Started _____ Time finished _____

Instruction:- Use necessary materials and equipment and perform the following tasks with in 4hr.

Task 1: Control Bleeding

Task 2 : Manage nasal bleeding

Task 3: Manage fracture

Task 4: Manage dislocation

Task 5:- Manage burn injury

Task 6:- Apply first aid for Drowning

Task 7:- Manage electrical power



LG #12	LO3: Respond to an environmental emergency
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Instruction sheet
<p>This learning guide is developed to provide you the necessary information regarding the following content coverage and topics:</p> <ul style="list-style-type: none"> • Requesting medical assistance • Using communication media and equipment • Conveying assessment of casualty's condition • Preparing and presenting reports • Privacy principles and statutory organization policies • Recording casualty's physical condition • Maintaining confidentiality of records and information <p>This guide will also assist you to attain the learning outcomes stated in the cover page. Specifically, upon completion of this learning guide, you will be able to:</p> <ul style="list-style-type: none"> • Request medical assistance • Use communication media and equipment • Convey assessment of casualty's condition • Prepare and presenting reports • Privacy principles and statutory organization policies • Record casualty's physical condition • Maintain confidentiality of records and information
<p>Learning Instructions:</p> <ol style="list-style-type: none"> 1. Read the specific objectives of this Learning Guide. 2. Follow the instructions described below. 3. Read the information written in the information Sheets 4. Accomplish the Self-checks



Information Sheet 1 Requesting medical assistance

1.1 Introduction

After identifying the casualty's medical condition or injury and the extent of damage, a decision will have to be made as to what kind of further assistance is required, if any. This is when a decision needs to be made promptly by somebody, usually the supervisor. Not all casualties will need an ambulance. Let's take a few examples and think about what kind of further assistance will be required for the following:

- A sprained ankle
- A broken leg
- An asthma attack, where the casualty has fully recovered after using a ventolin inhaler
- A choking episode, where the casualty could not cough, speak or breathe
- A fall off a ladder, where the casualty has hit their head and blood is oozing from the left ear.

1.2 Using relevant communication media and equipment

Communication systems may include but are not limited to:

- Telephones (landline, mobile and satellite phones)
- SMS
- Two-way radio
- Flares
- Flags
- Electronic equipment
- Email
- Hand signals.

The equipment you use to alert emergency personnel will depend on where you are and what equipment is available. The most common way of contacting emergency services is to use a landline phone or a mobile phone.

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Self-Check – 1	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Define communication? (5 points)
2. Mention communication media and equipment? (5 points)
3. Write function of communication? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 2 Using communication media and equipment

2.1 Communication

Communication is derived from 'communes' which means commonness or sharing. Communication is not just about talking to someone. It is an active process in which information (including ideas, specifications, goals, feelings, work orders, and so on) is exchanged among two or more people. Is any verbal or non-verbal behavior which gives people an opportunity to send their thoughts and feelings, and to have these thoughts and feelings received by someone else? Communication needs to be clear and effective in order to achieve its aim. When it is not, all kinds of problems can result.

- **Examples of equipment's for communication media/channel/**

- ✓ Mobile phone
- ✓ Satellite phones
- ✓ HF/VHF radio
- ✓ Flags
- ✓ Flares
- ✓ Two-way radio
- ✓ Email
- ✓ Electronic equipment
- ✓ Television
- ✓ Newspapers
- ✓ Internet
- ✓ Printed material
- ✓ Direct mailing
- ✓ Posters, billboards and signs
- ✓ Health museums and exhibitions



Self-Check – 2	Written test
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Directions: Answer all the questions listed below. Use the Answer sheet provided in the
Next page (Each 1pt)

1. What a communication mean.
2. List materials used for communication

Note: Satisfactory rating :- 5 points Unsatisfactory :- below 5 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 3 Conveying assessment of casualty's condition

3.1 Conveying assessment of casualty's condition

Once you have connected with the emergency service's operator and requested an ambulance, hold the line to tell them details such as:

- Location of casualty providing the exact address is best, but if you aren't sure of this, give some landmarks or nearest crosses streets, and some directions.
- Number of casualties
- Nature and extent of illness or accident—include the physical condition of the casualty, and any relevant signs and symptoms (see below for more details)
- The number of the phone you are using
- Your name.

Then hold the line to answer any further questions and provide any other relevant details, such as damaged power lines.

3.2 The casualty's condition

When providing details of the casualty's condition, include the following

- Colour—what colour is the casualty's skin?
- Conscious state—is the casualty conscious?
- Breathing—is the casualty breathing? If not, have rescue breaths and CPR commenced?
- Bleeding—is the bleeding controlled? Is it bright red spurting blood or dark red flowing blood?
- Pupils—are the pupils of equal size and reacting to light?
- Shock—are there signs of shock (pale, sweaty, nauseous, cold)?
- Movement—does the casualty have coordinated movement?
- Can the casualty feel and move limbs, if conscious?
- Anything abnormal (such as bruising, a bone sticking out or swelling).



Self-Check – 3	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

1. Mention casualty's condition? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 4 Preparing and presenting reports

4.1 Introduction

The importance of report preparation and presentation and outlines the process of producing written and oral presentations. We provide guidelines for report preparation, including report writing and preparing tables and graphs, and we discuss oral presentation of the report. Research follow-up, including assisting the client and evaluating the research process, is described. The special considerations for report preparation and presentation in international marketing research are discussed, and relevant ethical issues are identified. This is followed with an example of a very creative means to present findings to a study that is primarily presenting qualitative findings. Both examples illustrate the different styles and means to present marketing research reports.

4.2 The report and its presentation are important parts of the marketing research project:

- They are the tangible products of the research effort. After the project is complete and management has made the decision, there is little documentary evidence of the project other than the written report. The report serves as a historical record of the project.
- Management decisions are guided by the report and the presentation. If the first five steps in the project are carefully conducted but inadequate attention is paid to the sixth step, the value of the project to management will be greatly diminished.
- The involvement of many marketing managers in the project is limited to the written report and the oral presentation. These managers evaluate the quality of the entire project on the quality of the report and presentation.
- Management's decision to undertake marketing research in the future or to use the particular research supplier again will be influenced by the perceived

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usefulness of the report and the presentation. Preparation and presentation process

4.3 Illustrates report preparation and presentation process

- Problem definition, approach,
- Research design
- Fieldwork
- Data analysis Interpretation,
- Conclusion,
- Recommendations
- Reading of the report by the client
- Research follow-up

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Self-Check – 4	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

- 1 Illustrates report preparation and presentation process? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10
 You can ask you teacher for the copy of the correct answers.





Information Sheet 5 privacy principles and statutory organization policies

5.1 Privacy responsibilities

- What is an agency?
- Principles to follow
- Having a privacy officer
- Resources for complying with the Privacy Act
- Contact us

- **What is an agency?**

Under the Privacy Act, an agency is any organisations or business, whether it's in the public sector or private sector. This includes:

- ✓ Government departments
- ✓ Companies
- ✓ Small businesses
- ✓ Social clubs
- ✓ Other types of organisations.

- **Principles to follow**

The privacy principles which set out how your agency should handle personal information. The first four principles govern how you can collect personal information. This includes when you can collect it, where you can collect it from, and how you can collect it. Principles five, six, and seven govern how you store personal information. Make sure it's secure and you let individuals access and correct their personal information. The rest of the principles govern how you use and disclose personal information. Make sure information is accurate, and you use and disclose it appropriately.

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- **Privacy rules for specific situations**

Some industries and types of personal information have codes of practice which change how the Act applies to them. There are six codes of practice in operation:

- ✓ Health Information Privacy Code
- ✓ Credit Reporting Privacy Code
- ✓ Telecommunications Information Privacy Code
- ✓ Civil Defence National Emergencies (Information Sharing) Code
- ✓ Justice Sector Unique Identifier Code
- ✓ Superannuation Schemes Unique Identifier Code

5.2 Privacy principles

The Privacy Committee Data Protection Principles outline the privacy principles that a community services organisations must follow. These guidelines are to protect client rights and ensure that only essential information about the client is collected.

- Collect information directly from the client, except if:
 - ✓ The client agrees otherwise
 - ✓ The other information source also follows these principles.
- Make sure the client knows whether it is compulsory or optional to give the information.
- Make sure the client knows the purpose for collecting the information.
- Make sure the client knows who you usually pass information on to (and who they usually pass it on to).
- Make sure the client can look at and correct their information (unless the law stops this), and the client knows this right.
- Make sure the information is actually needed for your purpose.
- Limit your use of the information to:
 - ✓ The purpose you collected it for
 - ✓ Other purposes with the client's consent
 - ✓ Preventing harm to the client or someone else.

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- Make sure the information is accurate, up-to-date and complete.
- Make sure the information is protected from unauthorised access.
- Make sure the information is kept for no longer than necessary for the purpose it was collected for.
- Make sure that the information is only used or disclosed with the freely given, clear written consent of the client if the information concerns their:
 - ✓ Ethnic or racial origin
 - ✓ Political opinions
 - ✓ Religious or philosophical beliefs
 - ✓ Trade union membership
 - ✓ Health
 - ✓ Sexual life.



Self-Check – 5	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. What is an agency? (5 points)
2. Write privacy rules for specific situations? (5 points)

Note: Satisfactory rating – 5 points Unsatisfactory - below 5 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 6 Recording casualty's physical condition

6.1 Recording casualty's physical condition

It is important to record details of the casualty's physical condition and any changes, including management of the casualty and response to management. As soon as the casualty has been stabilized, a report must be made to your supervisor.

There are several reasons for this.

- This documented record is a legal document and may be used in a court of law, for example, as evidence in a law suit or a coroner's investigation.
- If the casualty is transferred to a doctor's or hospital's care, this record can be communicated to the doctor.
- The incident may be investigated, identifying and rectifying causes to prevent the incident from occurring again.
- The records may be a useful tool for obtaining information used for audits.

Methods

Your workplace will have an accident/incident form that will need to be completely filled in.

Company procedures

Always follow company procedures. You may have to write details first into a logbook and then fill out an accident/incident form. Maybe you will only have to fill out an accident/incident form. Whatever the company policy, make sure it is followed. Be sure to fill out all information requested as soon as practicable and sign the form. It is normal practice to submit the form to management.

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Self-Check – 6	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

- 1 Write the recording casualty's physical condition? (5 points)
- 2 Write down company procedures? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 7 Maintaining confidentiality of records and information

7.1 Introduction

A degree of confidentiality exists in all professions and organisations and, it has legal consequences for everyone involved in the medical/health profession. It is very important that you understand what confidentiality means and how you should handle various situations. ‘Confidentiality’ is another way of saying ‘secrecy’. Confidentiality requires trust. If someone wants something to remain confidential, they want it to be kept a secret or treated as a private matter. As someone who is privy to confidential information, no matter what it might be, you are in a position of trust. As a first-aider this goes beyond your personal needs. You are trusted not to divulge confidential information to anyone, unless directed by management or given permission to do so by the patient. Breach confidentiality by:

- Showing or giving records to people within or outside the workplace without the patient’s written consent
- Talking about patients or leaving records lying about
- Discussing a patient with someone over the telephone.

7.2 Personal information

- Privacy of the individual's details must be maintained at all times.
- Personal information that needs to remain confidential includes the age, gender, address, and date of birth of the individual.
- Other topics that also need to remain private are details of health issues, family information. Any other information of a personal or sensitive nature should be discussed only with the appropriate people when and where others will not overhear the conversation.
- Staff sometimes will discuss details of a person in the lift, in the corridor or in the tearoom; this is a policy breach.



7.3 Access to records

Records may be paper or computer based, stored on discs or CDs. Records have legal, administrative and cultural constraints on their storage and disposal.

- Staff do not all require the same level of access to information. The level of access required is determined by the person's job role.
- Security passes may be issued whilst the staff member is working on a particular job, and then withdrawn if the level of access required changes.
- Staff may require ID access or an electronic door pass to access data.
- Computer access is monitored and restricted to ensure that client confidentiality is maintained.
- Documents need to remain private and confidential, and must at all times be stored in a securely locked cabinet for access by authorised personnel only.
- Documents are not to be left where members of the general public may access them as the information within them could be taken out of context or made public.
- Check with the medical staff prior to allowing family members to access documents. There may be information that the client does not wish their family, friends or others to know.
- Under the Privacy Act, clients are able to access their own health information.

7.4 Inter-organisational access

Records may not be transferred from one organisation to another without management approval. Not all organisations have reciprocal privacy agreements, so care needs to be taken and the correct channels followed to ensure that any sensitive or confidential information is not passed over to someone that may not treat the information in the same confidential manner as your organisation. Computer and Internet confidentiality

- Within an organisation there will be information that is sensitive and confidential in nature stored on the computer network.
- At no time are staff to allow access for visitors to view computer-based information. Information that is printed out must be filed in the appropriate place according to the department's protocols.

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- Any information that is to be discarded must be thrown into the locked bins for shredding prior to being discarded.
- Most organisations have a confidentiality agreement that employees sign when they first join the company. These agreements protect the privacy of clients by ensuring that all staff will not pass on information of a personal or sensitive nature to any outside source.
- All staff are issued with an ID number that gives them access to a particular level of computer access.

7.5 Release of information

- Telephone
 - ✓ The only time transfer of information is appropriate over the telephone is between authorised personnel such as medical staff, supervisors and management. Authorised personnel will give their ID details to verify their identity.
 - ✓ When answering the phone, don't ever give out any information - refer the enquiry immediately to a supervisor, manager or member of medical staff.
 - ✓ If you are ever in any doubt as to the caller's identity, or suspect that something is not right, inform a supervisor immediately and do not comply with any requests from the caller.
- Press and media requests
 - ✓ Never give information to the press or media. There is always a spokesperson for the organisation that will be designated as the person to speak with them.
 - ✓ Politely decline any requests and refer the person to a supervisor.

7.6 Storage of records

Records must be correctly stored and eventually destroyed (in line with legal requirements) by authorised personnel to make sure that information of a sensitive nature is not made public.

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All records must be stored in a secure, safe area where there is no possibility of damage by pests, vermin or environmental factors. Records are stored both at internal organisational and registered external storage areas. The area must be safeguarded by security, with access determined by an ID system or electronic card recognition system to prevent access from individuals that do not have clearance.

When stored, there is a system for location of records to allow for ease of access by authorised staff. Records must be transported in a safe and confidential manner ensuring that access is only given to authorised staff.

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Self-Check – 7	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

1. Define release of information? (5pts)
2. Write ways of Inter-organisational access? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



LG #13

LO4: Evaluate own performance

Instruction sheet

This learning guide is developed to provide you the necessary information regarding the following content coverage and topics:

- Seeking feedback from appropriate clinical expert
- Recognizing psychological impacts
- Participating in evaluation of own performance
- Documentation

This guide will also assist you to attain the learning outcomes stated in the cover page.

Specifically, upon completion of this learning guide, **you will be able to:**

- Seek feedback from appropriate clinical expert
- Recognize psychological impacts
- Participate in evaluation of own performance
- Documentation

Learning Instructions:

5. Read the specific objectives of this Learning Guide.
6. Follow the instructions described below.
7. Read the information written in the information Sheets
8. Accomplish the Self-checks
9. Perform Operation Sheets
10. Do the "LAP test"



Information Sheet 1 Seeking feedback from appropriate clinical expert

1.1 Seek feedback from appropriate clinical expert

In a casualty situation, the appropriate clinical expert could be:

- ambulance officer
- paramedic
- health worker
- Doctor.

1.2 Seeking feedback

Feedback is about what you think of something you have seen or experienced (e.g. a service or product). In your feedback, you might voice a concern, complain, point out a factual error or express your opinion or thoughts.

1.3 Guidelines for seeking feedback

- Ask for feedback as soon as possible after you have done something that you would like feedback about. The only exception to this is if you are very angry, as it may come across as a demand rather than a request.
- Ask about specific things, eg how they think you managed the situation. Just asking 'What do you think of me as a first-aider?' may be seen as an invitation for personal criticism, or it may just be confusing.
- Choose the time and place for feedback. If your supervisor is obviously very busy or stressed, it may not be advisable to seek the feedback immediately. It is also not appropriate, for example, to ask for feedback in front of the families of the clients.
- Sometimes immediate feedback won't be possible. If that is the case, carefully prepare your questions as close to the event as possible. This way, when you get a chance to ask for feedback, your recollection will be better.

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- Ask for the feedback you want but don't receive. Sometimes we receive feedback about certain aspects of our behavior when it is really other aspects that we want to know about. Ask for it if you think it will be useful.
- Once you ask for feedback, don't try to tell the other person why they are wrong! It may be hard, but just keep quiet and listen. If the feedback is vague, ask for an example of what they mean.

1.4 Receiving feedback

- Listen carefully. Don't immediately reject or respond to the feedback. It is better to 'digest' what has been said.
- Check your understanding. Ask for clarification if you are unsure or unclear.
- Do with it what you will! The feedback is the giver's opinion. You don't have to do anything with it. You don't have to change. It is *your* decision. Remember, though, if it is coming from your superior in the workplace, it may be advisable not to ignore it!
- Check it out with others. If more than one person gives you the same feedback, it is probably worthwhile doing something with it.
- Make a decision about what you will do with the feedback. Assess the value of ignoring or using it and decide what you will do as a result.
- Thank the person for giving you the feedback. It may have been painful to hear but it may also have been difficult to give. Also it is a valuable practice worth encouraging.
- Feedback has no value unless it is used to improve performance. So you need to evaluate all feedback received.

When evaluating feedback, look at its

- Reliability
- Validity
- Degree of influence

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Self-Check – 1	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

- 1 Define Feedback? (5 points)
- 2 Mention guidelines for seeking feedback? (5 points)
- 3 Write function of receiving feedback? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 2 Recognizing psychological impacts

2.1 Introduction

Depression and anxiety disorders are highly prevalent mental illnesses and are among the leading causes of disability worldwide. Mental illnesses can significantly affect workplace productivity due to absenteeism and presenteeism (working whilst unwell and not meeting expected standards of productivity) . The majority of full-time employees experiencing common mental illness does not receive treatment, or delay seeking treatment. The longer treatment is delayed, the more likely a person will have a long-term sickness absence from work. There is also strong evidence of a positive relationship between the duration of depression and the severity of work disability experienced.

There are a number of workplace barriers to help-seeking, including lack of recognition, stigmatizing attitudes and discrimination. Addressing workers' lack of recognition for needed help, attitudes and structural barriers can significantly decrease work productivity losses, with the largest decrease associated with improving recognition .Concerns about being treated differently by co-workers and supervisors, being seen as less competent and possible job loss have been cited as barriers to disclosing a mental illness at work . Managers have been found to be more critical of an employee's job performance if they are seen to be experiencing burnout or depression compared to a physical illness like thyroid disease. Poor support from managers in turn has been found to double the risk of long-term sickness absence related to mental illness .

The impact of mental illness in the workplace could be reduced by facilitating early intervention that encourages help-seeking and supports recovery through reasonable work accommodation. A factor that can facilitate professional help-seeking is that someone else suggests it, such as a co-worker or manager.

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2.2 Mental health first aid training

Mental Health First Aid (MHFA) training is one way to promote early help-seeking, by equipping participants with the knowledge and skills to provide the initial help to someone developing a mental health problem or experiencing a mental health crisis before appropriate professional help is found. MHFA courses have been well evaluated and consistently demonstrate an association with improved knowledge, decreased stigmatizing attitudes and increased helping behaviors.

The MHFA curriculum is drawn from guidelines developed using the expert consensus of mental health professionals, consumers and care advocates from developed English-speaking countries. Guidelines for providing mental health first aid in particular settings have also been developed to inform MHFA course adaptations. For example, guidelines on how to provide culturally appropriate mental health first aid to Aboriginal and Torres Strait Islander adults and adolescents have informed the Aboriginal and Torres Strait Islander MHFA Course. Though guidelines exist on how to help someone return to work after depression and anxiety and how organisations can help prevent mental illness, there are no guidelines on how to offer help in a workplace setting that can be used to inform a course for the workplace.

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Self-Check – 2	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

1. Write down emergency procedures? (5 points)
2. Mention mental health first aid? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 3 Participating in evaluation of own performance

3.1 Introduction

After witnessing an accident or being involved in providing first aid, some people might suffer an immediate or delayed emotional response to the situation. The way people respond might differ but symptoms such as flashbacks, nightmares, depression and a wide range of physical complaints can occur.

If you have offered first aid, or witnessed an accident, it might be beneficial to seek some form of debriefing or counseling, especially if you suffer from any changes in your physical or emotional health. You can find out about professional counseling and debriefing services through your workplace supervisor, Emergency Services, your local doctor or community health center.

Consider these options:

- Self-appraisal
- Informal feedback
- Formal feedback
- Professional development.

3.2 Self-appraisal

You self-appraise by monitoring your own work performance. You do that through observing others and the way that they work and then evaluating your own standard of work and completion of activities.

3.3 Informal feedback

Ask for informal feedback from your supervisor about your standard of work. This means that your supervisor or another team member will oversee what you are doing on a day-to-day basis and will then be able to evaluate your contributions and strengths and ascertain where you might need to improve.

It is, therefore, a good idea to be able to approach your supervisor and ask for feedback about your work performance. While this may be a rather scary thought, remember that by seeking feedback you are showing that you are willing to make changes and eager

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to perform at your best. By acting on feedback, you will gain support from your colleagues and supervisor.

3.4 Formal feedback

Ask for formal feedback or assessment from your supervisor or colleagues, known as a performance appraisal. These tools usually directly relate to your job specification and will give you feedback that relates directly to the standards expected in the workplace.

Professional development research current theory and professional practice in first aid and attend training.

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Self-Check – 3	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: short answer

1. Define self-appraisal? (5pts)
2. Mention informal feedback? (5 points)
3. Write ways of Formal feedback? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10 points

You can ask you teacher for the copy of the correct answers.



Information Sheet 4 Documentation

4.1 Documenting and reporting incidents

Healthcare workers are responsible for documenting and reporting all hazards, near misses, incidents and injuries. If all activities and tasks that put clients and workers at risk are documented and reported, it is easier to review and monitor the frequency and patterns of events. This can reduce preventable injuries. Some of the benefits of reviewing records include:

- Specific areas can be targeted for training
- Safe work procedures are continuously reviewed and improved
- New, improved procedures can be put into place
- Proper action can be taken to manage workplace hazards.

4.2 Documented information should include:

- The date, time and location of the incident
- The hazard/item that caused the incident
- The nature of the injury or incident
- How it occurred
- Who was involved
- What actions were taken?

4.3 Types of Record-Keeping Used in Homecare

- Hand-written records
- Computer-based systems (electronic)
- Some organizations or employers will use a combination of both
- You'll be expected to be able to comply with whatever requirements your employer or organization sets for record-keeping. That means you'll need to:
- Ensure that you are up to date on the information systems and tools in your workplace including their security, confidentiality and appropriate usage;
- Protect any passwords or details given to you to enable your access to any systems;

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- Make sure written records are not left in public places where unauthorized people might see them (including any electronic systems or displays);

4.4 Principles of Good Record Keeping

Some key factors underpin good record keeping. The patient's records should:

- Be factual, consistent and accurate.
- Be updated as soon as possible after any recordable event.
- Provide current information on the care and condition of the client.
- Be documented clearly in such a way that the text cannot be erased.
- Be consecutive and accurately dated, timed and all entries signed (including any alterations).
- All original entries should be legible. Draw a clear line through any changes and sign and date.
- Not include abbreviations, slang or jargon as not all workplaces or Home will use the same terminology.
- Records must be stored securely and should only be destroyed following your local policy.
- Avoid meaningless phrases, speculation and offensive subjective statements/insulting or derogatory language.
- Identify the patient by recording patient's name, date of birth and hospital number on each page of the record (three approved identifiers) or follow your local policies on how to identify patient's records;
- Still be legible if photocopied or scanned.

4.5 Common deficiencies in record keeping.

Poor record keeping hampers the care that patients receive and makes it difficult for healthcare professionals to defend their practice.

The most common deficiencies in record keeping include:

- An absence of clarity
- Inaccuracies
- Spelling mistakes

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- Missing information
- Failure to record action taken when a problem has been identified.

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Self-Check – 4	Written test
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Name..... ID..... Date.....

Directions: Answer all the questions listed below. Examples may be necessary to aid some explanations/answers.

Test I: Short Answer Questions

- 1 Mention and explain types type of record-Keeping used in home care? (5 points)
- 2 Discuss the Principles of Good Record Keeping ? (5 points)

Note: Satisfactory rating - 10 points Unsatisfactory - below 10
 You can ask you teacher for the copy of the correct answers.



Reference

1. <https://www.google.com/search?client=opera&q=traditional+communication+tools&sourceid=opera&ie=UTF-8&oe=UTF-8>
2. <https://elizz.com/caregiver-resources/how-to/improve-caregiver-communication>
3. <http://www.first-aid-course.co.uk/first-aid-skills-communicating-high-pressure-situation/>
4. <https://www.youtube.com/watch?v=h6byaD6ySp8>
5. <https://www.youtube.com/watch?v=5BjRHKqhMlkhttps://ehssafetynewsamerica.com/2011/08/24/how-to-write-a-good-accident-or-incident-report/>

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