



Ethiopian TVET-System

Model Curriculum

Health Extension Service

Level III

Based on
Occupational Standard (OS)

February 2013

Adama

FINAL DRAFT (MOH)

Preface

The reformed TVET-System is an outcome-based system. It utilizes the needs of the labor market and occupational requirements from the world of work as the benchmark and standard for TVET delivery. The requirements from the world of work are analyzed and documented – taking into account international benchmarking – as occupational standards (OS).

In the reformed TVET-System, curricula and curriculum development play an important role with regard to quality driven TVET-Delivery. Curricula help to facilitate the learning process in a way, that trainees acquire the set of occupational competences (skills, knowledge and attitude) required at the working place and defined in the occupational standards (OS).

This curriculum has been developed by a group of experts from Federal MOH, MOE, TVET providers and Regional TVET-Authorities based on the occupational standard for Health Extension Services. It has the character of a model curriculum and is an example on how to transform the occupational requirements as defined in the respective occupational standard into an adequate curriculum.

The curriculum development process has been actively supported and facilitated by the Ministry of Education and Ministry of Health – in line with one of its mandates to provide technical support to the regions – and by the TVET-Reform Component of the Engineering Capacity Building Program.

1. TVET-Program Design

1.1 TVET-Program Title: Health Extension Service Level III

1.2 TVET-Program Description

The Program is designed to develop the necessary knowledge, skills and attitude of the learners to the standard required by the occupation. The contents of this program are in line with the occupational standard. Learners who successfully completed the Program will be qualified to work as a health extension practitioner with competencies elaborated in the respective OS. Graduates of the program will have the required qualification to work in the **Health** sector in the field of **Health Extension Program**.

The prime objective of this training program is to equip the learners with the identified competences specified in the OS. Graduates are therefore expected to provide **Health Extension service** in accordance with the performance criteria described in the OS.

1.3 TVET-Program Learning Outcomes

The expected outputs of this program are the acquisition and implementation of the following units of competence –

- HLT HES3 01 0213 Collect, Maintain and Utilize Community Health Data
- HLT HES3 02 0213 Perform Community Mobilization and Provide Health Education
- HLT HES3 03 0213 Promote and Implement Hygiene and Environmental Health Services
- HLT HES3 04 0213 Prevent and Control Common Communicable Diseases
- HLT HES3 05 0213 Prevent and Control Common Non-Communicable Diseases
- HLT HES3 06 0213 Promote Community Nutrition
- HLT HES3 07 0213 Promote and Provide Ante-Natal Care
- HLT HES3 08 0213 Promote Institutional Delivery and Provide Delivery Service
- HLT HES3 09 0213 Promote and Provide Post-Natal Care
- HLT HES3 10 0213 Promote Child Survival, Growth and Development and apply Integrated Community Case Management (ICCM)
- HLT HES3 11 0213 Promote and Implement Immunization
- HLT HES3 12 0213 Promote and Provide Family Planning Service
- HLT HES3 13 0213 Promote and Provide Adolescent and Youth Reproductive Health
- HLT HES3 14 0213 Provide First Aid
- HLT HES3 15 0213 Manage Community Health Service
- HLT HES3 16 0213 Respond to Emergencies

1.4 Duration of the TVET-Program

The Program will have a total duration of **1682 hours** in school and on the job practice or cooperative training of which **320 hours** (Internship) for practice after completion of all modules at health center and community settings and health centers.

1.5 Qualification Level and Certification

Based on the descriptors elaborated on the Ethiopian National TVET Qualification Framework (NTQF) the qualification of this specific TVET Program is “Level III”. The learner will not award any certificate before completion of all the modules in Health sector training

1.7 Target Groups

Female students who completed grade 10 and are recruited from respective communities and meeting the entry requirements described under items **1.8** are capable of participating in the Program.

1.8 Entry Requirements

The prospective participants of this program are required to possess the requirements or directive of the Ministry of Education. .

1.9 Mode of Delivery

This TVET-Program is characterized as a formal Program on middle level technical Skills. The mode of delivery is co-operative training. The TVET-institution and identified **Hospitals and health centers** have forged an agreement to co-operate with regard to implementation of this program. The time spent by the trainees in the health institutions will give them enough exposure to the actual world of work and enable them to get hands-on experience.

The co-operative approach will be supported with lecture-discussion, simulation and actual practice. These modalities will be utilized before the trainees are exposed to the health institutional environment.

1.10 TVET-Program Structure

Unit of Competence	Module Code & Title	Learning Outcomes	Duration (In Hours)			
			Theory	Practice	Total	
HLT HES3 01 0213 Collect, Maintain and Utilize Community Health Data	HLT HES3 M01 0213 Collecting, Maintaining and utilizing Community health data	<ul style="list-style-type: none"> Plan and prepare the necessary materials for data collection Collect data that needs to be entered into the health data base system Collect vital events and surveillance data Prepare and submit reports Contribute to Working with Community to Identify Health Needs 	20	28	48	
HLT HES3 02 0213 Perform Community Mobilization and Provide Health Education	HLT HES3 M02 0213 Performing Community Mobilization and Providing Health Education	<ul style="list-style-type: none"> Participate in the determination of community health information needs Participate in the preparation of health information for use by the health worker assigned Provide health promotion and education services 	38	84	122	

				<ul style="list-style-type: none"> • Train model families • Perform advocacy of identified health issues • Promote community mobilization on the identified health issues 				
HLT HES3 03 0213	Promote and Implement Hygiene and Environmental Health Services	HLT HES3 M03 0213	Promoting and Implementing Hygiene and Environmental Health Services	<ul style="list-style-type: none"> • Promote and provide environmental and personal Hygiene education • Establish and demonstrate community-appropriate sanitation technologies • Provide environmental health service 	40	80	120	
HLT HES3 04 0213	Prevent and Control Common Communicable Diseases	HES3 M04 0213	Preventing and Controlling Common Communicable Diseases	<ul style="list-style-type: none"> • Educate the community on early detection and prevention of communicable diseases • Perform disease Surveillance • Follow up of Cases 	60	80	140	
HLT HES3 05 0213	Prevent and Control Common Non-Communicable Diseases	HLT HES3 M05 0213	Preventing and Controlling Common Non-Communicable Diseases	<ul style="list-style-type: none"> • Educate the community on healthy life style and early detection of disease. • Screen and refer clients 	30	10	40	

			<p>requiring further investigation & management</p> <ul style="list-style-type: none"> • Follow up cases and promote community based rehabilitation 				
HLT HES3 06 0213	Promote Community Nutrition	HLT HES3 M06 0213	Promoting Community Nutrition	<ul style="list-style-type: none"> • Collect appropriate information for preparing nutrition education • Provide basic nutrition information/ education to the clients. • Monitor client response to the information/ education 	30	50	80
HLT HES3 07 0213	Promote and al Care Ante-	HLT HES3 M07 0213	Promoting and Providing Antenatal Care	<ul style="list-style-type: none"> • Monitor client response to the information/ education • Conduct home visit and refer pregnant women with health problems 	40	40	80
HLT HES3 08 0213	Promote Institutional Delivery and Provide Delivery Service	HLT HES3 M08 0213	Promoting Institutional Delivery and Providing Delivery Service	<ul style="list-style-type: none"> • Support women during childbirth • Provide normal delivery • Provide immediate neonatal care 	40	140	180

HLT HES3 09 0213	Promote and Provide Post- Natal Care	HLT HES3 M09 0213	Promoting and Providing Post-Natal Care	<ul style="list-style-type: none"> • .Provide services for lactating mothers on infant care, nutrition and exclusive breast feeding • Organize and follow-up maternal health programs 	16	24	40	
HLT HES3 10 0213	Promote Child Survival, Growth and Development and apply Integrated Community Case Management (ICCM)	HLT HES3 M10 0213	Promoting Child Survival, Growth and Development and applying Integrated Community Case Management (ICCM)	<ul style="list-style-type: none"> ▪ Promote child survival, growth and development activities ▪ Assess and manage common child hood illness ▪ Refer child requiring further care 	46	56	102	
HLT HES3 11 0213	Promote and Implement Immunization	HLT HES3 M11 0213	Promoting and Implementing Immunization	<ul style="list-style-type: none"> • Plan immunization programs • Conduct immunization programs 	40	80	120	

HLT HES3 12 0213	Promote and Provide Family Planning Service	HLT HES3 M12 0213	Promoting and Providing Family Planning Service	<ul style="list-style-type: none"> Educate the community on family planning options Educate adolescents on family planning and STI 	40	70	110	
HLT HES3 13 0213	Promote and Provide Adolescent and Youth Reproductive Health	HLT HES3 M13 0213	Promoting and Providing Adolescent and Youth Reproductive Health	<ul style="list-style-type: none"> Plan adolescent and youth RH services Promote adolescent and youth RH services Provide RH service package Register and document RH records 	20	20	40	
HLT HES3 14 0213	Provide First Aid	HLT HES3 M14 0213	Providing First Aid service	<ul style="list-style-type: none"> Assess and identify client's condition Provide first aid service Refer client requiring further care 	20	70	90	
HLT HES3 15 0213	Manage Community Health Service	HLT HES3 M15 0213	Managing Community Health Service	<ul style="list-style-type: none"> Follow organizational guidelines, understand health policy and service delivery system Work ethically Provide team leadership and assign responsibilities Establish quality standards, assess and record quality of service delivery 	20	20	20	

				<ul style="list-style-type: none"> • Manage work and resources at a Health Post • Lead workplace communication 				
HLT HES3 16 0213	Respond to Emergencies	HLT HES3 M18 0213	Responding to Emergencies	<ul style="list-style-type: none"> • Prepare for emergency situation • Evaluate the emergency • Act in an emergency • Apply essential first aid techniques 	10	0	10	
				Total in school	510	852	1362	
				Community attachment (internship)			320	
				Grand total			1682	

*The time duration (Hours) indicated for the module should include all activities in and out of the training institution.

1.11 Institutional Assessment

Two types of evaluation will be used in determining the extent to which learning outcomes are achieved. The specific learning outcomes are stated in the modules. In assessing them, verifiable and observable indicators and standards shall be used.

The **formative assessment** is incorporated in the learning modules and form part of the learning process. Formative evaluation provides the trainee with feedback regarding success or failure in attaining learning outcomes. It identifies the specific learning errors that need to be corrected, and provides reinforcement for successful performance as well. For the trainer, formative evaluation provides information for making instruction and remedial work more effective.

Summative Evaluation the other form of evaluation is given when all the modules in the program have been accomplished. It determines the extent to which competence have been achieved. And, the result of this assessment decision shall be expressed in the term 'competent or not yet competent'.

Techniques or tools for obtaining information about trainees' achievement include oral or written test, demonstration and on-site observation.

1.10 TVET Trainers Profile

The trainers conducting this particular TVET Program are a minimum of **B Level** and have satisfactory practical experiences or equivalent qualifications.

LEARNING MODULE 1	Logo of TVET Provider
TVET-PROGRAMME TITLE: HEALTH EXTENSION SERVICE LEVEL III	
MODULE TITLE: Collecting, maintaining and utilizing community health data	
MODULE CODE: HLT HES3 M01 0213	
NOMINAL DURATION: 48 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitude required to collect, summarize, use and maintain data for improving community health related activities	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Plan and prepare the necessary materials for data collection LO2. Collect data that needs to be entered into the health data base system LO3. Collect vital events and surveillance data LO4. Prepare and submit reports LO5. Contribute to Working with Community to Identify Health Needs	
MODULE CONTENTS: LO1. Plan and prepare the necessary materials for data collection 1.1. Plan for data collection 1.2. Preparation for data collection LO2. Collect data that needs to be entered into the health data base system 2.1. Introduction to developing community profile 2.1.1. Definition and purpose of community profile 2.2. Types of data 2.3. Introduction to data collection 2.3.1. Data collection tools 2.3.2. Process of data collection 2.4. Data analysis 2.4.1. Counting the number, percentage and types of cases 2.4.2. Analyzing public health data by person place and time LO3. Collect vital events and surveillance data 3.1. Introduction to vital events and surveillance 3.2. Data collection on vital events and surveillance LO4. Prepare and submit reports 4.1. Writing a report on your community profile 4.2. Identifying problems for further investigation LO5. Contribute to Working with Community to Identify Health Needs 5.1. Introduction to community diagnosis 5.2. Reviewing available recorded documents 5.3. Importance of community involvement	

- 5.4. Selection of community health promoters
- 5.5. Include kebele leaders and influential people in your trainings
- 5.6. How to work with community health promoters
- 5.7. Role of community health promoters
- 5.8. Contribute to the activities that assist the community to identify their health needs

LEARNING METHODS:

- Lecture and discussion
- Demonstration
- Group discussions

ASSESSMENT METHODS:

Competence may be accessed through:

- Practical assessment
- Written exam/test
- Questioning or interview
- Project work (real or simulated)

ASSESSMENT CRITERIA:

LO1. Plan and prepare the necessary materials for data collection

- Questionnaire is prepared and made available
- Necessary personnel and equipment identified to execute data collection
- Member of community informed about data collection dates and time
- Community leaders are invited to support data collection process

LO2. Collect data that needs to be entered into the health data base system

- Necessary **data** set is identified and collected
- Information received is classified or sorted out on the basis of a clear understanding of the purpose for maintaining the **database system**.
- Steps to maintain confidentiality according to **prescribed procedures** are taken.

LO3. Collect vital events and surveillance data

- Registration book for vital events is prepared.
- Vital events and surveillance data are collected continuously and sustained
- Vital event data are updated timely.
- The reportable diseases are communicated to the Woreda health office or health centre.

LO4. Prepare and submit reports

- Updates and timely reports are submitted according to prescribed procedures and guidelines.

LO5. Contribute to Working with Community to Identify Health Needs

- Discussions are made with key stakeholders regarding the health problem, its causes and appropriate interventions or solutions

- Briefing materials throughout the consultation process are provided to identify and clarify issues of interest/concern to stakeholders and own organization
- Feedback is provided to the team leader or work team on the results of the consultation process
- Positive contributions are made to activities that develop an understanding of the factors contributing to the health problem of the community
- Feedback is provided to team members/leader to facilitate discussion and clarify issues arising from the review of literature and consultation process with the community and relevant stakeholders
- Further information and data are collected when needed for input into the analysis and presentation of results arising from the review of literature and consultation process
- Activities that would build the capacity of the community to identify their health needs to relevant stakeholders are recommended.

LEARNING MODULE 2	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Performing Community Mobilization and Providing Health Education	
MODULE CODE: HLT HES3 M02 0213	
NOMINAL DURATION: 122 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to work With community members to determine community health information needs, implement and maintain healthy living styles, advocate, train and mobilize community on an identified health issues	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Participate in the determination of community health information needs LO2. Participate in the preparation of health information for use by the health worker assigned LO3. Provide health promotion and education services LO4. Train model families LO5. Perform advocacy of identified health issues LO6. Promote community mobilization on the identified health issues	
MODULE CONTENTS: LO1. Participate in the determination of community health information needs 1.1 Community participation in health information need 1.1.1 Definition of terms 1.1.2 Introduction to community participation 1.1.3 Concepts and principles of community participation 1.1.4 Community health information need 1.2 Challenges in determining community health information needs LO2. Participate in the preparation of health information for use by the health worker Assigned 2.1 Planning and Implementing Health education 2.2 Skills in working with the community 2.3 Methods of Evaluation of Health Education Program LO3. Provide health promotion and education services 3.1 Concepts of health education 3.2 Objectives of health education	

- 3.3 Human behavior and Health
- 3.4 Methods of health education communication
- 3.5 Communication skills and Health Education
- 3.6 Barriers of health education communication
- 3.7 Ethical principles in Health Education

LO4. Train model family

- 4.1 Human Behavior and Health
 - 1.1.1 Introduction to healthy life style and early detection of communicable diseases
 - 1.1.2 Levels of disease prevention
 - 1.1.3 Determinants of Human behavior
 - 1.1.4 Factors affecting behavior
 - 1.1.4.1 Predisposing Factors
 - 1.1.4.2 Enabling factors
 - 1.1.4.3 Reinforcing factors
 - 1.1.5 Perspectives in Health and Illness
 - 1.1.6 The Health Belief Model
 - 1.1.7 Utilizing Theory of Diffusion of Innovations to educate community
- 4.2 Facilitating training sessions in the community
- 4.3 Process for training community health promoters

LO5. Perform advocacy of identified health issues

- 5.1. Introduction to advocacy
- 5.2. plan advocacy on identified health issues
- 5.3. Include kebele leaders and influential people in the advocacy
- 5.4. Conduct advocacy

LO6. Promote community mobilization on the identified health issues

- 6.1. community mobilization skills
- 6.2. process of community mobilization
- 6.3. conducting community mobilization

LEARNING METHODS:

- Lecture and discussion
- Demonstration
- Group discussions
- Case discussions and seminars

ASSESSMENT METHODS

- Practical assessment
- Written exam/test
- Oral questioning
- Project work

ASSESSMENT CRITERIA

LO1. Participate in the determination of community health information needs

- Community representatives are consulted to determine current health needs and priorities
- The effectiveness of the existing health promotion/education programs are consulted and determined by considering cultural practices and beliefs when determining the information needs.
- Useful and harmful traditional practices are identified according to the information provided by the community.

LO2. Participate in the preparation of health information for use by the health worker

Assigned

- Feedback from community consultation is used as a basis for planning community health information programs
- Plans for health care information program are discussed with supervisor to adjust community values and concern.

LO3. Provide health promotion and education services

- Influential community representatives and voluntaries are identified and consulted to disseminate IEC-BCC activities
- Health promotion and education services are organized and promoted in partnership with the community
- Health promotion and education are provided to meet community and organizational guidelines/requirements.
- Health promotion and education activities are sustained by involving the resources of the community.
- Clients are supported to take self-care approach in line with individual needs for changing unhealthy behavior

LO4. Train model families and promoters

- Better performing household in their day to day activity are identified
- Space and time for training is agreed
- Necessary resources are identified and collected
- Trainings are provided according to MOH guideline
- Follow up and monitoring is done

LO5. Perform advocacy of identified health issues

- Sensitizations are conducted with decision makers, community leaders, and other stakeholders on identified health issues
- Discussions are made with decision makers on the identified health issues
- Continuous lobbying is performed to get support to solve the identified health issues

LO6. Promote community mobilization on the identified health issues

- Identification and organization of the available **social structure** are performed to solve community health problems.
- Sensitizations and discussions are conducted on health issues with the identified structure and community members

- Model families and volunteers are trained and used as mediators for community mobilization.
- Consensus are reached to plan and implement together on the health issues

FINAL DRAFT (MOH)

LEARNING MODULE 3	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Services Level III	
MODULE TITLE: Promoting and implementing hygiene and environmental health services	
MODULE CODE: HLT HES3 M03 0213	
NOMINAL DURATION: 120 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to develop healthy behavior which enables the community to protect from ailments that can be encountered due to poor personal hygiene and environmental health problems.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Promote and provide environmental and personal hygiene education LO2. Establish and demonstrate community-appropriate sanitation technologies LO3. Provide environmental health services	
MODULE CONTENTS: LO1. Promote and Provide Hygiene and Environmental Health Services 1.1 Principles and concepts of Hygiene and Environmental Health 1.1.1 Definition of terms 1.1.2 Concepts and principles of Hygiene and Environmental Health 1.1.3 Components of Environmental Health 1.1.4 Role of Environmental Health in Public Health 1.1.5 Steps in Environmental Health Planning 1.2 Environmental Health Hazards 1.2.1 Definition of Environmental Health Hazards 1.2.2 Categories of Environmental Health Hazards 1.2.3 Principles of Hazard Management 1.2.4 Environmental Pollution 1.2.5 Principles of Pollution Management 1.3 Personal Hygiene 1.3.1 Definition of Personal Hygiene 1.3.2 Cleanliness and hygiene 1.3.3 Public health Importance of Personal Hygiene 1.3.4 Components of Personal Hygiene 1.3.5 Planning Personal Hygiene Promotion activities 1.4 Healthful Housing 1.4.1 Definition of Healthful Housing 1.4.2 Basic requirements of Healthful Housing 1.4.3 Factors affecting Healthful Housing 1.4.4 Indoor Air Pollution 1.4.5 Planning for Improving Healthful Housing	
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- 1.5 Institutional Hygiene and sanitation
 - 1.5.1 Scope and Public Health Importance of Institutional Hygiene and Sanitation
 - 1.5.2 School hygiene and Sanitation
 - 1.5.3 Mill House Hygiene and Sanitation
 - 1.5.4 Planning for Improving Institutional Hygiene
- 1.6 Important Vectors in Public Health
 - 1.6.1 Definition of Vector
 - 1.6.2 Vector-born Disease transmission mechanism
 - 1.6.3 Classification of Vectors and Their life cycles
 - 1.6.4 Rodents
 - 1.6.5 Vector Management and Control
 - 1.6.6 Planning for Improving of Vector Control
- 1.7 Food Hygiene and Safety
 - 1.7.1 Principles in Food Hygiene and Safety
 - 1.7.2 Use and function of Food
 - 1.7.3 Principles of Safe Food preparation
 - 1.7.4 Food control
 - 1.7.5 Food Contamination and Spoilage
 - 1.7.6 Factors affecting Food Spoilage
 - 1.7.7 Infectious agents and Food Diseases
 - 1.7.8 Roots of microbial contamination of Food
 - 1.7.9 Components of Food Control System
 - 1.7.10 Communication and Education
- 1.8 Food Born Diseases and Outbreak
 - 1.8.1 Classification of Food Born Diseases
 - 1.8.2 Management of Food Born Diseases
- 1.9 Food Protection and Preservation
 - 1.9.1 Food Protection, Storage and Preparation
 - 1.9.2 Food Preservation
- 1.10 Hygienic requirements of Food and Drink Establishments
 - 1.10.1 Definition of terms
 - 1.10.2 Categories of Food and Drink Establishments
 - 1.10.3 Hygienic requirements of Food and Drink Establishments
 - 1.10.4 Food Handlers Health and Hygiene
 - 1.10.5 Sanitary Inspection in Food and Drink Establishments
- 1.11 Hygiene and safety requirements for food of Animal Origin
 - 1.11.1 Meat hygiene
 - 1.11.2 Milk hygiene
 - 1.11.3 Poultry and Egg hygiene
- 1.12 Water supply Safety
 - 1.12.1 Public Health Importance of Water
 - 1.12.2 Uses of Safe Water
 - 1.12.3 Criteria for Satisfactory water
 - 1.12.4 Barriers to provision of Safe Water
- 1.13 Treatment of Drinking Water at Household and Community level
 - 1.13.1 Water-born diseases
 - 1.13.2 Water Treatment
- 1.14 Community Drinking Water Source Protection
 - 1.14.1 Sources of Drinking Water

- 1.14.2 Planning the development of and Protection of Source of Water
- 1.14.3 Protection of Wells
- 1.14.4 Spring Water Source protection
- 1.14.5 Rainwater source Protection
- 1.14.6 Surface water source
- 1.15 Sanitary survey of Drinking Water
 - 1.15.1 Elements of Sanitary Survey
 - 1.15.2 Vulnerability assessment at water source
 - 1.15.3 Source of Water Quantity
 - 1.15.4 Sanitary Survey of Wells
 - 1.15.5 Sanitary Survey of Springs
 - 1.15.6 Sanitary Survey of rainwater collection and storage
 - 1.15.7 Water quality assessment
- 1.16 Water pollution and its Control
 - 1.16.1 Source Of Water Pollution
 - 1.16.2 Types of Water Pollutants
 - 1.16.3 Public Health Importance of Water Pollution
 - 1.16.4 Indicators of Water pollution
 - 1.16.5 Prevention and control of water pollution
- 1.17 Waste management
 - 1.17.1 Definition of terms
 - 1.17.2 Principles and Concepts of Waste Management
 - 1.17.3 Public health importance of Waste Management
 - 1.17.4 Main Components of Waste Management
 - 1.17.5 Liquid Waste Management
 - 1.17.6 Appropriate sanitation technology
 - 1.17.7 General Principles of Appropriate Sanitation Technology
- 1.18 Latrine Construction
 - 1.18.1 Concepts and Principles of Latrine Construction
 - 1.18.2 Types of latrine
 - 1.18.3 Ecological Sanitation
 - 1.18.4 Role of the Health Extension Worker in Latrine Construction
- 1.19 Latrine Utilization Changing Attitudes and Behavior
 - 1.19.1 Factors affecting the Use of Latrines and Hand Washing Facilities
 - 1.19.2 Benefits of Hygiene and Sanitation Behavior Change
 - 1.19.3 Motivating people to change their behavior
 - 1.19.4 Monitoring and Evaluation of Latrine Utilization
- 1.20 Solid Waste Management
 - 1.20.1 Sources and Classification of Solid Wastes
 - 1.20.2 Functional Elements of Solid Waste Management
 - 1.20.3 Integrated Solid Waste Management
 - 1.20.4 Surveying Solid Waste Management
- 1.21 Healthcare Waste Management
 - 1.21.1 Sources and Classification of Healthcare Waste Management
 - 1.21.2 Public Health Importance of Healthcare Waste Management
 - 1.21.3 Management of Hazardous Healthcare Wastes
 - 1.21.4 Methods of Healthcare Waste Treatment and Disposal

<p>1.21.5 Prevention and Control Risks to Healthcare Workers 1.21.6 Planning and Monitoring Healthcare Waste Management</p> <p>LO2. Establish and demonstrate community-appropriate sanitation technologies</p> <p>2.1 Concepts and Principles of Affordable Appropriate Technology 2.2 Community Approaches to total sanitation 2.3 Approaches to communal behavior Change</p> <p>LO3. Provide environmental health services</p> <p>3.1. Characteristics of good housing 3.2. Water associated diseases 3.3. Protection of spring and well water</p>
<p>LEARNING METHODS:</p> <ul style="list-style-type: none"> • Lecture, interactive • Demonstration • Group discussions • Case discussions and seminars
<p>ASSESSMENT METHODS:</p> <p>Competence may be assessed through:</p> <ul style="list-style-type: none"> • Practical assessment • Written exam/test • Oral questioning • Project work
<p>ASSESSMENT CRITERIA:</p> <p>LO1. Promote and Provide Hygiene and Environmental Health Services</p> <ul style="list-style-type: none"> • Target groups are identified to provide personal hygiene education. • Teaching forums and facilities required are identified and organized. • Hygiene and environmental health education are provided for the identified target groups in the appropriate forum. • Lesson covered and other activities implemented including inputs used under this element are recorded, analyzed, gaps identified and used for improving next the implementation at facility level, and reports are submitted to the reporting unit at district office. • Public health importance of solid and liquid waste management is properly addressed • Sources of solid and liquid waste are classified • Methods of solid and liquid waste disposal are well defined • Types and construction of latrine are well specified • Public health importance of vectors and insects are described <p>LO2. Establish and demonstrate community-appropriate sanitation technologies</p> <ul style="list-style-type: none"> • Sites for demonstration are identified and prepared. • Appropriate demonstration materials are assembled on site according to the specification • Community group are identified for the demonstration of new technology. • The purpose, use and application of the sanitation technology are described and elaborated according to the requirements. • Activities implemented including inputs are recorded, analyzed and used for improving the next implementation at facility level, and

reports are submitted to the reporting unit at district office.

LO3. Provide environmental health services

- Characteristics of good housing and basic requirements are identified and described
- Water associated diseases are well defined
- Protection of spring and well water with locally appropriate materials including Water treatment at home level is well demonstrated

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LEARNING MODULE 4	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Services Level III	
MODULE TITLE: Preventing and controlling common communicable diseases	
MODULE CODE: HLT HES3 M04 0213	
NOMINAL DURATION: 140 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to detect infectious diseases early, provide treatment , make follow up, referral in the process of prevention and control of communicable diseases.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Educate the community on early detection and prevention of communicable diseases LO2. Perform disease surveillance LO3. Follow up of cases	
MODULE CONTENTS: LO1. Educate the community on early detection and prevention of communicable diseases 1.1 Definition of terms 1.2 Introduction to Common communicable diseases 1.3 Basic concepts in the transmission of communicable diseases 1.4 Natural history of Common Communicable Diseases 1.5 The Burden of the Common Communicable Diseases 1.6 Diagnosis and Treatment of: <ul style="list-style-type: none"> • Malaria • Trachoma • Scabies 1.7 Strategies of Prevention and Control of Common communicable Diseases and Community Diagnosis 1.7.1 Tuberculosis 1.7.2 Leprosy 1.7.3 HIV/AIDS 1.7.4 Malaria 1.8 Treatment Regimen of Common Communicable Diseases like 1.8.1 Tuberculosis 1.8.2 Leprosy 1.8.3 HIV/AIDS 1.8.4 Malaria 1.9 Drugs for Common Communicable Diseases, their Benefits and Side Effect 1.9.1 Anti-TB Drugs, their Benefits and Side effects 1.9.2 Anti-Leprosy Drugs, their Benefits and Side effects 1.9.3 ARV Drugs their Benefits and Side effects 1.9.4 Anti-Malaria Drugs their Benefits and Side effects	

- 1.10 Adherence to Drug Treatment
- 1.11 Mechanisms how to trace Defaulters

LO2. Perform disease surveillance

- 2.1 General Principles of Public Health Surveillance
 - 2.1.1 Public Health Surveillance
 - 2.1.2 Data collection and Recording
 - 2.1.3 Analysis and interpretation of public Health Data
 - 2.1.4 Reporting public Health Data
 - 2.1.5 Linking surveillance information to practice
 - 2.1.6 Types of Public Health Surveillance
- 2.2 Integrated Disease Surveillance and Response
 - 2.2.1 Importance of Integrated Disease Surveillance and Response
 - 2.2.2 Roles of a Health Extension Worker in IDSR
 - 2.2.3 Case definition of priority diseases
 - 2.2.4 Reporting of Priority Diseases
- 2.3 Epidemic Investigation and Management
 - 2.3.1 Epidemics and Outbreak
 - 2.3.2 Types of Epidemic
 - 2.3.3 Epidemic Investigation
 - 2.3.4 Management of Epidemics

LO3. Follow up of cases

- 3.1 Follow up of Common Communicable Diseases Cases
 - 3.1.1 Follow up of patients with Tuberculosis
 - 3.1.2 Follow up of patients with Leprosy
 - 3.1.3 Follow up of patients with HIV/AIDS
 - 3.1.4 Follow up of patients with Malaria

LEARNING METHODS:

- Lecture and discussion
- Role play
- Group discussions
- Case discussions and seminars.

ASSESSMENT METHODS:

Competence may be assessed through:

- Practical assessment
- Written exam/test
- Oral questioning
- Project work

ASSESSMENT CRITERIA:

LO1. Educate the community on early detection and prevention of communicable diseases

- Community diagnosis / community need assessment is conducted based on the standard procedures.
- Plan is developed based on the identified gaps.
- Methods are selected as per the identified gaps.
- Teaching materials are collected as per the designed teaching methodologies.
- Communicable disease prevention and control methods are explained according to the existing health education guidelines.

- PIHTC is promoted according to the standard guidelines.
- Activities are reported, documented, and follow up is done based on the standard format.

LO2. Perform disease surveillance

- Preparations are made for surveillance
- Logistics are prepared based on the standard procedures.
- Data are collected through active and passive surveillance procedures.
- Case is determined (possible, probable) based on the standard case definition.
- Timely and complete reports (public burden, epidemic prone, under elimination/eradication) are submitted using the existing guidelines. Appropriate action is carried out in collaboration with different stake holders.
- Feedback are collected and disseminated to the concerned bodies as per the existing formats.

LO3. Follow up of cases

- Cases are notified from the referral format.
- House to house visit is conducted.
- Defaulters are traced and advice is given.
- Anti-TB drugs are administered when cases are transferred out from the health center based on the National Treatment Guideline

FINAL DRAFT (MOS)

LEARNING MODULE 5	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Services Level III	
MODULE TITLE: Preventing and Controlling common Non-Communicable Diseases	
MODULE CODE : HLT HES3 M05 0213	
NOMINAL DURATION: 40 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and right attitudes required to teach the community on the significance of change in life style in prevention and control of non-communicable diseases, (Diabetes Mellitus, Hypertension, Chronic Obstructive Pulmonary Diseases, Cancer, and Cataract, and Mental illness, Disability, etc). It also describes the knowledge and skills required to detect non-communicable diseases and refer early, to provide community rehabilitation for those with disabilities.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Educate the community on healthy life style and early detection of diseases LO2. Screen and refer clients requiring further investigation and management LO3. Follow up cases and promote community based rehabilitation	
MODULE CONTENTS: LO1. Educate the community on healthy life style and early detection of diseases 1.1 Introduction to non-communicable diseases LO2. Screen and refer clients requiring further investigation and management 2.1 Detection of common non-communicable Diseases : 2.1.1 Mental health problem 2.1.2 Hypertension 2.1.3 Diabetes Mellitus 2.1.4 Cancers 2.1.5 Cataract, Eye and Ear injuries 2.1.6 Disability and community rehabilitation 2.2 Screening and referring cases with non communicable diseases LO3. Follow up cases and promote community based rehabilitation 3.2 Follow up of Non-Common Communicable Diseases Cases 3.2.1 Health Education on Healthy life style 3.2.2 Follow up of patients with Mental health 3.2.3 Follow up of patients with Hypertension 3.2.4 Follow up of patients with Diabetes mellitus 3.2.5 Follow up of patients with cancer 3.2.6 Follow up of cases with cataract, eye and ear injuries	

LEARNING METHODS:

- Lecture and discussion
- Group discussions
- Case discussions and seminars.

ASSESSMENT METHODS:

Competence may be accessed through:

- Practical assessment
- Written exam/test
- Oral questioning

ASSESSMENT CRITERIA:

LO1. Educate the community on healthy life style and early detection of diseases

- IEC materials are prepared and health education is provided
- Community diagnosis is carried out based on the standard procedure
- Plan is developed based on the identified gaps from the community assessment
- Methods are selected based on the problem identified
- Activity is reported and follow up is done based on the recommended format

LO2. Screen and refer clients requiring further investigation and management

- Pertinent history (Hx) and physical examination (P/E) are done based on the standard procedure
- Cases beyond the scope are referred for further investigation and management as per the referral procedure

LO3. Follow up cases and promote community based rehabilitation

- Community diagnosis is carried out based on the standard procedure.
- Communities are mobilized for taking care of people with disabilities
- Trainings are conducted to select family members and community based organizations.
- Cases are followed up as per the feed back obtained from the health institution

LEARNING MODULE 6	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Services Level III	
MODULE TITLE: Promoting Community Nutrition	
MODULE CODE: HLT HES3 M06 0213	
NOMINAL DURATION: 80 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and right attitudes required to support the provision of basic nutrition education to the community.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Collect appropriate information for preparing nutrition education LO2. Provide basic nutrition information/education to the client LO3. Monitor client's response to the information/education	
MODULE CONTENTS: LO1. Collect appropriate information for preparing nutrition education 1.1 Introduction to Nutrition 1.2 Definition of terms 1.3 Food and Nutrition 1.3.1. Components of food 1.3.2. Macro and micro nutrients 1.3.3. Supplementary food 1.4. Nutritional Deficiency Diseases 2.1.1 Kwashiorkor and its prevention methods 2.1.2 Marasmus and its prevention methods 2.1.3 Protein-energy malnutrition (Marasmic-Kwashiorkor) 2.1.4 Vitamin deficiency Diseases and their prevention methods 2.1.5 Mineral deficiency diseases and their prevention methods 2.1.6 Preparation of different foods through demonstration LO2. Provide basic nutrition information/education to the client 2.1. Collection of information 1.3.1 Assessment of Nutritional Status 1.3.1.1 Anthropometric assessment 1.3.1.2 Biochemical assessment 1.3.1.3 Clinical assessment 1.3.1.4 Dietary assessment 1.3.2 Community Diagnosis 2.2. Strategies to Prevent Nutritional Deficiency Diseases 2.3. Feeding Different Groups of People 2.3.1. Feeding of pregnant women 2.3.2. Feeding of lactating mothers 2.3.3. Child Feeding 2.3.4. Adolescent and adult feeding	

<p>2.3.5. Feeding the elderly</p> <p>2.4. Methods of Nutrition Communication</p> <p>2.4.1. Meeting</p> <p>2.4.2. Demonstration</p> <p>2.4.3. Communicating messages through the mass media</p> <p>2.4.4. Use of IEC materials</p> <p>2.4.5. Peer education</p> <p>LO3. Monitor clients' response to the information/education</p> <p>3.1 Monitoring and Evaluation</p>
<p>METHODS:</p> <ul style="list-style-type: none"> • Lecture and discussion • Demonstration • Group discussions • Case discussions and seminars
<p>ASSESSMENT METHODS:</p> <p>Competence may be accessed through:</p> <p>3. Practical assessment</p> <p>4. Written exam/test</p> <p>5. Oral questioning</p>
<p>ASSESSMENT CRITERIA:</p> <p>LO1. Collect appropriate information for preparing nutrition education</p> <ul style="list-style-type: none"> • Client education requirements are obtained from community assessment • Basic educational materials and products are gathered according to the directions of the nutrition guideline. • The community is consulted about the appropriateness of the language, cultural value and convenience of time for participation <p>LO2. Provide basic nutrition information/education to the client</p> <ul style="list-style-type: none"> • The purpose of the information/education is confirmed based on the nutrition national guideline • The client is guided to ensure that meal choices are consistent with the nutritional care plan designed in the guideline • Practical nutritional education is provided to support meal and food choices consistent with nutrition care plan • Appropriate nutrition resources and equipment are made available for teaching • The feedback of plan implementation is provided to Woreda health office <p>LO3. Monitor client's response to the information/education</p> <ul style="list-style-type: none"> • Clients are monitored according to the nutrition care plan, using the appropriate monitoring/reporting strategies • Client deviations are identified from the nutrition care Plan and the

- community health nurse is consulted to restore appropriate course of action
- The daily progress of nutritional plan implementation is compiled and reported.

LEARNING MODULE 7	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Services Level III	
MODULE TITLE: Promoting and Providing Ante-Natal Care	
MODULE CODE: HLT HES3 M07 0213	
NOMINAL DURATION: 80 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to provide antenatal examination, advices and conduct early referral of cases with abnormalities and/or complications during pregnancy and delivery.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Provide antenatal examination and information for pregnant woman LO2. Conduct home visit and refer pregnant woman with risk factors	
MODULE CONTENTS: LO1. Provide antenatal examination and information for pregnant woman 1.1 Definition of terms 1.2 Introduction to anatomy and physiology of the female reproductive system 1.2.1.1 External female genitalia 1.2.1.2 Internal female reproductive organs 1.2.1.3 Anatomy of the female pelvic 1.2.1.4 The fetal skull 1.2.1.4.1. Fontanels and Sutures of the fetal skull 1.2.1.4.2. Regions and landmarks in the fetal skull 1.3 Hormonal and physiological changes during pregnancy 1.3.1. The female reproductive hormones 1.3.2. Physiological changes during pregnancy 1.4 Fertilization and zygote implantation 1.5 Diagnosing pregnancy 1.5.1 Possible Symptoms of Pregnancy 1.5.2 Probable signs of pregnancy 1.5.3 Positive signs and symptoms of pregnancy 1.6 Focused antenatal care 1.6.1 Concepts and Principles of Focused Antenatal Care (FANC)	

- 1.6.2 The Antenatal Care Card
 - 1.7 Promoting Antenatal Care
 - 1.7.1 Health promotion, advocacy and community mobilization
 - 1.7.1.1 Nutrition during pregnancy
 - 1.7.1.2 Hygiene During Pregnancy
 - 1.7.1.3 Living a healthy lifestyle
 - 1.7.1.4 Benefits of early and exclusive breastfeeding
 - 1.7.1.5 Advocacy and community mobilization
 - 1.7.1.5.1. Opinion leaders as advocates of antenatal care
 - 1.7.1.5.2. Men as advocates of antenatal care
 - 1.8 General Assessment of the Pregnant Woman
 - 1.8.1 Checking for signs and Symptoms of malnutrition/under nutrition
 - 1.8.2 Checking her vital signs
 - 1.9 Identifying possible risk factors in Pregnancy
 - 1.9.1 Pre-eclamsia and Eclamsia
 - 1.9.2 Multiparty
 - 1.9.3 Multiple pregnancy
 - 1.9.4 Anemia, Diabetes, etc.
 - 1.10 Estimating Gestational Age from Fundal Height Measurement
 - 1.10.1 Measuring The Fundal Height
 - 1.11 Assessing the Fetus
 - 1.11.1 Finding the Baby's Position in the Uterus
 - 1.11.2 Inspecting and palpating the mother's abdomen
 - 1.11.3 Listening /auscultation/ for the fetal Heartbeat
 - 1.12 Minor Disorders of Pregnancy and its management
 - 1.13 Common Medical Disorders in Pregnancy
- LO2. Conduct home visit and refer pregnant woman with risk factors**
- 2.1 Identifying risk factors
 - 2.2 Refer mothers with risk factors
 - 2.3 Home care visit

LEARNING METHODS:

- Lecture and discussion
- Role play
- Group discussions
- Case discussions and seminars
- Demonstration(simulation/real)

ASSESSMENT METHODS:

Competence may be accessed through:

- Practical assessment
- Written exam/test
- Oral questioning
- Project work (real or simulation)

ASSESSMENT CRITERIA:**LO1.** Provide antenatal examination and information for pregnant woman

- General, social and obstetric health history are taken and documented to deliver health care.
- Symptoms of pregnancy are identified .Antenatal care plan is prepared in consultation with the pregnant woman based on the standard protocols and client requirements.
- Information on healthy living and maternal health risk factors are discussed.
- Antenatal examination is performed in line with the standard protocols and client requirements.
- Information on birthing options, signs of labor, and stages of labor, pain management techniques and family attendance at delivery are provided for client.
- Sign and symptoms of minor disorders of pregnancy and potential serious complication are identified to provide advices and refer to the next level.
- Information is provided on PMTCT.
- Women are supported to obtain the necessary medicines and provided with appropriate information on use.

LO2.Conduct home visit and refer pregnant woman with risk factors

- Registers of women undergoing antenatal care are maintained according to the organizational policies and procedures.
- Schedules of participation in antenatal care and use are kept to organize the continuing care for women.
- Reminders and other assistance are organized and/or provided to attend the ANC care according to women's needs.
- Referral and communication networks with Medical staff, and midwives allied health staff, birthing facilities and female community elders are maintained.
- Records on attendance for antenatal care and birthing outcomes are kept and used to follow antenatal care.

LEARNING MODULE 8	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Promoting Institutional Delivery and Providing delivery Service	
MODULE CODE: HLT HES3 M8 0213	
NOMINAL DURATION: 200 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to support women during childbirth and manage the process of normal delivery in a community both at home and health post.	
LEARNING OUTCOMES At the end of the module the learner will be able to: <ul style="list-style-type: none"> LO1. Support woman during child birth LO2. Provide normal delivery LO3. Provide immediate neonatal care 	
MODULE CONTENTS: LO1. Support woman during child birth <ul style="list-style-type: none"> 1.1. Labor <ul style="list-style-type: none"> 1.1.1 Introduction to labor 1.1.2 Mechanisms of labor 1.1.3 Assessment of labor 1.1.4 Stages of labor 1.1.5 Care of the women in labor 1.1.6 Using the partograph LO2. Provide normal delivery <ul style="list-style-type: none"> 2.1. Conducting normal labor 2.2. Active management of third stage of labor 2.3. Abnormal presentation, multiple pregnancy and their management LO3. Provide immediate neonatal care <ul style="list-style-type: none"> 3.1. Essential newborn care 3.2. Neonatal resuscitation 	
LEARNING METHODS: <ul style="list-style-type: none"> • Lecture and discussion • Role play • Group discussions • Case discussions and seminars • Demonstration (real/simulation) 	
ASSESSMENT METHODS: Competence may be accessed through: <ul style="list-style-type: none"> • Practical assessment • Written exam/test • Oral questioning 	

ASSESSMENT CRITERIA:

LO1. Support woman during child birth

- Local birthing practices and cultural beliefs are identified and discussed with women in planning and advocating for appropriate childbirth.
- Roles, relationships and responsibilities to support safe birthing are discussed, including the role of the trained birth attendants and health extension worker as an advocate for women and families.
- Information on Episiotomy and breasts engorgement is given.
- Signs and symptoms of onset of labor are discussed and identified to support women in attending a delivery service as required.

LO2. Provide normal delivery

- Midwifery kit for normal delivery and instructions are maintained in community settings.
- Urgent professional assistance is sought and provides advice with delivery.
- Locally available resources are prepared to manage normal delivery in a community setting.
- Helpers are identified appropriately based on experience and knowledge.
- Appropriate equipment and medication are prepared for delivery according to existing delivery manual.
- Basic management of second and third stages of labour is instituted if needed

LO3. Provide immediate neonatal care

- APGAR score are identified and properly managed and reported
- Bleeding from umbilical knob are identified and managed properly

LEARNING MODULE 9	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Promoting and Providing Post-Natal Care	
MODULE CODE: HLT HES3 M9 0213	
NOMINAL DURATION: 40 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to provide postnatal health care services for mothers and infants.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Provide services for lactating mothers on infant care, nutrition and exclusive breast feeding LO2. Organize follow up maternal health program	
MODULE CONTENTS: LO1. Provide services for lactating mothers on infant care, nutrition and exclusive breast feeding 1.1.1. Introduction to post natal care 1.1.2. When most mothers and new borns do dies in the post natal period? 1.1.3. Management of mothers and newborns in the post natal period 1.1.4. Normal puerperium 1.1.5. The abnormal puerperium and its management LO2. Organize follow up maternal health program 2.1. Preparation for postpartum care 2.2. Home visit: The best opportunity to provide post natal care 2.2.1. Schedule for post natal home visit 2.2.2. Counseling during the post natal period 2.2.3. Routine core postnatal care for the mother 2.2.4. Nutrition after child birth 2.2.5. Emotional support 2.2.6. Encouraging care seeking behaviour 2.3. Routine Screening for newborns life-threatening conditions 2.3.1. Screening for danger signs of the new born 2.3.2. Screening for jaundice 2.3.3. Infection in the newborn 2.3.4. Neonatal assessment check list for critical conditions 2.4. Breast feeding: The warm chain principle and counseling HIV positive mother	

<ul style="list-style-type: none"> 2.4.1. Counseling the mother on newborn feeding 2.4.2. Benefits of breast feeding 2.4.3. Counseling HIV positive mother about feeding her baby 2.4.4. Keeping the baby warm 2.5. Special care for preterm and low birth weight babies <ul style="list-style-type: none"> 2.5.1. Why do preterm and low birth weight babies need special care? 2.5.2. Classification of preterm and low birth weight babies 2.5.3. Counseling on how to feed preterm and low birth weight babies 2.5.4. Kangaroo mother care 2.6. Making a referral for post natal care <ul style="list-style-type: none"> 2.6.1. Effective referral 2.6.2. The referral link: a two way street
<p>LEARNING METHODS:</p> <ul style="list-style-type: none"> • Lecture and discussion • Demonstration • Group discussions
<p>ASSESSMENT METHODS:</p> <ul style="list-style-type: none"> 6. Written exam/test 7. Oral questioning 8. Practical assessment
<p>ASSESSMENT CRITERIA:</p> <p>LO1. Provide services for lactating mothers on infant care, nutrition and exclusive breast feeding</p> <ul style="list-style-type: none"> • Observation for mother and infant is made and recorded in line with the standard protocols and organizational guidelines. • Information and support for self-care and wellbeing are provided during post-natal period. • Advice is provided on routine care of the newborn to the mothers. • Strategies to establish and support exclusive breast-feeding are implemented. • The importance of nutrition, exercise, rest, sleep and support with domestic tasks and care of family are discussed with the client in the immediate postnatal period. • Minor post-natal problems for mother and Newborn are identified to provide appropriate advice and care, and for possible referral • Information is provided on contraceptive options. <p>LO2. Organize follow up maternal health program</p> <ul style="list-style-type: none"> • Registration of women undergoing postnatal care is maintained according to organizational guidelines and procedures. • Schedules of participation in postnatal care are kept and used to organize the continuing care for the lactating mother and infant. • Reminders and other assistance are organized to attend care according to the lactating mother's needs • Referral and communication networks are maintained with medical staff,

- midwives, allied health staff, and community elders
- Records on attendance for antenatal care and birthing outcomes are kept and used to follow maternal health programs

LEARNING MODULE 10	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Promoting child survival, growth and development and applying integrated Community Case Management (ICCM)	
MODULE CODE: HLT HES3 M10 0213	
NOMINAL DURATION: 102 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to promote child survival, growth and development and apply Integrated Community Case Management (ICCM) in the health post and within the surrounding vicinity.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Promote child survival, growth and development activities LO2. Assess and manage common child hood illness LO3. Refer child requiring further care	
MODULE CONTENTS: LO1. Promote child survival, growth and development activities 1.1. Feed the child as per the recommendations 1.2. Play and communicate with the child 1.3. Prevent illnesses 1.4. Respond to child's illnesses 1.5. Provide follow up care 1.6. Prevent child abuse and neglect LO2. Assess and manage common child hood illnesses 2.1. Introduction to ICCM 2.1.1. The ICCM assessment 2.1.2. The ICCM case management 2.1.3. General danger signs (GDS) 2.2. Maternal newborn and child health 2.2.1. Essential newborn care 2.2.2. Newborn danger signs 2.2.3. Low birth weight and its management 2.3. Management of bacterial infection and jaundice in the new born and young infants	

- 2.3.1. Assessment and management of bacterial infection
- 2.3.2. Assessment and management of jaundice
- 2.4. Assess and classify cough or of difficulty breathing
 - 2.4.1. Assessing cough or difficult breathing
 - 2.4.2. Classifying cough or difficult breathing
 - 2.4.3. Treatment of cough or d difficult breathing
 - 2.4.4. Follow up care for pneumonia
- 2.5. Management of diarrheal diseases in young infant and children
 - 2.5.1. Assess and classify diarrhea
 - 2.5.2. Management of dehydration
 - 2.5.3. Classification of persistent diarrhea
 - 2.5.4. Management of persistent diarrhea
 - 2.5.5. Classification and management of dysentery
- 2.6. Management of sick children with fever
 - 2.6.1. Assessment and classification of fever
 - 2.6.2. Management of fever or malaria
- 2.7. Malnutrition and anemia in the sick child
 - 2.7.1. Causes of malnutrition
 - 2.7.2. Assessment and classification of malnutrition
 - 2.7.3. Management of malnutrition and anemia
- 2.8. HIV infection in infant and children
 - 2.8.1. Assessment and classification of HIV infection in children
 - 2.8.2. Management of HIV infection in children
- 2.9. Infant and young child feeding
 - 2.9.1. Assessing and classifying feeding problem in children
 - 2.9.2. Infant and young child feeding recommendation
- 2.10. Immunization and related interventions
 - 2.10.1. Providing immunization service
 - 2.10.2. Contraindications to vaccine administration
- 2.11. Ear problem and other common childhood infections
 - 2.11.1. Classification and management of ear problem
 - 2.11.2. Classification and management of throat problem
 - 2.11.3. Classification and management of skin infection
 - 2.11.4. Eye infection and its management

LO3. Refer child requiring further care

- 3.1. Refer child with serious illnesses
- 3.2. Effective communication with care givers

LEARNING METHODS:

- Lecture and discussion
- Demonstration
- Clinical practice
- Field visit
- Group discussions
- Case discussions and seminar

ASSESSMENT METHODS:

- Written exam/test
- Oral questioning
- Practical exam

ASSESSMENT CRITERIA:**LO1.** Perform child growth and development activities

- Appropriate child feeding practices are communicated and demonstrated to the care givers
- Communication and playing mechanisms are communicated and demonstrated to the care givers
- Appropriate messages to prevent illnesses are communicated and demonstrated to the care givers
- Messages on health seeking behaviors are communicated to the care givers
- Communicate on child abuse practices and neglect to the care givers

LO2. Assess and manage common child hood illnesses

- Diagnoses and classifications are made based on history, physical examination
- Treatments and follow up are undertaken for minor /uncomplicated cases based on ICCM and other treatment guidelines.

LO3 Refer client requiring further care

- Relevant client details are documented according to clinic standard guidelines.
- Client confidentiality is maintained at all times and levels.
- Pre referral care is provided
- Documentation for referral procedures is ensured.
- Appropriate information to individuals involved in referral is conveyed to facilitate understanding and optimal care.
- Maintain client care until responsibility is taken over by staff of the receiving health institutions during referral.

LEARNING MODULE 11	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Promoting and Implementing Immunization	
MODULE CODE: HLT HES3 M11 0213	
NOMINAL DURATION: 120 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and right attitudes for planning and efficient and effective implementation of the immunization programs.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Plan immunization programs LO2. Conduct immunization programs	
MODULE CONTENTS: LO1. Plan immunization programs	

<p>1.1. Immunity, Vaccine and the expanded program on immunization (EPI)</p> <p>1.1.1. Introduction immunity and EPI</p> <p>1.1.2. EPI: vaccine preventable diseases</p> <p>1.1.3. Types of vaccine</p> <p>2.1. Communication for an effective immunization program</p> <p>2.1.1. Planning a communication activity</p> <p>2.1.2. Behavioral change communication (BCC)</p> <p>2.1.3. Meeting with target audience to promote EPI activity</p> <p>LO2. Conduct immunization programs</p> <p>1.1. Vaccine preparation</p> <p>1.2. Route of administration of vaccines</p> <p>1.3. Immunization delivery at various sites</p> <p>1.4. Monitoring EPI indicators</p> <p>1.5. Record, analyzing and interpreting immunization data</p>
<p>LEARNING METHODS:</p> <ul style="list-style-type: none"> • Lecture • Group discussions • Demonstration • Role play • Clinical practice
<p>ASSESSMENT METHODS:</p> <p>Competence may be accessed through:</p> <ul style="list-style-type: none"> • Written exam/test • Oral questioning • Practical assessment (real/simulation)
<p>ASSESSMENT CRITERIA:</p> <p>LO1. Plan immunization programs</p> <ul style="list-style-type: none"> • Data for planning including defaulters are collected, analyzed and reported • Immunization programs are planned to achieve maximum immunization rates and protect the public. <p>LO2. Conduct immunization programs</p> <ul style="list-style-type: none"> • Resources and materials are collected and managed for immunization sessions to facilitate a professional and efficient program. • Communication is undertaken with the relevant health and education professionals and relevant government agencies to maximize the effectiveness of the immunization programs. • Immunization programs are conducted and reviewed as planned. • Records on immunization are maintained in a safe, accurate and efficient manner

LEARNING MODULE 12	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Promoting and Providing Family Planning service	
MODULE CODE: HLT HES3 M12 0213	
NOMINAL DURATION: 120 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and right attitudes for planning, implementing, monitoring and follow up of family planning services and referral of family planning clients beyond the health post level.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Educate the community on family planning options/methods LO2. Provide family planning service	
MODULE CONTENTS: LO1. Educate the community on family planning options 1.1. Introduction to population and family planning 1.2. Family planning methods LO2 Provide family planning service 2.1. Oral contraceptive 2.2. Injectable contraceptive 2.3. IUCD 2.4. Implant 2.4.1. Overview of sub dermal implant 2.4.2. Implanon sub dermal implant 2.4.3. Implanon insertion clinical skill	
LEARNING METHODS: 9. Lecture and discussion • Demonstration/Role play • Group discussions	
ASSESSMENT METHODS: • Practical assessment • Written exam/test • Questioning or interview	
ASSESSMENT CRITERIA: LO1. Educate the community on family planning options • Information on available methods, types of contraception and advantages of each contraceptive is identified. • Advice is given on how to use and possible side effects of each contraceptive.	

- The advantages and disadvantage of natural method are identified
- contraceptives like condom, oral contraceptives, Injectable contraceptives and implanon are provided

LO2. Provide family planning service

Priority health needs are identified based on community health diagnosis

- Skills on FP advice for the target people are demonstrated.
- Skill on linking FP with other RH services such as STIs screening and management and the availability of abortion care depending on the permitted abortion law are demonstrated

FINAL DRAFT (MOH)

LEARNING MODULE 13	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Promoting and Providing Adolescent and Youth Reproductive health services	
MODULE CODE: HLT HES3 M13 0213	
NOMINAL DURATION: 30 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to plan, promote and provide adolescent and youth friendly reproductive health service at the health post, school, household, and community	
LEARNING OUTCOMES At the end of the module the learner will be able to: <ul style="list-style-type: none"> LO1. Plan adolescent and youth RH services LO2. Promote adolescent and youth RH services LO3. Provide RH service packages LO4. Register and document RH records 	
MODULE CONTENTS: <ul style="list-style-type: none"> LO1. Plan adolescent and youth RH services <ul style="list-style-type: none"> 1.1 Adolescent and Youth Reproductive Health <ul style="list-style-type: none"> 1.1.1 Definition of terms 1.1.2 Concepts and Principles of Adolescent and Youth Reproductive Health 1.1.3 Importance of Adolescent and Youth RH 1.1.4 Strategies for Promoting Adolescent and Youth RH 1.1.5 Protecting Adolescent Sexual and RH 1.1.6 Reproductive Health Risks of Adolescents 1.1.7 RH rights of Adolescent and Young People 1.2 Planning Adolescent and Youth RH Program <ul style="list-style-type: none"> 1.2.1 Organizing Adolescent and Youth Friendly RH services 1.2.2 Organizing School based Adolescent and Youth RH 1.2.3 Organizing Household and Community level Adolescent and Young RH Programs LO2. Promote adolescent and youth RH services <ul style="list-style-type: none"> 2.1 Development Changes in Adolescence 2.2 Education on the Adolescent Reproductive Health Related Problems <ul style="list-style-type: none"> 2.2.1 HIV/AIDS and other sexually transmitted infections 2.2.2 Female Genital Mutilation 2.2.3 Marriage by Abduction 2.2.4 Polygamy 2.2.5 Abortion 2.2.6 Early marriage 2.2.7 Alcoholism 	

<p>2.2.8 Addictive Substances and Narcotics (substance abuse)</p> <p>2.2.9 Social Problems</p> <p>2.2.10 Gender based Violence</p> <p>2.3 Preventive Measures of Adolescent RH related Health Problems</p> <p>LO3. Provide RH service packages</p> <p>3.1 Adolescent and Youth Friendly RH services</p> <p>3.1.1 Reproductive Health Services for Young People</p> <p>3.1.2 Barriers to RH Service Utilization</p> <p>3.1.3 Interaction With young People at A Health Post</p> <p>3.1.3.1 Establishing Good Rapport with Young People</p> <p>3.1.3.2 History Taking on Young Health Problems</p> <p>3.1.3.3 Doing Physical Examination</p> <p>3.2 Establishment and Organization of Youth Recreational facilities</p> <p>3.3 Provision of Family Planning and Reproductive Health Services</p> <p>LO4. Register and document RH records</p> <p>4.1 Data registration and documentation</p> <p>4.2 Information Management, Monitoring and Evaluation</p> <p>4.3 Report writing</p>
<p>LEARNING METHODS:</p> <ul style="list-style-type: none"> • Lecture and discussion • Role play • Group discussions • Case discussions and seminars..
<p>ASSESSMENT METHODS</p> <ul style="list-style-type: none"> • Written exam/test • Practical assessment • Oral questioning

ASSESSMENT CRITERIA:

LO1. Plan adolescent and youth RH services

- Eligible and target groups for RH are identified
- Resource mapping is conducted using the standard format of FMOH
- Action plan is developed based on the priority health need

LO2. Promote adolescent and youth RH services

- Influential community representatives and volunteers are identified and consulted
- RH service promotion and education are organized and promoted in partnership with the community and relevant organizations on the basis of inter-sectoral approach
- RH service promotion and education are provided and sustained to meet community and organizational requirements on the basis of duty and responsibilities of all stakeholders
- RH problem are supported to take self-care approach in line with the individual needs for changing unhealthy behavior on the basis of healthy promotion and strategic behavioral change approach of FMOH

LO3. Provide RH service packages

- Advice is given on client RH symptom of RH problem, service seeking behavior, and compliance on advice and treatment based on the national adolescent and youth RH guideline.
- Low risk conditions are managed according to the guidelines.
- High risk conditions are referred to the next higher health facility according to the standard protocol.
- Follow up is undertaken according to the focused antenatal protocol.

LO4. Register and document RH records

- Registration book for nutritional events registration is prepared according to HMIS standards of FMOH
- RH events data are collected continuously, sustained and updated timely on the basis of HMIS guideline of FMOH
- RH services are reported and communicated to the higher level and relevant body on the basis of HMIS procedure of the FMOH
- Plan is revised on adolescent and youth RH health services for the catchments for a specific period of time

LEARNING MODULE 14	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Providing First Aid	
MODULE CODE: HLT HES3 M14 0213	
NOMINAL DURATION: 90 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to deliver first aid and basic client care in the health post and within the surrounding area of the community.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1 Assess and identify client's conditions LO2 Provide first aid service LO3 Refer client requiring further care	
MODULE CONTENTS: LO1. Assess and identify client's conditions 1.1. Relevant history and physical examination 1.2. Identify the emergency condition LO2. Provide first aid service 2.1. General principles for 1 st aid 2.2. Giving immediate & adequate management 2.3. Consider (give) priority 2.4. Arrangement for transportation accordingly LO3 Refer client requiring further care 3.1. Documentation of referral notes 3.2. Communication about client's care 3.3. Refer clients to the next level	
LEARNING METHODS: <ul style="list-style-type: none"> • Lecture and discussion • Demonstration • Clinical practice • Group discussions • Case discussions and seminar 	
ASSESSMENT METHODS: <ul style="list-style-type: none"> • Written exam/test • Oral questioning • Practical exam 	

ASSESSMENT CRITERIA:

LO1. Assess and identify client's conditions

- *Vital signs* are checked and monitored in accordance with local health post standard guidelines.
- *History of the event* is obtained by data records

LO2. Provide first aid service

- Correctly operate clinical equipment as required for **client management** according to manufacturer/supplier's instructions and local clinical guidelines/protocols
- **Client** care techniques are implemented in accordance with procedures and techniques applicable to health post

LO4. Refer client requiring further care

- Relevant client details are documented according to Health post standard guidelines.
- Client confidentiality is maintained at all times and levels.
- **Documentation** for referral procedures is ensured.
- Appropriate information to individuals involved in referral is conveyed to facilitate understanding and optimal care.
- Maintain client care until responsibility is taken over by staff of the receiving health institutions during referral.

FINAL DRAFT (MOH)

LEARNING MODULE 15	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Managing Community Health Services	
MODULE CODE: HLT HES3 M15 0213	
NOMINAL DURATION: 20 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to manage community health services following organization policies and procedures in an ethical manner.	
<p>LEARNING OUTCOMES</p> <p>At the end of the module the learner will be able to:</p> <p>LO1. Follow organizational guidelines, understand health policy and service delivery system</p> <p>LO2. Work ethically</p> <p>LO3. Provide team leadership and assign responsibilities</p> <p>LO4. Establish quality standards, assess and record quality of service delivery</p> <p>LO5. Manage work and resources at a Health Post</p> <p>LO6. Lead workplace communication</p>	
<p>MODULE CONTENTS:</p> <p>LO1. Follow organizational guidelines, understand health policy and service delivery system</p> <p>1.1. Health services in Ethiopia</p> <p>1.1.1 Definition of terms</p> <p>1.1.2 Historical development of Ethiopian health services</p> <p>1.1.3 Organization of health service delivery</p> <p>1.1.4 Concepts of primary healthcare</p> <p>1.2. Definition and uses of guideline</p> <p>LO2. Work ethically</p> <p>2.1. Introduction to Health care Ethics</p> <p>2.1.1. Principles of Health care Ethics</p> <p>2.1.2. Rights and obligations of HEW</p> <p>LO3. Provide team leadership and assign responsibilities</p> <p>3.1. Provide team leadership</p> <p>3.1.1. Introduction to team and leadership</p> <p>3.1.2. Getting organized</p> <p>3.1.3. Building a team</p> <p>3.1.4. Leading a team</p> <p>3.1.5. Motivating a team</p> <p>3.1.6. Training your team</p> <p>LO4. Establish quality standards, assess and record quality of service delivery</p> <p>4.1. Definition of quality of service delivery</p> <p>4.2. Setting standards for quality of service</p>	
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4.3. Assessment and recording of services delivered

LO5. Manage work and resources at a Health Post

- 5.1. Developing community profile
 - 5.1.1. Definition of community Profile
 - 5.1.2. Purpose of community profile
 - 5.1.3. Data collection for new community profile
 - 5.1.4. Identifying priority health problems for further investigations
 - 5.1.5. Writing a report on your community
- 5.2. Management and leadership in community healthcare
 - 5.2.1. Definition of Management and Leadership
 - 5.2.2. Concepts and Principles of Management
 - 5.2.3. Management functions
 - 5.2.4. Management roles and levels
- 5.3. Planning health programs
 - 5.3.1. Planning process
 - 5.3.2. Types of planning
 - 5.3.3. Stages of operational planning
- 5.4. Monitoring and control
 - 5.4.1. Monitoring in healthcare management
 - 5.4.2. Steps of managerial control
 - 5.4.3. Constructive and effective feedback
- 5.5. Management of supplies at health post level
 - 5.5.1. Management of equipment
 - 5.5.2. Ordering and Controlling supplies
 - 5.5.3. Management of pharmaceutical supplies in your health post store
 - 5.5.4. Education about drugs and other medications

LO6. Lead workplace communication

- 6.1. Introduction to communication
- 6.2. Elements of communication
- 6.3. Barriers to communication
- 6.4. Types of communication

LEARNING METHODS:

- Lecture and discussion
- Group discussions
- Practical
- Project work

ASSESSMENT METHODS:

- Written exam/test
- Oral questioning
- Practical exam

ASSESSMENT CRITERIA:

LO1. Follow organizational guidelines, understand health policy and service delivery system

- The policy and organization of the health care system of Ethiopia is comprehended
- Primary healthcare in Ethiopia is understood
- Elements of primary health care are identified

- Health service extension program is understood
- Workplace instructions and policies are followed.
- Organizational programs and procedures are supported within the job role.
- Organizational resources are used for the purpose intended.

LO2. Work ethically

- Alignment of decisions and actions within job description is ensured and are consistent with organization values
- Duties are performed promptly and consistently in all workplace activities
- Inappropriate gifts are not accepted
- Client resources and possessions are used for the purpose intended
- Reasonable and careful manner are behaved at all times
- Confidentiality is maintained in accordance with organization requirements
- Difficulties in carrying out duties are reported to appropriate person/supervisor

LO3. Provide team leadership and assign responsibilities

- Work requirements are identified and presented to team members
- Reasons for instructions and requirements are communicated to team members
- Duties and responsibilities are allocated having regard to the skills, knowledge and aptitude required to properly undertake the assigned task and according to company policy
- Duties are allocated having regard to individual preference, domestic and personal considerations, whenever possible

LO4. Establish quality standards, assess and record quality of service delivery

- Quality standard procedures for health services are developed and agreed upon.
- Quality standard procedures are documented in accordance with the organization policy.
- Standard procedures are introduced to organizational staff / personnel.
- Standard procedures are revised / updated when Necessary
- Services delivered are checked and evaluated against organization quality standards and parameters and specifications.
- Gaps are identified and corrective actions are taken in accordance with organization policies and procedures
- Records of the quality performance activities are kept in accordance with organization procedures.
- Information on quality and other indicators of service performance is recorded

LO5. Manage work and resources at a Health Post

- Appropriate communication method is selected
- Multiple operations involving several topics areas are communicated accordingly
- Questions are used to gain extra information
- Correct sources of information are identified
- Information is selected and organized correctly
- Verbal and written reporting is undertaken when required
- Communication skills are maintained in all situations
- Response to workplace issues are sought
- Response to workplace issues are provided immediately
- Constructive contributions are made to workplace discussions on such issues as production, quality and safety
- Goals/objectives and action plan undertaken in the workplace are communicated.
- Issues and problems are identified
- Information regarding problems and issues are organized coherently to ensure clear and effective communication
- Dialogue is initiated with appropriate staff/personnel
- Communication problems and issues are raised as they arise

LO6. Lead workplace communication

- Elements of communication are identified
- Barriers to communication are identified
- Types of communication are recognized

LEARNING MODULE 16	Logo of TVET Provider
TVET-PROGRAMME TITLE: Health Extension Service Level III	
MODULE TITLE: Responding to Emergencies	
MODULE CODE: HLT HES3 M16 0213	
NOMINAL DURATION: 10 Hours	
MODULE DESCRIPTION: This module aims to provide the trainees with the knowledge, skills and attitudes required to recognizing and responding to emergencies and implementing a range of life support measures across a broad spectrum of situations or incidents.	
LEARNING OUTCOMES At the end of the module the learner will be able to: LO1. Prepare for emergency situation LO2. Evaluate the emergency LO3. Act in an emergency LO4. Apply essential first aid techniques	
MODULE CONTENTS: LO1. Prepare for emergency situation 1.1. Introduction to Emergency and emergency intervention 1.2. Planning and responding to work place emergencies 1.3. Preparing emergency Plan 1.4. Emergency response team LO2. Evaluate the emergency 2.1 Assess the extent and degree of damage 2.2. Evaluate the progress of interventions LO3. Act in an emergency 1.5. Response activities 1.6. Emergency supplies LO4. Apply essential first aid techniques 1.1. First aid provision 1.2. First aid kit /supplies	
LEARNING METHODS: <ul style="list-style-type: none"> • Interactive Lecture • Group discussions • Drama / role play • Project work 	
ASSESSMENT METHODS: <ul style="list-style-type: none"> • Written exam/test 	

- Oral questioning
- Practical exam

ASSESSMENT CRITERIA:

LO1. Prepare for emergency situation

- Safety equipment and aids required for emergencies are selected, used, maintained and stored in good order.
- Regular checks of the workplace are carried out to minimize potential hazards.
- Appropriate actions are taken to maximize safety and minimize health hazards in the workplace.
- Options for action in cases of emergency are identified and evaluated.
- Organizational emergency procedures and policies are correctly implemented.
- Occupational health, safety procedures and safe working practices are applied.
- Potential hazards are reported and documented.

LO2. Evaluate the emergency

- The possible development of emergency and potential hazards are assessed and evaluated.
- Advice is sought from relevant people in evaluating the emergency.
- Needs, including those for assistance, are prioritized promptly and accurately.
- Emergency and potential emergency situation are reported.

LO3. Act in an emergency

- The plan of action is implemented using techniques that are appropriate to the situation, available resources and abilities.
- Equipment is operated safely and, where necessary, equipment and techniques are improvised.
- Strategies for group control are identified and implemented, and clients and other individuals are removed from danger.
- The condition of all staff and others assisting are constantly monitored.
- The information required to assist emergency services, where relevant, is acquired and documented.
- Emergency services are notified as necessary.
- The plan of action is changed to accommodate changes in the situation variables.
- Casualty evacuation methods are demonstrated where they are relevant to the context.
- Organizational procedures, policies and legal requirements are correctly implemented in the event of a major injury or death.

LO4. Apply essential first aid techniques

- Immediate risk to self and casualty's health and safety are minimized by isolating the hazard.
- The casualty's injuries and vital signs are assessed.
- Casualty is reassured in a caring in calm manner and made comfortable by using the available resources.

- First aid care is provided in accordance with the established first aid procedures.
- First aid assistance is sought from other's point of view as appropriate.

Annex: Resource Requirements

Health Extension Service level III				
Item No.	Category/Item	Description/ Specifications	Quantity	Ratio (Item: Learner)
A. Learning Materials				
1	TTLM	<ul style="list-style-type: none"> • Flip chart • Job aid • Posters 	30 each	1:1
2	Textbooks	<ul style="list-style-type: none"> • Training module • Guidelines 	30 each	1:1
3	Reference Books	<ul style="list-style-type: none"> • National Health policy • Family planning guide line • EPI guide line • ICCM guide line • Child health strategy • National Nutritional program/strategies • Ethics guide line • Epidemiology and health statistics books 	10 each	1:3
4	Journals/Publication/Magazines	<ul style="list-style-type: none"> • Health indicator /latest/ • Ethiopian Demographic Health Survey, 2011 • Fact sheets • Standard formats 		
B Learning Facilities & Infrastructure				
1.	Lecture Room	Standard(30sqm)	1	1:30
2.	Library with internet connection	Standard (schools library)	1	
C. Stationery				
1	Computer Paper A4 size		As required	
2	Pencil & Rubber		As required	

3	Pen		As required	
4	Graph paper		As required	
5	Note book		As required	
6	Art line Marker	6 per pack		
7	Printer ink	Hp LaserJet	4	
8	Bucher/flip chart	SinArline	10	1:3
9	White board marker	6 per pack	15	
10	Plaster	Role	5	
D Non-consumable materials				
1	Computer	Laptop	1	1:30
2	Printer	hP LaserJet	1	1:30
3	Photocopy machine	Canon	1	1:30
4	LCD projector	LCD projector Sony	1	1:30
5	Scanner	Smart	1	1:30
6	Back up	Smart	1	1:30
7	Binding machine	-	1	1:30
8	Television and Deck	Sony	1	1:30
9	Tape recorder	Sony	1	1:30
10	White board	110 X 80 cm	1	1:30
11	CD	RW each	1	1:30

E Anatomic models				
1	Female pelvic model		4	1:7
2	Fetal skull model		4	1:7
3	Neonatal model		4	1:7
4	Placental model	Wooden	4	1:7
5	Penile model		4	1:7
6	Arm model		5	1:6
F Medical supplies				
1	Delivery set	Set	5	1:6
2	Drum	Pcs	5	1:6
3	Sterilizer (electrical)	Pcs	1	1:30
4	Disposable Gloves diff. size	Of 100 per pack	3 per procedure	
5	Surgical Glove	Of 50 pairs per pack	3 per procedure	
6	Syringe with needle /sterile	50 per pack	1 per procedure	
7	Gauze	Roll		
8	Ethanol of 80%	Liter		
9	Cotton			
10	Bandage			
11	Surgical scissor			
12	Forceps (different sizes and			

	type)			
13	Fetal stethoscope		5	1:6
14	Delivery bed			
15	Rubber sheet (Mackintosh)			
16	Linen			
17	Blanket			
18	Examination couch			
19	Screen			
20	Stretcher			
21	Ambu bag (different size)		5	1:6
22	Suction Machine		1	
23	Suction tube		1	
24	NG tube		5	1:6
25	First aid kit		5	1:6
26	Sthetoscope		5	1:6
27	Sphygmomanometer		5	1:6
28	Thermometer different type		5	1:6
29	Weighing scale -hanging - portable		One each	
30	Measuring tape		10	1:3
31	Table and seats		30 each	1:1
32	Recording log books		30	1:1
33	Adhesive tap			
34	Contraceptives (different options)			

35	Antigens/Vaccines (different type)			
36	Vaccine carrier with ice packs			
37	Refrigerators		1	
38	Cold box		1	
39	Safety box		5	1:6
40	Dust pin		1	
41	Infection prevention basins			
42	Kidney basin (different sizes)			
43	Examination lamp		1	
44	Protective materials:- - Goggle - Shoes - Mask - Gown - Apron			

Acknowledgement

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This model curriculum was revised on the **February 2013** at Adama.

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