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| Reference No. | | | | | | | | | | | | | | | | | | |
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SELF-ASSESSMENT GUIDE

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| Qualification | CAREGIVING (Newborn to Pre-schooler) NC II | | |
| Certificate of Competency (COC 3) | Provide care and support to toddler (1 to 3 years old) | | |
| Units of Competency Covered | <ul style="list-style-type: none"> • Participate in the implementation and monitoring of toddler's care plan • Develop the ability to recognize growth and development of toddler • Perform caring skills for toddler | | |
| Instruction: Read each question and check the appropriate column to indicate your answer. | | | |
| Can I? | | YES | NO |
| PARTICIPATE IN THE IMPLEMENTATION AND MONITORING OF TODDLER'S CARE PLAN | | | |
| • Explain details of care plan, including parents'/support team member's/authorized persons' participation in the care plan | | | |
| • Prepare support activities for toddler's according to approved plan | | | |
| • Interpret and clarify caregiver's own roles and responsibilities in toddler care according to confirmed plan | | | |
| • Provide, monitor and/or seek assistance in support/care activities based on care plan * | | | |
| • Maintain safe, hygienic and infection controlled environment (room, crib/bed, linens and pillow)* | | | |
| • Identify potential or actual risks present, and what proper response is needed | | | |
| • Communicate with parents'/support team member's/authorized persons' on concerns regarding provision of care and support * | | | |
| • Document/record relevant information on care and support * | | | |
| DEVELOP THE ABILITY TO RECOGNIZE GROWTH AND DEVELOPMENT OF TODDLER | | | |
| • Nurture gross and fine motor, including dentition (teeth growth) and physical development needs of toddler * | | | |
| • Toilet train toddler, based on established guidelines for successful toilet training * | | | |
| • Nurture social, emotional and cognitive development of toddler, including provision of appropriate toys, play and language development * | | | |
| • Identify and manage temper/tantrum based on stages of growth and development * | | | |
| • Identify and minimize anxiety and fears of toddler based on stages of growth and development * | | | |

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| • Practice safety measures, including avoiding hazards or common accidents and car safety * | | |
| • Nurture feeling of security and trust and allowable autonomy of toddlers* | | |
| • Document/record the social, intellectual and emotional development of toddler, following established procedure* | | |
| PERFORM CARING SKILLS FOR TODDLER | | |
| • Encourage mother to continue breastfeeding as needed, following established guidelines, ex. proper positioning, infection control | | |
| • Prepare milk formula according to prescribed procedure, including cleaning, sterilization of bottles and other utensils * | | |
| • Feed toddler as scheduled and according to prescribed procedure, quantity, frequency and nutritional requirements * | | |
| • Identify and prepare bathing paraphernalia in accordance with established procedure | | |
| • Prepare toddler for bathing, including taking vital signs and practice of oral hygiene, based on established procedure * | | |
| • Bathe and dress/undress toddler according to established procedure* | | |
| • Change diaper following established procedure, including safety practice and use of appropriate supplies according to practice of proper disposal of used diaper * | | |
| • Prepare and demonstrate how to put toddler to sleep based on established procedure, including conditioning of healthy sleeping patterns * | | |
| • Confirm understanding of medicine administration to toddlers, to include dosage instructions, reading medication abbreviations, 10 Rights of Medication | | |
| • Demonstrate ability to assess toddler's reactions to medications * | | |
| • Document/record toddler's growth and development* | | |
| • Complete tasks as scheduled * | | |
| I agree to undertake assessment with the knowledge that information gathered will only be used for professional development purposes and can only be accessed by concerned assessment personnel and my manager/supervisor. | | |
| Candidate's Name and Signature | Date | |

NOTE: *Critical aspects of competency