

SOE31S11A

**CHC33021 Certificate III in Individual Support (Ageing, Disability and Ageing and Disability)**

**Structured Workplace Learning and Assessment**

Work Placement Plan



**What is Structured Workplace Learning and Assessment?**

Swinburne Open Education offer students a unique opportunity to study in an online environment to develop their skills and knowledge in their chosen field, at a time and pace that suits them.

Many of our courses require practical skills application to achieve competency. Structured Workplace Learning and Assessment (SWLA) offers students in these courses the opportunity to seek out a workplace where they can apply their learning in practical ways in order to expand on and demonstrate their skills.

The following pack outlines what is involved in work placement for workplace supervisors and students.

This document is for the student and Workplace Supervisors records only.

This document reflects the Structured Workplace Learning and Assessment (SWLA) plan for the student and Workplace Supervisor as agreed with the Assessor.

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 Please consider the environment before printing this document.

**Structured Workplace Learning**

**Work Placement Plan**

**CHC33021 Certificate III in Individual Support (Ageing, Disability and Ageing and Disability)**

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# Work Placement Plan

This work placement plan sets out a schedule for the SWLA activities and phone interviews to be completed during work placement.

This document is completed by the Assessor and agreed with the student and Workplace Supervisor at the start of the SWLA process.

# Section A: Student Details

|  |  |
| --- | --- |
| Student Name |  |
| Student Number |  |
| Qualification Name |  |
| Home Telephone |  |
| Mobile |  |
| Email |  |

# Section B: Assessor Details

|  |  |
| --- | --- |
| Name |  |
| Assessor Number/ID |  |
| Telephone |  |
| Email |  |

# Section C: Host Organisation Details

|  |
| --- |
| **HOST ORGANISATION DETAILS** |
| Business Name |  |
| Company ABN/ ACN |  |
| Street Address |  |
| Postal Address |  |
| Work Site Address |  |
| Phone Number |  |
| **SUPERVISOR DETAILS** |
| Name |  |
| Position Title |  |
| Phone Number |  |
| Email |  |

# Section D: Units of Competency (UoC)

## The Course

**The CHC33021 Certificate III in Individual Support (Ageing) – The units covered in this stream are listed below in order**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MODULE** | **UNIT CODE** | **UNIT TITLE** | **LEARNING** | **ASSESSMENT** | **TOTAL SWLA HOURS** |
| **BLOCK 1** |
| 0 | N/A | Introduction to community services  |  |  |  |
| 1 | CHCCOM005 | Communicate and work in health or community services  | 42 | 18 | **60** |
| 2 | CHCLEG001 | Work legally and ethically  |
| 3 | CHCDIV001 | Work with diverse people (NB: no SWLA hours are required) |
| 4 | CHCCCS041 | Recognise healthy body system (NB: no SWLA hours are required) |
| 5 | HLTWHS002 | Follow safe work practices for direct client care |
| HLTINF006 | Comply with infection prevention and control policies and procedures |
| 6 | SWLA Block 1 | Submissions |  |  |  |
| **BLOCK 2**  |
| 7 | CHCCCS036  | Support relationships with carer and family | 42 | 18 | **60** |
| 8 | \*CHCCCS040 | Support independence and well being |
| 9 | CHCCCS031  | Provide individualised support |
| 10 | CHCCCS038 | Facilitate the empowerment of people receiving support |
| 11 | CHCCCS017 | Provide loss and grief support |
| 12 | CHCDIS011 | Contribute to ongoing skills development using a strengths-based approach |
| 13 | CHCAGE011 | Provide support to people living with dementia |
| 14 | CHCAGE013 |  Work effectively in aged care |  |  |  |
| 15 | CHCPAL003 |  Deliver care services using a palliative approach |  |  |  |
| 16 | SWLA 2 | CHCCCS036, CHCCCS040CHCCCS031, CHCCCS038, CHCCCS017, CHCDIS011CHCAGE011, CHCAGE013CHCPAL003 |  |  |  |

\*Please note the CHCSSS040- Support independence and well being unit (Module 8) is linked to completing a 120 hrs work placement however many performance elements within the unit will be completed during the work placement for both SWLA block 1 and Block 2. Some of the tasks that are a cross over that you may have completed in the performance elements in SWLA1 will be used as evidence of completion of part of the 120hrs that have been allocated to this unit alone. However your successfully completion of this unit and of the course will be marked completed upon completion of the both SWLA1 and SWLA 2 requirements

**The CHC33021 Certificate III in Individual Support (Disability) – The units covered in this stream are listed below in order**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MODULE** | **UNIT CODE** | **UNIT TITLE** | **LEARNING** | **ASSESSMENT** | **TOTAL SWLA HOURS** |
| **BLOCK 1** |
| 0 | N/A | Introduction to community services  |  |  |  |
| 1 | CHCCOM005 | Communicate and work in health or community services  | 42 | 18 | **60** |
| 2 | CHCLEG001 | Work legally and ethically  |
| 3 | CHCDIV001 | Work with diverse people (NB: no SWLA hours are required) |
| 4 | CHCCCS041 | Recognise healthy body system (NB: no SWLA hours are required) |
| 5 | HLTWHS002 | Follow safe work practices for direct client care |
| HLTINF006 | Comply with infection prevention and control policies and procedures |
| 6 | SWLA Block 1 | Submissions |  |  |  |
| **BLOCK 2**  |
| 7 | CHCCCS036  | Support relationships with carer and family | 42 | 18 | **60** |
| 8 | \*CHCCCS040 | Support independence and well being |
| 9 | CHCCCS031  | Provide individualised support |
| 10 | CHCCCS038 | Facilitate the empowerment of people receiving support |
| 11 | CHCCCS017 | Provide loss and grief support |
| 12 | CHCDIS011 | Contribute to ongoing skills development using a strengths-based approach |
| 13 | CHCDIS012 | Support community participation and social inclusion  |
| 14 | CHCDIS020 |  Work effectively in disability support |  |  |  |
| 15 | CHCCCS035 |  Support people with autism spectrum disorder |  |  |  |
| 16 | SWLA 2 | CHCCCS036CHCCCS040CHCCCS031CHCCCS038CHCCCS017CHCDIS011CHCDIS012CHCDIS020CHCCCS035 |  |  |  |

\*Please note the CHCSSS040- Support independence and well being unit (Module 8) is linked to completing a 120 hrs work placement however many performance elements within the unit will be completed during the work placement for both SWLA block 1 and Block 2. Some of the tasks that are a cross over that you may have completed in the performance elements in SWLA1 will be used as evidence of completion of part of the 120hrs that have been allocated to this unit alone. However your successfully completion of this unit and of the course will be marked completed upon completion of the both SWLA1 and SWLA 2 requirements

**The CHC33021 Certificate III in Individual Support (Ageing and Disability) – The units covered in this stream are listed below in order**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MODULE** | **UNIT CODE** | **UNIT TITLE** | **LEARNING** | **ASSESSMENT** | **TOTAL SWLA HOURS** |
| **BLOCK 1** |
| 0 | N/A | Introduction to community services  |  |  |  |
| 1 | CHCCOM005 | Communicate and work in health or community services  | 42 | 18 | **60** |
| 2 | CHCLEG001 | Work legally and ethically  |
| 3 | CHCDIV001 | Work with diverse people (NB: no SWLA hours are required) |
| 4 | CHCCCS041 | Recognise healthy body system (NB: no SWLA hours are required) |
| 5 | HLTWHS002 | Follow safe work practices for direct client care |
| HLTINF006 | Comply with infection prevention and control policies and procedures |
| 6 | SWLA Block 1 | Submissions |  |  |  |
| **BLOCK 2**  |
| 7 | CHCAGE013 |  Work effectively in aged care | 42 | 18 | **60** |
| 8 | \*CHCCCS040 | Support independence and well being |
| 9 | CHCCCS031  | Provide individualised support |
| 10 | CHCCCS038 | Facilitate the empowerment of people receiving support |
| 11 | CHCAGE011 | Provide support to people living with dementia |
| 12 | CHCDIS011 | Contribute to ongoing skills development using a strengths-based approach |
| 13 | CHCDIS012 | Support community participation and social inclusion |
| 14 | CHCDIS020 | Work effectively in disability support |  |  |  |
| 15 | CHCPAL003 |  Deliver care services using a palliative approach |  |  |  |
| 16 | SWLA 2 | CHCAGE013, CHCCCS040CHCCCS031, CHCCCS038, CHCDIS012, CHCDIS011, CHCDIS020CHCAGE011, CHCPA003 |  |  |  |

\*Please note the CHCSSS040- Support independence and well being unit (Module 8) is linked to completing a 120 hrs work placement however many performance elements within the unit will be completed during the work placement for both SWLA block 1 and Block 2. Some of the tasks that are a cross over that you may have completed in the performance elements in SWLA1 will be used as evidence of completion of part of the 120hrs that have been allocated to this unit alone. However your successfully completion of this unit and of the course will be marked completed upon completion of the both SWLA1 and SWLA 2 requirements**.**

# Section E: SWLA Tools

The following documents must be completed throughout the SWLA in order to gather evidence for assessment against the unit of competency.

[x]  Logbook

[ ]  Attendance Report

[x]  Portfolio

[x]  Interview Questionnaire (submitted by the Assessor)

[ ]  Other:

|  |
| --- |
|  |

# Section F: Activity Schedule

The following table outlines a schedule for the SWLA activities to be completed.

|  |  |  |
| --- | --- | --- |
| **SCHEDULE** | **HOURS** | **ACTIVITIES** |
| BLOCK 1 | 60hrs | * Demonstrate effective communication skills in **two (2)** different work situations
* Clarify workplace instructions and negotiated timeframes with **one (1)** colleague
* Respond appropriately to **one** **(1)** different situation where communication constraints were present
* Report **one (1)** problem to supervisor
* Complete **two (2)** written or electronic workplace documents to organisation standards
* Contribute to continuous improvement.
* Complete workplace activities in accordance with legal and ethical requirements at least once
* Develop appropriate responses to at least **two (2)** different legal or ethical issues relevant to the work role
* Identify and communicate at least **two (2)** potential work practice improvements designed to enhance workplace responsiveness to legal and ethical requirements.
* Completed the following tasks at least once in line with state/territory work health and safety regulations, relevant codes of practice and workplace procedures:
* Contribute to a workplace health and safety meeting or inspection
* Conduct a workplace risk assessment and recorded the results
* Consistently apply workplace safety procedures in the day-to-day work activities required by the job role, including:
* Infection control
* Hazardous manual tasks
* Use of personal protective equipment
* Reporting incidents
* Follow workplace procedures for at least **one (1)** simulated emergency situation
* Follow safe work practices for infection control and manual handling
* Reflect on own safe work practices.
* Follow established organisation infection prevention and control procedures on at least **three (3)** separate occasions
* Follow established organisation infection prevention and control procedures at least once for each of the following:
* Hand hygiene and care of hand
* Use of personal protective equipment
* Handling of waste
* Enforcing clean and contaminated zones
* Limitation of contamination
* Surface cleaning
* Follow procedures for managing risks associated with specific hazards.
 |

# Section G: Checkpoint Schedule

The Assessor will conduct regular checkpoint calls to discuss Student performance and progress through the Work Placement Plan. The table below identifies the initial schedule for these conversations, as well as the final interview, where the Student and Supervisor will be asked a series of questions (as set out in the Interview Questionnaire) about the Students performance during the SWLA for assessment purposes.

Additional sessions may be added throughout the process as needed by contacting the Assessor directly using their contact details in Section B.

## Checkpoint Schedule

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CHECK POINT** | **CONTACT** | **SCHEDULE** | **CHANGES****(if needed)** | **COMPLETED****(Assessor Initials)** |
| Initial Interview | Student | <<Date>> | <<Time>> |  |  |
| Initial Interview | Supervisor | <<Date>> | <<Time>> |  |  |
| Check-in Interview | Student | <<Date>> | <<Time>> |  |  |
| Check-in Interview | Supervisor | <<Date>> | <<Time>> |  |  |
| Final Interview | Student | <<Date>> | <<Time>> |  |  |
| Final Interview | Supervisor | <<Date>> | <<Time>> |  |  |