

Revised Application Documentation: Version 5 /25 May 2015

QUALIFICATION FILE – CONTACT DETAILS OF SUBMITTING BODY

Name and address of submitting body:

Healthcare Sector Skill Council

C/o Confederation of Indian Industry, 23, Institutional Area Lodi Road New Delhi – 110 003

Name and contact details of individual dealing with the submission

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List of documents submitted in support of the Qualifications File (attached in following order)

1. Qualification Pack- Annexure1
2. Occupational Mapping Report-Annexure 2
3. Functional Analysis Report-Annexure 3
4. RFP for development of occupational standards-Annexure 4
5. Validation group and industry consultations- Annexure 5
6. The Brief Report on the whole process of the development, validation and notification of these qualification packs along with list of companies and Industry associations involved -Annexure 6
7. Human Resource & Skills Requirement in Healthcare Sector accessible on below given link:
<http://healthcare-ssc.in/images/Human%20Resource%20&%20Skills%20Requirement%20in%20Healthcare%20sector.pdf>
8. Quality Assurance Strategy of Assessment in HSSC-Annexure 7
9. Assessment criteria/framework-Annexure 8

QUALIFICATION FILE SUMMARY

Qualification Title	Diet Assistant HSS/ Q 5201		
Body/bodies which will assess candidates	Healthcare Sector Skill Council Accredited assessing bodies		
Body/bodies which will award the certificate for the qualification.	Healthcare Sector Skill Council		
Body which will accredit providers to offer the qualification.	Healthcare Sector Skill Council		
Occupation(s) to which the qualification gives access	Some of the key responsibilities of the Dietician Assistant include food preparation, diet regulations, food handling, safety and sanitary standards and certain administrative functions..		
Proposed level of the qualification in the NSQF.	Level 4		
Anticipated volume of training/learning required to complete the qualification.	600 hrs.		
Entry requirements / recommendations.	Class X		
Progression from the qualification.	<p>Progression will be possible in both academic as well as professional area as:</p> <p>Level 5- Team Leader/ Supervisor – Dietetics Department</p> <p>or</p> <p>Level 5: Dietician</p>		
Planned arrangements for RPL.	HSSC has developed RPL policy to conduct pre assessment of students for gap analysis as per NOS, sharing the gap & final assessments of students and certification. It is explained in section 1 under Assessment, Point 2		
International comparability where known	While writing the NOSs the UK NOSs were also referred to and an effort was taken to maintain comparability in the technical part of the NOSs.		
Formal structure of the qualification			
Title of unit or other component (include any identification code used)	Mandatory/ Optional	Estimated size (learning hours)	Level
HSS / N 5201: Maintain hygiene & food safety	Mandatory	Class Room and Skill Lab Training = 300 hours Clinical/Laboratory Training (OJT) = 180 hours	4
HSS / N 5202: Store food safely and prevent contamination	Mandatory		4
HSS / N 5203: Handle food safely to avoid contamination	Mandatory		4
HSS / N 5204: Select a therapeutic diet/ menu	Mandatory		4
HSS / N 5205: Prepare food safely to maintain	Mandatory		4

nutritive value and avoid contamination			
HSS / N 5206: Educate patient on dietary restrictions	Mandatory		4
HSS/ N 9603: Act within the limits of one's competence and authority	Mandatory		4
HSS/ N 9606: Maintain a safe, healthy and secure environment	Mandatory		4
HSS/ N 9607: Practice Code of conduct while performing duties	Mandatory		4
HSS/ N 9609: Follow biomedical waste disposal protocols	Mandatory		4
HSS/ N 9610: Follow infection control policies and procedures	Mandatory		4

Please attach any document giving further detail about the structure of the qualification – eg a Curriculum or Qualification Pack.

Give details of the document here:

Qualification pack is attached as Annexure 1

SECTION 1

ASSESSMENT

Name of assessment body:

If there will be more than one assessment body for this qualification, give details.

Manipal City & Guilds
IRIS corporate solutions pvt ltd
Aspiring Mind
CII

Will the assessment body be responsible for RPL assessment?

Give details of how RPL assessment for the qualification will be carried out and quality assured.

HSSC conducts QP-NOS based direct three-way assessment for each and every candidate applied for recognition of prior learning (vis. Certifying the un-certified but skilled workforce who acquired skills through experience of years). Here, the candidates may undergo short-term training of gaps identified. The assessment is conducted via HSSC certified assessor. The assessment pattern is as follows:

REGISTRATION

The candidates need to submit registration form online along with uploading of scanned copies of some mandatory documents. Based on screening of the form, the candidates would be registered on conforming following eligibility criteria.

PRE-ASSESSMENT: The purpose of Pre-assessment is to shortlist candidates as per prescribed limit, and also to notify gaps NOS wise to each candidate for their own self-training or opting for short-term training module before final assessment. The pre-assessment also informs about the reliability of information provided by candidates that they have experience working in the given job role. The pre-assessment is Online, Objective type, NOS based, with Each NOS compulsory each carrying 100 marks, No negative marking for incorrect answers, Test venue is kept as may be home/cyber café/institution/HSSC assessment center if the system have google chrome (Version 41.0.2272.101) and a web camera. Timed test link which expires after 90 minutes from the time of starting / writing the test is used for the same. Result is presented with no. of questions allotted and answered correctly for each NOS along with marks scored for each NOS out of 100.

PORTFOLIO SCREENING

Each registered candidate has to prepare and submit the portfolio as per formats given by HSSC. The portfolio may be verified by HSSC/nominated assessor during pre-assessment and scoring card is given for each portfolio.

FINAL ASSESSMENT: The candidates conforming to RPL guidelines based on both pre-assessment and portfolio screening are finally selected for final assessment. Final assessment is conducted through HSSC accredited Assessing body as per HSSC defined assessment criteria and NOS used for assessment of fresh entrants as described above. Final Assessment is conducted at the training site or at working place in case number of enrolled candidate from the site is more than 15. If needed, Assessment centers is arranged for assessment of candidates in cluster

Describe the overall assessment strategy and specific arrangements which have been put in place to ensure

that assessment is always valid, consistent and fair and show that these are in line with the requirements of the NSQF:

QA regarding accreditation of Assessing Body:

The HSSC Accreditation process is divided into two steps:

- 1) Pre-accreditation process:
 - Apply for Accreditation: Application form with desired documents in prescribed format to be sent.
 - Document Compliance Check: to be done for ensuring the compliance and adherence of applied assessing body according to criteria laid down by HSSC.
 - Presentation on Quality Assurance: to be given by Assessing body highlighting the quality assurance process laid down by AB at the process points
 - Once the assessing body clears the due diligence process, the accreditation is given along with terms and conditions.
- 2) Post-accreditation process: Post accreditation, the accredited assessing bodies needs to fulfill following minimum eligibility criteria or requisites for implementation:
 - All Empanelled Assessors would have to undergo **"Train the Assessor"** Program conducted by HSSC for each job role time to time.
 - Accredited Assessing Body would have to abide with requisite time-lines, policies and regulations declared by HSSC.
 - Accredited Assessing Body with times would have to contribute in expansion of the questionnaire.

QA Regarding Assessment Criteria & papers:

The emphasis is on 'learning-by-doing' and practical demonstration of skills and knowledge based on the performance criteria. Accordingly, assessment criteria for each job role is set and made available in qualification pack.

The assessment papers for both theory and practical are developed by Subject Matter Experts (SME) hired by Healthcare Sector Skill Council or with the HSSC accredited Assessment Agency as per the performance and assessment criteria mentioned in the Qualification Pack. The assessments papers are also checked for the various outcome based parameters such as quality, time taken, precision, tools & equipment requirement etc.

The assessment sets as well as assessment criteria are then reviewed by panel of experts from Industry as well as HSSC official for consistency and suitability. The assessments are designed so as to assess maximum parts during the practical hands on work. The technical limitations at the training centres are taken care in theory and viva.

All HSSC accredited Assessment Agency follow the "HSSC process of Assessment Framework" and HSSC approved assessment papers. The assessment by assessment agency will be completely based on the assessment criteria as mentioned in the Qualification Pack developed by HSSC.

Each NOS in the Qualification Pack (QP) will be assigned a relative weightage for assessment based on the criticality of the NOS. Therein each Performance Criteria in the NOS will be assigned marks for or practical based on relative importance, criticality of function and training infrastructure.

The following tools are proposed to be used for final assessment:

1 Practical Assessment: This will comprise of a creation of mock environment in the skill lab which is equipped with all equipment's required for the qualification pack. Candidate's soft skills, communication, aptitude, safety consciousness, quality consciousness etc. will be ascertained by observation and will be marked in observation checklist. The end product will be measured against the specified dimensions and standards to gauge the level of his skill achievements.

2 Viva/Structured Interview: This tool will be used to assess the conceptual understanding and the behavioural aspects as regards the job role and the specific task at hand. It will also include questions on safety, quality, environment and equipment's etc.

3 Written Test: Under this test few key items which cannot be assessed practically will be assessed. The written assessment will comprise of

- i. True / False Statements

- ii Multiple Choice Questions
- iii Matching Type Questions.
- iv) Fill in the blanks

QA Regarding Assessors:

Assessors are selected as per the “eligibility criteria” laid down by HSSC for assessors for each job role. The assessors selected by Assessment Agencies are scrutinized and made to undergo training and introduction to HSSC Assessment Framework, competency based assessments, assessors guide etc. HSSC conducts “Training of Assessors” program time to time for each job role and sensitize assessors regarding assessment process and strategy which is outlined on following mandatory parameters:

- 1) Guidance regarding NSQF
- 2) Qualification Pack Structure
- 3) Guidance for the assessor to conduct theory, practical and viva assessments
- 4) Guidance for trainees to be given by assessor before the start of the assessments.
- 5) Guidance on assessments process, practical brief with steps of operations practical observation checklist and mark sheet
- 6) Viva guidance for uniformity and consistency across the batch.
- 7) MOCK assessments
- 8) Sample question paper and practical demonstration

HSSC also conduct telephonic orientation of the assessors before each assessment for the given job role to assure quality, fairness and timely conduct of assessment.

The assessment agencies are instructed to hire assessors with integrity, reliability and fairness. Each assessor shall sign a document with its assessment agency by which they commit themselves to comply with the rules of confidentiality and conflict of interest, independence from commercial and other interests that would compromise impartiality of the assessments.

QA before, during and after Assessments:

HSSC ensures pre-requisites of Assessment needed by training institute regarding ARTICLES like Mannequins, Mock Ward Infrastructure, Transferring Equipment, Job role related equipment; INFRASTRUCTURE like Class rooms, Skill Lab, Aids like board/marker/logistics, Furniture like display tables, chairs; STAFF like Co-ordinator from training institute, Peon, Some additional members(for simulated situations, if required); DOCUMENTS like Admit Card, Govt. validated ID proof, Record Books like attendance, log book, internal evaluation sheets, Student Enrollment details; for CO-ORDINATION one full time co-ordination point for co-ordination with assessment coordinator before, during and after assessment.

HSSC ensures the three Phases of Assessment to be assured by assessing body and assessor for fair, consistent and quality assessment. The three phases of assessment is enlisted below:

PREPARATORY PHASE: Documents ensured to be packed, sent and received: Seal Pack of Sets of Papers, Invigilation Sheet/Covering letter, OMR/Answer sheet; Well **Co-ordination needs to be assured between** Assessment Co-ordinator of assessing body, HSSC official, Co-ordinator from skill center and assessor.

PHASE OF CONDUCT:

1) Written Examination:

- o Assessor should reach the VTP 30 minutes before the assessment and ensure that all the arrangements are as per the HSSC rules and regulation
- o He should make seating arrangement to students leaving minimum 3 feet space between candidates.
- o He should make the students sit in the order of seating arrangements.
- o The enrolment numbers are to be written on the desks before the arrival of students.
- o The details to be filled like assessor name , date and Qualification name should be written on the board
- o Learners should keep all their belongings outside the classroom. All mobiles should be switched off and kept on the desk in front of the invigilator
- o The seal of the assessment materials is opened in front of the students.

- o OMR sheets to be distributed to all learners
- o Assessors should instruct the learners on the rules and regulation of the assessment
 - No. of questions
 - Duration of paper
 - Disciplinary rules
 - Administrative rules

2) Attendance:

- o The assessor/assessment co-ordinator needs to get signature of all candidates while theory as well as practical examination on invigilation sheet. The sheets are signed and stamped by the In-charge /Head of the Training Centre.
- o The assessor/assessment co-ordinator needs to verify the authenticity of the candidate by checking the photo ID card issued by the institute as well as any one Photo ID card issued by the Central/Government. The same needs to be mentioned in the attendance sheet. In case of suspicion, the assessor should authenticate and cross verify trainee's credentials in the enrolment form.
- o The assessor/assessment co-ordinator needs to punch the trainee's roll number on all the test pieces.
- o The assessor/assessment co-ordinator needs to take a photograph of all the students along with the assessor standing in the middle and with the centre name/banner at the back as evidence.
- o The assessor/assessment co-ordinator needs to carry a camera to click photograph of the trainees working on the job and giving theory exam as evidence.
- o The assessor/assessment co-ordinator also needs to carry a photo ID card.
- o The assessor/assessment co-ordinator also needs to take the photographs as evidence from appropriate angles/sides of the final work piece/job submitted by the trainee. This evidence is signed by the trainee at the time of submission of the job piece.
- o The assessor/assessment co-ordinator needs to measure the dimensions and finish of the submitted job piece as per the tolerance or standards mentioned in the assessment guide.

3) Segregate learners into batches:

- o Assign combination of one critical and one elementary NOS along with the soft skill NOS
- o Allocate time to learner
- o Ask learners to be present 5 minutes earlier than the time allotted at the lab

4) Conduct Practical Assessments:

- o Assign practical task to the learners
- o Ask the learner to collect articles and be ready for assessments
- o Observe learner conducting the assigned task
- o Evaluate and Record observations and marks and in the recording sheets
- o You may ask learners question on the task being done

5) Conduct Viva:

- o Ask questions from the learners on the assigned task
- o Ask questions prescribed in the assessment guide on non-prescribed tasks to ensure that the learners have complete knowledge on the assessment

6) Collate Results:

- o Check written answer scripts
- o Sum up the practical NOS marks
- o Sum up the viva marks
- o Remember to sign off on all sheets where scores are mentioned
- o Submit the collated result to assessment body representative/project manager

7) Surprise Visits/Surveillance check is kept to ensure the quality and fair assessments.

POST-ASSESSMENT PHASE

1) **Verify Result**

- o Check for accuracy of names and date of birth
- o Check for accuracy of marks against each learner
- o Ensure that the pass percentage is correctly applied to the result
- o Ensure that the learner has cleared all sections of the assessments in line with the HSSC assessment strategy
- o Check if the excel sheet for each learner is accurately filled and is available for cross referencing with the covering result sheet
- o Each and every result has to get cross-verified by HSSC official

2) **Upload/Sharing of Results**

- o Once the results are ready it is uploaded on the SDMS website/portal and verified on the same
- o Or the results are shared to Training institute only by HSSC.
- o In case of any query or issue raised for assessment, the assessments are subjected to re-evaluation as per protocol laid down by HSSC.

3) **Documentation**

- o Question papers are kept in secure cupboard with limited and controlled access.
- o Used OMR sheets are to be stored for the next ten years
- o QP should be always current version

Assessment process and guidelines are attached as Annexure 7

Please attach any documents giving further information about assessment and/or RPL.

Give details of the document(s) here:

1. **Quality Assurance Strategy of Assessment in HSSC attached as Annexure 7**
2. **Assessment Criteria attached as Annexure 8**

ASSESSMENT EVIDENCE

Complete the following grid for each grouping of NOS, assessment unit or other component as per the assessment criteria. Insert the required number of rows.

<u>Job Role</u>	Diet Assistant
<u>Qualification Pack Code</u>	HSS/Q5201
<u>Sector Skill Council</u>	Healthcare Sector Skill Council

Guidelines for Assessment

1. Criteria for assessment for each Qualification Pack will be created by the Sector Skill Council. Each Performance Criteria (PC) will be assigned marks proportional to its importance in NOS. SSC will also lay down proportion of marks for Theory and Skills Practical for each PC
2. The assessment for the theory part will be based on knowledge bank of questions created by the SSC
3. Individual assessment agencies will create unique question papers for theory part for each candidate at each examination/training center (as per assessment criteria below)
4. Individual assessment agencies will create unique evaluations for skill practical for every student at each examination/training center based on this criteria
5. To pass the Qualification Pack, every trainee should score as per assessment grid.
6. In case of successfully passing only certain number of NOS's, the trainee is eligible to take subsequent assessment on the balance NOS's to pass the Qualification Pack

Skills Practical and Viva (80% weightage)					
					Marks Allotted
Grand Total-1 (Subject Domain)					400
Grand Total-2 (Soft Skills and communication)					100
Grand Total-(Skills Practical and Viva)					500
Passing Marks (80% of Max. Marks)					400
Theory (20% weightage)					
					Marks Allotted
Grand Total-1 (Subject Domain)					80
Grand Total-2 (Soft Skills and communication)					20
Grand Total-(Theory)					100
Passing Marks (50% of Max. Marks)					50
Grand Total-(Skills Practical and Viva + Theory)					600
Overall Result					Criteria is to pass in both theory and practical individually. If fail in any one of them, then candidate is fail
Detailed Break Up of Marks					Skills Practical & Viva
Subject Domain					Pick any 2 NOS each of 200 marks totalling 400
Assessable Outcomes	Assessment Criteria for the Assessable Outcomes	Total Marks (400)	Out Of	Marks Allocation	
				Viva	Skills Practical
1.HSS / N 5201: Maintain hygiene & food safety	PC1. Explain and implement temperature control techniques	200	20	10	10
	PC2. Maintain personal hygiene and ensure others maintain the same		10	2	8
	PC3. Maintain cleanliness of food handling, storage and serving areas		10	2	8
	PC4. Maintain cleanliness of all equipment, utensils and tools coming in contact with food		10	5	5
	PC5. Ensure food waste is removed promptly from food handling, storage and serving areas		20	2	8

	PC6. Ensure food waste is not allowed to contaminate other areas/ items in the food handling, storage or serving areas		10	5	5
	PC7. Follow cooking and serving practices as specified for different food items		20	5	5
	PC8. Follow proper disposal techniques for food waste, contaminated food or expired food		20	3	7
	PC9. Follow proper serving practices for cooked and raw food		10	3	7
	PC10. Prevent cross contamination or direct contamination of food		10	5	5
	PC 11. Keep hands clean and wash them after unhygienic activities		10	3	7
	PC 12. Maintain storage areas in a clean and hygienic condition		20	10	10
	PC 13. Report deliveries of food items promptly to the proper person		10	5	5
	PC 14. Deal with unexpected situations effectively and inform the proper person where appropriate		20	40	10
	Total		200	100	100
2. HSS / N 5202: Store food safely and prevent contamination	PC1. Understand and implement different food storage practices for different types of foods	200	50	20	30
	PC2. Use and operate storage equipment		50	20	30
	PC3. Follow hygiene and sanitation protocols		40	20	20
	PC4. Explain inventory management processes such as FIFO to prevent food wastage		30	10	20
	PC5. Identify signs of decay and contamination of food		30	10	20
	Total		200	80	120
3.HSS/ N 5203: Handle food safely to avoid contamination	PC1. Explain temperature control techniques	200	50	15	35
	PC2. Maintain personal hygiene and ensure others maintain the same		40	15	25
	PC3. Follow cooking and serving practices as specified for different food items		50	20	30
	PC4. Follow serving practices for cooked and raw food		30	10	20
	PC5. Prevent cross contamination or direct contamination of food		30	10	20
	Total		200	70	130

4. HSS / N 5204: Select a therapeutic diet/ menu	PC1. Understand patients' nutritional requirement and design a diet accordingly	200	50	20	30
	PC2. Understand patients' cultural and religious preference and modify diet accordingly		30	10	20
	PC3. Avoid foods or products that can lead to allergies or intolerance among patients		30	15	15
	PC4. Select menu and plan it in congruence with the medical treatment plan		40	15	25
	PC5. Report progression and modify diet accordingly		50	20	30
	Total		200	80	120
5. HSS / N 5205: Prepare food safely to maintain nutritive value and avoid contamination	PC1. Use different food preparation techniques	200	50	20	30
	PC2. Use kitchen utensils and equipment		30	10	20
	PC3. Maintain temperature control from the time to food is prepared to the time it is served		50	15	35
	PC4. Follow personal hygiene and protect the food from contamination		40	10	30
	PC5. Record changes in colour, texture or odour of food being used for preparation and discard it as per specified guidelines.		30	10	20
	Total		200	65	135
6. HSS/ N 5206: Educate patient on dietary restrictions	PC1. Design dietary menu and educational brochures for a patient depending upon their health condition	200	100	30	70
	PC2. Customise dietary education based on the food preferences of the patients		100	40	60
Total		200	70	130	
Soft Skills and Communication		Pick one field from both parts each carrying 50 marks totalling 100			
National Occupational Standards (NOS)	Assessment Criteria for the Assessable Outcomes	Total Marks (100)	Out Of	Marks Allocation	
				Viva	Observation/ Role Play
Part 1 (Pick one field randomly carrying 50 marks)					
1. Attitude					

HSS/ N 9603 (Act within the limits of one's competence and authority)	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice	30	2	0	2
	PC2. Work within organisational systems and requirements as appropriate to one's role		2	0	2
	PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority		8	4	4
	PC4. Maintain competence within one's role and field of practice		2	0	2
	PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice		4	2	2
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times		4	2	2
	PC7. Identify and manage potential and actual risks to the quality and safety of practice		4	2	2
	PC8. Evaluate and reflect on the quality of one's work and make continuing improvements		4	2	2
	Total		30	12	18
HSS/ N 9607 (Practice Code of conduct while performing duties)	PC1. Adhere to protocols and guidelines relevant to the role and field of practice	20	3	1	2
	PC2. Work within organisational systems and requirements as appropriate to the role		3	1	2
	PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority		3	1	2
	PC4. Maintain competence within the role and field of practice		1	0	1
	PC5. Use protocols and guidelines relevant to the field of practice		4	2	2
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times		1	0	1
	PC7. Identify and manage potential and actual risks to the quality and patient safety		1	0	1

	PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem		4	2	2
Total			20	7	13
Attitude Total		50	50	19	31

Part 2 (Pick one field as per NOS marked carrying 50 marks)

1. Safety management

HSS/ N 9606 (Maintain a safe, healthy, and secure working environment)	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements	50	6	2	4
	PC2. Comply with health, safety and security procedures for the workplace		4	0	4
	PC3. Report any identified breaches in health, safety, and security procedures to the designated person		4	3	1
	PC4. Identify potential hazards and breaches of safe work practices		6	4	2
	PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority		6	4	2
	PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected		6	4	2
	PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently		6	2	4
	PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person		6	4	2
	PC9. Complete any health and safety records legibly and accurately		6	2	4
	Total			50	25

2. Waste Management

HSS/ N 9609 (Follow biomedical waste disposal protocols)	PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type	50	6	2	4
	PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste		8	4	4

	PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements	4	0	4
	PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste	8	4	4
	PC5. Check the accuracy of the labelling that identifies the type and content of waste	4	2	2
	PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal	4	4	0
	PC7. Check the waste has undergone the required processes to make it safe for transport and disposal	4	4	0
	PC8. Transport the waste to the disposal site, taking into consideration its associated risks	4	4	0
	PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures	4	4	0
	PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols	4	4	0
	Total	50	32	18
Grand Total-2 (Soft Skills and Communication)		100		
Detailed Break Up of Marks				Theory
Subject Domain				Pick all NOS totalling 80 marks
National Occupational Standards (NOS)	Assessment Criteria for the Assessable Outcomes	Weightage		
1.HSS / N 5201: Maintain hygiene & food safety	PC1. Explain and implement temperature control techniques	18		
	PC2. Maintain personal hygiene and ensure others maintain the same			
	PC3. Maintain cleanliness of food handling, storage and serving areas			
	PC4. Maintain cleanliness of all equipment, utensils and tools coming in contact with food			

	PC5. Ensure food waste is removed promptly from food handling, storage and serving areas	
	PC6. Ensure food waste is not allowed to contaminate other areas/ items in the food handling, storage or serving areas	
	PC7. Follow cooking and serving practices as specified for different food items	
	PC8. Follow proper disposal techniques for food waste, contaminated food or expired food	
	PC9. Follow proper serving practices for cooked and raw food	
	PC10. Prevent cross contamination or direct contamination of food	
	PC 11. Keep hands clean and wash them after unhygienic activities	
	PC 12. Maintain storage areas in a clean and hygienic condition	
	PC 13. Report deliveries of food items promptly to the proper person	
	PC 14. Deal with unexpected situations effectively and inform the proper person where appropriate	
	TOTAL	18
3.HSS / N 5202: Store food safely and prevent contamination	PC1. Understand and implement different food storage practices for different types of foods	10
	PC2. Use and operate storage equipment	
	PC3. Follow hygiene and sanitation protocols	
	PC4. Explain inventory management processes such as FIFO to prevent food wastage	
	PC5. Identify signs of decay and contamination of food	
	TOTAL	10
HSS/ N 5203: Handle food safely to avoid contamination	PC1. Explain temperature control techniques	10
	PC2. Maintain personal hygiene and ensure others maintain the same	
	PC3. Follow cooking and serving practices as specified for different food items	
	PC4. Follow serving practices for cooked and raw food	
	PC5. Prevent cross contamination or direct contamination of food	
	TOTAL	10
HSS / N 5204: Select a therapeutic diet/ menu	PC1. Understand patients' nutritional requirement and design a diet accordingly	16

	PC2. Understand patients' cultural and religious preference and modify diet accordingly	
	PC3. Avoid foods or products that can lead to allergies or intolerance among patients	
	PC4. Select menu and plan it in congruence with the medical treatment plan	
	PC5. Report progression and modify diet accordingly	
	TOTAL	16
HSS / N 5205: Prepare food safely to maintain nutritive value and avoid contamination	PC1. Use different food preparation techniques	10
	PC2. Use kitchen utensils and equipment	
	PC3. Maintain temperature control from the time to food is prepared to the time it is served	
	PC4. Follow personal hygiene and protect the food from contamination	
	PC5. Record changes in colour, texture or odour of food being used for preparation and discard it as per specified guidelines.	
	TOTAL	10
HSS/ N 5206: Educate patient on dietary restrictions	PC1. Design dietary menu and educational brochures for a patient depending upon their health condition	10
	PC2. Customise dietary education based on the food preferences of the patients	
	Total	10
HSS/ N 9610: Follow infection control policies and procedures	PC1. Perform the standard precautions to prevent the spread of infection in accordance with organisation requirements	6
	PC2. Perform the additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection	
	PC3. Minimise contamination of materials, equipment and instruments by aerosols and splatter	
	PC4. Identify infection risks and implement an appropriate response within own role and responsibility	
	PC5. Document and report activities and tasks that put patients and/or other workers at risk	
	PC6. Respond appropriately to situations that pose an infection risk in accordance with the policies and procedures of the organization	
	PC7. Follow procedures for risk control and risk containment for specific risks	
	PC8. Follow protocols for care following exposure to blood or other body fluids as required	
	PC9. Place appropriate signs when and where appropriate	

	PC10. Remove spills in accordance with the policies and procedures of the organization
	PC11. Maintain hand hygiene by washing hands before and after patient contact and/or after any activity likely to cause contamination
	PC12. Follow hand washing procedures
	PC13. Implement hand care procedures
	PC14. Cover cuts and abrasions with water-proof dressings and change as necessary
	PC15. Wear personal protective clothing and equipment that complies with Indian Standards, and is appropriate for the intended use
	PC16. Change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact
	PC17. Demarcate and maintain clean and contaminated zones in all aspects of health care work
	PC18. Confine records, materials and medicaments to a well-designated clean zone
	PC19. Confine contaminated instruments and equipment to a well-designated contaminated zone
	PC20. Wear appropriate personal protective clothing and equipment in accordance with occupational health and safety policies and procedures when handling waste
	PC21. Separate waste at the point where it has been generated and dispose of into waste containers that are colour coded and identified
	PC22. Store clinical or related waste in an area that is accessible only to authorised persons
	PC23. Handle, package, label, store, transport and dispose of waste appropriately to minimise potential for contact with the waste and to reduce the risk to the environment from accidental release
	Dispose of waste safely in accordance with policies and procedures of the organisation and legislative requirements
	PC26. Remove all dust, dirt and physical debris from work surfaces
	PC27. Clean all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled

	PC28. Decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance with cleaning, disinfection and sterilisation protocols	
	PC29. Dry all work surfaces before and after use	
	PC30. Replace surface covers where applicable	
	PC31. Maintain and store cleaning equipment	
	TOTAL	6
Grand Total-1 (Subject Domain)		80
Soft Skills and Communication		Select all NOS totalling 20
National Occupational Standards (NOS)	Assessment Criteria for the Assessable Outcomes	Weightage

HSS/ N 9603 (Act within the limits of one's competence and authority)	PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice	4
	PC2. Work within organisational systems and requirements as appropriate to one's role	
	PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority	
	PC4. Maintain competence within one's role and field of practice	
	PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice	
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times	
	PC7. Identify and manage potential and actual risks to the quality and safety of practice	
	PC8. Evaluate and reflect on the quality of one's work and make continuing improvements	
	TOTAL	4
HSS/ N 9607 (Practice Code of conduct while performing duties)	PC1. Adhere to protocols and guidelines relevant to the role and field of practice	4
	PC2. Work within organisational systems and requirements as appropriate to the role	

	PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority	
	PC4. Maintain competence within the role and field of practice	
	PC5. Use protocols and guidelines relevant to the field of practice	
	PC6. Promote and demonstrate good practice as an individual and as a team member at all times	
	PC7. Identify and manage potential and actual risks to the quality and patient safety	
	PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem	
	TOTAL	4
HSS/ N 9606 (Maintain a safe, healthy, and secure working environment)	PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements	
	PC2. Comply with health, safety and security procedures for the workplace	
	PC3. Report any identified breaches in health, safety, and security procedures to the designated person	
	PC4. Identify potential hazards and breaches of safe work practices	
	PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority	6
	PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected	
	PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently	
	PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person	
	PC9. Complete any health and safety records legibly and accurately	
	TOTAL	6
HSS/ N 9609 (Follow biomedical waste disposal protocols)	PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type	
	PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste	6
	PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements	

	PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste	
	PC5. Check the accuracy of the labelling that identifies the type and content of waste	
	PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal	
	PC7. Check the waste has undergone the required processes to make it safe for transport and disposal	
	PC8. Transport the waste to the disposal site, taking into consideration its associated risks	
	PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures	
	PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols	
	TOTAL	6
Grand Total-2 (Soft Skills and Communication)		20

SECTION 2

EVIDENCE OF NEED

What evidence is there that the qualification is needed?

While collecting data from the companies for the occupational map & functional analysis, we also took feedback from industry, which was collected with respect to roles for which qualification packs development, was to be prioritized. This was largely based on volume of people required, quantitative and qualitative shortfall which the Industry feels they face. Governing council of HSSC gave final approval and endorsement for the same.

What is the estimated uptake of this qualification and what is the basis of this estimate?

The workforce in allied healthcare sector need expected to around 74 lac by 2022 double the workforce employed in 2013 as envisaged in Skills Gap analysis Reports for industry demand and secondary research data, though these do not lend to accurate demand projection. The link to NSDC Human Resource & Skills Requirement in Healthcare Sector is <http://healthcare-ssc.in/images/Human%20Resource%20&%20Skills%20Requirement%20in%20Healthcare%20sector.pdf>

- Feedback from industry for demand though again sample size may not lend to accurate figures
- Training duration, and current and potential training capacity envisaged
- An LMIS development initiative is being put in place to be more precise regarding the demand and supply

What steps were taken to ensure that the qualification(s) does/do not duplicate already existing or planned qualifications in the NSQF?

- NSDC list of Approved and Under-Development QPs was checked prior to commissioning the work
- NSDC QRC team also confirmed the same

What arrangements are in place to monitor and review the qualification(s)? What data will be used and at what point will the qualification(s) be revised or updated?

- Agencies/personnel would be appointed by the HSSC to interact with training providers, employers, assessors to gather feedback in implementation.
- Monitoring of results of assessments, training delivery
- Employer feedback will be sought post-placement
- A formal review is scheduled in two year time

Please attach any documents giving further information about any of the topics above.

Give details of the document(s) here:

1. **Occupational Mapping Report-Annexure 2**
2. **Functional Analysis Report-Annexure 3**
3. **RFP for development of occupational standards-Annexure 4**
4. **Validation group and industry consultations- Annexure 5**
5. **The Brief Report on the whole process of the development, validation and notification of these qualification packs along with list of companies and Industry associations involved -Annexure 6**
6. **Human Resource & Skills Requirement in Healthcare Sector accessible on below given link:**

<http://healthcare-ssc.in/images/Human%20Resource%20&%20Skills%20Requirement%20in%20Healthcare%20sector.pdf>

SECTION 3

SUMMARY OF DIRECT EVIDENCE OF LEVEL

Justify the NSQF level allocated to the QP. Relate information about the job role and build upon the five descriptors for the level to justify.

Generic NOS is/are linked to the overall authority attached to the job role.

Qualification Title and Classification Code Diet Assistant HSS/Q5201					
Process required	Professional knowledge	Professional skill	Core skill	Responsibility	Level

<p>The Diet Assistant performs certain activities such as food preparation, diet regulations, food handling, safety and sanitary standards and certain administrative functions. They support registered Dietician in planning, preparing & serving meals to patients with specific and dietary & nutritional needs. They work in familiar, predictable, routine, situation of clear choice</p>	<p>The Diet Assistant work in collaboration with Doctors and Nurses and other healthcare providers and deliver the Healthcare services as suggested by them. The individual should be result oriented. The individual should also be able to demonstrate clinical skills, Communication skills and ethical behaviour. The individual should be willing to work in wards or clinics in shifts. This indicates that a Diet Assistant must have factual knowledge of field or study in order to perform activities correctly.</p>	<p>Diet Assistant is expected to maintain food safety & hygiene, , safely storage of food and preventing contamination, , safe handling of food, appropriate selection of therapeutic diet determining, safe preparation of food, patient education on dietary requirements.All these are activities that require him/her to demonstrate his practical skill, as per the scope of the job role, using appropriate tool, quality concepts, responsible for carrying out range of activities, requiring either laid down approach or may adopt alternative approaches as per the best evidenced practices.</p>	<p>Essential attributes of Diet Assistant is to write instructions and directions for other co-workers involved in food preparation and serving. Document and complete reports on regular basis related to food preparation and serving. Read and understand important instruction provided by co-workers. Document and complete reports on regular basis related to food waste, Communicate, coordinate & take feedbacks regarding food handling practices from all concerned persons. This requires communication skills (written or oral) with required clarity and indicates that he/she should have the basic understanding of social, political and natural environment.</p>	<p>The Diet Assistant is responsible for Preparing food, ensuring safe food handling, ensuring safety and hygiene of food and regulating diet under the supervision of a registered Dietician. Diet Assistant ensure a healthy and well-balanced diet for the patient to ensure prompt recovery from the ailment. This is critical as it indicates that the person is responsible for his own work and learning. This is further reconfirmed by the fact that The Diet Assistant is expected to learn and improve his/her practice while on the job and is referred as “skilled workers</p>	<p>4</p>
<p>Level: 4</p>	<p>Level: 4</p>	<p>Level: 4</p>	<p>Level: 4</p>	<p>Level:4</p>	<p>4</p>

OTHER EVIDENCE OF LEVEL [This need only be filled in where evidence other than primary outcomes was used to allocate a level] **(Optional)**

- Validated by Industry through various training provider & stake holders

Summary of other evidence (if used): NA

Summary of Direct Evidence (from learning outcomes): Learning Outcome	Process Required	Professional Knowledge	Professional Skills	Core Skills	Responsibility
Maintain hygiene & food safety	4	4	4	4	4
Store food safely and prevent contamination	4	4	4	4	4
Handle food safely to avoid contamination	4	4	4	4	4
Select a therapeutic diet/ menu	4	4	4	4	4
Prepare food safely to maintain nutritive value and avoid contamination	4	4	4	4	4
Educate patient on dietary restrictions	4	4	4	4	4
Act within the limits of your competence and authority	These are common for all roles from all NSQF levels and cover the minimum requirement in terms of health and safety and working effectively with others in a workplace.				
Maintain a safe, healthy and secure environment					
Practice Code of conduct while performing duties					
Follow biomedical waste disposal protocols					
Follow infection control policies and procedures					

Summary of other evidence (if used):

SECTION 4

EVIDENCE OF RECOGNITION OR PROGRESSION

What steps have been taken in the design of this or other qualifications to ensure that there is a clear path to other qualifications in this sector?

Horizontal and vertical mobility options have been articulated.

Please attach any documents giving further information about any of the topics above.

Give details of the document(s) here:

1. **Occupational Mapping Report-Annexure 2**
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