



Health Services Assistance

Qualification Review

Draft Training Products



Summary of Proposed Changes

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Document Modification History

Version	Status	Release date	Summary of changes
1.0	Current	31 October 2025	Document published

1. Introduction

This summary of the proposed changes aims to inform stakeholders of the proposed changes under consideration, in preparation for the upcoming validation period for this project. It provides:

- an overview of the project's scope, including the purpose of the affected qualification/s
- a summary of the proposed changes to the qualifications, units of competency and skill set/s
- and next steps.

The aim is to ensure stakeholders have a clear understanding of the proposed revisions and how they can meaningfully contribute to shaping the future of these training products during this additional round of validation.

2. Project Overview

This project is part of HumanAbility's suite of training product development initiatives aimed at ensuring qualifications and units remain current, industry-relevant and responsive to emerging workforce needs.

A Technical Committee, drawing on expertise across industry, regulatory and provider domains, have guided the development of the draft training products. Additionally, 2 SME panels have been created to provide expert advice on the development of new units on the topic of maternal support and operation theatre technical support.

A consultation log has been maintained and published to ensure transparency and traceability of stakeholder feedback and project responses.

Once all feedback is considered and revisions incorporated, where compliant with the *Training Package Organising Framework*, the final drafts will be submitted for endorsement and, if approved, implemented and published on the National Training Register.

3. Project Scope

This project originally targeted 1 qualification and 25 units of competency, as defined in the project plan and confirmed in the functional analysis phase.

Qualification:

HLT33115 Certificate III in Health Service Assistance

25 Units of Competency:

1. *HLTAHA025 Contribute to client flow and client information management in medical imaging*
2. *HLTAHA026 Support the medical imaging professional*
3. *HLTAMB014 Transport non-emergency patients under operational conditions*
4. *HLTHSS003 Perform general cleaning tasks in a clinical setting*
5. *HLTHSS004 Handle and move equipment, goods and mail*
6. *HLTHSS007 Handle medical gases safely*
7. *HLTFSE001 Follow basic food safety practices*
8. *HLTFSE002 Provide ward or unit based food preparation and distribution services*
9. *HLTFSE003 Perform kitchenware washing*
10. *HLTFSE004 Serve cafeteria customers*
11. *HLTFSE005 Apply and monitor food safety requirements*
12. *HLTFSE006 Prepare foods suitable for a range of client groups*
13. *HLTFSE007 Oversee the day-to-day implementation of food safety in the workplace*
14. *HLTFSE008 Conduct internal food safety audits*
15. *HLTFSE009 Apply cook-freeze and reheating processes*
16. *HLTAAP001 Recognise healthy body systems*
17. *HLTINF006 Apply basic principles and practices of infection prevention and control*
18. *HLTOHC004 Provide or assist with oral hygiene*
19. *HLTSTE001 Clean and disinfect reusable medical devices*
20. *HLTWHS001 Participate in workplace health and safety*
21. *HLTAIN001 Assist with nursing care in an acute care environment*
22. *HLTAIN002 Provide non-client contact support in an acute care environment*
23. *HLTTHE001 Handle and care for operating theatre equipment*
24. *HLTTHE002 Assist with preparation of clients for operative procedures*
25. *HLTTHE003 Provide intra-operative equipment and technical support*

After analysis and consultation, the scope was refined as follows:

Superseded Units

Six units listed in the qualification were already replaced with endorsed equivalents. As part of the functional analysis a detailed component-by-component analysis confirmed that the updated versions delivered outcomes fully consistent with the original intent. As a result, no redevelopment was required, and the endorsed replacements were adopted directly into scope:

Original unit	Superseded by
<i>HLTAHA025 Contribute to client flow and client information management in medical imaging</i>	<i>HLTAHA045 Assist people management in medical imaging</i>
<i>HLTAHA026 Support the medical imaging professional</i>	<i>HLTAHA046 Support the medical imaging professional</i>
<i>HLTAMB014 Transport non-emergency patients under operational conditions</i>	<i>HLTOUT007 Transport non-emergency patients under operational conditions</i>
<i>HLTHSS003 Perform general cleaning tasks in a clinical setting</i>	<i>HLTHSS009 Perform general cleaning tasks in a clinical setting</i>

<i>HLTHSS004 Handle and move equipment, goods and mail</i>	<i>HLTHSS010 Handle and move equipment, goods and mail</i>
<i>HLTHSS007 Handle medical gases safely</i>	<i>HLTHSS012 Handle medical gases safely</i>

Food safety units

Analysis identified potential duplication of HLT food safety and handling units with existing SIT food safety and handling units. Discussions were held with SaCSA on the status of these units and potential importation into the health service assistance qualification. During public consultation workshops, stakeholders were asked if the SIT units were suitable for use in the health service assistance qualification. There was broad agreement that the HLT food safety and handling units had limited use and should not be redeveloped in the HLT training package. The agreed approach is to retain the units temporarily, with future replacement or removal to occur once SaCSA completes in October 2026 the review of the SIT food safety units. Affected units include:

- *HLTFSE001 Follow basic food safety practices*
- *HLTFSE002 Provide ward or unit based food preparation and distribution services*
- *HLTFSE003 Perform kitchenware washing*
- *HLTFSE004 Serve cafeteria customers*
- *HLTFSE005 Apply and monitor food safety requirements*
- *HLTFSE006 Prepare foods suitable for a range of client groups*
- *HLTFSE007 Oversee the day-to-day implementation of food safety in the workplace*
- *HLTFSE008 Conduct internal food safety audits*
- *HLTFSE009 Apply cook-freeze and reheating processes*

Cross-sector usage

The following 5 units are used across a range of different qualifications. A decision was made that it would be more appropriate to review these units as part of other projects. For instance, *HLTSTE001 Clean and disinfect reusable medical devices* will be reviewed as part of the sterilisation services qualification review. Similarly *HLTOHC004 Provide or assist with oral hygiene* will be reviewed as part of the dental qualification review.

- *HLTAAP001 Recognise healthy body systems*
- *HLTINF006 Apply basic principles and practices of infection prevention and control*
- *HLTOHC004 Provide or assist with oral hygiene*
- *HLTSTE001 Clean and disinfect reusable medical devices*
- *HLTWHS001 Participate in workplace health and safety*

Feedback on these 5 units has been documented in HumanAbility's issue register. This ensures that when the units are opened in their parent qualifications, all consultation feedback will be available to the responsible project teams.

Scope Expansion

During the early stages of the project and undertaking the functional analysis, it was identified that there were minimal differences between the *HLT33115 Certificate III in Health Services Assistance (Operating Theatre Technician specialisation)* and the *HLT47515 Certificate IV in Operating Theatre Technical Support*. This raised the question of the value of having a separate Certificate IV. To address this, the matter was taken to the Technical Committee meeting in March 2025, where it was discussed with members. The committee agreed it was practical to progress review of both qualifications at the same time to ensure alignment, avoid duplication, and strengthen stakeholder engagement. Approval was obtained from DEWR to extend the scope of this project to include the Certificate IV qualification, which was then incorporated into consultation workshops alongside the Certificate III review.

Development of new units of competency

Gaps identified during the functional analysis and consultation led to the development of 3 new units:

- *HLTTHE004N Manage advanced technology in surgical theatre environments*
- *HLTTHE005N Provide assistance during clinical emergencies in surgical theatre environments*
- *HLTMAT001N Pregnancy and postnatal health and wellbeing foundations*

4. Summary of proposed changes

Code Changes

Note: The letter 'M' and 'N' have been added to all training product codes (e.g. HLT33115M) to indicate that the code is likely to change as a consequence of this project. The 'M' denotes a *Major change* to the training product, while the 'N' indicates a *new unit*.

Training Product Type	Code and Title	Qualification Purpose
Qualifications	<i>HLT33115M Certificate III in Health Services Assistance</i>	The purpose of the qualification is to support multiple related occupations.
	<i>HLT47515M Certificate IV in Operating Theatre Technical Support</i>	The purpose of the qualification is to support a specific occupation.

Training Product Type	Code and Title
Units of Competency	<i>HLTAIN00M Assist with nursing care</i>
	<i>HLTAIN002M Provide non-client contact support</i>
	<i>HLTTHE001M Maintain and operate theatre equipment</i>
	<i>HLTTHE002M Assist with preparation of individuals for operative procedures</i>
	<i>HLTTHE003M Provide intra-operative equipment and technical support</i>
	<i>HLTTHE004N Manage advanced technology in surgical theatre environments</i>

	<i>HLTTHE005N Provide assistance during clinical emergencies in surgical theatre environments</i>
	<i>HLTMAT001N Pregnancy and postnatal health and wellbeing foundations</i>

Qualification

Table 1.1: Proposed changes to HLT33115M Certificate III in Health Services Assistance

Section	Draft 1 - Before Public and Government Consultation	Draft 2 - After Public and Government Consultation
Description	No change	• Qualification description restructured to align with the Training Product Output Framework (TPOF) Purpose 2 • Reframed opening statement to describe individuals in health and community care support occupations. • Added reference to specialisations for Operating Theatre Technician and Assisting in Nursing Work. • Included list of occupational titles to specify job outcomes. • Updated terminology from “care of clients” to “safe, person-centred care.” • Updated supervision reference to “delegation and supervision of a registered nurse or other qualified health professional.”
Entry requirements	No change	No change
Foundation Skills Outcomes	N/A	New field. Indicates the foundation skill outcomes a competent learner is expected to have upon completion of the qualification.
Packaging Rules	Total number of units: No change Number of Core units: No change Number of Elective units: No change Superseded elective units been updated	Total number of units retained along with along with number of core and elective 7 and 8 respectively • Formalises 4 elective groups (A–D), adding a Work Health & Safety focus (Group A). • Strengthens packaging logic by defining minimum contribution from each stream. • Ensures electives contribute to AQF alignment and industry-supported outcomes. Core units <i>HLTWHS001 Participate in workplace health and safety</i> moved to Group A electives <i>BSBWOR301 Organise personal work priorities and development</i> is superseded and replaced by <i>BSBPEF301 Organise personal work priorities</i>

		CHCCCS002 Assist with movement, newly added to core Newly added Group A – Work Health and Safety Electives HLTWHS001 Participate in workplace health and safety previously a core unit, now offered as an elective under Group A. HLTWHS002 Follow safe work practices for direct client care, newly added HLTWHS005 Conduct manual tasks safely, newly added Group B – Operating Theatre Technician Specialisation HLTTHE001M Maintain and operate theatre equipment, has been retitled and revised HLTTHE002M Assist with preparation of individuals for operative procedures has been retained, changed “clients” to “Individuals”. Mandatory workplace requirement is now explicitly specified. HLTTHE003M Provide intra-operative equipment and technical support has been retained HLTHSS012 Handle medical gases, newly added HLTAID010 Provide basic emergency life, newly added Group C – Assisting in Nursing Specialisation CHCCCS002 Assist with movement moved to Core CHCCCS020 Respond effectively to behaviours of concern has been retained CHCCCS026 Transport individuals has been retained HLTAIN001M Assist with nursing care, renamed and revised unit code. Mandatory workplace requirement is maintained. HLTAIN002M Provide non-client contact support, renamed and revised unit code. Group D – Other electives Superseded → Replaced by CHCAGE005 Provide support to people living with dementia → CHCAGE011 Provide support to people living with dementia CHCCCS015 Provide individualised support → CHCCCS031 Provide individualised support HLTHSS003 Perform general cleaning tasks in a clinical setting → HLTHSS009 Perform general cleaning tasks in a clinical setting HLTHSS004 Handle and move equipment, goods and mail → HLTHSS010 Handle and move equipment, goods and mail HLTHSS007 Handle medical gases safely → HLTHSS012 Handle medical gases safely (Moved to Group B (Operating Theatre Technician)) BSBINN301 Promote innovation in a team environment → BSBSTR401 Promote innovation in a team environment CPPCLO4022A Organise and monitor cleaning operations → CPPCLO4100 Organise and monitor cleaning tasks
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		Newly added <i>BSBINS201 Process and maintain workplace information</i> <i>BSBMED302 Prepare and process medical accounts</i> <i>BSBMED303 Maintain patient records</i> <i>BSBMED305 Apply the principles of confidentiality, privacy and security within the medical environment</i> <i>BSBTEC201 Use business software applications</i> <i>CHCAGE007 Recognise and report risk of falls</i> <i>CHCAGE008 Implement falls prevention strategies</i> <i>CHCCCS019 Recognise and respond to crisis situations</i> <i>CHCCCS038 Facilitate the empowerment of people receiving support</i> <i>CHCLEG001 Work legally and ethically</i> <i>CHCMHS007 Work effectively in trauma informed care</i> <i>HLTHPS006 Assist clients with medication</i> Newly developed <i>HLTMAT001N Pregnancy and postnatal health and wellbeing foundations (ASK template)</i> Removed <i>CHCAGE001 Facilitate the empowerment of older people</i> <i>CHCAOD002 Work with clients who are intoxicated</i> <i>CHCDIS007 Facilitate the empowerment of people with disability</i> <i>CHCSET001 Work with forced migrants</i> <i>CHCSOH001 Work with people experiencing or at risk of homelessness</i> <i>HLTAHA025 Contribute to client flow and client information management in medical imaging</i> <i>HLTAHA026 Support the medical imaging professional</i> <i>HLTAMB014 Transport non-emergency patients under operational conditions</i> <i>HLTFSE004 Serve cafeteria customers</i> <i>HLTFSE008 Conduct internal food safety audits</i> <i>SITXFSA202 Transport and store food</i> <i>SITXFSA401 Develop and implement a food safety program</i> <i>BSBFLM312 Contribute to team effectiveness</i>
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Table 1.2: Proposed changes to HLT47515M Certificate IV in Operating Theatre Technical Support

Section	Draft 1 - Before Public and Government Consultation	Draft 2 - After Public and Government Consultation
Description	No change	No change

Entry requirements	N/A	New field. Certificate III Health Service Assistance (OTT Specialisation) and 2 years full time experience as Operating Theatre Technician (OTT)
Foundation Skills Outcomes	N/A	New field. Indicates the foundation skill outcomes a competent learner is expected to have upon completion of the qualification.
Packaging Rules	Total number of units: No change Number of Core units: No change Number of Elective units: No change Superseded elective units been updated	Total units reduced from 15 to 14. One core unit removed. Elective count unchanged. Core Units Superseded → Replaced by BSBMGT403 <i>Implement continuous improvement</i> → BSBSTR402 <i>Implement continuous improvement</i> Newly added HLTWHS005 <i>Conduct manual tasks safely</i> HLTWHS006 <i>Manage personal stressors in the work environment</i> BSBLDR414 <i>Lead team effectiveness</i> TAEDEL414 <i>Mentor in the workplace</i> Newly developed HLTTHE004N <i>Operate and maintain advanced technology in surgical theatre environments</i> HLTTHE005N <i>Provide assistance during clinical emergencies in surgical theatre environments</i> Removed CHCCOM005 <i>Communicate and work in health or community services</i> CHCDIV001 <i>Work with diverse people</i> HLTWHS003 <i>Maintain work health and safety</i> BSBMED301 <i>Interpret and apply medical terminology appropriately</i> HLTTHE001 <i>Handle and care for operating theatre equipment</i> HLTTHE002 <i>Assist with preparation of clients for operative procedures</i> HLTTHE003 <i>Provide intra-operative equipment and technical support</i> Elective Units Superseded → Replaced with

		<i>BSBINN301 Promote innovation in a team environment → BSBSTR401 Promote innovation in a team environment</i> <i>BSBINM401 Implement workplace information system → BSBINS402 Coordinate workplace information systems</i> <i>BSBLDR402 Lead effective workplace relationships → BSBLDR413 Lead effective workplace relationships</i> <i>BSBLED401 Develop teams and individuals → BSBHRM413 Support the learning and development of teams and individuals</i> <i>TAEASS402B Assess competence → TAEASS412 Assess competence</i> <i>TAEDEL402A Plan, organise and facilitate learning in the workplace → TAEDEL412 Facilitate workplace-based learning</i> Newly added <i>BSBOPS402 Coordinate business operational plans</i> <i>ICTSAS446 Fault find and troubleshoot ICT equipment, hardware and software problems</i> Removed <i>CHCMGT003 Lead the work team</i> <i>HLTHSS007 Handle medical gases safely</i> <i>BSBLDR403 Lead team effectiveness</i> <i>BSBLED401 Develop teams and individuals</i> <i>BSBMGT402 Implement operational plan</i> <i>BSBMGT406 Plan and monitor continuous improvement</i>
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Units of Competency

Table 2.1: Proposed changes to *HLTAI001M Assist with nursing care in an acute care environment*

Section	Draft 1. Before Public and Government Consultation	Draft 2. After Public and Government Consultation
Title	No change	Title was shortened to reflect broader applicability of the unit across different care settings, not limited to acute care.

Application	Added "current" to reflect training package writing conventions and reinforce currency of legislative references.	• Changed "nursing care" to "health care" • Replaced "direction" with "delegation" • Added "midwife" • Included "sub-acute" and "aged care"
Elements and performance criteria	No change	E1 - Reworded to emphasise delegation, aligning with legal and practice expectations for AIN roles, "Clients" changed to "individuals". Broader scope to include community settings beyond acute care. PC 1.1 – Refined to specify “delegated care tasks” in line with scope-of-practice requirements. Changed “client” to “individual” and “nursing care plan” to “individualised care plan”. PC 1.2 – Updated to use active verb “collect” instead of “assist”, clarifying measurable learner action. Added reference to using equipment and workplace procedures. PC 1.3 – Reworded to focus on <i>reporting</i> clinical data rather than equipment use, improving clarity and assessment focus. PC 1.4 – Reframed to “confirm individual willingness to proceed with delegated care activities”, clarifying consent expectations for AINs. PC 1.5 – Updated to “identify individual preferences that may support care planning”. Simplified and aligned with person-centred language. PC 1.6 – New PC added to strengthen reporting responsibilities — “report individual information that may support care planning to the registered nurse”. PC 1.7 – New PC added to address communication — “explain the purpose of data collection and confirm understanding, according to organisational procedures.” PC 1.8 – Reworded to “communicate with individuals in a manner that is responsive to individual needs.” Updated terminology for inclusivity. PC 1.9 – Updated to “report changes in individual condition and other relevant information to a registered nurse or midwife”. Added midwife reference and refined language. PC 1.10 – Removed as safe work practices are already embedded across other PCs and foundation skills. E2 – Reworded to “support the individual to meet personal care needs in a health or community care setting”, broadening scope and modernising terminology. PC 2.1 – Simplified for clarity and alignment with delegation. Added “under the delegation of a registered nurse or midwife” and “organisational procedures.”

		PC 2.2 – Updated wording to “use equipment and aids according to organisational procedures.” Adds clear condition and measurable action. PC 2.3 – Changed “difficulties” to “concerns” and added “midwife”. Aligns with inclusive, plain English style. PC 2.4 – Updated wording to include “respect for individual preferences and communication needs”. Enhances person-centred and measurable communication. PC 2.5 – Added “cultural safety” and organisational context. Modernised terminology to “individuals”. E3 – Updated to “work with the care team, individual, families and carers.” Reflects broader collaboration and person-centred approach. PC 3.1 – Replaced “colleagues” with “care team”. Added clarity on team roles and responsibilities. PC 3.2 – New PC added to include respectful collaboration with individuals, families and carers and requirement to report concerns. PC 3.3 – Simplified to “report and record clinical data to appropriate care team member according to organisational procedures.” Improves clarity and measurability. E4 – Expanded to “work effectively under supervision and delegation of a registered nurse or midwife.” Aligns with current clinical governance and delegation principles. PC 4.1 – Changed “work instructions” to “delegated work tasks”. Added “appropriate sequence” for workflow clarity. PC 4.2 – Simplified to “seek clarification if required to complete delegated work tasks.” Plain English and active voice. PC 4.3 – Reworded to “report any issues experienced carrying out delegated work tasks directly to a registered nurse or midwife.” Clarifies accountability and aligns with supervision protocols.
Foundation Skills	No change	Explicitly mapped key skills (e.g. reading, numeracy, communication etc)
Performance Evidence	No change	• Clarified intent, structure, and performance expectations following stakeholder feedback • Aligned tasks more precisely to revised performance criteria and workplace roles • Provided a structured breakdown of care activities, data collection, and procedural support for assessability

		• Included wording refinements such as “at least one individual on at least three occasions” to address ambiguity in original version • Equipment expectations and procedural types made clearer to support assessor consistency • Maintains 80-hour requirement to ensure workplace immersion remains consistent with original unit
Knowledge Evidence	No change	Revised content is significantly expanded and thematically structured to provide greater clarity and instructional value. Major updates: • Broader scope of care settings (sub-acute, home care) included • Delegation, scope of practice, and escalation processes highlighted • Inclusive practice principles added (gender, culture, disability) • Equipment and procedures are clearly defined • Knowledge areas were aligned with job roles and stakeholder feedback • Removed "application of prostheses" as it is out of scope for Health Service Assistance job roles
Assessment Conditions	Assessor conditions removed	• Reworded for clarity and alignment with contemporary simulation and workplace assessment practices. • Changed “client care plan” to “individualised care plan” to maintain consistency with other unit components and industry language. • Broadened scope beyond acute care to support diverse care settings (aged care, home care). • Added explicit list of required assessment resources to ensure alignment with revised Performance Evidence. • Updated “AHPRA” spelling and formatting to “Ahpra” and clarified that assessors must meet current SRTOs requirements

Table 2.2: Proposed changes to *HLTA002M Provide non-client contact support in an acute care environment*

Section	Draft 1. Before Public and Government Consultation	Draft 2. After Public and Government Consultation
Title	No change	Title was shortened to reflect broader applicability of the unit across different care settings, not limited to acute care.
Application	Added "current" to reflect training package writing conventions and reinforce	• “Nursing team” replaced with “care team” to include broader care roles beyond nursing.

	currency of legislative references.	• “Direction” changed to “delegation” to reflect correct supervisory terminology. • “Registered nurse” expanded to include “midwife” to recognise maternity and broader health contexts. • “Acute care setting” broadened to “health or community care environment” in response to stakeholder requests for inclusion of settings such as aged care and sub-acute.
Elements and performance criteria	No change	E1 – Reworded to use the active verb “apply” instead of “comply” to strengthen observability. Broadened scope from “acute care environment” to “health or community care environment” for wider sector applicability. PC 1.1 – Updated from describing an internalised understanding to an observable action. Specifies applying clinical, occupational, privacy, and confidentiality procedures in daily work activities to clarify scope. PC 1.2 – Revised from generic compliance wording to “access and use health records in line with their purpose and organisational procedures”; clearer, measurable, and focused on correct record handling. PC 1.3 – Retained intent but removed the adverb “promptly” to align with training package style. Simplified to “respond to enquiries and requests according to organisational procedures.” E2 – Broadened context from “acute care environment” to “health or community care environment” to reflect wider relevance across sub-acute, aged care, and community settings. PC 2.1 – Shifted focus from preparing to collecting information. Strengthened active voice and measurability with “collect accurate information for recording in clinical and workplace documentation.” PC 2.2 – Reworded to focus on completing factual, legally compliant documentation rather than general use of equipment. Supports clearer evidence of task completion. PC 2.3 – Replaced with “operate workplace tools and technology to obtain and process information.” Clarifies expectations for digital and system-based data management tasks. PC 2.4 – Reframed from “collate and dispatch information” to “update and manage individual health records and share information in a timely manner.” Modernised to reflect contemporary record management practices.

		PC 2.5 – Simplified to “store individual health records and information according to organisational procedures.” Streamlined wording and updated terminology for consistency. E3 – Reworded to replace “acute care” with “health or community care” and better reflect support roles across varied environments such as aged care or sub-acute services. PC 3.1 – Broadened “nursing care team” to “care team” to include multidisciplinary settings. Replaced “reference material” with “individualised care plan” for specificity and accuracy. PC 3.2 – Simplified to focus on task alignment with individual needs: “select equipment appropriate to the task and individual needs, according to organisational procedures.” Clearer and person-centred. PC 3.3 – Retained unchanged, as content remains valid and measurable for assessment (“organise equipment within agreed timeframes”). PC 3.4 – Revised from “deal with issues and problems” to “report issues with equipment operation.” Clarifies realistic role boundary and aligns with delegation principles. PC 3.5 – Retained intent but updated wording from “manufacturer specifications” to “manufacturer instructions.”
Foundation Skills	No change	Explicitly mapped key skills (e.g. reading, numeracy, communication etc)
Performance Evidence	No change	• Broadened scope from "acute setting" to "health or community care environment" to reflect expanded applicability of the unit across settings such as aged care and community care • Replaced "nursing team" with "care team" for more inclusive terminology aligned with delegation practices across different environments • Reframed evidence of documentation from "6 occasions" to "3 different types" to focus on diversity of tasks rather than frequency alone • Provided examples of document types to guide assessors and RTOs in interpreting evidence requirements • Maintained the expectation to select, clean, and store 3 types of equipment, while explicitly linking this to care team support and organisational procedures

Knowledge Evidence	No change	• Refined structure and grouped content into logical categories (e.g. information management, legal, equipment) for clarity and alignment with training package conventions • Replaced "acute care environment" with "job role" or "workplace" to enable broader application across care settings • Expanded explanation of documentation types and digital systems, reflecting evolving workplace practices • Clarified scope of practice including delegation and reporting lines, aligning with consultation feedback on boundaries • Updated equipment references for accuracy and role relevance, including clarification of general awareness versus operational responsibility • Used plain English and active phrases to meet TP writing conventions
Assessment Conditions	Assessor conditions removed	• Updated terminology to reflect current systems and practices (e.g. "digital tools," "paper-based systems") • Clarified equipment and documentation expectations by specifying "access to" resources • Updated language to match contemporary TP writing conventions and include simulation realism • Aligned legislative and regulatory references with updated terminology ("current SRTOs" and "Ahpra") for consistency across qualifications and units

Table 2.3: Proposed changes to *HLTTHE001M Handle and care for operating theatre equipment*

Section	Draft 1. Before Public and Government Consultation	Draft 2. After Public and Government Consultation
Title	No change	Title revised "Handle and care for operating" changed to "Maintain and operate"
Application	Added "current" to reflect training package writing conventions and reinforce currency of legislative references.	• Expanded scope by including tasks such as disassembling, storing, and applying infection control procedures to better reflect OTT responsibilities. • Refined audience to focus on OTTs rather than "other theatre staff," in line with industry clarity. • Replaced "work under supervision" with "under the supervision of surgical and anaesthetic team"
Elements and performance criteria	No change	E1 – Retained without change PC 1.1 – No change PC 1.2 – Infection control references integrated into broader "organisational procedures" for consistency. Simplified

		language avoids redundancy and reflects current policy structure. PC 1.3 – No change PC 1.4 – No change PC 1.5 – Simplified to remove unnecessary adverb “accurately.” Retains intent while aligning with training package style conventions. PC 1.6 – No change E2 – Retained without change PC 2.1 – No change PC 2.2 – Simplified by removing “policy and” to align with standardised Training Package language — now uses “organisational procedures.” PC 2.3 – Updated “maintain accurate maintenance log book” to “maintain relevant maintenance records” for inclusivity of digital record systems. PC 2.4 – No change PC 2.5 – No change E3 (new) – New Element introduced: “Apply infection prevention and control procedures.” Created to consolidate all infection control–related activities previously dispersed across other Elements, improving clarity and alignment with industry expectations. PC 3.1 (from old PC 3.3) – Revised and relocated. Streamlined language from “infection control protocols and organisation policies” to “organisational procedures.” Added “consumables” for clarity. PC 3.2 (from old PC 3.4) – Revised to “clean and disinfect equipment according to organisational procedures.” Includes both cleaning and disinfection for completeness and consistency with modern infection control terminology. PC 3.3 (new) – Added new PC: “Follow hand hygiene and PPE procedures when handling equipment, according to organisational procedures.” Introduced to explicitly address infection prevention and safe handling. PC 3.4 (new) – Added new PC: “Identify and report any contamination risks or breaches of infection control protocols according to organisational procedures.” Strengthens accountability and escalation responsibilities. E4 (previously E3) – Renumbered due to insertion of new infection control Element. Title “Disassemble and store operating theatre equipment” retained.
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		PC 4.1 (from old PC 3.1) – Moved from previous Element. No change to content. PC 4.2 (from old PC 3.2) – Moved from previous Element. No change to content. PC 4.3 (from old PC 3.5) – Moved from previous Element. No change to content. Maintains storage and manual task safety requirements. E5 (previously E4) – Renumbered due to new infection control Element. Title retained: “Contribute to operating theatre operations.” Focus remains on teamwork and feedback processes. PC 5.1 (from old PC 4.1) – No change. PC 5.2 (from old PC 4.2) – Verb changed from “review” to “assess” for improved measurability and alignment with active performance terminology. PC 5.3 (from old PC 4.3) – No change
Foundation Skills	No change	Explicitly mapped key skills (e.g. reading, numeracy, communication etc)
Performance Evidence	No change	• Clarified “at least 3 different types of equipment” by introducing equipment types to ensure consistent assessment and align with industry feedback • Included demonstration of basic troubleshooting to reflect real-world OTT responsibilities • Replaced “manage contingencies” with “respond to contingencies” • Removed "instructions" after "procedures" in the first bullet for clarity and alignment with other units
Knowledge Evidence	No change	• Structure reorganised into clearer thematic categories to support assessment and training delivery • Expanded infection control scope by including transmission-based precautions as per stakeholder and SME feedback • Included “consultation and planning” and “communication and collaboration” to align with job tasks performed by OTTs • Separated fault management and basic troubleshooting to reflect skill boundaries and escalation responsibilities • Included terminology updates (e.g. "individual" instead of "client", “organisational procedures” instead of “protocols”)

Assessment Conditions	Assessor conditions removed	• Expanded list of required equipment to align with current operating theatre environments and stakeholder expectations • Organised equipment into two distinct categories for clarity: “Operating theatre equipment” and “Positioning and mobility equipment” • Included specific modern tools (e.g. laparoscopic stack systems, hover mats) that reflect technological advancements in theatre practices • Replaced general “fully equipped operating theatre” with detailed examples to support clearer guidance for RTOs and assessors • Specified “simulated environment” should replicate realistic challenges to improve assessment validity • Updated assessor requirement to reflect current SRT0 terminology
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Table 2.4: Proposed changes to *HLTTHE002M Assist with preparation of individuals for operative procedures*

Section	Draft 1. Before Public and Government Consultation	Draft 2. After Public and Government Consultation
Title	No change	The term “Client” was replaced by “individuals” to align with consistent person-centred language
Application	Added “current” to reflect training package writing conventions and reinforce currency of legislative references.	• “Clients” changed to “individuals” • Reference to “other theatre staff” was removed to focus on the primary target audience: operating theatre technicians. • Reworded “anaesthetist and other members of the operating room team” to “surgical and anaesthetic team” to reflect standard clinical terminology.
Elements and performance criteria	No change	E1 – Reworded to focus on preparing the theatre environment rather than the individual, aligning with OTT scope. “Clients” changed to “individuals” for consistency and inclusivity. PC 1.1 – No change PC 1.2 – No change PC 1.3 – Simplified by removing “standard and additional” to streamline infection control expectations. Updated to “organisational procedures” for consistency across units. PC 1.4 – No change

		PC 1.5 – Removed. Task now addressed later in workflow under Elements 2 and 3 to better reflect procedural order. PC 1.6 – Removed. Content related to storage and re-use now incorporated in HLTTHE001 to avoid duplication. PC 1.7 → 1.5 – Revised to “report faulty equipment according to organisational procedures.” Refocused on safety and fault escalation within OTT role scope. E2 – Reworded to “prepare the individual for transfer” to clarify focus on pre-transfer preparation. “Client” changed to “individual” for person-centred language. PC 2.1 – Retained, with only language updated from “client” to “individual.” PC 2.2 → 2.2 – No change PC 2.3 (was 2.2) – Revised to include communication with both individual and staff. Reordered to reflect logical workflow sequence. PC 2.4 (was 2.3) – Updated to “adjust or detach equipment under direction of surgical team.” Clarifies delegation and combines two similar tasks into one measurable PC. PC 2.5 (new) – Added to include identifying and selecting appropriate assistive devices for transfer, in response to SME feedback on safety and equipment selection. PC 2.6 (was 2.8) – Retained and reordered. Updated to “individual” terminology and positioned later for correct sequencing. PC 2.7 – Removed. Task on reconnection and post-transfer positioning now relocated to Element 3 for logical workflow. PC 2.5 (old) – Moved to Element 3 (PC 3.3) to consolidate all manual handling safety tasks. E3 (new) – Added new element “Assist the individual transfer” to isolate active transfer tasks and reflect correct procedural sequence from preparation to transfer. PC 3.1 (new) – Added to explicitly describe the act of transferring the individual using appropriate assistance and safe handling methods. Addresses missing observable task from old version. PC 3.2 (from old PC 2.4) – Moved and refined to “adjust equipment attached to individual during transfer according to organisational procedures.” Improves clarity and sequencing. PC 3.3 (from old PC 2.5) – Retained and relocated for logical task order within transfer process.
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		PC 3.4 (from old PC 2.7) – Retained and relocated to mark final stage of transfer process (reconnect and position equipment). E4 (was E3) – Renumbered due to new transfer element. Title updated to “position individual for operative procedure.” Reflects inclusive terminology and consistency across surgical context. PC 4.1 (was 3.1) – Reworded for clarity and active voice: “advise or communicate with individual on positioning procedure, provide reassurance, and encourage cooperation.” PC 4.2 (was 3.3) – Reworded for clarity and specificity: “take into account individual needs and confirm care requirements with relevant personnel.” PC 4.3 (was 3.4) – No change PC 4.4 (was 3.5) – Simplified to “position individual to meet requirements of surgical team and individual’s condition.” Uses modern terminology (“surgical team”) for accuracy. PC 4.5 (was 3.6) – Updated to “seek confirmation of correct operative position from surgical team.” Replaces “anaesthetist and surgeon” for inclusivity. PC 4.6 (was 3.7) – Reworded for consistency: “maintain individual in correct position using assistive equipment.” PC 4.7 (was 3.8) – Retained with updated terminology; reinforces person-centred focus on dignity.
Foundation Skills	No change	Explicitly mapped key skills (e.g. reading, numeracy, communication etc)
Performance Evidence	No change	• Reworded to specify “safe manual handling procedures” in addition to technical and infection control protocols, ensuring coverage of workplace safety expectations and alignment with updated PCs. • “Clients” changed to “individuals” • Clarified requirements to include positioning into four main surgical positions i.e. supine, prone, lateral, and lithotomy, providing measurable, observable range of practice for assessment and alignment with standard intraoperative positioning. • Added new volume and duration requirement: “perform the activities outlined in the performance criteria during a period of at least 80 hours of work related to preparation of individuals for operative procedures in a clinical workplace environment.” which ensures adequate workplace exposure

		for skills application.
Knowledge Evidence	No change	The revised version provides greater clarity through grouped subheadings, aligning with training package conventions and improved readability. It expands areas such as: • Legal and WHS obligations (explicitly separating legislative and ethical considerations) • Anatomy and physiology (now include broader context and clearer scope) • Manual handling and risk (emphasising WHS-principled movement) • Communication and comfort (newly introduced section responding to stakeholder feedback around person-centred care) The term "client" is replaced with "individual" for consistency
Assessment Conditions	Assessor conditions removed	• Expanded resource list reflects current equipment and practice expectations in theatre settings. • Includes modern positioning and mobility aids commonly used by Operating Theatre Technicians (OTTs). • Specific naming of equipment (e.g., laparoscopic stack systems, electrosurgical unit) ensures consistency with Performance Evidence and Knowledge Evidence. • Updates "RTOs 2015/AQTF" to "current SRTOs" for compliance with latest regulatory language. • Phrase "access to" added for clarity in simulation environments. • Retains requirement for realistic simulation conditions including problem-solving components.

Table 2.5: Proposed changes to *HLTTHE003M Provide intra-operative equipment and technical support*

Section	Draft 1. Before Public and Government Consultation	Draft 2. After Public and Government Consultation
Title	No change	No change
Application	Added "current" to reflect training package writing conventions and reinforce	• "Other theatre staff" was removed to improve clarity and align the unit specifically with the Operating Theatre Technician job role.

	currency of legislative references.	• "Medical staff" was replaced with "team" to reflect inclusive team-based language used across the updated units. • "Current" was added before "Commonwealth and State/Territory legislation" to reflect training package writing conventions and ensure alignment with the most up-to-date legal and procedural references.
Elements and performance criteria	No change	E1 – No change PC 1.1 (new) – Added new PC: "Position self and equipment to avoid breach of sterile field during procedure." Introduced to address proactive maintenance of the sterile field and improve assessment of technician spatial awareness. PC 1.2 (was 1.1) – Repositioned for sequencing. No change PC 1.3 (was 1.2) – Minor editorial change: "in accordance with organisation policy and procedures" replaced with "according to organisational procedures" for consistency with current training package conventions. E2 – No change PC 2.1 (was 2.1) – Updated terminology from "warning devices" to "surgical devices" to reflect contemporary operating theatre equipment and broaden scope. PC 2.2–2.3 (split from old PC 2.2) – Old PC 2.2 divided into two new PCs for clarity and measurability: • PC 2.2: Focuses on confirming adequacy of gas, electrical, and suction supply levels. • PC 2.3: Focuses on verifying back-up systems are functional and available. PC 2.4 (was 2.3) – Updated to "observe equipment while in use and report faults to prevent risk to individual and staff." Replaced "recognise faults and take immediate action" with "report faults" to better reflect OTT role boundaries and delegation. PC 2.5 (was 2.4) – Simplified to "rectify faulty equipment according to organisational procedures." Shortened for consistency with training package writing style. PC 2.6 (was 2.5) – Updated "in accordance with organisation policy and procedures" to "according to organisational procedures." Language standardised across HLT units. E3 – No change PC 3.1 – No change PC 3.2 – Updated terminology: "client" replaced with "individual," "medical staff" replaced with "surgical team,"

		and “client attachments” revised to “attachments for individual procedures” for precision and consistency. PC 3.3 – Updated to “re-position attachments during theatre procedures based on equipment needs.” Clarifies purpose of repositioning and removes client reference for inclusivity. PC 3.4 – Updated wording to “safely detach attachments using techniques that minimise risk of damage to individual, staff or equipment.” Terminology standardised. PC 3.5 – No change E4 – No change PC 4.1 – “Medical staff” replaced with “surgical team” to align with consistent terminology across the unit. PC 4.2 – No change PC 4.3 – Added phrase “according to organisational procedures” to reinforce compliance with infection control and workplace protocols. PC 4.4 – Simplified wording: “organisational policy and procedures” changed to “organisational procedures.” PC 4.5 – No change PC 4.6 – Simplified wording: “organisational policy and procedures” changed to “organisational procedures.” E5 – No change PC 5.1 – “Medical staff” replaced with “surgical team” for consistent terminology. Intent unchanged. PC 5.2 – No change PC 5.3 – Simplified and modernised: “surgical and anaesthetic medical staff” replaced with “surgical team.” Reduces redundancy and reflects standard operating team structures. PC 5.4 – Minor reordering: “clearly communicate readings accurately to medical staff.” Improves readability while retaining intent. PC 5.5 – “Medical staff” replaced with “surgical team.” PC 5.6 – Verb changed from “pass” to “receive” to reflect accurate workflow interaction
Foundation Skills	No change	Explicitly mapped key skills (e.g. reading, numeracy, communication etc)
Performance Evidence	No change	• Introductory sentence retained with no changes. • Minimum evidence requirements strengthened by specifying that all three conditions must be demonstrated (not just one of each).

		• Clarified expectation of at least three occasions • Improved clarity and accountability in evidence gathering for RTOs and assessors.
Knowledge Evidence	No change	The revised version expands on the original content by: • Introducing clear subcategories (e.g., scope, infection control, equipment, communication, etc.) to improve clarity and alignment with modern training package structuring • Adding communication, contingency response, and counter-traction sections, which reflect added responsibilities from revised PCs • Retaining all key concepts from the original while expanding detail for safety, legal, and procedural compliance • Updating terminology (e.g., "clients" replaced by "individuals") and improving clarity on WHS, medico-legal implications, and environmental factors
Assessment Conditions	Assessor conditions removed	The revised version significantly expands the level of specificity regarding required facilities and equipment, improving clarity and consistency across theatre technician training and simulation delivery. • Equipment lists now reflect contemporary surgical environments, allowing better benchmarking and resource planning by RTOs • Addition of gel supports, OEFs, tourniquet systems, etc. aligns with revised performance expectations and task simulation requirements • Updated reference from "RTOs 2015/AQTF" to current SRTOs reflects policy currency • Improved wording structure: "access to" reinforces the practical availability of resources rather than implied presence

New units of competency – application, elements and performance criteria

Table 2.6: New unit of competency - HLTTHE004N Operate and maintain advanced technology in surgical theatre environments

Section	Draft 1: Validation – New unit developed with SME panel
Title	HLTTHE004N Operate and maintain advanced technology in surgical theatre environments

Application	New unit application to address the gap in the usage of advanced technology in surgical theatre environment
Elements and performance criteria	New Elements and performance criteria developed
Performance Evidence	New Performance Evidence developed
Knowledge Evidence	New Knowledge evidence developed
Assessment Conditions	Assessor conditions developed

Table 2.7: New unit of competency - *HLTTHE005N Provide assistance during clinical emergencies in surgical theatre environments*

Section	Draft 1: Validation – New unit developed with SME panel
Title	HLTTHE005N Provide assistance during clinical emergencies in surgical theatre environments
Application	New unit application to address the gap in the advanced technical support during intra-operative clinical emergencies
Elements and performance criteria	New Elements and performance criteria developed
Performance Evidence	New Performance Evidence developed
Knowledge Evidence	New Knowledge evidence developed
Assessment Conditions	Assessor conditions developed

New unit of competency – application of skills and knowledge (ASK)

Table 2.8: Proposed changes to ASK Unit *HLTMAT001N Pregnancy and postnatal health and wellbeing foundations*

Section	Draft 1: Validation – New unit developed with SME panel
Title	<i>HLTMAT00X Support health and wellbeing in pregnancy and HLTMAT00X Support health and wellbeing in the postnatal period</i> combined to create one-unit <i>HLTMAT001N Pregnancy and postnatal health and wellbeing foundations</i>
Application	This unit is a knowledge unit, and the Application of Skills and Knowledge (ASK) template was suitable
Knowledge	New field added to comply with ASK template
Skills	New field added to comply with ASK template
Application of Skills and Knowledge	New field added to comply with ASK template

Foundation Skills	Indicates the foundation skill outcomes a competent learner is expected to have upon completion of the qualification.
Performance Evidence	Demonstrates practical application of knowledge by analysing three case studies or simulations across pregnancy, birth, and postnatal care.
Knowledge Evidence	Ensures learners understand maternal and newborn wellbeing, key care practices, influencing factors, professional responsibilities, and culturally responsive communication to support safe, person-centred care.
Assessment Conditions	Assessor requirements include RTO requirements and NMBA registration

5. Next Steps

Public and Government second round of consultation is expected to take place from **10 November 2025 – 28 November 2025**.

During this second consultation period, the project team will facilitate multiple ways for stakeholders to engage and provide feedback, including:

- Survey enabling stakeholders to provide feedback via HumanAbility's website
- Opportunity to provide written feedback via email direct to the project team.

We invite stakeholders including employers, service providers, regulatory bodies, First Nations communities, training organisations, RTOs, students and communities, to provide feedback via a survey to ensure all information is captured in consultation log.

Throughout the second consultation period, a consultation log of feedback will be maintained and made public, along with rationales for any decisions or revisions. After validation closes, the project team, with input from the Technical Committee, will review all feedback and update the drafts accordingly. Divergent views will be addressed, and if necessary, further consultation will occur. Final drafts will then be submitted to the Assurance Body and the Skills Ministers for consideration, endorsement and implementation.

HumanAbility

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HumanAbility is a Jobs and Skills Council funded by the Australian Government Department of Employment and Workplace Relations.

Qualification template

Qualification code	HLT33115M
Qualification title	Certificate III in Health Services Assistance
Qualification description	This qualification is for individuals engaged in a range of health and community care support occupations. It includes specialisations for Operating Theatre Technician and Assisting in Nursing Work. Individuals with this qualification will have skills and knowledge that are transferable across a range of occupations. Occupational titles may include: • Assistant in Nursing (AIN) or Hospital Aide • Operating Theatre Technician • Patient Care/Support Assistant • Orderly • Ward Assistant • Ward Clerk • Maternity Support Assistant Individuals with this qualification perform a defined range of factual, technical and procedural tasks to support the delivery of safe, person-centred care, often involving direct client contact under the delegation and supervision of a registered nurse or other qualified health professional. <i>The skills in this qualification/skill set must be applied in accordance with Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.</i>
Entry requirements	N/A
Packaging Rules	Total number of units = 15 • 7 core units • 8 elective units, consisting of: • at least 1 unit from Group A • at least 5 units from either Group B, C or other electives. • up to 2 units from other electives listed below, or any currently endorsed Training Package or accredited course. Elective units must ensure the integrity of the qualification's Australian Qualification Framework (AQF) alignment and contribute to a valid, industry-supported vocational outcome.

Any combination of electives that meet the rules above can be selected for the award of the Certificate III in Health Services Assistance.

Specialisations

This qualification can provide for specialisations. To achieve a specialisation, the following additional packaging rules must be adhered to:

- For specialisation in **Operating Theatre Technician**, all units from Group B electives must be selected. To achieve this specialisation, the candidate must have completed at least 80 hours of work as detailed in the Assessment Requirements of the relevant unit of competency.
- For specialisation in **Assisting in Nursing Work**, all units from Group C electives must be selected. To achieve this specialisation, the candidate must have completed at least 80 hours of work as detailed in the Assessment Requirements of the relevant unit of competency.

Core Units

BSBMED301	Interpret and apply medical terminology appropriately
BSBPEF301	Organise personal work priorities
CHCCCS002	Assist with movement
CHCCOM005	Communicate and work in health or community services
CHCDIV001	Work with diverse people
HLTAAP001	Recognise healthy body systems
HLTINF006	Apply basic principles and practices of infection prevention and control

Elective units

Group A – Work Health and Safety

HLTWHS001	Participate in workplace health and safety
HLTWHS002	Follow safe work practices for direct client care
HLTWHS005	Conduct manual tasks safely

Group B – Operating Theatre Technician specialisation

HLTAID010	Provide basic emergency life support
HLTHSS012	Handle medical gases safely
HLTTHE001M	Maintain and operate theatre equipments
HLTTHE002M*	Assist with preparation of clients for operative procedures
HLTTHE003M	Provide intra-operative equipment and technical support

**A mandatory workplace requirement is specified in this unit.*

Group C – Assisting In Nursing specialisation

CHCCCS020	Respond effectively to behaviours of concern
CHCCCS026	Transport individuals
HLTAIN001M*	Assist with nursing care
HLTAIN002M	Provide non-client contact support

**A mandatory workplace requirement is specified in this unit.*

Other Electives

BSBINS201	Process and maintain workplace information
BSBMED302	Prepare and process medical accounts
BSBMED303	Maintain patient records
BSBMED305	Apply the principles of confidentiality, privacy and security within the medical environment
BSBSTR401	Promote innovation in a team environments
BSBTEC201	Use business software applications
CHCAGE007	Recognise and report risk of falls
CHCAGE008	Implement falls prevention strategies
CHCAGE011	Provide support to people living with dementia
CHCAOD001	Work in an alcohol and other drugs context
CHCCCS009	Facilitate responsible behaviour
CHCCCS010	Maintain a high standard of service
CHCCCS012	Prepare and maintain beds
CHCCCS019	Recognise and respond to crisis situations
CHCCCS031	Provide individualised support
CHCCCS038	Facilitate the empowerment of people receiving support

	CHCDIV002	Promote Aboriginal and/or Torres Strait Islander cultural safety
	CHCLEG001	Work legally and ethically
	CHCMHS001	Work with people with mental health issues
	CHCMHS007	Work effectively in trauma informed care
	CHCPRP005	Engage with health professionals and the health system
	CPPCLO4100	Organise and monitor cleaning tasks
	HLTAID009	Provide cardiopulmonary resuscitation
	HLTAID011	Provide first aid
	HLTFSE001	Follow basic food safety practices
	HLTFSE002	Provide ward or unit based food preparation and distribution services
	HLTFSE003	Perform kitchenware washing
	HLTFSE005	Apply and monitor food safety requirements
	HLTFSE006	Prepare foods suitable for a range of client groups
	HLTFSE007	Oversee the day-to-day implementation of food safety in the workplace
	HLTFSE009	Apply cook-freeze and reheating processes
	HLTMAT001N	Pregnancy and postnatal health and wellbeing foundations
	HLTHPS006	Assist clients with medication
	HLTHSS009	Perform general cleaning tasks in a clinical setting
	HLTHSS010	Handle and move equipment, goods and mail
	HLTOHC004	Provide or assist with oral hygiene
	HLTSTE001	Clean and disinfect reusable medical devices
	SITXFSA005	Use hygienic practices for food safety
	SITXFSA006	Participate in safe food handling practices
	SITXFSA007	Transport and store food
Qualification mapping information	<i>No equivalent qualification.</i>	
Links		

Qualification template

Qualification code	HLT47515M														
Qualification title	Certificate IV in Operating Theatre Technical Support														
Qualification description	This qualification reflects the role of senior operating theatre workers who provide assistance to operating theatre personnel. No licensing, legislative, regulatory or certification requirements apply to this qualification at the time of publication.														
Entry requirements	Certificate III Health Service Assistance (OTT Specialisation) and 2 years full time experience as Operating Theatre Technician (OTT)														
Packaging Rules	Total number of units = 14 9 core units 5 elective units, consisting of: - up to 5 units from the electives listed below, any endorsed Training Package or accredited course – these units must be relevant to the work outcome, All electives chosen must contribute to a valid, industry-supported vocational outcome. To achieve this qualification, the candidate must have completed at least 80 hours of work as detailed in the Assessment Requirements of the relevant unit of competency. Core units <table> <tbody> <tr> <td>BSBLDR414</td><td>Lead team effectiveness</td></tr> <tr> <td>BSBSTR402</td><td>Implement continuous improvement</td></tr> <tr> <td>CHCLEG001</td><td>Work legally and ethically</td></tr> <tr> <td>HLTINF007</td><td>Implement and monitor infection prevention and control standards, policies and procedures</td></tr> <tr> <td>HLTTHE004N*</td><td>Operate and maintain advanced technology in surgical theatre environments</td></tr> <tr> <td>HLTTHE005N</td><td>Provide assistance during clinical emergencies in surgical theatre environments</td></tr> <tr> <td>HLTWHS005</td><td>Conduct manual tasks safely</td></tr> </tbody> </table>	BSBLDR414	Lead team effectiveness	BSBSTR402	Implement continuous improvement	CHCLEG001	Work legally and ethically	HLTINF007	Implement and monitor infection prevention and control standards, policies and procedures	HLTTHE004N*	Operate and maintain advanced technology in surgical theatre environments	HLTTHE005N	Provide assistance during clinical emergencies in surgical theatre environments	HLTWHS005	Conduct manual tasks safely
BSBLDR414	Lead team effectiveness														
BSBSTR402	Implement continuous improvement														
CHCLEG001	Work legally and ethically														
HLTINF007	Implement and monitor infection prevention and control standards, policies and procedures														
HLTTHE004N*	Operate and maintain advanced technology in surgical theatre environments														
HLTTHE005N	Provide assistance during clinical emergencies in surgical theatre environments														
HLTWHS005	Conduct manual tasks safely														

	HLTWHS006 Manage personal stressors in the work environment TAEDEL414 Mentor in the workplace <i>*A mandatory workplace requirement is specified in this unit.</i> Electives Units BSBHRM413 Support the learning and development of teams and individuals BSBINS402 Coordinate workplace information systems BSBLDR413 Lead effective workplace relationships BSBOPS402 Coordinate business operational plans BSBSTR401 Promote innovation in a team environments BSBSTR402 Implement continuous improvement CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety CHCPRP003 Reflect on and improve own professional practice HLTAAP002 Confirm physical health status ICTSAS446 Fault find and troubleshoot ICT equipment, hardware and software problems TAEASS412 Assess competence TAEDEL412 Facilitate workplace-based learning
Qualification mapping information	<i>No equivalent qualification.</i>
Links	

Unit of Competency template

Unit code	HLTAIN001M	
Unit title	Assist with nursing care	
Modification History	Release	Comments
	Release 1	Supersedes and it is not equivalent to HLTAIN001 Assist with nursing care in an acute care environment. Major changes to performance criteria, performance evidence. Additions to knowledge evidence. Foundation skills added.
Application	This unit describes the skills and knowledge required to provide health care assistance in accordance with an established individualised care plan, under the delegation and supervision of a registered nurse or midwife in acute, sub-acute, aged care, or other care environments. <i>The skills in this unit must be applied in accordance with current Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.</i>	
Pre-requisite unit	N/A	
Competency field		
Unit sector	Health	
Elements	Performance criteria	
1. Provide delegated care to individuals in a health or community care setting	1.1 Implement delegated care tasks to support individual needs according to individualised care plan 1.2 Collect clinical data using equipment and workplace procedures 1.3 Report all clinical data using workplace procedures 1.4 Confirm individual willingness to proceed with delegated care activities, according to organisational procedures 1.5 Identify individual preferences that may support care plan 1.6 Report individual information that may support care planning to the registered nurse, according to organisational procedures.	

	1.7 Explain the purpose of data collection to individual and confirm understanding, according to organisational procedures 1.8 Communicate with individuals in a manner that is responsive to individual needs 1.9 Report changes in individual condition and other relevant information, to a registered nurse or midwife
2. Support the individual to meet personal care needs in a health or community care setting.	2.1 Provide support and care to meet daily living activities, in accordance with the individualised care plan, organisational procedures, and under the delegation of a registered nurse or midwife 2.2 Use equipment and aids according to organisational procedures and requirements when providing assistance and support 2.3 Report any concerns in providing individual support and assistance to a registered nurse or midwife 2.4 Provide information to individuals to support their personal care needs in a manner that respects their individual preferences and communication needs 2.5 Maintain the confidentiality, privacy, dignity and cultural safety of individuals in accordance with organisational procedures
3. Work with the care team, individual, families and carers	3.1 Work with the care team, with consideration of team roles and responsibilities 3.2 Work with individual, families and carers, in a respectful manner and report back concerns, issues or uncertainty to registered nurse or midwife 3.3 Report and record clinical data to appropriate care team member, according to organisational procedures
4. Work effectively under supervision and delegation of a registered nurse or midwife	4.1 Carry out delegated work tasks in the appropriate sequence within agreed time frame 4.2 Seek clarification if required to complete delegated work tasks 4.3 Report any issues experienced carrying out delegated work tasks directly to a registered nurse or midwife

Foundation skills

This section describes those language, literacy, numeracy and employment skills that are essential to performance but not explicit in the performance criteria.

Skill	Description
Reading	Interpret individualised care plans, organisational procedures, equipment instructions, and clinical charts.

Writing	Complete documentation of observations, report concerns, and record individual information.
Oral communication	Explain care activities, confirm understanding, reassure individuals, and communicate with team and carers.
Numeracy	Measure and record vital signs, fluid intake, and other numerical clinical data accurately.
Problem-solving	Identify changes in condition, respond to issues within scope, and escalate concerns appropriately.
Technology use	Operate observation equipment, personal care aids, and mobility devices safely and effectively.
Planning and Organising	Sequence delegated tasks, prioritise workload, and complete care within required timeframes.
Cultural competence	Respect cultural needs, maintain dignity, and provide inclusive care for individuals and families.
Range of conditions N/A	
Unit mapping information	<i>No equivalent unit.</i>
Links	

Assessment Requirements template

Title	Assessment Requirements for HLTAIN001M Assist with nursing care
Performance evidence	The candidate must show evidence of the ability to complete tasks outlined in elements and performance criteria of this unit, manage delegated tasks and contingencies within the scope of their job role. Evidence must be demonstrated with at least two individual on at least three occasions (minimum one in a simulated environment and two in the workplace), across a range of situations, including different times, individual conditions, and care contexts. For each occasion, the candidate must demonstrate the following under the delegation and supervision of a registered nurse and in accordance with an individualised care plan:

	▪ Demonstrated workplace practice and communication, including: • worked in a manner that respects the dignity, privacy, confidentiality and cultural needs of individuals • communicated effectively with the individual and care team • reported and recorded individual information as required ▪ support with daily living activities • Provided clients with personal hygiene and grooming, relevant to their needs, including: ○ assisted with showering, sponge bathing, or bed bathing ○ dressed and undressed individuals ○ provided oral hygiene ○ provided hair care (excluding treatments) ○ shaved individuals ○ applied skin care and moisturiser • Provided clients with toileting and continence care, relevant to their needs, including: ○ assisted with toileting, including continence aid use and replacement ○ emptied urinary catheter bags and document/report output (external only) ○ cleaned external tubing ○ reported changes in continence abnormalities or needs ○ reported status of bowel movements and document issues • Supported clients with nutrition and hydration, including: ○ assisted with eating and drinking ○ recorded fluid and food intake, where delegated ▪ collection and recording of clinical data collect and report clinical data according to organisational procedures using the following equipment at least once. • respiratory rate • pulse rate
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	• temperature • blood pressure (using automatic machine unless manual skill is specifically required) • oxygen saturation • blood glucose level (using approved devices) • pain score • intake and output (fluid balance/food chart) • weight and height measurements • urinalysis ▪ assisting with low-risk procedures in a simulated or workplace environment, on at least three occasions, tasks must be clearly delegated and performed under supervision: • re-applied (not measured or fitted) of anti-thrombosis stockings • cleaned around indwelling catheter entry point (no insertion or removal) • performed simple wound care (cleansed and applied non-sterile dressing only; no packing) • assisted with oxygen delivery devices under registered nurse or midwife direction monitoring and reporting changes • recognised and reported changes in a individual's condition (at least once one per occasion), including: ○ skin integrity ○ behaviour or mood observed or reported ○ pain expression ○ level of alertness (using avpu scale or workplace method) ▪ performed the activities outlined in the performance criteria of this unit during a period of at least 80 hours of work
Knowledge evidence	The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and respond to contingencies within the context of the job role. This includes knowledge of: role and scope of practice including:

	- responsibilities and limitations of the health services assistant job role - the meaning and importance of delegation by a registered nurse and midwife - when and how to seek clarification or escalate concerns - work role boundaries in different care settings - acute care - sub-acute care - home care organisational policies, procedures and protocols including: - infection prevention and control - manual handling and Work Health and Safety (WHS) requirements - documentation, incident reporting, and escalation processes - quality and safety standards and accreditation communication and culture including: - communication protocols, including communication styles and reporting structures - factors that influence effective communication with individuals, including: - language and literacy - cultural background and preferences - cognitive ability and health conditions - use of interpreters or communication aids - safety risks and procedures in home-based or isolated care environments - safe and inclusive well being needs including: - gender-specific considerations - cultural safety consideration for aboriginal and torres - strait islander and culturally and linguistically diversified - safe and inclusive practise for diverse populations including: - disability - gender
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	▪ individual living with mental illness legal and ethical considerations including: • mandatory reporting • duty of care • privacy, confidentiality and disclosure • codes of conduct and professional behaviour • human rights and dignity • the concept of dignity of risk and/or self-determination • ethical behaviour and boundaries during personal care • after-death care responsibilities anatomy, physiology and clinical observations including: • basic anatomy and physiology relevant to collecting and interpreting vital signs • normal clinical ranges and variations in: ○ temperature ○ pulse ○ respiratory rate ○ blood pressure ○ oxygen saturation ○ blood glucose ○ pain score ○ skin condition and level of alertness (e.g. avpu scale) ○ bowel opening ○ urine output ○ urinalysis • the signs of individual deterioration and when to escalate concerns • basic understanding of falls prevention and implications for skin, bone, and mobility personal care and daily living activities including: • principles of providing respectful and individualised personal care
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	• psychological, emotional, and cultural factors influencing personal care • use and care of equipment and aids to support daily living ○ continence aids ○ mobility aids ○ hygiene tools • personal care practices including: ○ showering, bathing, dressing ○ oral hygiene ○ grooming and shaving ○ toileting, continence support, and skin hygiene • risks associated with poor hygiene and continence care skin integrity and pressure area care including: • causes and implications of skin breakdown • procedures to maintain skin integrity (e.g. repositioning, moisturising, skin checks) • observing, documenting, and reporting changes in skin condition • prevention and management of pressure injuries within scope • risks associated with lack of repositioning continence support including: • purpose and types of continence programs • use, care and limitations of continence aids • components of catheter systems (external only) • indicators of infection or deterioration related to continence use of equipment and assistive aids including: • common equipment used to support personal care • safe handling and storage of prescribed personal equipment • limitations of job role in adjusting or administering prescribed aids • cost and damage risk related to assistive devices delegated procedures and support tasks including:
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	• scope of assistance for delegated tasks including but not limited to: ○ recording observations ○ basic catheter care (external only) ○ simple wound care (cleaning and dressing without packing) ○ re-application of anti-thrombosis stockings • understanding aseptic principles when supporting wound or catheter care • recognising signs of deterioration, including change in consciousness and escalating accordingly
Assessment conditions	Simulation must meet industry standards to accurately reflect real-world scenarios and support skill development. The following task must be demonstrated in simulation prior to being undertaken in the workplace: • assisting with nursing care in accordance with an individualised care plan, under the delegation of a registered nurse or midwife assessment must include access to the following: • individualised care plan or clinical pathway (terminology may vary by organisation) • personal care equipment and aids identified in the care plan • equipment relevant to collecting clinical data and low risk procedures • organisational policies and procedures • individual records and documentation relevant to support tasks Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors. • and be a registered nurse with current registration with the Australian Health Practitioner Regulatory Agency (Ahpra) or hold current NMBA registration as a midwife.
Links	

Unit of Competency template

Unit code	HLTAIN002M	
Unit title	Provide non-client contact support	
Modification History	Release	Comments
	Release 1	Supersedes and is not equivalent to HLTAIN002 Provide non-client contact support in an acute care environment. Major changes to performance criteria, performance evidence. Additions to knowledge evidence. Foundation skills added.
Application	This unit describes the skills and knowledge required to provide a range of non-client contact support to a care team under the delegation and supervision of a registered nurse or midwife in a health or community care environment. <i>The skills in this unit must be applied in accordance with current Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.</i>	
Pre-requisite unit	N/A	
Competency field		
Unit sector	Health	
Elements	Performance criteria	
1. Apply workplace information protocols in a health or community care environment	1.1 Apply clinical, occupational, privacy and confidentiality procedures in daily work activities 1.2 Access and use health records in line with their purpose and organisational procedures 1.3 Respond to enquiries and requests according to organisational procedures	
2. Collect, process and maintain accurate records in	2.1 Collect accurate information for recording in clinical and workplace documentation, according to organisational procedures	

a health or community care environment	2.2 Complete clinical and workplace documentations that are factual in accordance with legal and organisational procedures 2.3 Operate workplace tools and technology to obtain and process information according to organisational procedures 2.4 Update and manage individual health records, and share information in a timely manner according to organisational procedures 2.5 Store individual health records and information according to organisational procedures
3. Support equipment requirements in a health or community care environment	3.1 Consult with the care team and refer to the individualised care plan to identify equipment needs 3.2 Select equipment appropriate to the task and individual needs, according to organisational procedures 3.3 Organise equipment within agreed timeframes 3.4 Report issues with equipment operation according to organisational procedures 3.5 Clean and store equipment safely according to organisation procedures and manufacturer instructions

Foundation skills

This section describes those language, literacy, numeracy and employment skills that are essential to performance but not explicit in the performance criteria.

Skill	Description
Reading	Identifies and interprets information in workplace documents including care plans, organisational procedures, and individual records.
Writing	Prepares clear, factual workplace documentation including reports and records, using required formats.
Oral communication	Uses appropriate language and tone to exchange information with care team members and respond to enquiries.
Numeracy	Interprets and works with basic numerical data when processing individual information or tracking timeframes.
Digital literacy	Uses digital systems and workplace tools to record, retrieve and manage information according to procedures.
Planning and organising	Organises own workload and resources within defined timeframes and under delegation.
Teamwork	Collaborates with care team members to support the delivery of care and identify equipment needs.

Range of conditions N/A	
Unit mapping information	<i>No equivalent unit.</i>
Links	

Assessment Requirements template

Title	Assessment Requirements for HLTAIN002M Provide non-client contact support
Performance evidence	The candidate must show evidence of the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and respond to contingencies in the context of the job role. There must be evidence that the candidate has: - provided non-client contact support in a health or community care environment to at least 1 care team either in the workplace or in a simulated environment that reflects workplace conditions. - completed at least 3 different types of workplace documents or forms in accordance with organisational procedures and delegation, which may include: - individual records - stock requisition forms - WHS incident reports - cleaning or equipment logs - selected, cleaned, and stored at least 3 types of equipment or resources used to support the care team delivery in accordance with organisational procedures.
Knowledge evidence	The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and respond to contingencies in the context of the job role. This includes knowledge of:

	information management and record keeping including: • types of workplace documentation and individual records relevant to non-client contact support • digital and paper-based record keeping systems and privacy protocols • procedures for collecting, storing, and retrieving workplace information • organisational procedures for maintaining confidentiality and information security. organisational structure and role scope including: • structure and roles within the care team • scope of practice ○ delegated responsibilities ○ reporting lines ○ limitations • importance of seeking clarification or supervision when required. organisational procedures related to: ○ accessing and retrieving workplace information ○ collecting and processing workplace information ○ infection prevention and control ○ equipment handling and maintenance ○ reporting and escalation processes legal and ethical considerations including: • privacy, confidentiality, and disclosure requirements under relevant legislation • work role boundaries and scope of practice • basic duty of care principles • whs responsibilities relevant to job role basic functions and safe handling of the following (as relevant to the role and workplace setting): ○ positioning and mobility aids ○ storage or setup of commonly used clinical equipment ○ suction units (low-pressure, portable) — general awareness only ○ emergency equipment, including knowledge of location and basic purpose
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Assessment conditions	Skills must be demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit: • access to individual care plan or pathways • access to equipment or resources identified in the care plan • infection prevention and control procedures • access to digital or paper-based systems for obtaining and processing workplace documentation • workplace forms, digital tools, and storage systems for equipment and records Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors. • and be a registered nurse with current registration with the Australian Health Practitioner Regulatory Agency (Ahpra) or hold current NMBA registration as a midwife.
Links	

Unit of Competency template

Unit code	HLTTHE001M	
Unit title	Maintain and operate theatre equipment	
Modification History	Release	Comments
	Release 1	Supersedes and is not equivalent to HLTTHE001 Handle and care for operating theatre equipment. Major changes to performance criteria, performance evidence. Additions to knowledge evidence and assessment conditions. Foundation skills added.
Application	This unit describes the skills and knowledge required to prepare theatre equipment, provide basic maintenance support, apply infection prevention and control procedures, and disassemble, store, contribute to effective use of equipment by providing basic instruction to others on equipment operation. This unit applies to operating theatre technicians who work under the supervision of surgical and anaesthetic team. <i>The skills in this unit must be applied in accordance with current Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.</i>	
Pre-requisite unit	N/A	
Competency field		
Unit sector	Health	
Elements	Performance criteria	
1. Select and prepare operating theatre equipment	1.1 Identify equipment and consumables requirements, based on consultation with operating theatre team, review of operating list and surgeon preferences 1.2 Set up, correctly position, and check equipment and consumables according to organisational procedures	

	1.3 Assemble, connect and test components in accordance with specific equipment requirements 1.4 Re-position equipment during theatre procedures, as required by specific procedure 1.5 Document the use of theatre equipment as required 1.6 Withdraw from use and replace equipment if considered not safe for use
2. Support equipment maintenance	2.1 Identify and correct minor equipment problems within scope of own job role 2.2 Refer equipment maintenance to a specialist as required by scope and nature of problem and organisational procedures 2.3 Maintain relevant maintenance records as required 2.4 Schedule equipment for maintenance based on the needs of the operating theatre 2.5 Maintain communication with relevant operating theatre staff in relation to equipment maintenance
3. Apply infection prevention and control procedures	3.1 Clean and disinfect equipment according to organisational procedures 3.2 Dispose of waste and consumables according to organisational procedures 3.3 Follow hand hygiene and PPE procedures when handling equipment, according to organisational procedures. 3.4 Identify and report any contamination risks or breaches of infection control protocols according to organisational procedures
4. Disassemble and store operating theatre equipment	4.1 Follow shut-down procedures in accordance with manufacturer's recommendations 4.2 Assemble and disassemble equipment in accordance with manufacturer's recommendations and manual task risk principles 4.3 Safely store equipment in accordance with manufacturer's recommendations and manual task risk principles
5. Contribute to operating theatre operations	5.1 Provide clear and correct instructions on equipment operation to individual members of the theatre team as required 5.2 Assess equipment effectiveness from a theatre technician's perspective and provide feedback to relevant personnel 5.3 Participate as required in team evaluations of equipment being considered for potential purchase and share information from the theatre technician's perspective

Foundation skills

Foundation skills essential to performance are explicit in the performance criteria of this unit of competency.

Skill	Description
Reading	To interpret manufacturer's instructions, maintenance documentation, operating lists, infection control protocols and organisational procedures
Writing	To complete equipment logs, maintenance records, and documentation related to equipment use or faults
Oral communication	To provide clear instructions and relay technical information regarding equipment use to theatre team members
Numeracy	To understand equipment calibration data, interpret numeric settings, and manage maintenance schedules
Problem-solving	To identify, assess, and resolve minor equipment issues, or escalate faults beyond scope
Technology use	To operate, test, disassemble, clean, and store a range of specialised operating theatre equipment in accordance with specifications and protocols
Planning and Organising	To sequence setup and shutdown tasks, prepare equipment in advance, prioritise equipment safety, and coordinate maintenance activities efficiently

Range of conditions

N/A

Unit mapping information

No equivalent unit.

Links

Assessment Requirements template

Title	Assessment Requirements for HLTTHE001M Maintain and operate theatre equipment
Performance evidence	The candidate must show evidence of the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and respond to contingencies in the context of the job role. There must be evidence that the candidate has: • followed established technical, infection control and safety procedures for set-up, shut-down, cleaning and storage of operating theatre equipment on at least 3 occasions • performed routine maintenance procedures on at least 3 different types of equipment selected from the below: ○ patient positioning aids ○ fluid and suction systems ○ electrosurgical units ○ operating table accessories ○ general theatre equipment • demonstrated equipment handling and basic troubleshooting in accordance with organisational procedures and manufacturer instructions
Knowledge evidence	The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of: consultation and planning including: • procedures for consulting with members of the surgical team • methods for interpreting operating lists and surgeon preferences to determine equipment and consumables requirements role and responsibilities including: • scope of the operating theatre technician role in working with equipment • limitations of the technician's responsibilities in the operating theatre environment medico-legal considerations including: • medico-legal implications relating to the use of operating theatre equipment • organisational and legal obligations relevant to safe practice and compliance equipment types and purpose including:

	○ theatre fixtures and fittings ○ theatre furniture ○ surgical equipment ○ consumables and principles of sustainable use features and functions of operating theatre equipment relevant to: ○ set-up ○ assembly and connection ○ preparation for use in accordance with organisational procedures equipment selection and suitability including: • principles for selecting appropriate equipment and consumables based on procedure type, patient needs, and workplace protocols manual handling and equipment movement including: • safe manual handling ○ principles of safe manual handling ○ risk factors associated with manual tasks in the operating theatre • intra-operative safety ○ individual safety considerations relating to the location and movement of equipment during operative procedures routine equipment maintenance procedures, including: ○ checking and functional testing ○ calibration ○ cleaning ○ replacement of consumables ○ scheduled maintenance fault management and escalation including: ○ types of problems that may occur with operating theatre equipment ○ indicators for when specialist maintenance is required ○ procedures for reporting faults and organising specialist maintenance according to organisational requirements basic troubleshooting including: • techniques for identifying and resolving common equipment faults within the technician's scope of responsibility • understanding limits of troubleshooting before escalation standard and transmission-based infection control procedures applicable to: ○ the operating theatre environment
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	○ operating theatre equipment documentation and record-keeping including: • organisational procedures for documenting equipment use • maintenance and servicing records • requirements for providing technician feedback and reporting issues communication and team collaboration including: • communication protocols for providing operational instructions to theatre staff • procedures for discussing equipment condition and performance with relevant personnel • roles and responsibilities when contributing to equipment evaluations or purchase discussions
Assessment conditions	Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit: • use of suitable facilities, equipment and resources, including access to: • operating theatre equipment, including: ○ operating table and lights ○ electrosurgical unit (ESU) ○ instrument trolley ○ suction apparatus (including mobile and wall-mounted systems) ○ microscopes (where applicable) ○ laparoscopic stack systems • positioning and mobility equipment, including: ○ bean bags ○ yellowfin stirrups ○ pat slides, slide sheets, hovermats ○ lateral supports ○ head supports and head foams ○ gel supports ○ traction or orthopaedic extension frames (OEF) ○ tourniquet ○ lightweight table extensions

	• hospital beds • documented procedures and organisational protocols relevant to equipment use and maintenance • simulated environment that replicate workplace challenges, including problem solving related to equipment setup, maintenance, or failure Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors.
Links	

DRAFT OCTOBER 2025

Unit of Competency template

Unit code	HLTTHE002M	
Unit title	Assist with preparation of individuals for operative procedures	
Modification History	Release	Comments
	Release 1	Supersedes and is not equivalent to HLTTHE002 Assist with preparation of clients for operative procedures. Major changes to performance criteria, performance evidence. Additions to knowledge evidence and assessment conditions. Foundation skills added.
Application	This unit of competency describes the skills and knowledge required to prepare, transfer and position individuals for operative procedures. This unit applies to operating theatre technicians who work under the supervision of a surgical and anaesthetic team. <i>The skills in this unit must be applied in accordance with current Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.</i>	
Pre-requisite unit	N/A	
Competency field		
Unit sector	Health	
Elements	Performance criteria	
1. Prepare the theatre for individuals' procedure	1.1 Determine preparation needs from review of information 1.2 Select and use personal protective equipment appropriate to procedure 1.3 Adopt infection control guidelines and precautions according to organisational procedures 1.4 Attach equipment safely and securely to appropriate sites 1.5 Report faulty equipment according to organisational procedures	

2. Prepare the individual for transfer	2.1 Identify correct operating table and table orientation before individual is transferred 2.2 Identify and respond to individual discomfort during transfer 2.3 Inform individual and relevant personnel of actions to be performed 2.4 Adjust or detach equipment under the direction of surgical team, following organisational process and infection control requirements prior to transfer 2.5 Identify and select appropriate assistive devices for individual transfer 2.6 Maintain individual's dignity before, during and after transfer
3. Assist the individual transfer	3.1 Transfer the individual using appropriate assistance, safe handling methods and equipment 3.2 Adjust equipment attached to individual during transfer according to organisational procedures 3.3 Maintain a safe working area and clear passage at all times assessing and controlling for manual task risk factors 3.4 Re-connect and position equipment once transfer is completed following infection control requirements
4. Position individual for operative procedure	4.1 Advise or communicate with individual positioning procedure, provide reassurance, and encourage cooperation as needed 4.2 Take into account individual needs and confirm care requirements with relevant personnel 4.3 Follow correct manual handling procedures and seek assistance 4.4 Seek confirmation of correct operative position from surgical team 4.5 Position individual to meet the requirements of surgical team and individual's condition 4.6 Maintain the individual in correct position, using assistive equipment 4.7 Maintain individual's dignity during positioning
Foundation skills <i>Foundation skills essential to performance are explicit in the performance criteria of this unit of competency.</i>	
Skill	Description
Reading	To interpret operating lists, equipment manuals, organisational protocols, and infection control guidelines
Writing	To record preparation tasks, incidents, and handover notes accurately and in line with organisational requirements

Oral communication	To reassure individuals, explain procedures, and liaise effectively with surgical and anaesthetic teams
Numeracy	To understand and apply timeframes and measurements related to positioning and equipment setup
Problem-solving	To manage individual discomfort, respond to equipment issues, and apply infection control and WHS procedures to mitigate risks
Technology use	To safely handle, attach, detach, and adjust theatre and mobility equipment in accordance with specifications and infection control standards
Planning and Organising	To sequence actions for individual preparation, transfer, and positioning, ensuring smooth workflow and alignment with surgical needs and WHS principles
Cultural Competence	Responds to individual discomfort with cultural sensitivity, respects privacy, and incorporates individual needs into care planning
Range of conditions N/A	
Unit mapping information	No equivalent unit.
Links	

Assessment Requirements template

Title	Assessment Requirements for HLTTHE002M Assist with preparation of individuals for operative procedures
Performance evidence	The candidate must show evidence of the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the job role. There must be evidence that the candidate has: - followed established technical, infection control and safe manual handling procedures and instructions for the preparation, transfer and positioning of at least 3 different individuals, into 4 main surgical positions: - supine - prone - lateral - lithotomy

	perform the activities outlined in the performance criteria of this unit during a period of at least 80 hours of work related to preparation of individuals for operative procedures in a clinical workplace environment.
Knowledge evidence	The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of: legal and ethical considerations for theatre work and how these are applied in organisations, including: - children in the workplace - duty of care - informed consent - mandatory reporting - privacy, confidentiality and disclosure - records management role boundaries and workplace obligations including: - work role boundaries, including responsibilities and limitations when working with individuals - work health and safety (WHS) requirements applicable to the operating theatre setting infection control procedures including: - standard and transmission-based infection control procedures relevant to the operating theatre environment - additional infection control requirements specific to operative environments and individual handling tasks equipment handling, functionality and terminology including: - equipment for individual preparation - features and functions of equipment used when preparing individuals: - during transfer - during positioning - medical terminology used in the operating room that is relevant to the role of the operating theatre technician anatomy, physiology and individual positioning including: - basic human anatomy and physiology relevant to individual transfer and positioning, including: - normal and abnormal body positions - joint movement

	○ features of body locations where equipment may need to be attached or detached • different positions required for operative procedures, including: ○ supine ○ prone ○ lateral ○ lithotomy • associated risks, precautions, and techniques for protecting individuals during movement and positioning • safe manual handling principles and risk factors for manual tasks in the perioperative environment individual communication and comfort including: • techniques for communicating positioning and transfer procedures to individuals and providing reassurance • strategies for maintaining individual dignity and minimising discomfort before, during, and after transfer and positioning
Assessment conditions	Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit: • use of suitable facilities, equipment and resources, including access to: • operating theatre equipment, including: ○ operating table and lights ○ electrosurgical unit (ESU) ○ instrument trolley ○ suction apparatus (including mobile and wall-mounted systems) ○ microscopes (where applicable) ○ laparoscopic stack systems • positioning and mobility equipment, including: ○ bean bags ○ yellowfin stirrups ○ pat slides, slide sheets, hovermats ○ lateral supports ○ head supports and head foams

	○ gel supports ○ traction or orthopaedic extension frames (OEF) ○ tourniquet ○ lightweight table extensions • hospital beds • documented procedures that the candidate follows • modelling of industry operating conditions, including presence of situations requiring problem solving Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors.
Links	

Unit of Competency template

Unit code	HLTTHE003M	
Unit title	Provide intra-operative equipment and technical support	
Modification History	Release	Comments
	Release 1	Supersedes and is not equivalent to HLTTHE003 Provide intra-operative equipment and technical support Major changes to performance criteria, performance evidence. Additions to knowledge evidence and assessment conditions. Foundation skills added.
Application	This unit describes the skills and knowledge required to provide equipment and technical support during operative procedures. This unit applies to operating theatre technicians who work under the direction of a surgical and anaesthetic team. <i>The skills in this unit must be applied in accordance with current Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.</i>	
Pre-requisite unit	N/A	
Competency field		
Unit sector	Health	
Elements	Performance criteria	
1. Maintain sterile field	1.1 Position self and equipment to avoid breach of sterile field during procedure 1.2 Conform with aseptic principles when moving around a sterile field to prevent contamination 1.3 Report personal and other staff breaches of aseptic principles to the relevant staff according to organisational procedures	
2. Monitor equipment performance	2.1 Switch on surgical devices and check correct operation	

	2.2 Confirm gas, electrical, and suction levels meet procedural requirements 2.3 Verify back-up systems are functional, available and accessible. 2.4 Observe equipment while in use and report faults to prevent risk to individual and staff according to organisational procedures 2.5 Rectify faulty equipment according to organisational procedures. 2.6 Complete accurate equipment documentation according to organisational procedures
3. Attach and detach equipment	3.1 Select and use appropriate personal protective equipment 3.2 Select appropriate attachments for individual procedures, and attach to appropriate sites under the guidance of surgical team 3.3 Re-position attachments during theatre procedures based on equipment needs 3.4 Safely detach attachments using techniques that minimise risk of damage to individual, staff or equipment 3.5 Provide counter-traction during orthopaedic and plastic procedures and manipulations as directed
4. Connect irrigation	4.1 Select correct irrigation and sequencing for operative procedure under the guidance of the surgical team 4.2 Check information about irrigation type, sterile integrity and expiry date 4.3 Connect irrigation to sterile giving set using correct aseptic techniques according to organisational procedures 4.4 Change irrigation using aseptic techniques according to organisational procedures 4.5 Communicate the volume, type and number of irrigation bags to scout nurse 4.6 Dispose of used irrigation bags/giving sets according to organisational procedures
5. Adjust theatre equipment	5.1 Handle theatre equipment under the direction and supervision of surgical team and within manufacturer's guidelines 5.2 Connect theatre equipment to electrical, vacuum, gas supply in accordance with standard operating procedures 5.3 Adjust theatre equipment settings in accordance with manufacturer's guidelines under guidance of surgical team 5.4 Clearly communicate readings accurately to medical staff as required

	5.5 Recognise and clearly communicate alarms/warnings, abnormal readings and equipment usage times to surgical team 5.6 Use aseptic techniques to receive sterile equipment/lines from the surgical team and connect to theatre equipment
Foundation skills <i>Foundation skills essential to performance are explicit in the performance criteria of this unit of competency.</i>	
Skill	Description
Reading	To interpret equipment manuals, manufacturer guidelines, irrigation labels, expiry dates, and organisational procedures
Writing	To accurately document equipment checks, faults, irrigation volumes, and procedural records in line with organisational requirements
Oral communication	To effectively communicate equipment performance, alarms, readings, and technical concerns to surgical staff and colleagues
Numeracy	To interpret numeric data from equipment settings, measurements, volumes and time-based alerts
Problem-solving	To identify and respond to equipment faults, alarm conditions, and changing surgical needs
Technology use	To safely operate, connect, adjust, and troubleshoot a wide range of surgical equipment under supervision, using aseptic and WHS procedures
Planning and Organising	To plan the preparation and sequencing of tasks during procedures, manage backup systems, and prioritise safety under changing conditions
Range of conditions N/A	
Unit mapping information	No equivalent unit.
Links	

Assessment Requirements template

Title	Assessment Requirements for HLTTHE003M Provide intra-operative equipment and technical support
Performance evidence	The candidate must show evidence of the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the job role. There must be evidence that the candidate has: - followed established technical, infection control and safety procedures and instructions for equipment support in a range of different situations, including at least three (3) occasions addressing all of the following at least once: - during emergencies - re-positioning - change of surgical procedure
Knowledge evidence	The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of: role of the operating theatre technician including: - scope of job role and skill set of the operating theatre technician when working with theatre equipment medico-legal considerations including: - medico-legal implications in relation to the use of equipment by technicians in the operating suite environment - legal and organisational responsibilities related to safe equipment use and documentation standard and transmission-based procedures including: - the operating theatre environment - equipment used within the operating theatre theatre equipment knowledge including: - types of theatre equipment and their purpose - specific hazards and precautions related to equipment use for individual and staff safety, including: - electrical safety - equipment settings features and correct use of theatre equipment in relation to: - set-up procedures - assembly and connection - preparation for use in surgical procedures

	○ safe manual handling practices irrigation equipment including: • function • application • associated hazards of irrigation equipment used during operative procedures human anatomy and physiology relevant to individual transfer and positioning, including: • normal and abnormal body positioning • joint movement • features of body locations where equipment may need to be attached or detached operative positions and risk management including: • the four main surgical positions required for operative procedures, including: ○ supine ○ prone ○ lateral ○ lithotomy • associated risks and correct methods for positioning individuals to ensure safety and procedural access environmental systems including: • theatre airflow and ventilation • operation of air-conditioning and ventilation systems in the operating room • impact of environmental systems on patient safety, the technician's role, and intraoperative work practices communication and reporting including: • requirements for communicating equipment readings, alarms, and warnings to medical staff • procedures for reporting breaches of aseptic technique and faulty equipment to relevant staff • communication protocols for liaising with surgical and anaesthetic teams, including during emergency situations and procedure changes emergency and contingency response including: • procedures for responding to equipment issues during emergencies, repositioning, and changes in surgical procedures • knowledge of backup systems and protocols for maintaining safety during intraoperative equipment failure
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	counter-traction techniques including: principles of counter-traction and the technician's role during orthopaedic and plastic procedures
Assessment conditions	Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit: - use of suitable facilities, equipment and resources, including access to: - operating theatre equipment, including: - operating table and lights - electrosurgical unit (ESU) - instrument trolley - suction apparatus (including mobile and wall-mounted systems) - microscopes (where applicable) - laparoscopic stack systems - positioning and mobility equipment, including: - bean bags - yellowfin stirrups - pat slides, slide sheets, hovermats - lateral supports - head supports and head foams - gel supports - traction or orthopaedic extension frames (OEF) - tourniquet - lightweight table extensions - hospital beds - documented procedures that the candidate must follow - modelling of industry operating conditions, including presence of situations requiring problem solving Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors.
Links	

Unit of Competency template

Unit code	HLTTHE004N	
Unit title	Manage advanced technology in surgical theatre environments	
Modification History	Release	Comments
	Release 1	New unit.
Application	This unit describes the skills and knowledge required to operate, maintain, and troubleshoot advanced technologies in surgical theatre environments. It applies to operating theatre technicians (OTTs) who work with a high degree of autonomy and are responsible for ensuring safe and effective use of complex and emerging technologies across a range of surgical specialties. Work is undertaken in varied environments, including public, private, regional, and remote healthcare settings, where access to advanced technologies and technical support may be limited. OTTs must apply problem-solving and decision-making skills to adapt to the constraints of infrastructure, connectivity, and workforce availability. While OTTs operate with a high degree of technical autonomy, their responsibilities are performed under clinical direction and in collaboration with surgical and anaesthetic teams. For tasks such as robotic docking and intra-operative adjustments, OTTs follow delegated instructions, ensuring alignment with procedural and safety protocols. <i>The skills in this unit must be applied in accordance with current Commonwealth and State/Territory legislation, Australian standards and industry codes of practice.</i>	
Pre-requisite unit	N/A	
Competency field		
Unit sector	Health	

Elements	Performance criteria
1. Identify and prepare advanced surgical equipment for surgical procedures	1.1 Review surgical lists, procedural guidelines, and surgeon preferences to determine equipment needs. 1.2 Identify procedures-specific technology requirements in consultation with surgical team 1.3 Pair, position and connect modules and other relevant equipment as per surgical preferences 1.4 Conduct pre-use checks and initiate system calibration or self-check functions 1.5 Report unavailable or malfunctioning equipment according to organisational procedures
2. Operate and monitor complex theatre technologies during surgical procedures	2.1 Activate equipment and confirm readiness according to procedural timelines and manufacturer specifications 2.2 Operate technology in collaboration with surgical team and within scope of OTT responsibilities 2.3 Monitor performance indicators and adjust system parameters as required by surgical team 2.4 Identify operational deviations or system alarms during use 2.5 Implement immediate corrective actions in response to system feedback 2.6 Escalate unresolved technical issues according to organisational procedures 2.7 Communicate system status and intra-operative issues clearly to the surgical team
3. Apply safe practices when handling robotic and automated systems	3.1 Prepare robotic and automated systems according to organisation's procedural requirements and safety procedures 3.2 Perform docking of surgical robot as directed by surgical team, according to organisation's procedural requirements and safety procedures 3.3 Operate control interfaces and ensure robotic systems respond as expected

	3.4 Identify safety risks during robotic-assisted procedures 3.5 Implement appropriate measures to manage identified safety risks 3.6 Conduct emergency shutdown and manual override according to organisational procedures. 3.7 Perform post-undocking sequence and confirm system reset or shutdown according to procedural guidelines				
4. Maintain, clean, and troubleshoot advanced equipment post-procedure	4.1 Deactivate and disconnect devices following organisational procedures 4.2 Perform routine cleaning and decontamination in line with manufacturer and infection control guidelines 4.3 Inspect devices for wear, damage, or software irregularities and record findings according to organisational procedures 4.4 Apply basic troubleshooting techniques to resolve minor faults or configuration issues 4.5 Document servicing, repairs, and incident reports according to organisational procedures				
5. Collaborate with surgical teams and technical vendors to optimise equipment use.	5.1 Communicate equipment specifications, limitations, and configuration options to the surgical team before procedures 5.2 Provide timely intra-operative updates on equipment performance and system alerts to the surgical team 5.3 Report post-operative equipment performance issues and improvement recommendations to the surgical team according to organisational procedures 5.4 Coordinate with technical vendors to schedule installation, oversee servicing activities, and verify completion of equipment upgrades 5.5 Report equipment servicing needs and upgrade requests to authorised personnel according to organisational procedures				
Foundation skills <i>This section describes those language, literacy, numeracy and employment skills that are essential to performance but not explicit in the performance criteria.</i> <table> <tr> <th>Skill</th><th>Description</th></tr> <tr> <td>Reading</td><td>interpret complex organisational procedures, manufacturer instructions, and equipment calibration guidelines that may be unfamiliar or highly technical</td></tr> </table>		Skill	Description	Reading	interpret complex organisational procedures, manufacturer instructions, and equipment calibration guidelines that may be unfamiliar or highly technical
Skill	Description				
Reading	interpret complex organisational procedures, manufacturer instructions, and equipment calibration guidelines that may be unfamiliar or highly technical				

Writing	complete usage logs, servicing records, incident reports, and vendor documentation using standard workplace formats and terminology
Oral communication	provide updates on equipment status, report technical issues to designated personnel, and seek information or clarification from surgical staff or vendors
Numeracy	Interpret calibration values, system parameters, alarms involving decimals, percentages, and ratios; read equipment timing and volume data
Problem-solving	identify equipment faults, apply routine troubleshooting steps, and escalate unresolved technical or safety issues according to procedures
Technology use	Operate robotic systems, digital imaging platforms, and automated surgical equipment in varied settings.
Planning and Organising	prioritise and sequence pre-operative and post-operative equipment tasks, and coordinate with external vendors within job role boundaries
Teamwork	collaborate with surgical staff during procedures and support intra-operative equipment use under pressure
Self-management	use PPE, follow WHS and infection prevention protocols, and work independently within scope of the OTT role
Range of conditions N/A	
Unit mapping information	<i>No equivalent unit.</i>
Links	

Assessment Requirements template

Title	Assessment Requirements for HLTTHE004N Manage advanced technology in surgical theatre environments
Performance evidence	The candidate must demonstrate the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the job role. There must be evidence that the candidate has: Managed surgical robotic specialties involving advanced or robotic

	technologies on at least three separate occasions, across at least two different surgical robotic specialties addressing all of the following: • determined advanced equipment needs • configured and connected surgical technologies, including robotic or automated systems • conducted pre-use system checks and calibration process • operated advanced surgical technologies during procedures • identified equipment faults and troubleshooting protocols or escalation procedures within scope of job role • conducted post-operative cleaning, and decontamination of relevant equipment • documented equipment condition, software irregularities in maintenance logs • recorded and reported servicing needs or upgrade requests • followed workplace procedures for infection prevention, WHS requirements, and incident documentation • applied emergency procedures including manual overrides and shutdown procedures in at least once during simulation perform the activities outlined in the performance criteria of this unit during a period of at least 80 hours of work related to advanced technology in a clinical workplace environment.
Knowledge evidence	The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and respond to contingencies in the context of the job role. This includes knowledge of: types and functions of advanced surgical technologies used in operating theatres, including: • robotic-assisted systems • high-definition digital imaging platforms • automated patient positioning devices • advanced fluid and suction systems • integrated electrosurgical units technology-specific combination of equipment configuration for different surgical specialties including: • urology • gynaecology • general surgery • orthopaedics • cardiothoracic surgery

	procedural preparation and system setup requirements, including: • pairing • calibration • software updates • pre-use checks and activation procedures in line with manufacturer specifications • system interoperability, modular integration, and compatibility with other surgical tools • principles of equipment readiness, real-time monitoring, and performance adjustments during procedures • documentation requirements for servicing, inspections, usage logs, and alerts safety, risk, and emergency procedures, including: • electrical safety principles, thermal risk management, and mechanical hazard mitigation • procedures for emergency shutdown, manual override, and safe undocking of robotic systems • organisational procedures for responding to equipment failure, alarms, and system malfunctions • WHS and infection prevention principles for high-risk surgical technology use troubleshooting and post-procedure maintenance, including: • troubleshooting methods for common equipment faults, including: ○ software configuration issues ○ software errors ○ hardware connectivity issues • post-operative cleaning of the devices and maintenance in accordance with infection control guidelines • inspection criteria for identifying signs of wear, visible damage, and software irregularities that may affect performance or safety, and knowing the proper procedures for reporting these issues promptly following organisational procedures. • servicing and upgrade schedules for advanced surgical equipment communication, collaboration, and reporting including: • roles and responsibilities of the surgical team members in operating and supporting advanced technologies • communication procedures for intra-operative updates and escalation pathways
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	• collaboration processes with technical vendors for equipment installation, troubleshooting, servicing, and upgrade validation • reporting obligations for equipment incidents, maintenance outcomes, and vendor interactions regulatory, ethical and organisational frameworks including: • WHS legislation, NSQHS standards, and organisational policies relevant to operating theatre equipment use • data security, software integrity, and patient privacy requirements for digital technologies • legal and ethical responsibilities when operating or supporting advanced surgical equipment during procedures
Assessment conditions	Skills must be demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit: simulated or real surgical environments with access to: • robotic systems • automated surgical equipment advanced digital and electrosurgical theatre technologies • access to surgical lists and procedural guidelines reflective of a range of surgical specialities • organisational policies and procedures relevant to equipment management, WHS, and infection prevention and control, and maintenance protocols • communication systems and team interaction protocols used in surgical settings • documentation systems used for recording equipment use, faults, maintenance, and vendor interactions • resources and procedures to support simulated or real emergency equipment scenarios Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors.
Links	

Unit of Competency template

Unit code	HLTTHE005N	
Unit title	Provide assistance during clinical emergencies in surgical theatre environments	
Modification History	Release	Comments
	Release 1	New unit.
Application	This unit describes the skills and knowledge required to provide advanced technical support during intra-operative clinical emergencies. It applies to experienced operating theatre technicians who respond to emergency situations in coordination with surgical team or according to clinician instructions, while working within established protocols and their defined scope of responsibility. Work is undertaken in accordance with infection prevention and control, WHS protocols, clinical emergency procedures, and within the scope of responsibility of the operating theatre technician. <i>The skills in this unit must be applied in accordance with current Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.</i>	
Pre-requisite unit	HLTAID009 Provide cardiopulmonary resuscitation	
Competency field		
Unit sector	Health	
Elements	Performance criteria	
1. Respond to intra-operative clinical emergencies	1.1 Utilise personal protective equipment in a manner consistent with infection prevention and WHS protocols 1.2 Identify when to call for assistance and ensure timely communication with appropriate personnel 1.3 Undertake emergency repositioning of individuals in coordination with the surgical team	

	1.4 Follow clinician instructions accurately and respond effectively and carry out delegated emergency tasks 1.5 Respond to a critical incident or code by performing allocated tasks and following emergency protocols										
2. Provide support during emergency interventions	2.1 Promptly obtain emergency equipment and make it ready for use 2.2 Set up emergency support devices within scope of role 2.3 Reposition or adjust individual positioning to facilitate emergency access 2.4 Provide manual support during emergency interventions, as directed by the surgical team										
3. Support circulation and resuscitation responses	3.1 Prepare and position fluid support equipment during emergency procedures, according to clinician instructions 3.2 Retrieve and transport medical supplies during emergency, according to clinician instructions 3.3 Provide support during resuscitation efforts within scope of job role and under clinical direction										
4. Operate and maintain emergency-related theatre equipment	4.1 Set up emergency-related theatre equipment within scope of role and according to manufacturer and organisational procedures 4.2 Check and maintain equipment readiness before and during emergency procedures 4.3 Interpret equipment alerts or failures and escalate according to organisational escalation procedures										
Foundation skills <i>This section describes those language, literacy, numeracy and employment skills that are essential to performance but not explicit in the performance criteria.</i> <table> <tr> <th>Skill</th><th>Description</th></tr> <tr> <td>Reading</td><td>Interpret clinician instructions, equipment guidelines, emergency protocols, and escalation procedures.</td></tr> <tr> <td>Writing</td><td>Record incident details and complete routine emergency and equipment documentation</td></tr> <tr> <td>Oral communication</td><td>Use clear and concise communication to call for assistance, confirm instructions, and relay information during emergency procedures.</td></tr> <tr> <td>Numeracy</td><td>Interpret familiar equipment readings and measurements related to fluids and time intervals.</td></tr> </table>		Skill	Description	Reading	Interpret clinician instructions, equipment guidelines, emergency protocols, and escalation procedures.	Writing	Record incident details and complete routine emergency and equipment documentation	Oral communication	Use clear and concise communication to call for assistance, confirm instructions, and relay information during emergency procedures.	Numeracy	Interpret familiar equipment readings and measurements related to fluids and time intervals.
Skill	Description										
Reading	Interpret clinician instructions, equipment guidelines, emergency protocols, and escalation procedures.										
Writing	Record incident details and complete routine emergency and equipment documentation										
Oral communication	Use clear and concise communication to call for assistance, confirm instructions, and relay information during emergency procedures.										
Numeracy	Interpret familiar equipment readings and measurements related to fluids and time intervals.										

Problem-solving	Identify and respond to routine or familiar issues such as basic equipment faults or changes in theatre conditions.
Technology use	Operate familiar emergency devices, such as defibrillators, suction units, and oxygen systems, according to organisational procedures.
Planning and Organising	Prioritise and sequence routine emergency support tasks under direction.
Teamwork	Collaborate with the surgical team during emergencies and respond appropriately to clinician instructions.
Self-management	Follow WHS and infection prevention procedures, use PPE correctly, and work within defined job role and organisational procedures.
Range of conditions N/A	
Unit mapping information	<i>No equivalent unit.</i>
Links	

Assessment Requirements template

Title	Assessment Requirements for HLTTHE005N Provide assistance during clinical emergencies in surgical theatre environments
Performance evidence	The candidate must demonstrate the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the job role. There must be evidence that the candidate has: responded to at least two intra-operative clinical emergency involving : ▪ communication with surgical and clinical team members ▪ emergency individual repositioning ▪ retrieval or setup of at least two types of emergency support equipment • supported resuscitation efforts during at least one intra-operative emergency, including: ▪ prepare and position the individual for resuscitation ▪ retrieve and sett up resuscitation and monitoring equipment

	- operated and prepared at least three emergency-related operating theatre machines or equipment items included: - respiratory support - circulatory support - surgical visualisation or access - for each, the candidate must have: - checked for functionality - verified for cleanliness and readiness - positioned or connected the device safely for clinical use - completed emergency documentation and reports for at least one intra-operative emergency, in line with organisational procedures for infection prevention, WHS, and recordkeeping.
Knowledge evidence	The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and respond to contingencies in the context of the job role. This includes knowledge of: Types and classifications of intra-operative clinical emergencies including: - cardiac arrest - respiratory failure - haemorrhage - anaphylaxis - CICO events (Can't Intubate Can't Oxygenate) Operating theatre emergency protocols and escalation procedures including: - Code Blue - Code Red - MET (Medical Emergency Team) calls - response processes Functions and safe use of emergency-related theatre equipment and machines including: - defibrillators, oxygen and suction systems - difficult intubation trolleys, CMAC, bronchoscopes - rapid infusers, fluid warmers, blood warmers - gastroscopy and EBUS units, Cell Saver Principles of infection prevention and control relevant to emergency procedures - standard and transmission-based precautions - PPE usage in high-risk and time-critical settings Roles and responsibilities of operating theatre technicians in emergency response - scope of practice - delegation protocols from clinical staff - limits of authority during high-risk interventions

	Safe patient positioning techniques to facilitate airway access, circulation, and surgical exposure, including ○ Lateral ○ Supine ○ Prone ○ lithotomy ○ Trendelenburg positions Processes and documentation requirements following intra-operative emergencies ○ incident reports ○ emergency logs ○ equipment checklists ○ WHS and infection control reporting Basic concepts of emergency fluid products handling ○ handling, transporting, and verifying fluid products ○ risks and infection control considerations Maintenance and troubleshooting techniques for emergency support equipment ○ routine checks and fault identification ○ basic error interpretation and escalation processes Legal and ethical requirements during theatre emergencies ○ duty of care and informed consent limitations ○ confidentiality and documentation standards ○ working under direction while upholding professional responsibilities.
Assessment conditions	Skills must be demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit: • use of suitable facilities, equipment and resources, including access to: • Emergency and resuscitation equipment, including: ○ mobile suction apparatus ○ oxygen systems ○ defibrillators • operating theatre equipment, including: ○ operating table and lights ○ electrosurgical unit (ESU) ○ instrument trolley ○ suction apparatus (wall-mounted systems) ○ microscopes (where applicable) ○ laparoscopic stack systems • positioning and mobility equipment, including:

	○ bean bags ○ yellowfin stirrups ○ pat slides, slide sheets, hovermats ○ lateral supports ○ head supports and head foams ○ gel supports ○ traction or orthopaedic extension frames (OEF) ○ tourniquet ○ lightweight table extensions • hospital beds • Workplace forms, digital tools, and storage systems for equipment and records • modelling of industry operating conditions, including presence of situations requiring problem solving Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors.
Links	

Application of Skills and Knowledge

Unit code	HLTMAT001N
Unit title	Pregnancy and postnatal health and wellbeing foundations
Unit outcomes	This unit provides knowledge-based introduction to the health and wellbeing of mothers, newborns, and families across pregnancy and the postnatal period. Learners will develop foundational knowledge of maternal and newborn wellbeing, and understand their role in promoting safe, respectful, and culturally responsive care. This unit applies to individuals working, or intending to work, in support or entry-level roles in health or community settings. No licensing, legislative or certification requirements apply to this unit at the time of publication.
Knowledge	At the completion of this unit, learners will have the knowledge of: Pregnancy • Common physical, emotional, and psychological needs of mothers during pregnancy • Key normal maternal physiological changes during pregnancy and implications for health and wellbeing • Importance of early and ongoing antenatal care, screening, and health promotion • Nutritional, lifestyle, and environmental factors influencing pregnancy outcomes • Importance of breastfeeding education and preparation to support breastfeeding after birth • Purpose and significance of normal maternal observations (blood pressure, pulse, temperature, weight, urine analysis) in identifying complications

	- Processes and procedures for notifying and escalating pathways for abnormal maternal or fetal observations and express concerns Postnatal - Physical, emotional, and psychological needs of mothers in the postnatal period - Normal newborn behaviours - Principles of the Baby Friendly Health Initiative (BFHI) - Maternal health changes following birth and implications for wellbeing - Newborn care considerations: feeding, sleeping, bonding, and safe environments - Safe sleeping practices and strategies to reduce the risk of sudden infant death syndrome (SIDS) and sudden unexplained death of the infant (SUDI) - Infection prevention and control in postnatal care - Common postnatal complications and related escalation pathways - Support needs for partners, families, and caregivers in the postnatal context Core concepts - Understanding of normal physiological and emotional changes during pregnancy, the process of labour and birth, and the postnatal period - Access to immunisation information for families and escalation processes for immunisation queries - Culturally safe and responsive care practices, including perspectives of Aboriginal and Torres Strait Islander peoples and culturally and linguistically diverse communities - Respectful communication, informed decision-making, and woman-centred care
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	Strategies for reflective practice and self-care when supporting mothers, infants, and families
Skills	Learners will have the foundational learning outcomes to: - recognise delegated aspects of pregnancy and postnatal care - describe approaches to supporting maternal and newborn wellbeing and promoting healthy behaviours - describe approaches to supporting mothers, promoting breastfeeding, and safe sleeping practices - interpret and report basic maternal observations following organisational protocols - identify healthcare terminology related to maternal and infant health. - outline principles of infection control, including hand hygiene and the use of personal protective equipment (PPE) - explain safe storage of expressed breast milk - explain safe preparation and storage of infant formula - describe the principles of culturally responsive and respectful communication in discussions or group activities. - contribute collaboratively to team-based learning activities - provide key information to support maternal and newborn health and wellbeing
Application of Knowledge & Skills	Learners apply foundational knowledge of pregnancy and postnatal health and wellbeing in non-clinical, supportive contexts under supervision. They use discretion and judgment to identify and interpret information that promotes safe, healthy, and culturally responsive care for mothers, infants, and families.
Pre-requisite unit	N/A
Competency field	Health Support
Unit sector	Maternal and Child Health
Foundation skills Learning	

- applies structured learning and reflection to build understanding of maternal, newborn, and family wellbeing.
- identifies personal learning needs to extend knowledge of pregnancy and postnatal health.

Reading

- interprets and analyses information from educational resources, organisational policies, and health promotion materials.
- locates and understands information related to pregnancy, birth, and postnatal health and wellbeing.

Writing

- summarises information and key concepts using appropriate terminology in written tasks or assessments.
- completes learning notes, summaries, or responses to case studies clearly and accurately.

Oral Communication

- participates in discussions and learning activities to exchange ideas and clarify understanding.
- uses respectful, inclusive language when discussing pregnancy and postnatal concepts.

Digital Literacy

- uses online learning platforms and trusted digital sources to locate, review, and reference maternal and newborn health information.

Range of conditions

N/A

Assessment Requirements

Performance evidence

The learner must show evidence of the ability to complete the tasks outlined in the knowledge and skills of this unit by:
interpreted and documented at least three (3) case studies or simulated scenarios involving pregnancy and postnatal contexts, including evidence of:

	- delegated aspects of pregnancy and postnatal care, to explore appropriate actions within scope of role and reflect on personal learning, values, and professional boundaries in line with organisational policies. - identified maternal and newborn wellbeing needs - recognised factors influencing health outcomes, nutrition, lifestyle, environment, and access to care - documented appropriate approaches to support maternal recovery, breastfeeding, and safe sleeping practices - interpreted and reported basic maternal observations according to organisational protocols and escalation pathways - used correct healthcare terminology to document maternal and newborn health information - documented procedures for safe storage and handling of expressed breast milk and preparation of infant formula - documented culturally responsive and respectful communication in responses or discussions - worked collaboratively with others to review and discuss care examples, identifying safe and person-centred approaches to support maternal and newborn wellbeing.
Knowledge Evidence	The learner must demonstrate knowledge required to complete the tasks outlined in this unit, including: - fundamental concepts of pregnancy and postnatal health and wellbeing including: - pregnancy - postnatal - newborn - common physical and emotional needs during pregnancy, birth, and the postnatal period

	• factors influencing maternal and newborn health outcomes, including: ○ nutrition, ○ lifestyle, ○ socioeconomic ○ environmental ○ cultural factors • infection prevention and control principles relevant to maternal and newborn care • organisational procedures for observing, recording, and reporting maternal health indicators • safe storage and handling requirements for expressed breast milk and infant formula • principles of breastfeeding and safe sleeping practices • healthcare terminology used in maternal and newborn care settings • culturally responsive and respectful communication strategies • scope of practice and professional responsibilities in maternal and postnatal care, including: ○ delegation requirements ○ role boundaries, and importance of maintaining professional boundaries ○ roles and responsibilities of multidisciplinary team members ○ ethical and legal considerations ○ principles and importance of reflective practice
Assessment Conditions	Assessment must be conducted in a safe, simulated or classroom environment that reflects typical maternal and postnatal care contexts. Assessors must ensure:

	• access to relevant workplace or organisational policies, procedures, and protocols • access to case studies, simulated documentation, and maternal observation charts • that activities allow demonstration of communication, collaboration, and reflection in response to realistic scenarios. Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2025/AQTF mandatory competency requirements for assessors and holds current NMBA registration as a midwife.
Unit mapping information	No equivalent unit.
Links	Link to Companion Volume Implementation Guide: