



Higher National Unit specification

General information

Unit title: Intra-operative Care (SCQF 8)

Unit code: H8X2 35

Superclass: PH

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Unit purpose

This Unit will develop knowledge and understanding to enable learners to assist with and perform roles related to the intra-operative phase of the patient's perioperative care. Through the completion of clinical competencies, this will include implementing an appropriate plan of care, assisting with and performing activities during the surgical intervention, explaining the importance and management of bodily tissues and fluids and undertaking reflection on their own practice. Learners will also identify and apply the quality management systems utilised in the perioperative environment to enhance the patient experience and ensure patient safety.

Outcomes

On successful completion of the Unit the learner will be able to:

- 1 Explain the structure and function of selected body systems.
- 2 Analyse quality management systems related to the perioperative environment.
- 3 Demonstrate the competencies required to care for a patient during the intra-operative phase.
- 4 Explain the importance of management of bodily tissue and fluid for investigation, disposal, burial or retention/transplant.

Credit points and level

2 credits at SCQF level 8: (16 SCQF credit points at SCQF level 8)

Higher National Unit specification: General information (cont)

Unit title: Intra-operative Care (SCQF 8)

Recommended entry to the Unit

Learners should have good Communication Skills both written and oral; ideally the learner should have achieved a relevant qualification equivalent to SCQF level 7 (SVQ3/HNC) to ensure they have the underpinning knowledge to work at SCQF level 8. Exemplary learners may still be considered through the completion of a pre course interview part of which could take the form of a written assessment. The skills to undertake this Unit could also be demonstrated through an employer's reference or the process of application and interview in the absence of certified learning.

Core Skills

Opportunities to develop aspects of Core Skills are highlighted in the Support Notes for this Unit specification.

There is no automatic certification of Core Skills or Core Skill components in this Unit.

Context for delivery

If this Unit is delivered as part of a Professional Development Award *Perioperative Care*, it is recommended that it should be taught and assessed within the subject area of the Professional Development Award to which it contributes.

Equality and inclusion

This Unit specification has been designed to ensure that there are no unnecessary barriers to learning or assessment. The individual needs of learners should be taken into account when planning learning experiences, selecting assessment methods or considering alternative evidence.

Further advice can be found on our website www.sqa.org.uk/assessmentarrangements.

Higher National Unit specification: Statement of standards

Unit title: Intra-operative Care (SCQF 8)

Acceptable performance in this Unit will be the satisfactory achievement of the standards set out in this part of the Unit specification. All sections of the statement of standards are mandatory and cannot be altered without reference to SQA.

Where evidence for Outcomes is assessed on a sample basis, the whole of the content listed in the Knowledge and/or Skills section must be taught and available for assessment. Learners should not know in advance the items on which they will be assessed and different items should be sampled on each assessment occasion.

Outcome 1

Explain the structure and function of selected body systems.

Knowledge and/or Skills

- ◆ Structure and function of:
 - the cardiovascular system, respiratory system, nervous system, musculo-skeletal system, digestive system, integumentary system, urinary system, reproductive system and endocrine system
- ◆ Surgical procedures related to the above systems

Outcome 2

Analyse quality management systems related to the perioperative environment.

Knowledge and/or Skills

- ◆ Patient identification and documentation
- ◆ Legislation and institutional policy for minors and incapacitated patients
- ◆ Legal and ethical principles underpinning Informed consent
- ◆ Patient dignity privacy and confidentiality
- ◆ Team working
- ◆ Communication strategies
- ◆ Non technical skills
- ◆ Conflict management
- ◆ Scottish Patient Safety Programme
- ◆ Quality Improvement methodologies

Higher National Unit specification: Statement of standards (cont)

Unit title: Intra-operative Care (SCQF 8)

Outcome 3

Demonstrate the competencies required to care for a patient during the intra-operative phase of their care.

Knowledge and/or Skills

- ◆ The principles of infection control in the environment
- ◆ Principles of asepsis and aseptic technique
- ◆ Environmental conditions of the operating room
- ◆ Management of medical devices
- ◆ Decontamination, sterilisation and traceability processes
- ◆ Clinical waste management strategies
- ◆ Surgical instrumentation
- ◆ Sutures wound supports dressing and drains
- ◆ Receive and handle clinical specimens within the sterile field

Outcome 4

Explain the importance of management of bodily tissue and fluid for investigation, disposal, burial or retention/transplant.

Knowledge and/or Skills

- ◆ Standard precautions
- ◆ Types and actions of pathogens
- ◆ Transport containers and transport media
- ◆ Hazards and consequences of incorrect handling or labelling of specimens
- ◆ Role of diagnostic support services
- ◆ Surgical Homeostasis

Higher National Unit specification: Statement of standards (cont)

Unit title: Intra-operative Care (SCQF 8)

Evidence Requirements for this Unit

Learners will need to provide evidence to demonstrate their Knowledge and/or Skills by showing they can:

Outcome 1

- ◆ Identify the main organs of two of the selected body systems.
- ◆ Explain the structure and functions of two of the selected body systems.
- ◆ Explain the surgical procedures associated with two of the selected body systems.

Outcome 2

- ◆ Analyse the legal, ethical and institutional requirement for informed consent.
- ◆ Explain the legal and institutional consent requirements for minors and incapacitated patients.
- ◆ Analyse the use of non-technical skills, team working, communication strategies and conflict management during a surgical procedure.
- ◆ Explain the use of improvement methodologies to promote patient safety during the perioperative phase of their care.

Outcome 3

Learners will need to provide evidence to demonstrate their Knowledge and/or skills by showing that they can perform procedures in accordance with organisational policy. The learner must recognise areas of competence and the parameters of their role. Learners will be observed by a mentor. Learners will demonstrate a holistic approach when carrying out competencies this will include:

- ◆ Demonstrate a range of clinical procedures and skill delegated by a registered practitioner in keeping with organisational policy, legislation and codes of practice.
- ◆ Contribute to the Safe Use of Medical Devices in the Perioperative Environment.
- ◆ Assist the registered practitioner in the delivery of perioperative patient care.
- ◆ Perform the non-scrubbed circulating role for perioperative procedures.
- ◆ Prepare and dress for scrubbed clinical roles.
- ◆ Prepare surgical instrumentation and supplementary items for the surgical team.
- ◆ Assist in the preparation of patients for operative and clinically invasive procedures.
- ◆ Provide surgical instrumentation and items for the surgical team and maintain the sterile field.
- ◆ Prepare, apply and attach dressings, wound supports and drains to patients.
- ◆ Receive and handle clinical specimens within the sterile field.

Higher National Unit specification: Statement of standards (cont)

Unit title: Intra-operative Care (SCQF 8)

Outcome 4

- ◆ Analyse the use of standard precautions during the handling and transport of clinical specimens.
- ◆ Explain the rationale for receiving, handling and dispatching clinical specimens.
- ◆ Explain the rationale for differing specimen transport containers and media.
- ◆ Discuss the role of the diagnostic support services.
- ◆ Analyse the importance of accurate measurement and recording of patients' body fluid output in relation to surgical homeostasis.
- ◆ Explain the different types and actions of pathogens.
- ◆ Explain the management of bodily tissue for disposal, burial or retention/transplant.



Higher National Unit Support Notes

Unit title: Intra-operative Care (SCQF 8)

Unit Support Notes are offered as guidance and are not mandatory.

While the exact time allocated to this Unit is at the discretion of the centre, the notional design length is 80 hours.

Guidance on the content and context for this Unit

This Unit is mandatory within the Professional Development Award (PDA) in *Perioperative Care* at SCQF level 8 and is designed to meet the range of skills required of learners to develop as assistant practitioners in perioperative care and allows them to practice skills in a supervised environment. It will support learners in the provision of an Assistant Perioperative Practitioner clinical role within a defined scope of practice. The knowledge and skills gained will enable learners to provide safe and effective care to patients as part of an agreed treatment plan and undertake a range of duties delegated by the mentor.

Trainee assistant perioperative practitioners studying this Unit as part of the PDA in *Perioperative Care* SCQF level 8 will be working with patients in a clinical environment. In this environment, learners will be under direct supervision by a registered perioperative practitioner who will identify patients undergoing operative procedures that are suitable for the learner's level of training.

Outcome 1

Looks at ten body systems, many deliverers of health related programmes would focus on the more high profile systems such as the cardiovascular, respiratory and perhaps digestive systems. Some may allow the students to choose which systems they want to be assessed on or to focus on systems which are most relevant to their future plans. However, all systems must be taught regardless of progression or employment. The learner is expected to have a knowledge and understanding of the structures and functions of each system and will be assessed on a minimum of four systems.

Tutors should be aware that this is a single Outcome and the design of the award allows for only 80 hours. This is challenging for both students and tutors. Every effort should be made to use a variety of teaching methods to stimulate and promote independent learning in addition to taught hours.

This Outcome forms part of a Unit, which is primarily designed to provide learners with knowledge and skills to work with people in need of care. Physiology often is viewed as a very factual subject and many learners will develop their awareness through rote learning. The aim of this Outcome is to enable learners to develop knowledge of a minimum of two body systems. Systems considered should relate to the Group Award within which the Unit is taught and/or to the needs of the learner support worker role.

Higher National Unit Support Notes (cont)

Unit title: Intra-operative Care (SCQF 8)

The learner is expected to have a knowledge and understanding of the organs, structures and functions of each system but will be assessed on two systems.

Cardiovascular system: structure of the cardiovascular system, the heart, to include structure of cardiac muscle, chambers, septum, tendons, valves and conduction system. Blood Vessels, to include structure of arteries, veins and capillaries.

Respiratory system: structure of the respiratory system, to include nasal cavity, pharynx, larynx, trachea, bronchi, bronchioles and alveoli, diaphragm and intercostal muscles.

Nervous system: structure of nervous system, to include the main structural divisions of the nervous system, types of neurones, structure of neurones, structure of synapse, the main regions of the brain, regions of spinal cord, spinal and cranial nerves.

Musculo-skeletal System: structure of the skeletal system, to include the structure of compact and cancellous bone tissue, names of main bones of skeleton, structure of synovial joints, structure of skeletal muscle.

Digestive system: structure of the digestive system to include buccal cavity, oesophagus, stomach, small intestine, large intestine and accessory organs; salivary glands, liver and pancreas.

Integumentary system: structure of the skin and appendages.

Urinary System: structure of the urinary system to include ureters, bladder, urethra and kidney including structure of nephron.

Reproductive System: structure of the reproductive system to include both male and female structures.

Endocrine System: structure of the endocrine system to include pituitary, thyroid, parathyroid, thymus, adrenals, pancreas, ovaries, testes.

Outcome 2

The emphasis of this Outcome should be on the way in which quality management systems, legislation and policy supports clinical practice. It is recommended that learners should be aware of the main features of legislation and policy in relation to the following areas:

- ◆ Patient identification and documentation
- ◆ Legislation and institutional policy for minors and incapacitated patients
- ◆ Ethical principles underpinning Informed consent
- ◆ Patient dignity privacy and confidentiality
- ◆ Team working
- ◆ Communication strategies
- ◆ Non technical skills
- ◆ Conflict management
- ◆ Scottish Patient Safety Programme
- ◆ Quality Improvement methodologies

The list is intended to indicate areas that should be considered but others can be added. Specific Acts or policy documents are not named to prevent advice becoming outdated due to ongoing political development and change. Learners should be introduced to the most recent and relevant legislation in relation to the areas indicated. Learners are expected to name particular quality management systems, pieces of legislation and policy and be aware of the main points and should be aware that legislation and policy has a focus on improving clinical practice.

Higher National Unit Support Notes (cont)

Unit title: Intra-operative Care (SCQF 8)

Issues relating to informed consent, confidentiality, privacy, health and safety should be discussed. Discussions should take place about the need to have organisational policies and learners should be encouraged to locate and read policies that exist within their workplace. Learners should be given the opportunity to explore issues relating to developing competencies to enable health care improvement. The ability to recognise limitations of one's competence should be discussed as central to good practice.

Outcome 3

The aim of this Outcome is to assess the practical application of clinical skills relating to the intra-operative period of patient care. Learners will be able to demonstrate safe and effective perioperative clinical practice within scope of practice in a variety of clinical specialities. This range of settings may include adult, child and maternity patients undergoing day case, elective or emergency procedures utilising a variety of anaesthetic options.

The acquisition of skills should be seen as a process and a Record of Achievement can demonstrate that learners have:

- ◆ underpinning knowledge/an evidence base relating to procedures.
- ◆ promoting safe practice which complies with employer's policies and procedures.
- ◆ observed the procedure being carried out correctly (this may be on one or more occasions depending on learner competence).
- ◆ demonstrated the procedure under supervision (this may be on one or more occasions depending on learner competence).
- ◆ judged to have carried out the procedure competently on a minimum of three occasions when supervised by a qualified member or members of staff, preferably the named mentor.

Learners should aim to demonstrate ability in relation to these procedures on a minimum of three occasions. Learners should be observed on each occasion. Evidence can be compiled in the form of checklists, completed recording sheets and reflective accounts. Where learners are unable to provide evidence for all the procedures, simulation may be used for up to two procedures

Learners should demonstrate awareness of the impact of supportive Communication Skills such as ensuring a person centred approach, active listening, positive body language, tone, stance, etc. On occasion, a patient may become anxious or upset during the treatment session and learners should be able to recognise the features of distressed behaviour and demonstrate a supportive and caring approach to help manage that distress.

Clinical emergencies may arise at any time and learners should be able to recognise the signs and symptoms associated with cardiac arrest, major haemorrhage or anaphylaxis. Learners should be able to seek appropriate assistance and provide support for the patient in accordance with local guidance.

At the end of the surgical procedure learners should demonstrate the ability to clear and clean the clinical area to an acceptable standard. Any used instruments should be prepared for decontamination/transport to sterilisation services and all waste including sharps should be disposed of in accordance with local guidelines.

Higher National Unit Support Notes (cont)

Unit title: Intra-operative Care (SCQF 8)

Outcome 4

The aim of this Outcome is to assess the learner's underpinning knowledge relating to the management of bodily tissue and fluids during the intra-operative phase of patient care. To ensure the correct care and handling of specimens the learner must be aware of the following:

- ◆ Human Tissue (Scotland) Act 2006
- ◆ Health and Safety at Work Act 1974
- ◆ Management of Health and safety at work regulations 1999
- ◆ The Control of Substances Hazardous to Health (COSHH) Regulations 2002
- ◆ The correct documentation including pathology request forms and documentation related to the transport of human tissue legislation.

The list is intended to indicate areas that should be considered but others can be added. Specific Acts or policy documents are named however advice can become outdated due to ongoing political development and change. Learners should be introduced to the most recent and relevant legislation in relation to the areas indicated. Learners are expected to read pieces of legislation and policy and be aware of the main points and should be aware that legislation and policy has a focus on improving clinical practice.

Experts within the field could be involved, as visiting speakers, to ensure current evidence based practice is delivered to provide underpinning knowledge in the following procedures. Where learners are unable to provide evidence for all procedures, simulation may be used in two procedures. In relation to competencies tutorials should include:

- ◆ The principles of infection control in the perioperative environment particularly standard precautions
- ◆ principles of asepsis and aseptic technique
- ◆ Waste management strategies
- ◆ The appropriate management of clinical specimens within the sterile field
- ◆ Types and actions of pathogens
- ◆ Transport containers and transport media
- ◆ Hazards and consequences of incorrect handling or labelling of specimens
- ◆ Role of diagnostic support services
- ◆ Surgical Homeostasis

Guidance on approaches to delivery of this Unit

This Unit is most likely to be studied by learners undertaking the Professional Development Award (PDA) in *Perioperative Care* however could be studied as part of a Group Award. It is primarily designed to equip Trainee assistant perioperative practitioners with the underpinning knowledge and skills to work with patients undergoing a surgical procedure.

This Unit is mandatory within the Professional Development Award (PDA) in *Perioperative Care* at SCQF level 8. In terms of sequence of delivery, it is recommended this Unit follows on from completion of the *Pre and Post-operative Care* Unit and *Principles of Professional Practice* Unit (FN2C 34).

Higher National Unit Support Notes (cont)

Unit title: Intra-operative Care (SCQF 8)

Each Outcome is mutually supportive of each other and builds on knowledge and skills in a sequential way. An understanding of each of the Outcomes will be required in order to evidence all the Outcomes of this Unit.

Guidance on approaches to assessment of this Unit

Assessment Guidelines

This Unit could be assessed using a range of assessment instruments and strategies and these could be integrated for all the learning Outcomes where possible. These could include observation in practice, multiple choice and extended response questions, clinical presentations and review of the learners portfolio and competency record.

In order to achieve this Unit, learners are required to submit sufficient evidence to demonstrate they have met the knowledge and skills requirements for each Outcome.

An understanding of the both theory and its application to clinical practice is a requirement for all four Outcomes.

Learners will be required to submit evidence of participation in at least 450 hours of clinical work in a perioperative clinical setting.

Ongoing assessment can be carried out through practice observation by the mentor. Competences will be formally assessed and recorded by the mentor with practice undertaken in a range of clinical settings where possible.

Learners should be encouraged to complete a reflective log for all learning activities and to maintain this within a portfolio of evidence. This portfolio can be used to support the Evidence Requirements of the learner's knowledge and skills in relation to all Outcomes.

Assessment of application within a clinical practice setting will be carried out in a live or simulated clinical setting.

Evidence can be generated using different types of assessment. The following are suggestions only. There may be other methods that would be more suitable to learners.

Outcome 1

The assessment could be extended or restricted response questions and should be completed under closed-book supervised conditions.

Outcome 2

Assessment of Outcome 2 could be integrated with Outcome 4 and take the form of an integrated case study generated from the learners work setting and should be approximately **2500 +/- 10% words**. This report should be academically referenced and submitted by an agreed date.

Higher National Unit Support Notes (cont)

Unit title: Intra-operative Care (SCQF 8)

Outcome 3

An integrated assessment in the form of a record of achievement should be used for recording evidence of the learners ability. A mentor will observe the learner carrying out competencies, learners will provide evidence of:

- ◆ using appropriate interpersonal skills when carrying out competencies
- ◆ promoting safe practice which complies with employer's policies and procedures
- ◆ identifying the appropriate equipment and demonstrating the correct procedure for the practical technique/competencies
- ◆ having been signed as satisfactory when observed by a mentor

Learners should aim to demonstrate ability in relation to these procedures on a minimum of three occasions. Learners should be observed on each occasion. Evidence can be compiled in the form of checklists, completed recording sheets and reflective accounts. Where learners are unable to provide evidence for all the procedures, simulation may be used for up to two procedures.

Outcome 4

Assessment could be integrated with Outcome 2 and take the form of an integrated case study generated from the learners work setting and should be approximately **2500 +/- 10% words**. This report should be academically referenced and submitted by an agreed date.

Centres are reminded that prior verification of centre-devised assessments would help to ensure that the national standard is being met. Where learners experience a range of assessment methods, this helps them to develop different skills that should be transferable to work or further and higher education.

Opportunities for e-assessment

E-assessment may be appropriate for some assessments in this Unit. By e-assessment we mean assessment which is supported by Information and Communication Technology (ICT), such as e-testing or the use of e-portfolios or social software. Centres which wish to use e-assessment must ensure that the national standard is applied to all learner evidence and that conditions of assessment as specified in the Evidence Requirements are met, regardless of the mode of gathering evidence. The most up-to-date guidance on the use of e-assessment to support SQA's qualifications is available at www.sqa.org.uk/e-assessment.

Higher National Unit Support Notes (cont)

Unit title: Intra-operative Care (SCQF 8)

Opportunities for developing Core and other essential skills

There are opportunities to develop the Core Skills of *Communication* at SCQF level 5 and *Numeracy* at SCQF level 5 in this Unit, although there is no automatic certification of Core Skills or Core Skills components.

Communication: will be evidenced via the learners' work with individuals and groups. Group discussions are particularly important.

Numeracy: will be evidenced through the learners' ability to carry out numerical calculations with regard to homeostasis.

Disabled learners and/or those with additional support needs

The additional support needs of individual learners should be taken into account when planning learning experiences, selecting assessment instruments, or considering whether any reasonable adjustments may be required. Further advice can be found on our website www.sqa.org.uk/assessmentarrangements.

This has influenced the assessment format, allowing more options, therefore allowing the learner more opportunity to apply their knowledge.

Outcomes 1 could be assessed by multiple-choice. Alternatively a holistic approach could be used with a case study covering Outcomes 1, 2 and 4. If restricted response answers are used to assess all four Outcomes please do not exceed 2,500 words.

Pass mark 60% for each assessment — Ensuring that the specified Evidence Requirements have been met.

Remediation 56–59% for each assessment.

55% and under learners must be given an alternative assessment.

It is suggested that learners achieving between 56 and 59% need only be assessed on those parts which were not achieved and learners achieving 55% and under should be reassessed using a different assessment instrument.

The following texts are useful as a resource:

- Abbott H., Booth H. 2014 **Foundations for Operating Department Practice: Essential theory for practice** 1st edition. Maidenhead, Open University Press.
- Association for Perioperative 2013 **AfPP in Your Pocket**. AfPP Harrogate.
- Association for Perioperative 2010 **Foundations in Practice**. AfPP Harrogate.
- Association for Perioperative 2009 **Safeguards for invasive procedures: The Management of Risks** 2nd edition. AfPP Harrogate
- Association for Perioperative Practice 2011 **Standards and Recommendations for Safe Perioperative Practice**. AfPP Harrogate
- Conway N., Ong P., Bowers M., Grimmett N. 2014 **Operating Department Practice** 2nd edition. Clinical Pocket Reference. Oxford.

Higher National Unit Support Notes (cont)

Unit title: Intra-operative Care (SCQF 8)

Hughes S., Mardell A. 2009 **Oxford Book of Perioperative Practice**. Oxford, Oxford University Press.

Tortora G J, Grabowski S 2002 **Principles of Anatomy and Physiology**, 10th Ed, New York, John Wiley & Sons

Wicker P., O'Neill J. 2010 **Caring for the Perioperative Patient (essential Clinical Skills)** 2nd edition. Wiley- Blackwell, Chichester.

Waugh A & Grant A. 1999 **Ross and Wilson Anatomy and Physiology in Health and Illness**, 12th Ed, Edinburgh Churchill Livingstone

Woodhead K., Fudge L. 2012 **Manual of Perioperative Care: An Essential Guide** 1st Edition. Chichester, Wiley- Blackwell,

Open learning

Theory for this Unit may be developed for delivery by Open Learning. However, it would require planning by the centre to ensure the sufficiency and authenticity of learner evidence.

History of changes to Unit

Version	Description of change	Date

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General information for learners

Unit title: Intra-operative Care (SCQF 8)

This section will help you decide whether this is the Unit for you by explaining what the Unit is about, what you should know or be able to do before you start, what you will need to do during the Unit and opportunities for further learning and employment.

This Unit has been designed to meet the range of skills you will require to develop as an Assistant Perioperative Practitioner and support you to practice clinical skills in a supervised environment. The Unit builds upon the theory and underpinning knowledge gained from the previous Units within the Group Award, PDA in *Perioperative Care* at SCQF level 8 and will support you in the provision of an Assistant Perioperative Practitioner clinical role within a defined scope of practice. The knowledge and skills gained will enable you to provide safe and effective care to patients undergoing an operative procedure and undertake a range of duties delegated by the mentor.

This Unit is made up of four Outcomes and on completion of these you should be able to:

- ◆ Explain the structure and function of selected body systems.
- ◆ Analyse quality management systems.
- ◆ Demonstrate the competencies required to care for a patient during the intra-operative phase of their care.
- ◆ Explain the importance of management of bodily tissue and fluid for investigation, disposal, burial or retention/transplant.

Outcome 1 will allow you to develop knowledge of the anatomy and physiology of the human body.

Outcome 2 will develop the skills and knowledge you require to ensure safe and effective patient care and provide assistance to a registered practitioner within the perioperative environment.

Outcome 3 will also develop skills and knowledge that will allow you to undertake a range of clinical and treatment procedures.

Outcome 4 will develop skills and knowledge that will allow you to assist in the collection of specimens required for investigation, diagnosis, autologous donation or transplant purposes.

Although entry is at the discretion of the centre it is recommended that you have previous work or voluntary experience working in a health care environment and are currently employed as an Assistant Perioperative Practitioner or a Trainee Assistant Perioperative Practitioner with at least 450 hours clinical work in a podiatry clinical setting. You should have an understanding of the role and scope of practice of the Assistant Perioperative Practitioner and have successfully completed the *Pre and post-operative care* Unit and the *Understanding Personal and Professional Development* Unit (H29T 34).

This Unit is mandatory if you are studying for the Professional Development Award (PDA) in *Perioperative Care* at SCQF level 8. If you are studying this Unit as part of the Group Award, it is recommended that you complete this Unit as the final stage in the process. The knowledge and skills highlighted within this Unit provide a theoretical and practical base for further study.

General information for learners (cont)

Unit title: Intra-operative Care (SCQF 8)

You may be assessed using a range of assessment instruments and strategies which could include multiple choice, extended response questions and discussion of the clinical findings. Clinical practice competences will be formally assessed by your mentor and documented in a competency record.

Over the course of this Unit there may be opportunities for you to develop the Core Skills of *Communication* and *Working with Others*. If employed within the NHS you could use this as evidence of the Core Skills detailed within the Knowledge and Skills Framework.