

CHCCCS041

Recognise healthy body systems 1b of 3

Short Answer Questions



Assessment Details

This section is for SUT VE Quality and Compliance review and feedback and must be deleted in the student version of the assessment.

SECTION 1			
UNIT OF COMPETENCY DETAILS			
Code	Title		
CHCCCS041	Recognise healthy body systems		
COURSE AND MODULE DETAILS			
Assessments may be published in more than o	ne course. Add lines for additional courses as	needed.	
Course Code (UPed)	Module Number (Order)	Module Code (UPed)	
SOE3IS11A	4	M00272A	
ASSESSMENT TYPE			
Assessment Method: Written Assessm	nent Choose an item. Choose an item.		
Select all that apply.			

SECTION 2

STUDENT INSTRUCTIONS

The following instructions detail the requirements of the assessment and are captured in the LMS assessment page. This includes a description of the student instructions, associated files and submission instructions.

Student instructions

This is assessment 1b of 3 for CHCCCS041 Recognise healthy body systems.

This assessment requires you to answer 12 questions to test your knowledge and understanding required of this unit.

To be assessed as competent, you must complete all tasks in the spaces required.

You are required to download your assessment by clicking on the assessment document icon below (see Let's begin) and upload your completed assessment for submission.

Supporting documents

To answer some of the questions, you will need to access the following documents:

N/A

Files for submission

Submit the assessment document with all tasks completed in the spaces provided.

Submit the following files:

Assessment document

Submission instructions

PDF File Submissions

Please save all Word documents as PDF files before submitting.

IMPORTANT: Word documents will not be accepted.

Most modern web browsers can open and display a PDF file. If you have an older operating system, however, you may need a PDF reader installed on your device such as the Acrobat Reader, available from Adobe.

Windows: Word 2013 and newer

Choose File > Export > Create PDF/XPS.

Windows: Word 2010

Click the File tab

Click Save As

To see the Save As dialog box in Word 2013 and Word 2016, you have to choose a location and folder

In the File Name box, enter a name for the file, if you haven't already

In the Save as type list, click PDF (*.pdf).

If you want the file to open in the selected format after saving, select the Open file after publishing check box.

If the document requires high print quality, click Standard (publishing online and printing).

If the file size is more important than print quality, click Minimum size (publishing online).

Click **Options** to set the page to be printed, to choose whether markup should be printed, and to select output options. Click **OK** when finished.

Click Save.

macOS: Office for Mac

To save your file as a PDF in Office for Mac follow these easy steps:

Click the File Click Save As Click File Format towards the bottom of the window Select PDF from the list of available file formats Give your file a name, if it doesn't already have one, then click Export

For more detailed instructions refer to Microsoft Support.

SECTION 3

ASSESSMENT TASK CRITERIA AND OUTCOME

This assessment will be graded as Satisfactory (S) or Unsatisfactory (US).

To achieve Satisfactory; valid, sufficient, authentic, and current evidence of meeting the criteria must be submitted.

Refer to the mapping spreadsheet for details for this unit.

SECTION 4

ASSESSMENT DETAILS

Please refer to SECTION 2 to confirm how the assessment tools will be built and the methods that will be used to collect evidence i.e., Student's will type answers directly into LMS or will upload of files of completed assessment tasks.



The STUDENT INSTRUCTIONS above will be added directly into the LMS.

All associated files will be accessed via the LMS, as will any Assessor Guides, Matrix, Templates etc.

Students and Assessors have restricted permissions in the LMS. Assessor Guides, including model answers, will be available to Assessors ONLY.

The following pages contain the draft assessment which will be built into the LMS once reviewed. This includes:

⊠ Instructions to students

⊠ Questions /tasks

Templates /tables where applicable

Links to supporting files /websites

⊠ Instructions to assessors

Sample answers /examples of benchmark answers

SECTION 5

STAKEHOLDERS AND SIGN OFF

List all that apply for each of the stakeholder roles below.

UPed Learning Designer/Author name	EduWorks
SOE Quality and Compliance Manager name	
SUT VE Quality Compliance name	
Date approved	



Assessment Instructions

Task overview

This assessment task is divided into 12 questions. Read each question carefully before typing your response in the space provided.

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Submission

You are entitled to three (3) attempts to complete this assessment satisfactorily. Incomplete assessments will not be marked and will count as one of your three attempts.

All questions must be responded to correctly to be assessed as satisfactory for this assessment.

Answers must be typed into the space provided and submitted electronically via the LMS. Hand-written assessments will not be accepted unless previously arranged with your assessor.

Reasonable adjustment

Students may request a reasonable adjustment for assessment tasks.

Reasonable adjustment usually involves varying:

- the processes for conducting the assessment (e.g. allowing additional time)
- the evidence gathering techniques (e.g. oral rather than written questioning, use of a scribe, modifications to equipment)

However, the evidence collected must allow the student to demonstrate all requirements of the unit.

Refer to the Student Handbook or contact your Trainer for further information.



Please consider the environment before printing this assessment.



List three (3) impacts of ageing and disability.

Assessor instructions: Student must be able to show their understanding of the impacts of ageing and disability. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

- Loss of independence (unable to drive, unable to live alone)
- Interrelated health issues increasing
- Loss of mobility
- Decrease in social interaction
- Poor skin integrity

Question 2

Complete the following table in relation to indicators of body system issues, impacts of changes and reporting procedures.

Assessor instructions: Student must be able to identify indicators of body system issues, impacts of ageing and disability and procedures for reporting issues. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

	Indicators of body system issues (10 – 15 words)	Impacts of ageing and disability (10 – 15 words)	Procedure for reporting issues (20 – 30 words)
Continence	Loss of bladder or bowel control; urgency; lack of realisation that incontinence has occurred	Loss of muscle control Loss of sphincter awareness and control Loss of sensations	Refer for investigation to ensure no medical reasons for issues (such as UTI, tumour or prostate issues) Manage with pads or potential for catheter placement (urine only)
Malnutrition	Weakness; fatigue; minimal appetite; skin changes; sunken eyes; confused and disorientated	Often reduced appetite due to decreased activity and metabolism slows. Loss of sense of taste and smell.	Review to rule out anything medical *May require supplemental feeding; potential placements of IG tube and IV to rectify
Dehydration	Weakness; fatigue, headache; poor skin turgor; concentrated urine	Loss of thirst sensation Often overdress for the weather	Review for medical reasons (such as infection). Manage with increased oral fluids;



		Increased sleep leading to dehydration	fluid balance chart; possible IV therapy
Weight regulation	Changes in weight Clothes fitting differently	Activity changes Metabolism changes Loss of muscle mass Fluid retention	Review for medical reasons (ie. Diabetes; bowel or stomach; cardiac issues)
Oral health	Loss of teeth Gum disease Pain	Loss of gum tissue Loss of calcium	Review for medical reasons Dentures or treatment as required
Appetite regulation	Appetite changes and varies	Hormones Metabolic changes Medication	Review for medical reasons
Dysphagia	Difficulty in swallowing fluids or chewing and swallowing solids	Loss of muscle control CVA (Stroke) Nerve damage	Review for medical reasons Rule out CVA Manage with assisted feeding, alternate meal types or IG tube placement
Bowel health issues	Constipation Diarrhoea Changes in normal bowel habits Pain or bleeding Increase in gas production	Metabolic changes Medication Diet changes Intolerances Disease	Review for medical reasons
Bone health issues	Pain, swelling or tenderness Weakness Changes in mobility and strength	Loss of calcium Loss of bone density Inability to absorb calcium	Review for medical reasons
Food tolerance	Signs of gut, or bowel discomfort or being unwell after consumption Allergy signs and symptoms	Metabolic changes Medication Diet changes	Review for medical reasons
Skin integrity issues including wounds and pressure point injuries	Breakdown in skin integrity Waxy look and feel to areas Open wounds, bruising, paper like	Hydration status Disease Medication Loss of elasticity and collagen	Review for medical reasons



Dementia	skin (thin and easily damaged) Infection and slow healing Multiple signs Confusion, disorientation,	Vitamin and mineral deficiency Cerebral changes Calcification of brain sections	Review for medical reasons
	forgetfulness, irritability, inability to perform tasks	Disease Injury	
Cognitive changes	Confusion, dysphasia, word issues; inability to complete tasks or failure to remember how to Varied	As above	Review for medical reasons
Mental health	Multiple presentations depending on issue Depression, anxiety, personality and mood changes; alternate reality experiences	Life Changes to lifestyle Loss of S/O Cerebral changes	Review for medical reasons
Cold / flu	Fever Cough Muscle and body aches Fatigue Headache	Less effective immune system Worse symptoms due to other conditions	Review for medical reasons
HIV	Muscle and body aches Swollen lymph nodes Fever Fatigue	More likely to experience health related issues Must adhere to medication regime	Review for medical reasons
Pneumonia	Chest pain Coughing Shallow breathing Wheezing Loss of appetite	Less effective immune system Underlying chronic health conditions, such as heart disease, diabetes, and lung disease, that can increase their risk of pneumonia and make it more difficult to recover from the infection.	Review for medical reasons

Describe the procedure for working with multidisciplinary health team to implement individualised plans including how issues are raised regarding the client's health. (Word count: Approximately 30-50 words)

Assessor instructions: Student must be able to describe the procedure for working with multidisciplinary team and raising issues regarding the clients health. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

Working with multidisciplinary teams involves regular coordinated team meetings and geriatric assessments to ensure changes in the clients health and wellbeing are identified without delay. Changes are agreed upon within the team and in collaboration with the client to make the required changes to their individualised care plan.

Question 4

Explain the relationship between nutrition and hygiene. (Word count: Approximately 30-50 words)

Assessor instructions: Student must be able to show their understanding of the relationship between nutrition and hygiene. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

Nutrition and hygiene are closely related as both play important roles in maintaining overall health and preventing disease. Proper nutrition provides the body with the necessary nutrients to function properly, while good hygiene practices help to prevent the spread of germs and infection.

Question 5

Describe how poor oral hygiene impacts the following:

- Nutrition
- Quality of life

(Word count: Approximately 110-120 words)

Assessor instructions: Student must be able to describe how poor oral hygiene impacts nutrition and quality of life. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

Nutrition: Poor oral hygiene can lead to tooth decay and gum disease, which can make it difficult or painful to chew and eat certain foods. This can lead to a poor diet and malnutrition, especially in older adults or individuals with pre-existing dental conditions. It can also cause bad breath and affect one's appetite, leading to poor nutritional intake.

Quality of life: Poor oral hygiene can also affect one's overall quality of life. Tooth decay and gum disease can cause pain, discomfort, and embarrassment, which can lead to social isolation and anxiety. Oral health problems can also affect one's self-esteem and confidence. It can also lead to difficulty in speaking, difficulty in smiling, and difficulty in eating which affects the overall quality of life.

Question 6

Identify two (2) ways you could recognise signs of oral pain in a client. (Word count: Approximately 100-120 words in total)



Assessor instructions: Students must identify two (2) ways to recognise signs of oral pain. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

Verbal communication: A client may complain of toothaches, jaw pain, or difficulty in opening their mouth. They may also report sensitivity to hot or cold temperatures or to sweets, or difficulty in biting or chewing. They may also use words like "throbbing," "aching" or "sharp" to describe the pain.

Nonverbal communication: Signs of oral pain may include facial expressions such as wincing or grimacing, holding the jaw or face, or rubbing the affected area. Clients may also display signs of discomfort such as avoiding certain foods, or avoiding opening the mouth fully.

Question 7

Mr Davison aged 67 has a disability where his movements are restricted due to his osteoporosis diagnosis. He has been an avid runner all his life so with increasing age and disability he is unable to run at the same pace however after his consultation with a physiotherapist he has been advised that he can move on to lighter exercises such as walking a 30 mins daily to manage his exercise routine and support his wish for regular movement.

- a) Explain how ageing and disability impacts Mr Davison?
- b) How could Mr Davison's diagnosis of osteoporosis restrict his daily life in the future?

(Word count: Approximately 40-50 words in total)

Assessor instructions: Students must demonstrate an understanding of the musculoskeletal system. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

- a) Ageing and disability may impact the clients mobility, it may cause him pain and it may cause him to become socially isolated.
- b) His diagnosis may impact his daily life by causing him pain, impacting his mobility, limiting his physical activity, side effects from medication.

Question 8

Complete the following table providing a brief description of each of the listed common conditions.

Assessor instructions: Students must complete the table below. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

Common condition	Brief description (approximately 50-60 words per section)
Physical disability	A physical disability is a condition that affects a person's ability to move or perform tasks related to mobility. This can include conditions that affect the musculoskeletal system, such as arthritis, multiple sclerosis, spinal cord injuries, cerebral palsy, and amputations. It can also



	include conditions that affect the nervous system, such as Parkinson's disease and muscular dystrophy.
Cognitive disability	A cognitive disability is a condition that affects a person's ability to think, learn, and process information. It includes a wide range of conditions that can affect a person's cognitive abilities, such as intellectual disability, learning disabilities, and acquired brain injuries.
Intellectual disability	Intellectual disability is a condition characterised by significant limitations in cognitive functioning and adaptive behaviors, such as communication, self-care, and social interaction.
Psychosocial disability	A psychosocial disability is a condition that affects a person's mental health and emotional well-being. It includes a wide range of conditions such as mental illness, personality disorders, and emotional disorders.
Sensory disability	A sensory disability is a condition that affects a person's ability to see, hear, touch, taste, or smell. It includes a wide range of conditions such as blindness, deafness, and other vision or hearing impairments, as well as conditions that affect the sense of touch, taste, or smell.

Provide two (2) examples of how you may recognise change in a person from their normal to not normal both physically and in their mood. (Approximately 50-80 words)

Assessor instructions: Students must demonstrate an understanding of recognising physical and mood changes. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

Physical change: A person may show significant weight loss or gain or may have noticeable changes in their skin or hair. These changes could be indicative of a physical illness or a change in their overall health.

Mood change: A person may become more withdrawn or isolated, or may exhibit changes in their behavior, such as becoming more aggressive or irritable. These changes could be indicative of a change in their mental health or emotional well-being.

Question 10

- a) Describe two (2) responses you may receive from a person that is in pain. (Word count: Approximately 100-120 words)
- b) How might you communicate with a person that is in pain. (Word count: Approximately 80-100 words)
- c) How could you use a pain scale to assess the level of pain the person is in. (Word count: Approximately 120-130 words)



d) How can ageing and disability impact a persons pain tolerance? (Word count: Approximately 100-120 words)

Assessor instructions: The student's response shows that they understand how to identify and confirm a clients pain with them. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided

a) Crying or sobbing: A person in severe pain may express their discomfort through crying or sobbing. This is often a natural response to feeling overwhelmed by pain and may be accompanied by expressions of distress or hopelessness.

Verbal complaints: A person in pain may also express their discomfort through verbal complaints, such as saying "it hurts" or "I can't stand this anymore." They may also describe the specific location or type of pain they are experiencing, such as "my stomach feels like it's on fire" or "my head is pounding.

b) Listening: Allow the person to fully express their feelings and experiences without interrupting or judging them. This can help them feel heard and understood.

Asking open-ended questions: Ask the person how they are feeling, what type of pain they are experiencing, and how long they have been in pain. This can help you understand their situation and provide appropriate support.

Using nonverbal cues: Use facial expressions, body language, and tone of voice to show that you are paying attention and care about the person's well-being.

c) Explain the pain scale: Explain to the person that you are going to use a pain scale to help understand how much pain they are in. This can help them understand what you are asking and give them an idea of how to rate their pain.

Ask the person to rate their pain: Ask the person to rate their current level of pain on the scale of 0 to 10. You can also ask them to rate their pain on a scale of 1 to 10 or 0 to 5, depending on the scale you are using.

Record the pain rating: Record the person's pain rating on a chart or in a patient chart. This will help you track changes in their pain levels over time.

d) Chronic pain: People with chronic pain conditions, such as arthritis or fibromyalgia, may have a lower pain tolerance due to the constant presence of pain.

Medications: Certain medications, such as opioids or anti-inflammatory drugs, can affect a person's pain tolerance by altering their perception of pain.

Physical limitations: People with physical disabilities or impairments may have a lower pain tolerance due to the extra strain and discomfort they experience in their daily lives.

Psychological factors: A person's mental health and coping skills can also impact their pain tolerance. For example, someone with a high level of anxiety or stress may have a lower pain tolerance due to the added psychological burden.



Correctly identify the abbreviation for each of the common medial terms.

Assessor instructions: Students must demonstrate an understanding of the abbreviations of the basic medical terms.

Common Medical Term	Abbreviation
bilateral breath sounds	B.L.BS
blood pressure	BP
bowel sounds	BS
central nervous system	CNS
eyes, ears, nose, throat	ENT
fibrillation	fib
gall bladder	GB

Question 12

Suggest two (2) common organisational policies and procedures that relate to reporting changes and issues in relation to a client. (Approximately 10 words)

Assessor instructions: Students must demonstrate an understanding of reporting related policies and procedures. Benchmark standards of student responses are provided below. Student's wording may vary however must reflect the benchmark answer provided.

- Incident reporting policy
- Health and safety policy
- Code of conduct
- Whistle-blower policy



Assessment checklist:

Students must have completed all questions within this assessment before submitting. This includes:

1 12 questions to be completed in the spaces provided.

Congratulations you have reached the end of Assessment 1!

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