

## ELA 1A– Asthma

|                                   |  |
|-----------------------------------|--|
| <b>Activity</b>                   |  |
| <b>Description (if necessary)</b> |  |

All items on the table below are examples, they do not constitute an exhaustive list in any aspect

| <b>Knowledge</b>  | <b>Skill</b>    | <b>Attitudes + Values</b> |
|---|-----------------|---------------------------|
|   |                 | help                      |
| <b>Example Behaviours</b>   |                 |                           |
| <b>Positive</b>   | <b>Negative</b> | <b>Negative Passive</b>   |
|   |                 |                           |
| <b>Assessor's comments</b><br><br>Assessor's details :<br>i. Name :<br>ii. Designation :<br>iii. Contact information (email and phone no) |                 |                           |

**Appendix 1B – Acute gastroenteritis**

|                                   |  |
|-----------------------------------|--|
| <b>Activity</b>                   |  |
| <b>Description (if necessary)</b> |  |

All items on the table below are examples, they do not constitute an exhaustive list in any aspect

| <b>Knowledge</b>                             | <b>Skill</b>    | <b>Attitudes + Values</b> |
|--|-----------------|---------------------------|
|  |                 |                           |
| <b>Example Behaviours</b>                    |                 |                           |
| <b>Positive</b>                              | <b>Negative</b> | <b>Negative Passive</b>   |
|  |                 |                           |
| <b>Assessment / Evidence</b>                 |                 |                           |
| Assessor's comments                          |                 |                           |
| Assessor's details :                         |                 |                           |
| iv. Name :                                   |                 |                           |
| v. Designation :                             |                 |                           |
| vi. Contact information (email and phone no) |                 |                           |

**Appendix 1C – Neonatal Jaundice**

|                                   |  |
|-----------------------------------|--|
| <b>Activity</b>                   |  |
| <b>Description (if necessary)</b> |  |

All items on the table below are examples, they do not constitute an exhaustive list in any aspect

| <b>Knowledge</b>   | <b>Skill</b>    | <b>Attitudes + Values</b> |
|--|-----------------|---------------------------|
|  |                 |                           |
| <b>Example Behaviours</b>  |                 |                           |
| <b>Positive</b>  | <b>Negative</b> | <b>Negative Passive</b>   |
|  |                 |                           |
| <b>Assessment / Evidence</b>   |                 |                           |
| <p>Assessor's comments</p> <p>Assessor's details :</p> <ul style="list-style-type: none"> <li>i. Name :</li> <li>ii. Designation :</li> <li>iii. Contact information (email and phone no)</li> </ul> |                 |                           |

## Appendix 1D – Fits

|                                   |  |
|-----------------------------------|--|
| <b>Activity</b>                   |  |
| <b>Description (if necessary)</b> |  |

All items on the table below are examples, they do not constitute an exhaustive list in any aspect

| <b>Knowledge</b>   | <b>Skill</b>    | <b>Attitudes + Values</b> |
|--|-----------------|---------------------------|
|  |                 |                           |
| <b>Example Behaviours</b>  |                 |                           |
| <b>Positive</b>  | <b>Negative</b> | <b>Negative Passive</b>   |
|  |                 |                           |
| <b>Assessment / Evidence</b>   |                 |                           |
| <p>Assessor's comments</p> <p>Assessor's details :</p> <ul style="list-style-type: none"> <li>i. Name :</li> <li>ii. Designation :</li> <li>iii. Contact information (email and phone no)</li> </ul> |                 |                           |

## Appendix 1E – Venepuncture

|                                   |  |
|-----------------------------------|--|
| <b>Activity</b>                   |  |
| <b>Description (if necessary)</b> |  |

| <b>Knowledge</b>   | <b>Skill</b>    | <b>Attitudes + Values</b> |
|--|-----------------|---------------------------|
|  |                 |                           |
| <b>Example Behaviours</b>  |                 |                           |
| <b>Positive</b>  | <b>Negative</b> | <b>Negative Passive</b>   |
|  |                 |                           |
| <b>Assessment / Evidence</b>   |                 |                           |
| Assessor's comments  |                 |                           |
| Assessor's details : <ul style="list-style-type: none"> <li>i. Name :</li> <li>ii. Designation :</li> <li>iii. Contact information (email and phone no)</li> </ul> |                 |                           |

## Appendix 1F – Counselling for Immunisation

|                                   |  |
|-----------------------------------|--|
| <b>Activity</b>                   |  |
| <b>Description (if necessary)</b> |  |

| <b>Knowledge</b>  | <b>Skill</b>    | <b>Attitudes + Values</b> |
|---|-----------------|---------------------------|
|   |                 |                           |
| <b>Example Behaviours</b>   |                 |                           |
| <b>Positive</b>   | <b>Negative</b> | <b>Negative Passive</b>   |
|   |                 |                           |
| <b>Assessment / Evidence</b>  |                 |                           |
| <p>Assessor's comments</p> <p>Assessor's details :</p> <p>i. Name :</p> <p>ii. Designation :</p> <p>iii. Contact information (email and phone no)</p> |                 |                           |

**Appendix 1G – Consent for blood transfusion**

|                                   |  |
|-----------------------------------|--|
| <b>Activity</b>                   |  |
| <b>Description (if necessary)</b> |  |

| <b>Knowledge</b>   | <b>Skill</b>    | <b>Attitudes + Values</b> |
|--|-----------------|---------------------------|
|  |                 |                           |
| <b>Example Behaviours</b>  |                 |                           |
| <b>Positive</b>  | <b>Negative</b> | <b>Negative Passive</b>   |
|  |                 |                           |
| <b>Assessment / Evidence</b>   |                 |                           |
| <p>Assessor's comments</p> <p>Assessor's details :</p> <ul style="list-style-type: none"> <li>i. Name :</li> <li>ii. Designation :</li> <li>iii. Contact information (email and phone no)</li> </ul> |                 |                           |