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COMMUNITY HEALTH LEVEL 5

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HE/OS/CH/CR/02/5

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Conduct Community Based Health Care

March/April 2026

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TVET CURRICULUM DEVELOPMENT, ASSESSMENT AND CERTIFICATION

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COUNCIL (TVET CDACC)

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PRACTICAL ASSESSMENT

Time: 1 HOUR

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INSTRUCTIONS TO CANDIDATE:

You are the Community Health Assistant (CHA) in Community H which is malaria endemic zone.

The community has poor sanitation, limited access to clean water, high prevalence of childhood

illness, HIV/TB, mental health challenges, and substance abuse. During your routine community

visits, you encounter a 36-month-old child (Child T) with fever and A 35-year-old client known

HIV positive case presenting with symptoms of TB.

1. You are required to perform the following tasks

Task 1: Assess Child T for malaria risk.

Task 2: Identify tool K and explain its purpose

Task 3: Assess the adherence of the HIV client to treatment

Task 4: Counsel the client on the importance of adherence to treatment and therapy

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2. You have been provided with the following resources for the practical tasks:

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• *Pen*
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- *Baby dummy*
- *Personal protective equipment (PPE)*

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- *Table*
- *Fooscaps*

- *Whiteboard*

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- *Whiteboard Marker*

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- *5 Chairs*

- *Tool k*

- *Simulated client (non- candidate)*

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TOOL K

Notice:

1. Hakikisha umebeba kadi hii kila wakati unapotebela kituo cha afya.

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(Ensure that you carry this card every time you visit a health facility)

2. Muone daktari wakati wowote mwili unapopatwa na jambo lisilo la kawaida. **(Consult a doctor or nurse any time you feel unwell.)**

3. Kumbuka kufuata maagizo ya daktari kuhusu matumizi ya dawa za

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Anti-retroviral (ART). **Remember to follow the doctor's instructions on the use of Antiretroviral drugs (ARVS).**

Name of Health facility _____
Patient's name _____

4. ART ni dawa za kutumiwa milele. Kwa mawaidha zaidi, uliza daktari aliye karibu nawe. **ART works and is life long treatment. For more information, consult your nearest health worker.**

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Patient's Unique No. _____

Date enrolled in CCC _____

Date started ART _____

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Republic of Kenya

**Ministry of Health
National AIDS/STD Control
Programme**

Jina La Dawa Drug Name	Dose	Visit by: S/TS	Dose to last (in Days)	Client Type (Next Visit) ST, ET, C	Visit Date	Wt (Kg)	Viral load copies (if applicable today)	Next Viral load due date	No. of Days Missed Drug	Date of Next Visit
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ST-Standard package , ET -Express package (Pharmacy) , C: community dispensing, TS- Treatment supporter, S-self

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