

**ASEANA CAREGIVERS PTE LTD**

License No: 07C4867 Reg No: 201022663H
Address: 81 Tagore Lane #04-13 TAG A, Singapore 787502
Tel: +65 6316 6618 Fax: +65 6518 3833
Website: www.caregivers.com.sg
Email: enquiry@aseanacaregivers.com.sg

Profile
LIVE-IN CAREGIVER

PERSONAL INFORMATION

Name	Hydee Julao Beron		
Date of Birth	March 7, 1981	Age	44
Place of Birth	Batangas City		
Nationality	Filipino	Gender	Female
Marital Status	Single	Religion	Catholic
Height	160	cm	Weight 60 kg
Residential Address in Home Country 0250 Rimas Bolbok, Batangas City			
Name of Port / Airport to be Repatriated to	NAIA		
Contact Number in Home Country			
Number of Siblings	2 of 9	(e.g. 3 of 5)	
Number of Children	1	Age(s) of Children (if any)	10

**HIGHEST EDUCATIONAL LEVEL**

Qualification	Bachelor of Science in Information and Computer Science
Name of School	Lyceum of the Philippine University
Location	Batangas City
Start Date	1997
End Date	2001 (first semester)

TRAININGS AND SEMINARS ATTENDED

Title	Basic Nursing Skills Training and Enhancement Program
Training Centre	Connectuz Career Development and Consultancy
Location	Quezon City
Start Date	March 9, 2024
End Date	March 9, 2024
Title	Basic Life Support CPR with AED Training
Training Centre	Philippine Childrens's Medical Center
Location	Quezon City

Start Date	June 29, 2024
End Date	June 29, 2024
Title	Caregiving Training
Training Centre	University of Batangas
Location	Batangas City
Start Date	January 1, 2023
End Date	June 1, 2023

LICENSURE AND CERTIFICATION

Title	National Certificate II in Caregiving
Institution	TESDA
Location	Batangas City
Registration Date	June 26, 2023

CARE RELATED WORK EXPERIENCE

Job Designation	Nursing Attendant
Company Name / Employer	United Doctors of St. Camillus De Lellis Hospital and Medical Center
Address	Batangas City
Start Date	March 26, 2024
End Date	Present
Type of Patient	Various Types of Patient
Duties	NGT Feeding, Tracheostomy Care, Wound Dressing, Catheter Care, Suctioning, Taking and Monitoring Patient's vital signs, Recording daily needs and activities of the patient, Maintaining patient records, Assisting with bathroom needs, Administer treatment, Assist patient in oral feeding, Prepare and serve meals, Cleaning patient room, Assist Nurse and Doctors in ICU and Emergency Room, Provide care, support and provide companionship to the patient
Reason for Leaving	Applying Abroad
Job Designation	Caregiver
Company Name / Employer	Felimon Gainza
Address	Batangas City
Start Date	January 22, 2021
End Date	February 18, 2023
Type of Patient	89 years old Male with Dementia, Lung Cancer, Pneumonia, Hip Fracture
Duties	Meal Preparation, Taking and Monitoring Patient's vital signs, Suctioning, Recording daily needs and activities of the patient, Bed Bathing, Change Diaper and dressing, Administer medication, Assist patient in oral feeding, Mobility assistance, Doing light housechores, Accompany patient to the hospital
Reason for Leaving	Passed Away

Job Designation Caregiver

Company Name / Employer Helping Care Connection

Address Batangas City

Start Date December 10, 2018

End Date December 20, 2020

Type of Patient 93 years old Female with Arthritis and Pneumonia

Duties Meal Preparation, Taking and Monitoring Patient's vital signs, Recording daily needs and activities of the patient, Assist in bathing, toileting and dressing, Administer medication, Assist patient in oral feeding, Mobility assistance, Doing light housechores, Accompany patient to the hospital

Reason for Leaving End of Contract

MEDICAL HISTORY/DIETARY RESTRICTIONS

Allergies (if any) None

Past and existing illnesses (including chronic ailments and illnesses requiring medication):

	Yes	No		Yes	No
i Mental illness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	vi Tuberculosis	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ii Epilepsy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	vii Heart disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iii Asthma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	viii Malaria	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iv Diabetes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ix Operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
v Hypertension	<input type="checkbox"/>	<input checked="" type="checkbox"/>	x Others		

Physical disabilities None

Previous and existing injury (if any) None

Problem with Hearing or Eyesight (if any) None

Dietary restrictions None

Food handling preferences ☐ No pork ☐ No beef ☒ No preference ☐ Others

Preference for rest day 4 rest days per month

Any other remarks can work during days off with compensation
she has tattoo on her right wrist

SKILLS

Method of Evaluation of Skills

- ☐ Based on Caregiver/FDW's declaration, no evaluation/observation by Singapore EA or overseas training centre/EA
- ☒ Interviewed by Singapore EA
- ☒ Interviewed via telephone/teleconference
- ☒ Interviewed via videoconference

☐

Interviewed in person

☐

Interviewed in person and also made observation of Caregiver/FDW in the areas of work listed in table

Areas of Work	Willingness Yes/No	Experience Yes/No If yes, state the no. of years	Assessment/Observation Please state qualitative observations of FDW and/or rate the FDW (indicate N.A. of no evaluation was done) PoorExcellent...N.A. 1 2 3 4 5 N.A.
Care of infants/children Please specify age range	YES		
Care of Elderly	YES	5	5
Care of Disabled	YES		
General Housework	YES	4	5
Cooking Please specify cuisines filipino dish	YES	4	5
Language Abilities (spoken) Please specify English , Tagalog	YES		
Other Skills (if any) Please specify			

Caregiving/Nursing Skills

SKILLS	No Experience but Attended Training/Willing to Learn	With Some Experience (1-6 months)	With Good Experience (6-12 months)	With Very Good Experience (more than 12 months)
Basic Caregiving Skills (To assist the Care Recipient in Activities of Daily Living/ADLs)				
Toileting (diaper change, use of commode)				x
Bathing (in the shower, bed bath)				x
Personal Hygiene, Grooming, Dressing				x
Transferring (bed to wheelchair and vice versa)				x
Assist care recipient with Mobility Device				x
Oral Feeding				x
Management of Medication				x
Meal Preparation				x
Monitoring of Input and Output				x
Provide passive range of motion exercises				x
Taking, Monitoring and Recording Vital Signs				x
General Nursing Skills				
NGT Feeding				x
PEG Feeding				x
Urinary Catheter Care				x
Stoma Care	x			
Glucose Monitoring and Management				x
Wound Care				x
Specialized Nursing Skills				
Tracheostomy Care				x
Suctioning				x
Home Ventilation and Respiratory Support Care	x			
Dementia Care				x
Palliative Care				x

MEDICAL EQUIPMENT USED	No Experience but Attended Training/Willing to Learn	With Some Experience (1-6 months)	With Good Experience (6-12 months)	With Very Good Experience (more than 12 months)
Catheter				x
Colostomy Bag	x			
CPAP Machine	x			
Medical Ventilator	x			
Nebulizer				x
Peritoneal Dialysis Machine	x			
Pulse Oximeter				x
Oxygen Concentrator				x
Suction Machine				x

Types of Patients Handled

Elderly

- | | |
|---|---|
| <input checked="" type="checkbox"/> Alzheimer's Disease/Dementia | <input checked="" type="checkbox"/> Hypertension |
| <input checked="" type="checkbox"/> Arthritis | <input type="checkbox"/> Motor Neuron Disease |
| <input checked="" type="checkbox"/> Cancer and/or Palliative Care | <input type="checkbox"/> Parkinson's Disease |
| <input type="checkbox"/> Chronic Kidney Disease (CKD) | <input checked="" type="checkbox"/> Shingles |
| <input type="checkbox"/> Chronic Obstructive Pulmonary Disease (COPD) | <input type="checkbox"/> Spinal Chord Injury |
| <input checked="" type="checkbox"/> Diabetes | <input checked="" type="checkbox"/> Stroke |
| <input checked="" type="checkbox"/> Heart Disease | <input type="checkbox"/> Others (<i>please specify</i>) |

Infant/Young Children

- | | |
|---|---|
| <input type="checkbox"/> Autism | <input type="checkbox"/> Down Syndrome |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Epilepsy |
| <input type="checkbox"/> Cerebral Palsy | <input type="checkbox"/> Others (<i>please specify</i>) |
| <input type="checkbox"/> Chronic Kidney Disease (CKD) | |

AVAILABILITY OF FDW TO BE INTERVIEWED BY PROSPECTIVE EMPLOYER

- ☐ FDW is not available for interview
- ☒ FDW can be interviewed by phone
- ☒ FDW can be interviewed by video-conference
- ☐ FDW can be interviewed in person

OTHER REMARKS

Hydee Julao Beron

Caregiver/FDW Name and Signature
Date

EA Personnel Name and Registration Number
Date

I have gone through this profile of the Caregiver and confirm that I would like to employ her

Employer Name and Signature
Date



Republic of the Philippines
TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY

NATIONAL CERTIFICATE II

in

CAREGIVING (NEWBORN TO PRE-SCHOOLER)

is awarded to

HYDEE J. BERON

for having completed the competency requirements under the Philippine TVET Competency Assessment and Certification System in the following units of competency:

Unit Code	BASIC COMPETENCIES
400311210	Participate in workplace communication
400311211	Work in team environment
400311212	Solve/address general workplace problems
400311213	Develop career and life decisions
400311214	Contribute to workplace innovation
400311215	Present relevant information
400311216	Practice occupational safety and health policies and procedures
400311217	Exercise efficient and effective sustainable practices in the workplace
400311218	Practice entrepreneurial skills in the workplace

Unit Code	COMMON COMPETENCIES
HCS323201	Implement and monitor infection control policies and procedures
HCS323202	Respond effectively to difficult/challenging behavior
HCS323203	Apply basic first aid
HCS323204	Maintain high standard of patient / client services

Unit Code	CORE COMPETENCIES
HHC532301	Participate in the implementation and monitoring of newborn's care plan
HHC532302	Develop the ability to recognize newborn's growth and development
HHC532303	Perform caring skills for newborn
HHC532304	Participate in the implementation and monitoring of infant's care plan
HHC532305	Provide physical needs, care and support to infant
HHC532306	Foster social, intellectual and emotional development of infant
HHC532307	Participate in the implementation and monitoring of toddler's care plan
HHC532308	Develop the ability to recognize toddler's growth and development
HHC532309	Perform caring skills for toddler
HHC532310	Participate in the implementation and monitoring of pre-schooler's care plan
HHC532311	Develop the ability to recognize pre-schooler's growth and development
HHC532312	Perform caring skills for pre-schooler

Signature of the certificate holder
Certificate No. **23041002013814**

BHJ-81-587-04010-001

Issued on : **June 26, 2023**
Valid until: **June 25, 2028**



SEC. SUHARTO T. MANGUDADATU, Ph. D.
Director General

CLN-NQ- 6877658



CONNECTUZ CAREER DEVELOPMENT AND CONSULTANCY
Helping Care Connection

Proudly present this



CERTIFICATE OF COMPLETION

To
Hydee J. Beron

For having attended and successfully completed the

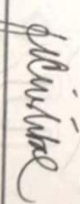
BASIC NURSING SKILLS TRAINING AND ENHANCEMENT PROGRAM

(Two-day lecture and hands-on practical demonstration)

This program is designed for Allied Healthcare Students and Professionals. The main goal of this program is to provide and enhance knowledge and skills of the participants with the commonly encountered nursing procedures and techniques.

Given this 9th day of March 2024 at Helping Care Connection Office, Quezon City


Riva C. Celeste RN
Facilitator/Trainer


Rubi E. Cristobal
Operations Manager

BASIC NURSING SKILLS TRAINING AND ENHANCEMENT PROGRAM (2-DAY Hands-on Practical Demonstration)

TOPICS AND COVERAGE:

OXYGENATION:

- Oxygen Administration
- Nebulization & Nasal Inhalers
- Incentive Spirometry
- Tracheostomy Care
- Airway Suctioning (Tracheal, Oral, Nasopharyngeal & Oropharyngeal)

METABOLISM:

- NGT Feeding and Management
- PEG Feeding and PEG Care
- CBG/Blood Sugar Monitoring
- Subcutaneous/Insulin Injection Technique

ELIMINATION:

- Colostomy Care
- Enema (Fleet enema)
- Urethral Catheterization and Management

WOUND CARE

- Wound Assessment, Irrigation & Dressing

BONUS TOPICS

- Covid-19 Awareness
- Medication Management

LOCATION: Lot 3 Blk. 2 DRJ Village, Brgy.

Old Sauro Road, Quezon City, 1116

MOBILE NO.: Globe: 09770318709

Smart: 09183111184

LANDLINE: (02) 8634-8806

EMAIL:

helpingcareconnections@gmail.com

Certificate No.: HCC-BNS3036

Not valid without seal

BASIC LIFE SUPPORT

**BLS
Provider**



American
Heart
Association.

HYDEE J. BERON

has successfully completed the cognitive and skills evaluations
in accordance with the curriculum of the American Heart Association
Basic Life Support (CPR and AED) Program.

Issue Date

29 Jun 2024

Training Center Name

Philippine Children's Medical Center - PICU

Training Center ID

ZZ20753

Training Center City, Country

Quezon City, Philippines

Training Site Name

Interim

Renew By

Jun 2026

Instructor Name

Vicente Jr. de Lima

Instructor ID

011604173000

eCard Code

255601176839

QR Code



To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to <https://ecards.heart.org/international>.

© 2020 American Heart Association. All rights reserved. 20-2000 11/20



HELPING CARE
CONNECTION

CERTIFICATE OF EMPLOYMENT

This is to certify that **Mr/Ms. Hydee J. Beron**, has been employed by Helping Care Connection under Connectuz Career Development and Consultancy as a *Private Duty Caregiver* deployed from December 10, 2018 up to December 20, 2020 to home bound patients.

His/her services were found to be satisfactory in carrying out following duties and responsibilities:

- Direct Patient Care, Planning and Management
- Daily Health Status monitoring (e.g. Vital Signs)
- Patient Medication Preparation, Administration and Monitoring
- Help with Personal Hygiene (e.g. Bathing, Oral Care, and Bowel Elimination)
- Meal Preparation, Assisting with Meals and Diet Planning
- Help with Mobility and Daily Routine Exercise
- Light Housekeeping in Patients room
- Assist in Hospital Admission/Discharge and Follow up Consultations to the Physician
- Reporting and monitoring of patients progress to the Family and the Physician

For your queries and questions kindly contact me with my mobile number 09770318709. This certification is being issued upon the request of the aforementioned person for whatever legal purposes it may serve.

Given this 25th day of January 2021 at Novaliches, Quezon City.

Yours Truly,

Rozza C. Celeste
HR Manager/Coordinator

