



**Australian Government**

# **HLTENN025 Implement and monitor care for a person with diabetes**

**Release: 1**

# HLTENN025 Implement and monitor care for a person with diabetes

## Modification History

Release	Comments
Release 1	<p>This version was released in <i>HLT Health Training Package release 3.0</i> and meets the requirements of the 2012 Standards for Training Packages.</p> <p>Significant changes to the elements and performance criteria. New evidence requirements for assessment, including volume and frequency requirements. Minimal change to knowledge evidence.</p> <p>Supersedes HLTEN611B</p>

## Application

This unit describes the skills and knowledge required to provide nursing care to a person with diabetes including assessing needs, planning and implementing complex nursing interventions, evaluating outcomes, and educating the person on his/her condition and available resources.

This unit applies to enrolled nursing work carried out in consultation and collaboration with registered nurses, and under supervisory arrangements aligned to the Nursing and Midwifery Board of Australia regulatory authority legislative requirements.

*The skills in this unit must be applied in accordance with Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.*

## Elements and Performance Criteria

### ELEMENT

*Elements define the essential outcomes*

1. Identify diabetes care services in the Australian health care environment

### PERFORMANCE CRITERIA

*Performance criteria describe the performance needed to demonstrate achievement of the element.*

1.1 Provide current accurate information on diabetes care and sources of funding for related services to the person, the family or carer, and to colleagues

1.2 Identify specialist services and complementary roles of organisations and individuals involved in supporting and delivering diabetes care

**ELEMENT****PERFORMANCE CRITERIA**

*Elements define the essential outcomes*

*Performance criteria describe the performance needed to demonstrate achievement of the element.*

2. Assess the needs of a person with diabetes

1.3 Liaise with referring agencies and community organisations when providing diabetes care

2.1 Apply knowledge of the pathophysiology of diabetes

2.2 Perform holistic nursing assessment using a range of contemporary assessment tools, resources and strategies and incorporating review of the person's history, current situation and treatment regimes

2.3 Determine the person's current understanding of their condition, self-management strategies and medications

2.4 Identify possible factors impacting the person's health or significant alterations in the person's condition, based on own current knowledge of diabetes

2.5 Identify the family or carer's understanding of and involvement in the person's diabetes care, and how this might impact the person's care planning and provision

3. Perform complex nursing interventions to assist a person to achieve and maintain optimal diabetes health

3.1 Manage nursing workload according to a person's needs and re-prioritise care activities for the person when circumstances change in consultation with registered nurse

3.2 Prepare the person's care plan to ensure it reflects the complex care needs of a person with diabetes

3.3 Identify responses of the person, family or carer to nursing interventions and their understanding of ongoing management of the person's condition, including strategies for self-management

3.4 Administer prescribed emergency medication based on sound knowledge of principles of drug actions and in accordance with organisation policies and procedures

3.5 Evaluate and interpret the person's blood and urine test results related to their diabetic condition, and communicate findings to the interdisciplinary health care team

3.6 Liaise with registered nurses about alterations in the person's condition while providing ongoing support of the

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person

4. Evaluate the care plan for a person with diabetes, and support a person's self-management

4.1 Critically review the care plan and modify according to the person's progress toward planned outcomes in consultation and collaboration with interdisciplinary health care team

4.2 Evaluate nursing interventions provided and consider identified outcomes against evidence-based best practice in diabetes nursing care

4.3 Identify opportunities where indicated to provide the person, family or carer with information on available community resources and how to access them

4.4 Evaluate the person's understanding of their diabetes condition, medications, therapeutic regimes and self-management

4.5 Promote the person's self-management of their condition and assist them to provide accurate information to their family or carer on their diabetes care needs

4.6 Document uptake by the person of specific health promotion initiatives to support their self-management

**Foundation Skills**

*The Foundation Skills describe those required skills (language, literacy, numeracy and employment skills) that are essential to performance.*

Foundation skills essential to performance are explicit in the performance criteria of this unit of competency.

**Unit Mapping Information**

No equivalent unit.

**Links**

Companion Volume implementation guides are found in VETNet -

<https://vetnet.gov.au/Pages/TrainingDocs.aspx?q=ced1390f-48d9-4ab0-bd50-b015e5485705>