

HLTAHW514B Provide care to clients undertaking renal dialysis in the community setting

Release: 1



HLTAHW514B Provide care to clients undertaking renal dialysis in the community setting

Modification History

Not Applicable

Unit Descriptor

Unit Descriptor This unit describes the advanced skills and

knowledge required to provide health care to clients that is specific to continuous ambulatory peritoneal dialysis or home haemodialysis being undertaken in

the community setting

Application of the Unit

Application This unit is intended to address additional skills and

knowledge required by those working with

Aboriginal or Torres Strait Islander communities to deliver specific health care services and is available

only within the context of qualifications in Aboriginal and/or Torres Strait Islander health

Licensing/Regulatory Information

Not Applicable

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Pre-Requisites

Pre-requisites

This unit must be assessed after successful achievement of pre-requisites:

- HLTAHW401B Assess client's physical wellbeing
- HLTAHW403B Plan and implement health care in a primary health care context

Employability Skills Information

Employability Skills

This unit contains Employability Skills

Elements and Performance Criteria Pre-Content

Elements define the essential outcomes of a unit of competency.

The Performance Criteria specify the level of performance required to demonstrate achievement of the Element. Terms in italics are elaborated in the Range Statement.

Elements and Performance Criteria

ELEMENT

PERFORMANCE CRITERIA

- 1. Assess peritoneal catheter exit 1.1 site and client dressing 1.2 technique 1.3
 - .1 Identify signs of exit site infection
 - 1.2 Elicit signs of catheter tunnel infection
 - 1.3 Obtain exit site swab and send for microbiological analysis
 - 1.4 Appraise client technique for dressing exit site
 - 1.5 Instruct client on appropriate exit site care
 - 1.6 Document condition of exit site and refer problems in accordance with organisation policies and procedures

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ELEMENT

PERFORMANCE CRITERIA

- 2. Assess patency of arteriovenous fistula
- 2.1 Obtain history of pain, swelling or trauma around A-V fistula
- 2.2 Elicit history of haemodialysis needling problems or abnormal 'A' and 'V' pressure readings
- 2.3 Palpate fistula for thrill and auscultate for bruit
- 2.4 Identify signs suggesting fistula stenosis or infection
- 2.5 Promptly report potential fistula problems to medical staff for assessment
- 2.6 Document findings of assessment in client notes
- 3. Identify common or serious dialysis problems
- 3.1 Identify *clinical features suggestive of dialysis*related peritonitis and promptly refer clients
- 3.2 Consider causes of *peritoneal fluid failing to drain*
- 3.3 Recognise clinical features of uraemia
- 3.4 Anticipate hazards associated with haemodialysis after a number of missed dialysis sessions
- 3.5 Refer identified dialysis problems to senior health staff according to organisation procedures and clinical guidelines
- 4. Broker supply of dialysis consumables and support use
- 4.1 Obtain information on client's requirements for dialysis consumable
- 4.2 Order stock from supplier in accordance with client needs and organisational procedures
- 4.3 Support and monitor appropriate storage arrangements for dialysis consumables
- 4.4 identify, document, report and resolve problems with supply or storage of dialysis consumables
- 4.5 Facilitate client use of their dialysis treatment protocol

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Required Skills and Knowledge

REQUIRED SKILLS AND KNOWLEDGE

This describes the essential skills and knowledge and their level required for this unit.

Essential knowledge:

The candidate must be able to demonstrate essential knowledge required to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

This includes knowledge of:

- Organisation policies and procedures relating to client confidentiality
- Basic anatomy and physiology of the renal system
- Common causes of chronic renal failure (diabetes, glomerulonephritis, hypertension, urinary tract obstruction, inherited abnormalities)
- Underlying environmental and social factors contributing to high rates of renal disease in Aboriginal communities
- Management principles for common co-morbidities (including diabetes, high blood pressure, hyperlipidaemia)
- Factors that can slow decline of renal function (eg. control of high blood pressure, use of ACE inhibitors, avoidance of NSAIDS)
- Microbiology relevant to peritoneal, blood and skin infection in renal disease
- Pathophysiology of chronic renal failure:
 - fluid retention and pulmonary oedema
 - electrolyte balance and hazards of high potassium
 - calcium metabolism and renal bone disease
 - anaemia
- Signs and symptoms of uraemia and fluid retention
- Meaning and interpretation of common pathology tests for chronic renal failure and dialysis
- Haemodialysis technology theory, machine components, terminology, infrastructure requirements, risks and benefits
- Peritoneal dialysis theory, terminology, procedures, risks and benefits
- Different types of renal dialysis unit and their function (eg. tertiary in-centre, satellite units, community/home-based dialysis)
- Nutritional considerations for renal dialysis clients
- Medicines in common use in management of chronic renal failure including basic mechanisms of action, precautions and side effects

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REQUIRED SKILLS AND KNOWLEDGE

Essential skills:

It is critical that the candidate demonstrate the ability to:

- Monitor relevant aspects of health status of clients with chronic renal failure and undertake appropriate pathology tests for dialysis clients
- Provide support and guidance to dialysis clients

In addition, the candidate must be able to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

This includes the ability to apply skills in:

- Recognise situations requiring immediate or urgent action
- Work with other members of multi-disciplinary team to ensure actions determined in the client's care plan are carried out and documented
- Mathematical calculation (eg. differences between weight measures, calculation of doses)
- Communicate effectively with client and ensure understanding
- Holistically evaluate impact of renal dialysis treatment on client's physical, mental and emotional condition and behaviour
- Monitor outcomes of renal dialysis treatment and medication regimes
- Administer medicines by oral and intramuscular routes
- Contribute to evaluation of client's prescribed treatment/ care plan
- Make timely and appropriate referrals, providing accurate and relevant details to clients and referral agencies
- Reflect on and improve own level and application of skills and knowledge to achieve desirable outcomes and maintain own capabilities

Evidence Guide

EVIDENCE GUIDE

The evidence guide provides advice on assessment and must be read in conjunction with the Performance Criteria, Required Skills and Knowledge, the Range Statement and the Assessment Guidelines for this Training Package.

Critical aspects of assessment:

The individual being assessed must provide evidence

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EVIDENCE GUIDE

- of specified essential knowledge as well as skills
- Consistency of performance should be demonstrated over the required range of situations relevant to the workplace
- Where, for reasons of safety, space, or access to equipment and resources, assessment takes place away from the workplace, the assessment environment should represent workplace conditions as closely as possible

Conditions of assessment:

This unit includes skills and knowledge specific to Aboriginal and/or Torres Strait Islander culture Assessment must therefore be undertaken by a workplace assessor who has expertise in the unit of competency or who has the current qualification being assessed and who is:

Aboriginal or Torres Strait Islander him/herself

or:

accompanied and advised by an Aboriginal or Torres Strait Islander person who is a recognised member of the community with experience in primary health care

Context of assessment:

Competence should be demonstrated working individually, under supervision or as part of a primary health care team working with Aboriginal and/or Torres Strait Islander clients

Assessment should replicate workplace conditions as far as possible

Related unit:

This unit should be assessed in conjunction with the related unit:

HLTAHW513A Support renal dialysis clients in the community setting

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Range Statement

RANGE STATEMENT

The Range Statement relates to the unit of competency as a whole. It allows for different work environments and situations that may affect performance. Add any essential operating conditions that may be present with training and assessment depending on the work situation, needs of the candidate, accessibility of the item, and local industry and regional contexts.

Cultural respect

This competency standard supports the recognition, protection and continued advancement of the inherent rights, cultures and traditions of Aboriginal and Torres Strait Islander peoples

It recognises that the improvement of the health status of Aboriginal and Torres Strait Islander people must include attention to physical, spiritual, cultural, emotional and social wellbeing, community capacity and governance Its application must be culturally sensitive and supportive of traditional healing and health, knowledge and practices

Community control

Community participation and control in decision-making is essential to all aspects of health work, and the role of the health worker is to support the community in this process

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Supervision

Supervision must be conducted in accordance with prevailing state/territory and organisation legislative and regulatory requirements

References to supervision may include either direct or indirect supervision of work by more experienced workers, supervisors, managers or other health professionals

A person at this level should *only* be required to make decisions about clients within the organisation's standard treatment protocols and associated guidelines

Legislative requirements

Federal, state or territory legislation may impact on workers' practices and responsibilities. Implementation of the competency standards should reflect the legislative framework in which a health worker operates. It is recognised that this may sometimes reduce the application of the Range of Variables in practice. However, assessment in the workplace or through simulation should address all essential skills and knowledge across the Range of Variables Aboriginal and/or Torres Strait Islander Health Workers may be required to operate in situations that do not constitute 'usual practice' due to lack of resources, remote locations and community needs. As a result, they may need to possess more competencies than described by 'usual practice circumstances' Under all circumstances, the employer must enable the worker to function within the prevailing legislative framework

Renal replacement therapy includes:

- Haemodialysis
- Continuous ambulatory peritoneal dialysis
- Kidney transplantation

Physical signs of fluid overload include:

- Dyspnoea and tachypnoea
- Ankle oedema
- Crackles on lung auscultation

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Signs of exit site infection include:

- Soiling of exit site dressing
- Blood-stained or pus discharge
- Exit site redness and tenderness

Signs of catheter tunnel infection include:

- Expressible pus or discharge
- Tenderness, redness or pustules over peritoneal catheter tunnel

Appropriate exit site care includes:

- Washing in shower and padding dry with gauze
- Application of topical antiseptic
- Correct placement of anchor tape
- Application of adhesive absorbent dressing
- Securing redundant tubing

Signs suggesting fistula stenosis or infection include:

- Absent or reduced bruit or thrill
- Low 'a' or high 'v' pressure readings during haemodialysis
- Redness, tenderness or discharge

Routine pathology testing for dialysis clients include

- Haemoglobin and blood counts
- Serum creatinine, potassium, calcium and phosphate
- Parathyroid hormone
- Iron studies

Medicines commonly used in dialysis care include:

- Common antihypertensive medicines
- Common lipid lowering agents
- Phosphate binders (calcium salts)
- Erythropoietin
- Calcitriol

Clinical features suggestive of dialysis-related peritonitis include:

- Abdominal pain/tenderness
- Fever
- Turbid or cloudy dialysate return

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Causes of peritoneal fluid failing to drain include:

- Fibrin plugs
- Constipation
- Dialysate not instilled

Clinical features of uraemia include:

- Lethargy
- Nausea
- Confusion
- Uraemic smell

Hazards associated with haemodialysis after a number of missed dialysis sessions include:

- Severe headache
- Fitting

Dialysis consumables include

- Dialysate fluids
- Machine lines and dialysers
- Needles and syringes
- · Normal saline
- Dressing supplies and tapes
- Peritoneal catheter caps
- Antiseptic and cleaning supplies

Appropriate storage arrangements for dialysis consumables include:

- Safe from environmental hazards (sun, water, rodents)
- Secure from young children
- Accessible for stock-take, resupply and daily use

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Information provided to client may include:

- Normal structure and functioning of the renal system, kidneys and blood.
- Causes of renal failure
- Physical symptoms of renal failure
- Different renal replacement treatment options and advantages/disadvantages
- How kidney transplantation is done and what is involved
- Information about self-care, including:
 - dietary requirements and rationale
 - fluid requirements
 - medication regime
 - looking after fistula sites
 - recognising common dialysis problems

Specific reference for work in this • area:

National Guidelines for the Management of Dialysis&Kidney Transplantation in Remote Australia

Unit Sector(s)

Not Applicable

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