



Australian Government

**Assessment Requirements for
HLTAHCS009 Provide support to clients
with diabetes**

Release: 1

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Modification History

Not applicable.

Performance Evidence

Evidence of the ability to complete tasks outlined in elements and performance criteria of this unit in the context of the job role, and:

- provide support to a total of five Aboriginal and/or Torres Strait Islander clients with diabetes to collectively include:
 - females
 - males
 - people across the lifespan
 - people with different types of diabetes
- for each of the five clients, and according to their individual needs:
 - source credible consumer based education resources from diabetes support services, and clearly explain these to the client
 - provide clear information and explanations about relevant forms of diabetes treatments and their side effects that collectively covers the following across the five clients:
 - insulin by injection or pump
 - other injectable diabetes medications
 - oral glucose lowering medications
 - provide clear information on client self-care:
 - self-monitoring and recording blood glucose levels (and ketones as relevant), frequency and reference ranges for client
 - how to manage hypoglycaemia and hyperglycaemia and when to seek medical attention
 - nutrition, healthy eating and exercise
 - foot and eye care
 - smoking cessation for at least one of the five clients
 - alcohol cessation or reduction for at least one of the five clients
 - source information about diabetes support services, explain their key features and advise the client how to access services
 - plan and organise continuity of diabetes care in consultation with the client and multidisciplinary team
 - use organisational registers and recall strategies to book two appointments for diabetes health care checks

- document, in client records, accurate details of each client contact including details of services, information and referrals provided.

Knowledge Evidence

Demonstrated knowledge required to complete the tasks outlined in elements and performance criteria of this unit:

- organisational procedures for client record keeping
- how scope of practice for diabetes support may differ between Aboriginal and/or Torres Strait Islander health workers and health practitioners, and common role boundaries for each
- how multidisciplinary team members work together to coordinate diabetes treatments and management, and how to facilitate referrals
- the potential reach of a multidisciplinary diabetes health care team, and an overview of their roles including general practitioner, registered nurse, endocrinologist, podiatrist, dietitian, credentialed diabetes educator, ophthalmologist, optometrist and psychologist
- key elements of the psychosocial impact of diabetes, and the importance to health outcomes of managing this aspect of health:
 - emotional
 - psychological
 - physical
 - practical
- techniques used to communicate with clients and families dealing with the emotional impact of diabetes diagnosis and management
- for the three main types of diabetes including type 1, type 2 and gestational:
 - how they contrast
 - plain language definitions and explanations
 - basic pathophysiology sufficient to describe the impact and functional changes on relevant body organs and systems
 - the progressive nature of type 2 diabetes and the need to change treatments and management over time
 - short term complications of diabetes, hypoglycaemia and hyperglycaemia, ways to manage these and the need for clients to have emergency action plans
 - overview of main complications sufficient to identify other body systems that can be affected, and the other resultant serious diseases and conditions that can occur:
 - heart disease
 - stroke
 - retinal damage including vision impairment and blindness
 - chronic kidney disease
 - sexual dysfunction
 - nerve damage, infection and potential for amputation
 - adverse outcomes of gestational diabetes for mothers and their babies

- overview of the common forms of clinical treatment including their aim, and their side effects:
 - insulin via injection or pump
 - other injectable diabetes medications
 - oral glucose lowering medications
- lifestyle risk factors that can contribute to diabetes and diabetes complications:
 - smoking
 - physical inactivity
 - unhealthy nutrition and body weight
 - consumption of alcohol at unsafe levels
 - stress
- the importance of clients modifying their lifestyle in the management of diabetes
- key elements of dietary and physical activity guidelines for people with diabetes
- for home blood glucose and ketones testing equipment, including flash glucose monitors:
 - operational features
 - ways to avoid inaccurate readings
 - care and maintenance
 - how to read and record levels
- ‘normal’ range of values for blood glucose and ketones and when clients should seek medical attention
- foot and eye care checks that can be completed by people with diabetes and self-care methods used to maintain health
- the role of traditional and bush healers relevant to the local community
- the elements of client self-management of diabetes, and the importance of the client’s role in managing the condition:
 - knowing about the particular type of diabetes
 - sharing in decision-making for care plans, treatments and ongoing health care
 - following an agreed care plan
 - monitoring and managing signs and symptoms as well as side effects of treatments
 - managing the impact on physical, emotional and social life
 - adopting a healthy lifestyle
 - accessing and using diabetes support services
- factors that may impact on client choice of diabetes health care:
 - adherence to traditional and spiritual belief systems
 - perceptions of risk and benefits
 - potential for physical disability or impaired function and their impacts on ability to work, family and personal relationships
 - ability to manage treatments and ongoing self-care
- the importance of:
 - current and credible consumer based education resources about diabetes and its management in the client decision-making process

- patient treatment and management choices on diabetes outcomes
- respecting client values and choice of treatment, and how to provide balanced and evidence based information to assist with decisions
- determining treatments and planning for supportive care services before diabetes management starts
- barriers and difficulties faced by Aboriginal and/or Torres Strait Islander people and their families who need to travel or relocate to distant centres to access treatments and care
- diabetes support services available in the community, state or territory:
 - for diabetes in general and for particular types of diabetes
 - specialist services available to people of different genders and ages, and to Aboriginal and/or Torres Strait Islander people
 - National Diabetes Support Scheme (NDSS)
 - how to access information about the types of services and consumer based education resources they provide
 - how clients can access services and the role of health workers and practitioners in facilitating access
- main elements of the ‘diabetes annual cycle of care’ and available Medicare benefits
- the importance of continuity of care for clients with diabetes:
 - follow-up for women with gestational diabetes and their babies
 - transitioning care for young people moving to adult services
 - the need for regular attendance, check-ups, and reassessment for changes in diabetes presentation and detection of other related diseases
- how to use client information systems and recall functions to follow-up clients for care and for regular check-ups.

Assessment Conditions

Skills must be demonstrated in a health service workplace within a multidisciplinary primary health care team.

Evidence of performance must be gathered:

- during on-the-job assessments in the workplace under live conditions while interacting with Aboriginal and/or Torres Strait Islander people, or
- during off-the-job assessments in the workplace, not under live conditions, using simulated activities while interacting with Aboriginal and/or Torres Strait Islander people.

Evidence of workplace performance can be gathered and reported through third party report processes. (Refer to the Companion Volume Implementation Guide for information on third party reporting.)

Evidence can be supplemented by assessments in a simulated workplace environment using simulated activities, scenarios or case studies only when:

- the full range of situations covered by the unit cannot be provided in the individual’s workplace, or
- situations covered by the unit occur only rarely in the individual’s workplace.

Assessment must ensure the use of:

- home testing equipment for blood glucose and ketones
- client records
- current and credible consumer based education resources from diabetes support services about different types of diabetes, diabetes clinical treatments and self-care
- information about different types of diabetes support services designed to meet the needs of people of different ages, genders, and those for Aboriginal and/or Torres Strait Islander people if available
- dietary and exercise guidelines from credible sources which could include those produced by government agencies and diabetes support services
- organisational procedures for client record keeping.

Assessors must satisfy the Standards for Registered Training Organisations requirements for assessors, and:

- be an Aboriginal and/or Torres Strait Islander person who has applied the skills and knowledge covered in this unit of competency through experience working as an Aboriginal and/or Torres Strait Islander health worker or practitioner, or
- be a registered health practitioner with experience relevant to this unit of competency and be accompanied by, or have assessments validated by, an Aboriginal and/or Torres Strait Islander person.

Links

Companion Volume implementation guides are found in VETNet -

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