

Assessment Requirements for HLTAHW041 Assess and manage emergency treatment of burns

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Modification History

| Release | Comments |
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| Release 2 | Updated: assessor requirements statement foundation skills lead in statement licensing statement modification history to reflect 2012 standards Equivalent outcome. |
| Release 1 | This unit was released in <i>HLT Health Training Package</i> release 1.0 and meets the requirements of the 2012 Standards for Training Packages. |

Performance Evidence

The candidate must show evidence of the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the job role.

There must be evidence that the candidate has:

- performed emergency burn procedures for at least five different clients with burn injuries. This includes:
 - assessing percentage of Total Burn Surface Area (TBSA) using Lund and Browder
 - estimating burn depth
 - communicating with personnel from emergency management services and/or medical services
 - · calculating fluid resuscitation requirements according to modified Parklands formula
 - commencing intravenous resuscitation under supervision and/or as directed by a Medical Officer or other qualified personnel
 - monitoring and documenting:
 - fluid balance chart
 - vital signs
 - undertaking a risk assessment of potential hazards in the incident area
 - delivering information to minimise the risks of complications
 - delivering appropriate first aid to the burn type

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- administering appropriate wound care in the immediate post-first-aid period, appropriate to the type of burn
- · performing 'to the floor' irrigation in relation to chemical burn injuries
- communicating information to minimise the risk of burn wound complications
- using PPE as required
- instigating communication with clients and families
- enabling a supportive environment for clients and families
- providing support strategies for clients with possible non-accidental burn injuries.

Knowledge Evidence

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:

- structure and function of the skin
- · principles of healing
- principles of burns shock
- effects of burn injury on the immune system
- pathophysiology of inhalation injury
- estimating the percentage of TBSA using the Lund & Browder method
- determination of burn depth
- knowledge of the Jackson Burn Wound Model
- principles of moist wound healing
- predisposing factors to burn depth progression
- · predisposing factors to delayed burn wound healing
- morbidity and mortality rates of burn injuries
- · referral guidelines for clients with a burn injury to a Burns Unit
- regional emergency services
- expert medical assistance
- emergency burns injury management procedures:
 - · incident severity assessment
 - · systematic assessment of the person's clinical status
 - pain management strategies
- specific risks and management of:
 - chemical injury
 - electrical injury
 - circumferential injury
 - inhalation injury
 - children with burn injuries

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- fluid input and urinary output
- monitoring and documenting the person's clinical status
- specific first aid management for thermal, chemical, and electrical burns, and cold injuries
- potential hazards associated with:
 - flame, scald and contact burn incidents
 - liquid and powder chemical burn incidents
 - electrical burn incidents
 - LPG, ice and other cold injury incidents
- contact persons from emergency and medical services
- information that minimises the risk of complications
- predisposing factors to burn depth progression
- correct emergency management of spinal injury (electrical injuries)
- PPE usage
- risks and management of specific chemical burns, including:
 - · acid burn
 - alkaline burn
 - powder chemical burn
 - alkali-metal burn
 - bitumen burn
- burn wound care and management, including:
 - principles of wound care
 - what environment minimises risk of infection
 - principles of wound dressing selection
 - traditional or bush medicines and local products that may help or infect a burn injury
- initial psychosocial management, encompassing:
 - · effective communication with family and client
 - supportive environment for family and client
 - mandatory obligations when working with children
 - supportive strategies in relation to non-accidental injuries when working with adults.

Assessment Conditions

Skills must be demonstrated working:

- in a health service or centre
- as part of a multidisciplinary primary health care team
- with Aboriginal and/or Torres Strait Islander clients and communities.

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In addition, simulations and scenarios must be used where the full range of contexts and situations cannot be provided in the workplace or may occur only rarely. These are situations relating to emergency or unplanned procedures where assessment in these circumstances would be unsafe or is impractical.

Simulated assessment environments must simulate the real-life working environment where these skills and knowledge would be performed, with all the relevant equipment and resources of that working environment.

Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2015/AQTF mandatory competency requirements for assessors.

Assessment must be undertaken by a workplace assessor who has expertise in this unit of competency and who is:

an Aboriginal and/or Torres Strait Islander Health Worker or:

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

Links

Companion Volume implementation guides are found in VETNet - https://vetnet.gov.au/Pages/TrainingDocs.aspx?q=ced1390f-48d9-4ab0-bd50-b015e5485705

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