

HLTAHW430A Provide information and support around cancer

Release: 1



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Modification History

HLT07 Version 4	HLT07 Version 5	Comments
N/A	HLTAHW430A Provide information and supportaround cancer	New unit - Addition of new unit around cancer awareness for Aboriginal and/or Torres Strait Islander Health workers: • Added as an elective in: • HLT44007Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health (Community Care) • HLT43907Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice)

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Unit Descriptor

This unit describes the competencies required to provide information about cancer and support for people and their families to enable informed choices about prevention and screening, diagnosis and treatment, through to survivorship or palliation Specific information provided may be limited by close supervision or established guidelines in line with community needs and health provider guidelines

Application of the Unit

This unit may be applied by those working individually (e.g. in isolated practice) or as part of a team (e.g. in a clinic, health service or hospital)

All work is to be carried out with guidance from and under supervision of a medical practitioner or other appropriate health care professional

It is imperative that cultural issues, including gender and kinship issues, are respected in the delivery, assessment and application of this competency unit

Licensing/Regulatory Information

Not applicable.

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Pre-Requisites

Not applicable.

Employability Skills Information

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

- Promote the awareness of cancer - prevention, screening and early detection
- 1.1 Provide accurate and current *information* about the nature, incidence and potential *impacts of cancer* in relation to Aboriginal and/or Torres Strait Islander communities
- 1.2 Provide health information regarding cancer in plain language, using *visual aids* where appropriate
- 1.3 Discuss *risk factors* relating to cancer in the context of local, cultural, community, family and individual issues
- 1.4 Provide information on *ways to prevent* or reduce the risk of cancer
- 1.5 Provide information about best practice guidelines around *early detection* of specific cancers that are in line with *current recommendations*

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2)

- 3) Provide support to clients with cancer
- 2.1 Provide *support* for clients with cancer and their families in Aboriginal and/or Torres Strait Islander communities in line with health service guidelines and identified protocols
- 2.2 Provide *culturally appropriate and current educational resources* about cancer and its treatment to inform clients and their families
- 2.3 Provide information about *services* available in the community and state in relation to addressing cancer issues
- 2.4 Support clients to take a *patient choice lead* in determining their treatment and cancer care
- 2.5 Facilitate *appropriate referrals* for clients with cancer in line with organisational guidelines and multidisciplinary clinical partnerships
- 2.6 Maintain confidentiality to reflect community and health service guidelines
- 4) Organise follow-up care for clients with cancer using computer information systems
- 3.1 Organise follow-up care for clients with cancer using recall functions on *computer information* systems
- 3.2 Provide current information about cancer *survivorship* and what this may mean in relation to family, community, and returning to work
- 3.3 Explain *palliation* in a timely and culturally sensitive way to clients and their families

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- 3.4 Provide feedback about the effectiveness of cancer information and support provided by local health services
- 3.5 Identify *social and environmental factors* that impact on cancer and address them in partnership with the Aboriginal community and other agencies

5)

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:

- Epidemiology and pathophysiology:
 - Common signs and symptoms that aid early detection of cancer
 - How cancer is detected and treated
 - The basic definition of cancer and how cancer multiplies and spreads (the 'weed' analogy)
 - The outcomes for Aboriginal and Torres Strait Islander people and why outcomes are generally worse than other Australians
 - The statistical incidence of the main cancers affecting Aboriginal and Torres Strait Islander people including the common cancers affecting men and women
- Prevention and risk factors
 - An understanding of how the social determinants of health affect well being in relation to family, community and culture
 - An understanding that Aboriginal and Torres Strait Islander people face a much higher burden of tobacco related cancers
 - Ways to prevent or reduce the risk of cancer including lifestyle associated risk factors such as smoking, alcohol, physical inactivity, overweight, obesity, poor diet,

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overexposure to sunlight, unsafe sex, Hepatitis B, Human Papilloma Virus (HPV) and the role of vaccinations

- Screening and early detection
 - Factors that influence an individual's decision to participate in screening programs relevant to Aboriginal and Torres Strait Islander communities
 - The benefits of early diagnosis
 - The difference between cancer screening and early detection
 - The three national screening programs available for breast screening, cervical screening, and bowel cancer
 - The value of an opportunistic approach to cancer screening when clients present at the clinic or health service

Treatment:

- Relationship of evidence based treatments to bush medicine/complementary therapies
- Methods that are patient choice lead and individualised to cultural values of people under treatment:
 - Methods whereby multi-disciplinary team (MDT) principles and practice (including supportive care needs) are identified before treatment starts
 - The common forms of treatment including surgery, radiotherapy, chemotherapy, non-active and traditional healing
 - The locations of where treatment options and support services are available
 - The importance of patient choices (including the engagement of traditional healers and adherence to religious belief systems)
- Support during the cancer journey
 - The emotional and psychosocial impact of cancer diagnosis and treatment
 - The importance of responding appropriately to 'women's business' and 'men's business' when supporting clients with cancer
 - Ways to access Aboriginal and Torres Strait Islander and other agencies and networks coordinating care for clients and their families who have experienced cancer
 - Ways to access referral agencies and other resources
 - Ways to communicate with clients and families during the emotional and psychosocial impact of cancer diagnosis and treatment
 - Ways to support families suffering grief and loss

• Follow-up care:

- Mechanisms for ensuring that clients attend local health services for regular checkups
- Role of the AHW in maintaining communication between client and the multidisciplinary team
- Support mechanisms to manage physical and psycho-social care upon client's return to home
- Support mechanisms to manage post treatment side effects upon client's return to home

Palliation

- Methods of managing the psycho-social aspects of symptoms and pain
- Methods of pain management and advanced symptoms management for people with terminal cancer

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- Ways to judge the appropriate time and to use culturally sensitive language to talk about the principles and philosophy of palliative care with Aboriginal and Torres Strait Islander people
- Administration and Quality Control
 - The use of client information systems and recall functions to follow-up clients
 - Ways to enable AHWs to provide feedback on cancer programs in the local health services where they are employed, to management and community

Essential skills:

It is critical that the candidate demonstrate the ability to:

- Advocate for clients in their choice of treatments (including non-active and traditional healing practices)
- Apply a range of strategies in problem solving as part of a multi-disciplinary team
- Balance own ideas and values with client values and requirements
- Collect, analyse and organise information
- Develop an understanding that cancer related information should be evidence based and in line with current recommended guidelines
- Develop innovative solutions within a multi-disciplinary team
- Monitor and evaluate own performance
- Negotiate responsibly on behalf of clients with colleagues, the multidisciplinary team, the health service, community members and service providers
- Provide feedback about the effectiveness of cancer information and client support program for evaluation
- Provide information about cancer and cancer care and to check for their understanding in a sensitive and appropriate manner
- Provide information to clients and their families about potential treatment options
- Show independence and initiative in identifying problems
- Take responsibility for own learning
- Use technology systems to monitor care of clients
- Work with diverse group of clients and families in Aboriginal and Torres Strait Islander communities

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 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

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Context of assessment:

This unit includes skills and knowledge specific to Aboriginal

Assessment must therefore be undertaken by a assessors who is qualified as per the relevant NVR standards/AQTF standard who is:

• Aboriginal or Torres Strait Islander him/herself

and/or Torres Strait Islander culture

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

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.

Access must be provided to appropriate learning and/or assessment support when required. Where applicable, physical resources should include equipment modified for people with disabilities.

Reasonable adjustments can be made to ensure equity in assessment for people with disabilities. Adjustments include any change to the assessment process or context that meet individual needs of the person with disability, but do not change the competency outcome.

When assessing people with disabilities, assessors are encouraged to apply good practice assessment methods with sensitivity and flexibility

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Interdependence of units: This unit may be assessed independently although it is maybe

delivered and assessed in conjunction with other units, with

associated workplace application

Access and equity considerations:

All workers in the health industry should be aware of access and equity issues in relation to their own area of work

All workers should develop their ability to work in culturally

and linguistically diverse (CALD) environments

In recognition of particular health issues facing Aboriginal and Torres Strait Islander communities, workers should be aware of cultural, historical and current issues impacting on health of Aboriginal and Torres Strait Islander people

Assessors and trainers must take into account relevant access and equity issues, in particular relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and

communities

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

well-being, 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

Current recommendations

Current recommendations can be from the Cancer Council or

the National Health and Medical Research Council

(NHMRC), including the three national population screening

programs

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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

Support for clients with cancer and their families in Aboriginal and/or Torres Strait Islander communities may include but is not limited to:

Support for clients with cancer All the following areas in line with health service guidelines and their families in and identified protocols:

- Aboriginal and Torres Strait Islander agencies and networks coordinating care for clients who have experienced cancer and their families
- Referral agencies (eg: Cancer Council Helpline)
- Strategies to communicate with clients, their families, and service providers
- The 'people you meet': The roles of people accessible during the cancer journey from screening through to palliation
- The emotional and psychosocial impact of cancer diagnosis and treatment.
- The importance of responding appropriately to 'women's business' and 'men's business' for clients with cancer
- Ways of supporting clients in the 'survivorship' (recovery) stage including information about the

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importance of follow-up checks and re-treatment options

- Ways to address the psychological stress of being a survivor
- Ways to judge the appropriate time and to use appropriate language to talk about the principles and philosophy of palliative care
- Ways to support clients and their families suffering loss and grief

Information includes: Plain English information available from:

- Cancer Australia
- Cancer Council Australia
- Plain English background information to cancer available on Australian Indigenous Health InfoNet

Impacts of cancer include: Impacts on Aboriginal and Torres and Torres Strait Islander

people specifically.

Visual aids include: Flip charts, models, anatomy models, charts, games, DVDs,

'talking posters' and computer programs

Risk factors include: Lifestyle factors, including:

Alcohol

- Hepatitis B infection
- Human Papilloma Virus (HPV) infection
- Over exposure to ultraviolet radiation
- Physical inactivity
- Poor nutrition
- Smoking
- The role of vaccinations
- Unhealthy weight

Screening programs include: The three national population based screening programs are

for breast cancer, bowel cancer and cervical cancer

Early detection includes: The benefits of early detection through:

- Faecal Occult Blood Test
- Mammographic screening
- Papanicolaou Test

Culturally appropriate Resources with a cultural perspective of cancer educational resources include:

Patient choice lead includes: The imperative of respecting the client's choice regarding

treatment

Appropriate referrals include: Agencies that may be of use to an AHW in developing a

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network for clients. For example:

- Aboriginal Liaison Officers in major hospitals
- Cancer Cancer Helpline
- Cancer Nurse Coordinators
- Hospital based social workers
- Integrated services between hospitals and communities of origin, for regional and remote Aboriginal people (eg Kanggawodli in SA)

Computer information systems include:

Client management systems used by Aboriginal Community Controlled (and other) health services, e.g.

- Communicare
- Medical Director
- Project Ferret

Palliation includes:

Understanding of the care approach which improves the quality of life of patients and their families facing terminal illnesses. It includes the principles of prevention and relief of suffering by means of early identification, assessment and treatment of pain and other problems, whether physical, psychosocial or spiritual

Social and environmental factors that impact on cancer may include but are not limited to:

Broad understanding of the social determinants of health and ways to address disadvantage including:

- Access to education and employment
- Access to healthy and affordable food
- Access to medical services and medicines
- Access to reliable transport
- Access to screening programs
- Regular physical activity programs (such as sport and recreational activities)

Unit Sector(s)

Not applicable.

Custom Content Section

Not applicable.

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