



Australian Government

HLTASXH003 Provide sexual health care

Release: 1

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Modification History

Not applicable.

Application

This unit describes the performance outcomes, skills and knowledge required to provide sexual health care to Aboriginal and/or Torres Strait Islander clients as part of a multidisciplinary health care team.

It requires the ability to complete assessments through physical examinations and pathology tests and to develop and implement care plans. Implementation involves making referrals, administering clinical treatments and coordinating ongoing care.

This unit is specific to Aboriginal and/or Torres Strait Islander people working as health practitioners. They work as part of a multidisciplinary primary health care team to provide primary health care services to Aboriginal and/or Torres Strait Islander clients.

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

No regulatory requirement for certification, occupational or business licensing is linked to this unit at the time of publication. For information about practitioner registration and accredited courses of study, contact the Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHPBA).

Pre-requisite Unit

Nil

Competency Field

Sexual Health

Unit Sector

Aboriginal and/or Torres Strait Islander Health

Elements and Performance Criteria

ELEMENTS

Elements describe the essential outcomes

1. Obtain client information and

PERFORMANCE CRITERIA

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

- 1.1. Show respect for Aboriginal and/or Torres Strait Islander community values, beliefs and gender roles in all client

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| determine scope of sexual health assessment. | interactions. |
| | 1.2. Consult relevant health professionals and available documentation about client's sexual health. |
| | 1.3. Engage client in a sexual and social history discussion to determine risk of sexually transmitted infections (STIs) and blood borne viruses. |
| | 1.4. Discuss specific presenting sexual health issues using culturally appropriate and safe communication. |
| | 1.5. Explain organisational requirements for maintaining confidentiality of information and permission for disclosure. |
| | 1.6. Accurately document client history according to organisational policies and procedures. |
| | 1.7. Determine specific examination and test requirements from information gathered. |
| 2. Complete examinations and tests and evaluate results. | 2.1. Explain the reason and procedures for each examination and test to the client, confirm understanding and obtain informed consent. |
| | 2.2. Discuss the potential emotional impacts of testing positive for HIV, other blood borne viruses and STIs prior to testing. |
| | 2.3. Complete examinations and tests based on client's presentation and according to scope of practice and organisational standard treatment protocols. |
| | 2.4. Implement required infection control precautions according to examination and test requirements. |
| | 2.5. Conduct physical examination using correct protocols to assess genital and other symptoms, and record details. |
| | 2.6. Use correct clinical protocols to collect, record and send specimens for pathology testing. |
| | 2.7. Interpret and record results of examinations and tests to identify sexual health conditions. |
| | 2.8. Provide clear and accurate reports and consult with other health care team members to verify results and confirm conditions. |
| | 2.9. Report any confirmed notifiable STIs according to procedural and legal requirements and within scope of own responsibility. |
| 3. Develop plan and provide care to clients with sexual health problems. | 3.1. Develop and document sexual health care plan based on client's needs and preferences and consultation with multidisciplinary team members. |
| | 3.2. Administer treatments according to scope of practice and organisational standard treatment protocols. |
| | 3.3. Explain treatments and side-effects and demonstrate and explain, to client, correct techniques for self-care treatments. |
| | 3.4. Explain to client importance of reassessments and re-testing |

- in the management of conditions.
- 3.5. Educate clients with STIs on risk modification and promote safe sex practices to prevent re-infection and cross infection.
 - 3.6. Advise clients with STIs about contact tracing requirements and negotiate roles and responsibilities.
 - 3.7. Facilitate referrals to health professionals and support services according to client needs and preferences.
 - 3.8. Update client records to include details of referrals, treatments, and information provided.
4. Monitor client sexual health and evaluate effectiveness of treatments.
 - 4.1. Monitor client sexual health through scheduled reassessments and tests incorporated in care plan.
 - 4.2. Gain feedback from client about their level of comfort and adherence to health care practices.
 - 4.3. Determine degree of improvement of client's condition, and compare with expectations of treatments and care plans.
 - 4.4. Review treatments and plan and provide continuity of care, as required, in consultation with client and multidisciplinary team.
 - 4.5. Confirm with clients that they have initiated contact tracing where they agreed to complete.

Foundation Skills

Foundation skills essential to performance in this unit, but not explicit in the performance criteria are listed here, along with a brief context statement.

SKILLS	DESCRIPTION
Reading skills to:	• interpret detailed familiar organisational policies and procedures • interpret sometimes complex and unfamiliar standard treatment protocols and client records involving medical terminology and abbreviations.
Writing skills to:	• produce detailed plans using clear language easily understood by both clients and health care team members • use fundamental sentence structure, health terminology and abbreviations to complete forms and reports that require factual information.
Oral communication skills to:	• use appropriate terms to tailor discussions and questions to clients of different genders, ages across the lifespan and sexual orientation • elicit information from clients in a sensitive, non-judgmental way.

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| Numeracy skills to: | <ul style="list-style-type: none">• interpret sometimes complex medical numerical data and abbreviations in standard treatment protocols and client records• interpret pathology test results involving graphs, percentages and ratios. |
| Planning and organising skills to: | <ul style="list-style-type: none">• determine a structured approach for health assessments and complete physical examinations and tests in a logical, time efficient sequence. |
| Technology skills to: | <ul style="list-style-type: none">• select and use medical equipment suited to purpose of physical examination, clinical tests and client characteristics. |

Unit Mapping Information

This unit supersedes and is not equivalent to HLTAHW056 Provide sexual and reproductive health care.

Links

Companion Volume implementation guides are found in VETNet -

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

Assessment Requirements for HLTASXH003 Provide sexual health care

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:

- complete a sexual health assessment and provide health care for a total of five Aboriginal and/or Torres Strait Islander client to collectively include:
 - females
 - males
 - people across the lifespan
- for each of the five clients:
 - determine requirements for specific examinations and pathology tests according to their individual presentation
 - complete a physical examination to assess genital and other symptoms
 - collect and process swabs, urine and blood samples for pathology testing, and interpret results
 - evaluate all assessment information and report own interpretation of client's current sexual health status to health care team
 - consult with the health care team to verify assessment results and confirm client's conditions
 - develop and document a sexual health care plan based on the client's needs and consultation with multidisciplinary team members
 - administer clinical treatments for sexual health conditions based on the client's needs and within scope of practice, and collectively cover at least five different treatments across the five clients
 - according to their individual needs, provide clear information and explanations about:
 - assessment outcomes
 - self-care treatments
 - available sexual health resources and support services
 - monitor the client's ongoing sexual health care and evaluate, in consultation with the health care team, outcomes against their health care plan
 - document, in client records, accurate details of:
 - sexual health history
 - examinations and tests completed
 - evaluation notes about each client's initial sexual health status and progression against care plan

- treatments, information and referrals provided
- from assessments personally completed or from case study assessment documentation:
 - identify signs of the following sexually transmitted infections (STIs):
 - chlamydia
 - gonorrhoea
 - syphilis
 - trichomoniasis
 - herpes simplex virus (HSV)
 - genital warts or human papillomavirus (HPV)
 - human immunodeficiency virus (HIV)
 - hepatitis A, B or C
 - report one case of a notifiable STI according to procedural and legal requirements.

Knowledge Evidence

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

- organisational policies and procedures for:
 - maintaining client confidentiality
 - client recording keeping
 - contact tracing for sexually transmitted infections
- local state or territory legal requirements, and associated organisational procedures for reporting notifiable STIs and blood borne viruses
- organisational responsibilities and role boundaries of those involved in providing sexual health assessments, care plans and treatments:
 - Aboriginal and/or Torres Strait Islander health practitioners
 - medical practitioners, registered nurses and other members of the multidisciplinary care team
- how multidisciplinary health teams work together to coordinate sexual health treatments and care, and how to facilitate referrals
- the role of standard treatment protocols in sexual health assessments, care plans and treatments:
 - types that are used by primary health care organisations including Standard Treatment Manuals (STM) and how to access
 - purpose, format and inclusions
 - how to use to identify requirements for sexual health assessment examinations and tests, plans and treatments
- key information collected and recorded in medical histories for sexual health assessments
- the concept of a sexual health and blood borne virus risk assessment, and key questions asked to obtain a sexual and social behaviour history
- techniques used to gather information about clients' sexual history with sensitivity and cultural safety:

- using questions that normalise sexual activity and sexual health issues
- using statements that are non-judgemental
- tailoring discussions and questions to clients of different genders, ages across the lifespan and sexual orientation
- tailoring discussions and questions to avoid gender specific cultural taboos
- formats and typical inclusions of written sexual health care plans
- overview anatomy and physiology of the male and female genitourinary systems to include:
 - structure of the systems and associated organs
 - system and organ functions, at a basic level
 - medical terminology and plain language usage for client explanations
- non-STI sexual health conditions for men and women:
 - major signs and symptoms of common conditions:
 - infertility
 - menopause
 - disease and dysfunction of genitourinary system organs including prostate disease and cervical cancer and human papillomavirus as the main cause of cervical cancer
 - breast cancer
 - examinations and tests used to assess
 - overview of treatments used to manage
- types of sexual practices that can risk STI transmission and types of protection that can be used to minimise risk:
 - unprotected sex with multiple partners
 - unprotected anal and vaginal sex including receptive and insertive
 - unprotected male, female and anal oral sex
 - male and female condoms including dental dams and latex gloves
- how blood borne viruses including HIV, hepatitis A, hepatitis B and hepatitis C are generally grouped with STIs but can be transmitted by both sexual contact and other modes
- non-sexual contact modes of transmission and risk factors for blood borne viruses including HIV, hepatitis A, hepatitis B and hepatitis C:
 - faeco-oral via food, water and close personal contact
 - blood to blood transmission:
 - unsafe drug injecting
 - unsafe tattooing practices
 - mother to unborn baby
 - exposure to unscreened blood products used in medical procedures outside Australia
- types of infection control precautions used for:
 - genital and other physical examinations relevant to sexual health assessments
 - collection of specimens including blood, swabs, and urine for pathology testing

- equipment and procedures for examining:
 - men including inspection of the penis, including meatus, retracted foreskin, scrotum and perineum
 - women including inspection of external genitalia, perineum and speculum examination of vagina and cervix
 - throat and oral mucosa
 - skin of the face, trunk, forearms and palms
- equipment and correct methods of collection, storage and transport for tests:
 - urethral swab
 - rectal swab
 - vaginal swab
 - endocervical swab
 - throat swab
 - urine first pass
 - blood
- typical inclusions of pathology request forms, and the importance of accuracy when completing
- for each of the following STIs, signs and symptoms in men and women, common treatments and client self-care strategies:
 - chlamydia
 - gonorrhoea
 - syphilis
 - trichomoniasis
 - herpes simplex virus (HSV)
 - genital warts and human papillomavirus (HPV)
 - human immunodeficiency virus (HIV)
 - hepatitis A, hepatitis B and hepatitis C
- types of STI treatments administered by Aboriginal and/or Torres Strait Islander health practitioners and associated standard treatment protocols, equipment and infection control precautions for administering
- ways in which contact tracing is managed for sexually transmitted infections:
 - diagnosing practitioner's role and responsibilities
 - client's role and responsibilities
- how to use client information systems and recall functions to follow-up clients for ongoing care, monitoring and evaluation
- types of men's and women's sexual health support services available in the community, state or territory, including sexual assault crisis services, and:
 - how to access information about the types of information resources and services they offer
 - how clients can access services and the role of health practitioners in facilitating access.

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.

Assessments must respect the client's cultural beliefs about gender roles, including their choice about the gender of the learner practitioner. The client's choice must be determined prior to any assessment activity for this unit.

Assessment must ensure the use of:

- personal protective equipment for infection control
- medical equipment and consumables suited to the assessment and treatment of sexual health issues for both men and women
- clinical waste and sharps disposal bins
- specimen collection documents
- pathology results
- sexual health standard treatment protocols used by the organisation which can include Standard Treatment Manuals
- client records
- template forms or reports for documenting client histories, assessment details and findings
- template sexual health care plans
- organisational policies and procedures for:
 - maintaining client confidentiality
 - client recording keeping
 - contact tracing
 - reporting notifiable sexually transmitted infections (STIs) and blood borne viruses.

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 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

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