



Australian Government

Department of Education, Employment and Workplace Relations

HLTDEFHC405B Provide inpatient care

Release: 1

HLTDEFHC405B Provide inpatient care

Modification History

Not Applicable

Unit Descriptor

Descriptor

This unit covers the competency required to contribute to the provision of client care in the inpatient care setting as a member of an inpatient care team

It includes conducting a client assessment and formulating an inpatient diagnosis, contributing to the development of an inpatient care plan and implementing the plan in order to assist the client to perform activities of daily living

Application of the Unit

Application

This unit of competency is applicable to Australian Defence Force (ADF) Health Care Providers

Inpatient care is provided under supervision and is limited to the performance of tasks in accordance with clinical guidelines, codes and organisation policies and procedures

Licensing/Regulatory Information

Not Applicable

Pre-Requisites

Not Applicable

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

1. Assess the inpatient

PERFORMANCE CRITERIA

1.1 Admit client to the *inpatient care* facility in accordance with organisation policies and procedures

1.2 Prepare for inpatient assessment in accordance with *clinical guidelines, codes and organisation policies and procedures*

1.3 Obtain and record *client history* in order to gather data to contribute to the inpatient assessment

1.4 Follow *personal hygiene and infection control procedures*

1.5 Conduct *physical examination* in order to gather data to contribute to the inpatient assessment

ELEMENT**PERFORMANCE CRITERIA****2. Formulate an *inpatient diagnosis***

- 2.1 Analyse data gathered during the inpatient assessment in order to recognise abnormal trends for comparison with normal health patterns
- 2.2 Interpret analysed data to establish what information has clinical significance in relation to the client's health status
- 2.3 Organise data of clinical significance into meaningful clusters to focus on correct identification of any health problem(s)
- 2.4 Formulate *inpatient diagnosis* based on the analysis, interpretation and clustering of clinically significant data and determined health problem(s)

3. Formulate the *inpatient care plan*

- 3.1 Establish *inpatient care goals* to determine the objectives for the *inpatient care plan*
- 3.2 Establish expected outcomes of *inpatient care* to measure the progress of the *inpatient care plan*
- 3.3 Establish priorities for *inpatient care* to anticipate and sequence *therapeutic interventions*
- 3.4 Determine *therapeutic interventions* considering *activities of daily living*, care priorities and expected outcomes
- 3.5 Integrate *special needs* of the client into the *inpatient care plan*
- 3.6 Use relevant *clinical pathways* in the *inpatient care plan*
- 3.7 Determine *discharge plan* considering expected outcomes, support systems and ability to meet *activities of daily living*
- 3.8 Obtain authorisation of *inpatient care plan* by clinical supervisor

ELEMENT**PERFORMANCE CRITERIA****4. Implement *inpatient care***

4.1 Coordinate activities of the client, health care providers and *significant others* in order to implement the *inpatient care* plan

4.2 Implement care in accordance with the *inpatient care* plan, *therapeutic interventions*, *clinical guidelines*, *codes and organisation policies and procedures*

4.3 Monitor and record client response to *inpatient care* in accordance with organisation policies and procedures

4.4 Report inpatient response other than expected outcomes to clinical supervisor

5. Evaluate *inpatient care*

5.1 Measure *therapeutic interventions* against the goals and expected outcomes in order to amend the *inpatient care* plan

5.2 Measure inpatient progress against goals and expected outcomes of the *inpatient care* plan

5.3 Amend *inpatient diagnosis* based on inpatient progress and response to *therapeutic interventions*

5.4 Reformulate *inpatient care* plan based on amended *inpatient diagnosis*

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:

- Cultures relevant to the particular service or organisation
- Human anatomy and physiology
- Legislation and common law pertinent to nursing practice
- Inpatient process including:
 - inpatient assessment
 - inpatient diagnosis
 - planning inpatient care
 - implementing inpatient care including therapeutic interventions
 - reviewing inpatient care
- Organisation policies and procedures pertinent to nursing practice
- Pathophysiology and aetiology of disease
- Pathophysiology and disease processes
- Role of other health care providers and support services

Essential skills:

It is critical that the candidate demonstrate the ability to:

- Work as a member of an inpatient care team in order to meet the needs of the client
- Communicate effectively with client and other stakeholders

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:

REQUIRED SKILLS AND KNOWLEDGE

- Admit and discharge a client into and from an inpatient care facility
- Analyse and interpret clinical information in order to formulate a nursing diagnosis
- Complete basic arithmetic calculations
- Conduct an inpatient assessment including:
 - conducting an inpatient physical examination
 - facilitating diagnostic testing
 - obtaining and recording a nursing history
- Contribute to planning inpatient care including:
 - discharge plan
 - expected outcomes
 - inpatient care goals
 - inpatient care priorities
 - therapeutic interventions
- Coordinate activities to meet the needs of the inpatient care plan
- Evaluate inpatient care including:
 - measuring inpatient progress against goals and expected outcomes
 - modifying discharge plan
 - reviewing goals, expected outcomes and therapeutic interventions
 - reviewing nursing diagnosis
- Implement inpatient care in accordance with the inpatient care plan
- Monitor the effectiveness of therapeutic interventions
- Prioritise workload
- Read and interpret health records and other data relevant to the client's health status
- Solving problem skills
- Record clinical information regarding inpatient care in a manner so it may be easily interpreted by others
- Take into account opportunities to address waste minimisation, environmental responsibility and sustainable practice issues
- Use available resources
- Use communication and negotiation skills
- Work with others and display empathy with clients and relatives

Evidence Guide

EVIDENCE GUIDE

The evidence guide provides advice on assessment and must be read in conjunction with the

EVIDENCE GUIDE

Performance Criteria, Required Skills and Knowledge, the Range Statement and the Assessment Guidelines for this Training Package.

Critical aspects for assessment and evidence required to demonstrate this competency unit:

- 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 work
- Where, for reasons of safety, space, or access to equipment and resources, assessment takes place away from the work context, the assessment environment should represent work conditions as closely as possible

Resource implications

- Assessment requires access to:
 - appropriate equipment
 - relevant clinical guidelines and organisation policies and procedures
 - working inpatient facility
 - inpatients

Consistency in performance

- Competency should be demonstrated over time with a range of inpatient care situations that could be expected in the workplace

EVIDENCE GUIDE

- 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 a culturally diverse environment
 - 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
- Related units:*
- This unit may be assessed independently, but holistic assessment with other clinical units is encouraged

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.

RANGE STATEMENT

Inpatient care may include:

- Applying occupational health and safety policies
- Applying personal hygiene and infection control policy and procedures
- Communicating effectively with clients and significant others
- Dealing with conflict and challenging situations in a thoughtful and appropriate manner
- Maintaining client confidentiality
- Meeting duty of care
- Performing therapeutic interventions
- Providing first aid and responding to emergency situations
- Providing specific and appropriate information to clients and significant others
- Participating in client handover activities, ward rounds to insure continuity of care
- Supporting client administration
- Working effectively with others in the workplace in a team situation

Activities of daily living include:

- Breathing
- Communicating
- Controlling body temperature
- Dying
- Eating and drinking
- Eliminating waste
- Expressing sexuality
- Maintaining a safe environment
- Mobilising
- Personal cleansing and dressing
- Sleeping
- Working and playing

RANGE STATEMENT

Clinical guidelines, codes and organisation policies and procedures may include:

- ADF Nursing policy and procedure manuals
- Clinical standards
- Codes of ethics
- Codes of practice
- Industry professional bodies standards
- Industry standards (state and national)
- Organisation health policy directives
- Relevant Australian standards
- Relevant Commonwealth Acts
- Standards for nursing practice
- Standards for client care

Admitting the client may include:

- Advising staff of the client's arrival
- Allocating and preparing bed and room
- Checking client identity with details on admission referral
- Explaining the admission procedure to the client
- Organising client belongings and valuables
- Orientating the client to the facility
- Preparing inpatient documentation
- Welcoming and establishing a rapport with client and significant others

Assessment of the inpatient includes:

- Obtaining subjective and objective relevant clinical data
- Clinical data gathered from:
 - nursing history
 - physical examination
 - diagnostic testing
 - validating gathered data

Personal hygiene and infection control procedures may include:

- Australian and state standards and legislation
- Industry standards
- Organisation procedures
- Standard precautions such as hand washing procedures
- Direct instructions from supervisor

RANGE STATEMENT

Preparing an inpatient assessment may include:

- Assessing the environment for suitability to conduct an inpatient assessment
- Selecting and assembling equipment and supplies
- Checking and calibrating equipment ready for use
- Accessible information, including required forms
- Explained the assessment procedure clearly and simply to the client in order to clarify its purpose and structure
- Gaining informed consent from the client where applicable
- Given the client the opportunity to ask questions and discuss concerns
- Assuring and maintaining confidentiality of client information
- Using personal protective equipment as required

RANGE STATEMENT

Client history may include:

- Biographical information:
 - gender
 - name
 - personal identification number
 - date of birth
 - address
 - occupation
 - marital status
 - next of kin
- Physical information:
 - perception of health status
 - past health problems and therapies
 - present health therapies
 - risk factors
 - activity and coordination
 - review of systems
 - developmental stage
 - effect of health status on developmental stage
 - ability to complete activities of daily living
- Emotional information:
 - behavioural and emotional status
 - support systems
 - self concept
 - body image
 - mood
 - sexuality
 - coping mechanisms
- Social information:
 - financial status
 - recreational activities
 - primary language
 - cultural influences
 - environmental risk factors
 - social relationships
- Intellectual information:
 - intellectual performance
 - problem solving ability
 - educational level

RANGE STATEMENT

- communication patterns
- attention spans
- long-term and recent memory
- Spiritual information:
 - beliefs and meaning
 - religious experiences
 - rituals and practices

Physical examination may include:

- Appropriate manoeuvres
- Auscultation
- Inspection
- Palpation
- Percussion
- Relevant clinical measurements
- Relevant vital signs

An inpatient diagnosis may include:

- Diagnostic label (the problem e.g. constipation)
- Related factors (the cause e.g. inadequate dietary fibre)

Inpatient care goals may be:

- Allocated against each diagnosis
- Expressed in behavioural terms
- Short term or long term
- Observable and measurable
- Outcomes or results which are expected as a consequence of inpatient care
- Realistic and attainable

RANGE STATEMENT

Inpatient care expected outcomes are:

- A measurable change of a client's health status in response to inpatient care
- A projected time span for goal attainment and an opportunity to state additional resources which may be required in the care plan
- Guideposts to determine when specific client centred goals have been met
- Observable client behaviour and measurable criteria for inpatient care goals
- Used as criteria to evaluate the effectiveness of nursing activities
- A desired response of a client's condition in the following dimensions:
 - physical
 - social
 - emotional
 - developmental
 - spiritual

Establishing inpatient care priorities includes:

- Balancing the client care priorities of:
 - physiological needs
 - sociocultural needs
 - psychological needs
- Ranking the diagnosis in order of importance based on client's:
 - health desires
 - physiological needs
 - safety
- Prioritising inpatient care into:
 - high priority needs
 - intermediate priority needs
 - low priority needs

RANGE STATEMENT

Therapeutic interventions includes activities to meet the following:

- Blood circulation needs
- Comfort, rest and sleep needs
- Elimination needs
- Fluid and electrolyte needs
- Hygiene needs
- Movement and exercise needs
- Nutritional needs
- Oxygen needs
- Psychosocial and communication needs
- Safety and protection needs
- Temperature regulation needs
- The needs of the dying

Special needs may include:

- Appropriate staff ratios/training/expertises
- Cultural/spiritual/social needs
- Individual differences/needs/wants/abilities
- Impaired communication skills and techniques
- Isolation or barrier nursing needs
- Mobility and immobility needs
- Sensory alterations
- Specific equipment/apparatus requirements
- Skin integrity and wound care needs
- Surgical/rehabilitative/palliative needs

Clinical pathway may include:

- Guide to best practice management for all clinical staff associated with the care of the client
- Multidisciplinary treatment plan
- Pre-determined type of intervention against a desired outcome
- Sequenced therapeutic intervention over a projected time frame for a specific nursing diagnosis

RANGE STATEMENT

Discharge plan may include:

- Estimating the client's functional potential (activities of daily living) and planning with this in mind
- Involving the client and significant others in planning the discharge
- Organising referral to the appropriate health care agency or family who will assist the client with continuing care
- Planning for care in another setting including access to support services
- Planning to maintain continuity of care including access to specialist equipment and resources
- Pre-discharge client education
- Providing adequate notice to client and significant others
- Providing the client information about their treatment and condition
- Planning with the client ways and methods to overcome potential problems that may arise post discharge

Significant others may include:

- Client's direct or indirect family members
- Client's friends or close associates
- Client's work colleagues

Unit Sector(s)

Not Applicable