



Australian Government

Department of Education, Employment and Workplace Relations

HLTEN504C Implement and evaluate a plan of nursing care

Release: 1

HLTEN504C Implement and evaluate a plan of nursing care

Modification History

HLT07 Version 4	HLT07 Version 5	Comments
HLTEN504B Implement and evaluate a plan of nursing care	HLTEN504C - Implement and evaluate a plan of nursing care	ISC upgrade changes to re legislation and replace with legislation. No change to c

Unit Descriptor

Descriptor

This competency unit describes the knowledge and skills required to implement nursing care plans for individual clients and evaluate the care provided in a range of health environments

Application of the Unit

Application

The knowledge and skills described in this competency unit are to be applied within jurisdictional nursing and midwifery regulatory authority legislative requirements
Enrolled/Division 2 nursing work is to be carried out in consultation/collaboration with registered nurses and under direct or indirect supervisory arrangements in line with jurisdictional regulatory requirements

Licensing/Regulatory Information

Not Applicable

Pre-Requisites

Pre-requisite unit

This unit must be assessed after successful achievement of pre-requisite:

- HLTAP401B Confirm physical health status

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.

Elements and Performance Criteria

ELEMENT

PERFORMANCE CRITERIA

ELEMENT**PERFORMANCE CRITERIA**

1. Establish and maintain *therapeutic relationships* with clients
 - 1.1 Identify *actual and potential nursing care needs* in consultation/collaboration with the client
 - 1.2 Identify client needs for health education and implement education within scope of nursing practice and in consultation/collaboration with registered nurse
 - 1.3 Introduce and explain all nursing interventions, using appropriate language and interpersonal skills to address the diverse needs of clients and health care settings
 - 1.4 Establish and maintain a safe environment through effective communication with clients, family and carers
 - 1.5 Advocate for clients within the Enrolled/Division 2 nurse scope of practice
 - 1.6 Work effectively with clients from a range of cultural, spiritual and religious backgrounds, taking action to address cultural factors that may impact on nursing practice
 - 1.7 Incorporate health teaching into practice within role responsibility
 - 1.8 Demonstrate responsibility and accountability for implementing nursing care within the Enrolled/Division 2 Nurse scope of practice

ELEMENT**PERFORMANCE CRITERIA****2. Assist client in activities of daily living**

- 2.1 Explain to client the importance of hygiene and grooming to achieving health outcomes
- 2.2 Assist clients to address hygiene, dressing and grooming needs
- 2.3 Describe conditions which affect the oral cavity and demonstrate effective oral hygiene to client
- 2.4 Identify client nutritional needs in consultation/collaboration with client and their significant others
- 2.5 Assist clients with their diet and fluid intake and ensure client's nutritional needs are met in consultation/collaboration with registered nurse
- 2.6 Apply strategies to assist clients with diet and fluid intake
- 2.7 Recognise and manage emergency situations associated with diet and fluid intake
- 2.8 Assist clients with key aspects of elimination
- 2.9 Explain and demonstrate to clients key factors associated with fluid balance and bowel charts
- 2.10 Assist with respiratory function especially deep breathing and coughing exercises
- 2.11 Use appropriate measures to promote comfort, rest and sleep

3. Assist with movement of clients

- 3.1 Apply the *principles and techniques of safe manual handling* and principles of 'no-lift' policy when assisting clients with movement
- 3.2 Identify situations of risk or potential risk and implement *risk prevention/minimisation strategies* and refer to registered nurse as appropriate
- 3.3 Actively encourage clients to contribute to their own mobility
- 3.4 Assist clients to safely transfer using appropriate mobility procedures with reference to safety of self, client and others involved
- 3.5 Identify common pressure area sites with reference to the needs of each individual client and implement appropriate strategies to prevent and manage decubitus ulcers
- 3.6 Identify and describe to clients *factors contributing to the formation of decubitus ulcers* and practices to avoid breakdown of pressure areas

ELEMENT**PERFORMANCE CRITERIA**

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| 4. Prepare clients for procedures | 4.1 Provide each client with a full explanation regarding preparation for specific procedures
4.2 Maintain privacy and dignity of client throughout
4.3 Complete documentation as per organisation policy and procedures
4.4 Observe validity of consent and report any concerns to the registered nurse, as appropriate |
| 5. Provide nursing care to meet identified needs | 5.1 Participate in the implementation of a plan of nursing care in line with duty of care and WHS policies and procedures
5.2 Monitor the application of safe workplace procedures as per WHS policies and organisation policies and procedures
5.3 Monitor the application of infection control principles in all work activities
5.4 Prioritise work activities to meet acuity of client needs and maintain a balanced approach to own workload
5.5 Work in a manner that maintains the client's privacy and dignity and demonstrates best practice based on a full range of relevant information including scientific rationale
5.6 Undertake nursing procedures as delegated within the nursing team and scope of practice
5.7 Apply strategies to <i>promote comfort, rest and sleep</i>
5.8 Implement appropriate nursing actions to prevent and manage decubitus ulcers in consultation/ collaboration with a registered nurse
5.9 Implement appropriate immediate action to address urgent needs and document and report as appropriate
5.10 Implement risk prevention strategies appropriate to delivery of nursing care
5.11 Maintain accurate documentation and adhere to reporting requirements to support safe practice as per organisation policies and procedures |

ELEMENT**PERFORMANCE CRITERIA****6. Monitor and evaluate clients during care**

- 6.1 Maintain ongoing observation and assessment during nursing care
- 6.2 Monitor the use of diagnostic tools and document results
- 6.3 Monitor and evaluate client progress and changes implemented within the nursing role
- 6.4 Assess and document changes in client independence or pain tolerance within scope of Enrolled/Division 2 Nurse practice
- 6.5 Record and report changes in condition/baseline data/behaviour to the registered nurse, as appropriate
- 6.6 Document evidence of client outcomes in nursing care plan
- 6.7 Respond to and report situations of risk to registered nurse
- 6.8 Identify and respond appropriately to signs and symptoms of common emergency situations
- 6.9 Demonstrate respect for the client's attitudes and values in regard to resuscitation
- 6.10 Use emergency codes correctly
- 6.11 Initiate CPR according to organisation procedures

7. Prepare the client for *discharge* in consultation/ collaboration with registered nurse

- 7.1 Clarify client needs for community support services on discharge and identify appropriate community support services to the client
- 7.2 Promote client awareness and understanding through health education within the Enrolled/Division 2 nurse scope of practice
- 7.3 Ensure client has all requirements for discharge: next GP's appointment; medications; and any referrals
- 7.4 Complete documentation as per policy and procedure

ELEMENT**8. Evaluate nursing care provided****PERFORMANCE CRITERIA**

8.1 Evaluate own contribution to nursing care in consultation/collaboration with the client and registered nurse

8.2 Evaluate implementation of plan of nursing care in consultation/collaboration with the multidisciplinary team and/or registered nurse

8.3 Evaluate nursing care in light of potential and actual client outcomes

8.4 Evaluate risk prevention and management strategies applied in delivery of nursing care

8.5 Demonstrate an understanding of implications and risks related to alterations in normal physiological functioning and hospitalisation, and may relate to problems of the *body systems*

8.6 Document and report all aspects of evaluation of nursing care provided

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:

- Activities of daily living
- Cross cultural communications
- Deviations from normal anatomy and physiology
- Discharge policy and planning requirements
- Documentation and reporting requirements, including mandatory reporting requirements
- Environment policy and procedure
- Factors that promote and impede comfort, sleep and rest
- Legislation relating to medication administration
- Lifespan approach to anatomy and physiology
- Maintaining a safe environment
- Manual handling and 'no lift' policy
- Microbiology and pathogenesis relating to nosocomial infection
- Work health and safety (WHS)
- Organisation policies and procedures
- Purpose of hygiene and grooming
- Risk identification related to episodic care
 - age
 - anaesthesia and surgery
 - cognitive status
 - deep vein thrombosis/pulmonary embolism
 - immobility
 - length of stay
 - mental illness
 - non-compliance
 - nutritional status
 - pain
 - presence of morbidity
- Risk prevention strategies

- active/passive exercises
- asepsis/universal precautions
- falls assessment
- maintenance of skin integrity
- pressure area care
- Safe work procedures and manual handling

Essential skills:

It is critical that the candidate demonstrate the ability 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:

- Apply problem solving skills, including use of tools and techniques to solve problems, analyse information and make decisions that require discretion and confidentiality
- Apply Professional Standards of Practice:
 - ANMC code of conduct
 - ANMC code of ethics
 - ANMC national Enrolled/Division 2 nurse competency standards
 - state/territory Nurse Regulatory Nurses Act
 - state/territory Nursing and Midwifery Regulatory Authority standards of practice
 - scope of nursing practice decision making framework
- Apply nursing interventions/procedures, including:
 - mobility:
 - manual handling/risk assessment
 - assist with mobility
 - positioning/active and passive exercises
 - feeding a client
 - specimens:
 - collection of specimens
 - urinalysis
 - rest and sleep
 - bed making
 - bathing and showering
 - pressure area care
 - eye toilet
 - nasal toilet
 - perineal toilet
 - oral hygiene
 - dressing and undressing

- assistance with eating and drinking
- maintaining skin integrity
- nebulisers, puffers, peak flow assessment, oxygen administration and oximetry
- basic life support
- nasogastric and gastrostomy feeding
- ostomy care
- established tracheostomy care
- Demonstrate professional conduct, skills and knowledge
- Identify and address risk minimisation needs
- Meet nutritional needs
- Participate as a member of a health care team
- Promote comfort
- Take into account opportunities to address waste minimisation, environmental responsibility and sustainable practice issues
- Undertake admission and discharge processes
- Undertake observation and assessment
- Use advanced oral communication skills (language competence) required to fulfil job roles as specified by the health environment. Advanced oral communication skills include interviewing techniques, asking questions, active listening, asking for clarification from client or other persons, negotiating solutions, acknowledging and responding to a range of views
- Use interpersonal skills required, including working with others, empathising with clients, family and colleagues, using sensitivity when dealing with people and an ability to relate to persons from differing cultural, spiritual, social and religious backgrounds
- Use written communication skills (literacy competence) required to fulfil job roles as specified by health environment. The level of skill may range from reading and understanding client reports and documentation to completion of written reports

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 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
- Observation of performance in a work context is essential for assessment of this unit
- Consistency of performance should be demonstrated over the required range of workplace situations and should occur on more than one occasion and be

assessed by a registered nurse

Context of and specific resources for assessment:

- This unit is most appropriately assessed in the clinical workplace or in a simulated clinical work environment and under the normal range of clinical environment conditions
- Where, for reasons of safety, access to equipment and resources and space, assessment takes place away from the workplace, simulations should be used to represent workplace conditions as closely as possible

Method of assessment may include:

- Observation in the work place
- Written assignments/projects
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice
- Questioning - verbal and writing
- Role play
- Simulation - access to simulation clinical setting/environment (laboratory)

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 is recommended to be assessed in conjunction the following related competency units:
- HLTAP501C Analyse health information
- HLTWHS300A Contribute to WHS processes
- HLTEN509B Apply legal and ethical parameters to nursing practice
- HLTEN502B Apply effective communication skills

in nursing practice

- This unit incorporates the content of:
- HLTEN405B Implement basic nursing care
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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.

Therapeutic relationships include:

- Nurse/client
- Nurse/significant other
- Client/client
- Nurse/nurse
- Nurse/multidisciplinary health care team

Actual and potential nursing care that clients may need assistance with includes:

- Hygiene and toileting
- Elimination/incontinence
- Physical comfort
- Sleep disturbances
- Health education
- Oral/dental care
- Immobility
- Respiration and circulation
- Fluid and nutritional deficits
- Pain
- Wounds - acute and chronic
- Stress
- Underlying medical condition
- Social emotional and financial issues
- Sensory deficits
- Cognitive deficits

RANGE STATEMENT

Risks or potential risks due to hospitalisation/medical treatment may include:

- Adverse reactions
- Shock/haemorrhage
- Deep vein thrombosis/pulmonary embolism
- Nosocomial infection
- Skin tears/pressure ulcer formation
- Constipation
- Loss of muscle tone
- Slips and falls
- Social isolation
- Sleep deprivation
- Challenging behaviour
- Refusal of treatment

Risk prevention strategies:

- Recording of allergies
- Monitoring of client vital sign
- Other monitoring as required eg. fluid balance, blood sugar levels
- Pressure area care
- Anti-emboli stockings/DVT prophylaxis
- Aseptic technique/universal precautions
- Passive and active exercises
- Bed rails
- Assistance with transferring

The broad principles of manual handling may include:

- Body mechanics
- Organisation policy and procedures
- Risk minimisation and 'no-lift' policies
- Back care
- Ergonomics
- State/Territory Work Health and Safety (WHS) Act
- Safe operation of equipment

Manual handling techniques must include:

- Transferring a client from bed to chair and vice versa
- Assisting a client to ambulate
- Moving a client in the bed
- Client falls

RANGE STATEMENT

Factors contributing to mobility may include:

- Client health status
- Active and passive exercises
- Equipment availability
- Culture
- Environment

Transfer/mobility devices/equipment may include:

- Hoist
- Wheelchairs
- Walking frames
- Slide sheets
- Walking aids

Purpose of hygiene and grooming may include:

- Cleanliness
- Assessment of skin
- Self esteem
- Social aspects

Hygiene may include:

- Showing and showering trolley
- Bed bath/sponge
- Bath

Grooming may include:

- Brushing hair
- Facial shavings
- Nail care
- Cleaning and applying glasses
- Cleaning and inserting hearing aid
- Application of make up and jewellery
- Application of prostheses and orthoses

RANGE STATEMENT

- Conditions of the oral cavity may include:*
- Dry mouth, gums and tongue
 - Halitosis
 - Pale or bleeding mucosa and gums including tongue
 - Candida albicans (thrush)
 - Herpes Simplex/cold sores
 - Ulcers of the mucosa, gums and tongue
 - Ill fitting dentures
 - Deviations of tongue alignment
 - Stomatitis/Gingivitis
 - Cleft palate/lip
 - Dental caries

- Oral hygiene may include:*
- Brushing teeth
 - Mouth wash/Gargle
 - Mouth toilet
 - Application of lip emollient

- Assisting a client with diet and fluid intake may include ensuring:*
- Comfort
 - Hygiene and elimination needs met
 - Serviette provided/presentation of meal
 - Meal size and food preference
 - Placement of meal to facilitate appetite
 - Suitable utensils and condiments offered
 - Rate of eating and fluids offered
 - Encourage independence
 - Meal completion, hygiene and comfort needs met
 - Visual and hearing impairment considered
 - Swallowing impairment
 - Cognitive and physical impairment
 - Fasting and restricted fluids

- Strategies to assist may include:*
- Position and environment

RANGE STATEMENT

Key aspects of elimination may include:

- Bedpan/Urinal/Commode
- Enemas/Suppositories
- Perineal care
- Continence aids
- Privacy and dignity
- Positioning and hygiene
- Disposal of waste
- Odour control

Key aspects associated with fluid balance and bowel charts may include:

- Intake and output measurements in millilitres, totalled with positive/negative balance calculated on fluid balance chart
- Diet intake chart
- Accurate and continuous documentation
- Description of stool on bowel chart
- Report variances as per environmental policies

Factors contributing to formation of decubitus ulcers may include:

- Intrinsic
- Extrinsic

Strategies for prevention and management of decubitus ulcers may include:

- Pressure risk assessment scales
- Use of pressure relieving devices
- Regular observation of skin condition\
- Repositioning

Rest may include:

- Power naps/meditation/relaxation techniques

Factors that promote and impede comfort, rest and sleep may include:

- Routine and position
- Environment/equipment
- Emotional state/pain physical state
- Medication
- Nursing interventions
- Visitors/other clients

RANGE STATEMENT

Bed making may include:

- Occupied
- Unoccupied

Admission and discharge may include:

- Admission documentation/application of client identification
- Collection of data
- Care of valuables/Identification of belongings
- Orientation to unit
- Diet and fluids need identified
- Identify and storage of current medication/s
- Commence discharge plan
- Return belongings and medications
- Documentation of time of discharge
- Appointments for follow up
- Ensure transport organised

Risk minimisation strategies or nurses may include:

- Hazard assessment/reporting/risk minimisation
- Implementation of 'No-Lift' policy
- Maintenance of regular contact with members of the care team/nurse supervisor
- Referral of self appropriately for debriefing/counselling
- Attention to own health and rest requirements

Recording and reporting requirements includes:

- Admission and discharge documentation
- Client progress notes
- Fluid balance charts
- Conscious/neurological observations
- Specific charting as required
- Verbal handovers/case meetings
- Critical incident reporting to senior staff
- Incident reports
- Understanding of work roles of other health team members
- Work Health and Safety (WHS) hazard reporting

RANGE STATEMENT

- Safe work practices must include:*
- Personal Protective Equipment
 - Duty of Care
 - Needle stick injury
 - Cleaning, decontamination and storage of equipment
 - Fire and evacuation procedures
 - Standard precautions
 - Critical incident
 - Workplace harassment/Aggression and Violence
 - Manual Handling
- Principles of Infection Control must include:*
- Hand washing
 - Standard precautions
 - Handling of specimens
- Body systems include:*
- Cardiovascular system
 - Gastrointestinal tract
 - Urinary tract
 - Musculoskeletal system
 - Nervous system
 - Endocrine system
 - Integumentary system
 - Reproductive system
- Emergency situations may include:*
- Choking and aspiration
 - Burn/scald
 - Allergic reaction
 - Cardiac arrest
- Family structure may include:*
- Nuclear
 - Extended and blended
 - Single parent
 - Same gender parents
 - Communal
 - Cohabitative
 - Foster/Adoptive

RANGE STATEMENT

Cultural factors that influence nursing care may include:

- Gender of carer/health professionals
- Dress code
- Dietary preferences
- Spiritual practices
- Strict hygiene practices
- Refusal of treatment and drugs
- Taboos
- Concept of personal space
- Personal possessions
- Traditional care of the people eg. elderly/children/disabled

Strategies to incorporate spiritual beliefs into nursing practice may include:

- Accommodation of prayer times
- Fasting
- Chapel
- Quiet rooms
- Pastoral care

Unit Sector(s)

Not Applicable