

# The Australasian Association and Register of Practicing Nutritionists (AARPN)

# **Certified Practicing Nutritionist (CPN) Course Accreditation Standards**

**AARPN Certification Committee on behalf of AARPN The Professional Body.** 



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# **Certified Practicing Nutritionist (CPN) Course Accreditation Policy**

The purpose of this course accreditation policy is to establish a structured process for the accreditation of educational programs that prepare students to practice as Certified Practicing Nutritionists. This policy supports the promotion of accountability and continuous improvement within educational institutions, alignment of graduate outcomes with professional standards, and ensures that graduates are equipped with the knowledge, skills, and professional attributes required to safely and effectively practice as Certified Practicing Nutritionists.

**Scope of application:** This policy applies to all Higher Education Providers (HEPs) seeking accreditation for programs leading to Certified Practicing Nutritionist credentialing of its graduates.

**Governance and oversight** of course accreditation is performed by the AARPN Certification Committee which operates independently of the AARPN Board. Decisions of the AARPN Certification Committee are ratified by the AARPN Board based on adherence to the processes laid out herein.

## **Terms of Reference for the AARPN Certification Committee**

### 1. Purpose of the AARPN Certification Committee

The AARPN Certification Committee (AAC) is oversees and manages the accreditation of educational programs, including Bachelor, Postgraduate Diploma, and Master programs, for eligibility for certification as a Certified Practicing Nutritionist (CPN). The Committee ensures that all accredited programs meet the standards required by the Certified Practicing Nutritionist (CPN) Competency Standards.

## 2. Scope of Responsibility

The AARPN Certification Committee is responsible for:

- Evaluating and accrediting nutrition-related educational programs at the Bachelor, Postgraduate Diploma, and Master levels.
- Ensuring that accredited programs align with the CPN Competency Standards, CPN Professional Standards, and NASRHP accreditation requirements.
- Providing recommendations for accreditation status, including Full Accreditation, Provisional/Conditional Accreditation, and Not Accredited.
- Monitoring compliance with accreditation requirements and conducting periodic reviews of accredited programs.
- Supporting continuous quality improvement of accredited programs to ensure they meet evolving professional standards and community needs.
- Guiding educational institutions who are engaged in a collaborative course development agreement in the development of programs for which they intend to seek accreditation.

## 3. Reporting Structure

The AARPN Certification Committee operates independently of the AARPN Board and the AARPN Association Committee but reports its recommendations and findings to the AARPN Board for ratification. The Accreditation Committee's reporting structure includes:

- **AARPN Certification Committee Chair:** The Chair oversees committee operations, ensures the integrity of the accreditation process, and reports outcomes to the AARPN Board.
- Accreditation Panels or representative: The Committee may establish specialized Accreditation Panels or designate and expert representative for specific program assessments. These panels or representative will conduct detailed assessments and report findings back to the Accreditation Committee.
- Course development Memorandum of Understanding: the Educational Institution can choose to enter a
  course development Memorandum of Understanding whereby a representative of the Certification
  Committee will inform the curriculum development such that it can meet the CPN Professional Standards
  and CPN Competencies in this event there will be a progressive sign off or modification of the
  proposed course curriculum until such time as the course is fully accredited or the MOU is terminated by
  either party.
- AARPN Board: The AARPN Board does not interfere with individual accreditation decisions. The AARPN
  Board ratifies the Accreditation Committee's recommendations unless there is evidence of a departure
  from established processes.

The Accreditation Committee's reports to the Board must be:

- Presented once per quarter, or as required depending on the volume of programs undergoing accreditation.
- Comprehensive and include the rationale for accreditation status decisions and any recommendations for improvements in educational programs.

#### 4. Decision-Making Processes

The AARPN Certification Committee uses a transparent and evidence-based decision-making process, which includes the following steps:

- 1. **Initial Application Review:** The Committee reviews the initial application for completeness and ensures the program meets the minimum eligibility criteria (AQF Level 7 or higher).
- 2. **Accreditation Assessment:** The Committee, with the assistance of Accreditation Panels, if necessary, conducts a detailed assessment of the program. This includes evaluation of the curriculum, faculty qualifications, academic governance, clinical placements, and adherence to CPN Competency Standards.
- 3. **Site Visit (if required):** For new applications or programs under review, the Accreditation Committee may require a site visit to verify facilities, resources, and clinical placement arrangements.
- 4. **Panel Review and Recommendations:** Accreditation Panels (where applicable) submit their findings to the Accreditation Committee. The Accreditation Committee reviews these findings, considers any additional evidence, and determines a recommendation for accreditation status.
- 5. **Accreditation Committee Deliberation and Vote:** All final accreditation decisions require a majority vote by Accreditation Committee members. The Accreditation Committee may choose to:
  - Grant Full Accreditation for five years.
  - Grant Provisional/Conditional Accreditation with specific requirements to be addressed within a two-year period.
  - Deny Accreditation if the program does not meet the standards.
- 6. **Notification to the Institution:** The Accreditation Committee Chair notifies the institution of the accreditation decision, including any conditions or areas for improvement, in writing.

7. **Appeals Process:** If the institution appeals the decision, the Accreditation Committee will follow a defined appeals process, including appointing an independent review panel to re-evaluate the decision within specified timelines.

## 5. Requirements for Accreditation Teams

The Accreditation Teams (or Panels) play a crucial role in supporting the Accreditation Committee's work. Their requirements include:

- Expertise: Teams must consist of professionals with expertise in Clinical Nutrition, Nutrition Science,
   Public Health, or higher education accreditation. At least one member should be a Certified Practicing Nutritionist (CPN).
- Training and Calibration: All members must undergo training on the CPN Competency Standards,
   NASRHP accreditation requirements, and specific criteria for assessing academic programs in Clinical Nutrition.
- Conflict of Interest Disclosure: Team members must disclose any conflicts of interest before engaging in the accreditation process. Members with potential conflicts will be recused from decisions where impartiality could be compromised.
- Reporting Requirements: Teams are responsible for compiling comprehensive assessment reports that include:
  - o An evaluation of the program's alignment with CPN Competency Standards.
  - o Identification of any gaps or areas for improvement.
  - o Recommendations for accreditation status (Full, Provisional, or Not Accredited).
- **Review Timeframes:** Teams must adhere to established timelines for completing reviews, generally within 6 months of receiving an accreditation application.

#### 6. Qualification Level

Programs eligible for accreditation must meet the Australian Qualification Framework (AQF) Level 7 or higher, ensuring graduates have obtained the appropriate level of education for professional practice.

#### 7. Assessment Criteria

The following minimum criteria will be assessed during the course accreditation process:

- Academic Assessment: Evaluation of academic quality and rigor, including course content and assessment practices to ensure alignment with competency standards.
- Governance of University/School: Review of the institution's governance structures to confirm support for program quality and accountability.
- *Curriculum:* Examination of course curriculum to ensure it meets competency standards and includes relevant, evidence-based nutrition knowledge.
- *Clinical Practicum & Clinical Placements:* Assessment of clinical placement opportunities to ensure that students gain hands-on experience in real-world settings under qualified supervision.
- Recognition of Prior Learning: Evaluation of the policies and procedures for recognizing prior learning to ensure they align with competency standards.

## 8. Required Evidence and Documentation

Educational programs seeking accreditation must provide evidence to the AARPN Certification Committee across key areas, demonstrating that they meet the requirements for a rigorous, innovative, and continuously improving program. Accreditation standards include, but are not limited to:

- Evidence of Academic and Clinical Competency: Documentation that the curriculum equips students with knowledge and skills that align with CPN Competency Standards.
- Governance and Quality Assurance Processes: Evidence of internal and external quality assurance processes within the university or institution.
- Curriculum and Clinical Practicum & Placement Quality: Detailed curriculum documents and clinical practicum assessments & clinical placement agreements to verify alignment with CPN standards.
- Prior Learning and Transfer Credit Policies: Documentation of policies and procedures for assessing and awarding credit for prior learning to ensure compliance with competency standards.

#### 9. Accreditation Categories

The Committee will assign one of the following accreditation statuses based on the program's compliance with CPN standards:

- 1. Qualifying (Pre-Accreditation): Courses applying for accreditation for the first time that may or may not be subject to a collaborative development agreement with the AARPN Certification Committee. During this period, graduate cohorts are ineligible for CPN certification until full accreditation is obtained. Provisional accreditation must be achieved before the first cohort graduates for these students to be eligible for CPN certification. A maximum review period of two years applies, and graduates during this period remain eligible for certification.
- 2. Provisional/Conditional Accreditation: Granted to courses that achieve accreditation for the first time or to those that previously held Full Accreditation but have not met certain requirements during reassessment. For programs needing minor adjustments to meet full standards. Must be reviewed within two years. Consecutive provisional statuses are generally not allowed, except when an extension is granted by the AARPN Certification Committee.
- 3. **Full Accreditation:** Assigned for a maximum period of five years, with annual reporting requirements and mandatory prior notification of significant curriculum or program changes. Courses with Full Accreditation meet all standards and allow graduates to be eligible for CPN certification.
- 4. Not Accredited: Courses that fail to meet the requirements of the accreditation standards and are therefore not approved for certification purposes. For programs that fail to meet CPN Competency Standards and cannot achieve accreditation without significant changes.

#### 10. Notification of Accreditation Status

All accredited programs and their respective accreditation categories are listed on the AARPN website, and the Educational Institution will be notified of the accreditation decision.

#### 11. Development and Review of Accreditation Standards

Accreditation standards will be regularly reviewed to ensure alignment with best practices, evidence-based guidelines, and environmental considerations. Accreditation processes will emphasize outcome-focused assessment, evaluating whether program graduates meet the specific Competency Standards required of Certified Practicing Nutritionists.

## 12. Transition and Updates to Competency Standards

In the event of changes to CPN Competency Standards, a reasonable transition period will be granted to educational providers undergoing accreditation. Providers working towards accreditation will be assessed based on the previous Competency Standards until the transition period concludes.

#### 13. Appeals Process

The AARPN Certification Committee provides a transparent appeals process to institutions that wish to contest an accreditation decision. Appeals must be submitted within 30 days of the decision, and the Accreditation Committee will appoint an independent review panel to reassess the application based on documented evidence.

#### **AARPN Certification Committee Appeals Process**

#### 13.1. Purpose

The purpose of this Appeals Process is to provide educational institutions with a transparent, fair, and structured mechanism to appeal accreditation decisions made by the AARPN Certification Committee.

#### 13.2. Grounds for Appeal

An appeal may be lodged by an educational institution on one or more of the following grounds:

- a. Procedural Error: A material procedural error occurred during the accreditation review process, affecting the final decision.
- b. New Evidence: Significant new evidence that was not available at the time of the review and could reasonably alter the decision.
- c. Misinterpretation of Standards: The Accreditation Committee misapplied or misinterpreted the accreditation standards, leading to an incorrect decision.

#### 13.3. Appeal Submission Process

#### 13.1.1 Notice of Intent to Appeal

- The institution must submit a *Notice of Intent to Appeal* in writing within 30 days of receiving the accreditation decision.
- The Notice must specify the grounds for appeal and provide an overview of supporting evidence.

#### 3.1.2 Formal Appeal Submission

- o A formal written appeal must be submitted within 60 days of the accreditation decision.
- The appeal must include:
  - A detailed statement explaining the grounds for appeal.
  - Relevant supporting documents and evidence.
  - A request for an appeal hearing (if applicable).

#### 13.4. Appeals Review Panel

#### 13.4.1 Composition

- The Appeals Review Panel shall consist of three independent members not involved in the original accreditation decision.
- Members will be selected based on expertise in accreditation, educational standards, and regulatory compliance.

#### 13.4.2 Review Process

- The Panel will conduct a preliminary review of the submitted appeal within 30 days of receipt.
- o If the appeal is deemed valid, a full review will be conducted, including:
  - Examination of the submitted evidence.
  - Consultation with relevant stakeholders.
  - A hearing (if requested or deemed necessary).
  - The Panel may request additional information from the institution.

#### 13.5. Appeal Hearing

If a hearing is requested or deemed necessary, the institution will have the opportunity to present its case before the Appeals Review Panel.

- The hearing may be conducted in person or virtually.
- The institution may be represented by relevant personnel and/or legal counsel.
- The Appeals Review Panel may question representatives and review additional documentation.

#### 13.6. Decision and Notification

A final decision will be made within 60 days of completing the review.

The Appeals Review Panel may:

- a. Uphold the original decision (denying the appeal).
- b. Modify the decision (granting conditional accreditation or requiring further compliance steps).
- c. Overturn the decision (granting full accreditation).
- d. The institution will receive a formal written notification of the final decision, including reasons for the determination.

#### 13.7. Finality of Decision

The decision of the Appeals Review Panel is final and binding. Institutions may not submit additional appeals on the same matter.

#### 13.8. Confidentiality and Transparency

All appeal proceedings shall remain confidential.

A summary of appeal outcomes (without identifying information) may be published annually to promote transparency.

### 13.9. Record Keeping

All documentation related to the appeal will be retained for five years from the date of final decision. Institutions may request access to appeal records for reference purposes.

#### 14. Review of Terms of Reference

These Terms of Reference will be reviewed every three years or as necessary to remain aligned with changes in CPN Competency Standards, NASRHP requirements, or the broader higher education landscape. Adjustments to the Terms of Reference will be made by the AARPN Certification Committee and ratified by the AARPN Board.

## Minimum requirements for Australian bachelor's degree programs

#### in Clinical Nutrition and Nutritional Medicine are as follows:

1. The degree qualification must be at Australian Qualifications Framework (AQF) Level 7 which is a bachelor's degree level. Level 7 is the first professional level within the Australian Qualifications Framework. At this level Graduates have broad and coherent knowledge and skills for professional work and/or further learning with a broad and coherent theoretical and technical knowledge with depth in nutrition science and its professional clinical application in private practice, education, research and public health. These Graduates have well-developed cognitive, technical and communication skills to select and apply methods and technologies to analyse and evaluate information to complete a range of activities relevant to nutrition professionals; analyse, generate and transmit solutions to unpredictable and sometimes complex problems in the nutrition field; and transmit nutrition knowledge, skills and ideas to others. They apply knowledge and skills to demonstrate autonomy, well-developed judgement and responsibility in contexts that require self-directed work and learning within broad parameters, to provide specialist advice and functions in the nutrition and nutrition related fields, in the areas of private practice, education, research and public health.

AQF Level 7 is consistent with the degree level requirements of the Dieticians Association of Australia, and the Nutrition Society of Australia, and puts the training of Certified Practicing Nutritionists at the same minimum degree level as Accredited Practicing Dieticians. A degree which has been obtained through a gradated program which allows an early exit point for a certificate that is then used to articulate into a diploma exit point, that is then used to articulate into the second year of the degree is acceptable. Note that only completion of the full degree program will be accepted by AARPN for membership purposes.

- 2. The curriculum content and delivery model of the program must in the opinion of AARPN enable its graduates to meet on graduation, all the Certified Practicing Nutritionist competencies, elements and performance criteria/indicators as set out in the Certified Practicing Nutritionist Professional Standards and the Certified Practicing Nutritionist Competency document (which describes the specific knowledge that each unit must develop in the student). These documents are available on the AARPN website.
- 3. The higher education provider (College, Institute or University) must be compliant with all relevant TEQSA requirements and regulations, and additionally
  - consistent with university teaching standards: the minimum qualification for any person a. engaged in the coordination, facilitation, teaching and/or assessment (including marking) of the bachelor's degree program or subjects contained in the bachelor's degree program, is AQF level 9 which is a master's degree, and
  - the qualification held must be directly relevant to the subject matter being taught, and b.
  - exception can be made to the above minimum requirements for first year subjects c. where the tutor (who is not the main provider of instruction) can be an Honours level student in the relevant discipline for the subject matter.
- 4. To ensure that Certified Practicing Nutritionists are trained to act within their scope of practice, persons engaged in the coordination, facilitation, teaching, supervision and/or assessment (including marking) of Clinical Practicum must:

a. hold full membership of one or more Clinical Nutrition/Nutritional Medicine recognising Schedule 1 exemption facilitating association as a clinically trained Nutritionist,

<u>and</u>

b. hold a minimum of a master's degree in 'Nutrition' or its equivalent and have exclusive private practice experience as a clinically trained Nutritionist of at least 2 years (excluding the practice of Naturopathy or Dietetics),

<u>or</u>

- c. have relevant exclusive private practice experience as a clinically trained Nutritionist of at least 5 years (excluding the practice of Naturopathy or Dietetics) in conjunction with holding a Nutrition specific qualification - that not being a Dietetic qualification or Naturopathy or other non-specific composite qualification.
  - No person who does not hold full membership as a clinically trained Nutritionist of a Schedule 1 exemption facilitating association shall be engaged in the coordination, facilitation, teaching, supervision and/or assessment (including marking) of Clinical Practicum.
- 5. The minimum face-to-face on-campus theory requirement for AARPN membership is 25 percent (in addition to the compulsory face-to-face on-campus requirement for clinical practicum training). However, one Nutrition rebating private health insurance fund requires that 50 percent of the degree <u>program</u> excluding the compulsory face-to-face requirement for clinical practicum training, must be completed on campus via face-to-face delivery. AARPN itself has no objection to online and mixed mode educational delivery for theory units (subjects), but educational providers need to be aware that degree programs containing more than 50 percent online content (and this includes fully online subjects and online content derived from mixed mode delivery), <u>will</u> render their graduate's ineligible to provide private health fund rebates with this private health insurance fund.
- 6. Clinical practicum training must be in Nutrition Practice/Clinical Nutrition in accordance with AARPN definitions and consistent with the professional competencies and knowledge and skills, required of Certified Practicing Nutritionists by AARPN, and set out in the Certified Practicing Nutritionist Professional Standards and the Certified Practicing Nutritionist Competencies documents. AARPN requirements are 300 hours of clinical practicum training but programs with slightly less hours but a comparable number of minimum face-to-face consultations, will also be eligible for consideration by AARPN. To comply with original Schedule 1 Practitioner criteria, the minimum number of clinical practicum hours are 233 hours of clinical practicum training, and therefore programs with less clinical practicum hours than this, will not be considered by AARPN for membership purposes. Of the 300 minimum hours of clinical practicum training, at least 200 hours must be face-to-face supervised clinical training, and this excludes clinical theory and clinical examination skills training. Due to private health fund requirements, Clinical Practicum training must be delivered on-campus and face-to-face. Clinical Practicum training may be delivered on a semester basis or via intensive blocks.

## **AARPN Certified Practicing Nutritionist Competencies**

## (assessed and held at degree level), (current as at 30 June 2024)

## **Competencies**

- 1. Contribute to effective workplace relationships
- 2. Reflect on and improve own professional practice
- 3. Confirm physical health status
- 4. Analyse health information
- 5. Communicate effectively with clients/Establish and manage client relationships
- 6. Make referrals to other health care professionals when appropriate/Engage with health professionals and the health system
- 7. Develop professional expertise
- 8. Manage a practice
- 9. Apply first aid/Provide first aid
- 10. Work with diverse people/Work effectively with culturally diverse clients and co-workers
- 11. Promote Aboriginal and/or Torres Strait Islander cultural safety/Work effectively with Aboriginal and/or Torres Strait Islander people
- 12. Maintain an effective health work environment
- 13. Comply with infection control policies and procedures/Comply with infection prevention and control policies and procedures
- 14. Manage the control of infection/Manage the prevention and control of infection
- 15. Apply literature research findings to clinical practice
- 16. Apply a Clinical Nutrition/Nutritional Medicine diagnostic framework
- 17. Manage Work within a Clinical Nutritional framework
- 18. Perform Clinical Nutrition/Nutritional Medicine health assessment
- 19. Plan the <u>nutritional</u> treatment strategy
- 20. Provide Clinical Nutrition/Nutritional Medicine treatment
- 21. Provide specialised Clinical Nutrition/Nutritional Medicine treatment
- 22. Prepare and dispense nutritional/dietary supplements
- 23. Provide dietary advice
- 24. Contribute to WHS processes/Participate in workplace health and safety
- 25. Engage in Public Health Nutrition

The skills in these units must be applied in accordance with Commonwealth and State/Territory legislation, Australian/New Zealand standards and industry codes of practice.

Performance is assessed and competency is to be demonstrated at a **minimum standard of undergraduate degree or Master degree (if available)**. Successful completion of exclusive clinical practicum training in C<u>linical Nutrition</u> (Nutrition Practice, see AARPN definitions) or its AARPN deemed equivalent, is required to meet competencies 16 through to 22. See AARPN definition of Certified Practicing Nutritionist for further clarification of requirements.

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

# 1. Contribute to effective workplace relationships

# **Elements and Performance Criteria**

ELEMENT		PERFORMANCE CRITERIA			
	Elements describe the essential outcomes.	Performance criteria describe the performance needed to demonstrate achievement of the element.			
	C1E1 Seek, receive and communicate information	1.1 Collect information associated with the achievement of work responsibilities from appropriate sources			
	and ideas	1.2 Communicate ideas and information to diverse audiences in an appropriate and sensitive manner			
		1.3 Seek contributions from internal and external sources to develop and refine new ideas and approaches in accordance with organisational processes			
		1.4 Facilitate consultation processes to allow employees to contribute to issues related to their work, and promptly communicate outcomes of consultation to the work team			
		1.5 Promptly deal with and resolve issues raised, or refer them to relevant personnel			
	C1E2 Encourage trust and confidence	2.1 Treat people with integrity, respect and empathy			
		2.2 Encourage effective relationships within the framework of the organisation's social, ethical and business standards			
		2.3 Gain and maintain the trust and confidence of colleagues, customers and suppliers through competent performance			
		2.4 Adjust interpersonal styles and methods in relation to the organisation's social and cultural environment			
	C1E3 Identify and use networks and relationships	3.1 Identify and utilise workplace networks to help build relationships			
		3.2 Identify and describe the value and benefits of networks and other work relationships for the team and the organisation			
	C1E4 Contribute to positive outcomes	4.1 Identify difficulties and take action to rectify the situation within own level of responsibility according to organisational and legal requirements			
		4.2 Support colleagues in resolving work difficulties			
		4.3 Regularly review workplace outcomes and implement improvements in consultation with relevant personnel			
		4.4 Identify and resolve poor work performance within own level of responsibility and according to organisational policies			
		4.5 Deal constructively with conflict, within the organisation's established			

processes

## **Performance Evidence**

Evidence of the ability to:

- access and analyse information to achieve planned outcomes
- apply techniques for resolving problems and conflicts and dealing with poor performance within organisational and legislative requirements
- review and improve workplace outcomes in consultation with relevant personnel
- adjust interpersonal style and communications to respond to cultural and social diversity
- apply relationship management and communication skills with a range of people that:
  - demonstrate integrity, respect, empathy and cultural sensitivity and promote trust
  - forge effective relationships with internal and/or external people and help to maintain these networks
  - encourage participation and foster contribution of and respect for ideas and feedback
  - provide support to colleagues to resolve difficulties.
- communicate ideas and information to diverse audiences
- develop networks and build team relationships.

Note: If a specific volume or frequency is not stated, then evidence must be provided at least once.

## **Knowledge Evidence**

To complete the unit requirements safely and effectively, the individual must:

- give examples of how work relationships and the cultural and social environment can support or hinder achieving planned outcomes
- explain techniques for developing positive work relationships and building trust and confidence in a team
- identify relevant legislation from all levels of government that affects business operation
- describe a range of methods and techniques for communicating information and ideas to a range of stakeholders
- outline problems solving methods
- explain methods to resolve workplace conflict
- explain methods to manage poor work performance
- explain how to monitor, analyse, and introduce ways to improve work relationships.

## **Assessment Conditions**

Assessment must be conducted in a safe environment where evidence gathered demonstrates consistent performance of typical activities experienced in the management field of work and include access to:

- · relevant legislation and regulations
- relevant workplace documentation and resources
- case studies and, where possible, real situations
- interaction with others.

# 2. Reflect on and improve own professional practice

## **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA
Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element
C2E1. Reflect on own practice	1.1 Undertake self-evaluation in conjunction with supervisors and/or peers
	1.2 Reflect on and recognise the effect of values, beliefs and behaviour in practice
	1.3 Share two-way, open and evaluative feedback with co-workers or peers
	1.4 Actively seek and reflect on feedback from clients, organisations or other relevant sources
	2.1 Determine improvements needed based on own evaluation and feedback from others
	2.2 Identify potential support networks both internal and external to the organisation
	2.3 Seek specialist advice or further training where need is identified
	2.4 Recognise requirements for self-care and identify requirements for additional support
	2.5 Devise, document and implement a self-development plan that sets realistic goals and targets
C2E3. Facilitate ongoing professional development	3.1 Access and review information on current and emerging industry developments and use these to improve practice
	3.2 Assess and confirm own practice against ethical and legal requirements and opportunities
	3.3 Identify and engage with opportunities to extend and expand own expertise
	3.4 Regularly participate in review processes as a commitment to upgrading

skills and knowledge

## **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:

- undertaken a structured process to reflect on and improve own practice and created 1 personal development plan that includes:
  - goals
  - timeframes
  - · ways of measuring progress

## **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 work role. This includes knowledge of:

- legal and ethical considerations for reviewing and improving own practice, including:
  - codes of practice
  - duty of care
  - · rights and responsibilities of workers and employers
  - work role boundaries responsibilities and limitations
- models and processes of professional reflection
- professional development opportunities, including:
  - industry networking
  - professional associations
  - training requirements and options
  - informal and formal ways of learning and developing
- · principles and techniques for:
  - creating a personal development plan
  - personal goal setting
  - setting realistic timeframes
  - measuring progress and performance
- types of work methods and practices which can improve performance
- learning styles and how they relate to different individuals

## **Assessment Conditions**

Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. Where simulation is used, it must reflect real working conditions by modelling industry operating conditions and contingencies, as well as, using suitable facilities, equipment and resources.

# 3. Confirm physical health status

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA	
Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element	
C3E1. Obtain information about physical health status	1.1 Obtain accurate information about physical health status through observation, questioning or review of documentation	
	1.2 Interpret information based on understanding of the structure and functioning of body systems	
	1.3 Use information to identify any actual or potential problems regarding health status	
	1.4 Consider factors that may have impacted on an identified physical condition	
C3E2. Check physical health status	2.1 Make checks of client health status prior to delivery of health intervention using knowledge of body systems	
	2.2 Clarify significance of physical health status in relation to an intervention in line with job role and organisation requirements	
	2.3 Clarify implications and significance of physical health status with appropriate people in the case of uncertainty or limits on own capability or authority	
C3E3. Identify variations from normal physical health status	3.1 Identify variations from normal health status using standard methods and protocols	
	3.2 Identify potential factors responsible for significant variations from normal health status	
	3.3 Identify potential risk factors associated with variations from normal health status	
	3.4 Recognise and refer potentially serious issues in line with organisation requirements	

## **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:

 obtained, correctly interpreted and used anatomical and physiological client information to check the physical health status of at least 3 different people presenting with different conditions

## **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- role responsibilities and limitations for different members of the care team in relation to checking client health status
- concepts underpinning human anatomy and physiology, including:
  - · levels of structural organisation of body systems
  - · human life processes
  - homeostasis and the relationship between homeostatic imbalance and disease
- structure and function of human body systems and their interactions:
  - · cells, tissues and organs
  - cardiovascular system
  - respiratory system
  - muscular-skeletal system
  - endocrine system
  - digestive system
  - urinary system
  - · reproductive system
  - · integumentary system
  - lymphatic system
  - nervous system, including sensory systems eye and ear
  - the special senses smell, taste, vision, equilibrium and hearing
  - immune system
- anatomical and medical terminology:
  - when referring to the human body
  - when taking measurements in different body systems
- common disorders, problems and complaints and their signs and symptoms, associated with each body system and its components relevant to the area of work
- basic pharmacology in relation to cautions and contraindications for relevant health procedures
- causes of disease physical, mental and emotional, and key features of each cause:
  - pathogens
  - · inherited genetic conditions
  - trauma, toxins and other environmental hazards

- nutritional factors
- impacts caused by health interventions (iatrogenic)
- · degenerative changes in vital organ systems
- · the loss of normal control mechanisms such as the uncontrolled growth of cancer cells
- major types of cellular adaptation
- processes of metabolism, nutrition, body temperature regulation, biological maturation, inheritance and ageing
- Oral health disease of the mouth and teeth including edentulous (no-natural teeth) and dentate (having natural teeth)
- variations from normal functioning and appropriate responses in terms of:
  - referral to an appropriate medical, dental, nursing or allied health professional
  - · provision of appropriate health/dental care services
- Genetics in the context of precision medicine

## **Assessment Conditions**

Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit:

- use of suitable facilities, equipment and resources, including client health information
- modelling of industry operating conditions, including:
  - · analysis of health information of real people
  - integration of problem solving activities

## 4. Analyse and respond to client health information

## **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA	
Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element	
C4E1. Assess client health status	1.1 Analyse client health information in relation to planning services and line with organisation requirements	
	1.2 Recognise normal readings on the findings of available tests, observations and physical assessments that assist in determining health status	
	1.3 Identify pathophysiologies, or changing pathologies, through observation, physical assessment and analysis of other available information	
	1.4 Identify the likely impact of specific interventions	
C4E2. Plan action to address identified health status	2.1 Apply detailed understanding of anatomy, physiology and pathophysiology of disease to a problem solving approach to service planning.	
	2.2 Consider and note implications of any contra-indications in relation to health assessment findings.	
	2.3 Document action plan in accordance with organisation policies and procedures.	

## **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:

- analysed the health information and planned services for least 6 different clients presenting with different conditions
- assessed client health status based on:
  - observations
  - physical assessments
  - interpretation of client tests

## **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- role responsibilities and limitations for different members of the care team in relation to analysing health information and providing services
- concepts underpinning human anatomy and physiology, including:
  - levels of structural organisation of body systems
  - human life processes
  - homeostasis and the relationship between homeostatic imbalance and disease
- variations and abnormal findings of the structure and function of human body systems and their interactions:
  - cells, tissues and organs
  - cardiovascular system
  - respiratory system
  - · muscular-skeletal system
  - endocrine system
  - · digestive system
  - urinary system
  - · reproductive system
  - integumentary system
  - · lymphatic system
  - nervous system, including sensory systems eye and ear
  - the special senses smell, taste, vision, equilibrium and hearing
  - immune system
- anatomical and medical terminology:
  - · when referring to the human body
  - · when taking measurements in different body systems
- common disorders, problems and complaints associated with each body system and its components relevant to the services being provided
- analysis of abnormal findings from diagnostic procedures and physical assessment
- pathophysiology of diseases associated with each body system and the impact of disease on each body system and their related structures, especially in relation to potential impact of specific health procedures provided
- recognition of the signs and symptoms of common clinical conditions and the (provisional) diagnosis
  of same
- pharmacological processes and drug actions, indications and contraindications
- effects of biological maturation and ageing processes on body systems and their components and in relation to specific health procedures provided
- the impact of:
  - common environmental emergencies (diving, altitude, temperature)
  - · overdose and poisoning
  - surgical insult

- trauma (penetrating, blunt)
- basic chemistry (molecules and compounds; chemical reaction, energy; acids and bases) and as related to metabolism, respiration, pH (respiratory and renal acidosis/alkalosis)
- structure and function of cells, including:
  - basic understanding of cellular respiration/carbohydrate metabolism
  - cell/tissue requirements for survival
  - · major types of cellular adaptation
- transport systems:
  - active (primary) and passive (diffusion simple, facilitated)
  - forces (hydrostatic and osmotic)
  - osmosis
- Genetic analysis

## **Assessment Conditions**

Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit:

- use of suitable facilities, equipment and resources, including client health information
- modelling of industry operating conditions, including:
  - analysis of health information of real people
  - integration of problem solving activities

# 5. Establish and manage client relationships

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA	
Elements define the essential outcomes	Performance criteria specify the performance needed to demonstrate achievement of the element	
C5E1. Establish professional	1.1 Establish relationship within appropriate professional boundaries	
relationship with the client	1.2 Build trust and respect through use of effective communication techniques	
	1.3 Identify and respond to client special needs	
	1.4 Communicate in ways that take account of cultural considerations	
	1.5 Exercise discretion and confidentiality	
C5E2. Manage client interactions	2.1 Use a collaborative and person centred approach when working with clients	
	2.2 Use motivational interviewing as a basis for client interactions	
	2.3 Seek client information respectfully and sensitively, using purposeful, systematic and diplomatic questions	
	2.4 Support the client to identify and articulate key information that supports the provision of service	
	2.5 Encourage clients to voice queries or concerns and address these appropriately	
	2.6 Respond to difficult or challenging behaviour using established techniques	
	2.7 Maintain professional integrity and boundaries at all times	
	2.8 Work within scope of role and identify and respond to situations where interactions suggest the need for client referral	
C5E3. Provide effective responses to client enquiries	3.1 Select the most appropriate mode of communication for the information being provided	
	3.2 Use language and terminology that the client will understand	
	3.3Present information clearly and with sufficient detail to meet client needs	
	3.4 Confirm with client that the information has been understood and	

address any unresolved issues

## **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:

- established and managed client relationships and boundaries appropriately during the provision of services to 3 clients
- developed responses to 3 different situations involving difficult or challenging behaviour

## **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the work role. This includes knowledge of:

- legal and ethical considerations for establishing and managing client relationships and how these are applied:
  - privacy, confidentiality and disclosure
  - human rights
  - · work role boundaries including:
    - responsibilities and limitations
    - appropriate sexual, physical and emotional boundaries
    - use of enquiry only as appropriate and necessary
    - awareness of potential client transference
    - staying within area of expertise
- modes and techniques for effective communication, including:
  - active listening, questioning, clarifying, advising
  - empathy, trust and respect
  - appropriate verbal and non-verbal communication
  - · use of communication aids
  - tone and presentation
- role of motivational interviewing during client interactions to facilitate:
  - client support
  - case taking
  - negotiation with client
  - education of client
  - information giving
- techniques for motivational interviewing:
  - attending skills, use of body language
  - paraphrasing
  - · reflecting feelings
  - open and closed questioning or probing
  - summarising
  - reframing

- · exploring options
- normalising statements
- barriers and influences on communication and ways to respond:
  - language
  - culture
  - religion
  - emotional state
  - disability
  - health
  - age
  - presence of children and/or spouse
- techniques for dealing with difficult communication situations:
  - managing emotions
  - defusing anger
  - clarifying the issues
  - maintaining composure and professional attitude
  - providing support
  - seeking assistance
- types of information that may be provided to clients as relevant:
  - · appointment details, directions
  - costs and payment options
  - · client options, service information, referral details
  - general health and self-care information
  - service provider credentials or information

## **Assessment Conditions**

Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. Where simulation is used, it must reflect real working conditions by modelling industry operating conditions and contingencies, as well as, using suitable facilities, equipment and resources.

# 6. Engage with health professionals and the health system

## **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA	
Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element	
C6E1. Use health care systems	1.1 Identify health care systems and services with links to own practice	
and services	1.2 Research and maintain information about other health services to support own practice	
	1.3 Offer current and accurate information about other health care services	
	1.4 Provide clear and accurate information to clients about their financial and eligibility issues	
	1.5 Identify and use opportunities to maintain, extend and update knowledge	
C6E2. Interact with health professionals	2.1 Establish effective relationships with workers from different sectors and levels of the industry according to work role	
	2.2 Use accepted industry language and terminology when sharing information	
	2.3 Work collaboratively to both seek and share information	
C6E3. Make referrals to health professionals	3.1 Determine need for referral to other professional health services based on client needs and assessment indications	
	3.2 Clearly communicate the need for referral to the client and explain rationale	
	3.3 Ensure referral occurs with consent of client and within confidentiality standards	
	3.4 Write referral report, including clear and accurate information about results of own testing or assessment	
	3.5 Structure information logically, using language that will be understood by the report recipient	
	3.6 Make recommendations within scope of own practice and expertise	

## **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:

- researched and selected relevant information about the Australian health care system for use in own practice
- developed at least 3 referral reports for different clients using appropriate language and terminology

## **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- structure, function and interrelationships of the Australian health care system
- health care professions and allied health services, how they interrelate and their relationship to specific area of practice
- · scope of own practice and limitations of own role within the health system
- health system funding and financial structures, and implications for practice and clients
  - public and private systems
  - · health fund eligibility
- current and emerging health industry issues
- other services to which the practitioner may refer clients
- referral reports:
  - what information they should include
  - how they should be structured
  - limitations of information and/or recommendations

## **Assessment Conditions**

Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. The following conditions must be met for this unit:

- use of suitable facilities, equipment and resources
- modelling of industry operating conditions, including presence of situations that allow interactions with individuals and organisations

# 7. Continuously develop professional expertise

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA		
C7E1. Seek out and apply scientific information	1.1 Utilise a variety of methods to collect and evaluate data in the clinical setting		
	1.2 Access and evaluate scientific literature on the theory and practice of Clinical Nutrition/Nutritional Medicine		
	1.3 Give case presentations and/or literature reviews in a public/peer setting		
C7E2. Implement reflective learning practices	2.1 Evaluate and compare new treatments, protocols and other new ideas		
	2.2 Transfer skills and competencies to new contexts		
	2.3 Use knowledge of the historical, theoretical and philosophical aspects of the field of practice to improve existing practices		
	2.4 Identify strengths and weaknesses and implement measures to improve these		
C7E3. Contribute to the development of professional practices	3.1 Establish links with other healthcare professionals using a knowledge of local, community and hospital based services		
	3.2 Maintain membership of relevant professional association/s		
	3.3 Actively pursue participation in <i>professional development activities</i>		
	3.4 <i>Monitor</i> progress of professional on a regular basis		
C7E4. Critically evaluate specific	4.1 Describe research strategies		
research	4.2 Identify stakeholders and their communication needs		
	4.3 Identify research requirements		
	4.4 Analyse research information and data		
	4.5 Report research		

## **Required Skills and Knowledge**

## 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:

- · Own personal and professional strengths and weaknesses
- Professional development activities available
- Recent issues and events affecting the industry
- · Relevant reference works
- Research issues and their application
- Research strategies
- Research techniques
- Statistical analysis
- The historical, theoretical and philosophical aspects of the field of practice
- · Time management strategies

#### 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:

- · Collect, organise and analyse research data
- Demonstrate competence in communicating industry specific information
- · Demonstrate literacy, numeracy and computer skills
- Demonstrate presentation skills
- Demonstrate report writing skills
- Identify and communicate research findings with others
- · Participate in professional development activities listed in the range of variables
- Write reports

## **Evidence Guide**

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

- Observation of performance in the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- 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
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - · integrated assessment including:
  - working within the practice framework
  - performing a health assessment
  - assessing the client
  - planning treatment
  - providing treatment

Context of and specific resources for assessment:

- Assessment should replicate workplace conditions as far as possible
- Simulations may be used to represent workplace conditions as closely as possible
- 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
- Resources essential for assessment include:
  - an appropriately stocked and equipped clinic or simulated clinic environment
  - relevant texts or medical manuals
  - documented process to enable the access and interpretation of up-to-date information
  - relevant assessment instruments
  - · appropriate assessment environment
  - skilled assessors

## Method of assessment

- Observation in the workplace and practical demonstration
- Written assignments/projects or questioning should be used to assess knowledge
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice.
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting (laboratory). If successful, a second assessment is to be conducted during workplace application under direct supervision.
- Explanations for techniques
- Research work

## 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 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 consider relevant access and equity issues, relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and communities

## Range Statement

# Professional development activities may include:

- Articles, public presentations, interviews and other communications
- Attendance at association meetings
- Attendance at lectures or other education activities
- Clinic supervision
- Mentoring
- Participation in research projects
- Provision of or participation in training
- Study, distance-based learning
- · Subscription to professional journals

### Monitored may refer to:

- Accreditation to professional associations
- Assessment of clinic results
- Client surveys
- Feedback from colleagues
- Monitoring of client attendance and business success
- Peer discussions
- Supervisory feedback
- Workplace assessments

## Research strategies include:

- Case history
- Participant recruitment
- · Recognised research techniques
- · Research validation, peer review, reputability
- Selecting and defining hypotheses according to standard research practice
- Surveys and questionnaires

# Research requirements may include:

- Arranging times and places for collection of information
- Collecting and storing information
- Designing and making available material and other aids needed to conduct research e.g. questionnaires
- Identifying all relevant information sources
- Maintaining confidentiality where appropriate

#### Report research includes:

- Presenting research, methodology and findings to industry peers
- Providing analysis of the data, issues and needs arising during research
- · Providing an analysis of methodology used

# 8. Manage a practice

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA		
C8E1. Establish the practice	1.1	Prepare a business plan	
	1.2	Establish policies and procedures	
	1.3	Ensure required resources are available	
	1.4	Comply with statutory and regulatory requirements	
C8E2. Implement financial	2.1	Manage the finances of the business	
management procedures	2.2	Establish systems for financial documentation	
	2.3	Record information for financial reports	
C8E3. Implement practice management strategies	3.1	Implement operational strategies	
	3.2	Implement marketing strategies	
	3.3	Plan and manage meetings	
	3.4	Monitor stock levels and supplies	
C8E4. Implement personnel	4.1	Implement support strategies to support staff	
management strategies	4.2	Develop human resource strategies	
	4.3	Manage payroll and <i>employee</i> records if necessary	
	4.4	Manage diversity appropriately	

# **Required Skills and Knowledge**

### Essential knowledge:

### This includes knowledge of:

- All relevant statutory and regulatory requirements which affect the proposed small business including relevant child protection legislation
- Appropriate practices to ensure efficient use of power and other resources
- ATO requirements
- Business risks and measures to manage or minimise risks
- Business systems
- · Contractual rights and responsibilities
- Effective monitoring systems
- · Forms and sources of finance
- Industrial awards and agreements
- Insurance requirements
- Key operational concepts and procedures
- Legal and regulatory aspects of employing or contracting human resources
- Legal rights and responsibilities
- Meeting procedures
- Methods of monitoring performance
- Operational factors relating to the business (provision of professional services, products)
- Options for meeting human resource requirements and the implications of each option
- Planning and control systems (sales, advertising and promotion, distribution and logistics)
- Production and planning techniques
- Record keeping duties
- Specialist services available and charges
- Stock control methods and procedures
- Support networks
- Various methods producing financial reports, payroll procedures and employee statutory records

### 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:

- Accurately record financial transactions
- · Apply time management skills
- Assess competencies of clinic staff appropriate to size/scope of clinic
- Assess human resources appropriate to size/scope of clinic
- Demonstrate self-awareness skills

- Manage finances
- Manage meetings
- · Prepare and manage payroll and maintain payroll records
- Prepare business plans
- Prepare cash flow forecasts
- Promote, implement and manage work attitudes and practices that reflect awareness of the importance of a range of aspects of sustainability
- Provide clinic guidelines, policies and procedures
- Review clinic job descriptions and hierarchical structures
- Review training/career pathway strategies appropriate to size/scope of clinic

## **Evidence Guide**

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

- Observation of performance in the workplace or a simulated workplace is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of practice environments
- 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
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification

Context of and specific resources for assessment:

Assessment should replicate workplace conditions as far as possible

Method of assessment

- Observation in the workplace (if possible)
- Written assignments/projects or questioning should be used to assess knowledge
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice

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 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 consider relevant access and equity issues, relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and communities

# **Range Statement**

Business plan may include information on:

- Budget forecasts
- · Business goals and objectives
- Legal structure
- Management strategies
- Marketing strategies
- · Required resources
- Specialist services to be provided or recruited
- Staffing requirements
- Statutory and regulatory compliance
- Strategies to make the organisation child safe and child friendly
- Different stages in the development of a business
- Level of risk involved including the provision of services to clients under 18 years of age on a one to one basis
- · Market focus of the business
- Need to raise finance and requirements of lenders
- · Proposed size and scale of the business

In accordance with requirements for the scale of the operation policies and procedures may include:

The comprehensiveness and

depend on a range of factors

which may include:

extent of detailed documentation

required in the business plan will

- Child protection requirements including background checks
- Child safe, child friendly policy including code of conduct, managing complaints
- Communication procedures
- · Documentation procedures
- Emergency procedures
- · Financial procedures
- Human resources policies
- Policy and procedure guidelines developed and/or provided by industry associations
- Security procedures
- Stock control procedures
- Treatment protocols

Required resources may include:

- Administrative equipment and materials
- Communications equipment
- · Marketing materials
- Physical location
- Practice/medical equipment
- Staff

Statutory and regulatory requirements may include local, state and national legislation and regulations affecting business operations such as:

- Anti-competition/monopoly and consumer-based legislation
- Anti-Discrimination Act
- Business registration
- Codes of practice standards
- Equal Employment Opportunities Act
- Fire, WHS and environmental legislation
- Planning and other permissions
- Relevant state and territory child protection legislation
- Taxation, copyright and trademark regulations
- Therapeutic Goods Act

Manage the finances of the business includes monitoring and making decisions on:

- Assets
- Current financial state of the clinic (or owner/operator)
- Financial inputs required (sources and forms of finance)
- Financial performance to date (if applicable)
- Likely return on investment
- · Projections of likely financial results (budgeting)
- Risks and measures to manage or minimise risks

Financial documentation may include:

according to the scale of the

financial consultants

NB These will vary in complexity

business and the level of support

employed from accountants and

- Asset registers
- Banking documentation
- Costing procedures
- Credit transactions
- Creditors and debtors' systems
- Draft financial forecasts/budgets
- · Payroll records
- Petty cash
- Stock records

Financial reports may include:

according to the scale of the

NB These will vary in complexity

business and the level of support

employed from accountants and

Budget reports

Carla (I.a., Carana)

- Cash flow forecasts
- Detailed ledger accounts
- Profit and loss statements
- Reconciliations
- Taxation documentation

Operational strategies may include:

financial consultants

- Daily operation procedures
- Environmental strategies
- Management and administrative systems and procedures
- Marketing approaches, which may include advertising a child friendly environment
- Office systems
- Staffing procedures

Marketing strategies may include:

- Advertising
- Development of marketing/promotional materials, including child friendly literature
- Pricing strategies
- Promotional and public relations activities
- Publicity and media relations

Stock may include:

- Information materials provided to clients
- Materials and equipment required to prepare and dispense medicines
- Materials and equipment used in the treatment of clients
- Medicinal preparations provided to clients Stationery and administrative supplies
- Other promotional materials

Support strategies may include:

- Catering to personal limitations
- Collegial support group or network
- Defining boundaries
- Gaining adequate supervision
- · Maintaining discussions with colleagues
- Personal or professional support
- Setting, reviewing and adjusting goals

Human resource strategies may include:

NB These will vary in detail according to number of personnel involved either as practitioner partners or employees

- Implementation of statutory requirements
- · Performance management strategies
- Personnel documentation
- Planning and facilitation of meetings
- Recruitment targets, policies and procedures
- Support networks
- Time and stress management
- Training and assessment
- Workplace communications
- Work health and safety (WHS)

### Employee records may include:

- Employee records (including tax file number, remuneration, leave and training records, records of disciplinary action, time and wages sheets)
- Job/position descriptions
- WHS records
- Prohibited persons declaration when working with people under 18
- Records of taxation and superannuation payments made
- Relevant awards and/or industrial agreements.

### Manage diversity involves:

Valuing and utilising the different skills, backgrounds and capabilities of self and staff and developing strategies to encourage and enable their effective integration into the business. Diversity may include for example:

- Competencies
- Culture
- Education
- Gender
- Language
- Network of contact
- Work history
- Work preference

# 9. Provide first aid

# **Elements and Performance Criteria**

	ELEMENT	PERFORMANCE CRITERIA
	Elements define the essential outcomes.	Performance criteria specify the level of performance needed to demonstrate achievement of the element.
	C9E1. Respond to an emergency situation	1.1 Recognise an emergency situation
		$1.2\ \text{Identify,}$ assess and manage immediate hazards to health and safety of self and others
		1.3 Assess the casualty and recognise the need for first aid response
		1.4 Assess the situation and seek assistance from emergency response services
	C9E2. Apply appropriate first aid procedures	2.1 Perform cardiopulmonary resuscitation (CPR) in accordance with Australian Resuscitation Council (ARC) guidelines
		2.2 Provide first aid in accordance with established first aid principles
		2.3 Display respectful behaviour towards casualty
		2.4 Obtain consent from casualty where possible
		2.5 Use available resources and equipment to make the casualty as comfortable as possible
		2.6 Operate first aid equipment according to manufacturer's instructions
		2.7 Monitor the casualty's condition and respond in accordance with first aid principles
	C9E3. Communicate details of the incident	3.1 Accurately convey incident details to emergency response services
		3.2 Report details of incident to workplace supervisor as appropriate
		3.3 Maintain confidentiality of records and information in line with statutory and/or organisational policies
	C9E4. Evaluate the incident and own performance	4.1 Recognise the possible psychological impacts on self and other rescuers involved in critical incidents
		4.2 Participate in debriefing to address individual needs

# **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 completed the following tasks in line with state/territory regulations, first aid codes of practice, Australian Resuscitation Council (ARC) guidelines and workplace procedures:

- Followed DRSABCD in line with ARC guidelines, including:
  - performed at least 2 minutes of uninterrupted single rescuer cardiopulmonary resuscitation (CPR) (5 cycles of both compressions and ventilations) on an adult resuscitation manikin placed on the floor
  - performed at least 2 minutes of uninterrupted single rescuer CPR (5 cycles both compressions and ventilations) on an infant resuscitation manikin placed on a firm surface
  - responded appropriately in the event of regurgitation or vomiting
  - managed the unconscious breathing casualty
  - followed single rescue procedure, including the demonstration of a rotation of operators with minimal interruptions to compressions
  - followed the prompts of an Automated External Defibrillator (AED)
- Responded to at least two simulated first aid scenarios contextualised to the candidate's workplace/community setting, including:
  - conducted a visual and verbal assessment of the casualty
  - demonstrated safe manual handling techniques
  - post-incident debriefs and evaluation
  - provided an accurate verbal or written report of the incident
- Applied first aid procedures for the following:
  - allergic reaction
  - anaphylaxis
  - bleeding control
  - choking and airway obstruction
  - envenomation, using pressure immobilisation
  - fractures, sprains and strains, using arm slings, roller bandages or other appropriate immobilisation techniques
  - respiratory distress, including asthma
  - shock

# **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- State/Territory regulations, first aid codes of practice and workplace procedures including:
  - ARC Guidelines relevant to provision of CPR and first aid
  - safe work practices to minimise risks and potential hazards
  - · infection control principles and procedures, including use of standard precautions
  - requirements for currency of skill and knowledge
- legal, workplace and community considerations including:
  - awareness of potential need for stress-management techniques and available support following an emergency situation
  - duty of care requirements
  - respectful behaviour towards a casualty
  - own skills and limitations
  - consent
  - · privacy and confidentiality requirements
  - importance of debriefing
- considerations when providing first aid including:
  - airway obstruction due to body position
  - appropriate duration and cessation of CPR
  - appropriate use of an AED
  - chain of survival
  - · standard precautions
  - how to conduct a visual and verbal assessment of the casualty
- principles and procedures for first aid management of the following scenarios:
  - abdominal injuries
  - allergic reaction
  - anaphylaxis
  - basic care of a wound
  - bleeding control
  - burns
  - cardiac conditions, including chest pain
  - choking and airway obstruction
  - crush injuries
  - diabetes
  - dislocations
  - drowning
  - envenomation
  - environmental impact, including hypothermia, hyperthermia, dehydration and heat stroke
  - eye and ear injuries
  - fractures

- febrile convulsions
- head, neck and spinal injuries
- · minor skin injuries
- needle stick injuries
- · poisoning and toxic substances
- respiratory distress, including asthma
- seizures, including epilepsy
- shock
- · soft tissue injuries, including strains and, sprains
- stroke
- unconsciousness
- basic anatomy and physiology relating to:
  - how to recognise a person is not breathing normally
  - chest
  - response/consciousness
  - upper airway and effect of positional change
  - considerations in provision of first aid for specified conditions

# **Assessment Conditions**

Skills must be demonstrated working individually in an environment that provides realistic in-depth, industry-validated scenarios and simulations to assess candidates' skills and knowledge. 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.

#### Assessment resources must include:

- adult and infant resuscitation manikins in line with ARC Guidelines for the purpose of assessment of CPR procedures
- adrenaline auto-injector training device
- AED training device
- placebo bronchodilator and spacer device
- roller bandages
- triangular bandages
- workplace First Aid kit
- workplace injury, trauma and/or illness record, or other appropriate workplace incident report form for written reports
- wound dressings

# 10. Work with diverse people

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA
Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element
C10E1. Reflect on own perspectives	1.1 Identify and reflect on own social and cultural perspectives and biases
	1.2 Work with awareness of own limitations in self and social awareness
	1.3 Use reflection to support own ability to work inclusively and with understanding of others
	1.4 Identify and act on ways to improve own self and social awareness
C10E2. Appreciate diversity and inclusiveness, and their benefits	2.1 Value and respect diversity and inclusiveness across all areas of work
	2.2 Contribute to the development of workplace and professional relationships based on appreciation of diversity and inclusiveness
	2.3 Use work practices that make environments safe for all
C10E3. Communicate with people from diverse backgrounds and situations	3.1 Show respect for diversity in communication with all people
	3.2 Use verbal and non-verbal communication constructively to establish, develop and maintain effective relationships, mutual trust and confidence
	3.3 Where a language barrier exists, use effective strategies to communicate in the most efficient way possible
	3.4 Seek assistance from interpreters or other persons according to communication needs
C10E4. Promote understanding across diverse groups	4.1 Identify issues that may cause communication misunderstandings or other difficulties
	4.2 Where difficulties or misunderstandings occur, consider the impact of social and cultural diversity
	4.3 Try to sensitively resolve differences, taking account of diversity considerations
	4.4 Address any difficulties with appropriate people and seek assistance when required

# **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:

- undertaken a structured process to reflect on own perspectives on diversity
- recognised and respected the needs of people from diverse social and cultural backgrounds in at least 3 different situations:
  - selected and used appropriate verbal and non-verbal communication
  - recognised situations where misunderstandings may arise from diversity and formed appropriate responses

# **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- concepts of cultural awareness, cultural safety and cultural competence and how these impact different work roles
- concepts and definitions of diversity
- own culture and the community attitudes, language, policies and structures of that culture and how they impact on different people and groups
- features of diversity in Australia and how these impact different areas of work and life:
  - political
  - social
  - economic
  - cultural
- legal and ethical considerations (international, national, state/territory, local) for working with diversity, how these impact individual workers, and the consequences of breaches:
  - discrimination:
    - age
    - disability
    - racial
    - sex
  - human rights:
    - Universal declaration of human rights
    - relationship between human needs and human rights
    - frameworks, approaches and instruments used in the workplace
  - rights and responsibilities of workers, employers and clients, including appropriate action when rights are being infringed or responsibilities not being carried out
- key areas of diversity and their characteristics, including:
  - culture, race, ethnicity
  - disability
  - religious or spiritual beliefs

- · gender, including transgender
- intersex
- generational
- sexual orientation/sexual identity lesbian, gay, bisexual, heterosexual
- key aspects, and the diversity, of Australia's Aboriginal and/or Torres Strait Islander cultures, including:
  - social, political and economic issues affecting Aboriginal and/or Torres Strait Islander people
  - own culture, western systems and structures and how these impact on Aboriginal and/or Torres
     Strait Islander people and their engagement with services
- potential needs of marginalised groups, including:
  - protective factors
  - physical, mental and emotional health issues/care needs
  - consideration of impacts of discrimination, trauma, exclusion and negative attitudes
- resources that support individuals and organisations to embrace and respond to diversity
  - language and cultural interpreters
  - imagery
- influences and changing practices in Australia and their impact on the diverse communities that make up Australian society
- impact of diversity practices and experiences on personal behaviour, interpersonal relationships, perception and social expectations of others

### **Assessment Conditions**

Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. Where simulation is used, it must reflect real working conditions by modelling industry operating conditions and contingencies, as well as, using suitable facilities, equipment and resources.

# 11. Promote Aboriginal and/or Torres Strait Islander cultural safety

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA
Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element
C11E1. Identify cultural safety issues in the workplace	1.1 Identify the potential impact of cultural factors on service delivery to Aboriginal and/or Torres Strait Islander clients
	1.2 Identify critical issues that influence relationships and communication with Aboriginal and/or Torres Strait Islander people
	1.3 Establish key aspects of cultural safety in consultation with Aboriginal and/or Torres Strait Islander people
	1.4 Evaluate the extent to which cultural safety is integrated in own work and workplace
C11E2. Model cultural safety in own work	2.1 Ensure work practices are grounded in awareness of one's own cultural bias
	2.2 Reflect awareness of own and other cultures in work practices
	2.3 Use communication techniques and work practices that show respect for the cultural differences of Aboriginal and/or Torres Strait Islander people
	2.4 Engage with Aboriginal and/or Torres Strait Islander interpreters and colleagues as cultural brokers, according to situation needs
C11E3. Evaluate cultural safety strategies	3.1 Agree outcomes against which cultural safety strategies can be measured
	3.2 Involve Aboriginal and/or Torres Strait Islander people in evaluations
	3.3 Evaluate programs and services against desired outcomes
	3.4 Revise strategies based on evaluation with appropriate engagement of Aboriginal and/or Torres Strait Islander people

## **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:

- promoted Aboriginal and/or Torres Strait Islander cultural safety in the context of at least 1 workplace
- researched culture and history, the impact of European settlement, loss of land and culture and the importance of law and kinship

 evaluated ways to improve communication with Aboriginal and/or Torres Strait Islander peoples who may be clients or colleagues.

# **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- concept of Aboriginal and/or Torres Strait Islander cultural safety in the community services and health context, and its relationship with:
  - cultural awareness
  - cultural competence
- legislative context for Aboriginal and/or Torres Strait Islander cultural safety
- the diversity of Aboriginal and/or Torres Strait Islander cultures
- historical, social, political and economic issues affecting Aboriginal and/or Torres Strait Islander people and their engagement with community services and health systems, including:
  - · impact of European settlement
  - loss of land and culture
  - · racism and discrimination
  - past and present power relations
- own culture, western systems and structures and how these impact on Aboriginal and/or Torres Strait Islander people and their engagement with services
- factors that contribute to Aboriginal and/or Torres Strait Islander ill health and common diseases experienced by these groups of people:
  - impact of trauma on individuals' ability for:
    - decision-making
    - communicating
    - understanding
    - · retaining information
- ways to involve Aboriginal and/or Torres Strait Islander people in the planning and delivery of services and programs

### **Assessment Conditions**

Skills must have been demonstrated in the workplace or in a simulated environment that reflects workplace conditions. Where simulation is used, it must reflect real working conditions by modelling industry operating conditions and contingencies, as well as, using suitable facilities, equipment and resources.

### 12. Maintain an effective health work environment

## **Elements and Performance Criteria**

#### **ELEMENT**

### **PERFORMANCE CRITERIA**

C12E1. Promote ethical work practices

- 1.1 Monitor decision-making to ensure ethical guidelines are followed and underlying ethical complexity is recognised
- 1.2 Ensure understanding and compliance with the principles of duty of care and legal responsibilities in all work undertaken
- 1.3 Ensure appropriate action is taken to address any breach or non-adherence to standard procedures or adverse event
- 1.4 Monitor work practices to ensure confidentiality of any client matter in line with *organisation policy and procedure*
- 1.5 Promote respect for rights and responsibilities of others through considered application of work practices
- 1.6 Apply and promote knowledge and understanding of employee and employer rights and responsibilities in all work practices
- 1.7 Identify potential conflict of interest in the workplace and take action to avoid and/or address

C12E2. Support culture of effective communication

- 2.1 Monitor and address communication issues in the workplace
- 2.2 Monitor oral and written communication in the workplace to ensure confidentiality of client and staff matters
- 2.3 Monitor workplace communication to support accuracy and understanding of information provided and received
- 2.4 Promote recognition of individual and cultural differences in the workplace and support any adjustments to communication needed to facilitate the achievement of identified outcomes
- 2.5 Promote and support a client-centred approach to health care throughout interpersonal communication with clients and colleagues
- 2.6 Promote and assist with the resolution of conflict and interpersonal differences in the workplace

C12E3. Maintain a positive approach to health in the workplace

- 3.1 Monitor work practices to ensure they contribute to maintaining an effective and client-centred approach to health
- 3.2 Monitor implementation of work practices to ensure clients are included in shared decision-making as partners in health care
- 3.3 Support and maintain a workplace culture of promoting good health by sharing health information
- 3.4 Monitor and maintain workplace focus on preventing ill health and minimising risk

#### **ELEMENT**

#### PERFORMANCE CRITERIA

- 3.5 Monitor and maintain workplace focus on processes and procedures to manage stress and prevent fatigue
- C12E4. Monitor professional work standards
- 4.1 Monitor implementation of organisation policies and procedures relating to awards, standards and legislative requirements of staff
- 4.2 Identify areas for *improving work practices* and support implementation in line with organisation policies and procedures
- 4.3 Monitor compliance with relevant accreditation standards applying to work undertaken and address issues
- 4.4 Monitor staff understanding and focus on achieving organisation goals and objectives in work undertaken
- 4.5 Monitor and support staff efforts to respond positively to improved work practices and procedures
- 4.6 Ensure issues requiring mandatory notification are identified and reported appropriately
- C12E5. Work in the health industry context
- 5.1 Establish effective relationships with workers from different sectors and levels of the industry in line with work role and requirements
- 5.2 Apply knowledge of the roles and functions of various health care structures, organisations and systems in Australia
- 5.3 Maintain knowledge of current issues influencing the health care system, including health issues for Indigenous Australians
- 5.4 Work with an understanding of funding mechanisms, and how the organisation's operations are financed
- C12E6. Take opportunities to develop own competence
- 6.1 Monitor own skills/knowledge in relation to ongoing and changing work requirements
- 6.2 Identify areas for personal development in line with health industry developments, organisation requirements and personal interest
- 6.3 Take initiative to access and/or create development opportunities to support organisation need and personal career development
- 6.4 Undertake available formal and informal skill/knowledge development and maintenance activities

# **Required Skills and Knowledge**

### 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:

- Details of accreditation processes and quality improvement practices
- Implications of relevant legislation, including:
- · access and equity
- anti-discrimination
- infection control
- work health and safety (WHS)
- privacy
- Meaning of duty of care, confidentiality of information and ethical decision-making in relation to own and others' work duties and responsibilities; what constitutes a breach of these and potential ramifications of such breaches
- · Principles underpinning client-centred health care
- Principles of client safety
- Organisation procedures relating to:
- emergency response
- fire safety
- safe disposal of goods/waste
- security
- sustainability in the workplace, including environmental, economic, workforce and social sustainability
- Role, function and objectives of the organisation, and relevance to specific workplace requirements
- Terms and conditions of employment for staff members
- Understanding of relevant organisation procedures, policies, awards, standards and legislation and their application in the workplace

#### Essential skills:

It is critical that the candidate demonstrate the ability to

- Apply knowledge of the ramifications of breaches of duty of care, confidentiality, ethical guidelines and other relevant policies and legislation
- Apply understanding of good personal hygiene and risk associated with poor hygiene
- Identify own responsibilities within the workplace

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:

- Analyse implementation of workplace procedures and their outcomes to identify areas for improvement
- Apply functional literacy skills needed for written and oral information about workplace requirements
- Apply high-level decision-making and problem solving skills as required to monitor decision-making processes and provide constructive input to assist others
- Create and promote opportunities to enhance sustainability in the workplace
- Use high-level communication skills as required by specific work role, including:
  - interpreting and implementing complex verbal and/or written instructions
  - providing information and ensuring understanding
  - reporting incidents in line with organisation requirements
  - seeking clarification of information provided by others

### **Evidence Guide**

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 a range of workplace situations

Context of and specific resources for assessment:

- Assessment should relate to specific work role and associated workplace conditions
- Resources essential for assessment include any documents specific to the work context such as:
  - instructions for the use of equipment
  - specific instructions for staff
  - · emergency response procedures
  - fire safety policies and procedures
  - security procedures
  - relevant accreditation standards
  - waste management policies and procedures

### 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 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 consider 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

Requirements of own work role may include:

- Level of responsibility
- · Organisation guidelines
- Individual awards and benchmarks
- Legislation relevant to work area
- · Accreditation standards

Organisation policy on confidentiality may relate to:

- · Storage of records
- · Destruction of records
- Access to records
- Release of information
- Verbal and written communication

Organisation procedures, policies, awards, standards and legislation may include:

- Australian Council on Healthcare Standards
- Home and Community Care Standards
- National Association of Testing authorities (NATA)
- National Health and Medical Research Council (NHMRC) guidelines for infection control in health care settings
- Federal and state/territory legislation
- Quality management policy and practice
- Current Australian Standards
- Aged care accreditation standards
- Accreditation and service provision standards of other relevant industry organisations
- Relevant health regulations and guidelines, policies and procedures, including child protection

Communication strategies may include:

- Active listening
- Appropriate language
- Appropriate communication aids
- Appropriate modes of communication
- Appropriate demeanour and body language
- Appropriate tone and presentation
- Observation
- Questioning, clarifying and advising
- Providing appropriate and accurate information

Promoting positive client relationship may include:

- Acknowledging and greeting courteously
- Identifying client needs and attending to them in a timely manner
- Handling complaints sensitively, courteously and in accordance with practice protocols
- · Demonstrating respect for clients' time

A client-centred approach to health includes:

- Putting clients and carers at the centre of service delivery
- Including clients in decision-making relating to their health care
- Involving clients in discussions about service delivery options and issues
- Obtaining client consent to examine, treat or work with them
- Effective customer service

# Employee rights and responsibilities may relate to:

- Duty of care responsibilities
- Leave entitlements
- Attendance requirements
- Obeying lawful orders
- Confidentiality and privacy of organisation, client and colleague information
- Adherence to WHS
- Protection from discrimination and sexual harassment in the workplace
- · The right to union representation

Issues requiring mandatory notification may include:

- · Protection of children and others identified to be at risk
- Issues defined by jurisdictional legislation and/or regulatory requirements
- Issues specifically identified by under organisation policies

Improved work practices may relate, for example to:

- Enhancing outcomes for clients
- Enhancing sustainability of work, such as efficient and effective work practices in relation to:
  - · use of power
  - use of resources, including for administration purposes
  - waste management and recycling practices
- Enhancing safety of staff and clients

Identifying and implementing improved work practices may include:

- Reporting and implementing suggested improvements
- Seeking and addressing customer feedback
- Monitoring tasks
- Responding to surveys and questionnaires
- Assessing/observing/measuring environmental factors
- Checking equipment

Employer rights and responsibilities may relate to:

- Legislative requirements for employee dismissal (i.e. Workplace Relations Act)
- Legislative requirements to provide a safe work environment free from discrimination and sexual harassment (see state/territory and Commonwealth anti-discrimination legislation)
- Enterprise workplace agreements
- Relevant state and territory employment legislation (i.e. wage rates and employment conditions)

# Designated knowledge/skill development may relate to:

- Hazard control
- WHS
- Manual handling
- First Aid
- Cultural awareness
- Infection control
- Cardiopulmonary resuscitation emergency response and notification protocols
- Fire emergency response procedures for notification and containment of fire, use of firefighting equipment and fire safety procedures
- Security procedures
- Quality improvement policy and practice
- Discrimination, harassment and bullying in the workplace
- Formal and informal resolution of grievances
- · Waste management
- Customer service
- Communication, conflict resolution
- Others

# 13. Comply with infection prevention and control policies and procedures

# **Elements and Performance Criteria**

	ELEMENT	PERFORMANCE CRITERIA
	Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element
	C13E1. Follow standard and additional precautions for infection prevention and control	1.1 Follow hand hygiene practices in accordance with organisations policies and procedures
		1.2 Implement hand care procedures and cover cuts and abrasions
		1.3 Follow organisation procedures for choice and use of personal protection equipment
		1.4 Follow procedures for respiratory hygiene and cough etiquette
		1.5 Follow procedures for environmental cleaning
		1.6 Follow procedures for handling, transporting and processing of linen in a manner that controls the spread of infection
		1.7 Follow procedures for disposal of contaminated waste
		1.8 Follow procedures for handling and cleaning client equipment that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of pathogens
		1.9 Identify and respond to situations where additional precautions may be required to prevent transmission of infection
	C13E2. Identify infection hazards and assess risks	2.1 Identify infection hazards associated with own role and work environment
		2.2 Identify own areas of responsibility in relation to infection prevention and control
		2.3 Assess risk by determining the likelihood and severity of harm from identified hazards.
		2.4 Document and report activities and tasks that put self, clients, visitors and/or other workers at risk
		2.5 Identify appropriate control measures to minimise risk in accordance with organisations procedures
	C13E3. Follow procedures for managing risks associated with specific hazards	3.1 Follow protocols for care after exposure to blood or other body fluids as required
		3.2 Place appropriate signs when and where appropriate
		3.3 Remove spills in accordance with the policies and procedures of the
		• ••

organisation

### **ELEMENT**

### **PERFORMANCE CRITERIA**

Elements define the essential outcomes

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

- 3.4 Minimise contamination of materials, equipment and instruments by aerosols and splatter
- 3.5 Identify, separate and maintain clean and contaminated zones
- 3.6 Confine records, materials and medicaments to a well-designated clean zone
- 3.7 Confine contaminated instruments and equipment to a well-designated contaminated zone

# 14. Manage the prevention and control of infection

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA
Elements define the essential outcomes	Performance criteria describe the performance needed to demonstrate achievement of the element
C14E1. Establish framework for infection prevention and control	1.1 Access and interpret legislation, regulations and codes of practice for infection prevention and control
	1.2 Collate and evaluate information on workplace requirements for infection prevention and control
	1.3 Evaluate current policies, systems and procedures for compliance and quality
	1.4 Consult with relevant colleagues on infection prevention and control issues and requirements
	1.5 Develop and document infection prevention and control systems and procedures, including record keeping and reporting systems
	1.6 Define and allocate infection prevention and control responsibilities
C14E2. Establish procedures for hazard identification and risk control	2.1 Establish hazard identification and risk assessment tools
	2.2 Develop workplace processes for risk control
	2.3 Ensure risk controls and hazard specific procedures are consistent with the hierarchy of control
	2.4 Put in place incident reporting and investigation procedures
	2.5 Document hazard identification and risk assessment systems and procedures
C14E3. Implement and monitor infection prevention and	3.1 Communicate infection prevention and control systems, procedures and responsibilities to relevant colleagues
control practices	3.2 Support implementation by facilitating resources and training
	3.3 Monitor day to day effectiveness of infection prevention and control procedures and address issues of concern
C14E4. Evaluate infection prevention and control performance	4.1 Assess infection prevention and control systems against compliance requirements
	4.2 Review incidents as key sources of information
	4.3 Seek feedback on systems and procedures from relevant colleagues
	4.4 Identify and action improvements to systems and procedures

# **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:

- developed compliant infection prevention and control systems and procedures for at least 1 work environment:
  - accessed and analysed compliance and workplace information
  - developed and documented systems and procedures for:
    - hazard identification and risk control
    - personal hygiene
    - · use of personal protective equipment
    - handling and transport of potentially infectious material
    - limitation of contamination
    - cleaning and maintenance
  - communicated responsibilities to relevant people
- monitored infection prevention and control systems and procedures for at least 1 work environment and responded to problems

# **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- key features of infection prevention and control regulation and guidelines and compliance requirements:
  - Australian standards
  - · government guidelines
  - · manufacturer documentation
- principles and processes of planning
- systems and procedures needed to meet compliance and quality requirements for infection prevention and control:
  - work processes and precautions
  - hazard identification and risk control
  - monitoring and evaluation
  - reporting processes and hierarchies
  - · training requirements
- links between infection prevention and control systems and other management systems:
  - · work health and safety
  - · work organisation
  - human resource management
- for the specific work environment:
  - · ways the infections are spread

- types of hazards and risks
- control methods
- sustainability considerations for development of infection prevention and control systems and procedures

### **Assessment Conditions**

Skills must have been demonstrated in the workplace with the addition of simulations and scenarios where the full range of contexts and situations have not been provided in the workplace or may occur only rarely.

The following conditions must be met for this unit:

- use of suitable facilities, equipment and resources, including:
  - facilities and equipment used in the candidate's place or intended place of work
  - current infection prevention and control regulations and standards
- modelling of industry operating conditions, including presence of real or simulated risks and hazards to which the candidate responds

# 15. Apply literature research findings to clinical practice

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA
C15E1. Manage information needs	<ul><li>1.1 Assess currency of information</li><li>1.2 Define clinical information needs</li><li>1.3 Record information findings</li></ul>
C15E2. Access information	<ul><li>2.1 Identify contemporary <i>primary and secondary sources</i> of information</li><li>2.2 Identify <i>established sources of information</i></li><li>2.3 Collect and collate Information</li></ul>
C15E3. Evaluate information	<ul> <li>3.1 Compare and contrast primary and secondary sources of information</li> <li>3.2 Establish relevance of information to clinical treatment strategy within a Clinical Nutrition/Nutritional Medicine health framework</li> <li>3.3 Prioritise relevant information</li> <li>3.4 Correlate information findings with individual clinical case presentation</li> </ul>
C15E4. Apply information to treatment strategy	<ul><li>4.1 Apply information to individualised treatment strategy</li><li>4.2 Integrate information findings with existing treatment strategy</li><li>4.3 Implement relevant findings into clinical practice</li></ul>

# **Required Skills and Knowledge**

### 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:

- Relevant reference works and information sources
- Research issues and their uses
- · Research methodologies commonly used in medical, and allied health medicine research
- · Research priorities
- Up-to-date information on relevant medical, and allied health medicine research

#### 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:

- Access and critically evaluate reference material on the effects of nutritional medicines and treatments on various health conditions and clinical presentations and in the maintenance of well-being
- Access and critically evaluate reference material on the effects of current conventional drug therapies
  and their withdrawal, interactions between nutritional medicines and drugs, interactions between
  nutritional medicines, adverse effects and contra-indications of nutritional medicines and treatments
- Access and interpret up-to-date information
- Appropriately record details of information findings
- · Communicate information through written or verbal media
- · Critically evaluate information regarding validity and credibility
- Critically evaluate research
- Demonstrate interpersonal and questioning skills
- Extrapolate case study information to new cases
- Identify and access a range of primary, secondary, new and established information sources
- Identify and access relevant reference works and information sources
- Identify information needs and plan information gathering strategies
- Interpret common terminology used in statistical analysis
- Prioritise usefulness of information to treatment of individual cases
- Recognise common terminology used in medical, allied health and nutritional medicine research
- · Recognise statistical terminology and understand the significance of common statistical analysis
- Work or model work which demonstrates an ability to apply the underpinning values and philosophies of the nutritional medicine modality within clinical practice

## **Evidence Guide**

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
- This unit is can be assessed in the workplace, in a classroom setting or in a distance learning context. Assessment will mostly contain theoretical components and examples covering a range of clinical situations
- Consistency of performance should be demonstrated over the required range of situations relevant to the workplace
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - working within the practice framework
    - · performing a health assessment
    - assessing the client
    - planning treatment
    - · providing treatment

# Context of and specific resources for assessment:

- Relevant texts, manuals or research papers
- Relevant journals
- Relevant paper based/video assessment instruments
- Access to internet or on-line research information
- Appropriate assessment environment
- Skilled assessors

### Method of assessment

- Observation in the workplace (if possible)
- Written assignments/projects or questioning should be used to assess knowledge
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting (laboratory). If successful, a second assessment is to be conducted during workplace application under direct supervision
- Oral questioning
- Presentations and discussion
- Case studies and scenarios
- Presentation of research review results
- Written questioning

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 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 consider 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

Clinical information needs:

- Information on pathology of specific conditions/diseases including genetic mutations/variants
- Information on latest treatment pathology options for specific conditions/diseases
- Research data on treatment, symptoms, nutritional medicines, treatment techniques
- Clinical information to assist in meeting specific client health outcomes

Primary information sources:

- Clinical research studies
- Medical and allied health journals (peer reviewed)
- Nutritional medicine journals (peer reviewed)
- Reference texts
- Peer reviewed conference presentations

Secondary information sources:

- Other journals
- Abstracts
- Popular media (magazines, newsletters, books)
- · Other conferences and presentations
- Internet

Established information sources:

- Clinical texts
- Reference works
- · Recognised teachings

Evaluate refers to:

- Establish the validity and credibility
- Establish relevance to meeting information needs
- Assess the level of industry recognition
- Assess usefulness
- Check references

*Implement refers to:* 

- Include new findings in clinical treatment strategies
- Use information to reassess treatment plans

# 16. Apply a Clinical Nutrition/Nutritional Medicine diagnostic framework

PERFORMANCE CRITERIA

### **Elements and Performance Criteria**

3.3

necessary

**ELEMENT** 

### C16E1. Analyse and interpret 1.1 Correlate results of the health assessment with case history information received 1.2 Recognise and identify signs and symptoms of condition in the client as pre-requisites for treatment/care Assess information and assign priorities in consultation with the client using a knowledge of nutritional principles Gather, record and organise information in a way which can be interpreted readily by other professionals 1.5 Analyse and differentiate patterns by assessing signs and symptoms 1.6 Identify condition according to stage and related implications (e.g. acute/chronic) by applying principles of diagnosis 1.7 Use professional judgement to draw sound conclusions and prognosis from the data collected Elicit diagnostic signs and symptoms in a thorough and objective manner to avoid premature conclusions Systematically monitor client progress in order to confirm the initial diagnosis or clinical impression C16E2. Critically evaluate the Apply an ongoing critical evaluation of diagnosis 2.1 diagnosis 2.2 Select appropriate diagnostic tools/methods 2.3 Carry out a re-evaluation of the case when considered necessary 2.4 Combine history and clinical data to obtain a differential diagnosis, diagnosis and prognosis C16E3. Inform the client 3.1 Discuss the rationale of the diagnosis/prognosis with the client Respond to client enquiries using language the client understands 3.2

Discuss referral and collaborative options with the client if

# **Required Skills and Knowledge**

### 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:

- · Anatomy and physiology of the body systems
- Disease process
- Referral processes
- · Relevant testing and assessment options and procedures
- · Signs and symptoms of disease and disorder/dysfunction
- The contribution of the different schools of thought and historical theories of clinical practice
- · The possible interactions between supplements, foods and medications
- The principles of nutrition
- Types of further investigation available (knowledge and understanding)

### 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:

- Access and interpret up-to-date information
- Apply differential assessment
- Apply nutritional principles to diagnosis
- Communicate with a range of individuals from diverse backgrounds and cultures
- Demonstrate differential diagnostic skills
- · Establish urgency for treatment required
- Formulate a diagnosis based on Clinical Nutrition/Nutritional Medicine principles
- · Prioritise presenting conditions
- Write referrals, appraisal letters and other documentation

## **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- 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
- Demonstrated ability to interpret investigative findings
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - working within the practice framework
    - performing a health assessment
    - assessing the client
    - planning treatment
    - providing treatment

Context of and specific resources for assessment:

- Resources essential for assessment include:
  - an appropriately stocked and equipped clinic or simulated clinic environment
  - nutritional value tables for Australian foods and/or suitable dietary analysis software
  - relevant texts and manuals
  - appropriate assessment environment
- Method of assessment
- Observation in the workplace
- Written assignments with practical demonstration
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice.
- Oral Questioning
- Diagnosis from assessment notes or simulated assessments
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting. If successful, a second assessment is to be conducted during workplace application under direct supervision
- · Clinic treatment logbooks

### 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 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 consider 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 should be assessed in conjunction with the following related units:

- 4: Analyse health information
- 5: Communicate effectively with clients
- 17: Manage work within the clinical nutritional framework
- 18: Perform clinical nutrition health assessment

## Range Statement

Signs and symptoms of condition may include:

- Physical evidence
- Behavioural evidence
- States of disorder
- Test or examination results
- Sensations
- Onset
- Duration
- Location
- Causation
- Ameliorating and aggravating factors
- Symptom qualities (intensity, severity, nature of complaint)
- Non-verbal signs and symptoms
- Functional and pathological disturbances

Patterns may refer to:

- · Personality traits
- Constitutional states
- · Syndromes e.g. adrenal exhaustion
- Functional disorders e.g. functional hypoglycaemia
- Disease/conditions

Knowledge of nutritional principles must include:

- Diet as therapy (health maintenance, therapeutic diets, dietary modification)
- Therapeutic application of special and functional foods (food as medicine)
- Cultural dietary perspectives
- Nutrient supplementation
- Individual unique dietary needs
- Behavioural and lifestyle strategies

Principles of diagnosis may include:

- Integrated model
- Biomedical model
- Biopsychological model
- Health history

Appropriate diagnostic tools/methods may include:

- Physical diagnostic (temperature, auscultation)
- Anthropometric
- Biochemical analysis
- Diet diary
- Nutritional screening
- 24 hour recall
- Food frequency questionnaire
- Physical signs of malnutrition
- Pathology laboratory tests (blood, urine, stool)

# 17. Manage Work within a clinical nutritional framework

# **Elements and Performance Criteria**

PERFORMANCE CRITERIA
1.1 Effectively communicate the methods of diagnosis and treatment practices on a one-to-one or group basis
1.2 Explain the central philosophies and historical developments
1.3 Integrate recent and new developments into client services
2.1 Maintain confidentiality of client by storing and disposing of records according to clinic requirements
2.2 Periodically review work practices to ensure skills and practices are kept current
2.3 Show respect for staff and client rights
2.4 Adhere to legal, regulatory and clinic guidelines
2.5 Implement measures to ensure accountability for professional practices
3.1 Use effective communication and interpersonal skills to ensure all workplace interactions contribute to achievement of clinic objectives and promotion of the practice
3.2 Ensure workplace relations reflect consideration of the full range of individual and cultural differences
3.3 Deal with issues related to the wellbeing of work colleagues promptly and in accordance with clinic procedures
3.4 Handle potential and actual workplace conflicts to minimise disruption
4.1 Establish and practise personal hygiene and infection control guidelines throughout the organisation
4.2 Undertake hazard control measures and reporting procedures according to clinic guidelines
4.3 Review individual and clinic performance against established standards
5.1 Monitor own performance against workplans, clinic objectives and client needs
5.2 Seek out and access opportunities for formal and informal development of skills and knowledge
5.3 Monitor individual performances and ensure opportunities to

develop and enhance team performance are accessed where appropriate

#### PERFORMANCE CRITERIA

5.4 Provide effective coaching and mentoring to contribute to development of appropriate workplace knowledge, skills and attitudes

## **Required Skills and Knowledge**

#### 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:

- Communication skills in one-to-one and group settings
- Ethical issues in management
- Ethical issues in Clinical Nutrition/Nutritional Medicine
- How Clinical Nutrition/Nutritional Medicine works with the conventional medical model
- Industry standards
- Management issues and responsibilities
- · WHS requirements in the workplace
- Philosophical tradition of science / western medicine
- · Sociology of health and the health care system
- Team development issues
- The current political context of healthcare
- The dynamic interchange between the physical, mental, social, environmental and spiritual landscape
- The history of Clinical Nutrition/Nutritional Medicine
- The integration of medical and nutritional approaches to health
- The principles and practices of Clinical Nutrition/Nutritional Medicine practice
- The philosophy, principles and practices of other allied health therapies
- The qualitative, quantitative, and cultural lines of evidence used in Clinical Nutrition/Nutritional Medicine
- The rationalistic, analytical approach to an understanding of disease

#### 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:

Correctly identify information needs

- Demonstrate communicate skills including the ability to community with people from a range of diverse cultural and linguistic backgrounds
- Demonstrate communication skills in a one-to-one and group setting
- Demonstrate documentation skills
- Demonstrate management skills
- Demonstrate team development skills
- · Explain clinic guidelines and legislation
- Explain relevant products and services
- · Identify ethical issues
- Model work which demonstrates an understanding of underpinning values and philosophies in the Clinical Nutrition/Nutritional Medicine framework
- Promote, implement and manage work attitudes and practices that reflect awareness of the importance of a range of aspects of sustainability
- Provide leadership, coaching and/or mentorship
- Seek out and implement new industry findings and practices
- Undertake performance reviews

### **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- 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
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - · working within the practice framework
    - performing a health assessment
    - assessing the client
    - planning treatment
    - · providing treatment

Context of and specific resources for assessment:

- Resources essential for assessment include:
  - relevant texts or medical manuals
  - relevant assessment instruments
  - appropriate assessment environment
  - skilled assessors

Method of assessment)

- Observation in the workplace
- Practical demonstration and simulations
- Written assignments/projects
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice
- Oral Questioning
- · Role play simulation
- Short tests and essays
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting (laboratory). If successful, a second assessment is to be conducted during workplace application under direct supervision

#### 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 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 consider relevant access and equity issues, relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and communities

## Range Statement

Clinical Nutrition/Nutritional Medicine principles and practices may include:

- Clinical Nutrition/Nutritional Medicine principles
  - first do no harm
  - identify and treat the causes
  - treat the entire person as an individual
  - prevention is best
  - educate the client
  - evidence based practice
  - individuality individuals have a unique interaction with their nutritional environment
- Clinical Nutrition/Nutritional Medicine practice
  - diet as therapy (health maintenance, therapeutic diets, dietary modification)
  - therapeutic application of special and functional foods (food as medicine)
  - cultural dietary perspectives
  - nutrient supplementation
  - individual unique dietary needs
  - behavioural and lifestyle strategies
- Observation
- Discussion
- Taking temperature
- Taking pulse and blood pressure
- Palpation and auscultation
- Percussion
- · External physical examination
- Urine tests
- Assessment of growth (height, weight, head circumference) and development

Forms of Clinical Nutrition/Nutritional Medicine diagnosis may include: Forms of Clinical Nutrition/Nutritional Medicine diagnosis may include:

- Observation
- Discussion
- Taking temperature
- Taking pulse and blood pressure
- · Palpation and auscultation
- Percussion
- External physical examination
- Urine tests
- Assessment of growth (height, weight, head circumference) and development
- Overview of system by enquiring about the presence of previously diagnosed organic diseases and functional disorders
- Any other method in which the practitioner has been trained to a competent standard within their scope of practice
- Procedure which is conducted according to legislative and regulatory requirements
- Anthropometric
- Biochemical analysis
- Diet diary
- Nutritional screening
- 24 hour recall
- Food frequency questionnaire
- · Physical signs of malnutrition
- Pathology laboratory tests (blood, urine, stool)
- · Genetic sequencing
- Prescription of nutritional supplements
- Prescription of diets
- Physical activity recommendations to support nutritional outcomes

may include:

Effective communication and

interpersonal skills may include

Clinical Nutrition/Nutritional

Medicine treatment practices

- Active listening skills
- · Ability to establish rapport and trust
- Eve contact
- Verbal communication skills
- Written communication skills
- Empathy and respect
- Ability to clarify needs
- Conflict resolution skills
- Negotiation skills
- Presentation
- Honesty and integrity

Opportunities for formal and informal development of skills and knowledge may include:

- Articles, public presentations, interviews and other communications
- Attendance at lectures or other education activities
- Participation in research projects
- Attendance at association meetings
- Subscription to professional journals
- Clinic supervision
- Provision of or participation in training
- · Study, distance-based learning

# 18. Perform Clinical Nutrition/Nutritional Medicine health assessment

## **Elements and Performance Criteria**

#### **ELEMENT**

needs

# C18E1. Determine the scope of the assessment and client

#### PERFORMANCE CRITERIA

- 1.1 Establish client's purpose for consultation and identify the symptoms experienced
- 1.2 Determine client's eligibility for service using clinic/personal policies
- 1.3 Explain services able to be provided and limits of available services
- 1.4 Explore and clarify client's expectation of the service/clinic
- 1.5 Identify factors likely to have a negative impact on assessment in consultation with the client and implement strategies to minimise the effects of these factors wherever possible
- 1.6 Define personal abilities, level of professional competence and parameters of role to the client
- 1.7 Refer client to other health care providers where their needs are identified as beyond the scope of the services able to be provided, or if in the opinion of the practitioner their needs are best met by doing so
- 1.8 Identify and promote legal rights of the client

# C18E2. Obtain and record an accurate history of the client

- 2.1 Seek *client history* from the client in a respectful way with all enquiries asked in a purposeful, systematic and diplomatic manner
- 2.2 Collect and record accurate, relevant and well organised information in a manner which can be interpreted readily by other professionals
- 2.3 Ensure information is treated and stored in a confidential manner

## C18E3. Manage the health assessment

- 3.1 Obtain informed client consent prior to conducting tests in accordance with legislative requirements
- 3.2 Investigate abnormal findings in a deliberate, logical and appropriate manner
- 3.3 Assess the reliability of data obtained and establish, where possible, appropriate clinical correlation with client's presenting condition
- 3.4 Use questions to clarify results and gain further information in a manner relevant to client needs and test results
- 3.5 Determine need to carry out laboratory tests based on the integration of previously obtained clinical data and history
- 3.6 Adhere to agency protocol required in ordering tests

#### **ELEMENT**

#### PERFORMANCE CRITERIA

- 3.7 Allow adequate time during consultation to gather critical information
- 3.8 Identify and minimise factors that may interfere with the information gathering process
- 3.9 Identify, establish and maintain essential requirements for the maintenance of clinical and practitioner hygiene
- 3.10 Anticipate any potential sensitivities of the client and adapt approach to take these into account, while ensuring the maintenance of client dignity

## C18E4. Make a comprehensive assessment of the client

- 4.1 Observe and identify *signs of disease*/condition according to Clinical Nutrition/Nutritional Medicine framework
- 4.2 Seek specific details of signs and symptoms of the presenting complaint/s or health conditions
- 4.3 Employ other assessment techniques as appropriate
- 4.4 Record, accurately, all information in a systematic manner in accordance with clinic guidelines

## **Required Skills and Knowledge**

#### 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:

- · Anatomical terminology and levels of organisation
- · Anatomy and physiology according to various stages of life
- Biochemistry
- Nutritional genomics
- Clinical features and pathophysiology of common bacterial and viral diseases to assess, stage, severity and likely prognosis
- Critical information required for diagnosis and treatment according to Clinical Nutrition/Nutritional Medicine framework
- Ethical and legal implications of enquiry
- Factors affecting transmission of disease and choice of treatments of common infectious diseases
- Identification of infectious organism, indications, complications, epidemiology, occurrence, mode of transmission, vectors, incubation period, period of communicability, presentation, diagnosis, treatment, management and prevention
- Knowledge and understanding of
  - anatomical systems including muscular-skeletal including muscles, bones, cartilage, joints, head, upper trunk, upper limb, pelvis, lower limb
  - cardiovascular including haemopoietic including vascular system, spleen, heart and pericardium, systemic arteries, systemic veins, portal veins, foetal circulation
  - ENT and special senses including hearing and equilibration, vision, smell, taste
  - gastrointestinal including mouth, salivary glands, tongue, pharynx, oesophagus, abdomen and peritoneum, stomach, small intestine, large intestine, liver, biliary system, pancreas
  - lymphatic including thoracic viscera, abdominal and pelvic viscera, alimentary tract, urinary and genital systems, trunk and limbs, deep and superficial lymph nodes
  - nervous including peripheral, autonomic and central nervous systems
  - respiratory including larynx, trachea, lungs and mediastinum, pleura
  - urogenital (reproductive and urinary) and endocrine including kidneys, ureter and bladder, male genital organs, female genital organs, thyroid, parathyroid glands, pituitary gland, adrenal gland, thymus gland
  - Pathophysiology and disease processes of common clinical diseases and interactivity between them, to the level necessary to support the making of a screening assessment and assessment of the client's condition to support the practice of Clinical Nutrition/Nutritional Medicine
  - Pathophysiology and disease processes affecting the nervous system
  - cardiovascular system blood, clotting, erythropoietin, cardiac cycle
  - central and peripheral nervous tissue, brain, spinal cord and associated nerves, sensory, motor and integrative systems, autonomic nervous system
  - endocrine system thyroid, parathyroid and adrenal glands, pancreas, calcium and bone metabolism, pituitary gland, pineal gland
  - ENT and special senses vision, hearing, smell, taste
  - lymphatic system immunity, allergy

- respiratory system pulmonary function, gas transport, regulation of respiration, respiratory adjustments
- urogenital system renal function, fluid balance, male and female reproductive systems, musculoskeletal system processes affecting joints, muscles, tendons, ligaments and bones
- Philosophical approach to diagnosis and treatment
- Physiology including:
  - basic physiology including physiology of muscular-skeletal system muscles, posture and movement;
     nervous system central, peripheral and automatic nervous systems
  - · cardiovascular system heart, circulation
  - ENT and other senses hearing and equilibration, vision, smell, taste
  - gastrointestinal motility, secretions, movement of food, digestion and absorption
  - general physiology including cell structure and function, metabolism, levels of organisation in the body
  - lymphatic system lymph, immunity and allergy
  - respiratory system pulmonary function
  - urogenital and endocrine renal function, micturition, extracellular fluid, metabolism, thyroid gland, hormones, and reproduction
- Physical signs and symptoms of wellbeing and disease
- Relevant testing and assessment options and procedures
- Symptomology and pathology according to Clinical Nutrition/Nutritional Medicine practice
- · Terminology is correct for discipline
- The cost benefit ratio of special tests or studies
- The legal and ethical requirements for confidentiality
- Time management requirements during consultation

#### 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:

- Access and interpret up-to-date information
- · Apply methods of keeping medical records
- Communicate effectively to gain required information
- Conduct external physical examination
- Demonstrate communication skills including the ability to communicate with a range of people from diverse cultural and linguistic backgrounds
- Demonstrate observation skills
- Demonstrate physical examination procedures
- Demonstrate record keeping skills
- Demonstrate respect for practitioner/client boundaries
- Detect and record symptoms and signs present including precipitating factors, relieving factors and associated manifestations

- Determine the scope of the assessment and client needs
- Identify location, stage and characteristics of disease
- Make a comprehensive assessment of the client as relevant to Clinical Nutrition/Nutritional Medicine in practice
- Manage the health assessment of the client as relevant to Clinical Nutrition/Nutritional Medicine practice
- Obtain and record an accurate history of the client
- Understand and discuss medical reports
- Use a range of medical equipment used in external physical examinations
- Use equipment and technology competently and safely
- Use terminology correct to discipline

### **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- 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
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - working within the practice framework
    - performing a health assessment
    - assessing the client
    - planning treatment
    - providing treatment

Context of and specific resources for assessment:

- Resources essential for assessment include:
  - an appropriately stocked and equipped clinic or simulated clinic environment
  - skilled assessors
  - nutritional value tables for Australian foods and/or suitable dietary software
  - relevant manuals. texts, journals
  - appropriate assessment environment

#### Method of assessment

- Observation of performance in the workplace
- Examples of assessment notes
- Written assignments, client treatment logbooks and short answer tests
- Practical demonstrations and exercises
- Research work or written reports of observations in a practical setting
- Oral questioning on technique or assessment strategy
- Role play simulation
- Case studies and scenarios as a basis for discussion of issues and strategies to contribute to best practice in the work environment
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting (laboratory). If successful, a second assessment is to be conducted during workplace application under direct supervision

#### 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 should be assessed in conjunction with the following related units:

- 5: Communicate effectively with clients
- 14: Manage the control of infection
- 16: Apply a Clinical Nutrition/Nutritional Medicine diagnostic framework
- 17: Manage work within a Clinical Nutrition/Nutritional Medicine framework

## Range Statement

Factors likely to have a negative impact on assessment may include:

- · Language difficulties
- Disabilities
- · Emotional trauma
- · Lack of privacy or focus due to other parties being present
- Cultural or gender factors

Other health care providers may include:

- GP and other medical professionals
- Social workers
- Allied health and complementary health practitioners
- Counsellors
- Dieticians

Client history may include:

- · Date of presentation
- Identifying personal details
- Source of referral (if applicable)
- Main presenting health condition/complaint or reason for consultation
- · Presenting symptom picture
- · General state of health
  - physical
  - emotional
  - allergies/sensitivities
  - dietary picture
  - sleep pattern
  - exercise
  - leisure activities
- Childhood and adult illness
- · Accidents, injuries, operations
- Hospitalisations
- Occupational history and environment
- Other current medical treatment
- Medication, supplements and natural remedies current and previous
- Social lifestyle including social drug use
- Family history

Potential sensitivities may include:

- Gender
- Ethnicity
- Language
- Religious beliefs
- Cultural heritage
- Sexuality
- Ability
- Presenting disease state and personal history

Signs of disease/condition may refer to:

- Precipitating factors
- Relieving factors
- Associated manifestations
- Indications of stage and status of illness
- · Symptom qualities
- · Functional and pathological disturbances

# Other appropriate assessment techniques may include:

- Observation
- Discussion
- Taking temperature
- Taking pulse and blood pressure
- Palpation and auscultation
- Percussion
- External physical examination
- Dietary analysis methods
- Skin examination
- Urine tests
- Assessment of growth (height, weight, head circumference) and development
- Overview of system by enquiring about the presence of previously diagnosed organic diseases and functional disorders
- Any other method in which the practitioner has been trained to a competent standard within their scope of practice

## 19. Plan the nutritional treatment strategy

## **Elements and Performance Criteria**

#### **ELEMENT**

#### **PERFORMANCE CRITERIA**

C19E1. Determine treatment strategy

- 1.1 Determine appropriate *therapeutic principles* for treatment according to the diagnosis of client and within own skills and competence
- 1.2 Ascertain *contraindications* and any possible complicating factors to treatment and modify treatment strategy according to Clinical Nutrition/Nutritional Medicine principles
- 1.3 Take into consideration *treatment* and advice provided by other health care professionals in determining the strategy to be used in treatment
- 1.4 Select treatment strategy which is appropriate to client condition and supported based on established Clinical Nutrition/Nutritional Medicine practice
- 1.5 Take into consideration possible *client compliance* issues in specific treatment options

C19E2. Discuss the treatment strategy with the client

- 2.1 Discuss proposed treatment strategy with the client
- 2.2 Allocate enough time to discuss the treatment strategy
- 2.3 Negotiate *client compliance*
- 2.4 Clarify *discrepancies* between the practitioner's and the client's perception of the condition
- 2.5 Communicate relevant information from medical or diagnostic reports, where appropriate
- 2.6 Explain any perceived risks to the client's condition and treatment
- 2.7 Clarify the *responsibilities of practitioner and client* within the treatment plan

## **Required Skills and Knowledge**

#### 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:

- · Advanced knowledge of medical terminology
- Allopathic drugs, their classifications, usage and side effects
- Community resources and support services
- Contraindications of treatment
- Drug abuse signs, consequences, treatment and community resources available
- Drug interactions with Clinical Nutrition/Nutritional Medicines
- · Groups of nutrients and how to distinguish between them
- Legal and ethical considerations in treating clients with nutritional remedies
- Lifestyle factors relevant to treatment of specific conditions and diseases
- Major nutrients with respect to their use for general symptoms, psychological and physiological indications
- Medical reports and diagnostic procedures
- Methods of preparing treatment and management plans (knowledge and understanding)
- Minor nutrients in respect to their most important indications
- Pharmaceutical and Clinical Nutrition/Nutritional Medicines used in pregnancy and breast feeding
- Pharmaceutical and Clinical Nutrition/Nutritional Medicines used to treat disorders of each system of the body
- Pharmacodynamics of pharmaceutical and Clinical Nutrition/Nutritional Medicines and the theory of drug action; factors modifying drug effect and dosage; drug toxicity and toxicology
- Possible obstacles to successful treatment
- Remedies/treatments and dosages used to treat conditions
- Supplementary measures in the management of the condition/system e.g. dietary considerations and exercise
- The correct preparations required for specific treatment
- The interaction of treatments with foods, herbs, and nutritional supplements and drugs
- The possible responses to treatments

#### 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:

- Access and interpret up-to-date information on Clinical Nutrition/Nutritional Medicines and practices
- Access and understand reference material on the effects of current conventional drug therapies and their withdrawal
- Apply methods of treating and managing disease process of each system using Clinical Nutrition/Nutritional Medicine
- Demonstrate communication and negotiation skills
- Demonstrate consideration of the impact of client vitality on selected treatments
- Demonstrate interpersonal and questioning skills
- Dispense remedies/treatments
- Identify treatment options and establish treatment regimes
- Prepare treatment plans
- Prescribe Clinical Nutrition/Nutritional Medicines according to the time-frame appropriate to the client condition and the nutrients selected, and to the dosage recommended for the client's age
- Provide advice
- Consider opportunities to address waste minimisation, environmental responsibility and sustainable practice issues
- Understand and discuss medical reports and other data relevant to the case

### **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- 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
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - working within the practice framework
    - performing a health assessment
    - assessing the client
    - planning treatment
    - providing treatment

# Context of and specific resources for assessment:

- Resources essential for assessment include:
  - an appropriately stocked and equipped clinic or simulated clinic environment
  - relevant texts or medical manuals
  - documented processes to enable the access and interpretation of up to date information
  - relevant assessment instruments
  - skilled assessors

#### Method of assessment

- Practical demonstration and observation in the workplace
- Written assignments/projects
- Practical assignments
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice
- Oral questioning and discussion
- Role play simulation
- Explanation of treatment plan preparations
- Research work
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting (laboratory). If successful, a second assessment is to be conducted during workplace application under direct supervision

#### 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 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 consider 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 should be undertaken after or in conjunction with units:

- 5: Communicate effectively with clients
- 16: Apply a nutritional diagnostic framework
- 17: Manage work within a clinical nutritional framework

## Range Statement

Therapeutic principles of nutritional medicine refer to:

 Practices, theories and principles specific to the use of Clinical Nutrition/Nutritional Medicine in the treatment of clients e.g., concurrent, palliative and continuing care and recognise the stage of the client's illness in terms of chronicity, tendency for the condition to degenerate or spontaneously resolve Contraindications to treatment and possible complicating factors may include:

- Acute surgical and medical conditions such as cardiac arrest, acute hypovolaemic shock, paralytic ileus and loss of consciousness
- Traumatic injuries or conditions requiring immediate medical attention
- Life threatening situations
- · Personal or life circumstances
- Ability or willingness to comply with treatment
- Allergies/sensitivities
- Past treatment history
- Current conditions/disease state
- Current medications/treatments
- Contraindications for use of certain excipients and bases

Treatments may include:

- Prescription of supplements
- Dispensing of extemporaneous preparations

Client compliance refers to:

- Ability to follow instructions or suggestions
- Willingness to follow instructions or suggestions

Discrepancies may include:

- Client is unaware of the immediate danger of their condition
- Client is overly anxious about their condition
- Client is unaware of maintaining causes acting on their condition
- Practitioner is unaware of some implications of the client's condition
- Practitioner and client have a different view as to what the main problem is

Practitioner responsibilities may include:

- Isolating the sick person
- Notifying medical doctor about their condition
- Appropriate hygienic procedures
- Notifying state health authorities of notifiable/communicable disease
- Commitment to the treatment plan
- Discussing relevant contraindications or potential complications to treatment
- Reviewing of treatment plan

Client responsibilities may include:

- Following instruction/advice during and post treatment
- Advising practitioner of any relevant contraindications or potential complications to treatment
- Advising practitioner of compliance issues
- Commitment to the treatment plan

Treatment evaluation strategies may include:

- Discussing and reviewing of response to treatment
- Reviewing achievement of treatment goals
- Monitoring time-frame for achieving treatment goals

# 20. Provide Clinical Nutrition/Nutritional Medicine treatment

## **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA		
C20E1. Manage treatment	1 Explain the factors which e treatment	may interfere with the effectiveness of	
	2 Explain to the client the r the treatment	mode of administration and management	
	Request the client to mo quired	nitor reactions and contact practitioner as	
	4 Ensure appropriate conse	ent for treatment	
	5 Recognise and promptly eatment (adverse or otherwise	respond if necessary, to reactions to	
	6 Clearly explain time, loca	tion and content of future sessions	
	7 Document recommendat	ions	
	8 Provide treatment accord	ling to the treatment plan	
C20E2. Apply therapeutic techniques	1 Apply, recommend, dispe	ense or prescribe supplements or vitamins	
	2.2 Provide dietary modification recommendations and food therapy advice		
	3 Deliver nutritional treatn	nent according to regulations	
	2.4 Refer to or collaborate with other health care professionals as required		
C20E3. Advise and resource the client	3.1 Educate the client in relevant and practical dietary and nutritional information for promotion and maintenance of optimum health		
	2 Answer client queries wit	h clarity and using appropriate language	
	3.3 Use appropriate interpersonal skills when explaining Clinical Nutrition/Nutritional Medicine treatment plans and recommendations to the client		
	4 Promote client independ nerever possible	ence and responsibility in treatment	
	5 Provide counselling within mework when appropriate	n a Clinical Nutrition/Nutritional Medicine	
C20E4. Review treatment	1 Review progress with the	client	
	2 Identify and record effec	ts of previous treatment	
	Review previous Clinical an	Nutrition/Nutritional Medicine treatment	

#### PERFORMANCE CRITERIA

- 4.4 Evaluate the need for ongoing and/or additional treatment
- 4.5 Negotiate changes to the plan with the client to ensure optimal outcomes

## **Required Skills and Knowledge**

#### 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:

- Basic knowledge of nutrient-herb interactions
- Common disease states and functional problems of each bodily system and the principles and practice of treating each system/condition
- Contraindications of treatment
- Dosage principles
- Drug interactions
- Food-nutrient interactions
- How to correctly prepare and dispense nutritional supplements
- How to select best treatment/medicine within best current practice
- Medical reports and diagnostic procedures
- Methods of preparing treatment and management plans (knowledge and understanding)
- Nutrient-drug interactions
- Special diets and dietary modification procedures for the management of common disease states and functional problems relating to each body system
- Supplementary measures in the management of the conditions e.g. exercise and other healthy lifestyle practices
- Supplements and their excipients
- The active principles of the nutritional supplements used for each system/condition
- The correct preparations required for specific treatment
- The possible responses to treatments
- The potential of food as medicine in the management of health conditions
- The principles of formulation (including dosage and duration of treatment)

#### 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:

- Access and interpret up-to- date information on health practices and medicines
- Access reference material on the effects of current conventional drug therapies and their withdrawal
- Advise and resource the client
- Apply methods of treating and managing disease process of each system using Clinical Nutrition/Nutritional Medicine
- Apply Clinical Nutrition/Nutritional Medicine therapeutic techniques
- Develop and implement treatment plans to achieve optimal health, rehabilitation, or to improve quality of life which involve:
  - · appropriate preparation of client for treatment
  - complete documentation of all recommendations and client responses
  - demonstrated interpersonal skills
  - demonstration of the application of commonly used Clinical Nutrition/Nutritional Medicine treatment practices
  - incorporation of the philosophies and principles of the practice of Clinical Nutrition/Nutritional Medicine
  - provision of the safest, most efficacious and cost effective treatment method
  - provision of treatment in accordance with the individual, condition and presence of complicating factors.
  - provision of treatment in accordance with the treatment plan
  - review of treatment plan
  - treatment of a range of conditions/disease states
  - use of counselling within a Clinical Nutrition/Nutritional Medicine consultation as an aid to treatment
- Demonstrate communication skills including the ability to communicate with people from diverse cultural and linguistic backgrounds
- Demonstrate interpersonal and questioning skills
- Manage a Clinical Nutrition/Nutritional Medicine treatment
- Negotiate changes to the plan with the client
- Review the Clinical Nutrition/Nutritional Medicine treatment, evaluating the need for on-going treatment and the need for changes to the treatment plan
- Write referrals, appraisal letters for insurance companies and other documentation

## **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- 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
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - working within the practice framework
    - · performing a health assessment
    - assessing the client
    - planning treatment
    - · providing treatment

Context of and specific resources for assessment:

- Resources essential for assessment include:
  - an appropriately stocked and equipped clinic or simulated clinic environment
  - an appropriately stocked Clinical Nutrition/Nutritional Medicine dispensary
  - relevant texts, journals or medical manuals
  - relevant Clinical Nutrition/Nutritional Medicine software and online resources
  - relevant paper-based/video assessment instruments
  - skilled assessors

#### Method of assessment

- Observation in the workplace
- Practical demonstration
- Explanation of technique
- Written assignments/projects or questioning should be used to assess knowledge
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice.
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting. If successful, a second assessment is to be conducted during workplace application under direct supervision.
- Oral questioning
- · Role play simulation
- Client treatment logbooks

#### 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 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 consider relevant access and equity issues, relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and communities

#### Related units:

This unit should be assessed in conjunction with the following related units:

- 4: Analyse health information
- 5: Communicate effectively with clients
- 14: Manage the control of infection
- 16: Apply Clinical Nutrition/Nutritional Medicine diagnostic framework
- 17: Manage work within a clinical nutrition framework
- 18: Perform Clinical Nutrition/Nutritional Medicine health assessment
- 19: Plan the nutritional treatment strategy

## Range Statement

Factors which interfere with the effectiveness of treatment may include:

- Other medical treatment being undertaken
- Client physical and psychological readiness and/or wellness
- Cultural factors
- Contraindications to treatment
- Post treatment activity
- Client capability of implementing treatment plan (e.g. dietary changes, dosage maintenance)

Mode of administration may be:

- Oral
- Topical
- Rectal

Responses to reactions may include:

- Adjusting treatment accordingly
- Seeking appropriate expertise
- · Discussing reaction with the client
- Adhering to clinic guidelines for response to accidents and emergencies
- Using First Aid procedures according to St Johns, Australian Red Cross or other appropriate First Aid training
- Accessing local, emergency services

Appropriate consent for treatment refers to:

- Informed consent according to the local and national regulations and legal guidelines
- Treatment is given to minors/wards of state when only parent/guardian is present

Supplements or vitamins may include:

- Water soluble vitamins
- Fat soluble vitamins
- Minerals and trace elements
- Amino acids
- Enzymes
- Fatty acids (e.g. omega 3, omega 6)
- Food supplements (e.g. protein, soy, fibre, spirulina)
- Other nutrient supplements (e.g. flavonoids, amino sugars, carotenoids)

Dietary modification recommendations and food therapy advice may include:

- Weight modification diets
- Dietary modification for specified health conditions, disease prevention and for health enhancement
- Food allergy and sensitivity dietary modification
- Therapeutic use of foods for specified health conditions, disease prevention and for health enhancement

Regulations may include:

- Hygiene and infection control regulations
- WHS regulations
- Clinic or professional practice guidelines
- TGA regulations
- State or national legislation

Advise and resource the client refers to:

- Providing relevant literature or information materials
- Referring client to other information sources
- Providing advice regarding self-care
- Advising client of suggested resources
- Providing details which help to fully inform client of relevant information
- Providing referrals to other health professionals
- Availability of products, foods required or suggested for treatment

# 21. Provide specialised Clinical Nutrition/Nutritional Medicine treatment

### **Elements and Performance Criteria**

#### **ELEMENT**

#### PERFORMANCE CRITERIA

- C21E1. Manage the specialised Clinical Nutrition/Nutritional Medicine treatment
- 1.1 Select the most appropriate treatment strategy using a knowledge of [evidence based] *Clinical Nutrition/Nutritional Medicine principles and practices*
- 1.2 Consider factors which may interfere with the effectiveness of the treatment
- 1.3 Consider possible treatment reactions including contraindications
- 1.4 Consent for treatment is ensured
- 1.5 Recognise and promptly *respond to reactions* to treatment (adverse or otherwise) if necessary
- 1.6 Document assessments and recommendations
- 1.7 Provide treatment according to the specialised Clinical Nutrition/Nutritional Medicine treatment plan
- 1.8 Fully explain treatment to the client and respond to all enquiries
- 1.9 Use counselling skills as appropriate
- 1.10 Review the treatment plan and negotiate continuing care with the client
- C21E2. Provide specialised
  Clinical Nutrition/Nutritional
  Medicine treatment for
  children and adolescents
- 2.1 Obtain consent for treatment from the parent/caregiver/guardian
- 2.2 Assess client health according to standard guidelines relating to age
- 2.3 Develop a specialised Clinical Nutrition/Nutritional Medicine treatment plan according to findings
- 2.4 Implement the treatment plan
- C21E3. Provide specialised
  Clinical Nutrition/Nutritional
  Medicine treatment for
  women
- 3.1 Assess client health and welfare with special consideration given to conditions common to women
- 3.2 Conduct a physical examination with special regard to common conditions of women in various *life stages* and according to local and national regulations
- 3.3 Develop a specialised Clinical Nutrition/Nutritional Medicine treatment plan according to findings
- 3.4 Implement the treatment plan
- C21E4. Provide specialised
  Clinical Nutrition/Nutritional
  Medicine treatment for men
- 4.1 Assess client health and welfare with special consideration to conditions common to men

#### **ELEMENT**

#### PERFORMANCE CRITERIA

- 4.2 Conduct physical examination with special regard to common conditions of men relating to age and according to local and national regulations
- 4.3 Develop a specialised Clinical Nutrition/Nutritional Medicine treatment plan according to findings
- 4.4 Implement the treatment plan
- C21E5. Provide specialised nutritional medicine geriatric care
- 5.1 Take client history with special consideration to client memory, cognitive ability and care requirements
- 5.2 Conduct a physical examination with special regard to common conditions of ageing and according to local and national regulations
- 5.3 Develop a specialised Clinical Nutrition/Nutritional Medicine treatment plan is developed according to findings
- 5.4 Implement the treatment plan
- C21E6. Provide specialised
  Clinical Nutrition/Nutritional
  Medicine mental health care
- 6.1 Take client history with special consideration to client mental health and care requirements
- 6.2 Develop a specialised Clinical Nutrition/Nutritional Medicine treatment plan according to findings
- 6.3 Implement the treatment plan
- C21E7. Provide specialised Clinical Nutrition/Nutritional Medicine in a palliative care setting
- 7.1 Take client history with special consideration to client health and care requirements
- 7.2 Develop a specialised Clinical Nutrition/Nutritional Medicine treatment plan according to findings
- 7.3 Implement the treatment plan
- C21E8. Provide specialised
  Clinical Nutrition/Nutritional
  Medicine for diabetes care
- 8.1 Take client history with special consideration to client health and care requirements
- 8.2 Develop a specialised Clinical Nutrition/Nutritional Medicine treatment plan according to findings
- 8.3 Implement the treatment plan

## **Required Skills and Knowledge**

#### 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:

- A range of Clinical Nutrition/Nutritional Medicine therapies
- Basic knowledge of potential herb-nutrient and nutrient-nutrient interactions
- Common disease states and functional problems of each bodily system, and the principles and practice of treating each system/condition
- Contraindications of treatment
- Dietary modification strategies and food therapy
- How to select best treatment/medicine within best current practice
- Less common disease states and functional problems of groups in society with specific needs including, but not limited to infants, children, adolescents, elderly, peri- and post- menopausal, pregnant and lactating women
- Less common disease states and functional problems of the reproductive system of women and men
- Less common disease states and functional problems relating to mental health
- Lifestyle considerations and exercise
- Medical reports and diagnostic procedure
- Methods of preparing treatment and management plans (knowledge and understanding)
- Clinical Nutrition/Nutritional Medicine principles and practice
- Nutritional supplementation
- Potential drug-nutrient, drug-food interactions
- Relevant reference works and information sources
- · Research issues and their uses
- Research priorities
- Statistical analysis
- The correct preparations required for specific treatment
- The possible responses to treatments
- The principles of formulation (including dosage and duration of treatment)

#### 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:

- Access and critically evaluate reference material on the effects of current conventional drug therapies and their withdrawal
- Access and interpret up-to-date information
- Advise and resource the client
- Analyse a complex clinical problem utilising Clinical Nutrition/Nutritional Medicine model of clinical reasoning, and utilising literature review techniques to understand the nature of the problem and its management
- Apply specialised Clinical Nutrition/Nutritional Medicine therapeutic techniques to groups in the community with specific needs (e.g. infants, children, women, men, aged)
- Appropriately record details of client enquiries according to clinic guidelines
- · Communicate information through written or verbal media
- · Correctly identify client information needs
- Critically evaluate research
- Demonstrate age appropriate communication skills in a one-to-one and group setting
- Demonstrate communication skills including the ability to communicate with people from a diverse range of cultural and linguistic backgrounds
- Demonstrate interpersonal and questioning skills
- Discuss and determine 'level of concern' in relation to risk of complications, severity of disease process, lifestyle factors and their impact on treatment strategies, timeframe of treatment, and other factors
- Discuss, identify and effectively monitor 'high level of concern' clients
- Explain relevant services and case management program
- Extrapolate case study information to new cases
- Implement appropriate specialised Clinical Nutrition/Nutritional Medicine treatments for the prevention of health conditions associated with clients with special needs
- Integrate knowledge of the historical, theoretical and philosophical aspects of Clinical Nutrition/Nutritional Medicine into clinical practice
- Manage a specialised Clinical Nutrition/Nutritional Medicine treatment
- · Negotiate changes to the plan with the client
- Provide client with required information
- Provide treatment appropriate to age and specific needs of clients (e.g. mental health issues, palliation of signs and symptoms)
- Review the specialised Clinical Nutrition/Nutritional Medicine treatment, evaluating the need for ongoing treatment and the need for changes to the treatment plan
- Write referrals, appraisal letters for insurance companies and other documentation

## **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- 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
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - working within the practice framework
    - · performing a health assessment
    - assessing the client
    - planning treatment
    - · providing treatment

Context of and specific resources for assessment:

- Resources essential for assessment include:
  - an appropriately stocked and equipped clinic or simulated clinic environment
  - an appropriated stocked Clinical Nutrition/Nutritional Medicine dispensary
  - relevant texts journals or medical manuals
  - relevant paper-based/video assessment instruments
  - appropriate nutritional software and online resources
  - skilled assessors

#### Method of assessment

- Observation in the workplace
- Practical demonstration
- Written assignments/projects or questioning should be used to assess knowledge
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice.
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting. If successful, a second assessment is to be conducted during workplace application under direct supervision.
- Oral questioning, discussion and explanation of technique
- Role play simulation
- Client treatment logbooks

#### 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 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 consider relevant access and equity issues, relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and communities

Related units:

This unit should be assessed in conjunction with the following related units:

- 5: Communicate effectively with clients
- 20: Provide the Clinical Nutrition/Nutritional Medicine treatment

## Range Statement

Knowledge of Clinical Nutrition/Nutritional Medicines means:

- Clinical Nutrition/Nutritional Medicine principles
  - first do no harm
  - identify and treat the causes
  - treat the entire person as an individual
  - prevention is best
  - · educate the client
  - evidence based practice
  - individuality individuals have a unique interaction with their nutritional environment
- Clinical Nutrition/Nutritional Medicine practice
  - diet as therapy (health maintenance, therapeutic diets, dietary modification)
  - therapeutic application of special and functional foods (food as medicine)
  - cultural dietary perspectives
  - nutrient supplementation
  - individual unique dietary needs
- Behavioural and lifestyle strategies
- Using a high level of Clinical Nutrition/Nutritional Medicine knowledge
- to enable extrapolation of case study information to new cases
   Using research based evidence including literature reviews and critical assessment of research, as a tool in providing treatment
- Knowledge and understanding of Clinical Nutrition/Nutritional Medicine treatment of potential conditions/disease states of groups in society with specific needs
- Applying recommending, dispensing or prescribing diets, foods as medicine, supplements and vitamins
- All treatment or care delivered meets the requirements of relevant legislation and regulations
- Collaborating with or referring to other health care professionals as required

Factors which interfere with the effectiveness of treatment may include:

Specialised Clinical

treatment includes:

Nutrition/Nutritional Medicine

- Other medical treatment being undertaken
- Client physical and psychological readiness and/or wellness
- Cultural factors
- Contraindications to treatment
- Post treatment activity
- Client capability of implementing treatment plan (e.g. dietary changes, dosage maintenance)

Responses to reactions may include:

- Adjusting treatment accordingly
- Seeking appropriate expertise
- Discussing reaction with the client
- Adhering to clinic guidelines for response to accidents and emergencies
- Using of First Aid procedures according to St Johns, Australian Red Cross or other appropriate First Aid training
- Accessing local emergency services

Consent for treatment refers to:

- Informed consent according to the local and national regulations and legal guidelines
- Treatment is given to minors/wards of state when only parent/guardian is present

Response to enquiries may include:

- Providing (or directing to) information material
- Answering questions
- · Following up with further information
- Providing of referrals

The treatment plan may include:

- Prescription of nutritional supplements and vitamins
- Dispensing of extemporaneous preparations

Assessment of client health may include:

- Antenatal, birth and post-natal period information, Apgar score, birth weight and feeding method and frequency
- Family history, maternal and paternal
- Growth and growth patterns
- · Height, weight and head circumference measurements
- Changes in the pattern of growth over a series of measurements
- Recognise major milestones in development
- Relate the major milestones in personal and social skills fine motor skills, general motor skills and language development to a simplified standard milestone chart

Life stages refers to:

- Neonate (birth to 28 days)
- Children
- Adolescence (puberty to adulthood)
- Adulthood
- Old Age
- Pregnancy and post-natal period for women
- Peri-menopausal and post-menopausal state for women

# 22. Prepare and dispense nutritional/dietary supplements

## **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA	
C22E1. Prepare the medicine	1.1	Identify and prepare pharmaceutical ingredients and equipment
	1.2 guidei	Prepare medicine according to nutritional and dietary supplement lines and methodology
	1.3 guidei	Prepare nutritional and dietary supplements according to clinic lines
	1.4 supple	Take care to prevent contamination of the nutritional and dietary ements
	1.5	Label nutritional and dietary supplements and store correctly
C22E2. Dispense the medicine	2.1	Identify and prepare ingredients and equipment for dispensing
	2.2 form a	Dispense the required nutritional and dietary supplements in the and quantity stipulated by the prescription/order
	2.3 dietar	Take care to prevent contamination of or by the nutritional and y supplements
	2.4	Label the nutritional and dietary supplements correctly
	2.5 supple	Provide instructions for taking the nutritional and dietary ements to the client.
	2.6	Identify and explain factors that may influence storage
	2.7 clinic	Dispense the nutritional and dietary supplements according to guidelines
C22E3. Control Stock	3.1	Obtain required materials from acceptable sources
	3.2	Keep the pharmacy well stocked according to clinic guidelines
	3.3	Identify factors that may influence storage
	3.4	Store materials according to clinic guidelines
C22E4. Complete documentation	4.1	Record information according to clinic guidelines
	4.2	Label materials correctly.

## **Required Skills and Knowledge**

#### 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:

- Equipment and instrumentation components, purpose and operation
- Hygiene standards
- Legal requirements relating to the prescription of medicine
  - Australian Drug Reactions Advisory Committee (ADRAC) now a function of the Pharmacovigilance Branch
  - TGA labelling requirements
  - legal restrictions/restricted substances
  - · WHS hazards and controls
  - principles of manufacturing
  - quality control procedures
  - Recommended Dietary Intake (RDI) for use in Australia
  - regulations controlling medicines and poisons. individual acts and regulations can vary from one state or territory to another
  - Therapeutic Goods Administration (TGA) guidelines
- Nutritional and dietary supplement and drug interactions
- Nutritional and dietary supplement preparation from source materials
- Nutritional and dietary supplement product identification
- Nutritional and dietary supplements dispensing principles and methods
- Nutritional and dietary supplements in pregnancy
- Recording requirements and procedures
- The Drugs/Nutritional Supplements prohibited for use in sport in Australia
- The factors that affect nutritional and dietary supplements in preparation and storage
- The nutritional and dietary supplement pharmacy
- Waste handling requirements and procedures

#### 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:
- Correctly identify equipment and ingredients for nutritional and dietary supplement preparation and dispensing
- Identify nutritional and dietary supplements in accordance with clinic guidelines and relevant legislation
- Maintain work area to meet clinic standards
- Monitor the dispensing process and equipment operation out of specification results or non-compliance and may include:

- carrying out routine maintenance
- cleaning and sanitising equipment
- equipment faults
- labelling
- material faults
- measuring devices
- service faults
- stock flow/quantity
- Record information

Sort, collect, treat, recycle or dispose of waste, considering opportunities to address waste minimisation, environmental responsibility and sustainable practice issues

## **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Consistency of performance should be demonstrated over a range of workplace situations
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- Evidence is required of both knowledge and skills application
- 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
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - · integrated assessment including:
    - working within the practice framework
    - performing a health assessment
    - assessing the client
    - planning treatment
    - providing treatment

#### 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 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 consider relevant access and equity issues, relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and communities

# Context of and specific resources for assessment:

- An appropriately stocked and equipped clinic or simulated clinic environment
- Dispensing resources meet infection control standards.
- Relevant texts or medical manuals
- Appropriate assessment environment for a primary contact healthcare practitioner
  - providing client privacy
  - adequate lighting and ventilation
  - easy access
  - practical access to amenities
- Appropriately skilled assessors
- Method of assessment may
- Observation in the workplace
- Written assignments/projects or questioning should be used to assess knowledge
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting (laboratory/dispensary). If successful, a second assessment is to be conducted during workplace application under direct supervision

Related units:

include:

This unit should be assessed in conjunction with the following related units:

- 5: Communicate effectively with clients
- 14: Manage the control of infection

## Range Statement

- Pharmaceutical ingredients and equipment may include but is not limited to:
- Medicinal substance, which may be of animal, mineral, vegetable, or chemical source.
- Lactose powder or globules
- Medicating alcohol
- Distilled water
- Mortar and pestle
- Measuring equipment
- Sterile containers
- Labels
- · Protective clothing

Nutritional and dietary supplement guidelines and methodology may include but is not limited to:

- Nutritional and dietary supplement theory
- Legal restrictions
  - Therapeutic Goods Administration (TGA)
  - restricted/scheduled substances
  - WHS
- Principles of manufacturing nutritional and dietary supplements
- Labelling requirements
- Testing of nutritional and dietary supplements

Care is taken to prevent contamination means:

- One medicine is used at a time
- Medicines are made and prepared over an impervious surface
- Medicines which have contact with contaminates are discarded.
- The workplace is well ventilated with adequate lighting

Labelled correctly means:

- According to legislative guidelines
- According to clinic requirements

Acceptable sources include:

- Nutritional and Dietary Supplement suppliers listed in the Therapeutic Goods Administration,
- Other domestic suppliers within Australia, or
- Reputable overseas suppliers.

Factors which may influence the storage include:

- Heat above 50 c
- Prolonged exposure to sunlight

Workplace information may include:

- Details of preparation and dispensing undertaken
- Date the prescription was written
- Stock documentation
- Details of person(s) conducting preparation and dispensing
- Practitioner who wrote the prescription
- Dispensing information for prescriptions (administration instructions)
- Warnings concerning the prescription.

Instructions for taking Nutritional and dietary supplements refer to:

- Mode of administration, e.g. external or internal
- Frequency of administration
- Factors which may interfere with the Nutritional and dietary supplements, e.g. Concurrent use of allopathic medications
- The need to report incidences to the prescribing Nutritional and dietary practitioner

Clinic guidelines may include:

- WHS guidelines
- Quality system guidelines
- Dispensing procedure
- · Hygiene and waste guidelines
- Stock and storage procedures

Dispensed ingredients and equipment may include:

- Measuring equipment
- Sterile containers
- Labels
- Protective clothing

The form of the medicine may include:

- Powder
- Tablet
- Liquid (not liquid herbs)
- Food

## 23. Provide dietary advice

### **Elements and Performance Criteria**

	ELEMENT	PERFO	RMANCE CRITERIA
	C23E1. Identify appropriate dietary modifications	1.1	Identify nutrient deficiencies
		1.2	Determine the influence of exogenous factors on nutritional status
		1.3	Design dietary modifications appropriate for the client
		1.4	Address appropriate cultural factors
		1.5	Address appropriate lifestyle factors
		1.6	Justify proposed dietary modifications
	C23E2. Negotiate dietary change with client	2.1	Communicate proposed dietary changes to client
		2.2	Explain reasons for dietary modification
		2.3	Obtain feedback from client regarding proposed dietary changes
		2.4	Implement dietary changes in a manner acceptable to the client

## **Required Skills and Knowledge**

#### 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:

- Knowledge of biomedical sciences i.e. anatomy and physiology, pathology, biochemistry, pharmacology
- Contra-indications for recommendations
- · Cultural diets and restrictions
- Nutrition principles
- The nutritional components of food in common diets
- Treatment of the individual as the overriding principle of Clinical Nutrition/Nutritional Medicine ... any treatment plan is expected to reflect this ideal in its design and implementation

#### 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:

- · Assess nutritional needs and determine the most appropriate modifications to the client's diet
- · Assess the nutritional value of food components in common diets
- · Demonstrate critical reasoning skills
- Demonstrate problem solving skills
- Determine the dietary requirements for basic health.
- Determine the potential impact of recommendations on the individual
- · Discuss basic dietary changes with the client
- Ensure all treatment care delivered is appropriate to relevant legislature and regulatory requirements
- Establish the stage of development of a condition or disease state
- Identify the signs and symptoms of the associated with nutritional inadequacies
- Modify diet with consideration to cultural, lifestyle factors and the capacity of the client to implement the recommendations
- Perform a dietary intake analysis

## **Evidence Guide**

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 the workplace or a simulated workplace (defined as a supervised clinic) is essential for assessment of this unit
- Consistency of performance should be demonstrated over a range of workplace situations
- Assessment may contain both theoretical and practical components and examples covering a range of clinical situations
- Evidence is required of both knowledge and skills application
- 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
- Assessment must be undertaken by an assessor who has skills and knowledge to the standard required for recognition by an appropriate peak body
- Assessment of sole practitioners must include a range of clinical situations and different client groups covering at minimum, age, culture and gender
- Assessment of sole practitioners must consider their unique workplace context, including:
  - interaction with others in the broader professional community as part of the sole practitioner's workplace
  - scope of practice as detailed in the qualification and component competency units
  - integrated assessment including:
    - working within the practice framework
    - · performing a health assessment
    - assessing the client
    - planning treatment
    - providing treatment

Context of and specific resources for assessment:

- An appropriately stocked and equipped clinic or simulated clinic environment
- Relevant texts or medical manuals
- Relevant paper-based/video assessment instruments
- Appropriate assessment environment
- Skilled assessors

Method of assessment

- Observation in the workplace
- Written assignments/projects or questioning should be used to assess knowledge
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice.
- Clinical skills involving direct client care are to be assessed initially in a simulated clinical setting. If successful, a second assessment is to be conducted during workplace application under direct supervision.
- Explanations of technique

#### 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 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 consider 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**

Nutrient deficiencies must include:

- Macro nutrients (protein, carbohydrate, lipid)
- Vitamins
- Minerals

Exogenous factors may include:

- Food additives
  - intentional
  - non-intentional
- Pollution
- Socio-economic factors.
- Local food availability
- Climate

Dietary modifications may include:

- Reduction of some foods or food groupings
- Inclusion of some foods or food groupings
- Increased consumption of some foods or food groupings
- Decreased consumption of some foods or food groupings

Cultural factors must include:

- Religious restrictions
- Dietary choices e.g. vegetarians, vegan

# 24. Participate in workplace health and safety

# **Elements and Performance Criteria**

ELEMENT	PERFORMANCE CRITERIA			
Elements define the essential outcomes.	Performance criteria specify the level of performance needed to demonstrate achievement of the element.			
C24E1. Follow safe work practices	1.1 Follow workplace policies and procedures for safe work practices			
	1.2 Identify existing and potential hazards in the workplace, report them to designated persons, and record them according to workplace procedures			
	1.3 Follow workplace emergency procedures			
C24E2. Implement safe work practices	2.1 Identify and implement WHS procedures and work instructions			
	2.2 Identify and report incidents and injuries to designated persons according to workplace procedures			
	2.3 Take actions to maintain safe housekeeping practices in own work area			
C24E3. Contribute to safe work practices in the workplace	3.1 Raise WHS issues with designated persons according to organisational procedures			
	3.2 Participate in workplace safety meetings, inspections and consultative activities			
	3.3 Contribute to the development and implementation of safe workplace policies and procedures in own work area			
C24E4. Reflect on own safe work practices	4.1 Identify ways to maintain currency of safe work practices regarding workplace systems, equipment and processes in own work area			
	4.2 Reflect on own levels of stress and fatigue, and report to designated persons according to workplace procedures			

## **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 demonstrated evidence that the candidate has completed the following tasks at least once in line with state/territory WHS regulations, relevant codes of practice and workplace procedures:

- contributed to a WHS meeting or inspection in workplace
- conducted a workplace risk assessment and recorded the results
- consistently applied workplace safety procedures in the day-to-day work activities required by the job role
- followed workplace procedures for reporting hazards
- followed workplace procedures for a simulated emergency situation.

# **Knowledge Evidence**

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- state/territory legislation and how it impacts on workplace regulations, codes of practice and industry standards, including:
  - state/territory WHS authorities
  - rights and responsibilities of employers and workers, including duty of care
  - hazardous manual tasks
  - infection control
- safety signs and their meanings, including signs for:
  - · dangerous goods classifications
  - emergency equipment
  - personal protective equipment (PPE)
  - specific hazards such as sharps, radiation
- hazard identification, including:
  - · definition of a hazard
  - common workplace hazards relevant to the industry setting
  - workplace procedures for hazard identification
- workplace emergency procedures
- workplace policies and procedures for WHS

## **Assessment Conditions**

#### Skills must be demonstrated:

in the workplace

#### OR

• in an environment that provides realistic in-depth industry validated scenarios and simulations to assess candidates' skills and knowledge.

#### Assessment must ensure use of:

- · current workplace policies and procedures for WHS
- PPE relevant to the workplace and job role of the worker

# 25. Engage in Public Health Nutrition (based on Nutrition Science specialist competency: Public Health Nutrition)

## **Elements and Performance Criteria**

#### **ELEMENT**

Elements define the essential outcomes.

C25E1.Demonstrate an understanding, evaluate, and apply public health nutrition knowledge to a high level.

#### PERFORMANCE CRITERIA

Performance criteria specify the level of performance needed to demonstrate achievement of the element.

- 1.1 Investigate new and emerging issues relating to health and, food and nutrition in the global, national, and local level context.
- 1.2 Use appropriate health, nutrition and behaviour change theories, education, and health promotion to improve nutrition outcomes for groups that are equitable and sustainable.
- 1.3 Investigate psychological, sociological, and political factors that influence food choice in a variety of population groups globally, nationally, and locally.
- 1.4 Analyse and interpret epidemiological concepts and data relating to the nutritional status of populations and aetiology of nutritional related disease.
- 1.5 Design a public health nutrition program or project, selecting appropriate methods for monitoring and evaluating effectiveness and efficiency, including delivery of milestones.

#### **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 public health nutrition role.

# **Knowledge Evidence**

The candidate must be able to demonstrate the knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks, and manage contingencies in the context of the public health nutrition role.

## **Assessment Conditions**

Individual or group assignment(s) that explicitly demonstrate public health nutrition elements and performand criteria.	ce