



**SKILLSIQ**

CAPABLE PEOPLE MAKE CLEVER BUSINESS

# **Clinical Coding Validation Guide**

**June 2020**



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## Introduction

SkillsIQ is a not-for-profit Skills Service Organisation (SSO) supporting industry in developing standards to equip the 'people-facing' workforce with the right skills for jobs now and into the future. SkillsIQ is funded by the Department of Education, Skills and Employment to support the Industry Reference Committees (IRCs) responsible for the development and maintenance of Training Packages in the following sectors:

- Community Services
- Health
- Local Government
- Public Sector
- Floristry
- Hairdressing and Beauty Services
- Funeral Services
- Retail Services
- Sport, Fitness and Recreation
- Tourism, Travel and Hospitality.

## Project Background

The update of existing nationally recognised Clinical Coding Units of Competency and the development of a new entry-level Clinical Coding qualification, to be packaged within the HLT Health Training Package, has been commissioned by the Australian Industry and Skills Committee (AISC) under the direction of the Technicians Support Services IRC.

The following key areas have been considered during the Training Package development process:

- Clinical coders have access to appropriate skills and knowledge, in order to meet the current and future needs of the Australian health care system
- Employers have access to more job-ready graduates who require less on-the-job mentoring and have acquired the minimum level of competency to allow them to begin work at an entry level in any jurisdiction
- The creation of a consistent standard of practice for clinical coders.

### Technical Advisory Committee

To inform the development of a new Clinical Coding qualification, eight new Units of Competency and the update of three existing Clinical Coding Units of Competency, a Clinical Coding Technical Advisory Committee (TAC) was formed to support the objectives of the project.

The Clinical Coding TAC worked on updating three existing Units of Competency, developing one qualification, one skill set and eight Units of Competency that were released for public consultation in December 2019.

This paper summarises the feedback received during Draft 1 public consultation and highlights key changes to the qualification, skill set and Units (the original eight new Units have now been reduced to **seven**) which have been reflected in Draft 2.

## Draft 1

National consultation on Draft 1 was open from 4<sup>th</sup> November 2019 to 13<sup>th</sup> December 2019. It was promoted across SkillsIQ's networks and stakeholders and the Technicians Support Services IRC members' networks.

Draft 1 of the qualification, skill set and eleven Units of Competency were published and made available via [SkillsIQ's Online Feedback Forum](#). A Consultation Guide was also included on the Feedback Forum for individuals to download and review. Overall, the Feedback Forum received 616 unique views during the consultation period.

In addition to collecting feedback via the Feedback Forum, consultation activities comprised seven workshops and two webinars held during November 2019.

On completion, TAC members met to analyse and discuss feedback received on Draft 1 and determined actions for the development of Draft 2.

## Draft 2 Validation and Timelines

Feedback reviewed during the Draft 1 consultation period has informed the development of Draft 2. Validation of Draft 2 allows stakeholders to review changes made to the Draft 1 components and confirm that the resultant Training Package Products meet their needs. It provides an opportunity for final input prior to submission for endorsement.

National validation of Draft 2 will be open from **Friday, 12<sup>th</sup> June to Monday, 6<sup>th</sup> July 2020**. During this period input will be sought on the following:

- One qualification
- One skill set
- Ten Units of Competency.

Following the close of validation, feedback will be collated and evaluated by the TAC and IRC. This feedback will inform the development of the final draft for submission.

## Webinars

SkillsIQ will host a series of webinars to seek stakeholder input. To register your interest in attending a webinar, please click on one of the links below.

Webinar 1: **Wednesday, 17<sup>th</sup> June, 11.00am–12:00pm**

[Clinical Coding Draft 2 Validation - Webinar 1](#)

Webinar 2: **Wednesday, 24<sup>th</sup> June, 11.00am–12:00pm**

[Clinical Coding Draft 2 Validation - Webinar 2](#)

Webinar 3: **Wednesday, 1<sup>st</sup> July, 11.00am–12:00pm**

[Clinical Coding Draft 2 Validation - Webinar 3](#)

## Online Feedback Forum

Feedback can be provided online via the SkillsIQ Online Feedback Forum. The Feedback Forum is a tool designed to capture stakeholder feedback on draft Training Package Products. It also provides an opportunity for stakeholders to view feedback left by others.

To access the Feedback Forum, please [click here](#).

For information on how to use the Feedback Forum, please [click here](#).

## About this Validation Guide

This guide, which should be read in conjunction with the Draft 2 Training Package Products, provides:

- A summary of the proposed changes from Draft 1 to Draft 2
- The draft qualification
- The draft skill set
- A list of Draft 2 Units of Competency and associated prerequisites
- Mapping of Draft 2 Units to existing HLT versions
- An explanation of the contents of the Units of Competency and Assessment Requirements found in **Appendix A**.

This guide does not include Draft 2 Training Package components. These can be accessed via the Feedback Forum link above.

## Contact Details

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# Summary of Changes - Draft 1 to Draft 2

## General Issues

A number of general issues were raised in stakeholders' comments, and a diverse range of viewpoints was expressed.

The following table outlines the main points raised in Draft 1 consultation and the ways in which they have been addressed.

Component/s	Change to Draft 2
<b>Qualification</b>	
<b>HLT50320 Diploma of Clinical Coding</b>	
Packaging Rules	Feedback suggested that the content of <i>HLTCCD005 Apply principles of privacy and confidentiality in health care</i> should be incorporated with <i>HLTCCD002 Interpret and navigate health care records</i> . As a result, the packaging rules have been revised.  Packaging rules for Draft 1 included nine core Units. Draft 2 has been updated to include eight core Units.
<b>Skill Set</b>	
<b>HLTSS00070 Clinical Coding Auditor Skill Set</b>	
Units of Competency	Unit codes updated.
<b>Units of Competency</b>	
<b>General</b>	
Terminology	References to 'health professionals' have been revised to 'health care professionals' throughout all the Units of Competency, for consistency.
	References to 'medical record' have been revised to 'health care record' throughout all the Units of Competency, for consistency.
	References to 'paper-based' have been revised to 'hard copy' throughout all the Units of Competency, for consistency.
	References to 'digital' have been revised to 'electronic' throughout all the Units of Competency, for consistency.
Additional Changes to Specific Units	All Unit codes have been updated.

## Units of Competency

More detail can be found in the Mapping section below.

Titles	The title of <i>HLTCCD001 Work effectively in a clinical coding setting</i> has been changed to <i>HTLCCD001 Understand the role of clinical coding within the health care system</i> to better describe the applicable environment.
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Application Statements	Some application statements have been changed to better clarify the intent of the Unit.
Prerequisites	Prerequisites have been updated to ensure requirements for underpinning knowledge and skills have been met.
Elements and Performance Criteria (PC)	<p>Elements and Performance Criteria for all the Units have been refined to incorporate better technical language.</p> <p>The following Units have been updated with either additional or fewer Elements and Performance Criteria:</p> <ul style="list-style-type: none"> <li>• <b>HLTCCD001 Understand the role of clinical coding within the health care system</b> <ul style="list-style-type: none"> <li>○ Element and Performance Criteria added to include content to 'analyse impact of patient journeys on clinical coding'</li> <li>○ Element and Performance Criteria on 'to identify the usage of coded clinical data in accordance with the regulatory framework' transferred from Unit <i>HLTCCD006 Undertake basic clinical coding</i>.</li> </ul> </li> <li>• <b>HLTCCD002 Interpret and navigate health care records</b> <ul style="list-style-type: none"> <li>○ A new element and Performance Criteria added to include content on 'maintaining confidentiality and privacy of health care information'.</li> </ul> </li> <li>• <b>HLTCCD005 Abstract information for clinical coding</b> <ul style="list-style-type: none"> <li>○ Element and Performance Criteria relating to clarifying coding queries have been transferred to Unit <i>HLTCCD007 Undertake moderately complex clinical coding</i>.</li> </ul> </li> <li>• <b>HLTCCD006 Undertake basic clinical coding</b> <ul style="list-style-type: none"> <li>○ Element on 'to identify the usage of coded clinical data in accordance with the regulatory framework' transferred to <i>HLTCCD001 Understand the role of clinical coding within the health care system</i>.</li> </ul> </li> <li>• <b>HLTCCD007 Undertake moderately complex clinical coding.</b> <ul style="list-style-type: none"> <li>○ Element and Performance Criteria relating to clarifying coding queries have been transferred from Unit <i>HLTCCD005 Abstract information for clinical coding</i></li> <li>○ New Element and Performance Criteria added to include content on 'participating in clinical coding audits'.</li> </ul> </li> <li>• <b>HLTCCD009 Undertake a clinical coding audit</b> <ul style="list-style-type: none"> <li>○ Element updated to include content on 'planning future audit program'.</li> </ul> </li> </ul>
Foundation Skills	<p>The following statement has been inserted into all the Units to acknowledge evidence of Foundation Skills:</p> <ul style="list-style-type: none"> <li>• 'Foundation skills essential to performance are explicit in the Performance Criteria of this Unit of Competency'.</li> </ul>
Performance Evidence	Performance Evidence tasks for all the Units have been reworded to provide clarity on the requirements.

	<p>Additional Performance Evidence tasks have been added to the following Units to ensure Assessment provides more reliable outcomes.</p> <ul style="list-style-type: none"> <li>• <b>HLTCCD003 Use medical terminology in health care</b> <ul style="list-style-type: none"> <li>○ Tasks related to the ‘Use of medical terminology, abbreviations and acronyms for each structure and body system including seventeen different types of specialities’ has been added to clarify assessment requirements.</li> </ul> </li> <li>• <b>HLTCCD004 Establish knowledge of anatomy and physiology in a health care setting</b> <ul style="list-style-type: none"> <li>○ Tasks related to ‘sourcing and interpreting information on diseases or conditions affecting each human body system including nineteen different types of specialities’ have been added to clarify Assessment Requirements.</li> </ul> </li> <li>• <b>HLTCCD005 Abstract information for clinical coding</b> <ul style="list-style-type: none"> <li>○ Tasks related to ‘accessing and interpreting clinical information from five health care records for each body system including nineteen different types of specialities’ has been added to clarify Assessment Requirements.</li> </ul> </li> <li>• <b>HLTCCD006 Undertake basic clinical coding</b> <ul style="list-style-type: none"> <li>○ Tasks related to ‘using current coding manuals and standards to produce accurate and complete coded clinical data from basic health care records’ have been updated to include ‘for at least <b>ten</b> episodes of care’ for each of the nineteen listed specialities</li> <li>○ Scope of <b>basic health care records</b> clarified.</li> </ul> </li> <li>• <b>HLTCCD007 Undertake moderately complex clinical coding</b> <ul style="list-style-type: none"> <li>○ Scope of <b>moderately complex health care records</b> clarified</li> <li>○ Tasks related to ‘participating in clinical coding audits’ added.</li> </ul> </li> <li>• <b>HLTCCD008 Undertake highly complex clinical coding</b> <ul style="list-style-type: none"> <li>○ Tasks relating to ‘using current coding manuals and standards to produce accurate and complete coded clinical data from highly complex health care records’ have been clarified to include ‘for at least <b>five</b> episodes of care’ for each of the nineteen listed specialities</li> <li>○ Scope of <b>highly complex health care records</b> clarified.</li> </ul> </li> <li>• <b>HLTCCD009 Undertake a clinical coding audit</b> <ul style="list-style-type: none"> <li>○ Tasks relating to ‘performing an audit’ clarified to quantify the number of episodes of care in terms of ‘50 episodes of care’ including: <ul style="list-style-type: none"> <li>▪ 25 moderately complex</li> <li>▪ 5 highly complex.</li> </ul> </li> </ul> </li> <li>• <b>HLTCCD010 Analyse and report for clinical coding auditing</b> <ul style="list-style-type: none"> <li>○ Tasks related to ‘conducting an audit and producing a report’ updated to include ‘at least 50 episodes of care, percentage error rate and feedback for improvements’.</li> </ul> </li> </ul>
Knowledge Evidence	Knowledge content has been refined to incorporate better technical language.



	<p>Additional knowledge has been added to the following Units to ensure Assessment provides more efficient outcomes.</p> <ul style="list-style-type: none"> <li>• <b>HLTCCD001 Understand the role of clinical coding within the health care system</b> <ul style="list-style-type: none"> <li>○ Content related to 'uses of coded data, understanding of registered clinical disciplines and understanding of national and state/territory agreement and legislation relevant to clinical coding' has been added.</li> </ul> </li> <li>• <b>HLTCCD002 Interpret and navigate health care records</b> <ul style="list-style-type: none"> <li>○ Content on 'maintaining confidentiality and privacy of health care records' has been added.</li> </ul> </li> <li>• <b>HLTCCD005 Abstract information for clinical coding</b> <ul style="list-style-type: none"> <li>○ Knowledge of 'abstracting methods' has been added.</li> </ul> </li> <li>• <b>HLTCCD007 Undertake moderately complex clinical coding</b> <ul style="list-style-type: none"> <li>○ Knowledge related to 'participating in clinical coding audits' has been added.</li> </ul> </li> <li>• <b>HLTCCD008 Undertake highly complex clinical coding</b> <ul style="list-style-type: none"> <li>○ Content related to 'mentoring and supervision skills applicable to the clinical coding environment' has been added.</li> </ul> </li> <li>• <b>HLTCCD009 Undertake a clinical coding audit</b> <ul style="list-style-type: none"> <li>○ Content related to 'understanding financial implications of clinical coding' has been added.</li> </ul> </li> <li>• <b>HLTCCD010 Analyse and report for clinical coding auditing</b> <ul style="list-style-type: none"> <li>○ Content related to 'providing constructive feedback to appropriate stakeholders' has been added.</li> </ul> </li> </ul>
Assessment Conditions	<p>Wording of Assessment Conditions has been reviewed to ensure consistency and understanding.</p> <p>Scope of health care records clarified in all the Units of Competency.</p>

## Questions for Consideration

The following series of questions has been developed to guide feedback for Draft 2 of the Clinical Coding Training Package Products.

### Suite of Units of Competency

- Are the packaging rules for the core composition of Units attainable at a Diploma level?
- Are all draft Units required? Should any be deleted?
- Are there any essential prerequisites that should be nominated?
- Are there any additional Units of Competency required?

### Titles and Application Statements - Units of Competency

- Does the Title reflect the skill being described? Could any Title be changed to better indicate what the Unit covers?

- Does the Application Statement provide a clear and accurate description of the skill being described?

### Elements and Performance Criteria

- Do the Elements and Performance Criteria accurately describe what people do in Clinical Coding job roles? If not, what could be added?
- Do the Performance Criteria adequately describe the level of proficiency?

### Performance Evidence

- Would the types of evidence prove that a person is competent in all the Unit outcomes, including Performance Criteria, Foundation Skills and Knowledge?
- Is the suggested volume (sufficiency) of evidence appropriate? Too little, too much?
- Are the statements clear? Would assessors understand exactly what they must do?

### Knowledge Evidence

- What is the essential knowledge required of an individual in order to perform the tasks described in the Performance Criteria? Is the Knowledge Evidence requirement specific enough?
- Is there anything which should be added or deleted?
- What is the breadth and depth of knowledge required? Is this described well enough to assist assessors in understanding the scope?

### Assessment Conditions

- Are the nominated environments appropriate?
- Are the statements clear? Would assessors understand what they must provide for assessment?

## Draft 2 Qualification, Skill Set and Units of Competency

### Qualification

Previous Qualification Code and Title	New Qualification Code and Title	Comment in Relation to Qualification E = equivalent N = not equivalent
	<i>HLT50320 Diploma of Clinical Coding</i>	New qualification

### Skill Set

HLTSS000XX – Clinical Coding Auditor Skill Set		
Unit Code	Unit Name	Prerequisites
HLTCCD008	<i>Undertake highly complex clinical coding</i>	<i>HLTCCD007 Undertake moderately complex clinical coding</i>
HLTCCD009	<i>Undertake a clinical coding audit</i>	<i>HLTCCD008 Undertake highly complex clinical coding</i>
HLTCCD010	<i>Analyse and report for clinical coding auditing</i>	<i>HLTCCD009 Undertake a clinical coding audit</i>

### Units

Previous Unit Code and Title	New Unit Code and Title	Comment in Relation to Unit E = equivalent N = not equivalent
	<i>HLTCCD001 Understand the role of clinical coding within the health care system</i>	New Unit
	<i>HLTCCD002 Interpret and navigate health care records</i>	New Unit
	<i>HLTCCD003 Medical terminology in health care</i>	New Unit
	<i>HLTCCD004 Establish knowledge of anatomy and physiology in a health care setting</i>	New Unit

Previous Unit Code and Title	New Unit Code and Title	Comment in Relation to Unit E = equivalent N = not equivalent
	<i>HLTCCD005 Abstract information for clinical coding</i>	New Unit
<i>HLTADM005 Produce coded clinical data</i>	<i>HLTCCD006 Undertake basic clinical coding</i>	N Unit code updated Changes to Unit title, Elements, Performance Criteria, Performance Evidence, Knowledge Evidence and Assessment Conditions
<i>HLTADM006 Undertake complex clinical coding</i>	<i>HLTCCD007 Undertake moderately complex clinical coding</i>	N Unit code updated Changes to Unit title, Elements, Performance Criteria, Performance Evidence, Knowledge Evidence and Assessment Conditions
<i>HLTADM007 Complete highly complex clinical coding</i>	<i>HLTCCD008 Undertake highly complex clinical coding</i>	N Unit code updated Changes to Unit title, Elements, Performance Criteria, Performance Evidence, Knowledge Evidence and Assessment Conditions
	<i>HLTCCD009 Undertake a clinical coding audit</i>	New Unit
	<i>HLTCCD010 Analyse and report for clinical coding auditing</i>	New Unit

## Mapping of Draft 2 Units to Existing HLT Versions

### Determination of Equivalence

A unit is mapped as equivalent (E) when it provides the same skill and knowledge outcomes, as follows:

- Elements and Performance Criteria are the same, but are re-ordered and or expressed differently for clarity
- Knowledge Requirements are the same but are expressed differently for clarity.

A Unit is mapped as not equivalent (N) when it provides different skill and knowledge outcomes, as follows:

- Elements and/or Performance Criteria have been added or removed
- Knowledge Requirements have been added or removed.

Significant changes have been made to the three Units which have been mapped as **not equivalent**. This is a consequence of changes made in response to considerable concerns about the content of existing Units.

HLT Unit Code	HLT Unit Title	HLT Draft 2 Unit Code	HLT Draft 2 Unit Title	Draft 2 Comments	E/N
HLTADM005	Produce coded clinical data	HLTCCD006	Undertake basic clinical coding	<ul style="list-style-type: none"> <li>• Unit code updated</li> <li>• Unit title changed</li> <li>• Elements and Performance Criteria: <ul style="list-style-type: none"> <li>○ Elements and Performance Criteria updated in terms of clarity.</li> <li>○ Element on 'to identify the usage of coded clinical data in accordance with the regulatory framework' transferred to <i>HLTCCD001 Understand the role of clinical coding within the health care system.</i></li> <li>○ New Performance Criterion 3.5 added.</li> </ul> </li> </ul>	N

HLT Unit Code	HLT Unit Title	HLT Draft 2 Unit Code	HLT Draft 2 Unit Title	Draft 2 Comments	E/N
				<ul style="list-style-type: none"> <li>Performance Evidence: <ul style="list-style-type: none"> <li>Performance Evidence tasks have been reworded to provide clarity on the requirements.</li> <li>Tasks related to 'using current coding manuals and standards to produce accurate and complete coded clinical data from basic health care records' have been updated to include 'for at least ten episodes of care' for each of the nineteen listed specialities.</li> <li>Scope of basic health care records clarified.</li> </ul> </li> <li>Knowledge Evidence: <ul style="list-style-type: none"> <li>Knowledge content has been refined to incorporate better technical language.</li> <li>Knowledge related to 'relevant coding classifications standards and conventions for a list of body systems and specialities' has been added.</li> </ul> </li> <li>Assessment Conditions: <ul style="list-style-type: none"> <li>Wording of Assessment Conditions has been</li> </ul> </li> </ul>	

HLT Unit Code	HLT Unit Title	HLT Draft 2 Unit Code	HLT Draft 2 Unit Title	Draft 2 Comments	E/N
				<p>reviewed to ensure consistency and understanding.</p> <ul style="list-style-type: none"> <li>○ Scope of health care records clarified.</li> </ul>	
HLTADM006	Undertake complex clinical coding	HLTCCD007	Undertake moderately complex clinical coding	<ul style="list-style-type: none"> <li>• Unit code updated</li> <li>• Changes to Unit title</li> <li>• Elements and Performance Criteria: <ul style="list-style-type: none"> <li>○ Elements and Performance Criteria have been refined to incorporate better technical language.</li> <li>○ Elements and Performance Criteria relating to clarifying coding queries have been transferred from Unit <i>HLTCCD005 Abstract information for clinical coding</i>.</li> <li>○ New Element and Performance Criteria added to include content on 'participating in clinical coding audits'.</li> </ul> </li> <li>• Performance Evidence: <ul style="list-style-type: none"> <li>○ Performance Evidence tasks have been reworded to provide clarity on the requirements.</li> </ul> </li> </ul>	N

HLT Unit Code	HLT Unit Title	HLT Draft 2 Unit Code	HLT Draft 2 Unit Title	Draft 2 Comments	E/N
				<ul style="list-style-type: none"> <li>○ Scope of moderately complex health care records clarified.</li> <li>○ Tasks related to 'participating in clinical coding audits' added.</li> <li>• Knowledge Evidence: <ul style="list-style-type: none"> <li>○ Knowledge content has been refined to incorporate better technical language</li> <li>○ Knowledge related to 'participating in clinical coding audits' has been added.</li> </ul> </li> <li>• Assessment Conditions: <ul style="list-style-type: none"> <li>○ Wording of Assessment Conditions has been reviewed to ensure consistency and understanding.</li> <li>○ Scope of health care records clarified.</li> </ul> </li> </ul>	
HLTADM007	Complete highly complex clinical coding	HLTCCD008	Undertake highly complex clinical coding	<ul style="list-style-type: none"> <li>• Unit code updated</li> <li>• Changes to Unit title</li> <li>• Elements and Performance Criteria: <ul style="list-style-type: none"> <li>○ Elements and Performance Criteria have been refined to incorporate better technical language.</li> </ul> </li> <li>• Performance Evidence:</li> </ul>	N



HLT Unit Code	HLT Unit Title	HLT Draft 2 Unit Code	HLT Draft 2 Unit Title	Draft 2 Comments	E/N
				<ul style="list-style-type: none"> <li>○ Performance Evidence tasks have been reworded to provide clarity on the requirements.</li> <li>○ Tasks relating to 'using current coding manuals and standards to produce accurate and complete coded clinical data from highly complex health care records' have been clarified to include 'for at least five episodes of care' for each of the nineteen listed specialities.</li> <li>○ Scope of highly complex health care records clarified.</li> <li>• Knowledge Evidence               <ul style="list-style-type: none"> <li>○ Knowledge content has been refined to incorporate better technical language.</li> <li>○ Content related to 'mentoring and supervision skills applicable to the clinical coding environment' has been added.</li> </ul> </li> <li>• Assessment Conditions               <ul style="list-style-type: none"> <li>○ Wording of the Assessment Conditions has been reviewed to ensure</li> </ul> </li> </ul>	

HLT Unit Code	HLT Unit Title	HLT Draft 2 Unit Code	HLT Draft 2 Unit Title	Draft 2 Comments	E/N
				consistency and understanding. ○ Scope of health care records clarified.	

## Mapping of Draft 2 Skill Set to Existing HLT Versions

The following skill set is included in Draft 2:

- Clinical Coding Auditor Skill Set

### Skill Set Mapping

Draft 2 skill set code	Draft 2 skill set title	Draft 2 comments	E/N
HLTSS00070	Clinical Coding Auditor Skill Set	Draft 1 updates to individual Units of Competency have been considered.	New skill set

## Appendix A: Training Package Unit of Competency Terminology Guide

Units of Competency specify the skills and knowledge a learner needs in order to complete a work task. Each Unit of Competency has associated Assessment Requirements, which detail what a learner must know and demonstrate in order to be deemed competent, along with any special conditions which apply to the assessment of competency.

<b>UNIT CODE</b>	Unique code which identifies the Unit of Competency
<b>UNIT TITLE</b>	The Unit Title is a brief statement of the outcome of the Unit of Competency, i.e. what the task is that learners will be able to complete once they are deemed competent
<b>APPLICATION</b>	<p>The application summarises:</p> <ul style="list-style-type: none"> <li>the content of the Unit of Competency and the skill area it addresses</li> <li>any relationship with other Units of Competency</li> <li>any licensing requirements or relevant legislation.</li> </ul> <p>and elaborates the Unit of Competency's scope, purpose and operation in different contexts - for example, by showing how it applies in the workplace.</p>
<b>PREREQUISITE UNIT</b>	Prerequisites are other Units of Competency or in some cases licences, etc. that a learner must complete before undertaking this Unit of Competency. This may be in order to provide underpinning skills or knowledge that is essential for a learner to undertake this Unit.
<b>ELEMENTS</b>	The Elements are the basic themes of the Unit of Competency. They describe the significant functions that form part of the work task that the Unit of Competency covers.
<b>PERFORMANCE CRITERIA</b>	The Performance Criteria specify the required steps that enable the learner to undertake the work task.
<b>Assessment Requirements</b>	
<b>PERFORMANCE EVIDENCE</b>	Identifies what a learner must demonstrate in order to be deemed competent at the work task.
<b>KNOWLEDGE EVIDENCE</b>	Identifies what a learner needs to know to perform the work task effectively.

<b>ASSESSMENT CONDITIONS</b>	<p>Assessment Conditions provide the context for the Unit of Competency, describing essential operating conditions that must be present for assessment, depending on the work situation, needs of the candidate, accessibility of the items required, and local industry and regional contexts.</p> <p>They may specify any of the following:</p> <ul style="list-style-type: none"><li>• The conditions under which competency must be assessed, including variables such as the assessment environment or necessary equipment or tools</li><li>• Whether or not the Unit must be assessed in the workplace or may also be assessed via simulation</li><li>• Resource implications, for example access to particular equipment, infrastructure or situations</li><li>• Any required characteristics of the assessor, e.g. whether the assessor must hold a higher qualification in that field, etc.</li></ul>
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