

<b>UNIT CODE</b>	<b>HLTAMAT003</b>
<b>UNIT TITLE</b>	<b>Provide postnatal health care for mothers and babies</b>
<b>APPLICATION</b>	<p>This unit describes the performance outcomes, skills and knowledge required to provide care to mothers and Aboriginal and/or Torres Strait Islander babies in the postnatal period, which is broadly defined as the six week period following birth.</p> <p>This unit is specific to Aboriginal and/or Torres Strait Islander people working as health practitioners. They work as part of a multidisciplinary primary health care team to provide primary health care services to Aboriginal and/or Torres Strait Islander clients and communities.</p> <p>No regulatory requirement for certification, occupational or business licensing is linked to this unit at the time of publication. For information about practitioner registration and accredited courses of study, contact the Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHPBA).</p>
<b>PREREQUISITE UNIT</b>	Nil
<b>COMPETENCY FIELD</b>	Maternal and Children's Health
<b>UNIT SECTOR</b>	Aboriginal and/or Torres Strait Islander Health
<b>ELEMENTS</b>	<b>PERFORMANCE CRITERIA</b>
<i>Elements describe the essential outcomes</i>	<i>Performance criteria describe the performance needed to demonstrate achievement of the element.</i>
1. Assess mother and baby and plan for postnatal health care.	1.1 Use culturally safe and effective communication in all interactions to establish and maintain positive relationships. 1.2 Review client information and establish individual care requirements. 1.3 Complete maternal and baby health assessment and screening tests according to scope of practice and standard treatment protocols used by the organisation. 1.4 Seek information on the social and emotional wellbeing of women and their partners and/or families to identify support needs and preferences. 1.5 Utilise observations, sensitive and empathetic discussions and relevant assessment tools to evaluate potential postnatal depression and anxiety. 1.6 Develop a postnatal care plan based on client's needs and preferences and organisational care protocols and consultation with relevant health professionals. 1.7 Accurately document details of assessments and care plan in client records according to organisational policies and procedures.

2. Provide postnatal care.	<p>2.1 Implement strategies to establish and support breastfeeding and other feeding options according to current guidelines and client preferences.</p> <p>2.2 Identify minor postnatal problems for mother and baby and provide appropriate care and advice.</p> <p>2.3 Identify potentially serious health conditions for mother and baby and make referrals according to organisational procedures.</p> <p>2.4 Provide education on key signs of ill-health in babies and need to present for prompt medical treatment.</p> <p>2.5 Recognise situations that indicate mother, baby or others may be at risk and respond according to organisational procedures.</p> <p>2.6 Update client records accurately and according to organisational procedures.</p>
3. Monitor health and provide information to mothers, partners and families during postnatal period.	<p>3.1 Monitor maternal and baby health through ongoing scheduled assessments incorporated in care plan.</p> <p>3.2 Provide information that supports maternal self-care and wellbeing in the postnatal period.</p> <p>3.3 Provide advice on routine baby care to mothers, their partners and/or families and make required referrals according to organisational procedures.</p> <p>3.4 Provide current and accurate information on contraceptive options.</p> <p>3.5 Clearly explain key healthy lifestyle habits that support mothers in the postnatal period.</p> <p>3.6 Monitor the social and emotional wellbeing of women and their partners and/or families and provide appropriate care and advice.</p> <p>3.7 Promote the role of other family members in supporting maternal health and wellbeing based on client situation and preferences.</p> <p>3.8 Update client records accurately and according to organisational procedures.</p>
<b>FOUNDATION SKILLS</b>	
<i>Foundation skills essential to performance in this unit, but not explicit in the performance criteria are listed here, along with a brief context statement.</i>	
<b>SKILLS</b>	<b>DESCRIPTION</b>
Reading skills to:	<ul style="list-style-type: none"> <li>■ interpret sometimes complex and unfamiliar standard treatment protocols involving medical terminology and abbreviations.</li> </ul>
Writing skills to:	<ul style="list-style-type: none"> <li>■ produce detailed plans using clear language easily understood by both clients and health care team members</li> <li>■ use fundamental sentence structure, health terminology and abbreviations to complete forms and reports that require factual information.</li> </ul>
Oral communication skills to:	<ul style="list-style-type: none"> <li>■ provide unambiguous information to clients using plain language and terms easily understood</li> <li>■ ask open and closed probe questions and actively listen to elicit information from clients and to determine client understanding of information provided.</li> </ul>

Numeracy skills to:	<ul style="list-style-type: none"> <li>■ interpret sometimes complex medical numerical data and abbreviations in standing orders, care protocols and client records</li> <li>■ take and record accurate measurements involving weights, lengths, rates and degrees.</li> </ul>
Technology skills to:	<ul style="list-style-type: none"> <li>■ select and use appropriate medical equipment suited to purpose of postnatal health assessments.</li> </ul>
<b>UNIT MAPPING INFORMATION</b>	<p>No equivalent unit.</p> <p>For details, refer to the full mapping table in the Draft 2 Validation Guide.</p>
<b>LINKS</b>	Companion Volume Implementation Guide

<b>TITLE</b>	<b>Assessment Requirements for HLTAMAT003 Provide postnatal health care for mothers and babies</b>
<b>PERFORMANCE EVIDENCE</b>	<p>Evidence of the ability to complete tasks outlined in elements and performance criteria of this unit in the context of the job role, and:</p> <ul style="list-style-type: none"> <li>■ for five women and their Aboriginal and/or Torres Strait Islander babies:             <ul style="list-style-type: none"> <li>○ complete two postnatal physical health assessments and screening tests for each mother and baby within six weeks of birth</li> <li>○ complete two maternal assessments for postnatal depression and anxiety, for each mother</li> <li>○ develop and document a postnatal care plan</li> <li>○ according to their individual needs, provide information and guidance about:                 <ul style="list-style-type: none"> <li>● maternal self-care in the postnatal period</li> <li>● baby care in the postnatal period</li> <li>● breastfeeding</li> <li>● key triggers for seeking prompt medical care for babies</li> <li>● contraceptive options</li> <li>● social and emotional wellbeing support services available to women and their partners and/or families</li> </ul> </li> <li>○ document, in client records, accurate details of:                 <ul style="list-style-type: none"> <li>● observations, examinations and tests completed during postnatal assessments</li> <li>● evaluation notes about the health of each mother and baby</li> <li>● information and referrals provided to client</li> </ul> </li> </ul> </li> <li>■ from assessments personally completed or from case study assessment documentation, identify signs, symptoms and implications of two different postnatal complications that require referral to a medical practitioner.</li> </ul>
<b>KNOWLEDGE EVIDENCE</b>	<p>Demonstrated knowledge required to complete the tasks outlined in elements and performance criteria of this unit:</p> <ul style="list-style-type: none"> <li>■ organisational policies and procedures for:             <ul style="list-style-type: none"> <li>○ documenting postnatal health assessments and care plans</li> <li>○ maintaining confidentiality of client information</li> </ul> </li> </ul>

- for postnatal health care:
  - legal and organisational responsibilities and role boundaries of Aboriginal and/or Torres Strait Islander health practitioners
  - the roles of other members of the multidisciplinary care team including medical staff, obstetricians, traditional and other midwives, allied health staff and female community Elders
  - how to facilitate referrals
- the role of standard treatment protocols in postnatal care:
  - types that are used by primary health care organisations including Standard Treatment Manuals (STM) and how to access
  - purpose, format and inclusions
  - how to use to identify postnatal health assessment and plan requirements
- formats and typical inclusions of written postnatal care plans
- key elements of postnatal health assessments completed on mothers and babies
- the importance of screening postnatal women for sexually transmitted infections (STIs), and standard testing procedures, particularly for syphilis
- different types of infection control precautions and when these would be used for different types of postnatal examinations and tests
- equipment and procedures for postnatal physical examinations and tests
- key features of assessment tools used to evaluate emotional wellbeing in the postnatal period:
  - purpose and utility of assessment tools and how these contribute to an overall assessment
  - tools used to screen for postnatal depression and anxiety, particularly the Edinburgh Postnatal Depression Scale (EPDS)
  - scoring systems and how scaled outcomes are used as a simple measure of a client's current emotional status
- for the postnatal period:
  - maternal physiological changes associated with childbirth, the postnatal period and breastfeeding
  - common maternal health conditions and obstetric complications including signs, symptoms and overview of treatments and medications
  - risks to newborn babies from maternal sexually transmitted infections (STIs)
  - risks to maternal health from pre-existing conditions and diseases, particularly for anaemia, diabetes and heart disease
  - risks of mother and baby developing type 2 diabetes after maternal gestational diabetes
  - common short-term uncomplicated health conditions for babies including signs, symptoms and overview of treatments and medications
  - maternal and baby medical complications requiring referral including signs, symptoms and overview of treatments and medications
  - risks and contraindications associated with treatments and medications used for common and serious conditions
- key triggers for seeking prompt medical care for babies, signs and symptoms, and techniques for explaining these to parents and families:
  - dehydration
  - diarrhoea
  - vomiting
  - fever
- key requirements of healthy maternal lifestyle in the postnatal period:
  - nutritional needs, including to support breastfeeding during postnatal period and beyond, and complications for nutritional plan that relate to diabetes in the mother
  - sleep
  - rest

	<ul style="list-style-type: none"> <li>◦ exercise</li> <li>◦ nil-use of alcohol, illicit drugs and tobacco</li> <li>■ for babies: <ul style="list-style-type: none"> <li>◦ basic physical care routines</li> <li>◦ key recommendations in current Australian national guidelines for breastfeeding and use of infant formula</li> <li>◦ vaccination requirements: <ul style="list-style-type: none"> <li>● types required</li> <li>● when they are required</li> </ul> </li> </ul> </li> <li>■ common problems associated with breastfeeding and how to resolve or treat: <ul style="list-style-type: none"> <li>◦ tongue-tie in babies</li> <li>◦ difficulty for baby in latching on</li> <li>◦ sore or cracked nipples and associated thrush</li> <li>◦ not enough or too much breast milk</li> <li>◦ blocked milk duct, mastitis and breast abscess</li> <li>◦ types of medications that should be avoided during the breastfeeding period</li> </ul> </li> <li>■ common methods of contraception, and: <ul style="list-style-type: none"> <li>◦ advantages, disadvantages and levels of effectiveness for different types</li> <li>◦ suitability for use in the postnatal and breastfeeding period</li> <li>◦ contraindications for different types</li> </ul> </li> <li>■ social and emotional wellbeing needs that can arise in the postnatal and early childhood period for women, their partners and families, and: <ul style="list-style-type: none"> <li>◦ care and support services available in the community, state or territory, both general and any designed to specifically assist in the postnatal and early childhood period</li> <li>◦ how women, their partners and families can access services and the role of health practitioners in facilitating access</li> </ul> </li> <li>■ signs of family violence, support services available in the community, state or territory and referral processes.</li> </ul>
<b>ASSESSMENT CONDITIONS</b>	<p>Skills must be demonstrated in a health service workplace within a multidisciplinary primary health care team.</p> <p>Evidence of performance must be gathered:</p> <ul style="list-style-type: none"> <li>■ during on-the-job assessments in the workplace under live conditions while interacting with mothers and their Aboriginal and/or Torres Strait Islander babies, or</li> <li>■ during off-the-job assessments in the workplace, not under live conditions, using simulated activities while interacting with mothers and their Aboriginal and/or Torres Strait Islander babies.</li> </ul> <p>Evidence of workplace performance can be gathered and reported through third party report processes. (Refer to the Companion Volume Implementation Guide for information on third party reporting.)</p> <p>Evidence can be supplemented by assessments in a simulated workplace environment using simulated activities, scenarios or case studies only when:</p>

	<ul style="list-style-type: none"> <li>■ the full range of situations covered by the unit cannot be provided in the individual's workplace, and or</li> <li>■ situations covered by the unit occur only rarely in the individual's workplace.</li> </ul> <p>Evidence can further be supplemented by assessments in a simulated workplace environment using simulated activities, scenarios or case studies only when:</p> <ul style="list-style-type: none"> <li>■ the full range of situations covered by the unit cannot be provided in the individual's workplace, and or</li> <li>■ situations covered by the unit occur only rarely in the individual's workplace.</li> </ul> <p>Assessment must ensure the use of:</p> <ul style="list-style-type: none"> <li>■ personal protective equipment for infection control</li> <li>■ medical equipment used for postnatal examinations and tests</li> <li>■ clinical waste disposal bins</li> <li>■ assessment tools used to evaluate postnatal depression and anxiety</li> <li>■ client records</li> <li>■ template forms or reports for documenting, assessment details and findings</li> <li>■ template postnatal care plans</li> <li>■ postnatal standard treatment protocols used by the organisation, which can include Standard Treatment Manuals</li> <li>■ current Australian national guidelines for breastfeeding and use of infant formula, including publications for health workers</li> <li>■ organisational policies and procedures for: <ul style="list-style-type: none"> <li>○ documenting postnatal health assessments and care plans</li> <li>○ maintaining confidentiality of client information.</li> </ul> </li> </ul> <p>Assessors must satisfy the Standards for Registered Training Organisations requirements for assessors, and:</p> <ul style="list-style-type: none"> <li>■ be an Aboriginal and/or Torres Strait Islander person who has applied the skills and knowledge covered in this unit of competency through experience working as an Aboriginal and/or Torres Strait Islander health practitioner, <b>or</b></li> <li>■ be a registered health practitioner with experience relevant to this unit of competency and be accompanied by, or have assessments validated by, an Aboriginal and/or Torres Strait Islander person.</li> </ul>
<b>LINKS</b>	Companion Volume Implementation Guide