UNIT CODE	HLTAHCS016
UNIT TITLE	**Develop primary health care programs**
APPLICATION	This unit describes the performance outcomes, skills and knowledge required to plan, organise and evaluate primary health care programs to address identified needs in Aboriginal and/or Torres Strait Islander communities. It requires the ability to use critical thinking, planning and collaboration skills.
	Primary health care programs are those programs which provide services to address particular health issues. They may be new programs or adaptations of existing programs. Health issues are diverse and may include eye, ear and oral health, social and emotional wellbeing, chronic disease, infant and maternal health or crisis intervention. Activities could be short term or ongoing.
	The development of health promotion programs is covered in another unit.
	This unit applies to senior roles in Aboriginal and/or Torres Strait Islander organisations that provide primary health care and other support services to Aboriginal and/or Torres Strait Islander clients and communities. It is specific to Aboriginal and/or Torres Strait Islander people working as health workers or health practitioners.
	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).
PREREQUISITE UNIT	Nil
COMPETENCY FIELD	Health Care and Support
UNIT SECTOR	Aboriginal and/or Torres Strait Islander Health
ELEMENTS	PERFORMANCE CRITERIA
Elements describe the essential outcomes	*Performance criteria describe the performance needed to demonstrate achievement of the element.*

1. Establish community needs and program scope.	1.1 Use holistic approaches that support the community to take a self-determination approach to health. 1.2 Identify community representatives and other individuals and organisations who play a role in local community health service provision. 1.3 Create a process for community representatives and other individuals and organisations to be consulted and actively involved in the development of primary health care programs. 1.4 Identify and assess existing community information and research that provides data about diseases of high incidence and health care needs and priorities. 1.5 Consult with colleagues to obtain their perspectives and feedback on program needs and service gaps. 1.6 Identify and consider government and non-government Aboriginal and/or Torres Strait Islander primary health strategies, policies, and resources that could support program development.
2. Plan primary health care programs.	2.1 Follow agreed consultation and collaboration processes. 2.2 Develop specific program objectives and key performance indicators based on identified priorities. 2.3 Determine program delivery and follow up methods according to community needs, the nature of the health issue being addressed and operational constraints or opportunities. 2.4 Determine human, financial and physical resource requirements and the actions required to facilitate their availability. 2.5 Develop processes and procedures that address ethical and compliance requirements and are consistent with the principles underpinning work in Aboriginal and/or Torres Strait Islander health. 2.6 Identify and incorporate monitoring and evaluation criteria and processes. 2.7 Document plans that include clear actions, responsibilities and timelines for implementation. 2.8 Obtain organisational and community approval for proposed program, according to community protocols.
3. Organise program implementation.	3.1 Follow organisational procedures for accessing additional financial resources. 3.2 Organise required training based on the program plan. 3.3 Access and arrange required internal and external services and resources for program delivery. 3.4 Identify local roles and responsibilities for program delivery and consult with colleagues to plan practical details.
4. Communicate program details.	4.1 Identify key internal and external health services stakeholders who need to be made aware of the program. 4.2 Determine the best ways of providing information about the program based on its scope and specific audience needs. 4.3 Provide information about the program and how it will be implemented to the community and other stakeholders.

5. Monitor and evaluate primary health care programs.	5.1 Seek and review feedback from colleagues and client about the effectiveness of program delivery. 5.2 Take action to make minor adjustments to delivery based on feedback received. 5.3 Evaluate health care programs against agreed criteria. 5.4 Identify program strengths and areas for improvement. 5.5 Collect, document and use information and program data to identify gaps and further opportunities. 5.6 Communicate evaluation outcomes to community representatives and other stakeholders to inform future planning. 5.7 Use evaluation as the basis for advocacy activities related to primary health care programs.

FOUNDATION SKILLS

Foundation skills essential to performance in this unit, but not explicit in the performance criteria are listed here, along with a brief context statement.

SKILLS	DESCRIPTION
Reading skills to:	▪ interpret detailed familiar organisational procedures ▪ interpret varied, unfamiliar and potentially complex information about health issues from research, funding and strategy documents.
Writing skills to:	▪ structure and draft program planning and implementation documentation and procedures ▪ integrate and link information from diverse sources in program implementation information.
Oral communication skills to:	▪ ask open and closed probe questions and actively listen during team and community interactions.
Numeracy skills to:	▪ interpret data about existing financial resources ▪ interpret health research and program data ▪ make estimates of financial resource requirements.
Teamwork skills to:	▪ work collaboratively with both internal and external colleagues.
Planning and organising skills to:	▪ establish implementation plan that involves diverse logistical elements.
Technology skills to:	▪ create, structure and format digital planning documentation.
UNIT MAPPING INFORMATION	No equivalent unit. For details, refer to the full mapping table in the Draft 2 Validation Guide.
LINKS	Companion Volume Implementation Guide

TITLE	Assessment Requirements for HLTAHCS016 Develop primary health care programs
PERFORMANCE EVIDENCE	Evidence of the ability to complete tasks outlined in elements and performance criteria of this unit in the context of the job role, and: ■ develop or adapt one primary health care program for an Aboriginal and/or Torres Strait Islander community that focuses on a priority local health need, and includes: 　○ two different sources of local community information as the basis for development 　○ a documented development, implementation and evaluation plan 　○ implementation procedures and resources tailored to local needs 　○ supporting materials to promote the program ■ consult with all of the following in the process of developing the program: 　○ community members 　○ internal colleagues 　○ external colleagues ■ for an actual program delivered, or according to case study information: 　○ evaluate the effectiveness of program delivery 　○ identify program strengths and areas for improvement.
KNOWLEDGE EVIDENCE	Demonstrated knowledge required to complete the tasks outlined in elements and performance criteria of this unit: ■ organisational policies and procedures for: 　○ obtaining additional financial resources 　○ obtaining program approval ■ for identified current national, state or territory government and non-government Aboriginal and/or Torres Strait Islander health strategies and programs: 　○ key objectives 　○ key action areas 　○ implications for local services and program development ■ guiding principles that underpin the work of Primary Health Networks (PHNS) and Aboriginal Medical Services (AMS) and the role of each in progressing those principles ■ roles and responsibilities of different people and organisations involved in primary health care and the role of collaboration: 　○ internal 　○ external ■ the social and cultural factors that impact on program development and culturally appropriate consultation processes on primary health care issues ■ types of information that inform primary health care programs: 　○ community health profile and other local research 　○ observations and anecdotal evidence from service provision 　○ health research and strategies developed by state or territory and federal governments ■ local health issues that may be targeted in primary health care programs and their priority level in the local community: 　○ eye, ear and oral health 　○ sexual health 　○ social and emotional wellbeing 　○ chronic disease 　○ maternal and children's health

- disability

- types of delivery and follow up methods for primary health care programs, and the constraints and opportunities for the local community:
  - one-to-one interactions during service provision
  - special clinics (permanent or mobile)
  - outreach services
  - care coordination
  - service integration
  - special provisions for travel to specialist services
  - telehealth services
  - recall and reminder protocols

- potential internal and external resource requirements:
  - human:
    - additional training
    - specialist expertise
    - more people to provide services

  - financial:
    - short term
    - long term

  - physical:
    - facilities in which to provide services
    - medical equipment and supplies
    - technology infrastructure for increased online delivery / telehealth services
    - vehicles for transporting clients

- types of processes and procedures impacted by specific ethical and compliance requirements:
  - confidentiality
  - record maintenance
  - reporting, including to funding bodies
  - data collection
  - client follow up and recall protocols

- key principles and concepts that underpin the provision of primary health care and how these translate into planning and implementation in the local area:
  - focus on core priority areas
  - collaboration, engagement and self-determination
  - models of primary health care and their key benefits and limitations (including functional, team, client assignment)
  - holistic client-centred care
  - strengths-based approaches
  - evidence-based practice
    - evidence-based practice as best practice
    - what constitutes reliable evidence
    - current evidence-based approaches in priority areas of Aboriginal and/or Torres Strait Islander Health

- key stages of the program planning and implementation cycle and the requirements at each stage in the context of primary health care in Aboriginal and/or Torres Strait Islander communities:
  - research
  - planning
  - development
  - implementation
  - evaluation

- considerations for program development:
  - how to define what is needed for different program and activity types
  - information sources for specific program type
  - tailoring of implementation to local participant needs
  - how to identify when specialist expertise may be needed
  - the potential complementary role of traditional healing methods

- types of communication strategies for encouraging use of primary health care programs
- methods used to monitor and evaluate primary health care programs:
  - staff and client evaluation questionnaires
  - debriefs with those delivering specific activities
  - evaluation of complaints or problems with service provision
  - data collected on uptake of program activities
  - data collected on health outcomes for clients.

ASSESSMENT CONDITIONS	Skills can be demonstrated through:
	
	- work activities completed within an Aboriginal/and or Torres Strait Islander health service, **or**
	- project activities and case studies completed within a training organisation, based on comprehensive information about the community and the operation of an actual or simulated health service.
	
	Assessment must ensure the use of:
	
	- interaction with internal, external and Aboriginal/and or Torres Strait Islander community stakeholders either through actual work activities or simulations
	- information and research about local community health issues
	- information about national government and non-government strategies and programs that support primary health care in Aboriginal and/or Torres Strait Islander communities
	- computer and software programs used to produce text documents
	- organisational policies and procedures for:
	  - obtaining additional financial resources
	  - obtaining program approval.
	
	Assessors must satisfy the Standards for Registered Training Organisations requirements for assessors, and:
	
	- 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 worker or practitioner, **or**
	- be a registered health practitioner or a health program manager 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.

LINKS	Companion Volume Implementation Guide