

UNIT CODE	HLTAMAT004
UNIT TITLE	Assess children's health
APPLICATION	<p>This unit describes the performance outcomes, skills and knowledge required to complete health assessments of Aboriginal and/or Torres Strait Islander children aged under 15 years as part of a multidisciplinary health care team. It requires the ability to complete children's physical examinations and tests, and to assess their health, growth and development.</p> <p>Health assessments may be routinely scheduled at specific intervals, could be completed when a child presents with a specific health issue or as part of ongoing care for diagnosed childhood conditions.</p> <p>Skills for providing children's health care, including the development and implementation of care plans, are covered in a complementary unit.</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.</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>
PREREQUISITE UNIT	Nil
COMPETENCY FIELD	Maternal and Children's Health
UNIT SECTOR	Aboriginal and/or Torres Strait Islander Health
ELEMENTS	PERFORMANCE CRITERIA
<i>Elements describe the essential outcomes</i>	<i>Performance criteria describe the performance needed to demonstrate achievement of the element.</i>

<p>1. Obtain information about child and determine scope of assessment.</p>	<p>1.1 Complete health assessments according to scope of practice and standard treatment protocols used by the organisation. 1.2 Consult relevant health professionals and available documentation about child's health. 1.3 Establish trust and rapport with child and their family or carer using culturally safe and age appropriate communications in all interactions. 1.4 Consult with child, family or carer to obtain child and family medical and social history and identify specific presenting problems. 1.5 Obtain information about effectiveness of any current medications, treatments and wellbeing strategies. 1.6 Explain organisational requirements for maintaining confidentiality of information and permissions for disclosure. 1.7 Accurately document child's history according to organisational policies and procedures. 1.8 Determine specific examination and test requirements from information gathered.</p>
<p>2. Complete physical examination.</p>	<p>2.1 Explain the reason and procedures for each examination to the child, as appropriate, and their family or carer, confirm understanding and obtain informed consent. 2.2 Use age appropriate strategies that ensure child's comfort during all examinations and tests. 2.3 Implement required infection control precautions according to examination requirements. 2.4 Use correct protocols to measure vital signs and identify any significant variation from normal reference range. 2.5 Conduct physical examination and clinical tests based on observations and child's presentation, and with respect for community values, beliefs and gender roles. 2.6 Accurately record details of all measurements, examinations and tests according to organisational policies and procedures.</p>
<p>3. Assess childhood growth and development.</p>	<p>3.1 Select and utilise validated screening tools fit for the purpose of the assessment. 3.2 Measure height and weight and take other physical measurements indicated in screening tools. 3.3 Assess socioemotional, cognitive and language development using appropriate screening tools, observations and discussions. 3.4 Accurately record all growth and development data according to screening tool instructions and organisational procedures.</p>

4. Evaluate, present and confirm health assessment findings.	<p>4.1 Evaluate examination and test results to identify signs and symptoms of common health conditions for children.</p> <p>4.2 Recognise, from examinations and tests, signs and symptoms of potentially serious childhood health problems and trigger referral for further investigation.</p> <p>4.3 Recognise significant variations from normal range of childhood growth and development parameters.</p> <p>4.4 Determine own interpretation of child's current health and developmental status based on history, presenting problems, examination and test results.</p> <p>4.5 Provide clear and accurate reports and consult with other health care team members to verify results and confirm child's health and developmental status.</p> <p>4.6 Recognise signs of children at risk and initiate referrals and any mandatory reports according to procedural and legal requirements and within scope of own responsibility.</p> <p>4.7 Update client records with health assessment details according to organisational policies and procedures.</p>
5. Discuss assessment outcomes with child and their family or carer.	<p>5.1 Provide information about verified assessment results in plain language using culturally safe and age appropriate communication.</p> <p>5.2 Discuss options for treatments and other interventions.</p> <p>5.3 Encourage child, as appropriate, and their family or carer to question and clarify outcomes, and purpose of potential treatments and interventions.</p> <p>5.4 Confirm understanding and document information provided in client records.</p>
FOUNDATION SKILLS	
<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>	
SKILLS	DESCRIPTION
Reading skills to:	<ul style="list-style-type: none"> interpret detailed familiar organisational policies and procedures interpret sometimes complex and unfamiliar client records, standard treatment protocols involving medical terminology and abbreviations.
Writing skills to:	<ul style="list-style-type: none"> use fundamental sentence structure, health terminology and abbreviations to complete forms and reports that require factual information.
Numeracy skills to:	<ul style="list-style-type: none"> interpret sometimes complex medical numerical data and abbreviations in standing orders, care protocols and client records take and record accurate measurements involving weights, lengths, rates and degrees complete calculations involving, percentages and ratios document medical numerical abbreviations in client records.
Planning and organising skills to:	<ul style="list-style-type: none"> determine a structured approach for health assessments and complete physical examinations and tests in a logical, time efficient sequence.
Technology skills to:	<ul style="list-style-type: none"> select and use appropriate medical equipment suited to purpose of physical examination and child's age.

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 HLTAMAT004 Assess children’s health
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<p>PERFORMANCE EVIDENCE</p>	<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"> ■ complete a health assessment of a total of five Aboriginal and/or Torres Strait Islander children to collectively include: <ul style="list-style-type: none"> ○ those aged between 0 to 5 years ○ those aged between 6 to 14 years ■ for each of the five children, complete a head to toe physical examination and tests to include: <ul style="list-style-type: none"> ○ measurement of height, weight and waist circumference and calculation of body mass index ○ measurement of temperature ○ measurement of blood pressure, pulse rate and rhythm ○ measurement of respiratory rate and peak flow ○ examination of: <ul style="list-style-type: none"> ● eyes, including physical examination and vision test ● ears, including otoscopy ● mouth, throat, teeth and gums ● skin ● hands and feet ● chest - visual and aural observation of respiration for any signs of congestion or distress ● abdomen - visual observation ○ urinalysis via dipstick testing ○ blood glucose test with a blood glucose testing meter ○ haemoglobin test ○ child growth and development assessment, using a screening tool appropriate for the child's age and stage of development ○ examinations for specific presenting problems ■ for each of the five children: <ul style="list-style-type: none"> ○ evaluate all assessment information and report own interpretation of child's current health and developmental status to health care team ○ consult with the health care team to verify assessment results and confirm child's health and developmental status ○ discuss assessment outcomes with the child and family or carer ○ document, in child's records, accurate details of: <ul style="list-style-type: none"> ● medical and social history ● observations, examinations and tests completed ● evaluation notes about the health and development of each child ● information and referrals provided to the child and family or carer ■ from assessments personally completed or from case study assessment documentation: <ul style="list-style-type: none"> ○ identify signs, symptoms and implications of four different potentially serious health problems, and report on and refer ○ identify one mandatory reporting requirement and implement procedures to notify.
<p>KNOWLEDGE EVIDENCE</p>	<p>Demonstrated knowledge required to complete the tasks outlined in elements and performance criteria of this unit:</p> <ul style="list-style-type: none"> ■ organisational policies and procedures for documenting children's health assessments ■ local state or territory legal requirements, and associated organisational procedures for: <ul style="list-style-type: none"> ○ maintaining confidentiality of information provided by minors ○ obtaining consent for treatment of minors

- signs of children at risk including signs of abuse or neglect, referral options and mandatory reporting requirements:
 - local state or territory legal requirements
 - requirements of practitioner codes of conduct
 - organisational procedures
- overview of the key principles presented in the Charter of Children's and Young People's Rights in Healthcare Services in Australia (or its successor)
- legal and organisational responsibilities and role boundaries of those involved in children's health assessments:
 - Aboriginal and/or Torres Strait Islander health practitioners
 - medical practitioners, registered nurses and other members of the multidisciplinary care team
- the role of standard treatment protocols in children's health assessments:
 - 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 physical health assessment and test requirements for children
- techniques for effectively communicating during children's health assessments including those used to:
 - tailor discussions and questions to different ages
 - explain examinations and tests to children
 - ensure child's comfort and cooperation during examinations and tests
- key information collected and recorded in medical histories specific to children's health care
- key elements of children's health assessments
- different types of infection control precautions and when these would be used for different types of physical examinations and tests
- equipment and procedures for health examinations and 'normal' reference range for child's age, including:
 - height, weight, waist circumference and body mass index
 - temperature
 - blood pressure, pulse rate and rhythm
 - respiratory and peak flow rate
 - examination of:
 - eyes, including physical examination and vision test
 - ears and hearing, including otoscopy
 - mouth, throat, teeth and gums
 - skin
 - hands and feet
 - chest - visual and aural observation of respiration for any signs of congestion or distress
 - abdomen - visual observation
 - urinalysis via dipstick testing
 - blood glucose test with a blood glucose testing meter
 - haemoglobin test
- common health conditions for children, common presenting signs and symptoms and required examinations, to include at least the following:
 - anaemia
 - asthma
 - diabetes
 - malnutrition
 - obesity
 - dehydration
 - respiratory tract infections
 - urinary tract infections
 - digestive and gastrointestinal conditions including [gastroenteritis](#)

	<ul style="list-style-type: none"> ◦ eye infections and vision problems ◦ ear infections and hearing problems ◦ oral infections and dental problems ◦ bacterial, viral, fungal and parasitic skin infections <ul style="list-style-type: none"> ■ serious health conditions of high incidence in Aboriginal and/or Torres Strait Islander children, and the major signs and symptoms that would trigger referral for investigation to include: <ul style="list-style-type: none"> ◦ failure to thrive ◦ cardiac conditions including rheumatic heart disease and acute rheumatic fever ■ meaning of the term 'unwell child' and: <ul style="list-style-type: none"> ◦ signs and symptoms that indicate the child is seriously unwell ◦ methods to quickly assess child's condition ◦ quick response actions to manage the febrile child ◦ ways to rehydrate an unwell child ■ key features of the major domains of childhood development: <ul style="list-style-type: none"> ◦ social-emotional ◦ physical ◦ cognitive ◦ language ■ overview of age appropriate milestones of growth and development for each of the domains ■ main features of screening tools used to assess childhood growth and development: <ul style="list-style-type: none"> ◦ purpose and utility of assessment tools and how these contribute to an overall assessment ◦ different types of tools designed to evaluate different domains of development.
ASSESSMENT CONDITIONS	<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"> ■ during on-the-job assessments in the workplace under live conditions while interacting with Aboriginal and/or Torres Strait Islander children, and families or carers, or ■ during off-the-job assessments in the workplace, not under live conditions, using simulated activities while interacting with Aboriginal and/or Torres Strait Islander children, and families or carers. <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"> ■ the full range of situations covered by the unit cannot be provided in the individual's workplace, and or ■ situations covered by the unit occur only rarely in the individual's workplace.

	<p>Assessment must ensure the use of:</p> <ul style="list-style-type: none"> ■ personal protective equipment for infection control ■ medical equipment and consumables used for children's health assessments ■ clinical waste and sharps disposal bins ■ specimen collection documents ■ client records ■ template forms or reports for documenting client histories, assessment details and findings ■ screening tools used to assess childhood growth and development ■ children's health assessment standard treatment protocols used by the organisation, which can include Standard Treatment Manuals ■ organisational policies and procedures for: <ul style="list-style-type: none"> ○ documenting children's assessments ○ maintaining confidentiality of information provided by minors ○ obtaining consent for treatment of minors ○ mandatory reporting. <p>Assessors must satisfy the Standards for Registered Training Organisations requirements for assessors, and:</p> <ul style="list-style-type: none"> ■ 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, or ■ 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.
LINKS	Companion Volume Implementation Guide