

<b>UNIT CODE</b>	<b>HLTAMAT002</b>
<b>UNIT TITLE</b>	<b>Assist with childbirth</b>
<b>APPLICATION</b>	<p>This unit describes the performance outcomes, skills and knowledge required to support women birthing an Aboriginal and/or Torres Strait Islander child during childbirth and the immediate postpartum period under the supervision of a midwife or other medical practitioner. It requires the ability to facilitate effective communication between women, their partners and/or families and medical staff, and to assist with foetal and maternal monitoring.</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>
<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. Assist midwives or medical practitioners with birthing preparations.	1.1 Confirm own role in the birthing process with midwife or medical practitioner. 1.2 Communicate consistently in culturally appropriate and safe ways with women, their partners and/or families. 1.3 Identify client cultural beliefs and personal preferences for their birthing from interactions or antenatal health care information and communicate these to attending midwife or medical practitioner. 1.4 Facilitate questions and answers between women, their partners and/or families, and the midwife or medical practitioner, and confirm understanding.

2. Assist midwives or medical practitioners during the birthing process.	2.1 Facilitate culturally safe and effective communications between midwife or medical practitioner and woman throughout the birthing process. 2.2 Work under instructions from midwife or medical practitioner and according to standard treatment protocols across the stages of labour to assist with foetal and maternal monitoring and other support activities. 2.3 Ensure women, their partners and/or families understand the advice and actions of the attending midwife or medical practitioner, confirm informed consent and explain what this means. 2.4 Provide information and encouragement to women using positive and empathetic communication. 2.5 Identify signs of any complications during the birthing process and report immediately to attending midwife or medical practitioner. 2.6 Monitor the emotional wellbeing of women and their partners and/or families during the birthing process and provide appropriate care and advice.
3. Assist midwives or medical practitioners during immediate postpartum period.	3.1 Complete and accurately record routine physical checks of mothers and babies according to midwife or medical practitioner instructions. 3.2 Support the physical comfort of mothers and babies by providing routine postpartum information and advice. 3.3 Identify signs of immediate postpartum complications and report immediately to attending midwife or medical practitioner. 3.4 Monitor emotional wellbeing of mothers and their partners and/or families immediately after birth and provide appropriate care and advice. 3.5 Update client files accurately and according to organisational procedures.
<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>use fundamental sentence structure, health terminology and abbreviations to complete client records 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 standard treatment 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>recognise and assist with setting up and handling medical equipment used during childbirth.</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 HLTAMAT002 Assist with childbirth</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 three women birthing Aboriginal and/or Torres Strait Islander children:               <ul style="list-style-type: none"> <li>◦ use and facilitate culturally safe communications during childbirth</li> <li>◦ provide physical, cultural and emotional support across the three stages of labour</li> <li>◦ measure and record foetal and maternal vital signs</li> <li>◦ provide immediate routine postpartum care and advice</li> </ul> </li> <li>■ for the newborn babies of the above women, complete routine physical checks, and record details in client records</li> <li>■ from births attended or from case study documentation, identify signs of, and report on:               <ul style="list-style-type: none"> <li>◦ three different common childbirth problems</li> <li>◦ three different non-routine care requirements for a newborn.</li> </ul> </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>◦ maintaining client records</li> <li>◦ maintaining confidentiality of client information</li> </ul> </li> <li>■ medical record keeping requirements specific to childbirth:               <ul style="list-style-type: none"> <li>◦ key information and observations to be recorded for the childbirth process</li> <li>◦ how to initiate new medical records for newborn babies and details that must be recorded</li> </ul> </li> <li>■ for childbirth:               <ul style="list-style-type: none"> <li>◦ legal and organisational responsibilities and role boundaries of Aboriginal or Torres Strait Islander health practitioners</li> <li>◦ the roles of other members of the multidisciplinary care team including medical staff, obstetricians, traditional and other midwives, allied health staff, birthing facility staff and female community Elders</li> </ul> </li> <li>■ the role of standard treatment protocols in childbirth:               <ul style="list-style-type: none"> <li>◦ types that are used by primary health care organisations including Standard Treatment Manuals (STM) and how to access</li> <li>◦ purpose, format and inclusions</li> <li>◦ how to use to identify clinical protocols for childbirth and postpartum care</li> </ul> </li> <li>■ different on country and off country environments for childbirth, how these may impact on the birthing process, and:               <ul style="list-style-type: none"> <li>◦ birthing practices suitable for culturally safe and positive birth outcomes</li> <li>◦ traditional birthing practices in the local community and how these may</li> </ul> </li> </ul>

- be respected and reflected in contemporary practice
- key aspects of 'Birthing on Country Models' which can be implemented in birthing facilities away from country
- medical equipment and consumables used during childbirth
- stages of labour and the features of each stage
- types of physical positions that may be adopted by mothers when giving birth and their advantages and disadvantages
- checks to be made at each stage of labour, the procedures for making those checks and normal reference range:
  - maternal:
    - blood pressure
    - blood glucose level
    - blood loss per vaginam
    - contraction rate
    - foetal palpation
    - pain assessment
    - temperature, pulse, respiration (TPR)
  - foetal:
    - heart rate
    - fundal height measurements
- cultural and emotional wellbeing needs that can arise during childbirth for women, their partners and families, and the role of Aboriginal or Torres Strait Islander health practitioners in supporting those needs
- types of physical problems that occur during childbirth and overview of how these are managed:
  - breech presentation
  - cord prolapse
  - eclampsia
  - haemorrhage:
    - antepartum
    - intrapartum
  - obstructed labour
  - retained placenta
  - ruptured membranes
  - shoulder dystocia
  - tears of the birth canal/need for episiotomy
  - vaginal discharge/fluid loss
- routine immediate postpartum care requirements for mothers:
  - checks and measurements:
    - blood pressure
    - respiratory rate
    - temperature
    - placenta
    - uterine contraction
  - hygiene routines for maternal comfort after birth
  - offering of food and drink
  - advice on perineal hygiene and healing
  - review of pain levels and relief for after birth pain
- potential non-routine immediate postpartum care requirements for mothers, the indicators for these, and overview of how they are managed:
  - manual removal of placenta
  - primary postpartum haemorrhage
  - repairs of birth canal tears
  - uterine inversion
- routine immediate postpartum care requirements for newborns, including:

	<ul style="list-style-type: none"><li>◦ APGAR scoring:<ul style="list-style-type: none"><li>• appearance</li><li>• pulse</li><li>• grimace</li><li>• activity</li><li>• respiration</li></ul></li><li>◦ clamping and cutting of umbilical cord</li><li>◦ drying of baby</li><li>◦ keeping baby warm/skin-to-skin contact</li><li>◦ encouragement of breastfeeding in the first hour after birth or variation based on maternal preference</li><li>◦ temperature</li><li>◦ weight, length and head circumference measurements</li><li>■ potential non-routine immediate postpartum care requirements for newborns, the indicators for these and overview of how they are managed:<ul style="list-style-type: none"><li>◦ blood sugar level measurement</li><li>◦ oxygen administration</li><li>◦ resuscitation</li><li>◦ use of humidicribs</li><li>◦ intravenous infusions.</li></ul></li></ul>
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<p><b>ASSESSMENT CONDITIONS</b></p>	<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 during assessments under live conditions while interacting with women birthing Aboriginal and/or Torres Strait Islander children.</p> <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>Assessment must ensure the use of:</p> <ul style="list-style-type: none"> <li>■ personal protective equipment for infection control</li> <li>■ medical equipment and consumables used to support childbirth</li> <li>■ clinical waste and sharps disposal bins</li> <li>■ client records</li> <li>■ maternal and infant care standard treatment protocols used by the organisation, which can include Standard Treatment Manuals</li> <li>■ organisational policies and procedures for: <ul style="list-style-type: none"> <li>○ maintaining client records</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>
<p><b>LINKS</b></p>	<p>Companion Volume Implementation Guide</p>