

Aboriginal and Torres Strait Islander Health Practitioner

Self-Reflection Tool



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Aboriginal and Torres Strait Islander Health Practitioner: Self-Reflection Tool

This resource was developed by the Rural and Remote Clinical Support Unit, Torres and Cape Hospital and Health Service, and the Workforce Strategy Branch, Department of Health.

Published by the State of Queensland (Queensland Health), September 2021



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An electronic version of this document is available at www.health.qld.gov.au/clinical-practice/guidelines-procedures/clinical-staff/aboriginal-torres-strait-islander-health-practitioner/supporting-resources

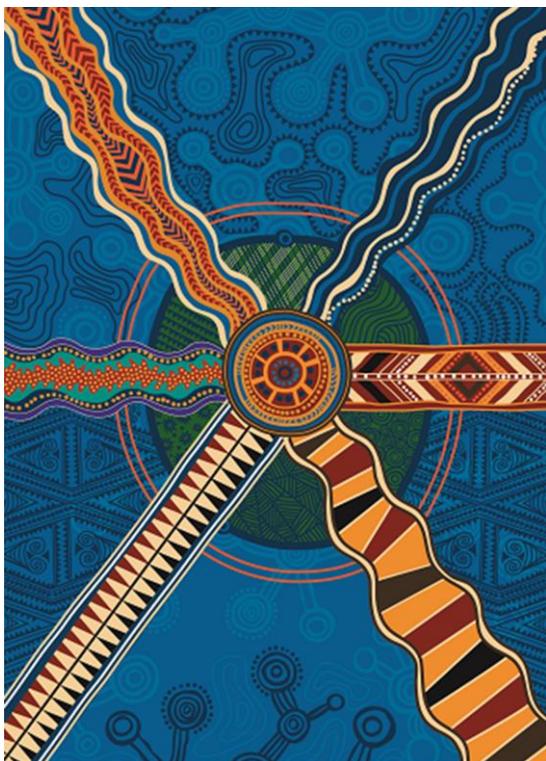
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Acknowledgement of Country

We pay our respects to the Aboriginal and Torres Strait Islander ancestors and custodians of this land, their spirits and their legacy. The foundations laid by these ancestors—our First Nations peoples—gives strength, inspiration and courage to current and future generations. We are committed to working towards a stronger and healthier Queensland community for Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander people.

Artwork produced for Queensland Health by Giliimbaa to promote Aboriginal and Torres Strait Islander health.



The artwork represents Aboriginal and Torres Strait Islander cultures in Queensland and speaks of the importance of traditional and cultural sensitivities.

The central circular motif represents Health in Queensland and the meeting place to trade knowledge about best health practice and procedures. The pathways leading both in and out represent people travelling from different professions, different communities, and different country, and the importance of everyone contributing equally to this journey. A journey of change and growth for a brighter, healthier and happier future for all Aboriginal and Torres Strait Islander Queenslanders.

The surrounding markings represent the important network of people from these communities, their connection to each other, and how they work together to empower Aboriginal and Torres Strait Islander Queenslanders to have long, healthy, productive lives.

The artwork reflects Queensland Health's commitment to Making Tracks towards closing the gap in health outcomes for Aboriginal and Torres Strait Islander Queenslanders.

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1. Introduction

Competence is the combination of knowledge, skills, attitudes and judgement demonstrated by clinical, non-clinical, cultural and interpersonal standards. It is gained through education, in-service training and professional development, and work experience. Measuring competence is essential for determining the ability and readiness of health workers, including Aboriginal and Torres Strait Islander Health Practitioners, to provide a range of quality health care services.

The Self-Reflection tool will assist the Aboriginal and Torres Strait Islander Health Practitioner to consider their skills across key areas of clinical practice to identify individual understanding and knowledge, and development needs. The tool contributes to a learning portfolio and career success plan (CSP) conversations with supervisors. It may be used to inform requirements for further education and plan a continuing professional development program to broaden skill and strengthen competence.

The Self-Reflection tool is a companion document to the Aboriginal and Torres Strait Islander Health Practitioner Competency Assessment Tool which is a comprehensive list of Aboriginal and Torres Strait Islander Health Practitioner competencies identified from the Certificate IV Aboriginal and/or Torres Strait Islander Health Practitioner Primary Care Practice qualification. A formal clinical skills assessment based on the Competency Assessment Tool and/or other recognised competency assessment frameworks provides the foundation for the development of the individual Aboriginal and Torres Strait Islander Health Practitioner Practice Plan.

This document does not include specialist skill sets that might have been gained through specific elective modules within the Certificate IV Aboriginal and/or Torres Strait Islander Primary Health Care Practice or other qualifications or studies. Tools to assist reflection on these skill sets, if required, should be identified in discussion with the primary clinical supervisor.

Although self-reflection is a useful tool and is widely practised, there is evidence to indicate that the assessment of our own knowledge, skills and competencies is often not very accurate or reliable. The Self-Reflection tool should be combined with the results from the Aboriginal and Torres Strait Islander Health Practitioner Competency Assessment Tool, and feedback from clinical supervisors and educators. Multiple sources of data should be used to plan and implement your professional development program.

This Self-Reflection tool can also be used to support the development of an Aboriginal and Torres Strait Islander Health Worker with Isolated Practice Authorisation qualification in Queensland Hospital and Health Services.

2. Instruction

Depending on the Aboriginal and Torres Strait Islander Health Practitioner position requirements, selected sets of self-assessment competencies will be used to measure individual competence. This document sets out a range of clinical competency modules, based on the core assessments of the Certificate IV Aboriginal and/or Torres Strait Islander Primary Health Care Practice qualification.

This document includes:

- basic self-reflection activities
- advanced self-reflection activities.

Please read the following suggestions to help you get the most from the document:

1. Read and answer the question for each set of the self-reflection activities.
2. Start with the competency areas relevant to your area of practice.
3. Complete the self-reflection questions over one or more sessions depending on the time required to reflect on each activity.
4. Make notes or print out your completed self-reflection competencies to analyse your learning and professional development needs, or to track your view of competence improvements over time.
5. Consult with a trusted and qualified peer or your clinical supervisor to complete the Self-Reflection Tool.
6. Remember that this is *your* self-reflection and identification of *your* learning needs; so be honest and specific. Ratings are not recorded or tracked so your answers can be totally confidential.

3. Self-reflection modules

Cardiovascular

Electrocardiograph (ECG) 12 lead recording

Can you answer the following questions?

What are the indications for performing a 12 lead ECG?

Haemoglobin (Hb) measurement

Can you answer the following questions?

What is the function of red blood cells, white blood cells, platelets, plasma?

What is anaemia? Why is anaemia a problem?

What would an anaemic client look like and feel like?

What is the healthy Hb range of:

- an adult male?
- an adult female?
- baby 2 – 6 months?
- child 2 – 11 years?

Ear examination

Can you answer the following questions?

Why is an ear examination carried out?

Why must the unaffected ear be examined first?

Why is the ear canal inspected?

What is the eardrum checked for?

What are some common ear problems?

Why monitor progress of ear conditions and the effectiveness of treatment?

Eyes

Visual acuity

Can you answer the following questions?

When would a visual acuity test be performed?

Eye examination

Can you answer the following questions?

Why would you do an eyelid eversion procedure? When is it contraindicated?

What abnormalities would you find on examination of an eye?

Why would you perform a fluorescein examination of the eye? When would you not use fluorescein drops?

Does a visual acuity test rule out underlying eye problem?

Gastrointestinal

Abdominal examination

Can you answer the following questions?

What are the possible causes of abdominal pain?

Oral

Can you answer the following questions?

When would you perform an oral assessment on a client?

What things would you consider necessary to report following an oral assessment?

What education could you offer to a client re oral hygiene to prevent future problems or disease?

What can be done to preserve teeth if they fall out?

Hand hygiene

Handwashing

Can you answer the following questions?

What is the definition of:

- hand rub?
- routine hand wash?
- clinical hand wash?

What is the definition of aseptic technique?

History

Physical assessment

Can you answer the following questions?

What is the adult range for?

- respiration?
- blood pressure?
- pulse?
- temperature?

SOAP – F

Can you answer the following questions?

What does the pneumonic SOAP-F stand for?

Medications

Anaphylaxis – severe allergic reaction

Can you answer the following questions?

What is anaphylaxis?

What can cause a severe allergic reaction (anaphylaxis)?

What signs and symptoms can the client present with?

Where is adrenaline administered in an emergency?

Where and how is the medication stored?

Locate drug therapy protocol for adrenaline in Primary Clinical Care Manual.

Is adrenaline in your scope of practice to administer?

Ophthalmic drops / ointment

Can you answer the following questions?

Why would you use an eye ointment instead of eye drops?

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Administering intramuscular, subcutaneous and Z track injections

Can you answer the following questions?

What are the six 'Rs' of medication administration?

What are subcutaneous injections sites?

Why is it important to rotate the site of a regular subcutaneous injection?

What are the sites for giving an intramuscular injection? In children what sites are used for giving IMI?

What are common types of medications given via intramuscular injection?

When should IMI not be given?

Why give injections using the Z-track technique?

What are the sites for giving Z-track intramuscular injections?

What are common types of medications given using the Z-track technique?

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Intravenous medication administration

Can you answer the following questions?

What are some complications that can occur with intravenous medications?

Why infuse the medication at the recommended rate?

What if a client displays any signs or symptoms of an allergic reaction to the medication being administered?

What are the signs if the cannula site is infected?

What are the signs if the cannula has tissue (fluid has gone into the tissue instead of vein)?

Why is it important for 2 people to check any intravenous fluid administration order and rate, prior to administration?

Calculate 740ml to be given over 3.5 hours at a drop rate of 20 drops per minute

IV drip rates

Rates (drop/min) = volume of solution (ml) x number of drops/ml

Time (minutes)

Medication administration

Can you answer the following questions?

What are the six 'Rs' of Medication administration?"

What does sublingual mean?

Would you administer sublingual medication if the container has been opened and there is no opened date recorded?

Give an example of a medication given via the sublingual route

What does buccal mean?

What is an example of a medication you would give via the buccal route?

Why is it important to wear gloves when applying topical medication?

What types of medications are administered topically?

Why not apply topical medication on broken skin (excluding wound care preparations)?

Why take extra care when administering topical medications to newborns and elderly?

Metered dose inhalers

Can you answer the following questions?

What are the six 'Rs' of medication administration?

What are the five legal requirements of a medication order?

Who should use a spacer?

Why is it important to use a spacer with an MDI?

How do you clean a spacer and how often should it be cleaned?

What types of medications are commonly inhaled?

What are they and what are their actions?

What is salbutamol?

What are some side effects of salbutamol?

How is the number of doses left in the turbuhaler or acuhaler calculated?

Nebulised medicine administration

Can you answer the following questions?

What does nebulised mean?

What is salbutamol?

What are some side effects of salbutamol?

Locate the Drug Therapy Protocol for Salbutamol in the Primary Clinical Care Manual. Is it in your scope of practice to administer it?

Administering suppositories

Can you answer the following questions?

What types of medications do we administer as suppository?

Why do you not force the suppository?

When are medications given rectally?

Nervous system

Neurological

Can you answer the following questions?

What does the pneumonic AVPU mean?

Is there a clinical pathway for closed head injuries? Can you locate it?

Neurovascular

Can you answer the following questions?

What is a normal capillary refill time?

When would you perform a neurovascular assessment?

What are the signs and symptoms of neurovascular impairment?

Pain

Can you answer the following questions?

Why is a pain assessment undertaken?

What are some of the signs and symptoms of altered levels of pain?

What other indicating factors do you need to observe in a client with pain?

What other indicating factors do you need to observe in a client with pain?

How can you assess a child's pain level?

What does the pneumonic PQRST mean?

Observations

Measuring blood glucose level (BGL)

Can you answer the following questions?

What are the indications for taking a BGL?

What are the normal parameters for BGL?

Determine a body mass index (BMI) and waist circumference

Can you answer the following questions?

What is the BMI formula?

What BMI score would be overweight or obese?

For most people, a waist circumference greater thancm for men andcm for women indicates an increased risk of developing life style related to chronic diseases such as Type 2 diabetes and cardio-vascular disease.

Head circumference

Can you answer the following questions?

When do you measure a head circumference?

How do you know if the measurement is in normal range?

At what age do we stop measuring head circumference?

Weight

Can you answer the following questions?

What unit of measure do we record weight in?

Why do we measure people's weight?

What affects a client's weight?

Up to what age do we remove the clothing of babies for weighing?

How can you increase accuracy when weighing clients?

Respiration

Oxygen therapy

Can you answer the following questions?

How often should you check the oxygen equipment?

When would you use oxygen?

What is the minimum number of litres of oxygen that can be delivered using a Hudson Mask?

What is the maximum number of litres you can deliver using nasal prongs?

What risk education do you need to give your client?

Measuring peak flow

Can you answer the following questions?

In what situations would peak flow monitoring be required?

When is the best time to monitor a peak flow rate?

What are the expected peak flow ranges for men, women and children according to appropriate age / weight?

Pulse oximetry

Can you answer the following questions?

What is the normal range for oxygen saturation?

What are the correct sites for pulse oximetry?

Respiratory examination

Can you answer the following questions?

What is the normal respiratory rate in an adult?

What signs would indicate respiratory compromise?

Spirometry

Can you answer the following questions?

What are the indications for performing spirometry?

When would you perform spirometry / what patient conditions are contraindications?

Suctioning

Can you answer the following questions?

What client conditions or situations might you use suction for?

Do you need to wear PPE (personal protective equipment) when suctioning?

Should the suction catheters be sterile?

Skin

Complex dressing

Can you answer the following questions?

Identify the factors that affect wound healing?

Describe types of wound healing including:

- primary healing
- delayed primary healing
- secondary healing.

Removal of sutures, clips and staples

Can you answer the following questions?

Why are skin closures removed at a specific time?

What problems can occur during the removal of skin closures?

Simple dressing

Can you answer the following questions?

Why do we perform simple dressings?

How do we know if the wound is infected?

What should be done if the wound appears infected?

Skin

Can you answer the following questions?

What are the important signs and symptoms when examining the skin?

Name some common skin disorders you may see in daily practice?

Wound closure

Can you answer the following questions?

What is the function of wound closure and why is it performed?

Which types of wounds would not be sutured?

What are the standard times for sutures/staples to be in place?

What are the different suture material sizes for different parts of the body?

What type of local anaesthetic would you use?

Specimen collection

Eye specimen collection

Can you answer the following questions?

Name the components that form the anatomy of the eye?

Which conditions / diseases would you collect an eye swab from a client?

Sputum specimen collection

Can you answer the following questions?

Why is a sputum specimen collected?

When is the best time to collect a sputum specimen from a client?

Urinalysis collection

Can you answer the following questions?

What is the function of the kidneys?

Why perform a urinalysis?

What are the clinical indications to undertake this test?

- adults:

- children:

What do the following components tested for in a urinalysis indicate what illnesses or conditions in a client?

- protein:

- ketones:

- bilirubin:

- blood may indicate:

- nitrates:

- urobilinogen:

- leuokocytes:

Venipuncture

Can you answer the following questions?

Why would you take blood from a client?

What sites would you avoid taking blood from?

Wound swab

Can you answer the following questions?

Why / When would you collect a wound swab?

What is the main test required for a wound swab?

Why would you not refrigerate a wound swab?

Name some common viral conditions that would be swabbed for.

Notes:

