

**HealthWorkforce**  
AUSTRALIA

# National Common Health Capability Resource: shared activities and behaviours in the Australian health workforce

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An Australian Government Initiative

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# 1. Background

## Context

The need for health workforce innovation and reform is well established. As demands on the health system continue to escalate, health workforce forecasts signal looming shortages across a number of health professions, a situation worsened by a failure to effectively harness the skills and expertise of the existing multidisciplinary workforce<sup>1</sup>.

Under existing health policy and models of healthcare organisation and delivery, these shortages are predicted to continue until at least 2025, reaching unsustainable levels<sup>2</sup>. However, successful innovation and reform has the potential to positively influence these demand projections, reducing the number of health professionals that would otherwise need to be sourced through additional training and skilled migration<sup>3</sup>.

In recognition of the need for a national, co-ordinated approach to health workforce reform, the Commonwealth, states and territories have entered into the *National Partnership Agreement on Hospital and Health Workforce Reform*. A key component of this reform is the development and rollout of workforce strategies which increase the flexibility and capability of the health workforce. These strategies are essential for ensuring that the workforce can meet the population's current needs for healthcare, and have the preparedness to respond effectively to new and emerging developments within the sector<sup>4</sup>.

Health Workforce Australia (HWA) has been established to progress health workforce reform in Australia. Its workforce innovation and reform programs are guided and informed by the *National Health Workforce Innovation and Reform Strategic Framework for Action 2011-2015*, a national call for action across the health and education sectors. The framework is helping to reshape Australia's future health workforce while supporting and enabling the productivity of the existing one. It is in this context that HWA has developed the National Common Health Capability Resource (the resource) for the Australian health workforce.

## About this project

The National Common Health Capability Resource has been developed to support workforce innovation and reform efforts at local, state, and national levels. It aims to fulfill this purpose by promoting the development of common behaviours needed within the workforce for the delivery of high quality care that accords with 21st century needs and expectations of consumers.

The concept of a national capability framework for the Australian health workforce comes from stakeholders in the health and education sectors, who consistently proposed the idea during consultations for the *National Health Workforce Innovation and Reform Strategic Framework for Action 2011-2015*. Stakeholders envisaged the development of a platform piece from which to explore new and different ways of configuring and using the workforce, based on skill mix, thereby providing greater flexibility in responding to current and future needs for healthcare. The National Common Health Capability Resource is the manifestation of this shared vision. The principles underpin its development and use.

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<sup>1</sup> National Health and Hospitals Reform Commission, *A healthier future for all Australians: Final report June 2009*, Commonwealth of Australia, ACT, 2009.

<sup>2</sup> Health Workforce Australia, *Health workforce 2025: Doctors, nurses and midwives – volume 1*, Health Workforce Australia, Adelaide, 2012, p. 21-22.

<sup>3</sup> *Ibid.*, p. 21-22.

<sup>4</sup> Council of Australian Governments, *National partnership agreement of hospital and health workforce reform*, 2008.

## Guiding principles

### **Principle 1: Person-centred**

The resource advocates for a person-centred approach to workforce design and utilisation. A person-centred approach contrasts with historical roles-based approaches, in which workforce utilisation is constrained by professional ownership over the technical aspects of care. This principle also reflects the higher order health reform goal of achieving a healthcare system that provides whole-person integrated care, responsive to individual differences, cultural diversity, and personal preferences.

### **Principle 2: Evidence-based**

The resource is derived from existing frameworks and practice standards that are used or applied within the health workforce in Australia. The resource also draws upon best practice and research, nationally and internationally, remaining cognisant of contextual factors that influence the success of any innovation.

### **Principle 3: Complementary**

The resource does not replace existing frameworks or practice standards. Rather, it exists alongside these instruments, illustrating areas of commonality in the activities and behaviours required of health workforce roles. Additionally, the resource is designed to complement existing innovation and reform methods and tools by counterbalancing their technical focus with an explication of companion behavioural skills.

### **Principle 4: Scalable**

The resource is applicable at all levels of the health system, not just the individual level. As a result, it can support different agencies and organisations in working towards improved coordination and delivery of care at the individual, community and system levels.

### **Principle 5: Flexible**

The resource supports flexibility in educating and deploying the workforce by highlighting the common behavioural skills that underpin effective performance in the workplace. Common behavioural skills provide a platform for the sharing of technical skills, where necessary and appropriate, and create norms that characterise the everyday business of delivering healthcare. The resource is also flexible in its application, empowering end-users to decide which behaviours, and at what levels, are most relevant for delivering their service.

### **Principle 6: Inclusive**

The resource can feasibly be applied, in whole or part, to anyone performing or supporting healthcare activities as part of their work role. It is therefore relevant to those with no formal qualifications, through to and including those with professional degree/postgraduate qualifications. Whilst the resource is written using language that references an individual participating in and receiving healthcare services, the behaviours equally extend to working with families, carers and communities, and in a range of settings.

### **Principle 7: Utility**

The resource has a range of potential applications within the health and education sectors, which can be tailored to the individual needs of its users to ensure maximum relevance. Supporting methods and tools will be provided to guide people in the resource's application.

### **Principle 8: Forward-thinking**

The resource considers future behavioural skills required of the workforce, not just those that it currently possesses. A future-focused approach is important for ensuring that the health workforce is flexible, adaptable, and able to respond to future developments in healthcare.

## Aboriginal and Torres Strait Islander health consumers

Aboriginal and Torres Strait Islander people experience a burden of disease two and half times that of non-Indigenous Australians. Adapting the health system to respond to the disadvantages experienced by the Aboriginal and Torres Strait Islander population is therefore a national priority.

The ability to interact effectively with people of different cultures, and to provide them with culturally safe and responsive health services, is referred to at a general level throughout the resource. These capabilities are relevant for providing a service to Aboriginal, Torres Strait Islander and culturally and linguistically diverse (CALD) cultures.

However, the historical and cultural experiences of Aboriginal and Torres Strait Islander people are unique. The Australian health workforce requires certain knowledge, skills, and values to practice optimally with Aboriginal and Torres Strait Islander people. This is critical to ensuring that the care being provided is appropriate and responsive to the specific needs of Aboriginal and Torres Strait Islander health consumers, their families and communities.

For information on the knowledge, skills and values specific to working with Aboriginal and Torres Strait Islander peoples, users should access the cultural competency tools/strategies of their organisation, and refer to the *Cultural Respect Framework for Aboriginal and Torres Strait Islander Health*, which provides guidance on mechanisms to strengthen relationships between the healthcare system and Aboriginal and Torres Strait Islander people.

The availability of health services that are equipped to provide services to Aboriginal and Torres Strait Islander people, and attuned to their needs, is a key factor that will contribute to improving their health outcomes.

## Development history

The resource was originally conceived as a tool that would guide and inform workforce redesign on the basis of skills mix. As its development progressed, it became increasingly apparent that a single information source would be unable to satisfy this brief due to the considerable number of variables<sup>5</sup> that influence knowledge and skills requirements within a workplace. Additionally, the whole-of-health-workforce approach that had been adopted necessitated some scope delimitation for the undertaking to be manageable, and to avoid an end product that was unwieldy and cumbersome to use.

At the advice of the project's governance groups (membership listed in appendix A), the decision was made to confine the resource's focus to knowledge and skills shared by the health workforce in the provision of care. A degree of abstraction was required to ensure the skills captured were common across the whole-of-health-workforce. This also meant that knowledge and skills areas identified in the resource would need to be re-contextualised during its application to have meaning and use in local settings. Development of the resource was an iterative process, completed in August 2012.

The first version of the resource underwent focus group testing in October 2012. Participating organisations are listed in appendix B. Through this process, it was confirmed that most workplaces already recognise the skills that could be shared or delegated within their own context, and pockets of innovation are occurring on the basis of this knowledge in response to local challenges. As it stood, the resource would add no further value to this activity.

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<sup>5</sup> Variables include service characteristics (such as type, setting, size, location, casemix, acuity level, discipline area, model of care), workforce composition, and technology.

What stakeholders consistently identified as being needed, however, was a tool that identified and defined behaviours that characterise work being performed well. This notion was based on awareness that many changes to workforce design and utilisation are overly focused on the technical aspects of providing care (i.e. the knowledge and skills required for performance of a work task). Whilst this is critical for patient safety, changes to who carries out what task in the workplace will only produce small improvements in the quality of care unless behavioural attributes (observable actions differentiating effective and ineffective performance of a work task) are also addressed.

Behaviours are also relevant for shaping the norms and culture that influence how care is provided. This is useful in situations where the prevailing culture within the healthcare team, organisation and/or system impede the workforce's ability to deliver best-practice care. By cultivating and rewarding the right behaviours in the workforce, it is possible to create a culture that nurtures new and better ways of providing healthcare, meaning that innovation and reform efforts are more likely to succeed and be sustained long term.

In response to this need for a behavioural tool, the resource has been re-written, and now specifies the behaviours required of the workforce for quality provision of care. These behaviours are central to how healthcare should be provided in the 21st century.

## Development methodology

The National Common Health Capability Resource represents the results of an analysis of all existing and publicly available competency/capability frameworks and practice standards used or applied within health in Australia. Units from the Health Training Package and Community Services Training Package were included in this analysis. To ensure the resource is also forward thinking, emerging behaviours required of the workforce were identified by scanning research and best practice examples both nationally and internationally. A list of source documents is provided in appendix C.

Development of the resource was an iterative process, oversighted by a panel of experts knowledgeable in the content and application of existing competency frameworks and practice standards in health. The development process consisted of the following stages:

### **Stage 1 – Definition of purpose**

Established a rationale for development of the resource, including identification of drivers, articulation of guiding principles, delimitation of scope, and specification of intended applications and their associated outcomes.

### **Stage 2 – Research**

Collected information on Australian health workforce roles, what work they do, and how this work is approached. Existing frameworks and standards were the primary reference source, and information was catalogued into a database for further analysis.

### **Stage 3 – Identification of shared activity groups**

Reviewed existing standards and frameworks to identify activity groupings that recurred across the source documents. Activity groups found to recur across the source documents were deemed to be common to the health workforce, and were adopted as the overarching structure of the resource.

**Stage 4 – Refinement of activity groups**

Tested initial activity groupings through a Project Advisory Group and Technical Working Group, and revised as recommended.

**Stage 5 – Identification of activity subgroups**

Reviewed existing standards and frameworks to identify component activities comprising each activity group. Component activities found to recur across the source documents were deemed to be common to the health workforce, and were adopted as the activity elements of the resource.

**Stage 6 – Refinement of activity subgroups**

Tested activity subgroups through a Technical Working Group, and revised as necessary.

**Stage 7 – Specification of behaviour indicators**

Undertook research into best practice for each activity component in order to specify the behaviours required of the workforce for excellent provision of care. Developed a measurement scale to align with the different levels of behavioural expression. This concluded development of a preliminary working draft.

**Stage 8 – Refinement of behaviour levels**

Tested the preliminary working draft with a Project Advisory Group and Technical Working Group, and revised as necessary.

**Stage 9 – Validation and revision**

Undertook focus group testing to validate the content of the resource. Suggested changes and additions were reviewed and revisions made.

## 2. Overview of the resource

### Description

The resource identifies areas of activity shared by the health workforce in the delivery of care, and articulates the underpinning behavioural skills that characterise this work being performed well. It provides a benchmark that individuals, teams, organisations, and the health system as a whole can strive towards when seeking to make changes that improve their ability to respond to the 21st century needs and expectations of consumers. These needs and expectations shape the goals of the broader health reform agenda, which is striving towards care that is more:

- Safe
- Person-centred
- Coordinated
- Collaborative
- Equitable
- Holistic
- Flexible
- Responsive

The relationship between elements of the resource and these reform outcomes are depicted in appendix D.

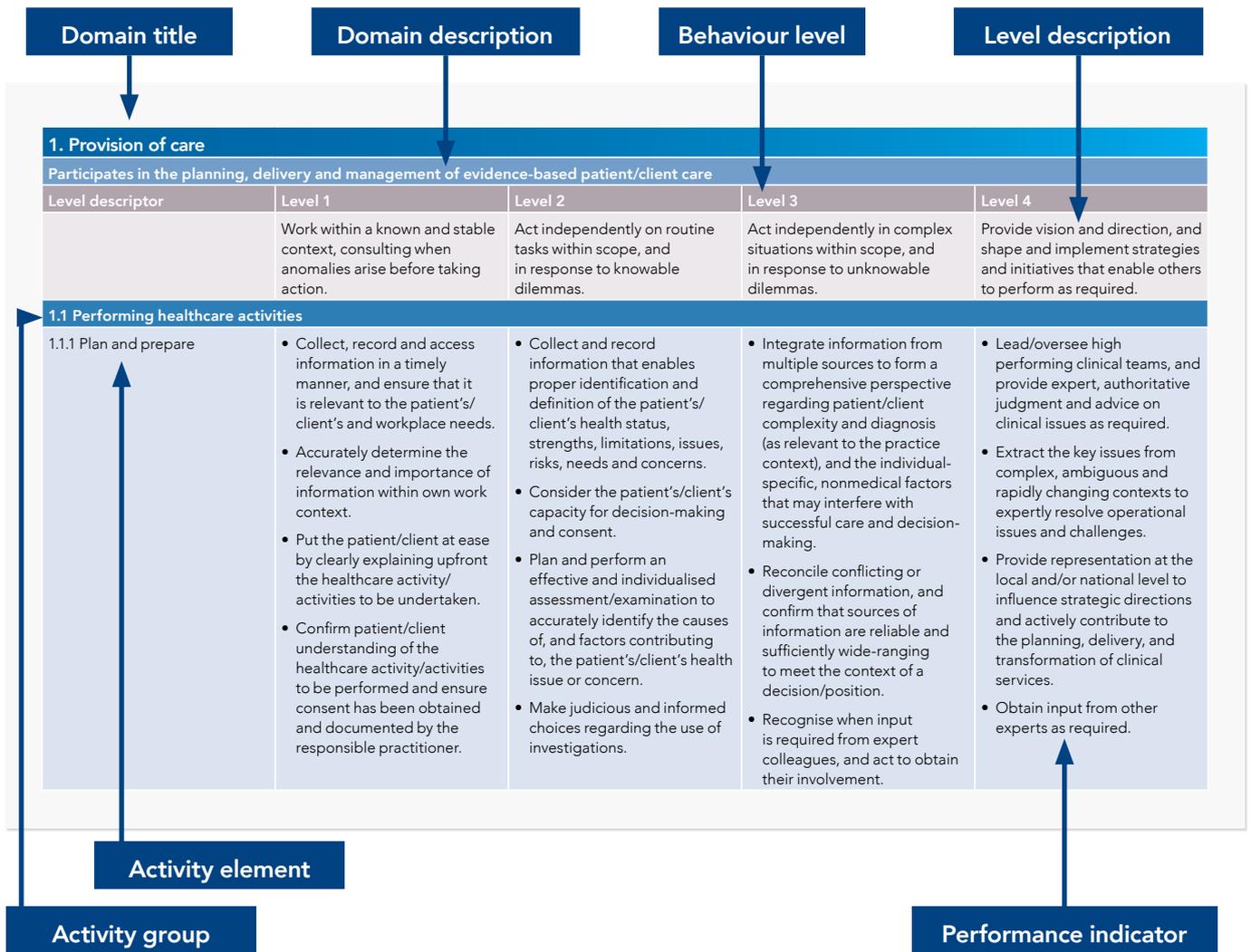
### Structure

The resource has five sections, which represent overarching domains of activity common to the Australian health workforce (see figure 1). Similar or related activities are grouped together to form a domain, which is sectioned and named by these component parts (see figure 2). The resource then specifies observable or measurable actions expected of the workforce when performing each activity. These behaviours are specified at four different levels, and reflect an increasing degree of autonomy, complexity, and strategic awareness for the activity being performed.

Figure 1. The five sections of the resource



Figure 2. Illustration of resource's structure



Levels do not equate to roles or hierarchy within the workforce. Instead, the levels reflect what level of behavioural skill is required to achieve the desired care goals or outcomes in a given situation or environment. Consequently, health workforce roles should be seen as comprising a range of behavioural skills at various different levels, as determined by the practice context.

Levels should be treated as cumulative, meaning that behavioural indicators at subsequent levels in the scale should be read in conjunction with the behaviours specified at Level 1. In applying the resource, this could mean that:

- a) A worker exhibits behaviours at the level required of their role, plus those at any lower levels.
- b) A worker exhibits the behaviours cited at the level required of their role, and has the behavioural skills specified at any lower levels, though their expression may not be required in their current job.

Given the resource's inclusion of future behavioural requirements, level 1 may initially serve as an aspirational standard in some instances, rather than accurately reflecting behaviours of current practice. Where a gap exists between current and future practice behavioural skill requirements, workplaces, educators and trainers, and the health workforce should aspire to meet the standards specified in the resource to enhance their ability to effectively meet individual and community healthcare needs.

## Uses

The resource's primary use is as a tool to support workforce innovation and reform. It offers a common language and way of conceptualising workforce innovation and reform, and tools and templates will be developed to guide and support organisations in its use.

Workforce innovation and reform initiatives are undertaken by workplaces to address current issues affecting healthcare provision, and to ensure future preparedness for responding to new and emerging challenges. Regardless of the issues themselves, these initiatives involve changes to how the workforce has historically been organised and utilised to deliver care.

Any change process should consist of three overarching stages:

1. Preparing for change
2. Implementing change
3. Reinforcing change

The resource can be used in a variety of ways to support activities at each stage. It also adds value to existing innovation and reform efforts by making salient the third but most important step in the change process, reinforcement. This step is frequently overlooked because innovation and reform initiatives are typically undertaken as discrete projects, which are time-limited in nature and have a defined beginning and end. Reinforcing activities ensure that changes are enacted repeatedly and consistently over time, until they become part of the everyday business of providing healthcare.

In workplaces, change is delivered through an intervention. Workforce redesign is one of the most recognised interventions, although there are many others. The resource serves as an input to the design and delivery of interventions, aiming to encourage and support the development of common behavioural attributes in the health workforce. These behaviours are evidence of the capabilities required for providing high quality care that meets consumer needs and expectations, both now and into the future. How the resource is applied to develop these behaviours depends on the type and stage of the intervention. Some examples are provided below.

Type	Stage	Application
Workforce redesign	Preparing	<ul style="list-style-type: none"><li>• Identifying the behaviours that underpin performance of the technical knowledge and skills to be delegated/ shared as a result of the redesign.</li><li>• Assessing current behavioural capability of the workforce to identify and prioritise areas for development.</li><li>• Designing/selecting interventions to build capability in identified areas.</li></ul>
	Implementing	<ul style="list-style-type: none"><li>• Providing training or development experiences that build requisite capability for the redesign.</li></ul>

Type	Stage	Application
Other organisational development interventions e.g. structural redesign, process re-engineering, strategic planning	Preparing	<ul style="list-style-type: none"> <li>• Developing a vision of how care will be provided in the future (i.e. culture and values), not just what services will be provided and in what volume.</li> <li>• Identifying current behaviours that inhibit achievement of the future vision.</li> <li>• Designing strategies and interventions to capitalise on current behavioural strengths and overcome behavioural weaknesses.</li> </ul>
	Implementing	<ul style="list-style-type: none"> <li>• Undertaking activities to enhance the workforce's ability to implement the vision and achieve change. e.g. leadership development, team-building, coaching, training.</li> </ul>
	Reinforcing	<ul style="list-style-type: none"> <li>• Embedding desired behaviours into existing systems and processes (e.g. Human Resource management) for long-term sustainability of changes.</li> </ul>

In many instances, there will be overlap in the applications associated with each intervention. This is because all health workforce interventions are striving towards the same future state (i.e. a health workforce with the capabilities required for high quality provision of care).

Appendix E illustrates how the resource may be used by workplaces in the design, delivery and reinforcement of interventions. Some general areas of application are further described in appendix F.

## Related documents

The National Common Health Capability Resource is best used in conjunction with other information sources to ensure completeness when designing and implementing a change.

Professional competency/capability frameworks and practice standards provide meaningful context for the behaviours specified in the resource, and are the primary reference for technical and discipline-specific knowledge and skills, which are not captured here.

In addition to the resource, Health Workforce Australia is responsible for the development of some related tools, which supplement the information contained in this document. Each tool specifies whole-of-workforce capabilities in relation to a specific functional area. These functional areas currently include:

- Leadership.
- Clinical supervision.
- eHealth.
- Mental health.
- Aged care.

Whilst the resource makes reference to these functions at a general level, these tools provide an added layer of detail and specificity regarding the knowledge, skills and activities that underpin performance of these functions. These information sources should serve as a logical next reference point for those areas of interest.

Users of the resource may also wish to explore how it relates to other frameworks within their workplace or sector, including organisational, career and curriculum frameworks. This is best achieved through a mapping exercise, in which the capabilities of the resource are compared against the components of each framework to identify areas of alignment and areas of distinction. Although impossible to perform this mapping for every framework in existence and present the results here, it is useful to consider how the resource relates to the Australian Qualifications Framework (AQF).

The AQF underpins the national system of qualifications in the education and training sectors, which supply a significant proportion of Australia's health workforce. It is a taxonomy of learning outcomes, and provides clarity on the differences and relationships between AQF levels and qualification types. Level descriptors in the resource have been written with regard for the AQF summaries of how knowledge and skills gained through a qualification could be applied upon successful completion of a learning process. However, the resource and the AQF contain a different number of levels because their content reflects different concepts. The Resource reflects levels of behavioral expression in the workplace, whereas the AQF reflects learning outcomes against levels and qualifications types. Although related, there is not a one-to-one relationship between qualifications and levels of performance within the workplace.

# 3. The resource

## Summary

### 1. Provision of care

- 1.1 Performing healthcare activities
  - 1.1.1 Plan and prepare
  - 1.1.2 Perform and deliver
  - 1.1.3 Monitor and evaluate
  - 1.1.4 Modify or replan
- 1.2 Supporting processes and standards
  - 1.2.1 Evidence-based practice
  - 1.2.2 Quality care provision and risk management
  - 1.2.3 Information management

### 2. Collaborative practice

- 2.1 Collaborating with clients
  - 2.1.1 Relationship building
  - 2.1.2 Shared decision-making
  - 2.1.3 Shared responsibility
- 2.2 Collaborating interprofessionally
  - 2.2.1 Vision and objectives
  - 2.2.2 Role clarity
  - 2.2.3 Workplace communication
  - 2.2.4 Collaboration within and across teams
  - 2.2.5 Collaborative decision-making
  - 2.2.6 Conflict management
  - 2.2.7 Team reflexivity
  - 2.2.8 Individual contribution
- 2.3 Collaborating across time and place
  - 2.3.1 Clinical handover, follow-up and referral
  - 2.3.2 Integrated care

### 3. Health values

- 3.1 Respect
- 3.2 Equity
- 3.3 Diversity
- 3.4 Prevention and wellness
- 3.5 Whole person focus
- 3.6 Responsible use of resources
- 3.7 Innovation and change

### 4. Professional, ethical and legal approach

- 4.1 Professional behaviours
  - 4.1.1 Ethical and legal practice
  - 4.1.2 Self-regulation and self-management
  - 4.1.3 Accountability
  - 4.1.4 Conscientiousness
  - 4.1.5 Integrity
  - 4.1.6 Self-care

### 5. Life-long learning

- 5.1 Development of self
  - 5.1.1 Life-long learning and professional development
  - 5.1.2 Self-reflection
- 5.2 Development of others
  - 5.2.1 Professional support relationships
  - 5.2.2 Feedback and peer assessment

## Domain 1 – Provision of care

1. Provision of care				
Participates in the planning, delivery and management of evidence-based patient/client care				
Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.
1.1 Performing healthcare activities				
1.1.1 Plan and prepare	<ul style="list-style-type: none"> <li>• Collect, record and access information in a timely manner, and ensure that it is relevant to the patient's/client's and workplace needs.</li> <li>• Accurately determine the relevance and importance of information within own work context.</li> <li>• Put the patient/client at ease by clearly explaining upfront the healthcare activity/activities to be undertaken.</li> <li>• Confirm patient/client understanding of the healthcare activity/activities to be performed and ensure consent has been obtained and documented by the responsible practitioner.</li> <li>• Assist others to plan and prepare for healthcare activities as required.</li> </ul>	<ul style="list-style-type: none"> <li>• Collect and record information that enables proper identification and definition of the patient's/client's health status, strengths, limitations, issues, risks, needs and concerns.</li> <li>• Consider the patient's/client's capacity for decision-making and consent.</li> <li>• Plan and perform an effective and individualised assessment/examination to accurately identify the causes of, and factors contributing to, the patient's/client's health issue or concern.</li> <li>• Make judicious and informed choices regarding the use of investigations.</li> </ul>	<ul style="list-style-type: none"> <li>• Integrate information from multiple sources to form a comprehensive perspective regarding patient/client complexity and diagnosis (as relevant to the practice context), and the individual-specific, nonmedical factors that may interfere with successful care and decision-making.</li> <li>• Reconcile conflicting or divergent information, and confirm that sources of information are reliable and sufficiently wide-ranging to meet the context of a decision/position.</li> <li>• Recognise when input is required from expert colleagues, and act to obtain their involvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Lead/oversee high performing clinical teams, and provide expert, authoritative judgment and advice on clinical issues as required.</li> <li>• Extract the key issues from complex, ambiguous and rapidly changing contexts to expertly resolve operational issues and challenges.</li> <li>• Provide representation at the local and/or national level to influence strategic directions and actively contribute to the planning, delivery, and transformation of clinical services.</li> <li>• Obtain input from other experts as required.</li> </ul>

## 1. Provision of care

### Participates in the planning, delivery and management of evidence-based patient/client care

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 1.1 Performing healthcare activities

1.1.1 Plan and prepare	<ul style="list-style-type: none"> <li>• Seek guidance and assistance when required.</li> </ul>	<ul style="list-style-type: none"> <li>• Inform the patient/client of any risks relating to their health, proposed treatments and ongoing service delivery, confirm their understanding, and obtain and record their consent</li> <li>• Formulate a preliminary hypothesis and differential diagnoses, as relevant to the practice context, effectively using and relating all essential information pertaining to the individual's health issue or concern.</li> <li>• Establish individualised goals and objectives for treatment/care, and criteria for determining whether goals are being met.</li> <li>• Recognise when input is required from more senior colleagues, and act to obtain their involvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Plan for, and effectively manage, contingencies that may affect the performance of healthcare activities.</li> </ul>	
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## 1. Provision of care

### Participates in the planning, delivery and management of evidence-based patient/client care

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 1.1 Performing healthcare activities

1.1.2 Perform/deliver	<ul style="list-style-type: none"> <li>Clearly and accurately explain own activity to the patient/client, and confirm that the patient/client understands and agrees before proceeding.</li> <li>Work within the scope of authority given by the patient/client when performing healthcare activities.</li> <li>Safely and effectively carry out own role and responsibilities relating to the implementation of a management plan/intervention.</li> <li>Constructively assist others to implement healthcare activities as required.</li> </ul>	<ul style="list-style-type: none"> <li>Prioritise patient/client needs, and provide the patient/client with treatment/management options where these exist.</li> <li>Formulate, implement and document an effective and tailored management plan/intervention for known situations.</li> <li>Specify and discuss with the patient/client the expected outcomes of the management plan/intervention.</li> <li>Facilitate active participation of the patient/client in the management plan/intervention, insofar as possible.</li> <li>Recognise when input is required from more senior colleagues, and act to obtain their involvement.</li> </ul>	<ul style="list-style-type: none"> <li>Formulate, implement and document an effective and tailored management plan/intervention for complex situations.</li> <li>Identify when a patient/client is unable to make a healthcare decision, and act in the patient's/client's best interests until a proxy can be found, and with due regard for the law.</li> <li>Confirm the responsibilities of all involved in the provision of each person's care.</li> <li>Recognise when input is required from expert colleagues, and act to obtain their involvement.</li> </ul>	<ul style="list-style-type: none"> <li>Provide expert advice/guidance to other practitioners, as required, to support their safe and effective performance of healthcare activities.</li> <li>Develop, apply and promote appropriate and innovative models of care.</li> <li>Obtain input from other experts as required to support the achievement of treatment/care goals.</li> </ul>
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## 1. Provision of care

### Participates in the planning, delivery and management of evidence-based patient/client care

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### 1.1 Performing healthcare activities

1.1.3 Monitor and evaluate	<ul style="list-style-type: none"> <li>• Monitor the patient/client's response to treatment/intervention.</li> <li>• Act to keep the patient/client informed of their progress.</li> <li>• Recognise and promptly report changes in the health and functional status of the patient/client to the supervising practitioner.</li> <li>• Promptly advise a more senior colleague if the patient/client is unhappy or at risk.</li> </ul>	<ul style="list-style-type: none"> <li>• Reflect with the patient/client on their progress, and how well the service system is supporting them to achieve the goals and objectives of their care/treatment.</li> <li>• Evaluate and document whether the treatment/intervention has achieved the desired goals/outcomes, using criteria established during planning.</li> <li>• Review monitoring plans on a regular basis, and initiate escalation protocol appropriately when required.</li> </ul>	<ul style="list-style-type: none"> <li>• Evaluate the management plan/intervention for effectiveness, efficiency and quality, and accurately document the outcomes.</li> <li>• Use evaluation outcomes effectively to make recommendations for future practice.</li> <li>• Educate staff on the local escalation protocol relevant to their position, and encourage them to react positively to escalation of care.</li> <li>• Contribute to multidisciplinary efforts that aim to improve the safety of patients/clients who are vulnerable to unexpected deterioration.</li> </ul>	<ul style="list-style-type: none"> <li>• Act to ensure formal processes exist for evaluating whether treatment/care has met patient-client needs and been delivered as agreed with the patient-client and any other care contributors.</li> <li>• Act to ensure monitoring and escalation plans are in place and actioned appropriately by staff.</li> <li>• Contribute to regular review of organisational recognition and response systems.</li> <li>• Lead continuous improvement cycles to ensure care remains safe and efficient.</li> </ul>
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## 1. Provision of care

### Participates in the planning, delivery and management of evidence-based patient/client care

Level descriptor	Level 1	Level 2	Level 3	Level 4
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### 1.1 Performing healthcare activities

1.1.4 Modify or replan	<ul style="list-style-type: none"> <li>Identify when a treatment/intervention should be modified or stopped, and report to the responsible practitioner.</li> </ul>	<ul style="list-style-type: none"> <li>Appropriately modify activities in recognition of factors that may impact the process, such as patient/client circumstances and beliefs.</li> </ul>	<ul style="list-style-type: none"> <li>Explore changes to treatment as appropriate to the complexity of the case and vary the treatment/intervention as necessary to meet the patient's/client's changing needs.</li> </ul>	<ul style="list-style-type: none"> <li>Use expert ability and insight to manage complexity and/or generate alternative courses of action based on the patient's/client's needs and preferences.</li> <li>Obtain input from other experts as required to support the achievement of treatment/care goals.</li> </ul>
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### 1.2 Supporting processes and standards

1.2.1 Evidence-based practice	<ul style="list-style-type: none"> <li>Recognise the relevance of research for improving health outcomes, and assist with research activities, as required by own role.</li> </ul>	<ul style="list-style-type: none"> <li>Evaluate evidence from literature and research to determine appropriate actions for practice.</li> <li>Participate in research activity as required.</li> <li>Make recommendations for actioning research results as appropriate.</li> </ul>	<ul style="list-style-type: none"> <li>Evaluate information against accepted standards of judgement, as determined by the context/discipline/field.</li> <li>Conduct and collaborate in healthcare research.</li> <li>Disseminate findings using a range of methods.</li> <li>Supervise others in the completion of research tasks as required.</li> </ul>	<ul style="list-style-type: none"> <li>Generate new knowledge through research.</li> <li>Create opportunities for stakeholders in the design, conduct and evaluation of research.</li> <li>Facilitate the application of new knowledge and skills into practice.</li> </ul>
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## 1. Provision of care

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## 1.2 Supporting processes and standards

### 1.2.2 Quality care provision and risk management

<ul style="list-style-type: none"> <li>• Perform healthcare activities safely and effectively, applying accepted risk assessment and risk management techniques.</li> <li>• Adhere to infection control policies and procedures, and constructively raise any concerns with colleagues/managers.</li> <li>• Recognise and act on personal factors which may contribute to patient/client risk.</li> <li>• Report potential risks to an appropriate person.</li> <li>• Identify and adhere to principles and methods of quality improvement.</li> <li>• Support the implementation of safety and quality initiatives.</li> <li>• Identify existing and potential hazards in the workplace, report them to designated persons and record them in accordance with workplace procedures.</li> </ul>	<ul style="list-style-type: none"> <li>• Identify the likelihood and consequence of actual and potential clinical risks, and determine which clinical risks need to be managed and treated as a priority.</li> <li>• Identify and assess the range of options for treating clinical risk, and prepare and implement risk treatment plans.</li> <li>• Model good infection control practices, and initiate procedures to ensure staff and patients/clients are protected.</li> <li>• Act to reduce error and sources of risk in own practice and within the healthcare team.</li> <li>• Participate in systems for surveillance and monitoring of adverse events.</li> <li>• Participate in safety and quality programs that seek to reduce the causes of harm in healthcare.</li> </ul>	<ul style="list-style-type: none"> <li>• Act to ensure that staff understand their individual roles and responsibilities for clinical risk management.</li> <li>• Empower all staff to identify, analyse, report and manage risks.</li> <li>• Empower staff to raise infection control issues with colleagues and managers.</li> <li>• Act to reduce error and sources of risk in own practice and within the broader healthcare setting.</li> <li>• Support colleagues who raise concerns about patient/client safety.</li> <li>• Integrate quality management principles into operational activities of the healthcare team.</li> <li>• Integrate safety and quality clinical practice guidelines into everyday care.</li> </ul>	<ul style="list-style-type: none"> <li>• Act to ensure patient/client safety by expertly managing clinical risk, and intervene if necessary to achieve optimal outcomes for the patient/client and healthcare teams.</li> <li>• Contribute to the development and implementation of arrangements that ensure clinical risk management is an integral part of the planning and management processes and general culture of the organisation.</li> <li>• Ensure infection control policies and procedures are in place, and embed into governance and management structures.</li> <li>• Foster a supportive, open culture, in which mistakes are treated as opportunities for improvement.</li> </ul>
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## 1. Provision of care

### Participates in the planning, delivery and management of evidence-based patient/client care

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### 1.2 Supporting processes and standards

1.2.2 Quality care provision and risk management		<ul style="list-style-type: none"> <li>Act to eliminate workplace hazards and to reduce risks to colleagues and patients/clients.</li> </ul>	<ul style="list-style-type: none"> <li>Manage and maintain a safe working environment.</li> </ul>	<ul style="list-style-type: none"> <li>Lead and promote the adoption of safety and quality guidelines and practices that assist in reducing the causes of harm in healthcare.</li> </ul>
1.2.3 Information management	<ul style="list-style-type: none"> <li>Document information according to established data capture standards and local guidelines.</li> <li>Seek guidance from colleagues when unsure of information management processes in a given context or how to put into practice in own role.</li> <li>Act to ensure patient-clients understand their rights in relation to the information, including how to access, request changes or make a complaint.</li> <li>Supply information in a timely manner, and according to organisational policies/protocols and legal requirements.</li> </ul>	<ul style="list-style-type: none"> <li>Recognise the circumstances under which information can, should and must be shared, and follow the policies, processes and legislation governing this information sharing.</li> <li>Maintain accurate, up-to-date and legible patient-client records.</li> <li>Take prompt and effective action to deal with information that is inadequate, contradictory or ambiguous.</li> </ul>	<ul style="list-style-type: none"> <li>Promote adoption of best practice standards and technologies for collection and storage of health information.</li> <li>Contribute to the design and implementation of comprehensive and effective records management programs.</li> <li>Identify and implement processes for periodic review of information management to ensure ongoing efficiency and effectiveness.</li> <li>Provide advice and guidance to staff on working with information and making the best use of the data available to support program and treatment design.</li> </ul>	<ul style="list-style-type: none"> <li>Inform and influence the development and adoption of an effective information governance framework for management of the organisation's information.</li> <li>Develop and implement policies and strategies for information sharing and use.</li> <li>Promote a multidisciplinary approach to ongoing evaluation/audit of health records to enable continuous quality improvement.</li> </ul>

## 1. Provision of care

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## 1.2 Supporting processes and standards

1.2.3 Information management	<ul style="list-style-type: none"> <li>• Consider risks to the safe, secure storage of health information, and act to manage these risks in daily practice.</li> <li>• Update, modify and maintain information as permitted by work role and in accordance with organisational policies/ protocols and legal requirements.</li> <li>• Use contemporary information technology for the documentation and management of patient/client information, and to improve communication of information between healthcare professionals.</li> </ul>			
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## Domain 2 – Collaborative practice

2. Collaborative practice				
Builds and maintains effective working relationships and works in partnership with others.				
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2.1 Collaborating with clients				
2.1.1 Relationship building	<ul style="list-style-type: none"> <li>Establish trust with the patient/client by demonstrating understanding, respect and acceptance.</li> <li>Use active listening skills to achieve an understanding of the patient's/client's point of view.</li> <li>Build credibility with the patient/client by being honest, sincere, and following through on promised actions.</li> </ul>	<ul style="list-style-type: none"> <li>Negotiate appropriate boundaries with the patient/client and ways of working together.</li> <li>Demonstrate trust in the patient's/client's ability to self-manage appropriate responsibilities.</li> <li>Demonstrate sensitivity and responsiveness to patient/client characteristics and needs.</li> <li>Create a sense of security for the patient/client by being readily available to answer their questions and concerns.</li> <li>Treats patient/client as partners in their own care.</li> </ul>	<ul style="list-style-type: none"> <li>Recognise the power imbalance that exists in the relationship between patient/client and practitioner, and support the patient/client to make decisions about their healthcare.</li> <li>Use open questions to better explore the patient's/client's deeper feelings, issues and capacity to self-manage.</li> </ul>	<ul style="list-style-type: none"> <li>Support and foster integrated care strategies that contribute to provider continuity, thereby preserving and strengthening therapeutic relationships.</li> <li>Lead and promote activity that includes the patient/client as part of the care team.</li> </ul>

## 2. Collaborative practice

Builds and maintains effective working relationships and works in partnership with others.

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### 2.1 Collaborating with clients

#### 2.1.2 Shared decision-making

<ul style="list-style-type: none"> <li>• Determine patient's/client's preferences for involvement in decision-making.</li> <li>• Demonstrate respect for each patient's/client's values, preferences, and expressed needs.</li> <li>• Provide decision aids to assist the patient/client with their decision-making.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide each patient/client with the emotional support they need to express their values and preferences.</li> <li>• Engage each patient/client in conversation and deliberation regarding their treatment/intervention preferences, and reassess at determined intervals.</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage further deliberation when a patient's/client's treatment/intervention decision appears inconsistent with their stated priorities.</li> <li>• Accurately interpret each patient's/client's reactions to new information regarding benefits, risks, and side-effects of relevant treatment/intervention options.</li> <li>• Explore each person's ideas, fears, and expectations of the problem and possible treatments/interventions.</li> </ul>	<ul style="list-style-type: none"> <li>• Promote a workplace culture in which patients'/clients' views about treatment options are valued and deemed necessary by staff.</li> <li>• Develop and evaluate policy initiatives that aim to foster patient/client involvement and provide them with real and meaningful choices about treatment options.</li> </ul>
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## 2. Collaborative practice

Builds and maintains effective working relationships and works in partnership with others.

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### 2.1 Collaborating with clients

#### 2.1.3 Shared responsibility

<ul style="list-style-type: none"> <li>Recognise the patient's/client's self-care efforts, and assist them to develop and improve self-management skills.</li> <li>Support patients/clients in self-care by breaking skills to be learned into manageable steps.</li> <li>Provide enough time for the patient/client to practice new skills and build self-efficacy.</li> </ul>	<ul style="list-style-type: none"> <li>Provide individualised education to teach self-care skills that address the needs and concerns defined by each patient/client and the situation.</li> <li>Establish short-term, realistic goals in collaboration with each patient/client, to encourage gradual changes in behaviour and improvements in skill mastery.</li> <li>Assess mastery of self-care skills, and expand each patient's/client's capability.</li> <li>Recognise accomplishment and offer constructive feedback/ reinforcement to the patient/client and staff after each step.</li> <li>Link people to support groups, matched wherever possible on the following characteristics: age, gender, ethnic origin, and socioeconomic status.</li> </ul>	<ul style="list-style-type: none"> <li>Build effective strategies for informing and empowering patients/clients, and increasing their active involvement in their health and healthcare.</li> <li>Evaluate patient/client involvement and self-management strategies to increase the evidence base for future policy interventions and patient engagement initiatives.</li> </ul>	<ul style="list-style-type: none"> <li>Lead, encourage and support a workplace that values a shared responsibility for best practice healthcare.</li> </ul>
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## 2. Collaborative practice

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### 2.2 Collaborating interprofessionally

2.2.1 Vision and objectives	<ul style="list-style-type: none"> <li>• Work in partnership with other health professionals towards common goals, recognising that the interests of patients/clients are the overriding shared objective for interprofessional healthcare delivery.</li> <li>• Participate constructively with other healthcare professionals in collaborative goal setting and prioritisation for patient/client care.</li> </ul>	<ul style="list-style-type: none"> <li>• Collaborate with other health professionals to establish goals that are clear and measurable, and demonstrate shared ownership of these goals.</li> <li>• Link patient/client care goals to professional and team objectives.</li> <li>• Proactively seek opportunities to streamline care through the involvement of other healthcare professionals, where appropriate, both within and external to the organisation.</li> </ul>	<ul style="list-style-type: none"> <li>• Facilitate interprofessional goal setting to establish common goals.</li> <li>• Achieve goal agreement through a common commitment to patient/client needs.</li> <li>• Contribute to the creation of work environments in which staff feel safe and encouraged to develop shared purpose and action.</li> <li>• Translate vision and objectives into concrete work activities at the local level.</li> </ul>	<ul style="list-style-type: none"> <li>• Lead and motivate staff to strive for and achieve interprofessional team goals using a compelling organisational vision.</li> <li>• Promote a work culture in which interprofessional teamwork and shared responsibility for the provision of care is normative practice.</li> <li>• Articulate and embody the purpose and values of the organisation.</li> </ul>
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## 2. Collaborative practice

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### 2.2 Collaborating interprofessionally

2.2.2 Role clarity	<ul style="list-style-type: none"> <li>Understand own role and the roles of others in the provision and coordination of care, and use this knowledge appropriately when working to meet patient/client needs and goals.</li> <li>Clarify work priorities and job expectations with a manager/supervisor as required.</li> </ul>	<ul style="list-style-type: none"> <li>Mutually explore role expectations with team members/other professionals when confronted with unclear or conflicting perceptions.</li> <li>Provide regular, constructive feedback regarding performance against established role expectations.</li> </ul>	<ul style="list-style-type: none"> <li>Set clear expectations upfront regarding the duties and associated outcomes expected of each person in the team.</li> <li>Encourage staff to seek clarification early if they are unclear about the scope/responsibilities of their role, and what performance is expected of them.</li> <li>Collectively review who is responsible for which aspects of care, and track performance against work objectives, on a regular basis.</li> </ul>	<ul style="list-style-type: none"> <li>Provide a clear vision of how roles, teams and units relate within the broader organisation and to its larger purpose, and articulate the organisation's role within the wider health system.</li> <li>Clearly define and communicate the culture, behaviours and outcomes desired in the workplace.</li> <li>Act to ensure systems are in place to enable staff to raise concerns about any conflicts they have in their role and responsibilities.</li> </ul>
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## 2. Collaborative practice

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### 2.2 Collaborating interprofessionally

#### 2.2.3 Workplace communication

<ul style="list-style-type: none"> <li>Express thoughts and ideas clearly, directly, honestly, and with respect for others and for the work of the team.</li> <li>Actively listen to information being communicated.</li> <li>Confirm that the receiver (patient/client or colleague) has correctly interpreted and understood the message or information being communicated.</li> <li>Provide opportunity for questions and/or feedback so that two-way communication can be established and maintained.</li> <li>Share information promptly, accurately, and willingly with others, as appropriate, to support them in undertaking their role.</li> </ul>	<ul style="list-style-type: none"> <li>Use feedback and disclosure appropriately to increase mutual understanding.</li> <li>Openly acknowledge professional assumptions and differences.</li> <li>Act to remove personal barriers to effective communication.</li> <li>Use terminology that can be understood by the receiver.</li> <li>Advise colleagues when communication messages are not clear or are causing confusion, and seek clarification.</li> </ul>	<ul style="list-style-type: none"> <li>Establish regular patterns of communication where colleagues can share ideas and information quickly and easily.</li> <li>Use feedback processes to assist teams and individuals to communicate more effectively.</li> <li>Act to reduce the impact of power and status relationships on team communication processes.</li> <li>Use multiple channels of communication to reinforce complex messages and decrease the likelihood of misunderstanding.</li> </ul>	<ul style="list-style-type: none"> <li>Lead and promote open, upward communication by responding genuinely to staff.</li> <li>Provide staff with the information and systems they need to work effectively.</li> <li>Foster and promote a work culture that encourages open and effective communication.</li> </ul>
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## 2. Collaborative practice

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### 2.2 Collaborating interprofessionally

2.2.4 Collaboration within and across teams	<ul style="list-style-type: none"> <li>• Recognise that a collaborative approach is the best way to deliver care, and actively involve others, as appropriate, in the performance and management of daily activities.</li> <li>• Share responsibility for team actions, and support others as needed.</li> <li>• Share information and knowledge to enhance the effectiveness of teamwork and collaboration.</li> <li>• Value the input and contribution of others to the achievement of best practice provision of care.</li> </ul>	<ul style="list-style-type: none"> <li>• Engage team members and other relevant healthcare professionals in the development and implementation of strategies that meet specific patient-client care needs.</li> <li>• Develop mutual knowledge that contributes to effective coordination, improved team performance, and enhanced patient/client outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>• Establish and maintain effective and healthy working partnerships, regardless of whether formalised teams exist.</li> <li>• Establish norms that effectively govern interprofessional team functioning.</li> <li>• Encourage respect, understanding and trust within and across teams, and motivate staff to act in the collective interest.</li> <li>• Share accountability with other professions for interprofessional teamwork and team-based care.</li> </ul>	<ul style="list-style-type: none"> <li>• Create effective alliances within and across teams and departments of the organisation.</li> <li>• Act to ensure that clear policies are in place to guide the way interprofessional teams work.</li> <li>• Foster and promote a work culture that values cooperation, teamwork, openness, collaboration, honesty and respect for others.</li> <li>• Model leadership practices that support collaborative practice and interprofessional team effectiveness.</li> </ul>
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## 2. Collaborative practice

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### 2.2 Collaborating interprofessionally

2.2.5 Collaborative decision-making	<ul style="list-style-type: none"> <li>• Make day-to-day decisions as appropriate to own work role, and in consultation with others.</li> <li>• Gather and share information to support good decision-making.</li> </ul>	<ul style="list-style-type: none"> <li>• Act to ensure the wishes and needs of patients/clients are factored into decision-making within and across teams.</li> <li>• Engage other health professionals, as appropriate to the specific care situation, in shared patient-centred problem-solving, and integrate their knowledge and experience to inform care decisions.</li> <li>• Re-evaluate own position in light of new information from others.</li> </ul>	<ul style="list-style-type: none"> <li>• Facilitate the collective development of criteria to guide collaborative decision-making.</li> <li>• Implement agreed procedures for collaborative decision-making that values and includes the opinions of patients/clients.</li> <li>• Promote and support constructive discussion on areas of disagreement.</li> <li>• Develop and implement processes for evaluating the effectiveness of the decision-making process and resulting outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>• Establish processes that promote shared decision-making, communication of decisions, and community involvement.</li> <li>• Act to ensure that there are detailed and transparent rules and processes for establishing and/or allocating decision-making authority in the workplace.</li> <li>• Explore and make use of opportunities for improving departmental/ organisational decision making processes and outcomes.</li> </ul>
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## 2. Collaborative practice

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### 2.2 Collaborating interprofessionally

2.2.6 Conflict management	<ul style="list-style-type: none"> <li>Recognise issues that may lead to conflict, and constructively address issues as they arise.</li> <li>Where appropriate, ensure conflict situations are escalated for advice and resolution.</li> </ul>	<ul style="list-style-type: none"> <li>Treat conflict as friction between ideas, not people.</li> <li>Consider different points of view, and compromise, where necessary and appropriate, to reach consensus.</li> <li>Negotiate skilfully in difficult situations to agree concessions without damaging relationships.</li> </ul>	<ul style="list-style-type: none"> <li>Identify, document and address dysfunctional team processes.</li> <li>Act to resolve complex issues by achieving common understanding on diverging interests, and mediating conflict situations as necessary.</li> <li>Navigate solutions towards desired ends, remaining aware of goals and objectives, maintaining relationships, and supporting consensus.</li> </ul>	<ul style="list-style-type: none"> <li>Anticipate conflict, and act to keep a relative balance among the interests of relevant individuals and/or groups.</li> <li>Engage self and others to constructively manage disagreements about values, roles, goals, and actions that arise within and across healthcare teams.</li> <li>Broker win-win outcomes by fashioning creative solutions to problems that satisfy all parties.</li> <li>Promote understanding, respect and trust between different groups to enable collaboration, interconnectedness and positive care outcomes.</li> </ul>
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## 2. Collaborative practice

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### 2.2 Collaborating interprofessionally

2.2.7 Team reflexivity	<ul style="list-style-type: none"> <li>Regulate and adapt behaviour to the demands of the situation in order to achieve work goals.</li> <li>Reflect on own role within the team and seek input about the effectiveness and responsiveness of own actions.</li> </ul>	<ul style="list-style-type: none"> <li>Reflect with colleagues on the objectives, strategies, processes, environment(s) and outcomes of interprofessional teamwork and care, and plan and implement strategies to facilitate improved performance.</li> </ul>	<ul style="list-style-type: none"> <li>Encourage joint and overt exploration of work-related issues to ensure continuous improvement.</li> <li>Create regular opportunities for staff to come together and recognise the work being undertaken, share information, generate ideas, and learn from successes, failures and challenges.</li> </ul>	<ul style="list-style-type: none"> <li>Create an environment of safety to support and encourage reflexivity and continual improvement.</li> </ul>
2.2.8 Individual contribution	<ul style="list-style-type: none"> <li>Maintain flexibility and adaptability when working with others.</li> <li>Work cooperatively with, and be receptive to the ideas of, others.</li> <li>Respond constructively to requests for assistance, and take the initiative to offer help.</li> <li>Develop trust, through experience, in the competence and reliability of others.</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrate empathy towards other team members and recognise their needs and skills.</li> <li>Take collective ownership of problems to develop a no blame culture.</li> <li>Share openly and authentically with others regarding personal feelings, opinions, thoughts, and perceptions about problems and conditions.</li> </ul>	<ul style="list-style-type: none"> <li>Exhibit a positive self-image regarding own professional contribution, and foster the development of professional self-esteem in others.</li> <li>Develop mechanisms to ensure reflection and self-learning is supported and encouraged.</li> </ul>	<ul style="list-style-type: none"> <li>Share the credit for achievement willingly and generously.</li> <li>Invest time in developing strong personal relationships at all levels, and actively manage the tension between service delivery and relationship-building.</li> <li>Promote and sustain trust between members of the organisation/service.</li> </ul>

## 2. Collaborative practice

Builds and maintains effective working relationships and works in partnership with others.

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 2.3 Collaborating across time and place

2.3.1 Clinical handover, follow-up, and referral

<ul style="list-style-type: none"> <li>• Contribute to, and participate in, handover processes.</li> <li>• Ensure patient/client needs and wishes are communicated in the handover.</li> </ul>	<ul style="list-style-type: none"> <li>• Conduct a thorough handover to ensure patient care is maintained.</li> <li>• Establish mechanisms to include patients/clients and carers in clinical handover processes related to their care.</li> <li>• Assess the need for follow-up, and arrange if necessary.</li> <li>• Recognise when the diagnosis and/or treatment of a patient-client is beyond own skills, and refer the patient-client to other professionals as required.</li> </ul>	<ul style="list-style-type: none"> <li>• Establish a system for coordinating and performing follow-up within the service and based on patient-client needs.</li> <li>• Educate staff on handover protocol.</li> <li>• Review the clinical handover procedure and undertake continuous improvement processes.</li> <li>• Act to ensure effective transfer of care, as permitted within own sphere of influence</li> </ul>	<ul style="list-style-type: none"> <li>• Contribute to the coordinated development of a standardised, general handover policy for the organisation.</li> <li>• Lead the development of intra- and inter-organisation patient/client handover systems that ensure care is optimised, timely and appropriate to need.</li> <li>• Seek the advice and guidance of other experts to determine the best transition of care pathway where appropriate.</li> </ul>
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## 2. Collaborative practice

Builds and maintains effective working relationships and works in partnership with others.

Level descriptor	Level 1	Level 2	Level 3	Level 4
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### 2.3 Collaborating across time and place

2.3.2 Integrated care	<ul style="list-style-type: none"> <li>• Provide patients/clients with information on accessing additional services and health programs.</li> <li>• Seek advice from others about the most appropriate ongoing care requirements for patients/clients leaving own care.</li> </ul>	<ul style="list-style-type: none"> <li>• Establish, maintain and value professional relationships with other service providers, and work to understand their role and capacities in the provision of each patient's/client's care.</li> <li>• Collaborate across health, community, and social service organisations to develop individualised care plans that reflect both current and long-term needs and goals for care.</li> <li>• Provide detailed, timely, and accurate information to the general practitioner and other healthcare professionals who will provide the next phase(s) of care.</li> </ul>	<ul style="list-style-type: none"> <li>• Build sustainable partnerships with other service providers to optimise use of resources and provide best practice ongoing care.</li> <li>• Facilitate inter-agency care planning, and act to ensure there is a lead agency with responsibility for coordinating or case managing the patient's/client's overall care.</li> <li>• Encourage and facilitate the involvement of a general practitioner at all relevant stages of the patient's/client's care.</li> <li>• Support the use of technology and information infrastructure to improve the provision of care and information communication across multiple agencies.</li> </ul>	<ul style="list-style-type: none"> <li>• Contribute to the development of an integrated healthcare system that has a strong focus on community and patient/client needs and outcomes.</li> <li>• Develop and implement agreements with other agencies that articulate the activities, responsibilities and processes for the coordination of care.</li> <li>• Investigate and promote opportunities to use technology to improve the delivery of healthcare and communication of information across multiple agencies.</li> </ul>
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## Domain 3 – Health values

3. Health values				
Recognises the complexity of health and healthcare systems and engages in processes and activities that promote safe, quality, effective services for all.				
Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.
3.1 Respect				
3.1 Respect	<ul style="list-style-type: none"> <li>• Treat colleagues and patients/clients as equals, and with courtesy, kindness and regard for how they wish to be treated.</li> <li>• Act to protect patient/client privacy and dignity at all times.</li> <li>• Demonstrate respect and tolerance for individual differences.</li> <li>• Recognise and avoid using actions, practices, language and symbols that communicate disrespect for individuals, identities and/or groups.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide encouragement to others for their ideas and efforts.</li> <li>• Listen with positive attention, and sincerely acknowledge the humanity, significance, and worth of others.</li> </ul>	<ul style="list-style-type: none"> <li>• Empower people to make themselves heard, and to have their experiences and perspectives available to others in order to shape and influence organisational decision-making and provision of healthcare.</li> <li>• Adopt a zero tolerance approach towards disrespectful and discriminatory behaviour in the workplace.</li> </ul>	<ul style="list-style-type: none"> <li>• Create a culture of mutual respect which encourages staff to understand individual and group differences and embrace diversity.</li> </ul>

### 3. Health values

Recognises the complexity of health and healthcare systems and engages in processes and activities that promote safe, quality, effective services for all.

Level descriptor	Level 1	Level 2	Level 3	Level 4
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#### 3.2 Equity

3.2 Equity	<ul style="list-style-type: none"> <li>Identify factors that can limit access to healthcare services, and contribute to initiatives that aim to improve access.</li> <li>Support patients/clients to understand options and obtain access to health services.</li> </ul>	<ul style="list-style-type: none"> <li>Use clinical information systems to support equity of access in the provision of patient/client care, as relevant to the practice context.</li> </ul>	<ul style="list-style-type: none"> <li>Advocate on behalf of individuals and groups to positively influence the wider political, social and commercial environment, about factors which affect health.</li> </ul>	<ul style="list-style-type: none"> <li>Develop an advocacy strategy to influence public policy.</li> <li>Drive awareness of how the local service offering supports the wider community and system and how community needs can be better met.</li> </ul>
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#### 3.3 Diversity

3.3 Diversity	<ul style="list-style-type: none"> <li>Respond positively to individual and cultural differences by valuing others equally, and showing tolerance and acceptance.</li> <li>Identify own values and attitudes towards diversity, and manage any impact of these attitudes on own ability to work in a non-judgemental manner.</li> </ul>	<ul style="list-style-type: none"> <li>Be conscious of, and responsive to, a wide range of differences, and take conscious action to avoid prejudice, stereotyping, or exclusion of others.</li> <li>Challenge own and team cultural assumptions, values and beliefs to reconcile competing values.</li> <li>Demonstrate culturally safe and sensitive practice by considering the values, beliefs and practices of the patient/client, and adapting services to address their specific socio-cultural and language needs.</li> </ul>	<ul style="list-style-type: none"> <li>Foster a team culture that recognises and values diversity, and uses knowledge of differences to develop best practice care.</li> <li>Plan, implement and evaluate strategies for providing culturally safe services.</li> <li>Endorse and support initiatives that build the cultural competence of staff.</li> </ul>	<ul style="list-style-type: none"> <li>Recognise the contribution that diversity makes to workplace innovation and excellence, and proactively create an environment that values and utilises the contributions of people with different backgrounds, experiences and perspectives.</li> <li>Embed a culturally competent patient-client focus into policy, planning and practice.</li> <li>Establish a workplace diversity program to make best use of diversity in the workplace and to address any disadvantage experienced by people and/or groups.</li> </ul>
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### 3. Health values

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#### 3.4 Prevention and wellness

3.4 Prevention and wellness	<ul style="list-style-type: none"> <li>• Provide patients/clients with information relevant to altering their health behaviours or improving their health status.</li> <li>• Advise patients/clients on the reduction of risk factors and recommendations for screening and disease prevention.</li> </ul>	<ul style="list-style-type: none"> <li>• Identify and recommend local, regional and national resources/services to assist patients/clients in the development and maintenance of healthy lifestyles and disease prevention.</li> <li>• Build an organisation awareness of the programs and services available to support prevention and wellness strategies.</li> </ul>	<ul style="list-style-type: none"> <li>• Contribute to the development of strategies that promote, protect, restore and improve health and quality of life.</li> <li>• Promote early intervention strategies that support wellness and disease prevention across the organisation.</li> </ul>	<ul style="list-style-type: none"> <li>• Direct the development, implementation, evaluation and dissemination of effective programs for chronic disease prevention, risk reduction, and health promotion.</li> <li>• Create an environment and identify resources to support a wellness culture where an emphasis is placed on keeping the community well and engaged in self-management/care.</li> </ul>
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### 3. Health values

Recognises the complexity of health and healthcare systems and engages in processes and activities that promote safe, quality, effective services for all.

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#### 3.5 Whole person focus

3.5 Whole person focus	<ul style="list-style-type: none"> <li>Recognise the range of personal, social, economic, and environmental factors that influence health status, and contribute to initiatives that aim to improve health outcomes for individuals and populations.</li> <li>Identify community and additional resources/services that may benefit the patient/client, and assist the patient/client in organising access.</li> </ul>	<ul style="list-style-type: none"> <li>Recognise the complex, multi-factorial nature of the causes of ill-health, and focus on improving the patient's/client's physical, psychological, and mind-body health.</li> <li>Distinguish and relate the physical, functional, and psychosocial causes and consequences of illness and dysfunction to develop individualised care plans and interventions.</li> <li>Conduct a broad ranging assessment of the patient's/client's ongoing support needs, including a consideration of their aspirations.</li> </ul>	<ul style="list-style-type: none"> <li>Support the implementation of systems that support a whole of person approach to care and understand the range of care needs of an individual beyond the presenting condition.</li> </ul>	<ul style="list-style-type: none"> <li>Collaborate with others to develop a broader understanding of the population health needs influencing the health service/organisation, and respond to these factors through needs-based planning.</li> <li>Encourage, and contribute to building, a health system that values a whole of person approach to service planning and delivery.</li> </ul>
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### 3. Health values

Recognises the complexity of health and healthcare systems and engages in processes and activities that promote safe, quality, effective services for all.

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#### 3.6 Responsible use of resources

3.6 Responsible use of resources	<ul style="list-style-type: none"> <li>Support the transparent and equitable allocation of healthcare resources within the context of own role.</li> </ul>	<ul style="list-style-type: none"> <li>Use finite healthcare resources wisely to achieve best outcomes.</li> <li>Advise others when an inappropriate use of resources is identified or suspected.</li> <li>Suggest improvements to work flow and processes that may improve the use of resources and boost productivity.</li> </ul>	<ul style="list-style-type: none"> <li>Encourage allocation decisions that are free from prejudice or favouritism.</li> <li>Advocate for a flexible resource allocation process so that varying needs can be accommodated.</li> <li>Periodically review processes for prioritising and allocating resources.</li> </ul>	<ul style="list-style-type: none"> <li>Build a culture of accountability for financial performance.</li> <li>Create meaningful opportunities for patients/clients and other stakeholders to provide input to health resource allocation decision-making at the policy level.</li> <li>Develop systems that support the review and reallocation of resources where potential gains in care provision or fund allocation can be identified.</li> <li>Encourage and support staff to challenge current practice and explore better use of resources.</li> </ul>
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### 3. Health values

Recognises the complexity of health and healthcare systems and engages in processes and activities that promote safe, quality, effective services for all.

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#### 3.7 Innovation and change

3.7 Innovation and change	<ul style="list-style-type: none"> <li>• Recognise areas for improvement, and suggest new ways of working to improve team functioning and effectiveness.</li> <li>• Work with patients/clients and colleagues to develop practical and creative solutions to workplace problems.</li> <li>• Contribute constructively to change processes.</li> </ul>	<ul style="list-style-type: none"> <li>• Identify when change is needed, and advocate for effective ways in which appropriate change might be achieved.</li> <li>• Demonstrate appreciation and respect for the creative contributions of others.</li> </ul>	<ul style="list-style-type: none"> <li>• Generate healthcare strategies/innovations that improve delivery of healthcare to patient-clients and groups, and which capitalise on opportunities presented by technology.</li> <li>• Advocate for interprofessional practice, and champion efforts enabling clinicians to work to the full extent of their role.</li> <li>• Encourage positive response to, and safe exploration of, new ideas within teams/the workplace.</li> <li>• Fight for resources, and courageously commit them to promising ideas.</li> </ul>	<ul style="list-style-type: none"> <li>• Champion the need for innovation by developing a climate for curiosity, creativity and continuous improvement.</li> <li>• Inspire and lead others to research, canvas possibilities, invest in, evaluate, celebrate and disseminate good ideas.</li> <li>• Demonstrate courage in acting for the long term.</li> <li>• Provide forums for stakeholders to discuss change, and anticipate and manage resistance and responses from individuals/groups.</li> <li>• Investigate the use of new healthcare delivery models, and champion their adoption to address contemporary healthcare problems, where appropriate.</li> <li>• Promote change as a healthy and normal component of organisational growth.</li> </ul>
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## Domain 4 – Professional, ethical and legal approach

4. Professional, ethical and legal approach				
Acts in accordance with professional, ethical, and legal standards				
Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.
4.1 Professional behaviours				
4.1.1 Ethical and legal practice	<ul style="list-style-type: none"> <li>• Be aware of the ethical and legal requirements of the role.</li> <li>• Recognise potential ethical issues/dilemmas in the workplace, and discuss with an appropriate person.</li> <li>• Report illegal or unethical conduct to an appropriate person.</li> </ul>	<ul style="list-style-type: none"> <li>• Identify, document and address any potential ethical issues if and as they arise.</li> <li>• Support others to be aware of the ethical and legal requirements and boundaries of their role.</li> </ul>	<ul style="list-style-type: none"> <li>• Model ethical work practices.</li> <li>• Create a safe environment for staff to raise concerns regarding ethical or legal compliance issues.</li> <li>• Develop and implement local strategies to resolve ethical issues within practice.</li> <li>• Discuss potential ethical issues/dilemmas with staff in a supportive manner to ensure maintenance of ethical work practices.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide expert guidance and advice to assist others in satisfactorily resolving complex ethical and legal issues.</li> <li>• Integrate values and ethics into departmental / organisational practices.</li> <li>• Influence others to adopt high standards of ethical and legal conduct, which is modelled in own actions and decisions.</li> <li>• Act to eliminate workplace/ organisational factors that prohibit or constrict adherence to ethical codes.</li> </ul>

## 4. Professional, ethical and legal approach

### Acts in accordance with professional, ethical, and legal standards

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 4.1 Professional behaviours

4.1.2 Self-regulation and self-management	<ul style="list-style-type: none"> <li>Operate within the specified responsibilities of the work role, and obtain clarification when unsure of scope as defined by the position description.</li> <li>Manage own work schedule, contribute to the management of unit workload, and notify supervisor when working to full capacity.</li> <li>Accurately recognise own limits, and seek assistance/ guidance from the supervising professional as necessary.</li> <li>Recognise and effectively manage personal impact on work performance and relationships.</li> </ul>	<ul style="list-style-type: none"> <li>Prioritise workload appropriately, and establish realistic timeframes for the completion of work.</li> <li>Complete tasks on time and in a self-directed manner, acting within own knowledge base and scope of practice.</li> <li>Examine own values, beliefs, communication style, and experiences to develop a deep understanding of how these may influence behaviour and action in the workplace, and act to manage any negative influence.</li> </ul>	<ul style="list-style-type: none"> <li>Exhibit a high level of emotional self-control and flexibility in complex, changing, and/or ambiguous situations and when confronted with obstacles.</li> <li>Adjust planned activities of the work team by gathering relevant information and applying critical thinking to address multiple and changing demands in the work environment.</li> <li>Identify and act to remove barriers that reduce efficiency or effectiveness in the workplace.</li> <li>Clarify scope for staff as required/ appropriate.</li> <li>Support staff to balance their schedules and demands on their time.</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrate emotional intelligence, particularly in stressful situations, to manage the impact of own assumptions, values, attitudes and behaviours on others.</li> <li>Promote active, continuous reflection within the leadership community, and self-adjust behaviours as required to ensure they are congruent with stated values.</li> <li>Implement an organised, effective and continuing framework for self-reflection, development and improvement.</li> <li>Plan strategically and work dynamically to manage competing priorities of the service/organisation.</li> <li>Act to ensure workloads are manageable and others have opportunity to self-manage and regulate.</li> </ul>
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## 4. Professional, ethical and legal approach

### Acts in accordance with professional, ethical, and legal standards

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### 4.1 Professional behaviours

4.1.3 Accountability	<ul style="list-style-type: none"> <li>Recognise accountability to the supervising/delegating practitioner, who has responsibility for overall provision of care, and work within the guidelines of supervision/ delegation.</li> <li>Take responsibility for own actions.</li> </ul>	<ul style="list-style-type: none"> <li>Recognise the collective responsibility in healthcare, and refrain from passing blame onto others.</li> </ul>	<ul style="list-style-type: none"> <li>Establish clear goals and expectations to build staff ownership over achievement of results.</li> <li>Delegate healthcare activity to others, according to their competence and scope of practice, when this would serve the best interests of the patient-client.</li> <li>Monitor the effectiveness of supervision/delegation arrangements, and revise as necessary.</li> </ul>	<ul style="list-style-type: none"> <li>Build accountability within the executive community.</li> <li>Demonstrate an ongoing commitment to sustaining and strengthening performance and accountability across the organisation.</li> <li>Establish governance structures, policies, protocols, and guidelines which focus on delivering more appropriate, efficient and effective healthcare.</li> </ul>
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## 4. Professional, ethical and legal approach

### Acts in accordance with professional, ethical, and legal standards

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 4.1 Professional behaviours

4.1.4 Conscientiousness	<ul style="list-style-type: none"> <li>Persevere until work is completed to the best possible standard that circumstances permit.</li> <li>Carefully consider potential outcomes and consequences before acting.</li> <li>Consistently follow through on promised actions.</li> <li>Make appropriate arrangements for work to be completed in own absence.</li> <li>Attend to the detail of work being undertaken.</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrate a drive for positive results.</li> <li>Regularly exceed patient's/client's expectations to accomplish impressive results.</li> </ul>	<ul style="list-style-type: none"> <li>Exhibit a constant readiness to seize opportunities as they arise, and act to achieve results.</li> <li>Encourage others to take initiative, and motivate them to successfully accomplish work goals.</li> </ul>	<ul style="list-style-type: none"> <li>Lead by example, and motivate staff to strive for excellence by providing rewards and incentives.</li> <li>Maintain focus and energy of staff by remaining confident, optimistic and determined, even under adversity and during times of uncertainty/change.</li> </ul>
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## 4. Professional, ethical and legal approach

### Acts in accordance with professional, ethical, and legal standards

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 4.1 Professional behaviours

4.1.5 Integrity	<ul style="list-style-type: none"> <li>• Demonstrate honesty and fairness in all relations.</li> <li>• Share recognition, and do not accept undue credit.</li> <li>• Provide facts, and do not conceal actual plans or intentions.</li> <li>• Admit mistakes and use them as an opportunity for improvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Work through decision-making channels, rather than around them.</li> <li>• Positively acknowledge the unique knowledge and talents of others.</li> <li>• Act consciously to avoid self-serving behaviour and decisions.</li> </ul>	<ul style="list-style-type: none"> <li>• Fully explain own position, and confront hidden agendas within the team/department.</li> <li>• Speak up to confront dishonesty, and to drive improvement.</li> <li>• Foster an environment that encourages staff to ask questions, and answer these as honestly and directly as possible.</li> <li>• Use objective measures of workplace performance to combat workplace politics.</li> <li>• Remain consistent and clear about expectations in the workplace.</li> </ul>	<ul style="list-style-type: none"> <li>• Build and lead a workplace that is honest, truthful, and accurate in performing its business.</li> <li>• Drive systems that encourage honesty and reward ethical behaviour.</li> <li>• Act to ensure consistency between the organisation's values, policies, and actions, and act to address any conflict or discrepancies that exist.</li> <li>• Make transparent decisions without favouritism or bias.</li> </ul>
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## 4. Professional, ethical and legal approach

### Acts in accordance with professional, ethical, and legal standards

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 4.1 Professional behaviours

4.1.6 Self-care	<ul style="list-style-type: none"> <li>• Accurately identify sources of own stress, and take steps to effectively manage these stressors.</li> <li>• Seek support, where necessary, to maintain own well-being.</li> </ul>	<ul style="list-style-type: none"> <li>• Establish and implement a personal health strategy.</li> <li>• Develop a healthy support network for self and wider team.</li> <li>• Identify when others are becoming stressed/overloaded, and offer support.</li> </ul>	<ul style="list-style-type: none"> <li>• Model good self-care practices so that staff feel safe to prioritise their own self-care.</li> <li>• Encourage staff to constructively voice their stressors, and support them to manage these effectively.</li> <li>• Recognise how own leadership style influence's staff experiences of the work environment, and act to reduce any negative impacts.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop strategies to reduce stress in the workplace and promote workplace well-being.</li> <li>• Foster a culture in which managers are accessible and approachable for staff experiencing stress or difficulty.</li> </ul>
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## Domain 5 – Life-long learning

5. Life-long learning				
Maintains and extends professional competence and contributes to the learning and development of others				
Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.
5.1 Development of self				
5.1.1 Life-long learning and professional development	<ul style="list-style-type: none"> <li>• Demonstrate an interest in, and enthusiasm for, learning.</li> <li>• Obtain advice on professional development needs, and participate in professional development activities, both intra- and inter-professionally, on a continuous basis.</li> </ul>	<ul style="list-style-type: none"> <li>• Identify personal and professional development needs, and plan and implement strategies for achieving them.</li> <li>• Monitor and evaluate progress towards learning/development goals, and identify opportunities for future changes and improvement.</li> <li>• Use a range of learning methods to meet personal and professional goals, including self-directed and practice-based learning.</li> <li>• Participate in networks and forums to share and extend professional knowledge, and build collegiate support.</li> </ul>	<ul style="list-style-type: none"> <li>• Model a commitment to continuing professional development.</li> <li>• Develop effective approaches to lifelong learning for all staff.</li> <li>• Support staff in their development and accomplishment of professional goals and objectives.</li> <li>• Advocate for, and encourage the provision of, formal and informal learning opportunities.</li> <li>• Promote the development of, and involvement in, professional networks and learning communities.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop and foster a learning culture, recognising that lifelong learning is central to organisational development and service improvement.</li> <li>• Recognise the role of infrastructure in supporting lifelong learning, and advocate for investment and changes that will enhance organisational learning capability.</li> <li>• Influence organisational learning and development strategies to ensure the workforce is supported to develop the abilities it requires to meet current and future business needs.</li> </ul>

## 5. Life-long learning

Maintains and extends professional competence and contributes to the learning and development of others

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 5.1 Development of self

5.1.2 Self-reflection	<ul style="list-style-type: none"> <li>Critically evaluate own performance.</li> <li>Obtain and act on advice from supervisors and other professionals regarding actions to improve own practice.</li> </ul>	<ul style="list-style-type: none"> <li>Reflect on clinical practice to identify strengths and areas requiring further development.</li> <li>Formulate learning objectives and strategies for addressing own limitations.</li> </ul>	<ul style="list-style-type: none"> <li>Use self-reflection techniques effectively to enhance care provision and interpersonal relationships within the service.</li> <li>Support others to review, reflect on, and evaluate their own practice.</li> </ul>	<ul style="list-style-type: none"> <li>Act to ensure processes, frameworks and/or support tools are in place for enhancing learning through reflection.</li> </ul>
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### 5.2 Development of others

5.2.1 Professional support relationships	<ul style="list-style-type: none"> <li>Participate in supervision arrangements, and demonstrate commitment to the process of clinical supervision.</li> <li>Share own learning with others as appropriate.</li> </ul>	<ul style="list-style-type: none"> <li>Identify and communicate practice issues to the supervising practitioner.</li> <li>Contribute to the education and development of others, as appropriate to own role and level of experience.</li> </ul>	<ul style="list-style-type: none"> <li>Provide effective supervision to less experienced practitioners and staff as appropriate.</li> <li>Plan and conduct teaching sessions, encouraging participation and reflection on experience.</li> <li>Facilitate staff access to learning outside of own practice area through the development of cross-discipline relationships/networks.</li> <li>Recognise different models of professional support, and move flexibly between them.</li> </ul>	<ul style="list-style-type: none"> <li>Promote a culture in which clinical supervision is treated as part of core business of contemporary professional practice.</li> <li>Create institutional supports for supervision, including policies, processes, training, dedicated teaching time, and access to support networks and resources.</li> <li>Support other supervisors in becoming educationally prepared for their role.</li> </ul>
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## 5. Life-long learning

Maintains and extends professional competence and contributes to the learning and development of others

Level descriptor	Level 1	Level 2	Level 3	Level 4
	Work within a known and stable context, consulting when anomalies arise before taking action.	Act independently on routine tasks within scope, and in response to knowable dilemmas.	Act independently in complex situations within scope, and in response to unknowable dilemmas.	Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required.

### 5.2 Development of others

5.2.2 Feedback and peer assessment	<ul style="list-style-type: none"> <li>• Offer feedback that is specific, sensitive, and non-judgmental.</li> <li>• Respond graciously to feedback by controlling defensiveness, summarising and reflecting what is heard, and clarifying as needed.</li> </ul>	<ul style="list-style-type: none"> <li>• Participate constructively in professional peer review.</li> <li>• Solicit formal and informal feedback on a regular basis, and act upon it as appropriate to improve performance.</li> </ul>	<ul style="list-style-type: none"> <li>• Initiate and lead peer review processes which focus on supporting clinical practice and building on excellence.</li> <li>• Collaborate and cooperate in the management of peer review outcomes.</li> <li>• Encourage feedback on own performance, and evaluate it systematically.</li> </ul>	<ul style="list-style-type: none"> <li>• Act to ensure peer review processes are appropriately resourced, and occur in an open and positive organisational culture which emphasises excellence in clinical care.</li> <li>• Foster a culture in which feedback is used as a strategy to enhance goals, awareness, and learning, and is a positive experience for those involved.</li> </ul>
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## Appendix A: Governance group membership

HWA wishes to acknowledge the contribution of the following groups/organisations to the Resource's development:

Australasian Council of Dental Schools

Australian Commission on Safety and Quality in Healthcare

Australian Council of Pro-Vice Chancellors and Deans of Health Sciences

Australian Primary Healthcare Research Institute

Australian Medical Association

Australian Medical Council

Australian Qualifications Framework Council

Catholic Health Australia

Committee of Presidents of Medical Colleges

Confederation of Postgraduate Medical Education Councils

Consumer Health Forum – consumer representative

Council of Deans of Nursing and Midwifery Australia and New Zealand

Department of Industry, Innovation, Science, Research and Tertiary Education

Hunter New England Health

Leading Age Services Australia

Medical Deans Australia and New Zealand

National Aboriginal Community Controlled Health Organisation

National Allied Health Advisory Committee

New South Wales Department of Health (jurisdictional representative)

Office of Teaching and Learning

Onemda VicHealth Koori Health Unit

Queensland Health (jurisdictional representative)

Ramsay Healthcare

Rural Health Workforce Australia

University of Melbourne (eHealth representative)

## Appendix B: Focus group participants

ACT Government  
Agency for Clinical Innovation  
Alfred Health  
Allied Health Professions Office Queensland  
Australian Health Practitioner Regulation Agency  
Australian Medical Council  
Australian Psychological Society  
Ballarat District Nursing and Healthcare  
Bendigo Health  
Boxhill TAFE  
Cabrini Health  
Calvary Healthcare Bethlehem  
Central Coast Local Health District  
Central Institute of Technology  
Challenger Institute  
Charles Sturt University  
Clinical Excellence Commission  
Clinical Skills Development Service  
Cockburn GP Super Clinic  
Community Services, Health & Education Training Council  
Consumer Health Forum  
Cunningham Centre  
Curtin University  
Department of Health, Victoria  
Department of Health, Western Australia  
EACH Social and Community Health  
Gold Age Aged Care  
GoTAFE  
Health & Community Services Workforce Council  
Health Workforce Queensland  
Hollywood Private Hospital  
Hunter New England Local Health District  
Illawarra Shoalhaven Local Health District  
Institute for Health Leadership  
Justice Health  
Kangan Institute  
La Trobe University  
Latrobe Regional Hospital  
Leading Age Services Australia  
Mater Health Sydney

Metropolitan South Institute of TAFE  
Monash University  
Murrumbidgee Local Health District  
Navitas  
Nepean Blue Mountains Local Health District  
Northern Sydney Local Health District  
NSW Ministry of Health  
Nursing and Midwifery Office Queensland  
Nursing and Midwifery Office, Western Australia  
Office of the Chief Health Professions Officer, Western Australia  
Princess Alexandra Hospital  
Princess Margaret Hospital for Children  
Queensland Aboriginal and Islander Health Council  
Queensland Centre for Mental Health Learning  
Queensland Health  
Ramsay Healthcare  
RDNS Helen Macpherson Smith Institute of Community Health  
RMIT University  
Royal Perth Hospital  
South Eastern Sydney Local Health District  
South Metropolitan Health Service  
South Western Sydney Local Health District  
Southern Country Health Service  
Southern Cross Care  
Southern Health Victoria  
St John of God Healthcare  
St Vincent's Health  
Sydney Children's Hospital Network  
University of Melbourne  
University of Queensland  
University of Tasmania  
Victoria University  
Victorian Council of Social Service  
WA Country Health Service  
WAGPET  
West Coast Institute of Training  
Western Health  
Western New South Wales Local Health District

## Appendix C: Source documents

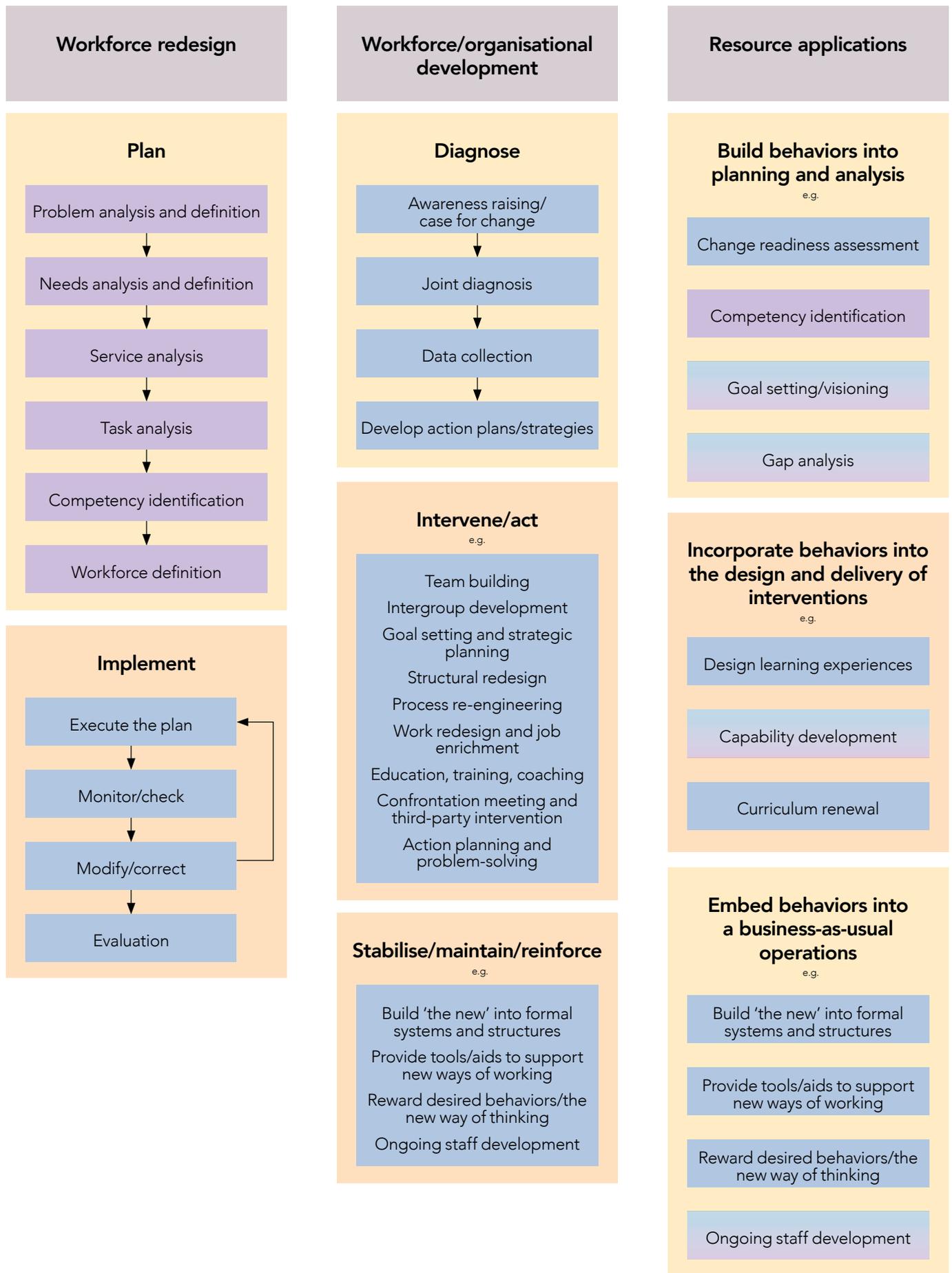
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## Appendix D: Relationship with reform goals

	Safe	Person-centred	Coordinated	Collaborative	Equitable	Holistic	Flexible	Responsive
<b>1. Provision of care</b>	1.1 Performing healthcare activities							
	1.1.1 Plan and prepare	✓	✓		✓		✓	
	1.1.2 Perform and deliver	✓	✓		✓			✓
	1.1.3 Monitor and evaluate	✓	✓		✓			✓
	1.1.4 Modify or replan	✓	✓					✓
	1.2 Supporting processes and standards							
	1.2.1 Evidence-based practice	✓			✓			✓
	1.2.2 Clinical performance and risk management	✓						
	1.2.3 Information management	✓			✓			✓
	<b>2. Collaborative practice</b>	2.1 Collaborating with clients						
2.1.1 Relationship building			✓		✓			✓
2.1.2 Shared decision-making			✓		✓			
2.1.3 Shared responsibility			✓		✓		✓	
2.2 Collaborating interprofessionally								
2.2.1 Vision and objectives					✓			
2.2.2 Role clarity		✓			✓			
2.2.3 Workplace communication					✓			
2.2.4 Collaboration within and across teams				✓	✓		✓	
2.2.5 Collaborative decision-making		✓	✓		✓			
2.2.6 Conflict management					✓			
2.2.7 Team reflexivity					✓		✓	✓
2.2.8 Individual contribution					✓		✓	
2.3 Collaborating across time and place								
2.3.1 Clinical handover, follow-up and referral		✓			✓			
2.3.2 Integrated care					✓		✓	

		Safe	Person-centred	Coordinated	Collaborative	Equitable	Holistic	Flexible	Responsive
3. Health values	3.1 Respect		✓			✓			
	3.2 Equity					✓			✓
	3.3 Diversity		✓			✓			✓
	3.4 Prevention and wellness		✓	✓					
	3.5 Whole person focus				✓		✓		
	3.6 Responsible use of resources				✓	✓			✓
	3.7 Innovation and change				✓			✓	✓
4. Professional, ethical and legal approach	4.1 Professional behaviours								
	4.1.1 Ethical and legal practice	✓							
	4.1.2 Self-regulation and self-management	✓						✓	✓
	4.1.3 Accountability	✓				✓			✓
	4.1.4 Conscientiousness	✓							✓
	4.1.5 Integrity	✓				✓			✓
	4.1.6 Self-care	✓							✓
5. Life-long learning	5.1 Development of self								
	5.1.1 Life-long learning and professional development	✓	✓		✓				✓
	5.1.2 Self-reflection	✓							✓
	5.2 Development of others								
	5.2.1 Professional support relationships		✓		✓			✓	
5.2.2 Feedback and peer assessment		✓		✓					

# Appendix E: Diagram of use



# Appendix F: Resource application areas

## **Workforce and service planning**

The resource can be used to define the behaviours critical to the achievement of future business goals and targets.

This application involves comparison of current workforce characteristics with future requirements and the development and implementation of strategies to address any skill gaps.

The goal of this process is to ensure that health services have the right number of people, with the right skills and experiences, in the right jobs and places, at the right time. It is important to include behavioural skills in forecasts because of their known ability to positively impact the quality and safety of care.

## **Workforce and service redesign**

The resource can be paired with existing methods and tools to strengthen innovation and reform activities aimed at changing existing skill mix, service models and technology use to address challenges associated with meeting current and future demand.

This application involves identifying the behavioural skills that underpin successful performance of tasks in the workplace, and complements the functional analysis process, which informs the potential for task sharing or delegation within the workforce.

Behaviours provide a foundation for the broadening and deepening of technical skills and must be considered as part of the redesign process given their known influence on performance.

## **Individual and organisational development**

Individual: The resource can be used to describe the behaviours that will be monitored or measured as part of an individual's performance appraisal process.

For this application, behavioural attributes are drawn from the position description to provide a shared understanding of how work is expected to be performed and must be integrated with aspects of performance that assess what work is done.

Inclusion of behavioural attributes within the performance appraisal and development process provide specificity and concreteness for discussions about behavioural deficiencies that are negatively impacting job performance, objectifying the discussion and providing a pathway for development.

Organisational: The resource can be used to develop behavioural capabilities and a culture that ensures a readiness to meet future healthcare needs and challenges.

This application involves using the resource as a basis for assessing the current situation within workplace/organisation and designing and implementing an intervention in response to an identified need for change. It is relevant to both systems (e.g. organisations) and subsystems (e.g. teams, departments). Because organisations are made up of teams, behaviour change must occur in groups in order to make a difference to culture.

Changing the behaviours of the workforce can produce fundamental improvements in the way individuals, groups and organisations function. Using the resource to drive organisational development processes can assist users in developing their own ability to change and renew, ensuring they remain relevant and responsive to people's healthcare needs and expectations over time.

### **Education and training**

The resource can be used to identify and communicate the learning and development needs of the workforce from a behavioural perspective.

This application could involve:

- (a) Using the resource to define behaviours crucial to individual or organisational success, and undertaking a training needs analysis to identify any skill gaps that can then be addressed through training.
- (b) Using the resource as a consensus statement on health industry workforce requirements, which can facilitate discussion between the health and education sectors and inform curriculum design and renewal.

The resource also provides a useful structure and starting point for the development of capability frameworks for specific areas of health/practice and can help define student learning outcomes for programs of study. When used in these ways, the resource can contribute to ensuring that workers have the behavioural skills required to be successful in the healthcare field and arrive in the workplace more work ready.

### **Recruitment, selection and induction**

The resource can be used to write behavioural job descriptions, to facilitate behaviour-based interviewing, and set behavioural expectations upon entry to a workplace/organisation.

These applications involve predetermining the behavioural attributes required for effective performance of a role (in addition to requisite knowledge and skills), specifying these in the position description, constructing interview questions that test for these skills, and establishing behavioural expectations during induction.

Behaviour-based recruitment, selection and induction is superior to traditional methods because behaviours predict effective job performance beyond what is expected from technical knowledge and skills alone.



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