



## StAMPS 2010 Practice Examination: Key Item List

The score received at each scenario depends on the way the candidate is able to integrate important facts and other pieces of information into a logical, coherent and well reasoned discussion of the important issues. The key item list is an indicative view of the potential content of the appropriate answer to the question, but is not intended to be exhaustive and never to be used as a simple “tick list.” Hence merely listing the facts may not in itself be sufficient for a pass grade.

### General Considerations

- Ensure candidate maintains focus on the overall process and does not move to face-to-face management of individuals with chronic disease
- Ensure candidate considers the special issues pertinent to Aboriginal and Torres Strait Islander health, including the role of their community in decision making
- Keep focus on the overall design and conceptual understanding
- Identification of the target population, the key health related issued that need to be addressed, their incidence and prevalence, human and physical resources both from within the community and outside that need to be mobilised, mechanisms to enhance community ownership and participation in the program, leadership issues.
- Using a population based/care plan approach: need to expand on issues related to team approach, health screening, continuity of care, appropriate logistical tools (like population based records)
- Consider potential barriers including geography, culture, language, local economy, etc
- Candidates need to express a willingness and ability to engage both their community and their staff or other key workers who will facilitate the engagement process (especially important in the Aboriginal community). Good candidates will emphasize the importance of working in a team and utilizing all influential members, especially the Aboriginal Health workers
- Good candidates will also be able to show where they can access demographic information regarding their patient base and disease profile, (population health data)
- Need to have a computer based records system
- Need to think about the process throughout, prior to implementation
- Appreciate that implementation of the program is going to take time and cannot be rolled out before thorough consideration is afforded

- Acquire evidence to rationalise the program (population health statistics), to inform the community when advertising/publicising the program
  - Rolling the program out through the community controlled health service if there is one
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## **Specific Considerations**

### Exceptional

- Well designed program
- Using all available resources to help spread the load
- Targeted screening by Aboriginal Health workers
- Intention to publish the initiative with community permission

### Pass

- Identify & recruit outside resources
- Look for access to population based information
- Use computer-based data extraction to measure impact (evaluation phase)
- Provision of culturally appropriate written information for individuals to consider prior to the consultation

### Borderline

- Straight to intervention without any screening process
- Opportunistic screening
- Inappropriate disease targeting

### Fail

- Thinking you can implement this without assistance
- Failure to involve other team members
- Failure to consult the community
- Inappropriate use of resources
- Failure to follow up individuals after the initial consultation