The Regulation of Paramedics in Australia:

Education and Accreditation – COAG Regulatory Activities

This bulletin outlines the rare opportunity for the Network of Australasian Paramedic Academics (NAPA) and all those involved in Paramedic Education to contribute to the national debate on education and accreditation. Apart from ACAP itself, few stakeholders to date have come forward to support the case for regulation and registration of paramedics. It would be disconcerting if the current call for submissions on the accreditation of health-related education were to be ignored, given the impact that decisions in this area are likely to have on course programs and institutions, graduates and educationalists.

The COAG Agenda

On the 26 March 2008 the Council of Australian Governments (COAG) signed the Intergovernmental Agreement (IGA) for a National Registration and Accreditation Scheme for the Health Professions. The IGA can be downloaded from the following website: www.nhwt.gov.au/natreg.asp.

This agreement will create a single national registration and accreditation system for nine currently registered health professions: medical practitioners; nurses and midwives; pharmacists; physiotherapists; psychologists; osteopaths; chiropractors; optometrists; and dentists (including dental hygienists, dental prosthetists and dental therapists).

The new scheme will maintain a public national register for each health profession that will ensure that a professional who has been banned from practising in one place is unable to practise elsewhere in Australia.

The scheme also provides for the addition of new professions and it is the intention that ACAP will seek national registration for paramedics under the scheme as soon as feasible.

Related Legislation

To implement the scheme, national legislation is being introduced via the Queensland Parliament in two stages. The first stage will cover those aspects of the IGA that address the structural elements of the scheme and there is a Bill currently before the Queensland Parliament together with Explanatory Notes. This may be accessed at: http://www.legislation.qld.gov.au/Bills/52PDF/2008/HealPracAANLB08.pdf


The second stage, to be introduced in August 2009, will cover matters where further work and discussion is required beyond the terms of the COAG Agreement. These include:

- registration arrangements
- accreditation arrangements
- complaints, conduct, health and performance arrangements
- privacy and information sharing arrangements, and
- other matters.
Health Ministers have given a commitment that consultation papers on key issues will be made available, with the opportunity for anyone to provide a submission. All submissions will be due before the end of 2008 with different dates for different topics. In the case of two main topics, complaints arrangements, and privacy and information sharing arrangements, two national public consultation meetings will be held.

Implementation Structure

The COAG package included the establishment of the National Health Workforce Taskforce (NHWT) to undertake projects that would deliver practical solutions on workforce innovation and reform. The NHWT is hosted by the Victorian Department of Human Services and has staff in Sydney and Hobart. It is a national body created under the Australian Health Ministers’ Advisory Council (AHMAC) committee structures and reports directly to the Chair of AHMAC’s Health Workforce Principal Committee. (HWPC).

The NHWT is a time limited entity tasked to action and coordinate the achievement of agreed COAG requirements. In particular, the Taskforce’s job is to develop strategies to meet the National Health Workforce Strategic Framework outcomes and its role encompasses:

1. Education and Training
2. Innovation and Reform
3. Planning, Research and Data and
4. Secretariat support for the HWPC its subcommittees and working parties.

The Education and Training program links into Principle 4 of the National Health Workforce Strategic Framework and has the following key objectives:

- Investigate ways to maximise the capacity of the health and education systems to provide sufficient numbers of appropriately trained and qualified graduates to meet projected demands.
- Develop strategies to ensure that education and training is appropriate, responsive and relevant to changing health system needs and that it supports innovation and reform in the workforce.

The work of the Education and Training program includes several subprojects:

- Clinical education and training
- Postgraduate medical training - an econometric and strategic study
- Core competencies framework for the health workforce
- Core competencies and education framework for the health workforce
- Core competencies for acute-aged care interface workforce
- Health sector education pathways
- Health services/VET.

Several issues are relevant to paramedic education including core competencies, education pathways and scope of practice/clinical practice guidelines generally. The Education and Training project team is headed by Ms Lucy Firth, Project Manager on Tel (03) 9092 2004.

Registration and Accreditation

The Practitioner Regulation Subcommittee of the HWPC works with the more specific Registration and Accreditation Scheme Implementation Team headed by Dr Louise Morauta, formerly of the Commonwealth Department of the Prime Minister and Cabinet. See http://www.nhwt.gov.au/natreg.asp

The implementation team is now in place with staff in Brisbane, Canberra, Melbourne and Sydney. Staff are in two sub-teams, Policy and Legislation, headed by Chris Robertson, and Implementation, headed by Del Stitz.
Calls for related submissions

The implementation team has issued a number of consultation papers and calls for submissions, which will be published unless respondents advise otherwise. Amongst these consultation papers is the Call for submissions on proposed arrangements for accreditation.

This call was issued on 6th November 2008 and closes 17th December 2008. It includes two attachments: Attachment 1: WHO/WFME Guidelines for Accreditation of Basic Medical Education and Attachment 2: Standards for Professional Accreditation Processes.

The consultation paper deals generally with current arrangements; proposed new accreditation arrangements; linkages with Commonwealth, State and Territory government bodies; international linkages and transitional arrangements.

ACAP and membership responses

ACAP’s position on regulatory coverage is unequivocal and embraces the health care principles espoused by the NHHRC. In essence, this envisages the protection of the public through a national uniform and universally applied regulatory framework for the registration of paramedics under the COAG arrangements.

Among the key objectives of ACAP’s development program are activities designed to achieve:

• appropriate educational opportunities for the recruitment, training and professional development of EMS practitioners to ensure a sustainable workforce; and
• a national regulatory regime for paramedics and the accreditation of EMS providers that will assist in delivering consistent service standards, facilitate the mobility of the health workforce and thereby contribute towards public safety and welfare.

ACAP has taken steps to address the COAG developments with the preparation of several submissions and will continue to promote the interests of the profession and its members in all occupational areas including the private sector, the ADF and academia.

ACAP draws attention to the responsibility of the profession to protect the interests of the public and to ensure that standards are set for accredited courses that are not based solely on restricted or selective employer demands, but embrace the needs of the community and a developing profession with practices underpinned by research and evidence based practices.

The current wide-ranging examination of the health care environment may be one of the few opportunities to bring about needed change, and silence could result in acceptance of the status quo. Other professions have taken positive action. Professions Australia is a national organisation of professional associations (www.professions.com.au), with 29 member associations representing around 350,000 Australian professionals. Professions Australia has published a paper on Standards for Professional Accreditation Processes which can be accessed at: http://www.professions.com.au/Files/Standards_for_Professional_Accreditation_Processes.pdf

By preparing cogent submissions, academics and other practitioners can support ACAP in its pursuit of a national regulatory system for health professionals that will include not only the existing registered professions but also paramedics and other allied health professionals.

Submissions may be wide ranging and might include recommendations on:

- The scope of accreditation arrangements;
- Key features of proposed new accreditation arrangements;
- Roles in relation to accreditation;
- Initial assignment of accreditation functions to existing national bodies;
- Governance arrangements for accreditation;
- Accreditation committees;
- Linkages with Commonwealth, State and Territory government bodies, International linkages;
- Indemnity;
- Funding arrangements;
- Accreditation processes; and
- Transitional arrangements.

**Submissions and information sharing**

Written submissions should be lodged in electronic form, marked “Accreditation Arrangements Submission, Attention: Practitioner Regulation Subcommittee”, E-mail nraip@dhs.vic.gov.au by close of business on Wednesday, 17 December 2008. Please note that your submission will be placed on the website after the closing date unless you indicate otherwise.

In the event that a submission is lodged, ACAP requests that a copy also be forwarded for our information to the National Secretary of ACAP Mr Les Hotchin (secretary@acap.org.au), ACAP Board Director Dr Richard Brightwell (r.brightwell@ecu.edu.au) and the ACAP Regulatory Project Consultant Ray Bange (rbange@bigpond.net.au).

The postal address and contact for the HWPC is currently

Ms Bronwyn Nardi, Chair,
Practitioner Regulation Subcommittee
Of the Health Workforce Principal Committee
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For further information, contact:

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20 November 2008