

Public consultation document

18 December 2017

Proposed mandatory registration standards:

- Professional indemnity insurance arrangements
- Continuing professional development (and supporting guidelines)
- Recency of practice

Proposed registration standard:

- Grandparenting

Public consultation

The Paramedicine Board of Australia (the Board) is releasing this public consultation paper seeking feedback from stakeholders on the draft proposed registration standards for professional indemnity insurance arrangements, continuing professional development, recency of practice and grandparenting arrangements

Your feedback

You are invited to provide feedback by email using the template published with this consultation paper to paramedicine@ahpra.gov.au by close of business on 8 February 2018.

1. A template is provided to assist you in providing your feedback. Please provide your feedback in Word format, but you are welcome to supply a PDF file of your feedback in addition to the Word (or equivalent) file, but at least one version must be in Word. . As part of an effort to meet international website accessibility guidelines, AHPRA and the Board are striving to publish documents in accessible formats (such as Word), in addition to PDFs. More information about this is available at www.ahpra.gov.au/About-AHPRA/Accessibility.aspx.

How your submission will be treated

2. Submissions will generally be published unless you request otherwise. The Board publishes submissions on its website to encourage discussion and inform stakeholders and the community. However, the Board retains the right not to publish submissions at its discretion, and will not place on its website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the consultation.
3. Before publication, the Board will endeavour to remove, as much as possible, any information that personally identifies individuals making submissions, including their contact details.
4. The views expressed in submissions are those of the individuals or organisations who submit them and publication does not imply any acceptance of, or agreement with, those views by the Board.
5. The Board will also accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential submission will be

determined in accordance with the *Freedom of Information Act 1982 (Cth)*, which has provisions designed to protect personal information and information given in confidence.

Please let the Board know if you do not want your submission published, or want all or part of it treated as confidential.

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Overview of consultation

18 December 2017

Proposed mandatory registration standards:

- Professional indemnity insurance arrangements
- Continuing professional development (and supporting guidelines)
- Recency of practice

Proposed registration standard:

- Grandparenting

Summary

1. The Health Practitioner Regulation National Law as in force in each state and territory (the National Law) requires the Paramedicine Board of Australia (the Board) to develop registration standards about certain matters including:
 - requirements for professional indemnity insurance (PII) arrangements for health practitioners registered in the profession
 - requirements for continuing professional development (CPD) for health practitioners registered in the profession
 - requirements in relation to the nature, extent, period and recency of any previous practice of the profession by applicants for registration and health practitioners registered in the profession, and
 - the pathways for qualification for general registration for a limited period (grandparenting).
2. In each case the Board has carefully considered the objectives and guiding principles of the National Law, the regulatory principles for the National Scheme¹ and the cross professional work done by other National Boards in deciding what it should propose in relation to these standards. Like other National Boards, the Board has adopted a risk-based approach to its work and has drawn on the publications and experiences of other National Boards in relation to these registration standards as well as other sources of information.
3. The Board consulted with its key stakeholders in November and December 2017 on draft registration standards. The comments received were taken into consideration when developing this version for public consultation.
4. The Board is inviting general comments on its proposed registration standards. There is an overview before each proposed draft that explains the proposed standard. There are also specific questions about the registration standards that you may wish to address in your response.
5. It is clear from the National Scheme review outcomes that governments expect National Boards to take advantage of the opportunities for multi-profession collaboration within the National Scheme. The proposed standards in this consultation have benefited from the collective experience of, and the cross professional work undertaken in, the National Scheme in relation to these standards.
6. Similarly, governments expect National Boards to develop consistent approaches across professions rather than maintaining historic profession-specific approaches unless there are clear and robust reasons to support them, such as differentiated evidence of risk. This expectation has been reinforced in correspondence from the Ministerial Council² when approving the last tranche of revised health professions' registration standards for other professions in the National Scheme.

¹ The National Registration and Accreditation Scheme.

² COAG Health Council.

7. Across the proposed three mandatory registration standards, only a few small variations have been made from the revised profession specific registration standards that were consulted on publicly by the Chinese Medicine, Occupational Therapy, Aboriginal and Torres Strait Islander Health Practitioner, Chiropractic³ and Optometry⁴ Boards of Australia in 2011. This has been deemed necessary due to the nature of paramedicine education and practice. These include: an increase in the expected hours of CPD to be undertaken from 20 hours to 30 hours to align with the requirements of other Boards whose registrants' work involves the administration of scheduled medicines.
8. Supporting guidelines are provided in relation to the proposed CPD registration standard.
9. These proposed standards all include a five-year review period, with an option for earlier review if required. This reflects the approach used by other National Boards.
10. The proposed registration standard in relation to grandparenting which sets out the Board's requirements for an application for general registration where an applicant does not hold an approved or accepted qualification and wishes to apply under section 311 of the National Law that provides for alternative ways of proving they may be qualified for registration. Applicants for registration under the grandparenting provisions of the National Law still must satisfy the requirements of the other mandatory registration standards.
11. The grandparenting standard will be in place for a three year period, as prescribed in the National Law.

Next steps

12. The Board will consider the consultation feedback on the proposed registration standards before finalising the documents for Ministerial Council approval.

³ CPD registration standard and guidelines only.

⁴ CPD registration standard and guidelines only.

Professional indemnity insurance arrangements

Background

13. The Health Practitioner Regulation National Law (the National Law) requires National Boards to develop a registration standard about requirements for professional indemnity insurance (PII) arrangements for health practitioners registered in the profession.
14. Section 129 of the National Law provides that a registered health practitioner must not practise unless they have appropriate PII arrangements in force.
15. Section 109 of the National Law requires a practitioner applying to renew their registration to make a declaration that they have not practised during the previous registration period without having appropriate PII arrangements in place. It also requires the practitioner to declare that if their registration is renewed, they will not practise without appropriate PII arrangements in place.
16. Section 130 (3)(iii) requires that a registered health practitioner must notify the National Board within seven days if appropriate PII arrangements are no longer in place.
17. Practitioners who hold general registration but are not practicing (for example, are on a leave of absence) are not required to maintain PII arrangements for the period of no practice but must ensure they have adequate run off coverage for that period of absence.
18. Students undertaking clinical training as paramedics should be covered by the insurance of their education provider and hence are excluded from the requirements of this standard.
19. Once finalised, the Board proposes to provide supporting material (for example, fact sheets) for practitioners and applicants to assist them in better understanding the requirements of this standard.

Questions for consideration

The Board is inviting feedback in the form of responses to the following questions.

1. From your perspective, does the proposed standard adequately fulfill the Board's requirements to set out the requirements for professional indemnity insurance arrangements (PII) for the paramedicine profession?
2. Is the content and structure of the proposed PII arrangements registration standard helpful, clear, relevant and workable?
3. Is there any content that needs to be changed or deleted in the proposed PII arrangements registration standard?
4. Is there anything missing that needs to be added to the proposed PII arrangements registration standard?
5. It is proposed that the proposed PII arrangements registration standard is reviewed every five years or earlier if required, as the content is likely to be reasonably settled and stable after this review. Is this reasonable?
6. Is there anything else the National Board should take into account in its PII arrangements registration standard, such as effects on workforce or access to health services?
7. Do you have any other comments on the proposed PII arrangements registration standard?

Proposed registration standard

Registration standard: Professional indemnity insurance arrangements

Effective from: <<Date>>

This registration standard sets out the Paramedicine Board of Australia's (the Board) requirements for professional indemnity insurance (PII) arrangements for paramedics. Registrants can be covered by their own PII arrangements or third-party PII arrangements.

Does this standard apply to me?

This standard applies to all registered paramedics except those with student or non-practising registration.

What must I do?

1. When you practise as a paramedic, you must be covered by your own or third-party PII arrangements that meet this standard:
 - a. for all aspects of your practice
 - b. in all locations where you practise
 - c. whether you are working in the private, non-government and/or public sector, and
 - d. whether you are practising full-time, part-time, are self-employed, employed, or in an unpaid or volunteer capacity, or any combination of these factors.
2. Your PII cover must include:
 - a. civil liability cover
 - b. appropriate retroactive cover for otherwise uncovered matters arising from prior practice
 - c. automatic reinstatement, or an equivalent approach which ensures that the amount of cover will not be exhausted by a single claim,

or the equivalent of 2a to 2c above under third-party PII arrangements.
3. If you are covered by a third-party PII arrangement, it must meet this registration standard. If you are in any doubt about whether the third-party cover meets this registration standard, you should always ask what is covered by the third-party PII arrangement.
4. If the third-party cover does not meet this registration standard you must take out additional cover to ensure this standard is met.
5. If any area of your practice is specifically excluded from your PII cover, you must not practise in that area.
6. If your PII cover is provided by your employer, and you intend to practise outside your stated employment, you must have individual PII arrangements in place to cover that practice. This may include cover for undertaking:
 - practical components of continuing professional development
 - study involving patient treatment, or
 - volunteer work (unless you are covered separately for this work, for example, by the volunteering organisation).

Amount of cover

If you are arranging your own professional indemnity insurance, you should ensure that you take out adequate and appropriate insurance or professional indemnity cover. Professional indemnity insurers provide these policies. Insurance brokers or providers are best placed to advise you on what level of cover is adequate and appropriate for your practice. To enable them to make this judgement, you must provide your broker, insurer or indemnifier with accurate and up-to-date information about the scope and nature of

your practice. You need to be able to demonstrate that you fully disclosed your scope of practice to the provider of cover and justify your decisions about PII arrangements if asked to do so by the Board or AHPRA.

Are there exemptions to this standard?

Practitioners are exempt from requiring PII arrangements:

- when the scope of practice of an individual practitioner does not include the provision of healthcare or opinion in respect of the physical or mental health of any person
- when a practitioner has statutory exemption from liability. That is, they are employed as a practitioner or are in another arrangement and are exempted from liability under state or Commonwealth legislation, and
- when practitioners are registered in Australia but are practising exclusively overseas.

Note: run-off cover is required for past practice in Australia.

What does this mean for me?

The National Law states that a registered health practitioner must not practise their profession unless appropriate PII arrangements are in force in relation to the practitioner's practice of the profession (section 129 of the National Law).

When you apply for registration

When you apply for registration you must declare that you will not practise the profession unless you have PII arrangements in place that meet this standard. This is a requirement under the National Law.

At renewal of registration

You will be required to declare annually at renewal that:

- during the preceding period of registration, you practised the profession in accordance with the requirements of this registration standard, and
- you will not practise the profession unless you have PII arrangements in place that meet this standard.

During the registration period

You must notify the Board within seven days if you no longer have appropriate PII arrangements in place in relation to your practice that meet the requirements of this standard (section 130 of the National Law).

Your compliance with this standard may be audited from time to time.

When you cease practice

When you decide to cease practice, you must take out appropriate run-off cover for matters that would otherwise be uncovered arising from your previous practice as a registered health practitioner.

Evidence

The Board may, at any time, require you to provide evidence that you have appropriate PII arrangements in place.

If you hold private insurance in your own name, you must retain documentary evidence of your insurance for at least five years.

If you are covered by a third-party insurance arrangement, you are not required to obtain documentary evidence of the insurance policy unless the Board requests it. However, there may be circumstances when you are required to seek the documentation from that third party. If requested by the Board, you must provide a certified copy of the certificate of currency or a letter from the third party declaring that you are covered.

What happens if I don't meet this standard?

The National Law establishes possible consequences if you don't meet this standard, including that:

- the Board can impose a condition or conditions on your registration or can refuse your application for registration or renewal of registration when you don't meet a requirement in an approved registration standard for paramedicine (sections 82, 83 and 112 of the National Law)
- practising without appropriate PII arrangements, or failing to notify the Board within seven days that appropriate PII arrangements are no longer in place, is not an offence but may be behaviour for which health, conduct or performance action may be taken (sections 129 and 130 of the National Law), and
- registration standards, codes or guidelines may be used in disciplinary proceedings against you as evidence of what constitutes appropriate practice for paramedicine (section 41 of the National Law).

More information

Health practitioners should be aware that the provision of PII to health professionals is generally governed by the Medical Indemnity (Prudential Supervision and Products Standards) Act 2003 (Cth), with some exceptions.

An insurer providing PII to health professionals must generally be registered with the Australian Prudential Regulation Agency (APRA). Health practitioners who are taking out their own professional indemnity insurance are advised to ensure that:

- their PII provider is registered with APRA as a general insurer or that it is a Lloyd's underwriter (APRA's website contains a list of registered general insurers), and
- their PII is provided through a contract of insurance.

Authority

This registration standard was approved by the Ministerial Council on <<date>>.

Registration standards are developed under section 38 of the National Law and are subject to wide-ranging consultation.

Definitions

Automatic reinstatement is a provision in policies which allows for the limit of indemnity (amount insured) to be reinstated for new, unrelated claims, after one or more claims has been paid to the limit of the indemnity.

Civil liability insurance means insurance that covers the costs of liability incurred by the insured arising from civil claims seeking compensation for personal injury, harm or loss incurred, where the claim arises directly from an alleged act, error or omission committed in the conduct of the practitioner's practice or professional business during the policy period. Civil liability cover includes cover for legal expenses incurred in defence or settlement of a civil claim and for damages payable.

National Law means the Health Practitioner Regulation National Law, as in force in each state and territory.

Occurrence-based policy means a policy that is in place when the event which is the subject of the claim occurred, even if the policy has not been renewed.

Practice means any role, whether remunerated or not, in which an individual uses their skills and knowledge as a health practitioner in their profession. For the purpose of this registration standard, practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on safe, effective delivery of services in the profession.

Professional indemnity insurance (PII) arrangements means arrangements that secure for the practitioner's professional practice insurance against civil liability incurred by, or loss arising from, a claim that is made as a result of a negligent act, error or omission in the conduct of the practitioner. This type of insurance is available to practitioners and organisations across a range of industries and covers the cost

and expenses of defending a legal claim, as well as any damages payable. Some government organisations under policies of the owning government are self-insured for the same range of matters.

Retroactive cover means PII arrangements which cover the insured against new claims arising out of or in consequence of activities that were undertaken in the course of the practitioner's professional practice, prior to the date of the commencement of the insurance.

Run-off cover means insurance that protects a practitioner who has ceased a particular practice against claims that arise out of or are a consequence of activities that were undertaken when he/she was conducting that practice. This type of cover may be included in a PII policy or may need to be purchased separately.

Third party cover means the cover that an individual holds through a third party's insurance arrangement, such as through an employer, education provider or union.

Review

This registration standard will be reviewed from time to time as required. This will generally be at least every five years.

Last reviewed:

Continuing professional development

Background

20. The National Law requires National Boards to develop a registration standard about the requirements for continuing professional development (CPD) for health practitioners registered in the profession.
21. Section 128 of the National Law provides that a registered health practitioner (other than a practitioner who holds non-practising registration) must undertake the CPD required by the Board's CPD registration standard.
22. Section 109 of the National Law requires practitioners applying to renew their registration to make a declaration that they have completed the CPD required by the relevant National Board in the previous registration period.
23. The Board is satisfied that this standard is based on the best available evidence, meets the objectives of the National Law and is worded as simply and clearly as possible. To further support the understanding of this standard, supporting guidelines are provided. The Board seeks feedback on these guidelines also.
24. A template CPD record/log book will also be developed to help practitioners who are seeking further guidance on recording CPD activities undertaken and their reflections on how they have changed their practice as a result of the CPD activities that they have completed. The draft template record is not included with this consultation paper but will be developed at a later date.
25. This standard sets the minimum CPD requirements for maintaining registration as a paramedic. The Board notes that many paramedics may complete more than this number of hours annually.

Questions for consideration

The Board is inviting feedback in the form of responses to the following questions.

1. From your perspective, does the proposed standard adequately fulfil the Board's requirements to set a standard in relation to the requirements for continuing professional development (CPD) for the paramedicine profession?
2. Is the content and structure of the proposed CPD registration standard helpful, clear, relevant and workable?
3. Should the standard state that CPD should contribute to keeping practitioners up to date in the setting in which they work or does the statement 'keeping you up to date in your chosen scope' incorporate the setting adequately?
4. Is there any content that needs to be changed or deleted in the proposed CPD registration standard?
5. Is there anything missing that needs to be added to the proposed CPD registration standard?
6. Is the content and structure of the proposed CPD guidelines helpful, clear and is it a useful addition to the proposed CPD registration standard?
7. Is there any content that needs to be changed or deleted in the proposed CPD guidelines?
8. Is there additional clarification of the proposed CPD registration standard that needs to be added to the proposed CPD guidelines?

Proposed registration standard

Registration standard: Continuing professional development

Effective from: <<Date>>

This registration standard sets out the Paramedicine Board of Australia's (the Board) minimum requirements for continuing professional development (CPD) for paramedics.

Does this standard apply to me?

This standard applies to all registered paramedics except those with student or non-practising registration.

What must I do?

To meet this standard, you must:

1. complete at least 30 hours of CPD each year that:
 - a. seeks to improve patient outcomes and experiences
 - b. draws on the best available evidence, including well-established and accepted knowledge that is supported by research where possible, to inform good practice and decision-making
 - c. contributes directly to improving your competence (performance and behaviour) and keeping you up to date in your chosen scope and setting of practice
 - d. builds on your existing knowledge, and
 - e. includes a minimum of eight hours' CPD in an interactive setting with other practitioners.
2. maintain a portfolio that documents your learning goals, and records all your planned CPD activities and your reflection on how these CPD activities are expected to improve or have improved your practice.
3. maintain a first aid qualification at least equivalent to HLT AID 001 (Provide CPR)

The Board's *Guidelines: Continuing professional development* provide further information about CPD requirements.

Pro rata requirements

If you register part-way through a registration period you must complete seven and a half hours of CPD for every three months of registration remaining in the registration period.

What does not count as CPD?

You may not count education, training, mentoring or supervision required by regulatory action being taken by the Board or a Tribunal towards your CPD. For example, education that is required by a condition or undertaking.

Are there exemptions to this standard?

The Board may grant a full or partial exemption or variation from this standard in exceptional circumstances.

The Board's *Guidelines: Continuing professional development* provide further guidance.

What does this mean for me?

When you apply for registration

You don't need to meet this standard when you apply for registration in Australia for the first time as a paramedic.

At renewal of registration

When you apply to renew your registration, you must declare whether you have complied with this standard.

During the registration period

Your compliance with this standard may be audited from time to time. It may also be checked if the Board receives a notification about you.

Evidence

You must maintain records of your CPD activity for five years.

If you are audited you may be required to provide your CPD portfolio, or any other information the Board requires.

What happens if I don't meet this standard?

The National Law establishes possible consequences if you don't meet this standard, including that:

- the Board can impose a condition or conditions on your registration or can refuse an application for registration or renewal of registration, if you do not meet a requirement in an approved registration standard for the profession (sections 82, 83 and 112 of the National Law);
- a failure to undertake the CPD required by this standard is not an offence but may be behaviour for which health, conduct or performance action may be taken by the Board (section 128 of the National Law); and
- registration standards, codes or guidelines may be used in disciplinary proceedings against you as evidence of what constitutes appropriate practice or conduct for a paramedic (section 41 of the National Law).

More information

The *Guidelines: Continuing professional development* provide more information about how to meet this standard. You are expected to understand and apply these guidelines together with this standard.

Authority

This standard was approved by the Ministerial Council on <<date>>.

Registration standards are developed under section 38 of the National Law and are subject to wide ranging consultation.

Definitions

Continuing professional development is the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives.

Interactive means learning that involves a two-way flow of information and occurs with other practitioners, such as face-to-face or interactive online education

A **portfolio** is a collection of information about your CPD plans, the CPD activities you have done and their impact on your practice. It can be hardcopy and/or electronic documents or a combination.

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in the profession.

Reflection means thinking about what you do in order to improve your learning and practice.

Scope of practice means the professional role and services that an individual health practitioner is educated and competent to perform.

Review

This standard will be reviewed from time to time as required. This will generally be at least every five years.

Last reviewed: <<date>>

Proposed Guidelines

Guidelines: Continuing professional development

Effective from: <<date>>

Introduction

These guidelines provide information about how to meet the Paramedicine Board of Australia's (the Board) minimum annual continuing professional development (CPD) requirements outlined in the *Registration standard: Continuing professional development* (CPD standard). You are expected to understand and apply these guidelines together with the CPD standard.

The public have the right to expect that paramedics will provide competent and up-to-date services. CPD helps paramedics to maintain their competence and to provide safe and effective health services.

Do these guidelines apply to me?

These guidelines apply to all registered paramedics, except those with student and non-practising registration.

What must I do?

You must undertake CPD to meet the Board's registration standard each year.

Summary

These guidelines will help you:

- understand the importance of CPD in staying up to date, maintaining safe practice and improving patient outcomes
- choose effective CPD that meets the registration standard, and
- keep CPD records, by providing advice about what information to include in a template portfolio for recording your learning goals, CPD activities and reflections.

Effective CPD and why it is important

Learning and development occurs throughout a paramedic's career. CPD is an important foundation of lifelong learning and helps paramedics to maintain their competence to practise.

Effective CPD promotes genuine learning. Genuine learning occurs when you apply what you have learned in your practice. It facilitates more effective clinical care, leading to safer outcomes for patients and clients.

Research indicates that CPD may be more effective when it involves planning and reflection. Reflection means thinking carefully about your CPD, what you learned and how you might use it to improve your practice as a paramedic. The CPD standard requires you to maintain a portfolio that records your reflections on how CPD has affected your practice.

Benefits of interactive and interprofessional CPD

The CPD standard requires you to complete at least eight hours of interactive CPD activities, as there is evidence that this facilitates effective learning. It also helps to maintain connections with other practitioners and contemporary practice. Interactive CPD activities are any activities that involve other practitioners, such as face-to-face education in person or through technologies such as web-conferencing.

Interprofessional CPD activities can also have benefits by supporting effective interprofessional practice which, in turn, optimises health services, strengthens health systems and improves health outcomes.

CPD activities

All CPD which helps you maintain competence, stay up to date and is relevant to your scope of practice will meet the standard.

The Board does not endorse/accredit CPD providers or activities but expects practitioners to select CPD activities that are consistent with the ethical and professional standards set out by the Board.

When selecting CPD activities you should consider:

- the qualifications, credentials and experience of the provider;
- selecting a range of topics and activities over time;
- having a balance of practice based reflective activities (for example clinical audit, peer review or performance appraisal), professional education and training activities (for example seminars) and professional experience and development activities (for example (meetings/discussions, self study, forums etc): and
- choosing activities that are consistent with the Board's other standards and guidelines.

Learning occurs through a wide variety of CPD activities. Examples include, but are not limited to:

- higher education/accredited courses
- conferences, forums and seminars
- undertaking research and presentation of work
- online learning and internet research
- written reflections on experience in day-to-day clinical practice
- reading books and journals relevant to your practice
- quality assurance activities, such as accreditation, clinical audit or review of records
- participation in committees relevant to your practice
- work-based learning contracts and employment related professional development
- participating in peer and performance review activities
- interactive professional or inter-professional interactions such as meetings e.g. case reviews, clinical forums (may be online or face to face); and
- activities that address current or emerging health priority areas, for example, cultural safety particularly for Aboriginal and Torres Strait Islander Peoples. Another example is effectively identifying and responding to family violence.

Undertaking your day-to-day routine work duties cannot be counted as CPD.

Planning and reflection

The CPD standard requires you to:

- plan and record your learning goals and the activities that you will do to meet these goals; and
- complete the CPD activities and record a reflection on how they improved your practice.

When planning your CPD you may find it useful to:

- review best practice standards or evidence-based practice, enabling you to evaluate and improve your level of competency, treatment plan or service delivery
- identify changes in the profession including standards of care
- undertake a self-assessment to identify possible areas for improvement helping you to improve your practice to meet current standards using evidence-based practice or best practice standards
- identify how you could further develop competency or strengths in areas of particular interest or aptitude, and
- identify opportunities for interactive and interprofessional CPD.

You may wish to consider current or emerging health priorities, and should also consider any priority areas identified by the Board, for example, cultural safety for Aboriginal and Torres Strait Islander Peoples.

There is good evidence suggesting that reflecting on how your CPD relates to your practice will may improve your learning. This can be done by:

- a. briefly summarising the CPD activities you have completed
- b. assessing your progress against your learning goals, and
- c. describing how you have used what you learnt in your practice.

Reflecting on your learning will help you set learning goals for the coming year as part of the ongoing CPD cycle.

It is often helpful to discuss your CPD planning with colleagues, mentors and/or supervisors to help you identify your own areas for improvement. Patient feedback may also be helpful in identifying areas where you need further professional development.

A template record/log book that can help you to record your learning goals, your CPD activities and your reflections can be found on the Board's website⁵. Examples of completed CPD portfolios are also published on the Board's website.

It is your responsibility to make sure you meet the CPD standard. You must undertake the required minimum number of CPD hours and your CPD portfolio must include planning and reflection.

The diagram below demonstrates the CPD cycle.

⁵ Once the guidelines are approved and in operation.

The CPD cycle



Record keeping

The CPD standard requires you to keep records of your portfolio and CPD activities for at least five years from the date you completed the CPD cycle. These records must be available for audit or if required by the Board as part of an investigation arising from a notification (complaint).

In addition to your portfolio, you must also keep evidence of CPD activities completed, such as:

- certificates of attainment or attendance, and
- your notes from the CPD activity such as conducting a literature review, or reading case studies or journal articles. In this example, it is expected that these notes will provide a comprehensive summary of the key points of the review and reflect your learning from this activity.

Pro rata CPD

Paramedics who are registered part-way through a registration period must complete a minimum of seven and a half hours of CPD for every three months of registration remaining in the registration period.

Exemption

The Board believes the range of activities and the time frame provided to meet the CPD requirements is flexible enough for paramedics to meet the requirements other than in exceptional circumstances.

However, under the *Registration standard: Continuing professional development*, the Board may consider and/or grant a full or partial exemption or variation from the CPD requirements in exceptional circumstances. Exceptional circumstances for exemptions will only be considered where there is compelling evidence that the circumstances have created a significant obstacle to the paramedic's ability to complete CPD, such as a practitioner taking a substantial absence from practice or overseas/remote area deployment.

You should submit an application for exemption form to the Board as soon as possible after you identify the need for an exemption. The application must include the nature of, evidence for and time period of the exceptional circumstances, involved.

Absence from practice

If you take a period of leave while you remain registered to practise, you are still required to meet the Board's CPD standard unless you are granted an exemption.

If you move to non-practising registration or don't maintain your registration, before you re-apply for registration to practise, you are encouraged to assess what changes have occurred in your profession and consider if there is any professional development you need to do to ensure that you are prepared to return to practice.

Compliance

As the CPD standard explains:

- when you renew your registration, you are required to declare whether you have met the requirements of the CPD standard
- your compliance with this standard may be audited from time to time, which involves a review of your CPD portfolio including your CPD goals, activities completed, and your reflection on those activities, and
- a failure to comply with the CPD standard requirements may result in action being taken against you by the Board to protect the public.

Important note: Making a false declaration when you renew your registration is a serious matter which may result in action being taken against you by the Board.

Authority

The Board has developed these guidelines under section 39 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

Guidelines approved by the Board may be used as evidence of what constitutes appropriate professional conduct or practice for paramedics in proceedings against a paramedic under the National Law, or a law of a co-regulatory jurisdiction.

Definitions

Continuing professional development (CPD) is the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence and develop the personal qualities required throughout their professional lives.

Competence means having the qualifications and ability to perform a specific role. It involves a complex interaction and integration of knowledge, skills, professional behaviours and judgement.

CPD cycle means the registration year in which the CPD was completed.

Interactive means learning that involves a two-way flow of information and occurs with other practitioners, such as face-to-face or interactive online education.

Inter-professional education means learning that occurs when individuals from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.

A **portfolio** is a collection of information about your CPD plans, the CPD activities you have done and their impact on your practice. It can be hardcopy and/or electronic documents or a combination.

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in the profession.

Reflection means thinking about what you do in order to improve your learning and practice.

Scope of practice means the professional role and services that an individual health practitioner is educated and competent to perform.

Review

These guidelines will be reviewed at least every five years.

Last reviewed: <<date>>

Recency of practice

Background

27. The National Law requires the Board to develop a registration standard about the requirements for the nature, extent, period and recency of any previous practice by practitioners applying for initial registration in the profession.
28. Section 109 of the National Law requires a practitioner applying to renew their registration to declare that they have met the recency of practice requirements in the Board's registration standard.
29. Section 55 of the National Law provides that registration may be refused for a practitioner who does not meet the recency of practice requirements specified by the Board.
30. This standard sets the minimum recency of practice requirements for maintaining registration as a paramedic.
31. Given the broad definition of practice, paramedics can achieve and maintain registration by using their skills, knowledge and abilities as a paramedic in both clinical and non-clinical roles.

Questions for consideration

The Board is inviting feedback in the form of responses to the following questions.

1. From your perspective, does the proposed standard adequately fulfil the Board's requirements to set out the requirements for the nature, extent, period and recency of any previous practice by practitioners applying for initial registration in the profession?
2. In the content of the proposed standard helpful, clear relevant and workable?
3. Do you have feedback about the proposal to introduce a minimum of 450 practice hours in the previous three years or 150 practice hours in the previous 12 months to meet recency of practice requirements?

Proposed registration standard

Registration standard: Recency of Practice

Effective from: <<date>>

Summary

All National Boards must set recency of practice requirements to help registered practitioners maintain safe and competent practice within their scope of practice.

This registration standard sets out the Paramedicine Board of Australia's (the Board) minimum requirements for recency of practice for paramedics.

Does this standard apply to me?

This standard applies to all registered paramedics and those applying for registration except students, recent graduates applying for registration for the first time and practitioners with non-practising registration.

What must I do?

To meet this registration standard you must complete a minimum of:

- a. 450 hours practice in the previous three years; or
- b. 150 hours of practice in the previous 12 months.

This standard sets minimum requirements to maintain recency of practice. Meeting these requirements doesn't automatically satisfy your professional and ethical responsibilities to ensure that you recognise and work within the limits of your competence and maintain adequate knowledge and skills to provide safe and effective care.

By declaring on an application that you meet the Board's recency requirements, you are declaring that you have the required minimum practice hours *within your current scope of practice*. If you are returning from a break from practice, intend to change to a new field of practice or move from non-clinical to clinical practice and you do not meet the above criteria for this new scope of practice, you must undertake appropriate preparation before you commence practising in the new scope of practice (See '*What happens if I don't meet this standard?*' and '*What happens if I am changing my scope of practice?*' below).

Are there exemptions to this standard?

There are no exemptions to this standard.

The '*What happens if I don't meet this standard?*' section below explains what you need to do if you don't meet this standard and wish to continue or return to practice.

What does this mean for me?

When you apply for registration

When you apply for registration as a paramedic you must meet this registration standard. This includes practitioners who are applying for new or additional types of registration, such as changing from non-practising to general registration.

You don't need to meet this registration standard if you are a recent graduate applying for registration for the first time.

At renewal of registration

When you renew your registration, you must declare if you comply with this registration standard.

During the registration period

Your compliance with this registration standard may be audited from time to time. It may also be checked if the Board receives a notification (complaint) about you.

Evidence

You must keep records as evidence that you meet the requirements of this standard for five years in case you are audited.

What happens if I don't meet this standard?

If you want to continue to practise, or return to practice after taking a break, and you don't meet this standard, you will need to provide information to help the Board decide whether you are able to continue or return to practice.

The National Law establishes possible consequences if you don't meet this standard, including that the Board can impose conditions on your registration or refuse your application for registration or renewal of registration (sections 82, 83 and 112 of the National Law).

The Board will consider your application to register or renew your registration, and any accompanying documentation, on an individual basis. It will take a number of factors into consideration when deciding whether or not to grant your application for registration or renewal of registration. These factors include, but are not limited to:

- your registration and practice history including:
 - your length of time away from practice; and
 - the nature and scope of practice prior to your break from practice.
- any continuing professional development or education completed, or professional contact maintained during your break from practice.
- your intended field of practice including:
 - the role and position proposed;
 - the level of risk associated with your proposed practice;
 - any continuing professional development or education proposed in relation to the role; and
 - access to supervision, if necessary.

The Board may require you to provide additional information about these factors, and after considering all this information, the Board may also require you to undertake one or more of the following:

- an assessment or examination to assess your competence to practice;
- further specific education; and
- a period of supervised practice.

What happens if I am changing my scope of practice?

If you are proposing to change the scope of your practice you may be required to undergo additional training to ensure that you are competent in your new scope of practice.

The Board's requirements are:

- a. prior to extending or changing your scope, you must complete any advanced training/preparation that your peers would reasonably expect to ensure you are competent to practise in that scope; and
- b. if it is a substantial change to a different scope of practice (for example from an administrative to a clinical practice role), you must develop a plan for professional development to ensure your competence and submit this plan to the Board for consideration and approval prior to commencing the extended scope of practice.

Other possible consequences

The National Law establishes other possible consequences if you don't meet the recency of practice requirements in this standard, including that registration standards, codes or guidelines may be used in disciplinary proceedings against you as evidence of what constitutes appropriate professional practice or conduct for the profession (section 41 of the National Law).

Authority

This registration standard was approved by the Ministerial Council on <<date>>.

Registration standards are developed under section 38 of the National Law and are subject to wide-ranging consultation.

Definitions

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in the profession.

Recency of practice means that a health practitioner has maintained an adequate connection with, and recent practice in the profession since qualifying for, or obtaining registration.

Recent graduate is a person who qualified from an approved or accepted program of study within two years of lodging a complete application for registration.

Scope of practice means the professional role and services that an individual health practitioner is educated and competent to perform.

Review

This registration standard will be reviewed from time to time as required. This will generally be at least every five years.

Last reviewed: <<date>>

Grandparenting

Background

30. Section 311 of the Health Practitioner Regulation National Law (the National Law) provides pathways for practitioners who do not possess an approved or accepted qualification to demonstrate that they are qualified for general registration as a paramedic.
31. This can be done by way of a qualification, a qualification and supervised practice or a quantum of practice in the profession. This opportunity is only available for a limited period of three years and are referred to as the 'grandparenting' provisions.
32. Section 38 of the National Law provides authority for the Board to develop a registration standard in relation to these 'grandparenting' provisions.
33. It is important to note that this standard relates to an applicant's qualification for registration and other applicable requirements including other registration standards must also be met.

Questions for consideration

The Board is inviting feedback in the form of responses to the following questions.

1. From your perspective, does the proposed standard adequately provide clarity in relation to the possible pathways available in the 'grandparenting' provisions?
2. Are there any state or territory-specific issues or impacts arising from applying the existing standard that you would like to raise with the Board?
3. Is the content of the proposed registration standard helpful, clear and relevant?
4. Is there any content that needs to be changed or deleted in the proposed registration standard?
5. Is there anything missing that needs to be added to the proposed registration standard?
6. Do you have any other comments on the proposed registration standard?

Proposed registration standard

Registration standard: Grandparenting

Effective from: <<date>>

Summary

This registration standard sets out the Paramedicine Board of Australia's (the Board) requirements for an application for general registration where you do not hold an approved or accepted qualification and wish to apply under section 311 of the National Law⁶ that provides for alternative ways of proving you may be qualified for registration (grandparenting)⁷.

This standard provides an explanation of how you can apply for registration under these provisions based on:

- adequate qualification(s)
- qualification(s) with supervised practice, or
- adequate experience and practice in the profession.

These provisions apply for a limited time of three years from <<date>> .

Does this standard apply to me?

This standard applies if you:

- apply for general registration before <<date>>, and
- do not hold an approved⁸ or accepted⁹ qualification.

If you are qualified for general registration under section 53(a) or (d) with an approved or accepted qualification you are not required to meet this standard.

What must I do?

When you apply for registration

You can apply for registration under s311(a),(b) or (c) by one of the following pathways within the confines of these grandparenting provisions.

Pathway 1 (s311(1)(a))

May apply if you hold a qualification or completed training in paramedicine, whether in a participating jurisdiction or elsewhere, that the Board considers adequate for the purposes of practising the profession, or

Pathway 2 (s311(1)(b))

May apply if you hold a qualification or have completed training in paramedicine, whether in a participating jurisdiction or elsewhere, and have completed any further study, training or supervised practice in the profession required by the Board for the purposes of this section, or

Pathway 3(s311(1)(c))

⁶ Health Practitioner Regulation National Law as in force in each state and territory.

⁷ Section 311(1) of the National Law is referred to as the grandparenting provisions for Paramedicine practitioners.

⁸ Approved qualifications are set by the Board under section 49 of the National Law and published on the Boards website.

⁹ The National Law prescribes a Diploma of Paramedical Science issued by the Ambulance Service of New South Wales as an accepted qualification.

May apply if you have practised paramedicine during the 10 years before <<date>> for a consecutive period of five years or for any periods which together amount to five years and satisfies the Board that you are competent to practise paramedicine.

In addition to being qualified for registration, all applicants must meet the requirements for registration as set out in other registration standards and the National Law.

How to demonstrate that you meet this standard

The Board will assess applicants for general registration made in accordance with section 311(1) on their individual merit.

When applying for general registration in accordance with section 311(1) you must provide the following evidence to the satisfaction of the Board.

Pathway 1 (s311(1)(a))

A curriculum vitae and evidence of any qualification obtained, training or further study undertaken including a description of topics covered and competencies achieved that is relevant to your application to be a registered paramedic. For example, a certified copy of the testamur or award document(s) and a course outline certified by the education provider detailing topics covered, assessment details and study hours.

Pathway 2 (s311(1)(b))

A curriculum vitae and evidence of any qualification obtained, training or further study undertaken including a description of topics covered and competencies achieved that is relevant to your application to be a registered paramedic along with evidence of your successful completion of any period of supervised practice. For example, a certified copy of the testamur or award document(s) and a course outline certified by the education provider detailing topics covered, assessment details and study hours along with signed documentation from an employer(s) or supervisor(s) attesting to the nature and extent of the supervised practice undertaken.

Pathway 3 (s311(1)(c))

A curriculum vitae that demonstrates a consecutive period of practice of the profession amounting to a total of five years during the 10 years before <<date>> along with corroborating evidence in the form of:

- a. a statement(s) of service or other documentation from an employer(s) that demonstrates five years of practice in the profession during the 10 years before <<date>>;
- b. copies of position descriptions, certified by employer(s) and describing the nature of the qualifications or knowledge and skills required, duties performed and duration of employment; and
- c. information on how your practice as a paramedic demonstrates your competency and qualification for registration. For example, an authority to practice as a paramedic issued by a ambulance service or a personal submission and evidence as to your competency.

General

In order to determine any application for registration the Board may require you to provide additional evidence relating to your qualifications, training, further study or employment. Should the Board still fail to be satisfied that you are qualified for registration, it may also require you to undertake an examination or an assessment in accordance with section 80(1)(d) of the National Law. This may, for instance, include assessment against professional competency standards for paramedics such as those published by the Council of Ambulance Authorities.

You should note that providing false or misleading information or making a false or misleading declaration may be considered by the Board as professional misconduct. The Board may refuse to register you or cancel your registration where it is established that false or misleading information or a false or misleading declaration has been provided.

What happens if I don't meet this standard?

If you are unable to meet the requirements of this standard, your application for General registration as a paramedic will be refused.

Authority

This registration standard was approved by the Ministerial Council on <<date>>.

Registration standards are developed under section 38 of the National Law and are subject to wide-ranging consultation.

Definitions

Approved program of study means an accredited program of study approved under section 49(1) by the National Board and included in the list published on the Board's website, under section 49(5).

A list of approved programs of study will be published on the Board's section of the AHPRA website.

Approved qualification means a qualification obtained by completing a Board approved program of study for the profession. Approved qualifications will be listed on the Board's website.

Accepted qualification means a Diploma of Paramedical Science issued by the Ambulance Service of New South Wales.

Grandparenting provisions are defined as the transitional arrangements outlined in section 311 of the National Law.

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. For the purposes of this registration standard, practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct nonclinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on safe, effective delivery of services in the profession.

Review

This registration standard will be in effect from << date >> until <<date>>.

Relevant sections of the National Law

Section 311 Qualifications for general registration in paramedicine for a limited period

- (1) For the purposes of section 52(1)(a), an individual who applies for registration in paramedicine before the relevant day is qualified for general registration in paramedicine if the individual—
 - (a) holds a qualification or has completed training in paramedicine, whether in a participating jurisdiction or elsewhere, that the Paramedicine Board considers is adequate for the purposes of practising the profession; or
 - (b) holds a qualification or has completed training in paramedicine, whether in a participating jurisdiction or elsewhere, and has completed any further study, training or supervised practice in the profession required by the Paramedicine Board for the purposes of this section; or
 - (c) has practised paramedicine during the 10 years before the participation day for a consecutive period of 5 years or for any periods which together amount to 5 years and satisfies the Paramedicine Board that he or she is competent to practise paramedicine.
- (2) This section applies despite section 53.

Statement of assessment

The Board's statement of assessment against the AHPRA's Procedures for development of registration standards, codes and guidelines and COAG principles for best practice regulation

Proposed mandatory registration standards:

- Professional indemnity insurance arrangements
- Continuing professional development (and supporting guidelines)
- Recency of practice

Proposed registration standard:

- Grandparenting

The Australian Health Practitioner Regulation Agency (AHPRA) has *Procedures for the development of registration standards, codes and guidelines* which are available at <http://www.ahpra.gov.au/Publications/Procedures.aspx>.

These procedures have been developed by AHPRA in accordance with section 25 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), which requires AHPRA to establish procedures for the purpose of ensuring that the National Registration and Accreditation Scheme (the National Scheme) operates in accordance with good regulatory practice.

Below is the Board's assessment of its proposal for its proposed registration standard and guidelines against the three elements outlined in the AHPRA procedures.

1. The proposal takes into account the National Scheme's objectives and guiding principles set out in section 3 of the National Law

Board assessment

The Board considers that the proposed registration standards meet the objectives and guiding principles of the National Law.

The proposal takes into account the National Scheme's Key objective of protecting the public by ensuring only persons who are suitably trained and qualified in a competent and ethical manner are granted general registration.

The *Proposed registration standard: Professional Indemnity insurance arrangements*, if approved, will provide for the protection of the public by ensuring that practitioners will have risk appropriate professional indemnity insurance to cover their professional practice. It provides for employers and volunteer organisations to provide coverage for their employees and volunteers. Individual practitioners will need to obtain their own coverage only if they are working outside the scope of any employer or volunteer indemnity insurance arrangements.

The *Proposed registration standard: Continuing professional development*, and the corresponding guidelines, if approved, will provide for the protection of the public by ensuring that practitioners undertake appropriate continuing professional development (CPD) as an important aspect of maintaining their competence. It will facilitate access to health services by ensuring that practitioners regularly complete CPD relevant to their practice.

The *Proposed registration standard: Recency of practice*, if approved, will provide for the protection of the public and access to health services by ensuring that practitioners have appropriate recent practice.

The *Proposed registration standard: Grandparenting*, if approved, will provide for the protection of the public and access to health services, by providing clarity and reasonable criteria around the provisions of section 311 of the National Law such that practitioners are able to demonstrate that they have adequate qualification to apply for general registration as a paramedic.

The proposed registration standard and guidelines also support the National Scheme to operate in a transparent, accountable, efficient and fair way.

2. The consultation requirements of the National Law are met

Board assessment

The National Law requires wide-ranging consultation on proposed registration standards and guidelines. The National Law also requires the Board to consult other boards on matters of shared interest.

The Board will ensure that there is public exposure of its proposals and there is the opportunity for public comment by carrying out both preliminary and public consultation processes. This process will include the publication of the consultation paper (and attachments) on its website.

The Board has drawn this paper to the attention of key stakeholders in the preliminary phase of consultation.

The Board will take into account the feedback it receives when finalising its proposals for submission to the Ministerial Council for approval.

3. The proposal takes into account the COAG Principles of Best Practice Regulation

Board assessment

In developing the proposed registration standards and guidelines for consultation, the Board has taken into account the Council of Australian Governments (COAG) Principles of Best Practice Regulation.

As an overall statement, the Board has taken care not to propose unnecessary regulatory burdens that would create unjustified costs for the profession or the community.

The Board makes the following assessment specific to each of the COAG principles expressed in the AHPRA procedures.

COAG principles

a. Whether the proposal is the best option for achieving the proposal's stated purpose and protection of the public

Board assessment

The Board considers that its proposals are the best options for achieving the stated purposes. It is expected the proposals may affect some practitioners.

The Board considers that the proposed standards would have a moderate impact on the profession, particularly as the profession has never been subject to a nationally consistent regulatory overlay in the past. These impacts are significantly outweighed by the benefits of protecting the public and providing reasonable, clear and simple requirements, in the public interest.

The Board has carefully considered the objectives and guiding principles of the National Law, the Regulatory principles for the National Scheme¹⁰ and the cross professional work done by other National Boards in deciding what it should propose in relation to these standards. Like other National Boards, the Board has adopted a risk-based approach to its work and has drawn on the publications and experiences of other National Boards in relation to these registration standards as well as other sources of information.

¹⁰ The National Registration and Accreditation Scheme.

b. Whether the proposal results in an unnecessary restriction of competition among health practitioners

Board assessment

The Board considered whether its proposals could result in an unnecessary restriction of competition among health practitioners. Because the proposals apply in the same way to all registered practitioners, they are not expected to impact on the current levels of competition among health practitioners.

c. Whether the proposal results in an unnecessary restriction of consumer choice

Board assessment

The Board considers that the proposed registration standards will support consumer choice, ensuring there are risk appropriate, transparent and consistent requirements in relation to the matters covered by these standards.

Having clear registration standards with requirements appropriate to the risk and practice of the particular profession helps consumers understand what to expect from registered practitioners and supports consumer choice.

d. Whether the overall costs of the proposal to members of the public and/or registrants and/or governments are reasonable about the benefits to be achieved

Board assessment

The Board considered the overall costs of the proposed registration standards to members of the public, registrants and governments and concluded that the likely costs are appropriate when offset against the benefits that the proposed registration standards contribute to the protection of the public.

e. Whether the requirements are clearly stated using 'plain language' to reduce uncertainty, enable the public to understand the requirements, and enable understanding and compliance by registrants

Board assessment

The Board considers the proposed registration standards and guidelines have been written in plain English that will help practitioners to understand the requirements of the standards. The Board has ensured the structure and wording of the standards and guidelines are clear and easy to understand.

f. Whether the Board has procedures in place to ensure that the proposed registration standard, code or guidelines remains relevant and effective over time

Board assessment

If approved, the Board will review the proposed registration standards at least every five years, including an assessment against the objectives and guiding principles in the proposed National Law and the COAG principles for best practice regulation.

However, the Board may choose to review the standards earlier, in response to any issues that arise or new evidence which emerges to ensure the standards' continued relevance and workability.