



Special Commission of Inquiry into Healthcare Funding

Submission Number: 96
Name: Australasian College of Paramedicine
Date Received: 3/11/2023

3 November 2023

NSW Special Commission of Inquiry into Healthcare Funding
GPO Box 5341 Sydney NSW 2001
Via email: www.parliament.nsw.gov.au

Dear Mr Mullane,

Special Commission of Inquiry into Healthcare Funding

Thank you for your consideration of this submission to the NSW Special Commission of Inquiry into Healthcare Funding.

The Australasian College of Paramedicine (the College) is the peak professional body representing and supporting over 10,000 paramedics and student paramedics across Australia and Aotearoa New Zealand, including NSW based members. The College is future-focused and brings together paramedics from across Australasia to represent, advocate and promote this essential registered health profession being included in innovative, patient-centred solutions based on evidence.

A) The funding of health services provided in NSW and how the funding can most effectively support the safe delivery of high quality, timely, equitable and accessible patient-centred care and health services to the people of NSW, now and into the future.

Paramedics are a registered health profession through Ahpra and deliver high-quality person-centred care to all communities across NSW. While it is the state's obligation to fund NSW Ambulance, and must continue to do so meaningfully, there has been a lost opportunity to incorporate paramedicine into models of community based and primary healthcare service outside of jurisdictional ambulance services, which would improve healthcare delivery, professional growth and health workforce shortages. The funding of health services requires a future-focused vision and community-wide collaboration to ensure healthcare delivery is effective for all.

The *NSW Regional Health Strategic Plan 2023 – 2033*, while recognising the need to strengthen the workforce by “encouraging innovative workforce models and recognition of staff experience and skills”, refers only to increasing the number of paramedics in specialist roles employed exclusively by NSW Ambulance. There has been no recognition of the unique role that paramedics, as registered, autonomous healthcare practitioners, can fulfil within multidisciplinary teams.

It is also important to point out the Australian Federal Government; Office of the National Rural Health Commissioner, released the *Ngayubah Gadan (Coming Together) Consensus Statement*¹ earlier this year. This landmark document includes paramedicine as its own discipline within rural and remote multidisciplinary healthcare teams (p.11). This is an important step in recognising and valuing paramedics as a unique and distinct healthcare profession, outside of the context of a jurisdictional ambulance service, who can contribute to, and deliver high quality, health and wellbeing outcomes of regional, rural and remote populations.

B) The existing governance and accountability structure of NSW Health, including:

ii The engagement and involvement of local communities in health service development and delivery;

In rural and remote areas of NSW where access to healthcare is challenged due to a number of issues including workforce and service resourcing, it is integral that NSW Health collaborates and codesigns with communities

to ensure the healthcare needs are met, particularly for Aboriginal and Torres Strait Islander peoples who experience greatest health disparities across Australia.

F) The current capacity and capability of the NSW Health workforce to meet the current needs of patients and staff, and its sustainability to meet future demands and deliver efficient, equitable and effective health services, including:

iii evaluating financial and non-financial factors impacting on the retention and attraction of staff;

Approximately 2,500 student paramedics complete their paramedicine degree programs each year, with jurisdictional ambulance services usually hiring only half of the graduate paramedics annually. To become registered with Ahpraⁱⁱ, paramedics must first complete an undergraduate paramedical science degree accredited by the Paramedicine Board of Australia (PBA). Once registered, they must undertake 30 hours of annual continuing professional development and meet the ongoing requirements set by the PBA. Paramedics can also pursue postgraduate studies to expand their knowledge and skills in critical care, community care, primary care, extended care, and as a paramedic practitioner.

Potentially, there is a surplus of 1,000 work-ready, graduate paramedics available to deliver high-quality healthcare beyond jurisdictional ambulance settings. Since 2014, the majority of these paramedics have relocated to the United Kingdom and other countries, to help address their workforce shortages. A significant proportion of these skilled paramedics are seeking to return to Australia now, or in the future, but the limited jurisdictional ambulance service roles make it challenging for many to secure paramedic positions in Australia.

Our membership has strongly indicated to us that the leading factors for this are a lack of flexibility in the workplace, a lack of career growth and opportunities outside of jurisdictional ambulance services, wellbeing factors and burnout.

As well, we are currently undertaking a major research project in collaboration with several universities across Australia and Aotearoa New Zealand - Australasian Paramedicine Workforce Survey <https://paramedics.org/storage/news/Chief-Paramedic-Officers-Position-Statement-AUS.pdf>. This is the first survey of its kind, and we look forward to sharing insights once that survey is complete to help governments better understand the retention issues facing the paramedic workforce and opportunities for government to fund innovative programs to address these, and other, issues.

vii the skill mix, distribution and scope of practice of the health workforce.

ix. opportunities for an expanded scope of practice for paramedics, community and allied health workers, nurses and/or midwives;

ix the role of multidisciplinary community health services in meeting current and future demand and reducing pressure on the hospital system.

There is a strong correlation between all these points – paramedics working in multidisciplinary team-based modes of care .

An excellent example of paramedics working beyond emergency response, in innovative models of care, is community paramedicine. Paramedics employed to this high-impact role complete postgraduate training which is “designed to provide paramedics with the necessary knowledge and skills to undertake a career in community paramedicine, working in urgent care, non-urgent care and primary healthcare settings.” (Edith Cowan University Graduate Certificate of Community Paramedicine 2023)

The community paramedicine definition:

“A community paramedic provides person-centred care in a diverse range of settings that address the needs of the community. Their practice may include the provision of primary health care, health promotion, disease management, clinical assessment, and needs-based interventions. They should be integrated with interdisciplinary healthcare teams which aim to improve patient outcomes through education, advocacy, and health system navigation. The adoption of the global consensus on the definition of a community paramedic will enhance efforts to promote the value of this specialist role, enabling a better understanding of how a community paramedic contributes to the wider healthcare system.”ⁱⁱⁱ

A 2022 study titled *“The Nature of Paramedic Practice in Rural and Remote Locations: A Scoping Review”* revealed ‘factors which were beneficial to the outcomes of patients in rural settings included enhanced paramedic scopes of practice, the implementation of community paramedicine programs and wider roles within the community for paramedics.’^{iv}

The Grattan Institute’s report *‘A new Medicare: Strengthening general practice’* recognised paramedics as a key primary healthcare workforce, recommending the nationwide adoption of multidisciplinary health teams to provide better health services for all Australians outlining that paramedics and community paramedicine were an integral component of that new landscape, and are identified among the clinicians for whom there is “a very significant gap between the contribution they are able to make, and what funding and policy let them do in Australia”.^v

The development of robust career pathways that includes paramedics in innovative workforce models, such as community and primary healthcare, that builds the pipeline of regionally based health workers, will help meet the objectives of recruiting and retaining healthcare workers in regional and rural Australia.

Based on the *NSW Health Regional Strategic Plan (2023–2033)*^{vi} there have been missed opportunities to utilise the benefits that paramedicine brings to multidisciplinary care teams and coordination of healthcare that meets the objective of reducing avoidable hospitalisations and further strengthening equitable access to care for the community.

G) Current education and training program for specialist clinicians and their sustainability to meet future needs, including:

A dedicated effort is needed within NSW Health to engage with the College to achieve meaningful integration of the paramedicine workforce. To continue relying on the jurisdictional ambulance service as the only source of a relationship to the paramedicine workforce perpetuates a narrow understanding of the profession and denies the paramedicine workforce its full potential, to the detriment of the regional and rural population and healthcare workforce across NSW.

H) New models of care and technical and clinical innovations to improve health outcomes for the people of NSW, including but not limited to technical and clinical innovation, changes to scope of practice, workforce innovation, and funding innovations.

In addition to the opportunities outlined, to better utilise and recognise the paramedic profession, there is a great need for formal paramedic representation in policy development and healthcare advisory roles is paramount in ensuring the comprehensive and effective integration of paramedicine within the broader healthcare landscape. Just as in the fields of medicine, nursing, and allied health, paramedicine should have a dedicated representative. This representation could come in the form of the establishment of Chief Paramedic Officers (CPOs) within the Health and Aged Care Department and across all state governments – currently only Victoria has a CPO. The role of CPO would serve as experienced leaders, bridging the gap between paramedics

and policymakers in NSW Health, ensuring that policies and practices are not only informed by the latest medical advancements but also tailored to the specific needs of paramedics and the patients they serve. See College Position Statement: Chief Paramedic Officers: <https://paramedics.org/storage/news/Chief-Paramedic-Officers-Position-Statement-AUS.pdf>

Furthermore, the Federal Government, Department of Health and Aged care is currently undertaking a major 12 month consultation review titled “Unleashing the potential of our workforce - Scope of Practice Review” in which we are working closely with the government to recognise paramedic capabilities, and utilise this integral workforce more effectively.

Summary of recommendations:

- Establish and appoint a Chief Paramedic Officer in NSW for professional representation and leadership, professional growth, workforce innovation and improved person-centered care.
- Support the broader utilisation of paramedics beyond jurisdictional ambulance services in innovative and sustainable models of care.
- NSW Health to engage the College to achieve meaningful integration of the paramedic workforce.
- There was a singular opportunity for NSW to advocate for the inclusion of paramedics within Medicare funding models. The successful incorporation of paramedicine as part of the broader health workforce would have opened avenues of Federal funding in important areas such as the aged care, disability and primary healthcare workforce.

In conclusion, the recommendations arising from the NSW Special Commission of Inquiry into Healthcare Funding support sustainable, equitable and innovative healthcare for individuals and communities across NSW. Funding plays an integral role in improving person-centered care and has the responsibility of looking beyond traditional structures to ensure the right advice and opportunities are presented for consideration and we strongly support appropriate funding to establish a Chief Paramedic Officer in NSW for professional leadership beyond NSW Ambulance, and support of services to engage paramedics in team-base care.

Thank you for your consideration of this submission, and we look forward to expanding on the points we have raised.

College contact:
Jemma Altmeier
Advocacy and Government Relations Manager
Australasian College of Paramedicine
[REDACTED]

ⁱ Australian Government; Office National Rural Health Commissioner. Ngayubah Gadan (Coming Together) Consensus Statement. June 2023.

ⁱⁱ Ahpra, Paramedicine Board of Australia. Professional capabilities for registered paramedics. June 2021. [Paramedicine Board of Australia - Professional capabilities for registered paramedics](#)

ⁱⁱⁱ Shannon B, Baldry S, O’Meara P, et al. The definition of a community paramedic: An international consensus. *Paramedicine*. 2023;20(1):4-22. doi:10.1177/27536386221148993

^{iv} Spencer-Goodsir H, Anderson J, Sutton C. The Nature of Paramedic Practice in Rural and Remote Locations: A Scoping Review. *Australasian Journal of Paramedicine*. 2022;19:1-12. doi:10.33151/ajp.19.978

^v Breadon P, Romanes D. A new Medicare: strengthening general practice. Grattan Institute Report No. 2022-14, December 2022. Available at: [A new Medicare: Strengthening general practice \(grattan.edu.au\)](#)

^{vi} NSW Ministry of Health. NSW Health Regional Strategic Plan (2023–2033). February 2023 [regional-health-strategic-plan.pdf \(nsw.gov.au\)](#)