



## Response template for providing feedback to public consultation – draft proposed accreditation standards for paramedicine

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This response template is the preferred way to provide your response to the consultation on the **Draft proposed accreditation standards for paramedicine**. Please provide your responses to all or some of the questions in the corresponding text boxes. You do not need to respond to a question if you have no comment.

### Making a submission

Please complete this response template and send to [accreditationstandards.review@ahpra.gov.au](mailto:accreditationstandards.review@ahpra.gov.au) using the subject line '*Feedback on draft proposed accreditation standards for paramedicine.*'

**Submissions are due by COB on 13 March 2020.**

### Stakeholder details

Please provide your details in the following table:

<b>Name:</b>	Dr Paul Simpson
<b>Organisation Name:</b>	Australasian Council of Paramedicine Deans

## Your responses to the public consultation questions

<b>1. Does any content need to be added?</b>
The Council is of the view that no additional content needs to be added.
<b>2. Does any content need to be amended?</b>
The Council suggests some minor amendments as outlined below in our submission.
<b>3. Are there any potential unintended consequences of the current wording?</b>
The Council notes the use of the term 'assess' or 'assessment/s' in relation to those being performed by a WIL supervisor. It is our view that preceptors/supervisors do not perform 'assessment' of a student, but rather undertake reporting of student performance to the University. It is our view that there that the University academics undertake assessment of WIL based on the information provided by the preceptor/supervisor and through pre- and post-WIL on campus assessment items.
<b>4. Do the proposed accreditation standards, associated criteria, expected information and explanatory notes indicate clearly what is required for education providers to demonstrate they are producing safe and competent graduates?</b>
The Council if of the view that standards generally indicated clearly what is required for providers to demonstrate they are producing safe and competent graduates.

**5. Do you think education providers will have difficulty in providing evidence (expected information) to meet any of the criteria?**

Standard 3.10 requires the University to provide examples of engagement between the provider and practitioners who provide instruction and supervision to students during WIL. The University does not engage directly with the practitioners, as they are in the emergency ambulance context, employees of an ambulance service or in a healthcare context, employees of a health service. The University engages with the Service via a person responsible for WIL, but cannot engage with the practitioners themselves. The Council interprets this standard as referring to engagement with the placement provider via central point in order to collaborate.

Further this standard asks for evidence of implementation of formal mechanisms used for training, and monitoring of WIL supervisors. The University does not have control over the training and monitoring of WIL supervisors as this sits with the employer of the supervisors/preceptors. Provision of this evidence most likely would not be possible.

**6. What do you think should be the Accreditation Committee's minimum expectations for education providers to demonstrate adequate quality, quantity, duration and diversity of a student's experience during paramedicine work-integrated learning? (related to standard 3.11)**

The Council supports the outcomes-based approach proposed in the standards. We believe that mandated hours are not required, and that this approach is consistent with emerging WIL pedagogy in most health disciplines.

With regard to 'quality' of WIL, Council notes that this is a shared responsibility between the University and the industry WIL partner. Aspects that contribute to 'quality, for example WIL supervision/preceptorship preparation and training, are to a large degree outside the control of the University.

International WIL is an increasingly common component of University programs. The standards are currently silent with regard to WIL conducted in an overseas location. The Council assumes that international WIL is acceptable in addition to, or in place of, domestic WIL in the Australasian space, and that such WIL is viewed no differently to domestic.

**7. Do you have any other general feedback or comments on the proposed standards?**

The Council is of the view that the proposed standards in the main appropriate to the paramedicine tertiary education sector.

We thank the Accreditation Committee for the opportunity to provide comment during the consultation period.