

Australian Health Practitioner Regulation Agency

Information guide – first appointments (inaugural Paramedicine Board)

April 2017

Information for community and practitioner member applicants

This information guide provides background to the call for expressions of interest/nominations ahead of changes being made to the *Health Practitioner Regulation National Law* as in force in each state and territory (the National Law).

Information is provided to help you to submit an application that best demonstrates your suitability, skills, experience and attributes for consideration of appointment to the inaugural Paramedicine Board:

- 1. The advertised roles and eligibility requirements
- 2. Priority work that the National Board (working with AHPRA) will undertake during the approximately 12 months preparation phase to prepare the paramedicine profession for national regulation
- 3. Factors you may wish to consider before submitting an application
- 4. How to express your interest or be nominated for consideration of appointment to the Board
- 5. The recruitment and selection process for National Board appointments
- 6. How Health Ministers decide appointments
- 7. Information if you are appointed as an inaugural National Board member/Chair (including remuneration)
- 8. The usual roles of AHPRA and National Boards under the National Registration and Accreditation Scheme.

A complete application will consist of your:

- completed application form including any letter/s of support from third parties (if relevant)
- two-page CV/resume
- completed private interests declaration form, and
- completed national criminal history check consent form (with certified identification documents).

! Important information - please read

- This call for expressions of interest and nominations is made with the agreement of the Australian Health Workforce Ministerial Council to support first appointments being made by Ministers around September 2017.
- The *Health Practitioner Regulation National Law* must be amended to enable regulation of paramedics under the National Registration and Accreditation Scheme and for Ministerial appointment of a Paramedicine Board of Australia.
- If these amendments to the National Law are not passed and enacted, the Paramedicine Board will not be established to regulate the profession, no board appointments will be made, and applications will not be progressed. This call for expressions of interest/nominations is not intended to pre-empt the outcome of debate and potential passage of the Amendment Bill.

Information for potential applicants

The National Registration and Accreditation Scheme was established in 2010 to ensure the safety of consumers of health services provided by registered health practitioners. More than 650,000 practitioners from 14 registered health professions are currently regulated nationally. Under the national scheme, National Boards and AHPRA work together to ensure that practitioners are appropriately qualified and competent to practise a registered health profession. National Boards exercise functions in accordance with the *Health Practitioner Regulation National Law*, as in force in each state and territory (the National Law).

Paramedics are not currently required to be registered in any state or territory. However, the title 'paramedic' is protected under legislation in New South Wales, South Australia and Tasmania and may only be used by paramedics holding qualifications set out in the relevant state legislation.

On 6 November 2015, the Australian Health Workforce Ministerial Council (the Ministerial Council) announced its intention for paramedics to be regulated as part of the National Scheme. On 7 October 2016, the Ministerial Council agreed to proceed with inclusion of paramedics in the scheme and noted that paramedics would be registered in all jurisdictions.

Most recently, on 24 March 2017 the Ministerial Council considered a draft of the *Health Practitioner Regulation National Law Amendment Bill 2017* that if passed, will amend the National Law to regulate the paramedicine profession, including establishing a Paramedicine Board of Australia. Once the Bill is finalised, it will be passed to Queensland and Western Australia for enactment by their respective Parliaments. If the Amendment Bill is passed in Queensland, the changes will apply automatically in all other states and territories, except for Western Australia, which must pass its own legislation, and South Australia where regulations must be made to adopt the changes.

Subject to the *Health Practitioner Regulation National Law* being amended, this will mean that paramedics will be able to be registered nationally for the first time in Australia. At this stage, registration of paramedics is expected to commence in the second half of 2018 (around September 2018). The date on which registration of paramedics commences is referred to as the "**participation day**" and is to be prescribed in a regulation.

However, Ministers may appoint the National Board in the coming months (around September 2017) subject to the National Law being amended. During the 12 months preparation phase, the new Board will work with AHPRA to prepare the profession for national regulation so that people who are currently working or are qualified as paramedics understand what national regulation means for this profession, and what they will need to do to seek registration before the participation day.

1. What roles are being advertised and how do I know if I am eligible?

Board members

The Australian Health Workforce Ministerial Council (the Ministerial Council) has asked that AHPRA issue a call for expressions of interest/nominations for appointment to a 9 person national Paramedicine Board of Australia (to be established). This means recruitment of **6 practitioner members and 3 community members** per below:

Member	Eligibility requirement
Practitioner member from New South Wales	You must be qualified as a paramedic and be practising in NSW
Practitioner member from Queensland	You must be qualified as a paramedic and be practising in QLD
Practitioner member from South Australia	You must be qualified as a paramedic and be practising in SA
Practitioner member from Victoria	You must be qualified as a paramedic and be practising in VIC
Practitioner member from Western Australia	You must be qualified as a paramedic and be practising in WA
Practitioner member from a small jurisdiction	You must be from the Australian Capital Territory, or the Northern Territory, or Tasmania
Community member	Community member applicants may be from any state or
Community member	territory in Australia. However you cannot be a current or former
Community member	paramedic.

Practitioner (paramedic) member applicants

It is usually a requirement for practitioner members to be registered in order to be eligible for appointment to a National Board.

However – subject to the National Law being amended to regulate the paramedicine profession – **special arrangements will apply** for first-time practitioner member appointments to the Paramedicine Board. The Ministerial Council will be given the authority to appoint practitioner members to the Board who the Council *is satisfied have the skills and experience in paramedicine that are relevant to the Board's functions.* These special arrangements will enable qualified paramedics to be appointed to the inaugural Paramedicine Board and work with AHPRA during the preparation phase to prepare the paramedic profession for regulation under the National Scheme.

After the participation day, <u>practitioner members will need to hold registration as a paramedic</u> to continue with their appointment on the Board. There will be more than one way to seek registration – including time-limited additional pathways (called 'grandparenting') where you can seek registration on the basis of your qualifications, training and/or experience.

Inaugural national board chair

The Ministerial Council decides who will be appointed as Board Chair, when all member appointments are made.

Under the National Law, only appointed practitioner members are eligible to also be appointed Board Chair. However in August 2015, Australian Health Ministers announced acceptance of recommendation 26 of the *Report on the independent review of the National Registration and Accreditation Scheme*, that the National Law be amended to enable Ministers to appoint either a practitioner member or a community member of a National Board as Chair.

While this change to the National Law has not yet been made, it is possible that the law will have been amended when Ministers consider first appointments to the inaugurual Paramedicine Board. Therefore all applicants are asked whether they are also interested in being considered for appointment as the inaugural national board chair.

Other eligibility requirements

All applicants are asked to complete a **criminal history consent form** to enable AHPRA to conduct a criminal history check. A person (practitioner or community member applicant) is **not eligible** to be appointed as a member of a National Board if the person has **at any time**, been **found guilty of an offence** (whether in a state or territory or elsewhere) that in the opinion of the Ministerial Council, renders the person unfit to hold the office of member. AHPRA will conduct a criminal history check on all shortlisted candidates.

All applicants are asked to complete a **private interests' declaration form**. Please answer all questions and provide supporting information as needed.

Would you like to know what it is like to be a National Board member?

A National Board Chair, a National Board practitioner member, and a National Board community member appointed by the Australian Health Workforce Ministerial Council share their experiences. Please go to: <u>http://www.ahpra.gov.au/National-Boards/National-Boards-recruitment/Our-board-members.aspx</u>

2. What will the National Board do during the 'preparation phase' before paramedics are registered under the National Scheme?

Subject to the National Law being amended, the Paramedicine Board is expected to have approximately 12 months after it is established (appointed by Health Ministers prior to the participation day) to work with AHPRA to prepare the profession for national regulation.

The Board will be able to exercise some but not all of its regulatory functions during this period. For example, AHPRA and the Board <u>will not</u> be able to receive and manage complaints about paramedics as the profession will not yet be registered under the National Scheme.

The preparation phase is a critical time for us working together as regulatory partners, and also for the profession who will want to know as soon as possible what the registration requirements will be and what they need to do to seek registration. For information on implementation steps and duration, visit AHPRA's Regulation of paramedics webpage: http://www.ahpra.gov.au/Registration/Regulation-of-paramedics.aspx

The **priority work** during this period is expected to include (but may not be limited to):

- developing and consulting publicly on five mandated registration standards (continuing professional development, criminal history, English language skills, professional indemnity insurance arrangements, and recency of practice) in accordance with the National Law and AHPRA policies and procedures
- considering the development and public consultation on a grandparenting registration standard that
 provides more information on what paramedics will need to do to seek general registration under this
 time-limited, alternative pathway
- developing, publicly consulting on, and approving codes or guidelines needed for the start of regulation of the profession
- recommending registration standards for consideration of approval of the Ministerial Council
- deciding the accreditation authority to exercise the accreditation functions for the profession under the national scheme
- approving (paramedicine) programs of study for registration purposes
- deciding student registration arrangements (a free, non-public register based on a list of enrolled students provided by the education provider)
- with AHPRA, agreeing a health professions agreement that will include fees to be paid by the profession (eg the application fee and the annual registration fee)
- registering suitably qualified and competent persons as paramedics (including via the grandparenting pathway) for the participation day.

On the participation day, national regulation of paramedics will start, and the Board will be able to exercise its full functions under the National Law.

3. What do I need to consider before I express interest and/or am nominated for consideration of appointment to the Board?

Commitment of board members and Chair

Board members should be able to give an active commitment to the regulatory work of the board. Commitment as a National Board member will often take around **two or three full days per month**, and may be more, **in addition** to travel time to and from the meetings – this can include interstate travel.

Board members are expected, as far as practical, to attend all meetings, including teleconferences and video conferences. Scheduled meetings are typically during business hours and some members may need the support of their employer to serve on the board.

Board members may be required to attend different types of meetings, including:

- scheduled board meetings, usually held monthly at AHPRA's National Office in Melbourne
- ad hoc meetings (either face to face or via teleconference) when additional matters need to be considered or urgent decisions need to be made
- committee meetings for board members who are also a member of one or more committees, and
- occasional conferences, weekend retreats or planning days.

All National Board Chairs have additional responsibilities in this leadership role – including participating in scheme-wide meetings such as the Forum of NRAS Chairs, which meets quarterly.

Once a National Board is fully operational, members may be elected to a registration and notifications committee to consider complaints about registrants. Typically, members meet approximately **1-2 times per month** by teleconference for a few hours in addition to scheduled board meetings. An agenda and board papers are provided prior to each meeting. Board members receive an iPad and access AHPRA's secure information sharing platform to manage meetings, access board papers and view board member resources and policies.

In the event that a board member cannot attend a meeting, they are required to request leave of absence from the Board Chair prior to the meeting. In the unlikely event that a board member is absent without being granted leave by the board for three or more consecutive meetings, the office of the board member may be declared vacant, in accordance with schedule 4, clause 4(1)(d) of the National Law.

Government or statutory employees

AHPRA recognises that government and statutory employees may be bound by their employer policy regarding payment for employment undertaken outside of the employer, which may alter the way board members are remunerated. AHPRA asks that government or statutory employees advise AHPRA accordingly on application. Information regarding the administration of payment is available on request.

AHPRA recommends potential applicants consult with their employer prior to applying to ensure an acknowledgement of permission from your employer can be arranged, should you be successful.

Membership and appointments to boards of other organisations or professional bodies

Many National Board applicants are members of professional organisations, which are relevant to their practice, and/or their employment and professional interests.

Some applicants may be appointed to the executive, a committee, or a board of a professional organisation or decision-making body that represents the interests of a profession or a consumer group, and may, from time-to-time, express a view on the work of the board or the National Scheme.

Although the National Law does not preclude a person being simultaneously appointed to both a national board and the executive, committee or board of a professional or consumer organisation, this type of dual appointment can often give rise to real or potential conflicts of interest. For example, between meeting your responsibilities to the organisation (eg to advocate in the interests of the profession) and ensuring you administer your regulatory obligations as a national board member to act impartially and to place the public interest ahead of professional interests.

Before you apply, you may wish to consider whether this type of conflict of interest is manageable over a term of appointment that can be for up to three years on a National Board and whether you will resign your office to accept a national board appointment. You will be asked to identify these types of appointment in your application.

4. How do I express my interest or be nominated by a third-party?

The **application form** has been designed specifically for this 'first appointments' round and includes detailed instructions to help you submit an application that best demonstrates your suitability, experience, skills and experience relevant for appointment to the National Board.

If you are being **nominated** by a third party, the third party must confirm the nomination and explain why they are nominating you. This can be done by completing **section 3** of the application form **or** by providing a letter of support.

Letter/s of support by a third party (which can include the nominating third party per above) may also be provided to further support your application. We anticipate that letters of support will be mostly relevant to practitioner (paramedic) applicants who are being nominated by a third party. However, people who are expressing interest in being appointed as a community member may also provide a letter of support if you wish. You may provide one letter of support, up to a <u>maximum</u> of three only.

Please complete the application form and provide all requested documents, including the private interests' declaration form and the completed criminal history check form. Please also provide an **up-to-date two-page CV/resume.**

Incomplete applications will not be considered.

5. What is the process for appointment to the Board?

Appointments

All National Board appointments are made by consensus by the Ministerial Council which comprises Health Ministers from each state and territory and the Commonwealth. Appointments are made in accordance with the National Law.

Recruitment and selection process

All vacancies are publicly advertised, and applications are invited from interested practitioners and members of the public. Vacancies are also advertised on the AHPRA and National Boards recruitment website.

AHPRA facilitates the selection process which includes advertising the vacancies, receiving and verifying all applications and expressions of interest, answering queries about the process, and conducting all required probity checks.

AHPRA will keep applicants informed of the progress of this round as best we can, via email. This process may take *approximately six months* from when vacancies are advertised to when appointments are made and announced by Ministers. Our aim is for Ministers to be able to make the appointments in **September 2017**, subject to the National Law being amended to support this.

A **selection advisory panel** comprising health department officials may be convened as part of this process to provide advice to governments on proposed candidates for appointment.

Shortlisted candidates may be **interviewed** or otherwise assessed to ensure that they have the necessary qualifications, skills and experience for the position.

Reference checks for shortlisted candidates may be conducted and information obtained. Applicants are asked to nominate three referees who can support the application relevant to the board member attributes and duties of the position. Applicants are advised to consider selecting referees who can provide a balanced reflection of the applicants' professional attributes. Referees must be advised in advance that they may be contacted by AHPRA staff. In most instances only two referees will be contacted, however there may be occasion where additional references are required.

All shortlisted candidates will undergo probity checks, which include:

- a national criminal history check, processed by a suitably trained AHPRA officer
- an Australian Securities and Investments Commission (ASIC) disqualification register check
- a National Personal Insolvency Index check conducted through the Australian Financial Security Authority (AFSA).

AHPRA is not part of the selection advisory panel and does not decide who is selected or appointed.

6. How do Health Ministers decide who to appoint?

In accordance with the National Law, in deciding whether to appoint an eligible and suitable person as a member or Chair of a board, the Ministerial Council must have regard to the skills and experience of the person that are relevant to the board's functions.

Applications and expressions of interest, nominations, and supporting information such as CVs will form the basis of advice provided by governments to the Ministerial Council for consideration of appointments.

It is considered that a **practitioner member** will bring to the board sound experience in the health profession for which the board is established and will have an appreciation and understanding of the regulatory role of the board.

With a sound understanding of health issues and services, a **community member** will represent the views and opinions of members of the community.

All board members are expected to demonstrate the following National Board member attributes:

- 1. **Displays integrity**: is ethical, committed, diligent, prepared, organised, professional, principles-based and respectful; values diversity; and shows courage and independence.
- 2. **Thinks critically**: is objective and impartial; uses logical and analytical processes; distils the core of complex issues and weighs up options.
- 3. **Applies expertise**: actively applies relevant knowledge; skills and experience to contribute to decision-making.
- 4. **Communicates constructively**: is articulate, persuasive and diplomatic; is self-aware and reflects on personal impact and effectiveness; listens and responds constructively to contributions from others.
- 5. **Focuses strategically**: takes a broad perspective; can see the big picture; and considers long term impacts.
- 6. **Collaborates in the interests of the scheme**: is a team player; flexible and cooperative; and creates partnerships within and between boards and AHPRA.

Community member applicants are asked to address this additional attribute:

7. **Strong community connection**: can demonstrate a strong community connection/s and an ability to bring a public/lay perspective and voice to the regulatory work of National Boards.

National Board Chairs are expected to demonstrate the following in addition to 1 to 6 above:

- 8. **Demonstrates leadership**: is confident, decisive and acts without fear or favour, is at the forefront of professional regulation, drives reform and facilitates change.
- 9. **Engages externally**: is the spokesperson for the Board and advocate for the Scheme, defines the nature and tone of engagement, builds and sustains stakeholder relationships.
- 10. **Chairs effectively**: establishes and follows well organised agendas, facilitates input from all members, builds consensus, distils core issues, summarises discussion and confirms decisions ensuring they are accurately recorded.

7. If I am appointed as an inaugural member of the National Board, is there anything else I need to know?

Term of appointment

The term of appointment to the National Board may be for a period of up to three years as decided by the Ministerial Council. Appointed members may be eligible for reappointment for a further term/s on the Board. The terms and conditions of appointment are set out in the instrument of appointment issued by the Ministerial Council. For first appointments to this National Board, practitioner members will need to hold registration as a paramedic from the participation day to continue to be eligible to hold the office of board member/Chair.

Governance training and orientation to national scheme

To assist National Board members/Chairs understand the governance framework for the National Scheme and perform the roles and responsibilities required under the National Law, members will complete the 'Governance and decision-making in the NRAS' program, during their first term of appointment. AHPRA will schedule the training and provides more information on the 'Governance and decision-making in the NRAS' professional development program to appointed members. All appointed Board members also receive an orientation to the national scheme and a board-specific induction at the start of their term.

Role and responsibilities of board members

Board members are required to act within the powers and functions set out in the National Law. Under the National Law, members are required to act impartially and in the public interest in the exercise of their functions and put the public interest before the interests of particular health practitioners or any entity that represents health practitioners.

Managing conflict of interest and bias

The National Law includes extensive provisions in relation to conflicts of interest. Members are to comply with the conflict of interest requirements set out in Clause 8 of Schedule 4 of the National Law.

The National Boards have business rules and processes in place to record and manage real and/or perceived conflicts of interest. As a general rule, board members must declare any actual and perceived conflict of interest in relation to matters to be considered at a meeting. Board members must also exclude themselves from decision-making in relation to a matter in which they are biased, or may be perceived to be biased. Penalties apply to unlawful disclosure of protected information.

Statutory protections

Under section 236 of the National Law, members of National Boards and state, territory and regional boards are provided with appropriate statutory immunities for exercising their functions in good faith.

Confidentiality

Members are required to comply with the confidentiality requirements of s.216 of the National Law. Any information that comes to a member's knowledge, in the course of, or because of the member's role is protected information and must not be disclosed or made allowed to be disclosed to another person, organisation or entity.

Remuneration

The remuneration for members of a national or state, territory or regional board is determined by the Ministerial Council in accordance with the National Law. Remuneration is usually adjusted on an annual basis according to the consumer price index. The current remuneration (daily sitting fee) is as follows:

Role	Attendance (Fee includes preparation and up to 4 hours travel time)	Extra travel time	
	Daily sitting fee (more than 4 hours in a day)	Between 4 – 8 hours	Over 8 hours
Board Chair	\$765	\$383	\$765
Board member	\$627	\$314	\$627

Business rules for the payment of sitting fees and expenses are set by AHPRA.

As a general guide, the daily fee applies for board member attendance in person or by telephone at a scheduled board meeting. The daily fee includes meeting preparation time for the scheduled board meeting and up to four hours of travel time. For meetings of a shorter duration (less than four hours), half the daily fee is payable.

Under the *Superannuation Guarantee (Administration) Act 1992* board members are eligible to receive contributions at 9.5% of total annual remuneration to a chosen superannuation fund, payable when more than \$450 in fees are paid in a calendar month.

Expenses

Board members are entitled to reimbursement of any reasonable out-of-pocket expenses incurred during the course of undertaking board business. More information on allowances and the process of payments and claims will be provided if you are appointed.

8. What are the roles of AHPRA and National Boards (standard functions once professions are able to be registered)

Australian Health Practitioner Regulation Agency

National Boards are supported by the Australian Health Practitioner Regulation Agency (AHPRA). AHPRA has a national office based in Melbourne and offices in each state and territory. AHPRA provides the administrative and policy support to the national, state and territory boards and committees. Further information is available on the <u>AHPRA website</u>.

Potential applicants may be interested in accessing the AHPRA and National Board Annual Reports from AHPRA's <u>publications page</u>.

National Boards

There are currently 14 National Boards established under the National Law to regulate the corresponding health professions:

Aboriginal and Torres Strait Islander Health Practice Board of Australia	Occupational Therapy Board of Australia
Chinese Medicine Board of Australia	Optometry Board of Australia
Chiropractic Board of Australia	Osteopathy Board of Australia
Dental Board of Australia	Pharmacy Board of Australia
Medical Board of Australia	Physiotherapy Board of Australia
Medical Radiation Practice Board of Australia	Podiatry Board of Australia
Nursing and Midwifery Board of Australia	Psychology Board of Australia.

If the National Law is amended to regulate the profession of paramedicine, then there will be a 15th National Board - the Paramedicine Board of Australia (to be established potentially in late 2017).

Part 5 and Schedule 4 of the National Law set out the provisions relating to National Boards - accessible from the AHPRA website: https://www.ahpra.gov.au/About-AHPRA/What-We-Do/Legislation.aspx

The key functions of a National Board include:

- registering practitioners and students in the relevant health profession
- developing standards, codes and guidelines for the relevant health profession •
- overseeing receipt, assessment and investigation of notifications and complaints
- where necessary, conducting panel hearings and referring serious matters to tribunal hearings
- overseeing assessment of overseas trained practitioners who wish to practise in Australia, and
- approving accreditation standards submitted by an accreditation authority and approving accredited programs of study as providing qualifications for registration.

National Boards publish communiqués on National Board websites which provide an overview of the work of the board and current issues under consideration.

Who does what? Working together

National **Boards** · Primary role is regulatory decision-making in the public interest

- · Set national registration requirements and standards
- Oversee various regulatory processes including registration, and the receipt, assessment and investigation of notifications (complaints)*
- Approve accreditation standards for the professions
- Approve qualifications for entry into the profession

AHPRA

- · Administers the scheme
- Supports National Board decision-making
- Establishes and administers procedures for managing registration and notification matters*
- Provides legal interpretation
- Makes recommendations to the Boards and Committees
- Is the first contact point for all enquiries about registration, notifications from practitioners, employers, governments and stakeholders

Accreditation agencies

- Assigned accreditation functions by the National Board
- Develop accreditation standards for board approval
- Accredit programs of study
- · Submit accredited programs of study to Board for approval
- Monitor approved programs of study
- Assess overseas trained practitioners applying for registration in Australia
- *except in NSW which has a co-regulatory arrangement in relation to management of notifications and in Queensland where AHPRA manages less-serious matters
- AHPRA and National Boards Health Professions Agreement, AHPRA contract with accreditation agencies