

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

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 <u>accreditationstandards.review@ahpra.gov.au</u> 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:

Name:	Dr Scott Devenish, Ms Kerri-Ann Woodbury and Mr Adam Rolley
Organisation Name:	Queensland University of Technology

Your responses to the public consultation questions

1. Does any content need to be added?	
No, we believe the draft standards and associated criteria/information requirements address all critical areas. In particular, we are very supportive of focusing beyond jurisdictional ambulance services.	
2. Does any content need to be amended?	
Potentially, please see sections four and five.	
3. Are there any potential unintended consequences of the current wording?	
We have not identified any potential unintended consequences, however, would support a revithe standards and their implementation within 1-2 years.	ew of
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?	
Standard one: Relevant accreditation and licensing	
Fundamentally we support the inclusion of the criteria. While we recognise the word "relevant" included, we are unsure as to the standard at which we will be assessed. In particular, the use the National Safety and Quality Health Service Standards as a benchmark causes some conce it is our understanding that the primary clinical placement provider we use does not meet these standards, and we have no ability to require them to meet these standards. Further explanation and/or information would assist us in demonstrating compliance.	of ern as

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

Criteria 1.4

Work-integrated learning is a critical component within an undergraduate paramedic program, and we are fully supportive of this criteria. Notwithstanding this, we are unclear as to the expected level of evidence; as defined by "an agreement". For example, would the exchange of letters between the education provider and clinical placement agency suffice? If not, should a clinical placement provider not agree to sign a clinical placement deed (or another appropriate instrument), how might a program demonstrate the requisite evidence to meet this criteria?

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)

While recognising its appeal, we are not supportive of prescribing required work-integrated hours for undergraduate paramedic programs. We believe this is a reductionist approach and would prefer the committee to continue its outcomes orientated focus.

We believe the education provider should be able to provide evidence of:

- A work-integrated learning curriculum that demonstrates assists in attaining the professional capabilities for registered paramedics.
- Work-integrated learning opportunities within different communities (ie. rural/remote/urban), settings (ie. jurisdictional ambulance, private medical, international,
- Implementation of a validated clinical assessment instrument.
- Opportunities to develop work-integrated learning supervisors.
- Robust support of students undertaking work-integrated learning opportunities.
- Students developing the required capabilities of a reflective practitioner.
- Appropriate educational provider oversight of work-integrated learning environment.
- Appropriate policies and procedures to manage work-integrated learning opportunities.

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

Thank you for the opportunity to provide feedback on the proposed standards. Fundamentally, we are very supportive of the standards, and the process used to develop them. Moreover, we believe the proposed standards, criteria and expected information would allow for a comprehensive and robust review of undergraduate paramedic education in Australia.

Should you require any further information, clarification or feedback, please do not hesitate to contact us. We look forward to continuing to work with AHPRA and the accreditation committee during their implementation.