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**Kaunihera  
Manapou**  
Paramedic Council

**Consultation on  
proposed scopes of practice and prescribed qualifications  
for registration as a paramedic**

**Opening date:** 12 August 2019

**Closing date:** 21 September 2020

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## Introduction – the legal context

1. Te Kaunihera Manapou Paramedic Council (the Council) was established as a Responsible Authority (RA) under the Health Practitioners Competence Assurance Act (2003) (the Act) on 1 January 2020. The primary purpose of the Act is set out in section 3 of the Act: “*to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise their professions.*”
2. Council’s responsibilities are set out under section 118 of the Act and include (among other things) “*prescribing qualifications required for scopes of practice within the profession...*”
3. In order to achieve this, Council must both:
  - a) Specify a scope or scopes of practice to describe the contents of the profession of paramedicine (section 11 of the Act); and
  - b) Prescribe (i.e., recognise) qualifications for registration in each scope of practice that it specifies (section 12 of the Act).
4. Scopes of practice and prescribed qualifications form the backbone of any RA’s registration process. The scope of practice defines the profession, while prescribing a qualification recognises that qualification as delivering training and education sufficient for the holder of the qualification to meet the standards required for registration.
5. It is important to recognise that a scope of practice needs to be permissive, while providing clarity for the profession about what is – and what is not – “in scope.” The scope of practice is supported by more detailed documents that define expectations of paramedics, including Standards of Competence (including standards of clinical competence, and standards of cultural competencies that include competencies that will enable effective and respectful interaction with Māori), and a Code of Conduct.
6. When prescribing qualifications, Council must be guided by the principles set out in section 13 of the Act, as follows:
  - a) the qualifications must be necessary to protect members of the public; and
  - b) the qualifications may not unnecessarily restrict the registration of persons as health practitioners; and
  - c) the qualifications may not impose undue costs on health practitioners or on the public.
7. Applicants for registration in a scope of practice must have a prescribed qualification for registration in that scope of practice. Qualifications can be made up of any one or more of the following:
  - a) a degree or diploma of a stated kind from an educational institution accredited by the authority, whether in New Zealand or abroad, or an educational institution of a stated class, whether in New Zealand or abroad:
  - b) the successful completion of a degree, course of studies, or programme accredited by the authority:
  - c) a pass in a specified examination or any other assessment set by the authority or by another organisation approved by the authority:

- d) registration with an overseas organisation that performs functions that correspond wholly or partly to those performed by the authority:
  - e) experience in the provision of health services of a particular kind, including, without limitation, the provision of such services at a nominated institution or class of institution, or under the supervision or oversight of a nominated health practitioner or class of health practitioner.
8. Council is required under section 14 of the Act to consult on its proposed scope(s) of practice and prescribed qualifications before setting them. Once consultation has been completed and any amendments made as necessary, the scopes of practice and prescribed qualifications will be finalised by Council and published in the *Gazette*. Once that has been achieved, Council will be able to open applications for registration.
9. Once registered within a scope of practice, and having obtained a practising certificate, paramedics are legally required to practise within the scope(s) of practice in which they are registered. Practising outside scope of practice may be grounds for professional discipline (section 100(1)(e) of the Act).

#### **Proposed scopes of practice**

10. Council proposes to specify two scopes of practice at this time. Those scopes of practice are:
- a) Paramedic; and
  - b) Paramedic Specialist with authorisation in Critical Care Paramedicine and/or Extended Care Paramedicine.
11. Council recognises that there may have been an expectation in the profession that a wider range of scopes of practice would be recognised (for example, flight paramedic). Council is mindful that its role as a regulator is not to set scopes that reflect commonly understood job titles, but to set the standards that all paramedics, regardless of their employment situation, are expected to meet. Council is satisfied that it is not appropriate in these early stages of regulation to set a framework that countenances multiple scopes of practice.
12. The wording of the draft scopes of practice is set out later in this document.

#### **Proposed prescribed qualifications**

13. Council proposes that all people who wish to be registered as paramedic specialists will first need to hold registration as paramedics. In practice however, applicants for the paramedic specialist scope of practice will be able to apply for that scope of practice at the same time as they apply for registration as a paramedic, and their applications will be assessed together.
14. Council recognises that there are many people working as paramedics who do not have formal tertiary qualifications but have extensive skills and experience in paramedic practice and are working within an employment framework that includes robust ongoing competence assurance procedures. For the purpose of grandparenting these people onto the register, Council has

developed two prescribed qualifications to recognise appropriate experience (see paragraph B and C below).

15. Council proposes that, for at least the first year, there will be three pathways to registration (as set out in the flowchart later in this document). Those pathways (prescribed qualifications) will be:
  - A. Completion of a tertiary qualification in paramedicine from an educational institution accredited by the Council (Pathway A);
  - B. A pass within the last two years of a Council-approved registration assessment programme (RAP). Council is consulting on its policy for approving RAPs. The intent is to recognise existing procedures that are used to issue or re-issue Authorities to Practise (ATPs) for paramedics - where those procedures are sufficiently robust for Council's purposes (Pathway B); and
  - C. Submission of a portfolio of evidence of paramedic experience and, at the direction of Council, successful completion of an examination or assessment set by Council or by an organisation approved by Council (Pathway C).
16. In order to ensure that all registrants can meet competencies that can enable effective and respectful interaction with Māori, Council is proposing that an online education programme be completed prior to registration (this is for all pathways).
17. Council anticipates that the vast majority of people currently working as paramedics will be able to register under pathway A or B above.
18. After one year, it is likely that Council will remove pathways B and C as prescribed qualifications. From that point, it is likely that the only pathway to registration as a paramedic will be through completion of a tertiary qualification in paramedicine from an educational institution accredited by Council.

#### Pathway A

19. Applicants who have an approved tertiary qualification in paramedicine will be able to apply for registration as a paramedic (or paramedic specialist) on the basis of that qualification.

#### Pathway B

20. To support the registration of paramedics and paramedic specialists, Council has established a Policy on Registration Assessment Programmes (RAPs). This allows Council to recognise providers of robust competence assurance systems for the purposes of issuing and renewing Authorities to Practise (ATPs) for paramedics.
21. Providers who believe they will be able to demonstrate that they meet the requirements for recognition set out in the Policy on Registration Assessment Programmes are encouraged to apply for approval of their RAP without delay; being a provider of an approved RAP will ensure that the provider's employees and other participants in the provider's RAP will be able to apply

for registration through a straightforward registration pathway. RAP providers will also need to be able to verify the date or dates that an individual paramedic's ATP was approved and/or reviewed, for registration purposes.

### Pathway C

22. People working as paramedics who do not have a formal tertiary qualification and have not passed a Council-approved RAP in the two years prior to application will need to:
  - a) Provide Council with satisfactory evidence of their experience as a paramedic; and
  - b) At the direction of the Council pass an assessment set by Council or by an organisation approved by Council to assure it that the person is competent to be registered as a paramedic.
23. Council has agreed that it is likely to approve AUT and/or Whitireia to set an assessment for this purpose, and that the assessment is likely to be the final clinical examination that final year paramedic students are required to pass in order to obtain their paramedic qualification. This is consistent with Council's expectation that the minimum standard of competence that is expected of paramedics is that of a new graduate.

### Paramedic specialists

24. Once Council has approved an application for registration in the paramedic scope of practice, it will consider any additional documentation provided by the applicant to determine whether the applicant holds a prescribed qualification for registration in the paramedic specialist scope of practice with an authorisation in Critical Care Paramedicine and/or Extended Care Paramedicine. The two pathways for New Zealand trained applicants are:
  - a) A relevant post-graduate qualification from an educational institution accredited by Council; or
  - b) A pass in a Council-approved RAP at the relevant level (i.e., CCP or ECP) in the previous two years.
25. Further detail is provided in the flowcharts below, and the proposed Gazette notice for scopes of practice and prescribed qualifications below.

### Other applicants

26. Applicants who are currently registered with the Paramedicine Board of Australia (PBA) are entitled to be registered in the equivalent scope of practice in New Zealand under the Trans-Tasman Mutual Recognition Act (TTMRA) 1997 (and vice versa). An application pathway will be available for those applicants.
27. As the PBA only has one registration category – paramedic – any Australian-registered paramedic may only register in the paramedic scope of practice. Council has set a registration

pathway process for Australian-registered paramedics who register through TTMRA, hold additional qualifications, and wish to apply for registration in the paramedic specialist scope of practice. Those applicants will be required to pass an assessment or examination set by Council or by an organisation approved by Council. A successful completion of a cultural education programme approved by the Council will also be required.

28. All other overseas trained applicants wishing to register in New Zealand will need to apply for an assessment of their qualification under section 15(2) of the Act. Section 15(2) requires Council to determine whether the applicant's qualification is "*equivalent to, or as satisfactory as, a prescribed qualification.*" Council will be developing qualification assessment processes for such applications, and is also likely to require the applicant to demonstrate that they are competent for registration by passing an assessment or examination set by Council under section 19(5) of the Act. A successful completion of a cultural safety education course approved by the Council will also be required.

### **Fitness for registration**

29. All people intending to apply for registration as a paramedic need to be aware that having a prescribed qualification does not guarantee that a person will be registered as a paramedic. At the time of application, each applicant will also need to meet the requirements of section 16 of the Act.
30. Under section 16 of the Act, Council may not register an applicant as a paramedic if -:
- a) they do not satisfy Council that they are able to communicate effectively for the purposes of practising within the scope of practice in respect of which the applicant seeks to be, or agrees to be, registered; or
  - b) they do not satisfy Council that their ability to communicate in and comprehend English is sufficient to protect the health and safety of the public; or
  - c) they have been convicted by any court in New Zealand or elsewhere of any offence punishable by imprisonment for a term of 3 months or longer, and they do not satisfy Council that, having regard to all the circumstances, including the time that has elapsed since the conviction, the offence does not reflect adversely on their fitness to practise as a paramedic; or
  - d) Council is satisfied that the applicant is unable to perform the functions required for the practice of paramedicine because of some mental or physical condition; or
  - e) they are the subject of professional disciplinary proceedings in New Zealand or in another country, and Council believes on reasonable grounds that those proceedings reflect adversely on the applicant's fitness to practise as a paramedic; or
  - f) they are under investigation, in New Zealand or in another country, in respect of any matter that may be the subject of professional disciplinary proceedings, and Council believes on reasonable grounds that that investigation reflects adversely on the applicant's fitness to practise as a paramedic; or
  - g) the applicant:
    - i. is subject to an order of a professional disciplinary tribunal (whether in New Zealand or in another country) or to an order of an educational institution accredited under section 12(2)(a) or to an order of an authority or of a similar body in another country; and

- ii. does not satisfy Council that that order does not reflect adversely on their fitness to practise as a paramedic; or
  - (h) Council has reason to believe that the applicant may endanger the health or safety of members of the public.
31. The requirements of section 16 of the Act are noted for completeness at this time. Applicants will be required to demonstrate that they meet the requirements of section 16 when they apply for registration. Council is in the process of preparing an Evidence Guide to assist applicants in preparing their applications for registration.

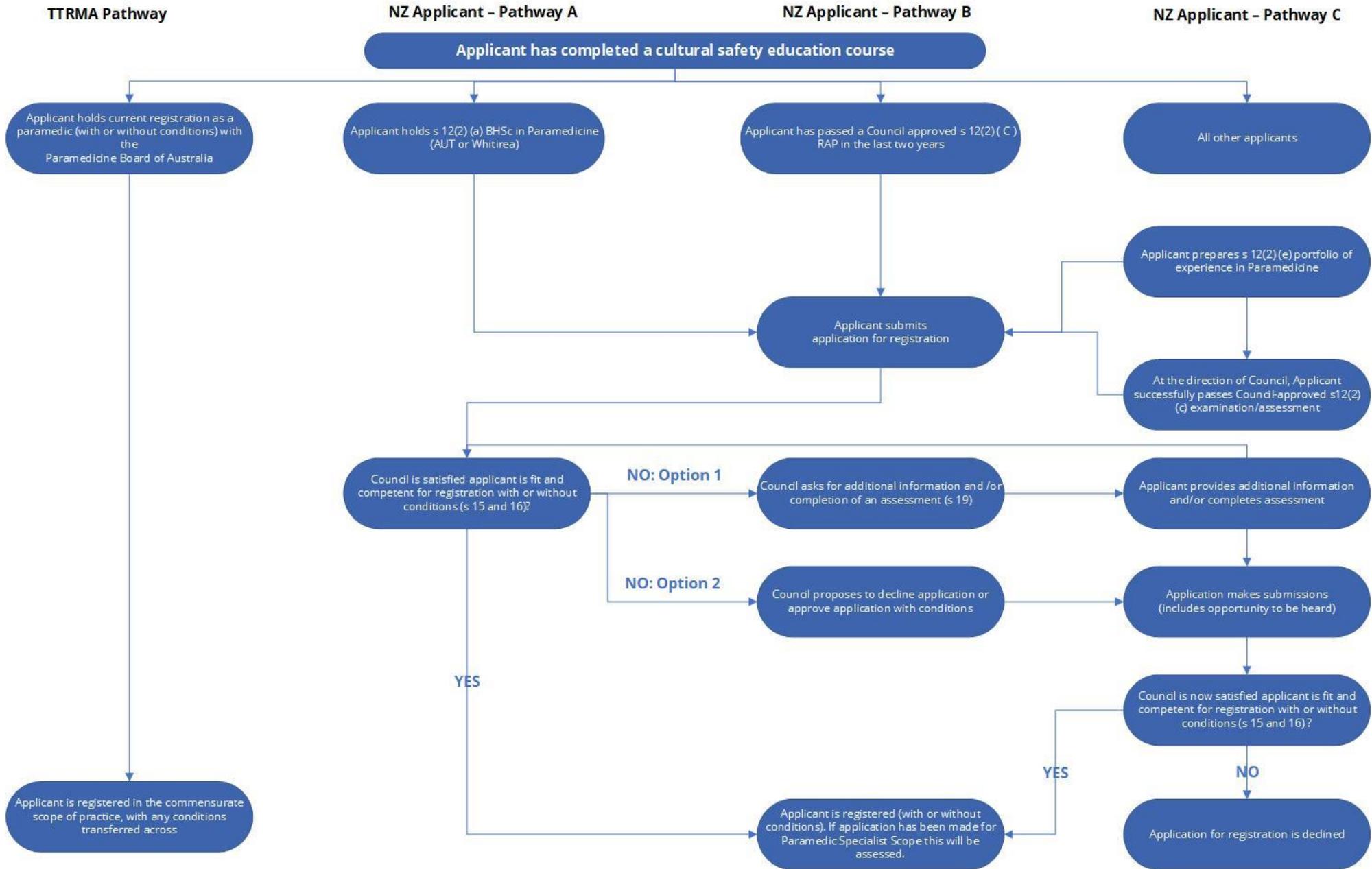
### **Documents to consider**

32. Set out on the following pages are:
- flowcharts setting out the pathways to registration in both the Paramedic and Paramedic Specialist scopes of practice;
  - Draft scopes of practice and prescribed qualification; and
  - Policy on Registration Assessment Programmes (RAPs)

### **How to have your say on this consultation**

33. Council seeks submissions on the proposed scopes of practice and prescribed qualifications. To have your say click <https://www.surveymonkey.com/r/C86QZGD>.

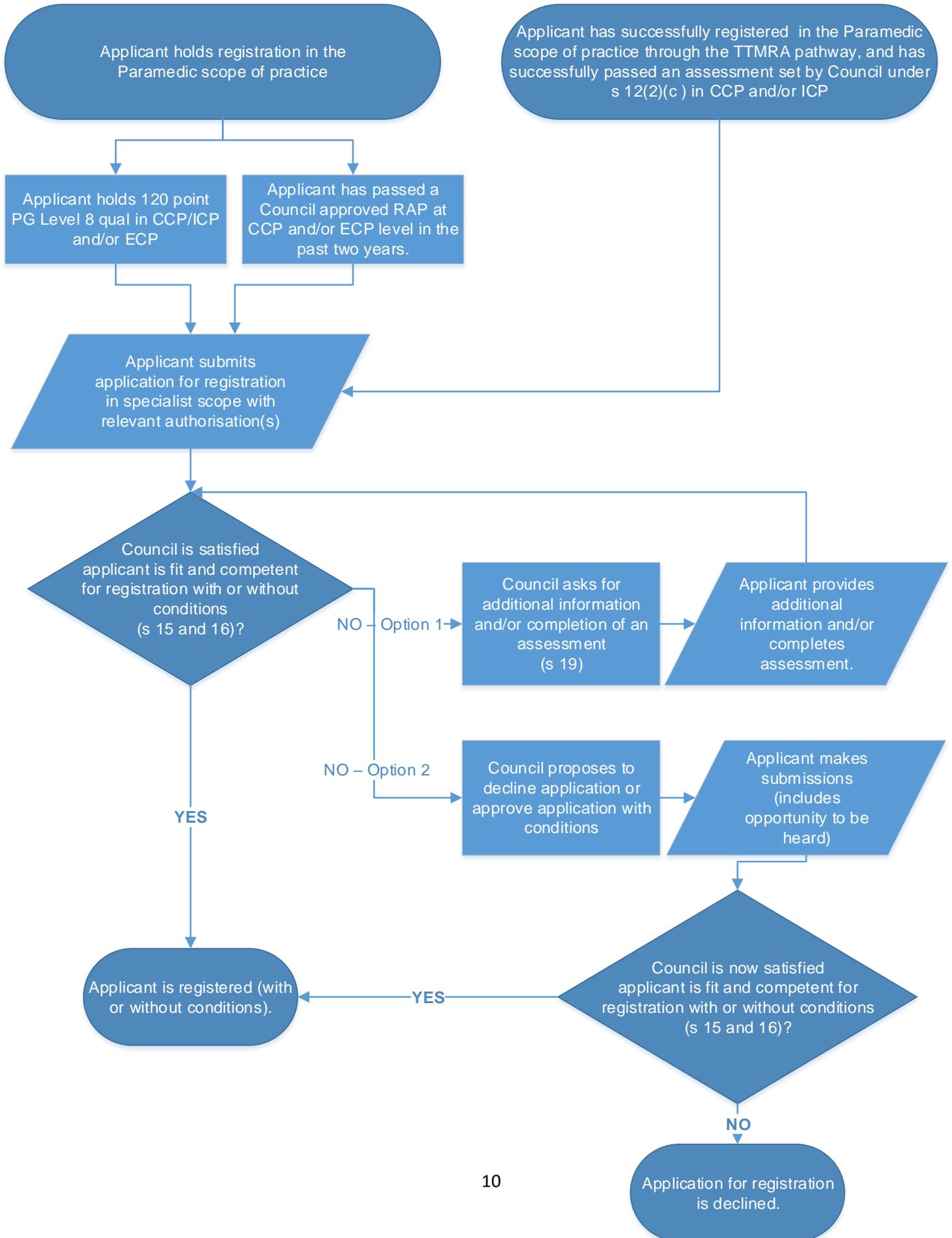
# Registration Pathways - Paramedic Scope of Practice



## Registration pathways – Paramedic Specialist – CCP and/or ECP

New Zealand applicants

Overseas trained applicants



## **Draft scopes of practice and prescribed qualifications – draft Gazette notice**

This notice is issued by the Paramedic Council pursuant to sections 11 and 12 of the Health Practitioners Competence Assurance Act 2003 and comes into effect on the date of publication.

### **Paramedic scope of practice**

Under section 11 of the Health Practitioners Competence Assurance Act 2003 the Paramedic Council has specified the scope of practice for paramedics as follows:

Paramedics are registered health practitioners who use their clinical knowledge, skills, and judgement to provide healthcare services primarily in the provision of urgent and/or emergency assessment, diagnosis and treatment of patients, including provision of clinical advice, referral and, where required, transport. All patient care is, ethically, safely and effectively carried out in accordance with New Zealand law, the principles of te Tiriti o Waitangi, Council standards of clinical competence and cultural competence (including competencies that will enable effective and respectful interactions with Māori), clinical guidelines, documented protocols, and standing orders issued by the employer/organisation's clinical governance framework. Paramedics liaise and cooperate with other healthcare providers and clinical personnel to foster a team approach, provide leadership, provide supervision, support and oversight of non-regulated members of the clinical team, and ensure services are provided in a timely and integrated fashion in partnership with individuals, families, whānau and communities.

Paramedics may also perform a variety of functions including policy development, leadership, management, research, training and education, and public liaison and communication roles.

Paramedics are individually accountable for ensuring all health services they provide are consistent with their education and skill level, meet legislative requirements and are supported by appropriate standards.

### **Prescribed qualifications for registration in the Paramedic scope of practice**

Under section 12 of the Health Practitioners Competence Assurance Act 2003 (the Act) the Paramedic Council has prescribed the following qualifications for registration in the Paramedic Scope of Practice:

#### **New Zealand qualified:**

1. In accordance with section 12(2)(a) of the Act, a Bachelor of Health Science majoring in Paramedicine, conferred by an educational institution accredited by Council.

**OR**

2. A pass within the two years prior to application in an approved Registration Assessment Programme (RAP) at the paramedic level or above set by the Council or another organisation approved by Council in accordance with section 12(2)(c) of the Act.

**OR**

3. Both of the following:
  - a) Satisfactory evidence of experience in the delivery or management of paramedic services, or in paramedic education and research.

AND

- b) At the direction of Council, successful completion and a satisfactory pass in an assessment set by the Council or by another organisation approved by the Council under section 12(2)(c) of the Act.

**All applicants for registration will be required to successfully complete a cultural safety education course set by an organisation approved by the Council under section 12(2)(b).**

*The purpose of qualifications 2 and 3 is to provide a pathway to registration for existing paramedics who can demonstrate training and experience relevant to current, competent paramedic practice in New Zealand. For that reason, these qualifications expire as prescribed qualifications after [DATE 12 months after quals gazetted]. All applications received by Council after the expiry date, and which rely on one of these qualifications as part of the application are likely to be declined on the basis that the applicant does not hold a prescribed qualification.*

### **Paramedic Specialist scope of practice with authorisation in:**

- Critical Care Paramedic; and/or
- Extended Care Paramedic

Under section 11 of the Health Practitioners Competence Assurance Act 2003 the Paramedic Council has specified the scope of practice for Paramedic Specialists as follows:

Paramedic Specialists are registered health practitioners who have advanced education, clinical training and expert knowledge practising in their authorised area(s) of practice. They use their advanced knowledge, skills, and judgement to provide an extensive and diverse range of healthcare services. All patient care is ethically, safely and effectively carried out in accordance with New Zealand law, the principles of te Tiriti o Waitangi, Council standards of clinical competence and cultural competence (including competencies that will enable effective and respectful interactions with Māori), clinical guidelines, documented protocols, and standing orders issued by the employer/organisation's clinical governance framework.

The provision of urgent and/or emergency assessment, diagnosis and treatment of patients continues with expanded skillsets, utilising diagnostic equipment and interventional techniques. Practice includes comprehensive assessment, planning and evaluation of patient outcomes in accordance with clinical guidelines, documented protocols, and standing orders issued by the employer/organisation's clinical governance framework. They are clinical experts and leaders

where practice is not restricted to the provision of clinical care within the paramedic profession and may extend to a variety of functions including policy development, leadership, management, research, training and education, and public liaison and communication roles. They provide supervision, support and oversight of non-regulated members of the clinical team, and work proactively to improve health outcomes in collaboration with other health professionals, families, whānau and communities.

Paramedic Specialists may perform surgical or operative procedures below the gingival margin or surface of the skin, mucous membranes or teeth when indicated, and in accordance with their training and level of skill.

Paramedic specialists are individually accountable for ensuring all health services they provide are consistent with their education and skill level, meet legislative requirements and are supported by appropriate standards.

### **Prescribed qualifications for registration in the Paramedic Specialist scope of practice**

Under section 12 of the Health Practitioners Competence Assurance Act 2003 (the Act) the Paramedic Council has prescribed the following qualifications for registration in the Paramedic Specialist Scope of Practice:

#### **Paramedic Specialist with Critical Care Paramedic authorisation**

##### **New Zealand qualified:**

1. Registration in the Paramedic Scope of Practice and one of the following:
  - a) A Level 8 Post-Graduate qualification with a minimum of 120 points in intensive or critical care paramedicine conferred by an educational institution accredited by Council.

OR

- b) a pass within the two years prior to application in an approved Registration Assessment Programme at the Critical Care Paramedic level set by the Council or another organisation approved by Council in accordance with section 12(2)(c) of the Act.

**All applicants for registration will be required to successfully complete a cultural safety education course set by an organisation approved by the Council under section 12(2)(b).**

**Overseas qualified:**

All of the following:

1. Registration with Paramedic Council in the paramedic scope of practice under the Trans-Tasman Mutual Recognition Act;

**AND**

2. A satisfactory pass in an assessment in Critical Care Paramedicine set by the Council or by another organisation approved by the Council under section 12(2)(c) of the Act.

**All applicants for registration will be required to successfully complete a cultural safety education course set by an organisation approved by the Council under section 12(2)(b).**

**Paramedic Specialist with Extended Care Paramedic authorisation**

**New Zealand qualified:**

1. Registration in the Paramedic Scope of Practice and one of the following:
  - a) A Level 8 Post-Graduate qualification with a minimum of 120 points in extended care paramedicine conferred by an educational institution accredited by the Paramedic Council.

Or

  - b) A pass within the two years prior to application in an approved Registration Assessment Programme at the Extended Care Paramedic level set by the Council or another organisation approved by Council under section 12(2)(c) of the Act.

**All applicants for registration will be required to successfully complete a cultural safety education course set by an organisation approved by the Council under section 12(2)(b).**

**Overseas qualified:**

All of the following:

1. Registration with the Paramedic Council in the paramedic scope of practice under the Trans-Tasman Mutual Recognition Act;

**AND**

2. A satisfactory pass in an assessment in Extended Care Paramedicine set by the Council or by another organisation approved by the Council under section 12(2)(c) of the Act.

**All applicants for registration will be required to successfully complete a cultural safety education course set by an organisation approved by the Council under section 12(2)(b).**

*The purpose of qualifications 1b under each authorisation is to provide a pathway to registration for existing paramedics who can demonstrate advanced training and experience relevant to current, competent advanced paramedic practice in New Zealand. For that reason, these qualifications expire as prescribed qualifications after [DATE 12 months after quals gazetted]. All applications received by Council after the expiry date, and which rely on either of these qualifications as part of the application are likely to be declined on the basis that the applicant does not hold a prescribed qualification.*

## Policy on Council-approved Registration Assessment Programmes (RAPs)

### Policy Statement

The Paramedic Council (Council) may not register an applicant for registration unless the applicant is (among other things) competent to practise the profession.

The Council recognises that, prior to paramedicine becoming a regulated profession, many paramedics have already been working within robust competence assurance frameworks delivered by or through their employers.

The intent of this policy is to:

- recognise appropriate existing programmes to provide a grandparenting pathway for currently practising paramedics onto the Register of Paramedics (to be known as a Registration Assessment Programme (RAP), and
- provide organisations considering development of a RAP with an indication of the requirements that must be met in order for Council to consider approval of the RAP for registration purposes.

### Legislation

1. Section 15(1) of the Health Practitioners Competence Assurance Act (the Act) sets out the requirements for registration of a health practitioner. The applicant must:
  - Be fit for registration in accordance with section 16 of the Act;
  - Have a qualification that is prescribed by the Council for registration; and
  - Be competent to practise.

### Context

2. The Council is a newly established responsible authority under the Act. The Council has established an initial registration framework that provides for two scopes of practice;
  - Paramedic; and
  - Paramedic specialist (with authorisation in Critical Care Paramedicine and/or Extended Care Paramedicine).
3. In establishing an initial registration framework (which includes setting scopes of practice for the practice of paramedicine, and prescribing qualifications for registration in those scopes of practice), the Council is mindful of existing measures in place that have supported the paramedic profession in competence assurance activities while the profession has been unregulated. The Council intends to utilise those measure to transition paramedics without formal tertiary qualifications to registration, where appropriate.

## **Policy**

4. The Council has prescribed qualifications for registration in paramedic scopes of practice. Some of those qualifications provide that recent successful completion of a Council-approved RAP can be accepted as one element of the prescribed qualification.
5. This policy supports the Council in determining whether applicants for registration as a paramedic during the initial registration period have recently been assessed for the purposes of either being issued with an Authority to Practise (ATP); or for continuation of an existing ATP, and have therefore recently satisfied their employer and/or an external assessment body of their current standard of competence.

## **Approval of RAPs**

6. Council has identified the hallmarks that a RAP must have to be considered for approval. These are set out below.

### *Initial assessment*

7. A RAP must be able to demonstrate that it has appropriate systems in place to ensure assessment of a paramedic's competence is fair and robust. These systems include:
  - a) The RAP Scoring rubric must address professional practice expectations set out in NZS 8156 until the Council Standards of Competence are available.
  - b) Assessments are designed with clinical input from a medical practitioner registered and holding a current practising certificate with the Medical Council under the HPCAA and with a skill set relevant to the assessments being conducted;
  - c) Assessment incorporates a range of validated assessments, such as:
    - o Clinical observation
    - o Skills stations assessments
    - o Viva/OSVE/OSCE
    - o Simulations
    - o Logbook reflection and assessment
  - d) There are appropriate established criteria for appointment of assessors and there is training for assessors;
  - e) Appropriate moderation measures are in place;
  - f) Clear information about the assessment process is available for candidates;
  - g) Assessments are undertaken in appropriate testing conditions for the type of assessment being conducted;
  - h) Clear and appropriate feedback is provided to candidates about their competence after the assessment is completed.

AND

### *Re-assessment*

8. A RAP must also demonstrate that it has appropriate systems to regularly review and assure the ongoing competence of a paramedic after the initial ATP has been issued. Ongoing competence assurance activities may include (but are not limited to):
  - a) An interview with the paramedic to discuss progress;
  - b) A review of any cases attended by the paramedic that did not go well, had unexpected outcomes, or where other concerns were raised, and a discussion on lessons learned;
  - c) A review of the paramedic's professional development in the preceding year, and discussion on objectives for the coming year.
  - d) Documentation of the assessment and sign-off from both the paramedic and a representative of the employer.