

MEDIA RELEASE – Thursday 8th March, 2007
Paramedic Expanded Scope of Practice

The Council of Ambulance Authorities Inc (CAA), the peak body representing the principle statutory and other providers of ambulance services in Australia, New Zealand and Papua New Guinea has released an important report based on research it commissioned on the expanded scope of practice of ambulance paramedics.

The report was the major focus of discussion at a workshop on innovations in rural and regional paramedic role, held on March 7 in Albury, prior to the 9th National Rural Health Conference.

The CAA recognised that there were long term recruitment and retention problems amongst rural health workers in Australasia. New health care models with flexible workforce roles were emerging to meet the community needs in rural areas. The view amongst ambulance services was that the introduction of extended care practices for paramedics would benefit health care provision particularly in rural and remote communities.

To better understand this issue the CAA commissioned a study; 'Rural and Regional Paramedic: moving beyond emergency response' to review and analyse the existing expanded role of the ambulance paramedic in rural and regional Australia. The research team consisted of Associate Professor Peter O'Meara (Charles Sturt University), Professor Judi Walker (University of Tasmania), Ms Christine Stirling (University of Tasmania), Associate Professor Daryl Pedler (Monash University), Ms Vianne Tourle (Charles Sturt University), Kristina Davis (SA Ambulance Service), Paul Jennings (Rural Ambulance Victoria), Peter Mulholland (Tasmania Ambulance Service), Dennis Wray (Ambulance Service of NSW), and Peter Morgan (Tasmania Ambulance Service).

The study examined information on evolving pre-hospital practices in the United Kingdom, Canada and the United States, health workforce issues and projections in rural and remote Australia, and the current issues impacting on health systems.

The findings confirm that with hospital emergency department resources becoming stretched and with the limited number of medical practitioners who can attend to patients outside their surgeries, paramedics are becoming the first line primary health care providers particularly in small rural communities.

The provision of pre-hospital clinical care as an integrated and coordinated approach by ambulance services, local health care providers and other stakeholders has a high potential of enhancing health services to rural communities.

There is an obvious national benefit if these evolving expanded-scope paramedic models become a fully integrated part of the health care system, to enable a more efficient use of limited health resources.

The results of the study are providing ambulance services and other stakeholders with a platform for collaboration, to debate and discuss the issue and set future directions aimed at maximising resources to enhance health care in rural and regional communities.

Ambulance jurisdictions across Australia and New Zealand are each reviewing the findings from the study and where applicable, using the information in their strategic planning processes. The benefit of expanded scope of practice for paramedics is increasingly being recognised as having the potential to enhance current health services in some parts of Australia as such, ambulance services are progressing programs within their jurisdictions to meet community needs.

For general Rural Health Conference media enquiries contact Megan Stoyles on 0408 147 829. *The Rural and Regional Paramedic: moving beyond emergency response* is available on: <http://convention.ambulance.net.au/>. For comment on the Report contact Lyn Pearson, Executive Director, CAA on 0437 320 173.
