

FACT SHEET

Ambulance Service Amendment Bill 2013

- Ambulance and emergency management practice has advanced considerably over the past thirty years. In particular, the nature of out of-hospital patient care by ambulance services has evolved. The current legislation is more than thirty years old and no longer reflects contemporary practice for emergency ambulance services, non-emergency patient transport, out of hospital care and first aid.
- The Bill updates the legislative framework in Tasmania to provide for effective licencing of commercial non-emergency patient transport services, improve safety for patients and ambulance workers and meet the needs of contemporary ambulance operations. The proposed amendments clarify the clinical scope of practice of emergency ambulance services, non-emergency patient transport, out of hospital care and first aid.
- The Bill provides a contemporary licensing framework for commercial non-emergency patient transport. The existing Act does not adequately provide for the regulation of commercial operators. Amended legislation is required to provide appropriate standards for commercial operators to ensure patient safety.
- Significant changes have occurred in education standards for paramedics over the past 30 years and paramedics are now required to hold tertiary qualifications. The proposed amendments recognise this and make specific provision to protect and restrict the use of the term to appropriately qualified persons.
- Key provisions in the Bill
 - Clarify the difference between various grades of patient care, i.e. paramedic or emergency and urgent ambulance services, non-emergency patient transport services and first aid services, to protect patients and consumers and reflect contemporary standards of clinical governance, oversight and qualification in the ambulance service sector.
 - Include new definitions for “ambulance”, “non-emergency patient transport services” and “paramedic” and new offences and penalties for misuse of these terms protect patient and consumer safety and reflect contemporary standards of clinical governance, oversight and qualifications in the ambulance service sector.
 - Provide protection from liability to ambulance officers undertaking their duties in good faith, within their scope of clinical practice.

- Introduce a range of new offences against ambulance officers and volunteers including assault, obstruction, threatening and impersonation to address safety of patients and ambulance workers.
- Tighten the use of the term “ambulance” and restrict the use of the term “paramedic”. In recent years these terms have been used by people of varying skill level. This has led to confusion for event organisers, consumers and the public about what services are actually provided. These measures address patient safety and allow the public and consumers to understand the level of care they are receiving in emergencies, at sporting and cultural events or in other situations.
- Provide for a licencing and regulatory regime for low acuity non-emergency patient transport services to ensure that commercial operators are appropriately regulated. First aid and event stand-by services are not required to hold a licence and are not permitted to use the terms “ambulance” and “paramedic” without authorisation.
- Provide for the prescribing and collection of fees to recoup the cost of routine or miscellaneous expenses incurred by the Ambulance Service, such as the provision of training services. The Act already allows fees to be prescribed for operational ambulance services. The Government policy of waiving fees incurred by Tasmanian residents will not change.
- Commercial operators and providers of non-emergency patient transport services and/or first aid providers have been consulted about the changes. A two-year phase in period will apply to licensed operators. The relatively low cost to industry (estimated to be approximately 73 cents per patient) is balanced by the benefit to the public of clear terminology relating to qualification and skill level and clear identification of emergency services.