

Let's meet ACP's Board Members

Emma-Kate Thornley



What's your work story?

Emma is one of the four founding members of the College. Emma commenced a career in Paramedicine in 2001 with Ambulance Tasmania and qualified as a Paramedic in 2003 and then as an Intensive Care Paramedic in 2006. Emma has practiced at the level of ICP in various state ambulance services as well as doing private contract work for the Australian Defence Force, motor sport and adventure races, resources sector and on various expeditions and humanitarian projects both nationally and internationally.

Focus areas during her career have included workplace health and safety, indigenous health, rural and remote practice, social determinants of health, organisational cultural awareness, and education of students.

In 2009, Emma realised there was a significant gap in her education because most of the patients she was looking after were presenting with issues of a primary health care nature rather than with an emergency. This prompted her to further her studies and she graduated from UQ School of Medicine with a Master's degree as a Physician Assistant in 2012. This was the beginning of her passion for combining Paramedicine and Primary Health Care (PHC).

In 2016 The University of Tasmania approached Emma to join the academic team where she developed the first tertiary unit focused specifically on equipping Paramedics with the theoretical and clinical knowledge required to perform the Extended Care Paramedic role within a Primary Health Care framework. Emma is currently tenured with UTAS in the post graduate space where she is a strong advocate for the progression of paramedic career opportunities beyond the traditional ambulance-based roles.

In 2021 Emma was the first Paramedic in Australia to be employed as a Paramedic Practitioner. Working in a rural town in Tasmania, Emma said this on her appointment "I practice with a multidisciplinary team with a GP, Rural Generalist, Nurse Practitioner and Nurse Immuniser it's a first on many fronts for me and I love it, so glad my employer took a chance"

When not working clinically or in her academic role, Emma will often be boating, hosting board game nights, at the gym or off somewhere in the bush, connecting to country and hunting native orchids with her Greyhound Esme Watson.

We invite all members to send in their stories so we can share them.

Email us your story at info@acpp.net.au



News snippets:

ACPP and ACRRM sign a historic Memorandum of Understanding

Rural Generalists and Paramedic Practitioners join forces to strengthen healthcare needs in rural and remote communities

The Australasian College of Paramedic Practitioners (ACPP) and the Australian College of Rural and Remote Medicine (ACRRM) have joined forces and formalised a Memorandum of Understanding (MOU) with the aim to work together to support the provision of primary healthcare in rural and remote communities.

Signed by ACPP President Greg Reaburn and ACRRM President Dr Sarah Chalmers, the MOU recognises the organisations' agreement to collaborate on a range of issues including the integration of paramedics within the primary healthcare system, skills and educational support and increased access to a skilled medical workforce within rural and remote communities.

ACRRM President Dr Sarah Chalmers says the ACPP represents paramedics who have developed advanced primary healthcare skills, so strengthening the relationship and sharing resources is vital for patients, especially those in rural and remote communities.

Dr Chalmers said "ACRRM recognises the importance of health teams working together in rural and remote regions, to ensure we can provide holistic and integrated models of care. We look forward to a long and successful relationship with this College, which has achieved a lot in just two years since its inception."

ACPP President Greg Reaburn explains that contrary to firmly held beliefs, paramedics don't just attend emergencies and are increasingly encountering aging and complex patients. Specialist paramedics, with both emergency and primary healthcare skills, should be able to practice in all areas of the healthcare system.

Mr Reaburn says, "Many paramedics are developing advanced primary health care skills both on the job and through post graduate studies and should be enabled to practice both within and outside ambulance services."

"These paramedics are ideally suited to support rural doctors and we are therefore delighted to align with ACRRM - which is recognised as the expert College for rural generalism. We look forward to both supportive and collaborative practice arrangements."

This MOU represents a paradigm shift in how paramedics will practice in the future. Alignment with a major Medical College and the agreement to work together to provide primary (and emergency) healthcare to rural and remote communities is a major step in paramedics emerging out of the silo of ambulance services.

In other breaking news, ACPP has had a very positive initial meeting with the Australasian College of Emergency Medicine (ACEM). Senior ACEM members were delighted to hear that the College would like to work collaboratively with ACEM. The development of a formal Memorandum of Understanding between ACPP and ACEM is currently being considered.

ACPP Mission

The Australasian College of Paramedic Practitioners will create pathways for Paramedics Practitioners and paramedics with primary healthcare skills, to practice at the top of their skill level within all areas of the Australasian healthcare system.



News snippets:

Meeting with private Community Paramedic providers.

ACPP recently met with numerous private employers of Community Paramedics. The positivity towards the paramedic workforce practicing in community settings was incredible. The versatility, decision making and generalist nature of paramedics are making them very attractive to private providers of community healthcare. Matters discussed included:

- The definition of a Community Paramedic
- The educational standards and needs of Community Paramedics
- The roles, scope, and access to medications
- Funding.

Application for allied health professional funding

Due to our affiliation with Allied Health Professionals Australia, we recently wrote to the Chief Allied Health Officer (Commonwealth) and made representation for Community Paramedics. We are seeking to have Community Paramedics defined and funded in a manner that is consistent with other allied health professionals. Allied Health Professional funding includes:

- Veterans' affairs
- Aged care
- NDIS
- Private health insurance
- Medicare
- PHN
- Workcover
- Community health services

Benefits for Community Paramedics to be defined as an Allied Health Professional include:

- Scholarships
- Placement costs
- Grants
- Interdisciplinary training programs

Submission on South Australian Ambulance Services (SAAS) ramping

In January ACPP made a submission to the House of Assembly Petition No 84 of 2021 – SA Ambulance Service Resourcing. We responded to Terms of Reference item 2.

“Eradicate the practice of ramping at South Australian hospitals through whatever means necessary, including additional funding.”

Our recommendations were:

1. Inclusion of Community Paramedics and Paramedic Practitioners in the SAAS workforce with full integration into local primary care practices.
2. Inclusion of Paramedics into the wider health workforce - Emergency Departments.

Website

Many alterations to the ACPP website have been undertaken. Navigation through the site has been streamlined and simplified. Over the coming weeks and months, the current Board will review numerous of the Colleges documents. Once reviewed the documents will be made public via the Website and announced on social media.



College Committees:

Any members that are interested in assisting the College to grow and develop, are urged to become involved in our committees. It is through these working groups that College seeks to achieve its primary goal of establishing employment pathways and both educational and practice “standards” for Paramedics outside of jurisdictional Ambulance services and the mining and gas sectors.

Pathways (to employment) Committee:

Chaired by Pmd Jennie Mathews GMACPP

Email: jennie.mathews@acpp.net.au

This is a new committee

that will focus on particular areas of the health system and identify opportunities and barriers for Paramedic employment within the following areas of health care:

- Primary Care – General Practice
- Hospital and Health Service (EDs etc)
- Community services

Several members have already expressed an interest in taking part in these focus groups. The College will be in touch with these members in the near future.

Membership Committee

Chaired by Pmd Kathryn McCormack GMACPP

Email: kathryn.mccormack@acpp.net.au

The Membership Committee aims to manage membership of ACPP. They identify and promote member benefits, review member applications, create the College newsletter and informational webinars. Please contact Kathryn to be involved in this vital committee.

Education Committee

Chair: Pmd David Krygger GMACPP

Email: David.krygger@acpp.net.au

The Education Committee aims to lead and influence educational providers that deliver, or are developing, post graduate education for paramedics as they develop primary healthcare skills.

The Education Committee also sets “standards” for ACPP paramedic roles. There are two “standards” for paramedics that practice primary health care:

1. Defining and maintaining consistency of education standards
2. Defining and maintaining consistency of practice standards

In 2022, the Education Committee will continue this important work and also be creating webinars. Please contact David to be involved in this vital committee.



Continuing Professional Development Resources

End of Life Law for Clinicians (ELLC)

A new online training module about voluntary assisted dying and the law. The module can be accessed for free at the [ELLC online training portal](#).

AusDoc.

<https://www.ausdoc.com.au/cpd>

Australian Doctor is a free resource for up-to-date primary healthcare information. It requires a registration, but once your signed up it's free.

ThinkGP

<https://www.thinkgp.com.au>

Think GP was created to meet the needs of busy healthcare professionals, ThinkGP provides access to a broad range of RACGP and ACRRM accredited online educational activities – **free, online, anytime**. It requires a registration, but once your signed up it's free.



[NPS Medicinewise](#)

Pharmacology learning platform, NPS MedicineWise Learning provides health professionals and students with a range of learning activities and resources. It requires a registration, but once your signed up it's free.



Strong Medicine

<https://www.youtube.com/user/dreicstrong/playlists>

Educational videos on a variety of medical topics. Free and on demand. No sign up required.

ACPP's own CPD activity:

On Monday 21 Feb Senior Mental Health Nurse and Queensland Ambulance Co-Responder Ben Scamarcia will discuss risk assessment in patients suffering from mental health crises. Ben is an experienced mental health nurse and has a passion for caring for patients suffering from mental health crises. Ben's current role sees him respond to patients in the community alongside QLDs Senior LARU Paramedics. Webinar begins at:

- Auckland: 2000
- Brisbane: 1700
- Sydney, Melbourne & Hobart: 1800
- Adelaide: 1730
- Darwin: 1630
- Perth: 1500

The webinar is open to ACPP members and Non-Members so spread the word! Register your details now by sending a brief email to info@acpp.net.au and the zoom link will be sent to you. We look forward to seeing you all online!



Affiliated organisations

ACPP thanks these organisations for their support and advice as we navigate our way around these staggeringly complex healthcare systems.

The Australian College of Rural and Remote Medicine (ACRRM)



Australian College of
Rural & Remote Medicine
WORLD LEADERS IN RURAL PRACTICE

ACRRM is a national College with a rural heart. We are focussed on training and supporting rural General Practitioners to provide high quality healthcare to their communities. This is the purpose of our staff, the calling of our members and it's a lifeline for rural and remote communities. ACRRM is growing and we are putting our footprint in the regions where members need us most. Be part of an organisation where you can make a real difference - and grow with us.

Australian Primary Health Care Nurses Association (APNA)



APNA is the peak body and professional membership association for all nurses working outside of a hospital setting in Australia. APNA champions the role of primary health care nurses; to advance professional recognition, ensure workforce sustainability, nurture leadership in health, and optimise the role of nurses in patient-centred care.

Allied Health Professionals Australia



Allied Health Professionals Australia (AHPA) is the recognised national voice for allied health professions in Australia, representing and advocating for the role of allied health professionals in our health system. As the peak national organisation for allied health professionals, AHPA has an important strategic leadership role and is the body that the Federal Government and other national organisations turn to when they seek a collective view of allied health.

Services for Australian Rural and Remote Allied Health



SARRAH is recognised as the peak body representing rural and remote allied health professionals (AHPs) working in the public and private sector. SARRAH develops and provides services for AHPs to carry out their professional duties confidently and competently in providing a range of Clinical and health education services to people who reside in these settings.

CRANApus



CRANApus ensures the delivery of safe, high quality primary healthcare to remote and isolated areas of Australia. We are a grassroots, not-for profit, membership based organisation that has provided over 30 years of education, support and professional services for the multi-disciplinary remote health workforce. We work for all remote health professionals, including nurses, midwives, Aboriginal and Torres Strait Islander health professionals and workers, paramedics, students, general practitioners, doctors, and specialists.



The last word – Social Responsibilities

We all enjoy and use social media but what are the legal consequences to a registered healthcare professional. This guide is to help registered health practitioners understand and meet their obligations when using social media.

To find the Apha social media guidelines for health care professionals please follow the link to get more info: <https://www.ahpra.gov.au/publications/social-media-guidance.aspx>.



Laughter is the best medicine

**Doctors are protesting and
no one knows **why**.**





Bringing Care Closer to Home in London: Advanced Paramedic Practitioners in Urgent Care

Jaqualine Lindridge, Consultant Paramedic, London Ambulance Service NHS Trust
Agatha Nortley-Meshe, Assistant Medical Director, London Ambulance Service NHS Trust
Ruth Tinson, Assistant Medical Director, London Ambulance Service NHS Trust

Introduction

The Urgent and Emergency Care (UEC) system in England has come under increasing pressure over recent years. Attendances at Emergency Departments (ED) are increasing (1), and ambulance Services in England undertook nearly one million more conveyances to ED in 2016/17 than they did in 2011/12 (2). UK health policy increasingly acknowledges the need to depart from the traditional view of the Ambulance service as a transport provider and NHS England have recently recommended that Ambulance services develop see and treat models of care provided by paramedics with advanced skills (3).

In response to this, the London Ambulance Service NHS Trust conducted a pilot introducing practitioners with advanced skills in urgent care.

Advanced Paramedic Practitioners in Urgent Care are experienced, graduate professionals who follow a programme of post-graduate study in advanced practice.

Practitioners undertake clinical rotations in primary care, as well providing a see and treat function in the ambulance setting as a solo practitioner.

This is combined with a case finding and dispatch function in the ambulance control centre, which includes a hear and treat service.



Methods

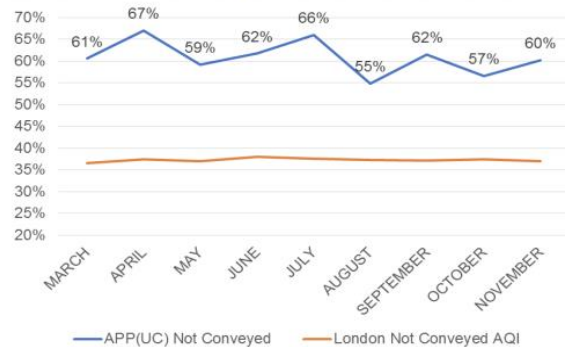
Activity data was extracted from the electronic log of emergency calls and exported into Microsoft Excel with patient identifiable data removed. The data was manually cleaned and for each incident attended dispositions summarising conveyance and referral usage were recorded.

A list of cases of re-contact to the Trust within 24 hours of discharge of care by an APP(UC) were obtained and reviewed by a clinical panel consisting of physicians with qualifications in both General Practice and Emergency Medicine and a Consultant Paramedic with extended practice qualifications for the appropriateness and safety of care.

Results

Advanced Paramedic Practitioners in Urgent Care were appreciably more likely to manage a patient without conveyance to hospital than the average ambulance clinician in London, managing up to 67% of patients in this way. Where patients did require further assessment or care at an ED or other clinical setting, practitioners were able to avoid the need for conveyance in a double crewed emergency ambulance in 41% of cases referred to hospital.

3% of patients recontacted the ambulance service within 24hours, this was below the national average for ambulance service recontact (5.2%)



Conclusion

Advanced Paramedic Practitioners in Urgent Care provide effective care for see and treat episodes, and free up double crewed emergency ambulances to attend to more serious emergency calls. Subsequent recontact rates are low suggesting clinical safety and effectiveness of the APP(UC) management.

References

- (1) NHS England, 2017. *A&E Attendances and Emergency Admissions 2016-17* [online] Available at: <https://www.england.nhs.uk/statistics/> [accessed 16/02/18]
- (2) NHS England, 2018. *Ambulance Quality Indicators*. [online] Available at: <https://www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators/> <http://www.nhs.uk/NHSEngland/keogh-review/Documents/safer-faster-better.pdf> [accessed 16/02/18]
- (3) Urgent and Emergency Care Review Programme Team. 2015. *Clinical models for ambulance services*. UK: NHS England

www.londonambulance.nhs.uk

Contact Information

Email: Jaqualine.Lindridge@NHS.net

Not all Paramedics Work in Ambulances