



7 July 2018

Department of Health & Human Services
Regulation Unit
GPO Box 125
HOBART TAS 7001

Dear Sir/Madam,

Submission on the proposed Ambulance Service Regulations 2018

St John Ambulance in Tasmania has pleasure in providing our submission in respect of the proposed Ambulance Service Regulations 2018 for the setting of minimum standards and prescribed requirements for Non-Emergency Patient Transport services.

Should you have any queries please contact Ross Byrne at St John.

Yours faithfully,

St John Ambulance Australia (TAS) Inc.



Ross Byrne
Chief Executive Officer

Attachment: St John NEPT Submission dated 7 July 2018

ST JOHN AMBULANCE AUSTRALIA (TAS) INC

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St John Ambulance Australia (TAS) Inc delivers nationally recognised training
in partnership with St John Ambulance Australia Inc. RTO Number 88041
ABN: 65764 484 851 Registered charity: 10096



ST JOHN AMBULANCE TASMANIA

*Response to the Regulatory Impact Statement (RIS) for the
proposed Ambulance Service Regulations 2018*

Prepared By:

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St John Ambulance Australia - Tasmania
6 July 2018

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PLEASE NOTE: Wording in italics is a direct copy from the RIS.

Introduction

The Health Department has undertaken a Non-Emergency Patient Transport (NEPT) consultation process seeking feedback on its proposed Ambulance Service Regulations 2018 and the Regulatory Impact Statement (RIS).

A package was mailed to St John Ambulance Australia (Tasmania) Inc. [St John] which included a letter from the Secretary, Michael Pervan, and a hardcopy of the RIS, which included the proposed Regulations.

St John Ambulance Submission - General View

St John Ambulance strongly supports the proposed Ambulance Service Regulations 2018 and the Regulatory Impact Statement (RIS).

Much of the proposed Regulations are in line with our own practices and St John is strongly supportive of many of the new initiatives. St John also supports the approach taken of upgrading the Ambulance Service Regulations setting minimum standards and prescribed requirements for NEPT as against the three alternative models outlined in Part 7 of the RIS.

Outlined below are comments and suggestions in respect of the Regulations as written and suggestions as to how we think they could be strengthened.

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Detailed submission

We have based our submission around the Regulatory Impact Statement.

Part4: Introduction

RIS Reference	Comment
P6 Glossary	St John has no issues.
P7 Executive Summary	St John has not commented on the Executive Summary and has opted to include our comments on the detailed RIS.
P8 to 10 Purpose Background Objectives	St John has no issues.
P.10 Comparison between Current Conditions and Proposed Regulations	<p><i>The proposed Regulations set minimum standards for safety and quality. They require NEPT services to establish clinical governance and quality assurance frameworks and provide mechanisms for reporting and reviewing adverse events.</i></p> <p><i>... They set minimum standards for staff qualifications and training, equipment and vehicles maintenance and record keeping.</i></p> <p>St John applauds the setting of minimum standards and notes that we already have in place:</p> <ul style="list-style-type: none">• Clinical governance framework• Quality assurance framework• Mechanisms for reporting adverse events• Standards for staff qualification and training• Minimum standards for equipment and vehicle maintenance• Minimum standards for record keeping. <p>St John agrees with DHHS that these minimum standards should have very little impact on St John.</p>

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Part 5: The Policy Problem

RIS Reference	Comment
P11 Implementation	<p>Flow Charts and ‘approved forms’ are very similar to those applied by St John and we see no issues with moving to the new forms.</p> <p>We would welcome the opportunity to discuss layout and usage of some of the forms before implementation.</p>
P11 Implementation	<p><i>A time-period for transitional arrangements will be determined depending on business needs and the risks to public health posed by standards that do not meet minimum requirements. Verbal and written warnings may also be issued if there is serious unwillingness or wilful failure to comply. In serious cases there is the option of issuing infringement notices for breaches, with maximum penalties given in each relevant regulation. In following best practice regulatory theory, DHHS aims to achieve collaborative relationships and willing compliance with NEPT businesses and as such, warnings and infringement notices would only be used as a last resort.</i></p> <p>St John takes a stronger view on these matters than is expressed here.</p> <p>St John is of the opinion that if an NEPT Provider wants to operate in this space then their should be total compliance. These Regulations are all about patient safety and care. They are no about whether an operator is profitable or not. St John has invested heavily in 8 x Ambulance type Mercedes Sprinter vehicles and is about to acquire two more. Operators should be required to comply with the Regulations. Minor breaches we can see will occur.</p> <p>St John does not believe that</p> <p><i>‘Verbal and written warning..be issued if there is serious unwillingness or wilful failure to comply’</i></p> <p>but that the operator should be dealt with a suspension of the operator’s licence until the matter is addressed.</p> <p>STJOHN BELIEVES THAT WE ARE EITHER COMMITTED TO PATIENT SAFETY ... OR WE ARE NOT.</p> <p>St John has always operated under its NEPT contract requirements to have two trained PTS Staff in the vehicle at all times - one driver and one observer. We expect that all other operators would also comply with this requirement of the Licence Conditions and or and new Regulations. Non-compliance puts the patient at risk and also places undue stress on the driver with stretcher movement, observations and would prove particularly difficult if an emergency arises.</p>

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RIS Reference	Comment
<p>P11 Policy Problem</p>	<p><i>NEPT providers in Tasmania may be engaged by private entities such as private hospitals or nursing homes. Where services are provided through these private arrangements, government has no influence over, or interaction with, the services that are provided. Patients who are transported in these circumstances are rightfully entitled to feel safe and be provided with an equal or higher quality service than they would receive if they were being transported by government or under a government managed contract.</i></p> <p>We totally agree. Patient care MUST be paramount. Two appropriately qualified people ALWAYS in every vehicle.</p> <p><i>In a commercial environment, high quality patient care can be costly. Businesses employing higher qualified staff and operating high quality equipment and vehicles to a stringent clinical standard will have higher overhead costs than those employing staff with lower level training and qualifications and more basic equipment and vehicles. The higher overheads will eventually impact on the cost of the service. This may lead businesses to opt for lower trained staff and lower quality equipment and vehicles in order to turn a higher profit. It is possible that NEPT services will make decisions on the level of care they provide based on commercial priorities, rather than from a patient safety perspective.</i></p> <p>There is a cost to compliance with the Regulations and operators need to ensure that they appropriately price their services to encompass those costs.</p>
<p>P12 Patient criteria</p>	<p>St John Ambulance is in agreement.</p>
<p>P12 Staff qualifications</p>	<p>St John Ambulance is in total agreement. St John is considering opening up its training regime to all operators so that qualification is at a standard level.</p>
<p>P12 Equipment</p>	<p>St John Ambulance is in agreement. We would ask however that the term 'old or outdated' equipment be defined.</p>
<p>P12 Vehicles</p>	<p>St John Ambulance is in agreement. St John operates a fleet of Mercedes Sprinter ex ambulances from St John Western Australia. These have been deployed as front line ambulances in the Western Australia ambulance service and comply to the highest standards of patient transport.</p>

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Part 6: Costs & Benefits

RIS Reference	Comment
NEPT Crew competency	St John Ambulance is in agreement and conducts such staff training.
NEPT registrations	St John Ambulance is in agreement with these costs and already meet these costs.
NEPT immunisations	St John Ambulance is in agreement and already requires these immunisations.
NEPT clinical governance committee	St John has a two tier clinical governance approach: <ul style="list-style-type: none"> National - Medical Advisory Panel Locally - Clinical Advisory Group Both these groups are manned by leading medical practitioners, paramedics and nurses.
Reportable incidents	St John Ambulance is in agreement and already has a system in place.
Records	St John has an extensive process in place for all clinical records it collects/creates including the encryption of electronic patient records.
Patient information	St John Ambulance is in agreement. We currently have information brochures and would look to reprint these when the new Regulations are enacted. This is simply a cost of doing business.
Application fee	St John agrees with the level of this fee. This is simply a cost of doing business and appears fair and reasonable.
Ongoing monitoring etc	St John agrees with the level of these fees. This is simply a cost of doing business and appears fair and reasonable.
Licence renewal	St John agrees with the level of this fee. This is simply a cost of doing business and appears fair and reasonable.
Late application fee	St John agrees with the level of this fee.
Variation of licence	St John agrees with the level of this fee. This is simply a cost of doing business and appears fair and reasonable.
Div 2 - NEPT patients	No issues
Div 3 - Provision of services	St John agrees - this is simply a cost of doing business.

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RIS Reference	Comment
Div 4 - Admin requirements	Not applicable to St John as we already have a clinical governance process in place. Other costs - St John agrees with the level of any such costs. This is simply a cost of doing business.
Part 3	St John agrees with the level of these fees. This is simply a cost of doing business and appears fair and reasonable.
P17 Nature of the restriction on competition	St John Ambulance is in agreement.
P17 Impact on business	St John Ambulance is in agreement.
P17 Public interest benefits	St John Ambulance is in agreement. Health care professionals need to be accountable.

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Part 7: Alternatives to the Proposed Regulations

RIS Reference	Comment
P18 Apply conditions administratively	St John Ambulance does not support this approach. Using the Regulations makes the standards available and visible to all stakeholders and potential providers who may wish to enter the market.
P19 Non-mandatory guidelines	St John Ambulance does not support this approach. Agree with the summary - not a practical option.
P20 Not apply minimum standards.	St John Ambulance does not support this approach. The summary paragraph sums up our thoughts on this approach.

Part 8: Greatest Net Benefit for Least Costs

RIS Reference	Comment
P20 & 21	<p><i>The proposed Regulations place requirements on individuals working within the NEPT sector in addition to NEPT business owners. These requirements relate to qualifications, skills and experience, professional clearances and staff conduct when working for an NEPT provider and caring for patients. The requirements are consistent with community expectations and standards imposed on other health care workers.</i></p> <p><i>The Government will incur costs in regulating the sector of approximately \$40,000 per year. This cost is currently fully incurred by government and is not offset by the industry. The proposed Regulations set fees for partial cost-recovery. Quality NEPT services provide a net benefit to the public as these services relieve the state ambulance service from non-urgent transports. As government has a role in ensuring health care services meet minimum standards, partial cost-recovery is justified as supporting the public interest and continuation of the NEPT sector.</i></p> <p><i>It is considered that the listed benefits supported by the more detailed discussion in Part 1, 2 and 3 of this RIS, outweigh the identified costs and will provide a net public benefit.</i></p> <p>St John concurs with these conclusions and the partial recovery of the cost of regulation.</p>

Part 9: Effect on Other Government Agencies

RIS Reference	Comment
P22 Effect on Other Government Agencies	St John notes these comments.

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Part 10: Consultation

RIS Reference	Comment
P22 Consultation	St John notes the consultation process. We have participated in a face to face consultation process with DHHS staff.

Part 11: Conclusion

RIS Reference	Comment
P23 Conclusion	Noted and agreed.

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Appendix 1 - Detailed Explanation of Provisions

RIS Reference	Comment
P24 Part 1 -Preliminary	Noted. No issues.
P24 Part 2 - NEPT services. Reg 6	Noted. No issues
P24 Div 2 - NEPT Patients	Noted. We have no issues with the classification of patients.
P24 to 26 Div 3 Provision of services	St John has no issues with these requirements and is generally in line with our own current practices.
P27 -30 Div 4 Admin requirements	St John has no issues with these requirements and is generally in line with our own current practices - except as noted below.
P27 Audits	Audits - St John welcomes these.
P28 Unsupervised NEPT Services Staffing of vehicles	<p>St John does not support this practice generally.</p> <p>St John is of the view that all transport should be undertaken by a two member crew. This is in line with the standard of care requirements of the Regulations.</p> <p>Such practices if left up to the operator can lead to the abuse of the Regulation and place undue pressure on the Health Care Professional from their employer to undertake transport with only one member thus providing a lesser standard of care - but a lower cost to the operator.</p>

Appendix 2 - Draft Approved Forms

St John Ambulance has no issues with the forms.

St John must comply with our own St John National Guidelines and as such some further information may need to be added to the forms for our internal compliance.

We would welcome the chance to further consult on the layout and content of these forms before implementation

Appendix 3 - Draft Flow Charts

St John Ambulance has no issues with these flow charts as they are generally in line with our current processes.

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Queries in respect of this submission should be directed to:

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