



Ambulance and Paramedic

INDUSTRY REFERENCE COMMITTEE INDUSTRY SKILLS FORECAST

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Executive summary

The Ambulance and Paramedic Services industry provides critical emergency and health services, by land and air, to the Australian population. Service providers operate in each state and territory and include both private and public organisations ranging in size from small to medium. The Ambulance and Paramedic workforce is primarily made up of front-line staff, including paramedics, patient transport officers and specialists in intensive care, special operations, disaster response and retrieval. A portion of those employed in the sector operate as support staff who assist in the delivery of services. Further, volunteers play a crucial role in the provision of services at the community level and operate in roles such as volunteer ambulance officers and community first responders. Employment in the sector is predicted to grow strongly to 2020 as a direct result of increased demand.

The Ambulance and Paramedic Industry Reference Committee (IRC) has responsibility for seven qualifications, packaged within the HLT Health Training Package, aligned to the following job roles:

- Ambulance call takers / Emergency medical dispatchers
- · Ambulance paramedics and ambulance attendants
- Ambulance transport officers
- · Ambulance volunteers.

The Ambulance and Paramedics IRC commits to thorough and inclusive national consultation to ensure training package products under its remit are reflective of current industry skills needs and provide opportunities for workforce development that actively contributes to the variability and productivity of the sector. Recognition is given to the need for training package related decisions to be made based on appropriate levels of industry engagement and input.

Further, the IRC acknowledges the COAG Industry and Skills Ministers' priorities and will utilise consultation activities, through the support of SkillsIQ, to gain a national perspective on:

- opportunities to identify and remove obsolete training package products from the system
- industry expectations for training delivery and assessment to be documented within Implementation Guides
- opportunities to enhance portability of skills from one related occupation to another
- opportunities to remove unnecessary duplication within the system and create training package products that may have application to multiple industry sectors
- · opportunities for the development of skill sets.

Where available the IRC will seek and maximise opportunities to work collaboratively with other IRCs.

This Industry Skills Forecast proposes a schedule for the ongoing review of relevant training package products to inform the development of the four-year rolling National Schedule. An industry analysis of both new and emerging workforce skills needs of the sector has informed this plan.

Sector analysis and industry consultation indicate that the sector is, and will continue to be, impacted by a number of challenges and opportunities, including:

- an increase in the number of users of ambulance services driven by population growth and demographic change, namely an ageing society;
- heightened customer expectations and demand for services;
- potential proposed change to registration requirements;
- growing privatisation leading to changes in the nature of businesses delivering services; and
- changing scope of practice as a result of better integration of ambulance service provision within the overall health system.

In addition to broad challenges and opportunities, the sector has identified the following factors as having direct impact on the composition and skills needs of the workforce:

- increasing incidence of occupational violence;
- changing nature of business operation;
- increasing prevalence of mental health issues in the community; and
- increasing concern for the wellbeing and resilience of a 'first to respond' workforce that is exposed to unpredictable and difficult events.

The Industry Skills Forecast identifies a number of trends in workplace design that will impact on the skills needs of the sector. This information, along with industry-identified skills priorities, will directly inform the coming review of relevant training package products.

Information contained within this Industry Skills Forecast has been obtained from a variety of sources and by a variety of methods, including:

- desktop research, to develop an understanding of existing research and views on skill requirements in the sector;
- an industry workforce survey, which was available to all stakeholders across all industries; and
- validation with the IRC, in order to confirm that the information was both valid and reflected industry views appropriately.

The Ambulance and Paramedic IRC has proposed that review of the qualifications and units of competency in its remit be scheduled for year three of this Industry Skills Forecast. This decision is based on the timing of the last review and the imperative of industry to allow sufficient time for qualification implementation within the system to fully understand the impact of changes made during the recent 2015 review. It is envisaged that the above challenges and opportunities and workforce skills needs will be taken into account when developing the Case for Change for this review.

A. Administrative information

Name of IRC

Ambulance and Paramedic Industry Reference Committee.

Name of Skills Service Organisation (SSO)

SkillsIQ Limited (SkillsIQ)

This document details the proposed four year schedule of work from 1 July 2016 to 30 June 2020 as agreed between the Ambulance and Paramedic IRC and SkillsIQ.

This version of the Industry Skills Forecast was refreshed in April 2017.

About SkillsIQ

As a Skills Service Organisation (SSO), SkillsIQ is funded by the Department of Education and Training to support its allocated IRCs, which are responsible for the development and maintenance of the following training packages:

- Community Services
- Health
- · Local Government
- Public Sector
- Floristry
- Hairdressing and Beauty Services
- Funeral Services
- Retail Services
- Sport, Fitness and Recreation
- Tourism, Travel and Hospitality.

B. Sector overview

Within the Australian and New Zealand Standard Industry Classification (ANZSIC), the Ambulance and Paramedic sector falls under the division of health care and social assistance. The Ambulance industry, as defined by ANZSIC, consists of units primarily engaged in transporting patients, by ground or air, in conjunction with medical care. The The Ambulance and Paramedic sector includes a range of occupations such as:

- Ambulance call takers / Emergency medical dispatchers;
- Ambulance paramedics and ambulance attendants;
- · Ambulance transport officer; and
- · Ambulance volunteers.

Businesses within the sector include both private and public organisations ranging in size from small to medium.

Nationally recognised Ambulance and Paramedics qualifications (as at April 2017)

- HLT21015 Certificate II in Medical Service First Response
- HLT31015 Certificate III in Ambulance Communications (Call-taking)
- HLT31115 Certificate III in Non-Emergency Patient Transport
- HLT31215 Certificate III in Basic Health Care
- HLT41015 Certificate IV in Ambulance Communications (Dispatch)
- HLT41115 Certificate IV in Health Care
- HLT51015 Diploma of Paramedical Science.

Registered Training Organisation scope of registration (as at April 2017)

The following table (Table 1) lists the number of Registered Training Organisations (RTOs) with the above qualifications on scope. This data is current as at April 2017 as per the listing on the National Register of VET (www.training.gov.au). Qualifications in the following table were last reviewed in 2015 and updated versions released on training.gov.au on 8 December 2015. As a result, many RTOs will not have transitioned to these updated qualifications. The transition period is usually 12 months. However, the Australian Government Minister for Vocational Education and Skills and State and Territory Skills Ministers agreed to a temporary increase to the length of the transition period. RTOs were granted an additional 6 months to transition, i.e. 18 months in total, for training products endorsed by the AISC from September 2015 to March 2016. Many RTOs will therefore still have the superseded qualifications on scope as transition requirements will not require RTOs to have the updated qualifications on scope until 8 June 2017. The superseded qualifications have been identified in the following table.

TABLE 1. NUMBER OF RTOS WITH AMBULANCE AND PARAMEDIC QUALIFICATIONS ON SCOPE (AS AT APRIL 2017)

Code	Qualification name	No of RTO on scope
HLT21015	Certificate II in Medical Service First Response	14
HLT21112	Certificate II in Emergency Medical Services First Response (superseded)	23
HLT31015	Certificate III in Ambulance Communication (Call-taking)	4
HLT31912	Certificate III in Ambulance Communications (Call-taking) (superseded)	5
HLT31115	Certificate III in Non-Emergency Patient Transport	13
HLT30212	Certificate III in Non-Emergency Patient Transport (superseded)	19
HLT31215	Certificate III in Basic Health Care	12
HLT33112	Certificate III in Basic Health Care (superseded)	10
HLT41015	Certificate IV in Ambulance Communications (Dispatch)	5
HLT41112	Certificate IV in Ambulance Communications (Dispatch) (superseded)	5
HLT41115	Certificate IV in Health Care	14
HLT41012	Certificate IV in Health Care (Ambulance) (superseded)	23
HLT51015	Diploma of Paramedical Science	14
HLT50412	Diploma of Paramedical Science (Ambulance) (superseded)	15

Source: Training.gov.au. RTOs approved to deliver this qualification. Accessed 13 April 2017

National peak bodies and key industry players

The following list represents a range of organisations that perform a variety of key roles in this sector. These organisations, and their networks, are well placed to offer industry insights at the time of training package review. Industry engagement will include a broad and inclusive range of stakeholders beyond those included in this list, as relevant to the nature of training package product review.

- Government departments and agencies
- Peak and industry associations
 - The Council of Ambulance Authorities
 - Paramedics Australasia
 - Australia and New Zealand College of Paramedics
- Employee associations
 - Health Services Union
 - United Voice
 - National Council of Ambulance Unions
- State and Territories service providers
 - Australian Capital Territory Ambulance Service
 - Ambulance Tasmania
 - Ambulance Victoria
 - NSW Ambulance
 - Queensland Ambulance Service
 - SA Ambulance Service
 - St. John Ambulance Northern Territory
 - St. John Ambulance Western Australia
- · Private employers
- Department of Defence
- Registered training providers both public and private.

Key statistics

 In November 2015, 16,783 ambulance officers and paramedics were employed. Employment is projected to grow by 11.0% in the five years to November 2020.²

- The majority of ambulance services businesses operate in Queensland with 23.1% of all businesses operating within this State. 0.7% operate in the Australian Capital Territory, making it the sector's smallest State/Territory.³
- 40 ambulance services businesses were operating in Australia for the year 2015-16.⁴

Challenges and opportunities in the sector

Population growth and demographic changes

Population growth has increased the number of potential users of ambulance services, while the ageing population has increased the pool of people who are more susceptible to acute health incidents, skeletal injuries and chronic disease and illness, and who require intervention by emergency response and ambulance workers.⁵

Furthermore, environmental and social changes have impacted on lifestyle behaviours that have contributed to an increase in lifestyle disorders such as type 2 diabetes, cardio-vascular disease and osteoarthritic problems.⁶ Additionally, funding changes and perceived access issues to GP's and local health services have increased reliance on emergency transport and services.⁷

Customer interaction

The above demographics also have heightened expectations of services and demands are forcing ambulance service providers to consider how they can best provide the required standard of medical emergency response and care. In particular, ambulance and paramedics service providers have had to build capacity to continue to deliver minimal response times to a diverse and multicultural customer base.

Growing privatisation

It is anticipated that State and Territory governments may follow the Victorian Government's lead by splitting emergency and non-emergency ambulance operations into distinct units and opening up the market for non-emergency services. Within Victoria and South Australia, contracts are issued to private operators for the provision of transport for non-emergency hospital incidents, accidents and workers compensation cases. Such models increase competition among private providers.⁸

 provide a suitable regulatory framework for the public and private sector paramedic workforce.⁹

Regulation and registration

Registered health practitioners operate in accordance with the Health Practitioners Regulation National Law. Currently the ambulance and paramedic workforce is not subject to registration. However, the Health Practitioner Regulation National Amendment Law 2017, to be passed through the Queensland Parliament and then other jurisdictions to become National, will see the establishment of the Paramedicine Board of Australia. The Paramedicine Board of Australia will commence in 2017 and approve the instruments to be used by the Australian Health Practitioners Regulation Agency (AHPRA) to commence registration of Paramedics from late 2018.

The regulation of paramedics as part of the National Scheme is expected to:

- protect the public by: establishing minimum
 qualifications and other requirements for the
 registration of a person as a paramedic; providing
 powers to deal effectively with paramedics who have
 an impairment that affects their practice, are poorly
 performing or who engage in unprofessional conduct
 or professional misconduct; and preventing persons
 who are not qualified, registered and fit to practise from
 using the title 'paramedic' or holding themselves out to
 be registered if they are not
- facilitate the provision of high quality education and training in paramedicine through the accreditation of training programs for registration purposes
- improve transparency and accountability in the delivery of public and private sector paramedicine services, and

C. Employment

Employment outlook

The past two decades have witnessed an increased demand for emergency ambulance services across the developed world. In Australia, the growing and ageing population has catalysed the increase in demand for emergency ambulance services over the past five years. The Ambulance Services Industry provides an essential public service and is heavily funded by State and Territory governments. While the propensity of the State and Territory governments to fund employment growth in this sector has led to a rise in the employment figures across this industry, historical trends suggest that governments can significantly cut funding for ambulance services when facing budgetary pressures. In

While employment for Ambulance Offices and Paramedics is expected to grow strongly to November 2020, (18,600 employed in the sector), future job openings are anticipated to be less than 5,000 over the five years to November 2019.¹²

- employment for Ambulance Officers and Paramedics to November 2020 is expected to grow strongly.
- This is a medium-sized occupation (16,800 in November 2015) suggesting that opportunities may be limited in some regions.
- Ambulance Officers and Paramedics have a very high proportion of full-time jobs (96.4 %). For Ambulance Officers and Paramedics working full-time, average weekly hours are 42.3 (compared to 40.2 for all occupations) and earnings are above average - in the seventh decile. Unemployment for Ambulance Officers and Paramedics is below average.¹³

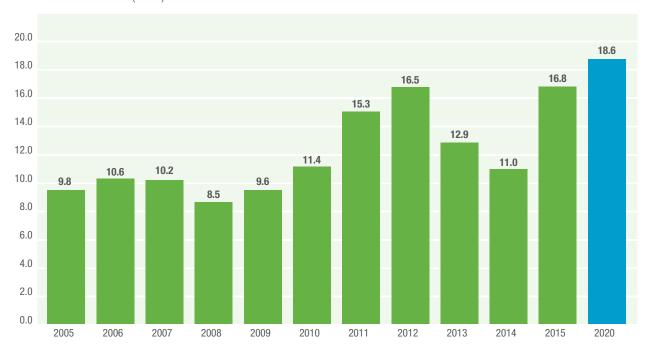
Employment levels, growth and projections

Ambulance Officers and Paramedics

Ambulance Officers and Paramedics provide emergency health care and transport for injured, sick, infirm and aged persons to medical facilities. The information provided below is inclusive of the following job titles:

- Ambulance Officer
- Intensive Care Ambulance Paramedic
- Over the five years to November 2019, the number of job openings for Ambulance Officers and Paramedics is expected to be low (equal to or less than 5,000). Job openings count both employment growth and turnover (defined as workers leaving their occupation for other employment or leaving the workforce).
- Employment for this occupation rose very strongly (in percentage terms) in the past five years and rose very strongly in the long-term (ten years). Looking forward,





Source: ABS Labour Force Survey, Department of Employment trend data to November 2015 and Department of Employment projections to 2020

Workforce challenges and opportunities

Occupational violence

Health care workers face a significant degree of occupational risk as they directly deal with individuals who may be stressed, unpredictable and violent. This is particularly true for ambulance workers who undertake their work on the front line, and are often exposed to volatile situations. Common factors contributing to the incidence of occupational violence include:

- characteristics of some medical conditions;
- characteristics of individuals:
- · characteristics of the relationship;
- organisational and environmental factors; and
- societal factors.¹⁴

More recently there has been an increased prevalence of risk associated with the use of drugs by the public where usage directly links to aggressive behaviour and induced psychosis. Victoria's 2015 'lce Action Plan' reports that between 2011 – 12 and 2012 – 13, the number of methamphetamine-related ambulance attendances increased by 88 % in metropolitan Melbourne and nearly 200 % in regional Victoria. ¹⁵

Adequate education and training is critical to ensure the ambulance and paramedic workforce is equipped with the required skills and knowledge to effectively manage situations that pose risks. Examples can be taken from the Queensland Ambulance Service Paramedic Safety Taskforce which outlined nine key initiatives for addressing the issue of occupational violence. Education and training and more specifically, the development of enhanced contemporary training modules combined with face-to-face practical sessions, was identified as one of the key initiatives. The focus of training modules developed

included skills to mitigate the risks of occupational violence, and assist paramedics to identify, de-escalate and withdraw safely from potentially dangerous or confronting situations. ¹⁶ Other examples include courses designed to specifically address key issues such as the recently developed 22314VIC Course in Working with People who are Affected by Amphetamine Type Stimulants.

Change management

Ambulance Officers and Paramedics face significant challenges in managing the changes which are associated with rapid developments in information and medical technologies and the evolving needs of the communities they service. The traditional model for ambulance service is changing with focus now on 'taking health care to the patient', rather than 'taking the patient to health care'. Current workers will need to find new ways of adapting and broadening their clinical skills, operational practices, technology and equipment in order to continue contributing to the broader health system. 18

Mental health

In the 2014-15 National Health Survey, ¹⁹ four million Australians (17.5%) reported having a mental or behavioural condition, with anxiety-related conditions (11.2% of the population) being the most frequently reported condition followed by affective disorders, including depression (9.3% of the population). Around 1 in 4 (26%) young people aged 16-24 years, experience a mental health condition with the most common conditions being anxiety conditions (15%) and substance abuse (13%).²⁰

With the increasing prevalence of mental health issues, it has been agreed that ambulance officers and paramedics must have basic skills and knowledge in this area and that this should be reflected in nationally recognised ambulance and paramedic qualifications.

Wellbeing and resilience

Repeated exposure to difficult situations and potentially traumatic events has a significant impact on the wellbeing, mental health and resilience of the ambulance workforce. The toll of being first to respond to emergency situations increases the potential for developing a mental health disorder or making an underlying condition worse. The industry has taken proactive steps to break down the stigma associated with mental health disorders and engage strategies for improved wellbeing and resilience, and supporting its workforce. Such work was recognised and promoted at the NSW Ambulance Staff Wellbeing and Resilience Summit in July 2016.

Industry recognises the key role education and training play in the development, and awareness, of workplace health and wellbeing and recommends that these topics be considered during qualification review.

D. Skills outlook

International and national trends in workplace design

Rise of the enterprise skills

Big data analysis research has illustrated that over the past three years, demand for enterprise skills has risen exponentially.²² Jobs that require digital literacy have increased by 212%, critical thinking by 158%, creativity by 65%, presentation skills by 25% and team work capabilities by 19%.²³ The data suggests that jobs of the future demand enterprise skills 70% more frequently than jobs of the past. In the knowledge economy, employability is directly related to education, with higher skilled jobs being more complementary to technology, increased productivity and earnings.²⁴

Of these, the most important skills for the ambulance and paramedic workforce include critical thinking; service orientation; communication; complex problem solving; team work; time management; literacy; science and systems analysis.²⁵

Digital change

The exponential rise in technological advances is transforming and reshaping the workforce and redefining iobs.²⁶

For the ambulance services industry, the major areas of technological change have been in ambulance dispatch, communication and patient care. Computer Aided Dispatch (CAD), Automatic Vehicle Location (AVL) and mobile data terminals are used in ambulances to reduce communication errors, improve response times, improve forward planning and reduce operating costs.²⁷ Furthermore, the CAD, AVL and mobile data systems can be integrated with financial and management information systems to manage patient accounting, report response statistics and manage the ambulance fleet.²⁸ These changes will have an impact on how communication skills and knowledge requirements are reflected in ambulance and paramedic training package products.

Similarly telehealth (the use of telecommunication techniques for the purpose of providing telemedicine, medical education, and health education over a distance) has contributed to the changing nature of operations. Telehealth is utilised to communicate data and information between operators in different locations. This method of communication aims to reduce the need to move patients, health care professionals and educators by instead sharing data, images and information.

The emerging advances in technology and its integration within the ambulance services industry place great importance on digital literacy and competencies for future job seekers.

Finally, in an age of rapidly changing technologies, the general assessment equipment used by clinicians has become more digitised and will continue to evolve to provide more clinical data for assessment, planning and treatment purposes. Therefore, the emerging advances in technology and its integration within the with ambulance and paramedic sector places great importance of digital literacy and competencies for future job seekers.

Top five skills required within the next three to five year period
Interpersonal skills and communication
Language, literacy and numeracy
Technology
Leadership
Critical thinking and clinical skills

When looking to broad workforce skills, varying interpretations and definitions are offered. The industry cautions that the description of a generic skill may have a vastly different meaning, and application, to different individuals and organisations. Industry therefore warns that a lack of consistent understanding requires that careful consideration be exercised when reviewing and determining industry skills priorities.

The above skills were informed through a variety of methods. This included:

- desktop research, undertaken to develop an understanding of existing research and views on skill requirements in this sector;
- an industry workforce survey, which was open to all stakeholders across all industries. The broad scope of the survey allowed a variety of participants from different industries to contribute, which in turn reflects the wide-ranging use of these training package products; and
- validation with the IRC, to confirm the findings properly reflected industry expectations on skill requirements within the next three to five year period.

GENERIC WORKFORCE SKILLS RANKED IN ORDER OF IMPORTANCE

Workforce Skill	Rank
Communication / Virtual collaboration / Social intelligence	1
Learning agility / Information literacy / Intellectual autonomy and Self-management	2
Design mindset / Thinking critically / System thinking / Solving problems	3
Language, Literacy and Numeracy (LLN)	4
Technology	5
Managerial skills/ Leadership	6
Customer service / Marketing	7
Science, Technology, Engineering and Mathematics (STEM)	8
Data analysis	9
Environmental and Sustainability	10
Entrepreneurial	11
Financial	12

E. Other relevant skills-related insights for this sector

The IRC has not identified any further issues to be addressed in this Industry Skills Forecast. However, further insight may be identified and considered when developing a Case for Change.

F. Proposed schedule of work: 2016-17 - 2019-20

Time critical issues

The training package products contained within this Industry Skills Forecast were last reviewed in 2015 and released on the national register, training.gov.au, in December 2015. The 2015 review process was extensive, with ongoing industry consultation informing a number of significant changes. Scheduling in this Industry Skills Forecast has considered the need to allow for the proper implementation and testing of training package products within the system prior to any further review work. As a result, training product review has been scheduled based on the timing of the last review and proposed for year three.

Interdependencies

Ambulance and paramedic qualifications will be impacted by the review of imported units of competency from the following training packages:

- Business Services Training Package
- · Community Services Training Package
- Health Training Package
- Training and Education Training Package
- Public Safety Training Package.

Where the IRC is advising that a training product will need to be reviewed more than once in the four-year period

The IRC notes that there may be instances of unforseen change triggering a need to review training package

products outside of where listed in the national schedule. Examples of unforeseen change include, but are not limited to, changes to legislation, regulation and industry licencing.

Where the review of a training product is expected to be contentious or involve lengthy work

It is difficult to predict if review of these training package products will be contentious or lengthy as the detail of proposed change has not yet been identified or considered by industry. At this time no significant issues have been detected, however the IRC notes that the very nature of training product review work will bring to light differing stakeholder views.

Anticipated legislative changes and the impact on proposed schedule of work

The legislative changes to the Health Practitioner Regulation National Law may present the need to review qualifications prior to year three as currently proposed.

G. IRC sign-off

This Industry Skills Forecast and Proposed Schedule of Work was agreed to by:
Alan Morrison, Chair of the Ambulance and Paramedic IRC
Signature of Chair
Date:

Ambulance and Paramedic IRC Proposed schedule of work 2016-17 to 2019-2020

Contact details: Alan Morrison, Chair of the Ambulance IRC; Melinda Brown, SkillsIQ General Manager. Date submitted to Department of Education and Training: 28 April 2017.

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SKILL SETS	Unit of competency name	Unit of Competency code	Certificate II in Medical Service First Response Certificate III in Ambulance Communications (Call-taking) Certificate III in Non-Emergency Patient Transport Certificate III in Basic Health Care Communications (Dispatch) Certificate IV in Ambulance Communications (Dispatch) Certificate IV in Health Care Diploma of Paramedical Science	Qualification code HLT21015 HLT31115 HLT41015 HLT41015 HLT51015	Health Health Health Health Health Health	HLT HLT HLT HLT HLT HLT HLT	(2018-2019) Based on timing of last review
			Advanced paramedical	HLTSS00063	Health	Η	Year 3
			Diploma of Paramedical Science	HLT51015	Health	긒	Year 3 (2018-2019) Based on timing of last review
HLT Health HLT51015			Certificate IV in Health Care	HLT41115	Health	무	Year 3 (2018-2019) Based on timing of last review
HLT Health HLT41115 HLT Health HLT51015			Certificate IV in Ambulance Communications (Dispatch)	HLT41015	Health	Ή	3 (2018-2019) Based on timing of last review
HLT Health HLT41015 HLT Health HLT51015			Certificate III in Basic Health Care	HLT31215	Health	긒	s (2018-2019) Based on timing of last review
HLT Health HLT31215 HLT Health HLT41015 HLT Health HLT41115 HLT Health HLT51015			Certificate III in Non- Emergency Patient Transport	HLT31115	Health	뒾	(2018-2019) Based on timing of last review
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/ HLT Health HLT31015 / HLT Health HLT31215 HLT Health HLT41015 HLT Health HLT41115 HLT Health HLT51015			Certificate II in Medical Service First Response	HLT21015	Health	긒	3 (2018-2019) Based on timing of last review
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Planned review start (Year)	Training package code	Training package name	Qualification code	Qualification name	Unit of Competency code	Unit of competency name
UNITS OF COMPETENCY						
Year 3	HLT	Health			HLTAMB001	Follow procedures for routine safe removal of patient
Year 3	HLT	Health			HLTAMB002	Implement safe access and egress in an emergency
Year 3	HLT	Health			HLTAMB003	Transport emergency patients
Year 3	H	Health			HLTAMB004	Conduct advanced clinical assessment
Year 3	HLT	Health			HLTAMB005	Receive and respond to requests for ambulance service
Year 3	HLT	Health			HLTAMB006	Assign and coordinate ambulance service resources
Year 3	HLT	Health			HLTAMB007	Assess and deliver basic clinical care
Year 3	HET	Health			HLTAMB008	Assess and deliver standard clinical care
Year 3	HLT	Health			HLTAMB009	Deliver intensive clinical care
Year 3	HLT	Health			HLTAMB010	Manage and coordinate resources for emergency operations
Year 3	HET	Health			HLTAMB011	Manage a routine non-emergency scene
Year 3	HLT	Health			HLTAMB012	Communicate in complex situations to support health care
Year 3	HLT	Health			HLTAMB013	Contribute to managing the scene of an emergency
Year 3	HCT	Health			HLTAMB014	Transport non-emergency patients under operational conditions

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Update numbers from 9 onwards accordingly.

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