### **EXPOSURE DRAFT**

# Non-Emergency Patient Transport Amendment Regulations 2021

The Governor in Council makes the following Regulations:

Dated: 2021

Responsible Minister:

Clerk of the Executive Council

# 1 Objective

The objective of these Regulations is to amend the Non-Emergency Patient Transport Regulations 2016 to further provide for the standards and requirements for the provision of non-emergency patient transport services under the Non-Emergency Patient Transport and First Aid Services Act 2003.

# 2 Authorising provisions

These Regulations are made under section 64 of the Non-Emergency Patient Transport and First Aid Services Act 2003.

### 3 Commencement

These Regulations come into operation on 30 September 2021.

# 4 Principal Regulations

In these Regulations, the **Non-Emergency Patient Transport Regulations 2016**<sup>1</sup> are called the Principal Regulations.

#### 5 Definitions

- (1) In regulation 5(1) of the Principal Regulations **insert** the following definitions—
  - "active management, in relation to a patient, means the patient requires treatment from the commencement of transport to maintain a stable clinical condition;
  - AED defibrillator means an automatic external defibrillator that provides the operator with an audible or visible prompt to discharge the defibrillator to deliver a shock to the patient when it recognises a shockable rhythm;
  - ambulance transport attendant means a person employed or engaged by a non-emergency patient transport service primarily to provide care and monitoring to low, medium or high acuity patients during their transport to or from a medical service;
  - certificate of roadworthiness means a certificate of roadworthiness issued under Chapter 6 of the Road Safety (Vehicles) Interim Regulations 2020<sup>2</sup> or any corresponding regulations made under the **Road Safety Act** 1986 in place of those Regulations;
  - full driver licence has the same meaning as in section 3(1) of the Road Safety Act 1986;
  - *licence holder* means a person who holds a nonemergency patient transport service licence;
  - patient transport officer means a person employed or engaged by a non-emergency patient transport service primarily—
    - (a) to provide care and monitoring to low, acuity patients during their transport to or from a medical service; and

- (b) to assist other staff members to provide care and monitoring to low, medium or high acuity patients during their transport to or from a medical service;
- registered paramedic, mean a person registered in the Register of Paramedics kept by the Paramedicine Board of Australia under the Health Practitioner Regulation National Law, other than as a student;
- sentinel event means an unexpected and adverse event that occurs infrequently in the provision of services by a non-emergency patient transport service and results in the death of, or serious physical or psychological injury to, a patient as a result of system and process deficiencies at the non-emergency patient transport service;".
- (2) In regulation 5(1) of the Principal Regulations in the definition of *infection control guidelines* for "2010" **substitute** "2019".
- (3) In regulation 5(1) of the Principal Regulations **omit** the definition of *shock advisory external defibrillator*.
- (4) In regulation 5(1) of the Principal Regulations for the definition of *the Act* substitute—
  - "the Act means the Non-Emergency Patient Transport and First Aid Services Act 2003:".
- 6 Criteria to be complied with before patient is transported

In regulation 10(4)(b)(iii) and (5)(c) of the Principal Regulations for "paramedic" **substitute** "registered paramedic".

7 New regulation 11 substituted

For regulation 11 of the Principal Regulations **substitute**—

# "11 Transport of low acuity patients

(1) A provider must ensure that a low acuity patient who is transported alone by the provider is visually monitored by a suitably qualified and competent crew member for the duration of the transport.

Penalty: 20 penalty units.

- (2) A provider must ensure that if 2 low acuity patients are transported in a vehicle—
  - (a) there are 2 crew members crewing the vehicle; and
  - (b) a suitably qualified and competent crew member travels in the patient compartment with the low acuity patients for the duration of the transport.

Penalty: 20 penalty units.

(3) A provider must ensure that no more than 2 low acuity patients are transported at any one time in a vehicle that is equipped with a stretcher.

Penalty: 20 penalty units.".

# 8 Regulation 14 substituted

For regulation 14 of the Principal Regulations **substitute**—

"14 High acuity or medium acuity patient must not be transported with another patient

A provider must ensure that a high acuity patient or a medium acuity patient is not

transported with another patient in the same vehicle.

Penalty: 20 penalty units.".

# 9 When clinical advice must be obtained before loading a patient

In regulation 17(2)(c) of the Principal Regulations for "paramedic" **substitute** "registered paramedic".

# 10 Competencies for staff of non-emergency patient transport services

- (1) In regulation 19(2)(c) and (3)(c) of the Principal Regulations for "paramedic" **substitute** "registered paramedic".
- (2) For regulation 19(4) of the Principal Regulations, **substitute**
  - "(4) A provider must ensure that an Ambulance Transport Attendant who crews a vehicle that is providing a non-emergency patient transport service operated by the provider—
    - (a) has at least 400 hours of supervised on road clinical practice experience in active patient care over a period not exceeding 2 years; or
    - (b) is supervised by a clinical supervisor.

Penalty: 20 penalty units.".

- (3) After regulation 19(4) of the Principal Regulations, **insert**
  - "(5) A provider must ensure that any Patient Transport Officer who crews a vehicle that is providing a non-emergency patient transport service operated by the provider—
    - (a) has at least 100 hours of on road clinical practice experience in active

patient care that is supervised by a clinical supervisor or a person to whom subregulation (4)(a) applies; or

(b) is supervised by a clinical supervisor or a person to whom subregulation (4)(a) applies.

Penalty: 20 penalty units.".

(6) A provider must ensure that any staff member of the provider who drives a vehicle that is providing a non-emergency patient transport service operated by the provider has a full driver licence.

Penalty: 20 penalty units.".

(7) In this regulation—

experience in active patient care does not include an observational shift.".

# 11 Assessment of competency

- (1) In regulation 20 of the Principal Regulations, for "employment by" **substitute** "service as a staff member with".
- (2) At the end of regulation 20 of the Principal Regulations, **insert**
  - "(2) A provider must ensure that the competency of a staff member after receiving training for the purpose of subregulation (1) is recorded and attested to by the person who did the training.

Penalty: 20 penalty units.

(3) A provider must keep the record and attestation referred to in subregulation (2) available for production to an authorised officer under section 48 of the Act.

Penalty: 20 penalty units.".

# 12 Skills maintenance training

- (1) In regulation 21(1)(c) of the Principal Regulations, for "practice." **substitute** "practice;".
- (2) After regulation 21(1)(c) of the Principal Regulations **insert**
  - "(d) mental health training.".
- (3) After regulation 21(2) of the Principal Regulations insert—
  - "(2A) A provider must ensure that any training of a staff member in the following competencies, that is required by these Regulations or by the provider, is carried out in the physical presence of the trainer—
    - (a) basic life support;
    - (b) advanced life support;
    - (c) use of bag valve mask;
    - (d) airway management;
    - (e) manual handling;
    - (f) stretcher handling.".
- (4) In regulation 21(3) of the Principal Regulations, for "and (2)" **substitute** ", (2) or (2A)".

# 13 Application for a non-emergency patient transport service licence

- (1) In regulation 25(3)(b) of the Principal Regulations, for "regulation 29" **substitute** "regulation 29(1) and (2)".
- (2) After regulation 25(3) of the Principal Regulations insert—
- "(4) Without limiting section 14(3) of the Act and subject to regulation 26(2), a person applying for a licence under section 14(1) of the Act must submit with the application a certificate of accreditation

of the provider's occupational health and safety plan.".

#### 14 Conditions on licence

At the end of regulation 26 of the Principal Regulations, **insert**—

- "(2) For the purposes of section 17(1)(a) of the Act, a non-emergency patient transport service licence granted to an applicant who does not have a current certificate of accreditation of its occupational health and safety plan at the time the licence is granted is subject to the condition that the licence holder must, within 3 months after being granted the licence—
  - (a) obtain a certificate of accreditation of its occupational health and safety plan; and;
  - (b) submit a copy of the certificate to the Secretary.".

# 15 New regulation 27A inserted

After regulation 27 of the Principal Regulations, insert—

# "27A Application to transfer a licence

- (1) For the purposes of section 23A of the Act, the form for an application to transfer a licence is the form set out in Schedule 4A;
- (2) For the purposes of section 23A(2)(b) of the Act, the prescribed fee is 49 fee units.

# 16 Development, contents and accreditation of quality assurance plan

(1) In the heading to regulation 29 of the Principal Regulations, for "and contents" substitute ", contents and accreditation".

- (2) After regulation 29(2) of the Principal Regulations, **insert**
  - "(3) A quality assurance plan must be accredited by an accreditation body.".

# 17 Compliance with quality assurance plan

In regulation 30 of the Principal Regulations, after "29(2)" **insert** "and (3)".

### 18 Revocation, suspension or expiry of accreditation

- (1) In the heading to regulation 32 of the Principal Regulations, after "expiry of" insert "accreditation of".
- (2) In regulation 32(1) of the Principal Regulations, for "quality assurance plan of the licence holder" **substitute** "accreditation of the licence holder's quality assurance plan".
- (3) In regulation 32(2) of the Principal Regulations, after "revocation" **insert** "of the accreditation".

#### 19 New Division 2A inserted in Part 4

After Division 2 of Part 4 of the Principal Regulations insert—

# "Division 2A—Occupational health and safety plan

# 32A Development and contents of occupational health and safety plans

- (1) A person who applies for a licence under section 14(3) of the Act must develop an occupational health and safety plan which complies with subregulation (2).
- (2) An occupational health and safety plan must include provisions in relation to the following matters—
  - (a) the maintenance of a hazard register;

- (b) incident reporting and management;
- (c) risk evaluation;
- (d) staff safety when manually handling patients;
- (e) recording of incidents and resulting actions.
- (3) An occupational health and safety plan must include copies of the current safety data sheets required to be kept under the Occupational Health and Safety Regulations 2017<sup>3</sup> in relation to hazardous chemicals used in the operation of the non-emergency patient transport service.
- (4) An occupational health and safety plan must be accredited by an accreditation body.

# 32B Compliance with occupational health and safety plan

A licence holder must maintain and comply with an occupational health and safety plan that complies with regulation 32A(2) and (3).

# 32C Audit of occupational health and safety plan

(1) If at any time during the duration of the licence the occupational health and safety plan of the licence holder is audited by an accreditation body, the licence holder must submit a copy of the audit report to the Secretary no later than 14 days after the licence holder receives a copy of the report from the accreditation body.

Penalty: 15 penalty units.

(2) If an audit report referred to in subregulation (1) contains a notification as to the existence of a risk of a high probability of harm or

injury to a patient or a staff member, the licence holder must report that risk to the Secretary no later than 24 hours after the licence holder receives a copy of the report from the accreditation body.

Penalty: 20 penalty units.

# 32D Revocation, suspension or expiry of occupational health and safety plan

 A licence holder must not operate a non-emergency patient transport service if the accreditation of the occupational health and safety plan of the licence holder is revoked or suspended or has expired.

Penalty: 20 penalty units.

(2) A licence holder must report immediately to the Secretary any suspension or revocation of the accreditation of the licence holder's occupational health and safety plan.".

### 20 Part 5 substituted

For Part 5 of the Principal Regulations substitute—

# "Part 5—Clinical governance

### 35 Clinical oversight committee

- (1) A licence holder must establish and maintain a clinical oversight committee.
- (2) The clinical oversight committee must have at least one member who is a registered health practitioner within the meaning of the Health Practitioner National Law.

### 36 Responsibilities of committee

The clinical oversight committee has the following responsibilities in relation to the service provided by the licence holder—

- (a) reviewing each sentinel event;
- (b) reviewing matters of clinical concern, including each critical incident;
- (c) reviewing each 000 telephone call made by staff of the service;
- (d) overseeing processes to set the scope of practice of the service to ensure it does not provide services beyond its competencies and ability;
- (e) overseeing processes to set the scope of clinical practice of all clinical staff;
- (f) reviewing the clinical practice protocols, processes and operating procedures of the service;
- (g) overseeing the verification of the credentials of all registered medical practitioners engaged by the service in any capacity-
  - (i) when they are engaged, and
  - (ii) subsequently every 3 years;
- (h) overseeing the auditing of patient care records and reviewing all measures taken as a result of reviews of those records;
- (i) keeping any staff survey data and reviewing all measures taken as a result of reviews of those surveys;
- (j) reviewing all complaints that relate to the experience of patients of the service;
- (k) overseeing processes to continually assess the capacity of the service to provide safe patient-centred care.

# 36A Meetings of committee

- (1) The clinical oversight committee must meet at least once in each 3 month period.
- (2) The clinical oversight committee must maintain records of its meetings including its decisions and the reasons for its decisions.

### 36B Staff surveys

- (1) A licence holder must conduct a staff survey at least once a year.
- (2) The primary purpose of a staff survey is to ascertain the views of staff on staff and patient safety.".

### 23 Patient care records

- (1) After regulation 38(1)(g) of the Principal Regulations, **insert**
  - "(ga) details of any monitoring or treatment provided to the patient during transportation;".
- (2) After regulation 38(4) of the Principal Regulations insert—
  - "(5) The provider must ensure that at least 50 per cent of patient care records for medium or high acuity patients are reviewed to determine if there are any clinical issues or issues relating to patient safety.".

# 24 Maintenance of vehicles and equipment

At the end of regulation 48 of the Principal Regulations **insert**—

"(2) The provider must ensure that if a vehicle is used to provide the non-emergency patient transport service—

- (a) the vehicle is examined and tested by a licensed tester annually in accordance with Part 6.4 of the Road Safety (Vehicles) Interim Regulations 2020<sup>4</sup> or any corresponding regulations made under the **Road Safety Act 1986** in place of those Regulations; and
- (b) a certificate of roadworthiness is issued in respect of the vehicle by the licensed tester testing the vehicle.".

# 25 Regulation 49A inserted

After regulation 49 of the Principal Regulations insert—

# "49A Mileage of vehicle

A provider must not use a vehicle for nonemergency patient transport if the mileage of the vehicle exceeds 400 000 kilometres.

Penalty: 20 penalty units.".

# 26 Interiors of road vehicles

- (1) After regulation 50(2) of the Principal Regulations insert—
  - "(2A) The provider must ensure that each vehicle that contains 2 stretchers has a minimum separation of 350mm between the stretchers.

Penalty: 10 penalty units.".

- (2) In regulation 50(7)(b) of the Principal Regulations for "Road Safety (Vehicles) Regulations 2009" **substitute** "Road Safety (Vehicles) Interim Regulations 2020<sup>5</sup> or any corresponding regulations made under the **Road Safety Act 1986** in place of those Regulations".
- (2A) In regulation 50(9) of the Principal Regulations **delete** the words "in accordance with the infection control guidelines".

- (3) After regulation 50(10) of the Principal Regulations insert—
  - "(11) The provider must ensure that, as soon as practicable after a vehicle reaches a mileage of 200 000 kilometres, the patient compartment of the vehicle is checked and serviced to ensure that—
    - (a) all fixtures and fittings are tightly fixed; and
    - (b) all compartment wall and floor surfaces are in an as new condition.

Penalty: 10 penalty units.".

# 27 Equipment

- (1) In regulation 51 of the Principal Regulations for "shock advisory external defibrillator" **substitute** "AED defibrillator".
- (2) At the end of regulation 51 of the Principal Regulations **insert**
  - "(2) A provider must ensure that all stretchers carried in vehicles are power lift stretchers.

Penalty: 20 penalty units.

(3) A provider must ensure that a vehicle used to collect a patient from the patient's home carries a lifting cushion.

Penalty: 20 penalty units.".

# 28 Regulation 51A inserted

After regulation 51 of the Principal Regulations insert—

# "51A Warning lights

A provider must ensure that all vehicles used for the transport of patients on a public road by the non-emergency patient transport service are equipped with warning lights that can be activated when at any incident attended by the vehicle.

Penalty: 20 penalty units.".

# 29 Regulation 52A inserted

After regulation 52 of the Principal Regulations insert—

# "52A Change to vehicle category code of vehicle

- (1) If a vehicle modification results in a change of vehicle category code of a vehicle, a provider must ensure that the vehicle is not used to transport patients on a public road unless the provider has provided the Secretary with—
  - (a) a copy of the vehicle assessment signatory scheme approval certificate; or
  - (b) a photograph of the second stage of manufacture compliance plate.

Penalty: 20 penalty units.

(2) In this regulation—

vehicle category code has the same meaning as it has in the relevant design rules within the meaning of the Road Safety (Vehicles)
Interim Regulations 2020<sup>6</sup> or any corresponding regulations made under the Road Safety Act 1986 in place of those Regulations."

# 30 Public and professional liability insurance

In regulation 53 of the Principal Regulations, for "\$10 000 000" **substitute** "and "\$20 000 000".

#### 31 Part 12 inserted

After Part 11 of the Principal Regulations insert—

# "Part 12—Transitional provisions

# 62 Transitional provision—mileage

A provider is not required to comply with regulation 49A until 30 September 2026 in relation to a vehicle that was being used by the provider for the non-emergency patient transport service immediately before the commencement of the Non-Emergency Patient Transport Amendment Regulations 2021.

# 63 Transitional provision—minimum separation requirement

A provider is not required to comply with regulation 50(2A) until 30 September 2026 in relation to a vehicle that was being used by the provider for the non-emergency patient transport service immediately before the commencement of the Non-Emergency Patient Transport Amendment Regulations 2021.

# 64 Transitional provision—power lift stretchers and lifting cushions

(1) A provider is not required to comply with regulation 51(2) until 30 September 2024 in relation to a vehicle that was being used by the provider for the non-emergency patient transport service immediately before the commencement of the Non-Emergency Patient Transport Amendment Regulations 2021.

(2) A provider is not required to comply with regulation 51(3) until 30 September 2022 in relation to a vehicle that was being used by the provider for the non-emergency patient transport service immediately before the commencement of the Non-Emergency Patient Transport Amendment Regulations 2021."

# 32 Schedule 2 substituted

For Schedule 2 to the Principal Regulations **substitute**—

"Schedule 2—Application for variation or transfer of certificate of approval in principle to operate a non-emergency patient transport service

Regulation 24(1)

APPLICATION FOR VARIATION OR TRANSFER OF CERTIFICATE OF APPROVAL IN PRINCIPLE TO OPERATE A NON-EMERGENCY PATIENT TRANSPORT SERVICE

# SECTION A

- (1) Full name of applicant:
- (2) Postal address of applicant:
- (3) The name, telephone number and email address of a contact person for the purposes of the application:

#### **SECTION B**

- (1) The name (or proposed name) of the non-emergency patient transport service, its street address and the municipal district in which the service is to be located:
- (2) The number and type of vehicles (even if no changes are proposed):

Type of vehicle

Number of vehicles

Sedan, hatchback or station wagon vehicle

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Double stretcher vehicle

Single stretcher vehicle

High acuity transport vehicle

Wheelchair vehicle

Fixed wing aircraft

Rotary wing aircraft

- (3) This application is for—
  - \* variation of the certificate of approval in principle or any condition to which it is subject; or
  - \* transfer of the certificate of approval in principle to another person.
- (4) If the application relates to the variation of the certificate of approval in principle, the reason for the proposed variation:
- (5) If the application relates to the transfer of the certificate of approval in principle to another person—
- (a)the name of that person; and
- (b)the postal address of that person; and
- (c)that person's telephone number and email address.
  - (6) If the proposed transferee is a body corporate, the name and address of any director or officer of the body corporate who may exercise control over the non-emergency patient transport service:

Signature of applicant:

Name of each signatory:

Date:

\*Delete if inapplicable.".

### 33 Schedule 4A inserted

After Schedule 4 to the Principal Regulations insert—

"Schedule 4A—Application for transfer of licence to operate a non-emergency patient transport service

Regulation 27A(1)

	SECTION A
(1)	Full name of applicant:
(2)	Postal address of applicant:
(3)	The name, telephone number and email address of a contact person for the purposes of the application:
	SECTION B
(1)	The name of the non-emergency patient transport service, its street address and the municipal district in which the service is to be located:
(2)	The number and type of vehicles (even if no changes are proposed):
Туре	of vehicle Number of vehicles
Sedar	n, hatchback or station wagon vehicle
Doub	le stretcher vehicle
Single	e stretcher vehicle
High	acuity transport vehicle
Whee	lchair vehicle
Fixed	wing aircraft
Rotar	y wing aircraft
(3)	In relation to the person to whom the licence is to be transferred
	(a) the name of that person; and
	(b)the postal address of that person; and
	(c)that person's telephone number and email address.
(4)	If the proposed transferee is a body corporate, the name and address of any director or officer of the body corporate who may exercise control over the non-emergency patient transport service:
Signa	ture of applicant:
Name	of each signatory:
Date:	ıı

### 34 Schedule 5 substituted

For Schedule 5 to the Principal Regulations **substitute**—

# "Schedule 5—Application for variation of a non-emergency patient transport service licence

Regulation 28(1)

# APPLICATION FOR VARIATION OF A NON-EMERGENCY PATIENT TRANSPORT SERVICE LICENCE

#### SECTION A

- (1) Full name of applicant:
- (2) Postal address of applicant:
- (3) The name, telephone number and email address of a contact person for the purposes of the application:

### **SECTION B**

- (1) The nature of the variation sought (variation of licence or variation of condition to which licence is subject):
- (2) Details of the variation sought, including the proposed acuity level:
- (3) The number and type of vehicles (even if no changes are proposed):

Type of vehicle

Number of vehicles

Sedan, hatchback or station wagon vehicle

Double stretcher vehicle

Single stretcher vehicle

High acuity transport vehicle

Wheelchair vehicle

Fixed wing aircraft

Rotary wing aircraft

(4) If regulation 52A(1) applies to the variation, attach:

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(a)a copy of the vehicle assessment signatory scheme approval certificate; or

(b)a photograph of the second stage of manufacture compliance plate.

Signature of applicant:

Name of each signatory:

Date: ".

# 35 Schedule 6 revoked

Schedule 6 to the Principal Regulations is revoked.

### Endnotes

# **Endnotes**

# Table of Applied, Adopted or Incorporated Matter

The following table of applied, adopted or incorporated matter is included in accordance with the requirements of regulation 5 of the Subordinate Legislation Regulations 2014.

Statutory rule provision	Title of applied, adopted or incorporated document	Matter in applied, adopted or incorporated document
Regulation 5(1), definition of infection control guidelines	National Health and Medical Research Council's Australian Guidelines for the Prevention and Control of Infection in Healthcare published by the Commonwealth in 2019	The whole
Regulation 39(1)(g)	National Health and Medical Research Council's Australian Guidelines for the Prevention and Control of Infection in Healthcare published by the Commonwealth in 2019	Section 4.2.1
Regulation 46(1)	National Health and Medical Research Council's Australian Guidelines for the Prevention and Control of Infection in Healthcare published by the Commonwealth in 2019	Section 3.1.3

<sup>&</sup>lt;sup>1</sup> Reg. 4: S.R. No. 28/2016.

<sup>&</sup>lt;sup>2</sup> Reg.5 : S.R. No. 96/2020.

 $<sup>^3</sup>$  Reg.19 : S.R. No. 22/2017 as amended by S.R. Nos 71/2018, 176/2018, 71/2019, 84/2020, 106/2020, 141/2020 and 8/2021.

<sup>&</sup>lt;sup>4</sup> Reg.24 : S.R. No. 96/2020.

<sup>&</sup>lt;sup>5</sup> Reg.26 : S.R. No. 96/2020.

<sup>&</sup>lt;sup>6</sup> Reg.29 : S.R. No. 96/2020.

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# Endnotes

Statutory rule provision	Title of applied, adopted or incorporated document	Matter in applied, adopted or incorporated document
Regulation 47(2)	National Health and Medical Research Council's Australian Guidelines for the Prevention and Control of Infection in Healthcare published by the Commonwealth in 2019	Section 3.1.3