

Aboriginal and Torres Strait Islander Health Practitioner

Scope of Practice Guideline 2021



**Queensland
Government**

Aboriginal and Torres Strait Islander Health Practitioner: Scope of Practice Guideline

This resource was developed by the Rural and Remote Clinical Support Unit, Torres and Cape Hospital and Health Service, and the Workforce Strategy Branch, Department of Health.

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An electronic version of this document is available at www.health.qld.gov.au/clinical-practice/guidelines-procedures/clinical-staff/aboriginal-torres-strait-islander-health-practitioner/supporting-resources

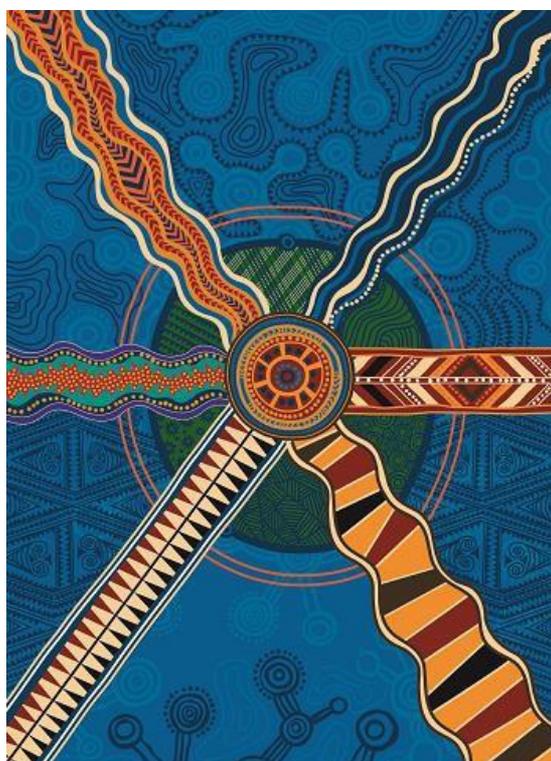
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Acknowledgement of Country

We pay our respects to the Aboriginal and Torres Strait Islander ancestors and custodians of this land, their spirits and their legacy. The foundations laid by these ancestors—our First Nations peoples—gives strength, inspiration and courage to current and future generations. We are committed to working towards a stronger and healthier Queensland community for Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander people.

Artwork produced for Queensland Health by Gilimbaa to promote Aboriginal and Torres Strait Islander health.



The artwork represents Aboriginal and Torres Strait Islander cultures in Queensland and speaks of the importance of traditional and cultural sensitivities.

The central circular motif represents Health in Queensland and the meeting place to trade knowledge about best health practice and procedures. The pathways leading both in and out represent people travelling from different professions, different communities, and different country, and the importance of everyone contributing equally to this journey. A journey of change and growth for a brighter, healthier and happier future for all Aboriginal and Torres Strait Islander Queenslanders.

The surrounding markings represent the important network of people from these communities, their connection to each other, and how they work together to empower Aboriginal and Torres Strait Islander Queenslanders to have long, healthy, productive lives.

The artwork reflects Queensland Health's commitment to Making Tracks towards closing the gap in health outcomes for Aboriginal and Torres Strait Islander Queenslanders.

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1. Purpose

The purpose of this guideline is to support the utilisation of Aboriginal and Torres Strait Islander Health Practitioners within Hospital and Health Services and Aboriginal and Torres Strait Islander Community Controlled Health Services in Queensland.

The Guideline:

- provides a definition of Aboriginal and Torres Strait Islander Health Practitioner
- provides information on the independent scope of practice for the Aboriginal and Torres Strait Islander Health Practitioner profession
- describes supervision and support arrangements.

2. Additional supporting resources

- Registration standards www.atsihealthpracticeboard.gov.au/
- Education and training requirements www.atsihealthpracticeboard.gov.au/
- Aboriginal and Torres Strait Islander Health Practitioner Clinical Governance Guideline
- Aboriginal and Torres Strait Islander Health Practitioner Practice Plan
- Guide to the completion of the Aboriginal and Torres Strait Islander Health Practitioner Practice Plan
- Aboriginal and Torres Strait Islander Health Practitioner Competency Assessment Tool
- Aboriginal and Torres Strait Islander Health Practitioner Reflective Assessment tool
- Guide to implementing the Aboriginal and Torres Strait Islander Health Practitioner role.

3. Objective

The Scope of Practice Guideline aims to:

- assist service providers to consider the valuable contribution of an Aboriginal and Torres Strait Islander Health Practitioner role in the delivery of culturally safe clinical services, and identify opportunities to establish Aboriginal and Torres Strait Islander Health Practitioner positions
- assist Aboriginal and Torres Strait Islander Health Practitioners, their clinical supervisors, and their operational managers to understand the role and respective responsibilities

- increase the capacity of the employing service provider, clinicians, and managers to support the role within the team
- assist clinical supervisors, with primary responsibility for the supervision of the Aboriginal and Torres Strait Islander Health Practitioner (the primary clinical supervisor), and the Aboriginal and Torres Strait Islander Health Practitioner to make decisions in relation to the individual scope of practice and level of supervision.

4. Definition of an Aboriginal and Torres Strait Islander Health Practitioner

An Aboriginal and Torres Strait Islander Health Practitioner is a person registered by the Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHPBA) to practice within the Aboriginal and Torres Strait Islander health practice profession in Australia. www.atsihealthpracticeboard.gov.au/Registration-Standards.aspx

An Aboriginal and Torres Strait Islander Health Practitioner is a person who:

- is an Aboriginal and/or Torres Strait Islander person; and identifies as an Aboriginal and/or Torres Strait Islander person; and is accepted as an Aboriginal and/or Torres Strait Islander person in the community in which he or she lives or has lived.
- holds an approved qualification (Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice), or equivalent qualifications, skills, and experience as accepted by ATSIHPBA (during the grandparenting period between 1 July 2012 and 30 June 2015).
- meets all other registration standards including criminal history, continuing professional development, recency of practice, professional indemnity insurance arrangements, and English language skills. ATSIHPBA registration standards may be accessed at: www.atsihealthpracticeboard.gov.au/Registration-Standards.aspx

4.1 Title

The titles of Aboriginal and Torres Strait Islander Health Practitioner, Aboriginal Health Practitioner, and Torres Strait Islander Health Practitioner are protected titles under the *Health Practitioner Regulation National Law Act 2009* (the National Law), which governs the national registration and accreditation scheme for the health professions.

Only persons registered with ATSIHBA may use one of these titles. If a person who is not registered with ATSIHBA uses one of these titles, this is deemed to be 'holding out' and is an offence under the National Law which is subject to penalties.

An Aboriginal and Torres Strait Islander Health Practitioner should not use this title in the workplace unless they are employed in an Aboriginal and Torres Strait Islander Health Practitioner position.

5. Aboriginal and Torres Strait Islander roles

There are a wide range of Aboriginal and Torres Strait Islander workforce roles across health services in Queensland. This table illustrates a broad range of activities that may be performed by each role in Queensland Health is provided for comparison purposes only.

Table 1. Summary comparison of roles

Aboriginal and Torres Strait Islander Hospital Liaison Officer	Aboriginal and Torres Strait Islander Health Worker	*Aboriginal and Torres Strait Islander Health Worker Isolated Practice Area (IPA)	Aboriginal and Torres Strait Islander Health Practitioner
Provides services including support, advocacy and liaison for Aboriginal and Torres Strait Islander people within an acute care setting	Provides services including access, liaison, health promotion/education and preventative health services to the Aboriginal and Torres Strait Islander community.	Provides clinical services within a multidisciplinary team to an Aboriginal and Torres Strait Islander community, including the use of scheduled medicines within Isolated Practice Areas** within the Torres and Cape, North West and Cairns and Hinterland HHSs only.	Provides clinical services within a multidisciplinary team, including the use of scheduled medicines in any Isolated Practice Area* when employed within a Queensland Hospital and Health Service or Aboriginal and Torres Strait Islander Community Controlled Health Service.

*An Aboriginal and Torres Strait Islander Health Worker Isolated Practice Area (IPA) is defined in the *Medicines and Poisons (Medicines) Regulation 2021* as an Indigenous health worker

**As defined in Schedule 20 and 22 of the *Medicines and Poisons (Medicines) Regulation 2021*

6. Scope of practice for Aboriginal and Torres Strait Islander Health Practitioners

The term '*Scope of Practice*' refers to:

1. A **profession's scope of practice**. This is the full spectrum of functions and activities that an individual within their profession is educated, competent, and authorised to perform. A profession's Scope of Practice is influenced by legislation, models of care, policy, required education, and registration and accreditation standards if applicable.
2. An **individual's scope of practice**. This is the scope of practice that an individual is educated, authorised and competent to perform relevant to their specific employed position. This individual scope of practice must be within the scope of practice defined for their profession.

7. Determining scope of practice for Aboriginal and Torres Strait Islander Health Practitioners

Individual scope of practice, within the profession's independent scope of practice, may differ between Aboriginal and Torres Strait Islander Health Practitioners.

Individual scope of practice is influenced by (but not limited to) the type of employing service provider, community needs, models of care, and the Aboriginal and Torres Strait Islander Health Practitioner's:

- registration status including any conditions, undertakings or notations on their registration
- formal qualifications
- knowledge and skills gained through accredited education, on the job experience, and training
- assessed competencies
- role description and specific job requirements including the models of care
- level and type of supervision required.

An Aboriginal and Torres Strait Islander Health Practitioner will have a defined individual scope of practice outlined in a Practice Plan. The individual scope of practice is to be reviewed on an annual basis, taking into consideration the professional growth of the individual and role requirements.

Completion of the Practice Plan in the approved form is required under the *Medicines and Poisons (Medicines) Regulation 2021* for Aboriginal and Torres Strait Islander Health Practitioners to lawfully use scheduled medicines authorities under the MPMR in accordance with the Extended Practice Authority 'Aboriginal and Torres Strait Islander Health Practitioners'.

Offences and penalties under the *Medicines and Poisons Act 2019* will apply if the Aboriginal and Torres Strait Islander Health Practitioner uses scheduled medicines without a completed and current approved Practice Plan.

The approved Aboriginal and Torres Strait Islander Health Practitioner Practice Plan template and a supporting guide for completion is at www.health.qld.gov.au/clinical-practice/guidelines-procedures/clinical-staff/aboriginal-torres-strait-islander-health-practitioner/supporting-resources

While not required under legislation, the use of a Practice Plan for Aboriginal and Torres Strait Islander Health Worker IPAs is supported.

8. Aboriginal and Torres Strait Islander Health Practitioners and scheduled medicines authorities

An Aboriginal and Torres Strait Islander Health Practitioner role is predominately a clinical role for supporting diagnosis, treatment, education, and health promotion to support on-going care.

Aboriginal and Torres Strait Islander Health Practitioners who are employed in an Aboriginal and Torres Strait Islander Health Practitioner position in a Hospital and Health Service or Aboriginal and Torres Strait Islander Community Controlled Health Services within defined isolated practice areas*, are authorised in accordance with the *Medicines and Poisons (Medicines) Regulation 2021* in accordance with the Extended Practice Authority 'Aboriginal and Torres Strait Islander Health Practitioners':

-

*an isolated practice area means –

- a place that is at Cow Bay, Mapoon or Weipa;
- or a place that is—
 - within the area of a local government mentioned in Schedule 20 of the *Medicines and Poisons (Medicines) 2021*; and
 - remote from pharmaceutical services; or
 - a clinic conducted by the Royal Flying Doctor Service (Qld section) in an area isolated from medical, pharmaceutical and hospital services; or
 - a plane operated by the Royal Flying Doctor Service (Qld section).

Schedule 20 identifies the areas of local government forming isolated practice areas:

Aurukun	Central	Hope Vale	Napranum	Tablelands
Balonne	Highlands	Isaac	North Burnett	Torres
Banana	Charters	Kowanyama	Northern	Torres Strait
Barcaldine	Towers	Lockhart River	Peninsula Area	Island
Barcoo	Cloncurry	Longreach	Palm Island	Western Downs
Blackall	Cook	Maranoa	Paroo	Winton
Tambo	Croydon	Mareeba	Pormpuraaw	Woorabinda
Boulia	Diamantina	McKinlay	Quilpie	Wujal
Bulloo	Doomadgee	Mornington	Richmond	Yarrabah.
Burke	Douglas	Mount Isa		
Carpentaria	Etheridge	Murweh		
	Flinders			

A map of Queensland Local Government Areas is available at:

www.dilgp.qld.gov.au/resources-ilgp/maps/local-government-maps.html

9. Using scheduled medicines under an emergency order

The *Medicines and Poisons Act 2019* provides for the Chief Executive to make emergency orders that authorises a person to carry out a regulated activity with a medicine or poison, such as in a biosecurity event, in a disaster situation, a declared public health emergency, or another event at State or local level that poses a health risk, including through infection. (see sections 57, 58 and 59). Aboriginal and Torres Strait Islander Health Practitioners may be authorised to use medicines under an emergency order e.g. for COVID-19 vaccination services.

10. Using scheduled medicines with health management protocols

The *Primary Clinical Care Manual* (and as revised every 2 years) is the recognised health management guideline for Aboriginal and Torres Strait Islander Health Practitioner practice.

- It should be noted that the completion of specific specialised skills sets may be required for the Aboriginal and Torres Strait Islander Health Practitioner to deliver a service e.g. completion of the following elective units of competency are a mandatory prerequisite to be approved to apply topical fluoride:
 - HLTOHC001 Recognise and respond to oral health issues
 - HLTOHC002 Inform and support patients and groups about oral health
 - HLTOHC006 Apply fluoride varnish.

The *Chronic Conditions Manual: Prevention and Management of Chronic Conditions in Australia* is a relevant practice guideline for Aboriginal and Torres Strait Islander Health Practitioner practice.

Scheduled medicines authorities will be utilised **only** within the context of the individual Aboriginal and Torres Strait Islander Health Practitioner's employed position and their Practice Plan.

Individual scope of practice **must** be within any conditions, undertakings, or notations on the practitioner's registration and in accordance with the practitioner's assessed competence.

11. The Aboriginal and Torres Strait Islander Health Worker with Isolated Practice Authorisation (IPA) role and scheduled medicines

An Aboriginal and Torres Strait Islander Health Worker IPA role is a clinical role established in 2007, and was provided medicines authorities to meet clinical service needs in Aboriginal and Torres Strait Islander communities in isolated practice areas within Torres and Cape, North West, and Cairns and Hinterland Hospital and Health Services only. The worker must hold a relevant Diploma qualification and have completed approved isolated practice training. The IPA qualification is no longer delivered and there will be no further growth of this workforce. However, there is no intent to phase out the role, and currently employed 11

Aboriginal and Torres Strait Islander Health Worker IPA staff within the above Hospital and Health Services continue to provide a valued clinical service to the communities in which they work.

Aboriginal and Torres Strait Islander Health Workers who hold the Isolated Practice Authorisation may continue to possess, give a treatment dose and administer medications under the *Medicines and Poisons (Medicines) Regulation 2021* in accordance with the Extended Practice Authority 'Indigenous Health Workers', whilst working within their individual practice scope without obtaining registration through ATSIHPBA.

A comparison of scheduled medicines authorities for both Aboriginal and Torres Strait Islander Health Worker IPA (defined as Indigenous health workers under the *Medicines and Poisons (Medicines) Regulation 2021*) and Aboriginal and Torres Strait Islander Health Practitioners is outlined at Table 5.

12. Supervision and support for Aboriginal and Torres Strait Islander Health Practitioners

The activities that an Aboriginal and Torres Strait Islander Health Practitioner can undertake is also dependent on the type of supervision and support available.

There are two types of supervision available to Aboriginal and Torres Strait Islander Health Practitioners.

12.1 Operational supervision

Refers to the day-to-day management and supervision required to assist with performance of duties and meeting the policy and legislative requirements of employment. Operational supervision may include (but not limited to):

- performance development i.e. Performance Appraisal and Development
- performance in accordance with the Role Description
- mandatory training
- rostering/timesheets
- orientation and inductions
- support and guidance.

12.2 Clinical supervision

The primary clinical supervisor is the person who has primary responsibility for the clinical supervision of the work performed by the Aboriginal and Torres Strait Islander Health practitioner in their employed position. The primary clinical supervisor is responsible for developing and agreeing to the Practice Plan in collaboration with the individual Aboriginal and Torres Strait Islander Health Practitioner.

It is recognised that other clinicians may also provide clinical supervision to the individual Aboriginal and Torres Strait Islander Health Practitioner for specific activities or in certain locations. This may also occur if the primary clinical supervisory is not available.

The clinical supervisor can only supervise Aboriginal and Torres Strait Islander Health Practitioner practice that is within their own scope of practice.

Supervision of the use of scheduled medicines authorities must be performed by a clinical supervisor who has the same medicines authorities within the supervisor's individual practice scope.

Supervision may be either direct/personal (where the clinical supervisor is directly observing practice e.g. in person or via telehealth) or indirect (where the clinical supervisor is available but not present).

12.2.1 Primary clinical supervisors

Deciding which clinician provides primary clinical supervision depends on the context, including the clinical setting, and the availability and skill mix of staff. Clinical supervision can be provided by a:

- medical officer
- registered nurse
- midwife
- allied health professional
- dentist
- Aboriginal and Torres Strait Islander Health Practitioner – at least 2 years continuous recent experience with the type of supervision required
www.atsihealthpracticeboard.gov.au/
- Aboriginal and/or Torres Strait Islander Health Worker IPA - at least 2 years continuous recent experience with the type of supervision required.

12.2.2 Effective clinical supervision

Providing effective clinical supervision includes:

- understanding Aboriginal and Torres Strait Islander Health Practitioner roles and responsibilities
- understanding the clinical unit components of the Certificate IV Aboriginal and/or Torres Strait Islander Primary Health Care Practice qualification
- setting clear expectations of the clinical supervisory relationship
- developing the individual Practice Plan in collaboration with the Aboriginal and Torres Strait Islander Health Practitioner and undertaking scheduled reviews of the Practice Plan (for the primary clinical supervisor)
- using and maintaining clinical supervision documentation i.e. Practice Plan, Performance Appraisal and Development
- evaluating the effectiveness of supervision
- setting learning goals
facilitating reflective practice
- providing a culturally safe and respectful work environment.

For further details: ATSIHPBA www.atsihealthpracticeboard.gov.au/

12.3 Support

Aboriginal and Torres Strait Islander Health Practitioners may receive three types of support.

12.3.1 Professional support

Provides a mechanism where Aboriginal and Torres Strait Islander Health Practitioners can discuss their individual scope of practice with a senior and experienced Aboriginal and Torres Strait Islander Health Practitioner or Aboriginal and Torres Strait Islander Health Worker IPA. This may include:

- discussing their role
- work environment
- professional development
- any stressors encountered.

Professional support may be provided through Aboriginal and Torres Strait Islander Health Practitioner or Aboriginal and Torres Strait Islander Health Worker forums and specific Aboriginal and Torres Strait Islander health program networks.

12.3.2 Mentoring support

Mentoring refers to a workplace partnership between two or more people that gives employees the opportunity to share their professional and personal experiences. Aboriginal and Torres Strait Islander mentoring aims to assist Aboriginal and Torres Strait Islander employees to feel more confident within the organisation in which they work.

Mentoring support for Aboriginal and Torres Strait Islander Health Practitioners should:

- provide structured support to assist the Aboriginal and Torres Strait Islander Health Practitioners to define their own learning experience, improve performance and develop capabilities
- benefit the mentor by providing an opportunity for mentors to develop their own leadership capacity
- contribute to improving the employing service provider's performance, by ensuring that the mentoring support is consistent and compatible with:
 - the employing service provider's vision and business plan
 - induction for staff in new roles
 - leadership and management development
 - career development opportunities
 - succession planning.

Mentoring support can be provided by:

- Aboriginal and Torres Strait Islander or non- Aboriginal and Torres Strait Islander staff
- Aboriginal and Torres Strait Islander Health Practitioners
- Aboriginal and Torres Strait Islander Health Worker IPA
- other health professions.

12.3.3 Cultural support

Cultural support aims to support Aboriginal and Torres Strait Islander Health Practitioners working within a mainstream health system.

Other Aboriginal and Torres Strait Islander staff working within the employing service provider can assist with workplace cultural issues, including the expectation of their community in relation to the role and the individual scope of practice.

Table 2. Broad range of activities that can be undertaken by each role

Activities - broad range and not limited to	Aboriginal and Torres Strait Islander Liaison Officer	Aboriginal and Torres Strait Islander Health Worker	Aboriginal and Torres Strait Islander Health Worker IPA*	Aboriginal and Torres Strait Islander Health Practitioner
Community Engagement	✓	✓	✓	✓
Access	✓	✓	✓	✓
Liaison	✓	✓	✓	✓
Support	✓	✓	✓	✓
Advocacy	✓	✓	✓	✓
Cultural support & safety	✓	✓	✓	✓
Health education & promotion	✓	✓	✓	✓
Referral	✓	✓	✓	✓
Prevention		✓	✓	✓
Assessment			✓	✓
Intervention			✓	✓
Outreach services		✓	✓	✓
Community development		✓		
Case management	✓		✓	✓
Assist with pre-admission	✓			
Discharge planning	✓			

Initial diagnosis			✓	✓
Monitoring			✓	✓
Care evaluation			✓	✓
Clinical activities			✓	✓
Working with medicines			✓ **	✓ **

* Defined in the *Medicines and Poisons (Medicines) Regulation 2021* as Indigenous health worker

** Refer to Table 5

Table 3: Activities that may be undertaken by an Aboriginal and Torres Strait Islander Health Practitioner within their independent scope of practice

This list is drawn from the core competencies gained through the completion of the Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice.

Aboriginal and Torres Strait Islander Health Practitioners may have also attained additional competencies in a wide range of specialised skills sets as part of the elective component of their qualification. This may include skill sets in areas such as (but not limited to):

- children and young people
- maternal and infant health
- eye health
- sexual health
- burns
- oral health
- pathology and blood collection
- population and environmental health
- alcohol and other drugs, smoking cessation
- social and emotional well-being
- chronic disease
- domestic and family violence
- disability
- health promotion and community intervention.
- project management
- supervision.

Activities within Independent Scope	Aboriginal and Torres Strait Islander Health Practitioner
Health education & promotion	✓
Client support	✓
Identification of health needs	✓
Referral of patients/clients	✓
Information & advice	✓
Client & community advocacy	✓
Assist with client communication (e.g. interpreting medical terminology)	✓
First point of contact for counseling & referral	✓
Undertake health program care duties (e.g. drug & alcohol, mental health, family health, sexual health etc.)	✓
Provide information about healthy lifestyles and support changes in lifestyle (e.g. nutrition, exercise, smoking etc.)	✓
Provide information about chronic disease care	✓
Provide group based learning activities	✓
Health screening & assessment	✓
Basic first aid	✓

Activities within Independent Scope	Aboriginal and Torres Strait Islander Health Practitioner
Deliver primary health care programs	✓
Basic health care	✓
Basic dressing	✓
Take blood	✓
Assist with evacuation	✓
Accident and first aid medical care	✓
Liaise with health professionals about medical advice & treatment	✓
Observations (temperature, pulse, blood pressure, respirations)	✓
Participate in doctor clinics	✓
Limited/basic assessment of patients as presented	✓
Assessment of patients as presented	✓
Case management/develop & monitor a case plan	✓
Primary health care interventions	✓
Provide a range of primary clinical care services	✓

Activities within Independent Scope	Aboriginal and Torres Strait Islander Health Practitioner
Monitor community to comply with health checks	✓
Provide information about commonly used medicines*	✓
Review treatment plans and medication regimes*	✓
Initiate, undertake and interpret certain clinical assessments	✓
Assess medicines history*	✓
Monitor effects of medicines*	✓
Promote appropriate use of medicines*	✓
Possess, place a purchase order, administer and provide a treatment dose of medicine under the <i>Medicine and Poisons (Medicines) Regulation 2021</i> in accordance with the Extended Practice Authority 'Aboriginal and Torres Strait Islander Health Practitioner'	✓
Support clients in the safe use and compliance of medicines*	✓
Collect specimens according to policies and protocols	✓
Maintain medical equipment	✓
Organise follow-up care	✓
Identify symptoms of common disease/infection	✓
Collaborate effectively with other health care professionals to facilitate a multidisciplinary approach to client care	✓

Activities within Independent Scope	Aboriginal and Torres Strait Islander Health Practitioner
Participate in and facilitate the development of service goals & plans, policies & procedures	✓
Participate in professional networks/associations to enhance personal knowledge, skills & relationships	✓
Undertake self-development opportunities to promote & maintain knowledge & competence	✓
Network & liaise with other service providers	✓
Document care given	✓
Manage the workload of others, and supervise & mentor staff	✓
Document, collect & interpret health data and information	✓
Use patient information management systems	✓
Other activities in line with elective specialised skills sets completed under the Cert IV qualification or in addition to the Cert IV primary qualification.	✓

*As defined in the *Medicines and Poisons (Medicines) Regulation 2021*

Table 4: Benefits of defining individual scope of practice

<p>Aboriginal and Torres Strait Islander Health Practitioner</p>	<ul style="list-style-type: none"> ▪ clarity of roles and responsibilities, and functions required to be performed ▪ confidence to practice safely within their individual scope of practice. ▪ ability to articulate when an activity is outside their individual scope of practice ▪ increased job satisfaction due to role clarity, definition and structure ▪ meets legislative requirements for a Practice Plan under the <i>Medicines and Poisons (Medicines) Regulation 2021</i>.
<p>Employing service provider</p> <ul style="list-style-type: none"> ▪ Hospital and Health Services ▪ Aboriginal and Torres Strait Islander Community Controlled Health Services 	<ul style="list-style-type: none"> ▪ improved health outcomes for Aboriginal and Torres Strait Islander peoples, using <i>Closing the Gap</i> to build a strong culturally appropriate and culturally capable workforce ▪ clarity of practice boundaries enhances the effectiveness of partnerships between Aboriginal and Torres Strait Islander Health Practitioners and other health professionals ▪ enhanced accountability, responsibilities, communication and referral processes ▪ increased capacity to align Aboriginal and Torres Strait Islander Health Practitioners to meet identified service gaps and needs ▪ clinical supervisors and operational managers have increased capacity to monitor and review the roles and performance of Aboriginal and Torres Strait Islander Health Practitioners ▪ promotes Medicare item numbers accessible to Aboriginal and Torres Strait Islander Health Practitioners to increase own source revenue opportunities.
<p>Aboriginal and Torres Strait Islander clients</p>	<ul style="list-style-type: none"> ▪ culturally appropriate client driven care ▪ improved quality and safety of client care ▪ increased community health promotion and education.

Table 5: Comparison of scheduled medicines authorities for Indigenous health workers and Aboriginal and Torres Strait Islander Health Practitioners **

Please refer to the *Medicines and Poisons (Medicines) Regulation 2021* for specific detail.

Scope of scheduled medicines authorities	Aboriginal and Torres Strait Islander IPA*	Aboriginal and Torres Strait Islander Health Practitioner
Employer:	Hospital and Health Service	Hospital and Health Service or Aboriginal and Torres Strait Islander Community Controlled Health Services
Location (1):	Isolated Practice Areas within Torres and Cape HHS North West HHS Cairns and Hinterland HHS	Any Isolated Practice Area in Queensland
Location (2):	Working within an Aboriginal or Torres Strait Islander Community	Not limited to working within an Aboriginal or Torres Strait Islander Community
on the prescription of:	Medical practitioner Nurse practitioner Physician assistant	Medical practitioner Nurse practitioner Dentist (only for S4)
give a treatment dose or administer	a medicine mentioned in the extended practice authority called 'Indigenous health workers'. the medicine is given for a patient under the EPA or administered under the EPA	a medicine mentioned in the extended practice authority called 'Aboriginal and Torres Strait Islander health practitioners' given or administered under the EPA and individual practice plan
possess	an S4 or S8 medicine mentioned in the relevant EPA for a purpose mentioned in the EPA	an S4 or S8 medicine mentioned in the relevant EPA for a purpose mentioned in the EPA

repackage and dispose	repackage a medicine mentioned in the relevant EPA for giving a treatment dose under the EPA. dispose waste from a diversion-risk medicine mentioned	repackage a medicine mentioned in the relevant EPA for giving a treatment dose under the EPA dispose waste from a diversion-risk medicine mentioned
give a purchase order	nil	Stock of a medicine mentioned in the EPA, the purchase order given under the EPA

*

13. References

14. Workforce Australia 2011. *Growing Our Future: the Aboriginal and Torres Strait Islander Health Worker Project Final Report*.
15. Australian Nursing and Midwifery Council 2007. *A national framework for the development of decision-making tools for nursing and midwifery practice*
16. Community Services and Health Industry Skill Council
17. Queensland Department of Health 2018. *Aboriginal and Torres Strait Islander Health Practitioner Clinical Governance Guidelines*
18. Aboriginal and Torres Strait Islander Health Practice Board of Australia. *Registration Standards*
19. Queensland Department of Health. *Decision Making Framework for Aboriginal and/or Torres Strait Islander Health Practitioners Undertaking Clinical Activities*
20. Australian Nursing and Midwifery Council. *Delegation and Supervision for Nurses and Midwifery*
21. Health Education and Training Institute. *The superguide: a handbook for supervising allied health professionals*
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