

Unleashing the Potential of our Health Workforce: Scope of Practice Review

Terms of Reference for the Expert Advisory Committee

Context

In February 2023, the Strengthening Medicare Taskforce Report was released, which outlined priority recommendations to improve primary care. One recommendation was that work be undertaken with states and territories to review barriers and incentives for all professionals to work to their full scope of practice. This recommendation was supported by National Cabinet in April 2023.

The Australian Government provided funding through the 2023-24 Budget for an independent review of scope of practice of health practitioners working in, or with the potential to work in, primary care. A key focus of this review will be to identify, compile and analyse the evidence concerning health professionals working to full scope of practice, or not, including benefits, risks, barriers and enablers. The context is health professions who currently work in primary care, or who could potentially work in primary care in the future. The barriers to and enablers associated with health professionals working to their full scope of practice may differ by profession but may include legislation and regulation, education and training, funding models, organisational policies and cultural factors.

The review will also explore the system changes and practical improvements needed to support greater productivity and improved, safe and affordable care for patients. With the right technology, innovation and regulation in place, the health care system can gain the full benefit of professional skills and expertise.

The health professions in-scope for this review include GPs, nurses, including nurse practitioners, registered nurses and enrolled nurses, pharmacists, midwives, allied health practitioners (both regulated and self-regulated), First Nations health practitioners and workers, and paramedics. For more details see the Review's [Terms of Reference](#).

On 24 August 2023, the Minister for Health and Aged Care announced Professor Mark Cormack would lead this independent review. This will be an intensive review. A final report will be prepared and finalised for submission by end October 2024.

Approach for the Review

This review will be underpinned by academic rigour, extensive stakeholder engagement and collaboration with the states and territories.

An independent support team will provide secretariat for the review and other support for Professor Mark Cormack.

A research team will be procured to review the evidence base, including analyses of stakeholder inputs and perspectives, and prepare two Issues Papers.

Expert Advisory Committee

An Expert Advisory Committee (EAC) consisting of a cross section of individuals, peak bodies representatives and academics will be established. Membership comprises organisations and individuals who are invited to participate on the basis of their skills, knowledge and experience and includes health sector representatives, consumers, clinicians, researchers and persons that represent the voices of priority populations, including Aboriginal and Torres Strait Islander People, and rural and remote Australians.

The EAC will not have any decision-making powers. The EAC will provide expert input and advice to the Independent Review Lead, Professor Mark Cormack, in relation to:

- The identification and analysis of the evidence underpinning the review;
- The scope, extent and effectiveness of the stakeholder consultation process; and
- The interfaces with other health policy initiatives, health workforce reviews and reform processes and their potential impacts on this review of health practitioners' scope of practice.

The EAC will be chaired by the Independent Review Lead.

Timeframe and commitment

The EAC will be convened for a period of 12 months, from November 2023 until November 2024.

The EAC is expected to meet up to four times over the course of the review. The exact dates are to be determined, but they are expected to occur in alignment with the four phases of the review:

- November 2023 – Phase 1, initial stakeholder consultation
- December 2023 – March 2024 – Phase 2, Issues Paper 1
- April – June 2024 – Phase 3, Issues Paper 2
- July – September 2024 – Phase 4, Draft Final Report

There may be additional meetings convened out-of-session.

It is expected the EAC will meet predominantly via video link, however a face-to-face meeting may also be scheduled. Travel will be considered on a case-by-case basis and will be benchmarked off the Remuneration Tribunal (Official Travel) Determination for Part-time Office Holders.

If a member representing an organisation or peak body is unable to attend, proxies will be permitted. Proxies will not be permitted for individually represented members.

An agenda for EAC meetings will be sent to members at least one week prior to the scheduled meeting. The independent support team will provide secretariat for the EAC.

Remuneration

Members will be remunerated in accordance with the Department of Health and Aged Care's Remuneration Framework. Details for eligible members will be outlined in the Member's Instrument of Appointment and Committee Guidelines.

Information on eligibility will be outlined in the Committee Member Guidelines.

Deed of confidentiality and Declaration of Interests

All information provided to EAC members is confidential and must not be disclosed to third parties or used for other purposes. All EAC members will be required to sign a [Deed of Confidentiality and Declaration of Interests](#).