Nurses in general practice—improving access and quality health care for consumers

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General practice is at the centre of primary health care in Australia and is the most frequent point of entry into the health system, with around 85% of the population reported to visit the general practitioner (GP) in any one year. However, the nature of general practice is changing impacted by workforce issues, changes in the demography and morbidity of the population, increasing consumer expectations and rising health costs. In order to continue to meet the health care needs of communities, the future for general practice is the provision of multi-disciplinary teams, with GPs as essential members.

General practice nurses are core members of the multi-disciplinary team. Nursing in general practice is a dynamic and vibrant area of the nursing profession. It offers a range of experiences and provides an opportunity to be part of a health care team meeting the diverse primary care needs of a community. Since 2001 there has been a marked increase in Australia in both the number of general practice nurses and the number of practices employing nurses. In 2006 approximately 85% of practices in regional, rural and remote areas employed one or more general practice nurses.

Australian Government policy has been a significant driver for the employment of more nurses in general practice and for the development of the clinical role for the nurse particularly in the management of chronic disease. The aims for the Government’s Nursing in General Practice Initiative are to support the effective employment of practice nurses to:

- relieve workforce pressure created by doctor shortages in general practice
- improve the prevention and management of chronic disease
- improve access to, and the quality and integration of, patient care.

To achieve these aims the Australian Government has made a significant financial commitment to practice nursing providing funding of $104.3 million in the years 2001–2005, and a further $129.7 million for 2005–2009. The predominance of the funding is provided for the Practice Incentives Program (PIP) for grants to practices in rural areas and other areas of need to employ practice nurses. Another key strategy is the Nursing in General Practice Training and Support Initiative funded through the Australian General Practice Network, to support the employment of more nurses into general practice and to provide education and professional development opportunities for general practice nurses. This program plays particular attention to overcoming the issues for rural and remote nurses to access education and professional development.

There is also a range of other Australian Government Initiatives aimed at increased utilisation of practice nursing services, such as:

- Medicare Benefits Schedule (MBS) items for practice nurses to provide immunisation, wound care and Pap tests and other preventative health checks for women, on behalf of a general practitioner
- the introduction in November 2006, of a new Medicare item for nurses to provide antenatal checks for pregnant women in rural areas, on behalf of a GP or specialist
- the Enhanced Primary Care Program and the New Medicare Chronic Disease Management Items, which include provision for a GP to be assisted by a practice nurse to manage the health care of patients with chronic medical conditions, including patients needing multi-disciplinary care
- a new program to facilitate access to training and support for nurses in regional and rural areas to be points of referral for people experiencing domestic violence.
It is clear that Australian Government policy is driving an increased role for nurses in the delivery of primary care services in general practice. The recently released report of the Productivity Commission on Australia’s Health Workforce, makes clear intentions by the Australian Government to improve the efficiency and effectiveness of the available workforce through attempting to breakdown some the territorial traditions of health professionals, promoting innovation and high quality flexible multi-disciplinary approaches to care.8

Nurses and GPs in general practice are gradually moving to a collaborative model of practice rather than the traditional hierarchical model of provider substitution. The Collaborative Model acknowledges that some patients require input from a range of team members, who have distinct roles and expertise and who work together to achieve the best outcome. In this model of care nurses are adding value to the GP service, rather than substituting for the GP. Practice nurses have been found to be just as effective as the GP in the clinical services that they provide and are cost effective and associated with a high degree of patient satisfaction.11

There is a steadily growing body of literature nationally and internationally, which indicates the benefits that practice nurses can bring to provision of primary care services in general practice. This includes improved outcomes in chronic disease,9,10 improved integration with the acute sector, improved public access,11 enhanced consumer satisfaction12 and an increase in the range of services available at the practice.13 Practice nurses have also been shown to provide practical and professional support to GPs, increasing the capacity of the practice to adapt to change14 and play a key role in improving quality and safety at the practice.

The role for the general practice nurse is diverse and is influenced by a number of factors including the:

- skills and experience of the nurse
- government incentives
- role designated by the GP or GPs in the practice
- practice’s population profile.

Some of the common roles undertaken by nurses in general practice include:

- the provision of clinical nursing services such as triage, wound management and other clinical procedures. Taking patient histories, undertaking patient assessment and monitoring. Some practices have a procedure where all new patients are seen first by the practice nurse for a comprehensive history and assessment, before review by the GP. Many general practice nurses play a key role in maintaining the immunisation status for the practice population through register, recall and reminder services and opportunistic screening.

- co-ordinating patient services and a systems approach to care. General practice nurses have the potential to establish strong affiliations with other health care and service providers outside of the practice. They often play a key role in arranging services for patients, liaising with service providers and act as a key point of contact. Nurses are frequently engaged physically or by telephone in the process of connecting the practice to its community. Establishing and maintaining recall and reminder systems and follow up with patients is a key role for many general practice nurses. A recent Australia study found that assessment for diabetes, asthma and general risk factors for chronic disease care, and overall care of patients was better in practices where nurses were responsible for managing disease registers and recall systems.15

- management of the clinical environment assisting the practice to meet and maintain infection control, instrument sterilisation and accreditation standards.
Many general practices now have nurse led clinics with the general practice nurse providing specialist services. Following are some examples of these specialist roles:

- **Women’s health**: including undertaking a Pap smear, checking for sexually transmitted disease, advice on contraception, providing breast awareness, continence advice and education, advice on postnatal issues and behaviour risk assessment. The MBS item for Pap smears and preventative checks taken by a practice nurse on behalf of a GP provides for the GP to claim for the service undertaken by the nurse. The GP is not required to see the patient or to be present with the practice nurse during the service.

- **Asthma**: including taking a detailed patient history and undertaking a comprehensive patient assessment including a behaviour risk assessment, taking a spirometry reading, assessing the patient’s use of their inhalers, providing patient education on understanding and managing their disease, quit smoking advice as required, monitoring the patients’ disease and having input into the patient’s asthma action plan.

- **Diabetes**: measuring height and weight and calculating Body Mass Index (BMI), taking a detailed patient history and undertaking a comprehensive patient assessment including a behaviour risk assessment, providing patient education on understanding and managing their disease including self management, basic foot care, recording and monitoring blood sugar levels and co-ordinating other service providers involved in the patients’ care for example a dietitian, ophthalmologist, or podiatrist.

Another key role for many general practice nurses is to assist with the comprehensive annual health assessments for people over 75 years of age. These assessments provide a valuable insight into the elderly patient including their social and emotional well-being, particularly when undertaken in the patient’s home. Patients will often reveal information to the nurse during the course of the assessment that they would not raise during a consultation with the GP. This can uncover previously undisclosed health issues such as incontinence, early dementia, falls, medication irregularities and poor living conditions. Patients generally focus during the consultation with the GP about specific issues they wish to address. However, the nurse will often have more time or will be perceived by the patient to have more time, and will encourage the patients to talk about themselves.

In 2002 the University of South Australia undertook a national research study to qualitatively explore the perception of consumers to nurses and nursing in general practice. The findings of the research identified:

- a widespread acceptance of nursing in general practice despite the majority of consumers having a limited understanding and awareness of nursing roles and qualifications
- consumers perceived that nurses in general practice would take the pressure off doctors, which would enable the doctor to see more patients and to spend more time with them
- most consumers believed that a nurse would have more time for them and they would feel more comfortable asking the nurse questions they didn’t want to bother the doctor with
- it was important to consumers to retain their choice to see the doctor or the nurse; and it was also important to them to be able to clearly identify the nurse.

The results of this study have provided a valuable contribution to our understanding of the perceptions of health care consumers to nurses in particularly nurses in general practice, and have formed a basis for awareness raising and marketing of the general practice nurse role.

In addition to their roles in accreditation such as designing systems and developing policies and procedures, general practice nurses are also involved in other important elements of delivering a safe and quality service to patients. This includes maintaining safe practices, delivering high quality patient care, maintaining relationships with patients, spending time with patients and supporting teamwork. Nurses often play a policing and education role at the practice ensuring that other team members are
maintaining safe systems and safe practices. In delivering patient care nurses provide a holistic service to the patients and their carers, ensuring that all elements of care are followed up, and often supporting patients with the ‘little things’ that are important. General practice nurses encourage patients to talk about themselves, they endeavour to give patients time even in their busy schedule, and encourage their patients to come to them if there is a problem. Practice nurses bring a different set of skills and perspective to the management of care for patients than general practitioners, which enhances the services provided at the practice, and supports a collegiate team based approach to care. General practice nurses are extremely responsive to the requests of others and are often the lynch pin linking all team members from the front office staff to the general practitioners.

Some of the advantages sighted by practice nurses of working in general practice are the flexibility offered by the role, the ability to utilise a diverse range of skills as well as the opportunity to specialise in areas of interest. It will important that as models of general practice nursing are developed and defined that these elements of flexibility and adaptability are not lost. It is equally important that models of practice nursing are able to be adapted to suit local practice needs and to be responsive to the needs of the community.

There has been significant progress achieved in the recruitment of nurses into general practice over the past six years. This progress has been facilitated by incentives and support to enhance the role through initiatives such as practice incentives to support employment of a nurse, the introduction of MBS practice nurse items and other MBS items that promote team based care. However there is still much to be achieved in order to encourage all practices to employ or have access to a nurse, and to utilise these nurses to their full potential to improve access to services for consumers and to provide optimal care.

**Recommendations**

- That every general practice be supported and encouraged to employ or have access to a nurse.
- That the range of MBS items for the services of a general practice nurse be expanded to support practices to utilise nurses in enhanced and specialist roles.
- That funding be provided for infrastructure grants to support general practices to expand their premises in order to provide space for multi-disciplinary team members.

**References**


**Presenter**

**Julie Porritt** is a registered nurse and midwife with a Masters in Health Services Management and extensive experience in the health industry in hospital and primary care services. Her experience includes direct clinical care, executive management, operational roles and research. Julie has held the role of Principal Advisor for Nursing in General Practice with the Australian Divisions of General Practice for the past four years. This role includes national leadership and co-ordination for the Nursing in General Practice Program. The program aims to deliver through the Divisions of General Practice Network support services to nurses in general practice, and to broker and co-ordinate education and professional development opportunities for general practice nurses.