



Evolution of the nurse practitioner role at a rural health service

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The nurse practitioner (NP) model at our rural health service has evolved into an expanded trans-boundary role since commencing in October 2011 and continues to evolve as service needs change. The role was initially seen as a means to address service gaps in unplanned urgent care presentations, however it has expanded providing support and advice to 60 aged care beds and expert clinical leadership to the organisation. The experience of adapting to local needs provides valuable information for other rural health services and contributes to the literature on sustainability of the NP role in rural and remote communities.

Unique aspects of our model are the NP:

- works an on-call roster collaborating with the two local GPs—each providing a week on call service to the organisation enabling two weeks clear of call duties
- has admitting rights to the organisation, enhancing continuity of care and improved outcomes for community members
- is supported by a locum NP who covers 2 days of the local NP's on call week
- provides high-level clinical advice and support to all areas of the organisation, including aged care
- liaises closely with local ambulance, regional health service and retrieval services
- is respected and supported by the local community and GPs
- is a local nurse with strong family ties
- has taken a clinical leadership role in relation to quality and safety standards particularly Standard 9 Deteriorating Patient.

Evaluation of the NP role demonstrates enhanced care for the local community with positive outcomes and include:

- decreased transfers to the Regional Health Service, reducing congestion of unnecessary referrals, reduced transport costs and more appropriate and convenient care to local consumers

- advanced health assessments undertaken and prompt initiation of treatment of symptoms that improve outcomes, including community based palliative care
- enhanced care of residents in our aged care facility by providing assessment, treatment and management of chronic illness complications, reducing transfers to an acute facility
- providing support and clinical expertise to nurses and mentorship and encouragement to registered nurses undertaking the RIPERN (Registered Isolated Practicing Endorsed Registered Nurses) course.

Evaluation of the NP role at our rural health service has demonstrated the importance of adapting to the local environment to ensure improved outcomes for consumers and ensuring care to consumers is provided by the right practitioners at the right facility. We wish to promote the learnings made to ensure the future sustainability of NP roles in rural and remote areas.