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Building chronic disease management capacity in General Practice: The South Australian GP Plus Practice Nurse Initiative

Jeffrey Fuller, BN, MSc, PhD^{a,*},
Kristy Koehne, BN Hons, PhD, Grad Dip Mental Health Nursing^b,
Claire C. Verrall, Grad Dip Applied Science (Nursing), BN,
Master Nursing Studies^b,
Natalie Szabo, BN, Grad Dip Primary Health Care, Masters Arts
(Communication Management)^c,
Chris Bollen, MBBS, FRACGP, MBA^d,
Sharon Parker, BHIthSci (Nursing), MPH^b

^a Centre of Research Excellence in Primary Health Care Microsystems, School of Nursing and Midwifery, Flinders University, Adelaide, Australia

^b School of Nursing and Midwifery, Flinders University, Adelaide, Australia

^c Central Adelaide Local Health Network, Australia

^d Healthfirst Network, Underdale, South Australia, Australia

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Summary

Aim: This paper draws on the implementation experience of the South Australian GP Plus Practice Nurse Initiative in order to establish what is needed to support the development of the chronic disease management role of practice nurses.

Background: The Initiative was delivered between 2007 and 2010 to recruit, train and place 157 nurses across 147 General Practices in Adelaide. The purpose was to improve chronic disease management in General Practice, by equipping nurses to work as practice nurses who would coordinate care and establish chronic disease management systems.

Method: Secondary analysis of qualitative data contained in the Initiative evaluation report, specifically drawing on quarterly project records and four focus groups conducted with practice nurses, practice nurse coordinators and practice nurse mentors.

* Corresponding author. Tel.: +61 8 8201 7641; fax: +61 8 8276 1602.
E-mail address: jeffrey.fuller@flinders.edu.au (J. Fuller).

Findings: As evidenced by the need to increase the amount of support provided during the implementation of the Initiative, nurses new to General Practice faced challenges in their new role. Nurses described a big learning curve as they dealt with role transition to a new work environment and learning a range of new skills while developing chronic disease management systems. Informants valued the skills development and support offered by the Initiative, however the ongoing difficulties in implementing the role suggested that change is also needed at the level of the Practice. While just over a half of the placement positions were retained, practice nurses expressed concern with having to negotiate the conditions of their employment.

Conclusion: In order to advance the role of practice nurses as managers of chronic disease support is needed at two levels. At one level support is needed to assist practice nurses to build their own skills. At the level of the Practice, and in the wider health workforce system, support is also needed to ensure that Practices are organisationally ready to include the practice nurse within the practice team.

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Introduction

In 2011–2012, chronic disease accounted for 36% of all problems managed in General Practice in Australia at a rate of 56 per 100 encounters (Britt et al., 2012). Chronic disease management (CDM) requires a systematic approach that includes case management, education of patients towards self-management and the use of structured methods for patient monitoring, follow up and feedback (Bower, Gilbody, Richards, & Fletcher, 2006; Greb et al., 2009; McDonald et al., 2007; Øvretveit, 2011). In this context, Australian national and state governments have developed new funding, people and infrastructure support programs to better manage chronic disease in General Practice using practice nursing (Commonwealth of Australia, 2010; South Australian Department of Health, 2007). It is important therefore to understand what is needed to ensure that practice nurses have the capacity to undertake this role.

General Practices in Australia are, in the main, private businesses. Income is largely generated through a subsidised consultation fee that is charged to patients for each service, with some additional funding to support CDM. Both the patient subsidy and CDM payments are provided through the taxation funded national health insurance scheme known as Medicare. Hence General Practice in Australia has developed a service model that tends to be reactive to patient presentations and is episodic according to funding based on throughput (Palmer & Short, 2010). While many Practices employ a practice nurse, often these are part time positions with roles that have in the past been mainly procedural, covering tasks to support the general practitioner, such as immunisations and wound care (Britt et al., 2012). Change is expected, however, in practice nurse employment and roles since the funding of nurses in General Practices was changed in 2012 from procedural reimbursements (e.g. tied to immunisations and wound care) to block funding of up to \$125,000 per Practice each year (Bell, 2013).

Practice nursing is a small but rapidly growing section of the Australian nursing workforce with an estimated increased in numbers by 38% over the five years from 2007 to 2012 (Australian Medicare Local Alliance, 2012). A practice nurse is defined as a "registered or enrolled nurse employed by, or whose services are retained by a general practice in a general practice [and who] may be either accredited or

non-accredited" (Parker, Keleher, Francis, & Abdulwadud, 2009). There is no regulation to entry other than the requirement that the nurse have a general license to practice as a registered or enrolled nurse by the Nursing & Midwifery Board of Australia. As a developing workforce, the roles, scope of practice and impact of practice nurses have in the past been poorly understood (Halcomb, Davidson, Daly, Yallop, & Toffler, 2004; Phillips et al., 2009). Practice nursing skills have been found to be under-utilised and barriers to practice include inadequate funding models, insufficient educational preparation for primary care, a lack of a career pathway and the variety and fragmentation of roles and workplaces in the sector (Gibson & Heartfield, 2005; Halcomb et al., 2005; Keleher, Parker, Abdulwadud, & Francis, 2009; Phillips et al., 2009). Despite health system reforms to improve the career and scope of practice nursing, the most recent 2012 national survey found a high proportion of practice nurses were "less than highly satisfied" about the recognition of their work, their opportunity to suggest practice changes, the use of their abilities, career promotion and the management of their practice worksite (Australian Medicare Local Alliance, 2012).

Halcomb, Davidson, and Patterson (2008) concluded that much development is needed if practice nurses are to take a significant role in CDM in Australia and the need for professional development and support of nurses in General Practice has long been recognised (Gibson & Heartfield, 2005; Halcomb, Davidson, Salomonson, & Ollerton, 2008; Parker et al., 2009; Parker, Walker, & Hegarty, 2010; Senior, 2008). This paper describes a South Australian Initiative that was designed to build CDM capacity in General Practice through the employment and support of practice nurses as care coordinators. The paper discusses the issues that were documented during the implementation and evaluation of the Initiative and concludes with the nurse role fulfilment and support factors deemed important when developing nurse led CDM in General Practice.

The Practice Nurse Initiative

Set within the South Australian Department of Health GP Plus Health Care Strategy (2007), the GP Plus Practice Nurse Initiative (PNI) was delivered between January 2007 and June 2010. The purpose was to increase the number of

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