

Australian Primary Health Care Nurses Association

**2022  
Pre-budget  
Submission**

Strong Solutions for  
a Healthier Australia



# APNA has strong solutions that contribute to a healthier Australia.

- **Boost the Nursing Workforce** will promote primary health care as a future career option for student nurses;
- **Honing incentives** will improve patient care, primary health care nurse job satisfaction and retention, and value for money for health services;
- **Rebrand, revamp and retain** will enrich the primary health care workforce with a diverse range of new nurses.
- **Nurse-Supported Self-Care Initiative** will reduce the burden of chronic disease and mental health on the health system by educating patients with chronic disease to administer self-care

These proposals align with the Quadruple Aim framework for health reform and the recommendations proposed in the National PHC 10-Year Plan and will help deliver a healthier Australia through best practice primary health care nursing.



# Strong solutions for a healthier Australia – submission summary

## Boosting the Nursing Workforce

**\$10M-24.8M over four years**

*A springboard to a great career*

With an urgent need to support the national COVID vaccine booster rollout, plans to manage COVID patients in their own homes, increasing rates of chronic disease, an ageing population, and a predicted shortfall of nurses in coming years, Australia desperately needs more primary health care nurses. This program will expand existing solutions to establish a national system providing student placements in the primary health care system, and pathways offering for future career opportunities. The program would help to address current and future nurse workforce shortages by creating between 2000-8000 additional placement opportunities for undergraduate and postgraduate students over four years nationally in metro, urban, rural and remote settings.

## Honing Incentives

**Cost neutral**

*Enabling primary health care nurses to ensure better patient outcomes*

Inefficient incentive payment design means primary health nurse contributions to optimal patient outcomes are confined to activities that contribute to General Practitioner billing. Uncoupling incentive payments from GP billings would contribute to a better patient

experience and enhanced patient outcomes, more effective care, improved productivity, value for money for health services, and higher levels of nurse job satisfaction and workforce retention.

## Rebrand, Revamp, Retain

**\$7.2M over four years**

*Where great nurses go to do more.*

A campaign to show how diverse and challenging a career in primary health care nursing will help to attract new student nurses, more men and more culturally and linguistically diverse Australians. This will support a primary health care workforce that better reflects the diverse and contemporary needs of Australian communities.

## Nurse-Supported Self-Care Initiative

**\$2.87M over three years**

*Reducing the Budget burden of chronic disease*

Chronic diseases and mental health conditions are long lasting conditions with persistent effects that can have a sustained negative impact on peoples' quality of life. Tasking primary health care nurses to empower patients to manage and minimise symptoms of chronic disease via self-care practices has great potential in reducing both the burden of chronic disease on the health system and the burnout of the nursing workforce itself.



# Boosting the Nursing Workforce

## Invest \$10million-24.8million over 4 years in a new generation of primary health care nurses

- Establish a national primary health care nursing placement system for undergraduate and postgraduate students
- Create 2000-8000 primary health care nursing placement opportunities over four years nationally in metro, urban, rural and remote communities

### The Problem

More than 17,000 undergraduate nursing students graduate each year, however students cannot graduate without first completing a mandated number of clinical placement hours (800 hours for a registered nurse). Historically, most clinical placements occur in hospital settings, with placements generally being harder to source in primary health care. As a result, most nursing students do not experience primary health care as part of their studies, leading to fewer nursing students choosing primary health care nursing as a profession.

In addition, the demand created by higher intakes of nursing students by universities and TAFEs has meant that primary health care placements are becoming increasingly difficult to secure. The impact of the COVID-19 pandemic only exacerbated this, creating a significant backlog in placements for 1st- and 2nd-year students, and resulting in significant numbers of students being unable to complete their course, graduate and enter the workforce.

### The Solution

Creating an online national placement system, capitalising on APNA's database and experience, will provide a greater number of clinical placement options for students nationally in metropolitan, urban, rural, and remote locations. This new *Boosting the Nursing Workforce* system will provide students with practical experience of primary health care nursing and increase capacity in primary health care.

APNA's extensive primary health care nursing database can provide 2,000-8,000 additional nursing placements over four years to the *Boosting the Nursing Workforce* program and match nursing students to high-quality placements with experienced registered nurses and nurse practitioners.

Student placement program over four years	Total cost
2,000 placements	\$10 million
4,000 placements	\$15 million
6,000 placements	\$20.2 million
8,000 placements	\$24.8 million

APNA has experience running placement programs such as *Boosting the Nursing Workforce* with Monash University. Since the beginning of the pilot program 18 months ago, APNA has placed 405 students in high quality placements with multiple primary health care providers during the COVID-19 pandemic. The project design ensures quality placements with continuous evaluation and support of students and supervising nurses.

APNA will build on this model in consultation with universities and other tertiary institutions, PHC employers, and professional peak groups to develop a flexible online primary health care placement system designed to match student to supervisor and setting.

*Boosting the Nursing Workforce* would be able to match prospective graduate students with a range of placement opportunities using criteria such as location. This would provide undergraduate and postgraduate students



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## Boosting the Nursing Workforce – continued

with an opportunity to experience high-quality nursing placements in primary health care settings in a range of urban, regional, rural or remote settings, including aged care, general practice, schools and community health settings. These placements will allow students to experience the role of a primary health care nurse in a small-ratio environment, usually 1:1.

*Boosting the Nursing Workforce* will provide access for nursing supervisors to a support service to ensure the facilitation of quality student placements. The service will include a comprehensive supervisor training package and regular access to support service staff for personalised advice and support.

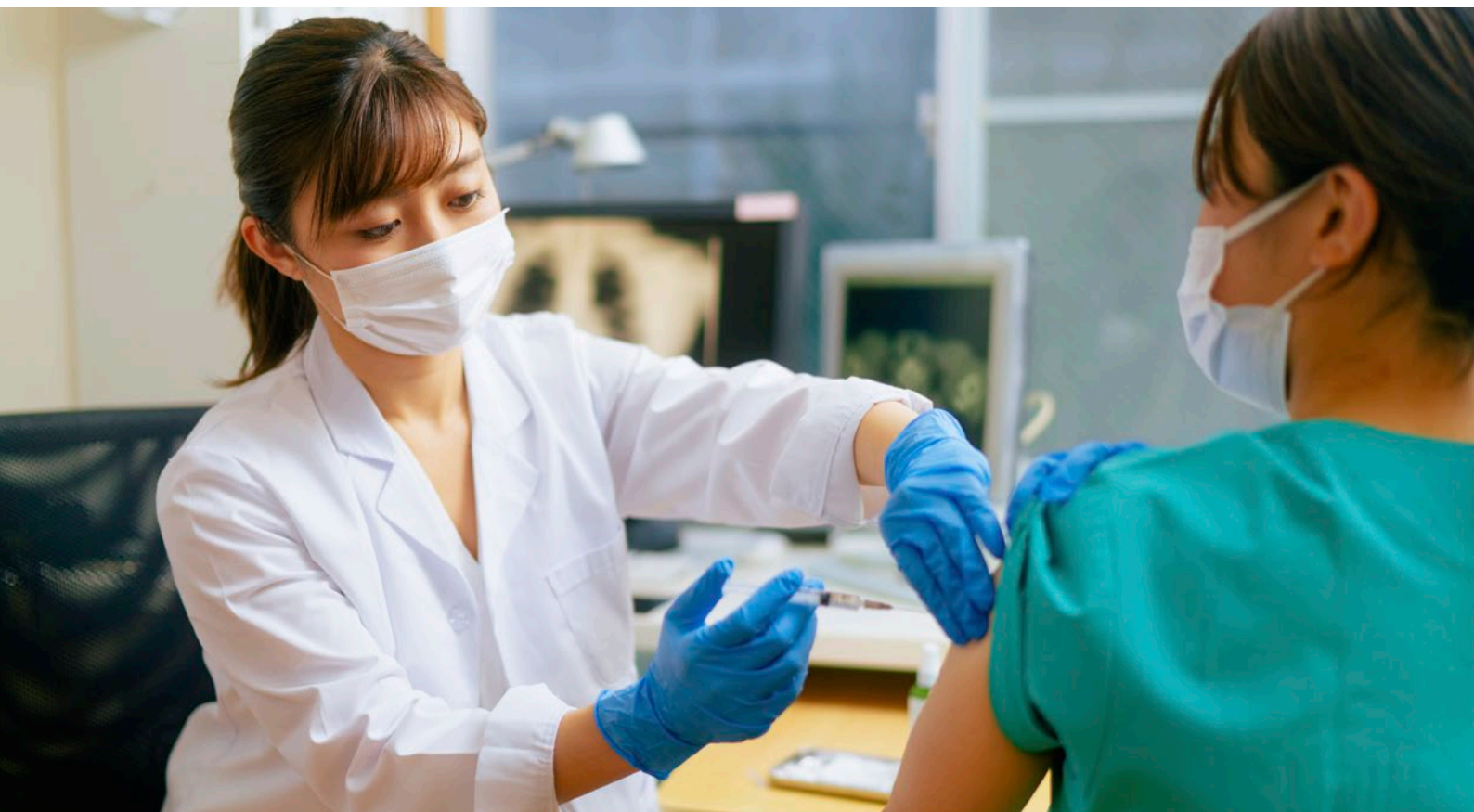
Both supervisors and students will have the ability to rank their placement experience via the *Boosting the Nursing Workforce* online placement platform. This data will be used by the support service team to work with placement providers and supervisors to enhance their placement experiences.

Cost is often a barrier to regional nursing placements as students must pay their own expenses.

Given that medical students have regional placement travel and accommodation costs covered by the Commonwealth, APNA believes this opportunity should also be extended to nursing students. The *Boosting the Nursing Workforce* proposal has included rural placement financial support as part of this placement system model. The program is already working with organisations such as the Mallee District Aboriginal Health Service in Victoria.

Following the four period, APNA will develop a strategy for this model to be self-funded. The *Boosting the Nursing Workforce* placement system will assist in addressing current and future nurse workforce shortages, securing a pipeline of experienced primary health care nurses equipped with broad skillsets and able to serve communities across Australia including in rural and remote areas. There are now 118 Victorian and 19 interstate organisations registered with the program.

This meets the objectives of the Australian Government's Long Term National Health Plan to make the Australian health system the best in the world.



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# Honing incentives

## Enable primary health care nurses to ensure better patient outcomes

- Better use of funding devoted to nursing workforce incentive payments
- Cost-neutral way to enhance levels of nursing care for patients in general practice settings

### The Problem

Practice incentive payments have been designed to facilitate and encourage multidisciplinary and team-based models of care, and thus ensure better patient outcomes. However, the effectiveness of the Workforce Incentive Program (WIP), formerly the Practice Nurse Incentive Program (PNIP) in improving levels of nursing care for patients is unclear.

A Department of Health evaluation found that the 'PNIP has not broadened the role of the practice nurse (PN) but, in a large proportion of practices, has shifted the focus of practice nurse activities to those that contribute to practice remuneration linked to specific billing provided by GPs'.

In reality, WIP design means that the skills and experience of primary health care nurses in performing chronic disease management and healthy ageing activity, are being poorly used in general practice to improve patient outcomes.

### The Solution

Multidisciplinary patient care and the ability of primary health care nurse to provide even better levels of patient care would be improved by reforming the WIP incentive payment.

Better use of funding and improved patient outcomes would be realised by uncoupling WIP from General Practitioner billings and instead attaching Standardised Whole Patient Equivalent (SWPE) to patient care activities regardless of provider type. This would be enhanced by replacing the current caps around SWPE, and hours worked by eligible health professional, with a tiered funding model according to patient levels of risk and care needs.

In addition, the levels of care provided by primary health care nurses to patients would be greatly improved by monitoring and reporting activity by individual provider, ensuring better use of allocated funding.

Redistributing how incentive payments are utilised will provide an incentive for practices to employ and use primary health care nurses to best meet patient needs. Enabling primary health nurses to work to the full breadth of their scope of practice leads to a better patient experience, more effective care, improved productivity, value for money for health services, and higher levels of job satisfaction and workforce retention.

This solution aligns with Recommendation 3.2 Funding reform for primary health care services outlined in the PHC 10 Year Plan through supporting best practice, integrated health care that is based on value rather than volume.



# Rebrand, Revamp, Retain

## Invest \$7.2million over 4 years on a national campaign to attract and keep nurses in primary health care

- Rebrand primary health care nursing to recruit new graduates and retain current members in the workforce
- Educate the public about the broad skillset of primary health care nurses and their central role in treating Australia's myriad community and health needs.

### The Problem

Outdated perceptions of what primary health care nurses can and cannot do limits how they are used in primary health care settings. They also make it more difficult to recruit new nurses to the field, and to retain the existing workforce.

Primary health care nursing roles have evolved and become increasingly complex and diverse as the health care environment has evolved. Outdated attitudes from other health professionals, colleagues, and patients about the role of primary health care nurses limit the ability of nurses to work to their full scope of practice.

This lack of support, misunderstanding and misconception of the primary health care nurse role and skillset can leave nurses feeling isolated, and has huge implications for recruitment and retention in the field. For example, just over a quarter of respondents to a recent APNA survey say they intend to stop working as a nurse in their current primary health care setting in the next five years.

### The Solution

APNA has developed a marketing campaign concept built on the findings of the Annual Workforce Survey and APNA's Career and Education Framework. The *Rebrand, Revamp, Retain* campaign is designed to:

- Educate health professionals, colleagues, patients, and consumers about the broad skill set primary health care nurses possess
- Attract new graduates into primary health care nursing (including aged care)

- Retain existing primary health care nurses in the workforce

The *Rebrand, Revamp, Retain* campaign would illustrate the varied, extensive skillset that a primary health care nurse possesses, and the rewarding career that can be provided in the primary health care field. The campaign would highlight the diverse work and responsibilities a primary health care nurse has across a wide range of settings, from rural and remote general practices to urban residential aged care facilities.

Increasing the profile of primary health care nurses through the *Rebrand, Revamp, Retain* campaign would lead to greater workforce retention, and would increase the utilisation of primary health care nurses by showcasing their scope of practice. It would also build confidence in patients by giving them better

understanding of the nurse role, and thus enhance nurse provider experience.

Showcasing the benefits and rewarding career of primary health care nursing will encourage new, younger, highly experienced and/or retired nurses to join the profession as well as increase the diversity of new entrants and graduates. This will work to combat workforce shortages and instability, particularly impacting the Aged Care and Home Care sectors.

**"Primary health care is amazing! Such a variety of things to get involved in and always lots to learn. The hours are great for a sustainable work life balance. I love seeing patients and their families and being a part of improving their health care journey!"**

*PHC nurses twelve months after completing an APNA trial Transition to Practice program*

The *Rebrand, Revamp, Retain* campaign also aligns with the *PHC 10 Year Plan Recommendation 10 Building Workforce Capability and Sustainability* through enhancing workforce recruitment and retention, and *Recommendation 12 Nursing and midwifery Workforce* via enhanced and supported scope of practice.

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# Nurse-Supported Self-Care Initiative

## Invest \$2.87M over three years to strengthen primary health care nurse competency in delivering self-care education and management to patients with chronic diseases

- Improve ability of patients with chronic diseases to administer self-care to complement and support ongoing treatment and management provided by health professionals
- Strengthen the resilience of the primary health care nursing cohort to increase workforce retention and reduce burn out due to workload

### The Problem

One of the greatest threats to Australia's people and economic prosperity is the increasing rates of chronic diseases and mental health conditions. According to the AIHW, almost half of Australians (47%, or more than 11 million people), and four in five of Australians over the age of 65, were estimated to have one or more of the 10 selected chronic conditions in 2017–18. Chronic diseases and mental health are long-lasting conditions with persistent effects that often have sustained negative impacts on Australians' quality of life, productivity, and overall health and wellbeing outcomes beyond the condition itself.

In addition to the personal and community costs, and increased rates of premature illness, disability and death, chronic diseases and mental health conditions now pose most of the burden to the health system. Given many chronic diseases and mental health conditions are preventable, particularly through greater self-care and consumer empowerment in their health, APNA welcomes the new *National Preventive Health Strategy 2021-2030*, and commends the Morrison Government for elevating the role of self-care and consumer empowerment in the final Strategy.

Self-care and consumer empowerment also has an important role to play in the management of chronic conditions. The World Health Organisation concluded in 2009 that self-care should be a fundamental component to achieving both individual and structural health goals, contributing to illness prevention and improved health outcomes, better chronic condition management, and fostering a more cost-effective healthcare system.

Primary health care nurses have a strong role to play in providing preventive and chronic disease management education to patients to increase the

incidence and effectiveness of self-care. However, nurses are reporting that they are undertaking this type of activity less frequently, due to increased burden of COVID-19 infection control and patient management responsibilities. In addition, the primary health care nursing cohort has reported increased levels of burnout due to the current burden on the health system.

### The Solution

The *Nurse-Supported Self-Care Initiative* has a two-part program:

1. A program to train primary health care nurses to teach patients with chronic physical and mental health conditions how to practice achievable levels of self-care
2. A program focusing on self-care for the primary health care nurses themselves, to build strength and resilience in the workforce and reduce the effects of burnout, mental exhaustion, overwork and fatigue

Tasking primary health care nurses to empower patients to manage and minimise symptoms of chronic disease via improving self-care practices provides policymakers a significant opportunity to reduce the rate and burden of chronic conditions on Australia's health system, improve chronic condition management practices, and better manage burnout in the nursing and healthcare workforce.

Self-care describes the role of individuals in preventing disease, managing their mental and physical health, and actively participating in their health care. A patient self-help program delivered by primary health care nurses would include an intensive induction phase for patients, supported by access to experienced primary health care nurses, as well as access to self-assessed and self-

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## Nurse-Supported Self-Care Initiative – continued

paced online and virtual learning activities to consolidate learning.

Primary health care nurses already possess the core competencies to deliver health literacy and self-care support to patients. However, additional investment in the primary health care nurse cohort to deliver a *Nurse-Supported Self-Care Initiative* would enhance this capacity and provide nurses with the tools to better empower their patients with the important health information and skills to manage their health and wellbeing. This includes essential learnings on:

- healthy lifestyles practices specific to the patients' needs
- the connection between prevention, health, and disease
- practical and manageable steps to enhance preventative health behaviours
- how good health management impacts and influences the health and wellbeing of their families and communities

Investing in such a program to extend and develop this primary health care nurse competency would pay handsome dividends, not only in savings to the health budget - research shows that people who lack the skills to undertake self-care effectively incur higher health service costs - but in building the strength and resilience of the nursing workforce itself.



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**“She came to her consult for diabetes, but she was so depressed that we couldn’t even continue. So, we kind of dealt with that first. Then when she came back, she was so much more focused with her review. She was so much focused on her diabetes.”**

*Nurse from an APNA-organised ‘Living Well with Diabetes’ clinic*

The *Nurse-Supported Self-Care Initiative* would help primary health care nurses address numerous workplace stresses, including time pressures, workload, multiple roles, and emotional issues. The initiative would also help deal with stress overload, that can physically and mentally impact upon nurses and result in secondary trauma or burnout and ultimately affect their ability to practise effectively and retention in the workforce.

Providing structural and cultural support for greater self-care in health would help to minimise an ongoing frustration expressed by clinicians of being unable to address the underlying cause of many of the health problems they encounter among their patients.

As the peak professional body for nurses working in all primary health care clinical settings, APNA is ideally positioned to provide training to nurses to deliver a chronic disease self-care program. APNA already has more than 10 years of experience delivering significant workforce development programs and a strong track record for delivering projects on time and within budget.

APNA has already developed a unique set of evidence-based, proven programs that build the capacity of Australia’s primary health care nurse workforce. These programs currently engage with more than 3,000 primary health care nurses as well as their employers, Primary Health Networks (PHNs) and Universities in the areas of knowledge and health literacy, mental health, and resilience strategies and mental wellbeing

The Australian Self-Care Alliance, of which APNA is a member, has also recommended funding be allocated to strengthen health professionals’ competencies to deliver self-care education and engagement. APNA endorses this recommendation and encourages the Government to also fund this initiative as improving self-care competencies across Australia’s health care workforce is essential if we are to effectively combat the Australia’s epidemic of preventable and chronic conditions.

The Australian Primary Health Care Nurses Association (APNA) is the peak professional body for the 89,000 nurses working in primary health care. APNA champions the role of primary health care nurses; to advance professional recognition, ensure workforce sustainability, nurture leadership in health, and optimise the role of nurses in patient-centred care.

APNA is bold, vibrant and future-focused. We reflect the views of our membership and the broader profession by bringing together nurses from across Australia to represent, advocate, promote and celebrate the achievements of nurses in primary health care.

Our vision is a healthy Australia through best practice primary health care nursing. Our mission is to improve the health of Australians through the delivery of quality, evidence-based care by a bold, vibrant and well-supported primary health care nursing workforce.



## Contact us

APNA welcomes further discussion about this submission.

**Contact:**

**Shanthi Gardiner**

**APNA Policy Manager**

**[Shanthi.gardiner@apna.asn.au](mailto:Shanthi.gardiner@apna.asn.au)**

**1300 303 184**