ABOUT NURSE PRACTITIONERS

Nurse practitioners are registered nurses who have authority to practice independently and collaboratively in an expanded clinical role. The role was established in the United States in 1965, and in Australia in 2000. By June 2021, there were over 2250 nurse practitioners in Australia.

Nurse practitioner is a legally protected title with the role supported by legislation at both state and national level. Nurse practitioners have professional autonomy and are responsible and accountable for the care they provide for each episode of care. Nurse practitioners are required to hold professional indemnity insurance. They consult with their nursing peers, medical specialists, general practitioners and allied health professionals, to provide quality, holistic care to their patients. They work collaboratively to ensure patients’ care is integrated across the primary, secondary and tertiary healthcare settings.

A sustainable and highly skilled workforce is vital to a well-functioning health care system, with recruitment and retention of a suitably skilled workforce a critical issue in rural and regional areas.

Deloitte

NURSE PRACTITIONERS WORKING IN RURAL AND REMOTE AREAS

Approximately 30% of Australian nurse practitioners work in rural and remote areas in a full-time or sessional capacity. Most of these nurse practitioners are employed by state or territory health services, non-government organisations or Aboriginal Community Controlled Health Organisations (ACCHOs), with a small proportion owning their own practices.

Nurse practitioner output has grown steadily since being granted access to the Medicare Benefits Scheme (MBS) in 2010. The majority of nurse practitioners currently providing services subsidised by the MBS, do so in priority areas including residential aged care and rural and remote communities including aboriginal communities, mental health, chronic condition management and primary health care. MBS access for patients of nurse practitioners remains severely restricted, which impacts negatively on access to care. The Section 19(2) Exemptions Initiative- Improving Access to Primary Care in Rural and Remote Areas Initiative does allow nurse practitioners at exempted eligible sites to claim against the Medicare Benefits Schedule (MBS) for non-admitted, non-referred professional services provided in emergency departments and outpatient clinic settings.

The health workforce in 2030 is likely to need to be somewhat different than it is today. Capacity is only likely to be met by greater use of nurse practitioners with increased levels of responsibility. This will in turn need to be supported by the development of career paths for Indigenous health workers.

Kimberley Primary Health Care Sustainability Study 2008 – 2030
NURSE PRACTITIONERS ARE IMPORTANT COLLEAGUES FOR RURAL GENERALISTS

Staffing health services in rural and remote areas of Australia is a longstanding challenge. This can be compounded with a lack of primary care providers and the utilisation of existing health services as a ‘one-stop shop’. Challenges include extremely high staff turnover, poor staff continuity, difficulties with staff recruitment and a decline in the focus on primary healthcare, resulting in severe challenges to healthcare delivery.

Nurses make up the largest group of health providers in the rural and remote workforce, and many communities with limited or no access to medical practitioners are dependent on nurse-led services. Nurse practitioners help improve access to primary health care in areas of workforce maldistribution, particularly areas where there is a shortage of GPs, both directly through provision of clinical care, and indirectly by assisting with workload, allowing for leave and work/life balance. Nurse practitioners have an important leadership function within rural and remote healthcare settings and can support capacity building for other healthcare staff. This may be particularly beneficial in areas with limited access to face-to-face professional development opportunities.

In addition, nurse practitioners can also support improved care coordination and the handover of care between settings, and support integration between general practice, ACCHOs and the broader healthcare and community systems.

MORE INFORMATION

Visit: www.acnp.org.au
Fact Sheet: Nurses in rural, regional and remote Australia https://www.ruralhealth.org.au/content/fact-sheet-nurses-rural-regional-and-remote-australia

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FACT SHEET: NURSE PRACTITIONERS – RURAL AND REMOTE (CLINICIAN VERSION SEPTEMBER 2021)