

## THE ADVENT OF PRACTICE NURSES

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### Abstract

This paper provides an overview of the required qualifications and standards of Practice Nurses in the Primary Care setting as well as an outline of the economic benefits of utilising Practice Nurses in a National Health System.

**Key words:** Practice Nurse, Qualifications, Standards, Economic benefits

### Introduction

Practice Nurses are a relatively new addition to general practice/family medicine and an innovation that is being implemented in most countries globally. They offer cost and time savings to clinics and sole general practices, through taking on some roles of general practitioners/family doctors, thus relieving them for more focused medical duties. Additionally they take on duties that benefit quality care of patients and duties that may benefit the practice financially (e.g. health promotion and monitoring, patient recall, disease prevention, office management, infection control, immunisation) and reduce incidence of adverse events. Practice Nurses have also been found to be a cost saving factor in national Health Budgets. Such Practice Nurses however need appropriate training and there are a range of qualifications for modern day practice nurses, some more general and some specific.

### Economic factors

Evidence has shown (1) that there is extensive national health cost saving through the employment and delegation of Practice Nurses (PN) and Advanced Practice Nurses (APN), not just in wages paid but in overall national health budgets. While wages are usually below those of GPs/FPs there is also argument that there should be parity of wages due to PN's involvement in other aspects of health provision.

Perhaps the most important economic aspect to a national health budget is that the cost to train Advanced Practice Registered Nurses (APRNs) for example, is far less than that involved for training a GP/family physician. The rising cost of health care is a concern for individuals, families, businesses, government entities, and society as a whole. Governments are looking to find ways to increase efficiency in the health system without compromising quality of care.

A number of empirical studies support the conclusion that greater utilization of Advanced Practice Nurses can both improve patient outcomes and reduce overall health care costs (2). Reducing the cost of medical care

frees up scarce societal resources to be spent in more productive ways.

Employment of Practice Nurses also alleviates doctor shortages, which is a problem in nearly all countries, and especially in rural and remote areas and developing and middle income nations.

Studies have looked at the employment of Practice Nurses in the economic impact of increased nursing hours of care on health outcomes. In an Australian study in Perth, Western Australia. The number of nursing-sensitive outcomes was 1,357 less than expected post implementation and included 155 fewer 'failure to rescue' events. The 1,202 other nursing sensitive outcomes prevented were 'surgical wound infection', 'pulmonary failure', 'ulcer, gastritis, upper gastrointestinal bleed' and 'cardiac arrest'. (3)

Higher nurse staffing levels and a richer skill mix (a higher proportion of registered nurse (RN) hours) have been linked with improved patient outcomes in many studies (3).

### Qualifications and expertise

In almost all countries nursing practice is defined and governed by law, and entrance to the profession is regulated at national or state level.

Globally there are various types of Practise Nurses (PN) and Advanced Practice Registered Nurses (APRN) and Certified Nurse Practitioners (CNP) each with slightly different roles and skill sets.

This paper looks in depth at the model of Practice Nurses adopted in many countries including Australia, USA, Canada, Ireland, New Zealand and the UK and at the various ways such PNs/APRNs can be used to both uphold and improve health care delivery in the general practice/family medicine setting. These skills sets not only concern the everyday workload of a busy practice, they are implemented on tertiary education standards and qualifications and within National Standards and Domains of General Practice/ Family Medicine.

Advanced practice nurses usually have a bachelor's degree in nursing, have practiced for at least several years and then have completed master's level work to qualify to perform advanced tasks. These advanced tasks include delivering babies in uncomplicated births; administering anaesthesia for routine surgeries; and managing primary care tasks for patients, such as routine screening and treatment of relatively straightforward problems.

In 2012, authors of a report issued by the not-for-profit Physicians Foundation noted in its discussion of the

safety and quality of nurse practitioners that "the research literature shows, without exception, that within their areas of training and experience, nurse practitioners provide care that is as good as or better than that provided by physicians."(3)

In the USA Advanced Practice Registered Nurses (APRNs) are registered nurses educated to Masters or post Masters level and many are educated for a specific role and patient population. APRNs are educated and certified to assess, diagnose, and manage patient problems, order tests, and prescribe medications. (3)

CNPs are educated and practice at an advanced level to provide care, independently, in a range of settings. CNPs are responsible and accountable for health promotion, disease prevention, health education and counselling as well as the diagnosis and management of acute and chronic diseases. They provide initial, ongoing and comprehensive care to patients in family practice, pediatrics, internal medicine, geriatrics, and women's health. CNPs are prepared to practice as primary care CNPs or acute care CNPs, which have separate national competencies and unique certifications.

The Clinical Nurse Specialist (CNS) is involved with the patient, other nurses and the practice of nursing, as well as the healthcare organization and its system. The CNS is accountable for diagnosis and treatment of health/ illness states, disease management, health promotion, and prevention of illness and risk behaviours among individuals, families, groups and communities.

Other nursing categories are Certified Registered Nurse Anaesthetist (CRNA), nurses who provide anaesthesia care and anaesthesia-related care for patients and Certified Nurse-Midwife (CNM) who provide the full range of primary health care services to women throughout the lifespan, including gynecological care, family planning services, preconception care, prenatal and postpartum care, childbirth, and neonatal care.

Nurse practitioners can deliver as much as 80 percent of the health services, and up to 90 percent of the pediatric care, provided by primary-care physicians, with equal quality and at lower cost, according to a landmark review by the congressional Office of Technology Assessment (OTA) in 1986. (1)

Nurse practitioner roles were introduced in Australia (and in other countries including the USA, Canada, Ireland, New Zealand and the UK) with a range of objectives including improved access to healthcare services via a flexible, innovative, integrated care strategy, and increased continuity of nursing care at an advanced practice level (4).

As with other roles in primary care, nurse practitioners can specialise in particular areas of care (e.g. HIV or aged care), or work with a broader scope (e.g. population health or 'generalist' primary care nursing). This adds capacity to the practice by offering care that may otherwise be unavailable in a [particular practice].

**Clinical benefits of a nurse practitioner depend on the opportunities the practice chooses to maximise, including:**

- increased access for patients, such as options for more timely appointments and the ability to:
  - prescribe medicines
  - order and interpret diagnostic tests
  - refer patients to other health professionals
- increased choice of practice team member
- contribution to the development of general practice nursing by providing mentoring and education of other nurses in general practice, other members of the general practice team, and nursing, medical and allied health students
- improved continuity including relational continuity and transfer of information within the practice team
- longer appointments with patients who have complex care needs
- improved coordination of care, including case management and improved efficiency of the inter-professional experience
- provision of new services to patients to address population health needs and improve health

outcomes for the community. This may be achieved by: offering clinics to address chronic disease/complex care (such as asthma clinics, anticoagulation clinics, wound clinics, diabetes clinics, dementia management); enhanced telehealth opportunities; preventive models; patient education; meeting targets around national screening programs (bowel, prostate, breast and ovarian cancers); immunisation; weight loss

and smoking cessation programs.

- opportunities to enhance teamwork within the practice (e.g. reconfigure business processes; patient streaming - beyond the opportunities offered by employing a general practice nurse).

**Economic benefits include opportunities to:**

- generate new revenue streams through health billing and gap fees, and potentially by working differently as a practice team
- realise cost efficiencies, e.g. by increasing practice capacity while reducing average cost per consultation
- remove unnecessary duplication of work in cases where patients might otherwise see a nurse practitioner rather than a general practice nurse and general practitioner. Nurse practitioner contracts can be structured in a number of different ways, ranging from

employee to independent contractor, with or without sharing of revenue from MBS (or other national) items.

**Other benefits include:**

- potential to improve patient satisfaction and health outcomes as a result of the clinical benefits

described above

- opportunities to reconfigure how the practice team works - e.g. to improve teamwork and enhance shared patient encounters - leading to greater job satisfaction for all team members

One nurse practitioner noted that the role brought greater satisfaction for her than previous roles as a general practice nurse, as she carries greater responsibility and works more autonomously.

- address workforce issues and potential shortages while offering a more efficient mix of clinical skills within the overall practice team - the right person delivering the right level of service at the right time

- better manage workflows - e.g. reduce waiting time to access health care by offering patients the choice of a nurse practitioner where appropriate

- improved work-life balance for practice owners and the general practice team.

**What can a nurse do in general practice?**

The Nursing and Midwifery Board of Australia (NMBA) defines the scope of practice of a profession as the “full spectrum of roles, functions, responsibilities, activities and decision-making capacity that individuals within that profession are educated, competent and authorised to perform” (5). Not all elements within a scope of practice are unique to a specific profession, with elements of service delivery potentially overlapping. Additionally, external factors such as the environment, including legislation, policy, education, standards, the specific clinical setting and population health needs will influence the scope of practice. The scope of practice of an individual nurse may be more specifically defined to reflect the individual nurse’s “education, clinical experience and demonstrated competency” in the specific clinical setting. The NMBA has developed a national decision making framework to guide nurses’ in making decisions about whether a particular aspect of care or service delivery is within their individual scope of practice. (5)

**The Standards (6)**

The 22 Standards for practice are presented in the four domains that reflect the breadth of nursing in General Practice. Professional practice includes those standards that relate to aspects of nursing in General Practice concerning the professional role. Nursing care reflects the clinical delivery of nursing services to consumers in General Practice. The General practice environment incorporates aspects of the nursing role that are organisational or environmental in nature.

These Standards reflect the aspects of the nursing role unique to the general practice context and different from those which would be expected of the nurse in other clinical settings.

### Professional Practice

**Standard 1.** Demonstrates an understanding of primary health care principles and nursing in general practice.

**Standard 2.** Provides nursing care consistent with current nursing and general practice standards, guidelines, regulations and legislation.

**Standard 3.** Actively builds and maintains professional relationships with other nurses and regularly engages in professional development activities.

**Standard 4.** Advocates for the role of nursing in general practice.

**Standard 5.** Demonstrates nursing leadership.

### Nursing Care

**Standard 6.** Demonstrates the knowledge and skills to provide safe, effective and evidence based nursing care.

**Standard 7.** Undertakes nursing assessment and plans ongoing care.

**Standard 8.** Effectively implements evidence-based health promotion and preventive care relevant to the Practice community.

**Standard 9.** Empowers and advocates for consumers.

**Standard 10.** Understands diversity in the Practice community and facilitates a safe, respectful and inclusive environment.

**Standard 11.** Effectively delivers evidence-based health information to improve health literacy and promote self-management.

**Standard 12.** Evaluates the quality and effectiveness of nursing care.

### General Practice Environment

**Standard 13.** Demonstrates proficiency in the use of information technology, clinical software and decision support tools to underpin health care delivery.

**Standard 14.** Effectively uses registers and reminder systems to prompt intervention and promote best practice care.

**Standard 15.** Understands the context of general practice within the wider Australian health care system, including funding models.

**Standard 16.** Contributes to quality improvement and research activities to monitor and improve the standard of care provided in general practice.

**Standard 17.** Participates in the development, implementation and evaluation of relevant policies and procedures.

**Standard 18.** Monitors local population health issues to inform care and responds to changing community needs.

**Standard 19.** Effectively manages human and physical resources.

### Collaborative Practice

**Standard 20.** Builds and maintains professional and therapeutic relationships with consumers, their families and/or support person(s).

**Standard 21.** Effectively communicates, shares information and works collaboratively with the general practice team.

**Standard 22.** Liaises effectively with relevant agencies and health professionals to facilitate access to services and continuity of care.

Nurses have the knowledge and ability to provide comprehensive, evidence-based nursing care in the general practice setting. Nurses are integral to planning, implementing, co-ordinating, monitoring and evaluating health care within General Practice. This involves not only assessment and management of the immediate problem, but also includes health screening, preventive care, understanding the social and psychological context, health promotion and health maintenance.

To provide high quality nursing care, the nurse will effectively use a range of communication strategies, sensitive to the individual's values, beliefs, culture, sexual orientation, gender identity and personal context. The nurse will also empower the consumer by supporting their health literacy and the development of appropriate self-management skills. Where necessary, the nurse will also advocate for the consumer and their needs. To ensure that services are meeting the needs of individual consumers and/or the Practice population, nurses will reflect on the quality and effectiveness of their practice.

Nurses in General Practice build and foster relationships with their Practice population, members of the general practice team, other health professionals, community agencies and other organisations to optimise outcomes for consumers. Given the close and often ongoing relationship between nurses and consumers, their families and/or support person(s), nurses are ideally placed to assess and manage a range of health needs. Nurses in General Practice recognise when it is appropriate to consult with, or refer to, other members of the general practice team. Nurses are often recognised as leaders in collaboration with others to enable the integration of care, particularly in the general practice setting.

The following Standards are from: NATIONAL PRACTICE STANDARDS for NURSES IN GENERAL PRACTICE, Australian Nursing and Midwifery Federation. Standards are funded by and Copyright to the Australian Government Department of Health.

## Domain 1: Professional Practice

### STANDARD 1

**Demonstrates an understanding of primary health care principles and nursing in general practice.**

***Performance Indicators***

- Identifies and responds to the health and social needs of the local community.
- Integrates an understanding of the health and social needs of the Practice and/or local community into the delivery of nursing care.

### STANDARD 2

**Provides nursing care consistent with current nursing and general practice standards, guidelines, regulations and legislation.**

***Performance Indicators***

- Critically evaluates how standards, guidelines, regulations and/or legislation can be translated and integrated into practice.
- Mentors other nurses and health professionals in the application of specific standards, guidelines, regulations and/or legislation.
- Evaluates the impact of standards, guidelines, regulations and/or legislation on service delivery, clinical care and/or health outcomes.
- Provides feedback to reviews of standards, guidelines, regulations and/or legislation.

### STANDARD 3

**Actively builds and maintains professional relationships with other nurses and regularly engages in professional development activities.**

***Performance Indicators***

- Leads networks of nurses in general practice, facilitating orientation to general practice and networking and/or mentoring relationships.
- Acts as a mentor or professional role model for other nurses in general practice.
- Undertakes and facilitates peer appraisal of nursing in general practice.
- Critically reflects on own clinical performance and actively seeks external critical review of clinical practice.
- Contributes to the professional development of other nurses in general practice.
- Participates in the delivery of local continuing professional development opportunities.

### STANDARD 4

**Advocates for the role of nursing in general practice.**

***Performance Indicators***

- Seeks opportunities to raise the profile of the nursing profession and its role in general practice within the broader community.
- Works in collaboration with local, State/Territory and/or national groups to inform and advocate for nursing in general practice and contribute to workforce planning.

### STANDARD 5

**Demonstrates nursing leadership.**

***Performance Indicators***

- Participates in the generation of evidence to support the effectiveness of nursing in general practice.
- Contributes to the development of business cases for nursing in general practice.
- Participates in the strategic planning of nursing services within the Practice.

- Identifies and seeks opportunities for funding or additional resources to support service delivery, evaluation activities or research within the Practice.
- Acts as a nurse consultant in areas of particular clinical expertise.
- Demonstrates involvement in leadership activities within nursing and/or general practice groups at a State/Territory and/or national level.
- Actively promotes health, wellbeing and fitness to practice amongst the nursing and general practice team.

## Domain 2: Nursing Care

### STANDARD 6

**Demonstrates the knowledge and skills to provide safe, effective and evidence-based nursing care.**

#### *Performance Indicators*

- Critically evaluates relevant clinical guidelines and/or primary research to inform nursing care.
- Identifies areas of practice that are not currently based on evidence and explores the available evidence to guide practice.
- Safely, effectively and appropriately provides expert clinical care relevant to the individual consumer.
- Expresses high level understanding of the pathophysiology behind, and management of, the diverse range of health issues encountered within general practice.
- Supports activities to evaluate the translation of evidence into practice.
- Provides education relating to evidence based initiatives and processes, to members of the general practice team.

### STANDARD 7

**Undertakes nursing assessment and plans ongoing care.**

#### *Performance Indicators*

- Demonstrates proficiency in a range of advanced health assessment skills within the RN scope of practice.
- Effectively and appropriately uses advanced health assessment skills to evaluate health status and/or risk of developing disease.
- Accurately interprets the findings of diagnostic tests within the scope of RN practice.
- Integrates the findings from validated assessment tools and diagnostic tests with health assessment information to develop an individualised plan of care.

### STANDARD 8

**Effectively implements evidence-based health promotion and preventive care relevant to the Practice community.**

#### *Performance Indicators*

- Collaborates with members of the general practice team to identify new opportunities for the Practice to undertake health promotion and/or preventive care activities.
- Establishes systems, in collaboration with the general practice team, to ensure that health promotion and preventive care is evidence-based consistently delivered and regularly evaluated across the Practice.
- Identifies and plans nursing services to meet population specific needs for health promotion and/or preventive care.
- Designs and implements relevant, evidence-based opportunistic health screening programs across the Practice.

### STANDARD 9

**Empowers and advocates for consumers.**

#### *Performance Indicators*

- Advocates for the needs of the Practice population with external groups, including service providers, councils and other health professionals.

- Supports consumers to raise relevant issues with external groups, including service providers, councils and other health professionals.
- Takes a risk based approach in advocating for and empowering consumers.

#### STANDARD 10

**Understands diversity in the Practice community and facilitates a safe, respectful and inclusive environment.**

***Performance Indicators***

- Takes a leadership role in developing a professional relationship with diverse groups in the local community.
- Works with diverse groups to develop, implement and evaluate specific programs to engage them within the Practice community.
- Promotes access to general practice services by diverse groups in the local community.
- Creates and/or provides resources that specifically meet the needs of consumers from diverse groups.
- Takes an active role in managing factors that seek to disrupt the provision of a safe, respectful and inclusive environment.
- Facilitates education for members of the general practice team around the specific needs of relevant diverse groups in the local community.

#### STANDARD 11

**Effectively delivers evidence-based health information to improve health literacy and promote self-management.**

***Performance Indicators***

- Develops education/self-management resources relevant to the Practice community.
- Critically evaluates the strategies used by the nursing team to facilitate health education and promotion of self management.
- Integrates evidence based principles in the delivery of health education and self management support.
- Supports other nurses in the development and/or delivery of health education and consumer self-management.

#### STANDARD 12

**Evaluates the quality and effectiveness of nursing care.**

***Performance Indicators***

- Takes a leadership role in critically evaluating potential or actual risk, near misses and/or safety breaches related to nursing care and develops a plan to minimise future events.
- Leads activities within the nursing team around quality improvement related to nursing care.
- Establishes and monitors key performance indicators appropriate to the model of nursing care.
- Works with other nurses in general practice on nursing quality improvement issues across Practices at a local, State/Territory and/or national level.
- Appropriately disseminates information relating to quality improvement to nursing and/or general practice groups.

### Domain 3: General Practice Environment

#### STANDARD 13

**Demonstrates proficiency in the use of information technology, clinical software and decision support tools to underpin health care delivery.**

***Performance Indicators***

*Infection control*

- Understands the importance of, and, undertakes regular data checking and cleansing.
- Conducts audits of Practice data using relevant IT systems and contributes to planning a response to the findings.
- Initiates education of the general practice team around identified issues related to data quality.

- Critically evaluates the use of IT in the delivery of nursing care.
- Acts as a mentor to support the development of clinical IT skills in other nurses and members of the general practice team.
- Seeks out innovations in IT to support the delivery of nursing care in the Practice.

#### **STANDARD 14**

**Effectively uses registers and reminder systems to prompt intervention and promote best practice care.**

##### ***Performance Indicators***

- Identifies a population health clinical need and initiates new recall and reminder systems and/or registers as required.
- Critically evaluates the safety and effectiveness of Practice recall and reminder systems and/or registers.
- Develops and implements systems and processes to identify near misses in relation to recalls and reminders.
- Undertakes audits of Practice registers to identify potential areas of clinical improvement.

#### **STANDARD 15**

**Understands the context of general practice within the wider (Australian) health care system, including funding models.**

##### ***Performance Indicators***

- Maintains detailed and current knowledge of the various funding streams available to general practices.
- Actively participates in the development of business cases, including health outcomes evidence and financial implications, to support nursing in general practice.
- Provides leadership in developing nursing models to meet the changing context of general practice.

#### **STANDARD 16**

**Contributes to quality improvement and research activities to monitor and improve the standard of care provided in general practice.**

##### ***Performance Indicators***

- Collaborates with other members of the general practice team to initiate Practice-wide quality improvement and/or research activities.
- Takes a leadership role in the accreditation process, in relation to nursing roles and responsibilities.
- Identifies and prioritises quality issues within the Practice.

#### **STANDARD 17**

**Participates in the development, implementation and evaluation of relevant policies and procedures.**

##### ***Performance Indicators***

- Critically evaluates policies and procedures based on evidence and changes in the environment of general practice.
- Takes a leadership role in the development, implementation and evaluation of Practice policies and procedures.
- Anticipates risk and potential for adverse events related to policies and procedures.
- Contributes to, and/or initiates the development, implementation and evaluation of policies and/or procedures for nursing in general practice at a local, State/Territory and/or national level. National Practice Standards for Nurses in General Practice

#### **STANDARD 18**

**Monitors local population health issues to inform care and responds to changing community needs.**

##### ***Performance Indicators***

- Analyses and interprets current population health data to inform improvements in nursing care and/or service delivery in the Practice.



- Anticipates community population health needs related to local changes in the community demographics, physical environment and the social determinants of health.

#### **STANDARD 19**

##### **Effectively manages human and physical resources.**

###### ***Performance Indicators***

- Contributes to the development of proposals/briefs for additional resources.
- Develops, implements and monitors systems for managing supplies and equipment within the Practice.
- Critically analyses resource utilisation.
- Manages a budget for nursing services and/or equipment.
- Recognises alternative resources, supplies and/or equipment that could improve service delivery

### Domain 4: Collaborative Practice

#### **STANDARD 20**

##### **Builds and maintains professional and therapeutic relationships with consumers, their families and/or support person(s).**

###### ***Performance Indicators***

- Provides mentorship to other members of the general practice team to support communication and relationship building.
- Proactively seeks to establish ongoing relationships with members of the Practice community.

#### **STANDARD 21**

##### **Effectively communicates, shares information and works collaboratively with the general practice team.**

###### ***Performance Indicators***

- Develops and implements strategies to share clinical information between members of the general practice team.
- Proactively seeks to contribute to the development of communication skills in all members of the general practice team.
- Demonstrates a leadership role in developing a culture of collaboration within the nursing and general practice teams.
- Critically evaluates the nature of collaboration and/or teamwork within the Practice.
- Identifies potential strategies to enhance collaboration and/or teamwork within the Practice.
- Seeks to engage all members of the nursing and general practice team in collaborative practice.

#### **STANDARD 22**

##### **Liaises effectively with relevant agencies and health professionals to facilitate access to services and continuity of care.**

###### ***Performance Indicators***

- Critically evaluates and seeks to address gaps in local service provision.
- Actively seeks to expand opportunities for the Practice community to access local services.
- Co-ordinates care for those with complex conditions, acting as a liaison between health professionals.
- Leads the development of strategies to promote equitable access to services.

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## PNs in the Middle East

The Middle East region has economies ranging from some of the poorest in the world to some of the wealthiest. Universal health care is available in some countries and not in others. All countries however can benefit from reduced health spending on a national basis - and quality improvement in care given.

The Middle East also has some unique problems in that many health professionals, and particularly nurses, are imported from abroad thus resulting in a unique set of problems, particularly of a communication and cultural nature. In some countries of the Middle East, the expatriate nursing workforce may be as high as 80% (7). Expatriate nurses are a transient workforce, and this also results in a lack of stability in creating a nursing workforce, which further presents a challenge in establishing and sustaining indigenous nursing developments.

The aim of the nursing community worldwide is for its professionals to ensure quality care for all, while maintaining their credentials, code of ethics, standards, and competencies, and continuing their education. While some western countries are the front-runners in advancement of technology and other modern developments, the Middle East is not very far behind.

The notable factor in the Middle East is that the caregiver and the caretaker are all from different countries. The indigenous growth of nursing across the region has been affected by a strong history of medicine, a culturally derived poor perception of nursing and a readily available and majority expatriate nursing workforce.

There is now recognition in individual countries, that to develop and make progress in health services, the recruitment of local nationals to nursing is important for growth of the role of the nursing profession in the delivery of health services. In Bahrain, for example, there are two universities providing undergraduate nursing and greater numbers of young Bahraini women and men are applying for entry to nursing. In the most recently established university (RCSI; [www.rcsibahrain.edubh](http://www.rcsibahrain.edubh)), the number of Bahraini student nurses commencing the programme between 2006-2014 increased by over 150% and the number of males entering the programme increased by 25%. (7)

## Conclusion

Nurses have always been an invaluable and often unacknowledged part of all health systems but their introduction into general practice and a range of other specialised medical practices allows for better all round patient care and documented decrease in national health costs.

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