

**Australian College of Nurse Practitioners response to:**

**Tasmanian Government - Department of Health**

**Our Healthcare Future: Advancing Tasmania's Health**

July 18, 2022

Health Planning Unit  
Tasmanian Government  
Department of Health

By email: [ourhealthcarefuture@health.tas.gov.au](mailto:ourhealthcarefuture@health.tas.gov.au)

Dear Health Planning Unit

Thank you for the opportunity to provide a response to the Consultation on 'Our Healthcare Future: Advancing Tasmanian's Health'.

The Australian College of Nurse Practitioners (ACNP) is the national peak organisation for Nurse Practitioners, advancing nursing practice and consumer access to health care. A key focus for the role and scope of practice development for Nurse Practitioners is on unmet needs within the community and increasing access to health care.

To improve access to health care, health services and systems must make the best use of all their qualified health practitioners with advanced knowledge and skills, which will also improve health workforce flexibility and sustainability.

Tasmania is dealing with a complex range of challenges impacting on all aspect of the healthcare system: an ageing population, over reliance on hospital services, overburdened primary care services with critically limited access for populations with financial disadvantage, high levels of chronic disease with over 50% having avoidable conditions, low health literacy, high rates of social disadvantage/poverty and an aging health workforce (particularly general practitioners).

### Priority Recommendations

- **Include Nurse Practitioners as key stakeholders in Tasmanian health workforce planning and strategy.**
- **Prioritise funded Nurse Practitioner and Nurse Practitioner Candidate positions in Tasmania, with particular focus on geographic-, population- and clinical areas of need to ease the current burden on health care systems**
- **Champion Nurse Practitioners delivering innovative models of care such as Nurse Practitioner-led clinics, specialist roles and telehealth services.**
- **Support changes for Tasmanian and Federal legislation and regulations to allow Nurse Practitioners to work to their full scope of practice thus contributing to positive health outcomes.**
- **Advocate to Federal Government in support of the Nurse Practitioner Reference Group (NPRG) 14 key recommendations.**

## Nurse Practitioners:

Nurse practitioners are registered nurses who have authority to practice independently and collaboratively in an expanded clinical role:

- advanced assessment and diagnostic capabilities
- prescribing medicines
- requesting and interpreting diagnostic examinations
- independently referring to medical and allied health practitioners

Nurse practitioners have completed additional university study at Master's degree level and are some of the most expert clinical nurses in the Australian health system. The role was established in the United States in 1965, and in Australia in 2000. At 31 March 2022, there were **2425** nurse practitioners in Australia, including **50** in Tasmania.

Nurse practitioners work in all areas of health, from hospitals to private practice, in cities and towns, in rural and very remote areas and treat people of all ages as generalists or specialists.

*Nurses and Midwives are the largest group of health professionals in Australia, numbering close to 450,000, with **nearly 9,000** in Tasmania.*

The NP role has existed in Australia since 2000 and is supported by a large body of empirical evidence demonstrating its safety, efficacy and cost-effectiveness. Importantly, the role is supported by health consumers, who choose to see a Nurse Practitioner because in addition to healthcare provision, they value the time spent educating and supporting them to understand and self-manage their individual health conditions using a nursing philosophy of care.

Nationally, and in Tasmania there are significant gaps in healthcare service and delivery – particularly in Aboriginal and Torres Strait Islander, homeless, disadvantaged and aged care populations. The Nurse Practitioner role was developed to address these gaps, but growth in the role has slowed because of significant legislation and funding issues that create unnecessary and restrictive barriers to Nurse Practitioner models of care. Nurse Practitioners can work as a health consumer's primary care provider, or as part of a larger care team. For example, some Nurse Practitioners work in similar ways to a general practitioner (GP), whereas others specialise in areas such as cardiology, mental health, alcohol and other drug services, emergency care, or diabetes care.

Medicare Benefits Schedule (MBS) reforms in 2010 resulted in patient subsidies for Nurse Practitioner-directed health care. However, little has changed since 2010, and significant policy, legislative and funding issues restrict Nurse Practitioners from achieving their full scope of practice, shifting healthcare costs to marginalised and/or vulnerable health consumers. For example, the patient MBS rebate for Nurse Practitioner professional attendances is 50% of those seen by allied health and medical practitioner services. In addition, the PBS has placed unnecessary restrictions on the costs of medicines prescribed by Nurse Practitioners, which also shifts costs to the consumer.

In 2015, the Commonwealth established the MBS Review Taskforce to review more than 5,700 MBS items to consider how they could be better aligned with contemporary clinical evidence and practice, in order to improve health outcomes. In 2018, the Taskforce established the Nurse Practitioner Reference Group (NPRG) to provide recommendations to the Taskforce, which would align with its aim of value-based healthcare. The NPRG provided 14 evidence-informed recommendations to the Taskforce relating to the subsidy of Nurse Practitioner-directed health services. The Taskforce ignored those recommendations and provided a response with three recommendations of their own, none of which were supported by clear rationale or evidence.

In recognition of the disappointments of the MBS Review Taskforce and the challenges faced by the Nurse Practitioner workforce, the previous Federal Health Minister established the NP-10 Year Plan Steering Committee. The work of this committee is ongoing to establish a strategic plan to assure the ongoing growth and relevance of the Nurse Practitioner role into the future. It is unknown if the work of the committee will result in tangible change; so accordingly, each State and Territory is actively attempting to remove NP legislative and policy barriers, to assure that Nurse Practitioners can achieve the aims and outcomes intended for the role.

It is important to note that as a result of the barriers to practice, both related to funding, as well as legislative barriers, the Nurse Practitioner workforce has grown slowly. Now that many of the barriers are being removed, especially within public health; we could see a maldistribution of Nurse Practitioners across Australia, as several States are already focused on fully enabling practice, and growing workforce rapidly within the public sector. One example is the response to the Inquiry into health outcomes and access to health and hospital services in rural, regional and remote New South Wales, which will see a significant number of additional roles in New South Wales. There could be some concern that this may impact on other areas in relation to workforce supply.

Nurse Practitioners are a cost-effective solution for improving access to healthcare. Increasingly, State and Territory governments have committed to funding Nurse Practitioner candidacy positions to improve healthcare access. Nurse Practitioner positions could be similarly increased in Tasmania across rural and urban settings. Appropriately placed and funded Nurse Practitioner positions would reduce primary care waiting times and decrease unnecessary hospital presentations. Improved focus on health education, health promotion and health literacy would assist in addressing the disproportionately high numbers of the Tasmanian population with chronic disease. Optimal utilisation of the skilled nursing workforce will create opportunity for career progression. The resulting growth in numbers of Nurse Practitioners and increased employment opportunities will enable Tasmania to attract Nurse Practitioners from other jurisdictions, increasing access to timely, safe and affordable care in Tasmania.

**Benefits to the Tasmanian population of increased access to Nurse Practitioners and reductions in barriers to practice:**

- Streamlined healthcare
- Improved access to timely outcomes
- Reduced inconvenience to patients and their families
- Reduced duplication of services
- Reduced healthcare costs
- Improved access to healthcare providers due to geography and/or financial adversity
- Accessible healthcare for populations who are marginalised by society and/or healthcare systems

**Resources and further reading:**

[The report of the NPRG](#)

[The KPMG Report](#)

[The Final report of the MBS Taskforce \(Dec 2020\)](#)

[The ACNP Proposal to the Minister \(Jan 2021\)](#)

Thank you again for the opportunity to participate in this important review.

Yours sincerely



**Leanne Boase**

President

Australian College of Nurse Practitioners



**Hazel Bucher**

Tasmanian Chapter Chair

Australian College of Nurse Practitioners

Australian College of Nurse Practitioners

A: Suite 26, Level 2, 204-218 Dryburgh Street, North Melbourne Vic 3051

E: [admin@acnp.org.au](mailto:admin@acnp.org.au) P: 1300 433 660 W: [www.acnp.org.au](http://www.acnp.org.au)