Maximising the Nursing Contribution to Positive Health Outcomes for the New Zealand Population

Primary Health Care Nursing

The aim of this document is to promote a process which will create an environment enabling nurses to provide comprehensive nursing care to individuals and population groups in New Zealand primary health care settings. The focus is reducing inequalities by providing timely and affordable access to client-centric primary health care services through integration and collaboration and by maximising the contribution of nursing.

Inherent in this document are assumptions that:

> A cohesive multidisciplinary team is an essential component of effective primary health care service delivery.
> A general practice environment will be a vital part of any change management process to achieve the aims that primary health care nursing aspires to.

Investment in primary health care demonstrably reduces health disparities and future health need (Keen, 2010; World Health Organisation, 2008) and, because of the lifespan over which the benefits are gained, the greatest benefit in health spending comes from that directed at the young (Cutler, Rosen & Vijan, 2006). Universal access to the necessary information, education and clinical care to support good health, with particular attention to the needs of mothers and young children, must be prioritised to ensure improved population health, health equity and manageable health need.

In the light of current population health needs and workforce resources, there is an urgent need to re-examine the effectiveness of the principal delivery mechanism of primary health care, for example through capitation-based subsidies to private GP practices. Flexible funding streams are necessary to facilitate alternative pathways to primary care and optimise the use of health workforce skills, across the range of health practitioners, to deliver safe, efficient and equitable health care. Funding is the primary tool for incentivising the changes needed to ensure equitable access to health care. For that reason nurses must be as involved in the planning and funding of services as they are in delivering them.

Nurses working in primary health care have been encouraged to change, innovate and integrate and as a consequence new models of primary health care nursing service delivery have emerged. These innovation ‘sparks’ have served as a platform for the further development of the nursing role in primary health care however to date they remain as fragmented examples of what could be. In some instances such innovations have been disestablished regardless of their success in terms of population health outcomes. Successful innovations require a proactive, national approach to ensure they are established elsewhere.

NZNO advocates models of care that fully utilise nursing’s holistic scope of practice and nurses’ expert knowledge of when to refer to other health professionals, as a complement to, not substitute for, medical care. This is already occurring, where mobile nursing workforces are taking services into the homes of disengaged and high need populations with positive results. Alternative purchasing models, having nurses as the
key entry point to the primary health care team, would optimise the use of funding and health workforce resources, increase people’s choices and improve health equity. A wide range of initiatives including walk-in centres, nurse-led clinics, nurse practitioner positions, and nurse partnerships with other health professionals such as pharmacists, GPs, and specialists, could provide safe, cost-effective, primary health care.

The Way Forward

Box 1

- Recruit and retain health professionals with the appropriate skills and knowledge practising at the fullest extent of their scope, to meet population health need in the primary health care environment
- An impact analysis which encourages questioning of the way services are delivered; recognises clinical expertise and utilises the knowledge embedded in practice will guide the redesign and improvement of service delivery in an integrated health care environment
- Make nursing services the key entry point to primary health care to ensure all New Zealanders have access to comprehensive primary health care, including primary, child and youth health, aged and mental health care
- Realign funding mechanisms for primary health care to remove barriers to the effective use of nursing skills to provide frontline care
- Ensure historical precedents do not limit future development

The Potential

NZNO supports the Whānau Ora model as an appropriate means of supporting whanau/hapu/iwi to address their health and social needs, providing that those who are delivering care are appropriately skilled and qualified for the role. Similarly, integrated family health centres offering a range of health and social services, have the potential to deliver timely, coordinated care and enable a smooth transition between maternity and primary health care services and well child provision, including screening and immunisation programmes. Whānau Ora also creates an opportunity for the primary health care sector to strengthen its relationship with mental health services to better enable continuity of care and to ensure both the health and social care needs to these consumers are met.

The Way Forward

Box 2

- Support the Whānau Ora model as an appropriate means of supporting families and communities to address their health and social needs, utilising recognised Maori health models such as Te Whare Tapa Wha
- Use readily available primary health care population health outcome data to focus providers’ attention on the needs of their enrolled populations in the development of services and models of care
• Progress the development of truly integrated family health centres (IFHC) with an emphasis on the mix of providers and services that will improve access for high need populations to their choice of provider
• Ensure the requirements for the establishment of integrated family health centres are mandated as being dependent upon a service delivery model that integrates the knowledge and skills of various regulated professional disciplines in both an intra and interdisciplinary way

Beyond the Rhetoric
Future health and social policy must articulate how the persisting ethnic and social inequalities in health will be addressed, emphasise the need for collaborative policy across sectors to address the social determinants of health, and refocus the provision of health care clearly onto primary health care as the most effective means of addressing health care need and improving health outcomes. Nurses have been identified as having a key role in developing, leading and providing effective primary health care internationally but Aotearoa New Zealand has yet to move beyond the policy rhetoric to fully articulating and enacting the potential of nurses and the development of new interdisciplinary models of care in this area.

The Way Forward
Box 3

• Fund via Health Workforce New Zealand, the ongoing development of a primary health care knowledge and skills framework which includes second level and advanced nursing practice roles including nurse practitioners.
• Require Primary Health Organisations and/or Management Service Organisations to actively pursue the development, advancement and deployment of the primary health care nursing workforce including nurse practitioner and other nursing leadership roles
• Commit resources to the research and development of nurse sensitive outcome indicators in primary health care

References

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Mission statement
NZNO is committed to the representation of members and the promotion of nursing and midwifery. NZNO embraces Te Tiriti o Waitangi and works to improve the health status of all peoples of Aotearoa/ New Zealand through participation in health and social policy development.

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Appendix 1

The NZ College of Primary Health Care Nurses is strategically positioned to respond to the current health care system challenges. Being representative of a wide range of nurses working within the communities of New Zealand, including whānau ora and iwi nursing services, public health and district nursing, prison services, school nurses, Primary Health Organisation (PHO) and general practice nurses, the vision is to not only attain the aspirations of the Primary Health Care Strategy for our population, but to also lay the foundation for a stronger more effective primary health care nursing network within that health system. We anticipate working collaboratively with all stakeholders in the NZ health sector for ultimate benefit to the people we serve.

The following table describes examples of initiatives that the College and NZNO have identified that would actively progress primary health care services towards the aspirations of the NZ Primary Health Care Strategy.

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<th>Goal</th>
<th>Proposed Initiatives</th>
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<td>1. That evolving models of service provision by primary health care nurses be actively developed in partnership with stakeholder organisations and funders, within an integrated primary health care team</td>
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<td>&gt; Funding formulae are reviewed and applied to health need and services, not providers</td>
<td>&gt; Work with government agencies including HWNZ to identify opportunities to redirect funding into primary health care services that enables first access care being provided by the appropriate service provider without restrictions to employer or organisation limitations (including collaborative prescribing)</td>
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<td>&gt; Alternative purchasing models are actively pursued, having nurses as the key entry point to the primary health care team, optimising the use of funding and health workforce resources increase people’s choices and improve health equity</td>
<td>&gt; Un bundle High user health cards and chronic conditions funding- e.g. Care Plus, to better apply funding to health need.</td>
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<td>&gt; Address barriers including legislative, historical and funding /business models</td>
<td>&gt; Reduce barriers to Nurse Practitioners for consumers including legislative</td>
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<td>&gt; Enable HWNZ initiative regarding collaborative prescribing</td>
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| 2. Clients have access to a range of nursing expertise (to support appropriate targeting of nurses skills and knowledge that allows nurses to work to the fullest extent of their scope of practice) supporting more integrated models of care | > A nationally endorsed PHC Knowledge and skills framework is developed, and agreed by relevant parties by supporting care assistants, second level nurses, and registered nurses, advancing nursing practice such as Clinical Nurse Specialist and Nurse Practitioner pathways in community settings.  
> An active marketing campaign to consumers is implemented to inform consumers of the options for accessing affordable, appropriate primary care services | > Develop and agree on a nationally implemented KSF including: Implementation and communication plan, timeframes, outcomes and evaluation  
> Pilot and evaluate integrated PHC Nursing  
  • Acute walk in same day access for consumers  
  • Structured proactive Chronic Care management services led by PHC nurses within integrated health care teams  
  • Self management support provided by community based nursing services  
  • Health line support provided by nurses |
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<td>3. The funders of Primary Health Care Services have the ability to measure nursing contribution to service delivery and outcomes</td>
<td>Nurse sensitive patient outcome indicators are created, tested and utilised as a basis for funding mechanisms</td>
<td>The contracts between DHBs and PHOs/IFHCS are reviewed to ensure that nursing services are required to be accurately measured and evaluated for quality outcomes and value for money. Work with the national IT Board to ensure nurse sensitive indicators are developed alongside other clinical measures</td>
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<td>4. The Whānau Ora model is supported as an appropriate means of supporting families and communities to address their health and social needs.</td>
<td>Integrated family health centres are supported to offer a range of health and social services, delivering timely, coordinated care</td>
<td>Use readily available primary health care data to focus providers’ attention on the needs of their enrolled populations in the development of services and models of care. Ensure the requirements for the establishment of integrated family health centres are mandated as being dependent upon a service delivery model that integrates the knowledge and skills of various regulated professional disciplines in both an intra and interdisciplinary way</td>
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