



APNA submission to the:

*Australian Government Consultation Paper for
the National Preventative Health Strategy*

April 2021

About APNA

The Australian Primary Health Care Nurses Association (APNA) is the peak professional body for 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.

www.apna.asn.au

Our Vision

A healthy Australia through best practice primary health care nursing.

Our Mission

To improve the health of Australians, through the delivery of quality evidence-based care by a bold, vibrant and well supported primary healthcare nursing workforce.

Contact us

APNA welcomes further discussion about this review and our submission. Contact:

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Introduction

The Australian Primary Health Care Nurses Association (APNA) welcomes the opportunity to contribute to the Australian Government Consultation Paper for the National Preventative Health Strategy.

We are providing this submission on behalf of our membership of Australian primary health care nurses.

Background

Primary health care nurses are the largest group of healthcare professionals working in primary health care. In Australia, at least 84,000 nurses work outside of the hospital setting in primary health care (Department of Health 2019) including nurse practitioners (NPs), registered nurses (RNs), enrolled nurses (ENs) and registered midwives (RMs). These nurses are skilled, regulated and trusted health professionals working in partnership with the multidisciplinary team and their local communities to prevent illness and promote health across the lifespan. They work in a range of clinical and non-clinical roles, in urban, rural and remote settings including:

- general practice
- residential aged care
- correctional health (juvenile and adult)
- community-controlled health services
- refugee health services
- alcohol and other drug rehabilitation services
- primary mental health services
- health promotion services
- antenatal clinics and maternal child health services
- domiciliary settings – in the home, boarding houses and outreach to homeless people
- custodial/detention settings
- educational settings – including preschool, primary and secondary school, vocational and tertiary education settings
- specialist practices including skin and cosmetic clinics
- occupational settings – occupational health and safety and workplace nursing
- informal and unstructured settings – including ad hoc roles in daily life, such as sports settings and community groups

The role for nurses within primary health care is clear. Nationally and internationally, nurses are now being seen as essential to achieving improved population health outcomes and better access to primary health care services for communities. A broader and more central role for nurses within a team-based, multi-disciplinary approach to care, enables health services to deliver essential holistic, person-centred management of chronic disease, and importantly it offers an opportunity to move from a disease focused approach to care to focusing on the prevention of illness and health promotion (ANF 2009; Crisp and Iro 2018).

About the review

APNA understands the views and recommendations in the report from the consultation document have been released for the purpose of seeking stakeholder feedback. We understand that this report does not constitute the final position on these items.

APNA Submission

Do you agree with the vision of the Strategy? Please explain your selection

Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
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APNA welcomes the opportunity to provide feedback on the Australian Government Department of Health draft *National Health Preventative Strategy*. APNA commends the Government for developing a long- term strategy for preventative health. APNA strongly supports the whole of government approach to this preventative health strategy and its focus on health equity for all Australians. APNA agrees with the overarching vision:

- “To improve the health of all Australians at all stages of life, through early intervention, better information, targeting risk factors and addressing the broader causes of poor health and wellbeing”.

APNA is strongly supportive of the investment in preventive health rising to be 5% of total health expenditure by 2030. This strong commitment to preventative health is necessary to improve population health outcomes.

APNA recommends broad consultation on the implementation plan for the National Preventative Health Strategy. The method of action for this strategy will be imperative to its success and APNA strongly encourages a detailed, data- focused, holistic approach to ensure that all principles, goals, frameworks and focus areas are able to be met with maximum success for Australians.

Do you agree with the principles? Please explain your selection

Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
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Enabling the Workforce

Scope of practice

APNA strongly agrees with the principle that enabling the workforce to promote health and prevent illness through multi- disciplinary care in Australia will require all health professionals being able to work to their full scope of practice.

APNA suggests that the framework for action includes an emphasis on the primary health care nursing workforce. Given this workforce has a strong role to play in health promotion, illness prevention and healthy ageing, the National Preventative Health Strategy should address any barriers to their utilisation.

Key barriers to utilisation of the primary health care nursing workforce in preventative health strategies are not limited to but may include:

Culture

Perceptions and attitudes by other health professionals, employers, patients, and consumers about the role of primary health care nurses may limit a nurses' ability to work to their full scope of practice. Support and understanding of the nursing skillset are essential to achieving team-based person-centered care.

Regulation

Current regulatory and legislative frameworks need to be reviewed and amended to facilitate better utilisation of nurses. Inconsistencies in nurses scope of practice in state and territory regulation have been highlighted through the COVID-19 vaccine rollout.

Structural

Current funding structures within general practice limit nursing practice, particularly in the areas of prevention and targeted health promotion. There is a need for a more sustainable and predictable funding model- one that is flexible longitudinally focused, and which better supports team-based, person-centered care.

Primary health care nurses need to have the required resources to work to their full scope of practice to ensure that the care provided to patients is not limited by insufficient funding, cultural barriers and regulatory restraints.

Education, training and placements

The nursing workforce also needs to be skilled in providing preventative health care in primary health care settings. High quality primary health care nursing education, training, and student placement opportunities will be central to achieving this. There is currently little uniformity in the approach to primary health care nursing in the undergraduate nursing curriculum. Nursing curriculum and placements should reflect the shifting focus of health care delivery from hospital to primary and community care sectors.

Primary health care workforce

Whilst APNA supports the focus on primary care, there is an opportunity to strengthen and increase utilisation of the broader primary health care workforce- not just nurses who work in general practice. This includes maternal child health nurses, school nurses and community health nurses. The critical role primary health care nurses play in preventative health has been recognised by the NSW Government, who have recently provided \$46.8 million to expand the *Wellbeing and Health In-Reach Nurse (WHIN)* program, which see highly skilled nurses being able to provide easy and accessible health and social support to students when they need it. The pilot project had successfully supported vulnerable students for a range of health and mental wellbeing issues and encouraged a proactive and preventative approach to student health (NSW Health, 2020).

Equity Lens

APNA strongly supports the principle of the equity lens which aims to ensure that health access and action considers the vast inequities that face Australians. APNA believes that areas of focus for improvement of preventative health measures should consider and address key issues that face vulnerable or disadvantaged communities and groups. For example, the syphilis outbreak across northern Australia has implications for fertility and overall health. Whilst sexual and reproductive health issues may not impact all communities Australia wide it highlights that action must be targeted and individualised depending on population needs. Likewise, the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) in their *Fourth National Sexually Transmissible Infections Strategy 2018–2022* outline the need to improve knowledge, awareness and understanding of STIs and sexual health among priority populations which are disproportionately affected by these health issues.

Do you agree with the enablers? Please explain your selection

Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
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Prevention in the Health System

Current funding mechanisms in primary health care, such as quality improvement programs and incentive payments, could be leveraged to embed preventative health activities. APNA believes that a greater focus on keeping people with existing health conditions healthy should also be a key focus of the strategy.

Partnership and Community Engagement

Whilst there is mention of community partnerships, this should be expanded to include partnerships with Federal, State and local governments.

This would support implementation, reduced repetition and improved consistency of preventative health measures and ensure local applicability, local buy-in and increased chances of success.

Information and Health Literacy

APNA believes there needs to be greater emphasis on supporting and educating Australians on the importance of self-care. This will require health professionals assessing a person's level health literacy and capacity to upkeep and maintain self-care and enacting strategies to enhance their health literacy.

Do you agree with the seven focus areas? Please explain your selection

Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
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Integrated health assessments

APNA agrees with the seven focus areas put forward by the taskforce. However, whilst the strategy acknowledges that the disease burden in Australia is caused by multiple chronic conditions such as cancer, cardiovascular disease, and mental health, there appears to be a specific focus on cancer

screening and prevention. APNA believes that a holistic approach to prevention and chronic conditions will lead to better health outcomes and would support the development and implementation of an integrated health check. APNA understands that the 10- year plan will be flexible and adaptable to the changing environment, particularly given the outbreak of COVID-19, however there is an opportunity to embed an integrated approach to screening and preventative care.

Preventative health nurse clinics (PHNCs) are an example of how this strategy can establish a primary means to preventative health measures for Australians. APNA has explored a variety of team based, nurse delivered models of care with a focus purely on prevention or on the integration of prevention into a broader model. One example is the use of an integrated risk assessment tool (IRAT) which can be used by primary health care nurses to increase multi- disease screening, documentation of risk factors for chronic disease and early detection of chronic disease within general practice settings. The screenings within this particular model had a focus on chronic diseases that share common risk factors including diabetes, heart disease, stroke, kidney disease and osteoporosis and successfully led to the detection of previously unknown risk factors and new diagnoses of chronic disease/s. APNA supports the further development and implementation of integrated health screen programs and believes that they can be expanded into community health settings for nurses to deliver. However, the success of these screenings would strongly rely on adequate funding and resources for successful implementation and results.

Improving immunisation coverage

APNA encourages the taskforce to include a more ambitious immunisation target. Australia is already extremely close to achieving a 95% vaccine coverage rate for children and 96% vaccine coverage for Aboriginal and Torres Strait Islander children. APNA believes that there needs to be a targeted approach to encourage adults and older persons to get vaccinated as they carry the largest burden of vaccine preventable disease.

Alignment with other national strategies

APNA strongly suggests that the implementation plan transparently outlines how the National Health Preventative Strategy intersects with other key strategies such as the Primary Health Care 10- Year Plan, the National Australian and Torres Strait Islander (ATSI) Health Plan and the Nursing 2030 Strategy. APNA implores the taskforce to outline the method, approach and ultimate goals of the strategy in order to ensure feasibility and accountability.

References

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