

Why general practice needs nurses more than ever

A guide to making the most of the nurse role during COVID-19



Australian College of
Rural & Remote Medicine
WORLD LEADERS IN RURAL PRACTICE



RACGP

This guide has been endorsed by the Royal Australian College of General Practitioners, the Australian College of Rural and Remote Medicine, the Australian Primary Health Care Nurses Association, and the Australian Association of Practice Management. Information is current at May 2020.

Why general practice needs nurses more than ever

This guide explains how general practices can make the most of the nurse role during COVID-19. From infection control to flu clinics, nurses are an important part of your practice team.

It is critical to keep this skilled workforce on board to meet the ongoing health needs of patients at this challenging time. General practice nurses attract revenue streams that will help sustain your business today and into the future.

With the chronic disease telehealth items for nurses, your practice can do even more to reach out to vulnerable patients who are isolated at home.

The value of nurses

Nurses cultivate trust and long-lasting relationships with patients.

Nurses are highly educated and use their skills to support integrated team care.

Nurses can be immunisers, educators, wound carers, health promoters and patient advocates.

Nurses free up doctors for additional consultations and complex presentations.

Nurses attract funding for practices, increasing the number and variety of services provided.

For more information about the potential roles of practice nurses, read the APNA position statement on [primary health care nursing](#)

Nurses and COVID-19

There are many ways nurses can support GPs and practice teams at this time. Here are some of them:

- Risk identification, screening and triage
- Implementing and overseeing quality and infection control measures
- Coordinating flu clinics to ensure safety of staff and patients
- Care planning and chronic disease management with GPs, including telehealth
- Population health checks
- Identifying and contacting at-risk patients, to ensure ongoing routine care
- Relevant business activities (eg policy and procedure development for practice accreditation; cleansing data and uploading to My Health Records)
- Staff education and support

Resources

[Flu clinics during COVID-19](#)

[Free telehealth training for nurses](#)

Practice nurses can provide or assist you to provide care using the telehealth items (available until 30 September 2020)

Chronic disease care planning

Skilled nurses can still substantially contribute toward the completion of chronic disease care plans, and care plan reviews. For example, a nurse could videoconference or teleconference with the patient to collect information to inform the care plan or review, and then it could be completed with the GP on videoconference.

Face to face	Videoconference item	Phone item	Rebate
#721 (GPMP)	#92024	#92068	\$146.55
#723 (TCA)	#92025	#92069	\$116.15
#732 (Review)	#92028	#92072	\$73.20
#731 (Contribution to a residential aged care facility care plan, or review)	#92027	#92071	\$71.55

Monitoring and support for a person with a chronic disease

A nurse (or Aboriginal and Torres Strait Islander health practitioner) can follow up with a patient on a care plan, on behalf of medical practitioner via phone or videoconference

Face-to-face item	Videoconference item	Phone item	Rebate
#10997	#93201	#93203	\$12.20

Practice nurses can provide or assist you to provide care using the telehealth items (available until 30 September 2020)

Aboriginal and Torres Strait Islander Health Assessments

A nurse can contribute toward health assessments for people of Aboriginal or Torres Strait Islander descent, with final completion by a GP on videoconference or the telephone.

Face-to-face item	Videoconference item	Phone item	Rebate
#10987	#93200	#93202	\$24.20

Bulk billing incentives

Bulk billing incentives have been doubled until 30 September 2020. Bulk billing is mandatory for:

- Commonwealth concession card holders
- children under 16 years old
- patients who are more vulnerable to COVID-19

#10990	Commonwealth concession care holders, children under 16 – MMM1	\$12.75
#10991	Commonwealth concession care holders, children under 16 – MMM2-7	\$19.30
#10981	Vulnerable patient, MMM1	\$12.75
#10982	Vulnerable patient, MMM2-7	\$19.30

Other payments supporting nurse activities

Workforce Incentive Program (WIP)

This provides up to \$125,000 a year for employment of up to 1.66 FTE nurses and/or allied health professionals.

Nurses contribute significantly to higher rebate services such as health assessments and care plans. These items targeted at patients with actual or potential chronic health problems are more highly weighted by Medicare and tend to increase practice funding. NOTE: If nurse hours are reduced, payments may be reduced.

Table 1: Annual WIP incentive amounts based on Standardised Whole Patient Equivalent (SWPE) values

SWPE	Minimum average number of hours per week for full incentive payment	Incentive amount for a nurse practitioner, registered nurse or allied health professional per annum	Incentive amount for an enrolled nurse, Aboriginal and Torres Strait Islander Health Worker, or Aboriginal and Torres Strait Islander Health Practitioner per annum
1000	12 hours 40 minutes	\$25,000	\$12,500
2000	25 hours 20 minutes	\$50,000	\$25,000
3000	38 hours	\$75,000	\$37,500
4000	50 hours 40 minutes	\$100,000	\$50,000
5000	63 hours 20 minutes	\$125,000	\$62,500

Practice Incentive Program Quality Improvement (PIP QI) Incentive

PIP QI provides up to \$50,000 a year and is relevant when nurses are contributing to quality improvements at their practice. Examples include patient population risk identification, data cleansing and developing PDSAs.

PIP QI has been doubled for the next two quarters (1 May and 1 August 2020). General practices must be open for face-to-face services for a minimum of four hours a day (or part-time practices for an average of 50% of their normal practice opening hours) to be eligible for the increased payments.



Practice nurses are invaluable members of general practice teams. They deliver high-quality, patient-centred care and provide crucial support to clinical and practice management systems. Their role and responsibilities continue to evolve in line with patient need and their consummate professionalism and dedication is inspirational

Associate Professor Carl De Wet, GP and Deputy Chair of the RACGP Expert Committee for Standards for General Practices



Rural and remote general practices are a team, where the practice nurse makes a valuable contribution, especially as a key patient advocate and connection to community and to the health services that they work with

Dr Ewen McPhee, ACRRM President and Rural Generalist in Emerald, Queensland