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Health and Wellbeing

CE-2022-6840

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Hon Ruth Forrest MLC
Chair Sessional Committee
Legislative Council Government Administration Committee 'A'
Parliament of Tasmania
HOBART TAS 7000

E: Jenny.Mannering@parliament.tas.gov.au

Dear Hon Ruth Forrest MLC

**RE: SA HEALTH SUBMISSION TO THE SUB-COMMITTEE INQUIRY INTO RURAL
HEALTH SERVICES IN TASMANIA**

I write in response to correspondence from your office of 6 May 2022, requesting information in the form of verbal evidence via video conference or written submission relating to the progress of nurse led models of health care in regional South Australia.

Please find attached the SA Health written submission which provides information about the Nurse Practitioner led models of care in regional South Australia.

Please do not hesitate to contact Adj Assoc Prof Jennifer Hurley, Chief Nurse and Midwifery Officer jenny.hurley@sa.gov.au should you wish to discuss the details of the written submission further.

Yours sincerely

A handwritten signature in blue ink, appearing to be "Lynne Cowan".

MS LYNNE COWAN
Acting Chief Executive

A handwritten date in blue ink, "13/6/22".

At: SA Health CNMO Submission to Sub Committee Inquiry into Rural Health Services in Tasmania

CE-2022-6840

System Leadership and Design
Clinical Collaborative
Nursing and Midwifery Office

Hon Ruth Forrest MLC
Chair Sessional Committee
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The Hon Ruth Forrest MLC

RE: SA HEALTH SUBMISSION TO THE SUB-COMMITTEE INQUIRY INTO RURAL HEALTH SERVICES IN TASMANIA

Nurse Practitioners in SA Health work to provide specialist high quality nursing care in a diverse range of settings including acute care, primary and community care, retrieval nursing and residential aged care. Utilising their advanced practice skills, knowledge and expertise, Nurse Practitioners work in partnership with patients, care givers, nursing and midwifery, allied health professionals, medical practitioners, and other care providers to ensure a connected holistic, quality approach to health care.

SA Health currently employs one hundred and thirty (130) Nurse Practitioners across thirty-eight (38) clinical specialties, ten (10) Local Health Networks (metropolitan and regional) and several State-wide Services.

Established regional Nurse Practitioner models of care operate across several clinical specialties in collaboration with nurses, midwives, medical practitioners, allied health professionals and other rural health care providers. The clinical specialities include:

- Emergency
- Mental health
- Oncology
- Adult palliative care
- Diabetes
- Geriatric community services
- Aged care (currently under development)
- Older persons emergency outreach/in reach (currently under development)
- Community outreach-chronic diseases (currently under development)

Those working in regional Nurse Practitioner chronic disease models of care, mental health and palliative care, do so in partnership with a comprehensive metropolitan based outreach medical specialist and specialist nursing networks, and regional general practitioner and community nursing networks.

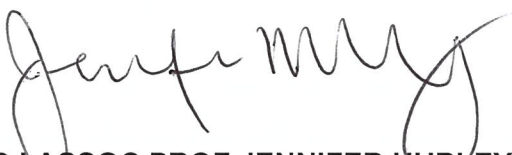
Ongoing medical workforce pressures and the growing burden of disease in regional South Australia has seen the emergence of complementary rural Nurse Practitioner led models of care in emergency care in most of the regional LHNs across South Australia. Whilst the rural emergency Nurse Practitioner role draws upon the well-established metropolitan emergency Nurse Practitioner models of care operating throughout Australia, the South Australian

regional experience has required a new and adaptable approach to tailor, and fully enable and support regional health system capacity and responsiveness. The SA Health Rural Emergency Nurse Practitioner Model of Care (Attachment 1) was developed to assist with the establishment and growth of the Nurse Practitioner roles in the South Australian regional emergency care context.

Informed by the Victorian Nurse Practitioner Collaboratives, the SA Health Emergency Nurse Practitioner Community of Practice was established in late 2020 to provide a vital wrap around for new and emerging regional emergency Nurse Practitioners. Furthermore, it has enabled connections between emergency Nurse Practitioners from across South Australia, providing a valuable clinician network offering education, mentoring and professional support. The SA Older Persons Nurse Practitioner Community of Practice has recently been established and will leverage the same methodology and approach.

For further information please don't hesitate to contact the SA Health Nursing and Midwifery Office.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Jennifer Hurley', with a stylized, cursive script.

ADJ ASSOC PROF JENNIFER HURLEY
Chief Nurse and Midwifery Officer

15/6/2022

Attachment - SA Health Rural Emergency Nurse Practitioner Model of Care



Progressing the New Narrative

Rural Emergency Nurse Practitioner Model of Care South Australia

“A contemporary and tailored nursing workforce approach to support safe and connected emergency care within the rural South Australian context”

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Foreword



It is a pleasure to launch the South Australian Rural Emergency Nurse Practitioner Model of Care.

Nurses provide a vital and respected contribution to leading, innovating and shaping the delivery of health care to communities across the full expanse of the metropolitan, rural and remote landscape of South Australia. The Rural Emergency Nurse Practitioner Model of Care (the Model) is aligned to the SA Health Nursing and Midwifery Strategic Directions 2019-2022 and provides a template to foster and grow a sustainable, resilient, contemporary and adaptive rural emergency nurse practitioner workforce to meet the needs of South Australian rural communities.

The Model complements the work being undertaken as part of the SA Health Rural Workforce Strategy 2019-2022 and the associated four key health workforce plans including the South Australian Rural Nursing and Midwifery Workforce Plan 2020-25 due for release in mid-2021. Furthermore, it echoes the Australian Commonwealth Governments' vision to invest in and build a rural health workforce which is contemporary, sustainable and has the right skills and training to address the unique health care needs of Australia's rural and remote communities.

Nurse practitioners are uniquely positioned to provide innovative, adaptive and complementary approaches to healthcare delivery which enable health services to evolve and mature to meet rural and remote Australia's changing health care needs. Successful integration of adaptive rural nurse practitioner workforce solutions and the implementation of innovative approaches to health care delivery require a unique approach, and must be informed by the local context in order to truly embed contemporary rural nursing care.

The ENP Rural Model of Care provides a positive way forward to better meet the health care needs of people living in rural and remote regions, who are recognised as having potentially poor health outcomes and inequity compared to people living in metropolitan areas. Rural and remote nurse practitioners are key to supporting and enabling better health outcomes and optimising resources within rural and remote communities.

The Model provides a tailored contemporary nursing workforce approach, one which supports complementary, safe and connected emergency care within the rural South Australian context. The Model has been developed to provide an enabling framework that guides and embeds sustainable nurse practitioner roles into the rural emergency care workforce now and into the future.

Adj Assoc Prof Jennifer Hurley
Chief Nurse and Midwifery Officer

Background

Nurse practitioners working in emergency settings comprise the largest cohort of nurse practitioners in the Australian context.¹ Traditional emergency nurse practitioner models of care evolved in large metropolitan hospitals and are informed by increasing demands on emergency departments resulting in overcrowding and increased waiting times.² The role was developed to work alongside and in congruence with well-established emergency medical models to manage patients presenting with minor injury or minor illness in a designated 'Fast-Track' area of the Emergency Department.^{3,4} Whilst the emergency nurse practitioner role has become an integral component in the provision of emergency care in state and national metropolitan emergency departments and urgent care centres, the role of emergency nurse practitioner in rural areas is in its infancy.⁵

Emergency care in rural South Australia is provided across six regional local health networks which encompass sixty one hospitals, aged care and community health services.⁶ The nursing and medical workforce, the level of onsite specialty support and the location of the service determine the level and complexity of emergency care able to be provided.^{2,3,7}

Rural workforce sustainability has become a key challenge for South Australia with longer term recruitment solutions, training and ongoing development of skilled health professionals at the core of SA Health's Rural Workforce Strategy.⁶ Whilst the broader and system wide Rural Workforce Strategies continue to evolve, rural local health networks have begun to explore nurse practitioner emergency models of care, which complement and strengthen rural emergency care processes, provide flexible and adaptable approaches to addressing service gaps and build professional capacity and sustainability within the rural nursing workforce.

The rural nurse practitioner model of care identifies the importance of inter-related key elements of leadership, workforce, education and support structures which are vital to supporting, growing and fully realising the opportunities the rural nurse practitioner models of care can offer rural and remote communities.



Vision

Provide a synergistic and complementary emergency nurse practitioner model of care to meet the emergency care needs of rural populations in South Australia.

A flexible approach that builds on existing rural emergency medical and nursing models in the local context and continues to evolve to meet organisational and community needs and priorities.

Aim

To provide a contemporary and tailored framework which reflects the unique rural context and is informed by traditional emergency nurse practitioner models of care, and invests in, enables, grows and sustains an agile, capable and committed South Australian rural emergency nurse practitioner workforce.

Methodology

This work has been led by the Chief Nurse and Midwifery Officer and Department for Health and Wellbeing in collaboration with important rural stakeholders including SA Health Local Health Networks.

The model of care development has been informed and supported by:

- > SA Health Rural Health Nurse Practitioner and Advanced Practice Nursing/Midwifery Roles Steering Committee,
- > Targeted interviews with the South Australian Nurse Practitioners working in the rural Local Health Network,
- > Local and national experiences and learnings,
- > State and Commonwealth policy context,
- > Review of literature,
- > Government of South Australia Health Rural Workforce Strategy,⁶
- > Relevant nurse practitioner professional standards of practice

- > Nurse practitioner is the highest clinical delegation of emergency nursing. The role is authorised to work autonomously and collaboratively in advanced and extended clinical nursing roles. Nurse practitioners are able to assess and treat patients, prescribe medications, order diagnostic investigations and refer to other health professionals.⁸
- > The training of nurse practitioners is grounded in the nursing profession's values, knowledge, theories and practice. Their practice is supported by 5000 hours of clinical practice at an advanced level within six years of seeking endorsement as a nurse practitioner and a masters degree qualification.^{8,9}
- > Nurse practitioners practice across all four of the Nursing and Midwifery Board of Australia nurse practitioner professional practice domains: Clinical, Leadership, Education and Research.⁹
- > Nurse practitioners function collaboratively with the broader multi-disciplinary emergency care team to strengthen partnerships which support safe, appropriate and timely care.^{1,2,8,10}
- > Rural models of health care delivery require a considered and tailored approach which adapts and evolves with the broad and unique needs of rural communities.¹¹
- > Shared, robust, dynamic and contemporary approaches to clinical governance support the delivery of safe and quality health care to rural communities.^{12,13}
- > Transformational nursing leadership is required at the clinical and executive level to foster a culture of mutual support, mentoring, innovation and flexibility to support organisational growth which reflects the needs of rural communities.^{9,10,14,15,16,17,18}
- > Partnerships with the broader health care team and multi-disciplinary health care providers facilitates the establishment of key connections and relationships which support safe and optimal multidisciplinary practice.¹⁰

Underpinning Principles

Key Elements

Leadership

Inspired leadership nurturing, influencing, shaping and driving the development of innovative nursing led workforce solutions for rural emergency departments.

Workforce

Agile, adaptable, sustainable and resilient nursing service delivery models that meet rural emergency departments' demands and expectations.

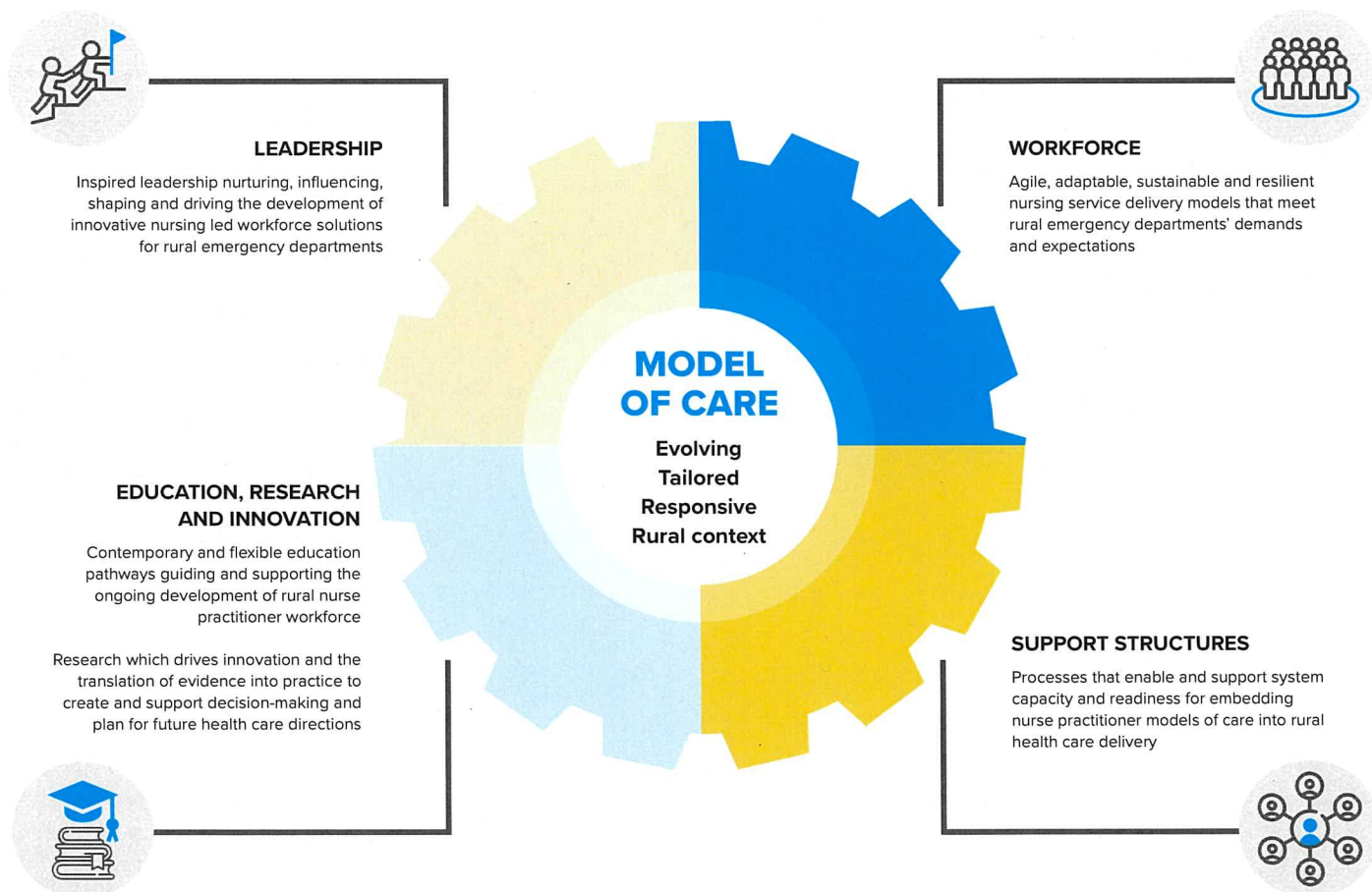
Education, Research and Innovation

Contemporary and flexible education pathways guiding and supporting the ongoing development of the rural nurse practitioner workforce.

Research which drives innovation and the translation of evidence into practice to create and support decision-making and plan for future health care directions.

Support Structures

Processes that enable and support system capacity and readiness for embedding nurse practitioner models of care into rural health care delivery.





Rural Emergency Nurse Practitioner Model of Care – South Australia

The rural emergency nurse practitioner role has its foundations in the traditional emergency minor injury and illness emergency model of care seeing predominantly Australasian Triage Scale (ATS) category 4 and 5. The emergency nurse practitioner role generally operates within fast-track areas of metropolitan emergency departments and works collaboratively within the broader multi-disciplinary emergency model of care.^{1,2} The role manages complete episodes of care including the assessment, diagnosis and management of patients presenting with minor injury and illness.^{1,2,3,19,20}

The unique nature of the rural context and its diverse challenges requires a tailored approach to developing a rural emergency nurse practitioner model of care which genuinely addresses the rural communities emergency care needs.²¹ Unlike their metropolitan counter parts, rural emergency nurse practitioners are well suited to work with and expanding scope of practice. This includes the use of technology and telehealth platforms to support existing emergency care delivery models and more broadly support the provision of safe and responsive emergency care within rural communities.²²


It is incumbent on rural emergency nurse practitioners to maintain the knowledge and skills to safely and effectively provide care within their designated scope of practice, but more broadly ensure a dynamic approach which allows for the evolution of the role in line with contemporary practice settings needs and priorities.^{7,23,24}

The difficulty recruiting, training and developing the workforce required to sustain health services in rural areas is well recognised.⁶ Nurse practitioners perform their role at an advanced level bringing with them not only specialist skills and knowledge, but also a many years of nursing and health system experience.

While rural emergency nurse practitioners may function autonomously to provide complete episodes of care for patients presenting with health care needs that fall into the traditional minor injury and illness scope of practice, they are well positioned to extend their clinical role to provide and support care to patients presenting for emergency care in rural health service across all ATS triage levels.

Furthermore, the rural nurse practitioner role is uniquely positioned to provide:

- > senior nursing clinical support and expertise to support the safe management of patients presenting for emergency care across all ATS levels,
- > opportunity for sharing the emergency care workload with medical staff,
- > professional leadership which influences the practice of nursing (including working to full scope of practice) and multi-disciplinary care,
- > opportunity to contribute to the redesign of care and treatment practices to meet health service evolution and community demand,
- > specialist, evidenced based and contemporary emergency care delivery,

- 
- > independent assessment and management of patients including prescribing,
 - > leadership in growing organisational culture that values and prioritises safe and quality consumer centred care,²⁵
 - > clinical education to nurses, medical and other health practitioners within their area of expertise,
 - > clinical leadership to support professional nursing practice, multi-disciplinary care and emergency care practice evolution and redesign consistent with rural community need,²⁶
 - > innovative approaches to support the delivery of emergency care in more geographically remote and isolated emergency care settings through telemedicine platforms and other communication and assistance platforms,²²
 - > vital linkages with state-wide emergency care resources,
 - > local knowledge and context in leading the broader multidisciplinary emergency care team,
 - > a rural nursing perspective and context to realise and guide opportunities for research which innovate, inform and shape future rural nursing practice.

1. Leadership

Inspired leadership nurturing, influencing, shaping and driving the development of innovative nursing led workforce solutions for rural emergency departments

Strategies		Enablers	
1.1	High impact organisational leadership	1.1.1	Vision and direction that aligns organisational priorities to support the introduction of the rural emergency nurse practitioner (ENP rural) model of care
		1.1.2	Mentorship programs that enable the ENP rural to cultivate leadership capabilities
		1.1.3	Organisational support that guides and helps embed ENP rural model of care into service provision
		1.1.4	Organisational partnerships that support robust clinical governance processes
		1.1.5	Professional networks that support the integration of the ENP rural model of care into the broader inter-disciplinary and intra-disciplinary context
1.2	Nurse Practitioners as authentic and dynamic leaders	1.2.1	Transformational leadership that supports and embeds the ENP rural model of care into the rural emergency care setting
		1.2.2	Multi directional mentoring relationships that foster innovation, self-reflection and professional development
		1.2.3	Engagement and mutual support to influence the broader emergency care team to provide safe, quality and consumer centred care
		1.2.4	Evolving the ENP rural model of care in response to the changing rural health landscape
		1.2.5	Specialised knowledge/understanding of local context/processes/pathways to connect patients to requisite care

2. Workforce

Agile, adaptable, sustainable and resilient nursing service delivery models that meet rural emergency departments' demands and expectations

Strategies		Enablers	
2.1	Organisational drivers to influence and build the ENP rural workforce	2.1.1	Local candidacy program and transition pathways to build ENP rural workforce capacity
		2.1.2	Targeted and values based recruitment
		2.1.3	Robust succession planning to build sustainability
2.2	Shape and innovate workforce capabilities	2.2.1	Guidance of rural emergency nurses to work to their full scope of professional nursing practice
		2.2.3	Robust, innovative and agile care delivery approaches that support the broader rural health workforce
		2.2.4	Mentoring and enabling emerging ENP rural candidates

3. Education, Research and Innovation

Contemporary and flexible education pathways guiding and supporting the ongoing development of rural nurse practitioner workforce. Research which drives innovation and the translation of evidence into practice to create and support decision-making and plan for future health care directions

Strategies		Enablers	
3.1	<i>Organisations that build knowledge and drive innovation and growth</i>	3.1.1	Access to protected and dedicated professional development time
		3.1.2	Access to education programs that support role diversity, expansion and evolving scope of practice
		3.1.3	Training that connects the emergency rural nurse practitioner with the overall rural health service vision and delivery forecasts
		3.1.4	Targeted education and supervision opportunities to ensure the ENP rural has the necessary skills and collaborative support to succeed in their role
3.2	<i>Clinicians that are drivers of contemporary and innovative quality consumer centred care</i>	3.2.1	Investment in professional state-wide networks
		3.2.2	Currency of knowledge to inform the broader emergency care team with specialist knowledge through multiple modalities (including telehealth modalities)
		3.2.3	Promotion of the role of ENP rural and consumer understanding through the development of targeted resources and communication materials
		3.2.4	Leverage opportunities to innovate and engage in research which shapes future directions in rural health care delivery

4. Support Structures

Processes that enable and support system capacity and readiness for embedding nurse practitioner models of care into rural health care delivery

Strategies		Enablers	
4.1	<i>Organisations that inspire and enable system readiness</i>	4.1.1	Processes that articulate the role and responsibilities of the ENP rural
		4.1.2	Mapping of emergency patient flow pathways/workflows/ referral and escalation processes to support coordinated and effective ENP rural care delivery (Appendix 1)
		4.1.3	Contemporary clinical governance frameworks that support effective and safe provision of ENP rural services
		4.1.4	Broad digital and telehealth platforms to support the development of the role of ENP rural and its application.
4.2	<i>Nurse Practitioners that are connected and invested</i>	4.2.1	Investment in the development of rural nurse practitioner service model evaluation framework
		4.2.2	Engagement in and the provision of clinical support to the organisational development of patient flow pathways/workflows/referral and escalation processes (Appendix 1)
		4.2.3	Bringing a broader perspective to the delivery of rural emergency care informed by state-wide ENP networks and practice communities
		4.2.4	External community health providers partnerships that support seamless and consumer centred referral




Next Steps

The Rural Emergency Nurse Practitioner Model of Care offers a contemporary, innovative and adaptable approach to cultivating future South Australian rural emergency care nursing workforce. The model has been designed to specifically guide and provide direction for rural Local Health Networks seeking to develop and grow their local rural emergency nurse practitioner workforce. The methodology lends itself to developing other rural nurse practitioner models of care.

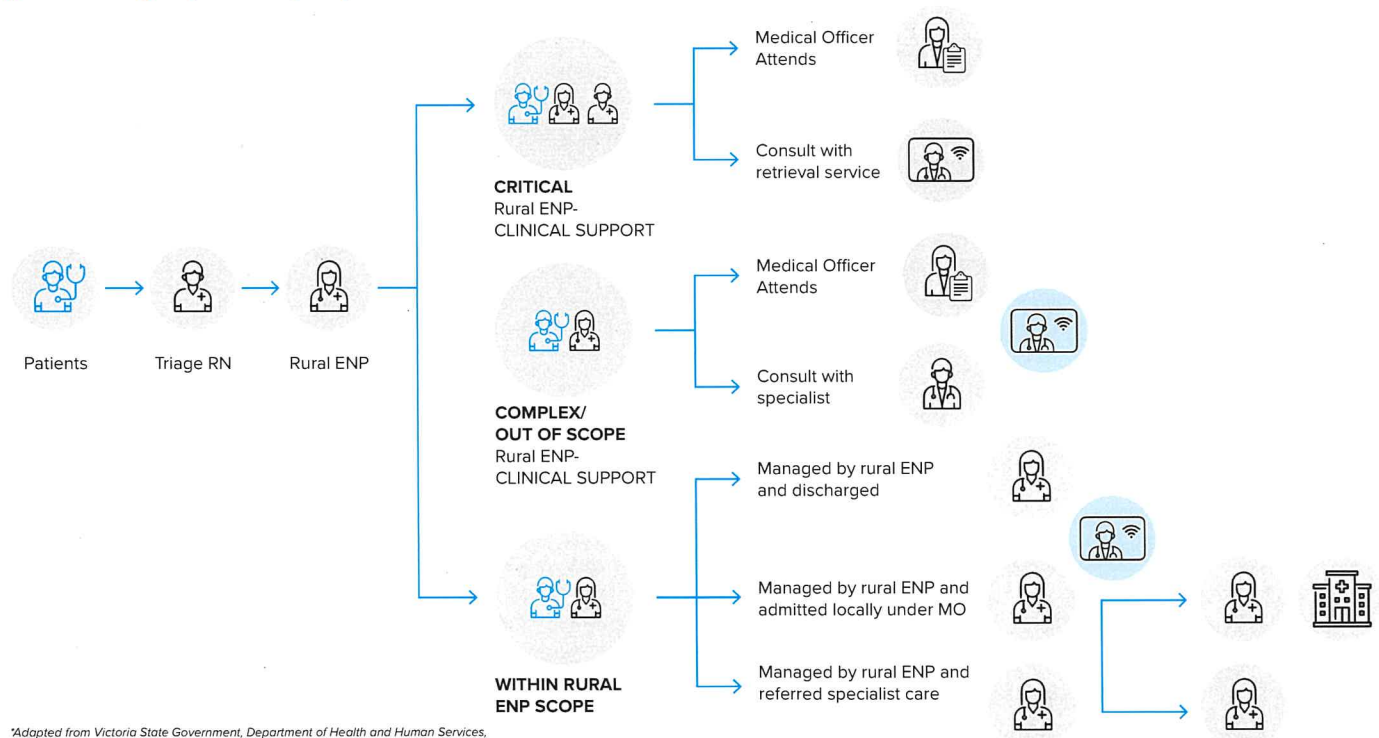
A consistent and contextual approach which incorporates the key elements of Leadership, Workforce, Education, Research and Innovation and Support Structures will underpin the evolution of other contemporary and innovative rural nurse practitioner models of care. Engaging an adaptable and dynamic design approach to developing models of care, will assist to fully integrate and embed the nurse practitioner role in the South Australian rural context, and provide vital opportunities to transform the health and wellbeing of rural South Australians into the future.

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Appendix 1: Rural emergency nurse practitioner workflows and referral pathways (example)*



*Adapted from Victoria State Government, Department of Health and Human Services, 'Urgent care centres: Models of care toolkit- Rural health urgent care Centres' 2017

For more information

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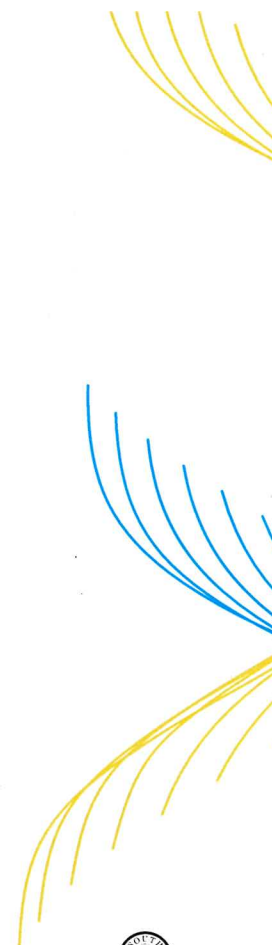
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