

Why we need community and primary health care nurses

ACN supports and values the importance of community and primary health care nursing. We advocate for and work with nurses to ensure that the Australian community is receiving the highest standard of care from the primary health care sector.

Community and primary health care nurses work in broad service delivery settings across Australia, such as:

- Community settings, including women's health and social service settings
- General practices
- Domiciliary settings in the home, including residential aged care, prisons, boarding houses and outreach to homeless people
- Educational settings, including preschool, primary and secondary school, vocational and tertiary education settings
- Workplace health and safety settings
- Informal and unstructured settings, including roles at sporting events and community groups (Australian Primary Health Care Nurses Association (APNA), 2017).

Their roles within these settings are diverse and may include:

- Treatment and care of sick people
- Illness prevention
- Health promotion
- Antenatal and postnatal care
- Child and family health nursing
- Immunisation
- Women's health
- Management of chronic diseases

- Rehabilitation and palliation
- Community development
- Workplace health and safety
- Population and public health
- Education and research
- Correctional health
- Data management
- Policy development and advocacy (APNA, 2017).

Community and primary health care nursing applies a social model of care that addresses the needs of individuals and communities while considering the social, economic and environmental factors impacting their health (Australian Nursing and Midwifery Federation, 2009). Community and primary health care nurses' wide scope of practice enables them to coordinate care and liaise with other professionals across the health care system and between service providers from other sectors (McMurray & Clendon, 2015).

Given our increasingly ageing population, the rising rate of chronic and complex disease, workforce pressures, widening inequities in health outcomes and access to services (Department of Health, 2013), and growing health care costs, the role of community and primary health care nurses is integral in striving for optimal outcomes for all people across their lifespan.

A high capacity, integrated primary health care system is at the centre of any effective health system (Department of Health, 2013; Department of Health, 2015). For this system to operate to its full potential, all nurses, including nurse practitioners, need to be able to work to their full scope of practice. There are significant opportunities to make better use of the clinical skills and knowledge nurse practitioners have, including enabling greater access to Medicare Benefits Schedule item numbers.

Changes in the primary health care sector include the establishment of the Health Care Home model of care in 2015 as a new initiative to address chronic disease and complex conditions in Australia. The model enables eligible patients with two or more chronic conditions to enrol with a participating medical practice that will oversee the patient's coordination, management and support of their conditions (Department of Health, 2017). It is intended for this scheme to alleviate pressures on the primary and community health sector, as this sector is often the main location where people with chronic diseases seek help (Bodenheimer et al., 2002).

The Primary Health Care Advisory Group stated that nurse practitioners have the required skills to be one of the preferred clinicians within the Health Care Home model of care (2016). To meet Australia's growing demand for community and primary care, nurse practitioners need to be able to deliver the care they are trained to do (Carter et al., 2015).

Community and primary health care nurses help individuals achieve pronounced outcomes even beyond their own health. An example from Philadelphia, Pennsylvania and the United States identifies advanced practice nurses providing care in school settings, resulting in less absenteeism, discipline problems and course failures, as well as reduced emergency presentations and hospitalisation rates (International Council of Nurses, n/d).

An example of a successful Australian nurse-led model in primary health care, is the nurse-led walk-in centres in the Australian Capital Territory (ACT). The ACT is continuing to expand the service, with an extra two centres to be built in 2018 (ACT Labor).

We must continue to invest in community and primary health care to support nurses and improve outcomes for the Australian community.

If you are interested in transitioning to the primary health care environment take a look at the newly developed Australian Government funded, Career and Education Framework for Nurses in Primary Health developed by the Australian Primary Health Care Nurses Association (APNA): MyNursingFuture.com.au.

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