Dear Ms Brettaragh

ACN feedback on the draft Australian Health Management Plan for Pandemic Influenza (AHMPPI).

Thank you for the invitation to provide comment on the draft Australian Health Management Plan for Pandemic Influenza (AHMPPI).

Australian College of Nursing (ACN) would like to take this opportunity to emphasise the importance of continuing to engage nurses in planning for influenza pandemics. Nurses are a large and widely distributed part of the health workforce. In the event of an outbreak, nurses will provide initial assessments, provide treatment and care for affected people as well as play a significant role in educating the public about hygiene measures, communicating reliable information and allaying fears. As health care systems come under increasing pressure, there will be significant demands on the health workforce. Certain categories of frontline nurses, including nurses working in aged care and community nurses, may need to take on expanded roles.

The role of nurses in preparing for and managing an influenza pandemic situation could be pivotal to stemming the spread and impact of an event. Nurses will have a direct, and in many situations a lead role, in the treatment and care of the community in an influenza pandemic situation. Nurses will be the first point of health care contact for many people during a pandemic. They will be instrumental in effectively activating local pandemic plans, in the delivery of appropriate clinical care and in the provision of public information and education. Given the significant reliance on services provided by nurses within the Australian health sector, it is essential that nurses are both aware of and well prepared for their potential roles in the event of an influenza pandemic situation.

The Royal College of Nursing, Australia and the Australian Nursing Federation Joint Guideline: Influenza Pandemic (attached) outlines the principle roles of nurses preparing for an influenza pandemic and when an influenza pandemic occurs. Of primary consideration are the roles nurses have in supporting the development and implementation of local pandemic plans and in maintaining relevant and current clinical and occupation health and safety knowledge.

ACN believes the draft AHMPPI is a clear, flexible and evidence-based document which will serve as an effective framework for Australia's national response to an influenza pandemic. We would like to provide the following feedback on two aspects of the AHMPPI which relate directly to the role of nurses during a pandemic.

I. The use of border nurses: ACN appreciates the Department of Health's assessment that
stationing border nurses at airports and/or seaports is unlikely to be the most effective use of nursing time and resources during a pandemic and that in the event of an outbreak of pandemic influenza, nurses should be engaged in roles that are likely to be most effective in stopping the spread of infection.

With this in mind it is noted that, nurses are present in nearly every health care context across the health system and regardless of their specific work role, if appropriately engaged and supported, all nurses are in a position to make early identification of people with influenza signs and symptoms and to act as planned to separate these people if required. Nurses are also ideally placed to undertake triage, to manage vaccinations, to provide education to both non-clinical staff as well as to the public and to initiate pandemic response procedures in any health care or community setting. All influenza pandemic preparedness planning must strategically look to harness and support the knowledge and skills of all nurses as the largest section of the health workforce to maximise the contribution of the profession in controlling an influenza outbreak.

II. Widening prescription rights for nurses: It is ACN's view that widening prescription rights for nurses during an emergency to include antivirals and other key medicines could be a highly effective public health measure. Nurses working in emergency departments are likely to see a high volume of influenza presentations during a pandemic, and nurses working in community and aged care settings have unparalleled access to isolated and vulnerable populations. Widening prescription rights for nurses is thus likely to be a cost-effective way to increase patients’ access to antivirals and other key medicines during a pandemic.

ACN encourages the Federal and state governments to gather further evidence about best practices for expanding nurse prescribing rights during an emergency and to develop more detailed implementation plans in consultation with the Nursing and Midwifery Board of Australia, all chief nursing and midwifery officers and key nursing organisations. It may also be useful for governments to identify nursing workforce training needs at the national, state and local levels in advance of a pandemic, particularly if nurses may be authorised to prescribe a range of medications during a pandemic.

There is currently limited mention of the roles and involvement of nurses within the AHMPP. It is acknowledged that the roles of nurses within an influenza pandemic are largely considered within the operational context of the broader health service organisation or provider they work within, however, there may be other opportunities to actively engage the nurse workforce in an outbreak situation. Given the expanding roles and increasing relevance of the nursing profession in all areas of health care, it would be prudent to examine the currently untapped potential of nursing roles in the preparation for and management of an influenza pandemic in Australia. Unfortunately, the timeframes for this consultation did not provide opportunity for an exploration of this potential within the ACN membership, however, we would be very pleased to engage with the Department further on these issues in the future.

I look forward to reading the final draft of the AHMPP when it is released. Please do not hesitate to contact me for further information or discussion on this matter.

Yours sincerely

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Chief Executive Officer

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