

Transforming Health
SA Health
PO Box 287
RUNDLE MALL SA 5000

transforminghealth@health.sa.gov.au

To whom it may concern

Delivering Transforming Health Proposals Paper

Thank you for giving Australian College of Nursing (ACN) the opportunity to review the *Delivering Transforming Health Proposals Paper: Meeting the Clinical Standards* (the proposals paper). ACN congratulates SA Health on the release of its proposed plans for transforming South Australia's health care system. ACN has consulted with its South Australian members regarding the proposals paper and offers the following feedback:

Involving nurse leaders in informing the planned transformation

The planned transformation of South Australian health care provides a unique opportunity to ensure the people of South Australia reap maximum benefit from the services provided by SA Health. Essential to achieving this outcome is SA Health's close consultation with nurse leaders from all levels of leadership: nurse leaders in organisations delivering direct health care and nurse leaders working in policy roles in SA Health's bureaucracy.

Nursing services deliver close patient monitoring and detailed attention to patients' care needs often on an around-the-clock basis. Nurses in operational leadership positions, such as nurse unit managers and directors of nursing, can offer vital information on how envisaged reforms may affect the delivery of patient care and patients' experience as care recipients. Nurse leaders in both operational and policy roles can advise on how nurses can contribute to the achievement of *Clinical Standard 9: Healthcare is provided by the most cost effective health worker while ensuring quality and safety standards are met*. In particular, nurse leaders can assist SA Health to comprehensively explore the full utilisation of nurses' scope of clinical practice to achieve productivities.

Nurse leaders employed in policy settings at SA Health can further identify barriers that restrict nurses' contribution to health care. They can also advise on advanced and extended scope of practice roles for nurses and how these roles can be leveraged to improve the efficiency of the health care system while also safeguarding the safety and quality of care. Nurse practitioners' actual and potential contribution to care delivery on a state-wide level can be mapped to (1) improve access to care and (2) prevent hospitalisations¹.

Feedback received from ACN members in South Australia informs us that it is unclear what level of engagement with nurse leaders has been undertaken so far to inform the Transforming Health project. ACN strongly believes that SA Health needs to put significant effort into seeking the views of its nurses in leadership positions and include their views into its active consideration to ensure the proposed transformation is successful.

¹ Arbon, P, Bail, K, Eggert, M, Gardner, A, Hogan, S, Phillips, C et.al. 2008 'Reporting s research project on the potential of aged care nurse practitioners in the Australian Capital Territory', *Journal of Clinical Nursing*, vol. 18, pp. 255-262.

ACN notes that the proposals paper does not include a plan for the implementation of the envisaged reforms. An implementation plan should explicitly describe the roles nurse leaders at the various levels of leadership have in implementing the proposed transformation of South Australia's health care system.

Community care

Any truly transformational reform of South Australia's health care system should restructure health care delivery to meet rising population demand for primary health care arising from the ageing population and the increasing incidence of non-communicable diseases. ACN notes that the proposals paper provides a sketchy description only of the role SA Health's primary health care services will play in the transformed health service. Primary health care services are best suited to deliver the prevention and early intervention services older people and people with chronic conditions require to keep them well and out of hospital and/or to avoid a re-hospitalisation². Empirical evidence shows that primary health care based nursing services make a major contribution to health care generally and the prevention of hospitalisations and re-hospitalisations specifically³. Plans for the proposed transformation should pay considerable attention to maximising the contribution nursing services in the primary health care sector can make. The monitoring of patients at risk of hospitalisation by these services should be given particular emphasis as this may reduce the need for tertiary care beds. Nurse leaders can inform this effort by identifying the wide range of nursing services that exist in primary health care and the contribution these services make or potentially can make to (1) supporting and monitoring patients at home and (2) preventing hospitalisations.

ACN is deeply concerned that the proposals paper does not include any clinical standards of care for the community and primary health care sector. This sector makes a vital contribution to the health care delivered by SA Health. For this reason the sector requires standards to ensure the safety and quality of the services delivered and which can function as benchmarks against which to measure the performance of these services.

Evidence-based Clinical Standards of Care

The *Transforming Health Discussion Paper* and the proposals paper both fail to present an empirical evidence-base for the *Clinical Standards of Care* the transformation intends to achieve. Further, some of the *Clinical Standards of Care* are too non-specific to guide their implementation and to facilitate any measurements against them. For example *Clinical Care Standard 92. Nurse Practitioners should be utilised across the surgical system to improve efficiency* does not identify (1) the type of contribution nurse practitioners are envisaged to make (2) where in the surgical system they will be deployed and (3) how the improvement in efficiency will be measured. ACN is of the view that *Clinical Standards of Care* should be based on evidence wherever such evidence exists and should be specific enough so measurement of performance against the standard can be undertaken.

² Dharmajan, K, Hsieh, AF, Kulkarni, V, Lin,Z, Ross,JS, Horwitz, LI, 2015, 'Trajectories of risk after hospitalization for heart failure, acute myocardial infarction, or pneumonia: retrospective cohort study', *BMJ* vol. 57, no. 411 doi:10:1136/bmj.h411
Dunning, J, 2010, 'Early intervention prevents crisis' *Community Care* 4 February, pp. 26-27

Hoare, KJ, Mills, J, & Francis, K, 2011, 'The role of Government in supporting nurse-led care in general practice in the United Kingdom, New Zealand and Australia: an adapted realist review', *Journal of Advanced Nursing* vol.68, no 5,pp. 963-980.

³ Castro, M, Zimmerman, N, Crocker, S, Bradley, J et.al, 2003, 'Asthma intervention programs prevents readmissions in high healthcare users', *American Journal of Respiratory and Critical Care Medicine*, vol. 168, no. 9, pp.1095-1099.

Data informing the proposals paper

Apart from the table entitled *Mortality rates are much higher before 8am* the proposals paper does not include metrics that support the rationale for the projected changes. ACN hopes that further iterations of the plan to transform the health care delivered by SA Health will include metrics in support of the proposed changes.

Please do not hesitate to contact me for any further discussion.

Yours sincerely



Adjunct Professor Debra Thoms FACN (DLF)
Chief Executive Officer

26 February 2015