



Australian College of Nursing

DRAFT: First report of the WHO independent high-level commission on non-communicable diseases

The Australian College of Nursing (ACN) submission to the WHO Independent High-level Commission (May 2018)

ACN response to the WHO consultation on non-communicable diseases

General comment

The Australian College of Nursing (ACN) recognises that non-communicable diseases (NCDs), also known as chronic (long-term) diseases, are a significant burden to individuals, their families and communities in terms of social and economic resources. NCDs are a global issue, however in Australia alone a significant proportion (approximately 50%) of individuals are living with a chronic condition.¹ There are a number of factors that influence the development and continuation of chronic disease, namely health behaviours, social and economic determinants, as well as access to health care specifically in rural and remote areas. In 2014, approximately 40,000 nurses were practicing in the primary health care sector.² These numbers are expected to grow with an ageing population resulting in an even greater burden with regard to chronic and complex diseases. In response to these figures, chronic disease has been identified as a key health priority area by the Australian nursing profession. As a result, ACN established a “Chronic Disease Policy Chapter” bringing together nursing leaders and experts to advocate for “Innovative practices that may aid in better management and prevention of chronic disease and the care of people with chronic conditions.”³

Regarding the draft consultation, ACN is in agreement with summary point 14 (page 6), in which four key NCDs (cardiovascular disease, cancer, chronic respiratory disease, diabetes) are “largely preventable through public policies that tackle four main risk factors: tobacco use, harmful use of alcohol, unhealthy diets, and physical inactivity” and should become an “essential component of any national response to NCDs” (page 9).

¹ Australian Institute of Health and Welfare 2018, *Chronic disease overview*, < <https://www.aihw.gov.au/reports-statistics/health-conditions-disability-deaths/chronic-disease/overview>>.

² Health Workforce Australia 2014, *Australia’s Future Workforce – Nurses Overview Report*, <[https://www.health.gov.au/internet/main/publishing.nsf/Content/34AA7E6FDB-8C16AACA257D9500112F25/\\$File/AFHWper cent20-per cent20Nursesper cent20overviewper cent20report.pdf](https://www.health.gov.au/internet/main/publishing.nsf/Content/34AA7E6FDB-8C16AACA257D9500112F25/$File/AFHWper%20per%20Nursesper%20overviewper%20report.pdf)>.

³ Australian College of Nursing 2018, *Nurses’ health policy priorities determined*, 24 April 2018, media release, <<https://www.acn.edu.au/publications/media-release/nurses-health-policy-priorities-determined>>.

ACN notes that recommendations within the draft consultation neglect to include the health workforce and in particular the nursing and midwifery workforce, who play a critical role in advocating for and delivering services in the prevention and management of chronic disease. Examples of national initiatives undertaken by nurses across Australia include the following:

- The Australian Primary Care Collaborative Program has led to improved health outcomes for more than 320,000 people with diabetes and more than 210,000 people with coronary heart disease.⁴
- The Practice Nurse Incentive Program allows practice nurses to have a greater focus on chronic disease management, prevention and education and financial support to expand the number of nurses employed in general practice.⁵
- The Western Desert Dialysis program provided dialysis to over 300 people in 2016; in 2018 the number of people receiving dialysis is 400.⁶

Regarding Recommendation 2, ACN suggests including the need to increase engagement with the health workforce, particularly front-line nurses and midwives who are well placed to make a difference in community initiatives aimed at preventing and managing chronic disease. Regarding Recommendation 3, ACN suggests identifying and gathering any cost effectiveness data on the value of innovative ways of nursing work in chronic disease prevention and management. Data relating to this is sparse and would be beneficial in informing government funding to nurse-led initiatives relating to chronic disease.

During the April 2018 ACN Policy Summit and as part of ACNs commitment to this global issue, the Chair of the Chronic Disease Policy Chapter, Professor Lisa Whitehead MACN, asked Chapter members to provide examples of nurse-led initiatives as well as examples of where nurses are working to the full extent of their capacity within integrated health care teams. ACN expects this will help establish cost effective models of care for chronic disease management and prevention.

Nursing is under-represented in debates and decision-making, meaning that the nursing voice is not being adequately heard. However, nurses are highly educated, flexible and responsive to patient and community needs, but they are not being utilised to their potential. Nurses successfully plan, implement and evaluate a wide range of initiatives aimed at improving health outcomes. ACN will continue to advocate for nurses and

⁴ Australian Primary Care Collaboratives Program n.d, *Results*, <<http://apcc.org.au/about-apcc/results/>>. Department of Health 2014, *Australian Primary Care Collaboratives Programme (APCCP)*, <<http://www.health.gov.au/internet/main/publishing.nsf/Content/health-pcd-programs-apccp-index.htm>>.

⁵ Department of Human Services 2016, *Practice Nurse Incentive Programme*, <<https://www.humanservices.gov.au/health-professionals/services/medicare/practice-nurse-incentive-programme>>.

⁶ Department of Health 2015, *\$15.3 Million for Purple House*, Department of Health, Canberra, <<http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2015-nash036.htm>>.

health care consumers by driving and being part of greater nurse engagement in national and international chronic disease discussions and forums.