

# Nurse-led innovations in response to COVID-19 for adults living with chronic disease and multimorbidity

## KEY STATEMENT

The Australian College of Nursing (ACN) is committed to ensuring nurses are supported to provide quality and safe care throughout the ongoing COVID-19 pandemic, particularly for the community's most vulnerable members. People living with chronic disease and multimorbidity face complex care challenges and higher rates of morbidity and mortality.

## BACKGROUND

The COVID-19 pandemic redefined health care; as adults living with chronic disease and multiple chronic conditions are at higher risk of adverse outcomes (Williamson, Walker, Bhaskaran, Bacon, Bates, Morton, 2020; Centers for Disease Control and Prevention, 2021). In addition to COVID-19-related deaths, increased mortality was observed among people with dementia, circulatory diseases, and diabetes among other causes (National Center for Health Statistics, 2021).

Nurses make up the largest profession of the health workforce (Australian Institute of Health and Welfare, 2020) and are key providers of care for adults living with chronic disease and multimorbidity. Nurses play a significant role in addressing health behaviours and creating community solutions to influence determinants of health, that impact the prevention and control of chronic disease. While nurses drive collaborative opportunities and models of care for all populations (Australian College of Nursing, 2020), greater support is needed to support this collaboration at a systemic level.

## KEY ISSUES

In a 2021 position statement, ACN highlighted the issues faced by the community in the event of COVID-19 (Australian College of Nursing, 2021). These included disruption to continuity of care and a transition to telehealth for many health services (Australian College of Nursing, 2021). As the pandemic has unfolded, it is clear the challenges to health care service provision for adults living with chronic conditions and multimorbidity are three-fold:

- the current effects of COVID-19 on those with, or at risk for, chronic diseases and those at higher risk for severe COVID-19 illness
- the post-pandemic impact of COVID-19 on the prevention, identification, and management of the chronic disease
- and the burden of new, returning or ongoing symptoms experienced more than 4 weeks after the infectious period, or long COVID (Mayo Clinic, 2022).

The impact of COVID-19 on communities where health inequities are already widespread is considerable (Friel & Baum, 2020). The need to increase awareness about prevention and care during and after the pandemic, build and enhance cross-organisational and cross-sector partnerships, innovate to address identified gaps, and address social determinants of health is crucial. Nurses are skilled in and have the mandate to address these key areas. Nursing is the profession that most commonly serves marginal and underserved groups and works in rural and remote locations (Australian College of Nursing, 2019).

Funded creative solutions are needed to support engagement and access to care among those who are disproportionately affected by COVID-19. Healthcare approaches, such as telemedicine, have expanded and we need to ensure that those with the highest health needs can access services and receive quality care.

We do not yet know the extent to which COVID-19 exacerbates chronic disease, causes chronic disease, or will be deemed to be a chronic disease. There is much research and evaluation to be done and nurses can play a significant role to ensure potential solutions are developed, evaluated, and prioritised.

## NURSES' ROLE IN THE PREVENTION AND MANAGEMENT OF CHRONIC DISEASE AND MULTIMORBIDITY AND COVID-19

Nurses have demonstrated considerable ability to adapt their practice in response to the needs of people living with chronic disease and multimorbidity in the face of COVID-19, provided they are supported to do so (Australian College of Nursing, 2020).

The ACN Chronic Disease Policy Chapter conducted a scoping review of the published international evidence on nurse-led innovations to support adults living with chronic disease and/or multimorbidity in response to COVID-19. The review found that globally, the number of nurse-led innovations published in 2020 is small relative to the size of the workforce. Similarly, there have been anecdotal reports of rapid changes and innovative models being implemented across healthcare systems. The innovations reported generally involved the transition of existing face-to-face interventions to an information communications technology (ICT) platform. No studies reporting nurse-led innovations were found in Australia.

While the publication of research and practice papers can take time, many nurse-led innovations will not receive funding to be rigorously evaluated and practice innovations will not be evaluated and reported. Despite the recent surge in recognition of nurse-led care, we call for greater visibility of nurse-led innovations during this period of significant change to highlight the important contribution of nurses to the field of chronic disease and multimorbidity management. Targeted funding to implement and evaluate nurse-led innovations is imperative to achieve this.

## CONCLUSION

Nurses make a significant contribution to the management of care and treatment for people living with chronic disease and multimorbidity during the COVID-19 pandemic. Nurses need dedicated support to drive and evaluate innovations in practice. The visibility of nurse-led innovations is low; good practice cannot be shared or acknowledged without dissemination of the outcomes. Education and research funding on the design and evaluation of innovative practice initiatives to address the health needs of communities are urgently needed.

## RECOMMENDATIONS

That ACN lobbies the Australian Government to:

- Provide a voice that represents the adults living with chronic disease and multimorbidity by ensuring nursing professional representation on key advisory boards and expert committees charged with responding to the COVID-19 pandemic and post-pandemic planning.
- Provide evidence-based solutions to alternate models of care through dedicated funding for the development and rollout of research to evaluate innovative nurse-led approaches to managing chronic disease and multimorbidity.
- Enhance cost-effective and efficient innovative models of care by providing scholarships for nurses to undertake courses on healthcare innovation and designing and evaluating practice.

## REFERENCES

- Australian College of Nursing. (2019). The role of nurses in chronic disease prevention and management in rural and remote areas – Position statement. <https://www.acn.edu.au/wp-content/uploads/position-statement-role-nurse-in-chronic-disease-prevention-management-rural-remote-areas.pdf>.
- Australian College of Nursing. (2020). Nursing leadership in managing multimorbidity and COVID-19 – Position Statement, ACN, Canberra. <https://www.acn.edu.au/wp-content/uploads/position-statement-nursing-leadership-in-managing-multimorbidity-and-covid-19.pdf>.
- Australian Institute of Health and Welfare. (AIHW). (2020). Cancer screening programs: quarterly data. <https://www.aihw.gov.au/reports/cancer-screening/national-cancer-screening-programs-participation/contents/national-cervical-screening-program>.
- Centers for Disease Control and Prevention. (2021). People with certain medical conditions. <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>.
- Friel, S., & Baum, F. (2020). Life and Health Re-imagined. Equity during recovery. Victorian Health Promotion Foundation. <https://www.vichealth.vic.gov.au/-/media/Life-and-Health-Re-imagined---Equity-during-recovery.pdf>.
- Mayo Clinic. (2022). COVID-19: Long-term effects. <https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/coronavirus-long-term-effects/art-20490351>.
- National Center for Health Statistics. (2021). Excess deaths associated with COVID-19. Centers for Disease Control and Prevention. [https://www.cdc.gov/nchs/nvss/vsrr/covid19/excess\\_deaths.html](https://www.cdc.gov/nchs/nvss/vsrr/covid19/excess_deaths.html).
- Williamson E.J., Walker A.J., Bhaskaran K, Bacon S., Bates C., Morton C.E., et al. (2020). Factors associated with COVID-19-related death using OpenSAFELY. Nature 2020; 584 (7821):430–6. CrossRefexternal icon.

## **ACKNOWLEDGEMENTS**

The Australian College of Nursing (ACN) Chronic Disease Policy Chapter has developed the Position Statement. The Chapter members are:

Professor Lisa Whitehead FACN (Chair)

Ms Robyn Quinn FACN (Deputy Chair)

Dr Jacqui Allen MACN

Mrs Hannah Beks MACN

Mrs Jennifer Boak MACN

Dr Patricia Anne Burton FACN

Ms Cobie George MACN

Ms Melinda Hassall FACN (2022 Policy Fellow)

Mr Sheldon Omwamba MACN

Ms Melinda Parcell MACN

Professor Lin Perry MACN

Dr Olutoyin Sowole ACN Policy Fellow, MACN

Mrs Colleen Van Lochem MACN

Acknowledgement is extended to Adjunct

Professor Kylie Ward FACN (ACN CEO).

Acknowledgement to Policy and Advocacy team members.

Ms Linda Davidson, FACN, National Director Professional Practice

Dr Jacqui Hoepner (Manager Policy and Advocacy)

Dr Carolyn Stapleton FACN (Director Policy and Advocacy)

## **CITATION:**

Australian College of Nursing (ACN). 2023, 'Nurse led innovations in response to COVID-19 for adults living with chronic disease and multimorbidity, ACN, Canberra.

©ACN 2023

ISBN (print): 978-1-922720-35-1

ISBN (online): 978-1-922720-36-8