# The Role of the Nurse in the Assessment and Management of Multimorbidity

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Multimorbidity has been defined as the co-occurrence of two or more chronic conditions that may be physical or mental (Harrison, Britt, Miller, & Henderson, 2013; Johnston, Crilly, Black, Prescott, & Mercer, 2019; Nicholson, Almirall, & Fortin, 2019). Multimorbidity is distinct from comorbidity defined as an index health condition and one other condition (van den Akker, Buntinx, & Knottnerus, 1996). A meta-analysis of 70 community based studies of the epidemiology of multimorbidity estimated the pooled prevalence to be 33% (Nguyen et al., 2019). In Australia, it is estimated that around half of all people accessing primary health care services have two or more chronic conditions and a third of the population have three or more conditions (Harrison, Henderson, Miller, & Britt, 2017). The prevalence of multimorbidity is substantially higher among older adults (Nguyen et al., 2019; Sakib, Shooshtari, John, & Menec, 2019; Stanley, Semper, Millar, & Sarfati, 2018) who have been described as having substantial and complex care needs (Backman, Stacey, Crick, Cho-Young, & Marck, 2018). Multimorbidity is also associated with socioeconomic deprivation (Sakib et al., 2019; Stanley et al., 2018), higher among women (Sakib et al., 2019) and linked to low education levels (Tucker-Seeley, Li, Sorensen, & Subramanian, 2011). Risk factors for chronic conditions include tobacco and alcohol use, sedentary lifestyles and dietary patterns high in processed foods.

Multimorbidity presents an ever increasing resource and financial burden on the health care system including a higher number of hospital admissions, an increase in the length of admission and number of outpatient appointments (Bayliss, Edwards, Steiner, & Main, 2008; Clarke, Bourn, Skoufalos, Beck, & Castillo, 2017). Multimorbidity is also associated with a high number of transitions between health care programs, settings and appointments. This increases the risk of fragmentation of care (Backman et al., 2018). Multimorbidity is associated with poor health outcomes (Mair & Gallacher, 2017) including low self-ratings of quality of life, higher rates of psychological distress (Duguay, Gallagher, & Fortin, 2014) and increased mortality (Schäfer et al., 2018). The rise and steady increase in the number of people diagnosed with two or more chronic conditions makes understanding and caring for people experiencing multimorbidity vital. Living with multiple conditions can create complex health issues that require holistic, person-centred care (Backman et al., 2018).

Nurses make up more than 50% of the health workforce with over 400,000 nurses working in Australia (Australian Institute of

Health and Welfare, 2020). Nurses work across many sectors and are geographically dispersed. Nurses are the best placed health professionals to prevent and manage chronic conditions and the development and management of multimorbidity. However, nurses have reported not feeling prepared or supported to assess and manage multimorbidity. A survey conducted by the policy chapter of 142 nurses across Australia found that nurses reported the need for additional education and training to improve the provision of care for people living with multimorbidity (96%). The majority of nurses (70%) felt that current health care structures and systems did not provide them with sufficient support to effectively care for people living with multimorbidity and they had insufficient time to provide the level of care required. The same survey found that 80% of nurses felt their role required them to be skilled generalists rather than disease-specific specialists to effectively care for persons with multimorbidity. A similar proportion agreed that their role often required care coordination of persons with multiple chronic conditions (88.4%) and that they needed to resolve conflicting advice between speciality areas (80%).

Interviews with nurses on how the role of nurses can be developed to improve care for people living with multimorbidity found: that nurses require support to take on a navigator role in order to coordinate and case manage the complexity of patient care; nurses wanted to take a more active role in the prevention and management of multimorbidity for example through nurse-led clinics and the opportunity to act as a resource and trainer for staff; nurses also described the importance of leading and contributing to research in order to understand the needs of patients and families including evaluation of the effectiveness of practice regarding multimorbidity approaches and interventions. Nurses required support from employers to engage in research and evaluation to improve practice and health outcomes.

Nurses are well positioned to deliver patient-centred, cost-effective solutions to tackle the complex and growing issues related to multimorbidity. We need a workforce with the knowledge and skills to work with people who experience multimorbidity and their families and across different healthcare systems. Further opportunities for education and training, resources to support effective practice and opportunities for leadership in the prevention and management of multimorbidity are urgently needed.

### **ACN** commends:

The inclusion of nursing representation on the Expert Steering Committee of the National Preventive Health Strategy.

**ACN calls on the Federal government** to create opportunities for nurses to support Australians to improve their health at all stages of life, through early intervention, better information, and targeting risk factors and the broader causes of health and wellbeing:

- Ensure nursing representation on key advisory boards and expert committees at an early stage (e.g. chronic conditions, obesity, tobacco and alcohol).
- Support and resource the nursing workforce to lead initiatives that identify risk factors and prevent the development of chronic conditions
- Create mechanisms and opportunities to pilot innovative nurse-led approaches to manage multimorbidity effectively
- Provide funding to incentivise clinics and practices to support nurses to engage in training, education and research on the prevention and management of multimorbidity
- In line with calls from other stakeholders, to allocate at least five per cent of total health expenditure to preventative health to increase the focus on preventative action.

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