

#### IMPROVING WOMEN'S ACCESS TO HEALTH SERVICES

THE INNOVATIVE ROLE OF THE WOMEN'S HEALTH NURSE PRACTITIONER

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# DEFINITION



The Nurse Practitioner (NP) is a Registered Nurse or Midwife at the apex of clinical expertise, who is educated to an advanced level and has acquired the expert knowledge base, complex decision-making skills and clinical competence to extend clinical nursing practice within a defined speciality (ICN 2003)



# WHAT IS THE AUSTRALIAN NURSE PRACTITIONER

- Scope of practice is beyond conventional nursing code
- Specialised practice & work collaboratively with other disciplines
- Provide clinical assessment, diagnostics, prescribing, referral



# **EVOLUTION OF THE NP ROLE**

- International:
- USA since early 1960's
- UK from 1980's
- Canada since 1967
- Australia since beginnings of 1990's



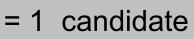




#### NUMBER OF NPS AUSTRALIA 2010

- Queensland = 67
- South Australia = 25
- NSW = 131
- ACT = 11
- NT = 2
- Victoria
- Tasmania
- WA





= 53

















#### WHAT DO WE NEED WE TO DO WE NEED TO BECOME A NP IN VICTORIA?

- 5 years at an advanced level clinical practice in speciality area
- Masters level or beyond
- Pharmacy
- Internship
- Scope of practice governed by Australian Nursing & Midwifery Council (ANMC) standards & organizational agreement





### WOMEN'S HEALTH NURSE PRACTITIONERS (WHNP)

Developing the role since 1998

 4 authourized Women's Health Nurse Practitioners



#### WOMEN'S HEALTH NURSE PRACTITIONER, WHAT DO WE DO?



- Gynaecology Assessment Clinic (GAC), colocated with medical services
- Women referral to service according to specific triage criteria
- Clinical assessments, initiate diagnostic & investigation, prescribe & refer women as required
- Manage & complete episode of care



# BENEFIIS OF NP SERVICE AT THE WOMEN'S

- Self-referrals
- Interpreters
- Excellent resource organisation
- Gender sensitive service
- Marginalised women
- Case management component for women with complex needs.
- New hospital

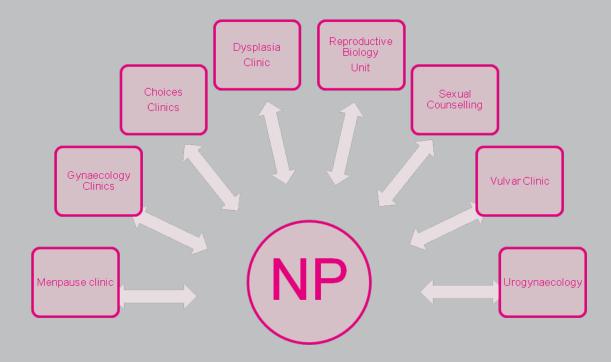




- Available through the week
- Symptomatic woman all ages
- Seamless referral to vary of speciality women's service
- Co-located with medical practitioners to a range of speciality in women's services



# CLINICS AT THE WOMENS COLLABORATIVE PRACTICE





# REFERRAL PATHWAYS TO EXTERNAL AGENCIES

- Psychology Support
- Community Health Centre
- General Practitioner
- Medical Specialist
- Public Hospital
- Victorian Family Cancer Genetic

#### WHY NURSE PRACTITIONERS?



- Patient care compromised by traditional boundaries and healthcare model (Duckett 2005)
- National health workforce innovation long overdue (Productivity Commission 2005)
- NP role demonstrated as beneficial for over 20 years (Cashin,2007 & Gardner 2010)
- Vital role in National Primary Health Care (National Final Health Report 2009)
- Vital role in National Health and Hospitals (2010)
- Non published paper "Observational Research; Are NP effective in their assessment of Abnormal vaginal bleeding? (2007)

#### WHAT DO OUR PATIENTS THINK?



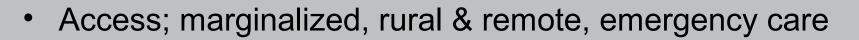
- Research findings consistently demonstrate satisfaction with NP care (National Hospitals & Health Reform Commission; Interim Report, 2009)
- 95% of patients "stringly agreed" or agreed that they felt confident with care by NP and 90% rated quality of care as excellent or very good (Australian Health Review, 2010, 34 59-65)



#### DEMONSTRATED BENEFITS OF THE NP ROLE

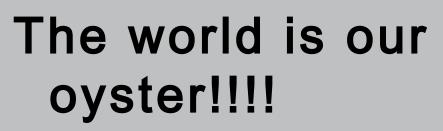
- Improved access to health care
- Reduced waiting times for gynaecology appointments
- Improved continuity, safety and coordination of care
- Improved patient and carer satisfaction

# THE BIG ISSUE FOR AUSTRALIAN HEALTH CARE



- Improved and accessible primary care
- Improved management chronic disease
- Reducing acute hospital admissions for chronic disease and non-acute illness
- Increase involvement of multidisciplinary clinicians.

# THE FUTURE OF NP



Areas of interested and possibilities;

- Mental Health, Women with disabilities,
- Homeless women
- Rural & Remote Health and Women
- Women in Corrective services.
- Indigenous Women
- Domicillary role in Midwifery







#### THANK YOU



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#### **BIOGRAPHY CATIE BORTOLOT**



Completed General nursing @ Royal Children's Hospital Melbourne 1983-86 Postgraduate Infectious Disease Fairfield Hospital 1989 Completed Midwifery @ Royal Women's Hospital, Melbourne 1990 Family Planning Part 1 & 2 Family Planning Clinic Box Hill 1998 Well Women's Nurse 1998-2007 Midwife 1990- current Clinical Facilitator in Midwifery 2001-current Victorian Nurse Practitioner Project Part 2 2001-2003 Completed Postgraduate Diploma in Women's Health @ Melbourne University in 2003 Completed professional certificate in Pharmacology University of South Australian in 2004 Completed Master's in Women's Health @ Melbourne University in 2006. Nurse Practitioner Women's Health Endorsement 2007 Currently working as a Clinical Facilitator in Midwifery in the Maternal Medicine Fetal Program & Nurse Practitioner in Women's Health at the Women's Hospital Gynaecological Assessment Clinic.