ROLE OF PRACTICE NURSE EAST BENTLEIGH MEDICAL GROUP

Ann Salmons, Practice Nurse

Background

- Registered Nurse, Hospital based prior to General Practice
- Practice Nurse 16 years
- Initially part time (30 hours week)
- Ann Salmons Now full time plus 3part time RNs
- Practice Nurse role expanded
- 5 Partners + 3 part time doctors

Original nurse role

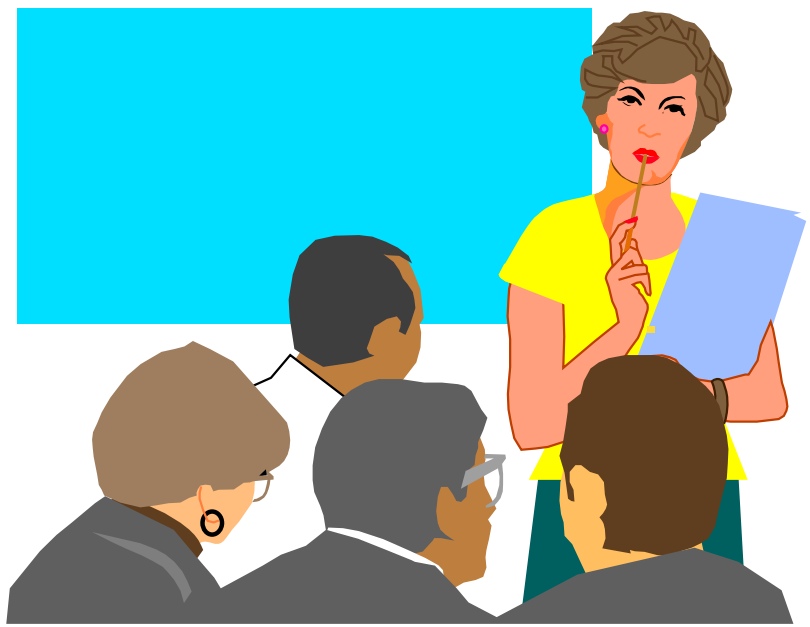
- Pathology
- Wound care
- Assist with procedures, sutures, plasters etc
- Some immunisations
- Ear syringing

Role expansion

- Immunisation Program - childhood and travel (practice childhood rate 96%)
- Cold chain monitoring
- Infection control
- Wound management
- Accreditation
- Recall systems
- Education programs

Diabetic Clinic

- Commence 6 years ago
- Practice nurse trained
- New and existing diabetics
- Yearly recall, 85% return for ongoing education
- Overseen by GP



EPC ITEMS

- GP made an attempt to do Health Assessments
- Found to be time consuming
- Inadequate attempt, poor documentation
- Poor follow up
- Decision to utilise practice nurse for EPC

Practice Nurse Does Health Assessments

- Devote 3 days a week to Health Assessment
- Extra RN employed to cover practice nurse needs
- 1st 12 months - 500 Health Assessments
- 98% home assessments
- Income increased +++

Care Plans/Case Conferences

- Practice nurse also set up Care Plans and did liason and follow up
- Government criteria too difficult to adhere to, so not as successful
- Case conferences very few - again, too hard

Financial Benefits from EPC

- Practice felt need for Asthma Clinic before SIP/PIP introduced
- Financial success of HA's enable the set up Asthma Clinic
- Train Practice Nurse
- Buy necessary equipment

Costs

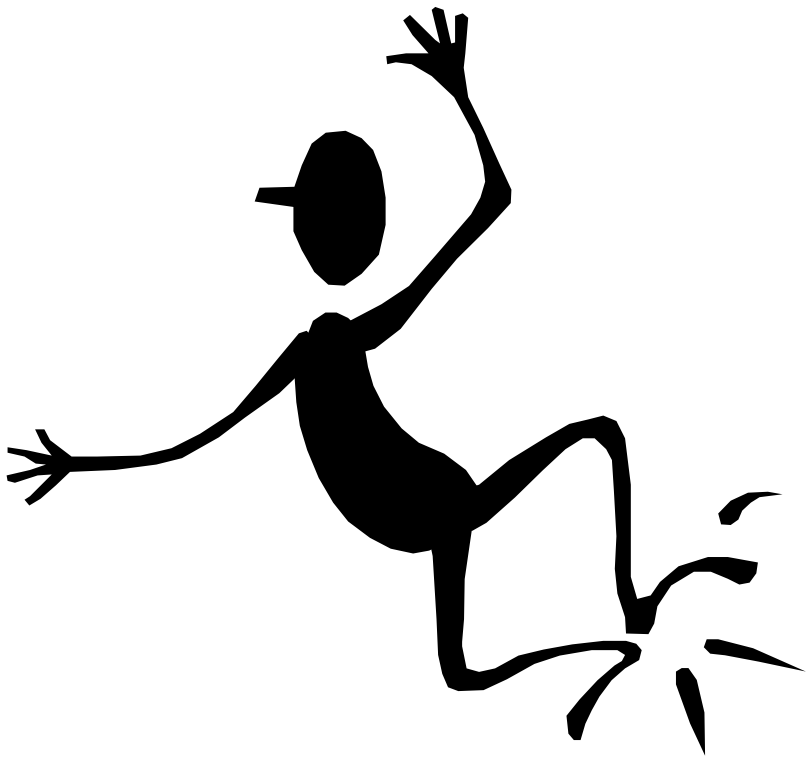
- Training for Ann Salmons approx $750 plus 1 weeks wages while training
- Purchase spirometer $3200
- A lot of equipment free through drug companies

Benefits

- PIP sign $250 per full time GP
- $100 per 3+ Plan completed
- MBS consultation payments
- Spirometry charge

Asthma 3+ PLAN at EBMG

- 1st 12 months 57 Asthma SIP payments $5700.00
- Plus D consults/spirometry
- Important to remember benefits to asthma patients



Practicality of Practice Nurse Doing HAs and Clinics

- Familiar with existing clients
- Sometimes able to bypass GP and make decisions, such as referrals to other health professionals etc
- If no clients' able to do necessary paper work - recruitment, letter invites to clinics and phone bookings

Recruitment to HA and Clinics

- Medical Director - Mail out
- Patients over 75 years
- Patients on asthma preventive medication
- Pamphlets in doctors' room and waiting room
- GP recruit during consultation and Practice Nurse recruit when doing pathology

Problems

- GP recruitment often poor
- Reception staff - require good communication to run smoothly
- Practice nurse role still unclear to some GP’s

CONCLUSION

- It can be done
- Need doctor-nurse partnership to work out details
- Need practice cooperation
- Benefits to practice and patients