

McKesson Asia Pacific

**Initial Submission from McKesson Asia Pacific
to a Health Workforce Research Study
conducted by
The Australian Government Productivity Commission**

Submitted 11th November 2005

Initial McKesson Submission

Overview

The purpose of this submission is to direct the Productivity Commission in their health workforce research study, in relation to areas of concern for Registered Nurses and other health professionals working in a telehealth capacity.

Telenursing is an emerging area of practice for Registered Nurses in Australia and is rapidly growing. McKesson Asia Pacific employs Registered Nurses working in Sydney, Perth and work@home environments to provide telephone based nurse triage and chronic disease management for people in all States of Australia. Providing telenursing services raises specific issues due to the mode in which nursing services are provided. This initial submission will focus on these specific issues.

The two main issues impacting on the McKesson's ability to create a sustainable telenursing workforce are:

- Systemic barriers including regulatory impediments
- Workforce supply

Telehealth in Australia – Background

For the purposes of this paper, telenursing refers to services provided by Registered Nurses using telephones as the modes of service delivery. Telehealth refers to services provided by other health professionals, such as psychologists or social workers, by telephone.

Telenursing is a relatively new area of nursing practice in Australia. McKesson is the major provider of telehealth services, including telephone nurse triage, chronic disease management programs, and mental health triage and case management. Our staff are based in Perth and Sydney offices and work@home environments in Canberra and Perth.

Clients include WA Health, NT Health, ACT Health, and Department of Veterans Affairs, Area Health Services, and health insurance funds. Clients may have customers either within the geographic boundaries of an Area Health Service, State or across all of Australia. Our staff provide services that cross State boundaries.

The demand for telenursing services in Australia is rapidly growing. State Ministers of Health and the Minister for Health and Ageing support telenursing and telehealth initiatives and they are included in the health strategic plans for Queensland, South Australia, and at the Australian Government level. One of the major health initiatives of the Abbott Health and Ageing portfolio is the improvement of chronic disease management, of which telehealth initiatives are an important mode of service delivery.

McKesson Asia Pacific is experiencing a period of rapid growth, directly related to high levels of interest by government entities and some private sector corporations to reduce the cost of service delivery and improve health outcomes for their population.

Health workforce shortages experienced by McKesson in the main reflect those at the national level, and have impacted upon our ability to recruit sufficient numbers of nurses. Demand outstrips supply.

As a result of providing programs that extend across all of Australia, telenurses are required to be registered in every State of Australia.

These factors and related elements are further examined in the key issues section.

Key Issues

Structural and Regulatory Issues

The *Mutual Recognition Act (1992)* provides for recognition of Registered Nurses and other health professionals applying to be registered in more than one State. Specific problems that arise include:

- Registering health professionals in every State of Australia is complex, costly and an administrative burden.
- The cost of registering one nurse in every State of Australia is approximately \$650 per annum. This cost is currently borne by McKesson, but is factored into the cost model of telenursing programs, which in many cases is met by our public sector clients.
- Registration fees are due annually, and each State has a different anniversary date for renewal. Fees are set by each State and cannot be changed unless there is ministerial approval.
- Each State has different principles and interpretations of cross border arrangements. There is no consistency. For example, the SA Nursing Board provides details of the Cross Border Nursing Principle and the consideration of waiving fees. However, their interpretation of this principle excludes applying it for telenurses.
- Requirements for the auditing of nurses vary from State to State. Nurses who are registered in more than State may be audited more than once and against slightly different criteria.
- The Australian Nursing and Midwifery Council (ANMC) develops guidelines for professional nursing issues, but has no jurisdiction across each State.
- There is lack of an Australia-wide approach for telenursing. Telenursing guidelines have been developed by the ANMC but are not supported or endorsed by all of the States. As a telenursing service provider, these guidelines have little relevance, although there is great potential to develop a more substantive set of guidelines.

Workforce Supply Issues

McKesson recruits Registered Nurses who have more than two years' clinical experience. Characteristics of the nursing workforce that impact upon McKesson as well as other health service providers relate to (a) the ageing nursing workforce, which is an average of 47 years; (b) predominantly female population; (c) the desire by many nurses to minimise or avoid shift work.

Education is the main driver of health workforce supply. There are two main issues:

- the insufficient number of nurses graduating from university education courses, and
- the lack of an integrated model of health services education that provides a common core education program across various disciplines.

The provision of telehealth services could potentially be provided by a more generic health care worker. This is already occurring to some extent with the provision of telephone mental health services. For example, McKesson mental health services are provided by staff from a variety of backgrounds including psychologists, mental health nurses, social workers, and occupational therapists.

McKesson supports the move towards the creation of a more generic health care worker and is able to offer some form of clinical placement opportunities for health care students at both the undergraduate and post-graduate level.

Recommendations

McKesson recommends the following actions for consideration by the Productivity Commission as they relate to telenursing and telehealth:

- Develop a national approach to registration of nurses and other health care workers. Another option is the creation of a specific Australia-wide registration for telenurses.
- Develop national guidelines for telenursing, such as those developed by the NZ Ministry of Health. McKesson is keen to participate and provide leadership in these discussions.
- Implement measures to address the issue of nurse shortage in Australia, as this also impacts upon the telenursing population.

Conclusions

Telehealth and telenursing is a growing and emerging area of health service delivery in Australia. The national issues related to nurse shortages also impact upon telenursing services.

Structural issues relevant to telenursing relate to the role of the States in terms of nurse registration and regulation. The registration process is complex, costly and an administrative burden.

There is a lack of a national approach for telenursing in Australia, which is a significant gap. Lessons can be learnt from the New Zealand model.

McKesson welcomes the opportunity to explore these issues with the Productivity Commission. The contact person is Dianne Ball (RN, PhD), General Manager Operations. Contact telephone number is 02 9425 3708.