



'Connecting with practice nurses in Rural New South Wales to enhance the management of patients with Chronic Heart Failure'



HETI
HEALTH EDUCATION &
TRAINING INSTITUTE
RURAL DIRECTORATE

Anne O'Neill, Illawarra Shoalhaven Local Health District
Anne.ONeill@sesiahs.health.nsw.gov.au

'The role of practice nurses in their management of patients with chronic heart failure in general practice in rural NSW and the potential for the expansion of this role'.

Background:

The research model for this study is informed by the view that current models of care are no longer adequate to meet the needs of the increasing cohort of Chronic Heart Failure (CHF) patients in the study area, the Shoalhaven. The burden of illness, structural ageing of the population, effective use of health resources and best and highest use of the clinical nurse consultant skills makes it necessary to explore alternative models of care to manage this population group. General Practice targets patients with chronic disease through an integrated, multidisciplinary team led by the general practitioner through care plan implementation and practice nurse collaboration.

Aims:

The aim of the study was to identify current usual practice by practice nurses and general practitioners in response to the needs of this cohort of patients in general practice. Specific objectives were adopted to explore existing roles of practice nurses in different contexts, identify constraints which affect the practice nurses' ability to fulfil their role, explore the potential for development of their role in chronic heart failure management and explore the clinical nurse consultant role and ascertain if it can support practice nurses within the existing capacity of the role.

Method:

A mixed methods study using Appreciative Inquiry methodology was adopted for this study. This was based upon the use of questionnaires to obtain predominantly quantitative data followed by semi structured interviews with a purposive sample of consenting questionnaire respondents to produce qualitative data to explore the issue in greater depth.

Results:

This study found that this patient cohort are being managed in general practice according to best practice with practice nurses well placed and keen to expand their existing role. Practice nurse education and training to enhance their ability to fulfil their current role and to foster the potential for expansion, to manage these patients in general practice, is fundamental to this being implemented.

Conclusions and Implications for practice:

I perceive the role of the Clinical Nurse Consultant as a liaison position, to facilitate potential change should these research findings be accepted and implemented. It is anticipated that the results of this study would be replicable in like rural communities servicing patients with chronic disease. Dissemination of the findings and recommendations of this study to the critical reference group is essential to ensure that these results drive clinical change. General practice is accessible, consumer preferred and, with funding model available, is well placed to accept devolution of care of this population group. The Shoalhaven Heart Failure Service and Medicare Local will continue the collaborative process of developing consistent guidelines for management of this cohort of patients in general practice.

For the full report on this project visit our website, follow the link to the Rural Research Capacity Building Program and click on 'view completed projects'

Anne has worked as Clinical Nurse Consultant for the Shoalhaven Heart Failure Service for the last 10 years. Her roles include coordinating a multidisciplinary group program and maintenance exercise program and liaisons with medical, nursing and allied health professionals across the continuum of care. Outcomes for those enrolled with the service include improved QOL and functionality with reduced presentations, admissions and length of stay to the acute sector.



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