



Consumers Health  
Forum OF Australia

SUBMISSION

**CHF Response to the Report  
from the Nurse Practitioner  
Reference Group**

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Consumers Health Forum of Australia 2019  
*CHF Response to the Report from the Nurse  
Practitioner Reference group*

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# Introduction

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The Consumers Health Forum of Australia (CHF) is the national peak body representing the diverse interests of Australian healthcare consumers and those with an interest in health consumer affairs. CHF works to achieve safe, quality, timely healthcare for all Australians, supported by accessible health information and systems. We are pleased to respond to this Report from the Nurse Practitioner reference Group (Reference Group).

Our positions are developed through consultations, research, and events like the Thought Leadership Roundtables involving consumers, health care providers, policy experts, academics and people in government. Further information about us and our publications can be found on our website, [www.chf.org.au](http://www.chf.org.au).

Thirty years following the creation of Medicare Benefits Scheme (MBS), a review is long overdue. CHF members believe that this review and a commitment to the regular evaluation of Medicare items is an essential to maintaining a world class health system and ensuring that funding is available for high value care.

## General Comments

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CHF welcomed the establishment of the primary health care reference groups as an opportunity to look at the whole of the primary health care sector not just general practice. Nurse practitioners have been practising in Australia for 18 years and been eligible providers under the MBS for almost half of that time. They have become an integral part of primary health care for many groups and work either as the primary health care provider or as part of a team including in new models of care designed to further open up access to primary health care as well as reduce low acuity emergency department presentations such as the ACT's Nurse Walk In Centres.

Despite the growth in numbers and the vital role they play for many consumers their access to MBS items is limited. CHF agrees with the Reference Group that the current range of MBS items available for patients when they see a nurse practitioner (NP) does not reflect contemporary NP practice or contemporary primary healthcare models and that it seriously inhibits the use of what should be a valuable and valued primary health care resource.

We support the idea that improved use of NPs would improve accessibility of care, enhance consumer choice and lead to more integrated models of care. We support the desire of the Reference Group to ensure that NPs are able and encouraged to work to their full scope of practice.

# Response to the Recommendations

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CHF supports all the recommendations in the report.

We agree with the conclusions in the Consumer Impact statement of the report, particularly around the importance of these measure in improving patient choice and access to primary health care that it "timely, uncomplicated, culturally safe and affordable". We believe that the package of measures, if fully implemented would achieve that and would do make a significant contribution to modernising our primary health care system.

The importance of NPs in settings where there are often problems with accessing other primary health care providers should not be underestimated. They play an important role in the provision of services in aged care, rural and remote Australia and working with Aboriginal and Torres Strait islander peoples. They should not be treated as a second best option but rather given the status that their training and scope of practice deserves.

For the health system to be sustainable we need to make sure that we reduce inefficiencies and duplication and allow all health professionals to work to their full scope of practice. Recommendations 8, 9 and 10 do exactly that and by doing this benefit consumers through more timely access. We believe that NPs can be trusted to always work within their scope of practice, understand their own limitations and will seek input from other clinicians as and when required as well as refer on to a GP where required. The current restrictions on MBS rebated investigations ultimately disadvantages the consumer, who either has to forgo the MBS rebate or has to face the cost and inconvenience of going to a GP to get a referral.

We are particularly interested in the recommendations that seek to improve patient access to telehealth services; Recommendations 11-14. We believe more needs to be done across the health system to increase the use of telehealth and other digital models of service delivery. We have supported recommendations in other MBS review reports that are seeking to do this.

We welcome the acknowledgment in recommendation 11 that not everyone has access to the technology to use videoconferencing for telehealth and that telephone consultations can, in some cases, be used.