

Nephrology Nurse Practitioners: making a difference

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Nurse Practitioners (NPs) have been utilised in both the United States (US) and the United Kingdom (UK) for over 30 years to improve access to care, cost containment of health care, and the further development of the highly skilled nursing workforce. It is only in the last 10 years that they have become a key component in Australia's health care workforce.

There are many varied opinions from health professionals and the wider community on the NP role, and more importantly, the difference NPs make. We believe NPs, particularly nephrology NPs, are making a difference and have the potential to make a major difference in the care and outcomes for people with chronic kidney disease.

A little background may help to understand where the NP currently sits. The Australian Nursing and Midwifery Council (ANMC) was instrumental in ensuring a nationally agreed definition for the NP "a registered nurse educated to function autonomously and collaboratively in an advanced and extended clinical role" (ANMC, 2009, p. 4). The Nurse Practitioner role was developed to formally recognise clinical expertise, education and skills. With the development of the NP competency standards, the title of Nurse Practitioner became protected and cannot be used unless the nurse is authorised as a NP.

The NP role includes assessment and management of clients using nursing knowledge and skills and may include but is not limited to direct referral of patients to other health care professionals, prescribing medications and ordering diagnostic investigations. The role is grounded in nursing values, knowledge, theories and practice and provides innovative and flexible health care delivery that complements other health professional roles (ANMC, 2009). Nephrology NPs are expert clinicians, educators, mentors, patient advocates and researchers who influence health care at the policy level and

also participate in Kidney Health Australia (KHA), Caring for Renal Impairment (CARI), National Prescribing Service (NPS) and Australian College of Nurse Practitioner (ACNP) state and national committees.

The first Nephrology NP role was established in NSW in 2003. There are currently 28 qualified Nephrology NPs in Australia, of whom 20 have NP positions. The majority have Masters' level qualifications and all have more than five years of Nephrology experience. Nephrology NPs work across the nephrology continuum including paediatrics, chronic kidney disease and dialysis. Most of the NP's currently work with CKD...

The opportunity to write this editorial came at a time when the authors were attending the 2010 International Nurse Practitioner/ Advanced Practice Nurse Network (INP/APNN) conference in Brisbane. During this conference it became increasingly obvious that the education and role of the NP varies throughout the world. Australia is one of the few countries with the protected title. In some countries a nurse can become a Nurse Practitioner with an undergraduate Bachelors degree and very little relevant clinical experience. There is substantial difference in scope of practice, however the common theme is that NPs play a vital role in providing health care to the public and are making a difference.

So are Nephrology Nurse Practitioners making a difference? The treatment the Nephrology NP provides that makes a difference to the patients is not protocol driven but individualised treatment dependent on patients' clinical presentations. One issue that clouds the collection of hard data regarding the role of Nephrology NPs is that we function as part of multidisciplinary teams not as solitary care providers. Nephrology NPs work autonomously and

collaboratively with GP practices, with indigenous health care workers, allied health teams and nephrologists.

Individual Nephrology NPs in Australia have collected data which demonstrate reduced admission rates, improved anaemia and bone disease management and increased patient satisfaction. In Queensland, a research project is underway to explore the impacts of the NP in CKD. Nephrology NPs also make a difference in improving access to health service by reducing waiting times for access for patients with health concerns or providing additional services. Nephrology NP coordination ensures the continuum of care with the patient with progressive kidney disease. It is the depth of education, knowledge and skills which enables the Nephrology NP to extend the role beyond that of a Clinical Nurse Consultant through utilising critical decision making, planning and diagnostic knowledge.

With the forthcoming access of PBS and provider numbers for NPs there will be additional pressure for Nephrology NPs to undertake research projects to demonstrate the feasibility and sustainability of the role. Nephrology NPs also need to develop joint appointments with universities to educate undergraduates and to further the research component of their roles. The current Nephrology NPs believe they are making a difference and will be demonstrating this further through publication/presentation of clinical vignettes and research.

Reference:

Australian and Nursing Midwifery Council (2009). Standards and Criteria for the Accreditation of Nursing and Midwifery Courses leading to Registration, Enrolment, Endorsement and Authorisation in Australia – with Evidence Guide. ANMC. Feb 2009.

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