

Consultation on National Asthma Council Australia's Consultation on the draft National Asthma Strategy 2016–2020: APNA submission

24 August 2015

The Australian Primary Health Care Nurses Association (APNA) welcomes the opportunity to contribute to consultation on the National Asthma Council Australia's draft National Asthma Strategy 2016–2020. We are providing this submission on behalf of our membership, Australian primary health care nurses.

APNA Submission

APNA's responses to the questions raised in the consultation survey are listed below:

2. CONTEXT

Please refer to the draft National Asthma Strategy 2016–2020. We would like to know if we have described the context of the Strategy appropriately and whether anything is missing.

See Part 2: The current state of asthma

1. Do you agree with this summary of the current state of asthma and its impact?

- Strongly agree
- **Agree**
- Neither agree or disagree
- Disagree
- Strongly disagree

If you disagree, please explain why and/or what's missing:

See Part 3: Policy context

2. Do you agree with this summary of the policy context for the asthma strategy?

- Strongly agree
- **Agree**
- Neither agree or disagree
- Disagree
- Strongly disagree

If you disagree, please explain why and/or what's missing:

See Part 4: Progress and challenges

3. Do you agree with this summary of Australia’s past progress and current strengths?

- Strongly agree
- **Agree**
- Neither agree or disagree
- Disagree
- Strongly disagree

If you disagree, please explain why and/or what’s missing.

4. Do you agree with this summary of the key challenges facing asthma in Australia?

- Strongly agree
- **Agree**
- Neither agree or disagree
- Disagree
- Strongly disagree

If you disagree, please explain why and/or what’s missing.

3. AIMS

We would like to know if we are focusing on the right priorities and whether anything is missing.

See Part 5: Framework

The goal is:

To reduce the health, social and economic impacts of asthma with a targeted and comprehensive approach to optimise asthma diagnosis and management.

1. Do you support this goal?

- **Strongly support**
- Support
- Neither support or oppose
- Oppose
- Strongly oppose

If you do not support this goal, please explain why and/or what’s missing:

2. The objectives are as follows. Do you support these objectives?

- To improve effective self-management practices through increasing patient knowledge, confidence and skills – **strongly support**
- To ensure consistent, best-practice asthma care through improving health professional adherence to treatment guidelines – **strongly support**
- To create an integrated, equitable and accessible system for all stages of asthma care through system reform – **strongly support**
- To prevent and cure asthma and strengthen asthma care through increased support for research, evidence and data – **strongly support**

If you do not support these objectives, please explain why and/or what's missing:

3. The priority areas are as follows. Do you support these priority areas?

- Self-management practices – **strongly support**
- Workforce development – **strongly support**
- System reform – **strongly support**

- Research, evidence and data – **strongly support**

If you do not support these priority areas, please explain why and/or what's missing:

APNA believes there should be a strong focus on workforce development, particularly relating to primary health care nurses. These nurses, working as part of multidisciplinary primary health care teams, have a critical role in effective asthma management.

4. There is a strong emphasis on working to improve asthma outcomes for people with asthma in vulnerable and hard-to-reach populations. Do you support these priority populations?

People with asthma who are:

- Aboriginal and Torres Strait Islander peoples – **strongly support**
- High-end, frequent users of medical and health services – **strongly support**
- Living in rural and remote areas – **strongly support**
- Newly diagnosed – **strongly support**
- Older – **strongly support**
- Socioeconomically disadvantaged – **strongly support**
- Have severe asthma, to ensure fast-tracking to specialist care – **strongly support**

If you do not support these priority populations, please explain why and/or what's missing:

5. The intended outcomes over 4 years beginning 2016 are as follows. Do you support these outcomes?

- Decrease in suboptimal asthma control from 45% to 30% – **strongly support**
- Increase in asthma action plan ownership from 25% to 50% in adults and from 40% to 80% in children – **strongly support**
- Improved adherence with preventer medicines – **strongly support**
- Increase in annual reviews of people with asthma – **strongly support**
- Reduced avoidable asthma-related hospitalisations – **strongly support**
- Improved quality of life for people with asthma – **strongly support**
- Improved understanding of the economic burden of asthma including indirect costs – **strongly support**

If you do not support these outcomes, please explain why and/or what's missing:

4. KEY ACTIONS

We would like to know if our key actions are appropriate and likely to achieve our intended outcomes.

See Part 4: Priority areas and actions

1. The first priority area is *Self-management practices*. Do you support these key actions for this area?

- Deliver education programs – **strongly support**
- Deliver awareness campaigns – **strongly support**
- Provide information and support services – **strongly support**
- Enhance asthma health literacy – **strongly support**
- Promote and provide asthma action plans – **strongly support**
- Explore innovative new adherence strategies – **strongly support**

If you do not support these key actions, please explain why and/or what's missing:

2. The second priority area is *Workforce development*. Do you support these key actions for this area?

- Ongoing revision, dissemination and implementation of best practice treatment guidelines – **strongly support**

- Deliver education, training and support for health professionals – **strongly support**
- Support development of communication and counselling techniques – **strongly support**
- Provide emergency asthma management training and support for non-health professionals – **strongly support**
- Develop quality use of medicine initiatives for prescribing preventer medicines – **strongly support**

If you do not support these key actions, please explain why and/or what's missing:

APNA believes that the use of targeted education, training and support is vital for ensuring the delivery of safe high-quality care.

APNA has historically always strongly supported the quality use of all medicines.

3. The third priority area is *Systems reform*. Do you support these key actions for this area?

- Develop a workforce plan – **strongly support**
- Develop and implement nationally consistent hospital discharge protocols for asthma – **strongly support**
- Contribute to the Healthier Medicare review initiative – **strongly support**
- Monitor and use new and emerging technologies in asthma interventions – **strongly support**
- Explore innovative strategies to support cost-effective prescribing of asthma medications – **strongly support**
- Contribute to PBS reviews and continue to provide advice to PBS – **strongly support**
- Optimally implement new evidence-based asthma treatments – **strongly support**

If you do not support these key actions, please explain why and/or what's missing:

APNA believes that an effective workforce plan, which recognises the critical role of primary health care nurses in dealing with asthma, is necessary to create an integrated, equitable and accessible system for all stages of asthma care through system reform.

4. The fourth priority area is *Research, evidence and data*. Do you support these key actions for this area?

- Increase research investment – **strongly support**
- Develop a national research agenda for asthma within the respiratory and lung health context – **strongly support**
- Conduct and support research to generate new evidence and address gaps in current knowledge – **strongly support**
- Develop and test innovative new models of asthma care – **strongly support**
- Monitor asthma indicators – **strongly support**
- Report regularly on implementation of the National Asthma Strategy 2016–2020 – **strongly support**

If you do not support these key actions, please explain why and/or what's missing:

5. EVALUATION

We would like to know if our proposed evaluation approach is practical and useful.

See Part 7: Monitoring progress

1. Do you agree with this approach to monitoring progress against the aims of the Strategy?

- Strongly agree
- **Agree**
- Neither agree or disagree
- Disagree
- Strongly disagree

If you disagree, please explain why and/or what's missing:

2. What other measures or indicators of success should be included, and why?

- Measure or indicator 1 – **no response**
- Measure or indicator 2 – **no response**
- Measure or indicator 3 – **no response**

3. How should we collect this information? – **no response**

6. OVERALL

Please consider the Strategy overall. We would like to know if it will achieve our aims.

1. Do you agree with the overall feasibility, relevance and usefulness of the Strategy in the current context and moving forward?

- **Strongly agree**
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree
- Don't know

If you disagree, please explain why:

2. What factor(s) could render the Strategy unsuccessful and why?

If health professionals working in the asthma field are not fully supported to work to their full scope of practice this could negatively impact on the effectiveness of the Strategy. The delivery of relevant health care should be the right care, at the right time, by the right provider.

3. Any other comments?

The Strategy could include definitions of severe, moderate and mild asthma to add clarity for readers of the Strategy document.

The term 'practice nurse' used in the Strategy could be replaced by the term 'primary health care nurse'. This would serve to acknowledge that nurses work and educate people and their significant others on asthma and asthma action planning across a broad range of primary health care settings, including schools, Justice Health, general practice, Refugee Health, Aged Care and early childhood. The Strategy should apply the term consistently throughout the document.

About APNA

Australian Primary Health Care Nurses Association (APNA) is the peak professional body for nurses working in primary health care. APNA champions the role of primary health care nurses; to advance professional recognition, ensure workforce sustainability, nurture leadership in health, and optimise the role of nurses in patient-centred care.

APNA is bold, vibrant and future-focused. We reflect the views of our membership and the broader profession by bringing together nurses from across Australia to represent, advocate, promote and celebrate the achievements of nurses in primary health care.

Nurses in primary health care contribute to a healthy Australia through innovative, informed and dynamic care.

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