

LESSONS LEARNED: Health reform commissions in Australia, England, USA and Canada

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A tale of four countries

"It was the best of times, it was the worst of times; it was the age of wisdom, it was the age of foolishness; it was the epoch of belief, it was the epoch of incredulity; it was the season of Light, it was the season of Darkness; it was the spring of hope, it was the winter of despair; we had everything before us, we had nothing before us; we were all going directly to Heaven, we were all going the other way."

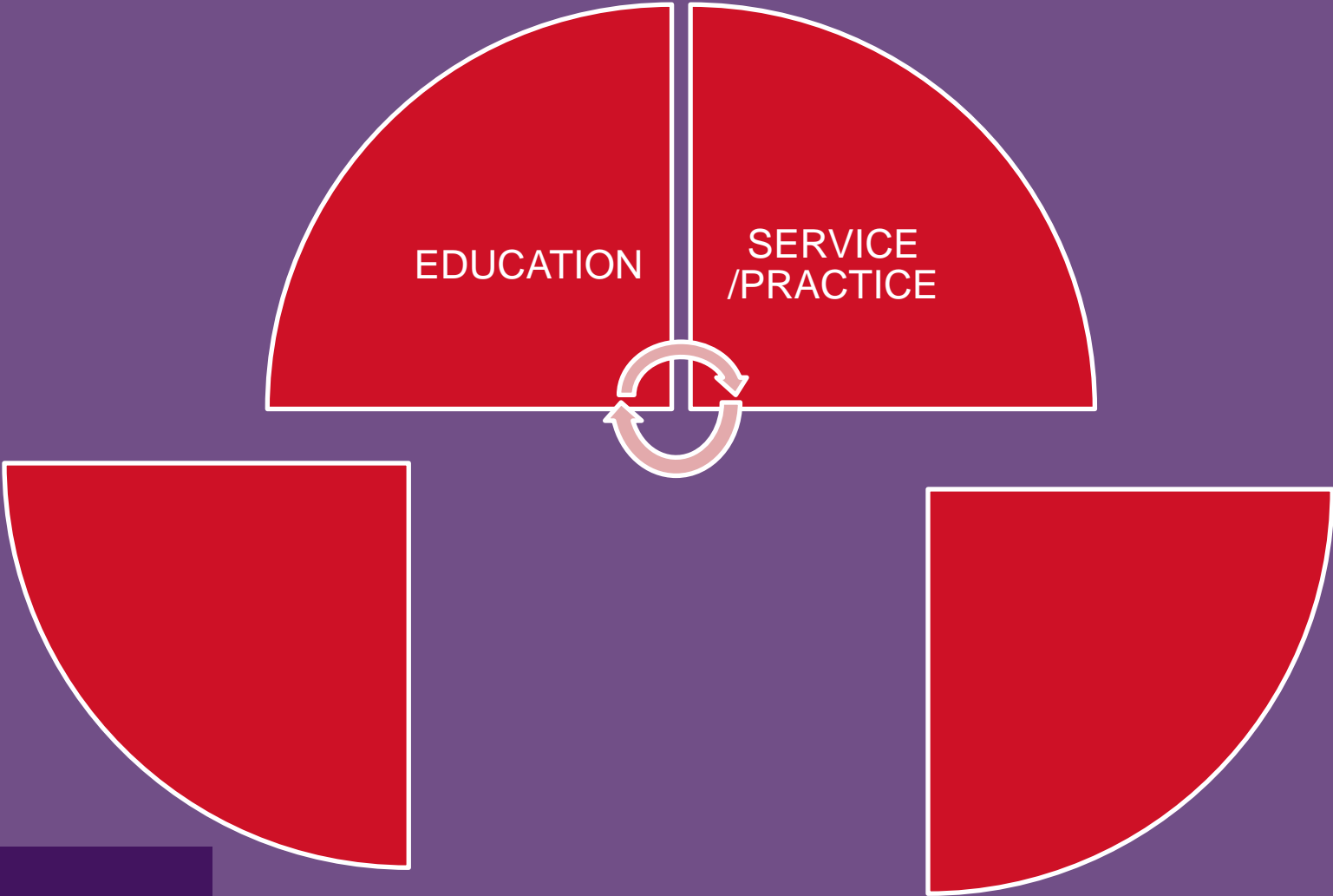
Dickens C *A Tale of Two Cities*

- › Background to the project
- › The Australian health reforms
- › National case studies - UK, USA, Canada
- › Similarities and differences
- › Lessons to be learned
- › Questions to be asked
- › Actions to be taken



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THE STORY SO FAR....







International Health Research & Policy Roundtable 2 Ottawa, Canada, September 2012,



The national case studies and reports

- Australia – A healthier future for all Australians – National Health and Hospitals Reform Commission (2009)
- United Kingdom – Prime Minister’s Commission on the Future of Nursing and Midwifery in England (2010)
- United States -The Future of Nursing: Leading Change, Advancing Health (2010)
- Canada – The health of our nations –the future of our health system: A national expert commission (2011)

Getting to Reform in Australia-

- **National Health and Hospitals Reform Commission (Report 2009)**
- **Maternity Services Review (Report 2010)**
- **Primary Health Care Review (Report 2009 & 2011)**
- **Preventative Health Taskforce (Report 2011)**
- **National Registration and Accreditation Scheme**
- **COAG National Partnership Agreement:
(HWA June 2011; IGA on Funding 2011)**



Health System Transformation



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FEDERATION !!



	Fed	NSW	VIC	QLD	SA	WA	TAS	NT	ACT
2006	Blue	Red	Red	Red	Red	Red	Red	Red	Red
2007	Blue	Red	Red	Red	Red	Red	Red	Red	Red
2008	Red	Red	Red	Red	Red	Red	Red	Red	Red
2009	Red	Red	Red	Red	Red	Blue	Red	Red	Red
2010	Red	Red	Red	Red	Red	Blue	Red	Green	Red
2011	Red	Blue	Blue	Red	Red	Blue	Red	Green	Red
2012	Red	Blue	Blue	Blue	Red	Blue	Red	Green	Red
2013	Red	Blue	Blue	Blue	Red	Blue	Red	Green	Blue

Getting to Reform – Nursing Input:

- Australian Nursing Federation
- Royal College of Nursing Australia
- The College of Nursing
- Australian Nursing and Midwifery Council (ANMC)
- State and Territory Regulatory Authorities (e.g. NMB)
- Council of Deans of Nursing and Midwifery (A&NZ)
- Council of National Nursing Organisations
- Council of Chief Nurses of Australia and NZ



Health System Transformation

Successes:

Medicare Locals (integrated community services)

MBS PBS for Eligible Midwives and Nurse Practitioners

PII for Midwives in Private Practice (NOT homebirth)

National registration and accreditation scheme





Front Line Care

Pushing Forward the Boundaries

THEMES FROM THE REPORT:

- 1: high quality, compassionate care**
- 2: health and wellbeing**
- 3: caring for people with long-term conditions**
- 4: promoting innovation**
- 5: nurses and midwives leading services**
- 6: careers in nursing and midwifery**

A nursing call to action



The health of our nation, the future of our health system

National Expert Commission
Better Health. Better Care. Better Value. Best Nursing.

Actions for Transformation

1. Champion 5 in 5
2. Expanded scope of practice
3. A national health promotion partnership
4. Nursing best practices for first nations' health
5. Research to action for seniors
6. Health in all policies
7. Quality safety agenda
8. Center for Health Policy
9. National nursing education taskforce
10. Maximize technology for better care



1. All practitioners should practice to the full extent of their education and training
2. Physicians, nurses and other health professionals work in a team-based model of care delivery
3. Models of care maximize time that providers can spend on their respective roles and responsibilities to patients
4. Increase the proportion of nurses with BSN and higher degrees
5. Increase the number of nurses with doctorates
6. Implement nurse residency programs
7. Promote lifelong learning

- All four reports identified the lack of sustainability of the current acute care focused health system
- All recognised the need to focus more of preventative and primary health care
- All acknowledged as pressing issues the ageing population, the increasing chronicity of disease, the need for more integration of health services

- All identified that nurses could play a significant role in addressing these issues and needs
- All recommended (to varying degrees) that the scope of practice for nurses and the way in which they were educated would need some adjustment if they were to be able to do so
- All countries troubled and affected to some degree by GFC

Similarities and differences in process

Face to face consultations:

- With the professions
- With management and administration
- With governments and decision makers
- With the public

Use of media:

- Websites
- Webinars
- Facebook, Twitter, Blogs
- Surveys, postcards,

All nurse leaders present ...

- › Wanted to improve the health of their respective countries (and indeed other countries in the developing world, but we need to start somewhere)
- › Felt that nurses and nursing knowledge could contribute significantly to the improvement of health outcomes

- › Believed that nurses had both the local track record (at grass roots) and the potential nationally to lead key aspects of health reform if given the opportunity
- › Reflected (to a lesser or greater degree) that they needed more political skills and acumen to drive health reform agendas
- › Conceded that more nurses needed to develop the requisite policy knowledge and skills if we were going to be more effective in influencing health reform in the future

The governments

- › Australia – hung Parliament
- › Canada –relatively stable
- › UK – change of government after report came out – coalition
- › US – shift of power in mid-term elections

The nurse supply

- › Australia and UK currently in over-supply
- › Canada and US still in under-supply

The Commissions:

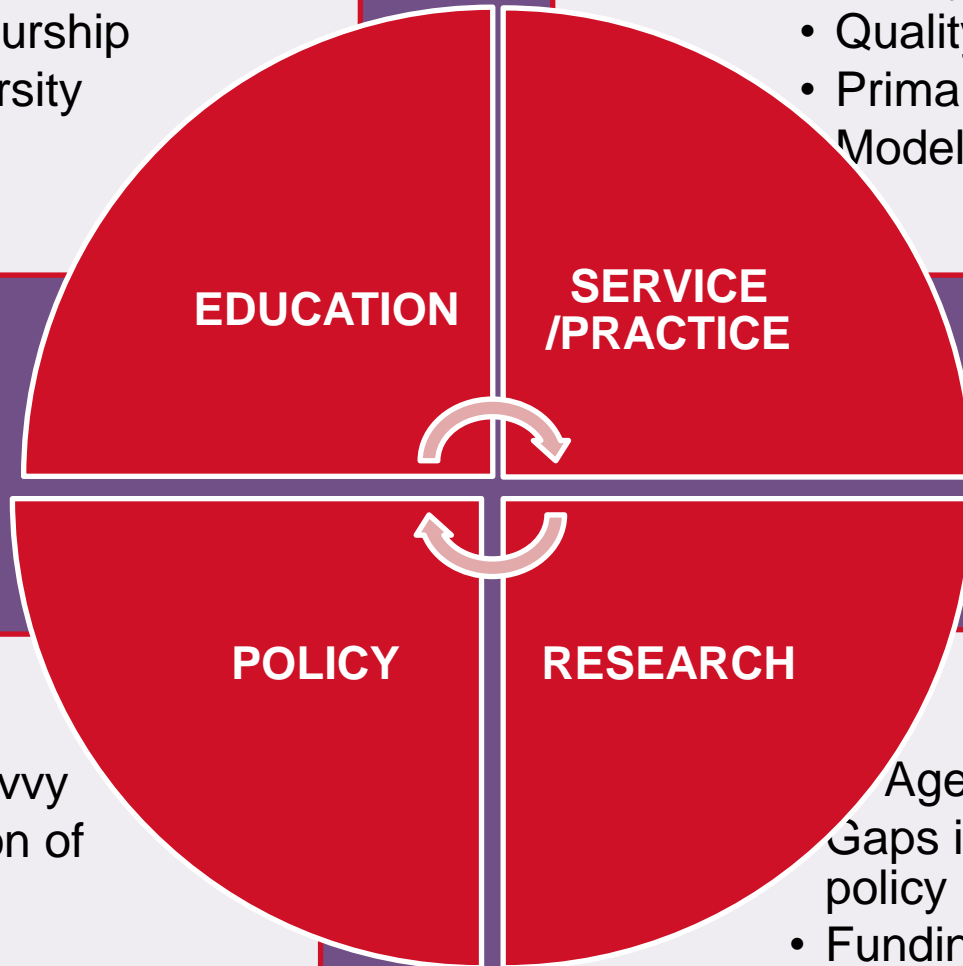
- Australia – one nurse only, health reform focused, government initiated
- UK – all nursing, nursing and midwifery focused, government initiated
- US – majority non-nursing, but strongly supported by nursing secretariat, health reform and focused on the question “what is the opportunity OF nursing for health reform”, independently initiated (RWJF) **## IMPLEMENTATION PLAN**
- Canada – majority nursing, but key non-nurse membership including co-chair – health reform focused, CNA initiated

- More collaboration with consumers
- A stronger sense of entitlement
- Better coordination of the nursing voice
- More Face to face time with staffers and the Minister
- Better research base from which to argue
- Better media coverage and public information
- Less time appeasing the Doctors Union (AMA) and more time working on potential interprofessional coalitions
- **We got the emphasis right - on health outcomes NOT nursing needs**

What would you do differently or the same next time?

- Internships
- Entrepreneurship
- Multi-university

- Safety
- Quality
- Primary health care
- Models of care



- Policy savvy
- Integration of evidence
- Building coalitions

- Agenda setting
- Gaps in basis for policy
- Funding access
- Multi site

Towards an age of WISDOM.....

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