

Strengthening health services through optimising nursing

strategy and action plan (2013–2016)



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Contents

Minister's foreword	2
Chief Nursing and Midwifery Officer's message	3
About the Nursing and Midwifery Office, Queensland	5
Introduction	5
National and state context and priorities	6
Nursing contribution to healthcare: profile of nursing in Queensland	8
The challenges	10
The opportunities	11
Actions to optimise nursing	12
Looking to the future	15
Action plan summary	16–17
Definitions	18
Abbreviations	18
References	19



Minister's foreword

The *Blueprint for better healthcare in Queensland*¹ sets the scene for structural and cultural improvements in our healthcare system. The Queensland Government is committed to delivering a healthcare system that will be sustainable for generations to come. This means better modes of delivery, more intelligent use of resources, and key strategies to expand services and improve performance.

As the largest clinical workforce in Queensland, nurses are critical to driving and embedding effective change. Nursing is at the heart of patient care and is therefore crucial to changing the way healthcare is delivered so that patients receive better care at a cost we can afford. Nurses are already contributing innovations to ensure better health and better care for their patients and better value for healthcare dollars. Nurses deliver more care than any other group in the healthcare system. They are a key link in the chain of safety and must be leaders in developing and sustaining a comprehensive statewide commitment to safety and quality in healthcare services.

I need nurses to act as full partners in clinical redesign efforts, to be accountable for their own contributions to delivering high-quality care and work collaboratively with leaders from other health professions. Being a full partner involves taking responsibility for identifying problems and areas of system waste, devising and implementing improvement plans, tracking improvement over time and making necessary adjustments to realise shared goals.

I commend the Chief Nursing and Midwifery Officer and her staff for this strategy and action plan that supports nurses to work to their full scope of practice and strengthens the profession's contribution to the healthcare system in Queensland.

Lawrence Springborg
Minister for Health



Chief Nursing and Midwifery Officer's message

What nurses bring to the future of Queensland is a commitment to safe, quality patient care leading to better health outcomes. Across a broad range of settings, nurses work in a changing healthcare landscape that incorporates new treatments and technologies. They use their knowledge and skills to make complex decisions for sicker, frailer patients and deliver flexible healthcare solutions to individuals, families and communities.

There exists a variety of historical, regulatory and policy barriers that have limited nurses' ability to generate service transformation. For too long, nursing has been constrained by an environment that unnecessarily restricts practice and innovation.

Through extensive research and consultation the *Strengthening health services through optimising nursing strategy and action plan (2013–2016)* has been developed. Nursing cannot deliver on this strategy and action plan on its own—it calls for a multifaceted approach, requiring collaboration and partnerships. It aims to address the challenges impacting healthcare delivery. It will deliver genuine reform and tackle the difficult issues within the professional, cultural and legislative environment.

Nurses in Queensland are renowned for their patient-centred care based on their intrinsic values. It is time for nurses to create a new future of healthcare provision in Queensland. We must drive creativity and innovation to deliver better health for all Queenslanders.

An empowered nursing workforce can drive a more accessible, affordable, sustainable and safer healthcare system. This strategy and action plan provides the framework for action that is needed. The time to act is now, in the words of Goethe *'Knowing is not enough; we must apply. Willing is not enough; we must do'*.

Dr Frances Hughes RN

Chief Nursing and Midwifery Officer, Queensland

For the purpose of this strategy, nurse refers to the registered nurse, including the nurse practitioner, registered under the *Health Practitioner Regulation National Law Act (2009)*.



Introduction

This is the first strategy and action plan to address productivity, care and efficiency improvements in nursing services in Queensland. The intent of the strategy is to facilitate action on the government's priorities and lead to better healthcare for all Queenslanders.

Current and emerging pressures on the healthcare system in Queensland and globally include:

- population growth and ageing
- health workforce constraints
- scientific and technological advances
- increasing health costs driven by these advances
- the increasing burden of chronic disease
- increasing consumer expectations².

As such, healthcare providers must adopt new ways to provide patient-centred care.

Optimising the ability of nurses to work to their full regulated scope of practice will increase flexible service delivery options and enhance contestability. Expanding nurse-led services through a range of business models, including public private partnerships, Medicare Locals, non-government organisations and community-based services (neighbourhood centres and welfare groups) improves integration of care, promotes self-care and wellness, and reduces the demand for acute services.

Nurses are well placed to collaborate across the multi-disciplinary team by virtue of their numbers, professional knowledge and adaptive capacity, and healthcare organisations will benefit from taking advantage of the full contribution nurses can make.

Research in clinical settings shows a quantifiable link between appropriate levels of skilled nursing staff and lives saved in hospitals, in particular, reduced hospital-related mortality, hospital-acquired infections, unplanned extubation, failure to rescue and length of stay³.

This strategy will build on evidence showing significant cost benefits and improved health outcomes through the expansion of nurse-led clinics, procedural services, streamlined referral pathways and alternative models of care across the health continuum.



About the Nursing and Midwifery Office, Queensland

The Chief Nursing and Midwifery Officer is responsible for the Nursing and Midwifery Office, Queensland (NMOQ). The office is the Queensland Government's principal advisor on all matters relating to nursing and midwifery with a particular authority and expertise in advancing, leading and advising on matters that promote a healthier Queensland.

Key areas of responsibility in relation to nursing and midwifery services include:

- strategically advising and supporting the government in the delivery of health priorities
- developing policies and initiatives to support government health objectives
- undertaking high-level monitoring and responding to key statewide indicators
- building statewide health service capacity and sustainability.



In 2009, the Australian Government committed \$59.7 million⁴ to expand the role of the nurse practitioner within the Australian healthcare system. This significant reform provided opportunities for nurses to expand into private sector roles that were previously only operating in the public sector. Nurse practitioners were recognised under the Medicare Benefits Schedule (MBS) and the Pharmaceutical Benefits Scheme (PBS), enabling consumers to access specialist nursing services.

National and state context and priorities

In collaboration with the states and territories, the Australian Government has committed to health reform in Australia. These reforms will provide better access to services, improve local accountability and transparency, ensure greater responsiveness to local community needs and a stronger financial basis for the healthcare system into the future.

Queensland Government objectives for health service delivery

The Queensland Government is committed to a statewide healthcare system providing the best services, at the best time and in the best place. *The Blueprint for better healthcare in Queensland*¹ commits to providing reliable healthcare services in places where they were previously unavailable.

This requires significant programs of clinical redesign that will not be constrained by historical practices of the past. These changes will improve access to healthcare, and provide greater diversity and competition in the healthcare sector that reaches all corners of the state.

Principal themes of the blueprint:

1. Health services focused on patients and people.
2. Empowering the community and our health workforce.
3. Providing Queenslanders with value in health services.
4. Investing, innovating and planning for the future.

Key outcomes of the Queensland Government's objectives:

- Queenslanders live longer, healthier and more independent lives.
- Health equity is improving.
- Queenslanders have confidence that their healthcare system responds well to their needs.
- The health system is affordable, sustainable and continually improving.

Department of Health Strategic Plan 2012–16

The Department of Health's vision is:

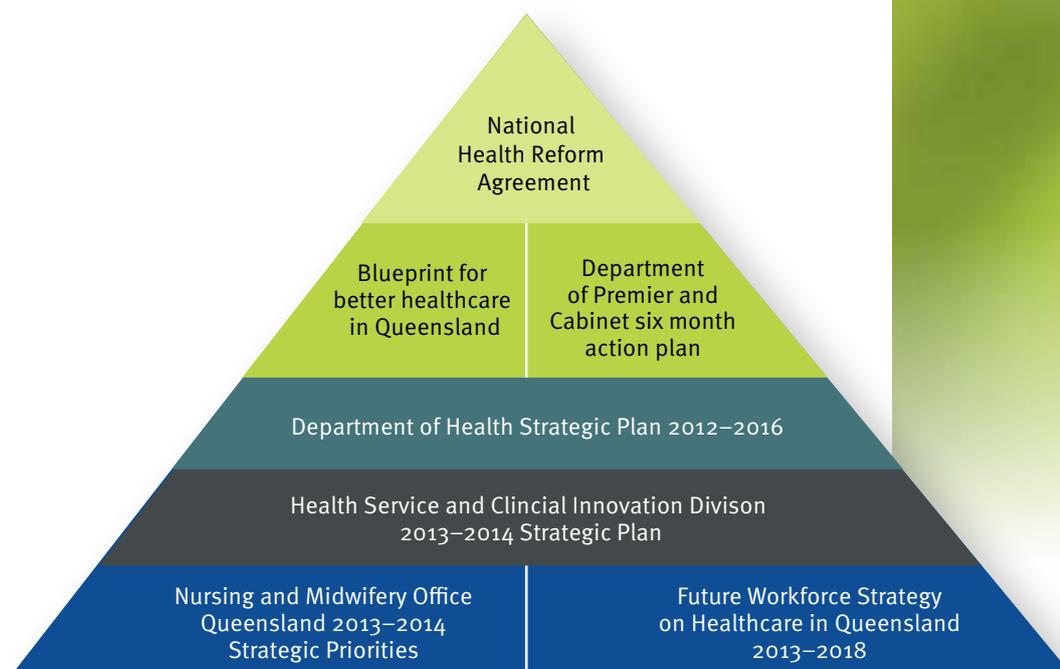
Quality healthcare that Queenslanders value.

The *Department of Health Strategic Plan 2012–16 (2013 update)*⁵ outlines the department's objectives to achieve its vision:

1. **Healthy Queenslanders**—facilitate the integration of healthcare system services that focus on keeping patients, people and communities well.
2. **Accessible services**—ensure access to appropriate healthcare services is simple, equitable and timely for all Queenslanders.
3. **Safe services**—focus healthcare resources on models of care that are patient-centred, safe, effective, economically sustainable and responsive to community needs.
4. **Value for money**—provide value in health services by maximising public investment through multi-sector partnerships in service delivery, health and medical research, infrastructure and assets.
5. **Governance and innovation**—foster a health system that is transparent, accountable and innovative.
6. **Partnerships and engagement**—cultivate a high-quality system through positive engagement and cooperation with our workforce and healthcare system partners.

The blueprint and the strategic plan are the key strategic documents providing overarching policy direction. Other key drivers and policies at state and federal level also inform this strategy for optimising nursing, as outlined below.

This strategy outlines the nursing profession's shared commitment to achieve the goal of a sustainable healthcare system for generations to come, delivering sustainable quality, cost-effective nursing services focused on patients.





Nursing contribution to healthcare: profile of nursing in Queensland

By virtue of the proportion of the clinical workforce and the adaptive capacity, nursing has the potential to effect wide-reaching changes in the healthcare system. Nurses' proximity to patients and the scientific understanding of health across the care continuum provides them with the unique ability to lead in the improvement and redesign of health services in Queensland.

The health budget

The Queensland Government will spend \$12.3 billion on health in 2013–14. This is a 3.9 per cent (\$464.3 million) increase on the 2012–13 health budget⁶. The major component of the budget is employee expenses.

- In 2011–12, employee expenses were \$7.30 billion (64.51 per cent of total expenditure).
- In 2011–12, the total expense for the nursing workforce was approximately \$2.64 billion (36 per cent of employee expenses)⁷.
- The Nurses and Midwives (Queensland Health) Certified Agreement (EB8) was certified on 6 August 2012. Under the EB8 agreement, through improved resource management and productivity savings, \$76.8 million was saved for the 2012–13 period.

Profile of the nursing workforce

As the largest workforce within the clinical streams, nursing and midwifery services have a leading role in driving the overall productivity and efficiency of healthcare services. In conjunction with the strategic plan, the EB8 agreement provides direction on the nursing and midwifery productivity and efficiency initiatives required to fund the agreed increases in wages and allowances.

- As at 30 June 2013, 66,795 nurses and midwives were employed in Queensland, with 49 per cent employed by Queensland Health⁹.
- Queensland Health employs approximately 77,000 staff, including 32,000 nurses⁸.
- The Queensland Health nursing workforce comprises:
 - 42 per cent of the entire workforce
 - 61 per cent of the clinical workforce⁸.
- Registered nurses are classified by Nurse Grade 5 and above. These positions equate to 83 per cent (20,823 full-time equivalents) of the nursing workforce⁸.

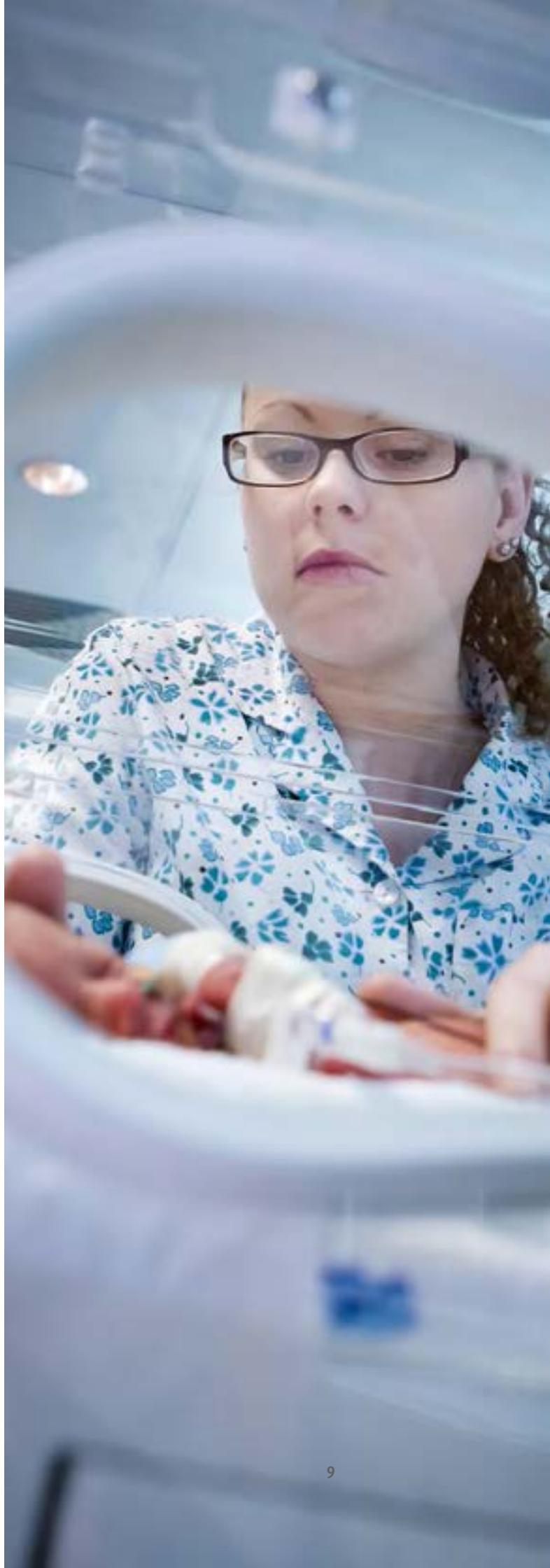
Nursing contribution to health outcomes

There is an extensive body of evidence from across the world that demonstrates the importance of nursing's contribution to the healthcare system. Literature states that where care is provided by registered nurses, positive health outcomes are achieved with reduced adverse events.

Specifically this includes:

- Having a clinically appropriate proportion of registered nurses in the mix of providers has been associated with shorter length of stays, lower rates of shock and cardiac arrest, urinary tract infections, pneumonia and respiratory failure^{4,10}.
- In-patient mortality is reduced when care is provided by a multidisciplinary team which include registered nurses¹¹⁻¹⁵.
- A clinically appropriate proportion of registered nurses on medical-surgical units has been associated with reduced medication errors and wound infections¹⁶.
- The presence of registered nurses in long-term care facilities has been associated with reduced adverse outcomes, including pressure ulcers, hospital admissions, urinary tract infections, weight loss and deterioration in ability to perform activities of daily living¹⁷.
- By increasing the number of entry points to care, coordinating care and assisting patients in navigating the healthcare system, registered nurses as part of the multidisciplinary team are reducing wait times and providing timely access to care¹⁸.

Queensland Health is well placed to measure the contribution of nursing to the quality of patient care delivery through its Nurse Sensitive Indicators (NSI) information system. The statewide NSI reports are designed to support the health executive to monitor, analyse and compare data to inform strategic quality improvement initiatives. Expansion of clinical reporting systems and development of nursing datasets integrated across all healthcare settings will support improved patient care.





The challenges

Demand for health services

Queensland is the second largest state in Australia, with a geographically dispersed population. It is projected that Queensland's population will continue to grow, concentrated predominantly in the south east corner and coastal areas. This growth will also lead to an increased demand for health services into the future¹⁹.

As a result, the health sector in Queensland operates in a challenging environment, including⁵:

- Queensland's growing and ageing population
- the increasing burden of disease and other chronic health conditions
- unequal access to services, particularly affecting those with high or complex health needs, those living in rural or remote areas, and Aboriginal and Torres Strait Islander Queenslanders
- a constrained economic and fiscal environment
- a rapid increase in technology and new treatments
- an ageing and maldistributed workforce.

Service capacity and capability

The ability to provide quality health services to the community depends on the availability of a highly-skilled workforce. Former reviews²⁰ of the healthcare system have indicated that staff are working in increasingly complex and stressful environments, having to cope with rising workloads, sicker patients and growing expectations about what healthcare services can deliver.

Some health professions are prevented from practising to their full potential by a range of **legislative, administrative, funding, policy, custom and practice barriers**. Because of the complexity of the environment and the number of parties involved, eliminating the barriers is complicated, with changes required from the Australian and State Governments, Department of Health, Hospital and Health Services, facilities and units. The workforce is further hampered by fragmentation into professional silos that are supported by professional culture and practice barriers, as well as complex and inflexible industrial and human resource management arrangements.

The opportunities

Many countries are re-examining the role of nurses to respond to mounting pressures on healthcare systems and the ability to respond efficiently to the growing number of people with chronic illnesses requiring close monitoring, treatment, education and counselling to manage their condition. These pressures offer substantial opportunities to further develop the roles and contribution of nurses²¹.

Nurses have assisted in reshaping healthcare services, with advanced practice nurses now a vital element of contemporary healthcare systems. The advanced practice nurse is a registered nurse who has acquired an expert knowledge base and complex decision-making skills for specialist practice.

Further regulatory changes have led to the introduction of the nurse practitioner role. Nurse practitioners are registered nurses educated and authorised to function autonomously and collaboratively in an advanced and extended clinical role. This role has existed in some countries for more than 40 years and there is considerable published evidence that the role is effective in meeting the challenges of an ageing population, increasing prevalence of chronic disease and preventable illness requiring lifelong healthcare. The rapid uptake of the nurse practitioner role across Australia attests to the identification by those at the frontline of health service delivery that this level of healthcare provider is flexible and improves the quality, timeliness and access to healthcare for under-served groups²².

The nursing profession is flexible and responsive enough to provide solutions to the current challenges in Queensland, but must be enabled system-wide. The strengthening of healthcare services can be achieved through key strategies to optimise nursing:

1. Enable nurses to work to their full scope of practice across all settings.
2. Expand the delivery of nursing services in a range of settings to increase service capacity and consumer choice.
3. Optimise the influence of nursing, improving quality and value for money in healthcare services.
4. Support high-performing nursing services through continual learning and evidence-based practice.
5. Support nursing services to enhance patient care through information systems and decision-making tools.

While the challenge is significant, there are many reasons to be optimistic that Queensland Health can meet the goal of improving integrated patient care by gaining better value from our healthcare system. In isolated pockets across the state, there are current nurse-led models delivering high-quality, accessible and cost-effective care. These models could be further expanded, with improved access to diagnostic testing, ability to prescribe medication and referral to other specialist services.

Innovative service delivery models in Queensland

Three nurse practitioners in Metro South run a combined nurse-led chronic disease clinic to manage ongoing care of patients with diabetes, renal and cardiovascular disease referred to them by specialists and general practitioners.

Nurse practitioners in emergency departments manage patients with low to high acuity, but low complexity. In some emergency departments, such as Redcliffe Hospital, the nurse practitioners assess, treat and discharge approximately 80 per cent of the patients they see autonomously.

In Retrieval Services Queensland, nurses lead and coordinate complex care, 24 hours a day across the state via Telehealth technology.

Actions to optimise nursing

Nurses have the potential to lead innovative strategies to improve the healthcare system. However, a variety of historical, legislative and policy barriers have limited nurses' ability to generate transformation. To overcome these barriers and achieve the goals outlined in this strategy, a variety of stakeholders at a state and national level will need to be engaged.

This must include the consumer. It is important that the best interests of users of healthcare services be the main consideration in all decisions and actions. Planning and delivery of services must be consumer-focused with consumer needs, expectations and experiences at the forefront of any change. The expectation is that the healthcare system will be more integrated and coordination between healthcare services will be improved to ensure consumers experience a smooth journey. This also includes services delivered outside usual business hours and/or offered in a range of settings outside a healthcare facility.

Goals for optimising nursing that will support consumer-focused care:

- Legislative, regulatory and policy frameworks maximise the potential of nursing
- A flexible work environment supports efficient and effective models of patient-centred healthcare
- Increased nurse-led services reduce avoidable hospital admissions.
- Increased nurse-led services improve access to diagnostic and therapeutic procedures.
- Access to the healthcare system and outcomes are improved through strengthened nursing governance and leadership.
- The public have confidence in appropriately qualified and authorised nurses providing their care.
- Quality of care is improved through nursing-focused targets and indicators.



Legislative, regulatory and policy frameworks maximise the potential of nursing

Review of legislative, regulatory and policy frameworks at federal, state and service levels will identify changes required to enable nurses to work to their full scope of practice and deliver care across the health continuum.

Current examples of effective regulatory amendments on which changes could be built include:

- Pharmaceutical Reform Arrangements for nurse practitioners in specialist services (e.g. oncology and nephrology) to access Section 100 highly specialised drugs program to support continuity of care
- the MBS, incentives and exemptions extended to nurses to enable innovative models of care that are cost-effective and span the continuum, including access to diagnostics and referral privileges for nurse practitioners employed in the public sector
- informing and influencing the regulatory model for medicine, poisons and therapeutic goods to optimise community safety and nursing scope of practice.



A flexible work environment supports efficient and effective models of patient-centred healthcare

Review of the current industrial framework in Queensland will influence changes required to promote more flexible employment opportunities and new ways of working.

Current examples on which changes could be built include:

- reshaping employment arrangements to create a more flexible and mobile workforce and to foster innovation that together help drive reform of the healthcare system
- providing guidance to nurses on flexible ways of working under public private partnerships (including admission privileges for nurse practitioners) to enable alternative models of care and consumer choice
- promoting business development for nurses to deliver new models of care.

Increased nurse-led services reduce avoidable hospital admissions

Building on existing nurse-led services and collaboration with other providers will improve access and reduce avoidable hospital admissions.

Current examples which could be built upon include:

- expanding nurse-led clinics and integrating across all healthcare sectors to increase access to specialist services in priority areas (e.g. chronic disease, palliative care)
- increasing the number of nurse practitioners to create sustainable models of care that are responsive to community needs.



Increased nurse-led services improve access to diagnostic and therapeutic procedures

Development of nurse-led procedural services will improve access to safe and reliable health services and reduce waiting lists for patients.

Current examples of nurse-led best practice models include implementation of:

- nurse endoscopy services to improve access to timely diagnostics and treatment
- nurse triage models to streamline referral pathways into outpatients and specialist services and improve capacity and efficiency.

Access to the healthcare system and outcomes are improved through strengthened nursing governance and leadership

Strengthening contemporary nursing practice through promotion of best practice models will improve quality and value for money in healthcare services that are led by the profession.

Current examples to strengthen nursing leadership include:

- online repository of evidence-based information to support high-priority nursing models required for service innovation
- the application of the *Registered Nurse Professional Practice in Queensland* which provides the context and practical application of regulation and practice pathways as it applies to nursing.

The public have confidence in appropriately qualified and authorised nurses providing their care

Establishment of mandatory education qualifications will set minimum standards and create a culture of continual learning within the nursing profession.

Current examples to increase public confidence in nursing include:

- professional credentialing of mental health nurses to enable access as eligible providers to the MBS for specialist mental health services
- an education pathway for practice for nurses, including advanced practice nurses and nurse practitioners in priority areas, including rural and remote, chronic disease and palliative care to ensure sustainable service delivery models.

Quality of care is improved through nursing-focused targets and indicators

Strengthening the use of data and information technology (IT) solutions to support nurse decision making will transform the quality and efficiency of clinical care.

Current examples that require further development include:

- expanding NSIs to monitor and analyse statewide trends and unit-specific patient outcomes
- developing an IT strategy to optimise clinical service provision, including bedside technologies for nurses that enhance patient care.



Looking to the future

There are rising challenges impacting on the healthcare system, including increasingly complex health demands and a shortage of healthcare professionals. If Queensland continues to work under the current legislative and policy frameworks, culture and service delivery models, the gap between consumer health needs and the ability to provide necessary healthcare services will increase.

Nurses are the largest group of healthcare providers in Queensland and around the world, and are uniquely placed to address healthcare system priorities. Nurses have the knowledge, expertise and capacity to bring solutions to the healthcare challenges being faced. They are well positioned as they are at the forefront of care across the health continuum, supporting health promotion, delivering acute, community-based and primary healthcare. Harnessing the potential of nursing will improve the quality and value for money of healthcare services and deliver the government's vision of 'Healthy Queenslanders.'

Strengthening healthcare services through the optimisation of nursing means change. This change requires:

- re-examining how nurses are impacted by system and operational barriers limiting their practice
- determining how nursing professional qualifications, skills and abilities can be used to maximise the contribution of nurses to the healthcare system
- recognising the role of professional governance in enabling nurses to practise to their full potential
- breaking down cultural divisions within nursing, as well as barriers between nursing and other professions
- working collaboratively with other healthcare providers, policy-makers and leaders to build a healthier Queensland.

As a result of the successful implementation of this strategy, there will be:

- improved access to healthcare
- better care coordination across the healthcare continuum
- increased access to new or expanded services and technology
- health service delivery that is focused on consumers
- increased sustainability of service provision
- improved quality of nursing care.

Action plan summary

Strategies	Enable nurses to work to their full scope of practice across all settings.	Deliverable end date	Expand the delivery of nursing services in a range of settings to increase service capacity and consumer choice.	Deliverable end date
Goals	1.1 Legislative, regulatory and policy frameworks maximise the potential of nursing.		2.1 Increase nurse-led services reduce avoidable hospital admissions.	
Actions	1. Remove the barriers to nurses practising to their full scope of practice in Commonwealth legislation.	30 June 2016	1. Expand nurse-led clinics (NLCs) and service models across the care continuum to increase access and reduce avoidable hospital admissions through the: <ol style="list-style-type: none"> expansion of NLCs with particular emphasis on rural, remote and very remote areas in Queensland, including Aboriginal and Torres Strait Islander communities development of new service models for nursing e.g. integrated chronic disease, mental health and Parkinson's disease NLCs. 	31 July 2015
	2. Expand access to the MBS for services provided by nurses, streamline referral pathways and identify patient rebateable services.	30 June 2016		
	3. Remove requirement for nurse practitioners to be in collaborative arrangements.	31 December 2015		
	4. Expand access to the Pharmaceutical Benefits Scheme for nursing services.	31 December 2015		30 June 2015
	5. Ensure that state legislation supports the optimisation of nursing.	28 November 2014		
	6. Inform and influence the regulatory mechanism for medicines, poisons and therapeutic goods to remove unnecessary barriers or restrictions to nursing scope of practice.	30 June 2014		
	7. Ensure that Queensland Health policies and guidelines support the optimisation of nursing.	30 June 2014		
	8. Expand current provisions enabling access rights to public and private hospitals for nurses, including admission and discharge privileges.	28 November 2014		
	9. Optimise nursing models under public private partnerships.	31 October 2014		
Goals	1.2 A flexible work environment supports efficient and effective models of patient-centred healthcare.		2.2 Increased nurse-led services improve access to diagnostic and therapeutic procedures.	
Actions	1. Promote flexible employment opportunities and new ways of working by optimising alternate business models.	30 June 2015	1. Develop nurse endoscopy service models to improve access to safe and reliable gastroenterology services.	30 June 2014
	2. Strengthen business acumen of nurses.	31 December 2014	2. Expand access and embed professional guidance to support nurse-led procedural services.	30 June 2015
			3. Support the development of nurse triage models to streamline referral pathways.	30 June 2015

Action plan summary continued

Strategies	Optimise the influence of nursing, improving quality and value for money in health services.	Deliverable end date	Support high-performing nursing services through continual learning and evidence-based practice.	Deliverable end date	Support nursing services to enhance patient care through information systems and decision-making tools.	Deliverable end date
Goals	3.1 Access to the healthcare system and outcomes are improved through strengthened nursing governance and leadership.		4.1 The public have confidence in appropriately qualified and authorised nurses providing their care.		5.1 Quality of care is improved through nursing focused targets and indicators.	
Actions	1. Strengthen the role of the executive nurse leader in healthcare service delivery.	30 June 2014	1. Establish the requirement for mandatory post-graduate education in job descriptions as needed.	30 June 2015	1. Enhance development and use of appropriate information and communication technology systems to support nurse decision-making to improve patient care.	31 December 2015
	2. Strengthen contemporary nursing practice through best practice models.	31 December 2014	2. Facilitate education responsiveness with industry and health providers to develop the required workforce needs.	30 June 2016	2. Improve quality through enhanced nursing-focused targets and indicators.	30 June 2016
	3. Develop Registered Nurse Professional Practice in Queensland.	31 December 2014	3. Create a culture of continuous clinical improvement through nursing research.	30 June 2015		
	4. Promote the NMOQ as the Queensland Government's principal advisor on all professional nursing and midwifery issues across Queensland, nationally and internationally.	Ongoing				

Definitions

Consumer	Consumers are people/patients who use, or are potential users of, health services, including their family and carers.
Hospital in the Home	Involves the provision of acute care at a patient's usual place of residence as a substitute for inpatient care at a hospital.
Models of care	A model of care outlines best practice patient care delivery through the application of a set of service principles across identified clinical streams and patient flow continuums. An overarching design or description of how care is managed and organised within the system.
Nurse	For the purpose of this strategy, nurse refers to the registered nurse, including the nurse practitioner, registered under the <i>Health Practitioner Regulation National Law Act (2009)</i> .
Nurse practitioner	A registered nurse educated and authorised to function autonomously and collaboratively in an advanced and extended clinical role. The nurse practitioner role includes assessment and management of clients using nursing knowledge and skills and may include, but is not limited to, the direct referral of patients to other healthcare professionals, prescribing medications and ordering diagnostic investigations.

Abbreviations

ACN	Australian College of Nursing
AHMAC	Australian Health Ministers' Advisory Council
CARU	Clinical Access and Redesign Unit, Department of Health
CEs	Chief Executives
CKN	Clinicians Knowledge Network
DDG	Deputy Director-General
DoH	Department of Health, Commonwealth Government
DHS	Department of Human Services, Commonwealth Government
DPC	Department of the Premier and Cabinet
EMT	Executive Management Team, Department of Health
HHBs	Hospital and Health Boards
HHSs	Hospital and Health Services
HiTH	Hospital in the Home
HRS	Human Resource Services, Employee Relations Unit, Department of Health
HSIA	Health Service Information Agency, Department of Health
HSCEs	Health Service Chief Executives
HSCI	Health Service and Clinical Innovation, Department of Health
HWPC	Health Workforce Principal Committee
IR	Industrial Relations, Human Resource Services, Department of Health
IT	Information Technology
MBS	Medicare Benefits Schedule
NLCs	Nurse-led clinics
NMBA	Nursing and Midwifery Board of Australia
NMOQ	Nursing and Midwifery Office Queensland, Department of Health
NSI	Nurse Sensitive Indicators
OQPC	Office of the Queensland Parliamentary Counsel
PBS	Pharmaceutical Benefits Scheme
RIU	Regulatory Instruments Unit, Department of Health
SCOH	Standing Council on Health
SSS	System Support Services, Department of Health
SPP	System Policy and Performance, Department of Health
QTC	Queensland Treasury Corporation

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