

**AN ADDRESS BY THE HONOURABLE PETER UNDERWOOD AC,
GOVERNOR OF TASMANIA TO OPEN THE 8TH CONFERENCE OF
THE AUSTRALIAN COLLEGE OF NURSE PRACTITIONERS,
HOTEL GRAND CHANCELLOR,**

WEDNESDAY 25TH SEPTEMBER 2013

Good morning everybody. I hope that those of you who were at Government House last night enjoyed the reception. For those of you who were not able to attend last night's reception, may I repeat the welcome that I expressed last night to all the delegates and partners who are here in this beautiful city for the 8th National Conference of the Australian College of Nurse Practitioners. As I noted last night, as well as Nurse Practitioners and partners from all parts of Australia, we welcome to Hobart the distinguished key note speaker, Dr Lynn Price from America. We also extend a special welcome to the smattering of delegates from New Zealand, as well as the delegates who have come here all the way from Africa, one from the Republic of Cameroon and the other from next door, Nigeria. I do hope that our visitors to Tasmania will be able to find a little time to look around our island while they are here because it is always particularly beautiful in the Spring-time.

Now, I have a friend who is a General Practitioner. He works in Outback Australia with a number of Nurse Practitioners. He loves the Outback because it enables him to enjoy his real passion - hot air ballooning. I recall him telling me about an early morning flight he took that nearly came to disaster. Apparently he set off in a clear blue sky but it wasn't long before the clouds came down and he lost his bearings. So, he lowered the balloon through the clouds until the ground appeared below him. He noticed to his relief that he was floating over a wide dusty plain and, as luck would have, there was a woman walking along

a pathway just beneath him. So he called out to her, "Excuse me, can you tell me where I am?"

The woman below looked up and said, "Yes, you're in a hot air balloon, hovering 15 metres above a paddock."

"Oh, you must be a Nurse Practitioner," said my friend.

"Well", said the woman, "As a matter of fact I am, but how did you know?"

"Well," my friend shouted, "everything you have told me is technically correct, but it's of no use to anyone."

The Nurse Practitioner looked up and promptly replied, "Then you must be a General Practitioner."

"How on earth did you know that?" my friend asked.

"Well," said the nurse practitioner, "You don't know where you are, or where you're going, but you expect me to be able to help. You're in the same position you were in before we met, but now it's all my fault."

But seriously, one of the best things about being Governor is that I get to learn something new every day and I am constantly meeting new and interesting people. But I have to confess to you that although I had heard about nurse practitioners, I don't think I had met one until last night and I really didn't know anything about them until I did a bit of research for this morning's opening. The first thing I discovered was that, although a number of countries including the United States, Canada and the United Kingdom have had nurse practitioners for up to 40 years, you didn't exist in this country until 28th and 29th October 2005, when Ms Sue Denison and Ms Jane O'Connell - who I think is with us

this morning - became the first Australian nurse practitioners. What I did learn was that the profession of nurse practitioners has come a long way in the last 8 years, but I suspect that there is no clear wide-spread understanding and appreciation of the nature and importance of the nurse practitioner's role in providing the health care that Australians demand that their government provides for them.

According to my information, there are now 843 registered nurse practitioners in Australia all, or most of whom, hold an advanced degree – either a Master's or PhD. It seems to me that nothing but good can be achieved from pumping all that expert skill and knowledge into Australia's health care system, especially in remote areas where doctors are hard to come by as well as in city clinics where an appointment with a doctor is hard to come by.

As might be expected, I read that in the beginning - now just over a decade ago - notwithstanding the success of nurse practitioners in comparable countries, there was resistance here in Australia to the introduction of nurse practitioners. I read of allegations of "third world health care"; that some medical practitioners were refusing to work with nurse practitioners; that organised medicine was opposed to nurse practitioners and so on.¹ Isn't resistance the first product of any change, regardless of the degree of change and regardless of the field in which change is sought? However, in the case of nurse practitioners, the forces of resistance suffered a blow in November 2010 when the patient-cost of the work of nurse practitioners working in private practice and in collaboration with a medical practitioner became eligible for a Medicare

¹<http://blogs.crikey.com.au/croakey/2010/11/26/what-do-australians-think-of-nurse-practitioners/> accessed 16th September 2013.

refund. This move enhanced the public's respect for the work of the nurse practitioner and opened the doors wide for that work to be done where it was most badly needed: in the primary health care setting. As Nurse Practitioner Clinics Australia writes, [quote] "The dawn of Medicare changes and access to prescribing rights has improved the scope of Nurse Practitioners allowing them to begin operating in an autonomous primary health care role. The public perception of Nurse Practitioners is rapidly growing as more people experience the professional role in Emergency Departments, Regional centres and community services."² [end quote]

Professor Rhian Parker et al's study conducted between July 2010 and February 2011 entitled "How acceptable are primary health care nurse practitioners to Australian Consumers"³ was only a small one, conducted in four States and the ACT, but it clearly showed that there was widespread ignorance about the professional role of a nurse practitioner. The report states,⁴ [quote] "There was confusion around the role delineation between nurse practitioners and other types of health care professional. The most problematic for participants were those between nurse practitioners and other nurses as well as between nurse practitioners and GPs." [end quote] For me, two interesting outcomes of the study were firstly, that the title "nurse practitioner" carried with it the goodwill that has always attached to the word "nurse" - viz, a caring, kind person who listens and cares holistically for the physical and emotional state of the patient - that's the good news -

²http://www.npclinics.com.au/index.php?option=com_content&view=article&id=6&Itemid=146 accessed 16th September 2013

³ <http://www.sciencedirect.com/science/article/pii/S1322769612000297> accessed 16th September 2013

⁴ Supra at page 37

but secondly, that there was still the perception that if the condition is really serious the general practitioner is best.

One of the participants put it this way;⁵

“I guess the thing that I’m thinking is that when we talk about a registered nurse or we talk about a doctor, we talk about a traditional hierarchical situation where we assume the doctor has the responsibility and the nurse answers to the doctor. I guess I see the nurse practitioner as reframing the concept and it’s about equal but different. So I’m interested in knowing more about [what] I don’t know about, what the specialist training is that a nurse practitioner does and what responsibilities they would have. ...”

After reaching that conclusion the study reports; “... the addition of nurse practitioners to the primary health care workforce is unlikely to be acceptable to consumers as a substitution for GPs” and suggests that further study has merit.

Well, as I say, your profession has come a long way in a little more than 10 years and there is no doubt that there exists a real demand for the services that are in fact provided by nurse practitioners in many areas of health care, especially the primary health care sector. But I venture to suggest that, while your profession has no problem with how nurse practitioners are trained nor how they practice their profession, there does exist a perception problem in the community. I well recall when I was the Chair of a local private school board here in Hobart, being told that the important thing is not whether the school is the best

⁵ Supra at page 39.

school in Australia, but whether it is perceived to be the best in Australia, for no matter how good or how bad it *actually* is, it will be treated in accordance with the *public perception* of how good or bad it is. Professor Parker's study makes it clear that that applies to your profession.

If you think that there is anything in that thought, perhaps you should consider consulting with those who are skilled in creating perceptions? Now that the election is over there should be quite a few of those people around! For example, the word 'nurse' carries with it an outdated perception. The word 'doctor' carries with it a perception that he or she is better trained and better qualified than the nurse – regardless of whatever kind of nurse he or she may be, and regardless of whatever diagnosis or treatment is called for. Now, I readily admit that this is not my area, for my background is the law, but it occurs to me that these days the word 'practitioner' is not a word in common daily use and therefore might be partly responsible for the confusion reported in the Professor's report. It also occurs to me that the title nurse practitioner is an uncomfortable expression in the English language whereas practitioner nurse is much more comfortable – except that I expect the medical practitioners may have something about that change. I also note that these days the expression "front-line" has become popular. It's an expression that creates a perception of skill, courage, action and knowledge. We hear about police officers, fire fighters, and the like as being called 'front-line personnel'. Perhaps even a change of title from 'nurse practitioner' to something else that accurately describes your professional skills and duties – maybe – dare I suggest, perhaps even to something like "front line health care professionals"?

But it's well past the time I should have stopped lecturing you about things that you know so much more about than me. But I do wish you all well for this 8th conference. I thank each of you for the major contribution you have made to the delivery of good health care in this country and I hope you go home from the conference refreshed, invigorated and ready to work to ensure that your new profession is perceived as it should be perceived.