

13 Practice nurse activity

This section describes the activities of practice nurses recorded in association with the GP-patient encounters recorded by the GPs in BEACH.

In November 2004 four Medicare item numbers were introduced into the MBS that allowed GPs to claim for specified tasks undertaken by a practice nurse under the direction of the GP. The recording form for the 2005–06 BEACH year was amended to allow the capture of this information. The changes in the form, and the methods of reporting, are described in Chapter 2. In summary:

- (a) GPs were allowed to record multiple (up to three) Medicare item numbers where appropriate, rather than be limited to one item number
- (b) in the 'other treatments' section, for each problem managed, GPs were asked to tick the 'practice nurse' box if the treatment recorded was provided by the practice nurse rather than by the GP. If the box was not ticked it was assumed that the GP gave the 'other treatment'.

The survey form allowed GPs to record up to two other treatments for each problem managed at the encounter. Other treatments include all clinical and procedural treatments provided at the encounters. These groups are defined in Appendix 4, <www.aihw.gov.au/publications/index.cfm/subject/19>.

In November 2006 two additional Medicare item numbers were added for practice nurse services. The six items available during the 2006–07 BEACH data period are listed with a short description in Table 13.1.⁶⁷ Note that items 10994 and 10995 (introduced in November 2006) were only available to BEACH 2006–07 participants between November 2006 and March 2007 inclusive. There were also concurrent changes to items 10998 and 10999 when they were broadened from use in rural areas only to use in all areas.⁶⁷ This change also only applied to 5 months of the BEACH 2006–07 data period.

This section investigates:

- the distribution of the Medicare items claimed for practice nurses (the total number of these items was reported as one group in Table 5.5)
- treatments provided by practice nurses in association with the GP-recorded encounters
- problems for which the practice nurse provided the treatment in direct association with the GP-recorded encounters.

In Chapter 10, all treatments (other than medications) recorded by the GPs were reported, irrespective of whether they were provided by the GP or by a practice nurse. As in previous years, 'injections' recorded in the provision of immunisations and vaccinations were not included, as these are already counted as pharmacological management. In contrast, this section, being a description of practice nurse activity, reports only the activities ticked as being conducted by a practice nurse and includes the injections for immunisation/vaccination that were not counted in Chapter 10. GPs are also instructed not to record their taking of routine clinical measurements, such as blood pressure. However, where the practice nurse undertook these activities at the consultation and it was recorded as a practice nurse activity, they have been included in the analysis in this chapter.

When viewing these results, it must be remembered that these 'practice nurse' data will not include activities undertaken by the practice nurse during the GP's BEACH recording period

that were outside (not associated with) the recorded encounter. Such activities could include Medicare-claimable activities (for example immunisations/vaccinations) provided under instruction from the GP but not at the time of the encounter recorded in BEACH, or provision of other services not currently claimable from Medicare (for example dietary advice on a one-to-one basis, or in a group situation).

13.1 Annual results, 2006–07

Practice nurse Medicare claims versus practice nurse activity

Practice nurses were involved in 4,710 GP–patient encounters, assisting in the management of 4,922 problems. However, only 1,835 practice nurse item numbers were recorded as claimable from Medicare and practice nurse items accounted for 1.9% of all Medicare items recorded in 2006–07 (Table 5.5). At two-thirds (62.5%) of encounters at which the practice nurse performed a clinical or procedural activity, no practice nurse item number was recorded as claimable (results not tabled).

Distribution of practice nurse item numbers claimed at encounters

GPs recorded 1,835 practice nurse item numbers at 1,823 encounters (Table 5.5). Almost all the practice nurse item numbers recorded for the BEACH encounters were for immunisations/vaccinations (66.8%) and wound treatments (32.6%). Items claimed for practice nurse conduct of cervical smears and/or preventive checks were very few ($n = 11$ in total), accounting for less than 1% of all recorded practice nurse item numbers (Table 13.1).

Table 13.1: Distribution of practice nurse item numbers recorded at encounter, 2006–07

Medicare item number	Short descriptor	Number	Per cent of total
10993	Immunisation	1,227	66.8
10994 ^(a)	Cervical smear and preventive checks	4	0.2
10995 ^(a)	Cervical smear and preventive checks—women 20–69 years, no smear in past 4 years	1	0.1
10996	Wound treatment (other than normal aftercare)	598	32.6
10998 ^(b)	Cervical smear	2	0.1
10999 ^(b)	Cervical smear—women 20–69 years, no smear in past 4 years	4	0.2
Total	All Medicare practice nurse item numbers	1,835	100.0

(a) Item number introduced in November 2006.

(b) Item numbers introduced in November 2004 but broadened in 2006, so they are now not limited to services in rural areas.

Treatments provided by practice nurses

There were 41,011 other treatments recorded by the GP that were reported in Chapter 10. There were a further 3,038 injections given in the provision of immunisation (not reported in Chapter 10). In total there were 44,049 other treatments recorded.

At least one practice nurse activity was recorded at 4,710 encounters—5.1% of all encounters. They were involved in the management of 4,922 problems (3.6% of all problems managed by the participating GPs). Total other treatments given by practice nurses numbered 5,191 representing 11.8% of all other treatments recorded at BEACH encounters. The majority (91.9%) of the practice nurse activity was procedural in nature. These procedures

represented more than a quarter (28.1%) of all procedures recorded. In contrast, the practice nurse undertook less than 2% of all clinical treatments recorded (Table 13.2).

Table 13.2: Summary of treatments given by practice nurse, 2006–07

Treatment	Performed by the practice nurse		Performed by the GP		Total number recorded ^(a)
	Number	Per cent of total	Number	Per cent of total	
Procedural treatments ^(a)	4,773	28.1	12,192	71.9	16,965
Clinical treatments	418	1.5	26,666	98.5	27,084
All other treatments	5,191	11.8	38,858	88.2	44,049

(a) Procedural treatments here include all injections given by practice nurses in provision of immunisations/vaccinations ($n = 3,038$). These are not included in the summary of the content of encounter in Table 5.1, summary of management in Table 8.1 or in the analyses of other treatments in Chapter 10 because the immunisation/vaccination is already counted as a prescription or GP-supplied medication.

As previously stated, procedures made up the vast majority of the practice nurse activity. Of the 5,191 procedures recorded, 36.8% were injections (which were mainly for immunisations/vaccinations) and a further 22.1% were dressing/pressure/compression/tamponade. Together these accounted for more than half of all procedures undertaken by practice nurses. Incision/drainage/aspirations made up 8.7%, and repair/fixations 5.9% of procedures done by the nurse. Practice nurses also undertook a wide range of other procedural activities in association with the GP encounters. The most common are listed in Table 13.3.

Clinical treatments (such as advice and counselling) accounted for only 9% of the practice nurse activity. General advice/education was most commonly recorded, accounting for 16.8% of the clinical treatments provided by the nurse, followed by counselling about nutrition/weight (13.0%), other administrative and documentation work (13.0%), advice about treatment (10.1%) or counselling about the problem (9.3%).

Table 13.3: Most frequent treatments provided by practice nurses, 2006–07

Treatment	Number	Per cent of group ^(a)	Rate per 100 encls involving practice nurse ($n = 4,710$) ^(a)	95% LCL	95% UCL
Procedural treatments	4,773	100.0	101.3	99.2	103.5
Local injection/infiltration*	1,757	36.8	37.3	33.0	41.6
Dressing/pressure/compression/tamponade*	1,053	22.1	22.4	19.8	24.9
Incision/drainage/flushing/aspiration/removal body fluid*	416	8.7	8.8	6.7	11.0
Repair/fixation-suture/cast/prosthetic device (apply/remove)*	281	5.9	6.0	5.0	7.0
Excision/removal issue/biopsy/destruction/debride/cauterise*	267	5.6	5.7	4.2	7.2
Electrical tracings*	210	4.4	4.5	3.7	5.2
Physical function test*	200	4.2	4.3	2.8	5.7
Check-up—practice nurse*	186	3.9	4.0	2.3	5.6
INR test	84	1.8	1.8	1.0	2.6
Other diagnostic procedures*	66	1.4	1.4	0.0	2.9
Urine test*	65	1.4	1.4	0.8	2.0
Other therapeutic procedures/surgery NEC*	48	1.0	1.0	0.7	1.4

(continued)

Table 13.3 (continued): Most frequent treatments provided by practice nurses, 2006–07

Treatment	Number	Per cent of group ^(a)	Rate per 100 encls involving practice nurse (n = 4,710) ^(a)	95% LCL	95% UCL
Clinical treatments	418	100.0	8.9	5.6	12.1
Advice/education*	70	16.8	1.5	0.6	2.4
Counselling/advice—nutrition/weight*	54	13.0	1.2	0.2	2.1
Other admin/document*	54	13.0	1.1	0.7	1.6
Advice/education—treatment*	42	10.1	0.9	0.5	1.3
Counselling—problem*	39	9.3	0.8	0.3	1.3
Total other treatments	5,191	—	110.2	107.7	112.8

(a) Figures do not total 100 as more than one treatment can be performed by a practice nurse at each encounter and only those individual treatment accounting for >= 0.5% of total treatments by practice nurse are included.

* Includes multiple ICPC-2 or ICPC-2 PLUS codes (see Appendix 4, <www.aihw.gov.au/publications/index.cfm>).

Note: Encls—encounters; LCL—lower confidence limit; UCL—upper confidence limit; NEC—not elsewhere classified.

Problems managed with practice nurse involvement

The problems managed most often with the assistance of a practice nurse at the consultation were immunisation/vaccination (29.5% of all problems managed with the involvement of a practice nurse), followed by laceration/cut (5.9%) and chronic skin ulcer (5.7%) (Table 13.4).

Table 13.4: The most common problems managed with the involvement of practice nurse, 2006–07

Problem managed	Number	Per cent of problems involving practice nurse (n = 4,922)	Rate per 100 encls involving practice nurse ^(a) (n = 4,710)	95% LCL	95% UCL
Immunisation/vaccination—all*	1,450	29.5	30.8	26.5	35.0
Laceration/cut	292	5.9	6.2	5.2	7.2
Chronic ulcer skin (incl varicose ulcer)	282	5.7	6.0	4.9	7.1
General check-up*	144	2.9	3.1	2.2	3.9
Excessive ear wax	142	2.9	3.0	2.4	3.6
Malignant neoplasm skin	139	2.8	2.9	2.1	3.8
Diabetes—all*	117	2.4	2.5	1.8	3.1
Asthma	108	2.2	2.3	1.6	3.0
Skin infection, post-traumatic	82	1.7	1.7	1.2	2.2
Hypertension*	76	1.5	1.6	1.0	2.2
Atrial fibrillation/flutter	65	1.3	1.4	0.8	2.0
Skin symptom/complaint	59	1.2	1.2	0.8	1.7
Burns/scalds	58	1.2	1.2	0.8	1.7
Repair/fixate-suture/cast/prosthetic device (apply/remove)	55	1.1	1.2	0.7	1.6
Fracture*	49	1.0	1.0	0.6	1.5
Total problems	4,922	100.0	104.5	103.3	105.8

(a) Rate of nurse provision of treatment for selected problem per 100 total encounters.

* Includes multiple ICPC-2 or ICPC-2 PLUS codes (see Appendix 4, <www.aihw.gov.au/publications/index.cfm>).

Note: Encls—encounters; LCL—lower confidence limit; UCL—upper confidence limit.

Discussion

These results suggest that many GPs have utilised practice nurses for provision of immunisations/vaccinations and, to a lesser degree, for dressings. However, they also suggest very little utilisation of the cervical smear/preventive check practice nurse item numbers.

If we extrapolate the 1,823 encounters at which a practice nurse item number was recorded as claimable (making up 2.3% of Medicare-claimable encounters in BEACH) (see Table 5.5) to the 103 million general practice Medicare items claimed through Medicare,²⁶ we estimate that about 2.3 million claims were made from Medicare for practice nurse services associated with the GP consultations. The MBS claims data for practice nurse item numbers for the 2006–07 financial year show there were 3.66 million practice nurse claims for that period.²⁶ This suggests that a further 1.3 million (approximately) such services were provided and claimed for practice nurse activities conducted independently of direct GP–patient consultations. The MBS data suggests that 59% of the claims were for immunisation/vaccinations (item 10993), 40% were for wound dressings (item 10996) and only 1% were for the cervical smear/preventive check items (10994, 10995, 10998, 10999). This compares with BEACH data of 67% being for immunisations/vaccinations, 33% for wound dressings and 0.6% well cervical smear/preventive check items. This suggests that more of the wound management and cervical smear/preventive checks are being done (and claimed for) through direct appointments with the practice nurse, as directed by the GP.

Last year (2005–06) the research team suggested that the low uptake of practice nurse items covering cervical smears may have been partly due to the geographic limitations placed on these item numbers at that time, and on the difficulty of separating the cervical smear from the total clinical activity of a well woman check. These checks often involve (in addition to a cervical smear) a pelvic examination and a breast check, and may also involve discussion of sexual issues and contraception, which in turn may result in prescription of medication. Practice nurses cannot prescribe medication.

The geographic limitations and the broadening of the cervical smear item numbers in November 2006 removed some of these limitations. However, in the 5 months November 2006 – March 2007 covered in this BEACH data year, there has been no apparent change in uptake rate. It will be interesting to see the results in the next full BEACH year, 2007–08.

Comparison of the services provided by practice nurses (Table 13.3) with the common problems for which these services were provided (Table 13.4) suggests that about 82% of the local injections/infiltrations recorded for practice nurses were given for immunisation/vaccinations and about 18% were for other types of injections and therefore not eligible to be claimed through Medicare. Table 13.1 suggests that only 1,227 (70%) of the estimated 1,450 immunisations/vaccinations recorded for practice nurses were actually claimed through Medicare. Table 13.3 shows that nurses dealt with 1,053 dressing/pressure/compression/tamponades in conjunction with the GP encounter, but only 598 claims were made for Medicare payment for wound treatment (Table 13.1). This suggests that about 53% of the work recorded for practice nurses was claimable under Medicare. Some of the dressings may be follow-up encounters where the follow-up treatment (aftercare) is included in the initial Medicare claim (claimed in the past), and may therefore not be claimable for the practice nurse.

13.2 Changes over time

Practice nurse Medicare item numbers were only introduced in November 2004. Space for GPs to record these was provided on BEACH encounter forms from April 2005. Therefore there are only 2 years of data from BEACH which can be compared in this area.

Table 13.5 provides the comparative results. There has been a significant increase in the rate at which practice nurse activities were provided in conjunction with the GP consultation, from 4.2 to 5.7 per 100 encounters. This increase was apparent in the rates of both procedures and provision of clinical treatments.

Table 13.5: Practice nurse item numbers claimable at GP-patient encounters, 2005–06 and 2006–07

Treatment	2005–06	2006–07
	Rate per 100 encounters ^(a) (95% CI) (n = 101,993)	Rate per 100 encounters ^(a) (95% CI) (n = 91,805)
Procedural treatments	4.0 (3.5–4.5)	5.2 (4.6–5.8)
Local injection/infiltration*	1.6 (1.3–1.9)	1.9 (1.6–2.2)
Dressing/pressure/compression/tamponade*	0.9 (0.8–1.1)	1.1 (1.0–1.3)
Incision/drainage/flushing/aspiration/removal body fluid*	0.3 (0.2–0.4)	0.5 (0.3–0.6)
Repair/fixation-suture/cast/prosthetic device (apply/remove)*	0.3 (0.2–0.3)	0.3 (0.2–0.4)
Excision/removal tissue/biopsy/destruction/debridement/cauterisation*	0.3 (0.2–0.4)	0.3 (0.2–0.4)
Electrical tracings*	0.2 (0.2–0.3)	0.2 (0.2–0.3)
Physical function test*	0.2 (0.1–0.2)	0.2 (0.1–0.3)
Check-up—practice nurse*	NAv	0.2 (0.1–0.3)
INR test	NAv	0.1 (0.0–0.1)
Other diagnostic procedures*	0.0 (0.0–0.1)	0.1 (0.0–0.1)
Urine test*	0.1 (0.0–0.1)	0.1 (0.0–0.1)
Other therapeutic procedures/surgery NEC*	0.0 (0.0–0.1)	0.1 (0.0–0.1)
Clinical treatments	0.2 (0.1–0.3)	0.4 (0.3–0.6)
Advice/education*	0.0 (0.0–0.1)	0.1 (0.0–0.1)
Counselling/advice—nutrition/weight*	0.0 (0.0–0.0)	0.1 (0.0–0.1)
Other admin/document*	0.0 (0.0–0.0)	0.1 (0.0–0.1)
Advice/education—treatment*	0.0 (0.0–0.0)	0.0 (0.0–0.1)
Counselling—problem*	0.0 (0.0–0.1)	0.0 (0.0–0.1)
Total other treatments	4.2 (3.7–4.8)	5.7 (4.9–6.4)

(a) Figures do not total 100 as more than one treatment can be performed by a practice nurse at each encounter and only those individual treatment accounting for $\geq 0.5\%$ of total treatments by practice nurse are included.

* Includes multiple ICPC-2 or ICPC-2 PLUS codes (see Appendix 4, <www.aihw.gov.au/publications/index.cfm>).

Note: CI—confidence interval; NEC—not elsewhere classified; NAv—not available.