



## **Submission to the Department of Health and Aged Care on the Draft Nursing Workforce Strategy**

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**Submitted by: Hepatitis Australia Inc.**

Hepatitis Australia, incorporated in 1997, is the peak community organisation to progress national action on issues of importance to people affected by hepatitis B and hepatitis C. Our mission is to provide leadership and advocacy on viral hepatitis and support partnerships for action to ensure the needs of Australians affected by, or at risk of viral hepatitis, are met. Our members consist of the eight state and territory community hepatitis organisations. Our vision is to see an end to viral hepatitis in Australia. For more information please visit our website <https://www.hepatitisaustralia.com/> .

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## **Enhancing the National Nursing Workforce Strategy to Address the Elimination of Hepatitis B and Hepatitis C**

### **Introduction**

Hepatitis Australia thanks the Department of Health and Aged Care for the opportunity to make a submission on the *Draft National Nursing Workforce Strategy*.

Nurses are the backbone of our healthcare system, providing essential care and support to people through their health care journey. Their dedication, compassion, and expertise are invaluable in delivering high-quality care and improving health outcomes. We extend our sincere gratitude to nurses across Australia for their tireless efforts and unwavering commitment to the health and well-being of people and communities.

The *Draft National Nursing Workforce Strategy* provides a comprehensive framework for addressing the challenges and opportunities facing the nursing profession in Australia. While the draft strategy acknowledges the importance of specific health area strategies, such as mental health and chronic disease, it is imperative to explicitly recognise the critical role of nurses in achieving the elimination of hepatitis B and hepatitis C.

This submission proposes that the strategy be further refined to incorporate a dedicated focus on hepatitis B and hepatitis C elimination, leveraging the unique strengths and capabilities of the nursing workforce.

### **Background**

In 2022 it was estimated that 279,949 people combined were living in Australia with hepatitis B and hepatitis C.

**Hepatitis B** is a vaccine-preventable but potentially life-threatening bloodborne viral infection that primarily affects the liver. There is as-yet no cure but highly effective treatments when indicated can stop the advancement of liver disease and reduce liver cancer. In 2022 it was estimated that 205,549 people were living in Australia with hepatitis B.

**Hepatitis C** is a preventable but potentially life-threatening virus transmitted through blood-to-blood contact. It can be cured with direct-acting antiviral medicines but as-yet there is no vaccine. People with advanced liver disease can remain at risk of liver cancer even if cured for hepatitis C. In 2022 it was estimated that 74,400 people were living in Australia with hepatitis C.

All people living with hepatitis C should be treated and cured, and all people living with hepatitis B require lifelong monitoring and treatment when clinically indicated.

To this end, progress nationally is suboptimal. Decentralisation of care (transitioning from specialist-centric models in tertiary settings to approaches utilising greater involvement from primary care and in community settings) is recognised nationally and globally as the way forward.

The nursing workforce is making an important contribution already and that will need to expand if Australia is to meet elimination goals and targets.

## **The goal of eliminating hepatitis B and hepatitis C by 2030**

Australia has set ambitious goals to eliminate hepatitis B and hepatitis C as public health threats by 2030.

To achieve this, Australia has implemented comprehensive national strategies that outline a framework for action. These strategies emphasise the importance of coordinated and multidisciplinary approaches involving various healthcare professionals, including GPs, nurses, and peer workers.

It is fair to say that Australia has made some progress towards the goals of the *Third National Hepatitis B Strategy 2018–2022* and *Fifth National Hepatitis B Strategy 2018–2022* however efforts are required. The targets from them are not met (based on 2020 data) and none of the targets were fully achieved.

The national strategies are currently being updated for the 2024-2030 period.

The draft strategies recognise the role of the nursing workforce and recommend exploring opportunities to increase capacity of nursing and pharmacy workforces to provide hepatitis B and hepatitis C prevention, testing, treatment and care; as well as a national hepatitis multidisciplinary workforce development plan to build capability and capacity.

Primary care settings including the nursing workforce play a crucial role in hepatitis elimination by providing essential services including education, prevention, screening, , liver health assessment, treatment, care and referring peoples to other services and for specialist care as required.

Nurses play this pivotal and increasing role in the prevention, treatment and management of hepatitis B and hepatitis C, providing essential care and support to people across all stages of disease. Their expertise and compassion are invaluable in ensuring optimal outcomes.

Key responsibilities of nurses in the management of hepatitis B and hepatitis C include:

- **Health Literacy:** Nurses provide comprehensive education to improve health literacy about hepatitis B and hepatitis C, including causes, symptoms,

transmission risks, and treatment options. They explain the importance of prevention, testing, adherence to treatment regimens, potential side effects, and lifestyle modifications.

- **Assessment and monitoring:** Nurses conduct regular assessments to monitor symptoms, vital signs, and laboratory results. They track disease progression, evaluate treatment response, and identify any complications or adverse effects.
- **Medication administration:** Nurses administer (and can prescribe, in the case of nurse practitioners) antiviral medications and other treatments as prescribed by healthcare practitioners. They help ensure accurate dosing, monitor for side effects, and educate people about treatment compliance.
- **Support and counselling:** Nurses provide emotional support and counselling to people and their families, helping them to cope with the challenges of living with hepatitis B and hepatitis C. They help address concerns about stigma, discrimination, and health impacts on daily life.
- **Linkage to care:** Nurses assist in connecting people affected by hepatitis with specialised hepatitis care providers, social workers, community organisations and peer-based support. They help to coordinate care and ensure continuity of treatment.
- **Disease management:** Nurses help people manage hepatitis B and hepatitis C by providing guidance on lifestyle modifications, such as dietary changes, exercise, use of alcohol, and stress management. They also provide education about the importance of regular follow-up care and screening for other health conditions.
- **Advocacy:** Nurses advocate for the rights of consumers and access to quality care. They work with healthcare providers, policymakers, and community organisations to promote awareness of hepatitis B and hepatitis C, and improve treatment outcomes.

Analysis by Li et al<sup>1</sup> of 16 studies identified 13 nursing roles that primarily involved (1) health education and counselling to support people to make informed decisions regarding hepatitis B prevention, vaccination, screening, and disease monitoring; (2) case management and health promotion to advocate elimination services at multiple levels and enable equitable access among marginalised communities; and (3) running specialist clinics to lead advanced practices in prescribing and carrying diagnostic tests, formulating evidence-based individualised care plans, and coordinating care throughout the disease process.

Li found that:

*“Elimination of hepatitis B faces enormous challenges, from prevention to diagnosis, treatment, and long-term monitoring. Nurses are pivotal in optimising*

*the hepatitis B care continuum; however, their contributions have been neglected.”*

*“Nurses play multifaceted roles in advocating hepatitis B screening and vaccination, initiating outreach efforts in marginalised communities, and leading advanced practices that effectively contribute to the elimination of hepatitis B. Policymakers should consider how nurses may help the achievement of the elimination target.”*

Integrating hepatitis B and hepatitis C services into primary care has been shown to improve access to care and reduce transmission.

## **The Nursing Workforce and Viral Hepatitis Elimination**

Nurses are integral to the delivery of hepatitis B and hepatitis C prevention, diagnosis, treatment, and care services.

Their expertise in primary care, public health, and health literacy capacity-building makes them ideal for implementing effective interventions to reduce transmission and improve outcomes for people affected by hepatitis.

Specific aspects of the draft strategy relevant to where nurses can significantly contribute to the elimination of hepatitis B and hepatitis C include:

- **Primary Prevention:**
  - Providing education and counselling on risk factors, prevention strategies, and vaccination for hepatitis B (and other conditions).
  - Conducting screening programs in high-risk populations.
  - Promoting safer injecting practices among people who inject drugs.
- **Diagnosis and Treatment:**
  - Identifying people at risk and offering or referring for testing.
  - Supporting peoples throughout the diagnostic and treatment process.
  - Managing side effects and monitoring treatment outcomes.
- **Care and Support:**
  - Providing psychosocial support to people living with hepatitis B and people living with hepatitis C.
  - Assisting with linkage to care and treatment services.
  - Advocating for policies and programs that improve access to care.

## **Recommendations for consideration**

To ensure that the nursing workforce is optimally equipped to contribute to the elimination of hepatitis B and hepatitis C, the following suggestions are proposed in relation to specific elements of the terms and reference.

### Actions 1.1 (Invest in nurse leadership)

### and 1.2 (Grow Aboriginal and Torres Strait Islander nurse leadership):

## **Recommendation 1: Recognition of Specific Hepatitis B and Hepatitis C Elimination Objectives:**

Australia's national strategies on hepatitis B and hepatitis C include the goals of eliminating hepatitis B and hepatitis C as public health threats by 2030.

Hepatitis Australia concurs that *"Nurses provide leadership in a variety of ways as an inherent part of their role. Nurses collaborate with other health professionals as part of multidisciplinary teams resulting in improved outcomes. Leadership in nursing cultivates relationships and healthy, respectful work environments."* (Priority 1: Value, page 5).

The work to be undertaken by multidisciplinary teams are crucial to working towards the elimination of hepatitis B and hepatitis C. We believe nurses can be better supported in that role through ensuring nursing education includes recognition of the elimination goal.

Explicit recognition of the elimination goal will assist nurses in using their professional knowledge and experience in the following activities:

- Reducing hepatitis B and hepatitis C transmission rates.
- Increasing the number of people diagnosed and linked to care.
- Improving treatment outcomes for people living with hepatitis B and hepatitis C.

By investing in nurse leadership and growing Aboriginal and Torres Strait Islander nurse leadership, we can significantly contribute to achieving Australia's national goals of eliminating hepatitis B and hepatitis C as public health threats by 2030. Nurses play a vital role in leading multidisciplinary teams and implementing effective prevention and treatment strategies. Explicitly recognizing the elimination goal in nursing education will empower nurses to leverage their professional knowledge and experience to reduce transmission, increase diagnosis and linkage to care, and improve treatment outcomes for people living with hepatitis B and hepatitis C. By taking action on these recommendations, we can strengthen the nursing workforce and accelerate progress towards eliminating hepatitis.

Action 2.4 (Investigate and implement the most contemporary structure of pre-registration education).

## **Recommendation 2: Targeted Workforce Development**

Hepatitis Australia concurs that *“Nursing education must be evidence-based and fit-for-purpose to ensure that pre and post registration students are receiving high-quality education. Students should be supported to access, and safely and successfully complete, their education in a way that meets their needs and supports their wellbeing”* (Priority 1: Value, page 7)

Nursing education plays a crucial role in equipping healthcare professionals with the knowledge and skills necessary for effective hepatitis B and hepatitis C prevention, diagnosis, and treatment. To ensure that nurses are well-prepared to address the challenges of hepatitis B and hepatitis C, we would suggest that any review and update of the pre-registration education curriculum should include a renewed focus on hepatitis B and hepatitis C.

Hepatitis Australia recommends investment in targeted training and education programs to equip nurses with the knowledge and skills necessary for effective hepatitis B and hepatitis C prevention, diagnosis, and treatment. This includes:

- Incorporating specialised hepatitis B and hepatitis C curricula for nursing students and continuing education programs.
- Providing training on evidence-based interventions, such as harm reduction strategies and antiviral therapy.
- Fostering partnerships between nursing schools and state and territory hepatitis organisations to promote awareness and capacity building.

By investing in targeted workforce development and ensuring that nursing education is evidence-based and fit-for-purpose, we can equip nurses with the knowledge and skills necessary to play a crucial role in hepatitis B and hepatitis C elimination. A renewed focus on hepatitis B and hepatitis C in pre-registration education, coupled with specialised training and education programs, will enable nurses to provide effective prevention, diagnosis, and treatment services to people affected by hepatitis B and hepatitis C. By implementing this recommendation, we can strengthen the nursing workforce and improve the health outcomes of people affected by hepatitis in Australia.

Actions 3.2 (Grow nurse leadership and involvement in the design and delivery of innovative models of care)

and 3.3 (Empower Aboriginal and Torres Strait Islander nursing communities to design workforce initiatives that suit local conditions and community situation), and

and 3.4 (Create and embed funding models that drive evolution and enhancement of nursing practice).

### **Recommendation 3: Integration of Viral Hepatitis Services**

Hepatitis Australia concurs that *“A system that supports research, development and the implementation of new solutions in nursing is essential to effectively meet the needs of the Australian community. Innovative models of care can have considerable benefits including system sustainability, improved consumer satisfaction, enhanced quality of life and better health outcomes. One of the key enablers of this is funding approaches which provide flexibility and focus on quality.”* (Priority 3: Design, page 8).

Nurses are uniquely positioned to play a leadership role in the design and delivery of innovative models of care that can improve the quality and efficiency of healthcare services. By empowering nurses to contribute their expertise and perspectives, we can create more people-centred, cost-effective, and sustainable care systems which integrate hepatitis B and hepatitis C elimination.

Aboriginal and Torres Strait Islander communities have unique healthcare needs and cultural perspectives that must be considered in the design and delivery of healthcare services. By empowering Aboriginal and Torres Strait Islander nursing communities to lead workforce initiatives, we can ensure that these communities have access to culturally appropriate and effective care.

Funding models play a crucial role in shaping the delivery of healthcare services. By creating flexible and innovative funding models, we can support the development and implementation of new nursing practices that improve outcomes and enhance the efficiency of the healthcare system.

Hepatitis Australia recommends that hepatitis B and hepatitis C services are seamlessly integrated into existing nursing practice settings, such as primary care clinics, community health centres, and hospitals.

This may involve:

- Allocating dedicated resources for hepatitis B and hepatitis C related activities.
- Developing protocols and guidelines for hepatitis B and hepatitis C care delivery.
- Supporting the establishment of more community-based hepatitis B and hepatitis C clinics and nurse-led hepatitis programs.

There is no doubt that this approach is effective. Wang et al<sup>ii</sup> found in 2022 that

*“With increasingly straightforward diagnostic and treatment algorithms, HCV [hepatitis C] infection can be managed not only by specialists, but also by primary care providers.*

*Engaging primary care providers greatly increases capacity to diagnose and treat chronic HCV and ultimately make HCV elimination a reality.*

*However, barriers remain at each step in the HCV cascade of care from screening to evaluation and treatment.*

*Since primary care is at the forefront of patient contact, it represents the ideal place to concentrate efforts to identify barriers and implement solutions to achieve universal HCV screening and increase curative treatment.”*

By implementing this recommendation, we can empower nurses to play a pivotal role in hepatitis B and hepatitis C elimination. Investing in workforce development, supporting Aboriginal and Torres Strait Islander nursing communities, and creating innovative funding models will enable nurses to deliver high-quality care and improve health outcomes. Integrating hepatitis B and hepatitis C services into existing nursing practice settings is crucial for ensuring accessible and effective care. As demonstrated by research, primary care providers are key to diagnosing and treating hepatitis C. By adopting these strategies, we can leverage the expertise of nurses to drive progress towards hepatitis B and hepatitis C elimination and improve the health and well-being of Australians.

#### Action 1.5 (Modernise the identity of nursing)

#### **Recommendation 4: Enhancement of Collaboration and Partnerships**

*Hepatitis Australia concurs that “There is a perceived lack of recognition despite their crucial role; they feel undervalued and underappreciated. Negative perceptions are also impacted by conditions out of their control, such as staffing shortages, increased workloads, irregular shifts impacting on work-life balance and the physical and emotional demands of nursing. Redefining the identity of nursing in a modern, contemporary context will include defining the critical role and functions of nursing, deepening professional partnerships and greater acknowledgement of the value of nursing.”*

Nursing has evolved significantly over the years, and the draft strategy is correct in its desire to modernise the profession's identity to reflect its current role and contributions to healthcare. By strengthening collaboration and partnerships, nurses can enhance their impact on hepatitis B and hepatitis C elimination and other public health priorities.

Hepatitis Australia believes that strengthening collaboration between nurses, healthcare providers, community organisations, and government agencies involved in prevention and treatment of hepatitis B and hepatitis C will deliver better health outcomes. This includes:

- Facilitating interdisciplinary care coordination.
- Sharing best practices and lessons learned.

- Advocating for policies that support hepatitis B and hepatitis C elimination.

Effective hepatitis B and hepatitis C care requires a collaborative approach involving multiple healthcare professionals and community organisations. By facilitating interdisciplinary care coordination, we can ensure that peoples receive comprehensive and high-quality care. Sharing best practices and lessons learned can help to improve the quality of care and enhance the effectiveness of prevention and treatment strategies. Nurses can play a vital role in advocating for localise policies that support hepatitis B and hepatitis C elimination and other public health goals in their communities. By working together with other stakeholders, nurses can influence decision-making and drive positive change.

By strengthening collaboration and partnerships between nurses, healthcare providers, community organisations, and government agencies, we can enhance the impact of nursing on hepatitis B and hepatitis C elimination and improve health outcomes for affected people. By recognising the value of nursing and supporting the professional development of nurses, we can ensure that they are equipped to meet the challenges of hepatitis B and hepatitis C and other public health priorities.

## Conclusion

**Empowering nurses is one aspect of accelerating hepatitis B and hepatitis C elimination.** By investing in their development, fostering collaboration, and integrating hepatitis B and hepatitis C services into primary care, we can equip them to deliver high-quality care, improve early diagnosis, and reduce transmission. This will not only contribute to achieving Australia's public health goals but also enhance the overall health and well-being of the population.

One crucial step is to **invest in workforce development**. Providing nurses with specialised training and education on hepatitis B and hepatitis C will equip them with the necessary skills to address this complex health challenge. Additionally, **fostering collaboration** between nurses, healthcare providers, and community organisations will facilitate knowledge sharing, improve care coordination, and strengthen advocacy efforts.

Another essential strategy is to **integrate hepatitis B and hepatitis C services into primary care settings**. This will improve access to care, reduce transmission, and ensure people receive timely treatment. By allocating dedicated resources, developing protocols, and supporting community-based clinics, we can create a more accessible and people-centred healthcare system.

**By implementing these recommendations, we can leverage the expertise of nurses to drive progress towards hepatitis B and hepatitis C elimination.** This will

not only benefit people affected by hepatitis but also contribute to a healthier and more equitable Australia.

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<sup>i</sup> Caixia Li, Mengxing Zhang, Karthikesu Karthijekan, Xia Fu. How nurses contribute to the elimination of hepatitis B? A systematic review and meta-analysis *Int J Nurs Stud*; 2024 Jan;149:104622.

<sup>ii</sup> Allison E. Wang, Eric Hsieh, Barbara J. Turner, Norah Terrault. Integrating Management of Hepatitis C Infection into Primary Care: the Key to Hepatitis C Elimination Efforts. *J Gen Intern Med*. 2022 Oct; 37(13): 3435–3443.