

## **Rural health leadership recognised**

Raised in a farming family on Pitt Island, Tania Kemp's upbringing had a huge impact on her career path as a rural nurse practitioner. She talked with her **Annette Scott** about bridging the rural health gap.

South Canterbury-based nurse practitioner Tania Kemp says rural health care needs to be promoted as a specialty area and not seen as the poor cousin to the glittering lights of urban medical practices,

Kemp has been recognised for her commitment and leadership in her drive to improve health care for rural communities.

The recipient of the New Zealand Rural General Practice Network 2020 Peter Snow Memorial Award says the inequities of the rural health statistics urgently need addressing.

The Peter Snow Memorial Award honours the life and work of Dr Peter Snow, a rural general practitioner who was an inspiring and active leader and who sought to improve the health and safety of rural communities.

The award celebrates an individual for their achievement in rural health research, projects, innovation and service.

Kemp's recognition comes for her inspirational nursing leadership and for being a change agent for models of care in rural primary health.

A sixth generation Gregory-Hunt family Pitt Islander, Kemp was immersed in rural life from an early age.

Exposed to the significant challenges in rural health she knows what it is like for rural communities' in ongoing battle for adequate rural health care models.

"I have lived the epitome of rural life.

"My aunty was the resident registered nurse on the island and dealt with all health care.

"The nearest medical care was a general practitioner (GP) on the main Chatham Island, so you only went if it was an emergency or something time could allow you to get there."

Starting her registered nursing career in a rural practice in Greymouth, Kemp set up a variety of clinics that were much needed at the time.

After moving back to the Chatham Islands she worked as a primary response medical emergency (PRIME) trained rural nurse before moving to Waimate, where she finished her clinical master's and registered as a nurse practitioner (NP).

In 2014, she and her husband Darcy purchased the Pleasant Point Health Centre in South Canterbury where she currently works as the lead clinician.

As both owner and lead practitioner Kemp has been able to influence change and introduce different models of care.

Her work has enabled nurse practitioners to lead clinics and provide a significantly large part of primary care safely and effectively, helping to bridge the gap in areas that struggle to recruit rural GPs.

With her deep understanding and expertise in rural practice she has immersed herself in rural work across her whole career and is seen as an inspiration by the nursing profession as a vocal advocate for quality, accessible, local health care.

“Knowing what it meant to live and breathe rural was the foundation and became my ideal for the type of nursing I wanted to be a part of.

“After many years of working in rural communities I could see that services could be offered in a different way.”

Kemp believed there was room for increasing access to services using different models of care such as NP led practices, and or clinics.

“In 2013 I set my goal to own and run a General Practice with the patients registered with a NP rather than a GP as had been the previous model in NZ.

“The Ministry of Health allowed for this and then I had to meet the other contract requirements set by the local district health board.

“NPs are not doctors, nor do we profess to be, but there is a significant amount of health care that can be effectively and safely delivered by NPs as it can by GPs.

“This has been shown in both national and international research and in clinical practice such as our general practice in Pleasant Point.

Kemp says there has been great satisfaction in seeing the Pleasant Point Health Centre not only survive but continue to grow.

“I felt relatively confident it could work but being a first NP owned and run general practice in NZ, meant there were a few years of treading water to ensure its success was genuine.

“We have doubled our patient numbers and staff numbers over six years, so I feel I can confidently say the model works.

“A huge part of my work satisfaction, and future goal, is to continue to grow our own nurses.

“We always have student nurses and NP interns to ensure they see how nursing can work differently than the more usual way.”

Working with an amazing team who all believe in what they do and strive to make a difference every day has been a key highlight in her career.

“Employing GPs who will work with us in this way and agree that it is working, is very satisfying.”

The journey has been challenging.

“I will not pretend this journey has been at all easy.

“There were financial, personal health and business issues that made the first few years extremely challenging.

“Initially there were battles with every organisation we dealt with that said you can’t do that, as you have to be a doctor or we don’t have NP as an option in the system.

“So, we would send them the NZ Nursing Council description for NP to show I was legitimate and legally allowed to do what I was doing.

“My hope is that every barrier we came up against we have managed in a way that means other NPs will not come up against the same in future.

“However, we did understand that being first at something means people genuinely did not know about the role and that was understandable.”

Kemp says the rural health care role needs to sell as a specialty area that brings incredible satisfaction to clinicians and is not the poor cousin to the glittering lights of urban practice.

“I have achieved huge job satisfaction in terms of the autonomous practice and need to work at the top of my scope in this role.

“There are aspects of health care my urban colleagues would never get the opportunity to do.”

Mental health services for rural need to include communities knowing how to look out for their people.

“Train the locals in first aid for mental health as we do for CPR.”

Access to virtual services needs to be made accessible for all rural communities so they do not miss out on specialist care, counselling, psychology, and therapists.

“Having to travel, time away and financial restraints don’t have to be a barrier to good health care.”