



26th July 2004

The Secretary
Senate Community Affairs References Committee
Suite S1 59
Parliament House
CANBERRA ACT 2600

The Secretary,

RE: INQUIRY INTO AGED CARE

I would like to take the opportunity to contribute to this inquiry. I am the Director of Nursing at a high care, dementia-specific nursing home. Our facility is a locked facility, licensed to care for 71 residents, who are mostly diagnosed with Dementia and/ or other mental illnesses. The following document is an illustration of my experiences and those of the employees of the facility in regards to the conditions of working within aged care, relevant to the terms of reference.

Terms of Reference Addressed:

1. The adequacy of current proposals, including those in the 2004 Budget, in overcoming aged care workforce shortages and training
2. The performance and effectiveness of the Aged Care Standards and Accreditation Agency in:
 - a. Assessing and monitoring care, health and safety
 - b. Identifying best practice and providing information, education and training to aged care facilities, and
 - c. Implementing and monitoring accreditation in a manner which reduces the administrative and paperwork demands on staff

Our employment in aged care demands that we abide by a duty of care. We are responsible for promoting and maintaining our resident's quality of life, maintaining their privacy and dignity, and ensuring their social, human and emotional needs are met and maintained, just to name a few. To ensure that these fundamental aspects of care are upheld, it is important that the Government recognises all the demands and problems experienced by aged care employees. What follows is a description of a few of the major problems associated with working in aged care.

Firstly, it is imperative to establish what I believe to be one of the major contributors to most of the problems that I have encountered: Nursing wages. For the work that is demanded of nursing staff in an aged care facility, and what is expected from them, the wage that is received is meagre. This problem is prevalent in most health care industries; however, it is appalling that there is no wage parity between the private sector and the public sector. The Fair Share For Aged Care Campaign run by the NSW Nurses Association has highlighted this inequality, and resolving this issue would be a step in the right direction.

Another poignant reminder of how financially undervalued the work by nurses is that a Care Service Employee – Grade 1, employed as an Assistant Cook or Cleaner, gets paid more than a Assistant Nurse. Without underrating the work that Care Service Employees do, I think it is disappointing that the Assistant Nurses do not get paid a more suitable amount for the type of work that is performed.

One of the problems in Aged Care that has been emphasised is that there is a shortage of adequately trained nursing staff. It is crucial to understand what to expect and how to manage aged-related illnesses and disabilities to maintain fundamental aspects of quality of care. As previously mentioned, most residents at our facility have a diagnosis of Dementia. Consequently, due to the nature of the disease, many residents frequently display challenging behaviours, such as verbal and physical aggression. Psychiatric trained Registered Nurses are rare working outside Mental Health Facilities, and Assistant Nurses are rarely educated on what to expect and how to manage these behaviours.

I believe poorly trained staff that are unable to cope with the difficult nature of working in Aged Care consequently results in problems with retention of staff. This can also be attributable to the wage crisis, as well as there being limited educational opportunities to attract staff in furthering their career path. If there were more prospects in Aged Care for both Registered Nurses and Assistant Nurses, there would also be more incentive to stay.

Another issue that is evident in our facility is the pressure that is placed on staff by the families of residents. Families can be extremely demanding, and expect all staff to be Registered Nurses. Relatives often intimidate staff to attend to their family member straight away, as well as monopolising their time; they often do not realise that there are other residents that are in need of care. When there is a shortage of staff, this expectation by families is even more apparent.

Additionally, I believe that the documentation that is required in Aged Care is excessive. Furthermore, a lot of documentation is duplicated, which not only wastes time but also detains staff from attending to more important care activities.

I hope that in revealing the above issues, it is evident that current proposals to overcome aged care workforce shortages and training, as well as the effectiveness of the Aged Care Standards and Accreditation Agency as highlighted in the terms of reference, needs to be reassessed to ensure that they are sufficiently effective.

Yours truly,

Jan Armstrong
Director of Nursing