

From:
To: [Community Affairs Committee \(SEN\)](#)
Subject: Senate Aged Care Inquiry - Name withheld
Date: Friday, 5 February 2016 8:27:46 PM

I am an RN currently working in an aged care facility that is about to undergo major staffing change, including care staff giving out medications. Some of these care staff have limited English, have immigrated from countries where health and hygiene standards are poor, feed residents..and forget to put their teeth in, leave them sitting with food on their clothing, neglect to report wounds or changes in health and can't even make a bed properly!

Let me ask you, do you want your mother, father, grandmother or parent to be in the sole care of someone like that who has perhaps only done a 6 week course....

I spent 3 years at university and wasn't able to give 1 medication at all until my second year and then only under direct supervision..for good reasons.

Why is aged care viewed as "lesser" than acute??. The residents who live in aged care facilities are fragile, vulnerable and have multiple medical issues that need monitoring not to cure but to ensure a comfortable end of life. I have also worked in a public hospital for 15 years and aged care is far more complex and challenging....MOST of the people we care for are unable to move unassisted, nearly all have complex chronic pain requiring constant monitoring and adjusting, some are unable to feed themselves, others are fed by machines, a lot have dementia, they have fragile skin where the smallest knock can rip and remove a large piece of skin, a lot have depression, some need complex pressure area management, most are incontinent requiring assessment and management to maintain dignity, and they get sick, a lot...chest infections, urinary tract infections...etc....so tell me how all this can be monitored and managed by a carer that has 6 weeks training and no medical experience?

These days the push seems to be a 'home' environment and I wholeheartedly agree. That being said these are still people with many complex health and medical needs, and that cannot be ignored.

The people I care for have lived long and productive lives. They have contributed to the community in many ways, some nurses themselves, others teachers, mothers and others have fought wars. It is a pleasure and a PRIVILEGE to care for them and provide the best possible comfort and care to them at the end of their amazing lives.

Everyone needs to open their eyes to the NEEDS instead of dollars.

Regards