

17th January 2016

Senate Standing Committees on Community Affairs

PO Box 6100

Parliament House

CANBERRA ACT 2600

Dear Members

Re: Inquiry on the Future of Australia's Aged Care Sector Workforce

I am writing in regard to the experiences I encountered when my mother became a resident of a Nursing Home / Aged Care Facility in [REDACTED] some [REDACTED] months ago. Sadly my mother passed away in [REDACTED], but I feel this inquiry should know about my concerns and incidents that I faced with my mother and the complaints I made to the Aged Care Complaints Scheme in NSW.

I was my mother's sole carer for the past 5-6 years prior to her entering care, and acknowledged that she would not receive the same care and support that I was giving her, but she would be suitably looked after by trained staff. After only a few days of her being in the Nursing Home, I noticed a very poor standard of care and hygiene, due mainly to the lack of staff employed and their limited training and knowledge of what to do and how to look after the aged resident.

During the time my mother was in care, and now afterwards, I can reflect on why there were so many issues that arose, many due to the workforce and the pressure and challenges that they face every day.

1. Poor Management, Leadership and Financial Skills

The facility that my mother was in was poorly managed by the Service Manager, who had one meeting with me when my mother was admitted, but did not discuss any problems with me afterwards, knowing full well that I had made complaints to the Aged Care Complaints Scheme. She possessed inadequate management and supervision skills, and was not authoritative in directing staff to their responsibilities in caring for residents, and making sure they are well looked after. I note that she was formerly a Registered Nurse, and many nurses are being appointed to management positions without the relative training or people skills that are required for the job. I believe she has been removed from her position as Service Manager. Communication was abysmal between staff and there were not proper processes put in place for staff to record incidents or requests, leading to confusion and residents not receiving appropriate care.

2. Staffing Ratios

During the night shift and over the weekends there was 1 and maybe 2 Registered Nurses (RN's) for 120 residents. There were a couple of Endorsed Enrolled Nurses (EEN's) and Assistants in Nursing (AINs). In NSW there is no specific ratio required for having a definite quota of trained nurses in an aged care facility. Many residents are elderly and have disabilities and require special nursing, which cannot be offered in a Nursing Home due to the lack of qualified nurses being employed and AINs not having the appropriate training to tend to these residents. Too many Facilities are only employing minimum staff which is putting patient care at risk, as well as adding more responsibility to the staff on duty. The health of staff is suffering and morale is very poor, leading to many resignations from the aged care sector.

3. Composition of the Aged Care Workforce

As mentioned above, there needs to be more trained nurses (RNs and EEN's) in the aged care facility. I note that there were some very young and inexperienced AINs working in the Nursing Home that my mother was a resident in, and many I felt didn't want to be there. They showed a lack of empathy and caring towards the elderly, and rarely

interacted with the residents. Some were university students, and one male who was only [REDACTED] would pull up the bed, not even straightening the sheets or blankets. I knew whenever he was on, as I always remade the bed, and on one occasion he even offered me new sheets to make the bed with.

4. Education and Training of Staff

My mother suffered from Alzheimer's disease, had an indwelling catheter as well as being a diabetic controlled by diet. I found that AINs did not know how to manage changing a catheter bag, dressing my mother and attaching the catheter bag properly each day or noticing that her urine was dark which could mean that she was suffering from a Urinary Tract Infection (UTI) due mainly to lack of fluid intake. I had complained about the catheter bag, and was informed that staff had been trained in what to do, but problems were still occurring right up until my mother passed away. I had issues with meals being served to her which were inappropriate due to her diabetes, but because of the ever changing staff, it was very difficult to keep an eye on.

AINs must complete a 3 month Certificate 111 in Aged Care before being employed in the Aged Care facility, which is very limited time to gain a broad cross section of duties that they are required to undertake. Many are thrown in at the "deep end" due to lack of staff being employed, and very rarely is there a "buddy system" where they are shown by another staff member what to do. "Hands on training" is the best form of training you can receive, providing it is by a competent person.

There needs to be more qualified nurses working with AINs and career paths must be offered for AINs to obtain better qualifications to be able to nurse aged residents. My cousin who is a Registered Nurse and works in a country town nursing home had to deal with a dying resident who had family present. She requested the AIN to go and get an item for the resident, but the AIN came back without the request as she didn't know what it was. My cousin could not leave the patient, so she asked the AIN to go and get something else, but again she returned with the wrong item. Due to the AIN being inexperienced and not trained accordingly, she was unable to assist the RN, who had to manage the palliative care patient without assistance from staff. Needless to say my cousin informed management that it was unacceptable having staff who were unable to support other staff in the event that a resident was dying and particularly when family members were present.

I was informed by the Nursing Home of staff training for ongoing catheter care and management, as well as access to an onsite clinical nurse learning facilitator and competency assessments for staff on urinary catheter management, but unfortunately this seemed to be documentation to satisfy the investigator from the Complaints Scheme that training is being provided and undertaken, but after their response, I was still witnessing poor catheter management care and infection control which my mother ultimately died from.

5. Challenges in attracting and retaining aged care workers

I note from the [REDACTED] and from many others, that it is very difficult to retain aged care workers, mainly I feel it is due to poor management, over-working of staff and limited staff employed, management not showing respect to staff and poor remuneration to personnel particularly to AINs who I believe are poorly paid. These workers should receive better wages as they are dealing with peoples' health and ultimately their lives.

There were 2 RNs who resigned from the Nursing Home who I found very obliging and tried to help me with my complaints, but obviously they found the workload and responsibility too much so they attained more suitable jobs. I can remember thinking after I spoke with them, that they would not last in the facility as they were too conscientious, and it seemed that they were receiving little assistance from management above. If they were not under so much pressure I am sure they would have stayed. While my mother was in hospital, I spoke to another RN who said she was a RN for another Nursing Home but ultimately had to leave as she suffered from headaches due to stress as well as having to have massages on her days off because of the amount of walking and lifting she had to do in the facility. She commented that the hospital was a more ideal and enjoyable environment to work in.

There are problems in the Aged Care Sector, and the requirements for having a competent and well skilled workforce need to be addressed, and the government will be required now and in the future to have strategic plans in place, to make certain that the growth in the this sector will be met and managed appropriately.

I have written to this inquiry as a family member of a former nursing home resident, as there is blatant dishonesty from the operators of Nursing Homes, and residents in Nursing Homes / Aged Care Facilities are entitled to basic nursing care which sometimes is non-existent.

I have attached a letter I sent to the Hon Minister for Health and Aged Care – Sussan Ley in [REDACTED]. I also met with Sussan [REDACTED], and in that meeting she mentioned about the inquiry, as some of my concerns were in regard to the composition of the workforce and training of staff.

My main concern is that if nothing is done now or planned for the future, I do not want to be put into care in a Nursing Home with conditions worse than they are now, knowing that improvements should have been implemented from this inquiry. Australia has an ageing population, and many of us will require to be cared for by competent and well trained staff.