

Supplementary questions

Alzheimer's Australia NSW

1. What recommendations to the NSW Government would you like to see come out of this inquiry?

Alzheimer's Australia NSW supports the NSW Health position articulated in its submission to the then Commonwealth Department of Health and Ageing in 2012. NSW Health argued that "It should be a priority that legislation to establish the Quality Agency includes requirements which specify that a registered nurse must be appointed as the Director of Nursing (or similar title) at a residential care facility and a registered nurse must be on duty in residential aged care facilities."

The NSW Government needs to put in place legislation and a supporting mechanism that ensures ongoing safety and quality of care is provided to its vulnerable older population. We believe the NSW Government should put in place such a supporting mechanism by implementing an outcomes based funding approach to offset the additional costs to residential aged care providers of having RNs on staff with payment for outcomes when the providers can demonstrate that they are preventing unnecessary or preventable hospital admissions.

Questions on notice

1. Alzheimer's Australia submissions on safety and quality in residential aged care.

Various submission to a range of bodies and inquiries are included below as hyperlinks to provide further information to the committee on the position that Alzheimer's Australia has adopted in relation to safety, quality, accreditation and management of dementia in residential aged care.

These are:

- [Productivity Commission Caring for Older Australians report – supplementary submission from Alzheimer's Australia](#)
- [Productivity Commission Caring for Older Australians report – response to draft report from Alzheimer's Australia](#)
- [Senate inquiry into Care and Management of Australians Living with Dementia and Behavioural and Psychological Symptoms of Dementia – submission from Alzheimer's Australia](#)
- [Senate inquiry into Care and Management of Australians Living with Dementia and Behavioural and Psychological Symptoms of Dementia – submission from Alzheimer's Australia NSW](#)

2. Are there any papers or research that you could present to the Committee, particularly dealing with the nocturnal problems that arise? Do you have anything that could give us further background on that?

Kerr and Wilkinson (2011) state that:

"Night staff need the same levels of training on dementia as day staff. It is a fallacy that people with dementia are asleep at night. People with dementia, partly because of changes

to their circadian rhythm, wake at night. Staff need to help them return to sleep where this is possible, but staff also need to be aware that when people wake they often need comfort and company. People with dementia additional may well be disorientated and forget where they are, what they are doing, how old they are and who staff are. Staff need to respond to this by entering the person's reality and world and not confronting them." p54

"It is important that when people wake at night it is not automatically considered to be an aspect of their dementia". P134

"It is, of course, not the job of night staff to prescribe, but it is often the story and interpretation of a person and their behaviour that they give to the prescribing practitioner that will determine the drug given. It is important, therefore, that staff are aware of the need to be sensitive to explanations for night-time behaviours and to look at other ways to prevent and manage the problems." P143

Having Registered Nurses on night shifts would significantly improve the capacity of the facility to respond to the night time needs of people with dementia, including expressions of unmet need (wandering, agitation, hallucinations, psychosis, disorientation) combined with nutrition and hydration needs, identification and management of pain, medication management and dispensing, prevention of falls, delirium.

"That policy makers, service providers and managers of care homes are often not as alert to the demands, needs and reality of the night-time in a care home means that all the advances in the care of older people in care homes are not guaranteed to be integrated into night as they are through the care day. This is cause for concern and needs to be addressed seriously and urgently." (P178)

When Alzheimer's Australia NSW conducts consulting work with residential aged care providers and we perform observational analysis in the aged care facility, we always ensure that one night visit is included as part of our data collection phase. This helps us to form a more complete picture of the standard of dementia care in the facility and what the strengths and weaknesses are. Our experience replicates the quote above in that there is a clear division in quality and standard of care provided overnight. With the increased needs of people with dementia in night time hours, the lack of Registered Nurses to attend to these issues in some facilities is a significant concern for Alzheimer's Australia NSW.

Kerr, D. and Wilkinson, H. (2011) *Providing Good Care at Night for Older People: Practical Approaches for Use in Nursing and Care Homes*, Jessica Kingsley Publishers, London.

Should the members of the General Purpose Standing Committee No. 3 require further additional details, Alzheimer's Australia NSW would be happy to provide further information. Please contact Brendan Moore, General Manager – Policy, Research and Information on