INQUIRY INTO REGISTERED NURSES IN NEW SOUTH WALES NURSING HOMES

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Aged care changes require discussion

The proposed changes that could see Registered Nurses removed from residential aged care facilities would have a very detrimental effect on the quality of residents’ care. I have worked in aged care for over ten years. During this time I have seen a significant change in the level of frailty and complex care needs of residents entering aged care facilities. This is largely due to the introduction of in home care packages. People are, fortunately, being able to remain at home for longer periods of time due to care provision in the home. Consequently, when a person requires care in an age care facility they have high level needs which can no longer be managed by intermittent supported care at home. Frequently, residents entering aged care facilities have multiple comorbidities that require a multipronged approach to successfully manage i.e severe osteoarthritis, dementia, macular degeneration & CCF. Each condition requires specific management pharmacologically, physically and psychologically. Each treatment needs to be monitored and reviewed.

The ability to monitor the care and management of these complex needs is challenging. While AINs (assistants in nursing) are wonderful carers and great supports for residents, they are not skilled or trained to perform a range of complex and necessary duties that are increasingly required by residents in aged care. Nor are they trained to understand the interplay of medications.

In aged care facilities residents may have catheters, complex wounds, gastrostomy feeds, peritoneal dialysis, or be receiving palliative care and complex pain management. As an educator of AINs I am aware their training does not encompass these areas of care. Nor are AINs trained in comprehensive physical/psychological/emotional resident assessment.

What would happen to a resident who had a blocked catheter or unrelenting pain? Would it be addressed? Would they have to be transferred to hospital further compounding their distress? Not to mention putting further pressure on our already stretched emergency departments.

When an elderly person is first admitted to a facility a full assessment is required. This can be a sensitive exercise that involves the resident & their carer and/or the resident’s family. This process examines physical, emotional and psychological aspects of the resident. Teasing out the most salient points and determining their relationships requires a high level of both interpersonal skills and sound clinical knowledge. Trained professional staff are necessary in this role as they have the training and knowledge base to ensure the best care plans are established to meet individual and complex needs.

High quality, professional care for residents in aged care facilities can only be provided by professional nurses. Our elderly deserve high quality care. Many are unable to verbalise their pain or problems due to physical or psychological impediments. High quality, experienced assessment is required.