

**Submission
No 57**

**INQUIRY INTO REGISTERED NURSES IN NEW SOUTH
WALES NURSING HOMES**

Name: Ms Robyn Harman

Date received: 17/07/2015

I have been an RN in a Nursing Home for 6 years and have many years experience in ACAT and hostel level care also. I work mostly evening shifts, solo RN responsible for 64 high level residents. I administer S8 medications, Insulin, nurse initiated medications. I supervise all staff. Replace staff who ring in sick. Assess changes in residents' conditions and liaise with GP's and hospital and organise transferring folk if necessary. Administer first aid. Counsel residents, family and staff re grief, loss, dying residents. Without an RN more folk with minor issues will be sent to ED for assessment...not a good environment for frail, perhaps demented folk. More folk will die prematurely. Not good for the hospital either. How will S8 drugs be safely handled? How will people be appropriately and kindly palliated? Who will communicate appropriately with GP's, families? Who will educate and support care staff? It will not be good practice to have an RN or manager on call to respond at all hours to a situation they are not intimately familiar and up to date with. Do you want yourself or your parent to be cared for in this way...I doubt it.