

**Submission
No 82**

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

Organisation: Presbyterian Aged Care NSW & ACT

Date received: 21/07/2015



Presbyterian Aged Care

21 July 2015

The Director
General Purpose Standing Committee No. 3
Parliament House
Macquarie St
Sydney NSW 2000

Attention: Ms Teresa McMichael

Submission to Inquiry into Registered Nurses in NSW nursing homes

I am making this short submission on behalf of Presbyterian Aged Care NSW & ACT (PAC). We are members of Aged & Community Services NSW & ACT (ACS) and support their submission on behalf of the church, charitable and not-for-profit aged care sector.

PAC runs 9 residential care services across NSW and we employ a total of 66 Registered Nurses (RNs).

Term of Reference 1:

PAC believes that the NSW Parliament should repeal the provisions of Section 104 of the *Public Health Act 2010 (NSW)* that impose additional requirements onto residential aged care services above those in the *Aged Care Act 1997 (Cwlth)*.

NSW is the only State with legislation that imposes a burden on aged care facilities around staffing, requiring a RN to be available on site 24/7. All other States rely on Commonwealth legislation, national standards and the independent accreditation system that requires the facility to make sure the right staff are available to meet the needs of those in their care. The quality of care in NSW is no different from that in other states, so the national standards clearly work.

The recent conflict that has arisen regarding definitions of 'high care' and 'nursing homes' following the 2013 amendments to the *Aged Care Act* (operational from 1 July 2014) merely

highlight the archaic state of affairs in NSW by attempting to retain provisions of this nature in State legislation.

Should the legislative burden to have RNs in every facility 24/7 be extended to cover all residential aged care services, PAC will face being non-compliant with legislation and have huge financial burdens with no improvements in the quality of care. Total additional recruitment for PAC is at least 26 RNs as a minimum requirement – quite possibly more. If this is extrapolated across the industry we are looking at an enormous number of RNs to be recruited. And if we have to employ RNs who then end up doing basic care duties (replacing care workers) to meet artificial legislative requirements, are we really going to be able to find an RN who wants to do more menial duties and not use their skills and qualifications to the full?

The implications of extending the legislative burden to have RNs in every facility 24/7 for our residential care services include:

1. PAC Gosford (39 beds)

- An increase of 128 hours per week of RN coverage required – approximately the cost increase would be \$4,920 per week or \$255,600 p.a. This would require a minimum number of 5/6 RNs per week to cover shifts.
- Alternatively we could offset the above by replacing a care staff member with an RN, thereby having an RN doing care staff work as well to cover the legislative requirement, resulting in a net increase of \$1,715 per week or \$89,190 p.a.

2. PAC Minnamurra, Drummoyne (65 beds)

- An increase of 112 RN hours per week equals \$221,400 p.a. increase. The minimum if offset against care worker hours would be \$75,800 p.a. and would require an additional minimum of 5/6 RNs per week to cover shifts.

3. PAC Haberfield (41 beds)

- An increase of 152 RN hours per week would equal \$300,352 p.a. The minimum if offset against care worker hours would be \$102,752 p.a. and would require an additional minimum of 7 RNs per week to cover shifts.

4. PAC Apsley Riverview, Walcha (31 beds)

- An increase of 152 RN hours per week would equal \$300,352 p.a. The minimum if offset against care worker hours would be \$102,752p.a. and would require an additional minimum of 7 RNs per week to cover shifts.
- There is significant shortage of RNs in the New England region in both residential and community aged care – PAC Apsley Riverview Walcha would almost certainly have to close.

To summarise, PAC would have to consider:

1. Closing low care facilities because they will be unable to comply with the legislation;
2. Removing other types of staff in order to try and find savings for the required RN cover, which would impact on the overall quality of care for residents;
3. Potentially transferring 'high care' residents, from what used to be a low care facility, to a hospital to avoid making the facility non-compliant; or
4. Stopping looking for ways to provide short term acute or palliative care in a facility, as there will not be enough RNs available to help us with these short term peaks and troughs in changing resident needs.

We would also note that comparing RN coverage in long-term care such as residential aged care homes with RN coverage in hospital aged care wards is highly misleading. Hospitals are acute care settings, not people's homes.

PAC believes the current legislation regarding medication administration in aged care services is adequate.

Term of Reference 2

PAC does not believe any additional NSW regulation of the standards of assistants in nursing or equivalent positions is required. Any such moves could well be highly counterproductive, adding an unnecessary layer of complexity to recruitment of care workers.

We would support examination of the creation of a working with older persons register, similar to the working with children process. This could assist in protecting older people against the risk of elder abuse.

Term of Reference 3

The Australian Aged Care Quality Agency examines the adequacy of human resources in residential care services as part monitors of the residential care standards under the *Aged Care Act*. PAC does not believe any additional State regulation of nurse to resident ratios is warranted.

We note the context that there is a shortage of Registered Nurses in Australia. In NSW it takes on average 7- 8 weeks to fill an RN vacancy. PAC believes Registered Nurses are invaluable and we have no plans to get rid of our RNs. We need the flexibility to have them working during the day while our residents are up and about, and only at night if the residents need them there at night. We also note the potential for enhanced information communications technology to alleviate some of the need for RNs to be physically present all the time – some of our colleagues in the aged care industry have models of RN flying squads already in use in lower care residential settings as well as in community aged care.

Conclusion

PAC believes it is time to repeal outdated and unnecessary NSW legislation on nursing homes. It was never intended to cover low care facilities and any extension will impact on every residential care service as it skews where nurses work.

I would be happy to appear before the Committee if asked. Please contact me if you require more information.

Yours sincerely,

Paul Sadler
Chief Executive Officer
Presbyterian Aged Care NSW & ACT