

**Submission
No 38**

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

Name: Mrs Linda Langton

Date received: 16/07/2015

I am a Registered Nurse, who has worked in Aged Care for thirty years. In that time there have been many changes made for the benefit of residents, through Legislation and Accreditation requirements. The potential for detrimental changes exists if Legislation does not reflect the higher care needs of residents, and the staffing required to fulfill them.

Complex care needs that require a Registered Nurse, and are now common in Aged Care include palliative care, and calculating administration of Schedule 8 drugs ordered, and knowing when to both administer and request changes from a GP, as needs change quickly. We all acknowledge that comfort and trying to achieve a pain free death are the goal, but that takes good teamwork between RNs, GPs and families and is a 24/7 task, and not just 9 - 5. Having AINs responsible for those decisions is not fair to the resident, their loved ones, or the unskilled nurse themselves. their only option would be to have the resident transferred to hospital at the end of their life, or for these residents to be transferred out of their homes, and into a Palliative Care Facility.

RNs spend a lot of their time assessing residents, which may involve taking observations after a dizzy spell, assessing wounds or injuries after a fall, talking to a more confused resident, to figure out why. The skill of the RN is in discovering if medication has caused the dizzy spell and needs adjusting, or the resident may be having a mini stroke or a CVA and needs attention, or perhaps they are dehydrated. A hip that feels sore after a fall may be broken, or bruised, or may be a previous hip replacement that has shattered. A wound can be infected, or need suturing or excessively bruised due to blood thinning medication, or just need a dressing. The confused patient may have delirium due to an infection, or be missing a family member who is away, or be needing review by a Specialist Geriatric Team. All can be assessed quickly by an RN, but could be ignored by a less skilled staff member, or result in unnecessary hospital admissions.

I strongly believe our Aged Residents deserve the best care we can offer them in their frail final years, and that has to include access to the skilled staff 24 hours a day, as medical issues and emergencies, dont wait for Office Hours.

Registered Nurses 24/7 is what i would insist on for the care of my mother, and it should be what we insist on and budget for accordingly, for all our residents in the current Nursing Home System.