

I have been working in aged care for the last 10 years. I have observed that the floor staff are very stressed and very unhappy as mostly they are working on a staff to resident ratio of 1 staff to 7.5 residents or best case, 1 staff to 6 residents.

Therefore the care that the residents are getting is not of the quality that it should be.

Every time that I attend a meeting or conference where there are aged care nurses present, the opinion is always expressed, that aged care is very understaffed. There are a few issues that I would like to raise.

1. With the current staffing levels in most aged care facilities, the staff are hard pressed to give quality care to their residents. If something unforeseen happens, such as a resident becoming incontinent soon after they have had their daily shower, it puts a lot of extra pressure on that staff member who then has an extra shower to do.
2. Most RN Div 1's who work in aged care, work a minimum of 10 hours unpaid overtime a week, if they are working full time. This appears to be acceptable to the aged care providers, as it is almost expected that the RN will stay and make sure that all her work is finished before she goes off duty.
3. The RN's are also under a lot of stress, and work to a tight time frame to try and get their work done on a shift. If something untoward then happens, such as having to organise for an ambulance to get a resident who has fallen to hospital that places even more pressure on them.
4. An inordinate amount of time is spent on documentation. First there is the documentation needed to ensure that resident care standards are met. Then, there is the documentation needed for the ACFI , the funding tool .
5. The ACFI funding tool, contradicts the aged care accreditation standards. The standards require that we maintain a resident's independence for as long as possible, which often involves more time by the staff. It takes longer to walk with a resident (thus maintaining his independence) than what it does to transport a resident in a wheelchair, yet we are funded at a maximum for the wheelchair, rather than for supervising the ambulant resident. Therefore, this may not always be happening, as facilities do not have the staff to do this.
6. Skills mix is another issue. Given that residents entering care are now much older and frailer than previously (as they are now kept in their homes with community support much longer) there needs to be a RN Div 1 on duty on all shifts, as well as RN Div 2 for support.
7. The ideal ratio of staff to resident to apply good care would be 1:5. This would ensure that they do not burn out, or do themselves harm by acquiring work injuries due to over tiredness, stress or trying to take short cuts to get finished on time.
8. There needs to be a uniform standard of training for all pca's, so that when they enter into aged care, they all have the same standard of knowledge. At the moment, the requirements for a certificate three can range from a 6 month course to an 11 hour course. This in not good enough.

9. Wages in the aged care sector need to be higher. Many registered nurses leave aged care to work in the acute sector, as the salary there is higher. However, many nurses remain in aged care, because they are compassionate caring people.
10. Interesting to note that very few young nurses go into aged care. Why is this so? Aged care is not glamorous, but is very rewarding. It needs to be portrayed as such, to try and attract staff into aged care.