

Australian Nursing and Midwifery Federation

**CONSULTATION ON THE  
DRAFT NATIONAL SAFETY  
AND QUALITY HEALTH  
SERVICE STANDARDS  
(SECOND EDITION)  
USER GUIDE FOR MULTI-  
PURPOSE SERVICES  
AGED CARE MODULE**

**28 AUGUST 2020**



Australian  
Nursing &  
Midwifery  
Federation



## INTRODUCTION

---

The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of more than 295,000 nurses, midwives and carers across the country.

Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.

Our strong and growing membership and integrated role as both a professional and industrial organisation provide us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.

Through our work with members we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.

With regard to care of older people, ANMF members work across all settings in which aged care is delivered, including over 40,000 members who are currently employed directly in the aged care sector. Many more of our members are involved in the provision of health care for older persons who move across sectors (acute, residential, community and in-home care), depending on their health needs. Being at the fore-front of aged care, and caring for older people over the twenty-four hour period in acute care, nursing homes and the community, our members are in a prime position to make clear recommendations to improve the care provided and enhance processes for access to that care.



## GENERAL FEEDBACK

---

The ANMF recognises the importance of the draft National Safety and Quality Health Service (NSQHS) aged care module to bridge the gap between the current NSQHS standards and the Aged Care Quality standards, to ensure Multi-Purpose Services (MPSs) delivering federally funded aged care services are meeting the expectations of the community and are providing safe quality care. The ANMF believes that both health and aged care should be required to comply with the same standards, given the rising acuity amongst the resident cohort in nursing homes and the need for staffing and skills mix ratios. However, in the absence of universal care standards we believe the Aged Care Module goes some way to addressing issues of clinical governance in MPS aged care.

As has been highlighted in evidence given to the Royal Commission into Aged Care Quality and Safety, aged care providers vary considerably in service delivery and care outcomes, particularly regarding the application of clinical governance processes, and staffing levels (both numbers and skill mix). Whilst the Aged Care Module addresses the clinical governance gap, the outcomes the Module is intended to achieve cannot be met without a requirement for evidence-based staffing levels and skills mix.

This has been devastatingly demonstrated by the effects of the COVID-19 pandemic on nursing home residents in Victoria over the past two months: residents in publicly-owned Victorian nursing homes (subject to mandated staffing numbers and skill mix) have contracted the SARS-CoV-2 virus at a rate of one in 900, compared to a one in 23 rate for their counterparts in privately owned facilities.<sup>1</sup> This significant difference in outcomes is consistent with research that clearly demonstrates a reduced incidence of nurse-sensitive outcomes such as falls, indwelling urinary catheter infections, and medication errors, with implementing and maintaining nursing and care staff in ratios that enable them to provide all elements of each residents assessed care needs.<sup>2, 3, 4</sup>

While requiring minimum numbers and composition of direct care staff is not the only aspect that needs to be addressed in order for the Module to achieve the intended improvements for aged care recipients, the ANMF contends that without mandated nursing and care staff ratios it will not be possible to achieve them. It is already evident that many providers will not introduce this much needed measure without it being a mandatory requirement, and staffing ratios should therefore be included in the Standards.



### **Language**

The language used overall is clear, understandable, and supported by the glossary.

### **Usability**

The examples listed for each Action are well considered and illustrate the kinds of approaches and workplace strategies MPSs will need to implement, and the quality of evidence required to demonstrate improvement.

The ANMF suggests including menu's and photographs of meals in addition to the evidence examples listed for Action A3.

### **Clarification**

While most sections are directive, the instruction that the "MPS consider opportunities" in Action A2 does not create an imperative for Services to act. In this section and in Action A6 (p. 20) regarding clinical governance strategies for improvement, language that informs MPSs that they must implement measures will indicate the necessity for meeting these Standards.

### **Gaps and duplication**

With the exception of those mentioned in other sections of our response, there are no noted gaps or instances of duplication in the User Guide.

### **Additional functionality**

Including an interactive resource with fact sheets for staff, residents and their families would be useful. In addition, allowing MPSs to upload examples of how they have met the standards will allow successful solutions and innovative approaches established at one Service to be implemented in others.

### **Other feedback**

The ANMF is disappointed to find that our recommendation made in our 2019 submission to the Australian Commission on Safety and Quality in Health Care, to strengthen the requirement for appropriately qualified staff, has not been included. This recommendation was that:

*The reference to the requirement for appropriately qualified staff being identified in the standards... should be strengthened with the addition of an evidence-based staffing model that ensures the staffing comprises the right number and skills mix of staff rostered throughout the day and night to deliver safe, quality care and services to meet the assessed care needs of every consumer of the aged care service being provided<sup>5</sup>*



The Commission has instead removed all references to qualified staff, with the exception of nutritional specialists on p. 14, and note that, unlike nursing, this area of practice is not nationally regulated and has no protected titles.

While Action A5 does address auditing workforce numbers, documenting workforce competencies and skills, and the need to “identify skills gaps and staff education and training needs” (p. 18), providers appearing before the Royal Commission into Aged Care Quality and Safety have defended staffing numbers and skill mix that are patently inadequate to meet the individual assessed care needs of their residents. In addition, despite the ANMF releasing survey data in May 2020 revealing staff cuts in aged care,<sup>6</sup> when the pandemic curve was flattening, nursing homes in Queensland, South Australia, Tasmania, NSW and even Victoria, have continued to reduce staff in just the last month.<sup>7, 8, 9, 10, 11</sup> Relying on individual aged care providers to determine the level and mix of staffing to meet residents’ needs is demonstrably unsatisfactory.

Members who work in MPSs have told the ANMF that, as aged care units are often seen as less critical or important than more acute areas (for example, the emergency department), nurses and aged care workers are often re-deployed to address staffing and skills mix shortfalls in these ‘priority’ areas, leaving residents’ needs unmet. With mandated, evidence-based direct care staffing and skill mix, MPSs will have the capacity to safely implement the Standards.



## CONCLUSION

---

The ANMF appreciates the opportunity to participate in the consultation process for this module and provide our feedback on behalf of our membership. We are committed to on-going review and evaluation of processes that enhance and improve the care and conditions of older Australians. Standards determining the physical and emotional environment, personal and clinical care, and the management of aged care provision are key to supporting a safe, sustainable aged care sector.

The ANMF has a significant number of members working in the aged care sector. Based on their feedback, we are concerned that some MPSs across the country will not be able to meet the individualised, important needs and preferences of residents as described in these Standards. Nurses and aged care workers frequently report experiencing excessive workloads, which result in missed and delayed care. This has a significant negative impact on the well-being of both the nurse and care staff and the frail, vulnerable elderly people for whom they provide care. With each year the profile of people receiving aged care services grows more complex, with a greater number of co-morbidities, medicines, and risk of adverse events. The ANMF's long-term campaign for mandated legislated staff ratios in aged care addresses these concerns by ensuring that the right mix of staff, in the right numbers, can provide the timely, quality care this population needs but too rarely receives. The Standards, both within the ACSQHC MPS Aged Care Module and the Aged Care Quality and Safety Standards, should clearly stipulate the requirement for an evidence-based staffing model that ensures rostering across all shifts comprises the right number and skills mix of staff to deliver safe, quality care and services to meet the assessed care needs of every person to whom the aged care service is being provided.



## REFERENCES

---

1. Sivaraman G. and Stanford P. (2020) Profit over people: It's time to put aged care in public hands The Guardian August 20, 2020 [accessed August 26, 2020] <https://thenewdaily.com.au/news/national/2020/08/20/profit-over-people-its-time-to-put-aged-care-back-in-public-hands/>
2. Twigg DE, Gelder L and Myers H (2015) The impact of understaffed shifts on nurse-sensitive outcomes Journal of Advanced Nursing 71(7):1564-1572
3. Okeroj A (2017) The impact of nursing staff ratios on falls rates In skilled nursing facilities [Doctoral dissertation, Walden College] ScholaWorks <https://scholarworks.waldenu.edu/cgi/viewcontent.cgi?article=4605&context=dissertations>
4. Blackman I., Henderson J., Weger K., and Willis E. (2019) Causal links associated with missed residential aged care Journal of Nursing Management 2019;00:1–9
5. Australian Nursing and Midwifery Federation (2019) submission to the National Safety and Quality Health Service Standards (second edition) Aged Care Module p. 4
6. Australian Nursing and Midwifery Federation (2020) Aged care workers' inspiring efforts to keep older Australians safe despite the challenges of COVID-19 [http://anmf.org.au/media-releases/entry/media\\_200508#agedcare](http://anmf.org.au/media-releases/entry/media_200508#agedcare) [accessed 14 August 2020]
7. Queensland Nursing and Midwifery Union (2020) Church cut aged care nurses despite having \$250 million in cash [https://www.qnmu.org.au/QNMU/PUBLIC/MEDIA\\_AND\\_PUBLICATIONS/Media\\_release\\_uploads/2020/Church\\_cut\\_aged\\_care\\_nurses\\_140820.aspx](https://www.qnmu.org.au/QNMU/PUBLIC/MEDIA_AND_PUBLICATIONS/Media_release_uploads/2020/Church_cut_aged_care_nurses_140820.aspx) [accessed 14 August 2020]
8. Australian Nursing and Midwifery Federation (SA Branch) (2020) Nurses and care workers call for urgent action in aged care [https://www.anmfsa.org.au/Web/News/2020/Nurses\\_and\\_care\\_workers\\_call\\_for\\_urgent\\_action\\_in\\_aged\\_care.aspx](https://www.anmfsa.org.au/Web/News/2020/Nurses_and_care_workers_call_for_urgent_action_in_aged_care.aspx) [accessed 14 August 2020]
9. Kernebone E. (2020) Flora Hill, Kangaroo Flat Royal Freemasons residents' families Bendigo Advertiser July 22 2020 <https://www.bendigoadvertiser.com.au/story/6844536/call-to-reverse-staff-cuts-at-two-bendigo-aged-care-homes/> [accessed 14 August 2020]
10. Egan C (2020) Lack of funding forces staff cuts In time of crisis Hello Care July 23 2020 <https://hellocaremail.com.au/lack-funding-forces-staff-cuts-time-crisis/> [accessed 14 August 2020]
11. Vinail F (2020) 'Deeply disturbing' aged care claims shock Royal Commission The Australian August 12 2020 <https://www.theaustralian.com.au/breaking-news/deeply-disturbing-aged-care-claims-shock-royal-commission/news-story/792fce75dec-65cb4be5ee5a149341f36> [accessed 14 August 2020]