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NURSE-TO-RESIDENT RATIO NEEDED IN AGED CARE FACILITIES

A proposal to publicly publish the staff-to-resident ratios at all residential aged care facilities is a good start, but a flexible registered nurse-to-resident ratio must still be set by regulation, AMA President, Dr Tony Bartone, said today.

The AMA has made submissions to two Parliamentary inquiries into draft legislation regarding the aged care sector, the *Aged Care Amendment (Staffing Ratio Disclosure) Bill 2018* and the *Aged Care Quality and Safety Commission Bill 2018*.

“The draft legislation will force residential aged care facilities to provide their staff-to-resident ratios every three months for publication,” Dr Bartone said.

“This will at least give people a more informed choice about which facility they choose for themselves, or for their family members.

“At present, there is no regulation around minimum acceptable levels of staff in residential aged care facilities, just that providers must ‘maintain an adequate number of appropriately skilled staff to ensure that the care needs of care recipients are met’.

“Unfortunately, there has been a decline in the proportion of full-time equivalent registered and enrolled nurses in the residential care workforce, and an increase in the proportion of personal care attendants. This trend goes against the increasing chronic, complex medical needs of residents.

“This delays access to medical care for older people, and can increase costly, unnecessary hospital transfers.

“The AMA has continually called for a regulated registered nurse-to-resident ratio, that adapts to the individual care needs of residents and ensures nurses are available 24 hours a day.

“There is a need to design, specifically fund, implement and measure a range of quality outcomes to improve aged care. While adequate staff will not solve every issue, without adequate staff is unlikely we can solve anything. A ratio is therefore a first essential step in fixing the broken system.

“We have made this call in our submission to the staffing ratio disclosure inquiry, and look forward to appearing at the public hearing.”

A recent AMA survey of member GPs, consultant physicians, and palliative medicine and geriatrician specialists who visit patients in residential aged care homes revealed that one in three plan to cut back or end completely their visits within the next two years, citing a lack of suitably trained and experienced nurses, and inadequate Medicare patient rebates.

The AMA has also made a submission to the inquiry into the legislation establishing the Aged Care Quality and Safety Commission.

“The AMA has for some time consistently and strenuously been advocating for an Aged Care Commission to provide a clear governance hierarchy that brings accountability to the aged care sector,” Dr Bartone said.

“The current system is fragmented, inefficient, and confusing for older people.

“The AMA believes that, in addition to its regulatory functions, the Commission should and must make recommendations to the Government on ways to improve the aged care system, based on its work.

“This is urgent work. There are already more than 121,000 people waiting for an appropriate home care package, the majority of whom have high care needs.

“By 2056, more than one in five Australians will be over the age of 65. Improving the health and care of older people must be a national priority.

“The AMA *Position Statement on Resourcing Aged Care 2018*, released in April this year, sets out a proposed structure for the Commission.”

The AMA *Aged Care Survey 2017* is at <https://ama.com.au/article/2017-ama-aged-care-survey>

The AMA *Position Statement on Resourcing Aged Care* is at <https://ama.com.au/position-statement/aged-care-resourcing-2018>

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