Governance and Practical Solutions in Residential Aged Care: A Role for Nurses

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National Strategy for an Ageing Australia

• The National Strategy focuses on five themes:
  ➢ Retirement incomes;
  ➢ A changing workforce;
  ➢ Attitudes, lifestyle and community support;
  ➢ Healthy ageing; and
  ➢ World-class care.

Care Needs

People Over 65

2001 Census

World Class Care

• Health care needs with adequate infrastructure
• Care that is affordable, accessible, appropriate and of high quality
• Integrated and coordinated care systems
• Financially sustainable and provides choice

Presentation Overview

• National Strategy for an Ageing Australia.
• Demographics.
• Current and future pressures impacting on residential aged care services.
• Changing practices.

Current Environment in Residential Aged Care

• 3000 aged care homes
• 156,000 places
• ALS 3 years
• Low care 64%
• High care 36%
• 1600 Approved Providers

DoHA 2004
Ownership

Ownership

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Ownership

Ownership

Gov ernment, 9%
Priv ate, 28%
Community, 16%
Religious and Charitable, 48%
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DoHA 2004

Current & Future Pressures

- Population ageing
- Changes in patterns of health and illness
- Changes in family relationships
- Changes in technology
- Changes in expectations
- Variation in service models
- Changes in the caring workforce
- Iatrogenic harm

Current & Future Pressures

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Current & Future Pressures

Population over 65

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<td>2.00%</td>
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<tr>
<td>2002</td>
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AIHW 2004
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Current & Future Pressures

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Current & Future Pressures

Population over 85

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AIHW 2004
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Current & Future Pressures

1. Changes in patterns of health and illness
   - Compression of morbidity?
   - Dementia doubles each five years after 65 years
   - Improved medical care and prevention strategies
   - Understanding of patterns and prevalence

Current & Future Pressures

2. Changes in family relationships
   - Expected decrease in informal carers – result of increasing numbers of single older people, mobile families and children reaching older age while their parents are still alive.
Current & Future Pressures

3. Changes in technology.
- Role for technology in assessing, diagnosing and managing diseases, illness and disability – not in taking over the caring function.
- Defining new services and redefining old ones

Current & Future Pressures

- Generational shift in the expectations of older people (independence, quality of life, control, participation)
- Consumers of health care are pivotal to improvements in the quality of that care.

Current & Future Pressures

5. Variation in service models.
- Multipurpose services.
- Community-based services.
- Step-down and rehabilitation services.
  - Tracking population trends and impacts of other factors essential to planning.
  - Requires flexible systems and a flexible workforce to meet these needs.

Current & Future Pressures

- How do we fashion a workforce that will meet the needs of the future?
  - Competing forces:
    - Using more registered nurses.
    - Improving efficiencies.
    - Improving quality.
    - Identifying recruitment & retention issues.
    - Role of healthcare workers & professionals.
    - Care models.

Workforce Composition

- Total = 116,000 direct care workers
- Registered Nurses, 25,000, 22%
- Enrolled Nurses, 15,000, 13%
- Personal Carers, 67,000, 57%
- Allied Health Workers, 5,899, 5%

NILS 2003

Future Workforce

Steps in future development:
- National Institute of Labour Studies survey and census of the residential aged care workforce.
- National Aged Care Workforce Strategy
- National Health Workforce Strategic Framework
### Challenges & Changes to Practice

1. Demographics, workforce, technology demand review of current models of care
2. Consumers, iatrogenic harm, EBP dictate quality

### 1. Current Models of Care

“To make optimal use of workforce skills and ensure best health outcomes, it is recognised that a complementary realignment of existing workforce roles or the creation of new ones may be necessary. Any workplace redesign will address health needs, the provision of sustainable quality care and the required competence to meet service needs.”

AHMC 2004

### Changes and Challenges in Practice

- Sector a leader in transformation of roles
- Re-defining scope of practice for RNs
- Rapid advances in technology
- Nurse practitioners
- Chronic illness and multidisciplinary care
- Clinical governance

### Multidisciplinary Clinical Governance

- Improve consumer participation
- Use data better to learn and improve care
- Culture of fairness (no blame) – reporting
- Culture of safety
- Technology and research
- Trust & team work

### 2. Quality Care & Practice Changes

“The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge”

IOM 1991

### Quality Care & Practice Changes

- Underuse
- Overuse
- Misuse

Chassim et al 1998

- Evidence based practice
- Variations in practice
Practical & Global Solutions

Local:
- Clinical leadership
- Clinical governance
- EBP

Global:
- Partnerships
- Strong aged care nursing voice
- Strong aged care nursing leadership

Quality Care & Practice Changes

- APRAC guidelines
- Education courses
- Principles Paper
- Restraint decision support tool
- Models of QCC – clinical governance
- Clinical IT in aged care project
- Consumer website
- Clinical scholarships – JBI/DoHA
- U/g scholarships
- Falls guidelines
- Dementia and continence resources
- GP panels

Challenges and Changes in Practice

Pressures
- Demographic change
- Workforce supply
- Technology
- Expectations
- Harms from traditional models of care

Changes / Solutions
- Multidisciplinary care
- Evidence-based practice
- Clinical governance
- Consumers
- Technology
- Safe systems

Aged Care Nursing

The world needs nurses to care for our older people and to ensure their quality of life.