

ROYAL COMMISSION INTO AGED CARE QUALITY AND SAFETY

AMENDED STATEMENT OF ANNIE BUTLER

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Date: 1 February 2019

Introduction

1. This statement accurately sets out a summary of the evidence that I am prepared to give to the Royal Commission into Aged Care Quality and Safety.
2. This statement is true and correct to the best of my knowledge and belief.
3. I make this statement on behalf of the Australian Nursing and Midwifery Federation (ANMF) in my capacity as the Federal Secretary of that organisation.
4. I am currently the Federal Secretary of the ANMF. I have been in this role since 18 June 2018. Prior to that I was Assistant Federal Secretary from 31 March 2014. I am a registered nurse.
5. Prior to working in the Federal Office of the ANMF I was employed by the New South Wales Nurses and Midwives' Association (NSWNMA) as Lead Organiser, Organiser and Professional Officer. I have worked as a registered nurse for more than 30 years.

The ANMF

6. On 14 January 2019 the Solicitors for the ANMF wrote to the Co-Solicitor Assisting the Commission outlining the ANMF's status, explaining its background and interest in the work of the Commission. This letter was in response to correspondence from the Commission of 11 January 2019 directed to the South Australian Branch of the Federation. Attached and Marked **ANM.0001.0001.0001** is a copy of the Commission's letter of 11 January 2019. Attached and marked **ANM.0001.0001.0003** is a copy of the ANMF Solicitors' letter of 14 January 2019. I adopt the content of the letter of 14 January 2019 for the purposes of this Statement.

The scope of this Statement

7. In a further exchange of correspondence between the ANMF's Solicitors and the Co-Solicitor Assisting the Commission of 17 January 2019 the ANMF explained that this statement would be of a preliminary nature and that a further statement was proposed. Attached and marked **ANM.0001.0001.0008** are copies of the Commission's and ANMF's letters of 17 January 2019 in relation to the statement.
8. Consistently with the ANMF's correspondence it will seek to file a further statement that expands on the matters addressed below and addresses those matters not able to be dealt with within the

time frame. For example, this statement relates primarily to the residential aged care sector and does not specifically address the area of community care.

9. This statement responds to the Notice provided under s2(3C) of the Royal Commissions Act 1904 dated 25 January 2019, served on 29 January 2019 and attached as ANM.0001.0001.0011 and in a preliminary way to paragraphs (a) to (f) of the Letters Patent dated 6 December 2018.

Summary

10. In the most summary form the ANMF's position is as follows:

- a. The problems in the aged care sector are well known, well documented and a matter of increasing national disquiet and concern. The ANMF has over many years drawn attention to the shortcomings in the system, highlighting to governments, regulatory bodies, key stakeholders, the media and the community critical issues related to the quality of care delivery.
- b. The shortcomings and instances of inadequate care are not isolated, they are not exceptional but reflect systemic problems in the structure of the aged care system, including: inappropriate regulation of the sector; a lack of responsiveness to the changing needs of Australia's ageing population; and, a lack of transparency and accountability across the sector.
- c. The legitimate expectations of those in receipt of residential care, their families and the community to receive safe, quality care can be met by the provision of safe nursing care (including personal care) delivered by best practice.
- d. Staffing models, which are underpinned by an evidence-based methodology to ensure the provision of adequate numbers of appropriately qualified staff, are fundamental to meeting the needs of residents and the high standards of quality and safety in aged care services of which the Commission's terms of reference speak. Mandated minimum staffing levels and skill mixes are necessary.
- e. The funding and regulatory regime applying to the system must be directed to ensuring that adequate numbers of appropriately qualified staff, in accordance with an evidence-based staffing model, are available to deliver care.
- f. The ANMF has developed an evidence-based staffing methodology that if adopted will, in our view, deliver the levels of safe, best practice care in residential aged care facilities expected by the community.

The problems

11. As a society Australians are living longer and generally remaining healthier. Technological and scientific advances are such that Australians now and into the future expect to be able to experience a good quality of life well beyond retirement age. The 2015 Intergenerational Report projected that within 40 years there will be approximately 40,000 people aged 100 and the number of people aged 65 and over will have doubled in Australia.
12. However, as Australia's aged population continues to grow and live longer, the demand for aged care and related services also continues to grow as Australians are also developing and living with more chronic and complex health conditions. The consequent increased health, nursing and personal care needs of individuals require the preparation and provision of, and the capacity to attract and retain, a sufficient and suitably qualified and skilled workforce.

13. Despite the fact that our elderly are experiencing a range of health and wellbeing issues that demand even more specialised care there are no mandated minimum staffing levels or models for aged care to ensure the elderly receive the care they need.
14. Consequently, many aged care facilities across the country lack both adequate numbers of staff and the appropriate skill mixes of staff to ensure that every elderly person is provided with the safe, best practice care they need.
15. The ANMF has highlighted these issues, since the introduction of the Aged Care Act 1997, to a wide range of government and productivity commission inquiries and, other key investigations of the aged care sector over the last decade. The documents listed in **Section 2** of the Index of Documents attached to this statement are some of the references which reflect the ANMF's concerns with increasing understaffing and increasingly poor outcomes for residents of aged care. Those documents are attached and marked **ANM.0001.0001.0018** to **ANM.0001.0001.0899** (inclusive).
16. In addition to highlighting our concerns to key authorities, the ANMF has sought to engage and generate public debate and discussion of critical areas of concern in order to find solutions for these problems. The documents annexed and marked **ANM.0001.0001.0917** outline our efforts in this regard, and include the ANMF's media releases relating to these concerns from 2009 to the present.

Problems are systemic

17. The ANMF has argued that the shortcomings of the aged care system and the instances of inadequate and substandard care are not isolated, exceptional or occasional. They are systemic, widespread and even the norm.
18. We have argued that chronic understaffing is a key contributor to the increasing number of instances of substandard care because, without legislated requirements in all Australian jurisdictions to mandate a minimum number and type of nursing and care staff, aged care providers are able to employ a decreasing number of nurses. This occurs even though there is a steadily increasing number of residents, many with complex needs that require care from qualified nurses and well trained care workers.
19. The ANMF has argued that better, more transparent staffing structures and requirements are necessary for providers to demonstrate to Government and the Australian community how taxpayers' money is directed to the delivery of safe care to all people in receipt of care.
20. The documents listed in **Section 4** of the Index demonstrate the ANMF's many attempts to bring to the attention of a wide range of authorities with responsibilities for some or many aspects of the aged care system, the multiple factors leading to increasingly poor outcomes for many aged care residents. The material in the list identifies problems and their causes. The documents are attached and marked **ANM.0001.0001.1189** to **ANM.0001.0001.1614** (inclusive).

Safe nursing care

21. Caring for elderly people, especially those with behavioural and psychological symptoms of dementia and other disabling health conditions, is a stressful occupation requiring the right people with the right skills and knowledge to develop and implement holistic care plans customised to individual needs. This means that to ensure safe care for aged care residents it is critical to have the right skills mix of nurses and well trained care-workers.
22. Registered nurses are educated to detect early signs and symptoms of changes in health status, make assessments of appropriate intervention strategies, and institute treatment measures in a timely manner. They are best placed to work with multidisciplinary teams of general practitioners,

geriatricians, palliative care specialists and other health professionals to deliver safe, effective care to the elderly with teams of qualified care-workers. In the absence of nurses, residents face missed or compromised care.

23. Nursing in Australia has adopted the international definition of nursing agreed by the 130 member organisations of the International Council of Nursing:
 - a. *Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles.*
24. This definition has been embedded by the Nursing and Midwifery Board of Australia (NMBA) into the Standards for Practice (the Standards) for both registered and enrolled nurses. Nurses must meet these standards annually to maintain their registration with the Australian Health Practitioner Regulation Agency. The Standards outline the role of the registered and enrolled nurse and the expected standards for their practice across all settings. The Standards are to be read in conjunction with applicable NMBA standards, codes and guidelines, which together comprise the professional practice framework for nurses.
25. Attached and marked **ANM.0001.0001.1630** and **ANM.0001.0001.1640** are the NMBA's standards for practice for registered nurses and enrolled nurses.
26. Nurses have a professional obligation to meet all elements of the NMBA's professional practice framework. However, the current systemic failures of the aged care system are presenting significant challenges for registered and enrolled nurses in balancing the requirement to meet both their professional obligations and their employers' expectations and directives.
27. To provide guidance and advice to our members, the profession generally, and the community, the ANMF has published several series of Fact Sheets, Guidelines, Position Statements and Policies.
28. The documents listed in **Section 6** of the Index are ANMF materials which provide guidance on a range of matters relating to the delivery of safe, best practice nursing care to those for whom nurses care and for nurses in meeting their professional obligations. Those documents are attached and marked **ANM.0001.0001.1648** to **ANM.0001.0001.2010** (inclusive). Any system for the delivery of aged care must recognise and respect in its structure the scope of nursing, the role of nurses and their professional obligations.

Mandated staffing levels and skill mixes

29. Repeated studies nationally and overseas have demonstrated that safe nurse staffing saves lives and that safe care is the right numbers of nurses with the right skills mix of nursing and non-nursing personnel to meet the care required. Care-workers perform an extremely important role in residential aged care and are a critical component of the workforce. They are not however, qualified to provide the level of care that nurses are, which is why the right skill mixes in direct care delivery have been found to be so important.
30. This growing body of research literature has provided the evidence base for skill mixes with the right proportion of registered nurses to produce clinically and statistically significant decreases in pressure injuries, injury from falls, pneumonia, and infections as well as hospital avoidance and re-admission.

31. The literature survey attached and marked **ANM.0001.0001.2082** provides an overview of extensive published Australian and international evidence demonstrating the clear value and impact of nurses upon the provision of safe, effective, and quality health and aged care and improved health and wellbeing outcomes of patients and aged care residents. This evidence highlights the vital nature of nursing and assistant in nursing (however titled) care with a particular focus upon sufficient staffing levels, skills-mix, and the strong relationship between nurses/assistants in nursing (however titled) and better patient/resident outcomes. Published evidence is also available regarding systemic issues in residential aged care, such as the differences in care quality delivered by for-profit versus not-for-profit providers, issues around the transfer of residents to acute care, and public reporting of the quality of care in residential aged care.
32. Attached and marked **ANM.0001.0001.2102** is further evidence, from the ANMF NSW Branch and NSW Nurses and Midwives' Association, of research supporting the efficacy of minimum staffing ratios.

Regulation and Funding

33. Unlike the clear legislation for educator-child ratios and qualifications requirements in child care, the *Aged Care Act 1997*, under its *Quality of Care Principles*, states that approved providers have a responsibility *to maintain an adequate number of appropriately skilled staff to ensure that the care needs of care recipients are met*.
34. The ambiguity in these terms and language means the wording of the Act is open to interpretation. This means that there is no defined staffing standard and aged care providers have no clear guidance on what they are expected to provide in terms of staffing. Equally, there are no clear obligations on providers as the adequacy of staff numbers and the appropriateness of their skills is left uncertain and unenforced. Mandating minimum staffing levels would provide a clear baseline standard for providers.
35. The current funding arrangements are unsatisfactory. They encourage perverse outcomes and fail to direct funding and the accountability of that funding to the delivery of care.
36. The ANMF argues that strong financial performance does not necessarily guarantee high quality or even safe levels of care. While much of the discussion within the sector frequently appears to focus on financial performance, we would argue that financial performance is not an end in itself, nor should it be separated from societal expectations around standards of care. Rather, it is one of many factors which must work together to ensure safe and best practice care for all Australians living in nursing homes.
37. The ANMF has argued that to enable a genuine community oversight of the goals and standards of aged care services, and to ensure they meet human as well as financial standards, better instruments that take account of the multiple factors required for the delivery of safe and best practice care, are urgently needed.
38. The documents listed in **Section 9** of the Index are some of the submissions made, correspondence sent and reports commissioned by the Australian Nursing and Midwifery Federation and Branches over the last two decades in relation to funding and regulation issues. Those documents are attached and marked **ANM.0001.0001.2122 to ANM.0001.0001.3057** (inclusive). These documents highlight the chronic systemic failures of the regulatory frameworks for aged care and continued underfunding for the provision of nursing care in this setting. Well-researched, our submissions detail the extensive regulatory and funding inadequacies and provide recommendations for action.

A model for safe care and best practice – mandated minimum staffing

39. As indicated above, a growing body of national and international research and evidence clearly demonstrates that inadequate levels of qualified nursing staff lead to an increase in negative outcomes for those in their care, which results in increased costs, both personal and financial. In the acute setting, the implementation of safe mandated minimum staffing has been shown to prevent adverse incidents and outcomes, reduce mortality and prevent readmissions thereby cutting health costs.
40. It is widely agreed that the same improvements could be achieved in the aged care sector with the appropriate number and mix of skilled and experienced staff.
41. Recognising the gap in evidence-based staffing and skill mix research for the aged care sector, the ANMF funded and commissioned the National Aged Care Staffing and Skills Mix Research to study the requirement for nursing and personal care staff to meet care needs in residential aged care.
42. The report of this research, *National Aged Care Staffing and Skills Mix Project Report 2016. Meeting residents' care needs: A study of the requirement for nursing and personal care staff* (the Report), provides an evidence-based methodology, which takes account of the time required for direct and indirect nursing and personal care tasks and assessments of residents and the level of care they require, to inform staffing levels and skills mix for residential aged care.
43. The Report recommends that aged care residents require an average of 4 hours and eighteen minutes of care per day, delivered by a skills mix of 30% registered nurse, 20% enrolled nurse and 50% personal care worker. The full report is attached and marked **ANM.0001.0001.3151**.
44. Having established a baseline for staffing requirements to ensure safe care in residential aged care, the ANMF commissioned further work from Flinders University to conduct a cost-benefit analysis of the full implementation of the Report's recommendations: *Financial and cost benefit implications of the recommendations of the national aged care staffing and skills mix final report* (CBA).
45. The CBA's modelling suggests that full implementation of the recommendations of the Report would be benefit cost neutral. The full report of the CBA is attached and marked **ANM.0001.0001.3308**.
46. Having now established the baseline staffing requirements for residential aged care and conducted a cost –benefit analysis of full implementation of the recommended staffing, the ANMF developed an implementation plan (the Plan) to guide governments on how safe staffing in residential aged care can be achieved.
47. The Plan, *Aged Care Ratios Make Economic Sense*, outlines the effect the introduction of minimum ratios and staffing levels will have, the care levels that are required, and an overview of academic and industry analysis making the economic case for minimum staffing ratios in aged care. The Plan also suggests the stages required from 2019 - 2025, and the work for each stage, to develop the skills and workforce required to meet the minimum care levels required for aged care. The full plan is attached and marked **ANM.0001.0001.3341**.

The Notice under s2(3C)

48. The above (and attached) material represents the ANMF's response to the questions/issues identified in the Commission's Notice of 25 January 2019. The questions can be responded to more fully with further time and in the ANMF's further statement(s). However, I particularly note:

- a. Paragraphs 11 - 20, and 33 – 38, respond to the issue of ways in which the system does not meet the needs of people accessing residential aged care nor the needs of the Australian community;
- b. Paragraphs 11 – 20, 33 – 38 and 39 - 47 respond to the issue of how well equipped, or more accurately ill-equipped, the residential aged care system is to meet the future needs of the community;
- c. Paragraphs 10, 11 – 20 and 33 – 38 respond to the issue of whether the reforms of 1 January 2019 will address the concerns with the system, this is because the concerns are not confined to the issues with which the reforms are concerned;
- d. Paragraphs 10, 39 – 47 and 51 identify the most important issues for the aged care system over the next 20 years;
- e. Paragraphs 10, 20, 21 – 32, and 39 – 47, respond to the issue of the changes needed to improve the aged care system;
- f. Paragraphs 10, 21 – 28, and 39 – 47 respond to how the ANMF's suggested changes could be introduced;
- g. Paragraphs 21 – 32, and 39 – 47 respond to what the words 'safety' and 'quality' mean to the ANMF and its members in the context of aged care. Both 'quality' and 'safety' in the context of aged care must be understood in direct relation to the perspectives and preferences of each recipient of care as an individual person, where quality and safety are subjectively experienced. This is a key tenet of 'patient/consumer-centred care'; care that is respectful of and responsive to the needs, preference, and values of patients and consumers. Patient/consumer-centred care goes hand-in-hand with quality, safe care in that it enables partnership with the recipients of care, their family, and carers to provide respect, emotional support, care continuity and transition, physical comfort, information, and communication. To the ANMF, 'safe nurse staffing' in this context is ensuring that recipients of aged care are cared for by enough trained and well-supported nursing staff with the knowledge and correct skills-mix to provide quality care and optimal health and well-being outcomes in partnership with the recipients of care, their families, and carers;
- h. Fostering a national culture of respect for ageing and older persons in Australia is critical to the task of establishing an aged care system of the kind referred to in the Commission's terms of reference. Older Australians are entitled to affordable, accessible and high quality aged care services. They do not deserve the pain and suffering that many of them currently experience because of the flaws in the system, many of which are underpinned by a lack of respect for our elderly population. The measure of a society is how it cares for its elderly, but right now we don't measure up.


Further Statement

49. As explained in the correspondence at **ANM.0001.0001.0003** and **ANM.0001.0001.0008** the ANMF wishes to expand on this statement through a further statement or statements. Necessarily the references to the many attached materials have been in the most summary form.
50. The ANMF has established a high level working group with representatives from each Branch and associated state registered union to develop material for a more comprehensive statement.
51. This statement has not addressed more traditional industrial issues, although they are flagged in the ANMF's letter of 14 January 2019 to the Commission at **ANM.0001.0001.0003**. Those issues do demand the attention of the Commission. The question of wages and conditions, qualifications and educational preparation are closely related to the capacity of the system to

provide safe quality care. They include the following matters that will be addressed in the proposed further ANMF statement to the Commission:

- a. Difficulties of attraction and retention of appropriately qualified staff;
- b. Comparatively depressed wages and conditions in the sector;
- c. Inadequate career opportunities;
- d. Stressful working conditions and poor management practices;
- e. The significance of a female dominated labour force for relative wage disadvantage;
- f. Education and training relevant to the sector for all levels of worker; and
- g. Minimum qualifications for and licensing of third level aged care workers.

(See further the ANMF Submission to the Senate Inquiry: The future of Australia's aged care sector workforce: March 2016 at **ANM.0001.0001.1539.**)



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ANNIE BUTLER
1 February 2019

ROYAL COMMISSION INTO AGED CARE QUALITY AND SAFETY

STATEMENT OF ANNIE BUTLER

FEDERAL SECRETARY OF THE AUSTRALIAN NURSING AND MIDWIFERY FEDERATION

INDEX OF DOCUMENTS

Document ID	Date	Description
Section 1		
ANM.0001.0001.0001	11/01/2019	Letter from the Royal Commission to the ANMF
ANM.0001.0001.0003	14/01/2019	Letter from the ANMF's solicitors to the Royal Commission
ANM.0001.0001.0008	17/01/2019	Letter from the Royal Commission to the ANMF's solicitors and letter from the ANMF's solicitors to the Royal Commission
ANM.0001.0001.0011	25/01/2019	NTG-0020 Notice to Give Information or a Statement in Writing
Section 2 – The Problems		
ANM.0001.0001.0018	05/05/1997	New South Wales Nursing Association letter to Federal Secretary, Judy Uren. Keep the Nursing in Nursing Homes Campaign. 5 May 1997
ANM.0001.0001.0026	08/2004	Australian Nursing Federation. Senate Inquiry into Aged Care. August 2004
ANM.0001.0001.0054	10/2004	Australian Nursing Federation. Submission on the Ageing well, ageing productively strategy. October 2004
ANM.0001.0001.0060	11/2004	Australian Nursing Federation. Submission to the Productivity Commission Research Study: Implications of the ageing of Australia's population. November 2004
ANM.0001.0001.0070	11/2008	University of Melbourne Faculty of Economics and Commerce. Report for the Australian Nursing Federation (Victorian Branch) on Working in Aged Care: Medication Practices, Workplace Aggression, and Employee and Resident Outcomes. November 2008
ANM.0001.0001.0150	06/2009	New South Wales Nurses and Midwives Association. Member Survey on the Review of the Accreditation Process for Residential Aged Care Homes. June 2009
ANM.0001.0001.0162	11/2009	Access Economics Pty Ltd. Report for the Australian Nursing Federation on Nurses in Residential Aged Care. November 2009
ANM.0001.0001.0230	11/2009	University of Melbourne Faculty of Economics and Commerce. Report for the Australian Nursing Federation (Victorian Branch) on Working in Aged Care 2009: Phase Two of the ANF-University of Melbourne Study. November 2009
ANM.0001.0001.0319	07/2010	Australian Nursing Federation. Initial submission to the Productivity Commission Inquiry – Caring for Older Australians. July 2010

ANM.0001.0001.0365	11/2010	University of Melbourne Faculty of Economics and Commerce. Report for the Australian Nursing Federation (Victorian Branch) on Working in Aged Care 2010: Phase Three of the ANF (Vic Branch) -University of Melbourne Study. November 2010
ANM.0001.0001.0525	03/2011	Australian Nursing Federation. Submission in response to the Productivity Commission report on the Caring for Older Australians Inquiry. March 2011
ANM.0001.0001.0559	10/06/2011	Australian Nursing Federation. Letter submission to the Productivity Commission on minimum staffing levels and skills mix arrangements. 10 June 2011
ANM.0001.0001.0579	17/05/2013	New South Wales and Midwives Association. Submission on Care and management of younger and older Australians living with dementia and behavioural and psychiatric symptoms of dementia. 17 May 2013
ANM.0001.0001.0591	30/07/2013	New South Wales Nurses and Midwives Association. Branch Secretary letter to Senator Jacinta Collins, Minister for Mental Health and Ageing. Quality of care, staffing and skills mix in aged care. 30 July 2013
ANM.0001.0001.0593	07/2015	New South Wales Nurses and Midwives Association. Submission. Inquiry into Registered nurses in New South Wales nursing homes. July 2015
ANM.0001.0001.0625	11/2015	New South Wales Nurses and Midwives Association. Submission. Inquiry into Elder abuse in New South Wales. November 2015
ANM.0001.0001.0675	03/2016	Australian Nursing and Midwifery Federation. Submission to the Senate Standing Committee on Community Affairs Inquiry, The Future of Australia's Aged Care Sector Workforce. March 2016
ANM.0001.0001.0719	03/2016	New South Wales Nurses and Midwives Association. Submission. Inquiry into the future of Australia's aged care sector workforce. March 2016
ANM.0001.0001.0763	03/2016	Queensland Nurses and Midwives Union. Submission to the Senate Standing Committee on Community Affairs Inquiry. The Future of Australia's Aged Care Sector Workforce. March 2016
ANM.0001.0001.0787	07/2016	Australian Nursing and Midwifery Federation. National Aged Care Survey. Final Report. July 2016
ANM.0001.0001.0815	31/08/2016	Australian Nursing and Midwifery Federation. Submission to Australian Law Reform Commission Inquiry into Elder Abuse – Issues Paper. 31 August 2016
ANM.0001.0001.0839	08/2016	New South Wales Nurses and Midwives Association. Submission to Australian Law Reform Commission Inquiry into Elder Abuse – Issues Paper. August 2016
ANM.0001.0001.0875	08/2016	Queensland Nurses and Midwives Union. Submission to Australian Law Reform Commission Inquiry into Elder Abuse – Issues Paper. August 2016
ANM.0001.0001.0893	02/2017	Australian Nursing and Midwifery Federation. Letter submission to Australian Law Reform Commission Inquiry into Elder Abuse – Discussion Paper. February 2017
ANM.0001.0001.0899	02/2017	New South Wales Nurses and Midwives Association. Submission to Australian Law Reform Commission Inquiry into Elder Abuse – Discussion Paper. February 2017
Section 3		
ANM.0001.0001.0917	2009-2019	Australian Nursing and Midwifery Federation Media Releases 2009 – 2019

Section 4 – The Problems are Systemic		
ANM.0001.0001.1189	02/2005	Australian Nursing and Midwifery Federation. 2005-2006 Federal Government Pre-Budget Submission. February 2005.
ANM.0001.0001.1201	03/2005	Australian Nursing and Midwifery Federation submission to the Productivity Commission Draft Research Report: Economic Implications of an Ageing Australia. March 2005.
ANM.0001.0001.1209	07/2007	Australian Nursing and Midwifery Federation submission to the Inquiry into the cost of living pressures on older Australians. July 2007.
ANM.0001.0001.1217	01/2008	Australian Nursing and Midwifery Federation. 2008-2009 Australian Government Pre-Budget Submission for Providing a Nursing Workforce for Australians into the Future. January 2008.
ANM.0001.0001.1231	01/2009	Australian Nursing and Midwifery Federation. 2009-2010 Australian Government Pre-Budget Submission for Providing a nursing and midwifery workforce for Australians into the future. January 2009.
ANM.0001.0001.1239	01/2009	Australian Nursing and Midwifery Federation submission to the review of the existing PBS supply arrangements in the context of residential aged care facilities and private hospitals discussion papers. January 2009.
ANM.0001.0001.1247	08/2009	Australian Nursing and Midwifery Federation submission to the Australian Government Department of Health and Ageing on the evaluation of the Residential Medication Management Review (RMMR) Program undertaken by Campbell Research. August 2009.
ANM.0001.0001.1255	11/2009	Australian Nursing and Midwifery Federation submission to 2010-2011 Federal Budget. November 2009.
ANM.0001.0001.1273	01/2011	Australian Nursing and Midwifery Federation submission to 2011-2012 Federal Budget. January 2011.
ANM.0001.0001.1283	07/2011	Australian Nursing and Midwifery Federation submission to Australia's Health Pty Ltd in response to the consultation paper on the Medication Management in Residential Aged Care Facilities Project. July 2011.
ANM.0001.0001.1301	12/2011	Australian Nursing and Midwifery Federation submission to Australia's Health Pty Ltd in response to the second round consultation for the Medication Management in Residential Aged Care Facilities Project. December 2011.
ANM.0001.0001.1311	01/2012	Australian Nursing and Midwifery Federation submission to 2012-2013 Federal Budget. January 2012.
ANM.0001.0001.1321	03/2012	Australian Nursing and Midwifery Federation submission to Senate Community Affairs Committee Inquiry into Palliative Care in Australia. March 2012.
ANM.0001.0001.1339	05/2012	Australian Nursing and Midwifery Federation submission to the House of Representatives Standing Committee Inquiry on Health and Ageing into dementia early diagnosis and intervention. May 2012.
ANM.0001.0001.1351	08/2012	Australian Nursing and Midwifery Federation letter to Therapeutic Goods Administration on review of the Labelling and packaging of medicines. August 2012.
ANM.0001.0001.1355	05/2013	Australian Nursing and Midwifery Federation submission to Health Workforce Australia consultation on Nursing Workforce Retention and Productivity. May 2013.
ANM.0001.0001.1371	10/2015	New South Wales Nurses and Midwives submission in response to Australian Aged Care Quality Agency 'Let's talk about quality' survey. October 2015.

ANM.0001.0001.1385	10/2015	Australian Government Legislative Council General Purpose Standing Committee No.3 Report on inquiry into Registered nurses in New South Wales nursing homes. October 2015.
ANM.0001.0001.1539	03/2016	Australian Nursing and Midwifery Federation submission to Senate Inquiry into the future of Australia's aged care sector workforce. March 2016.
ANM.0001.0001.1582	01/2018	Australian Nursing and Midwifery Federation. 2018-2019 Pre-Budget Submission. January 2018.
ANM.0001.0001.1606	02/2018	Australian Nursing and Midwifery Federation submission to the Inquiry into the Quality of Care in Residential Aged Care Facilities in Australia. February 2018.
ANM.0001.0001.1612	03/2018	Australian Nursing and Midwifery Federation letter to Aged Care Workforce Strategy Taskforce on the Aged Care Workforce Strategy Taskforce Submission. March 2018.
ANM.0001.0001.1614	03/2018	Queensland Nurses & Midwives' Union submission to the Aged Care Workforce Strategy Taskforce on the development of the Aged Care Workforce Strategy. March 2018.
Section 5 – Standards for Practice		
ANM.0001.0001.1630	01/01/2016	Nursing and Midwifery Board of Australia. Enrolled Nurses Standards for Practice. 1 January 2016
ANM.0001.0001.1640	01/06/2016	Nursing and Midwifery Board of Australia. Registered Nurses Standards for Practice. 1 June 2016
Section 6 – Safe Nursing Care		
ANM.0001.0001.1648	02/1997	Australian Pharmaceutical Advisory Council. Integrated best practice model for medication management in residential aged care facilities. ANMF, RCNA, Geriatric Guidelines included in the APAC Guidelines as Best Practice. February 1997
ANM.0001.0001.1670	11/2002	Australian Pharmaceutical Advisory Council. Guidelines for medication management in residential aged care facilities. ANMF, RCNA, Geriatric Guidelines included in the APAC Guidelines as Best Practice. 3 rd Edition. November 2002.
ANM.0001.0001.1764	02/2007	Australian Pharmaceutical Advisory Council. Integrated best practice model for medication management in residential aged care facilities. ANMF, RCNA, Geriatric Guidelines included in the APAC Guidelines as Best Practice. 2 nd Edition. February 2007.
ANM.0001.0001.1783	2018	Allied Health Professions Australia and NSWNMA. 10 Questions to Ask Flyers. 2018.
ANM.0001.0001.1798	2002	ANF, RCN, Geriatric. Nursing Guidelines for the Management of Medicines in an Aged Care Setting. 2002.
ANM.0001.0001.1811	07/2013	ANMF. Nursing Guidelines. Management of Medicines in an Aged Care Setting. July 2013.
ANM.0001.0001.1828	02/2016	NSWNMA. Who will keep me safe? Professional Issues 1. Elder Abuse in Residential Aged Care.
ANM.0001.0001.1848	09/2016	NSWNMA. Solutions from the Frontline. Professional Issues 2. Practical approaches to reduce the risk of abuse in aged and disability services.
ANM.0001.0001.1876	12/2016	NSWNMA. Do Not Disturb. Professional Issues 3. Findings from the NSWNMA Nursing Handover Survey.
ANM.0001.0001.1908	09/2017	NSWNMA. The State of Medication in NSW residential aged care. Professional Issues 4. Results of a NSW Nurses & Midwives' Association member survey.

ANM.0001.0001.1940	Undated	ANMF. Ratios for Aged Care Make them Law Now Fact Sheets. Advice on Understaffing.
ANM.0001.0001.1942	Undated	ANMF. Ratios for Aged Care Make them Law Now Fact Sheets. Advice on Preventing Falls.
ANM.0001.0001.1944	Undated	ANMF. Ratios for Aged Care Make them Law Now Fact Sheets. Advice on Pressure Sores.
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