



Residential and community aged care services: staffing and standards

It is the policy of the Australian Nursing and Midwifery Federation that:

1. The optimum mental and physical health and wellbeing of residents and clients of aged care services is achieved by the care team working together with the residents and clients and their representatives.
2. Nursing care is an integral component of aged care and is provided by the nursing team, comprised of registered nurses, enrolled nurses and assistants in nursing.*
3. In order to ensure that all residents and/or clients are provided with safe, quality care, they must receive initial and ongoing assessment, planning and management of care by a registered nurse. Research¹ identifies that people are being admitted to residential aged care when they are more frail and dependent on services, than before, and that residential aged care facilities are dealing with higher proportions of residents with dementia. Staff are, therefore, dealing with residents who have more complex needs and greater need for registered nurses to be planning their care.
4. Residents and/or clients of aged care services have a right to receive evidence based care provided by appropriately skilled, competent and qualified staff which is matched to their assessed care needs.
5. The employment of a permanent nursing workforce is strongly advocated to provide a resident care environment and a nursing practice environment which promotes safe care, continuity of care and the development of quality relationships between carers, residents and clients. The employment of casual staff is supported only for the short term when staffing levels or the skill mix of the staff is such that resident or client care may be compromised.
6. Fully funded and regulated benchmarks should be established to enable the provision of sufficient staffing and skills mix to meet the assessed care needs of all residents, covering all staff classifications linked to residents' and clients' needs, quality outcomes and reasonable workloads, to minimise the risk to staff health and safety.
7. The provision of nursing care in the aged care sector requires a minimum number of registered nurses, enrolled nurses, and where applicable, assistants in nursing, at an appropriate skill mix. That minimum standard reflects the care needs and acuity of residents and clients and is calculated using sector-wide, union supported methodologies.
8. The supported evidence-based methodology for safe staffing in residential aged services is an average of four hours and eighteen minutes of care per day per resident, with a skills mix requirement of registered nurses 30%, enrolled nurses 20% and carers 50%.²
9. The application of and adherence to, staffing ratios provides a standard for setting a minimum number of qualified staff – registered nurses and enrolled nurses; and care staff – assistants in nursing. Ratios ensure the required skills mix of these staff, capable of providing safe, competent care to meet residents individual needs.
10. Staffing and skills mix ratios should be set in legislation to provide consistency in the delivery of quality aged care across Australia, thereby ensuring certainty for residents and their families that the right numbers of staff, and the right skills mix of qualified staff and carers are available in the facility.

*The term assistant in nursing also refers to care workers (however titled)



11. Registered nurses as clinical leaders must be on-site at all times to detect early signs and symptoms of changes in health status, make assessment of appropriate intervention strategies, plan care, initiate treatment measures in a timely manner and evaluate health outcomes.
12. Registered nurses and enrolled nurses (supervised and delegated to by registered nurses) are responsible for administration of medicines.³
13. A full time director of nursing (or equivalent classification), who is a registered nurse, must be employed in each aged care facility employing nurses to provide clinical governance. This person has a management role and must be available for consultation by nursing staff on clinical and other nursing issues with cover provided out of hours.
14. Registered nurses should be encouraged and supported to take a leadership role and be care-coordinator across their span of duty. There should be systems in place for the enablement of evidence-based practice and for all staff to contribute to the body of nursing knowledge through research.
15. Staffing and skills mix structures in aged care services should provide career pathways that reflect the acquisition of skills and development of competence of the nursing team.

Endorsed September 1994

Reviewed and re-endorsed November 1996

Reviewed and re-endorsed February 2006

Reviewed and re-endorsed May 2009

Reviewed and re-endorsed May 2012

Reviewed and re-endorsed November 2015

Reviewed and re-endorsed August 2018

Reviewed and re-endorsed November 2018

References

1. Australian Nursing and Midwifery Federation (ANMF) National Aged Care Staffing and Skills Mix Project Report 2016. Available at http://www.anmf.org.au/documents/reports/National_Aged_Care_Staffing_Skills_Mix_Project_Report_2016.pdf
2. Ibid
3. Australian Nursing and Midwifery Federation. *Nursing Guidelines: Management of Medicines in Aged Care* 2013. Available at http://anmf.org.au/documents/reports/Management_of_Medicines_Guidelines_2013.pdf

Note: this policy should be read in conjunction with the following ANMF policies/position statements/guidelines which can be found at <http://www.anmf.org.au/pages/anmf-policies>

ANMF Policy on:

- *Role boundaries in the provision of personal care* (February 2018)

ANMF Position Statements on:

- *Administration of medicines* (November 2015)
- *Assistants in nursing providing aspects of nursing care* (May 2018)
- *Registration of assistants in nursing* (February 2018)

ANMF Guidelines on:

- *Delegation by registered nurses* (August 2018)
- *The use of dose administration aids by nurses* (November 2018)