THE TRUTH BEHIND AGED CARE ONE NURSES PERPECTIVE

By

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With the delivery of health care being such high profile at present, and with my belief that as a nurse I am an advocate for my patients I believe the debacle that fronts as Aged Care needs revealing.

To end a new career after just five shifts is not something I ever thought I would do, but I did, and this submission will highlight the reasons why, and expose the farce that is Aged Care. The word care should not be used so prominently, as there is very little care that is achieved either toward the staff or patients.

I am telling my story from a nurses perspective which ultimately impacts on our patients.

Let me introduce myself professionally. I am an Endorsed Enrolled Nurse currently working at a large city hospital. I also travel to rural hospitals to undertake short contracts for Queensland Health. I am passionate about my profession and saddened by how we have become such an oppressed and suppressed workforce, victims of dictatorial management.

I left nursing for 17 years to live overseas and pursue other career options. When I returned I felt like I had been transported to another planet. The career I had left was

orderly, organised, with all staff members valued and respected. What greeted me on my return was chaos, staff shortages, stress leave, bullying, neglected patients, and the word budget was now used more that the term patient care. WHAT HAD HAPPENED?

In the ten years I have been back in nursing these situations have become dire, and I am a prolific letter writer on these topics to nursing magazines. I was so concerned about the blatant bullying I also become a Workplace Equity and Harassment Officer.

Wishing to gain more experience in aged care I joined a nursing agency that specialised in that field of nursing. The agency was professional and communicative during the interview process doing all the necessary checks and welcoming me as a staff member.

But nothing could have prepared me for my first shift. Working in the nursing pool and travelling to other facilities I was used to a new workplace each day. I thought I was adaptable, and nothing could faze me. Boy, was I wrong.

Full of enthusiasm, a lock up dementia unit in a private facility with eighteen patients was my first shift. The type of patients did not worry me, but the amount did. I was in charge of the whole unit, with one Assistant In Nursing (AIN) who luckily knew the patients. I was given the keys to the pill trolley and that was where I stayed. None of these patients wear identifying arm-bands or have names on their doors, although most of them wandered anyway, so identifying who you were given drugs to was a nightmare. The AIN was my only support, and her workload was huge. The first pill round took two hours, the second an hour. I was unable to assist the AIN who single handedly had to get all the patients to the tables for meals, serve their food,

feed those who needed it, clear the tables, get the patients ready for bed, and get them settled. And these were non-compliant dementia patients. She was a hero in my eyes. Although another AIN came on for two hours to assist, she was till frantically busy, and stuck with me who knew no one. Constantly orientating agency staff adds to the pressure of the regular staff.

The lack of staff horrified me. The outward appearance of the facility was attractive to woo potential customers, but staff were at a minimum. There was a Registered Nurse (RN) somewhere on another floor, but her patient load was even bigger than mine. I just had to cope. Which I did in a muddled stressed out kind of way.

Being shell shocked but thinking I just needed to adjust, I persevered. The next four shifts were much the same, and at the last facility I had thirty-four patients. This was production line nursing, this is not what our profession is about. The stress of giving pills to thirty-four high dependant patients and dealing with everything else that happens in a busy unit that you are unfamiliar with at the same time is vast. The inability to be able to offer support to my AIN colleagues was awful Thank god for the AINs who supported me. I cannot praise them enough their work loads are enormous, beyond what anyone should be asked to do. My confidence took a battering, and my blood pressure took a sharp rise, I was expected to cope, which again I did. Just.

What horrified me mostly was not being able to spend time with patients. That is what I do, I am a nurse, a carer, but even in the medical hospitals the quality time spent with a patient is minimal, such is the workload. To me, that is NEGLECT.

How has this been allowed to happened, how have these facilities become so large, with such a minimal number of staff expected to run them. When situations such as this are bought to the public arena, one or two facilities are publicly wrapped over the knuckles and the real cause remains buried. What a cop out! Health Care, or non-care as I call it is a profit driven industry, and as long as it remains profit driven, staff and patients will suffer.

No matter how much chaos governments and management cause through their budget focused health non-care, nurses still do their job. Even when the pressure is unreasonable and unworkable I have seen no mistreatment of patients. All their basic cares are attended to.

But as we know people need more than to be just clean and fed. Especially the frail and the elderly. But who has the time. They are the silent victims. The patients dying alone, because no one can sit with them, the frightened patient who just wants their hand held for comfort. It is an insult to nurses that we are being denied our right to nurse, that we have to comply with ridiculous time and budget constraints. Our hearts are breaking for those in our care. And we are powerless to do anything about it.

The staff at each facility were tired, disillusioned, burnt out. Just look at the amount of nursing agencies springing up. They are as a result of long-term staff members having sick leave, stress leave or resigning.

As a society we need to stop being so bloody budget focused. Any good manager knows that if you just look after you staff, there will be no sick leave, no budgets issue's, no staff attrition. This has been proved in many studies. Businesses that are staff focused make huge profits.

At the last facility I worked I interviewed an RN, and an AIN on their opinion of today's Aged Care. These were some of their comments.

'As a workforce we are totally disillusioned. Although we constantly lobby management for more staff, they are not forthcoming.'

'One long-term staff member was spoken too by management regarding her amount of sick leave she was taking. That night she died of a heart attack. No support from management to the rest of the staff was given regarding the loss of a valued staff member. No-one cares about us, we are just a payroll number on a sheet of paper'.

Both staff member explained that they were constantly put in impossible positions. Although there is a no lift policy in place, it is a joke. With two staff to look after eighteen or more patients there cannot always be both of you on hand to help with lifting equipment, so you do it alone. The people who write these policies need to spend a day in a busy ward to get a reality check. It is impossible to comply with policies when there is chronic under staffing.'

The registered nurse explained that she now has to come in on her days off to complete the necessary paperwork that is required of her as there is no time during the working day. She will be retiring early, as she can no longer work within the system.

The AIN interviewed has worked in the industry for seventeen years and has seen dramatic changes. The patients now are more dependent with the mobility of patients having decreased over the years requiring two staff members for each patient. But instead of increasing staff to cope with demand, staff numbers have actually gone down.

Staff and patients seem to be at the bottom of the health non-care industry list. What a sad reflection of what is supposed to be a care based industry, and as long as we focus on money instead of people it will only get worse.

Do you want a loved member of you family dying alone, and afraid, or maybe, that could be you.

We need to search for the compassion that has been lost, I hope it can be found, or we will continue to lose our humanity, and our ability to be kind to one another. I personally grieve for the nurse I can no longer be, for the comfort I do not have time to give.

Stop making nurses and patients the victims of greed based management. By our very nature we are easy targets, but this has to stop, someone needs to make a stand and turn this despicable reality of current Aged Care back into the caring and compassionate industry it should be.

But who among the legislators has the courage to admit to the flaws in the system and set about making the necessary changes.

While we continue to treat health care as a money-making business we will remain blinded to the damage being done to our aged population and those struggling to care for them.

I make no apology for my plea being so emotive, how can it not be. I know that this submission will probably be swept under the vast 'do not want to know' carpet... where other such pleas have gone. But I pray that somewhere human decency will prevail, and one courageous, noble soul will make a stand and initiate a change that will put the word CARE back into our health care industry.

The End