1. **Are registered nurses employed on site at all times?**
   Most people living in residential aged care facilities have high care needs. If you have been assessed as needing 24 hour nursing care, then the home should provide this. Check if registered nurses (RNs) are on site at all times.

   Yes we do have a Registered Nurse on duty 24/7. Also on Monday to Friday there are CN and RSM as well as CE on site and all 3 of them are Registered Nurses.

2. **How many registered nurses are there on each shift, including nights, weekends and evenings?**
   Remember, residents will be there 24 hours a day 365 days a year. So should the staff. Residents’ care needs do not disappear because it’s night time. Just having a registered nurse ‘available’ or ‘on duty’ does not necessarily mean they are on site. Best practice is that RNs should be on site and on duty all the time. This prevents unnecessary delays in treatment and ensures direct clinical supervision. You wouldn’t visit a hospital and expect to have to contact the nurse by phone.

   We do have A Registered Nurse on site 24 / 7, 365 days a year. So our Residents can be immediately assessed as the need arises. The Registered Nurse on duty also provides necessary clinical supervision.

3. **What is the nurse to resident ratio for each shift?**
   You should know how many RNs, enrolled nurses and AINs (assistants in nursing – however titled) are employed on each shift. Observe if there are enough staff around to supervise people and help them eat, go to the bathroom, socialise and move around. What is the ratio overnight or on the weekend?

   **Monday to Friday**
   AM Shift – 1 RN, 2 ENs, 7 PCW, 2 L&L staff, Plus CN, RSM and CE
   PM Shift- 1 RN, 2 ENs, 4 PCW
   Night Duty- 1 RN, 1 PCW

   The Ratio is the same on weekends and Public Holidays except that there are no CN, RSM or CE on the premises but they are on call most of the time.
4. **Is there a Director of Nursing?**
A director of nursing (however titled) is a registered nurse who provides clinical leadership for the home. There may be a ‘manager’ but are they a registered nurse? A generic manager does not necessarily have the skills and expertise to manage a clinical team and assess the complex health needs of residents.

Chief Executive, Residential Site Manager and Clinical Nurse are all Registered Nurses by profession with extensive experience in Palliative, Dementia, Acute Care as well as Aged Care so they are able to provide clinical leadership to the Home.

5. **Will medications be administered by a registered nurse?**
How are residents’ needs met for ‘as needed’ or ‘when required’ medications such as pain relief? An RN should be on site to clinically assess pain, to give pain relief and monitor its effect. This can only be done safely by a registered nurse.

Not all medications are given by RNs, medications are packed by the Pharmacy and All credentialed staff are able to deliver the medications. All medications are checked by the Pharmacist as well as staff prior medications being delivered. Any discrepancy is immediately reported to the RN on duty and dealt accordingly. Having a Registered Nurse on site 24/7 gives us the ability to do so. If a Resident needs PRN medication the assessment is done prior giving any PRN medications as well as evaluations.

6. **Are there any plans to change the staffing arrangements in future?**
The current staffing arrangements might not be the same in future. Ask if there are any plans to reduce staffing. Make sure your contract specifies the level of staffing that will be provided and whether this includes 24 hour on site registered nurses.

Pennwood has plans to extend a further 20 beds, staffing ratios will be assessed at this point and adjustments made accordingly. Staffing levels at Pennwood are above industry ratios.

7. **Will residents be cared for by the same staff so they get to know them?**
It’s important that staff get to know each resident’s needs and preferences. Residents are reassured by familiar faces. Ask some staff how long they’ve been working there. High turnover indicates staff are unhappy in their work.

Pennwood enjoys low staff turnover and sick leave therefore there has been no need for agency staff. As such residents have strong and familial relationships with our staff. Our Residents are so accustomed to our own staff who do understand their care needs as well as their personal needs.
8. **How will changes to my health be managed?**
Most people in residential aged care facilities have complex healthcare needs. It is important to have skilled RNs to optimise health and identify deterioration. Also to provide timely interventions preventing unnecessary hospitalisations for conditions that can be more appropriately managed at the facility.

As previously mentioned our qualified staff – RNs and ENs are present on site 24/7. They have been long term nurses as well as some younger nurses that have been with us for more than 12-24 months. They have been mentored by our CE, RSM, CN and other RNs. The RSM and CN are also readily available by the phone to provide further support. The support is also well established and evident in our systems, processes, policies and procedures.

9. **What minimum training do the AIN/care workers/care service employees have?**
These workers are unlicensed. They provide most of the care but their level of training is determined by the home’s operator. Ask what basic training they receive.

All of our PCW do have Certificates III in Aged Care or Certificate III in Individual Support with a Dementia Certificate. They also receive on the job training through the orientation and ongoing, inhouse WHS training, credentialing for Medication Management as well as Aged Care Training to ensure skills remain current and relevant.

10. **What ongoing training programs are offered to staff and what qualifications do they possess?**
It’s important that staff have had training on keeping people safe, clinical care and compassionate care. There are no minimum training requirements for workers once they are employed, so it is important for you to know what training they are offered.

The compulsory trainings – Manual Handling, Fire and Safety training, First Aid and CPR, Food safety, are organised by our CN as well as ongoing training as the needs do arise eg following Audits, some incidents.

The RNs and ENs are encouraged to attend outside training as well eg MAC

We are moving towards having Aged Care Channel for our training needs as well.