

Registered Nurses changing practice into Aged Residential Care.

What should nurses professionally consider when changing their context of practice to work in Aged Residential Care facilities?

Aged Residential Care (ARC) includes the following types of long-term care provided in a rest home or hospital:

- Rest home care
- Continuing care (geriatric and medical hospital)
- Dementia care
- Specialised hospital care (psychogeriatric care)
- Other contracted services may also be provided in ARC facilities i.e. ACC contracts, health recovery bed patients, mental health beds, short-term respite care, convalescent care, and disability support services.

Note: Long-term residential care does not include independent living in a retirement village or apartment.

Nurses should use their professional judgement to assess risk and determine what is reasonable in current circumstances and ensure they are safe and competent to practice, as able, in the changed context of practice.

Each nurse should reflect on and assess their professional competence and capability to safely deliver care in the changed practice context in which they are being asked to work.

Competence is the combination of knowledge, skills, attitudes, values and abilities that underpin effective performance in a profession.

When considering competence and capability for a new clinical practice context, it is important nurses reflect on their recent experience, current skills, and knowledge.

Nurses can support the safe application of their current skills, knowledge and experience in a new practice context by:

- Reflecting on the purpose of the change, the skills they bring to the new practice environment and any knowledge or practice gaps that will need increased support.
- Collaborating, communicating early and regularly seeking support from senior staff when gaps are identified.
- Engaging in reflective practice and regularly seeking feedback from nursing leadership and colleagues.
- Seeking out opportunities to refresh knowledge and upskill in unfamiliar areas of clinical practice.
- Reading and applying local clinical practice guidelines, policies and procedures.
- Reading and referring to professional documents, such as the NZNO Standards for Gerontological Nursing, NCNZ Standards for Practice, the NCNZ Code of Conduct and International Council of Nurses' (ICN) Code of Ethics to guide their practice.

Differences to be particularly aware of as a Registered Nurse in ARC:

- Policies and procedures on site ensure the RN is safely able to manage the direction and delegation for the care giving teams. You need to work collegially and openly with the care assistants so there is an open flow of communication. This ensures you can manage the larger number of residents per RN than the acute setting, safely.
- ARC facilities are treated as residents' homes and such we respect their choices, rooms and belongings.
- Many residents requiring 24 hour care have a life limiting condition and the approach to their care is a palliative one. This is a very different approach to an acute care setting where the focus is restorative or curative.
- Advanced care plans are in place for the majority of our residents These care plans are important and reflect the agreed wishes of our residents.
- Ensure awareness and understanding of the resident's goals of care, particularly with regard to hospital transfer decisions and end of life care.
- Most ARC's have an electronic medication management system. For safe practice ensure you are given the training required to effectively use these systems.

Relevant legislation, regulations, standards and guidelines

NZS 8134.0:2008 Health and Disability Services (General) Standard
NZS 8134.1:2008 Health and Disability Services (Core) Standards
NZS 8134.2:2008 Health and Disability Services (Restraint Minimisation and Safe Practice)
NZS 8134.3:2008 Health and Disability Standards (Infection Prevention and Control) Standards
Health and Disability Services (Safety) Act 2001
Ministry of Health New Zealand guidelines for health professionals and residential aged care
Age-Related Residential Care Agreement (ARRC) and the Aged Residential Hospital Specialised Services (ARHSS) Agreement
Guidance for prevention and controlling COVID-19 outbreaks in New Zealand aged residential care (Health, Quality and Safety Commission New Zealand)
World Health Organisation – COVID-19
Centres for Disease Control and Prevention – nursing homes
BE SAFE Australian Government Department of Health
Communicable Diseases Network Australia (CDNA) and adapted for New Zealand.

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