LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON HEALTH AND COMMUNITY WELLBEING
Mr Johnathan Davis (Chair), Mr James Milligan MLA (Deputy Chair),
Mr Michael Petterson MLA

Submission Cover Sheet

Inquiry into Recovery Plan for Nursing and Midwifery Workers

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Standing Committee on Health and Community Wellbeing,
ACT Legislative Assembly,
GPO Box 1020, Canberra ACT 2601

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HCCA submission to ACT Legislative Assembly Inquiry into Recovery Plan for Nursing and Midwifery Workforce

Thank you for the opportunity to provide consumer input into the ACT Legislative Assembly's Inquiry into the Recovery Plan for Nursing and Midwifery Workers.

Health workforce is a core issue of interest for consumers and of members of our organisation. Nursing and midwifery staff are highly valued in the community, and make up a significant portion of the overall health workforce in Australia. We consider investing in nursing and midwifery workers is an investment in patient safety.

Sustainable nursing and midwifery workforce levels are key to safe, high quality health care. It can decrease length of stay in hospital and reduce the number of adverse events.

We hope our feedback is helpful for the Committee, and are happy to clarify any of the information we have provided in our submission.

Yours sincerely,

[redacted]

Darlene Cox

Executive Director

25 January 2023

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HealthCare Consumers

SUBMISSION

ACT Legislative Inquiry into Recovery Plan for Nursing and Midwifery Workforce

25 January 2023

Feedback Summary

Investing in nursing and midwifery workers is an investment in patient safety

We know that both our nursing and midwifery workforces are an integral part of our healthcare system in the ACT. Our nurses and midwives are likely to have the most frequent interactions with consumers in some of their more significant healthcare experiences, including maternity, emergency treatment, surgery and outpatient care. Because of their frequent interactions with consumers, nurses and midwives play a very important role in healthcare delivery, quality and safety, and in helping prevent adverse events[1].

Impacts of the COVID -19 pandemic

During the COVID-19 pandemic, nurses and midwives have been the backbone of our health care system, and have also faced significant workforce challenges over this time. Ongoing workforce shortages have been amplified by circumstances such as COVID isolation requirements, issues relating to lockdowns and extra caring responsibilities, and increased burnout across the health workforce[2]. This has led to serious issues of burnout.

Burnout is defined by the World Health Organisation as the ineffective management of workplace stressors which culminates in emotional exhaustion, depersonalisation and feelings of reduced professional accomplishment[3]. The impact of burnout in the health workforce contributes to staff turnover, but also a range of other personal impacts, which can flow on to the workplace. These include illness, psychological distress, compassion fatigue and risks to healthcare consumers which can impact on a decreased capacity of the nursing and/or midwifery workforce in care delivery. This can all impact on the delivery of effective, safe and high-quality care[4],[5].

We are aware that there is a nursing workforce shortage across Australia[6],[7] and some mechanisms nationally have been put in place to help rectify this situation to meet both current and future needs, especially in relation to training and education. The goal in the ACT needs to be to plan a sustained recovery for the nursing and midwifery workforce that takes into account the additional and significant impacts of the continuing COVID-19 pandemic.

Improving patient health outcomes

We know there is clear evidence that skills mix amongst nurses and midwives can have a profound impact on patient outcomes[8],[9]. A reduction in skills mix has been demonstrated to contribute to preventable deaths, erode quality and safety of hospital care and contribute to hospital nurse and midwife shortages. This is an area of concern for consumers as we do not want workforce shortages to adversely impact the quality and safety of care we receive.

Based on feedback we received, issues to be considered as part of a nursing and midwifery recovery plan in the ACT may include:

For nurses and midwives:

- facilitating staff to work to their full scope of practice
- providing opportunities for developing/expanding scope of practice
- ensuring that policies and procedures do not impinge on appropriate clinician judgement and decision making
- being creative about implementing pathways to encourage older staff with significant experience and expertise to be retained rather than retire – eg. opportunities for mentoring, part time work, change of schedules[10]
- providing options for work in a variety of models of care that can suit life stages and work preferences (eg. flexibility for returning to work from illness, or maternity leave, or recognition of other personal caring responsibilities)
- acknowledging that burnout and compassion fatigue puts patients at risk, and putting mechanisms in place to help address these issues for our workforce.

More specifically for midwifery workforce

- endorsing credentialled, privately practicing midwives to work from ACT public hospitals (noting that this is already in place in other states).
- supporting genuine culture change, including provision of active and ongoing mentoring/counselling for staff (particularly in management) to guide lasting change in attitudes and behaviours.
- improving relationships between senior management and front line staff (recognising there have been perceptions of a lack of support and compassion in some areas). Fostering psychological safety is important for positive outcomes for both staff and consumers.
- returning the options for midwifery students and midwives to practice the theory taught of women centred, midwifery-led models of care in the ACT, and increase morale, to support normal, low risk and family centred births as part of the birthing options available for consumers in this region.

About HCCA

The **Health Care Consumers' Association (HCCA)** is a health promotion agency and the peak consumer advocacy organisation in the Canberra region. HCCA provides a voice for consumers on local health issues and provides opportunities for health care consumers to participate in all levels of health service planning, policy development and decision making.

HCCA involves consumers through:

- consumer representation and consumer and community consultations;
- training in health rights and navigating the health system;
- community forums and information sessions about health services; and
- research into consumer experience of human services.

HCCA is a Health Promotion Charity registered with the Australian Charities and Not-for-profits Commission.

[1] For example: Oldland, E., Botti, M., Hutchinson, A.M., Redley, B. (2020) A framework of nurses' responsibilities for quality healthcare. Collegian, Volume 27, Issue 2, 150-163.
[2] For example, issues outlined at https://www.pwc.com.au/important-problems/business-economic-recovery-coronavirus-covid-19/australian-healthcare-workforce.html
[3] WHO news - Burn-out an "occupational phenomenon": International Classification of Diseases (2019) https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases
[4] Mannix, K. (2021) The future of Australia's nursing workforce: COVID-19 and burnout among nurses. *The Future of Work Lab for the Women at Work* series, University of Melbourne.
[5] Twigg, D., Duffield, C., Thompson, P.L. & Rapley, P. (2010). The impact of nurses on patient morbidity and mortality–the need for a policy change in response to the nursing shortage. Australian Health Review.
[6] Tamata, A. T., & Mohammadnezhad, M. (2022). A systematic review study on the factors affecting shortage of nursing workforce in the hospitals. Nursing Open, 00, 1– 11.
[7] Mannix, K. (2021) The future of Australia's nursing workforce: COVID-19 and burnout among nurses. *The Future of Work Lab for the Women at Work* series, University of Melbourne.
[8] For example, Aiken LH, Sloane D, Griffiths P For the RN4CAST Consortium, et al. (2017). Nursing skill mix in European hospitals: cross-sectional study of the association with mortality, patient ratings, and quality of care. BMJ Quality & Safety; 26:559-568.
[9] Twigg, D., Kutzer, Y., Jacob, E., & Seaman, K. (2019). A Quantitative Systematic Review of the association between nurse skill mix and nursing-sensitive patient outcomes in the acute care setting. Journal of Advanced Nursing. 75.
[10] Also see ideas outlined in: Twigg, D. & McCullough, K. (2014). Nurse retention: A review of strategies to create and enhance positive practice environments in clinical settings. International journal of nursing studies.