

Discussion sheet 8:

Staffing requirements

The current SRS regulatory scheme is being updated. Changes are proposed to the existing scheme to enhance protection for people living in SRS and to ensure the scheme is contemporary and provides flexibility to meet the needs of the industry into the future.

Staffing is an area of great interest to a number of stakeholders with discussion regarding staffing levels, staff training and qualifications and staff attributes raised in submission to the review. The challenges the sector experiences in attracting, recruiting and retaining suitably qualified staff is evident in both metropolitan and rural areas.

What we know

- The skills, competency and attributes of key staff are critical determinants of the quality of services received by SRS residents. Current requirements are for a personal care coordinator (PCC) is to have a minimum of a certificate III, with an additional requirement for proprietors to ensure that adequate and appropriately trained staff are employed in the service.
- There is no explicit legislative requirement for trained staff to be on duty on the weekend to support residents' care needs and no requirement for staff to be trained in first aid. Both of these issues have been identified as gaps in the legislation.
- Although the *Health Services Act 1988* specifies that the proprietor of an SRS must 'ensure that adequate and appropriately trained staff are employed in the service', there is no legislative requirement for the PCC to demonstrate maintenance of competency or satisfy continuing education standards, although funding guidelines for the Supporting Accommodation for Vulnerable Victorians Initiative (SAVVI) have set requirements for a certain number of staff training hours to be completed as a condition of funding.
- Over 30 per cent of submissions raised issues regarding staffing levels, training, qualifications and staff attributes. A range of these expressed concerns that current requirements were not adequate, with many of these views based on experiences at individual SRS. This included concerns regarding both the number of staff employed and their level and scope of expertise. Other submissions, however, suggested that current regulatory requirements regarding staffing were sufficient and no changes were required.
- Increasing minimum qualifications across the entire sector could be expected to provide some general improvements in some aspects of SRS service provision, however, there is insufficient hard evidence to support such 'blanket' increases.
- Some stakeholders advocate such increases in the belief that this will address perceived shortcomings in current care provision, however, issues pertaining to staffing represent a small proportion of breaches identified by the department.

- SRS are not intended to assume full responsibility for managing complex clients (for example, clients with complex mental health conditions require ongoing support from mental health professionals), and increasing basic PCC qualifications would not diminish the need for specialist support where a resident's needs were beyond the standards of accommodation and personal care that SRS can reasonably be expected to provide.
- SRS proprietors have reported difficulties recruiting and retaining staff, particularly in the pension-level sector and rural areas, and staffing costs have been identified as the major cost incurred in the operation of SRS. Any increase in staff qualifications would result in a range of additional costs and potentially increase the difficulty in attracting and/or retaining staff to SRS. It would reduce the supply pool from which staff could be drawn, and could also result in current staff who are unwilling and/or unable to complete further qualifications leaving the sector.
- This combination of financial and workforce factors would be likely to result in SRS closures, particularly in the pension-level (and possibly the middle market) segments, which currently struggle to remain viable. As such, a blanket increase in qualification requirements might counter the gains made through SAVVI and potentially place greater strain on the limited supply of low-cost supported accommodation currently available in Victoria.

New directions – proposals for legislative reform

In considering options for reforms to staffing requirements, a range of factors were taken into consideration, including the extent of the identified concerns (which were not sector wide) and the broader workforce and resource implications of any sector-wide change in staffing requirements. The need to develop sustainable approaches was also identified as a priority in this area and non-regulatory strategies such as continuation of the department-subsidised training program will be important in improving the overall staffing capacity of the SRS sector.

It is proposed that current legislative requirements regarding staffing be retained, but expanded to include additional requirements for weekend staff, first aid training and ongoing training of PCCs.

Proposal: To add a requirement to employ a member of staff with a minimum qualification of certificate III, to be on duty for a minimum of 7.5 hours on each day of the weekend.

Currently, every SRS employs certificate III staff or higher on weekdays but it is understood that some SRS do not have staff with such qualifications employed over weekends. It is considered important that residents have access to such staff for the entire week to respond to residents' care and support needs. It is proposed that there be a new statutory requirement for a staff member with a minimum of certificate III qualifications to be employed for a minimum of 7.5 hours on each day of the weekend. This is considered to be in addition to the requirement for PCCs to be employed for 38 hours during the week.

For those SRS that currently employ only unqualified workers on the weekend, this requirement may mean some additional costs to proprietors.

Proposal: Add a statutory requirement to ensure that at least one member of staff on duty at all times has first aid training.

First aid training has become a minimum staffing requirement in many other human service areas and it is proposed that this be incorporated as an additional staffing requirement for all SRS. This proposal means that at least one member of staff on duty at any time (day and night) must have training in the following areas at least every three years:

- emergency life support and cardiopulmonary resuscitation (CPR)
- convulsions
- poisoning
- respiratory difficulties

- management of severe bleeding
- injury and basic wound care.

A number of SRS are likely to have existing staff with first aid training as it is an elective unit of study within certificate III and IV in aged care. For others who have no staff with first aid training, this additional requirement is expected to impose a small cost on proprietors. It is estimated that training and backfill for a two-day course will cost approximately \$440 per service. The cost will be less in subsequent years as staff need only complete a refresher course in first aid.

Proposal: As a condition of registration, add a statutory requirement that the PCC is to attend approved training in specified areas.

There is a need to address gaps in staff competencies that have been identified both through this review and through the department’s regulatory activities. Key areas include:

- medication management
- care planning and information management
- working with clients with complex needs/disabilities.

Improving staff competencies will be achieved through a requirement for all PCCs to complete approved training in specified areas of practice every three years.

The specified areas of practice and appropriate training programs would be identified following consultation with the sector and approved by the departmental Secretary.

Some of these competencies may involve completing identified certificate IV modules. The delivery of training could also be provided as part of the department’s current training program, thereby providing readily available, low-cost access to training for SRS staff and addressing a key barrier to staff development in the SRS sector.

This proposal would build and maintain the overall capability of PCCs across the SRS sector in the following ways:

- It would increase the educational requirements for key SRS staff and target training effort to areas of identified need. It would allow flexibility for these to be altered over time as the sector evolves and/or for training to be tailored to sub-sections of the SRS sector.
- It would establish ongoing requirements to maintain competency, rather than a one-off qualification.
- It would reduce the costs of compliance for SRS proprietors and staff, and access to ongoing continuing education and training would potentially act as a workforce attractor.
- It would potentially provide a means through which key SRS staff could also be encouraged to further upgrade skills and develop those attributes that are considered to optimise service provision.

The option of specifying staff qualification and training standards as a requirement of registration will also be explored as part of the drafting process. This would establish a more direct link between these requirements and the maintenance of registration, with failure to meet them as explicit grounds for withdrawing registration.

Many SRS staff already attend the department’s training program. In 2007–08, over 50 per cent of services attended at least one course and 30 per cent of services attended two or more courses throughout the year.

What's new?

The table below summarises the requirements that will be retained from the current regulatory scheme and the new requirements being introduced.

Status	Requirements
Retained	Proprietors ensuring that adequate and appropriately trained staff are employed in the service will be retained in the legislation. <i>Anticipated date of effect: current, and to be included in the new legislation.</i>
Retained	All existing minimum staffing requirements will be retained. <i>Anticipated date of effect: current, and to be included in the new legislation.</i>
New	SRS must have a member of staff with certificate III qualifications on duty over the weekend (7.5 hours over each day). <i>Anticipated date of effect: 12–18 months after the legislation is passed.</i>
New	SRS must have a staff member on duty at all times who has had first aid training. <i>Anticipated date of effect: 12–18 months after the legislation is passed.</i>
New	Proprietors must, as a condition of registration, ensure that the PCC attends approved training in specified areas identified in a Guideline issued by the Secretary. <i>Anticipated date of effect: 12–18 months after the legislation is passed.</i>

Implementation

The proposals for additional staffing requirements will be contained in new regulations. These will be developed after the new legislation has been passed. This means they will come into effect approximately 12–18 months later. From that time proprietors will be expected to ensure PCCs meet the ongoing requirements.

Frequently asked questions

Q.1 What qualifications are staff required to have?

A. The personal care coordinator (PCC) is required as a minimum to hold a certificate III in aged care or community services (or equivalent). Also, there must be someone on the roster at weekends who has this qualification (whether or not they are the PCC). The roster must still include 38 PCC hours during the week.

Under the new proposals there must a staff member on duty/sleepover at all times who holds a first aid certificate and who can perform CPR.