

# ‘ I’m not just a visitor’

**Blended Learning Networks focusing on family carers’  
experiences and need of support in a residential or a nursing  
home context.**

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# Content

- Blended learning networks (BLN) – A partnership method for change
- Family carers' experiences and needs/preferences for support in relation to Residential/Nursing Home context as expressed in BLN

# Blended Learning Networks (BLN)

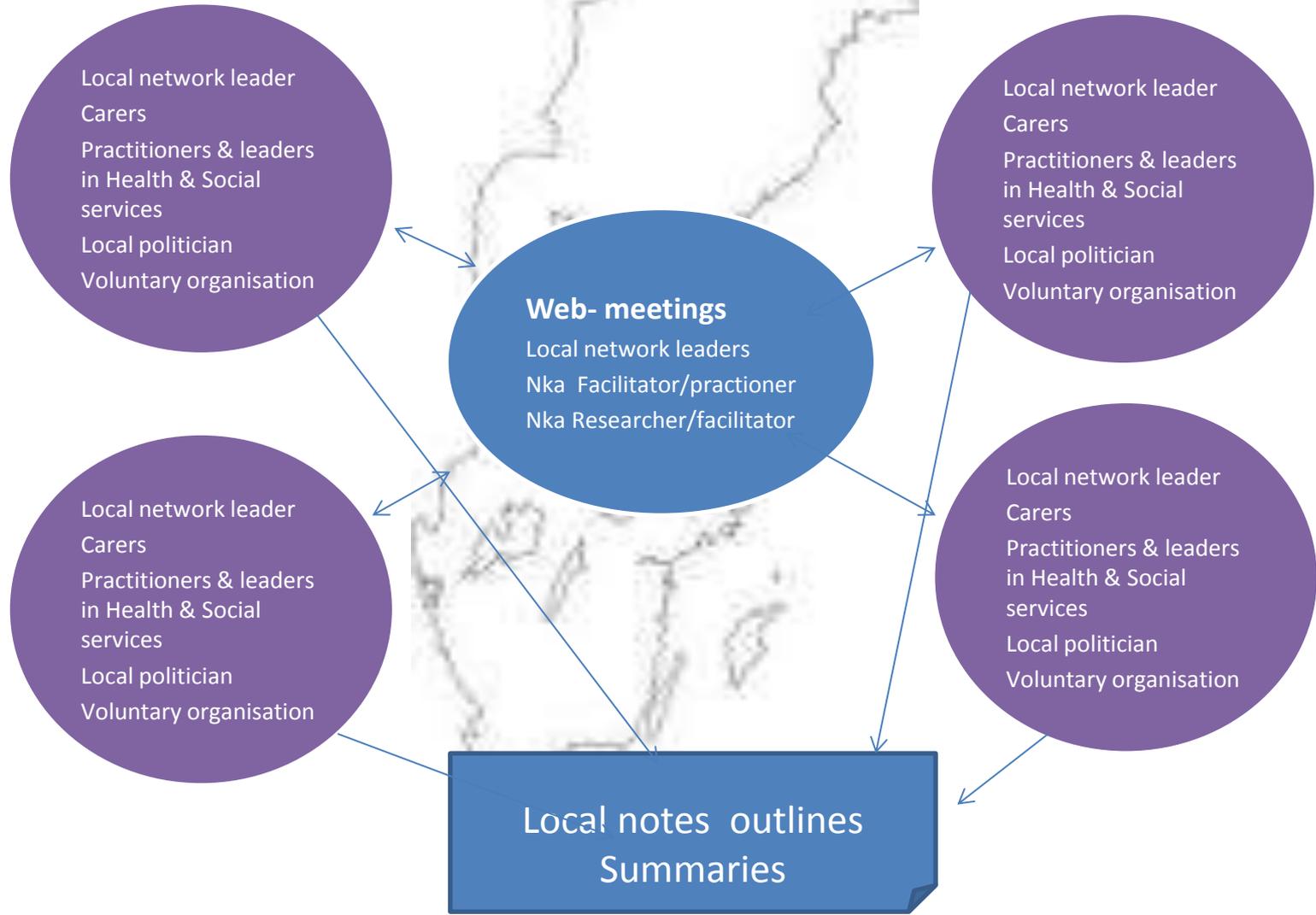
- A heterogeneous Community of Practice involving people with various backgrounds and different experiences. Participants share a common interest and work together to achieve a common goal.
- Participants support and learn from each other to make use of relevant research and development results within everyday practice and/or their own organization. Hanson et al. (2011), Nolan et al. (2003)

**Local BLN:  
10-14 partners contribute to the  
discussion with knowledge and  
experiences.**



- Carers' first-hand experiences
- Practitioners and managers within health and social care services
- Organizational and policy knowledge amongst decision makers
- Voluntary organisations

# The organization of BLN



## Older family member's relocation into a Nursing Home (NH) - a carer transition process

- Carers' involvement in making the decision about relocation to NH for an older family member
- Carers' involvement in making the move into the NH
- Carers' adjustment into NH as a permanent living arrangement for an older relative
- Carers' and reorientation

Sandberg, J. (2001)

## 'Making the decision' phase

### Carers' experiences expressed in BLN

- Carers expressed constraints, insecurity, exhaustion, ill-health. *"I've come to the end of my rope"*
- Feelings of grief, worry, guilt and powerlessness.
- Having to face, deal with and understand often unfamiliar concepts and issues, eg. application procedures, assistance, social services decision making etc.

## What is missing and what do carers request?

### Carer support focusing the 'decision making phase':

- A need to know & learn
  - about the social- and elder care organization, local NHs available and introduction information.
  
- 'Hands on' help to fill in
  - applications, forms, notifications
  
- Be given information & updates
  - regarding the NH's decision process

Continued...

## Carer support focusing `decision making phase`

- Individual contact person
  - Someone carers learn to know by name
- Given opportunity
  - to view, visit and assess different eligible NH's
- On a regular basis
  - be invited to individual and carer support groups
- Be given time
  - to get used to the idea of the NH arrangement when the formal decision is made by social services

## 'Making the move phase'

# Carers' experiences expressed in BLN

### ☐ Feelings and emotions

- Grief, guilt, void, self-blaming thoughts of not having tried hard enough, worry, concern, apprehension about what the changed living arrangement will bring related to quality of care and finances (costs & expenditures).
- Knowing one's relative is taken good care of by staff is a relief and gives the carer a feeling of security

### ☐ The geographical move

- Planning and practical tasks related to the NH relocation are important and allow carer also to get to know the staff and fellow residents

# What is missing and what do carer request? Carer support focusing 'Making the move phase'

❑ Information : oral, written,  
internet based etc

- details about the NH's premises, locality, flat/room .
- about what is expected of new residents and how to get in contact with staff
- all about the relatives illness, treatment, prognosis, risks and rehabilitation for all involved, staff included

❑ Someone to turn to

- Having a contact-nurse assigned to whom the carer always can turn to and who can explain, inform and support all parties involved

## Carers experience focusing 'Adjustment to NH phase' -A home as well as a workplace

- The NH context turns into a new place where carers, families, relatives and friends will find ways to meet and socialize.
- The relationships with staff are essential and are developed over the course of time; continuity is important
- Having assurance that things will be carried out in a way the relative needs, also in the absence of the carer, is a condition for carers giving up some of the caring responsibility for the relative

# What is missing and what do carers request?

## Carer support focusing 'Adjustment to NH phase'

### Care plan meetings

- Receive written invitations including aims and issues that will be discussed as well as summaries focusing on what was discussed, decided and how to evaluate or follow up.

### NH Staff

- Visible NH nurse/leader, easy to be in contact with on a daily basis
- Be able to tell and get staff's 'hands on' help to document the resident's personal life story

### To be involved

- Be invited to contribute with carer's perspective in public information contexts held by NH staff or organization as well as in developmental teamwork related to NH's activity and change

### The community carer support

- continues to initiate and organize meetings for carers with a supportive aim also when the relative no longer lives at home

*"I'm not just a visitor -she's my wife and this is our new way of life together until the end"*

- Finding new routines in daily life and combining how and when to meet and be together with one's relative
- Worrying thoughts about what the future will bring pops up. *"You have to live one day at a time"*

# What is missing and what do carers request?

## Carer support focusing 'reorientaton phase'

- Carer support
  - Implementation of individual/group support
  
- Initiate development of collaboration
  - between social and health care services as well as voluntary organizations and education course activity
  
- Development of information material related to end of life issues
  - Invitation to meet with staff to talk about the relative's life and death



# Thank you!

## Information and contact:

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