

Togetherness From Meaningful Relations In Long-Term Care.

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BACKGROUND:

Participation of residents and their families in long-term care facilities does not come naturally. Nurses often do not see promoting it as their task. We hypothesised that participation of a resident and his family, and meaningful caring relationships are interrelated.

METHODS:

In 2021, we started a participatory action research and gradually involved five sites. Local working groups searched for pitfalls and opportunities to strengthen care relationships. Data were collected through ‘small talks’, interviews, observations and questionnaires and were qualitatively and quantitatively analysed.

RESULTS:

Caring facilities preferred to focus on move-in process of new residents. Residents, families, professionals and volunteers reported to value togetherness and meaningful relationships. Organisations, employees, and families mainly used one-way communication, step one of the stairway to participation (Fig. 2). Regarding implementation of innovations in care, organisations and employees used to work with single actions. Furthermore there were many regulations and rules, cultures and behaviours, which seemed to prevent professionals from wanting and daring to experiment with new behaviours. We found the theory of caring relationships (Fig. 3) helpful to identify the characteristics of meaningful relationships and developed a new resident journey, combining better work processes with relationship optimisation (Fig. 4).

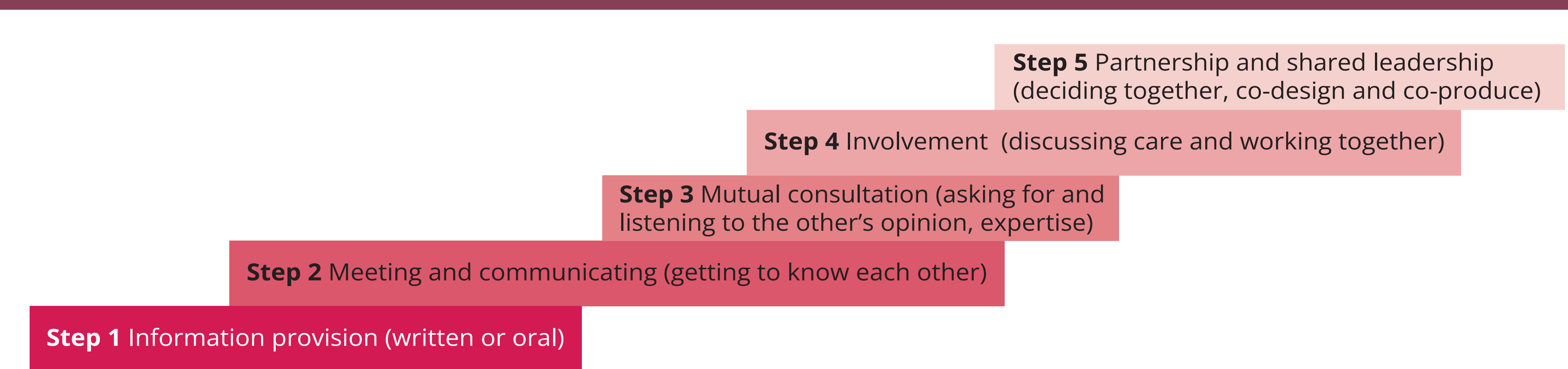


Figure 2. Stairway to participation in daily life and direct care (Based on Carman et al. (2013) A Multidimensional Framework For Patient And Family Participation In Health And Health Care)

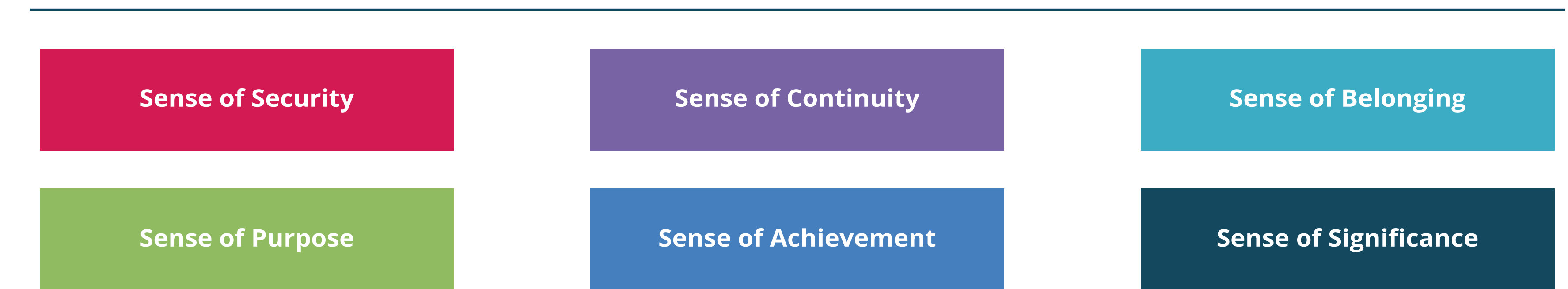


Figure 3. The Six Senses in the Context of Caring Relationships (Nolan et al (2006) The Senses Framework: Improving Care For Older People Through a Relationship-Centred Approach)

CONCLUSIONS AND IMPLICATIONS:

Those involved in the relationship triangle in long-term care value togetherness and meaningful relationships. This may facilitate patient and family participation, but only in appropriate organisation culture and structures, where care professionals are allowed to experiment and learn, and innovations are embedded in work processes along with a focus on optimisation of relationships.

AIM:

To promote participation of residents, family and caregivers in daily life and direct care in long-term care facilities, by togetherness from meaningful relationships within the relationship triangle (Fig. 1).

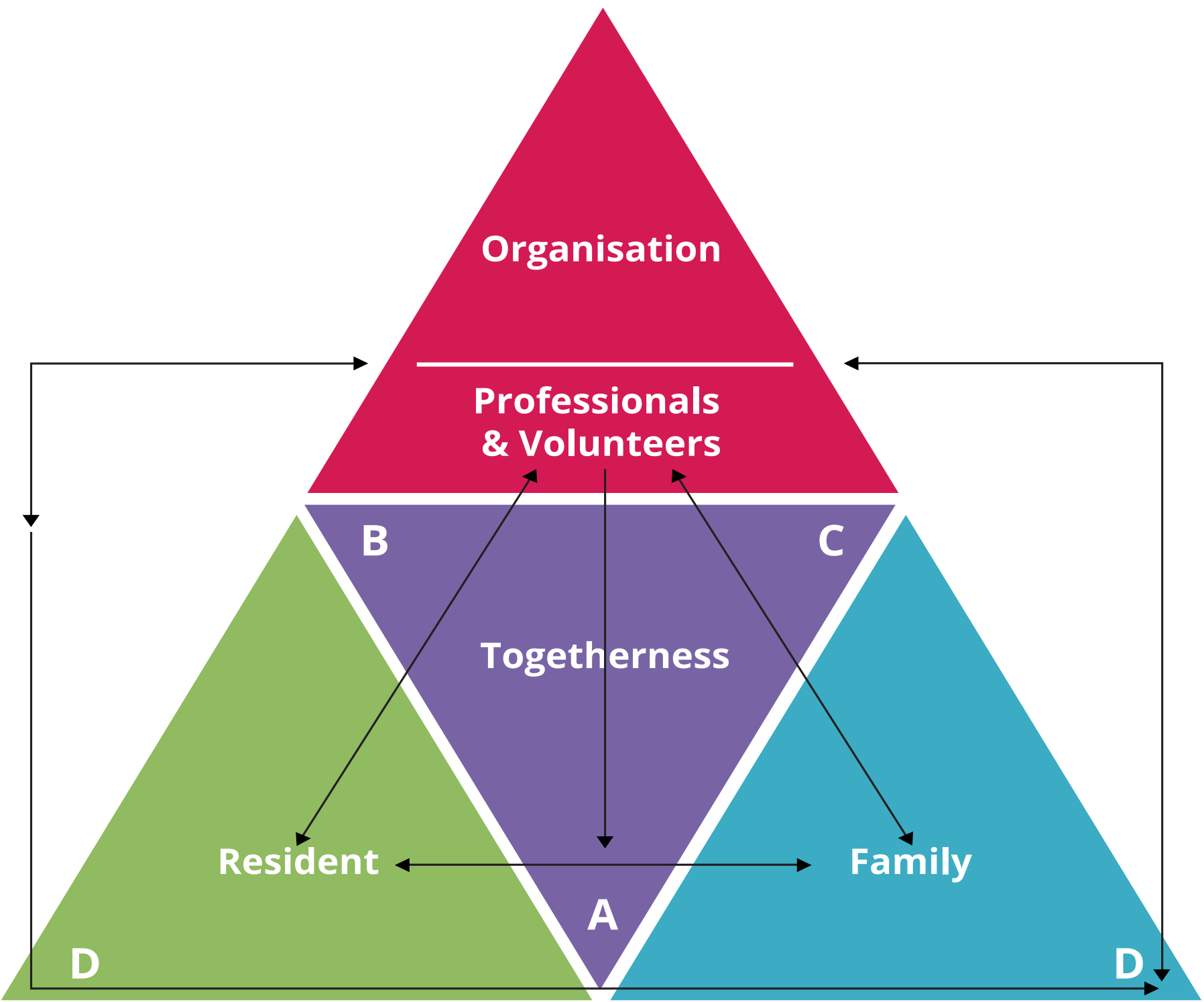


Figure 1. Relationship Triangle



Figure 4. Resident journey Move-in long-term care facility.

