

Relocation of the Vegreville Care Centre

Selected Highlights for Family Caregivers

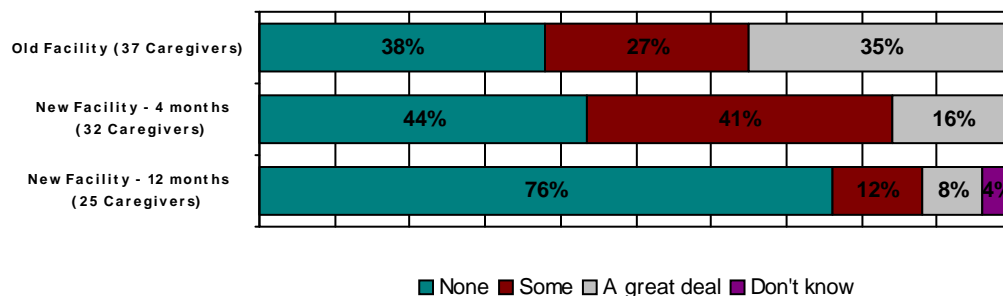
The Study

- In May 2008, the Vegreville Care Centre was relocated to a new cottage-style facility from an institutional, hospital-like facility. The old facility was attached to the acute care hospital while the new facility was in a downtown neighbourhood location.
- Between April 2008 and June 2009, researchers from the Alberta Centre on Aging at the University of Alberta conducted a case study of the relocation.
- Information was collected prior to the move, 4 months after the move, and 12 months after the move.
- The study began by interviewing 39 residents, 37 family caregivers, 56 staff members and 4 key informants.
- Questions were asked about the move itself, the physical design of the old and new facilities, services provided, family involvement, and staff issues.

Views about the New Location and the Move

- Prior to the move, several family caregivers expressed concern about the location of the new Care Centre in a central downtown neighbourhood approximately two kilometres away from the acute care hospital. Over time, fewer people had these concerns (Figure 1).

Figure 1. Concern about the Distance to the Acute Care Hospital

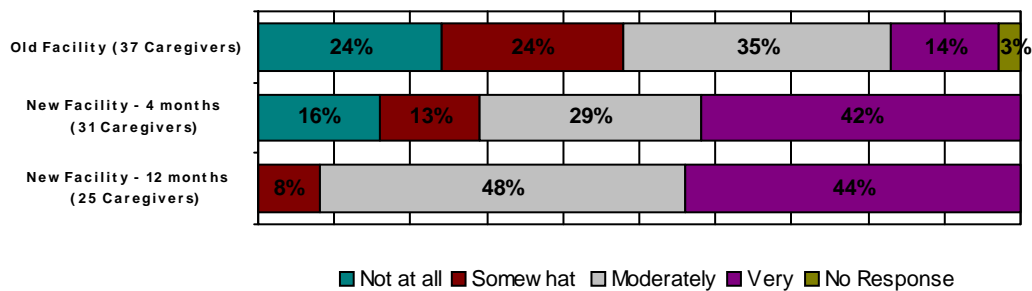


- The move itself was seen as success. However, 22% of family caregivers prior to the move and 48% four months after the move indicated that there was additional information that they would have liked. Some called for more information on the website while others would have appreciated getting more information sooner. Some felt that there should have been more meetings with families.

Comparison of the Old and New Facilities

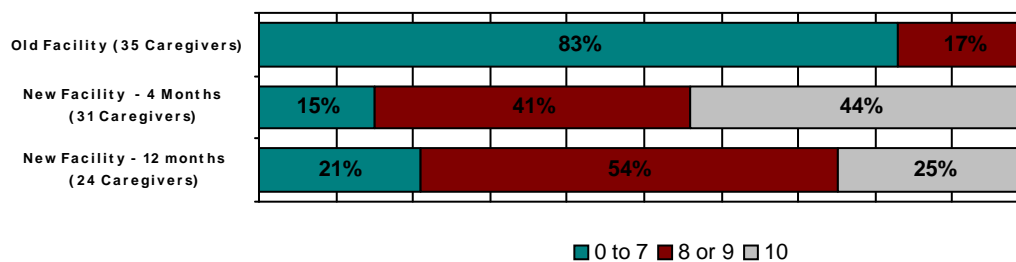
- The new facility was more likely to be rated as homelike than the old facility (Figure 2). Private rooms, personal decorations, and the smell of food were identified as elements of homelikeness.

Figure 2. Homelikeness



- The new facility received higher ratings in terms of the overall physical layout than the old facility did (Figure 3). At 12 months, 79% rated the overall physical layout as an 8 or higher on a scale of 0 (worst possible) to 10 (best possible), compared to only 17% in the old facility.

Figure 3. Ratings of Overall Physical Layout: Family Caregivers



- The private rooms and bathrooms in the new facility drew many favourable comments. The amount of space, privacy, brightness, and the availability of overhead tracking were mentioned as benefits.
- The kitchen was rated highly, with several comments offered about the smell of the food and the opportunity for residents to watch the food being prepared. Some family caregivers mentioned the lack of access to the kitchen for residents and families, which was necessary due to care standards.
- Areas for improvement included a larger dining room and living room, a larger medication storage room, the need for a staff room, and increased parking.
- Some family caregivers expressed concern about the location of the nursing office and felt that they did not see the nurses as much as they had in the old facility.

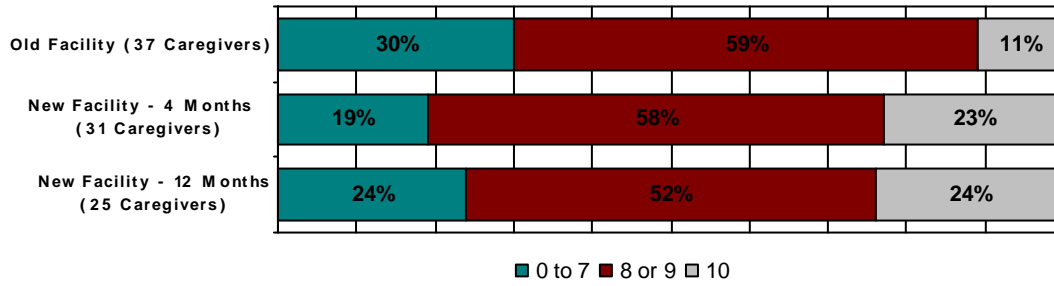
Cottage Characteristics

- Interestingly, while having the same physical layout and the same philosophy of care, each cottage was distinct and appeared to have its own character. Residents, family caregivers, and staff members all contributed to that character.

Care and Services

- Family caregivers were asked to rate the following statement "Overall, what number would you use to rate the care (name of resident) gets from the staff?" from 0 (worst possible) to 10 (best possible). The ratings were similar for the old and new facilities (Figure 4).

Figure 4. Ratings of Care

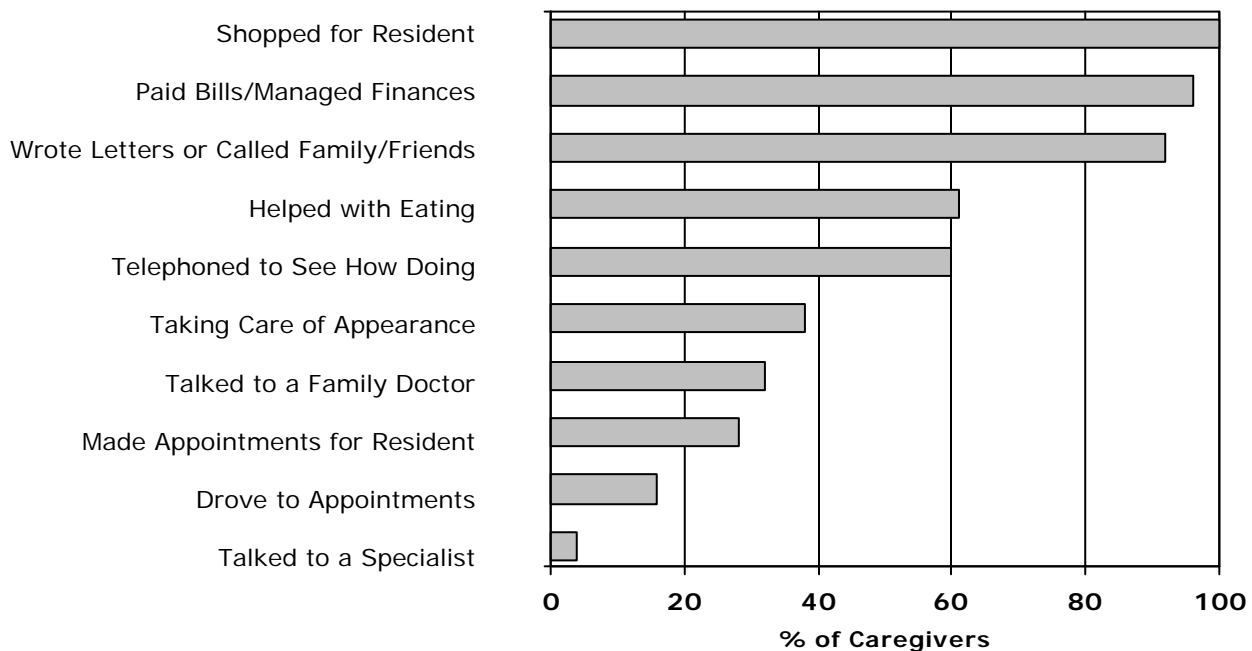


- At 4 and 12 months after the move, we asked "Would you say that you have none, some, or a great deal of concern about the amount of time staff has to care for your family member?" At 4 months, 71% of the caregivers had some or a great deal of concern. At 12 months, 64% had concerns.

Family Involvement

- About one-third of family caregivers reported visiting at least three times per week.
- Some (31%) noted an increase in the amount of visits at 4 months. This may be related to helping the resident settle in or it being easier to visit due to closer proximity to the new facility.
- Family caregivers were involved in a variety of way in the lives of the residents (Figure 5).

Figure 5. Caregiving Tasks



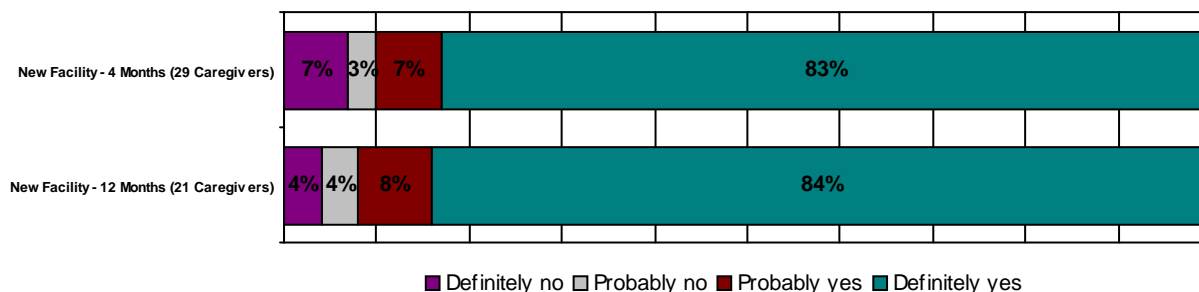
Residents' Situations

- Some residents experienced improvements such as more independence in bathing or an increase in close relationships with other residents or staff.
- At the same time, there was an increase in the number of pressure sores and in the number of unsettled relationships with staff and other residents.

Relocation Challenges

- The importance of time both to prepare for the move and to adjust to the new facility was readily apparent.
- Open communication between family caregivers and management, between family and staff, between staff and management, and between staff members is essential.
- Despite the relocation challenges, over 80% of the family caregivers responded definitely yes to the question "Would you recommend this facility to others?" (Figure 6)

Figure 6. Recommending Facility to Others



We would like to thank the residents, family caregivers, staff, and key informants who willingly answered our many questions.

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A more detailed report is available upon request. For further information, please contact the Alberta Centre on Aging.

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