





Helping family carers cope when placing loved ones in residential care



What is the focus of the research?

Testing whether an Australian-adapted residential care transition counselling and support intervention can help family carers navigate the logistics and emotions involved in placing their loved one into care.



Why is it important?

Many people with dementia eventually move into residential care, however, supports to help family carers cope during this difficult transition are lacking.

Making the initial decision and coping with the transition can be stressful and distressing. Family carers must seek approval from the Aged Care Assessment Team (ACAT), find a suitable care facility, navigate the admission processes, figure out finances, move the person with dementia into the facility, and try to settle them in. This time can be incredibly stressful, and as a result, many carers experience feelings of anxiety, guilt and grief. The COVID-19 pandemic has also caused significant extra distress, with families



What is the ACAT?

Teams of health professionals who assess the medical, physical, psychological, cultural and social needs of older Australians, and help them and their carers to access appropriate support.

The assessment may show the person is able to remain at home with support. If this isn't possible, the ACAT will help them access respite care or residential aged-care facilities.

not able to visit care facilities due to lockdown or from concern about transmission. Now, more than ever, improved psychosocial support for carers during this transitional period is needed. Few national dementia strategies address the

Few national dementia strategies address the support needs of carers surrounding residential aged care placement. In the US, a new model of support has been developed called the Residential Care Transition Module (RCTM). To ensure Australian carers can access the best

possible form of support, we need to test an Australian-adapted RCTM.

Dr Brooks hopes that delivering RCTM earlier in the transition process, and following ACAT approval for residential care, will improve carer preparedness for placement, ease the transition process and reduce the psychosocial toll it takes on Australian family carers.



🤼 How will this happen?

Stage 1: recruit 20-30 family carers of people with dementia who have received ACAT approval for residential aged care.

Stage 2: participants complete surveys about feelings they may be experiencing relating to stress, anxiety, quilt, depression, grief and support for carers.

Stage 3: participants will be randomly assigned into one of two groups: one that receives the RCTM, or a comparison group that receives a check-in call and printed information.

Stage 4: participants assigned to the RCTM will participate in six video-call/telephone counselling sessions over 12 weeks with a trained transition counsellor.

Stage 5: at study completion, all participants will complete the surveys again to see if there have been any changes in how they are feeling.

Stage 6: participants will be interviewed to gather their views on the study, including the timeliness and usefulness of the support or information they received.



What is the RCTM?

The Residential Care Transition Module is an evidence-based multicomponent psychosocial intervention developed specifically to support family carers with the transition to residential aged care.

It consists of six telephone or video-link counselling sessions delivered to family carers over 12 weeks by a trained health or social care professional. It includes education about dementia and residential care facilities, dementia-specific grief counselling, stress reduction techniques, and referral to support networks.

The counsellor can provide the family carer with problem-solving and coping strategies; psychological and emotional validation and support; and direction to community support and resources.



What will this mean for family carers?

- Earlier support and help.
- Potentially, reduced stress, anxiety, depression, guilt and grief.
- Improved social support during placement.
- An easier adjustment once their relative has been admitted into residential care.



Who's undertaking the research?

Dr Deborah Brooks, Queensland University of Technology

Dr Brooks is a researcher at the School of Nursing, Queensland University of Technology. She has a background in psychology and health services research and has been involved in dementia research in Australia and the UK for 15 years. Dr Brooks' current work focuses on improving the quality of life and care of people with dementia and their families within

community and residential aged-care settings. She was previously awarded a Dementia Australia Research Foundation Consumer Priority PhD Scholarship.

Dr Brooks and Dementia Australia would like to acknowledge the support of the NHMRC Dementia Centre for Research Collaboration in making this research possible.

The title of Dr Brooks' project is Bridging the support void. Can the Residential Care Transition Module improve the psychological health of family carers during the residential care placement process in Australia?