

Aged Care Residents' Prioritisation of Care



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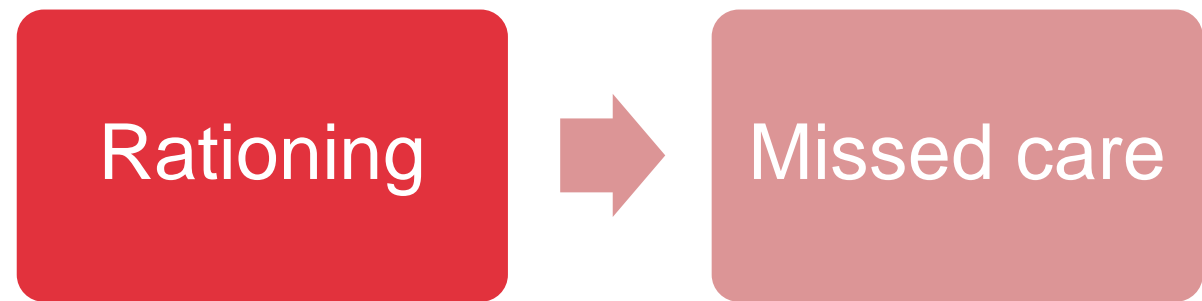
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How this study came about



Missed care:

Care that is fully or partially delayed or omitted

Rationing:

Withholding or not carrying out care tasks

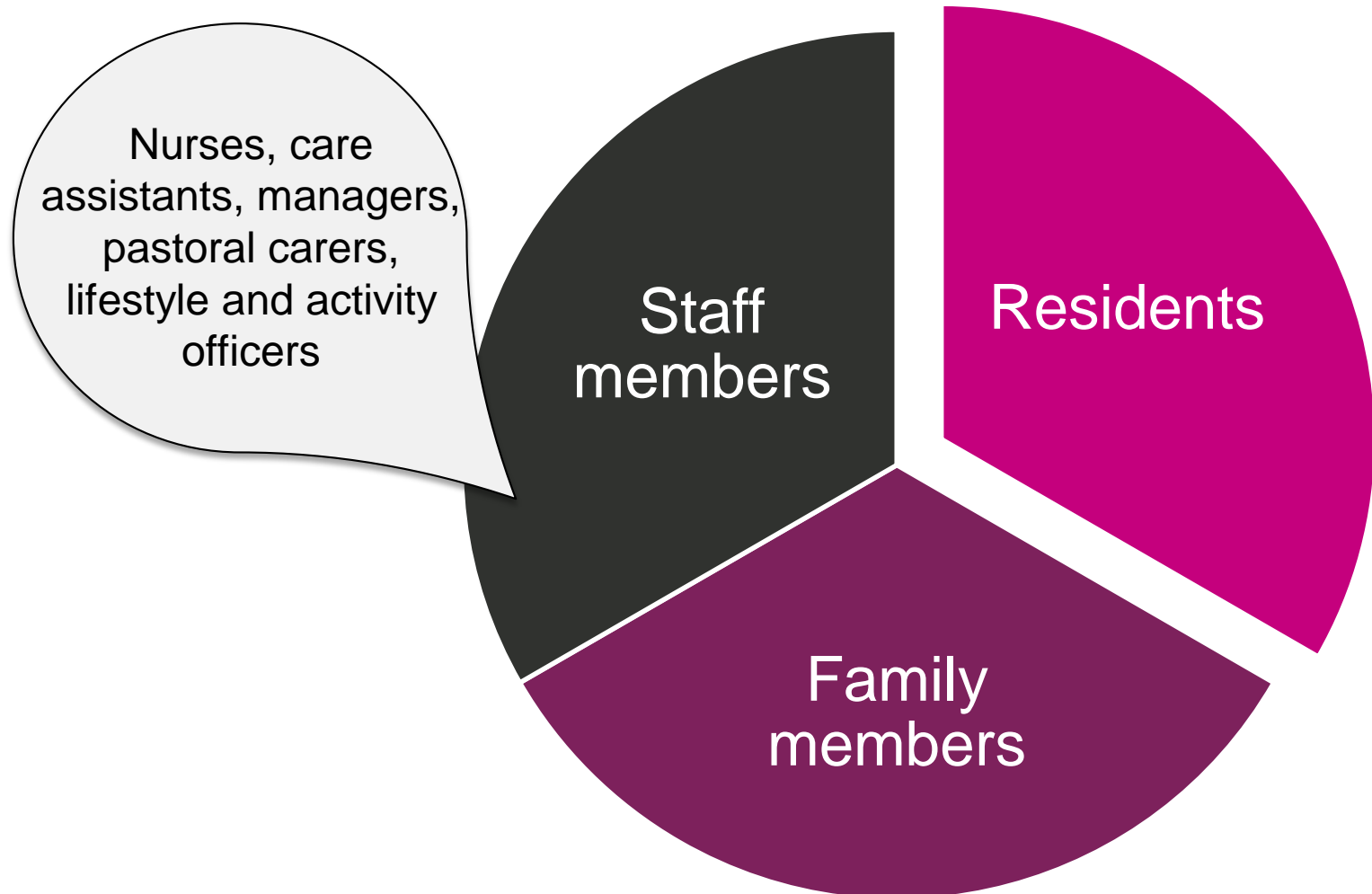
How this study came about



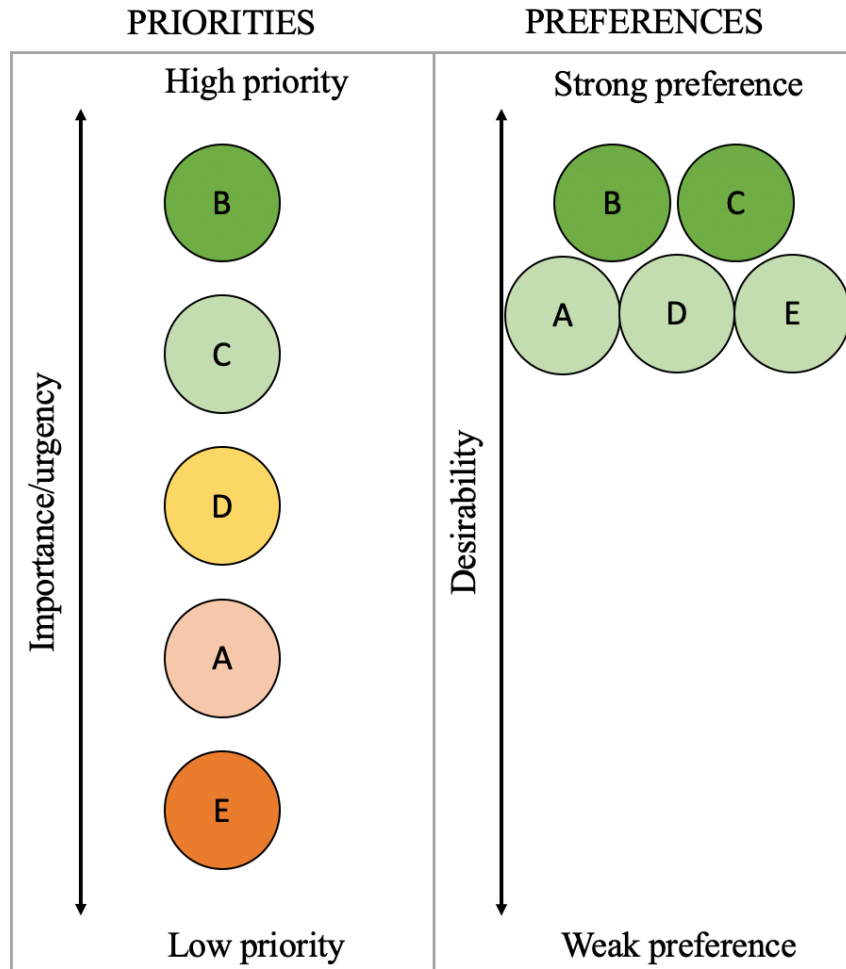
Prioritisation:

Hierarchical decision-making about the urgency/
importance of different aspects of care

Prioritisation of care



Prioritisation



Preference: The consideration of something as more desirable than alternative options; a want for something.

Priority/priorities: The level of importance placed on an object, concept, idea, service, person or action

Study overview

Objective: To investigate aged care residents' prioritisation of care

Research question 1

- What aspects of care do residents prioritise?

Research question 2

- How is care prioritised by residents?

Research question 3

- What influences residents' prioritisation decisions?

Setting: One aged care provides. Five facilities from New South Wales (n=3) and Queensland (n=2).

Participants: 38 residents

Correct medication



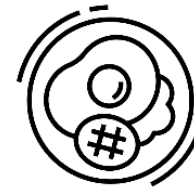
Assistance with bathing



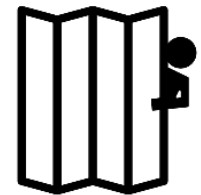
Emotional support



Choice about meals



Privacy is respected

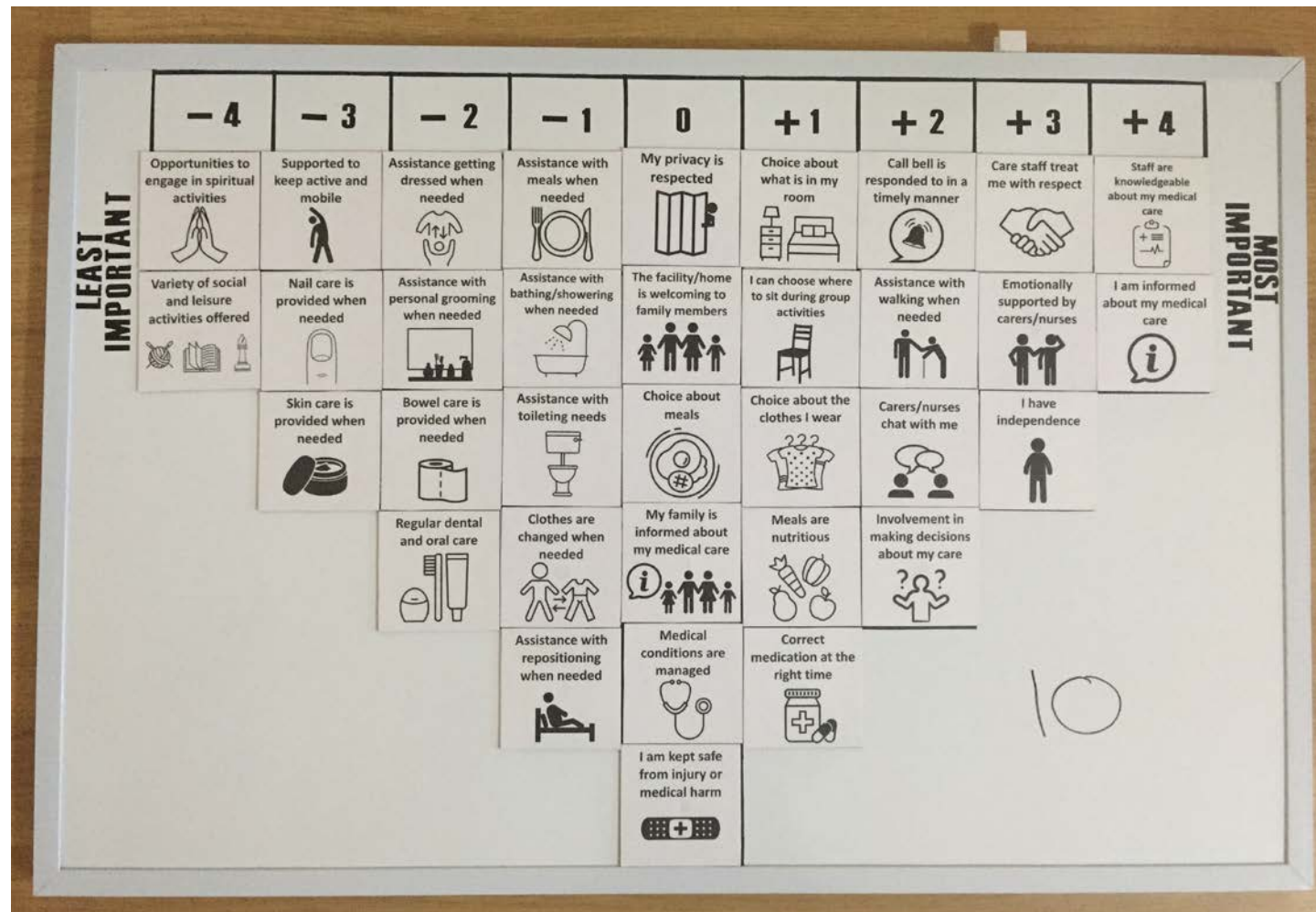


“Order the cards from what is ‘Least important’ (-4) to you, to what is ‘Most important’ (+4) to you in terms of your care ”

[illegible]



Example of a completed grid



Other methods

Demographic questionnaire:

Age; sex; years living at organisation

Think aloud task:

Verbalisation of decision making processes during card sorting activity

Post-card sort questions:

Questions about the placements of salient cards and unrepresented aspects of care

Other methods

Semi-structured interviews:

- The context in which prioritisation occurs
- Influences on prioritisation decisions
- Comparison of priorities with staff members and family members
- Unmet priorities
- Challenges preventing staff members from meeting their priorities when delivering care

Residents' viewpoints on care prioritisation


1. Maintaining a
sense of spirituality
and self

2. Information sharing
and family
involvement

3. Self-reliance

4. Timely access to
support

Viewpoint 1



1. Maintaining a
sense of spirituality
and self

Priorities

- Spiritual activities/religion
- Independence
- Privacy
- Nutrition/meal choice

*“If you said to me, what’s the hardest thing about coming into care?
Loss of independence and privacy would feature high.”*

Viewpoint 2

Priorities

- Family information
- Resident information
- Bathing/showering
- Assistance getting dressed



2. Information sharing
and family
involvement

“[My daughter] is everything to me, and she does everything for me, looks after my investments ... and she does look after me ... She’s my decision-maker...”

Viewpoint 3

“I like my privacy. I make my own bed and I do everything. They [staff members] don’t even come into my room—just to give my medication and all that—but I like being alone...”



3. Self-reliance

Priorities

- Independence
- Privacy
- Choice about room environment

Viewpoint 4

*“If you ring your bell and it’s 10-15 minutes, that’s far too long.
Because you don’t ring your bell unless you want something...”*

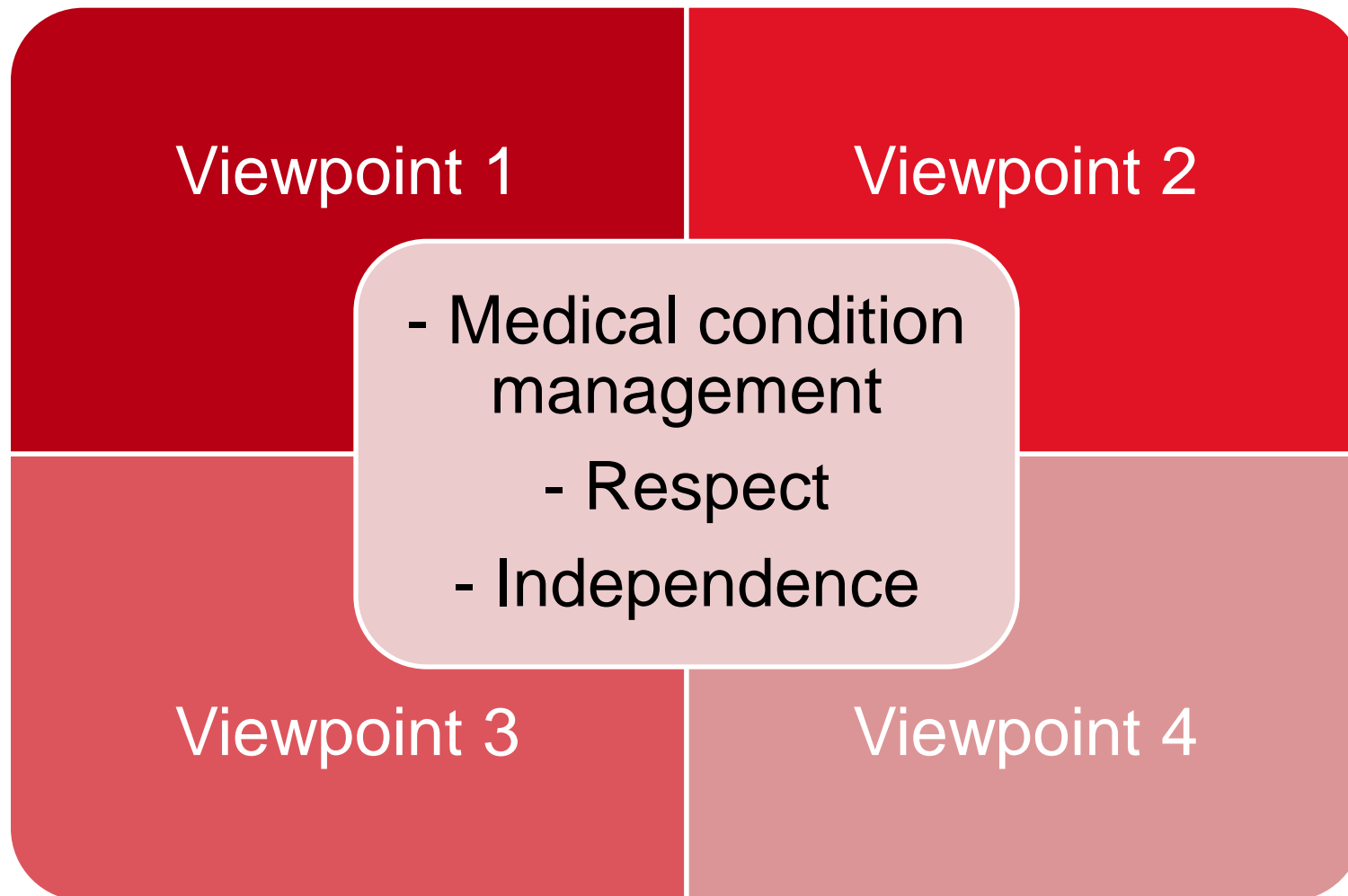
Priorities

- Call bell
- Emotional support
- Medical conditions managed



4. Timely access to
support

Shared priorities



Level of dependency

“I need to be showered each morning. Because I can’t do it myself. And then they [staff members] assist me to dress.”

Dynamic needs

“I’m looking to the future a bit ... I’m alright now, but if say, I live another couple of years, I’ve noticed that my health was not what it was three years ago.”

Indifference

*“It doesn’t really matter because I
dress myself in the morning, I just
pick the clothes I want and that’s it.”*

Availability of staff

“They don’t spend much time with you because they’re busy, busy, busy. When they’re chatting with you, somebody will press the buzzer [call bell].”

“Well I’ve had plenty of incidences. You know, they take at least an hour whenever you ring. And it’s not good enough, you know, really, you could be dead on the floor.”

A note on staff members

Unmet priorities
were often
viewed as a
systems problem
and not a
reflection of
front-line staff

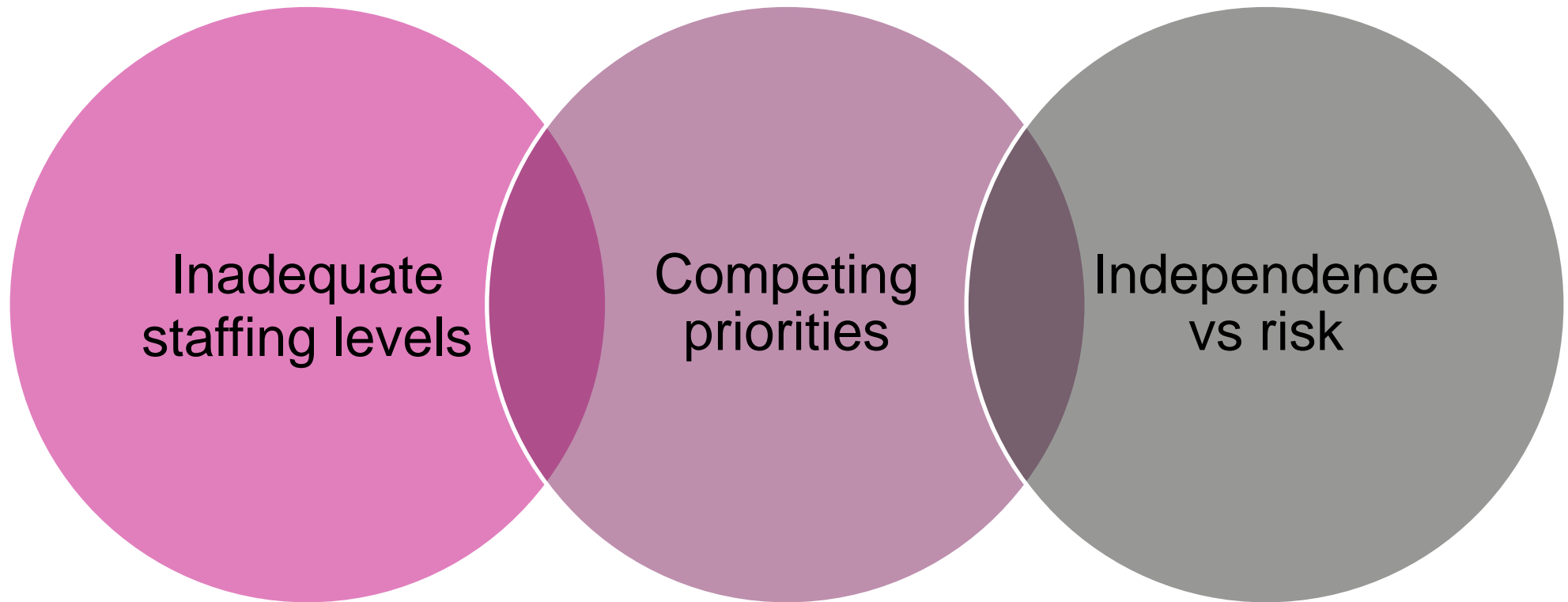


The importance of person-centred care in residential aged care

We found that residents wanted to:

- Receive care that aligned with their priorities and preferences
- Receive care that was tailored to their needs and dependencies
- Be given opportunities for independence that was meaningful to them
- Be respected by staff members
- Have acknowledged that their needs and priorities were dynamic and changing over time

Challenges to providing person-centred care



Want to know more?

Health Expectations

Open Access

An International Journal of Public Participation
in Health Care and Health Policy

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ORIGINAL RESEARCH PAPER

WILEY

Aged care residents' prioritization of care: A mixed-methods study

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System Sustainability (ID:1000000). The

Abstract

Background: Eliciting residents' priorities for their care is fundamental to delivering person-centred care in residential aged care facilities (RACFs). Prioritization involves ordering different aspects of care in relation to one another by level of importance. By understanding residents' priorities, care can be tailored to residents' needs while considering practical limitations of RACFs.

Objectives: To investigate aged care residents' prioritization of care.

Design: A mixed-methods study comprising Q methodology and qualitative methods.

Setting and participants: Thirty-eight residents living in one of five Australian RACFs.

Method: Participants completed a card-sorting activity using Q methodology in which they ordered 34 aspects of care on a pre-defined grid by level of importance.

Data were analysed using inverted factor analysis to identify factors representing

aged care
insite



Finding out what matters most to residents of aged care

By: Conor Burke | in Industry & Reform, Top Stories | February 16, 2021 | 0

RESEARCH

Report identifies residents' care priorities



AUSTRALIAN
Ageing Agenda

Want to know more?

Ludlow et al. *BMC Health Services Research* (2020) 20:423
<https://doi.org/10.1186/s12913-020-05127-3>

BMC Health Services Research

RESEARCH ARTICLE

Open Access

Staff members' prioritisation of care in residential aged care facilities: a Q methodology study



Kristiana Ludlow*, Kate Churruca, Virginia Mumford, Louise A. Ellis and Jeffrey Braithwaite

Research Article

Decisions and Dilemmas: The Context of Prioritization Dilemmas and Influences on Staff Members' Prioritization Decisions in Residential Aged Care

Kristiana Ludlow¹ , Kate Churruca¹, Louise A. Ellis¹, Virginia Mumford¹, and Jeffrey Braithwaite¹

Qualitative Health Research
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DOI: [10.1177/1049732321998294](https://doi.org/10.1177/1049732321998294)
journals.sagepub.com/home/qhr

Open access

Protocol

BMJ Open Understanding the priorities of residents, family members and care staff in residential aged care using Q methodology: a study protocol

Kristiana Ludlow*, Kate Churruca, Louise A. Ellis*, Virginia Mumford*, Jeffrey Braithwaite*



The Gerontologist
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Advance Access publication November 27, 2019



Review Article

Unfinished Care in Residential Aged Care Facilities: An Integrative Review

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ORIGINAL ARTICLE

Journal of
Clinical Nursing WILEY

Family members' prioritisation of care in residential aged care facilities: A case for individualised care

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