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# As they see it: A qualitative study of how older residents in nursing homes perceive their care needs



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## KEYWORDS

Aged;  
Care needs;  
Nursing homes;  
Long-term care;  
Qualitative approach

## Summary

**Objectives:** Meeting care needs of nursing home residents is a significant element in providing the best quality care. A literature review revealed that there is poor understanding of the care needs of older residents from their own viewpoints within a nursing home context. Therefore, this study aimed to explore the older nursing home residents' care needs from their own perspectives.

**Methods:** This was a qualitative study. In-depth interviews were conducted by a purposive sample of 18 nursing home residents with a mean age of 80.7 years in Taiwan. All data was transcribed and coded for emerging themes.

**Results:** A qualitative data analysis generated six themes including the body, economics, environment, mind, preparation for death, and social support, referred to subsequently as BEEMPS. **Conclusions:** These findings can provide nursing home managers with information on how to improve nursing home care protocols to accommodate residents' expressed needs and also inform healthcare professionals about the care needs of older residents, thus fostering better care.

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## Introduction

Aging populations are an issue of universal concern. In 2012, people aged 65 years and over represented 11.15 percent of the total population of Taiwan, and this proportion is predicted to continue to steadily rise (Ministry of the Interior, 2013). This increase suggests that Taiwan will see greater numbers of older people with chronic illnesses and physical or mental disabilities in the future. As of March 2013, the number of beds needed in long-term care facilities was around 66,774 (Ministry of the Interior, 2013). To care for these people, the number of nursing homes has rapidly increased throughout Taiwan.

A nursing home is a healthcare institution and also a place where residents live, many for the rest of their lives. Healthcare professionals need to ensure an optimal quality of life and care for residents. Nakrem, Vinsnes, and Seim (2011) found that residents in nursing homes emphasized the importance of nurses identifying their individual needs relating to quality of care issues. Meeting individual needs was identified as one of the basic elements of quality of care (Orrell & Hancock, 2004). Satisfying the care needs of residents is fundamental and crucial to providing quality care. Powers (2006) argued that a 'need' is a statement made by a person, and needs are subjective. In addition, needs should be considered within a specific context, time, and space (Fortin, 2006). Therefore, understanding and meeting the care needs of older residents in nursing homes are important.

Few studies were found using a holistic approach for exploring the care needs of older nursing home residents. Instead, a one-time focus group and pre-defined questionnaires were previously used to explore residents' needs (Chabeli, 2003; Huang, Lin, & Li, 2008). Some studies focused on specific care needs, such as oral care needs (Ferro et al., 2008), religious and spiritual needs (Hamilton, Daaleman, Williams, & Zimmerman, 2009), and palliative care needs (Strohbecker, Eisenmann, Galushko, Montag, & Voltz, 2011). The assessment tools used to gather data are often limited by the concepts of the questions and may unconsciously neglect certain aspects. Examples of quantitative analysis tools used are the Camberwell Assessment of Needs for the Elderly (CANE) and the Minimum Data Set/Resident Assessment Instrument (MDS/RAI). Worden, Challis, Hancock, Woods, and Orrell (2008) argued that these two common assessment tools are not interchangeable because the domains of the needs covered in the instruments differ. Each tool has main areas on which it focuses, so the use of one of the tools might omit some information which is not included in that tool. Therefore, open-ended questions or an in-depth qualitative analysis can be used to identify an individual's care needs and help collect appropriate data (Levy-Storms, Schnelle, & Simmons, 2002). In addition, some studies sought to ascertain the needs of residents by asking their families and care providers, and examining activities of nursing assistants rather than directly asking the residents themselves (Davis, 2005; Li & Yin, 2005; Milke, Beck, & Danes, 2006). Little is known about the overall care needs of older nursing home residents from their own perspectives. Therefore, the aim of this study was to explore the care needs

of older nursing home residents from their own viewpoints using qualitative in-depth interviews.

The premise on which this paper rests is that older residents' care needs must be understood to ensure the provision of quality life and care, and that these needs cannot confidently be identified without listening to the residents' own views on this subject. The views of others may supplement, but not replace, these data.

## Methods

A descriptive qualitative approach was used. Purposive sampling and in-depth interviews were conducted.

### Research settings and participants

Two nursing homes in southern Taiwan, both accredited by the Taiwanese Department of Health, were invited. One nursing home was a public 90-bed hospital-based facility, and the other was a private 55-bed free-standing facility. They were chosen because both met government accreditation standards for staffing and equipment, and both were willing to participate. Inclusion criteria were residents who (1) were aged 65 or over; (2) had lived in the nursing home for over six months; (3) had mental functions sufficiently intact to record a score of more than 20/30 on the Mini-Mental State Examination (MMSE) scale; (4) were able to communicate in Mandarin or Taiwanese; and (5) were able to provide informed consent.

### Data collection

After obtaining approval from the nursing homes, each home's head nurse was contacted, and a list of eligible residents was determined. The study was introduced to eligible residents before they were invited to sign a consent form by the first author. After they had signed the consent forms, the in-depth interviews were conducted. This resulted in 18 residents (15 males and 3 females) with a mean age of 80.7 years and with an average institutionalized length of stay of 32.5 months being included in this study after data saturation was achieved. Participants' demographic details are given in Table 1.

A digital recorder was used to record the interviews with the permission of the participants. Only one resident refused to be recorded, so notes were made during that interview. The in-depth interviews were used to collect data. The interview began with an open-ended question, "What are your care needs when living in the nursing home?" This question was followed by further questions suggested by the answers given to the previous question, such as "why?", "would you please talk more about it?", or "anything else?" Thirty-eight interviews were carried out between 2005 and 2009, with one to five interviews conducted with each resident. The reasons that some residents were interviewed more than once were that several residents tended to feel tired or easily lost their focus. Sometimes, they needed to return for nursing care or treatment. Each interview lasted about 20–99 min.

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