Fact Sheet:
Residential Care Options: Caregiving Doesn’t End When Your Loved One Moves

After your loved one moves to a facility, what happens? What is your role as a caregiver? How often should you visit? How can you best help your loved one adjust to their new living environment? How do you cope with your feelings about the move? Here are some tips to help you answer these questions and more.

- In the first two to four weeks, visit often. It’s important for your loved one to not feel abandoned. Go daily if possible, even several times a day. More frequent visits are more important than longer visits. Together, take strolls around the facility, point out different areas, visit the garden or library. Bring favorite foods as treats.
  - If the facility has a policy of not allowing visitors for the first two weeks during the adjustment period, consider whether this is the right facility for you.
- Announce yourself to your loved one, if they have dementia: “Hi mom, it’s me, Susan.”
- Introduce your loved one (and yourself) to the staff. Tell them about his or her life to help them get to know your loved one. Create a poster of your loved one’s life and hang it in the room for all to see. This is a way to honor your loved one and who they are as well as who they were, while helping the staff and others to appreciate their unique history.
- When your loved one is settled and comfortable, start visiting every other day, and then every third day, if that feels okay to you. Create a schedule that works for you. Visit during “free time” when there are no other activities going on. Don’t stay too long. Visit at different times of the day to see how he or she is doing throughout the day, including meal times.
- If your loved one has dementia, remember that his or her experience of your visit will be the same if you stay twenty minutes or two hours. Find the length of time for your visit that works for you.
- Unless your loved one really likes to go for drives, postpone outings until he or she is adjusted to the new environment. Think about whether the trip is for their sake or yours (to feel you are doing something good or perhaps to reduce guilt)?
- Decorate the space, whether it’s a shared room or private. Have familiar objects around such as family pictures, artwork, flowers, plants. Use a wall poster to tell your loved one’s story and to give you something to talk about when you visit.
• Attend activities with your loved one to help them get oriented and involved in the community. Play games that he or she used to like, such as cards, dominoes, or Scrabble. Watch television or videos of old movies together. Listen to music they like. Talk about sports. Sit together and hold hands—people in facilities don’t get touched much except when someone is “doing” something for them. You might also be experiencing this loss of touch and intimacy.

• Bring old photo albums or go online to visit Facebook pages. Share stories of what other family members are doing.

• If you know someone else has recently visited, remind your loved one that they came. Leave a journal in the room for guests to leave a friendly note and read the notes back to your loved one.

• Visit together with a family member or friend. (And go out for lunch or coffee together afterwards as a treat for yourself!) If the facility and your loved one’s condition allow, brief visits with children or small pets can be great diversions.

• Reassure your loved one that he or she is safe, loved, and cared for.

• Understand that the care staff in the facility will not do things exactly the way you do. They will do things differently. But you can provide some of the hands-on care if you want.
  o Be clear about your care expectations and be willing to share with the staff what has been successful for you in the past.

• If you have concerns about the care your loved one is getting, speak up.

Talk to the director or nurse. Do not just ignore issues until they have become major problems.
  o Create a relationship with staff members who take care of your loved one. Greet them by name, offer praise when they do something especially helpful for your family member.
  o Remember it takes a while to establish trust. Treat everyone with respect.
  o Be aware that when a staff who you like and trust leaves, it can be hard for you and your loved one to adjust. Take the time to recognize the loss and plan for how to get to know the new staff.

• If you are still concerned about the quality of care your loved one is getting, contact the long-term care ombudsman in your area (information should be posted at every facility) or go to www.ltcombudsman.org. The ombudsman is the person who monitors complaints about facilities and helps to oversee quality of care.

• Moving a loved one to an assisted care residence can be emotionally difficult. Grieve. Allow yourself to feel sad, depressed, angry, disappointed, worried, anxious, but also relief, peaceful and calm. You may feel many emotions as a result of this decision. This is a hard transition and these feelings are necessary to start the healing process. But avoid guilt—you are not responsible for your loved one’s illness or their need for more care.
  o You may experience ambiguous loss—someone is “there but not there.” (See fact sheet, Grief and Loss.)
Practice letting go. It’s okay for you to have a life outside of caregiving. Your renewed energy will make it easier to visit and you will have more to share. You have a right to enjoy your life. Embrace the transition of your role from a full-time caregiver to a spouse, adult child, or friend.

It takes time to transition to a new living situation. You can help facilitate the process by accepting that you are making the right decision. Given time, most people thrive in the new environment. With activities geared for their level of functioning and people to socialize with, your loved one can feel more successful and engaged. The key to a successful transition is to see your relative feeling safe and trustful of you and the staff.

Sometimes caregivers worry that their loved one doesn’t need or love them anymore. This is just confirmation that he or she is in a good place and getting the care that’s needed. Congratulate yourself on making a good decision. You are still the most important person in your loved one’s life. And you are still part of the care team. You are your loved one’s strongest advocate. Caregiving doesn’t end, it just changes.

- Come with a friend or someone else who knows the person. Remind your loved one who this other person is.
- Bring videos that you would like to watch and watch them together, particularly comedies and old movies. Even if he/she can’t follow the story, they can often enjoy the experience, and you can hold hands or sit close and feel connected during this time.

Resources

**Southern Caregiver Resource Center**
891 Kuhn Drive, Ste. 200
Chula Vista, CA 91914
(858) 268-4432 | (800) 827-1008 (in CA)
Fax: (858) 268-7816
E-mail: scrc@caregivercenter.org
Website: www.caregivercenter.org

The Southern Caregiver Resource Center offers services to family caregivers of adults with chronic and disabling health conditions and is for residents of San Diego and Imperial counties. Services include information and referral, counseling, family consultation and case management, legal and financial consultation, respite care, education and training, and support groups.

**Family Caregiver Alliance**
235 Montgomery Street, Suite 950
San Francisco, CA 94104
(415) 434-3388 | (800) 445-8106
Website: www.caregiver.org
E-mail: info@caregiver.org

Family Caregiver Alliance (FCA) seeks to improve the quality of life for caregivers through education, services, research and advocacy. Through its National Center on Caregiving, FCA offers information on current social, public policy and caregiving issues and provides assistance in the development of public and private programs for caregivers.

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