

Relocation Safe Model (RSM): A new model for the safe transfer of the elderly to nursing homes.

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Introduction

With the increasing growth of the elderly and the increase of chronic and debilitating diseases, the need for long-term care, physical and mental disabilities, and lifestyle changes, many families have sent their elderly to nursing homes [1]. The question is how to transfer the elderly to nursing homes so that they are less injured?

Relocation stress syndrome

When most of the elderly people are suddenly transferred from their homes to nursing homes for various reasons, they suffer from physiologic, cognitive and psychological symptoms, and if they are not properly managed, the possibility of these symptoms becoming physical and mental illnesses increases [2]. It seems that the main factor in this field is non-standard and unsafe transportation. Here, we proposed a model that appears to reduce Relocation Stress Syndrome (RSS) in the elderly [3]. This model is suitable for the elderly who have families and have cognitive health. And for some reason, they have to move to a nursing home.

Relocation safe model

Actions of the first 2 weeks: (before transfer)

- 1-2 weeks before transferring to the nursing home, discuss your problems in caring for the elderly. There are states like shock and disbelief at this stage. Allow the elderly to express their feelings.
- Ask the opinion of the elderly about nursing homes, and if there is a negative attitude, take action to correct it. And valuable information about the residents, the structure and arrangement, the welfare state of that center, referring to many friends, all of which have a motivational aspect [4].
- Let the elderly express their needs and concerns. And promise that you will answer them. (A person who is accepted by the elderly will be more effective).
- Separation from the family and home may be one of the main concerns of the elderly, suggest solutions for the elderly to keep in touch with family members and face-to-face visits, and make a commitment that it will be done [5].

- Visit different nursing home with the elderly and let him choose the one he likes the most. (Voluntary selection reduces relocation stress syndrome).

Actions of the middle two weeks (During the stay)

- On the first day, they must accompany the elderly family members to the nursing home (in order to preserve the dignity of the elderly).
- If possible, the nursing home should provide a separate room for the elderly
- The devices that are liked by the elderly should be moved to the new room and the elderly should arrange it like the previous environment [3].
- The director of the center should familiarize the elderly with the new environment and other elderly in order to reduce stress and adapt more.
- As much as possible, during the first days of stay, do not tell the rules of the center for the elderly. (Because mentioning rules such as sleeping and waking hours, and other mandatory activities reduces the adaptation of the elderly).
- On the first night of the stay, if possible, a family member who has a deep relationship with the elderly should stay at the center (in order to reduce separation anxiety).
- On the next day, the nursing home staff should pay more attention to the elderly and treat them kindly. So that the sense of independence and dignity of the elderly is not damaged [2].
- All nursing home staff should be aware of the arrival of a new elderly person so that the elderly's behavior can be monitored continuously.
- Employees should report physical and psychological symptoms of relocation syndrome (Anxiety, confusion, fear, helplessness, hopelessness, doubt, loneliness, depression, anger, suicidal thoughts and suspicion) [1].
- A schedule for psychological counseling and visiting family members should be arranged during these two weeks.

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Actions of the last two weeks

1. Reducing the number of times family members visit the elderly.
2. Increasing the number of group activities with other seniors.
3. Giving a small role to the elderly to do it.
4. Using anxiety and depression questionnaires for early diagnosis
5. Continuation of psychological sessions
6. Evaluation of the elderly's attitude towards the arrival to the elderly center.

Conflict of Interests

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