

**FRRR**Foundation for Rural &
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Project Title: *Community Enrichment Program: Developing Digital Learning in Rural Aged Care*

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Project Overview

The 'Community Enrichment Program' sought to enable technology training for selected aged care volunteers in Stanthorpe, Queensland, so that they may assist frail or otherwise debilitated aged care residents to use computer tablets for personalised learning activities. A main aim was to enhance the quality of life for residents and recipients of aged care services, as well as further develop the digital skills and capabilities of volunteers who work in rural aged care.

The community partner *GraniteNet*, the district's online community learning organisation, will continue to provide volunteer and technical support to further embed associated learning programs in the activities of aged care providers beyond the life of the funded project.

Specific Activities and Benefits of the Project

Overview

The overall intention of the project was to distinctively combine community based digital initiatives at *GraniteNet* in Stanthorpe, Queensland, with university research to enable technology training for selected local aged care volunteers so that they could work with aged care recipients in a digital learning program. This intention progressed, firstly, through a range of consultations between *GraniteNet* volunteers and USQ researchers Dr Lisa McDonald and Ms Catherine Arden to establish project detail and parameters, and secondly, with volunteer participants who worked with aged care volunteers in a learning program to train them in the use of computer tablets. Aged care volunteers, and some existing staff, subsequently worked with aged care residents at the *Stanthorpe Nursing Home* and aged services recipients at *Blue Care Stanthorpe Community Care*. In consultation with the researchers, *GraniteNet* led the selection, purchase and distribution (via loan arrangement) of the technology, preparation of training manuals, training of volunteers, technical, volunteer and other operational support.

McDonald and Arden independently conducted either focus groups, individual or small group interviews at all three premises before, during and after the training and volunteer activities. Small group interviews were additionally conducted by Lisa McDonald with the aged care residents/recipients, which at times included both volunteers and aged sector management and staff.

Activities – GraniteNet, Stanthorpe

GraniteNet provided the training facilities to train the seven community volunteers (two *GraniteNet* volunteers and five aged care volunteers), as well as software and computer tablet set-up expertise. A user technical manual was developed by *GraniteNet* to support volunteer training in the use of the tablet PCs with aged care residents and to ensure the successful deployment of the equipment into the aged care facilities. As a first step, two *GraniteNet* volunteers with experience in supporting older members of the community to use digital technologies as part of *GraniteNet's* Senior's Kiosk service, received initial 'train-the-trainer' training in the use of the tablet PCs. During this training, a focus group was conducted by Catherine Arden to explore *GraniteNet* volunteers' perspectives and experiences of using digital technologies to improve the quality of life of older members of the community and to identify strategies for supporting clients of aged care facilities to successfully engage with the tablet PCs. A volunteer questionnaire was also completed by respondents.

The two *GraniteNet* volunteer trainers subsequently delivered training to volunteers from each of the two aged care facilities. Altogether, five aged care volunteers and two aged care staff participated in the training at the *GraniteNet* premises. The training consisted of an orientation to the use and care of the tablets and the accompanying user manual, as well as advice about customisations targeted specifically to the needs of the aged care clients. Thereafter, two tablet PCs were deployed to each of the two aged care facilities under a negotiated loan agreement and an ongoing technical support service was provided by *GraniteNet*. This arrangement has continued beyond the funded project, as reported above.

Activities – Stanthorpe Nursing Home (SNH)

SNH is a residential care facility which includes care for dementia residents. Slight variations to the intended course of events saw SNH staff take a lead in working with residents in the learning program, occasionally supported by one of the trained volunteers. These staff included a diversional therapist and management staff. Residents were originally introduced to the tablets in a group learning setting and were also given opportunities to learn various tablet techniques individually. In most instances, residents learnt operational techniques, such as how to turn on the tablet, access and use the Internet, how to take photographs for sharing and discussion, and learnt to play selected games appropriate to an individual's degree of proficiency, with the latter activity encouraging an atmosphere of playful competitiveness between residents. Subsequent interviews with staff and volunteers revealed an expanded range of opportunities for learning and engagement afforded by use of the tablet PC (reported in subsequent section on benefits).

Activities – Blue Care Stanthorpe Community Care (BC)

Blue Care provides a range of services including day respite and community care. The learning program at the Stanthorpe facility involved community care participants learning from a BC staff member who had, along with three other volunteers, participated in *GraniteNet* training. Because of the irregular nature of volunteer employment at the facility, the BC staff member, rather than the volunteers, managed most of the learning activities individually with the day residents. Activities included learning how to switch on and use tablets, locate applications, search the Internet for individual interests and begin to use social media applications such as *Facebook*. Day residents would at times assist interested peers to learn to use the tablets.

Benefits of the project

The project has had a range of benefits for individuals, *GraniteNet* and institutionally for the two aged care facilities involved. Benefits and institutional impact for USQ are discussed below. But to recall, the initial aims were to build community resilience through benefit to local and broader communities in three main ways:

- demonstrate successful community leadership activities from within communities and their contexts
- create more extensive volunteer opportunities in aged care.
- develop and promote the skills of older people who may otherwise experience rural disadvantage in accessing digital devices, training and assistance.

Benefits so far identified for volunteers include an increase in awareness of the learning processes of older adults, a strong feeling of personal satisfaction from seeing increased levels of confidence and skills of aged participants (“just seeing them having fun”) and also a heightened sense of personal efficacy in becoming more proficient themselves in using emerging digital technologies in their volunteer work. Volunteers were able to experiment with the tablet PCs and also reconsidered their own assumptions about the emerging role of digital technologies in the lives of older adults. Thus, participation in the project has been a catalyst for further lifelong learning for volunteers, specifically in using emerging digital technologies.

Aged participants gained a greater sense of their abilities with new digital technologies, which was fundamentally positive, and were introduced to ways of communicating which were previously not apparent to them or experienced by them to any great degree. They were also able to develop new and different ways to interact socially and reconsider what constituted a notion of ‘being social,’ and created new and influential concepts about themselves, their skills, needs and desires with their peers, families and within their aged facilities. Following their involvement with the program, a number of the older participants had purchased their own tablet devices, for example.

Benefits for *GraniteNet* as a community-based organisation and community technology learning centre included being able to extend their services to people in the community unable to access the *GraniteNet* premises, develop community links and partnerships and build their own organisational profile, capacity and sustainability.

Benefits for the participating aged care facilities included an opportunity to experiment with using digital technologies in their service delivery with minimal risk in terms of financial outlay, access to technical support and ongoing use of the digital tablets under the loan agreement with *GraniteNet*.

Project Outcomes

Impact measures

A series of qualitative questionnaires and interviews was conducted with consenting participants before, during and after the training and volunteer activities took place. What is apparent is that the benefits can be measured at broader discourse levels, such as those represented above in the three aims, as well as through the diverse learning practices and processes of *GraniteNet* and its volunteer activities, and, importantly, through the learning engagements, and strategies, of individual aged care participants. It is perhaps at the level of finer detail in the latter experiences that we see the contexts and evidence of their specific forms of resilience emerge. Prior to further auditing of the research data, the qualitative interviews already show us that instances of resilience can be elicited from the detail of older people's engagements with technologies in a range of ways. These include their development of greater confidence and skills, and their affective experiences in creating new opportunities for connectedness through what are otherwise relatively simple activities for many people in contemporary daily life. Brief examples of the benefits follow which outline areas for further review and development.

GraniteNet

The project has impacted positively on *GraniteNet* as a community organisation primarily by supporting it to establish and sustain local community partnerships that in turn enable the organisation to further its digital inclusion mission. Being able to extend its scope and range of services to include supporting frail aged clients of local aged care facilities is a natural extension of *GraniteNet's* work with older and disadvantaged community members via its community technology hub located in the Stanthorpe CBD. Further to this, however, is the contribution such a project makes to building the organisation's capacity through:

- access to much-needed equipment and resources including external expertise
- learning and development opportunities for *GraniteNet* volunteers
- an opportunity to develop and sustain local partnerships and links with the University of Southern Queensland (with whom *GraniteNet* has been in collaboration since 2006)
- an enhanced profile in the local community through demonstrating a leadership role in a valued project.

The fact that the project has been completed successfully and that the partnership with the two aged care facilities is ongoing beyond the period of the funded project is testament to these outcomes for *GraniteNet* as an organisation. Through this project, *GraniteNet* has been able to consolidate its capacity to make – and be seen to be making – a valuable contribution to Stanthorpe's development as a learning community, which in turn contributes to the ongoing sustainability of this fragile social enterprise.

Stanthorpe Nursing Home

The environment of any aged facility is changeable for many reasons. Residents move from one facility to another, their health may vary, their social interactions may change, and in one instance during the course of this project, one participant at SNH died. In an environment which is inherently changeable, staff and volunteers must accommodate differing circumstances and needs as they arise, and indications from the interviews suggest that the learning program introduced a degree of spontaneity that was not responsive to trauma 'after the fact,' but actively created a sense of wellbeing through personalised learning activities which brought pleasure and social connectedness.

Because SNH has a focus on residents with dementia, interesting developments also emerged about these residents' learning and use of tablets. For example, SNH volunteers and management conveyed that they observed a noticeable positive change in the behaviours of dementia residents during the learning program, with unexpected variations in how these residents approached activities. In some instances, residents would claim not to have had any exposure to the tablets at all, but would exercise a higher level of proficiency than was anticipated when they subsequently engaged in activities. At other times, activities already performed required more review when performed again. The latter observation may represent common deficit narratives about dementia, however, these developments also point to the possibility of new conversations about dementia which suggest that its negotiation through learning is contextual (specific to the moment) and open to review. This development was unexpected.

Blue Care Stanthorpe Community Care

BC staff indicated that positive social benefits were apparent, and that, in particular, the aged participants became 'very excited' when they developed enough familiarity with the device to 'do it themselves.' The interviews conducted conveyed, in one instance, that an individual's interest, say, in recreational fishing, could be accommodated through learning information seeking skills through the Internet. In turn, these new skills opened further dialogue with others and a greater sense of participation in broader online and local communities.

Community volunteers in aged care

While the critical role played by volunteers in this project is acknowledged (particularly in relation to *GraniteNet* being operated and managed exclusively by community volunteers) and learning outcomes and other benefits for participating volunteers have been clearly documented, the role of participating aged care volunteers is less clear-cut. Further examination is required to unearth the nature of the dynamics that surround the role of the volunteer in local aged care service delivery and how this impacts their participation in a digital inclusion project such as the *Community Enrichment Project*. To illustrate, although five aged care volunteers participated in the training delivered at *GraniteNet*, only one volunteer in each facility had actually participated in using the tablet PCs with clients by the time the research component of the project had concluded, a situation that can be attributed in part to a lack of clarity about expectations of the nature and extent of

aged care volunteers' participation in the project and perceptions about 'who the project was for,' and in part to logistical issues.

Further analysis of the data may well identify emergent themes and issues related to the role of volunteers in supporting aged care clients' engagement with digital technologies, and the factors that promote, or indeed inhibit, this from occurring. How these factors and dynamics, in turn, interface with opportunities for informal digital literacy learning for volunteers in community-based aged care is seen as an important area for further research emerging from this project linked to the national research priorities identified in the section *Institutional impact* below.

Observations

These examples await further critical analysis, but the overwhelming view from both SNH and BC was that the introduction of the tablets was positive, worthwhile, and enabled the residents involved to learn new things and explore worlds beyond their own. *GraniteNet* will further embed the learning program and provide ongoing support to the aged care facilities beyond the life of this program, demonstrating the positive reciprocal benefits for *GraniteNet* and the aged care facilities.

Institutional impact - University of Southern Queensland (USQ)

The project is a collaboration between the organisations named above and the Australian Centre for Sustainable Business and Development (ACSBD) at USQ. The ACSBD is one of eight research centres at USQ employing multi-disciplinary expertise in four main areas of research. These areas are sustainable agribusiness, resilience and performance of small to medium enterprises, leadership in organisational change and regional development. This community enrichment program has focused on building regional resilience through community expertise and action, and has sought to underpin these initiatives with affiliated research expertise. The project extends beyond this, however, and has demonstrated a high degree of leadership in promoting organisational change in the regional aged care sector by raising the awareness of the diverse abilities of older adults with management and staff in unprecedented ways. This demonstrates a broader impact which can be measured through the alignment with two relevant National Strategic Research Priorities outlined by the Australian Research Council. These are:

- *Living in a changing environment*

Participation is thought to build and sustain individual and community resilience. What constitutes participation today significantly involves networked digital communications. With Australia's ageing population set to increase exponentially, and with a growing concentration of older people living outside of larger cities and towns, older Australians in rural and regional areas can experience significant challenges to the changing nature of participation, connectedness and lived experience in later life. The community enrichment project aligns with this Priority area in the context of rural and regional Australia's ageing population, revising common assumptions and seeking meaningful dialogue with innovative community-led practices.

- *Promoting population health and wellbeing*

The project draws on related research and expertise to exercise the view that digital technologies can significantly enhance the wellbeing of older rural Australians, incorporating their digital interests as examples of productive health and wellbeing practices. Moving away from the dominant psycho-medical emphases often found in gerontological understandings, the project indicates that the lived experiences of age can be viable indicators, in themselves, of health and wellbeing in later life.

The *Community Enrichment Program* will enable the ACSBD to progress research and funding initiatives that will further expand understandings of regional and community resilience, health, wellbeing and adult learning processes and practice.

Further Considerations

Project partnerships

Successes were built on the existing entity structure, experience and local knowledge of *GraniteNet* volunteers to initiate a community led project for a regional, and specifically Stanthorpe, context. Important for the achievement of the aforementioned outcomes has been the nature of the working relationship between the university and *GraniteNet* and the different roles played by the project partners. The combination of local community leadership, brokerage between the local community and the University, along with community sensitive grant administration and advocacy from within the University, have all been integral to the project's successful implementation. This serves to reaffirm the potential of university-community research collaborations such as this for community and regional capacity-building and for supporting individuals, organisations and communities to achieve their learning and development goals.

The knowledge and experience of the researchers in adult, community and specialist education, and new communications processes and practices, informed the progress of the project and, importantly, contribute to the subsequent development and sharing of knowledge. This multidisciplinary, cross-community collaboration has proved beneficial for the project and further benefits will become clear as the project's contributions to emergent knowledge about rural digital learning and later life are disseminated.

Limitations and challenges

Staffing changes at one of the aged care facilities left one staff member to facilitate the entire learning program and this was felt to have caused time management issues. The remaining staff member also felt that more support could have been given following the initial training as this was a first 'teaching and learning' experience for that staff member. There were also slight delays in obtaining the most suitable equipment, which led to a delay in the training component of the project. A stronger focus could have been given to regular monitoring of the changing needs and circumstances of the participating aged care facilities and identifying emergent training needs after the initial training.

Suitability of tablet PCs

An important understanding from the project was in relation to the benefits and limitations of the customised tablet PCs for use in supporting digital literacy learning and

engagement with aged care clients in the two facilities. Although more detailed analysis of this aspect of the project is ongoing, the feedback about the usability and affordances of the tablet PCs has been overwhelmingly positive. In particular, the decision taken by *GraniteNet* to apply for a funding variation in order to purchase fewer, more expensive tablets especially tailored to the anticipated needs and interests of the aged care clients proved to be a good decision, with centres reporting that both hardware and software were highly suited to the range of digital activities. A conclusion can therefore be drawn about the fitness for purpose of the tablet PCs purchased for this project and their potential suitability for successful deployment in other aged care facilities.

Three areas were identified by the aged care facilities where further consideration could be given. These areas were, 1) the loan agreement for the tablets and the delays in their purchase and deployment mentioned above, 2) that protective covers were not supplied and had to be purchased by the facilities before the tablets could be safely used with clients, and 3) issues with exceeding Internet download limits as use of the tablets increased.

GraniteNet continues to work with the facilities to resolve the issue of Internet access and download limits, with a condition of the ongoing loan agreement that the aged care facilities themselves pay for the cost of their Internet use (a cost which was met by *GraniteNet* for the duration of the project). The current rollout of the National Broadband Network in Stanthorpe is likely to have a positive impact on the quality and affordability of online services.

Conclusion

It is often difficult to anticipate potential challenges during the planning stages of a project, especially one which is developmental in nature. Through the support of the FRRR, we have been able to identify and work through challenges as they arose, and create opportunities for further dialogue. It is evident, however, that much work in the aged care sector in Australia is needed to reconceptualise older age – and learning in older age – in a digital context so that more effective planning and accommodation measures can be facilitated. Improved measures will offer an increased sense of connectedness and quality of later life in regional Australia.

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