*Practice Concepts and Policy Analysis*_____

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Blended Learning Networks Supported by Information and Communication Technology: An Intervention for Knowledge Transformation Within Family Care of Older People

Elizabeth Hanson, PhD,[*,1,2,3,4] Lennart Magnusson, PhD,[1,4,5] and Eva Sennemark, MA[6]

[1]Linnaeus University, Kalmar, Sweden.
[2]University of Sheffield, Sheffield, UK.
[3]FoU Sjuhärad Research Centre, University of Borås, Borås, Sweden.
[4]Swedish National Family Care Competence Centre, Kalmar, Sweden.
[5]University of Borås, Borås, Sweden.
[6]Contextio Ethnographic, Gothenburg, Sweden.

*Address correspondence to Elizabeth Hanson, PhD, Linnaeus University, Swedish National Family Care Competence Centre, FOKUS Box 175, Kalmar, Sweden. E-mail: elizabeth.hanson@lnu.se

Purpose: This article describes an innovative practice called Blended Learning Networks (BLNs) whose aim is to enable older people, their families, and care providers to exchange knowledge, learn together, and support each other in local development work so that care is improved for older people. BLNs were established in 31 municipalities, headed up by a local facilitator. They were supported by a national themed network consisting of virtual meetings between local facilitators and national facilitators at the Swedish National Family Care Competence Centre. **Design and Methods:** An evaluation was conducted to explore the utility of the BLNs so that any improvements to the model could be insti-gated. Focus group interviews were conducted with members of 9 BLNs, and self-evaluation questions were discussed in 16 BLNs. Limitations are that not all BLN members participated in the evaluation, and local facilitators conducting self-evaluations were not trained in focus group dynamics. Virtual focus groups were carried out with 26 of the 31 local facilitators and with the national facilitators. **Results:** Participants reported an increased understanding of caregiver issues and of each group's roles. Of particular value were the stories shared by caregivers and the potential for change locally due to the involvement of decision makers. The practice demanded con-siderable skills of the local facilitators. An initial

education for new local facilitators was deemed necessary. ***Implications:*** BLNs is a unique practice of community communications and knowledge transfer as it creates partnerships among all key stakeholder groups that act as a catalyst for improving care for older people.

Key Words: Communities of practice, Knowledge exchange, User involvement, Practice development, Videoconferencing

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Sweden has moved from a welfare model toward a partnership model in which the State and the family share the responsibility for care for older people. Increasingly, however, families bear the bulk of the care of frail aged relatives. Despite a succession of governmental stimulance monies to promote the development of community support services, there remains wide variation in the range and quality of services provided. Recent initiatives included a change in legislation of the Social Services Act, which stipulated that municipalities are obliged to offer support to family caregivers of older, disabled, and chronically ill relatives. The Swedish National Family Care Competence Centre was established to support all major stakeholder groups in their work to develop sustainable support services for older people.

Global challenges regarding care for older people and support of their informal caregivers are highly complex and beyond the remit of any one stakeholder group. Nevertheless, it is rare for all major interest groups to come together, share experiences with each other, and solve issues together. The "firsthand" experiences of elders and their caregivers themselves are all too infrequently heard when developing services (Nolan, Hanson, Grant, & Keady, 2007).

The purpose of this article is to describe an innovative model for knowledge transformation involving all key stakeholder groups within care for older people called Blended Learning Networks (BLNs). We present initial evaluation results from the implementation of this model within a number of municipalities across Sweden and conclude by highlighting the major lessons learned thus far for those wishing to replicate this practice model.

The Origins of BLNs

BLNs were initially created to support municipalities implementing an Information and Communication Technology–based support service called ACTION (Assisting Carers using Telematics Interventions to meet Older people's Needs). ACTION stemmed from an European Union-funded project and was designed together with older people and their families to help empower them in their daily lives. This was achieved by providing access to Web-based educational programmes and support from other ACTION families and dedicated care practitioners via the use of an integrated videophone system (Hanson, Tetley, & Clarke, 1999; Magnusson et al., 2002). ACTION practitioners in 26 municipalities across Sweden experienced greater job satisfaction. However, they often felt isolated in their work (Magnusson, Hanson, & Nolan, 2005). An informal network developed in which practitioners met to exchange experiences and provide peer support. Building on this network and the concept of Communities of Practice (Lave & Wenger 1991; Tolson, Schofield, Booth, Kelly, & James, 2006), six BLNs were developed within the ACTION Vinnvård project (2007–2010).

Communities of Practice consist of a group of people who share an interest, craft, and/or a profession. The group evolves because of the members' common interest in a particular area. It is through the process of sharing information and experiences with the group that members learn from each other and have an opportunity to develop themselves personally and professionally (Lave & Wenger 1991). In keeping with the ACTION user-focused design approach, BLNs were designed with a heterogeneous membership of both family caregivers and older people with chronic long-standing conditions, care practitioners, managers, politicians, and voluntary representatives. The work took the form of a learning project supported by a researcher (E. Hanson) and an experienced practitioner. ACTION practitioners acted as facilitators, heading up a local BLN in their municipality. BLNs enabled the "tacit" knowledge held by elders and caregivers to be highlighted and given credence (Hanson, Magnusson, & Widehn, 2009).

Use of BLNs in the Work of the Swedish National Family Care Competence Center

BLNs were considered to be conducive for the Center's work, given that its remit is to stimulate and support development work and knowledge transfer within municipalities, the health care regions, and voluntary sector with the ultimate aim of improving care for older people. Drawing

Table 1. BLNs s of the Center

Theme	Number of local BLNs
Individualization, evaluation, and development of family caregiver support services	11
Partnership working within family caregiver support services	11
Combining paid work and family caregiving	6
E-services and new technologies for family caregivers of older people	3

Note: BLNs = Blended Learning Networks.

on the lessons learned in Vinnvård, BLNs were established in the Autumn 2008. Specific aims were to enable members to exchange knowledge and experiences and learn from each other, to support each other in local development work, and to take into account relevant research and development results during their work. BLNs were established within four prioritized areas referred to as themes, and we identified the themes (E. Hanson and L. Magnusson) from our review of current family caregiver research and policy literature. These themes were also discussed and agreed on by the Center's steering board members at their first meeting. See Table 1.

Work in the local BLNs was supported by national facilitators, employed on a part-time basis by the center, and consisted of a researcher and experienced practitioner for each of the four themes. Regular supervision sessions were held with the local facilitators in their particular theme

Box 1. The "Marratech" Desktop Videoconferencing System Used Within the National Themed Learning Networks.

Features
    The desktop videoconferencing system enabled free, two-way multiperson videoconferencing.
    A white board function enabled word documents and power point presentations to be shared.
Technical specifications
    An e-meeting portal administrated and hosted by Linnaeus University.
    A standard pc, Web camera, and head set (provided by the centre).
    Broadband access (paid for by the facilitator's employer in the municipality).
Software: A special client software was downloaded to the facilitator's work computer (free of charge for the facilitator, Linnaeus University paid for the server).
Training and support: The facilitators received training and ongoing support from the Linnaeus University Distance Learning Helpdesk.
Special benefit: Instructions for use were in Swedish.

using a desktop videoconferencing system, which is described in Box 1 later.

The national facilitators recruited participants who were interested to establish and facilitate a local BLN to work with the specific theme in question in their own municipality. In total, 31 local BLNs were set up in municipalities across the country covering a distance of 1,500 km from north to south and 600 km from east to west. Local facilitators were predominantly practitioners with extensive experience of working with older people and their families. Many worked as family caregiver advisers in the municipality, and all but two were women. They all had a minimum of the equivalent of high-school education and few had university education. They all took part in an introductory one-day education, which consisted of a lecture on the principles and procedures regarding BLNs, computer training regarding the use of the videoconferencing equipment, and a research seminar in their chosen theme.

In turn, the local facilitators recruited members from each of the major stakeholder groups to form a local BLN. Table 2 presents a profile of a typical local BLN established in a small municipality (9,536 inhabitants) whose members chose to form part of the technology theme due to their interest in this current topic.

The actual number of members varied according to local circumstances and ranged from approximately 7 to 12 participants. See Table 3 for a description of the members of the local BLNs.

During November and early December 2008, each of the newly formed local BLNs had an introductory

Table 2. A Profile of Members Within a Local Blended Learning Network

Participant	Gender	Age (years)
Chairman of a pensionist organization and local facilitator of the network	Male	78
Family caregiver	Female	58
Family caregiver	Female	77
Family caregiver and member of a pensionist organization	Male	73
Nursing home resident	Male	96
A computer-interested senior with her own Web site	Female	79
Family caregiver support advisor	Female	26
Needs assessor	Female	58
Care practitioner	Female	27
Local home care manager	Female	39
Chief executive of social care services	Male	55
Politician and deputy chairman in the social care committee	Female	62

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Table 3. A Description of all the Members Within the Local Blended Learning Networks

	Total	Gender		Age (years)	
		Male	Female	<65	65+
Family caregivers	79	19	60	21	58
Non governmental organizations	35	13	22	5	30
Older people with chronic illnesses	36	8	28		36
Care practitioners	59	4	55	59	
Need assessors and managers	35	7	28	35	
Politicians	29	7	22	29	
Total amount of participants	273	58	215	149	124

meeting during which members got to know each other and ground rules for their work were agreed upon. In the Spring 2009, each local BLN had three consecutive discussion sessions focusing on the theme in question. During this process, a grouped written summary of key findings from across the local themed BLNs was developed, expanded, and refined according to the direct feedback of all members involved in the same theme. Prior to each "face-to-face" meeting of the local BLNs, a virtual planning meeting was held by the national and local facilitators for each theme to prepare for the forthcoming local meetings. Subsequently, following the local BLN sessions, a virtual follow-up meeting was also held by each of the themed facilitators (national and local) to discuss how the work had gone in the local BLNs concerned. This cyclical process is illustrated in Figure 1 later. The key activities of the themed networks are specified in Table 4 later. The final document agreed on by all members of local BLNs

within the same theme subsequently formed the basis for education material on the participant. This education material was compiled by the national facilitators and was designed for use in discussion groups with older people, family caregivers, practitioners, decision makers, and voluntary representatives. Finally, an evaluation session consisting of a focus group interview was held in the local BLNs prior to the Summer. The aim of this meeting was to reflect on the work that had been carried out during the initial period within the BLNs. Toward the end of this session, members also discussed and reached agreement on whether to continue with their work in their local BLN and, if so, what form their work should take in the Autumn (more details are given later about the evaluation session in the local BLNs).

Evaluation of the BLNs

An initial evaluation was carried out in late Spring 2009 to explore the utility of BLNs as a vehicle for knowledge transfer and as a support mechanism for local practice development work in the participant municipalities. The externally funded evaluation study was carried out by an evaluator with formal education and extensive experience in qualitative research methods (E. Sennemark).

Methods

Study Design and Sample

Initially, the evaluator studied all the project documentation, which included the minutes from the local BLN meetings, the themed summaries together with the original proposal, and work plan for the center. An interview was carried out with the director and research leader of the center
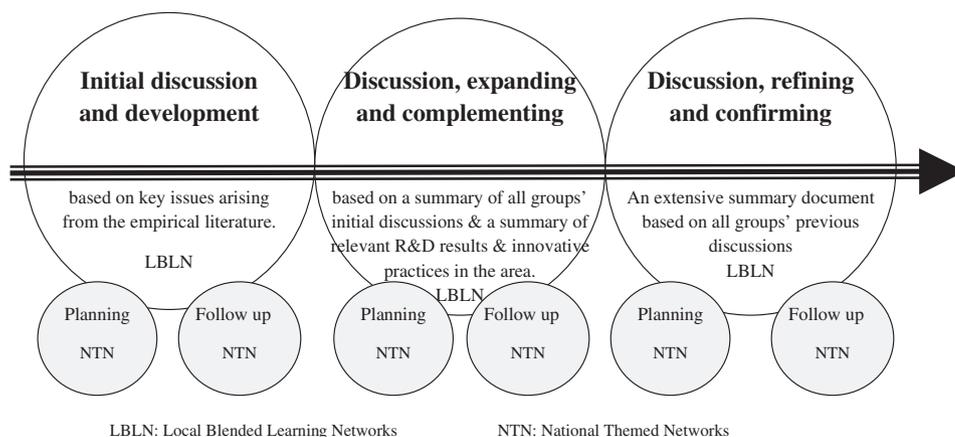

Figure 1. The iterative work cycle of the local themed blended learning networks.

Table 4. A Description of the Work Activities Within the Themed Learning Networks

Phases	Stage 1	Stage 2	Stage 3
Planning	A draft discussion material for the local BLNs is developed by the national facilitators, consisting of questions based on key issues arising from the empirical literature. The material is discussed and revisions agreed upon in a virtual planning meeting involving the national and local facilitators for each theme. The revised material is sent out to the local facilitators who forward it to their members prior to the local BLN meetings.	The national facilitators for each theme develop a new draft discussion material consisting of the compiled summary document from the first meeting of the local BLNs, a short summary of relevant R & D results, and examples of innovative practices in the area. A virtual planning meeting is held between the national and local facilitators where the draft material is discussed and revisions agreed upon. The revised version of the material is sent to the local facilitators who forward it to their members prior to the local BLN meetings.	A virtual planning meeting is held between the national and local facilitators of each theme where the extensive summary document is discussed and revisions agreed upon. A revised version of the material is sent to the local facilitators who forward it to their members prior to the local BLN meetings.
Meetings in the local BLNs	An initial discussion about the theme in question is held based on the discussion material and the participants' own experiences. The local facilitators take notes, and immediately following the meeting, minutes are compiled and sent to the national facilitators.	The material is discussed, and it is extended and complemented with the participants' own experiences and reflections. Notes are taken, compiled, and sent to the national facilitators.	The document is discussed, refined, and confirmed by the participants within the local BLNs. The local facilitators take notes, and immediately following the meeting, minutes are compiled and sent to the national facilitators.
Follow-up	Debriefing from the local meetings and discussion of any outstanding issues is carried out in a virtual meeting between the national and local facilitators of each theme. The documentation from all the local BLNs is compiled by the national facilitators.	A virtual follow-up meeting is held by the facilitators, which includes debriefing from the local meetings and discussion of any outstanding issues. The national facilitators compile the documentation from across the local BLNs into one extensive summary document.	Debriefing from the local meetings and discussion of any remaining issues is carried out by the facilitators during a virtual follow-up meeting. Any minor revisions are made to the document before it is sent out to the local facilitators who forward it to all the participants in their local BLN for their final approval.

Note: BLNs = Blended Learning Networks.

(L. Magnusson and E. Hanson) prior to the data collection period to help the evaluator gain an overview of the Center and to agree on suitable indicators for the evaluation based on the Center's overall aims and objectives.

The Center's objectives stemmed from the quality criteria framework for evaluating participatory research and development work developed by Nolan, Hanson, Magnusson, and Andersson (2003) from the earlier work of Guba and Lincoln (1989) and later Rodwell (1998) concerning the constructivist approach to evaluation and, more specifically, the use of the authenticity criteria. These criteria are outlined in Table 5 later. A constructivist approach seeks to bring together the perspectives of everyone involved in a study/initiative in order to reach a shared understanding/s.

Table 6 highlights how the authenticity criteria were applied to the objectives of the BLNs both with regard to the short and to the long-term goals and at the level of the individual, municipality, and nationally. This table provided a suitable evaluation framework for the study. However, given that the evaluation was carried out after six months following the setting up of the BLNs, the primary focus was on the short-term goals.

A formative evaluation design was adopted for the study as the primary aim was to assess the appropriateness and utility of the BLN approach (Patton, 1997) and to provide early feedback that

Table 5. The Authenticity Criteria for Judging the Quality of Constructivist Research

Authenticity criteria	Questions to be answered
EQUAL access	Are the voices of all the major interest groups heard? Does everyone have their opinions listened to and valued? Moreover, do they have equal access to all aspects of the research process?
ENHANCED awareness	
Self—of own views/opinions	Does the study help participants better to understand their own situation and those of others in the same group?
Other—of views and opinions of other stakeholders	Does the study help participants to better understand the position of the other interest groups that are involved?
ENCOURAGE action—by providing a rationale or impetus for change	Does the study stimulate or identify areas for change?
ENABLE action—by providing the means to achieve or at least begin to achieve change	Does the study actually facilitate, enable or empower change?

Note: Adapted from "Gauging quality in constructivist research: The ÄldreVäst Sjuhärad model revisited," by M. Nolan, E. Hanson, L. Magnusson, and B.-A. Andersson, 2003, *Quality in Ageing-Policy, Practice & Research*, 4, p. 26. Copyright 2003 by Pavilion Publishing.

would help to improve and refine the way of working with BLNs in the context of the Center's work. Qualitative research methods were employed as the focus was upon understanding the views and experiences of the participants themselves within the BLNs. Focus group interviews were carried out with nine local BLNs (46 women and 15 men), and with participants' permission, these sessions were tape recorded. The inclusion criteria were as follows:

- All key stakeholder groups were represented in the local BLN.
- BLNs were proportionally represented across all four themes.

- BLNs were chosen from different areas of Sweden.

The local facilitators in the remaining BLNs were asked to carry out a self-evaluation with their members, which consisted of local facilitators themselves carrying out a focus group interview with as many members of their local network as possible. The local facilitators employed the same interview schedule used by the evaluator for the external focus group interviews. Prior to the self-evaluation, the evaluator provided a written protocol for the local facilitators concerning the internal focus group session and she was also available by telephone for further advice. An additional

Table 6. Key Objectives of the Center's Local Blended Learning Networks

	Objectives		
	Individual level	Municipality level	National level
Short-term objectives	Everybody's voice is heard	The voices of all groups are heard	Increased focus on caregivers and their situation
	Increased knowledge and awareness about their own situation	Enhanced knowledge about how it is to be a caregiver	Enhanced knowledge about the situation of caregivers nationally
	Increased knowledge and awareness about other stakeholders' situation	Enhanced knowledge about the situation of family caregivers in the municipality	Data for inspiration material to disseminate and use in the workplace/organizations
	Identification of areas for development or change	Identification of areas for development work or change	
Long-term objectives	Changed situation	Development within family care support	Further development and improvement of family care support
	Enhanced quality of life for family caregivers and older people	Increased quality of family care support	New services and increased quality of family care support

Note: Adapted from "Gauging quality in constructivist research: The ÄldreVäst Sjuhärad model revisited," by M. Nolan, E. Hanson, L. Magnusson, and B.-A. Andersson, 2003, *Quality in Ageing-Policy, practice & Research*, 4, p. 26. Copyright 2003 by Pavilion Publishing.

member of the local BLNs often acted as secretary and took detailed notes of the self-evaluation session. As soon as possible after the internal focus group was completed, the local facilitator and secretary compiled a summary of their group's answers to the questions posed, which was duly sent to the evaluator. 16 local BLNs (59 women and 20 men) carried out a self-evaluation.

Four virtual focus group interviews were carried out with the local facilitators for each of the themed networks (26 of 31 facilitators participated). A focus group interview was carried out with seven of the national facilitators. The two project leaders (authors) who also had the role as national facilitators participated in two interviews together; an initial interview was conducted as described earlier and a second interview focused on their experiences of the BLNs.

Qualitative Data Analysis

In keeping with constructivist research, an inductive analysis was the method of choice for the evaluation (Rodwell, 1998). All the taped interview data were transcribed verbatim by the evaluator who then conducted a qualitative content analysis. Given the large amount of data, the NVivo qualitative research computer programme was used to assist in the coding of meaning statements from the raw data. NVivo was also subsequently employed in the development of core categories and ultimately themes (Smyth, 2008). The self-evaluation data served as additional complementary data, which helped to verify the themes identified within the transcribed focus group material. The data were analyzed according to the objectives of the BLNs previously outlined in Table 6. Data were compared for similarities and differences both within and across the different participant groups and with regard to the short-term objectives on an individual, municipality, and national level. Within this article, quotes from the interview data have been used to illustrate the main themes occurring at these three levels.

Findings

The qualitative data analysis yielded seven themes as outlined in Table 7.

Individual Level: Broadening of Perspectives and Deeper Insights.—Participants from across the target groups acknowledged the rarity and

Table 7. Overall Themes From the Qualitative Data Analysis

Level	Themes
Individual	broadening of perspectives and deeper insights greater equality and security as a caregiver
Municipality	making political inroads inspiring each other and planning together
National	the benefits of using ICT "on the spot learning" and further education needs

ICF, Information and Communication Technology.

value of meeting and discussing pertinent issues with each other. This was seen as being in contrast to other more homogeneous groups in professional and organizational life, which seldom generated such a range of insights. Members of local BLNs and local facilitators expressed that the blending of backgrounds of the participants was a success factor. They explained that different perspectives came forward, which helped to create a more in-depth understanding of elder care issues. As a caregiver explained,

> More angles are represented, like politicians are involved and there was someone from the municipality, care services. Also, a voluntary representative and I, who know what it's all about. We all can give something to each other and the pensionist groups are very important. Yes, I think we all agree that the more perspectives there are in a discussion, the more it gives.

Many participants mentioned the opportunities provided to listen to the experiences of family caregivers. This often gave other stakeholder groups a deeper understanding of individual caregivers' situations and the problems they encountered in their daily lives. Some participants spoke of "aha experiences". Furthermore, a number of politicians and care managers acknowledged an increased interest and awareness of caregiver issues as a result of their involvement. A politician admitted,

> I've noticed that since I joined this group that I've become more interested in these issues. There've been some TV programs [about care for older people] and it's been very enlightening to listen to these experts. It's also interesting to understand how service providers work because I didn't know that before.

Local facilitators expressed that they had gained a broader knowledge and understanding about caregiver issues, which gave them renewed "ammu

nition" in their discussions about caregiver support in their own municipality. They agreed they now had a more comprehensive picture of family caregiver support across Sweden. This was seen to be particularly valuable for facilitators in municipalities with less developed support services. A number of caregivers explained that they had gained more knowledge about the range of support services available to them locally of which they were previously unaware of.

Individual Level: Greater Security and Equality as a Caregiver.—A number of caregivers emphasized that they felt a greater sense of security and control over their individual caring situation than previously. They considered that this was a direct result of the information, advice, and support given by other members during the course of their joint discussions. As a caregiver explained,

> The best was the feeling that I could handle the situation. Maybe the administrator (in the municipality) didn't think that way when I called them but I told them what I wanted to do and they listened to me. The family care adviser (in the BLN) had told me what could be done and what options I had available to me.

Furthermore, caregivers explained that they felt they were treated on a more equal basis and attentively listened to by members of the other stakeholder groups. Caregivers perceived this experience to be different from their previous meetings with professionals. In the BLNs, they considered that they were actively given the time to share their experiences and reflect on them together. In this way, they felt themselves to be more equal partners sitting round the table together.

Municipality Level: Making Political Inroads.— Both local facilitators and members were unanimous in their interest to develop family caregiver support in their own municipality. Actual circumstances in the participating municipalities varied widely as several municipalities had extensive support services for caregivers, whereas others had relatively few established services. It was frequently mentioned that family caregiver support was put on the agenda and discussed more frequently in committee meetings concerning care for older people. In some cases, this also occurred at the local political level. Many participants in BLNs with representation from decision makers considered their inclu-

sion to be a critical success factor. This was due to the fact that politicians (with permission from members) could directly feed back from their local BLN discussions to their political committees. In several cases, local facilitators witnessed that the participant politicians had helped to "speed up" decision-making processes with regard to local caregiver issues, such as specific benefits for caregivers.

Municipality Level: Inspiring Each Other and Planning Together.—At the municipality level, local facilitators and members explained that as they had access to the discussion material from other BLNs within the same theme, this enabled them to gain new ideas from across the country. For example, inspired by a BLN who worked with caregiver support plans in their municipality, another BLN agreed to engage in similar work in their own municipality. As well, during the course of their meetings, members began to identify and reach consensus on further development work locally concerning care services. The most frequently cited example was the provision of more flexible respite care. With regard to staff development, members frequently mentioned the need for further education and supervision concerning communication skills.

In some cases, getting to know different stakeholder groups within their own BLN led to the development of new collaborative networks both within and beyond their municipality with a clearer focus on caregiver issues. As a local facilitator explained,

> It's given us inspiration to take new steps forward. What we've seen is an increased co-operation with the existing care planning group in the municipality. We've more contact with them, discussing caregiver issues from their perspective and how we can influence their work. We can also see a broader support for these issues in the municipality as well as an increased co-operation with neighboring municipalities and together we've created a network for family care support.

By June 2009, members in over half of the BLNs expressed their interest to continue their work together by focusing on the development of local caregiver services. Examples included evaluating and improving existing respite care services, collaborating with the entire chain of care providers, and finding new ways of reaching out to caregivers. Many networks became reference groups for

planning work in the area of family caregiving in their municipality.

National Level: Benefits of Using ICT.—National facilitators acknowledged that the use of modern Information and Communication Technology (ICT), primarily the multipoint videoconferencing system, had been an essential prerequisite for bringing local facilitators within the same theme together. In particular, it had helped to create a cohesive themed network on a national level. Once the initial technical problems had been resolved, the videoconference system made it feasible for local facilitators to participate in supervision sessions with national facilitators from their own workplace. This was recognized as being a much cheaper and more effective use of practitioners' time and resources. All the local facilitators were positive about the use of ICT as a forum for sharing experiences with one another and learning from each other,

> I think that these videoconferencing sessions are a fantastic way of having meetings. We can sit in our own municipalities (at home) discussing things and sharing what we're doing. Since we take it in turns (to talk) we can also have advice and ideas about how to do things. I think that it's very valuable for all of us.

National Level: "On the Spot Learning" and Further Education Needs.—National facilitators described the initial project period as a steep learning curve during which they had gained a lot of experience, and they acknowledged that they subsequently felt much more prepared to support new local facilitators. They expressed that an initial challenge was to develop suitable research-based questions. The researcher facilitators of the broader themes acknowledged the challenges of summarizing the extensive research in their area. National facilitators recognized the need for clarifying aims, roles, and documentation guidelines for local facilitators. All facilitators agreed that there was a need for an initial education and training manual for new local facilitators to help them avoid the most common "teething problems," such as uncertainty about the appropriate format and detail required for taking minutes and summarizing discussions; facilitator strategies to ensure discussions focused on the theme in question and, where appropriate, to raise the discussion from

an individual to a more general level. Several local facilitators initially perceived their role to be rather unclear, and they considered the discussion questions to be too abstract.

Discussion

BLNs act as a useful model for knowledge exchange concerning a complex topic and involving a wide range of stakeholders. This is due to the fact that members created a shared understanding/s, which provided the stimulus for identifying areas for local development work. In particular, the practice enabled the voices of caregivers and elders to be actively listened to and valued by the other participant groups. Participants acknowledged that such user involvement is rare, and this is confirmed in the empirical literature (Nolan et al., 2007).

BLNs are an appropriate model for user involvement of older people as meetings take place locally; the sessions are structured and intellectually stimulating; a social element is included, and they do not take up an undue amount of elders' time. Likewise, the level of participation is geared to elders' needs, as evidenced by the earlier work of Warren (1999) who found that elders most enjoyed coming to meetings and sharing their experiences with professionals. Elder participants in her study were far less interested in leading or initiating project work or carrying out research interviews themselves.

An additional strength of the model is that local BLNs formed part of a national themed network, which enabled members to gain a more comprehensive picture of family caregiver support across the country. This can be seen to be particularly valuable for smaller municipalities and rural communities with fewer resources for whom national project development work is often unfeasible.

Both "face-to-face" meetings (those in the local BLNs) and "online meetings" (those in the national themed networks) served important yet different functions, and they highlight that both types of networks can usefully coexist and complement each other. Likewise, it can be argued that both types of networks are important within everyday practice. Clearly, working in a BLN may not necessarily negate the need for members to participate in their own professional networks or patient and caregiver interest groups accordingly (Finch, Mort, Mair, & May, 2008; Marziali & Donahue, 2006;Tolson et al., 2006).

Use of inexpensive and secure modern ICT was an essential tool at national level as it enabled local facilitators to gain access to regular peer support and expert supervision, which would otherwise not have been feasible. The technology helped to bridge significant geographical distances.

Limitations

The findings reported here should be considered in the light of the evaluation study's limitations. It is recognized that not all participants took part in the evaluation, and only approximately 60% of the total 237 participants were reached. Nevertheless, all stakeholder groups were included. Local facilitators who carried out a self-evaluation did not receive formal training in focus group dynamics, and this likely had a negative impact on the quality of the data gained. However, this data mainly served to validate the main themes identified within the taped external focus group data. The formative evaluation was conducted early on in the process making it unfeasible to assess the long-term efficacy of the model. It is clear that further longitudinal follow-up and evaluation of the practice are warranted.

Lessons Learned

Several issues were identified from the evaluation findings, which are important considerations for researchers wishing to replicate the BLNs practice model:

The model demands considerable skills of local facilitators both in terms of leading and managing the discussion sessions within their local BLN and writing detailed minutes. Facilitators expressed the need for an initial education and manual for new local leaders in order to help them in their role.

BLNs are suited to those individuals who have a lot of genuine engagement and commitment in the area, and it cannot be forced on people. Team players and partnership working are demanded at all levels whereby participants and facilitators must be willing to listen, be flexible, give of their time, and share their knowledge and experiences with others.

The BLNs consisted mainly of native Swedish women, and for future replication, it is worth considering how to recruit more male family caregivers and caregivers of ethnic minority origin. As well, there were few local facilitators from the voluntary sector, such as carer, pensionist, and/or patient organizations. There is a need for further resources including financial remuneration for voluntary members' time

and costs, which was not offered during the start-up year.

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