FLASH REPORT

Informal Carers: Enabling Better Support in Integrated Long-Term Care

Date: 13 February 2026

Organiser: Eurocarers & EHTEL / Laurel

Participants: Approximately 50 attendees from across Europe

1 Overview

On **13 February 2026** the Laurel consortium organised a webinar titled "***Informal Carers: Enabling Better Support in Integrated Long-Term Care***". The event explored the crucial role of **informal carers within Integrated Long-Term Care** (I-LTC) **systems**, highlighting how they represent the backbone of care provision across Europe.

Participants had the opportunity to understand the extent to which carers' contributions remain unrecognised and insufficiently supported, despite being fundamental to everyday care life throughout Europe. They also reflect on different types of integrated support systems that informal carers need to effectively care for older adults and people living with chronic or cognitive conditions.

The webinar brought together four speakers who presented initiatives currently taking place in different parts of Europe, focusing on informal carers within the context of I-LTC. Their contribution helped clarify the role of informal carers and how they connect and interact with the various components of Long-Term Care systems.

The webinar addressed the following topics:

- Health monitoring, medication management and navigating care pathway
- Communication and coordination with health and social services
- Mental health care, emotional and psychological resilience

An overview of the Laurel project was provided at the beginning of the webinar, explain how the project aims to support the development of stronger and more equitable integrated Long-Term Care systems across Europe.

1.1 Speakers & Moderators

Four European experts shared their perspectives and visions on the future skills required for integrated Long-Term Care:

- **Cornelia Feichtinger** — Head of the Centre for Applied Nursing Research at the **University of Applied Sciences Campus Vienna** and representative of the **'COST Action BetterCare'** project, which aims to improve the prevention of care-related errors in home setting in order to enhance the safety of care recipients.

- **Giosuè Ruggeri & Maddalena Gambirasio — University of Bergamo** and representatives of the '**Caregiver Bergamo – Supporting Those Who Provide Care'** project, a local Italian initiative to provide integrated support to informal carers.
- **Lynne Denehy** — Support Manager, **Family Carers Ireland and** coordinator of the '**Family Carer Support project'** which aimed to develop a systematic approach to assessing and responding to the support needs of families caring for an older person.

Two partners from the Laurel Consortium moderated the discussion:

- **Giulia Lanfredi, Eurocarers**
- **Sara Canella, EHTEL**

1.2 Speakers' Talking Points

The first speaker, **Cornelia Feichtinger** opened the webinar by presenting the objectives of the **BetterCare project**, a four-year initiative involving 46 participating countries aimed at preventing care-related errors in home settings and improving the safety of care recipients. The project promotes dialogue on the consequences of care errors, foster multidisciplinary collaboration and develops educational standards and practical guidelines grounded in professional experience.

A key contribution of the project is **its definition of informal carers** as central actors in home care. Defined as individuals without formal professional training – though sometimes they also work in the healthcare sector in their professional lives – informal carers operate in highly complex environments. They are often **the first to detect** changes in a care recipient's condition and hold continuous, in-depth knowledge of the person they support. Despite this, the role they play in relation to safety within the care system remains largely **invisible**.

Feichtinger also highlighted the **emotional dimension of care-related errors in home settings**. When adverse events occur, informal carers may become '**double victims'**, experiencing psychological distress alongside the harm potentially suffered by the care recipient. Unlike institutional contexts, home environments frequently lack structured support systems to address this impact.

In this light, Feichtinger challenged conventional understanding of Integrated Long-Term Care as limited to professional settings, arguing that integration cannot be considered meaningful if the main providers of day-to-day care remain unrecognised and unsupported. A truly integrated model must explicitly embed informal carers' safety function, emotional burden and experiential knowledge within care design and policy frameworks.

The second speakers, **Giosuè Ruggeri,** presented '**Caregiver Bergamo – Supporting Those Who Provide Care',** an initiative taking place in the Province of Bergamo (Italy). **Maddalena Gambirasio**, **the second speaker representing this initiative**, was involved in the discussion session. This project consists of a structured territorial response to the needs of informal carers. Based on data collection and fieldwork, the initiative identified three core areas of caregivers need: service navigation, access to respite care and emotional and psychological support.

Launched in 2023 in collaboration with local authorities, the initiative is structured as a **network-based governance model** that integrates health, social and community services. Its operational backbone consists of 14 Caregiver Teams embedded within community and health centres, which had supported around 2000 caregivers by 2025. A key enabling factor of the model is professional integration and structured coordination with the broader service network and third sector organisations.

A central objective is to **increase carers' recognition and visibility** by creating dedicated information and listening spaces, strengthening inter-institutional collaboration and aligning services around carers' needs. The initiative also established a '**Caregiver Lab'**, a participatory innovation platform bringing together 95 organisations to co-design practices and foster collaborative governance.

Among its most recent developments is the piloting of a 'caregiver burden **self-assessment tool'**, designed to identify early signs of strain and activate appropriate support measures.

Overall, the Bergamo experience demonstrate that early recognition of strain, accessible information, coordinated services and shared operational tools are essential enablers of more integrated and responsive Long-Term Care systems.

The third speaker, **Lynne Denehy** presented the 'Family Carer Support' project (2021-2023), which explored a systematic approach to identifying and responding to the support needs of family carers of older people. The initiative aimed to develop a structured triage process, strengthen integration between acute, community and voluntary services and improve timely access to tailored supports.

The project adapted the ABCDES Caregiver Report, originally developed by Professor Molloy, using its care burden component as a triage tool within Outpatient Gerontology Memory Clinic at St Finbarr's Hospital in Cork (Ireland). Carers were stratified according to their level of burden, enabling differentiated responses: those experiencing high levels of strain were offered intensive one-to-one support, while others were directed towards appropriate information and community-based resources.

A core intervention was the 12-week Wellbeing Review, a structured one-to-one support process based on collaborative action planning and the Carer's Outcome Star, a conversational tool designed to help carers reflect on their role, identify goals, strengthen resilience and coping capacity. The model combined personalised planning with access to respite, counselling, advocacy, education and entitlement support.

The project also expanded referral pathways through partnership with statutory and voluntary actors, developing both professional online referral systems and community self-referral options to reduce access barriers. Complementary supports included e-learning modules, a structured 'Caring with Confidence' programme, and peer-to-peer initiatives.

Overall, the project demonstrates that family carers can be effectively integrated into Long-Term Care systems when formally recognised within assessment and care-planning processes. The consistent use of triage tools coordinated referral pathways and holistic needs-based interventions contributed to improved outcomes for both carers and care recipients. The evidence supports a shift towards preventive, integrated and carer-centred approaches that explicitly acknowledge the emotional labour of caring and promote carers' mental wellbeing and resilience. Family Carers Ireland continues to implement this integrated model through structured collaboration and clear referral pathways.

2 Poll & Q&A Wrap Up

Following the three keynote presentations, a live poll was conducted, consisting of three questions. This was then followed by an audience Q&A based on further questions raised by webinar attendees clarifying the speakers' messages:

- **Audience profile.** The largest share of participants represented NGOs and civil society organisation, followed by carer organisations. This distribution reflects strong cross-sectoral interest in the inclusion of informal carers within Integrated Long-Term Care systems.
- **Main challenges to including informal carers in I-LTC system**. The most selected response identified information gaps between care professionals and across different systems as the primary barrier. This result underscores the need for more effective communication, coordination and knowledge-sharing between institutions and authorities.
- **Most needed support measures to strengthen the integration of informal carers in I-LTC**. Participants highlighted training for care professionals on how to cooperate effectively with informal carers as the most urgent priority. This points to the importance of strengthening mutual understanding and structured collaboration between formal and informal care actors.

Q&A with the audience:

The subsequent Q&A not only provided an opportunity to further explore the specific features of the projects presented, but also addressed broader issues closely related to the topic of informal carers. The discussion touched upon migrant carers, age and gender balance, and examined caregiver burden in greater depth.

The challenges of engaging carers were also mentioned, especially the difficulty of encountering them before they reach a stage of high burden. Another barrier mentioned is the difficulty that several carers experience in recognising themselves as family such. This lack of self-identification was highlighted as a key barrier, reinforcing the need to raise awareness and ensure that informal carers are increasingly recognised, acknowledge and actively involved within support systems.

3 Take-Home Messages

- **Formal recognition is the foundation of integration**. Integrated Long-Term Care cannot be meaningful unless informal carers are systematically identified, assessed and included within care planning and decision-making processes.
- **Early identification of caregiver burden enables preventive action**. Structured triage tools and self-assessment mechanisms allow services to intervene before carers reach burnout, shifting from reactive to preventive models of support.
- **Emotional labour must be acknowledged as a systemic issue**. The psychological impact of caregiving requires structured support mechanisms, particularly in home-care settings.
- **Information gaps remain a major barrier to integration**. Poor communication and limited coordination between professionals and systems hinder the effective inclusion of informal carers. Clear referral pathways and interoperable practices are essential.
- **Relational and collaborative competences are as important as technical skills**. Training programmes should prioritise interprofessional collaboration, person-centred communication, and effective cooperation between professionals and informal care actors.
- **Awareness and self-identification are enabling conditions**. Many carers do not recognise themselves as such, limiting access to support. Awareness-raising at local level is crucial to ensure early engagement and inclusion.
- **Integrated governance strengthens care ecosystems**. Multi-level collaboration between healthcare, social services, community actors is a key enabler of sustainable, coordinated Long-Term Care systems.
- **Supporting carers is a sustainability strategy**. Investing in preventive, carer-centred approaches improve outcomes for both carers and care recipients, while contributing to the Long-Term resilience of care systems.

Resources

https://laurelproject.eu/webinars/

https://cost-bettercare.eu/

https://caregiverbergamo.it/

https://www.familycarers.ie/