

AIA Designs for Aging Knowledge Community

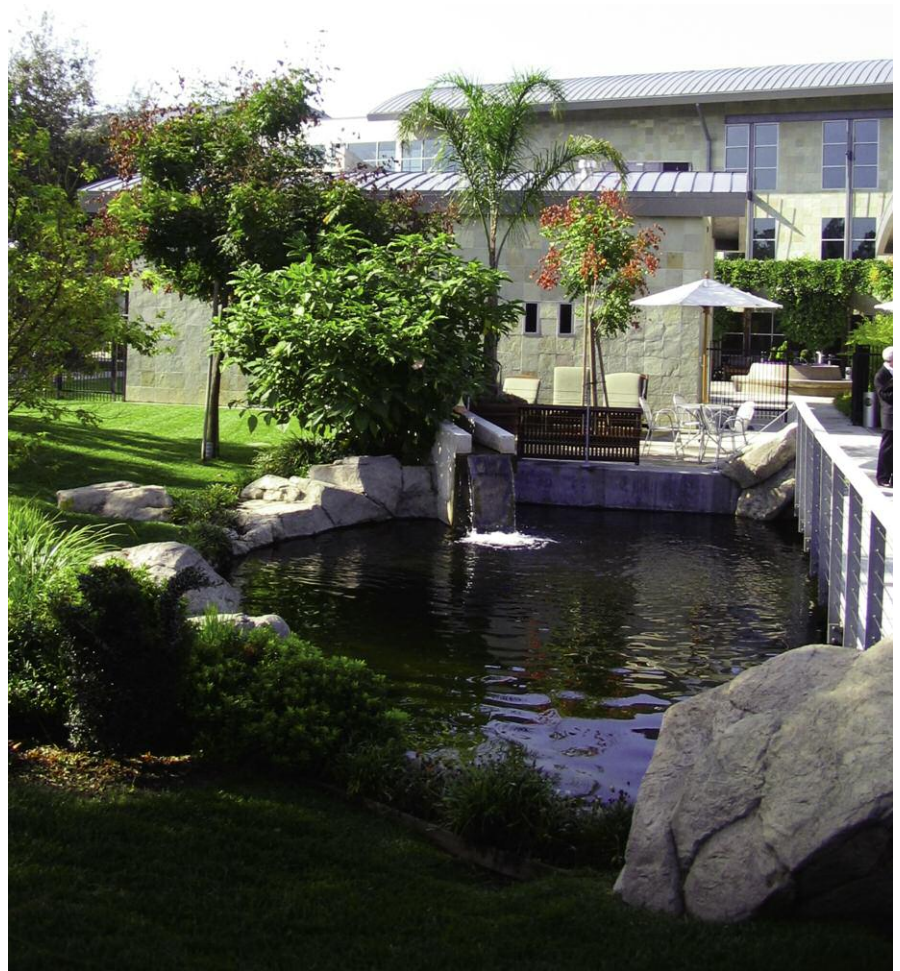
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The American Institute of Architects (AIA) is the professional membership organization of architects, currently with 80,000 members. The organization provides a variety of services, including distribution of information through knowledge communities. Each of the 26 knowledge communities is focused on a particular aspect of architecture or building type—for example, diversity in the profession or religious architecture. Each knowledge community is charged with assembling current information about its focus area and distributing it to the profession at large.

First organized about 16 years ago, the Design for Aging Knowledge Community (DFAKC) focuses on built environments for an aging society. The DFAKC established collaboration from the outset with the American Association of Homes and Services for the Aging (AAHSA), the industry organization for not-for-profit care providers. The DFAKC has never lost sight of its original mission of improving the quality of design for environments for the aging.

Design for Aging Review

The DFAKC accomplishes this mission most notably by sponsoring a biennial competition of environments for the aging called *Design for Aging Review*. Architects, in collaboration with their clients, are encouraged to submit projects that are completed or nearing completion for a juried, hidden identity competition within a variety of



project types, including nursing facilities, assisted living (AL) facilities, continuing care retirement communities (CCRCs), active retirement communities, and special projects that may include such things as a CCRC wellness center, special care facility, or sustainable design projects. Along with photographs and drawings of the projects, the submittal includes a significant amount of data that comes from both the

architect and client. These data include not only building areas, building costs, and staffing ratios, but also a statement from the architect and owner, operational assumptions and responses, and major design objectives and how those were met. Between 80 and 100 submittals are received for each cycle, and they are juried by 2 care providers and 2 architects who are practicing within the

realm of designs for aging.

From each *Design for Aging Review* cycle's submissions, approximately 40 are chosen for inclusion in the published book that has become a guide for design trends for the care provision industry. Awards of Merit are provided within each submission category for projects that advance designs for environments for the elderly population (see *Design in Action: The Village at Waveny Care Center* on page 25 of this issue). As part of their jury duty, the jurors travel to 2 selected Award of Merit facilities to perform a post-occupancy evaluation of the facility using the submittal objectives and responses as a starting point for the site evaluation.

Post-occupancy Evaluations

This post-occupancy evaluation (POE) initiative has long been a part of the DFAKC program as a tool to peel back the professional photo layer and really understand whether the award-winning design is simply attractive or really serves the residents and staff who daily spend time within its walls (see *Learning from Post-occupancy Evaluations* on page 30).

The POEs have introduced a more consistent method for both architects and care providers to critically review their care environments with the goal of improving the quality of life for their residents through appropriate environmental design. The POE initiative involved nearly 50 evaluators and has been received so enthusiastically that it will continue as a companion initiative to the *Design for Aging Review* in collaboration with the Aging Research Institute.

Education

DFAKC regularly sponsors presentations, pod casts, and webinars on these subjects and more. Each year the American Association of Homes for the Aging (AAHA) provides a slot at its national convention for the *Design for Aging Review* jury to

present the result of their deliberations and to expound on their selection process and procedure. Regular presentations are also made by members of the DFAKC at the AIA national convention where designers and others can learn about trends in design for elderly environments. In addition, the DFAKC has initiated an annual 2-day international symposium held in Kansas City where a variety of both design and care approaches are discussed. Attendees travel from around the world to attend and learn about the design and operations of cutting edge care facilities in the United States.

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Outreach

AIA consists of a national organization and numerous local components. The local components are where members daily interact with the overall organization. The DFAKC is actively seeking to expand local component committees to include environments for the aging. Accomplishing this will provide a system for knowledge distribution that can react to localized issues and weave the overall fabric of information important to care providers and designers into a more meaningful and current cloth.

Research

Expanding the role of evidence-based design is important to the

DFAKC. One of the most important aspects of neuroscience research is the human response to specific built environments. This is particularly important to the long-term healthcare industry. In collaboration with the Academy for Neuroscience for Architecture (ANFA), the DFAKC brought together leading neuroscientists, care providers, and designers for environments for the aging last December. The brainstorming session investigated how applied scientific research in conjunction with specific aspects of the built environment can prove efficacious to the quality of life for both residents and staff. As a result of this 2-day conference, designers and scientists arrived at a series of specific scientific research needs to provide clear road maps for future design that more humanely accommodates the human spirit. Funding is now being sought to initiate these research projects, but more important, a dialogue has been established that transcends professional barriers and will continue between these two groups of professionals for the benefit of the elderly population.

Networking

The DFAKC also provides opportunities for professionals to network each year at the AAHSA national convention. The reception, attended annually by as many as 200 people, highlights the year's accomplishments and allows designers and care providers to socialize, exchange accomplishments, and come together in a spirit of camaraderie that transcends competitiveness.

Sponsorships

All of these initiatives do not come without a price and generally that price exceeds the yearly budget provided to the DFAKC by the AIA. Thus the DFAKC is also charged with finding financial sponsorships for the work it does. A subcommittee of the DFAKC continually searches for those firms interested

in partnering for the greater good of environments for the elderly.

Serving the Elderly Population

This work comes together for a single purpose: creation of environments for the elderly population that enhance their lives and provide a productive workplace for staff (see *Creating Community Through Design* on page 21 of this issue). Through the mid part of the last century, environments for seniors were primarily institutional, unwelcoming, and designed simply to be a weigh-station for the aged as they progressed to the end of their lives. In the late 1980s and early 1990s AL became popular with its more home-like environments and humane approach to care. This approach emanated to other care provision areas, particularly nursing and special care for those with dementia. It didn't take long for designers and care providers alike to conclude that environments sensi-

tive to the care needs of the aging and to the care provision of the staff would make a significant difference in the quality of life for both residents and staff.

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Sharing what we've learned in the last couple of decades with as many designers and providers as will listen is ultimately the task of

the DFAKC. Because we are just beginning to scratch the surface of this information, particularly evidence-based design research, there is much to do. There is also room for many beyond the profession of architecture and dissemination of information. We who are deeply involved with the DFAKC consider it a labor of love and willingly devote resources to the task. With an increasing interest in environments for the elderly populations and a rapidly changing demographic, the task can, at times, seem tremendous. But the bottom line is that if this work is left undone, we as a country will ultimately suffer.

For more information on the DFAKC, visit the AIA at: www.aia.org/dfa3_template.cfm?pagename=dfa%5Fdefault. ALC

Jeffrey W. Anderzhon is chair of the American Institute for Architecture's Design for Aging program.

Resident and Staff Influence on Facility Redesign

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re-energize. The new building contains a private-access staff lounge and an outdoor fenced-in courtyard.

A wander-alert system and video cameras are managed from the main nursing desk, where staff members are informed immediately if a resident with an alert monitor exits the building. The name of the wandering resident appears on the computer screen; included is which door was exited. Security cameras allow staff to observe what direction the resident has taken. As soon as the alarm goes off, a coworker can be dispatched to accompany the resident back inside.

Twenty years ago many of those who live at Brompton Heights would have had to enter a skilled nursing facility. Staffing and design changes in facilities like this one now allow more residents to age in



Figure 3. At the request of the nursing staff, smaller decentralized nursing stations were placed throughout the building.

place. More important, however, the quality of life found in many AL facilities has greatly improved. In fact, at Brompton, residents and staff call the new building a "reinvention of luxury assisted living." ALC

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