Trends in Resident-focused Design

Quinn A. deMenna, AIA, and Lisa Ann Fagan, MS, OTR/L

Well-intended designers are compelled to believe that the design of a senior living facility has a substantial impact on resident care and comfort. How can design decisions transformed to bricks and mortar have a quantifiable impact on resident quality of life (QOL)? We have all witnessed extraordinary care in sterile environments, as well as mediocre care in sparkling new facilities. It is more than the physical environment that is responsible for resident QOL.

Quality of Life

What do residents and family notice about a top-notch facility? What they think about is the extraordinary staff whose compassionate care provides QOL for the resident. Memorable experiences include attentive care, tasty meals, and interesting activities. Facilities that value resident QOL exude a culture in which caregivers and residents form bonds based on respect, courtesy, and kindness. This culture shows in the late-night back scratch, the shared stories, the extra cookies with coffee, and the celebrations of accomplishments and events that create the sense of community that contributes to perceived QOL.

The advantages of social interactions in assisted living (AL) or retirement communities are significant when we imagine a place that is potentially better than our lifelong homes—where residents are not isolated, where visitors feel welcome, and where Boy Scouts and Girl Scouts, preschoolers through high

Figure 1. Built-in features and the ability to personalize. The Sylvestery at Vinson Hall, Mclean, VA.

Larry Lefever Photography

schoolers come by to entertain. This lifestyle is often more socially stimulating than living alone in one's own home. We know that social engagement is a key ingredient to health and well-being.

The Value of Good Design

The value of good design should not be underestimated. The environment sets the stage for our expectations and acts as a constant reminder that the facility is a home for individuals—real people who may be declining in physical and cognitive abilities.

The well-designed environment enhances the resident's ability to function. At a minimum, design for seniors needs to get the fundamentals right, such as eliminating roadblocks to function in the environ-

ment. Mastering the basics of accessible design and universal design principles, along with understanding the impact of the aging process, are essential to meeting the needs of seniors.

Providing appropriate design solutions for older adults is to recognize that seniors expect and have the right to continue the lifestyle that was available to them prior to taking up residence in a senior living facility or community (Figure 1). It is often the simple considerations in planning and design that yield the greatest value in a person's ability to enjoy day-to-day living—considerations like access to nature, daylight, privacy, independence, choice, and control are critical to long-term health and a sense of well-being. The challenge for the

design team is to accomplish these objectives within the constraints of mandated accessibility regulations, budgets, staff efficiencies, and life-cycle costs.

Building Program and Philosophy of Care

Planning and design decisions must be grounded in a thorough knowledge of resident and family expectations and staff needs to provide supportive environments that are residential in appearance, yet function as an efficient institution.

The first and most important step in a new building, renovation, or building addition is the space programming. Programming should be developed as a collaborative effort between the owners, operators, staff, and the architect and design team. Residents and families can be surveyed through focus group sessions. Resident-focused building programming must go beyond the number and size of rooms. The program must include the provider's mission and vision and considers care models, staffing ratios, and resident activities requirements. Will meals be served in large dining rooms or smaller country kitchens? Or will facility policies allow the residents to stay in their pajamas within their household for breakfast while lunch and dinner are served more formally? Will there be activities that demand large spaces, such as worship services or dances? Once the provider's vision of how the home will operate is defined, the design team can effectively develop solutions that enable the building to achieve a successful balance between form and function. The design team should not direct the program decisions; rather the design team helps to bring ideas to fruition by providing spaces for activities that support the intent of the care model. For example, a space that will be used for cooking or gardening needs access to water, whereas a space for movies needs good acoustics, light-
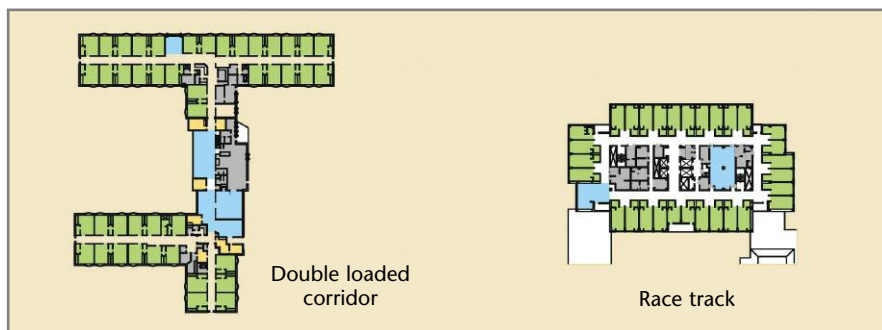
Figure 2. Medical design models were focused on making care easier for staff.
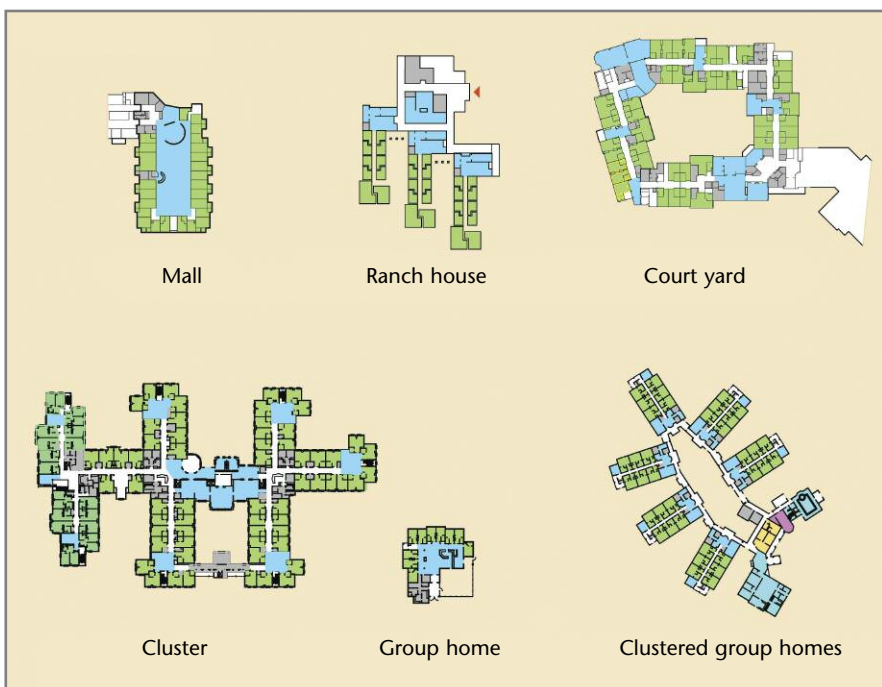
Figure 3. Today's AL facilities are designed to create the right balance of home and community for the resident.

ing control, and comfortable seating. A generic multipurpose room will not serve all functions well.

Home or "Homelike" Design

Senior living facilities are, first, the primary residence or "home" of the occupants. The need to create a sense of 'home' within a congregate living space presents unique challenges because each individual has a different idea of what home is. *Home*, for most of us, is having the ability to personalize and furnish our space with familiar things.

While most of us would agree that our homes should be safe and comfortable, what constitutes those

qualities for each person is as different as one person is to another. Choices of bold or muted colors, modern or traditional furniture, and many other factors need to be considered to create a place that feels like home.

Several features are universally considered to be homelike, such as kitchens, fireplaces, porches, and living rooms. Just like we all have our preferred rooms in our homes, well-designed facilities provide many alternatives, so that individuals can seek their favorite places. A quiet corner with a sunny window may be the favorite place of one resident, while another enjoys the

hustle and bustle of the country kitchen, and yet another likes the cozy den with comfortable furniture, good lighting, and a big TV.

Care Models and Facility Configuration

As health care becomes increasingly science driven, the recognition of the need to focus on the whole person has also become an increasingly important aspect of care. The transformation from systems of providing care that focused on staff efficiency (Figure 2) toward models that revolve around the recipient of care has been demonstrated to improve QOL. The use of these care models and associated facility configurations has created a culture change in the senior living industry that focuses on the resident instead of the providers of care. This shift can be seen in recent projects with decentralized care and activity areas (resident focused) versus past centralized configurations.

Senior living design focuses on creating ideal environments for older adults, as opposed to borrowing institutional models from hospital precedents. The choice of design configuration requires thoughtful consideration to what facility layout will provide the right balance of home and community (Figure 3) versus institutional, efficient design. The new models promote continued participation in meaningful activities, from taking a shower to hosting a dinner party.

The most common models in senior living facilities include:

- The Hospitality Model provides services and an image that is similar to those found in a hotel or country club.
- The Eden Alternative Model focuses on environments that are enriched with pets, plants, intergenerational activities, and engagement with others.
- Activity-based Care offers the opportunity to participate in real-life activities.
- The Household Model creates

Figure 4. Shared bedroom with wall dividing bed areas. St. Paul Homes, Greenville, PA.

small-scale clusters of residences, with or without a larger community.

Technology

As we begin the 21st century, we are experiencing rapid advances in science and technology that can benefit older adults in terms of early detection and diagnosis of medical conditions and treatment. The use of technology in AL facilities permeates care provision, resident monitoring, and documentation. Assistive transfer devices can decrease the risk of injury for both residents and staff. Smart home technology and medical monitoring helps gather data about daily living patterns (continence, hydration, physical activity) that cues staff about a resident's changing cognitive or physical status. For residents who attempt to travel to areas of the facility that may pose a health or safety risk, monitoring technologies can prohibit access or identify resident location.

Technological trends in documentation and electronic medical records provide several advantages, including:

- Decreased documentation time

and increased documentation accuracy
- Improved security of records
- Enhanced communication among providers (eg, first responders, hospital emergency department staff, specialists)
- Improved communication between residents, family, friends, and staff

New documentation systems often require less room than traditional paper-based charting, and offer the flexibility of multiple locations.

Active Aging

Senior living designs now use the environment as a tool for health maintenance, health promotion, and active aging. Pools, walking paths, and spaces for group exercise and other activities are key elements in the design of communities that promote health. Well-designed buildings offer residents the choice and opportunity to walk longer distances in climate-controlled comfort.

Outside walking paths are important components of a health-promoting building, but they must have

shaded benches for resting or socializing. A variety of outdoor activity spaces is also desirable, from gardening beds to bocce courts (or whatever activities the residents prefer).

Additionally, the building and spaces must allow for continued participation in valued activities as abilities change. Spaces need to be adaptable for people who are standing or sitting, or who have a range of sensory capabilities.

Universal Design

The ultimate goal of good design is the test of universality… does it function well for all people? Short or tall, young or old, literate or nonliterate people of all abilities should be able to use the features and products in the environment, to participate in the manner they wish in the activities they want. This is the vision of universal design (see also "Best Practices for Assisted Living Design" on page 25 of this issue).

Design should support residents' abilities to bathe or shower in the manner they wish (and to perform other daily living tasks). For staff, the ability to provide care in an environment that reduces the risk of injury is paramount. For visitors, the building should be easy to navigate. Good design exceeds the minimum accessibility guidelines of regulatory agencies, and it enhances the well-being and participation of all.

Sustainable Design

Sustainable design, sometimes called "green design," is a burgeoning trend in senior living construction. It is driven by a provider's core values that include care for all creation. Conservation of our natural resources is increasingly a key consideration for building design and renovation. Melding these principles with building design and construction practices not only reflects responsible stewardship, but also responds to a growing market demand for high-quality, environ-

mentally friendly accommodations.

Sustainable design, and specifically Leadership in Energy and Environment Design (LEED) Certification, promotes building design measures that are beneficial to seniors at all levels of care. Components of sustainable design, such as increased day lighting and outdoor views, help to improve well-being and reinforce orientation in time and space, while measures for enhanced thermal comfort and individual control promote independence and comfort. For senior living residents, many of whom are confined indoors, air quality is important for health and well-being. Sus-

The well-designed environment enhances the resident's ability to function.

tainable design strategies eliminate many potential indoor contaminants while incorporating measures to monitor and improve ventilation and overall indoor air quality.

Safety and Independence

An increasingly important feature of resident-focused design is the ability to provide supportive features that promote continued independence and safety in activities of daily living, especially bathing, bowel and bladder hygiene, grooming, and dressing. Well-designed bathrooms are well-illuminated, while minimizing glare, and have sufficient color contrast to highlight features that promote safety, such as grab bars. They must accommodate a range of preferences, by providing seating for grooming activities or flexible grab bar arrangements to support residents who stand or sit in the shower or at the toilet. De-

signs must accommodate a wide variety of user sizes, shapes, and strengths. A variety of bathing options, including no-step entry showers and tubs for easy entrance, provide the most flexibility in meeting the preferences of residents.

Other features that promote continued independence include lowered closet rods, raised electrical outlets, easy-to-use controls, handrails in hallways, and higher seat heights.

Privacy and Control

Most people prefer to have a private bedroom, or to share space with a spouse. The need for shared occupancy between individuals who do not know each other may occur in some settings because of either facility policies or payer regulations. Shared bedrooms can create many challenges, from control of ambient temperature and lighting to negotiating schedules for bathroom use, or from providing equal access to windows to the ability to personalize the space (see Figure 1). Trends are for private rooms or separately defined bed (either with a partial or full wall between spaces; Figure 4) with equal window space and areas that can be decorated as each resident chooses.

Summary

Resident-focused design in senior living facilities creates buildings and environments that maximize residents' continued independence, safety, and participation in meaningful activities, facilitate the provision of care by staff, and promote health and well-being. While the building itself does not create a care program, the design of the space should support the overall care model and programming that the staff and owners envisioned at the start of the process.   ALC

Quinn A. deMenna, AIA, is an associate at Reese Lower Patrick & Scott Architects. Lisa Ann Fagan, MS, OTR/L, is an occupational therapist and faculty member at Towson University.