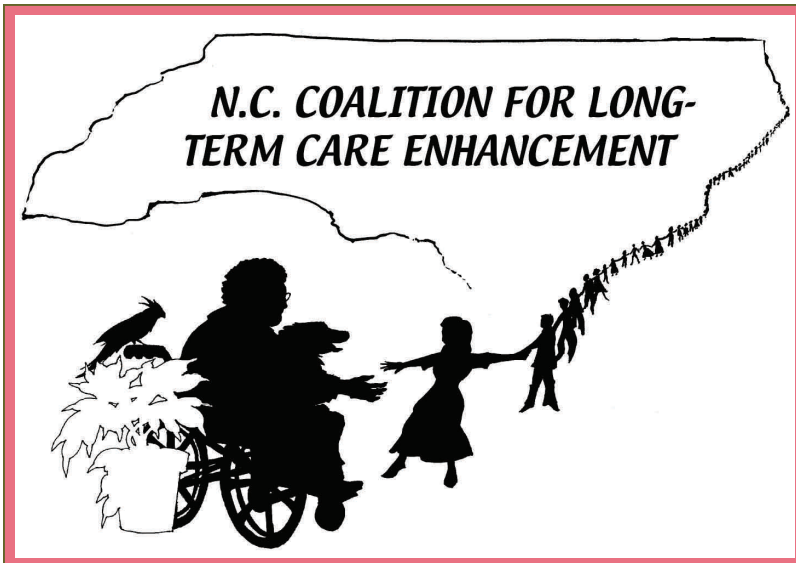

Special points of interest:

The Design Edition of the EMBRACE Newsletter

SAVE THE DATE Information on NCCLTCE Conferences next year!

Friends of Residents in Long-Term Care Gala

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Embrace!

The Newsletter of the NCCLTCE

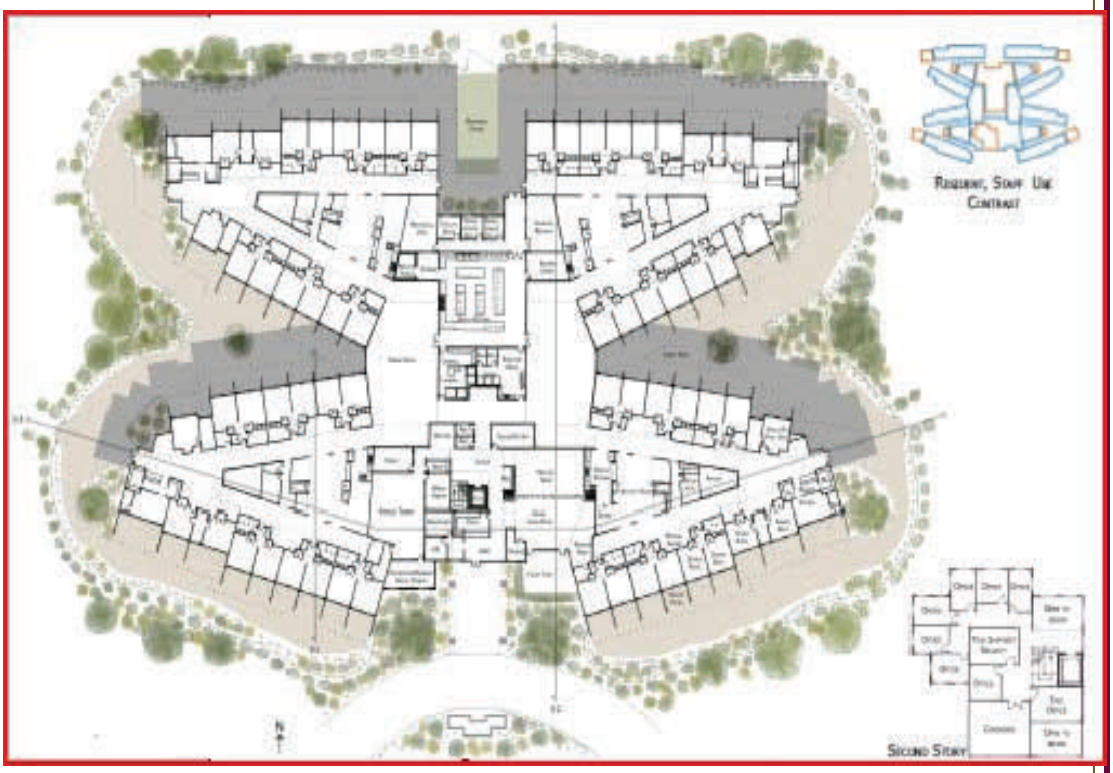
From the Desk of the Guest Editor

Kaye Brown, Ph.D.

Welcome to this special design issue of the NCCLTCE's newsletter. From hallways to hospice, ceilings to floors, inside to outside we bring you fresh ideas to enhance the physical environment of your care community. In the pages that follow, you will find a wealth of ideas from some of the best designers in the senior care business and from students about to commit to designing for elders. When it comes time for you to plan your new environmental initiatives, think of these designers as trusted guides for new and renovation projects. I wish to thank each of our authors for sharing with us their wise counsel on ways to improve our resident-centered buildings.

Kaye Brown, Ph.D.

Guest Editor



Evergreen, by Brianna Luce and Devin Graham of Cuesta College, took first place honors in the 2nd Annual AIAS/SAGE Student Design Competition "Rebuilding HOME." Read about this project on the next page.

National Design Competition to Introduce Young Designers to LTC By Kaye Brown, Ph.D.

For the past two years, SAGE (Society for the Advancement of Gerontological Environments) has partnered with AIAS (American Institute of Architecture Students) to sponsor a national student design competition in which young architects-in-training are asked to design a renovation or replacement 60-bed skilled nursing home. The students are challenged in these competitions to attend to the following concerns as they re-conceptualize this care environment:

3-D model of Evergreen

Move from institutional idioms to residential idioms for long-term care environments
Reference the new codes supporting neighborhoods and households
Integrate the new 60-resident home into its surrounding, supportive community
Achieve all this in no more than 50,000 sq. ft. through good design and a bit of fun

Fifty-six student teams registered for last year's competition "Rebuilding Home." The national jury saw in the winning entry "Evergreen" a wonderfully sensitive project that stood out from all its competitors. The requirements for the healthcare aspects of the project, the square footage limit and integration into the urban fabric were all met.

The two-member design team of Evergreen wanted the jury to see that it could be built (hence their model shown here) and that its form was not only functional but really quite beautiful.

The young designers also wanted the jury to see the rich details they put into their project, as seen below in the typical resident's room and in a household activity space.

The competition winners called their project "EVERGREEN , A Sustainable Community promoting successful aging for the elderly." It was designed by the young and very talented design team of Brianna Luce and Devin Graham, Cuesta College, San Luis Obispo, CA who were advised by David Fernandez. By winning first place, Brianna and Devin received $2500, a crystal trophy, an all expenses paid trip for both to the awards ceremony at Environments for Aging conference in Atlanta, and $500 for their school's AIAS chapter.

For our third annual competition, "*Renewing HOME,*" which opens Fall 2011, we challenge students to renovate and add onto an existing institutional project and to integrate it with designed spaces out-of-doors to create a holistic, resident-centered environment for 60 long-term care residents and their caregivers. If you and your organization would like to be a sponsor of the competition, we would be pleased to discuss this opportunity with you.

Kaye Brown, Ph.D. holds advanced degrees in sociology (Duke University) and R.E. design and development (University of Pennsylvania). Dr. Brown is a licensed N.C. residential contractor, a certified NAHB Aging-in-Place specialist, an active member of the NC Coalition for Long Term Care Enhancement, an Eden Alternative Associate, and a charter member of the Pioneer Network's Coalition Committee. Kaye chairs SAGE North Carolina (i.e., Society for the Advancement of Gerontological Environments) and is on the Board of the SAGE Federation. With colleagues in SAGE and AIAS, she developed the AIAS/SAGE Student Design Competition to introduce architects-in-training to the long-term care. She can be reached at Kaye.Brown@duke.edu.

Highways or Hallways: Designing Effective Corridors for Senior Environments

By: Carol Reitter Elia, ASID

The pathways throughout Senior Living environments can be the considered the "highways" of the communities. Hallways come in all shapes and sizes. After all – architects and designers have been working painstakingly for years to come up with THE BEST and most receptive improvement to the Double Loaded Medical Model Corridor. But what happens when our client wants to adopt Culture Change without changing the architecture of the medical model? Or when they want to improve upon what currently exists but don't have the budget to make architectural renovations?

The re-design of hallways in senior living environments must address innovative design upgrades, durability, product life span, cost and way finding techniques. In addition, lighting, handrails, flooring, and acoustics are just some of the other details that play a major role in the overall result of a good corridor design.

Who is on the road?

The population in senior living varies, and so do the residents' physical limitations. By designing for all of these limitations we can provide a supportive corridor that is safe, durable and inviting. Some of these physical limitations include loss of ordinary mobility, deteriorating eyesight, loss of grip strength, and hearing impairments. Many residents also suffer from diagnosed or even "undiagnosed" dementia or memory loss.

First and foremost it should be our goal in the re-design of a senior living corridor to create a residential model, one with the familiarity of home which will encourage independence.

Mobility is independence, it is that simple.

The best exercise is still considered walking. Often times, a foreboding corridor can limit a resident's choice to leave their room. Changes in vision contribute to loss of mobility as well. By choosing to create visual contrast between the upper and lower walls, the floor and the base, the handrail and the wall on which it resides, we can provide residents with more visual cues.

Finding the Exits along the highway

Although signage is often the first answer for visual cuing, try to think more than just color and signage for creating visual cuing. Making color changes at certain key areas in the hall can provide a natural way finding tool as well as add visual interest. "Rest stops" can be incorporated to help with the inevitable length of corridors. If the architecture permits, the addition of window seats can be an attractive and

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functional way to bring natural light into halls and add a perching spot for a tired traveler.

Paving the Road – Choosing good flooring choices

Choosing between resilient flooring or carpet can be a real dilemma for you and your client. Be careful if going with resilient flooring – a high gloss finish can cause glare and even look wet to the aging eye. If choosing carpet, level loop has been found to be the pile style of choice. Avoid using any type of padding, as it will tend to trip shufflers and be most difficult for those in wheelchairs or walkers. Also avoid varying levels of loop pile as this too can cause tripping hazards.
Floor coverings in general should be chosen for their minimal contrast and patterning, moisture resistant backings, fibers that last. Provide transitions that are not tripping hazards. If unsure, add a transition strip to a small area, and have some residents "test drive" over the strip. If you are successful they will know right away!

Backings are almost as important as the actual carpet selection itself, so insure that you have a moisture impermeable backings with welded seams vs. a carpet backing that simply states that it is moisture "resistant".

Walls – the "crashrails" of our roads

Paint vs. wall covering is always a huge issue for most clients. Certainly budget can determine this answer quite quickly. Rigid wall protection products are king of durability - but at a cost. It comes down to: does the facility want to continue to paint the wainscot over and over again and spend time disrupting the hallways and using staff for this task (or hiring outside subs – even more costly) or would the facility like a one-time investment that hold ups to abuse and looks good for years and years?

Lighting the way – a look at the best options for illuminating our halls

Lighting should be indirect if possible, lessening glare for aging eyes. A favorite solution if the architecture will support it, is indirect cove lighting using fluorescent lamping behind decorative cove molding, while the resident sees no sign of the actual light source. Try using a highly reflective white paint above the crown molding to reflect back the light into the corridor, even if the design calls for a deeper paint or wallcovering on the walls below the molding.

Glare can be a real problem with recessed fluorescent down lights in ceilings especially if the reflector is clear Alzak and most are! Sometimes the reflectors can be retrofit with a white or matte Alzak reflector which will help immensely. Another option to

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consider are LED retrofit kits. For a little more than $100.00, an LED retrofit kit can be installed in the same locations as the current downlights, providing less glare and over 25,000 hours of lighting before having to replace the lamp!

Although many of the public spaces in our communities take varying degrees of abuse, hallways have an amazing tendency to wear out very quickly and "ugly out" even more so, if the initial design does not address durability, function and aesthetics from the onset of a project.

Carol R. Elia, ASID, LEED-AP, is principal of CR Design, an interior design firm specializing in exceptional design for senior living environments. The firm has a particular focus on bringing eco-friendly benefits of "green" design to communities for the aging. CR Design creates environments that reflect and define the client's unique brand and culture for residents, visitors and staff. Carol is a frequent presenter at NEOCON, the World Trade Fair for Interior Designers. She is on the Advisory Board for Moore College of Art & Design, her alma mater, and continues to frequently mentor students throughout the school year. Hallway photo courtesy of Greg Benson.

Learn to Listen: A Designer's Experience with Understanding Hospice

By Andrew Lee Alden, Architect

During one of my presentations about the design of an inpatient hospice, it suddenly occurred to me that I was not doing justice to one critical aspect of the presentation. I could speak about the architectural components & the human side of the equation, but since I had not directly experienced hospice as a resident or family member, I was missing the interaction between these two components.

To resolve this issue, I went to hospice communities that I knew and arranged to meet with residents, family members and staff. The discussions ranged from the impact of hospice services for the participants to the actual design of the hospice homes. The interviews varied from person to person, because the experience of hospice is a very individual one. However, the common thread that emerged was the desire for a meaningful end of life experience. I left the discussions enlightened with a new perspective.

The one discussion that remains at the forefront of my mind concerns the space around a resident bed. A family member commented that the space around the bed was very useful. But of course I thought, as a designer, I knew that adequate space around the bed is needed for nursing care and resident transfers. She then explained the actual impact of the space around the bed. When her father was near death, all of the family members pulled as many chairs as they could find up to the bedside so they could place a hand on him and be present in the last moments of his life.

Hospice room with space for family and friends.
Copyrighted photo courtesy of Mike Rebholz Photography

I will never think of the space around the bed as only a "functional space," ever again. The extra space allowed family participation during the end of life and added great meaning for those involved. Based on that discussion, I would encourage future hospice room layouts to include adequate space around the resident bed and an easily accessible small storage space with three folding chairs.

A good bit of advice for designers of any care environment is to engage users in the process of design and visit the finished projects to understand its impact. Sometimes listening is difficult, but the value of that experience is immense.

Andrew Lee Alden is a Senior Associate with Engberg Anderson, Inc, and can be reached at 320 E. Buffalo Street, 5th Floor, Milwaukee, WI 53202

Relationship-focused Environments for Living

by Gaius Nelson, Architect

In the creation of culture change environments terms like person-centered and person-directed are often used to describe the desired care models and settings. This was a reaction against the institutional model of care where the individual was often lost within the larger group. These terms however, are rather self-centered and do not truly reflect the aspects of life that help to create Home.

Home, family life, and community are all social constructs that revolve around the relationships among people. Relationship-focused care and the places where daily life occurs, should provide opportunities and settings where personal relationships are encouraged and supported.

An example of one element that can support relationship development is the ubiquitous *memory box*. This display case, often located outside resident room doorways is typically thought of as a cueing device to help residents find their way back to their room. Display of photos from residents' earlier years that are thought to be more recognizable than contemporary images, are the typical contents of these displays. However, I prefer to envision these displays as *identity cases* that provide the opportunity for individuals to demonstrate to others, who they are and what their interests and hobbies may include.

By demonstrating to others one's history and interests, opportunities are created for individuals to get to know one another and for relationships to develop. An important first step in creating environments that enhance opportunities for development of relationships with others is to provide a sense of security for individuals and their belongings. All residents should be provided a clearly defined place over which they can exert control. Once a sense of security is achieved, individuals are more comfortable in venturing farther from their private territory, opening up possibilities for discovering new experiences, new activities and new relationships.

Groupings of 8 – 20 residents within defined geographic areas provide a consistent and familiar environment for social and dining activities. These smaller settings, often referred to as *households,* allow residents and staff to truly get to know one another, allowing more meaningful relationships to develop.

Not all activities or social interactions can be scheduled. It is important to realize that unplanned encounters provide opportunities for discovery. Providing places with resources that appeal to a variety of interests can draw individuals together. Shared interests and experiences provide the basis for friendships. Opportunities for residents from multiple households, as well as, the broader community to gather and enjoy activities together can help develop new and maintain existing relationships.

Everything that occurs in our daily lives takes place within a physical setting. To develop relationship-focused environments remember these key points:

1. Provide each resident a place they can claim as their own;
2. Provide family-scaled settings where the rituals of daily life may occur;
3. Provide places where a variety of interests and activities are supported and where residents can meet people from outside of their family-scaled setting;
4. Provide places that encourage participation by members of the larger community.

Gaius Nelson is the president of Nelson Tremain Partnership and can be reached at 125 Southeast Main Street, Suite 245, Minneapolis, MN 55414

Want to learn more about culture change in long-term care? Want to hear what others in North Carolina are doing?

Then it sounds like you need to plan right now to attend one of two, one-day conferences the Coalition is planning for next year. On April 26th at Glenaire in Cary, or May 9th at Deerfield Retirement Community in Asheville, we'll have guest speakers on topics ranging from current best practices to how to apply for one of the Coalition's grants. Current and former grantees will talk about what they've done in their facilities and members of the Coalition will talk about our grants and their availability. Staff from the Division of Health Service Regulation will be there to answer questions as well. Registration will include lunch and CEU's for nurses and nursing home administrators (applications pending). Watch for more information in the coming months, but make your plans now to attend!

Enriching Lighting Design

By Elizabeth (Betsy) Brawley, AAHID, IIDA, CID

Good lighting is perhaps the most important and least understood element in designing healthcare environments. Visual performance, ambiance, safety and security all depend on lighting. It is a powerful design tool, with a powerful impact on many aspects of human behavior and health.

Lighting is frequently taken for granted, creating problems for residents and staff. With age, the pupil gets smaller, allowing less light to reach the retina, which results in decreased vision. These combined changes cause slower adaptation to changes in light levels, and increased sensitivity to glare. This decline in both visual acuity and visual performance is a fact of life for older adults. Factor in impairments resulting from age-related eye diseases and these changes can be a lot for a person to adjust to.

Lighting is one of the most important design details that will continue to support the ability of older adults to perform the normal activities of their daily life. The aging eyes of a 60-year old person require up to three times more light for tasks than they did as a healthy 20 year old, and by the time they reach age 75 they may require as much as five times more light. Providing good lighting is a complex task that effectively requires raising light levels substantially to provide the necessary light for older eyes to see, balancing natural light and electric light to achieve even light levels, and eliminating glare.

Today there is good news. With the help of a qualified lighting designer who understands the special needs of older adults, we now have the ability to provide better quality lighting that uses less energy, has a longer life and for a cost that has actually decreased over the last twenty years in comparison to other building costs.

Elizabeth C. Brawley, AAHID, IIDA, CID is with Design Concepts Unlimited and can be reached at P.O. Box 454 Sausalito, CA 94966

You're Invited to Step It UP! in support of the 90,000+ NC residents living in long-term care.

Each year, Friends of Residents in Long Term Care highlights their work and seeks to raise funds through one large special event. This year, the event will be similar to the past but has been fine tuned to what is now the Step It Up! Gala. The Step It Up! Gala will take place on Saturday, November 19, 2011 at the NCSU Club in Raleigh, NC. The event will have 2 components: **6 p.m. The Exclusive VIP Event**, will be highlighted by live entertainment with singer, Bill Smith, our signature drink, the "Qualitini," a very special guest dignitary (visit the website for details) and sumptuous hors d'oeuvres. Our VIP's will continue the evening at the Gala and be treated to VIP seating, dinner and drinks. The donation for this event is $125. **7 p.m. – 10:30 p.m. The Dinner/Gala Event** will be highlighted by our guest speakers, a delicious sit-down meal, amazing ambiance, an auction, a cash bar, and lots of dancing with great music played by a DJ who loves the oldies. The donation for this event is $60 ($100/couple). Please visit the website (http://www.forltc.org/cms) for more details and to register!

Featured Facility—Lessons Learned from the Blanche Robertson Garden Cottage

By Susan Perkins

Blanche Robertson Garden Cottage's Great Room
(© James West / JWestProductions.com)

A typical Penick Garden Cottage bedroom
(© James West / JWestProductions.com)

West elevation of the Garden Cottage
(© James West / JWestProductions.com)

A year after the opening of the Blanche Robertson Garden Cottage, Penick Village administrators, staff and cottage residents met with the project's design team to talk about project successes and lessons learned. Part of the community's efforts to deinstitutionalize healthcare and create better environments for residents, the LEED for Homes Silver certified 10-bedroom/10-bath Garden Cottage is Penick Village's first small-home model facility.

The close involvement of the NC Department of Health Service Regulation (NC DHSR) throughout the design process was critical. Project designers CJMW Architecture and Penick Village worked closely with the regulatory agency to explore "equivalency measures," providing a high level of safety for residents without the institutional features of a typical nursing home.

Perhaps one of the more surprising lessons learned is that it can be difficult to deinstitutionalize those who are already institutionalized. Current Cottage residents previously lived in a more traditional model assisted living environment and had become accustomed to that environment. For example, residents were less interested in re-learning how much cream to pour in their coffee from the family-style pitcher than in continuing to use pre-packaged creamers. And while some enjoy participating in everyday household activities (for example, one resident collects and delivers the mail to other residents daily and others help in food preparation) others say they consider themselves "retired" and like being served.

Overall, residents, staff and administration see Cottage life as a great improvement. Operational changes that support the cottage model have been successful, allowing residents and staff to get to know one another on a more personal level. Staff say they have observed improvements in residents' physical and mental health, including "weight increase, pleasant moods, [and] more concern and conversation with one another. . . ." And residents say they are more active and less lonely. As one Cottage resident said, ". . . it's more like living at home . . . and it's just a good way to do it."

Susan Perkins is the Director of Marketing and a Principal with CJMW Architecture in Winston-Salem, N.C. She can be reached at(336)724-1503 or via the website at www.cjmw.com.

Are you doing something innovative at your facility? Have you changed the look of your setting to make it less institutional? What about staffing ideas? We like to feature facilities doing great things in each newsletter and we'd love to hear from you! Email your pictures and a short paragraph to the editor. If chosen, you could see your own facility featured in the next issue! Also, do your residents have amazing stories to tell? We're always looking for those for our "Living Life to the Fullest" section.

We'd love to share what you're doing and stories from your residents, so contact the editor and submit your articles and pictures. Just make sure you have the proper authorizations on file for the use of any photos and PHI you submit.

Licensure renewal is in progress as of publication of this issue. On the application is a section for checking the culture change activities or elements you are doing in your facility. ***Please answer this section fully and completely***. Each year the Coalition uses the information from this section to determine what percentage of facilities in North Carolina are doing some type of enhancement. There are no repercussions from completing this section—it is only used for determining what types of educational offerings the Coalition needs to consider and in what regions we need to offer it. Thanks for your cooperation!

N.C. COALITION FOR LONG-TERM CARE ENHANCEMENT

Enhancing the lives of residents and staff in North Carolina's long-term care

Embrace! is a cooperative project of the N.C. Coalition for Long-Term Care Enhancement and the Department of Health and Human Services, Division of Health Service Regulation.
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State of North Carolina
Department of Health and Human Services
www.dhhs.state.nc.us

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