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2013



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NIC

The National Investment Center for the Seniors Housing & Care Industry (NIC) is a 501(c)(3) organization whose mission is to advance the quality of seniors housing and care by providing data and research to facilitate informed investment decisions. Since 1991, NIC has been the leading source of research, data and analysis for lenders, investors, providers, developers, and others interested in meeting the housing and care needs of America's seniors. NIC has sponsored the *Seniors Housing & Care Journal*, a peer-reviewed journal for applied research in the seniors housing and care field, since 1993.

One of NIC's major initiatives to further its mission is the NIC MAP[®] data and analysis service. NIC MAP is a web based research and analysis solution that operators, lenders, analysts, brokers, investors, consultants, appraisers and equity firms use to stay informed of market trends that support strategic investment decisions and help to gain and maintain a competitive edge. It provides verified, quarterly information on all seniors housing segment types (AL, IL, MC and NC) inclusive of property inventory, property characteristics, properties under construction, properties being planned, sales transactions, aggregated rent comps, aggregated occupancy comps, demographics and much more.

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MATHER LIFEWAYS

Mather LifeWays is a unique, non-denominational not-for-profit organization based in Evanston, Illinois, founded more than 70 years ago. We are dedicated to developing and implementing Ways to Age WellSM by creating programs, places, and residences for today's young-at-heart older adults. Through conducting applied research, Mather LifeWays Institute on Aging has developed award-winning, evidence-based education programs for professionals who serve older adults. Staffed by nationally recognized researchers and educators, the Institute is a global resource for information about wellness, successful aging service innovations, and educational programming. In 2012, the Institute reached more than 6,000 older adults and professionals through its efforts, and more than 600 organizations implemented Institute-designed programs. Current initiatives focus on comprehensive wellness programs and assessment tools, aging-in-the-workplace issues, emergency preparedness, senior living staff development and retention, and online education and support programs empowering working family caregivers. In line with identifying, implementing, and sharing progressive practices for these initiatives, Mather LifeWays Institute on Aging collaborates with NIC to produce the *Seniors Housing & Care Journal*. To learn more about Mather LifeWays Institute on Aging, call (888) 722-6468 or visit www.matherlifewaysinstituteonaging.com.

INTRODUCTION

The 2013 *Seniors Housing & Care Journal* continues its tradition of disseminating empirically based research and commentaries about quality and progressive practices that are focused on critical issues faced by professionals in the field. Demonstrating the richness of how program implementation, evaluation, and research can be used to improve planning, operations, and policies in all forms of senior living, **articles in this edition cover diverse topics, from family involvement in long-term care to the needs of older homeless adults.**

As in the past, the *Journal* editors selected one outstanding research article for special recognition, generously sponsored by Prudential Real Estate Investors. *Families Matter in Long-Term Care: Results of a Group-Randomized Trial*, written by **Sheryl Zimmerman, Lauren Cohen, David Reed, Lisa Gwyther, Tiffany Washington, John Cagle, Philip Sloane, and John Preisser**, presents an evaluation of an innovative program designed to help residents' families create meaningful roles for themselves, together with LTC staff, in order to improve residents' quality of life and reduce staff burden. Based on a randomized trial across 24 sites, the researchers **found that the intervention benefitted families, staff, and residents in numerous ways, but at the same time increased family guilt and conflict.**

For the fourth time, NIC is offering a New Investigator Award, also supported by Prudential Real Estate Investors, for researchers in graduate school or who have recently graduated. The editors selected **Evan Plys** as the 2013 recipient for his article, co-authored with **Nancy Bliwise**, *Family Involvement and Well-Being in Assisted Living*. They **examined the effects of both quantity of family visits and quality of family relationships on Assisted Living residents' psychological well-being, and found that quality matters more than quantity.**

Eight other articles give readers equally important concepts to apply in their own settings and provide broad implications for the field.

The *Journal* continues to publish research that contributes to the senior living field and has direct relevance to day-to-day operations. The field continues to grow and mature, as evidenced by this year's record-breaking number of submissions. With this growth, we expect the range of research topics to expand as well. We look forward to your thoughts and views regarding the topics that should be considered for future editions of the *Seniors Housing & Care Journal*. If you would like to submit an article for publication in the 2014 edition, please direct emails to Associate Managing Editor Jennifer Smith, jsmith@matherlifeways.com.

NEW THIS YEAR

NIC, with assistance from Mather LifeWays Institute on Aging, has made the 2012 and 2013 issues of *Seniors Housing & Care Journal* open access. This means that all content will be freely available without charge to a user and/or his/her institution. Users are allowed to read, download, copy, print, search, or link to the full texts of the articles in this journal without asking prior permission from the publisher or the author. To view or download an article, please visit <http://www.nic.org/SeniorsHousingandCareJournal/2013>. If you have questions about or experience difficulties downloading an article, please contact NIC at communications@nic.org.

***Families Matter* in Long-Term Care: Results of a Group-Randomized Trial**

Sheryl Zimmerman, PhD; Lauren Cohen, MA; David Reed, PhD; Lisa Gwyther, MSW; Tiffany Washington, PhD; John Cagle, PhD; Philip Sloane, MD, MPH; John Preisser, PhD

The long-term care (LTC) workforce is in short supply of crisis proportion, a problem that promises to worsen as the population ages. Fortunately, there is at least a partial remedy to staff burden already in place and waiting to be mobilized: residents' families. The majority of LTC residents were cared for by family before their admission, and these same family members continue to visit on a regular basis and want to remain involved in care; however, family members often are at a loss as to their role after the resident is admitted to a LTC setting. This article reports on a new program called *Families Matter in Long-Term Care*, which is designed to help families work with staff and residents to create a role for themselves that would benefit the resident's quality of life and also improve family-staff relations. This paper addresses whether a program designed to engage family members in a meaningful way with or on behalf of their relative changes the amount and type of family involvement, family and staff well-being and attitudes, and perceptions of resident quality of life.

This randomized trial implemented and evaluated an intervention to reduce staff burden and improve family and resident outcomes by helping families create meaningful roles for themselves in 18 residential care/assisted living settings and six nursing homes. Across these 24 sites, families ($N = 490$) and staff ($N = 397$) provided data over six months about family involvement, family and staff well-being and attitudes, and resident quality of life. Intervention subjects participated in workshops and created service plans to identify family roles related to helping residents "do things, get around, look good, or eat well"; for families who could not conceive of a way to improve the resident's quality of life (such as due to dementia), they identified a role to "help the community."

Families developed 306 service plans that included a wide range of activities such as facilitating the establishment of a Red Hat Social Club (doing things), taking the resident out for car rides (getting around), giving the resident a manicure (looking good), and having a picnic (eating well). The intervention decreased family burden and improved resident quality of life but also increased family guilt and conflict. Staff reported less burnout and greater partnership with families, and felt families were more empathic.

The fact that family involvement in *Families Matter* decreased family burden suggests that the tasks they identified were not taxing. The price, however, was that families felt more guilt and conflict. Identifying actionable roles for family may foster a greater sense of responsibility and perhaps a realization that they have not been doing as much as they could or should. Further, increasing family involvement increases the potential for conflict with staff; consequently, efforts to increase family involvement in LTC must concurrently attend to potential conflict. The evidence suggests that staff benefit from family involvement in LTC.

Family Involvement and Well-Being in Assisted Living

Evan J. Plys, Nancy G. Bliwise, PhD

Family visits provide assisted living residents with a link to the outside world, continuity of relationships and roles, social support, and may improve psychological well-being. In addition, previous research suggests that the quality of family relationships has greater mental health benefits for older adults than the quantity of family interactions. This study investigated the relationship between the quantity of family visits and the quality of family relationships and their impact on assisted living residents' life satisfaction and depression. We also investigated factors that influence the quality of a relationship between residents and a primary family caregiver.

Forty-four residents from four assisted living facilities participated in the study. Participants completed measures assessing emotional bondedness to family, life satisfaction, and depression. Open-ended interviews assessed perceptions of family interactions, and residents identified the type of activities and conversation topics that were typical of a family visit.

A multiple regression analysis revealed that the quality of family relationships better predicted psychological well-being than the quantity of family interactions. The number of socioemotional support activities during a visit correlated with higher emotional bondedness between residents and family. Families who reminisced during a visit also showed higher scores of emotional bondedness compared to those who did not. In addition, internal friendships and family involvement were strong predictors of life satisfaction and depression in the current sample of assisted living residents.

These results have implications for residents of seniors housing facilities, family members, and staff. Quality relationships are paramount to promoting resident well-being through family visits. Family members can promote strong relationships by engaging in socioemotional support activities and reminiscing during a visit. In addition, cultivating relationships with other residents is important for high life satisfaction and low depression in assisted living facilities.

Effects of the Physical and Social Environment on Resident-Family Member Activities in Assisted Living Facilities for Persons with Dementia

Robin L. Stadnyk, PhD; Susan C. Jurczak, MSc(OT—post-professional); Vanessa Johnson, MSc(OT); Haley Augustine, MSc(OT); Russell D. Sampson, PhD

Research about assisted living facilities indicates that encouraging social participation and family involvement can improve resident quality of life. This study had two objectives: identify the shared meaningful activities of assisted living residents with dementia and their family members, and describe the meaningful activities in context of the physical and social environment of the resident's assisted living facility.

Six residents and their most frequent visitors were selected from each of two facilities to participate in semi-structured interviews about meaningful activities and facility characteristics. The interviews were analyzed using qualitative content analysis that was data derived.

To describe the physical and social environments of the facilities, the Professional Environmental Assessment Protocol (PEAP) and Policy and Program Information Form (POLIF) institutional environmental assessment tools were used. Interview themes were then analyzed by 10 environmental domains identified from the PEAP and POLIF. Four themes emerged from the interviews: keeping family traditions and connections, integrating into facility life, facility activities, and food.

Most family activities that maintained family traditions and connections were located outside the facility whenever possible. Inside the facility, residents and family members appeared to enjoy special events as well as both familiar and unfamiliar activities organized by the facility, particularly when residents' health declines made them less able to leave the facility. In addition, the families continued to enjoy more private activities, from sharing a cup of coffee to celebrating important family milestones. Food played an important part in family social activities inside and outside the facility.

When family members engaged in activities with residents, four environmental domains assumed importance. *Environmental supports to maximize function* were important because they freed family members of the responsibility to assist the resident with activities of daily living and they helped prepare residents to participate in family activities. *Facility social and recreational opportunities* offered the family members a venue in which to engage in activities with residents. *Policy clarity* emerged as a key environmental domain in relation to almost every theme. It was critically important for family members to understand “how things work” in the facility, what they would be allowed to do, and how they might be included in facility life. A second crucial finding was the importance of the *provision of privacy*.

This study involved a small sample of residents of only two facilities in one geographic region and thus findings are not necessarily generalizable to other facilities, other jurisdictions within Canada, or other countries.

Results strongly suggest that considerations of the environmental domains of relevance to family and resident activities must integrate the social and physical features of the facility. Additionally, sometimes there are tensions between the “ideal” social and physical environmental features of assisted living and the care, support, and supervision needs of persons with dementia.

What Distinguishes the Top Sales Performers in Seniors Housing? An Exploration of the Key Values and Motivators of the Industry's Top Sales Performers

Russell J. Watson, EdD; Anthony Mullen, MS, CPA

This two-part, two-year, industry-specific study explored what motivates top sales performers in seniors housing, harvesting both quantitative and qualitative data. Many seniors housing professionals would agree that the most successful salespeople are “special” individuals with unique characteristics. In a multistate sample of top performers from seniors housing organizations of various sizes, we found three predominant drives or motivators that emerged consistently in the groups of top performers. *T*-tests revealed significant differences between the top and lower quintiles scores on the TTI Workplace Motivators™ instrument. The three motivators that the top performers held in close-range rankings were economic (drive for money), social/altruistic (drive to help others), and theoretical (drive for knowledge).

Initial parts of the study were conducted in 2011 to determine if the instrumentation was sensitive enough to distinguish between top, middle, and lower performers, and it was found that the instrument produced statistically significant results when comparing top, middle, and lower quintiles. Performance was based on high numbers of move-ins, maintaining high occupancy census, high customer satisfaction while also maintaining the highest of ethics based on the records and data from their managers and supervisors. The study continued in 2012 with an exploration of the unique constellation of traits shown by the top performers and adding a qualitative measure to the data collection by asking the top performers a series of questions related to their own success.

What makes seniors housing top sales performers special is this dual drive for both money and helping others, coupled with their appetite for continual learning. The drives for money and helping others are typically inversely correlated, yet appear in seniors housing sales professionals as two of their three top motivators. This information can be useful to organizations in the seniors housing industry in both building and maintaining optimally performing sales teams.

In the area of assessments, the more lenses we can look through as we lead our salespeople, the better information we have to help our sales teams grow as professionals. The more we become aware of the individual and group motivators and drives of our salespeople, the more our organizations will experience increased success.

What Should We Build When They Are Ready to Come? Developing Evidence-Based Housing for Older Adults

Lori E. Weeks, PhD; Donald Shiner, PhD; Robin Stadnyk, PhD; Dany J. MacDonald, PhD

Few researchers have examined expectations older adults have about future housing or considered housing options in terms of current and future needs. Housing decisions of older adults are influenced by many sociodemographic factors, but our review of the literature indicates that factors related to health and income status are particularly salient variables.

There is a need for research evidence to inform housing development to best meet the needs and preferences of older adults now and in the future. While supporting aging in place is imperative, we believe that supporting older adults in whatever living environment they desire is crucial. In this study, we examined the housing preferences of older adults and the variables that predict these housing preferences.

A random sample of 1,670 Atlantic Canadian community-dwelling adults ages 65 and older completed a mailed survey. Respondents indicated whether they currently lived in eight specific types of housing or would seriously consider living in each housing type, and whether current home ownership status influenced the type of housing options selected. We used hierarchical logistic regression to determine the characteristics of respondents who preferred various types of housing and analyzed data from an open-ended question on ideal living arrangements.

Almost half of the participants indicated that, ideally, they wanted to remain living in their current home or remain living in their current home with help. While a large proportion of older adults preferred to remain living where they were, many of them wished to have a different housing option. They tended to select options that allowed for an independent living unit (i.e., house or apartment). In addition, they often selected options that provided some measure of assistance from family, services provided in the building, or potential support from others living in the building. Thus, types of housing that ensured an independent living unit, such as an apartment, options geared specifically to older adults, and options that provided access to assistance were most highly preferred. Health and income variables did significantly predict the consideration of specific types of housing. Having difficulty with one or more personal care and daily living activities predicted preferences to seriously consider moving.

Our results provide evidence that not all older adults wish to age in place in their current homes. It is clear that more services that blend the provision of shelter and services, often termed supportive housing or assisted living, are needed. As our results do not clearly identify one specific housing option that meets the needs of all or even most older adults, it is imperative that a range of affordable housing options are available, which is a particular challenge for older adults living in rural places. Our results indicate that sociodemographic characteristics can be predictive of living in certain types of housing and the serious consideration of certain types of housing. This knowledge could be utilized by housing developers to better equip them to identify the type and amount of housing desired by the older adult population.

The Social Construction of the Nursing Home: How Customers Interpret Nursing Home Life

V. Tellis-Nayak, PhD; Deron Ferguson, PhD

This study examines three groups of nursing home customers: the family, long-stay residents, and short-stay residents. Where do the ratings of nursing homes differ, by how much, and for what reason? What elements of their experience prompt them to be loyal to their nursing home and to advocate for it, where do their viewpoints converge, and why do they perceive common experiences differently?

We drew on customer satisfaction data collected during 2010 and 2011, from 2,104 nursing homes around the U.S. These data present a great opportunity for exploring these research questions and are maintained by the National Research Corporation, which promotes an evidence-based approach to person-centered health care. We began by exploring the concerns respondents have expressed in the voluminous written comments; they guided our quantitative analysis of nearly 200,000 structured survey responses.

Among the principal findings, the following stand out: families, long-stay residents, and short-stay residents, in overwhelming numbers, affirm their high satisfaction with their nursing home. Specifically, they express high satisfaction with the staff and with the care, concern, respect, and competence they show in serving the residents. The three groups are less satisfied with managers—they are considered unconcerned and unresponsive to the groups' expressed needs.

What turns customers into allies and advocates of the nursing home? For families, the issue of cleanliness is so essential that it affects how families recommend their nursing home, significantly more than it affects the recommendation of the two resident groups. The subject of staff competence influences short-stay residents six times more strongly than it does for the long-stay residents. Responsiveness of managers influences long-stay residents almost four-and-a-half times more strongly than it influences short-stay residents.

We interpret the findings within the humanistic paradigm that views human behavior as the interplay between mind, self, and society, spurred on by a search for meaning. We all are so deeply part of a social group that we internalize mental subjectivities that trigger opinions, biases, prejudices, interpretations, and conclusions sometimes far different from what objectively exists. The three groups are anchored in different social settings and exhibit different interests and standpoints.

Those who live in a nursing home or are closely acquainted with one view it very differently than those who live outside its walls and are relatively free from first-hand knowledge or experience. Both viewpoints are influenced by their social context, just as we all view and value life in general, and old age in particular, through subjective social lenses.

Technology-Enhanced Nurse Monitoring in Assisted Living: Results from Focus Groups with Housing Managers

Leslie A. Grant, PhD; Todd Rockwood, PhD; Leif Stennes, PhD

The role of the assisted living properties within the health care continuum continues to evolve. Fundamental disagreements have persisted among policymakers, providers, and other stakeholder groups about *whether* and *how* assisted living properties should be organized to support the health care needs of residents. Innovations such as technology-enhanced nurse monitoring services are being tested to see how sensor technologies can be used to help licensed nurses and other staff members coordinate health care services. This article describes perceptions and experiences of assisted living housing managers utilizing these services.

A suite of sensors are being tested in assisted living units to monitor resident sleep patterns, motion, falls, bathing, toileting, and other activities of daily living, from a geographically remote location. Sensors linked to a data management system use algorithms to identify deviations from “normal” or “baseline” behavioral patterns in daily activities (e.g., toileting, movement, or sleep). Online reports alert nurses and assisted living staff to emergent health problems among residents.

Twelve housing managers from 12 different assisted living properties deploying these services participated in three focus groups. A content analysis of focus group audio transcriptions was completed. Content analysis is a method that is used in qualitative analysis to identify themes to answers to open-ended questions. Preliminary findings support the value of these services for housing managers and family members. The 10 most frequent themes in rank order were benefits, triggers, costs, invasion of privacy, technology versus staff observations, improvements, marketing and sales, sleep, false positives and negatives, and family members.

Technology-enhanced nurse monitoring services offer an innovative strategy for assisted living providers to improve coordination of health care services. Several key barriers to adoption were identified. Organizations must develop processes to deploy, maintain, and use these new technologies effectively. Payment for these services has remained limited on the part of federal and state programs, as well as private insurers. So, reimbursement needs to be expanded to make it affordable. To support more widespread adoption, research must demonstrate improvements in health outcomes with concomitant cost savings.

Multidimensional Needs Assessment for Low-Income Chinese Seniors in Subsidized Housing in Los Angeles

Iris Chi, DSW; Leilei Yuan; Tao Meng, MSW

Research suggests that aging in place is becoming a prevalent preference among adults ages 65 and older in government-subsidized housing. Literature that describes ethnic-racial minorities' specific situations of aging in place is scarce, however. For those minority residents, we cannot fully understand the complexities of their needs of aging in place from sweeping generalizations about the whole elderly population of subsidized housing. Therefore, in order to explore minority residents' situations of aging and to fulfill their needs for culturally competent care, studies of these areas are meaningful and important. In this article, a multidimensional needs assessment study shows the unmet needs of older Chinese immigrants in "Facility G," government-subsidized housing that follows regulations required by the HUD Section 8 program.

Investigators from the University of Southern California's School of Social Work designed the multidimensional needs assessment survey, and survey items were adopted from previous studies with good validity and reliability in use with older Chinese populations. The instrument assessed physical and functional health status, cognitive ability, social support network, psychological well-being, and in-home supportive services (IHSS) use and needs for social work services. Physical and functional health was measured using self-rated health status, activities of daily living, and instrumental activities of daily living.

Our analyses included survey results from 120 out of 144 residents in Facility G. We found that most of the respondents have normal cognitive functioning but had some difficulty in managing their daily activities. Most respondents had relatively poor mental health status with high depression levels and low social well-being. On average, they had fewer than two people they felt close to or could rely on. Most of the respondents (79.2%) were using the IHSS at the time of our study, and almost all respondents (91.7%) indicated they needed a bilingual social worker to provide onsite professional services to them at Facility G.

This study found that respondents' needs were diverse in the four domains we assessed. Proper aging services are needed in responding to those unmet needs; e.g., health promotion strategies are recommended in order to fulfill their needs both physically and psychologically. In addition, loneliness was found as the most severe issue among older Chinese residents. The uniqueness of this issue is due to immigrants' special cultural background and history of immigration. Therefore, further study of this area is required to improve preparation for minorities who are aging in America.

Meeting the Housing and Care Needs of Older Homeless Adults: A Permanent Supportive Housing Program Targeting Homeless Seniors

Rebecca T. Brown, MD, MPH; M. Lori Thomas, PhD, MSW; Deborah F. Cutler, MSW, LICSW; Mark Hinderlie, MPA

Homelessness is common in the U.S., affecting an estimated 1.5 million Americans each year. Few are aware, however, that the homeless population is aging even faster than the general population. This article reviews the often-overlooked issue of homelessness among older adults, including their unique care needs and risk factors for homelessness. Permanent supportive housing programs are presented as a potential solution to chronic homelessness, and Hearth, a permanent supportive housing model for older adults, is described. Finally, policy changes are presented that could promote access to housing among the growing older homeless population.

Homeless adults ages 50 and older have unique health care needs, both compared to their younger homeless counterparts and to the general older population. Because older homeless adults have rates of chronic illnesses and geriatric conditions equal to or higher than community-dwelling adults 15 to 20 years older, many experts consider them to be “elderly” at 50. Managing chronic health conditions poses challenges even for seniors who have housing, but these challenges are compounded for older adults living in the chaotic and often dangerous setting of homeless shelters and the street.

Hearth is a Boston-based nonprofit organization dedicated to preventing and ending elder homelessness through outreach and permanent supportive housing. Hearth provides permanent supportive housing adapted to address the unique needs of homeless adults ages 50 and older. Several case studies are presented to demonstrate the elements of the Hearth model.

An increasing number of communities across the country now offer permanent supportive housing programs. Hearth’s experience in housing older homeless adults may be adapted to help existing programs become more informed about aging. Because of threats to federal funding for permanent supportive housing programs, ongoing advocacy and leadership are needed to promote policy initiatives and prevent the reduction of existing resources.

Permanent supportive housing programs have decreased the number of chronically homeless Americans and the costs associated with high rates of acute medical care. The Hearth model offers a way to extend these programs to address the complex needs of older homeless adults and improve their health and quality of life, while decreasing high rates of costly acute care use and institutionalization.

Aging Research, Design Education, and the Perceptual Limits in Seniors Housing Design: Development of a Research-Based Design Model for Better Aging Environments

Steven J. Orfield

Older populations have perceptual deficits that come with aging, and there is much research in the medical and psychological fields that attempts to define typical age-related ranges of performance in each of the areas of perception. Yet, there are some overwhelming structural reasons why the design of aging facilities, as with most facilities, has not taken science into account. The findings of this research show the profound perceptual losses in the elder population, and the standards developed show very clearly that current design does not take elder perception into account scientifically. In 2009, Orfield Laboratories (OL) founded the Architectural Research Consortium (ARC), the nation's first research-based design architectural collaboration. Over the past four years, OL and ARC have instituted a research program in aging perception and performance, based on a 90-year-old cohort, in a four-part program to develop building performance standards for seniors housing architecture and design.

Research-based design normally functions on the basis of a design structure for a new or renovated facility that includes: market research and measurement of the seniors housing properties perceived to be high in quality; pre-occupancy studies of a baseline client facility via building performance measures as well as subjective measures of the user population; development of building performance standards so that the environment will be perceptually clear and comfortable for the elders; perceptual visual juries to measure evoked feelings and associations related to the proposed design options; building performance consulting to ensure that quantitative standards are modeled and met before construction; performance commissioning to confirm that building performance standards are met; and post-occupancy studies to confirm perceptual comfort and user satisfaction to be benchmarked against the pre-occupancy studies that were completed earlier. The result is generally a far better performing building constructed for the same total cost, with design focused more on the user than on the façade.



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