Living Spaces: Policy Supports & Barriers in Alberta

ICCER Networking Event
Edmonton, April 4 2018 and Calgary, April 16 2018

Megan Strickfaden & Jacquie Eales
Research on Aging, Policies and Practice
Department of Human Ecology
University of Alberta
Overview

- Introductions
- Person-Centred Care
- The Power of Policies
- Re-Imagining Living Spaces
- Closing
Person-Centred Care

respecting, listening and supporting personal perspectives, values, beliefs, preferences
Understand yourself including personal values and beliefs
Connect with, listen, and walk in the shoes of other people
The Cigarette (2016)
Spaces & Fixed Material Objects
Figure 10: Semi-Fixed Material Objects
Portable Material Objects
Person-Centred Care

How did you feel as you watched the film ‘The Cigarette’?

What are the details about the designed physical environment that stood out in the older gentleman’s quest to smoke a cigarette?

What is one design change that would enhance this man’s quality of life?
The Power of Policies

- Barrier-Free Design Guide based on the Alberta Building Code
- Universal Design Principles
- Alberta Health Accommodation Standards & Licensing
- Alberta Health Design Guidelines for Continuing Care Facilities
- [Fraser Health Code Plus Physical Design Components for Elder Friendly Hospitals]
“Typically individual houses have up to a maximum of 18 residents. The optimal number of residents per house should be determined during the functional program process, and balance needs for a residential home-like setting which is best achieved with a smaller number of residents per house.”

“Smaller houses help to: avoid an institutional feel; allow for the co-location of smaller groups of residents who may have similar care needs; promote resident familiarity with their surroundings; limit large gatherings... A design that responds to the needs of specific resident populations (e.g., those with dementia) which may necessitate a smaller number of residents per house, to facilitate resident participation and familiarity with everyday activities and resident safety”.

Design Guidelines for Continuing Care Facilities in Alberta Section B: Resident Personal Space, I. Residence Houses, Features, point 2
(Mis)Interpretation

“We take their [Alberta Health] templates and we try to interpret them, but in the way of using a bit different language ... around the human factor and providing services for people as individuals.”

~ Care Provider
Late Design Interventions

“I think it goes back to the very beginning in the design of the building…. Where we ran into struggles is right in the beginning processes, where you go through the design consultations, and it has to be with Accommodations Standards, Public Health, Allied Health, the Fire Department and Alberta Health Services Capital Management. When you talk about dementia, the first thing that comes to mind is, where are your locked units? Those doors have to be secured and people cannot come and go. Where we want to be different is to focus on creating an environment where people have some freedom. With the right way to monitor, to support, and to ensure that they're safe, but give them the ability to come and go from their area if they wish.”

~ Care Provider
Risk Aversion Emphasized: Safety & Infection Control

“I believe that we build a building or design a building to ensure nothing bad will ever happen. Through that we tend to remove the personal experience and what is truly the driving factors to a quality of life for somebody.

That is one of the big speed bumps again, always is, Public Health. …where is the steam cart? We’re so concerned about risk or safety that we take things away from people.”

~ Care Provider
The Power of Policies

How do you interpret policies?

Tell us about a situation in which policy drove the way a space was created, and the impact it had on residents?

How do we create more incentives to innovate?
Re-Imagining Living Spaces

“The real act of discovery consists not in finding new lands, but in seeing with new eyes.”

Marcel Proust
diversity = personalization
ability = normality
intelligent designs = connecting
embodiment = calming
balance = social engagement
local = stimulating
distinctions = understanding
Imagine your future self. When you need care, what will enhance your quality of life? [Ignore policy]

Given the building stock currently available, what is one thing we can do differently or advocate for to move us in this direction?
For further information

Megan Strickfaden | megan.strickfaden@ualberta.ca
Jacquie Eales | jeales@ualberta.ca

Research on Aging, Policies, & Practice (RAPP)
Room 3-02 Human Ecology Bldg.
University of Alberta
Edmonton AB CANADA T6G 2N1
🌐 http://www.rapp.ualberta.ca/

Please evaluate our session:
http://survey.constantcontact.com/survey/a07ef8bb0vejezwpj2u/start