

# Adapting Current Physical Environments and Making Them Senior Friendly

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# Case Study: Royal Jubilee Hospital Patient Care Centre (PCC)

- Sources of evidence
- How we set the expectations
- Results
- What we are learning it takes to sustain the results

# My Lessons Learned

- Function can be influenced by form
- Define the future state, then work backwards to achieve
- Elder friendly should extended beyond the bedroom
- Can be done without impacting scope, price or budget
- Takes attention post design to sustain intention

# Vancouver Island Health Authority



- Serves population of 765,894
- 17% of BC
- 18,000 staff, 1900 physicians, 6000 volunteers
- \$2 b annual budget
- 150+ facilities
- 1565 acute & rehab beds

*Vision: Excellent Health and Care  
for Everyone, Everywhere,  
Every Time.*

# The Patient Care Centre (PCC)



- Five hundred bed capacity
- Replaced 5 buildings, 50-80 yrs
- 400,000 sq feet; 8 stories clinical
- LEED Gold Achieved
- \$ 350 m
- 2 year construction
- Public, private, partnership
- 3 Pillars: Elder Friendly, Irresistible Work Place and Pacific Green

## Elder Friendly Goal

- 1) Respect and respond to the normal changes with aging*
- 2) Prevent functional decline and other hospital related harm*



# Evidence We Used

- Belinda Parke Literature Review
- Fraser Health's *Code Plus*
- Site visits – Acute & Residential Care
- Mock Up Suite

*We could not find one compelling reason why not to make the entire building elder friendly!*

# Elder Friendly: Beyond Design



- Decision making framework
- Included as performance specs
- Evaluated proposals by measuring degree achieved
- Design development
- Furniture, fixtures and equipment
- Training and transition time





# Performance Specifications

- “Conceal the clinical environment when ever possible”
- “Impart a residential feel”
- “Employ materials and detail surfaces to absorb and minimize sound”
- “Project Co will design the Facility as an elder Friendly Hospital”

# Intentional with Language & Space

- Neighbourhoods
- Care Hubs
- Collaboration Centres
- Bedrooms
- Floors & Services naming



# Hospitals as Obstacle Courses



# Before: No Room to Ambulate

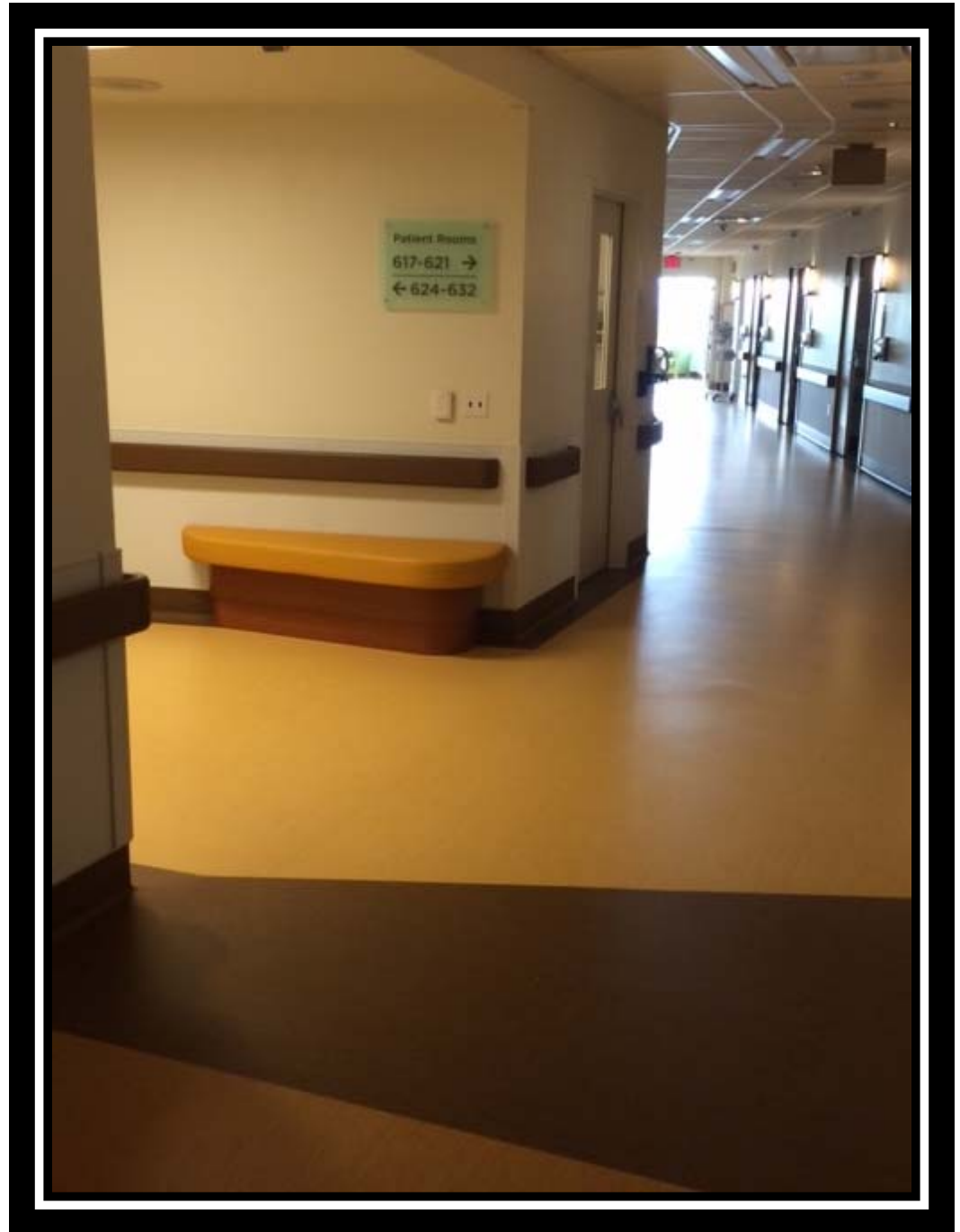


# Before: No Room for Family



## In Patient Hallway

- *Clear hallways*
- *Flat finish on flooring*
- *Contrast between walls, cove and floor*
- *Dark handrail*
- *Doors pay attention to dark*
- *Doors to ignore white*
- *Kitchenette with recycling*
- *Art*

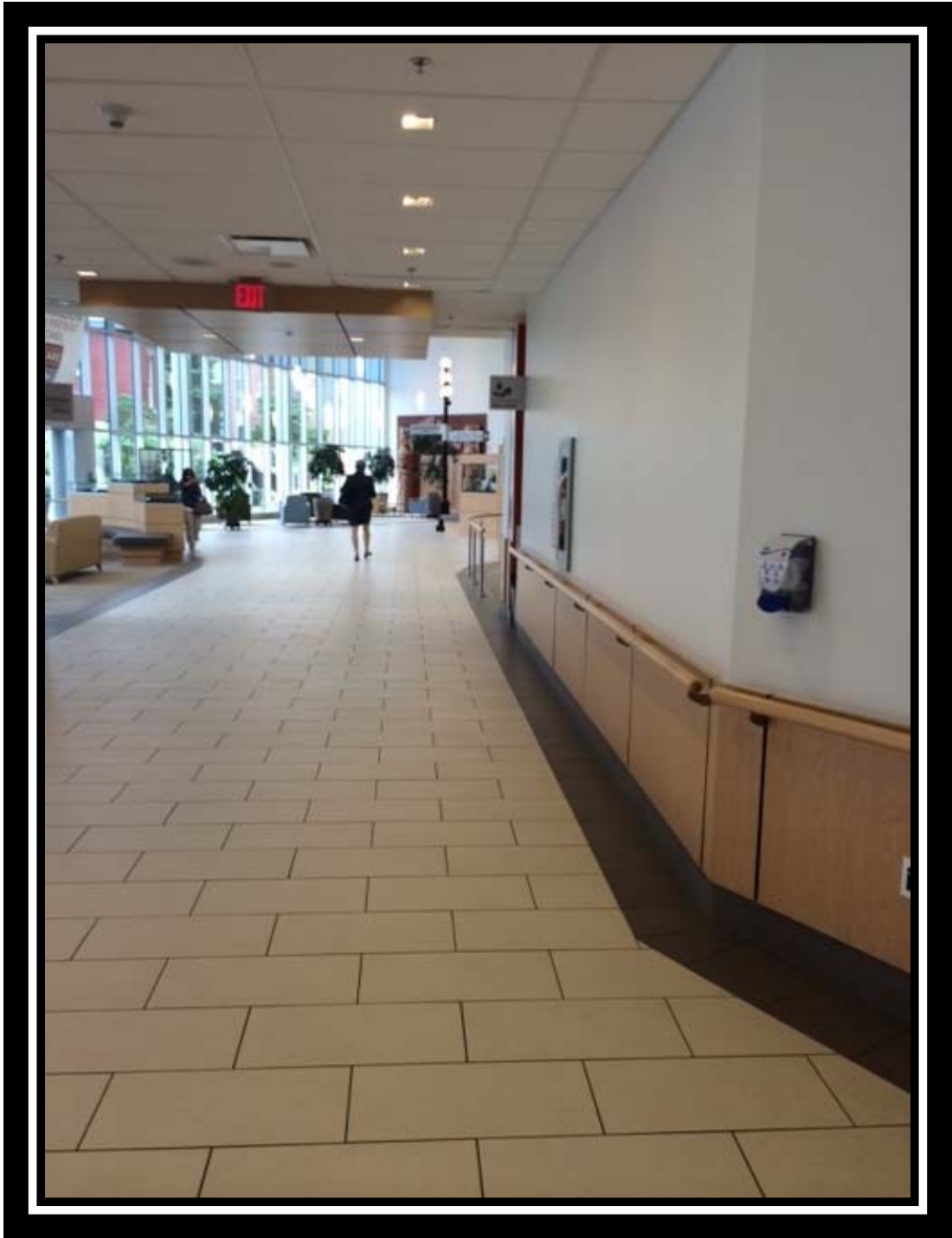




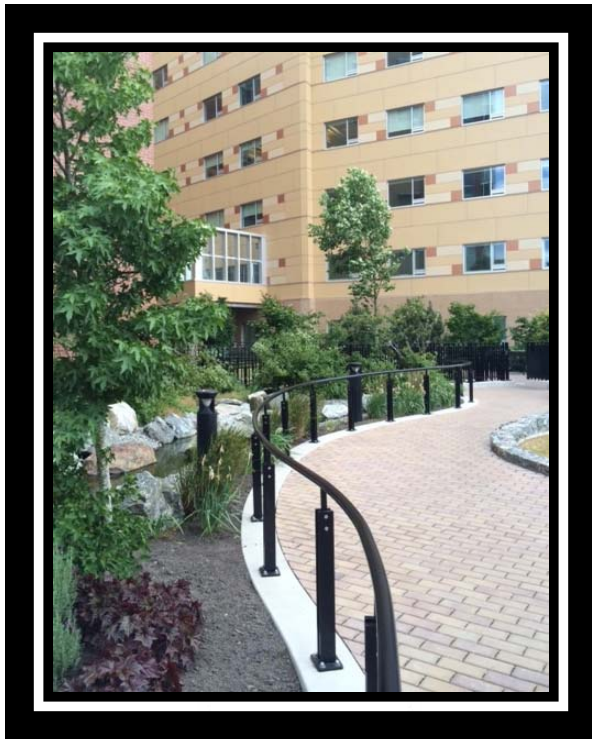
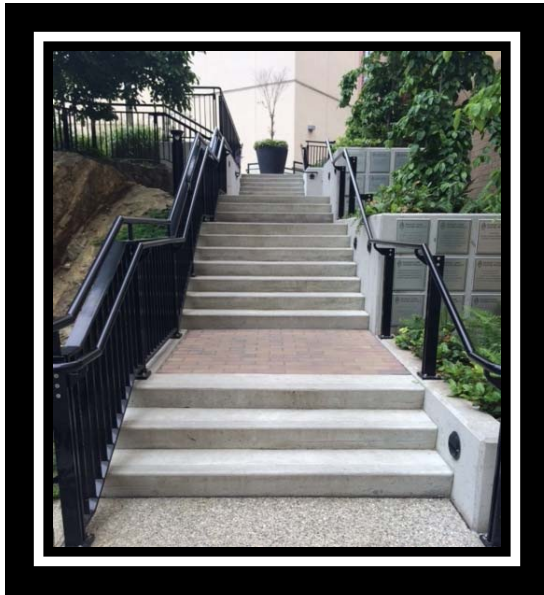
# Site Elder Friendly Features

- Flat, straight run from parking to entrance
- Only one route into units; no dead ends
- Delineation between floors & walls public zones
- Handrails & places to rest for visitors
- Door free public restrooms
- One bathroom every floor residential style
- Way finding uses sensory clues









## Facility *Continued*

- Separation care, admin, and public zones
- Landscape for view, interaction and challenge
- Coordination of lighting with signage
- Font sizes, contrast colours
- Sound absorbing surfaces
- Places worth ambulating to



## Unit Elder Friendly Features

- Public and care zone
- Flex space per unit: teaching, dinning, meeting, resources
- Walking loop out of public zone
- Destinations worth travelling to in the unit: sunroom, benches, art, distant and close views of nature



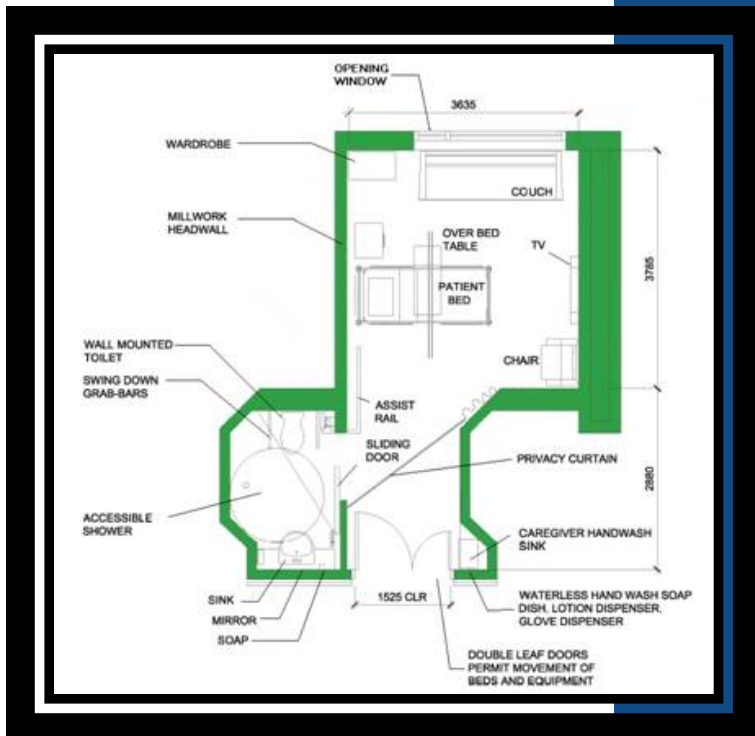
# Bedroom Elder Friendly Features

- 83% single bedrooms
- Handrail from bed to toilet
- Ceiling lift from bed to toilet
- Amber nightlights
- Window sash tilt open
- Window blinds, reading light and TV controls from bed
- In room storage
- Door and half into all spaces



## Bedroom *Continued*

- View to head of bed from hall
- Four nurse call locations – Bed, chair, toilet, sink
- Dedicated storage
- Family zone – sleeper couch









# Bathroom Elder Friendly Features

- Amber nightlight shining on toilet
- Contrasting toilet seat, bowl and floor
- Contrast sink and counter
- Dual grab bars either side toilet
- Shower seat, 2 heights shower
- Hands free faucets
- Barn door to toilet room
- Non slip flooring when wet







## Other Changes to Support the Best Use of this Asset:

- Rewrote our Visiting Policy
- Developed a *Care in Place* philosophy
- Stopped tolerating overhead paging
- Limited poster “wallpaper”
- Collaborative Interprofessional Teams (staffing models)
- Assess baseline function on admission (48/6)



# Sustaining

- Attend to culture
- Reminders frequently required why we should avoid transferring patients unit to unit
- Housekeeping generally will want a shiny floor
- Someone to retrieve hidden equipment
- Police the halls; send the “crap” back on move day

# Applicable to Renovations?

- Cheep and Cheerful:
  - Colors, contrast, grab bars, seating heights
  - Signage: size, shape, positioning, fonts
  - Policy adoptions
- If You Can Spare More Effort:
  - Sound absorbing surfaces
  - Lighting direction and intensity
  - Flexible room function
  - Room for families

*Thank you*

*Questions??*

*Follow up*

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