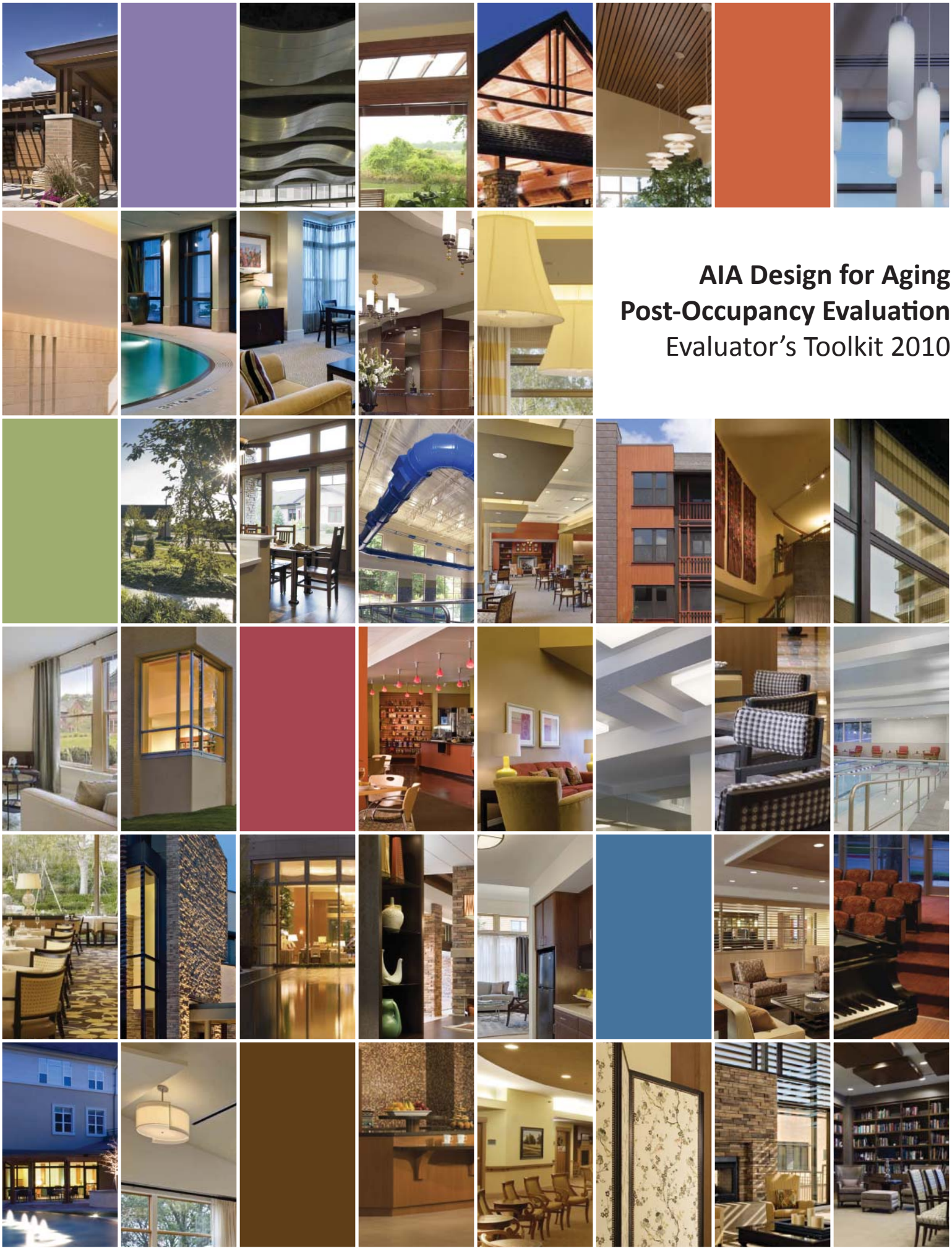


AIA Design for Aging Post-Occupancy Evaluation

Evaluator's Toolkit 2010

Front cover photo details of past POE projects:

Sharon S. Richardson Community Hospice, **Engberg Anderson, Inc.**
Lenbrook, **THW Design**
Buena Vista Terrace, **HKIT Architects**
Devries Place Senior Apartments, **HKIT Architects**
Silver Sage Village Senior Cohousing, **McCamant & Durrett Architects**
SKY55, **Solomon Cordwell Buenz**
Hospice of Lancaster County, **RLPS Architects**
NewBridge on the Charles, **Perkins Eastman**
Sun City Palace Tsukaguchi, **BAR Architects**
The Point at C.C. Young, **Perkins Eastman**
Westminster Village Town Center, **Perkins Eastman**
Hope House at Hope Meadows, **Mithun**
Taube Koret Campus for Jewish Life, **Steinberg Architects**
The Ridge and Boulders of RiverWoods at Exeter, **JSA Inc**
The Legacy at Willow Bend, **DiMella Shaffer**
Three Links Care Center Lodging Facility, **Rivera Architects Inc**
Villa at San Luis Rey, **Lawrence Group**
Bloomfield Township Senior Center, **Fusco, Shaffer, & Pappas, Inc**
Boutwells Landing Care Center, **InSite Architects**
Episcopal Home Church St. Luke's Chapel, **K. Normann Berry Associates Architects**
Fox Hill, **DiMella Shaffer**
Mennonite Home Skilled Care Reinvention, **RLPS Architects**
Montgomery Place, **Dorsky Hodgson Parrish Yue**
Porter Hills GREEN HOUSE Homes, **Dorsky Hodgson Parrish Yue**
Signature Apartments, **RLPS Architects**
Casitas on East Broadway Senior Housing, **Lizard Rock Designs, LLC**
Hybrid Homes, **RLPS Architects**
La Paloma - East Lubbock Regional MHMR, **McCormick Architecture**
Penick Village Garden Cottage, **CJMW, PA**
Residential Hospice for York Region, **Stantec Architecture (Toronto)**
Roseland Senior Campus, **Landon Bone Baker Architects**
The Houses on Bayberry, **RLPS Architect**
The Sterling of Pasadena, **Mithun**
Tohono O'odham Elder Homes, **Lizard Rock Designs, LLC**
Fran and Ray Stark Villa, **SmithGroup**

Contents

Photo: Fran and Ray Stark Villa, SmithGroup

Introduction

Research on the characteristics of innovative senior living designs begins with a look at what exists today; not unless thorough evaluations are done to assess the quality and success or failures of existing facilities, will the designs of aging environments progress. The evaluations that embody the POE serve to "disseminate knowledge necessary to enhance the built environment and quality of life for an aging society." The anticipated outgrowth of the POE program is national attention to the ever-growing field of senior living architecture and the expansion of design sensibilities that can improve the environments in the future.

Appropriately designed environments for older adults can provide many benefits such as enhancing resident dignity and quality of life; maximizing a residents' ability to maintain an independent lifestyle despite physical or mental constraints; providing workplaces for care givers that maximize their efficiency and efficacy; fostering connections between residents, staff, family and neighbors to create a strong sense of community and personal fulfillment. Design can also generate a sense of pride in where people work and live. Environments that are uplifting, visually appealing and non-institutional should be noted and recognized.

Which designs achieve those results? How do they do it? "Hands-on" experiential data is certainly available yet it is often untapped and undocumented. Unique approaches to design and care remain unshared.

Post occupancy evaluations (POEs) help identify which design approaches are beneficial and why. Through data collection and analysis, interviews, on-site observations, graphics and images, POEs evaluate what design features work well, which do not, and provide the foundation for evidence-based design.

Background

i. *What is a POE?*

POEs are structured surveys of buildings and their occupants. For the purposes of this document, we are surveying environments that provide housing and services to older adults. The original project goals as established by the design team provide the foundation for the POE and the evaluators seek to measure how well the completed environment meets these goals. Our evaluation team is comprised of designers and providers who will "look back" and evaluate how design, construction and operations impacted those goals. The teams will assess what elements exceeded expectations and are worth repeating on future projects, as well as those elements that fell short of the mark and may require modification.

POEs are performed in a consistent manner following a pre-set protocol and on-site schedule. Information and data already available from the Design for Aging Review (DFAR) submittal will be provided and the team will supplement this information with on-site observations, data verifications and interviews with key stakeholders.

ii. *Why do we do POEs?*

POEs offer benefits to those involved in the original design process, to the residents and their families, to the administration of the community, and to other providers and designers involved in the design and operation of senior living environments.

A POE is "structured hindsight" to review and critique the design and operations of senior-living communities. After a facility is open with residents and staff in place, there is an opportunity to review the design team's original assumptions and to assess whether goals have been met. It is a chance to observe the interaction of residents and staff and to evaluate how the design promotes that interaction.

POEs offer an opportunity for administration, staff and residents to fully understand why specific features of the facility were designed in a particular manner and how they were intended to function within the community. The design of a particular room is often a result of functional requirements as established in the early planning stages. This function may not be readily evident to staff who were not involved in the planning process. The results of the POE evaluation can promote discussion between staff and administration about the intended function and actual use of particular spaces or features.

POEs can be used for quality assurance purposes to assess resident

Photo: NewBridge on the Charles, Perkins Eastman

Photo: Sun City Palace Tsukaguchi, BAR Architects

and staff satisfaction. The POE team will provide documented findings that can be an important marketing tool to familiarize prospective residents and staff with the environment's unique contribution to quality care. POEs can help staff evaluate which features facilitate the performance of their tasks and to identify problems as well as remedies to increase staff efficiency.

Collected into a structured format and published with appropriate supporting data, images, graphics and other information, POEs can be a time-saving resource for providers and designers contemplating new construction or renovation of senior living communities. By reviewing several POEs of communities similar to the project under discussion, providers and designers can quickly absorb "lessons learned", avoid past mistakes, and through new projects advance the state of the art.

The participating facility will be highlighted in an AAHSA brochure as a proud participant in the POE process.

POE Type, Measurement & Tools

i. *What type of POE are we doing?*

There are three main types of POEs – 1) indicative, 2) investigative, and 3) diagnostic. The amount of effort, time, resources, personnel, cost and depth of investigation increase as one moves from indicative to investigative to diagnostic. Each higher level requires more extensive data gathering, and is more costly, labor intensive and comprehensive than the previous level.

AIA Design for Aging (DFA) has chosen to do investigative POEs. Investigative POEs go into considerable depth using data surveys, interviews, on-site observations and photography. Objective evaluation criteria are specifically stated, and data analysis techniques are consistent. The findings of investigative POEs are more detailed than the findings of indicative POEs. Through documentation of these lessons learned we can demonstrate how effective solutions can be easily implemented, built upon or enhanced in future projects and how to avoid critical errors.

ii. *How do we measure?*

The POEs use a consistent format for team organization, information preparation and on-site scheduling. Data previously collected from the DFAR submission will be reviewed. Additional data may be requested and gathered as needed. Operations data will be highlighted and confirmed. Data analysis will focus on easily understood ratios and indicators to create a reliable portrait of how the community compares to other similar projects. Cost data will consider regional differences.

Interviews form an important segment of the POE. Questionnaires for front line staff, support staff, top management, families and residents are provided to allow consistency in information collection. For on-site observation, checklists for major environmental design issues are also included.

POE Team Organization, Recruitment & Preparation

i. *Team Organization*

The Evaluation teams will be comprised of approximately five members,

- One member of the Design for Aging Knowledge Community Advisory Group, current or past; or one member who has performed a published DFAR POE in the past; who will be the leader;
- Two members from the design community, including at least one architect but including where possible either a landscape architect or interior designer with senior living design credentials, not the project designer;
- Two members from provider organizations, including individuals working in consulting companies (financial, regulatory, human resources) with considerable experience in direct operations;
- Where opportunities permit, up to two auxiliary student members recruited from AIA(S) from nearby Schools of Architecture.

ii. *Team Recruitment*

POE teams are recruited through a joint effort of the AIA and AAHSA. Team members volunteer their services and must submit their qualifications, background and previous senior living experience to DFA/AIA (**Exhibit A.1.a**). Team members will be matched to POE communities in their areas whenever possible. POE team members cannot review their own projects. Evaluators are required to sign a Letter of Agreement with the AIA DFA Committee prior to the start of the POE (**Exhibit A.1.b**).

Photo: Sun City Palace Tsukaguchi, BAR Architects

Process

i. *Protocol / Process*

Each site visit requires a minimum of 10-12 hours of preparation time. Tasks include contact with the facility to discuss the logistics of the visit, confirmation of team member schedules, assistance with hotel arrangements, assembling DFAR data, and sending the evaluation toolkit to the team. The total time commitment from each evaluator is typically 30 hours.

ii. *Preparation*

The team should be assembled 30-60 days prior to the site visit.

Prior to Site Visit

• Send a letter to the administrator/CEO of the facility notifying them that they have been selected and that a telephone call from the team leader will be forthcoming explaining how the POE visit will work.

• The leader for the POE team should call the administrator/CEO and outline the benefits of participating in the POE. Assuming that the facility is willing to participate, a point of contact with whom to organize the specific POE activities should be established.

• A copy of the POE Toolkit with general information about the POE and what will be required of the facility should be emailed to the administrator/CEO or point of contact.

• With the assistance of the point of contact at the facility, the events during the POE including interviews with key staff must be established. Note that presence of supervisors or top management personnel is discouraged during the interviews with subordinate staff, residents, and family/community members. Interviews generally run fifteen to twenty-five minutes and should be scheduled on thirty minute increments. Interview subjects should include all five of the following groups:

Top Management: CEO, CFO, Board member, Community Component Director, Director of Marketing, Director of Human Resources
Front-Line staff: Director of Nursing, Activity, Therapy, Social Work
Support Staff: Resident Aids, Dietary, Housekeeping, Buildings & Grounds, Security
Residents: As possible, two or three
Family members: As possible, two
Community members: As appropriate from the "greater" or "outside" community

• The facility should be sent a final agenda in advance of the POE listing the team members and confirming the schedule for touring the facility and the interviews.

• Determine if a conference room (or private area) is available for use by the POE Team for one hour prior to the commencement of the POE.

• The tool kit should be emailed to each of the evaluation team members, preferably two weeks prior to the POE.

• One week before the POE, schedule a kick-off conference call or meeting with evaluation team members. The team leader should discuss:

-Intro - short version- why POE/DFAR/AAHSA/AIA relationships
-Expectations of service
-Reimbursements (if any)
-Schedule - who, what, where, when
-Deadlines
-Site Information
-POE Toolkit - overview
-Guidelines for documenting "your" observations
-Guidelines to verify DFAR criteria
-Guidelines for photography (assign one team member who has appropriate equipment to this task)
-Discussion on the final documentation of the POE (assign one team member to write up the final report; See **Exhibits A.1**)
-Review design goals and original assumptions from the DFAR submittal (See **Exhibit A.3**)

During the Site Visit

<u>Morning</u>

POE Team assembles on site one hour prior to the commencement of the POE to provide self-introductions, review the POE objectives, information and schedule, and to confirm the division of responsibilities. Discuss any major issues highlighted by this community, which relevant themes are of interest as well as features/designs that may require special note.

Meet with Community's Top Management to obtain an overview of project history, objectives, development and construction timeline, major post-completion events. Discussion of POE schedule, confirmation of interviews, staff participation, ground rules for photography etc. This beginning meeting should be limited to 1 hour to allow enough time for the tour.

Tour the community. Note: Tour of specific community areas is clearly defined by the DFAR submittal. However, an overview of the entire campus/facility may be beneficial in viewing and understanding the context in which the POE area exists.

Impromptu discussions with residents and staff are possible as long as they do not disrupt the tour schedule. Photograph important POE

observations (avoid photographs with people).

It is important to allow 2-3 hours for the tour.

Lunch
If possible, schedule a lunch on site. The POE process can continue with observations on food service, preparation and quality, resident satisfaction, and environmental concerns (acoustics, lighting, etc.)

Afternoon
Begin, or continue with, interviews with residents, other staff, and management.

Allow time at the end of the day to discuss findings, observations, etc. with Top Management. Continue with any broader discussion of marketing and economic performance impacts, including influence of competitors.

Request and/or confirm specific data from the DFAR submission criteria.

Ensure that the POE is documented via photography.

Obtain marketing packages, menus, activity calendars, pricing, philosophy, history, etc.

If necessary, return to tour/observe residents/programs, etc in early evening / pre-dinner hour.

Evening
POE team reviews the day's events over dinner (off site) and discusses next steps. Observations on larger issues and themes prompted by the POE, including parallels to other projects can be explored. Review assignments for compilation of data, photos, and write-up points. Set the schedule for draft reports as well as the POE draft.

After the Site visit

1. Send a thank you letter to the Administrator/CEO and point of contact

2. Each Evaluator is responsible for the completion of the following within 2 weeks of the site visit:

A. Photo Download to share (asap after facility tour):
If you have taken photos during the tour of various areas, it is necessary to share these with the other evaluators (who may or may not have captured the same things). (See Exhibit **A.1.d** for more description of area categories.)

B. Evaluator Response to Checklist by Area (details in **Exhibit A.1.e**):
The purpose of this section of the evaluation is to track how all evaluators rate specified areas of the facility on specific issues. While not an exact science, this effort ensures that each evaluator at least cover some of the same ground, and more or less score the success or failure of a design theme. This checklist response is intended to be used in conjunction with the written descriptions (which are prone to higher subjectivity). The Checklist responses will be tallied at the end of the POE and an average of all ratings will be compiled as a summary. [See **Exhibit A.1.e**]

C. Evaluator Comments in Descriptions/Impressions (details in **Exhibit A.1.f**):
As an evaluator sees fit, he/she may want to flesh out his/her impressions of the facility, if they were not completely captured in Evaluator Checklist responses. This section enables the evaluator to respond in a more personal way to the entire experience at the facility. The entire process of touring, observation, visiting with residents, providers and staff can leave lasting impressions that can be described here, where appropriate. [See **Exhibit A.1.f**]

Designated evaluator or team leader writes up and circulates final report and representative photos (no more than 20) for team for review and comment. [See **Exhibit A.2** for example of final report.]

Team Leader verifies quality of final report and submits to DFA POE Committee Chair to format for publication.

Photo: The Legacy at Willow Bend, DiMella Shaffer

Photo: NewBridge on the Charles, Perkins Eastman

The Evaluation

Preliminary Assumptions

• The use of the checklist should focus on 1) what's important and 2) what is best determined by observation (vs. floor plans or interviews).

• The design portion of the POE is focused on the built environment. However, management policies and other non-physical issues that are specifically relevant to observed conditions are of interest. The evaluation should include commentary regarding the relationship between programming, operations, and the built environment.

• The checklist should avoid assessing code items (it's not a licensing inspection).

• The purpose of the checklist is only the evaluation of the facility, not its documentation (e.g., noting what items are in a room).

• The checklist should focus on building conditions, that is, aspects over which the design team would have some control (e.g., not residents' furnishings, not the presence of personal objects but the building's capacity for personalization).

• There are design goals that are relevant to all facilities, no matter what their specific project goals are, and these are implicit in the evaluation checklist: privacy, habitability, autonomy, wayfinding, community, and a sense of home.

Observing

i. *Things to Observe-Overall Project Design and Innovation*

(use with **Exhibit A.1.f**) [The following items must be addressed in your write-up.]

• Building form (coherent massing, appropriate scale, good relationship of elements)
• Image (appropriateness and consistency of overall image)
• Appropriateness of materials
• Contextual design – does the project fit into the surrounding community?
• What about the design is innovative? Is it architecturally innovative and/or programmatically & functionally innovative?
• What about this project's design makes it special? What is the one thing that is the most memorable?
• Spatial organization of building (simple plan, good organization of spaces, easy way finding)
• Does the building reinforce the mission of the organization?
• What is the curb appeal? Does the project have a positive identity in the community?
• Does the site plan make sense? Is there an overall organization to the campus?
• Is there a clear organization to the building?
• Are the interior and exterior expressions dynamic and interesting?
• Is the project sustainable? Are the materials "healthy"? Is the project sited appropriately to maximize energy gains?
• If a concept statement is available from the architect, is this concept visible in the architecture?
• What are the program innovations and how are they supported by environmental design?

ii. *Things to Observe - Focus Areas* (use with **Exhibit A.1.e**)

• In Exhibit A.1.e, the list of questions that is distributed across several areas of focus is intended to be read ahead of the evaluation and then filled out by the evaluator either during or after the site visit. These evaluation questions target BOTH building design + function as well as facility operations + programs. Both design and operations address quality of life issues.

o Building Design|Function: Layout, Accessibility, Lighting, Materials, Windows, Storage, Technology
o Facility Operations|Program: Quality of Living, Staff Perspectives, Resident Behavior/Perspective, Programs

• Please note: It is a good idea to read through these questions before the site visit so that, as you tour through the facility, you are engaged in highly-focused and targeted observations about design issues which you will be responsible for rating either positively or negatively.

Photo: The Legacy at Willow Bend, DiMella Shaffer

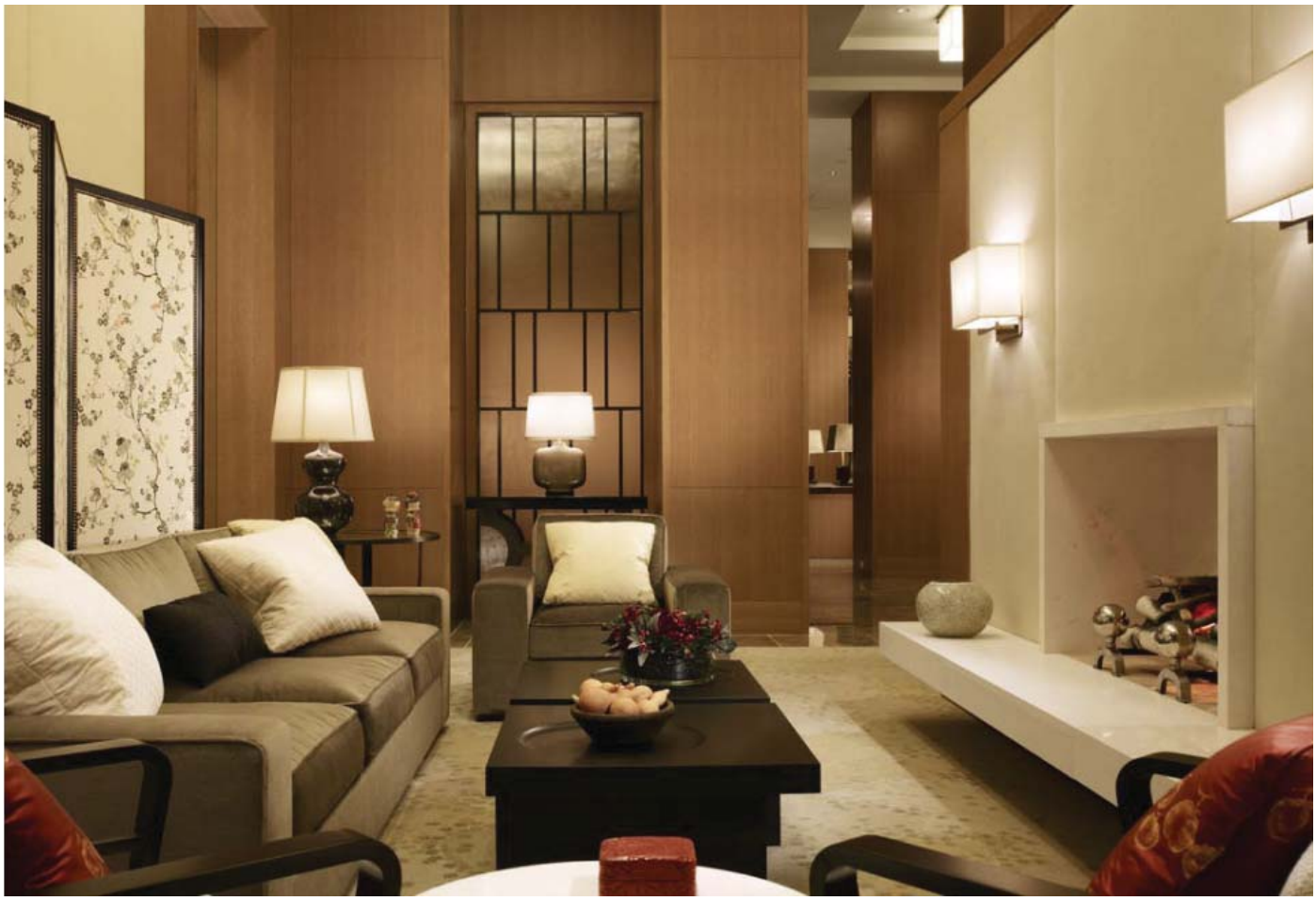


Photo: Sun City Palace Tsukaguchi, BAR Architects

Interviewing

i. *Communicating the POE Purpose*

Provide a brief overview of what the POE is and why it is being conducted (summarized below).

-Project goals provide the foundation for the POE.
-Evaluators seek to measure how well the facility environment meets the goals.
-Teams assess elements that exceed expectations and those that fall short.
-POE used to review and critique design and operation of a community.
-The assessment can only occur after a facility has been opened and is operational.
-The observations made are to help evaluate how the facility design promotes interaction between residents and staff.
-POEs also offer facility staff, administration, residents and families to better understand specific design features and their function for the community.
-Results from the POE can be used by a facility to promote discussion between staff and administration about intended functions and actual use of particular spaces.
-POEs can also be used for quality assurance purposes to assess resident and staff satisfaction.
-The POE can help staff evaluate which features support their needs as well as those that create problems.
-POE summary can be time-saving resource for those facilities contemplating renovations or new construction.
-Providers and designers can learn quickly from past POEs success and failures as they embark on new projects.

ii. *Questioning* (see **Exhibit A.1.c** for questions)

Remember that any interview can be daunting to the person being interviewed – staff or resident. Be sure to correct any misconceptions that the interview is related to job performance or facility rating (licensure).

Photo: Fox Hill, DiMella Shaffer

Exhibits

Evaluator Requirements — Exhibit A.1.a

American Institute of Architects - Design For Aging Committee
Post Occupancy Evaluation-Evidence Based Design for the Aging
Evaluator Qualification Form

Please complete this form and the Evaluator Letter of Agreement and email the completed forms to dfa@aia.org and to Jeffrey Anderzhon, at jeffa@crepidoma.com.

Evaluator's Full Name:

Member AIA or AAHSA? ___Yes ___No
If not, member of affiliated organization (ASID, ASLA, etc.), please list:
Firm\Business Name:
Address 1: City / State:
Address 1: Zip Code:
Daytime Telephone: Extension:
Fax:
Email:

Education\Degree Attained: From (Institution):
Professional Licensure (if more than one state, please list state of origin):

Have you ever been involved in a "team" post-occupancy evaluation (2 or more individuals working at the same time on the same POE)
___Yes ___No
If yes, please briefly discuss this experience:

Please briefly discuss your experience with post-occupancy evaluations:

Please briefly discuss your relevant experience with designs for the aging:

Although every effort will be made to accommodate schedules, the times that each evaluation can take place are very limited. Are you willing to adjust your schedule to meet the time demands for evaluations and preparation of evaluation summary? ___Yes ___No

Please briefly discuss your interest in this project and why you want to participate:

Have you read, and if selected, will you agree to the AIA Evaluator Agreement for this project? ___Yes ___No
(Please attach signed agreement, **Exhibit A.1.b**.)

(References required; continued on next page)

Evaluator Requirements — Exhibit A.1.a *(continued)*

Please provide the names, addresses and telephone numbers for three references who would be able to discuss your experience and communications skills:

Reference #1:
Name:
Address:
City:
State:
Zip:
Email:

Reference #2:
Name:
Address:
City:
State:
Zip:
Email:

Reference #3:
Name:
Address:
City:
State:
Zip:
Email:

Evaluator Letter of Agreement — Exhibit A.1.b

Name of Evaluator:

Thank you for your interest in volunteering as a post-occupancy evaluator for the Design for Aging Knowledge Community project. As you are aware, The American Institute of Architects Design For Aging Committee ("AIA DFA") is undertaking a series of post-occupancy evaluations of environments for aging that will culminate in the publication of the evaluations.

The following is a list of the post-occupancy evaluator's ("POE") duties and responsibilities, as well as other applicable terms and conditions that s/he must agree to:

POEs will visit a site, in conjunction with other POEs, to conduct a post occupancy evaluation, which may be included in the Design for Aging POE publication that will be published.

POEs are administered with evaluation protocols, guidelines and materials that evaluators must follow and complete.

Following the evaluation protocol, POEs must provide DFA with a summary of their evaluation findings, discuss those findings with DFA and provide DFA with digital photography from the evaluation. The summary will be used as a research base to compose a formal POE report that will be included in the publication.

POEs will complete other duties as assigned by AIA in connection with this project within the timeframes established for the evaluation; DFA will recognize POEs in the publication in a manner determined by DFA. POEs will receive one (1) complimentary copy of the publication.

POEs agree to perform the tasks without payment, including a royalty, of any kind from AIA or publisher.

Any materials created by a POE shall be considered a "work made for hire", as defined in 17 U.S.C. Section 101, and the AIA shall be the owner of all rights, including copyright, in the materials. To the extent the materials do not qualify as a "work made for hire", the POE expressly assigns all right, title and interest, including copyright, in the materials to AIA, its assigns and successors in interest in perpetuity.

The AIA shall have the right to make such revisions, deletions, or additions to the materials that they deem advisable.

The POE evaluator shall have no right to use the material for any purpose.

You must indicate your acceptance of these terms and conditions by signing below:

Signature **Date**

Interview Questions — Exhibit A.1.c

Questions for Staff

How long have you been with the facility?

Where were you before?

What do you do? Who do you report to? What hours do you work?

What do you like best about your job?

What do you like least about your job?

Were you involved in the planning?

If you could change one (?) thing, what would it be?

Questions for Resident (family member)

How long have you been living here?

Where were you before (i.e. are you from the local area?)

Do you have family near by?

What was your occupation before retirement?

What do you like best about your apartment?

(ask about storage, lighting, bathroom design, HVAC)

What do you like least about your apartment?

Do you participate in community activities?

What is your favorite activity?

Do you like the food?

Do you like the service (management, food, housekeeping, maintenance?)

If you could change one (?) thing, what would it be?

Photo Documentation / Share — Exhibit A.1.d

The following folders should be established to organize all the digital photos into general categories.

Front Door
Entry Lobby/Reception
Unit 1 (Unit 2, Unit 3, etc, where applicable)
Resident Bathroom
Dining Room
Lounge/Living Room
Corridor
Activity Area (Wellness, Art, Business Center)
Outdoor Areas
Other (as required)

Evaluator Checklist -- Focus Areas — Exhibit A.1.e

For this section, please rate with **+** (excellent); **-** (poor), **0** (neutral); or **n/a** (not applicable) each observation of various focus areas. Please feel free to add comment to explain your rating. If you did not observe a particular issue, please leave the item blank or check n/a. **Again, do not rate unobserved issues with a (-) mark.**

A. Resident Unit Questions/Considerations

Quick Evaluation
(pick one)

A1. How welcoming and personalized is the entryway from the corridor? Describe.

Comments:

excellent +
poor -
neutral 0
not applicable n/a

A2. Do room entrances promote personal identification for the occupant? Describe.

Comments:

+
-
0
n/a

A3. Focal point? What/where is it?

Comments:

+
-
0
n/a

A4. Is vertical space utilized to its fullest? Please describe.

Comments:

+
-
0
n/a

A5. Is the bathroom visible from the bed?

Comments:

+
-
0
n/a

A6. Is the unit furnishable? Are there built-ins? Describe them, their locations and how utilized.

Comments:

+
-
0
n/a

A7. Describe doorswings and circulation. Easy to navigate? Conflicting doorswings?

Comments:

+
-
0
n/a

A8. Describe hardware on built-ins (levers, knobs, sliding doors, sink faucet goose neck...etc)

Comments:

+
-
0
n/a

A. Resident Unit Questions/Considerations

Quick Evaluation
(pick one)

A9. Height of counters, microwave, shelving? Pull-out shelves in cabinets for ease?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

A10. What percentage of built-in storage or tea-kitchen is difficult to reach/access?

Comments:

+
-
0
n/a

A11. Is there a seat near the closet to use for dressing?

Comments:

+
-
0
n/a

A12. How many lightsources?

Comments:

+
-
0
n/a

A13. Levels adequate? Lighting sufficient and glare free?

Comments:

+
-
0
n/a

A14. Variety of types (ceiling, wall-mounted, decorative)

Comments:

+
-
0
n/a

A15. Is there a light at the closet?

Comments:

+
-
0
n/a

A16. Is there adequate (but controlled) day lighting?

Comments:

+
-
0
n/a

A. Resident Unit Questions/Considerations

Quick Evaluation
(pick one)

A17. Is the lighting flexible to accommodate task requirements and at the other extreme rest requirements?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

A18. Flooring material(s)? Textures? Hazards/slip/trip?

Comments:

+
-
0
n/a

A19. Wallcovering(s)- Paint variety?

Comments:

+
-
0
n/a

A20. Contrast between counter and floor? Contrast between sink and counter? Floor and wall?

Comments:

+
-
0
n/a

A21. Are the ceilings drywall? If so, is there additional compensation via carpeting, draperies, etc. to minimize noise transference?

Comments:

+
-
0
n/a

A22. Number and locations of windows

Comments:

+
-
0
n/a

A23. Is the window operable?

Comments:

+
-
0
n/a

A24. Window coverings-Can daylighting and glare be controlled? How?

Comments:

+
-
0
n/a

A. Resident Unit Questions/Considerations

Quick Evaluation
(pick one)

A25. Describe quality of natural light. Does daylight reach into deepest part of unit?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

A26. What is the height of the sill? Can a resident be seated and see out?

Comments:

+
-
0
n/a

A27. Variety of closet/storage areas? Describe location and number.

Comments:

+
-
0
n/a

A28. Is there space to store assistive mobility devices (walker/cane) near the bed?

Comments:

+
-
0
n/a

A29. Are window sills wide enough to accommodate personal possessions?

Comments:

+
-
0
n/a

A30. Outlets and switches and thermostat locations convenient?

Comments:

+
-
0
n/a

A31. Devices for cooling/heating (ie ceiling fan)?

Comments:

+
-
0
n/a

A32. What recommendations do the residents have for improving their space?

Comments:

+
-
0
n/a

A. Resident Unit Questions/Considerations

Quick Evaluation
(pick one)

A33. How does staff feel about the resident rooms? Pros/cons.	
Comments:	excellent +
	poor -
	neutral 0
	not applicable n/a

A34. Identify something never encountered before - the good or bad	
Comments:	+
	-
	0
	n/a

B. Bathroom Questions/Considerations

Quick Evaluation
(pick one)

B1. Is the layout of the bathroom easy to navigate between door, lav, shower/bath, and toilet?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

B2. Is the door easy to access (open/close)? If applicable, does the door swing out into the unit (in case of a fall in the bathroom)?

Comments:

+
-
0
n/a

B3. Transitions safe and easy? What mechanisms are in place to ensure easy transition into tub/shower?

Comments:

+
-
0
n/a

B4. What features make the toilet accessible? Are there appropriate supports at the toilet?

Comments:

+
-
0
n/a

B5. Integrated grab bars at the sink? Easy to use sink, faucets, mirror at correct height?

Comments:

+
-
0
n/a

B6. Shower size can accommodate a chair? Or have a pull-down chair? Or is roll-in?

Comments:

+
-
0
n/a

B7. Light inside shower?

Comments:

+
-
0
n/a

B8. Multiple light-sources? What kind of light illuminates the face in the mirror?

Comments:

+
-
0
n/a

(continued, Exhibit A.1.e)

B. Bathroom Questions/Considerations

Quick Evaluation
(pick one)

B9. Flooring material(s)? Textures? Hazards/slip/trip?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

B10. Variety of closet/storage areas? Describe location and number.

Comments:

+
-
0
n/a

B11. Is there a lockable cabinet for medications?

Comments:

+
-
0
n/a

B12. Is there a place to put toothbrush and personal hygiene items? Easy to access?

Comments:

+
-
0
n/a

B13. Is there adequate storage space for towels?

Comments:

+
-
0
n/a

B14. Is there a nurse call pull cord in the bathroom? Easily accessed?

Comments:

+
-
0
n/a

B15. How does staff feel about the resident bathrooms?

Comments:

+
-
0
n/a

B16. Identify something never encountered before - the good or bad

Comments:

+
-
0
n/a

C. Dining Questions/Considerations

Quick Evaluation
(pick one)

C1. Is there a focal point or area to the dining room? Please describe.

Comments:

excellent +
poor -
neutral 0
not applicable n/a

C2. How does the kitchen staff feel about the layout of the kitchen?

Comments:

+
-
0
n/a

C3. Is the kitchen buffered from the dining room?

Comments:

+
-
0
n/a

C4. How many tables in the dining area? How many chairs per table?

Comments:

+
-
0
n/a

C5. Is there walker storage nearby?

Comments:

+
-
0
n/a

C6. Is there a variety of seating/tables in the dining room? Describe.

Comments:

+
-
0
n/a

C7. Buffet or waitstaff? Is buffet easy to maneuver around?

Comments:

+
-
0
n/a

C8. Is there a specialty area such as demonstration cooking station, etc?

Comments:

+
-
0
n/a

(continued, Exhibit A.1.e)

C. Dining Questions/Considerations

Quick Evaluation
(pick one)

C9. Do the chairs have arms? Casters? Do the arms fit under the table?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

C10. Is overall lighting produced in an indirect method with higher than normal illumination?

Comments:

+
-
0
n/a

C11. Is there adequate illumination at the table top? Is it shadow/glare-free?

Comments:

+
-
0
n/a

C12. Are colorations "true" rather than muddy or overtly yellow or grey in their hue?

Comments:

+
-
0
n/a

C13. Are principles of color and contrast in place for people to distinguish various edges, (ie:chair seats to floor, table top to chair seat, junctures of the horizontal floor to the vertical wall, wall to handrail)?

Comments:

+
-
0
n/a

C14. Is the room acoustically good for conversation? What kinds of materials help or hinder sound absorption?

Comments:

+
-
0
n/a

C15. Number and locations of windows

Comments:

+
-
0
n/a

C16. Window coverings-Can daylighting be controlled? How?

Comments:

+
-
0
n/a

C. Dining Questions/Considerations

Quick Evaluation
(pick one)

C17. What is the height of the sill? Can a resident be seated and see out?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

C18. What mechanisms are in place to reduce glare, if any?

Comments:

+
-
0
n/a

C19. Is there adequate space for mobility devices?

Comments:

+
-
0
n/a

C20. Do the residents like their dining room, meal service, and the quality of the food?

Comments:

+
-
0
n/a

C21. Identify something never encountered before - the good or bad

Comments:

+
-
0
n/a

D. Transition Questions/Considerations

Quick Evaluation
(pick one)

D1. Is the building entry (first impression) well designed and welcoming?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

D2. Are the views at the end of hallways different?

Comments:

+
-
0
n/a

D3. Are spaces to gather available near "prime spots" (such as front lobby, dining) without being in the traffic pattern?

Comments:

+
-
0
n/a

D4. Are landmarks available outside as well as inside the building to clarify entrances and exits?

Comments:

+
-
0
n/a

D5. Are there places to sit along the way at all major transition areas?

Comments:

+
-
0
n/a

D6. Do elevators have a bench or place to sit (inside elevator or at lobbies)?

Comments:

+
-
0
n/a

D7. In living/lounge areas, are there a variety of seating options (height, width, seat depth) to accommodate a variety of people?

Comments:

+
-
0
n/a

D8. Are there areas of the building that appear unsafe and cluttered?

Comments:

+
-
0
n/a

D. Transition Questions/Considerations

Quick Evaluation
(pick one)

D9. Are hallways clear so that handrails can be accessed?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

D10. Are signs for use by residents (visitors) visually more distinctive than staff (utility) signs?

Comments:

+
-
0
n/a

D11. Is the lighting flexible to accommodate task requirements and at the other extreme rest requirements?

Comments:

+
-
0
n/a

D12. Are there places to sit that might receive direct sunlight?

Comments:

+
-
0
n/a

D13. Is overall lighting produced in an indirect method with higher than normal illumination?

Comments:

+
-
0
n/a

D14. Is lighting at hallways and vestibules adequate? Are there wall sconces in corridors, and if so, are they non-glaring?

Comments:

+
-
0
n/a

D15. Are colorations “true” rather than muddy or overtly yellow or grey in their hue?

Comments:

+
-
0
n/a

D16. Are bold patterns used that affect the residents’ mobility?

Comments:

+
-
0
n/a

D. Transition Questions/Considerations

Quick Evaluation
(pick one)

D17. What wayfinding devices are used--please describe highlights (ie, carpet, paint, material changes, etc)

Comments:

excellent +
poor -
neutral 0
not applicable n/a

D18. What, if any, special features are used to break up length of corridors?

Comments:

+
-
0
n/a

D19. Are flooring transitions made at logical places (at doorways, etc.)

Comments:

+
-
0
n/a

D20. Are principles of color and contrast in place for people to distinguish various edges, (ie: chair seats to floor, table top to chair seat, junctures of the horizontal floor to the vertical wall, wall to handrail)?

Comments:

+
-
0
n/a

D21. Window coverings- can daylighting be controlled? How?

Comments:

+
-
0
n/a

D22. Is there sufficient storage for supplies and linens so that carts are not in the hallway?

Comments:

+
-
0
n/a

D23. Identify any home-like qualities (absence of institutional arch vocabulary)

Comments:

+
-
0
n/a

D24. Do you see residents interacting and using the lobby, community rooms and other common areas?

Comments:

+
-
0
n/a

D. Transition Questions/Considerations

Quick Evaluation
(pick one)

D25. How does staff feel about the transition spaces?	
Comments:	excellent +
	poor -
	neutral 0
	not applicable n/a

D26. Identify something never encountered before - the good or bad	
Comments:	+
	-
	0
	n/a

E. Activity Questions/Considerations

Quick Evaluation
(pick one)

E1. Is there sufficient space for offices, meetings, training, and conferences?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

E2. Are there special rooms for private gatherings?

Comments:

+
-
0
n/a

E3. Are there spaces that support the resident and local community interactions/events?

Comments:

+
-
0
n/a

E4. Are rooms sized appropriately for designated activity(ies)?

Comments:

+
-
0
n/a

E5. Are there rooms designed specifically for smaller, more intimate gatherings or occasions?

Comments:

+
-
0
n/a

E6. Are there larger, more common rooms for larger gatherings? Are they utilized?

Comments:

+
-
0
n/a

E7. Are signs for use by residents (visitors) visually more distinctive than staff (utility) signs?

Comments:

+
-
0
n/a

E8. Is overall lighting produced in an indirect method with higher than normal illumination?

Comments:

+
-
0
n/a

E. Activity Questions/Considerations

Quick Evaluation
(pick one)

E9. Is the lighting flexible to accommodate task requirements and at the other extreme rest requirements?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

E10. Are bold patterns used that affect the residents' mobility?

Comments:

+
-
0
n/a

E11. Wallcovering(s)- Paint variety?

Comments:

+
-
0
n/a

E12. Quantities and locations of windows

Comments:

+
-
0
n/a

E13. Are supplies / linens / materials conveniently located? Is space adequate and appropriately sized?

Comments:

+
-
0
n/a

E14. Electrical and data outlets; located appropriately for type of activity?

Comments:

+
-
0
n/a

E15. Air quality - ventilation?

Comments:

+
-
0
n/a

E16. What are some of residents' favorite activity spaces and why? Describe.

Comments:

+
-
0
n/a

E. Activity Questions/Considerations

Quick Evaluation
(pick one)

E17. How does staff feel about the common spaces?	
Comments:	excellent +
	poor -
	neutral 0
	not applicable n/a

E18. Identify something never encountered before - the good or bad	
Comments:	+
	-
	0
	n/a

F. Outdoor Questions/Considerations

Quick Evaluation
(pick one)

F1. Are landmarks available outside as well as inside the building to clarify entrances and exits?

Comments:

excellent +
poor -
neutral 0
not applicable n/a

F2. If you are outside (in a garden courtyard), can you easily find your way back inside?

Comments:

+
-
0
n/a

F3. If applicable, how is the Memory Care outdoor area secured? Describe.

Comments:

+
-
0
n/a

F4. What interesting feature in courtyard design draws you out to explore?

Comments:

+
-
0
n/a

F5. Describe the number and type of various gardens available for resident use.

Comments:

+
-
0
n/a

F6. Is there an outdoor activities program? If so, what?

Comments:

+
-
0
n/a

F7. Are outside spaces (garden environments) designed to promote safety and frequent unrestricted use?

Comments:

+
-
0
n/a

F8. Are they well designed with adequate pathways, handrails, lighting, seating?

Comments:

+
-
0
n/a

(continued, Exhibit A.1.e)

F. Outdoor Questions/Considerations

Quick Evaluation
(pick one)

F9. Are the outdoor spaces easily accessed? Are the paths easy to navigate? Describe access points from building.

Comments:

excellent +
poor -
neutral 0
not applicable n/a

F10. Is there a working garden with raised planter beds for resident use?

Comments:

+
-
0
n/a

F11. Is there adequate parking and is it easily accessed by family and residents?

Comments:

+
-
0
n/a

F12. Are there adequate shaded areas?

Comments:

+
-
0
n/a

F13. Is there outdoor lighting for evening use?

Comments:

+
-
0
n/a

F14. Describe what materials are used at the groundscape; do they resist glare?

Comments:

+
-
0
n/a

F15. Does the furniture material get hot in the sun? Describe.

Comments:

+
-
0
n/a

F16. Are there various kinds of materials used to create variety and a different kind of experience than inside? Please be as specific as possible.

Comments:

+
-
0
n/a

F. Outdoor Questions/Considerations

Quick Evaluation
(pick one)

F17. Is there plenty of outdoor seating and tables to encourage use? A variety? Please describe.

Comments:

excellent +
poor -
neutral 0
not applicable n/a

F18. Is there a terrain park for therapy and fitness?

Comments:

+
-
0
n/a

F19. Is there a water feature? Describe.

Comments:

+
-
0
n/a

F20. How often do the residents use the outdoor space? What do they like or dislike about it ?

Comments:

+
-
0
n/a

F21. What works well from the staff perspective about the outdoor areas? What challenges exist?

Comments:

+
-
0
n/a

F22. Are outdoor spaces in view of staff?

Comments:

+
-
0
n/a

F23. Identify something never encountered before - the good or bad

Comments:

+
-
0
n/a

F24. Left blank for other comments

Comments:

+
-
0
n/a

Evaluator Descriptions and Impressions — Exhibit A.1.f

In this section, please include written responses to the bulleted questions in the section on ***Things to Observe – Overall Project Design and Innovation***. Based on your impressions of the facility, organize your responses around following themes / issues:

- Privacy
- Habitability
- Autonomy
- Wayfinding
- Community
- Sense of home

Introductory Letter to Administrator / CEO — Exhibit A.2.a

Administrator
Senior Living Community
Address
City State Zip

Dear Administrator:

As a representative of the AIA Design for Aging Knowledge Community, I am requesting your assistance and participation in a unique study of facility design and programming. The American Institute of Architects' (AIA) in association with the American Homes and Services for the Aging (AAHSA) is sponsoring a program for Post-Occupancy Evaluations (POEs). Our mission is to provide on-site evaluations, observations, and interviews to determine how well award winning designs actually work in real-life operation. We seek to identify and promote innovative planning, design and operational concepts which make demonstrable improvements to resident privacy, dignity and quality of life.

Your community, (facility name), was submitted to the AIA for a DFAR award and we would like to include your community in our Post-Occupancy Evaluation process. As such, we would like to schedule a visit in the coming weeks. There would be no cost to your organization and we would coordinate a time that is convenient for you and your staff.

Our team of evaluators is comprised of four individuals with backgrounds in architecture, interior design, and/or gerontology. The site visit would be scheduled over a one day period that would begin in the morning and conclude at the end or the day. A tour of your community followed by meetings with selected residents, support staff, and management would be requested. A general outline of a typical visit, plus information about the Post-Occupancy Evaluation program is attached for your review.

Inclusion of (facility name) in this study will enable us to share your personal successes and lessons learned with a wide audience of providers, architects, and designers interested in improving environments for older adults. Communities which have previously participated in these evaluations have found the process rewarding and informative, and of course, we will share the outcome of our work with you.

We would like to schedule our visit at a time during the next two months which is most convenient for you. I will follow up this letter with a telephone call within the next ten days. Please feel free to ask questions or request any additional information you may need in order to confirm your participation. Thank you for your interest and support of this project.

Sincerely,

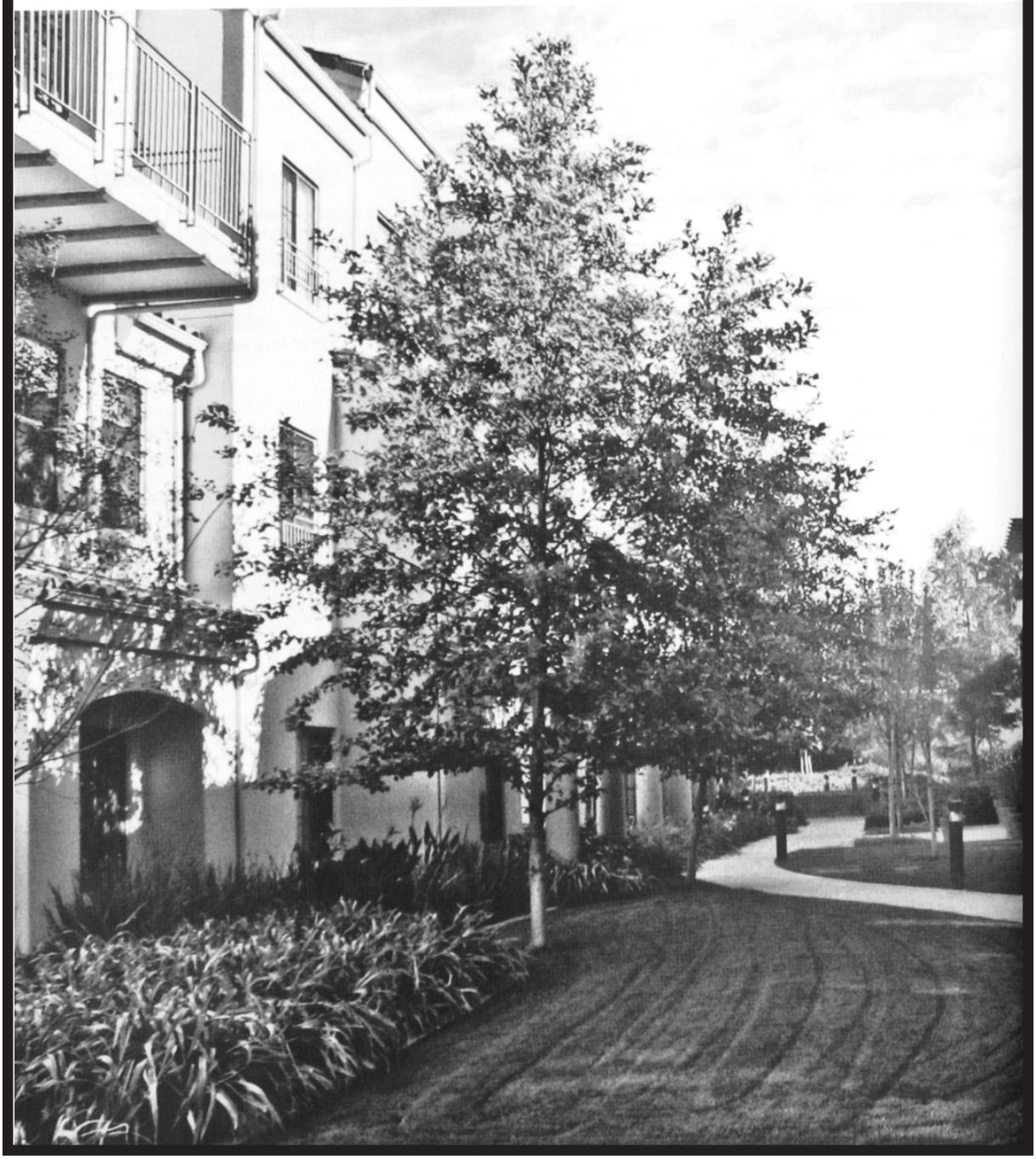
American Institute of Architects
Design for Aging Knowledge Community

Sample of Final Product - POE Chapter Example — Exhibit A.2.b

This is an example of a POE final Chapter write-up. Please keep in mind that it is copyrighted material. Use this as an example of format to keep the final products similar.

"I don't deserve this award, but I have arthritis and I don't deserve that either."

JACK BENNY, 1894–1974



Chapter 6 La Vida Real

EVALUATION SITE: La Vida Real

COMMUNITY TYPE: Continuing Care Retirement Community

- 210 independent living apartments
- 98 assisted living apartments
- 14 assisted living apartments for those with dementia
- No licensed nursing care

REGION: West Coast

ARCHITECT: Mithun

OWNER: Senior Resource Group

DATA POINTS:

Resident Room:	470–586 gsf (assisted living)
	469–1,125 gsf (independent living)
Total Area:	103,274 gsf (assisted living)
Total Area:	922.09 gsf/resident (assisted living)
Total Area:	249,946 gsf (independent living)
Total Area:	1,190.22 gsf/apartment (independent living)
Overall Total Area:	353,220 gsf
Project Cost:	$136.87/gsf
Total Project Cost:	$48,346,099
Investment/resident:	$150,143.16
Staffing:	1.65 care hours/resident/day (assisted living)
Occupancy:	100% (assisted living) as of April 2006
	100% (independent apartments) as of April 2006

FIRST OCCUPANCY: September 2003

DATE OF EVALUATION: April 2006

EVALUATION TEAM: Mitch Green, AIA; Jeffrey Anderzhon, AIA; Joyce Polhamus, AIA; Eleanor Alvarez; Terri Sherman

FIG. 6-1 A nicely landscaped courtyard between two apartment wings reflects a Spanish colonial vernacular architectural style *Photograph by Jeffrey Anderzhon*

Introduction

Among the relatively new suburban sprawl in the foothills northwest of San Diego, La Vida Real itself spreads to nearly consume its 11-acre site. The buildings' Spanish vernacular structures blend into the neighborhood and at first glance are either unassuming or repetitive. This continuing care retirement community, containing 210 independent living apartment units, 98 assisted living apartments, and 14 assisted living apartments for residents suffering from dementia, contains four levels that take advantage of the gently rolling site. The floor area ratio is relatively high for a suburban site even on the land-cost sensitive West Coast, and creates significant density that most likely does not differ much from the surrounding multifamily residential and commercial properties.

Upon entering La Vida, the calming feel of the well-landscaped entry court awes visitors. Unfortunately, the entrance is somewhat confusing as well, because there appears to be actually two entries: one to the left, which leads into the apartment side of the campus, and one on the right, which leads to assisted living. This entry courtyard is the only connection between the two portions of the campus that is not restricted to staff, and it is an opening statement that distinctly delineates independent and assisted living.

In the face of the campus's density, the limited but extensively landscaped exterior spaces are refreshing, inviting, and provide an organic counterpoint to the stuccoed edifices. The exterior spaces take on their own spatial identities and easily combine with the structured environment, at times blurring the distinction between the two. The blurred lines create a dichotomy of environment in which interior and exterior merge, despite the conscious segregation of care levels.

The environmental design emanates a Southern California style (see Figure 5 in the color insert) that is intuitively expected and comforting in its conformance. Despite that conformity, the design asserts instances of

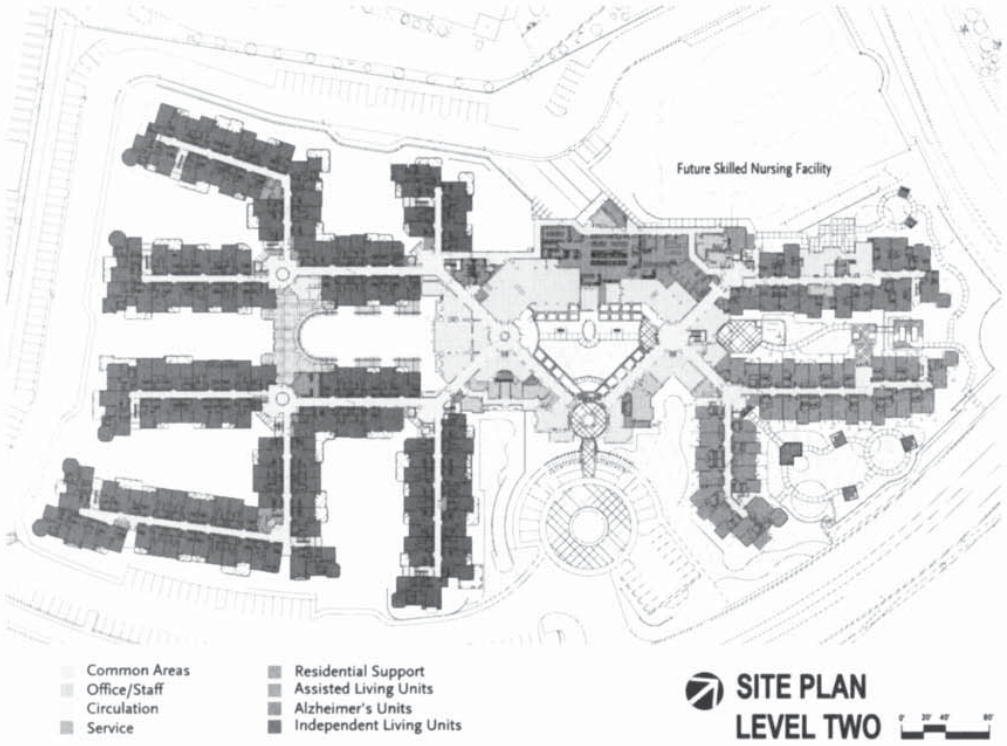


FIG. 6-2 Site plan, level two *Courtesy of Mithun*

succeed as a beautiful space lush with landscaping and is more akin to a private garden. Additionally, the lack of activity within the courtyard, and the tendency to use the space as a connector between independent and assisted living, further reduces the town-square quality of the space. Perhaps locating amenities such as the beauty salon, café, or library within the courtyard would have enhanced the atmosphere necessary for this objective to be met.

OBJECTIVE: Provide an intuitive sense of orientation when arriving and moving about the community.

FIELD OBSERVATIONS: The grand archway entrance opens to two distinct entrances on each side. One entry leads to the assisted living portion of the campus and common areas; the other side is the entry to the independent living portion of the campus. The two sides connect through the common areas in a triangular fashion and then join in the dining areas. This layout benefits only the staff, as no connection between the two areas is available to residents. The dining rooms are adjacent to each other and are backed by the common kitchen, which efficiently serves both venues.

This main entry sequence provides a strong sense of arrival, and the first circulation corridors into both assisted living and the independent apartments have visual access to the entry courtyard through large expanses of glass. The visual access orients visitors, but is immediately lost beyond the rotunda where the corridors terminate. Elsewhere on the campus, there is no visual access to the exterior to give visual orientation clues or provide relief from the continuous array of apartment doors and painted corridor walls.

Throughout the campus, rotundas define entrances and provide choices for wayfinding. These choices are not intuitive and are actually quite confusing, particularly for the visitor or new resident. Without distinct indication through design, wayfinding becomes an issue for staff during new resident orientation and for providing service workers adequate directions to individual apartments.

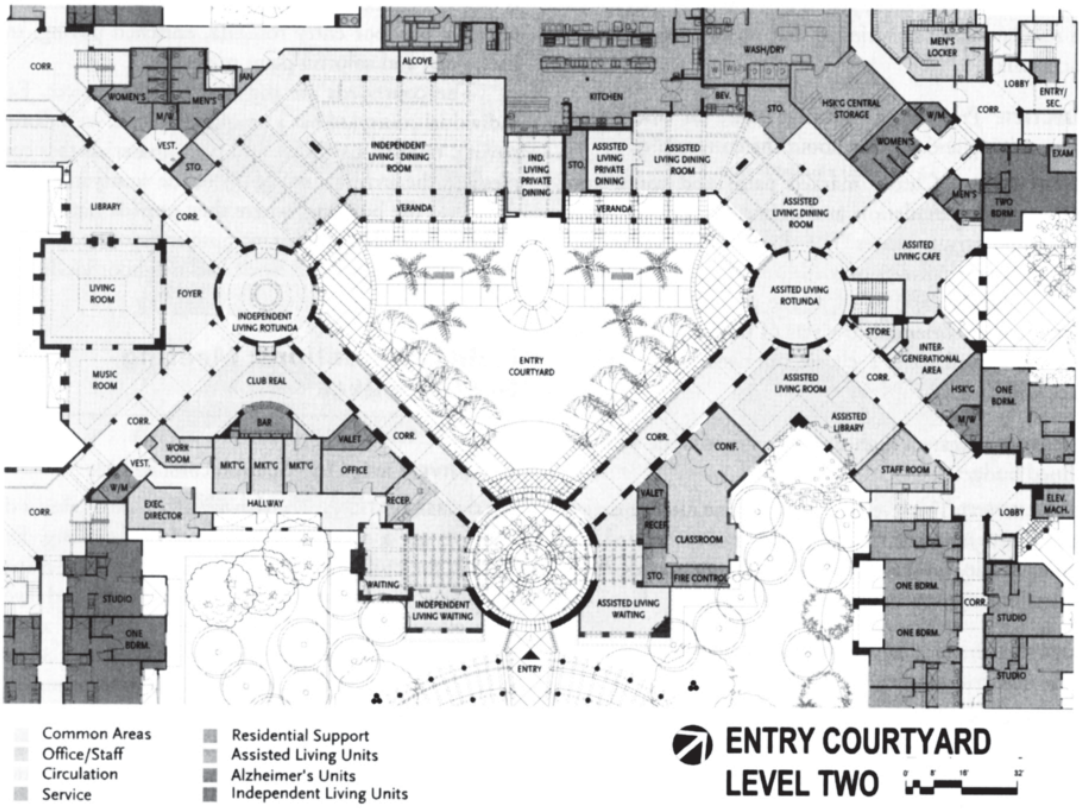


FIG. 6-4 Campus entry courtyard plan *Courtesy of Mithun*

FIG. 6-5 A single-loaded assisted living corridor with natural light flowing into the space is adjacent to the entry courtyard *Photograph by Jeffrey Anderzhon*

OBJECTIVE: Create a high-quality environment within a defined budget.

FIELD OBSERVATIONS: Without question, the cost per square foot for La Vida Real is reasonable, particularly for Southern California. In addition, there is no noticeable difference in finishes or quality between the more lucrative independent living areas and the assisted living areas; both were treated with equal respect and attention to detail. This approach ameliorates the fact that there is a clear physical and psychological distinction between the two.

Within common and social spaces, there is a hierarchy of materials and finishes that work with the overall feel of the design. The finishes give a richness and depth of accommodation that both comfort and calm the residents. The memory care unit may be an exception to this level of attention, as it contains contrived wall features, is dark, and has no visual orientation to the outside.

OBJECTIVE: Include landscaping that supports the spirit of the new community.

FIELD OBSERVATIONS: Because of the size of the structure vis-à-vis the size of the lot, there are only small and disconnected courtyards between wings of the building. These courtyards are extensively landscaped and contain a variety of resident choices for furniture and amenities. The courtyards, particularly the entry courtyard, blend into the surrounding structures and become rooms on their own. It is apparent that the landscape designer and architect collaborated closely to create interesting views and vistas, although the environs beyond the site are quite bland and nondescript.

FIG. 6-6 Main entry with courtyard beyond is well landscaped and attractive *Photograph by Jeffrey Anderzhon*

Drought-resistant plant materials were selected because of the high probability of brush fires in the region. Nevertheless, the facility has three separate sprinkler systems running on a regular basis and a significant lawn area that requires watering as well. Landscaping overall was beautiful and tied into the décor well, and the courtyards do serve to break up building massing that would otherwise be confining. The additional attention and expense showered on these small courtyards help to draw the eye away from the repetitive form of the building.

Field Observations: Themes and Hypotheses

Creating Community

With 322 apartment units on campus that are physically connected, there are ample opportunities to create a cohesive community across disparate care-provision levels. To some extent, there was an attempt within the

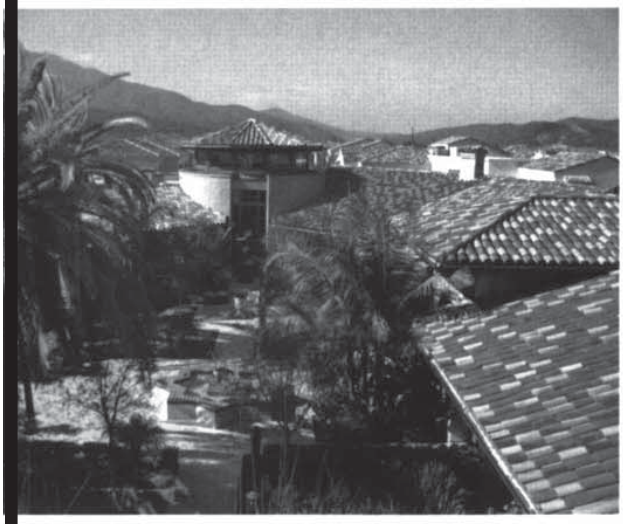


FIG. 6-7 The only connection between the assisted living and independent living portions of the campus is by way of this entry courtyard, as seen from above *Photograph by Jeffrey Anderzhon*

design to create that community with the common entry courtyard and continuity in exterior design and interior fit and finish. Unfortunately, there is a disconnection between the more active independent living residents and the frailer assisted living residents, which is created by the design and reinforced by the attitude of the residents and administration. This distinction is especially disappointing when one spouse needs care support while the other remains living in the independent apartments.

Aside from the physical separation, however, the finer details of design do not treat the health care side of the campus differently from the independent living portion. The level of finishes and number and size of socialization spaces are not significantly different for either side of the community. These spaces include ample gathering rooms that serve large group functions, as well as small socialization areas where individuals can enjoy an intimate conversation with a neighbor. The community spaces on the assisted living side tend to be more activity oriented, whereas those on the independent living side tend to be more socially oriented.

Given that the independent living side of the campus has residents who are more active, and given that there are certainly more residents on this side of campus, there logically are more community spaces for their use. Among these is an Internet café with a coffee-house ambience and great views into a courtyard. A fully appointed theater, with comfortable, accessible seating, is another popular locale for residents. Just outside this theater is a "lobby" that creatively provides space for pre- and post-movie discussions and socialization. Smaller gathering rooms allow card-club meetings and work as areas for individuals to gather for discussions.

Much of the community interaction occurs around meals. Both sides of the La Vida campus have well-appointed dining rooms that, although large, convey a sense of intimacy and fine restaurant dining in both their décor and their operation. Outside each dining area is a rotunda that serves as a social gathering space for pre-meal conversations. On the independent living side, the Club Real serves as additional space where residents can have a cocktail in a casual club setting.

The residents do share a sense of community, but that sense tends to be confined to one side of the campus and does not extend to the larger suburban community. The facts that this is a typical commuter suburb, where residents shy away from becoming too intimate with their neighbors, and that it is one of the newer suburbs of San Diego contribute to a lesser level of connection to the larger community. However, there are outreach efforts, including an intergenerational program allowing use of the swimming pool and cooperative programs with the local community college in such activities as tai chi, music, arts, and yoga.

Making a Home

The comfortable and familiar design of the facility helps residents to feel more at home in their surroundings, and the exceptional amenities, such as the swimming pool and lush gardens, also help residents to settle in and enjoy their new lifestyle.

The apartments all benefit from lovely design finishes and offer various choices and amenities to residents. The bathrooms are functional but not necessarily spacious, particularly for those in wheelchairs. Although the use of pocket doors for the bathrooms avoids door-swing interference with floor area, the fact that the doors recess completely into the wall becomes problematic for residents with limited or diminished use of their hands. Almost all of the apartments have their own balconies or patios, a feature that enhances residents' personal space and gives them their own independent access to the outdoors and enjoyment of the courtyards.

The separation between assisted living and the independent living quarters could be a downside for residents in the assisted living portion of the building. There are many emotional and psychological effects of aging in place and moving to a higher level of care: a design that counteracts the discomfort of this transition would help residents to relax and feel more at home at La Vida.

Regional/Cultural Design

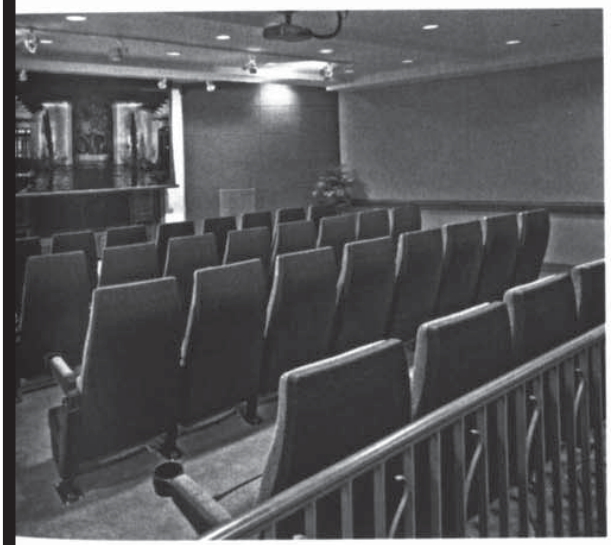
Without question, the aesthetics of La Vida comport with the commonly held perspective of regional design in Southern California, tending toward a heavy Spanish colonial influence. The design does this, however, with some amount of refreshing variance from the typical stucco and tile roof typology. The landscape design and courtyard organization help the building to discover its own territory. It could be argued, however, that there is only a superficial cultural foundation, as the large majority of the residents within La Vida or the community of Rancho San Diego could not trace their roots back to a Spanish colonial heritage. The cultural influence stems almost entirely from a stereotypical geographic iconography that has come to pervade the regional architecture.

Regardless of its roots, this design is both accommodating to the surrounding regional vernacular and well done within a more contemporary context. It contains enough depth to be easily received and take on a character of its own. That depth also brings comfort to the resident and visitor and an intuitive understanding that the detailing and finishes are appropriate choices for the campus.

Environmental Therapy

La Vida is a comforting and welcoming environment that contains nicely detailed, well-furnished common spaces that are compatible with resident social interaction. Residents indicated their general pleasure with the campus and with the support provided by the staff and administration on campus. However, little in the design overtly contributes to therapy for the residents; in fact, some elements seem to detract from effective therapy.

FIG. 6-9 When the dining room cannot accommodate all the walkers at lunch, the assisted living rotunda becomes a convenient storage spot *Photograph by Jeffrey Anderzhon*



A well-appointed movie theater is a popular
r residents to spend the evening
tecturephotoinc.com

It could be argued that the length of the corridors and the travel distance from the furthest apartment to the central community spaces provide residents with daily exercise. Unfortunately, lengthy travel distances for residents also contribute to early use of motorized wheelchairs, which in turn requires spaces to park the vehicles and wider corridors to accommodate them. Neither was considered in the design of La Vida, and as apartment residents continue to age in place this issue will take on more prominence.

In the assisted living portion of the campus, the length of corridors is only slightly different but perhaps relatively more problematic. In fact, they are underlit and gloomy. The dementia assisted living apartments are all quite similar, and although consistency is important to appropriate care provision for residents who move into higher levels of care, lighting and connections to exterior spaces are sacrificed for consistency.

It is a difficult balance to achieve: creating a therapeutic environment on a continuing care campus that is consistent in design and feel but also benefits the care provision portion of the program. The design of La Vida accomplishes the consistency but unfortunately does not provide the most effective environment for the residents of the dementia unit.

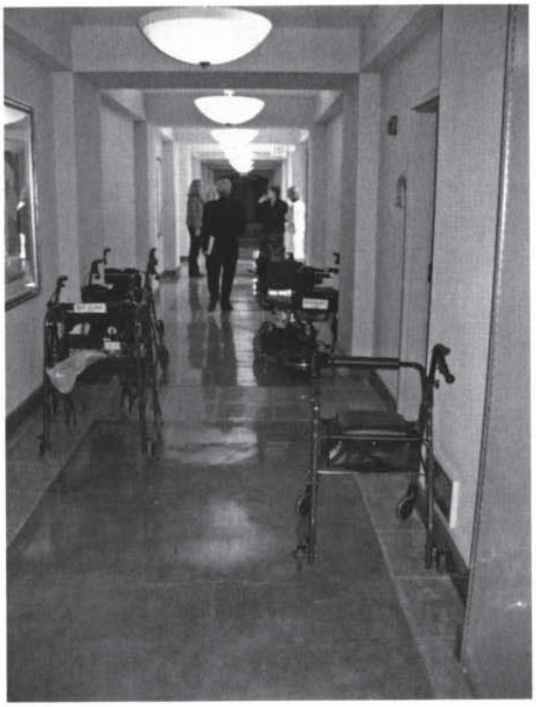


FIG. 6-10 Lengthy corridors contribute to resident use of ambulation assistive devices, as seen in this independent living corridor near an activity room *Photograph by Jeffrey Anderzhon*

Outdoor Environment

The courtyards created from the void spaces of the building are the only outdoor environments available to residents, visually and physically. These are difficult to locate from common spaces and are less utilized than hoped. However, the courtyards are attractive, well landscaped, separate the close-set apartment wings, and soften the scale of the project. With only a few exceptions, all the independent apartment units have either a balcony or a patio that takes full advantage of the courtyard vistas.

An attractive swimming pool with ample deck space for lounging is provided in the south courtyard below the living room in the independent living area. It is well shaded from the intense California sun, but is underused, perhaps because there is no adjacent dressing or locker room and residents must travel the long corridors in their swimming togs.

The memory garden adjacent to the dementia assisted living is attractive, but not easily accessible, and does not provide a great deal of natural light in the dementia unit. As this wing is on a level below grade, the courtyard seems to be carved from the hill—it feels like sitting in a bowl. Despite the covered porch available for residents, the courtyard remains underutilized.

The extensive thought and consideration given to the outdoor environment are unfortunately diminished by a fairly significant disconnection with the building itself. The courtyards are inviting and luxurious, with areas of both shade and sun, but are difficult to reach. With the notable exception of the entry courtyard, none of the courtyards provides clues as to what portion of the campus is nearest.

Quality of Workplace and the Physical Plant

Staff efficiency, particularly of dietary and food service staff, is enhanced by the building design. The back-of-house functions of the campus are well organized and separate from resident and public functions, but remain connected at the most critical points.

The size of the campus and the fact that it is essentially one building are somewhat overwhelming to staff. As do residents, staff members say that wayfinding is a little difficult and that it is difficult for staff to be visible to residents at all times. However, the staff is dedicated to the service of the elderly and has been both capable and creative in overcoming detracting environmental issues.

Comfort and convenience of staff, however, have been considerations secondary to comfort and conven-

FIG. 6-11 The swimming pool is also utilized by a local community college for swimming lessons *Photograph by Jeffrey Anderzhon*

ience of residents. The tight site design minimized parking and relegated staff to the leftover spaces around the edge of the campus, primarily along the south and east perimeter. These spaces, all of which are uncovered, are for use by residents; there are a few at the entry for visitors. Staff are thus required to park on the street or in the parking lot of a retailer across the street from the campus—the opposite side of the campus from the staff entry.

It is rare that such a large and complex building can be completed without design issues that affect the operation of that building, and La Vida is no exception. With the large number of residents served at each meal, it is very unusual that there was not a computerized system in place from the beginning to track resident meal use. Instead, staff check off paper slips when residents enter the dining areas, and then the slips are gathered and tallied at the end of the day for input into the computerized billing system.

Other, small design problems include the location of the electrical panels and air conditioning units, both of which create difficulty in maintenance accessibility. The choice of finishes for wood trim in the corridors, combined with an increase in the number of ambulation assistance devices, has required the maintenance department to hire a full-time painter simply for touch-ups throughout the campus building. Additionally, the dryer vents are too close to the rooftop air conditioning units, so the filters must be changed more often than usual.

Operator Perspectives

La Vida Real was constructed as a new continuing care retirement campus in a relatively new community without the advantage of reputation or an established market for a retirement product. The administration has had to not only actively market the campus, but also has had to undertake an educational program that teaches the benefits of retirement campus life. To their credit, they have been very successful. It is not surprising that the operator is very positive about the success of the environment and the significant role it has played in the marketing successes.

General Project Information

PROJECT ADDRESS
La Vida Real
11588 Via Rancho San Diego
Rancho San Diego, CA 92019

PROJECT DESIGN TEAM
Architect: Mithun
Interior Designer: Martha Child Interiors
Landscape Architect: IVY Landscape Architects, Inc.
Structural Engineer: Putnam Collins & Scott Associates
Mechanical Engineer: HV Engineering
Electrical Engineer: Travis Fitzmaurice Associates
Civil Engineer: Stuart Engineering
Dining Consultant: N/A
Gerontologist: N/A
Management/Development: N/A
Contractor: Swinerton Builders

PROJECT STATUS
Completion date: September 2003

OCCUPANCY LEVELS
At facility opening date: 25%
At time of evaluation: 100%

RESIDENT AGE (YRS)
At facility opening date: 82
At time of evaluation: 85

PROJECT AREAS

Project Element	Included in This Project: Units, Beds, or Clients	New GSF	Total Gross Area	Total on Site or Served by Project
Apartments	210	166,328	166,328	210
Senior living/assisted living/personal care	98	64,458	64,458	98
Special care for persons with dementia	14	5,403	5,403	14
Common social areas (people)	480	19,724	19,724	480
Kitchen (daily meals served)	1440	36,985	36,985	1440
Fitness/rehab/wellness (daily visits)	N/A	913	913	N/A
Pool(s) and related areas (users)	N/A	6,643	6,643	N/A

INDEPENDENT LIVING RETIREMENT APARTMENTS

Project Element	Apartments: No.	Typical Size (GSF)	Size Range (GSF)
Studio units	14	469	457–499
One-bedroom units	105	669	669
Two-bedroom units	69	905	905–1057
Two-bedroom plus den units	22	1125	1126–1142
Total (all units)	210	166,328 GSF	
Residents' social areas (lounges, dining, and recreation spaces):		11,252 GSF	
Medical/health/fitness and activities areas:		5,684 GSF	
Administrative, public, and ancillary support service areas:		4,603 GSF	
Service, maintenance, and mechanical areas:		14,388 GSF	
Total gross area:		249,946 GSF	
Total net usable area (per space program):		187,867 NSF	
Overall gross/net factor (ratio of gross area/net usable area):		1.33	

ASSISTED LIVING

Project Element	New Construction: No. Units	Typical Size
Studio units	39	470 GSF
One-bedroom units	48	586 GSF
Total (all units)	98	64,458 GSF
Residents' social areas (lounges, dining, and recreation spaces):		6,905 GSF
Medical, health care, therapy, and activities spaces:		1,842 GSF
Administrative, public, and ancillary support services:		2,456 GSF
Service, maintenance, and mechanical areas:		1,580 GSF
Total gross area:		93,466 GSF
Total net usable area (per space program):		75,661 NSF
Overall gross/net factor (ratio of gross area/net usable area):		1.24

DEMENTIA-SPECIFIC ASSISTED LIVING

Project Element	New Construction No. Units	Typical Size
Studio units	3	470 GSF
Two-room studio	11	481 GSF
Total (all units)	14	5,403 GSF
Residents' social areas (lounges, dining, and recreation spaces):		1,567 GSF
Medical, health care, therapy, and activities spaces:		65 GSF
Administrative, public, and ancillary support services:		288 GSF
Service, maintenance, and mechanical areas:		157 GSF
Total gross area:		9,808 GSF
Total net usable area (per space program):		7,323 NSF
Overall gross/net factor (ratio of gross area/net usable area):		1.34

SITE AND PARKING

SITE LOCATION
Suburban

SITE SIZE
Acres: 11
Square feet: 479,160

PARKING

Type of Parking	For This Facility Residents	Staff	Visitors	Totals
Open surface lot(s)	79	26	21	126
Lot(s) under building(s)	51	—	—	51
Totals	130	26	21	177

CONSTRUCTION COSTS

SOURCE OF COST DATA
The following information is based on actual costs as of August 2003

SOFT COSTS

Land cost or value:	$5,225,000
Basic architectural and engineering:	$554,840
Expanded architectural and engineering:	N/A
All permit and other entitlement fees:	$1,416,982
Legal:	$220,932
Appraisals:	$12,500
Marketing and preopening:	$858,599
Total soft costs:	$8,288,853

BUILDING COSTS

New construction except FF&E, special finishes, floor and window coverings, HVAC, and electrical:	$37,017,679
Renovations except FF&E, special finishes, floor and window coverings, HVAC, and electrical:	N/A
FF&E and small wares:	$3,039,567
Floor coverings:	In above
Window coverings:	In above
HVAC:	In above
Electrical:	In above
Medical equipment costs:	In above
Total building costs:	$40,057,246

SITE COSTS
All site costs included in above building costs

TOTAL PROJECT COSTS
Total project costs: $48,346,099

FINANCING SOURCES
No information provided on financing sources

AIA / DFAR Documentation

Exhibit A.3

Insert the following for each facility:

DFAR Submittal
Architect's Statement
Project Goals
Floor Plans
Photos
Facility Data Sheet

AIA Design for Aging
Post-Occupancy Evaluation

Thank you for your participation!