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September 10, 2018

5 design strategies for patients under 65

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Long-term care facilities no longer house just elderly patients. According to the 2015 *Nursing Home Data Compendium*, in 2014 15.5% of LTC patients were under the age of 65, up from 10% in 1998.

The need extends to those who aren't currently living in LTC facilities — one statistic from the Health Policy Institute and Georgetown University shows that in 2000, 36% of people with long-term care needs were residents under the age of 65 living in private homes. Patients suffering from chronic diseases or injuries from accidents now live longer— and the unprecedented boom in victims of the



opioid crisis — means that LTC owners must use smart design decisions to meet the needs of this growing demographic. As McKnight's has reported, younger patients have different expectations for their care than traditional LTC patient populations, and that difference extends to their living spaces. They demand more than just medical care from LTC facilities — they want a home. Whether renovating a property or building new construction, two nonprofit organizations prove how working with designers from the outset of the planning process can lead to lasting opportunities with this emerging class of patient.

The first, Youngcare, was formed in 2005 in Australia with the mission to raise awareness of young LTC patients. The group assists patients

who require full-time care and support in their day-to-day lives. The second, Sweetwater Spectrum, based in California, designs spaces specifically with younger patients in mind. Founded in 2009, Sweetwater Spectrum houses 16 adults with autism and practices sustainable design strategies to promote health and wellness while reducing energy consumption. Both organizations have made great strides in nontraditional patient care, but not without overcoming significant obstacles such as limited resources, expensive building costs, and specific technology and care requirements for patients.

Collaborate confidently

Every LTC facility seeks to provide its patients with spaces that:

- Allow residents maximum use of all elements within the interior environment;
- Provide residents opportunities for self-determination, growth, joy, and learning;
- Give residents the ability to personalize their own spaces; and
- Are easily replicable by future facilities.

To do this, developers should engage architects, designers, and behavioral health researchers early in the process of master planning, programming, and designing LTC facilities. In planning its projects, for example, Youngcare creates a comprehensive client brief for its architects. The brief describes all functional requirements for the design — not only for residents but also for how staffing will operate, what social or family interactions might occur within the facility, what communal amenities are needed, and how to integrate these factors into the design without giving the facility an institutional feel. Before programming and schematic design began, Youngcare consulted with experts to ensure its facilities were built in an informed way — first working alongside researchers at Griffith University to

determine how to encourage patient independence and agency and later collaborating with an experienced occupational therapist and access consultant during the design process.

Sweetwater Spectrum worked to determine how to successfully integrate spaces that raise patients' standard of living into the design of its facilities, including a community center, therapy pools, and an urban farm.

Build without breaking the bank

LTC facilities must invest strategically to accommodate this vulnerable patient group. There is a strong relationship between youth disability and poverty – younger patients have not had the same opportunity to accumulate wealth as older LTC patients, and so they're less likely to be able to afford the cost of maneuvering out of crisis situations, securing appropriate housing, or acquiring proper care. At the same time, younger residents want housing choices that are noninstitutionalized, high quality, and socially inviting – and those preferences come at a high cost.

“LTC facilities are inherently expensive to build – due to larger spatial requirements, technological inclusions, and customised requirements – in a market where there has been very little funding available,” Youngcare spokesperson Emma Lloyd said of the building process.

Offering patients roommate options such as shared rooms, shared houses, and single houses allows them a sense of choice and independence without the need to place every resident in an expensive private space, according to Sweetwater Spectrum volunteer manager Suzanne Phillips. For developers, the life span of the building is also an important insight into how to cut costs. Installing mechanical systems with a long-term return on investment—and consistently examining where operating and maintenance expenses can be lowered as the facility begins to run—can help make LTC facilities cost effective.

Design for independence

To attract this group, LTC facilities should design spaces that feel more comfortable than clinical. Providing socially inviting spaces, including communal amenities and shared areas, gives LTC residents a sense of normalcy and dignity. Modifying casework and built-in equipment in a way which provides maximum functionality to a resident with a wide spectrum of needs and limitations is also a way to promote independence and self-sufficiency.

At Youngcare, staff define resident care by the severity of the patients' care requirements rather than the longevity of their stays. According to Lloyd, this helps the organization reduce equipment clutter in its facilities—a practice vital to minimizing a facility's institutional feel. Youngcare also integrates assistive technology in a way that is appropriate to each individual's abilities and limitations while ensuring that it remains unseen as much as possible. For example, long-range proximity card readers automatically trigger an entry door to open when a resident comes within six to eight feet of it.

Balance accessibility and security

Location is an important consideration in planning for young patients. Most LTC residents are unable to drive, but most are still mobile; and like anyone else, they want access to shops, parks, and other amenities. The ideal LTC facility takes this into account and is located in a safe, walkable neighborhood. Close proximity to stores and social activities are crucial to making the residents feel like part of the local community and society as a whole. “The building should be located within a residential context near facilities that enable community participation,” according to Lloyd.

Being so ingrained in the community presents new security risks, however; but careful placement of staff offices can help minimize these risks. Early in the programming and space planning phase of development, facilities should work with designers to create spaces for staff that offer employees clear views of communal patient areas while still being hidden enough to allow patients a feeling of privacy.

Youngcare and Sweetwater Spectrum consider location, character of neighborhoods, and accessibility when planning for new facilities. Both organizations also strategically locate their security infrastructure tucked out of sight of residents to avoid giving the facilities an institutional atmosphere.

Keep it simple

During the design process, Phillips says it is important to “not overengineer” the buildings and to “build for endurance, not style, because patients are very rough on things.” She notes there is no need for separate heat and air controls for each room, for example.

When considering other aspects of design, straightforward is best. Both Youngcare and Sweetwater controlled the feel of their spaces by putting thought into the simple things — such as their use of texture, color, and lighting. According to Phillips, Sweetwater Spectrum designed for comfort, creating spaces that feature low impact, indirect lighting, calming color palettes that minimize visual stimulation, and clean, accessible outdoor space.

The one-size-fits-most model of LTC facilities may be the most expedient option for resident care, but as younger LTC patients grow in number, it’s increasingly important to find innovative ways of housing and caring for this group. Both Youngcare and Sweetwater Spectrum receive daily inquiries about their approaches to LTC facility and program design. Youngcare personnel meet with key groups and representatives around the world to advocate for and investigate improved housing situations for young patients, and Sweetwater Spectrum offers a replication package to encourage others to adopt their model. Comprehensive, high-quality care for younger LTC patients is within reach—with careful design and professional expertise, it can become a reality.

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