

AFC Housing Checklist



85% live in private dwellings while 8% live in collective dwellings. Meeting this demand will require adaptations to existing housing, home maintenance and support services (including personal care), friends and neighbors and increased reliance on both government and private service providers. This also means providing a continuum of housing choices in terms of location, forms of housing, types of tenure, living arrangements and range of support services that would allow older adults to continue to live independently and participate in their community for as long as possible. (CMHC2011)

UNIVERSAL DESIGN:

Designers/builders must talk to and work with as many people with disabilities as possible. Principles of universal design encourage equity, intuitive, perceptible, flexibility, adaptability, safety and efficiency.

VISITABLE HOMES:

Is an approach to house design that promotes the inclusion of a basic level of accessibility into all housing—enables everyone to get in and out of the house and be able to use a bathroom on the entrance level. Three basic access features: 1) zero step entry; 2) All main floor interior doors (including bathroom) feature a clear opening width of 810 mm (32 in.), but a clear space of at least 860mm (34 in.) is better. It's highly recommended to install 915-mm (36-in) wide doors to all rooms of a home; 3) At least a half-bath but preferably a full bath on the main floor complete with a 1,500mm (60 in) turning circle in the room. Vanity Design: The key to proper height placement of the countertop is to keep the counter to a minimum thickness. This maximizes the ability to keep the countertop low enough for those in wheelchairs to reach into the sink and to get underneath the counter. The front edge of the counter can also be in a contrasting color to assist individuals with limited vision. A bar located in front of the counter can assist those individuals with balance issues. It is recommended to have rounded edges around the sink/vanity to reduce risk of skin abrasions. (Accessible Housing by Design-CMHC 2011)

INCLUSIVE DESIGN FOR GETTING OUTDOORS:

Identifies the most effective ways of ensuring the outdoor environment is designed inclusively and senior friendly. http://www.idgo.ac.uk/useful_resources/publications.htm

COMMUNITY DESIGN:

An Accessible community includes access to public transportation, walkable community close to amenities, health, recreation and cultural facilities and a caring, supportive, safe neighborhood with adequate, affordable and accessible housing. Two key features in planning is to allow for sewer inverts made deep enough to allow for lower basements, and site grading that allows for easy no-step level entry construction. The best example of progressive planning for visitable housing has been achieved in Winnipeg, Manitoba. The Bridgewater project. It helps to consult with a health professional (occupational therapist), an architect, and interior designer who is familiar with the design of accessible residences.

Accessible Housing

Accessible housing refers to homes designed or modified to enable independent living for all residents, including seniors, persons with disabilities, or suffering from dementia.

TOP 10 ADAPTATION FOR PEOPLE SUFFERING DEMENTIA

(Dementia Services Development Centre (DSDC))

1. Double the usual levels of lighting in the home to help with visual impairments
 2. Pay attention to acoustics and reduce noise pollution to reduce possible agitation and confusion
 3. Ensure there is good signage mounted low enough for people who may be bent over using a walker or wheelchair
 4. Use contrast of tone rather than color to differentiate between walls, skirting boards, and floors. Ensure the tone of flooring/paving is consistent throughout the house as well as in the outside areas
 5. Use contrast colour or tone to make switches and objects easily visible
 6. Use objects or pictures rather than colours to differentiate between rooms and different parts of the building.
 7. Ensure kitchens and bathrooms are easy to understand
 8. Ensure people can see important rooms, such as the bathroom, as easily as possible, and that furniture and fittings clearly indicate the purpose of each room. Use unambiguous signage on the doors of rooms
 9. Place large and clear illuminated analogue clocks in each room indicating whether it is a.m. or p.m.
 10. Ensure doors, where possible, be visible on entering the dwelling to indicate clearly what is in each room. Cupboards should be glass-fronted or open to help people with dementia know what is in them.
- **Lighting** for older adults, whether they have dementia or not, should be twice what is usually required
 - When designing a new home, ensure all **doors** are immediately visible and, doors to key rooms, such as the bathroom, are easy to identify. Sliding doors should be avoided.
 - Consider **re-hanging bathroom doors** so they open outward. Dutch doors or a locked screen door, may allow someone to see outside but remain safely inside. Doors should contrast with the adjacent wall unless they are not meant to be accessed.
 - When using signs to help persons with dementia, it is important to ensure they are:
 - Consistent in style
 - Mounted with their lower edge no higher than 1.2 metres from the floor
 - Contrasted with the door or wall
 - Incorporate capital letters by lower case letters and include a graphic or photograph
 - Feature good contrast between the words, graphic and background; generally light lettering on a dark background is easier for people with a sight impairment to read.
 - Include directional signage if a location is not obvious
 - For older persons, unwanted and excessive noise can produce stress, anxiety, confusion, increased heart rate, blood pressure, fatigue, delayed wound healing, decreased weight gain, impaired immune function, and hearing loss.
 - Consider using acoustical ceiling and wall products, low pile carpeting or linoleum, and heavy curtains to help absorb noise
 - Avoid waxing and polishing floors. Shiny floors can cause glare, be confusing or disturbing, and dangerous/slippery. Floors should be one consistent tone that remains the same between rooms. Changes in tone could be misinterpreted as steps, increasing the risk of falling. Patterns should be avoided.
 - Several different cues, over and above building code requirements, may be needed to alert someone with dementia to stairs.
 - Installation of handrails in one of the most common home modifications, as it allows persons living with dementia to move around and helps the caregiver when assisting the person. Handrails should be graspable (e.g. diameter of 1.5 inches).
 - Maximize lighting using both strip lighting above kitchen surfaces and spotlights for task lighting. Speck surfaces should be avoided.

For more information, refer to: CMHC, *Housing Options for People living with Dementia, Volume 1 and 2.*

Complementary Services & Amenities

Services and amenities that ideally should be located no more than half a kilometre from the proposed project site include:

- Supermarkets or grocery stores
- Other shopping and consumer service destinations such as dry cleaners, drug stores, coffee shops or restaurants
- Banks and post office
- A public Transit stop
- Hairdressers and barbers
- Seniors' social clubs
- Recreation or community centers

Services and facilities that ideally should be located no more than one and a half kilometres from proposed project site include:

- Medical, dental and other health service providers
- Places of worship
- Libraries
- Shopping centres
- Financial services such as accountants and tax advisors
- Travel agencies
- Parks and green spaces
- Theatres and other cultural venues

PEOPLE OF ALL AGES

Germany, Switzerland, Sweden, Denmark and Netherlands have been building multi-generational projects. The view is that seniors thrive in an environment where they can mix freely with people of all ages. These projects are often created in partnership with private sector, government, faith groups and other non-profit groups. Example: In Switzerland, five apartment buildings with 75 units each. The mix of residents includes singles, couples, families and senior citizens. The environment promotes an independent living style with barrier-free development and safety features such as well-lit common areas and non-slip tiles. Services and amenities are located nearby. Walking trails link each building to a nursery school, cafeteria, garden, and recreation area.

PROXIMITY TO SERVICES/AMENITIES IS VITAL

For older Canadians, the ability to participate in community activities, engage with friends and family, and safely attend to daily shopping and other needs is vitally important to maintaining their independence and quality of life. Services and amenities, including public transit, should, therefore, be close by or easily accessible.

Housing Types

INDEPENDENT LIVING AND ACTIVE LIFESTYLE

This is targeted to seniors who require minimal or no assistance with their daily living needs. This type of development often takes the form of adult lifestyle communities that frequently combine housing with recreational amenities such as golf course, hiking trails, club houses or tennis courts. Independent Living can take any number of forms from detached homes to units within multi-storey apartment buildings forming part of a larger seniors' community. Although the most common options are freehold ownership or rental, many independent living projects are developed by sponsors as condominiums or common-element condominiums where homeowners own freehold land and the freehold buildings on the land but share one or more common elements such as a road, swimming pool, park.

Many independent living projects are developed as for-profit equity co-operatives. What sets cooperatives apart is that they are democratic communities where the residents make decision on how the co-operative operates. Owners of an equity co-op own shares of the corporation and a proprietary lease or right to occupy a particular unit within the project. Unlike a condo, owners of an equity co-op do not acquire a deed to a particular unit. The developer sees the project to completion, sells the shares to the co-op and does not retain any residual interest.

Non-share or non-profit co-ops also exist. Many non-profit co-ops are developed by charitable and affinity groups. They differ from equity co-op insofar as members do not acquire an ownership stake and cannot sell their shares. Occupancy in a non-profit co-op is similar to a conventional rental agreement, although residents, as members participate in the business and operation of the co-op., including electing the board of directors, approving budget and maintaining the development.

Life Lease projects is a legal agreement that permits the purchaser to occupy a dwelling unit for life or until the agreement is ended, in exchange for a lump sum payment (entrance fee) and a monthly payment to cover project management fees, maintenance costs and operating expenses. Some sponsors of independent living projects; especially when built near an existing retirement home or long-term care facility may offer the residents the opportunity to purchase a basic service package as an add-on to the rental or condominium fee. (CMHC Volume 2)

ASSISTED LIVING ACCOMMODATION

For seniors who need or want more personal and healthcare services. Supports such as social and physical activities and other recreational activity. Most are focused on meeting daily needs, such as meal preparation, housekeeping and laundry. Other forms of assisted living place more emphasis on personal and health care services, such as bathing, grooming, dressing and taking medication. The accommodation is designed for people who require only minimal to moderate care in order to live independently, although 24-hour supervision and emergency response are customarily included.

Accommodation usually consists of rental units within an apartment building, although in some cases it can take the form of a small group residence, commonly known as co-housing.

The most common form of assisted living accommodation is the retirement residence or retirement home. Retirement residences play the most significant role in the seniors' housing industry across Canada. Most retirement residences are privately owned and operated, but some are owned and operated by municipal governments or non-profit organizations such as faith groups, seniors' organizations, service clubs and cultural groups.

CO-HOUSING

Co-housing represents a small niche market opportunity with unique characteristics. In this model, individuals come together to work with a developer. The future residents of a project contribute to the design and help shape the development. By providing equity down payments early in the development process, co-housing participants help a developer minimize risk. An added benefit is that the project is less likely to attract objectors because the future residents have a stake in the project.

SUPPORTIVE HOUSING

Another type of housing that can be developed for seniors is supportive housing. Supportive housing helps seniors and others who need additional services, such as individuals with disabilities, in their daily living by combining a physical environment that is specifically designed to be safe, secure, enabling and home-like with support services such as personal care, meals, housekeeping, and social and recreational activities.

This arrangement allows residents to maximize their independence, privacy, dignity and decision-making abilities. Supportive housing may be developed by the for-profit, not-for-profit or public sector—or through partnerships between these sectors. It can be made available in a range of tenure types, such as rental, leasehold, condominium and life lease. It is also possible to combine different tenure types in individual projects.

LONG-TERM CARE HOMES

Long-term care homes are designed for people who can no longer live independently and require 24-hour nursing care and supervision, sometimes within a secure setting when necessary to safeguard residents with Alzheimer's or other types of dementia. Long-term care homes offer more personal care and support than that offered by retirement residences and other forms of supportive housing.

Long-term care homes are subject to government regulation and typically require a licence to operate. In return, sponsors receive some form of fixed government funding, calculated on a per diem basis, to provide accommodation and health care services. In most cases, residents may be expected to pay a government-regulated co-payment for their accommodation, which covers basic services such as meals, housekeeping, laundry, property maintenance and administration. The exception is for residents with very low incomes who cannot afford the cost of basic accommodation. In these instances, the co-payments are generally paid by the province or health authority for the area in which the long-term care facility is located.

“OTHER” TYPES OF HOUSING FOR SENIORS

- Intergenerational co-housing community for residents of all ages
- Senior co-housing condominium homes
- Seniors living with and assisting in rehab to disabled children and adults

RURAL DEVELOPMENTS

Sponsors of rural developments may have to provide a more extensive range of “in-house” programs and services, as there will typically be few other providers in the immediate community who can offer such services. The cost implications of these decisions must of course be factored into the financial feasibility analysis.

The market for a housing project aimed at an older population will have a relatively narrow geographic draw. The draw widens if the project is linked to a club, cultural group or other distinct body representing a well-defined, less geographically limited community, or if amenities such as recreational facilities associated with active adult housing have their own separate appeal.

Although situations can vary, the following location and neighbourhood selection considerations apply generally to the seniors’ market:

- neighbourhoods with diverse populations, housing types, and community services and facilities will more likely address the varied demands of the older market;
- proximity to public transit and easy access to nearby community services and facilities can substantially increase the convenience and independence of residents; and,
- attractive, visually stimulating environments, enriched by pleasant physical features
- are likely to have a positive effect on residents’ day-to-day quality of life.

OVERVIEW OF WHO HOUSING FINDINGS

There is a link between appropriate housing and access to community and social services in influencing the independence and quality of life of older people.

1. **Affordability:** Cost of housing is a major factor influencing where older people live and their quality of life. If not affordable it makes it difficult to move to appropriate housing on a fixed income.
2. **Essential Services:** Essential services must be adequate and not expensive.
3. **Design:** It is considered important for older people to live in accessible accommodation.
4. **Access to Services:** Living close to services and amenities is also vital.
5. **Community and Family Connections:** Familiar surroundings whereby people feel part of a local community. Multi-generational spaces for interaction, front verandas.
6. **Housing Options:** A range of barrier-free and accessible housing options in the local area to accommodate changing needs is an important age-friendly feature.
7. **Living Arrangements:** It is important for older people to have sufficient space and privacy at home. Feeling safe in the home environment is another theme.
8. **Transportation:** In close proximity to living arrangements.