

LIVING

SUPPORTING THE WELLNESS OF
VETERANS ACROSS THE COUNTRY

Veterans Health Administration

PERKINS —
EASTMAN

Supporting the Wellness of Veterans Across the Country

We are entering a period of transformation in long-term care environments supporting the health and wellness of our Veterans across the country. This is a much needed response to the changing needs facing our aging Veteran population and the finite resources of our Veterans' services organizations.

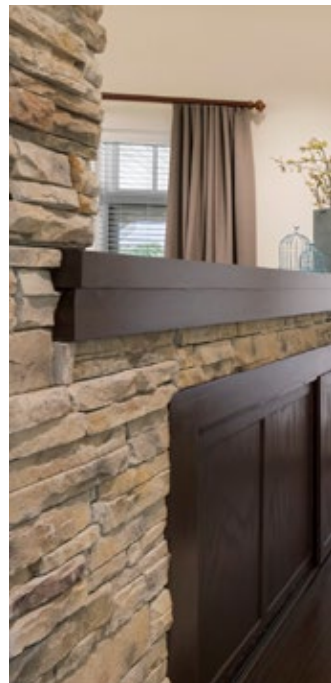
States are working relentlessly to extend the net of supporting services and understand the unmapped needs of a younger, more diverse demographic of Veterans requiring assistance. It is not necessarily that the trends within the population of Veterans are so different than what we see in civilian groups, rather it is that they tend to span wider gaps within the spectrum of needs. Walk through any of the recently completed State Veterans Homes across the country today and you'll see a much greater diversity of physical, psychological, and social needs that go beyond age, race, and gender—a diversity that is common among the ranks of aging Veterans. Today's Veteran looks different than they did a decade or two ago, necessitating new ways of thinking about long-term care for Veterans and our approach to facility resilience, versatility, and flexibility; staff recruitment and retention; and perhaps most importantly, the physical environment and delivery of care for our nation's heroes.

Beginning in 2005 the Veterans Health Administration made a bold culture-changing move by adopting the Community Living Center (CLC) guidelines. As a result, great strides have been made in the evolution of resident-centered care. This guide, which established basic criteria for the design and operation of care environments, challenged the conventional institutional model and aligned itself with the resident-focused, "Small-House" model of care and trends being set in the private sector. This commitment was further deepened in 2016 by the release of the Small House Model guidelines.

In the last decade, Perkins Eastman has been entrusted with leading the design transformations at State and Federal Veterans Homes, and Veterans resident care campuses across the country. Our breadth of knowledge and expertise in designing for aging adults has contributed to more than 45,000+ healthcare beds. We've categorized the trends of the new and evolving senior living consumer into Themes of Innovation where they serve as key drivers for discovering design opportunities, and help inspire leaders within Veterans Services to transform the long-term and domiciliary care provided to Veterans.



ARKANSAS DEPARTMENT



ARKANSAS DEPARTMENT



OF VETERANS AFFAIRS



OF VETERANS AFFAIRS

The Veterans Health Administration made a bold culture-changing move by adopting the Community Living Center guidelines, which aligned itself with the resident-focused, “Small House” model of care.



ILLINOIS VETERANS HOME AT QUINCY

Residents and staff are empowered by the level of autonomy, freedom, and choice, inherent in the Small House model of care.



ILLINOIS VETERANS HOME AT QUINCY



Adaptability

A Veterans Home is a living collection of factors and priorities that influence every aspect of its design. Some, like climate, geography, and the local culture are fairly stable. These might inform whether a home is designed around a connected model versus a group or neighborhood of separate detached homes.

The State Veterans Home in Montevideo, MN, with its harsh winter temperatures and large expansive site, for example, was designed as a community of connected buildings that are linked together to form a network of spaces. The design emphasizes each household's unique identity and personality and connects residents and staff together under one roof.

The rolling hills at the site of the Arkansas State Veterans Home in North Little Rock inspired a different approach. Here, each of the eight homes are detached and arranged across the site to take advantage of the unique topography and maximize views. In Quincy, IL, the constraints of a tight site within a historic campus led the team to consider a vertical model where the households are stacked. This reduced the building's overall footprint while maintaining the spirit of household identity and independence.

In each of these examples, the same underlying foundation of Small House design principles was adapted to create something distinctive and authentic: a building typology informed by the cultural, site, and infrastructure priorities of that residence.

In addition to project, site, and building typology, changing demographics, and the resulting Veteran needs are a major driver of the need for adaptability and flexibility. These factors tend to be more fluid and difficult to predict. As residents age in place, their individual care needs evolve. A home of 10–14 residents is more nimble and able to adapt to an individual's changing



ILLINOIS VETERANS HOME AT QUINCY

care and culinary requirements without disrupting the care of others. Benefits of this person-centered approach to design and care is demonstrated as neighboring households, able to express their own personalities and cultures instead of a “one size fits all” mentality. Residents and staff are empowered by the level of autonomy, freedom, and choice inherent in the Small House model of care. This flexibility permeates all aspects of care delivery including the culinary experience—menu planning on a smaller scale affords greater flexibility in meeting individual dietary needs and personal preferences.

As designers we challenge the monotony that comes from the idea of replicating prototypical design footprints across the country. Regional culture, context, and landscape offer the ideas that spark positive memories and place making. The planning solutions seek inspiration in connections to nature and landscape as an architecture is developed. Sensitivity to the local context and cultures of the community helps to establish a connection to place, and unite, engage, and inspire project stakeholders in the process.

Resilience and Authentic Experience

The need for resilient campuses cannot be overstated. The COVID-19 pandemic has reinforced the need for thoughtful planning of robust infrastructure systems with redundancy, attention to indoor air, water and environmental quality, smart technology integration, and healthy material selection. The pandemic has taught us that the tools and strategies used to mitigate the spread of infectious diseases can be easier to deploy on a smaller footprint, and with a smaller group of residents.

As is true for most state and federally-led projects, longevity, efficiency, durability, and resilience are just some of the closely monitored variables that are measured and prioritized throughout

MERCY HOUSING | CANNON



ARKANSAS DEPARTMENT OF VETERANS AFFAIRS



ARKANSAS DEPARTMENT OF VETERANS AFFAIRS



The COVID-19 pandemic reinforced the need for extremely robust planning infrastructure redundancy, attention to indoor air, water and environmental quality, and smart technology integration.



USDVA ILLIANA COMMUNITY LIVING CENTER

We draw inspiration from the connections and shared experiences that manifest between residents and staff within the home.



TYPICAL RESIDENT ROOM



the design process. The analysis of these variables continues well past a project's substantial completion. Once occupied and operational, metrics including operational costs, staffing ratios, and resident wellness outcomes find their way to the desks of administrators and leadership where the results begin to shape decisions that have direct impacts on the care provided to the Veterans. Budgets and staffing models are getting tighter, while expectations for quality of care are increasing. This tension is where we find opportunities for design and innovation. We draw inspiration from the connections and shared experiences that manifest between residents and staff within the home. Staff empowerment, engagement, and accountability increase morale and performance while decreasing turnover. Deeper, more meaningful relationships build a sense of fulfillment and trust within the home and serve to improve overall wellness and health.

We continue to tap into the healing power of 'returning home' — creating an authentic environment within a resilient framework. A careful and considered approach to architectural design has the power to integrate seemingly irreconcilable differences: the sense of home within a larger campus, resident care delivered with efficiency, and resilience that supports resident wellness. Spend time in any Veterans Home and you will see how impacts made through these endeavors manifest themselves in the simple joys and smiles of a place Veterans call HOME.

“The design empowers the residents to live as if they were still in their previous homes.”

LINDSEY CLYBURN

FORMER ADMINISTRATOR OF ARKANSAS STATE VETERANS HOME NORTH LITTLE ROCK



USDVA ILLIANA COMMUNITY LIVING CENTER



CONTACT INFORMATION



ALEXIS DENTON AIA, LEED AP
Associate Principal
510 207 1790
a.denton@perkinseastman.com



GREG GAUTHREAUX AIA, LEED AP
Associate Principal
704 927 6516
g.gauthreaux@perkinseastman.com



JERRY R. WALLECK AIA
Principal
312 873 6260
j.walleck@perkinseastman.com



RAMU RAMACHANDRAN AIA, LEED AP
Associate Principal
312 873 6262
r.ramachandran@perkinseastman.com

**PERKINS —
EASTMAN**
Human by Design

www.perkinseastman.com