

Transforming Care for Veterans at the Holyoke Soldiers' Home

A Vision Based on Dignity, Choice, and Self-Determination Designed and Operating on a Human Scale

Key Elements of the Veterans Administration Small House Model Design

*Extracted from the **Small House (SH) Model Design Guide** issued January 2017, revised March 2019 by the U. S. Department of Veteran Affairs*

The Small House (SH) Model is designed to provide skilled nursing and rehabilitation services for the short- or long-term care needs of Veterans in a residential environment. Components that can make up the SH Model include the House, the Neighborhood Center, and the Community Center. The Small House is a self-contained unit to create a unique residential environment, **a home for veterans**. The Small House Model is resident-centered, where care is driven by the resident and involves the resident and family members, when available, in decisions regarding care. This commitment to cultural transformation is founded on the VA's assessment of evolving trends and standards in the nursing home sector away from the medical / institutional model of care and squarely establishes the focus on the needs and preferences of the residents.

Key elements

Small Houses are typically designed for ten, twelve, or fourteen residents.

The House is developed around the Living Room, the Kitchen, and the Dining Room, the core of the home environment.

The Kitchen and Pantry are equipped to support preparation of all meals for the Residents either completely from scratch on site or with support from a remote central kitchen in the parent facility. The Kitchen functions as the heart of the House. It is the center of activity and the main focal point. It is also used as a space for cooking, occupational therapy, and resident socializing activities

Resident Bedrooms are single occupancy and do not open directly into "public" areas. All bedrooms are sized to accommodate the requirements for bariatric and special needs of Residents, including space for mobility and equipment clearances.

The Sitting Alcove is the transitional space between the privacy of the Resident Bedroom and the "public" areas, i.e., Kitchen, Dining Room, Living Room, Den.

There is 100% ADA accessibility in all Resident and public spaces throughout the Small House Model, both interior and exterior.

Featured spaces can include:

- A Great Room which is a large, casual gathering space for holiday and other special events in the Community Center. It can also be used daily by the residents as a core social destination.
- A Snoezelen Sensory Therapy Room which is a therapeutic environment created for the express purpose of delivering high levels of stimuli to residents with dementia. A private room displays optical illusions with combined lighting effects, aromas, colors, textures and sounds to stimulate a person's sensory systems.
- A Namaste Sensory Therapy Room which is designed to surround residents with soothing sounds of nature, music, and calming aromas similar to a spa. Residents who can no longer participate in traditional activities or tolerate too much stimulation can receive individualized care in a quiet, welcoming space.

Effort is made to take advantage of natural lighting in the Living Room, Dining Room, Kitchen, Den, and Resident Bedrooms, as well as all public areas throughout the Small House Model.

Access to exterior space is an important part of the Small House Model concept and is integrated into the design as an extension of the living space.

The Resident House concept is intended to provide veterans with a variety of environments to choose from, including private space, quiet public space, active public space, and outdoor space, allowing them to self-determine their desired level of interaction.

All institutional accessories or features are reduced or eliminated to the greatest extent possible. Wall mounted equipment is minimized (paper towels, hand sanitizer, soap dispensers, etc.).

Support areas within the House are located towards the 'back of house', away from Resident areas. Housekeeping Closets, Clean and Soiled Utility, Linen Storage, Receiving Area, Gas Cylinder Storage, Staff Lounge and Toilet, are readily accessible, but out of the general flow or traffic pattern of the Residents during their daily activities. The need for supply carts / equipment is minimized.

A Front Porch or other Home Entry feature provides the connection to the outdoors or, in vertical settings, as an anteroom from the larger community to the House.

A separate Neighborhood Center is provided when there are Residential Houses sited on the campus; an additional Neighborhood Center is provided for every additional increment of three Houses. Neighborhood Centers provide the space and opportunity for residents of three contiguous houses to interact and socialize in a communal setting. The Neighborhood Center includes a multi-purpose / activity room for gatherings and structured activities.

A separate Community Center may be provided if the number of Resident Houses is greater than six. The Community Center is the central hub of the Small House Model, providing areas for social activities, specialty services, and support functions for Residents. It can also include administrative offices.

Small House Model facilities may be sited as stand-alone structures or may be part of a larger campus.

Small Houses can be organized horizontally or vertically depending on the available site and the density requirements of the program and context.

The VA based the Small House Model on empirical research of sector-wide trends which have demonstrated better care outcomes for residents, higher satisfaction for staff, and enhanced involvement of family members and the neighboring community.

Veterans Administration's Evaluation of Key Trends

The VA forecasts that the future acuity and demographics of residents will change:

1. Acuity: An increase in resident acuity levels, i.e., intensity of care required by the resident.
2. Age: An increase in the number of younger residents.
3. Gender: An increase in gender diversity of residents requiring a greater emphasis on privacy and security.

Veterans Administration Goals

The overarching goal of the Small House (SH) Model environment is to provide a home where veterans can have the highest possible quality of life and receive the best quality care. The environment is designed to be a place that supports care-giving that is administered with integrity, commitment, and respect.

Overall, the environment provides veterans with:

- Independence: the resident has choices and control over their day.
- Dignity: the resident is honored, treated with respect, and allowed to have privacy and express his/her identity.
- Engagement: the resident has opportunities for social interaction and activities that help maintain or improve activities of daily living.
- Family involvement: the resident's family is part of the care and well-being of the resident and has access to dedicated family space.

Conclusion

Massachusetts veterans have served us and our society with honor, distinction, and without regard to self-interest. It is incumbent upon society to honor their service and sacrifice by providing the highest quality, state-of-the-art system of service, support, and care which maximizes self-determination, choice, and independence allowing them to live in dignity. Nothing less will suffice.

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7 FUNCTIONAL DIAGRAMS

A. House

