

Module # 13: Settings of Care

Geriatrics, Palliative Care and Interprofessional Teamwork

Curriculum

Module # 13: Settings of Care

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I. Overview¹

One of the most complex decisions facing people as they get older is where to live. A home is much more than four walls - it represents security, memories, family, and the possibilities of the future. When thinking about the retirement years, some people consider moving to a new home, perhaps in a different region of the country, but most desire to remain in the same home, or at least community. In general, governmental support of affordable housing and incentives to remain in one's home remain quite limited, and there are often weak linkages between services and housing. This has resulted in older people living in inadequate, and sometimes unsafe, housing, and having no option but to move from the community to assisted living or nursing home facilities because of unavailable health and social services. For middle and upper income retirees, however, there has been an increase in the development of housing options, such as continuing care retirement communities and assisted living facilities, by the business sector because of market demands.

While there are an increasing number of options available for retirement housing, the decision is complicated by confusing terms and overlapping definitions. The recent 2005 White House Conference on Aging invited public comments regarding themes and issues which should be highlighted at the Conference. Four of the top 50 resolutions voted on by the delegates were specifically related to housing. These include expanding opportunities for developing innovative housing designs for seniors' needs, encouraging community designs to promote livable communities that enable aging in place, enhance the availability of housing for older Americans, and enhance the affordability of housing for older Americans.

II. Learning Objectives

1. Define key issues related to housing for older adults.
2. Describe housing settings and options for older people.
3. Delineate mechanisms to "age in place".
4. Identify future trends in housing for older adults.

III. Housing Issues

- a. “Aging In Place”
- b. Linking Housing and Services
- c. Affordability
 - i. Dwindling supply of affordable housing due to decreased production and conversion of affordable properties to market rate housing
 - ii. Additional 730,000 rent-assisted units will be needed by 2020 (e.g., Section 202 Supportive Housing for the Elderly)
- d. Choice and autonomy
 - i. Older adults often worry about giving up choice and autonomy when moving into a facility
 - ii. Major challenge is enabling residents to have choice and independence in housing arrangements
- e. Privacy vs. Interaction ²
 - i. Research demonstrates that the ability to have and control privacy is vital to psychological well-being.
 - ii. At the same time, possibilities for social interaction and the ability to access support when needed are also necessary.
 - iii. Finding the appropriate balance in a residential setting for older adults can be difficult.
 - iv. Research has found that satisfaction and well-being are higher for those older people who feel they are in control in deciding when to be with others and when to be alone. In fact, having a sense of control often compensates for other shortcomings in the housing setting.

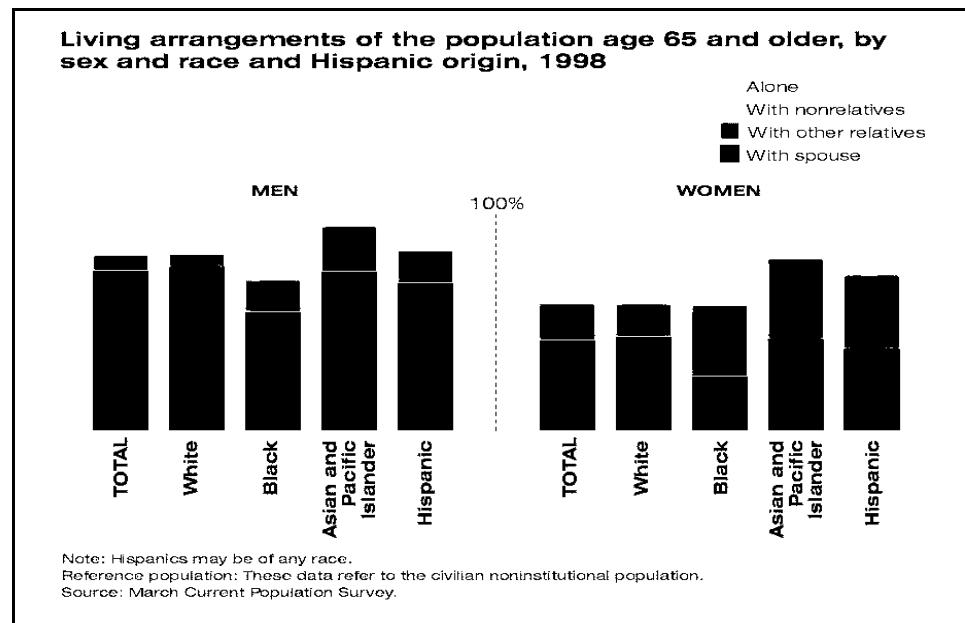
IV. Housing Arrangements Of Older People ³

- f. Demographics
 - i. Where people 45 and older live

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1. 77%, live in single-family residences
 2. 8% live in mobile homes
 3. 5% reside in semidetached homes
 4. 9% live in multiunit buildings, such as apartment buildings
- ii. Home ownership among Americans age 55 and over is 86%
 - iii. Who they live with
 1. Most people over 45 live with at least one other person (72%), with 28% living alone
 2. Those sharing a home are most likely to live with a spouse (77%)
 3. 29% live with children or stepchildren, with the remainder living with other relatives or nonrelatives
 - iv. Tendency to not move
 1. Most (60%) have lived in their homes for 11 or more years
 2. 20% have lived in their home for between 1 and 5 years, and 5 % have lived there less than 1 year
 3. Reasons for a move within last 5 years:
 - a. better neighborhood (13%)
 - b. job change (10%)
 - c. Larger home (8%)
 - d. Retirement, wanting a smaller place, or being closer to family (7%)

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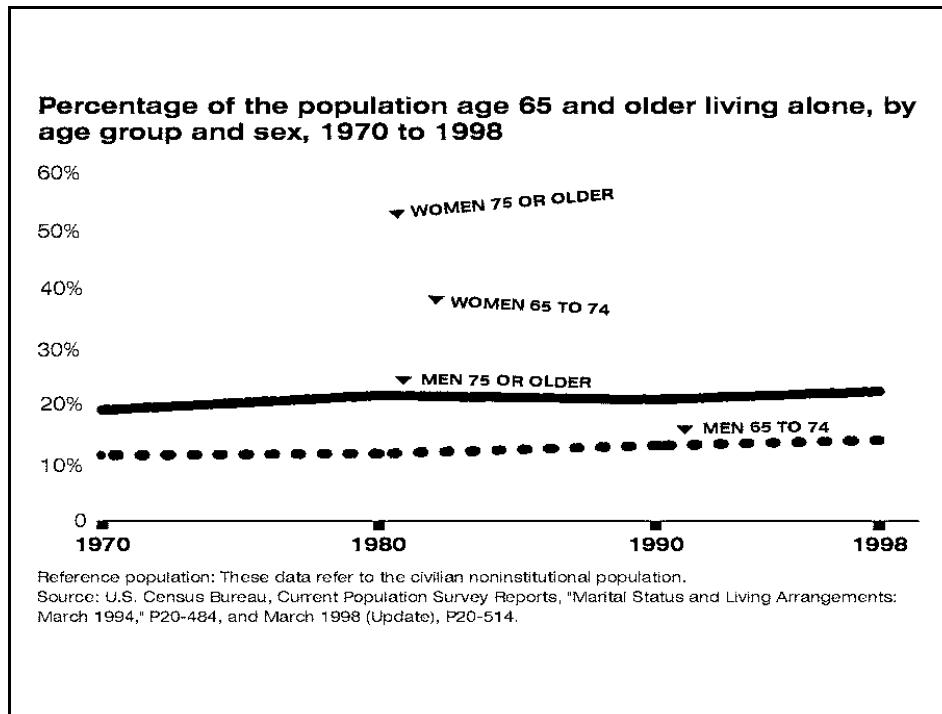
From: Older Americans 2000: Key Indicators of Well-Being, 2000. Federal Interagency Forum on Aging-Related Statistics.

- g. Desire to “age in place”
 - i. Many are modifying their residences to enable them to “age in place”
 - ii. More than 8 in 10 respondents age 45 and over (including many Baby Boomers) - and more than 9 in 10 of those 65 and over - say they would like to stay where they are for as long as possible
 - iii. Even if they should need help caring for themselves, 82% would prefer not to move from their current homes
 - iv. Home modifications are common
 - 1. 70% of those able to make changes have made at least one modification to make their homes easier to live in
 - 2. 85% have made simple changes to their homes
 - 3. 67% of those making changes or modifications to their homes believe doing so will allow them to live there longer than they would have otherwise been able to - most for another 10 or more years
- h. Living arrangements tied to poverty ⁴
 - i. Those older adults with less money pay a

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greater percentage of their incomes to housing than those with more money

1. This percentage rose slightly between 1987 and 1998
2. This impacts ability to afford vital goods and services such as food, heat, and medications
- ii. Older women are more likely to live alone than are older men. In 1998, older women were as likely to live with a spouse as they were to live alone, about 41 % each. Approximately 17 % of older women lived with other relatives and 2 % lived with nonrelatives.
- iii. The percentage of women age 75 or older who live alone increased from 37 % in 1970 to 53 % in 1998.
- iv. Poverty rates are higher for older women who live alone than they are for older women who live with a spouse. In 1998, about 19 % of white older women who lived alone were in poverty and approximately half of older black and Hispanic women who lived alone were in poverty
- v. Living arrangements among older women also vary by race and Hispanic origin.
 1. In 1998, 41% of older white and older black women lived alone, compared with 27 % of older Hispanic women and 21 % of older Asian and Pacific Islander women.
 2. While 15 % of older white women lived with other relatives, approximately one third of older black, Asian and Pacific Islander, and Hispanic women lived with other relatives.



Older Americans 2000: Key Indicators of Well-Being, 2000. Federal Interagency Forum on Aging-Related Statistics.

V. Types Of Housing⁵

These are alternative types of housing for older adults in addition to the option of remaining at home with or without supports. Housing developments can be subsidized or market rate (private pay). These categories include types of licensed housing specific to New York State; types of licensed housing categories vary from state to state.

1. Active Adult Community

- a. This is an age-restricted (often aged 55 and over) community of single-family homes, condominiums or cooperative units.
- b. It includes lifestyle amenities such as a tennis court, swimming pool, golf course, fitness center, clubhouse and / or restaurant.
- c. This housing is NOT licensed by a government agency.

2. Senior Housing with no Services

- a. Only older adults, and sometimes younger adults with disabilities, can live in this kind of housing
- b. There are no supportive services or personnel
- c. This type of housing is not licensed by a government agency; however subsidized versions, such as the federal HUD Section 202 program, may be supervised by a government housing agency.

3. Supportive Senior Housing

- a. This housing includes one or more of the following: non-licensed supportive services, meals, housekeeping, recreational activities, transportation, laundry, and a service coordinator
- b. This housing is not licensed by a government agency, although subsidized versions may be supervised by a government housing agency.

4. New York State Licensed Adult Home

- a. In this type of housing, 5 or more adults live in housing with private or shared rooms, meals, housekeeping, laundry, transportation, socialization, some personal care, and around-the-clock supervision.
- b. Housing is licensed and regulated by New York State

5. New York State Licensed Enriched Housing

- a. Residents live in apartments with services that include meals, housekeeping, homemaking, shopping, transportation, social activities, and some personal care assistance

6. Assisted Living Facility⁶

- i. Many different kinds with wide variety of design, operational, regulatory, and payment approaches
 - 1. This segment of the housing industry is still evolving and wide variation is likely to continue
 - 2. Great variation from state to state
 - a. 41 states and the District of Columbia have adopted the term “assisted living”.

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- ii. Basic models of assisted living
 - 1. Housing with services
 - 2. Personal care (similar to traditional board and care)
 - 3. Service-intensive “nursing home replacement”
- iii. Concern that assisted living not widely available to lower income people
 - 1. Although 41 states and the District of Columbia have chosen to use Medicaid dollars to pay for assisted living services, these programs are quite small.

7. Continuing Care Retirement Community (CCRC)

- a. Restricted to seniors, it includes independent living units (apartments and/ or cottages), social activities, meals, supportive assistance and personal care on one campus
- b. Nursing home care also is included and may be provided on- or off-campus
- c. Residents' housing and health care are covered under a life-care contract or under a long-term housing and health care contract.
- d. In New York State, a CCRC's health and nursing care is licensed by the State Health Department and the financial arrangements are overseen by the State Health Department

8. Shared Living Residence

- a. In this type of housing, generally 2 to 10 people share a residence as a “family”.
- b. Tenants share the finances and upkeep of the residence.
- c. Each resident has a private bedroom and bath.
- d. All share a common living room, dining room and kitchen.
- e. Shared living may or may not include activities, supportive services or personal care services for tenants.
- f. In New York State, shared housing is licensed and regulated by the State Health Department if personal care services are provided. .

9. Elder Co-Housing⁷

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- a. With origins in Scandinavia, it was introduced in the US in the late 1980s
- b. There are now about 5,000 people in 80 co-housing communities
- c. Key elements of co-housing
 - 1. Shared facilities, such as gardens and the common house, are extensions of privately owned homes.
 - 2. privately owned homes.
 - 3. Community members actively participate in neighborhood design resulting in close ties.
 - 4. Decision making is non-hierarchical.
 - 5. Part of the “culture change” movement, emphasizing the later years as a period of growth and reflection in a peer-focused and supportive environment.

10. Naturally Occurring Retirement Community (NORC)

- a. Communities, including apartment buildings, not originally intended for older people, but which have evolved over a number of years to have more than half of their residents over the age of 60.
 - i. NORCs enable a continued sense of independence in a familiar setting and the opportunity for a greater intensity of services and programs geared to older adults

11. Nursing homes

- a. Provide skilled nursing and medical services and custodial care for older adults requiring intensive, ongoing supervision
- b. State licensed
- c. Just 5% of older people in nursing homes at any given time
- d. Most admissions result in a stay of less than 6 months
- e. Culture change movement in nursing homes geared to:
 - 1. “Person centered”
 - 2. “Communities” rather than units

VI. Aging In Place

- a. Preferred option by most older people, but sometimes difficult because of changing function and needs
- b. However, there are a number of measures which make staying in one's home feasible, including:
 - i. Home modifications
 - 1. Universal or transgenerational design
 - 2. Low tech solutions – e.g., grab bars in bathroom, non-skid rugs, higher wattage light bulbs – can usually be done by homeowner, family member or through government programs
 - 3. High tech home modifications are more costly
 - ii. A community which is "elder friendly"
 - iii. Various forms of financial incentives to keep one's home, such as tax credits;
 - iv. Formal and informal services;
 - v. Professional care coordination (see Module #x)
 - vi. Shared housing arrangements.

VII. The Future⁸

- 1. Increasing emphasis on an accommodating environment to
 - i. promote viable aging in place
 - ii. maximize independence and autonomy for older persons.
- 2. Greater variety in living environments to
 - i. respond to the significant differences in needs and preferences found among the older population
 - ii. Respond to increasing racial and cultural diversity.

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3. Increasing focus on technology to
 - i. Extend the capacity of older persons to be self-managing;
 - ii. Increase opportunities for older persons to communicate and interact with the wider community
 - iii. Utilize opportunities for efficiency in service delivery.
4. Greater emphasis on intergenerational matters to
 - i. Support interdependence and mutual support among generations
 - ii. Maximize connections among age groups
 - iii. Optimize general community viability.
5. Greater response to individual preferences for:
 - i. Privacy
 - ii. Personal autonomy
 - iii. Self-determination
 - iv. Choice
 - v. Independence

VIII. References

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