**Recommended DHCD Design Improvements for Senior Housing Developments**

For senior housing developments, the following design improvements are recommended. Please note if the development already has any of these features as well as improvements provided for in the proposed project.

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| **Feature** | **Check if Included** | **Comment** |
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Exterior

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| Primary entry to the building without stairs and doorway with a flush threshold (or minimal beveled door transition) |  |  |
| Continuous pathway between home, transit, and frequently used services that does not require shortcuts through alleys or landscaping. |  |  |

Common Areas

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| Video intercom system with push button screen (aka installed wall-phone) for ease of use by seniors- useful for seniors with arthritis or other challenges that make it hard to use a touchscreen. |  |  |
| Resident services office(s) near the front lobby to support staffing of 1 Resident Service Coordinator for every 100 residents, but no less than one. Office(s) fully enclosed for privacy and at least 250 sf so the resident and one family member or support person can meet with the RSC. |  |  |
| Private office for resident and health care professional to meet. |  |  |
| Multi-purpose (400 sf minimum) with no less than 10 sf/resident; stackable furniture, storage, good lighting and age-friendly acoustics; located near front lobby with partially transparent walls so activities are visible to encourage participation. |  |  |
| Given frailty and heath needs of many residents, double elevators for back up during repairs, size one of the elevators 24” x 84” to accommodate a stretcher. |  |  |
| Central air conditioning throughout the building (including apartments). Use a system that supports maximum heating/cooling flexibility during transition seasons. |  |  |
| Back-up generator to ensure elevator access, AC and refrigeration (for medications) during power outages. |  |  |
| Hallway light fixtures with output of at least 2700 lumens; fixtures that cast a diffuse light (reflected illumination on the wall or ceiling via a shade, not direct light). |  |  |
| Do not include occupancy sensors in common areas- dark, unoccupied rooms are uninviting to residents with low vision, and disorienting to residents with dementia. |  |  |
| For ceilings and other hard surfaces, use materials that dampen background noise (like synthetic tiles, melamine foams, fiberglass, wood, and plastic). |  |  |
| Well-lit signs with large lettering with building information for easy navigation. |  |  |
| Smooth, hard, durable flooring material to reduce tripping and support residents who shuffle feet. Limit carpet to small areas and select easy to clean, short pile carpets. |  |  |
| Unique color scheme of each floor can aid in way-finding |  |  |
| Shelf for packages at all exterior unit entrances. |  |  |
| Incorporate active design solutions to encourage walking such as an open, inviting stair near the elevator with low-rise steps and fewer steps between landings that turn direction at each landing to lessen the distance of a fall. |  |  |
| An activities board (preferably electronic). |  |  |
| Additional flexible program spaces to support social engagement and wellness (e.g. fitness classes, group meals). |  |  |
| Storage for mobility devices in activity areas. |  |  |

Entrances

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| Lobby to support social connections; no less than 1,000 square feet, and at least 5 square feet per resident; age-friendly seating (firm seat cushions 18’’ high and 18’’ deep, with arms, backs and washable fabric). |  |  |
| Waiting area with seating located in line of sight to exterior resident pick-up area. |  |  |
| Front desk to support staff (paid or volunteers). |  |  |

In All Unit Interiors

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| Awning windows with easy-use crank hardware. |  |  |
| Smooth, hard, durable flooring materials to reduce tripping and support residents who shuffle feet. Limit carpet to small areas and select easy to clean, short pile carpet. |  |  |
| Space to allow wheelchair or walker approach on side of bed closest to bedroom door. |  |  |
| 42” clear width in hallways |  |  |
| Open floor plans, wall cut outs, or glazing in doors allow caregivers to maintain a visual connection with residents who may need assistance. |  |  |
| Shelf for packages inside unit entry. |  |  |
| Storage for mobility devices |  |  |

In All Baths

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| 66” turning diameter in baths. |  |  |
| Wall-hung sink and/or cabinetry with a counter height that will accommodate seated residents. |  |  |
| Removable base cabinet at sink or provide recessed area for knee space. |  |  |
| Showers in all apartments (no tubs) with curbless entry and no less than 36” X 60” to accommodate resident plus caregiver and mobility device. |  |  |

In All Kitchens

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| 66” turning diameter in kitchens |  |  |
| Provide a separate cook top and wall oven. Locate wall ovens at counter height with side-mounted hinges for easy transfer from oven to counter. |  |  |
| Side by side refrigerator/freezer or freezer on the bottom. |  |  |
| Cabinets with siding shelves and “lazy Susan” corner cabinets. |  |  |
| Removable base cabinets under the kitchen sink, cook top and a portion of the workspaces to provide knee space for residents using wheelchairs. |  |  |
| Upper cabinets should be mounted approx. 13" above the counter top for ease of reach (maximum high reach is 63”). |  |  |
| Electric stoves for easy and flexible decommissioning for residents with dementia |  |  |

Technology

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| Simple to understand HVAC controls in apartments with large screen for easy reading. |  |  |
| Building should be “Wi-Fi ready” with infrastructure in place for easy utilization of new technology as it emerges. |  |  |
| Use CAT 6 wiring throughout the building (common areas and apartments) which should be compatible with most emerging assistive technology and will give residents the option to purchase their own router for personal use. |  |  |
| Provide adequate space for wiring in the MDF/IDF cable racks on each floor to accommodate current and future router needs for staff, residents, security and public Wi-Fi service in lobby, program spaces and hallways. |  |  |
| Number and location of hallway routers strong enough for staff use of remote technology to manage tenant records, work orders, etc. when in an apartment and provide a seamless connection from common spaces to apartments for assistive technology. (N*ote- does not include a requirement to provide residents open access to building Wi-Fi in their apartments.)* |  |  |
| Comprehensive cell phone service in the lobby, program spaces and hallways that has the capability of transmitting a signal in an energy efficient envelope (i.e. multi-paned windows). Older buildings may require a repeater system to transmit a signal. |  |  |
| Wireless door locks with fob. Remote unlocking allows staff to easily assist residents and could be used by staff as a wellness check feature to alert staff when a resident has not left their apartment for an extended period. |  |  |
| Common voice activated technology system in units that provide information related to building programming to residents. |  |  |