



Issue #6 July 16, 2014

History of Dementia Design

How did we get here? When the West Center was built in 1993, it was one of only five facilities in the nation designed and built specifically for people with dementia disorders. The Center was built with the best available knowledge at the time, which was that people with dementia required safety and continuous staff direction, and that they wandered and needed a calming environment. The “bones” of the building, which was designed by hospital architects, are good. The small-unit model that differentiates care according to the progression of the disease still works well and remains relevant and is unique.

But what has changed over the past twenty years is a much deeper understanding of the lifestyle or “habitat” needs that all human beings have, that can actually enhance the functioning of people with dementia, even as the disease progresses. The needs for independence, variety, spontaneity, interactions, and normal home activities are incredibly important to well-being. Medical services have been our strength, and will remain a pillar of our care. What will change is the addition of comfort, familiarity, and opportunities for meaningful, normal activities, in the living spaces. Bringing life into our institutional environment will enrich staff understanding of residents, and create many opportunities for meaningful interactions, beyond physical care. Over the next few weeks, our updates will explore the design elements and amenities to be built in at each level—stay tuned!

Best Wishes,

Susan Farris, Executive Director