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EFA 20th Anniversary: Setting The Stage

By J. David Hoglund and Daniel J. Cinelli | November 1, 2017

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Individual households at Copper Ridge offer intimate and safe environments for residents to age in place. One key to achieving this model of care was the crafting of landscaped courtyards and walking paths that promote socialization and an active lifestyle, as seen in this image from 1997.

Integre Copper Ridge opened its doors in Sykesville, Md., in July 1994, and the community quickly garnered recognition as the first new facility in the country designed specifically to address the continuum of care needs of people with Alzheimer's and related dementias. Copper Ridge challenged the existing status quo at the time, with the goal of supporting memory care in a less institutional, less restrictive environment than more traditional settings.

In 1997, the effort earned our project team at [Perkins Eastman](#) a Best in Show award in the design competition that was the basis for the very first issue of *Design* magazine—what would evolve into today's annual Design Showcase in *Environments for Aging*, now [celebrating its 20th anniversary](#).

Looking back on our team's original design, from the site schematics and building floor plan to the interior furnishings, Copper Ridge represented a milestone within the architecture and design arena. Designing for the continuum of care—whereby residents can remain in a supportive and familiar setting as their symptoms become more pronounced—requires an understanding of wellness. And as architects, we define wellness in terms of how the physical

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environment can be crafted in ways that directly support a person's well-being—physical, socio-emotional, and intellectual elements, otherwise known as whole-person wellness.

Copper Ridge was an early adopter of this idea and continues to support it. But the senior care industry's understanding of memory care has grown substantially in the past 20 years, and with it so have approaches to research, treatment, and design. Copper Ridge is an example of how this evolution has taken shape and now more fully supports a whole-person approach.

"Our memory care model did work for a while," says Cindy Yingling, vice president of neurocognitive operations at Integrace. "But then we began to notice a greater need for more comprehensive wellness services." The catalyst for this was that leadership realized memory is only one cognitive function, and thus, the term "memory care" was too limiting when considering the full scope of what it was setting out to do for residents. "We have taken this leap into transforming our services based on neurocognitive research. It's what we refer to as the 'integrated solution' for neurocognitive support," she says.

For example, Yingling notes that some who suffer from Alzheimer's will initially show no symptoms of memory loss and, further, that memory and learning function represent only one neurocognitive domain; the others include language, perceptual and motor functions, social cognition, complex attention, and executive functions. So the care model in place today addresses all of these domains and neurocognitive impairments and not just memory loss.

Copper Ridge's expanded model now features a residential living continuum with 126 suites in both assisted living and skilled nursing, a neurocognitive diagnostic clinic, and an adult day and night care program, all supported through research and education.

By forging this integrated solution for treating neurocognitive impairments in a comprehensive environment, Copper Ridge required physical updates, too. Recent renovations to the community, which were completed in February 2016, focused on expanding its support services and amenity spaces, and making them more accessible to the greater community. The lobby was updated with a bistro designed to meet the needs of those with neurocognitive challenges, the clinic was relocated to the front of the lobby (it was originally placed in the back), and a new adult day and night support space was built. But beyond making the spaces more accessible and inclusive, the shift in model from memory care to neurocognitive support represented a major institutional change that others have pursued, as well.

In Nashville, for instance, *Abe's Garden* (for which we served as interior designer) serves residents with Alzheimer's and other forms of dementia using a person-centered model founded on the idea of making design itself an integral component of the daily treatment regimen. This was accomplished by first researching physical environments—from furnishings and lighting conditions to neighborhood floor plans and room configurations—that are suited (or, in some cases, ill-suited) to memory care. The project considers the ways that aesthetics can deliver optimal conditions for wayfinding, ensure that residents grow familiar and comfortable with their living space, and provide access to abundant natural light to help regulate eating and sleep patterns.

In the tradition of Copper Ridge, our partnership with Abe's Garden began with a goal of pushing the standard for treating and designing for Alzheimer's care forward. And although these communities' respective models differ, it's telling that more and more providers are now looking to challenge what's already been done.

Rethinking Alzheimer's and dementia care requires a much more holistic outlook. Whereas residential care and clinical treatment were once seen as two sides of the same coin, this new approach considers a host of other factors, including comprehensive wellness programs, short-term rehab services, day care programs, dining options and other community-based amenities, and in-house clinical care and research institutes devoted to studying—and educating others on—the neurocognitive effects of Alzheimer's disease.

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