## Quality Improvement in Long-term Care

The purpose of this column is to discuss innovations and quality improvement efforts in a variety of long-term care settings. These issues are of importance to healthcare professionals as our nation faces the burgeoning growth of the aging population, creating increased demand for improved and innovative long-term care services. This column is coordinated by Marilyn J. Rantz, PhD, RN, FAAN, NHA, e-mail: rantzm@missouri.edu.

## TigerPlace A New Future for Older Adults

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AUNIQUE cutting-edge project is underway at the University of Missouri – Columbia (MU) that will make it possible for seniors to truly "age in place." While authors and healthcare providers have been talking about "aging in place" for several years, <sup>1-4</sup> accomplishing this has been challenging and nearly impossible within federal and state regulations of long-term care. Faculty at the MU Sinclair School of Nursing (SSON) rose to the challenge of meeting consumer demands to "age in place" with this cutting-edge public-private partnership project that began in 1996 and is now being fully realized.<sup>5</sup>

TigerPlace (named after the MU mascot, the tiger) is a specially designed elder housing project that was initiated by the SSON and designed by MU faculty working with the Americare Corporation of Sikeston, Mo. Construction was completed in spring 2004

for the senior living community that is located just a few miles from the MU campus. TigerPlace consists of 33 apartments for seniors and is designed to promote the independence of older adults. Nurses, physicians, physical therapists, occupational therapists, specialists in environmental design, and older adult consumers participated in the building plan. TigerPlace is located on approximately 7 acres of land adjacent to 2 other Americare facilities. Construction began in spring 2003 for Phase 1 of TigerPlace, a 34,000 sq ft development of the 33 apartment units. Additional apartment units will be constructed in Phases 2 and 3 as demand and service use for the project become evident.

Now, as seniors are moving into TigerPlace, they are excited about the special opportunities of this development because it is closely linked with MU and because it has services designed to help seniors age in place, stay active and healthy, and, in the future for most, avoid the need to move to a nursing home. Legislation that enabled this project was passed in the Missouri legislature in 1999 and 2001. This legislation was needed to designate 4 "aging in place" demonstration sites in the state

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that are to be regulated by the Missouri Department of Health and Senior Services but regulated differently from traditional nursing homes or residential care (assisted living). The typical experience of older adults in Missouri is that regulations force them to move from senior housing to residential care, then to a nursing home as care needs increase. This is typical of seniors throughout the United States, where residents of senior housing or assisted living live in fear of being forced to move to other locations as they need more assistance.<sup>7,8</sup>

For the residents of TigerPlace, that is not the case. The building is built to nursing home standards but not the typical configuration. The building has all private apartments with fully accessible bathrooms, kitchens, and screened porches. Private garages and a private dining room for special family occasions are available, as are beautiful common spaces such as a large living room, dining room, meeting room, library, sports bar, and beauty shop. Included in this list of amenities that surpasses the typical list of long-term care options are TigerPlace Pet Initiative (TiPPI) Veterinary Medicine Clinic, TigerCare Wellness Center, and TigerCize Exercise and Spa area

A central feature of TigerPlace is the TigerCare Wellness Center operated by Senior Care, a department within the SSON created in 1999. Senior Care is a licensed Medicare-certified home health agency and an in-home provider of supportive services that is funded through a state community-based long-term care program and private pay services. From the outset, Senior Care was designed to provide community-based care to the residents of TigerPlace (as a state-of-theart senior independent living and care option) and residents of other private congregate senior housing, public senior housing, and private homes of community-dwelling seniors in Boone County, Mo. The SSON was successful at obtaining a 4-year \$2-million grant in 1999 from the federal Centers for Medicare & Medicaid Services (CMS) to build the infrastructure for Senior Care and to evaluate the effectiveness of the aging in place model<sup>5</sup> of care.

Aging in place and other gerontology research is a major focus for SSON faculty. In that research, elders repeatedly said they wanted to stay at home as long as possible; they feared moving to a nursing home. Faculty believed, based on research findings from community-based service models of nursing case management<sup>9-11</sup> and from nursing home diversion programs, <sup>12,13</sup> that with the right supportive and restorative services, it would be possible to help elders improve their health and well-being and delay or prevent nursing home placement. <sup>14</sup>

At the TigerCare Wellness Center, there is on-going assessment of resident needs and health promotion activities, including exercise and personal consultation by a nurse, to help residents remain active and vital. Senior Care provides an array of home care services such as medication management, assistance with activities of daily living, and care coordination of health conditions with residents' physicians and other healthcare providers. Senior Care can also provide Medicare home healthcare when residents need and qualify for that service.

Pets are welcome at TigerPlace. The first dog and cat have moved in with their owners. The building was designed to be "pet friendly" so that residents with pets would keep their companion animal or perhaps decide to adopt a new pet.6 For example, each apartment has an exterior door for easy outdoor access for exercising dogs, screened porches, and wide windowsills for cats to enjoy. Through the TIPPI Program, pets may have regular healthcare and treatment by students and faculty of the MU College of Veterinary Medicine in the specially designed veterinary medicine clinic in the TigerPlace building. Sale of pet food at low cost is made possible by the support of the Hills Pet Nutrition Company. Services also are available for individuals who require additional help in caring for their pets.

A key feature of TigerPlace is making available cutting-edge research opportunities for residents who choose to participate. Such

research includes evaluating the effectiveness of technology to help seniors with common problems of aging such as mobility, cognitive, and/or sensory impairments. <sup>15</sup> Faculty research teams are busy writing grant proposals, the first of which was recently funded through the National Science Foundation. Other research possibilities include involvement with pets, the effectiveness of health promotion and social involvement interventions, and many others.

A major goal for MU is to design and implement exciting research, education, and practice opportunities at TigerPlace while integrating TigerPlace into the MU campus and the Columbia community. There are many objectives for the project. Key objectives from varying stakeholder perspectives include the following:

From the resident's point of view, ongoing assessment, early illness recognition, health promotion activities, and a well-designed housing environment will help older people stay healthier and active longer, avoid expensive and debilitating hospitalizations, and for most residents, avoid relocation to a nursing home. The links with MU are an important feature as seniors become involved in the student mentor program.

In this program, residents of TigerPlace mentor MU students in departments of their choice and take advantage of classes and cultural activities of their interest at MU.

- For MU, TigerPlace provides a venue for interdisciplinary research to improve the lives of older people that combines an exciting wellness-focused nursing practice with a creatively designed environment. Innovative educational opportunities are available for students across all colleges and schools. TigerPlace provides an ideal practice environment for healthcare providers of the future to create and implement better ways of caring for older people.
- For public policymakers, TigerPlace brings together the research, education, and practice skills of MU faculty so that complex cost-effectiveness and elder outcome questions regarding programs funded by Medicare or Medicaid can be answered, guiding public policy decisions about future services for older people.

For other university schools of nursing, we offer encouragement so that projects like TigerPlace become available to seniors across the country.

## REFERENCES

- Callahan JJ. Aging in Place. Generations. 1992;16: 5-6.
- Beildler SM, Bourbonniere M. Aging in place: a proposal for rural community-based care for frail elders. Nurse Pract Forum. 1999;10(1):33–38.
- Chapin R, Dobbs-Kepper D. Aging in place in assisted living: philosophy versus policy. Gerontologist. 2001;41(1):43-50.
- Cutchin MP. The process of mediated aging-in-place: a theoretically and empirically based model. Soc Sci Med. 2003;57:1077-1090.
- Marek KD, Rantz MJ. Aging in place: a new model for long term are. Nurs Adm Q. 2000;24(3):1-11.
- Rantz MJ. Aging in place. Nurseweek, Midwest/ Heartland Edition. 2003;4(2):7.
- Rich M. For the elderly, independent living can carry a threat of eviction. New York Times. February 15, 2004. Available at: www.nytimes.com/2004/

- 02/15/national/15ELDE.html. Accessed February 20, 2004.
- Willging PR. Aging in place can be a marketing trap. Nurs Homes, 2003;52(10):12-15.
- Abt Associates Inc. Evaluation of the Community Nursing Organization Demonstration Final Report. Cambridge, Mass: Abt Associates Inc; 2000.
- Colins C, Butler FR, Gueldner SH, Palmer MH. Models for Community-based long-term care for the elderly in a changing health system. Nurs Outlook. 1997;45:59-63.
- Elkan R, Kendrick D, Dewey M, et al. Effectiveness of home based support for older people: systematic review and meta-analysis. BMJ. 2001;323:1– 9.
- Hughes SL. Apples and oranges? A review of evaluation of community-based long-term care. *Health Serv Res.* 1985;20(4):461-488.

- Kemper P. Case management agency systems of administering long-term care: evidence form the channeling demonstration. Gerontologist. 1990;30:817-824
- 14. Rantz MJ, Marek KD, Zwygart-Stauffacher M. The fu-
- ture of long-term care for the chronically ill. Nurs Adm Q. 2000;25(1):51-58.
- Rantz MJ, Marek KD, Aud M, et al. Technology and nursing collaboration to help older adults age in place. Nurs Outlook. In press.

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