

(ENGLISH TRANSLATION)



Living life as usual

De Hogeweyk: unique housing in lifestyle for elderly people with dementia

De Hogeweyk exceeds expectations

It is quite a difference - from a 'block of concrete' with four floors to De Hogeweyk. The outside of the old building stood in stark contrast with the lifestyle concept that was being applied on the inside. This contrast had to be eliminated and the construction of De Hogeweyk was started for this very reason. The end result is a neighbourhood where life and wellbeing are just as important as care and where the label of 'institution' is no longer applicable.

Jannette Spiering is director of De Hogeweyk. "Ten years ago, we had our first thoughts about dismantling or renovating the old building into a care home that meets contemporary requirements", she explains. "The first plans that we looked at came to nothing because of the fact that our capacity in Weesp reduced. Vivium Zorggroep were building in Huizen at the time and, as a result, sixty residents and sixty staff transferred across. When I was appointed director there was a second plan on the table but it was not supportive enough of the vision that had, by that time, been implemented. It was also not on an adequate scale to be able to be exploited responsibly. Conversations about the current neighbourhood began about seven years ago. The basic starting point for the Programme of Requirements was our vision of normal living for elderly dementia sufferers. In addition, we wanted to get away from the traditional 'care home' label. Small-scale was a *must*; the houses had to just be ordinary houses. We also wanted to retain all the facilities that we already had including a café, restaurant, supermarket and meeting rooms. Finally, there had to be diversity within the houses to suit the lifestyles and it was important to build bungalows in order to encourage the independence of the residents; they had to be able to step out the front door and be outside."

De Hogeweyk is open to anyone, not just residents and their families. "We want to be a neighbourhood that is as ordinary as possible", says facility manager Eloy van Hal. "We want to attract other people in precisely because of the fact that our residents can no longer leave the neighbourhood. Our facilities are therefore open to people from outside too." "We do it slightly differently to the Ministry of Health, Welfare and Sport", adds Jannette Spiering. "They advocate small-scale projects in residential areas for up to 50 residents. But small-scale alone does not do justice to providing those with dementia with a normal life. Residents cannot go outdoors safely in a neighbourhood with cars driving through it or in an area where they may get lost. These people are incapable of living independently and that is exactly why they have been assessed as requiring nursing home care. The Ministry of Health, Welfare and Sport's approach creates 'golden cages' in ordinary neighbourhoods and that is very different to integration. You deprive the residents the opportunity to do ordinary things and you cannot assume that the rest of the area will provide voluntary aid. That may work in certain regions or areas but is certainly not the case everywhere. So we say; come to us, instead of the other way around. All of the facilities were installed right at the entrance to De Hogeweyk and this lowers the threshold to using the facilities for the residents and, simultaneously, guarantees their privacy."

However, it is not just integration that is 'upside down' but also care and living. Eloy van Hal: "From the resident's perspective, we put the emphasis on living and wellbeing. Most of the environments in which dementia sufferers end up living do not look at all like real homes. Residents are still treated as though they are ill. Our residents, of course, receive the treatment they need but the emphasis lies on normal living. Just look at a hospital; visitors to hospitals do not ask about the medicines but want to know whether the food is nice. These are the most important things in terms of day-to-day experience and these are our top priorities."

"It took many staff quite a while to get used to the development and start of this vision of normal living", says Jannette Spiering. "An extra appeal was made to all staff, and carers in particular, in relation to how you can provide care as 'normally' as possible? Nobody washes

themselves with water from a metal bowl at home. And do beds really have to be made by half past eight? At home you might do your shopping and then go and have a coffee. The beds can wait. This requires a different mentality and requires more from our staff than would be expected in an ordinary nursing home. As soon as people work here, however, and are seized by the vision, they get right behind it. The integral method that is necessary to substantiate the vision at De Hogeweyk is less suitable for staff with a heavily task-focussed approach or who concentrate more on the technical aspects of caring.”

Vision is always the guiding principle

It is not only the staff but also the management who are required to do things slightly differently. Jannette Spiering believes that this different leadership style principally means that the well thought-out vision is recognised and is implemented by everybody. “We have modified the organisational structure at De Hogeweyk. This is an integral concept: living, wellbeing and care are interwoven in such a way that one cannot exist without the other. That is certainly a challenge. It means dealing respectfully with each other’s professions because of the fact that each profession may impact upon another one. It is also impossible to develop one without the others.” Eloy van Hal agrees; “The vision is the basis of everything you do, it forms the guiding principle. This eliminates many discussions in advance because it either fits into the vision or it doesn’t.” Jannette Spiering: “This applies inside the walls but also in the connections you make with the outside world. Connections outside must also fit in with ordinary living. Everything that can be done in an ordinary neighbourhood must also be possible here. This also leads to us coming up against issues that would, perhaps, be more easily solved in a nursing home or institution. We opted for an outdoor area that was not covered as this fits in with our vision. This, however, led to certain discussions, such as those held with the Client Council. They were concerned that the residents would not be adequately protected and asked what would happen if someone forgot to put their coat on. Our vision is the guiding principle at exactly this sort of moment. An elderly person suffering from dementia is not ill. We, as the organisation, have to support this so as soon as a member of staff sees a resident walking around without a coat on a cold or wet day – and that will not happen very often as all of the carers are very aware of this – the employee will go to the resident and bring them back inside to get their coat. And if there is an appointment at the hairdressers on a day when there has been 10 cm of snow, you simply change the appointment. We often have to explain why we hold on so strongly to the notion of normal.”

The management is over the moon about how De Hogeweyk has developed. Jannette Spiering: “It is even better than I expected. As far as I am concerned, we could have had another ten or fifteen extra homes. There are always things that you want; more diversity in the facades, a more attractive finish. But you have budgetary limits. The neighbourhood is put to even better use than expected. This is particularly clear from the enormous feeling of freedom experienced by residents and visitors. They are free to go and make use of whatever they like, whenever they like. For example; every year we have a couple of festival weeks for the residents in the summer. This year there were all sorts of activities on the square, including a performance by a brass band. Often over 80 residents attended this event and it was extremely congenial.” Eloy van Hal: “There was one activity - painting with Friends of Art from Weesp. Residents started painting, became very involved in their work and ended up doing things they hadn’t done for years. This environment also helps the visitors and family who come to visit. They do not have to sit stiffly in the rooms but can walk around the neighbourhood and pop out to the shops with a family member or go and sit by the pond. This is hugely beneficial when you consider that nursing home residents in the Netherlands go outside for an average of 96 seconds per day and 60% of them never receive visitors.¹”

¹ Source: Stichting Alzheimer Nederland (Dutch Alzheimer Association)

Facts and figures of De Hogeweyk

Start of demolition 1 st phase	October 2006
Taken into use 1 st phase	April 2008
Demolition 2 nd phase	July 2008
Delivery of complex	September 2009
Housing put to use	December 2009
Total surface area of site	15,310 m2 (of which 7,702 is not built on)
Gross surface area/home	320 m2 (of which 65 to 95 m2 is lounge and 16 to 20 m2 is bedroom)
Total number of residents	139
Total houses	23

Recognition and appreciation of lifestyle

People who suffer from dementia lose their grip on life. This is accompanied by restlessness. Admission into a nursing home must, therefore, signify as little change as possible to how life was before. It must be very similar to what the residents were used to at home. This means small-scale houses that look like 'home'. Life there must also be virtually identical to the resident's previous life. This may concern 'big', important issues such as religion and culture but also the smaller things such as set-up, music, daily schedule and customs.

Hogewey's lifestyle vision is all about recognising like-mindedness. This vision was verified by research agency Motivaction, which distinguished between seven streams in society. This led to seven lifestyles at Hogewey (see frame). "Once we had established the basic principles, we set up one of our offices according to this vision in 1993", explains Yvonne van Amerongen, Quality & Innovation executive. "It soon emerged as a success and we knew, after the very first evaluation, that we no longer wanted anything else."

All the facets of this vision can be implemented in De Hogeweyk. Residents are able to go outside alone and this not only contributes towards their health but also to the feeling of being 'at home'. "De Hogeweyk is a small society", says Yvonne van Amerongen. "With a supermarket, a café, restaurant, theatre and a plethora of associations. Medical care, of course, is always on hand and the houses in this small society are equipped according to lifestyles. The atmosphere in the neighbourhoods also varies so that each resident can feel at home somewhere."

Hogewey's seven lifestyles

- 1) Traditional: for people whose pride and identity came from carrying out a traditional profession or managing a small business
- 2) City: for people who were at the centre of urban life
- 3) 'Het Gooi': for people who attach importance to correct manners, etiquette and external appearance
- 4) Cultural: for people who love art and culture.
- 5) Christian: practising your own religion forms an important part of daily life
- 6) Indian: life in India is a collective memory and determines the daily routines to a large extent
- 7) Homely: caring for the family and household are important, just like a traditional lifestyle

THE ARCHITECT: Molenaar&Bol&VanDillen architecten bv.

Molenaar&Bol&VanDillen architecten bv. beat two other bureaus to win the Hogewey tendering competition. "We have wide-ranging experience with care projects and had plenty of ideas for the neighbourhood but had to admit, at that moment, that we had no idea what the building plan would look like in the end. As architects, we were very open-minded when it came to starting work on the care vision. Once we had presented Hogewey with a planning draft for the desired, individual housing, we also indicated that working on this together was not just highly desirable but, in fact, vital. We were selected for this very reason. We needed Hogewey's input in order to be able to convert their vision into a constructed environment", says Michael Bol, director of the architects bureau.

He continues; "I thought it was great to be working with such a clear vision. Of course, this sometimes led to discussions taking place but they were always very constructive. We worked intensively with both Hogewey and the interior architect and landscape design architect Niek Roozen. It is very special to me that we have been able to support high quality of life with our architecture. Every home is different and different lifestyles can determine, for example, whether you come in through the front or back door and whether you eat in the lounge or in an open kitchen. Our method, which involves looking at construction for specific target groups in care, was therefore given an opportunity for further development. As a result of this method, we are also quicker to question issues that are often taken as given because of the fact that we take the way you or I live at home as the abiding principle. Just like Jannette Spiering and Eloy van Hal, we are very proud of the end result!"

Molenaar&Bol&Van Dillen Architecten's design of De Hogeweyk in Weesp has provided a trusted and reliable living environment for residents living with dementia. De Hogeweyk is a safe and attractive living space and offers them an existence that is as normal and dignified as possible.

Nomination for Hedy d'Ancona prize:

De Hogeweyk has been nominated for the Hedy d'Ancona prize.

The Hedy d'Ancona prize is a new prize within the Dutch world of architecture and care. The prize concentrates specifically on buildings in the care sector, where urban development and landscaping, architecture and/or interior design support the care concept. The Hedy d'Ancona prize is a collective initiative from the Stimuleringsfonds voor Architectuur (SfA) (Stimulation Fund for Architecture) and the Centrum Zorg en Bouw (Care and Building Centre) from TNO. The Atelier van de Rijksbouwmeester (Government Architect) and the Ministry of Health, Welfare and Sport are supporting the initiative.

The jury nominated six projects from the one hundred and twelve that were submitted and De Hogeweyk was among them. The ultimate winner will be announced in mid 2010.

De Hogeweyk as a working environment

There are many opportunities for employees working at De Hogeweyk. There is also plenty of space for making your own contribution within the vision of small-scale living and lifestyle and opportunities for working independently and flexibly. If this type of thing is 'up your street', De Hogeweyk can present an interesting challenge.

Carer Joke van Putten and care support worker Tom van der Leek tell us all about it.

Joke van Putten, carer and client contact person:

"Together with a colleague, I am responsible for the daily run of events in the admissions house. This house accommodates residents until they find a home offering the lifestyle that they have chosen. My work includes supervising the residents in their daily lives, taking care of these residents and keeping the households running smoothly. Everything in the admissions house is new for the resident and their family so many meetings take place and we do all we can to put them at ease. Family members often have problems with an admission to a nursing home. So we make sure that they feel at home too and tell them to carry on behaving as if their mum, dad or partner was still at home. This is how we try to reduce the feeling of 'just visiting' and lay the basis of a safe feeling for both the resident and the family.

This work means that you have to be very independent. Sometimes I might be on my own for part of a day. Personally, I think that's quite nice but it is very stressful for some of my colleagues.

The house in which I work is very calm. The house has a garden and patio doors and, last summer, the doors were open almost all the time. The admissions house deals with various, different lifestyles. That is why we pay a great deal of attention to each individual. I might, for example, go and do some baking or do the housework with residents who are to move into a homely style home. I always set aside a little time to take care of a lady from Het Gooi with some nice cream or a little make-up and an Indian gentleman always gets tasty Indian snacks. We also play various types of music too; sometimes a tear-jerker and then something classical. The house is a small-scale affair just like the others and there is a great deal of privacy. This allows (almost) every resident to have their own bedroom and there are various little corners in the lounge into which you can retreat. We keep a close eye on making sure that every resident feels at home and recognises things. Restless or rebellious behaviour quickly alerts you to who is feeling alright and who isn't. Meals are important for everyone and we take the preferences of the residents in the group into account so that each meal is also 'just like home'.

Alongside being a carer, I am also a client contact person. This means that I am allotted two residents for whom I act as a fixed contact person. I organise care and living plan meetings with the doctor and family and if the residents need something, such as new clothing, I am the person who approaches the family. I am also a fixed point of contact for them."

Tom van der Leek, care support worker;

"I have a fixed residents' group and, together with my colleagues, I support the carers in the home when necessary and also carry out care procedures. You could compare me to a district nurse. My manager is a neighbourhood manager. There are a total of three neighbourhood managers for all of the homes. My neighbourhood manager's homes are, therefore, also 'my' homes. I have my telephone with me all the time and can always be called upon to provide medication, for example, or carry out other procedures. This provides great variety in my work.

I also worked in the former high-rise. This was also equipped according to lifestyles and I worked there in a permanent home. The new building, however, is a big improvement. For us and also for the residents. There are no more long hallways with lots of people walking up and down, there is more space and time for providing personal attention and it is unique in terms of what the residents can do independently in the neighbourhood.

The fact that I often have to walk through the neighbourhood means that I have contact with many different colleagues and residents and it is much easier for me to stay in touch with everybody. This is particularly useful as highlighting problems is one aspect of my role. The fact that I have access to many different houses means that I can also see clear differences in lifestyle. I have to adjust myself to this too. In an urban house, you deal with the people differently than you do in a home in Het Gooi. The starting point, however, is always the person needing care. The resident is central to everything.

I am very proud of what we do here. Of course, it is better not to have dementia but if I ever suffer from dementia myself, I couldn't think of a nicer place to be than De Hogeweyk."

The daily reality

Within the concept of small-scale housing, it is usual to have a normal household structure. Cooking is often carried out in the house, the washing is done there too and residents often watch TV together. The aim of this is that life goes on as normally as possible. However, this does not just revolve around carrying out the activities in the vicinity of the residents or – as critics would say – obliging the residents to carry out household chores. People suffering from dementia often struggle to recognise day-to-day objects and locate them and that also applies to household activities. A person with dementia knows, perhaps, that something must be done with the basket of clean washing. But what? Folding? How do you do that again? They need help to give significance to these daily activities so that the meaning itself becomes clear, without the resident failing.

If short-term memory has been affected it helps to refer to an activity and do it in front of the person concerned, with the corresponding facial expressions (what do I look like when cooking smells nice at home?). Even if a resident does not make any contribution to household activities, seeing, smelling and (listening to) talking about ordinary day-to-day things helps provide meaning. As a result, their plate of food does not just 'appear out of nowhere' and, more literally, it always makes you feel hungry if you see someone eating. Someone who wants to take part but who, as a result of the advanced dementia, no longer can, is also able to feel involved in a household activity. This does mean, however, that the nursing home's personnel must be permanently on the alert. And not only the nursing staff but also the cleaner, the cook and the receptionist. The cleaner 'visits' the house and must use both verbal and non-verbal communication to communicate to the residents what he is coming to do, what he is doing and what he has done. They only realise the significance if this is the case.

The daily reality, if you like, is built around the resident's previous view of reality. It is a 24-hour reality show. Everything focuses on helping the resident recognise the reality created and ensuring he can get a grip on the structure and significance of daily life. Is that fake? As far as the person suffering from dementia is concerned - not at all.

Source: Dementerenden in de hoofdrol, het verpleeghuis als toneel (Dementia sufferers taking the leading role, the nursing home as a stage) By Tanja Enninga and Jannette Spiering

A day in the life of...

Mr Arends, former carpenter

Mr Arends worked as a carpenter for most of his life. In his free time he loved to work in the garden. He did huge amounts of work over many years and was busy with his hands day in, day out. Now, however, Mr Arends is suffering from dementia and can no longer live at home. He loves to be outside but this was no longer safe at his old home so Mr Arends now lives in De Hogeweyk. He lives here with five other people in a traditional lifestyle home. He gets up early every day and eats a hearty breakfast. After breakfast he loves to go outside. Mr Arends may do a bit of carpentry, go for a walk or do some gardening. The fact that he sometimes pulls out plants instead of weeds is not a problem. They can be replaced. A great deal of work goes on both in and around the traditional house and the residents' jackets hang on the coat rack so that they can always go outside. De Hogeweyk is always safe; there is no traffic racing around and Mr Arends cannot just wander out into the streets. In addition, there is always somebody keeping an eye on everything so if Mr Arends loses his way during a walk, he will feel a hand on his arm and a friendly member of staff will help him find his way again. So that he can get back home on time. Because, in the evening, Mr Arends eats at precisely half past five and always has something that is very familiar to him; potatoes, vegetables and meat. Or a tasty stew. Everything is then cleared away after eating so that everyone can be ready for coffee and the news on time.

Mrs Buys, a mother from Het Gooi

Mrs Buys was born and raised in Laren, spent almost all of her life in Het Gooi and was very happy there. Now, however, she can no longer live alone as her dementia is too advanced. In her home, in the Gooi style, it is normal to get up slightly later. Getting up at the crack of dawn is simply not the done thing! After getting out of bed, a relaxed breakfast is eaten and then it is time for a little personal care because Mrs Buys has always considered this to be very important. Later in the afternoon, Mrs Buys goes to a presentation about travelling. In a film, she sees images of far-off countries which she has visited many times in her life. Back in her house, dinner is served at half past six. This evening, salmon with peas and potato gratin is on the menu. While the personnel tidy up the plates, the residents linger around the table. Because of the fact that Mrs Buys has always loved music, in the evenings she visits the Mozart hall where the Bach and Beethoven association meets each week. This evening a beautiful piano sonata is being played.

Mrs Van Beek, City lady

And Mrs Van Beek? Well, she is an exceptional case. Her children – born and raised in Het Gooi – registered her for a house in the Gooi style. This is how Mrs Van Beek had lived for years – in a stunning manor house, with domestic help so that she could enjoy the finer things in life. The children also knew no other lifestyle. Mrs Van Beek, however, did not feel at home in the Gooi environment. She sometimes ran away and could be recalcitrant at times. This was, of course, noted by the carers and they asked the family about Mrs Van Beek's past in more detail. What transpired? Mrs Van Beek's fortune had been amassed later on in life. She actually came from a very working class area in a big city and that is what she had known as a child. Mrs Van Beek then moved to a home with an urban lifestyle and her discontentment disappeared. She enjoys the Dutch music and loves to go to the store to get the shopping in. When the weather is nice she loves to sit outside and watch the people walk by.

Stichting Hogewey Educatief (Hogewey Educational Association)

The implementation of the lifestyle concept has led to the Hogewey nursing home winning a range of national and international prizes. Colleagues from the Netherlands, the surrounding countries and even Japan, Australia and the United States all want to see and hear about how De Hogeweyk works and how this concept, previously in place in the old building, took shape.

When the demand for tours and working visits became too high to be able to just do it 'in between work', it was time to start doing things another way. The Stichting Hogewey Educatief was formed with the aim of disseminating the know-how and expertise that has been accumulated with colleagues at home and abroad. An entry fee is charged to participate in workshops, tours, study days and the now well known "Hogewey exhibition". The cost of organising these activities is then paid with this money. The Association aims to use any profits made to support the residents' leisure activities at the Hogewey nursing home and staff education. Over the years, Hogewey Educatief has welcomed many colleagues, students, Client Council members, work groups and other interested parties for working visits, conferences and study days, among other things.

An exhibition is also organised twice a year and about 1000 visitors come to this annually. The Hogewey exhibition offers the visitors the chance to take part in workshops about the Hogewey's working methods and there are also stands for companies who exhibit materials and products which are related to small-scale living and lifestyle. This has worked very well for the past 15 years, with a pause of three years due to the demolition of the old nursing home and the construction of De Hogeweyk. In June 2010, the first new-style Hogewey exhibition was organised. The most important frame of reference for this was working in small-scale houses with the lifestyle concept.

The income from the association also allows knowledge from 'outside' to be brought 'inside'. Third parties, including external speakers, consultants and trainers, are regularly invited to attend policy days. Working visits are also possible. In addition, Hogewey Educatief also supports a nursing home in Prague. A nursing home for sufferers of dementia was started there ten years ago when this was a completely new concept in the Czech Republic. Dementia sufferers at the time were either ignored or, in the worst cases, placed in a psychiatric institutions or even in detention. Hogewey helped to set up proper care for dementia sufferers and the house in Prague also adopted the major principles of the lifestyle concept. Working visits and work placements are repeatedly organised within the context of knowledge exchange.

1993	Dien Cornelissen prize for Privacy in nursing care
1995	International Hospital Federation Award for innovative management
2000	Project of the World Expo 2000 Hannover
2009	Nomination Hedy d'Ancona prize 2010 for excellent architecture in care

Funds, sponsors and donors

The realisation of De Hogeweyk has been a costly affair. For the most part, costs were met out of regular budgets but the unique *personal touches* that really make De Hogeweyk a 'home from home' were financed in another way. These extra facilities were created as a result of money received from funds, sponsors and donors.

One and a half million euros extra was required to complete De Hogeweyk and Greetje Versteeg was brought on board in order to source this. She is a qualified fund raiser with the Vivium Zorggroep, of which Hogeweyk is part. The Vivium Zorggroep is made up of eleven locations plus home-care and is active in the northern Gooi and Vecht areas. They are all AWBZ (Law governing extraordinary health care costs) institutions. Greetje Versteeg raises money for special projects but also works on financing smaller projects such as a courtyard or tandem. "De Hogeweyk was one of my first projects", she says. "It is a lovely project which was principally financed by the government. However, everything extra that we needed – putting in a pond, a bench, outdoor lighting – did not fall under this budget. We tried to offset this shortfall by raising money. One and a half million is an ambitious target and I am not sure we are going to achieve it. The counter is currently at around one million."

Initially, Greetje Versteeg worked on attracting 'big money' to De Hogeweyk; "Many capital investment funds are just waiting for a good request. Capital funds are charity institutions that have a donation budget available for social objectives. The money may come from share interests, inheritance or gifts. We received a donation from many funds. Fund raising in the care sector is not particularly common so my requests were sometimes met with some trepidation. Providing a personal explanation, however, always led to a better understanding of the situation. The recession meant that commercial sponsorship did not raise the money we had hoped for. This is a great shame but is completely understandable as capital funds have lost money too."

Friends of Hogeweyk

De Hogeweyk was also made possible as a result of donations from private individuals. Greetje Versteeg explains: "As with fund raising, individuals are also not really used to an active approach to donating to this sort of cause. A response that you often hear is: 'Shouldn't the government be paying for that?' but people understand much better once further explanation has been provided. Donors have also been united under the Stichting Vrienden van Hogeweyk (Hogeweyk Friends Association). We received a donation from about 450 addresses and 250 of these have become permanent donors. We are delighted with this and it is also a sign of the commitment from the surrounding area and demonstrates that they are giving us a warm welcome. That is fantastic."

(Back cover)

DE HOGEWYK

De Hogeweyk (part of the Hogeweyk nursing home) is a specially designed neighbourhood, encompassing 23 homes, which houses 139 elderly people who are suffering from dementia and have been assessed as having a nursing need. Together with a permanent team of staff, they take care of their own households and cooking and washing etc. take place in the home each day. There are streets, squares, gardens and a park within the neighbourhood and, just like any other residential area, De Hogeweyk has a range of facilities including a restaurant, a café and a theatre.

These facilities can be used both by residents of De Hogeweyk and by people living nearby; everyone is welcome!

See: www.hogewey.nl

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