LESSONS FROM SERVICE CENTERS FOR ADULTS WITH DISABILITIES:
POST OCCUPANCY EVALUATION OF ENMRSH, INC.
COMPLETED 2017
“When I would leave the old building, I would leave sad. Now when I visit, I leave with a good feeling in my heart and I feel happy.”

Survey Respondent
Community inclusion and habilitation centers for adults with disabilities, also known as adult day service centers, must meet the needs of a broad range of clientele and activities. Demand for these centers is growing – the National Adult Day Services Association (NADSA) estimated that there were 5,685 day programs operating in the United States in 2014, an increase of 67% since 2002. Small design decisions can impact how comfortable clients with different physical and social needs feel, how easy it is for staff to support clients and manage activities, and how easy it is to maintain the quality of the facility.

ENMRSH, Inc. is a community-based non-profit organization that opened a new habilitation center, designed by Dekker/Perich/Sabatini (D/P/S), in 2016. D/P/S conducted a post-occupancy study of ENMRSH, Inc. to identify lessons learned after a year of occupancy. The study included surveys of ENMRSH, Inc. staff and clients’ family members, observations of activities at the center, and meeting with ENMRSH, Inc. management staff to discuss the design and operations.

After over a year of occupancy, most of the design strategies have proven to work well for clients and staff. The design of the new center promotes interaction and activity, while giving clients choices in environment and seating. ENMRSH, Inc. is offering an array of scheduled and impromptu activities, both indoors and outside, and continues to evolve their operations in response to both client needs and changing regulations. Clients’ family members have been very enthusiastic about the new center’s balance of beauty, spaciousness, and accommodations for disabilities. The study identified a number of lessons about safety, accessibility, furniture, durability, and staff amenities that can be applied to the design and operations of other community inclusion and habilitation centers for adults with disabilities.

Note: To preserve client confidentiality the faces of any clients included in photos have been blurred.

“It brought tears to my eyes to see the new space for our sons and other clients. I also knew that with such beautiful and comfortable surroundings that the staff would also be happier and that makes it good for everyone!”

Survey Respondent
ENMRSH, Inc. is a community-based non-profit organization dedicated to providing comprehensive programs and services that support the challenges and continually evolving goals of families and clients facing developmental delays and intellectual and physical disabilities by promoting self-sufficiency, community inclusion, positive experiences, and individual growth throughout all stages of life.

ENMRSH, Inc.’s adult habilitation center focuses on helping adults with disabilities have positive and meaningful daily experiences related to recreation, employment, fitness, training, therapy, and socialization. Many of the center’s clients have multiple impairments, and there is a wide range in age and activity level. Typical clients include younger adults who like computers and want to be out in the community, elderly clients who prefer to relax within the center, clients with traumatic brain injuries that struggle with interaction, and clients who need 1:1 staff assistance with mobility, eating, and activities.

The program was originally housed in an adapted, aging metal office building that contained many small rooms and a few larger spaces. In contrast to the metal building, the new center was designed to be welcoming and accessible, encourage interaction and community-building, and provide different types of environments to meet individual needs.

ENMRSH, Inc. moved into the new center in March 2016. The new center includes varied spaces such as:

- An open commons that functions like a living room, with comfortable seating
- A small sensory room with an audio system, a tactile wall surface, and color-changing LED lights
- Two small alcoves for individual use
- A flexible fitness room and adjacent cardio room with equipment
- A large activities room with movable tables, computers, and storage and sinks for games and crafts
- A dining room with a mixture of booth, banquette, and counter seating
- An exterior courtyard with walking paths, seating, and gardens
- Administrative and support spaces such as a controlled entry lobby, medical dispensary, staff-assist restrooms/changing rooms, offices, and conference rooms

“Beautiful building, very inviting, client and family friendly. I love the dining area, reminds me of a restaurant. The back patio is awesome. I feel my sister loves going now and I don’t feel bad about sending her there.” Survey Respondent
The post-occupancy evaluation was conducted in May-June 2017, and consisted of four main components:

1. A detailed online survey of ENMRSH, Inc. staff, which posed questions about frequency of use in each space, how well each space works for particular activities, accessibility features, and the impact of the new facility on clients
2. A hard copy family survey that posed questions about their overall impression of the facility and how it meets the needs of their family member
3. Casual observation of facility use and conditions on a typical day
4. A meeting with ENMRSH, Inc. management staff to discuss more detailed feedback on the design and first year of operations

One factor complicating analysis of lessons learned is that ENMRSH, Inc. has continued to evolve its operations. Shortly after the first year of occupancy, ENMRSH, Inc. made a series of deliberate changes that included:

- Having clients come and go for activities on a looser schedule, instead of having most clients arrive between 8-9am and leave between 3-4pm. This changed the daily schedule from having clear peaks of client traffic in short periods for morning arrival and lunch, to a more even distribution of activity and a more transient population throughout the day.
- Changing all staff schedules to 12 hour shifts
- Having fewer people in the centralized staff bullpen, which is now occupied by just the team leader and two assistants
- Offering more scheduled activities so clients can plan when they want to be onsite

Many of the lessons from the ENMRSH, Inc. center can be applied to the design and operation of other new or renovated inclusion and habilitation centers by looking at how the major client spaces are used, successful characteristics of the center’s physical environment, and perceived impact of the new center on staff and clients.

### INTERIOR SPACE USE

ENMRSH, Inc. includes typical client spaces, like activity and fitness rooms, and more customized spaces, such as a sensory room and individual alcoves.

The *activity room* is a high-demand space that is used for varied offerings such as crafts, parties, bingo, group games, karaoke, and as an optional space for clients to eat lunch or relax. Furniture provides flexibility for different activities and to accommodate client preferences. Clients can choose between table seating used in the majority of the space, or individual lounge chairs grouped at the front and back of the room. Rolling, flip-top tables allow furniture to be easily reconfigured or removed from the room, and chairs without wheels allow clients to safely transfer to and from chairs. The space includes ample storage cabinets for art supplies, games, and puzzles, along with sinks and a few computers.

The *fitness room* has been used for group activities such as Zumba, Wii fitness, and fitness videos, and ENMRSH, Inc. has plans to add sessions in cardio drumming and line dancing, as well as lightweight dumbbells and fitness bands for individual exercise. This simple room has worked well for a range of uses, but it may be helpful to plan for higher than typical levels of ventilation in fitness rooms for adults with disabilities who may have hygiene issues that can result in stronger than typical odors when exercising. The adjacent *cardio room* includes treadmills, an exercise bike, stepper, and weight machine. ENMRSH, Inc. has found that the cardio equipment can be intimidating to some clients and typically keeps the room secured so it is only used with direct staff supervision. ENMRSH, Inc.
plans to schedule more group use of this space and encourage use with specific clients that could benefit from more cardio and weight-bearing exercise activity.

ENMRSH, Inc.’s sensory room was designed to provide a calming atmosphere for individual clients or small groups. It contains color-changing LED lighting, tactile wall panels, and a built-in audio system to tune the space for specific client needs. In the first year of occupancy, the space was most often used as a decompression space for clients who get overstimulated, such as a client who would go into the space alone and play loud music on headphones to relax. Unfortunately, the walls in the sensory room were quickly damaged by wheelchair handles and footrests when a larger group used the small space, and it was temporarily out of service pending the installation of impact-resistant wall panels. With that added protection in place, ENMRSH, Inc. plans to experiment with new group uses, such as an audio book club that will make use of lounge furniture and the audio system, and more engaging/stimulating activities as well as calming activities.

The commons was intended as a living room and people-watching space with comfortable furniture, a television, and views of both the back courtyard and of people entering the building. After the new center opened, ENMRSH, Inc. staff began reducing in-center TV watching and encouraging more group activities, so it has been used more intermittently, mainly by clients seeking a quiet spot to relax. The furniture provided in the commons originally included a few ottomans, but these were relocated to other areas after tripping incidents raised concerns.

Two small alcoves were provided adjacent to the commons, intended to provide a higher level of separation without isolation for clients with traumatic brain injuries or other clients who may feel overwhelmed by higher levels of noise and activity. These individual alcoves are heavily used, sometimes by the same clients using them every day and sometimes by multiple clients taking turns. Staff commented that it was rewarding to watch one particular client, for whom this separate-but-connected space worked particularly well, blossom over the past year and demonstrate additional independence.

The dining room was deliberately designed to provide multiple seating options to meet clients’ physical needs and social
preferences. This variety has worked very well. Based on observation and staff comments, the following trends have emerged:

- Many clients gravitate toward a favorite seat and eat in the same spot regularly
- The low counter seating areas and banquette seating work well for clients who use wheelchairs
- The banquette seating is preferred for staff assisted feeding
- The convenience outlets at seating areas are used by higher functioning clients to charge phones and tablets
- Clients who prefer to be alone when eating are more likely to choose counter seating
- Clients sit alone and in pairs at both booths and banquettes
- Even when there is ample space in the dining room, some clients choose to eat alone or in groups in the activity room

The open kitchen adjacent to the dining room is also used for cooking classes. A large island countertop with stool seating allows clients to gather around during demonstrations. These classes have proven to be so popular that it can be difficult for all participants to see, so ENMRSH, Inc. has started offering these classes four times per week in order to keep the number of participants manageable.

Back-of-house administrative space is separate from client areas, with only a small staff bullpen and conference room located within the client area of the building. This area was designed to have only low walls around the staff desks so supervisors could see the main client spaces even while seated. However, the low walls can cause distraction and make it difficult to have private conversations, and with the recent change to smaller, scheduled client groups, ENMRSH, Inc. has found that supervisors don’t have the same need to see everything. While staff in the separate administration wing have access to staff-only spaces, such as a staff breakroom, restroom, and storage, direct client staff who spend all day in the client areas may need amenities such as lockers to secure their belongings.

EXTERIOR SPACE USE
From early in design, the new center was planned to have usable outdoor space as an important component of the campus for both clients and staff. Many of ENMRSH, Inc.’s clients are heat- and sun-sensitive but want to be outdoors, so the courtyard has extensive shade canopies. It also includes looping walking paths interwoven with planting beds and grass areas, a water feature, different types of seating, wheelchair-accessible planters, and a
barbecue grill. Plants were selected to have different blooms throughout the year and to attract pollinators like hummingbirds and butterflies without bringing bees close to seating areas. The courtyard is bounded on two sides by the L-shaped building, with most of the remaining perimeter enclosed by a wall to provide a safe and secure place for clients.

ENMRSH, Inc. staff have found that clients really enjoy the porch swing and rocking chairs, and prefer these to the tables and fixed benches. ENMRSH, Inc. has held scheduled events, such as barbecues and garden walking, and is planning to offer a gardening class. Some of the anticipated uses have proven difficult to manage. Spontaneous courtyard excursions have been limited, mostly due to staff coverage issues that can occur when some clients want to go outside and others don’t. ENMRSH, Inc. is hoping to overcome this obstacle by offering more planned and scheduled courtyard activities.

The courtyard was also envisioned as a place for staff respite, but in practice staff have few breaks during the day and eat lunch with their clients, so there has been little opportunity for staff to use the courtyard on their own. Given the challenges of working with clients almost continuously during 12 hour shifts, strategies for staff breaks may help reduce staff stress and turnover, and enhance client care.

It may be beneficial to add features like hummingbird feeders to the courtyard to help draw clients into the space. The courtyard design did not include any built-in speakers, but ENMRSH, Inc. is considering using portable speakers to play music or audiobooks. With these small changes and more scheduled use of the courtyard for gardening, walking activities, and more frequent barbecues, it is hoped that clients and staff will be able to make better use of the space.

“It is not just beautiful but serves the needs of a variety of disabilities. Very impressive.” Survey Respondent
LESSONS FOR THE FUTURE

ACCESSIBILITY
Safety and accessibility were important considerations in the design of the new center. The design minimized the number of doors to facilitate client navigation, provided wide hallways and doors to ease wheelchair access, recessed tiled areas to create flush flooring transitions where possible, and incorporated sturdy handrails along corridors. ENMRSH, Inc. has found these strategies helpful for encouraging mobility and minimizing accidents. Recessed walk-off mats or adhered walk-off carpet should be provided at exterior doors to minimize the need for rubber mats which can pose a trip hazard, particularly for clients using walkers.

The center also includes two large, private restrooms designed for clients who require staff assistance with toileting or bathing. Each includes a toilet, sink, powered adjustable height changing table, standing lift, and accessible shower. ENMRSH, Inc. has found that these are well used and that having two assisted restrooms seems appropriate for the level of client demand. Furthermore, the powered changing table seems to be directly related to a reduction in staff back injuries. The overall number of injuries (including falls that cause injury) was down 45% in the first year in the new center, compared to the year prior to the move.

ADAPTING TO CHANGE
The new center has a very different feeling than the previous space. It is more open and has fewer interior walls and doors, which can promote social interaction and make the space feel more lively, but this openness can also make it difficult for clients to get away from noise and activity if desired, which is why the incorporation of alcoves and other quiet areas is essential. The new space is also brighter, with more modern interior lighting and more natural daylight. While these changes were deliberate, they required an adjustment period for both clients and staff. The transition was particularly difficult for older clients that had been in the previous building for years. ENMRSH, Inc. provided tours of the new space prior to the move and recommends that other centers undergoing a similar transition take the same approach.

FURNITURE
A range of furniture was provided for the different areas in the center. Recliners were deliberately minimized and located only in the sensory room because ENMRSH, Inc. wants to encourage clients to participate in activities and interact with others. Comfortable lounge chairs, some with tablet arms, were provided in the commons.
to create seating groups. Lighter-weight stacking chairs were provided for the activity room, dining room, and fitness room. All chairs have arms to help clients raise and lower themselves more easily. Because the selected chairs have a generous width, ENMRSH, Inc. decided to hold off on purchasing bariatric chairs, and to date has not purchased any.

The rolling, flip-top tables used in the activity room and other areas have proven easy to reconfigure. For safety, wheels were only provided on tables. The ottomans that were originally located in the commons room were found to pose a tripping hazard for some clients, especially under the original daily schedule with more crowded conditions. These were removed from client areas during the transition, and over time some have been added back into the commons, sensory room, and activity room.

DURABILITY
Durability of materials is an important consideration for adult interaction and habilitation centers. Resilient sheet flooring with welded seams was used in the activity room and hallways for ease of maintenance. Wood-look luxury vinyl tile was used in the dining room and commons to give those spaces a more residential feel, and resilient athletic flooring was used in the fitness and cardio areas. All of the flooring seems to be working well, but flooring colors need to be carefully selected to minimize scuff marks from shoes, wheelchairs, and walkers to minimize maintenance.

Wall protection was provided up to handrail height in high traffic areas, particularly along the short hallways leading from the entrance to client areas. While these panels provide good protection in those areas, walls have sustained some damage from wheelchair footrests and handles, particularly within the sensory room and near the open entries to each room where wheelchairs need to navigate turns. ENMRSH, Inc. would recommend that other centers install impact panels or wall protection as extensively as their budget allows, and prioritize locations that require turning.

“Beautiful building both inside and out. It is roomy and comfortable looking.”

Survey Respondent
TAKEAWAYS

The number of community inclusion and habilitation centers for adults with disabilities is likely to continue to grow. These important facilities require careful consideration to meet clients’ physical and emotional needs, and hold up well over decades of daily use. Strategies to consider include:

1. **Create a balance** of social and private areas to meet different client needs.

2. **Maximize the flexibility and durability** of materials and furniture used for activities and fitness.

3. **Prioritize** impact panels and wall protection, especially at turns.

4. **Schedule activities** to make better use of indoor/outdoor spaces.

5. **Incorporate sensory opportunities** for both calming and stimulation.

6. **Balance** the need for staff supervision of client areas with opportunities for staff to have private conversations and respite from client duties.

7. **Ensure staff have easy access** to personal areas (lockers) for belongings.

8. **Identify safety issues** for staff and clients and select flooring, furniture, and equipment to help reduce risk.

9. **Plan for the transition** to a new space to help clients adjust to changes in routine.