

Foresight Future of an Ageing Population - International Case Studies

Case Study 4: Housing for Dementia and Integrated Care in the Netherlands

Foresight Theme: Adapting housing

This case study will look at two contrasting examples of accommodation for older people in the Netherlands, comparing the successful care of dementia, as exemplified by De Hogeweyk, a 'Dementia Village', with accommodation for independent living with integrated care as exemplified by the award winning Pelgromhof project.

Context

The Netherlands has a similar life expectancy at age 65, but lower healthy life expectancy than in the UK.¹ It has a contributory social insurance scheme that covers home-based personal care and long term institutional care for all those with chronic conditions.

With a population 17 million in 2015, the Netherlands is one quarter of the size of the UK. In 2013, 4.2% of the population of the Netherlands was aged eighty or over (4.7% in the UK) and this is anticipated to rise to 11.3% by 2050 (9.3% in the UK).²

Long-term care in the Netherlands is covered by the Dutch long-term care insurance scheme, *Algemene Wet Bijzondere Ziektekosten* (AWBZ) to which employees contribute 12.5% of earnings, capped at €4,000 per month.³

Dementia Care

Dementia is a degenerative condition with no known cure. The symptoms, such as memory loss, cognitive impairment, difficulty communicating and changes in mood get worse over time. These experiences are distressing for the individual and upsetting for their loved ones. The emphasis therefore is on providing people living with dementia, and their families, the best possible quality of life throughout the period of dementia, ensuring the right long-term care is in place and being delivered.⁴

The prevalence of dementia is age related but, at any particular age, the prevalence may be falling as overall health in early and mid-life improves. Never-the less 40% of people aged 85 and over will develop dementia and be in need of long-term care.⁵

The Netherlands has a number of examples of residential care for people with dementia, carefully designed to offer a more home-like, normal and enjoyable experience.^{3,6,7}

¹ Luijben, Galenkamp & Deeg (2012) Mobilising the potential of active ageing in Europe: Trends in Healthy Life Expectancy and Health Indicators Among Older People in 27 EU Countries

² European Commission (2015), *The 2015 Ageing Report*

³ Tinker, Ginn and Ribe, (2013) *Assisted living platform – The long term care revolution: A study of innovatory models to support older people with disabilities in the Netherlands.*

⁴ Alzheimer's Disease International (2013), *World Alzheimer Report 2013: Journey of Caring, An analysis of long-term care for dementia*

⁵ Wu, Fratiglioni, Matthews, Lobo, Breteler, Skoog and Brayne (2015), *Dementia in western Europe: epidemiological evidence and implications for policy making, Lancet Neurol 2015*

De Hogeweyk is one such dementia care facility, modelled as a village or neighbourhood, located at Weesp in the Netherlands, 8 miles south east of the centre of Amsterdam.

De Hogeweyk

History

The idea behind De Hogeweyk is that older people with dementia, in need of nursing home care, will be happier if they can experience as 'normal' a life as possible, a life they recognise and understand, similar to that they knew before getting dementia, reassuring and not at all like a hospital or traditional care home. They should be able to live with a small group of like-minded people, with whom they feel at ease, so they can satisfy the need for social contact with the mental health benefits that brings.

In 1993, a group of managers at the Hogewey nursing home in Weesp, run by Vivium Hogewey, unhappy with the framework for the care on offer, implemented these ideas by converting one building to look like several small-scale homes. Eventually it was decided to demolish the original nursing home and implement the ideas in a purpose built facility. The new facility was opened in stages in 2008-10 and was renamed De Hogeweyk, as 'weyk' resembles the Dutch word 'wijk' meaning a district or neighbourhood.

Implementation

Unlike the original nursing home, which was built in a central location with gardens around, De Hogeweyk has its main accommodation around the edge and contains an area of streets, squares, alleyways gardens and a park, within which the residents with dementia can move safely and securely.



⁶ Verbeek et al (2009), *Small homelike care environments for older people with dementia: a literature review*, *International Psychogeriatrics*, 21(2), 252-264

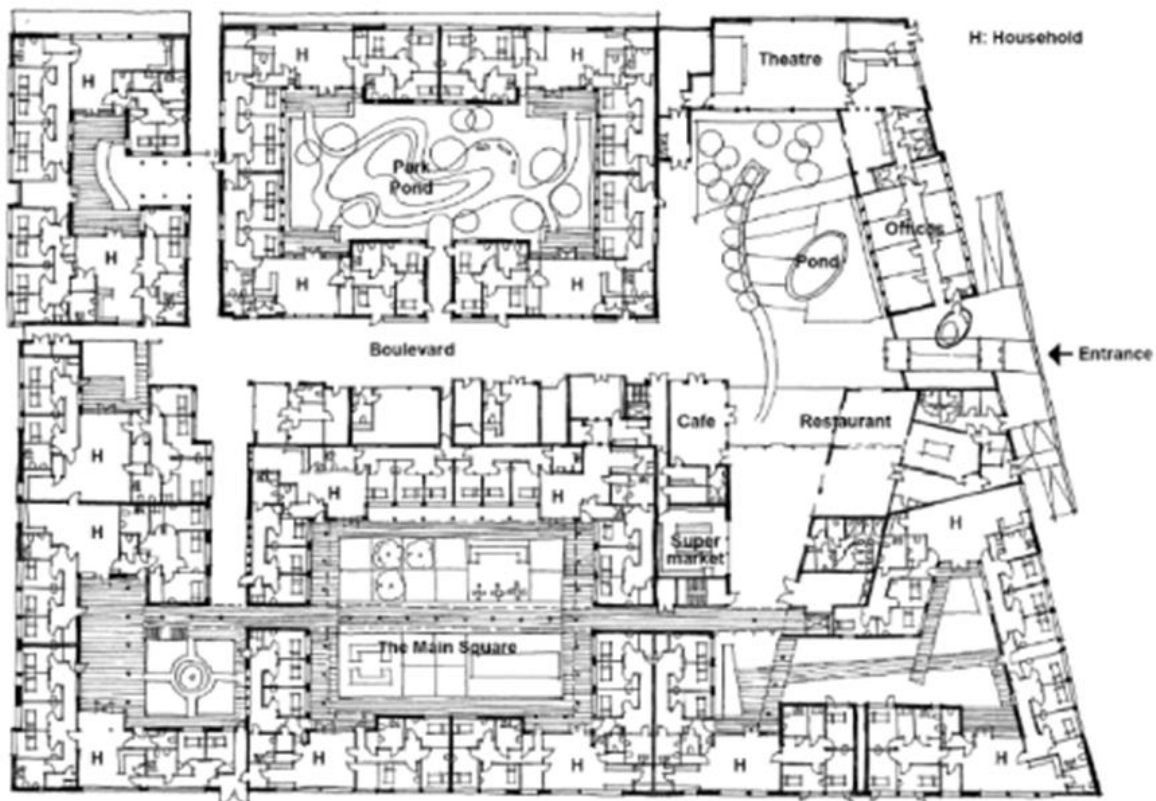
⁷ De Rooij et al (2012) *Living with dementia in small-scale and traditional long-term care settings: A longitudinal comparative study on residents, family and professional caregivers in the Netherlands and Belgium*

The accommodation, for the 152 residents, is organised as 23 households, each made up of 6 or 7 residents. Each household has a kitchen, and dining and living areas. Bedrooms within each household are single occupancy, except one which may be used when a resident first arrives to get them used to the household.

Residents eat and relax together and can help with food preparation within their own household.

Households are grouped, designed and decorated to reflect one of seven lifestyles, so that the person with dementia feels they are among 'like-minded' people. The seven lifestyles, which have been validated to reflect groupings within Dutch society, are *Traditional*: for people whose pride and identity came from carrying out a traditional profession or managing a small business; *City*: for people who were at the centre of urban life; *'Het Gooi'*: named after an area near Weesp, for people who attach importance to correct manners, etiquette and external appearance; *Cultural*: for people who love art and culture; *Christian*: practising your own religion forms an important part of daily life; *Indonesian*: life in the part of the world covered by the former Dutch East Indies is a collective memory and determines the daily routines to a large extent; *Homely*: caring for the family and household are important, just like a traditional lifestyle.

Each household has a dedicated team of 6-8 staff who work two at a time, helping and caring.



Half of the development is 'outside'. Residents have to go 'outside' to reach the communal facilities which include shops, cafes a theatre and a traditional Dutch pub, as well as for communal activities such as art classes.



Nursing staff merge with the residents. The facility has around 250 staff, (the equivalent of 170 full time), supplemented by the work of 140 volunteers. Voluntary work in care homes is common in the Netherlands.

Basic development costs were met by the Dutch long-term care insurance scheme (AWBZ), but an additional €1.5 million was raised from private donations to create facilities of the required standard.

Each place costs €5,800 (£4,500) per month, paid for by AWBZ but residents may also contribute towards this, up to a maximum of €2,400 (£1,850) per month.

Residents have an average age of 84 and live in De Hogeweyk until death, typically 3½ years.

Impact

In a more general sample of Dutch residents in small-scale residential dementia care settings, compared with residents in traditional settings, it was found that the residents in small-scale settings had higher mean scores on 'social relations', 'positive affect', and 'having something to do'. Moreover, mean scores on 'caregiver relation' and 'negative affect' remained stable over time among residents in small-scale settings, but decreased in traditional settings. These differences could not be explained by differences in behavioural characteristics, behavioural intervention or social interaction. Residents in small-scale settings were also more socially engaged and better able to perform activities of daily living than residents in traditional settings.⁷

Over the period from 1993 to 2008, following the introduction of the small group structure, Hogeweyk residents were found to have reduced need for continence materials and sleeping pills, reduced levels of challenging behaviour, and almost total lack of a need for ground or mashed food.⁸

Vivium Care Group, who run De Hogeweyk, carry out an annual client satisfaction survey and, in 2010, the average score for De Hogeweyk was 9.1 compared with a countrywide average of 7.5.⁹

⁸ Jannette Spiering (Director), 8th June 2013, Presentation to the Royal Society of Medicine

⁹ Sarmento (2015) Hogeweyk: Bringing life to those who have forgotten

Integrated care

Pelgromhof

History and Implementation

Pelgromhof is a development in the centre of Zevenaar, a Dutch municipality 8 miles from Arnhem, near the border with Germany and about 60 miles south east of Amsterdam.



The aims and objectives of the project were to meet the needs of older people who wish to live independently and to provide a range of care options so that people do not need to move away from the complex as they become increasingly frail. At the same time, the project wished to use environmentally sustainable construction methods to provide the accommodation.



The project integrated social housing with healthcare and public facilities, including a restaurant, shops, a theatre, a library, additional services and parking. The complex has 215 apartments, 169 of which offer independent living with a nucleus of 46 apartments, around the social centre, providing sheltered accommodation¹⁰, 38 of which are geared up to provide full care.¹¹

¹⁰ Canadian Mortgage and Housing Corporation – Innovative Buildings. *Pelgromhof: Sustainable and energy-efficient living in the Netherlands.*

¹¹ World Habitat Awards – Finalist (2004), *The Pelgromhof*



Pelgromhof is an early example of a large project which applies the ideas of 'organic architecture'. Energy and water savings were achieved by individual heat pumps and boilers as well as the use of roofs planted with varieties of sedum. Sedum is a succulent plant that can survive both heavy rain and drought. The roofs can absorb rainwater which evaporates slowly with any excess running off into a three-level pond in the central garden.

Pelgromhof also incorporated the idea of flexible and open housing. Each flat contains central services in a fixed location but the room layout has flexibility around the central core.¹² The first tenants were involved with the architects in deciding the layout of their own apartments.¹¹

The Pelgromhof design was selected from 151 projects in a national competition for a model project in sustainable and energy-efficient construction. Planning began in 1995 and the first residents moved in, in January 2000.¹¹

The project cost around £13 million to complete^{10,11} and, in 2016, rents start at €750 (£580) per month, depending on the size of the apartment, and the service charge, including meals, personal alarm service, linen service and internet, is €1,250 (£970) per month.¹⁴

Impact

In the early years the Pelgromhof project was highly thought of and had high hopes and expectations.

Pelgromhof is administered by the housing company Baston Wonen and by the Pelgrom Foundation who employed the care company Diafaan to carry out the care required within the complex. Diafaan, has been criticised by local politicians¹³ for gradually running down the facility and, faced with financial difficulties, in 2014-15 moved 23 of the 46 sheltered accommodation residents to an alternative local care facility, *Hunneveldweg* in Zenevaar.

Care at Pelgromhof has however, since January 2016, in agreement with Diafaan, been taken over by the organisation PercuraZorg (Percura Care) who have promised to 'return Pelgromhof to its former glory'.¹⁴

¹² Frans van der Werf (2005) *Open building and sustainability in practice*, World Sustainable Building Conference Tokyo, 27-29 September 2005

¹³ <https://rijnwaarden.pvda.nl/2014/08/11/pvda-zevenaar-rijnwaarden-verdrietig-over-ontwikkelingen-bij-diafaan/> (in Dutch)

¹⁴ <http://www.percurazorg.nl/locaties/pelgromhof/> (in Dutch)