

MEETING 1 - 3/25/19 - Notes

Date March 28, 2019

OIH Rachel Day, Director of Human Services, Nantucket
Brett Lennerton, OIH Administrator
Ella Finn, Landmark Building Director, OIH Work Group
Dave Fredricks, OIH Work Group
Denise Kronau, Finance Committee

LWDA Ruth Neeman, Jonathan Gyory, Keith Bradley

Job # 18150

Kick off meeting took place on 3/25/19. Project goals, program and logistics were reviewed. The plan for the new OIH will cluster resident rooms in a residential fashion around common rooms but will operate as a larger nursing unit for the DPH licensure.

The general intent for the new OIH is a resident-centered environment in line with current and future resident expectations for purposeful life with personal choice.

1. Program Requirements: Resident Units

- a. Desired bed count - 45 total beds, probably 35 singles + 5 doubles (for couples, sisters, mother/daughter). There are ongoing discussions with Clifton Larson Allen (CLA), exploring 35 SNF beds and 10 rest home beds. There is a need on the island for a level of care that is lower than SNF but higher than AL. The impact on staffing two separate nursing units (required if 2 levels of care are used) needs to be reviewed.
- b. Current census fluctuates between 35 - 45. The goal is to keep OIH fully or partially in operation and all residents on site during construction; Landmark Building not available for swing space during construction.
- c. The concept of building single occupancy rooms that can legally house 2 residents during construction not a problem, they live this way now.
- d. Previous study by SMRT working assumption was that resident census might reduce to 35 or 36 during construction.
- e. Need to maintain license for 45 beds. The new State regs for BOOS will be reviewed to avoid risking the loss of licensed beds.
- f. One of the proposed Resident mix options considered is SNF/ Level II and a lower level care such as Rest Home/ Level IV) or AL: Level II (approx. 40 beds) and Level IV/ AL (approx. 5 units). The DPH attitude towards mixing licensed beds and AL needs to be reviewed.
- g. No other option on island for Level II. Would be preferable to cluster AL residents in one wing / neighborhood; but design all units to meet 1B Construction and SNF regulations for Long Term Care to allow flexible response to care needs on the island.
- h. Currently residents with dementia are integrated within the overall OIH population. Safety and security are managed by delayed egress mechanism on all exterior doors and wearable door control system for residents that are at risk of wandering.
- i. There is a need for dementia care, hospice care, short term rehab within these numbers. Refer to Clifton Larson Allen report for resident mix; recommended 35 Level II beds + 10 beds in separate unit for other categories.

MEETING 1 - 3/25/19 - Notes

- j. No need for distinct specialty care unit (e.g., dementia, short stay rehab). Since the recommended new layout is based on rooms clustered around living rooms (Small Households), there will be an opportunity for living arrangements that cluster residents with similar needs. VNA provides hospice/ palliative care as overlay service, but not as dedicated unit.
- k. Small House Residential Unit concept: LWDA to explore implications of Small House approach to operations and plan.
- l. Current admissions rate: 1 - 2 residents / month is expected to continue.
- m. Mobility: approx. ½ of the current resident population are in wheelchairs, most others use walkers or canes, very few bedridden.
- n. Three-fixture bathrooms will be provided in the new OIH for each room; no shared bathrooms between two rooms, per current CMS/ Medicaid regs.
- o. One common tub (auto bather) will be provided for the building unless a waiver from DPH can be obtained.
- p. Level II support spaces as required per DPH regulations (Clean and Soiled Utility, Housekeeping, Storage, Meds, etc.)

2. Program: Common Spaces

- a. Main Dining: large enough to serve 2/3 census = 30 residents. Can be set out as “casual” / Café / Bistro Dining that can serve staff and visitors as well.
- b. Small House Dining: Compare “Main Dining” approach above to “Small House Dining” concept where each unit --i.e., 10 beds or 20 beds-- enjoys their own Dining Room, residential in scale and feel with choices in menus and dining times-- where residents can visit other’s units and eat there for greater variety of social settings. To be discussed in future meeting
- c. Private Dining on Unit: for residents who need extensive care/ assistance; also useful for visiting family meals, parties.
- d. Alternate food service options besides on-site Temporary Kitchen to explore during construction: how long is it realistic to maintain?
 - i. Kitchen trailer service - per Shelburne Commons
 - ii. Meals on Wheels
 - iii. Catering and Grilling
- e. Common spaces: multiple Activity Spaces. Flexible open spaces for birthday parties, receptions, lectures, etc.; typically, open to general circulation for casual social interaction but capable of being acoustically separated for special functions.
- f. Other potential Activity Spaces: to house games, exercise, greenhouse, arts and crafts, library, and quiet activities, music, etc.
- g. Multipurpose Conference Room with A/V: accommodate 30-40 set up with folding chairs, or 20 at a table for meetings, training (e.g., CPR, Narcan)
- h. Large Multi-Purpose rental space with separate entrance potentially useful for Town government as well as citizen groups, and related uses such as Med Offices or Outpatient Rehab in conjunction with Inpatient Rehab services. Town uses may be Emergency Preparedness, Polling Station, meeting space and other “in-reach” uses for community, to be explored.
- i. Emergency Power: As required by DPH regulations which cover elevators (hole-less hydraulic to avoid flooding issues). Generator could be sized to also serve Landmark House elevator. Brendan Coakley, Emergency Preparedness Director will be interested; Rachel to follow up.)

MEETING 1 - 3/25/19 - Notes

- j. No Adult Day Program is being considered: this is accommodated in the Saltmarsh Senior Center, which provides most community outreach programs.
- k. No Day Care Center for staff is being considered: A day care service cannot be limited to OIH staff only-- potential eligibility among different town unions could become a challenge.
- l. No Staff Housing on site is being considered: landlord issues; how to vacate when they are no longer employees.

3. Site selection: Why stay here?

- a. The 1st Feasibility Study by SMRT did not recommend the current site because
 - i. Alternate site was assumed to be substantially less costly: single build on a single story vs. 2 story phased construction on current site.
 - ii. Potential temporary disruption/ relocation of residents to other sites during construction.
 - iii. DPH concern with storm surge.
 - iv. The team did not gauge the level of citizenship passion for the current site.
 - v. The "Greenhouse" concept was not explained to the community with sufficient level of clarity to garner the level of support the team expected.
- b. This Feasibility Study is limited to the current site because
 - i. View (although actually not many rooms with view in current building)
 - ii. Tradition: this is where OIH has always been.
 - iii. Cost of preferred alternate site grew due to Indian artifacts and forced sewer line that couldn't be relocated.

4. Illustrative Schemes

Preliminary sketch concepts were reviewed and elicited the following remarks:

- a. No sentimental attachment to existing building, only if makes practical sense to keep.
- b. Small amount of demolition before Phase 1 construction acceptable; resident census may drop as low as 36 temporarily.
- c. Resiliency: Elevating 1st Flr as high as possible on site makes sense for resiliency and longevity; favors demolishing existing building. NOAA expects sea level to rise between 19" - 47" by 2100; try to raise 1st Flr from current elev. 14' +/- up to elev. 19' or 20'.
- d. All resident rooms on one floor preferred for staffing flexibility.
- e. Two-story scheme is probably more realistic with resident rooms on 2nd Flr.
- f. Landmark House residents understand current views may be modified by new building.
- g. Neighbor concerns: some abutters may be sensitive to views, noise, emergency lighting; other abutters should be supportive of project.
- h. Parking: consider shared common parking with Landmark Building, closer to the way site operates currently. Relocating some of Landmark's parking to the front for the site is a possibility.
- i. Fire truck access: The FD is interested in creating a second means of access to the site as part of his project. Exit to adjacent abutter driveway on east side or create exit path next to Landmark House that would go past (through?) resident garden.
- j. Prefab/ modular components: potentially to save time; LWDA to research before Charrette.

MEETING 1 - 3/25/19 - Notes

5. Survey

- a. Survey to include Landmark House property to allow for coordinated parking layout.
- b. Rachel to contact Steve Glowacki directly at RJ O'Connell [(781) 279-0180 x125, steve.glowacki@rjoconnell.com] to commission survey ASAP (not included in LWDA proposal). If the survey work is subcontracted to a surveyor on the island, RJ O'Connell will provide the specification to the level of accuracy needed (contour lines spacing, utilities, etc.)
- c. Steve and/or surveyor to attend engineering walk-thru, tentatively scheduled for April 8 or 9.
- d. Brett is away April 9 - 12, LWDA to coordinate engineering site walk with Ed Long if Brett is away.
- e. MEP engineers - CES to review recent SMRT renovations and 2014 MEP Survey by SED.
- f. LWDA to scan existing drawings and return originals April 8 or 9.

6. Design Charrette May 10

For the sake of transparency and involvement of all potential stake holders, a work Charrette will take place early in the process. The Town and OIH will determine the invitee list.

- a. Invitees: Ella Finn/ Landmark, Friends of OIH (5) and Building Committee (4-7)
- b. Where: Police Station or Dreamland Theater. Rachel to arrange location and set up with Town IT Director.
- c. FAQ: to publicize design process and promote transparency, a list of FAQ questions will be posted on line for public review that will link to Town website
 - i. Rachel to send LWDA preliminary list of FAQ by April 15.
 - ii. Keith to create mock-up for one-page website for FAQ with links by April 17.
 - iii. OIH to review website mock-up by April 19 for site, to go live by April 23.
 - iv. Website will solicit public input-- more questions-- by email only.
 - v. Website will be updated before Charrette.
- d. Keith will write a draft agenda for Charrette.
- e. LWDA will arrive May 9 to set up as required.