

### SIPING JING LAO YUAN



**Project report** prepared by:

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#### Experience design

Interactions and Environments

Course code: 2270033 Prof. Kaja Tooming Buchanan

#### Tongji University

College of Design and Innovations

### CONTENTS

Executive summary History and informations Site map and informations Mission and vision Design and management challenge General purpose Design process Preliminary concept of home Concept of home Issue mapping strategy Users profile Issue map structure Areas of issues Areas of issues, Problem statement, Hypothesis Preliminary ideas Final idea Visualizations and examples Significance List of figures

### The Jing Lao Yuan Nursing Home in the Siping Community in Shanghai started in 2008. It was the Siping community government that initiated the development of an idea for a day and night care place for the elderly on Tieling Road more than 10 years ago.

The nursing home is supported and run by the Siping Community government. However, every resident needs to pay every month 1800 RMB for his or her "bed." In addition, residents also need to pay for their nursing level: 1400 RMB for mild, 1600 RMB for middle, or 1800 RMB for severe nursing level.

The nursing home has a total of 39 staff members: 3 managers, 3 doctors, 21 nurses, 3 security workers, and others, who take care of different tasks in the facility, such as cooking, washing clothes etc.

The nursing home has three nursing levels: mild, middle and severe. The distinctions between the nursing levels are decided by Chinese government policy and are official names for all nursing homes in the country.

The nursing home has a total of 80 beds and 78 residents. All beds are occupied all the time, except two beds, which purposely are held "vacant" for emergency situations. The nursing home has 48 people in the mild nursing level, and 30 in the middle and severe nursing levels. According to the Head of the nursing home, Mr. Xu, the waiting time to get a place in the nursing home could be quite long and can vary. The average age of the residents is 85 years.

At the mild nursing level, the nurse needs to take care of 20 residents in a 12-hour working shift. At the severe nursing level, the nurse takes care of a maximum 6 people. In the severe level every room has its own nurse who takes care of elderly for 24 hours.

Nurses are chosen very carefully and they need to complete a 2-week educational course before they start working at the nursing home.

# **EXECUTIVE SUMMARY**

# FF-3100232)

Fig. 1 map of the area in 2006

2006

2008 - 2017

Siping Jing Lao Yuan

A 2 storey buliding

with 16 rooms was

added in 2007

Kindergarden

# 學怡花园

Fig. 2 map of the area in 2017

### HISTORY AND INFORMATIONS

Support by the Siping Community government.

1800 RMB per month + payment for the nursing level:

mild: 1400 RMB middle: 600 RMB severe: 1800 RMB

39 staff members:

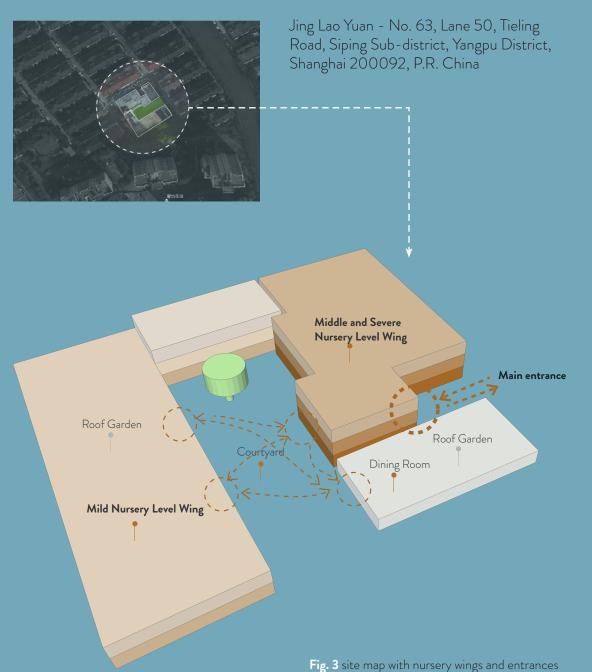
3 managers

3 doctors

21 nurses

3 security workers

others



### SITE MAP AND INFORMATIONS

#### 78 residents

mild nursing level: 48 people middle and severe nursing levels: 30 people **80 beds** (2 beds for emergency situations)

Mild nursing level: the nurse needs to take care of 20 residents in a 12-hour working shift

Severe nursing level: the nurse takes care of a maximum 6 people for 24 hours

Nurses are chosen very carefully and they need to complete a 2-week educational course before they start working at the nursing home

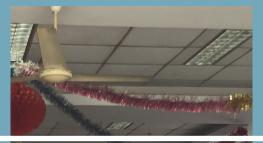






Fig. 4 residents

dining room

having lunch in the

### MISSION AND VISION

Siping Jing Lao Yuan assists and takes care of people, following them through their eldership. It contributes to improve the quality of life in respect of their autonomy, in a family environment where everyone can feel at home and where every operator represents and answers to the needs of the elderly and his family.

MISSION

Siping Jing Lao Yuan is a place in which the elderly is appreciated with all his qualities and characteristics as a valuable member of the society. They are supported during the more fragile period of their existence, to make this part of their life equally enjoyable and delightful as the years that have gone by.

VISION



### DESIGN AND MANAGEMENT CHALLENGE

New residents at the Jing Lao Yuan nursing home in the Siping Community in Shanghai have difficulty adapting and being integrated into their new "home" in a new physical, social, and cultural environment.

Fig. 5 residents spending time on the balcony



### GENERAL PURPOSE

Facilitating the transition of new residents from their usual surroundings to their new home, while considering our definition of home as a protective and affectionate environment.

Fig. 6 staff member shaving a resident

# DESIGN PROCESS

#### Readings & Research Skills Learning

eveloping maps about the Concept of Home.







#### Discovery

Design(Richard Buchanan). cus on the Siping Jing Lao Yuan.





#### Phenomenological observation

Determine the aspects for observations.
Develop the observations in five steps: ASPECTS,
DESCRIPTION, INTERPRETATION, ANALYSIS and





#### Interview

nterview the target group(residents, nurses, etc.) and analyse their answers.





#### Problem Statement

Get Conclusions from Observations and Interviews. Identify AREAS OF ISSUES based on conclusions.





### Development

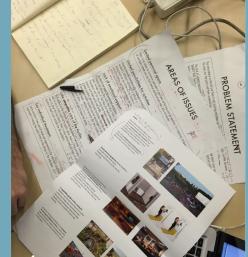
oblems, and integrated alternative ideas.

### Significance

#### Presentation

#### **ISSUE MAP**





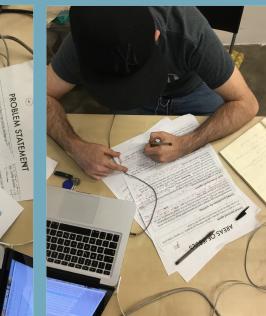


Fig. 7 timeline of the team's design process

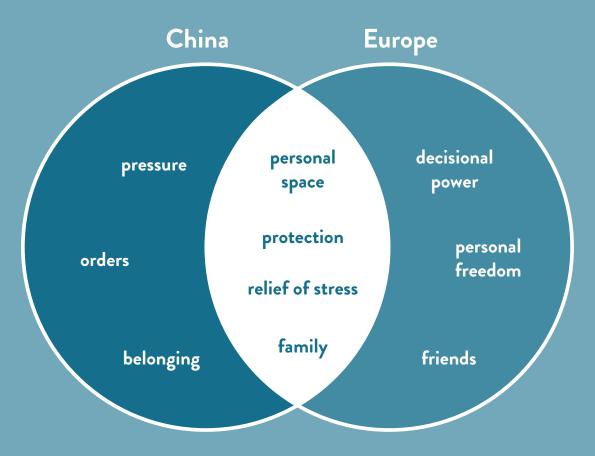


Fig. 8 diagram of the concept of home (differences between China and Europe)

# PRELIMINARY CONCEPT OF HOME

In order to explore the concept of home we started with a discussion about important values that define "home" for each of us. The discussion led to different interpretations due to our different cultural backgrounds.

We then used the **common values** in combination with **Daniel Goleman's theory of empathy** to create a map that helps us gain further insight.

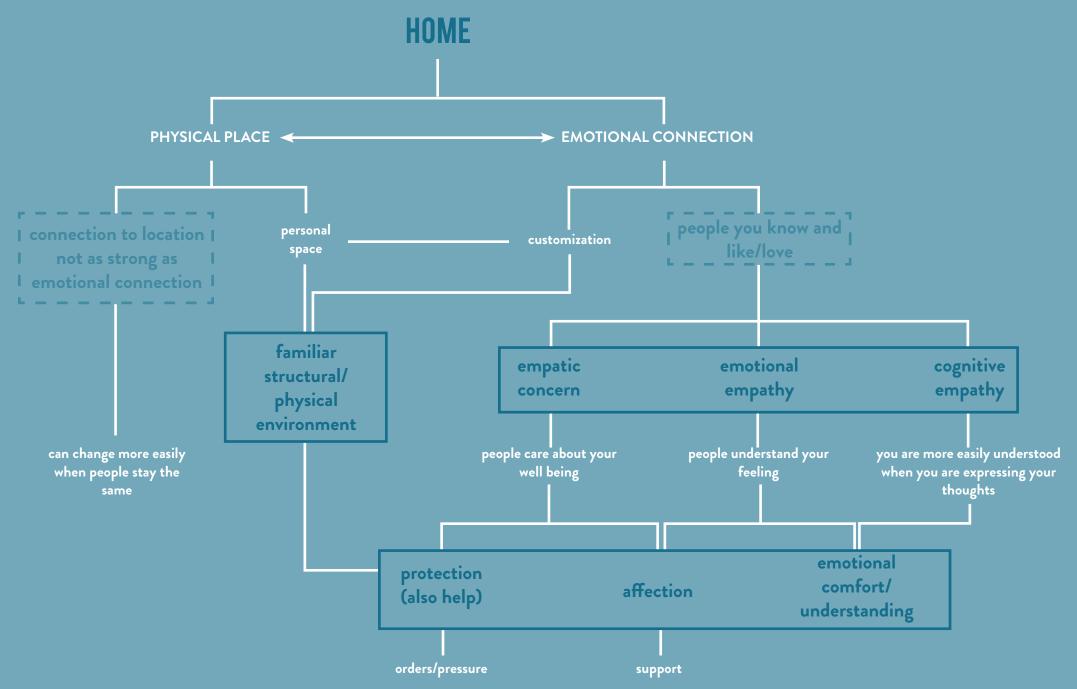


Fig. 9 map of concept of home





### CONCEPT OF HOME

The concept of home is linked to one or sometimes multiple physical places that you have an emotional connection to.

Your home provides a protective and affectionate environment bacause you are familiar with structural surroundings and have an empathic relationship with the local people.

Fig. 10 residents playing Majiang

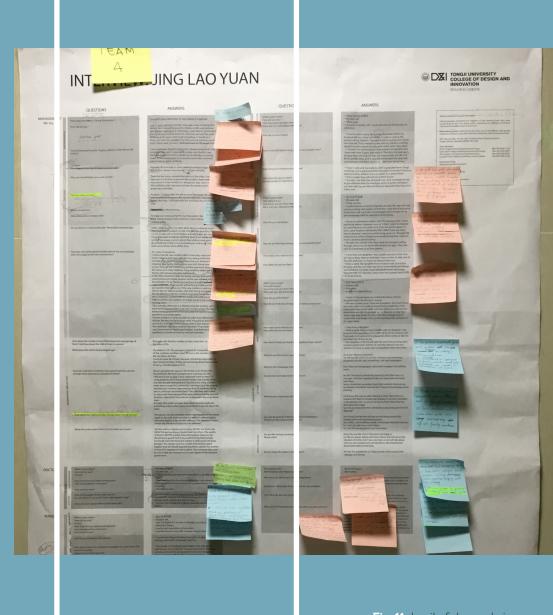


Fig. 11 detail of the work-in-progress issue map

### ISSUE MAPPING STRATEGY

"Issue mapping is a strategy. It is an evidence-based discovery tool for identifying issues that constitute problematic situations. It is a successive process that unfolds over time and has its own set of methods. These methods help to identify the places for issues, analyse their contextual belonging, and relevance to problematic situations."

Kaja Tooming Buchanan

Methods:

Phenomenological observation
Semi-structured interview



#### Phenomenological observation

Observing phenomena from diverse points of view as they are presented in direct experience, without theoretical and historical constructions.



Discovering the status quo of the different user groups interactions between each other and their interactions with the envirmonment.

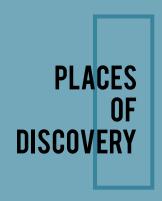


Chen Sinan: 4 times: 5.5 hours
Qi Qi: 4 times: 5.5 hours
Tim Schwarz: 4 times: 5.5 hours
Lucrezia Triolo: 4 times: 5.5 hours





Fig. 12 developing issue map



#### People to people interactions

Middle and severe nursery level wing (dining room, passage ways, berooms)

Mild nursery level wing (passage ways, berooms)

#### People to environment interactions

Middle and severe nursery level wing (dining room, passage ways, berooms)

Mild nursery level wing (passage ways, berooms)

Courtyard

Facility





#### Semi-structured interview

Open method of research, allowing new ideas to be brought up during the interview as a result of what the interviewee says.



Gathering general informations about the facility, especially about relevant topics like adapting to the situation, relationships between the users, the challenges the users have to face and the social interactions.



Xu Agen Manager Resident SongJuhong He Jindi Resident Resident Sun Cayu Mr. Zhang Family member Ms. Zhu Nurse Ms. Gao Nurse Doctor Wu Aiqin





Fig. 14 interview with Mr. Xu

Manager - Mr Xu basic informations

**TARGET** 

**GROUPS** 

daily work

challenge

informations about

Jing Lao Yuan

Residents basic informations

living situation

family activities

social interactions

basic informations Family members

relationship with residents

interactions

Nurses basic informations

> adaption activities

socal interactions

Doctor basic informations

activities

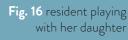




Fig. 15 interview with a resident







# USERS PROFILE

**Age:** 67-107 years (Average: 85.6) **Gender:** 25% male, 75% female

Origin/location: Shanghai (General: in Siping community)

Time spent in the center: 24 hours

Disabilities: 38% self-care 62% no self-care

PRIMARY USERS RESIDENTS

Age: Around 65 years old

Origin/location: Shanghai (General: in Siping community)

Time using the center: 0-6 hours/day

How many times they come: Minimum weekly, Maximum daily

Family role: Predominantly children

Age: Around 64 years old

Origin/location: Shanghai (Typical: nurses are from out of SH)

Time working at the center:
-managers: 5:30am-17:30pm;
-nurses&guard:0:00am-24:00pm;
-doctor&logistics: 8:30am-17:30pm

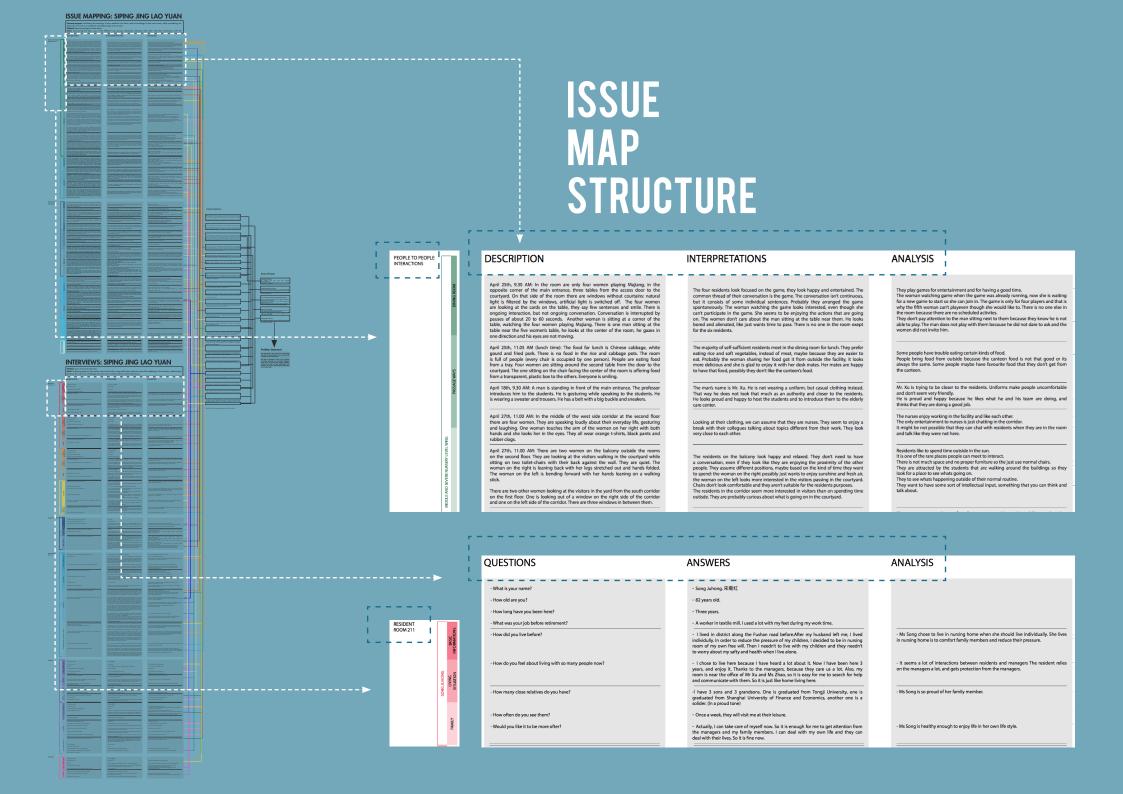
Position: Manager, nurse, doctor, guard, logistics(cook, assistant)

Family: Single or married

Working hours: 24hours (9-12 hours)

SECONDARY USERS FAMILY MEMBERS

TERTIARY USERS STAFF MEMBERS



#### ISSUE MAPPING: SIPING JING LAO YUAN **ISSUE AREAS OF ISSUES STRUCTURE** Limited Personal Space: The residents don't have much room customize and make it their own. They don't have enough private space that can serve as a sanctuary in which theycan find shelter. Limited Possibilities for Activities: It is difficult to find suitable activities for everyone because of limited space and the resident's different abilities. Mr. Xu has tried to use the dining room to offer various activities but the room is not usable as a **CONCLUSIONS** Lack of Interpersonal Interaction and Emotional Support: Nurses are too busy with their basic tasks to engage in an empathic conversation with the residents. Family members have little time to visit while the residents are longing for personal contact. Residents don't have many activities to choose from during the day other than TV. And Residents of different care levels do not have contact to each other there is no planned activity schesule in the nursing home, so residents have to find There is no connection to the outside world and young people. activities, especially something useful. But they like spending time together, playing games and enjoying other peoples presence, instead of being passive in their rooms. Little Care of the Facility Some pieces of equipment don't suit their purpose well or are in a bad The nursing home provides a thought out meal schedule for the whole week, but not condition because of insufficient maintenance. for residents individual requirements and taste. Families have to pay for a meal suitable There are few places to rest or exercise in the shared areas of the facility. for their relatives or to prepare it themselves. Although residents don't have a healthy Little Individual Treatment Even though some residents have special needs and requirements there is little individual treatment like specific medication or food that Nurses don't have enough spare time. And there are not enough nurses taking care of residents. In the middle and severe room with 8 residents, there is only one nurse. is fitted to their likings. So residents have to wait for feeding one by one. And the work the nurses have to do is demanding. During the whole day (24 hours), they have to focus on the residents needs, and they don't have time for breaks. Some even don't have a right place to rest. iust on chairs. **PROBLEM STATEMENT** Some nurses are distant from the residents, they aren't interested in having any kind of relationship with them. A fixed nurse is easier to create a closer relationship with residents. And they don't know how to help residents patiently, the frustration might come from a feeling of helplessness. The atmosphere in the Jin Lao Yuan is not inviting and does not encourage the Most of the staff members are elderly people. (60+) And staff member's clothing is not appropriate for his job, some wear in dark color users to interact with each other or their environment. Residents enjoy interacting with new and young people. They like to have some new The lack of interactions results in the residents not being physically and mentally challenged which does not It's important to feel like you are part of what is happening in the world. benefit their health condition. It also means that no close relationships, and therefore no positive and homelike environment can develop easily.

The residents don't have much room customize and make it their own.

They don't have enough private space that can serve as a sanctuary in which they can find shelter.

#### Limited Possibilities for Activities

It is difficult to find suitable activities for everyone because of limited space and the resident's different abilities. Mr. Xu has tried to use the dining room to offer various activities but the room is not usable as a multifunctional area.

#### Lack of Interpersonal Interaction and Emotional Support

Nurses are too busy with their basic tasks to engage in an empathic conversation with the residents.

Family members have little time to visit while the residents are longing for personal contact.

Residents of different care levels do not have contact to each other. There is no connection to the outside world and young people.

#### Limited Care of the Facility

Some pieces of equipment don't suit their purpose well or are in a bad condition because of insufficient maintenance.

There are few places to rest or exercise in the shared areas of the facility.

#### Limited Individual Treatment

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Fig. 17 resident sitting near

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Fig. 18 exercises equipment in the courtyard

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Fig. 19 staff members at work

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### AREAS OF ISSUES

# PROBLEM STATEMENT

### **HYPOTHESIS**

Limited Personal Space

Limited Possibilities for Activities

Lack of Interpersonal Interaction and Emotional Support

Limited Care of the Facility

Limited Individual Treatment

The atmosphere in the Jin
Lao Yuan is not inviting and
does not encourage the
users to interact with each
other or their environment.
The lack of interactions
results in the residents
not being physically and
mentally challenged which
does not benefit their health
condition. It also means that
no close relationships, and
therefore no positive and
homelike environment can
develop easily.

If the facility provides surroundings that facilitate social interactions, all user groups can develop relationships that benefit their well-being. Further encouragement and improvement of interactions can lead to a healthy and homelike environment.

Turn the courtyard into a meeting point.

Social interactions and physical activities. Conversations, exercise, plants, music

Move daily activities to different areas.

Instead of everyone watching tv in their room, set up a big screen in the courtyard. That creates diversity in daily life, and also moves people to an area where there are more possibilities for physical activities.

Residents all sit on their beds watching tv., therfore they are in their beds all the time. Creating an area for watching tv enables people to sit together and maybe have a conversation (beds are too far apart for talking).

Also residents can go there if they want to be social and go back to their beds when they want be left alone.

#### A vegetable garden in the courtyard.

Residents can decide what they want to plant so they can shape their environment, also they have something that needs their daily attention which is a great activity for the residents.

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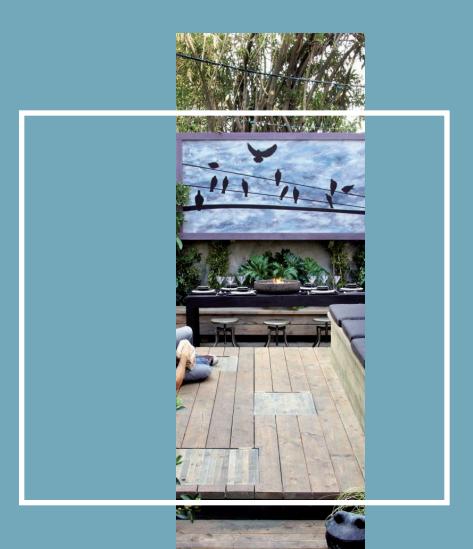


Fig. 22 example of outdoor movie screen

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Fig. 23 example of outdoor cinema

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Social interactions and physical activities. Conversations, exercise, plants, music

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#### A vegetable garden in the courtyard

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Fig. 24 example of TV lounge

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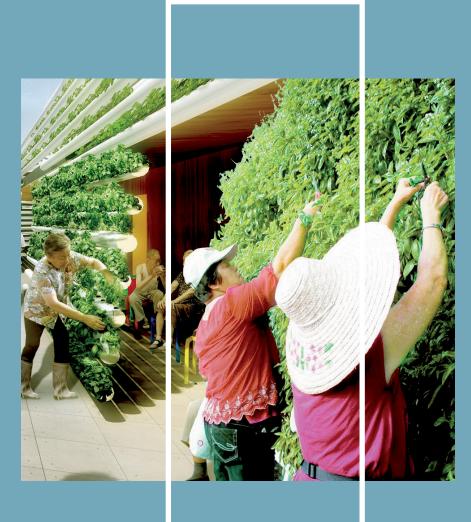


Fig. 25 example of urban gardening

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Fig. 26 example of street artist

### Turning the courtyard into the main meeting place of the Jin Lao Yuan where people of all user groups and also people from outside the nursing home can meet and have lively interactions.

### FINAL IDEA

For one part this is achieved by moving the residents activities to the courtyard where they can enjoy each other's company. Instead of sitting on the beds in their rooms watching TV, people can go to the lounge area in the courtyard and watch a movie on a big screen. If the area is more animated, people are also more likely to use the exercise equipment.

The other part of the idea is to provide parts of the courtyard as an open art space for shanghainese artists. Artists can use the space to realise projects and build installations that remain in the courtyard. By changing the installations every couple of months, a constant flow of artists and spectators can be created.

The variety of users and visitors and also constant change of the environment provides great opportunities and stimulation for exciting interaction.

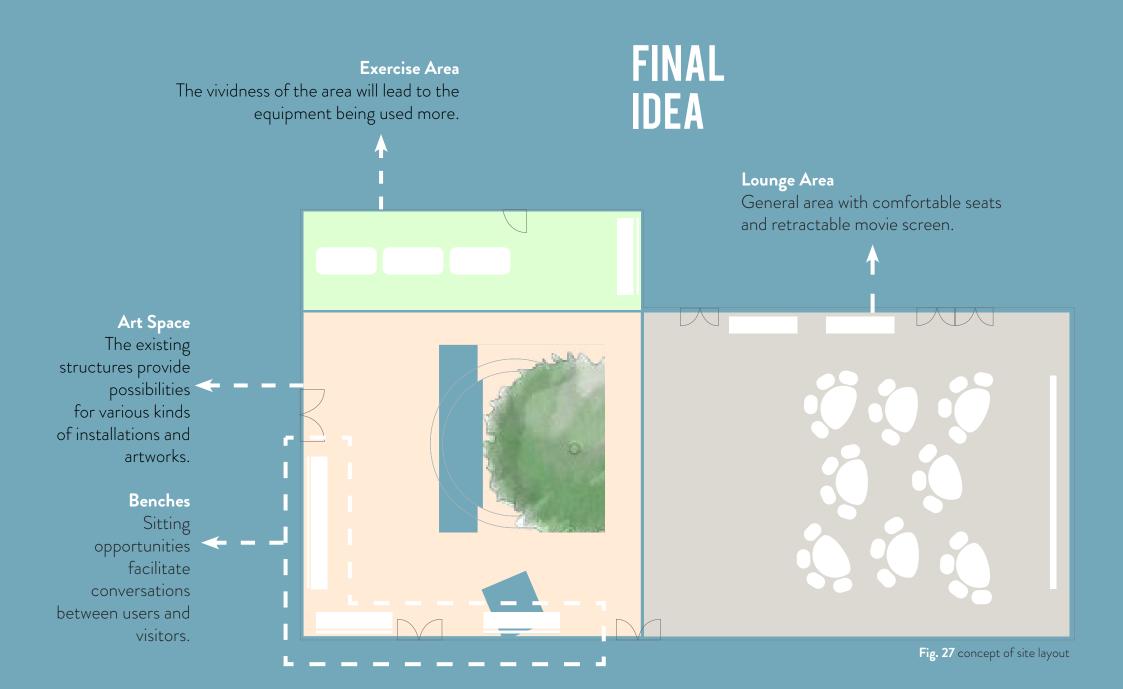




Fig. 28 visualization of the art space





### Fig. 29 visualization of the lounge areas

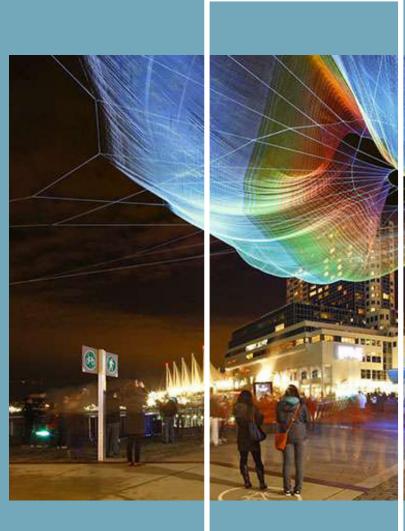




Fig. 30 example of art installation

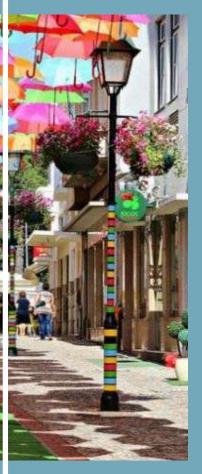


Fig. 31 example of art installation



Fig. 32 example of art installation

Fig. 33 example of art installation

### By creating a place where residents can easily interact with each other, they are able to form stronger and more empathic connections which, will make people feel at home and protected.

Having excited interactions with visitors from outside the nursing home will make the residents remain an active part of society.

Using the open space of the courtyard enables the users to pursue activities for which they did not have room before and also makes the bedrooms more calm and personal again.

### **SIGNIFICANCE**

Cover	residents playing Majiang
Fig. 1	map of the area in 2006
Fig. 2	map of the area in 2017
Fig. 3	site map with nursery wings and entrances
Fig. 4	residents having lunch in the dining room
Fig. 5	residents spending time on the balcony
Fig. 6	staff member shaving a resident
Fig. 7	timeline of the team's design process
Fig. 8	diagram of the concept of home
	(differences between China and Europe)
Fig. 9	map of concept of home
Fig. 10	residents playing Majiang
Fig. 11	detail of the work-in-progress issue map
Fig. 12	developing issue map
Fig. 13	working on issue map
Fig. 14	interview with Mr. Xu
Fig. 15	interview with a resident
Fig. 16	resident playing with her daughter
Fig. 17	resident sitting near her bed
Fig. 18	exercises equipment in the courtyard
Fig. 19	staff members at work
Fig. 20	detail of a degraded wall
Fig. 21	resident and his son
Fig. 22	example of outdoor movie screen
Fig. 23	example of outdoor cinema
Fig. 24	example of TV lounge
Fig. 25	example of urban gardening
Fig. 26	example of street artist
Fig. 27	concept of site layout
Fig. 28	visualization of the art space
Fig. 29	visualization of the lounge area
Fig. 30	example of art installation
Fig. 31	example of art installation
Fig. 32	example of art installation
Fig. 33	example of art installation

### LIST OF FIGURES



THANK YOU