



# Re-imagining Homes for Seniors Workshop Summary

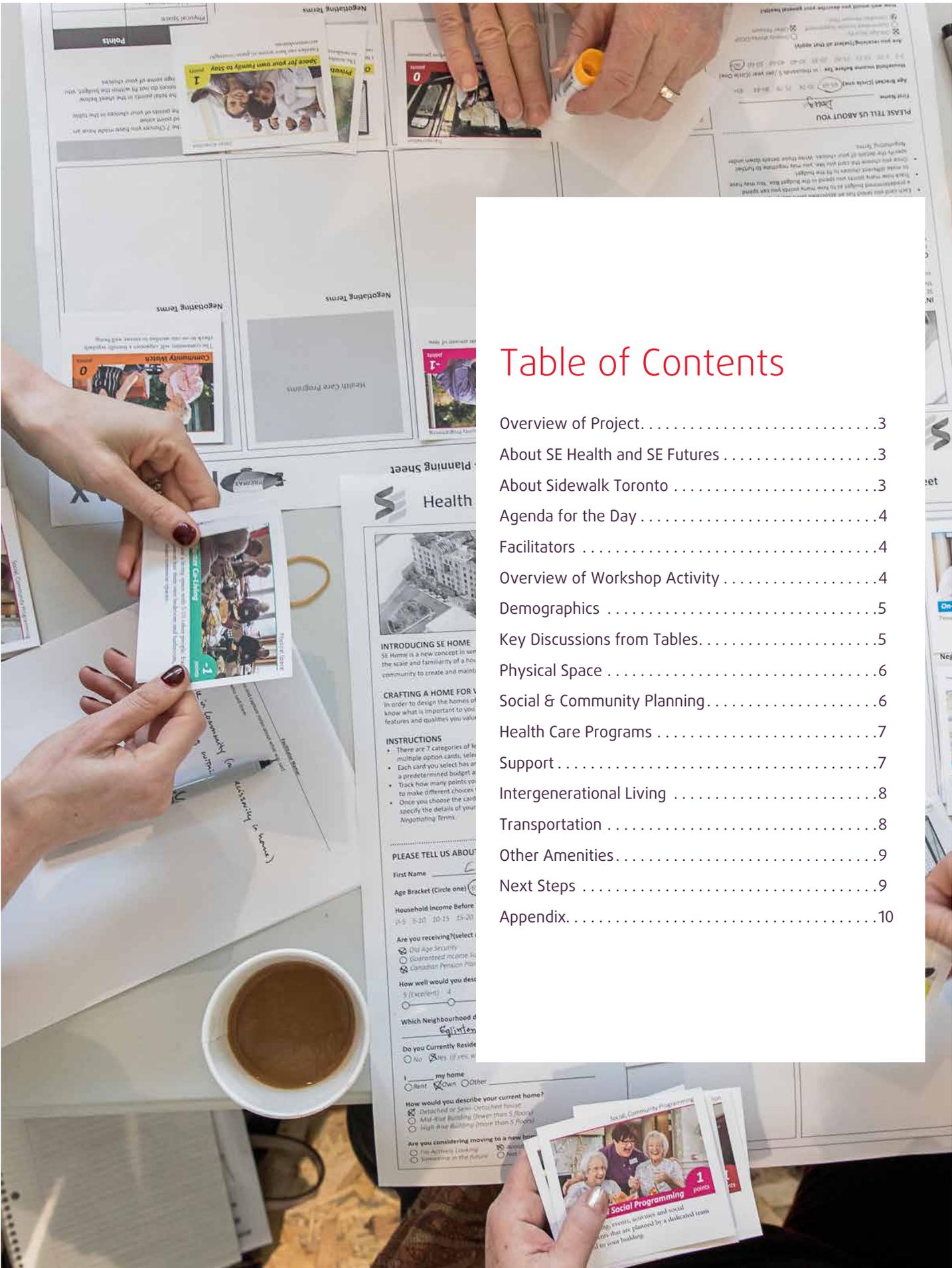
WEDNESDAY DECEMBER 19, 2018



Futures

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# Re-imagining Homes for Seniors

## Overview of Project

The Re-imagining Homes for Seniors Project is focused on exploring affordable housing for older adults; who currently comprise 15.6% of Canada's population and are projected to grow to 23% by 2030. With growing numbers of older adults, SE Health is undertaking research to identify opportunities and strategies needed to address the unmet housing and health needs of this population, as well as develop a series of minimally viable concepts. With various initiatives underway, at the federal, provincial and local level, as well as with public and private stakeholders, support for ageing-in-place is only suitable when you have a possible home to age in – one that is accessible with the necessary services.

Building upon recent discourse in both health and housing for older adults, SE Health is interested in working to provide affordable living spaces for older adults (low to middle income) that optimizes personal agency and meaning.

## About SE Health and SE Futures

Saint Elizabeth Health Care (SE Health) is a Social Enterprise applying our knowledge, vision and drive to forever impact how people live and age at home. With Canadian roots and 110 years of expertise, SE Health is a not-for-profit charitable organization delivering quality care, innovative solutions and education to people where and when they need it.

SE Health's team of more than 9,000 staff including personal support workers, nurses and therapists, collectively deliver 20,000 care exchanges daily, totaling 50 million in the last decade alone. SE Health's vision is to Honour the Human Face of Health Care and has a stated goal is to address the needs and challenges of Canadians through social innovation and business initiatives that generate shared economic and social value with partners.

SE Futures was established for the new era of health innovation i.e., a future where the "homespital" is where health will be created, managed and restored, people and their families will be more empowered, and intelligence will support decisions. SE Futures is protecting and creating this future of health, focused on the older adult population in Canada.

The SE Health Futures Team was established for a new era of health innovation, recognizing that the way individuals age and die in the future will be nothing like what it has been for the past century or more. The mind-sets and business models of the past no longer serve this space. The Futures Team aims to enable a future where home is where health will be created, managed and restored, people and their families will be empowered, and intelligence will support decisions. As part of their work, the Futures team focuses exclusively on older populations in Canada and is focused on identifying, incubating, testing and scaling new practices & business models.

## About Sidewalk Toronto

Sidewalk Labs working in partnership with the trigovernment agency Waterfront Toronto and the local community, is preparing a plan for the development of a district in Toronto's Eastern Waterfront. This joint effort, called Sidewalk Toronto, aims to make Toronto the global hub for urban innovation. Sidewalk's vision is to combine people-centered urban design with cutting-edge technology, to achieve new standards of sustainability, affordability, mobility and economic opportunity.

## Agenda for the Day

8.30 – 9.00	Breakfast and Registration
9.00 – 9.30	Overview of the Concepts and Workshops
9.30 – 11.00	Hands-on Workshop

## Facilitators

Erik Landriault	Director, Innovation, SE Health
Mary Lou Ackerman	VP Innovation, SE Health
Brianna Croft	Projects Specialist, SE Health
Alexis Wise	Director, Health and Human Services, Sidewalk
Patrick Gilinski	Founder and President, Mend Design
Annie Koo	Associate Director, Development, Sidewalk
Azi Boloorchi	Director, Innovation & Project Management, Revera
Paolo Korre	Director, Service Design, SE Health
Joe Au-Yeung	Projects Specialist, SE Health

## Overview of Workshop Activity

This workshop was designed to elicit input from older adults about concepts, features, and services related to new models of older adult housing. With the support of a “real estate agent” (facilitator) the participants completed a “planning worksheet”, where they negotiated features they would like to see in their future residence (see **Appendix Image 1**).

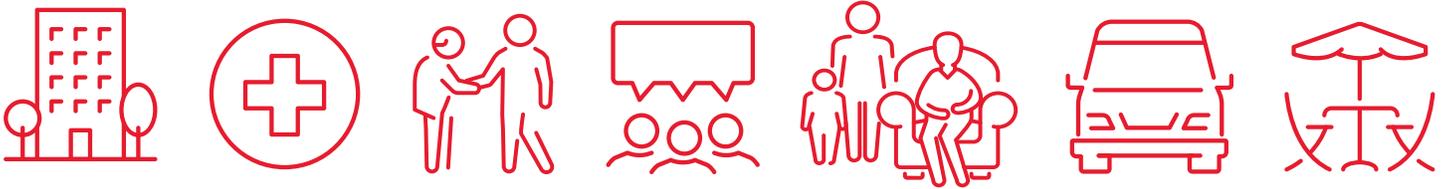
There were 7 categories explored in the activity: Physical Space, Social/Community Programming, Health Care Programming, Supports, Intergenerational Living, Transportation and Other Amenities. Each category had 3-5 option cards to choose from with different service models associated with it (presented on option cards; see **Appendix Image 2**). The participants were on a fixed budget, and each choice had an associated cost, which meant that the participants had to prioritize the features they valued the most. As well, the options, did not contain much detail; each individual had to define “negotiating terms” of what they believed should be included in the option.

After the facilitator introduced categories and options, the participants made choices, one feature at a time. Each participant selected one of the option cards – and glued it to their worksheet. The participant then wrote down “negotiating terms”; that defined the details of the option (how much, what’s included).

Each choice had an associated point value which was tallied in the “Budget” section on their worksheets. The budget was fixed to 4 points, so the participants had to be mindful of how they spent their points when they chose options. Many trade-offs and decisions had to be made when trying to define an ideal living environment.

The way the point system was organized was;  
1 point (default) – if it will require any new resources  
0 points – if it can be delivered with existing resources  
-1 point – if it could save resources or deliver existing solutions more efficiently.





## Overall the key aspects that arose from the discussions with participants were;

### Older adults recognized that in order to overcome some of the challenges of aging, they must employ the use of technology.

Contrary to popular belief, a result from our workshop was that older adults were **not afraid to try new technology**. Although seniors have the lowest rates of technology usage in the population, they are experiencing the greatest **growth** in technology usage according to Statistics Canada.<sup>1</sup> Research has shown that older adults are most likely to engage with technology that enhances safety or provides social interaction. Safety technology includes a wide variety of things such as; falls detection, health symptom monitoring, medication adherence, and personal alarm technology. Additionally, participants of our workshop voiced that they wanted technology that allowed for a faster more comprehensive healthcare experience. Arguably, those who did not feel that technology was necessary, identified that the point system from the exercise was a factor that restricted them from choosing this option. Furthermore, participants mentioned that they were not afraid to try new methods of receiving care if it meant that the care received would be of good quality. Moreover, those who participated had varying needs and wanted to ensure they have **access** to health services when they need them.

### Older adults want to find a balance between autonomy and their community

Not only did older adults in our workshop describe that they wanted a place to call home – they also wanted to build a community around themselves. Whether their built community would consist of primarily older adults or of people from different generations; majority of participants identified that they wanted to have **fully independent** living space. It is known that well-designed homes and friendly neighbourhoods play a crucial part in allowing individuals to **age in place** while remaining independent and connected to their community. Currently, in Canada and more specifically in Toronto, we are lacking developments that support people to age well. An intergeneration model could fill numerous needs and gaps identified by seniors such as combatting social isolation, disconnectedness, and loneliness. However, participants in the workshop’s opinions on intergenerational living accommodations varied, some were highly in favor and some were completely opposed to the idea.

### Most of the participants managed to reach the budgeted amount of points or under.

This demonstrated that our participants were able to find **trade-offs** between option choices given in the exercise. This is especially important to understand as 60% of older adults in Canada rely on government transfers for the majority of their income.<sup>2</sup> This was also demonstrated in the workshop as most attendees identified as being on a **fixed income** that limits their choices to housing options in the current market. When considering rental costs, there is an on-going affordability challenge for older adults as the median after-tax income for an unattached (single) senior in Canada is approximately \$26,900 or \$2,241 / month or for senior families \$54,000 or \$4,500 according to Statistics Canada.<sup>3</sup>

Below is a summary of the results from each of the 7 categories explored in the workshop. A wide variety of perspectives were given and various insights were gained through the discussions.

1 <https://www150.statcan.gc.ca/n1/daily-quotidien/171114/dq171114a-eng.htm?HPA=1>

2 <https://www150.statcan.gc.ca/n1/en/type/data>

3 <https://www.canada.ca/en/national-seniors-council/programs/publications-reports/2009/low-income-seniors/page05.html>



## Physical Space

82% of workshop attendees negotiated to have fully independent apartments. This was because they can:

- Remain autonomous
- Organize their own space
- Socialize on their own terms
- Avoid conflict with others

**“Shared apartments don’t have the same options”**

Alternatively, the remaining respondents chose to have shared apartments (4%) and cluster co-living options (14%). A small portion of respondents wanted to live in these social atmospheres.

**“I don’t want to be seen as a prisoner or child in my own home”**

That said, respondents who chose these options still voiced that they value their own space. Physical space is an important design concept when thinking about older adult housing because this is the space that one conducts activities of daily living, remains independent, expresses their identity (personalizing space), and an anchor to where an individual belongs (See appendix **Figure 4**).



## Social & Community Planning

38% of workshop attendees negotiated to have self-organized programming. This was because they can:

- Maintain a sense of autonomy
- Be community driven
- Create opportunities for unique activities

**“Self organized is good because I’m not interesting in a nursing home”**

Alternatively, the remaining respondents chose to have volunteering (27%) and organized social programming options (35%). This was because there was a fear of the sustainability of the programming, due to the differing health needs of the community. These results show that older adults want to take control of their activities but are willing to accept help when it is needed.

**“At 65 it is important to have a purpose”**

Social and community programming is an important design concept when thinking about older adult housing, this is because it gives the community a sense of purpose and can reduce social isolation (See appendix **Figure 5**).





## Health Care Programs

47% of workshop attendees negotiated to have Home Care for their health care programming. This was because they can:

- Have health care available in the in the comfort of home
- Have home care helpers assist with virtual care visits
- Have options for the “hospital”, such as surgery or surgical recovery at home

**“Health and housing go together – without housing we have no health!”**

Alternatively, the remaining respondents chose to have virtual health care (32%) and on-site health care programming (21%) options. This was because there was a need of having virtual health care to support independence to care for oneself in their own home. A concern that was brought up was privacy and how a user’s data would be used. However, many respondents voiced that they were wanting to try new ambient technologies, if it meant being given faster access to care.

**“One day robots are going to change our diapers and I would rather that than my son”**

On-site programming was suggested to have a variety of services available as everyone’s needs vary in complexity. Overall, Homecare was perceived as the most sought-out option, however, integration of all three health services was discussed as well.

**“Government funded services are much less than you need”**

Health care programming is an important design concept when thinking about older adult housing because, if you can build a healthy place, you can also improve the community in which you live as they are mutually supportive factors. Thus, having access to appropriate timely health care services gives allows an individual to experience the best possible quality of life (See appendix **Figure 6**).



## Support

There was no distinct choice participants chose. 35% and 31% of workshop attendees negotiated to have an on-site coordinator and a community watch. This was because:

- Being able to have assistance available
- Maintain a sense of organization

**“I want an independent unit and I want to be safe. That is why I want ambient technology”**

Having an on-site coordinator and community watch would be very similar. Both options would be available for residents if they needed support with the community watch having the responsibility shared among willing residents. Some participants commented that they would like a coordinator to organize social programming.

It should be noted that even though the ambient technology (15%) and virtual village (8%) option was not chosen a lot comments from the participants said they were willing to embrace new technology.

**“I am an early adopter”**

Support is an important design concept when thinking about older adult housing, this is because it allows older adults to age in place for longer (See appendix **Figure 7**).





## Intergenerational Living

**60% of workshop attendees negotiated to have some units occupied by families when exploring intergenerational options of living. This was to:**

- Provide an opportunity for younger generation to receive benefits for helping elder residents with daily activities
- Allow young people to help with technology
- Allow for a variety of different cultures in the building

**“I do not want to live in a building that is one generation because I will be treated by society like I am an ‘other’”**

Alternatively, the remaining respondents chose to have Home-Share with University Students (30%) and on-site Primary School or Nursery (10%) options. Participants expressed they would want some intergenerationality in the building but would not want to live with residents from other generations in the same unit.

**“Students wanted a mom and I don’t want to hear their problems”**

It was discussed that having families present could cause problems with older adults accessing elevators. Additionally, it was mentioned that having university student integrated into the housing model could help bring the cost of the building down, although, sharing with students was voiced as not ideal in apartments as the space is too small. A solution proposed to mitigate this was to have different floors that catered to different generations and mixes of people as many different opinions emerged from the discussions. Exploring intergenerational housing models is important when designing housing because choosing a community of people to live around that reflect your values is important for an individual’s overall well-being (See appendix **Figure 8**).



## Transportation

**89% of workshop attendees negotiated to have the nearness to public transportation option. This was because:**

- Affordability compared to a car
- Ease of traveling around the city compared to driving

**“Having a car is stressful, as well as driving because I cannot see well. A self-driving car would be great for me”**

Alternatively, the remaining respondents chose to have the parking option (11%). This was because some people may want a car for longer trips outside of the city. It should be noted that even though no one chose the self-driving car option (0%), participants were open to the idea, but they’re concerned about the viability and safety. Transportation is an important design concept when thinking about older adult housing, since it gives them a sense of agency to travel around their city (See appendix **Figure 9**).

**“The reason I love my place is all the shops, medical buildings, grocery stores etc. around me and public transit”**



## Other Amenities

**30% of workshop attendees negotiated to have private outdoor space. This was because:**

- They can grow own plants and herbs
- Outdoor space is something that can be accessed anytime

**“I would rather have my own private outdoor space over having space for my family because I would use the outdoor space more”**

**30% negotiated for a variety of various creative amenity options that were not listed in our activity. Some of these suggestions were:**

- Gym
- Greenhouse
- Theatre or multipurpose room
- Library; to have a book exchange and place massage chairs
- Coffee shops, nearby restaurants (healthy and quick)
- Space for pets
- Meditation space

**“The suite model is ridiculous; there is no closet space. Where would you put your clothes?”**

Alternatively, the remaining respondents chose to have on-site storage (26%) and space for family (13%) options. Discussions revolved around how to downsize when moving and creating more spaces in living accommodations to do other things. Trade-offs were made between options for a lot of participants and reasons for this were highly individualized (Please see Appendix **Table 1**). Other features are important to consider in housing design as they promote individual expression and social connection (See appendix **Figure 10**).

## Thank you

Thank you to all of the participants who came out to join us for our Re-imagining Homes for Seniors workshop. It was great to have the community come together for the event. Participants joined the workshop from 19 different neighborhoods across the Toronto area, allowing for a wide variety of perspectives to be shared throughout the design session. Attendees were very engaged and many brought both lived experience as well as professional/volunteer experience to the session. Participants' were talkative and provided thoughtful feedback. The input from participants was extremely valuable and will help shape decision making moving forward. The contribution from all participants is helping us to co-create a future where Canadians can age with dignity, health, vitality and agency instead of pain, sickness and dementia.

## Next Steps

SE Health's next steps involve including any discoveries into a prototype that we're designing. Additionally, Sidewalk Toronto will incorporate these insights into their Master Innovation and Development plan for Quayside.

If you would like to connect with us further to explore ideas we would be interested in hearing from you at [sefutures@sehc.com](mailto:sefutures@sehc.com).



# Appendix

Image 1. Workshop Worksheet



2480 Middle Lane, Toronto, ON - Planning Sheet



**INTRODUCING SE HOME**  
SE Home is a new concept in senior's housing that aims to integrate the scale and familiarity of a house, with the support of a broader community to create and maintain health in later life.

**CRAFTING A HOME FOR WHATS IMPORTANT TO YOU**  
In order to design the homes of the future for Seniors, we need to know what is important to you. This worksheet will help identify the features and qualities you value in a home and in your community.

**INSTRUCTIONS**

- There are 7 categories of features: for each category, there are multiple option cards, select one that suits you.
- Each card you select has an associated point score. Your home has a predetermined budget as to how many points you can spend
- Track how many points you spend in the Budget Box. You may have to make different choices to fit the budget.
- Once you choose the card you like, you may negotiate to further specify the details of your choices. Write those details down under *Negotiating Terms*.

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**PLEASE TELL US ABOUT YOU**

First Name \_\_\_\_\_ optional

Age Bracket (Circle one) 65-69 70-74 75-79 80-84 85+

Household Income Before Tax - in thousands \$ /per year (Circle One)  
0-5 5-10 10-15 15-20 20-30 30-40 40-60 50-60 60+

Are you receiving?(select all that apply)

Old Age Security       Ontario Works/ODSP  
 Guaranteed Income Supplement       Other Pension  
 Canadian Pension Plan

How well would you describe your general health?

5 (Excellent) 4 3 2 1 (Poor)

Which Neighbourhood do you Live in Currently?

Do you Currently Reside with Anyone?

No  Yes (if yes, who) \_\_\_\_\_

I \_\_\_\_\_ my home

Rent  Own  Other \_\_\_\_\_

How would you describe your current home?

Detached or Semi-Detached house  
 Mid-Rise Building (fewer than 5 floors)  
 High-Rise Building (more than 5 floors)

Are you considering moving to a new home?

I'm Actively Looking       Avoiding as long as possible  
 Sometime in the future       Not interested at all

Physical Space

Negotiating Terms

Social/Community Programming

Negotiating Terms

Health Care Programs

Negotiating Terms

Support

Negotiating Terms

Who Lives and Plays Here

Negotiating Terms

Transportation

Negotiating Terms

Other Features  
*[For features you've defined-  
Your real estate agent will assign  
a point value]*

Negotiating Terms

**BUDGET**

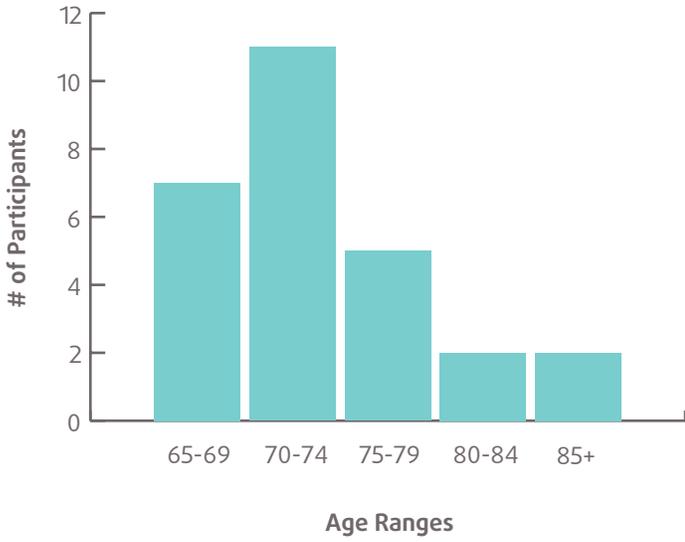
- Each of the 7 Choices you have made have an associated point value
- Record the points of your choices in the table below
- Tally up the total points in the sheet below
- If your choices do not fit within the budget, you must change some of your choices

Category	Points
Physical Space	
Social / Community Programming	
Health Care Programs	
Support	
Who Lives and Plays Here	
Transportation	
Other Features	
<b>Total</b>	<b>4</b>

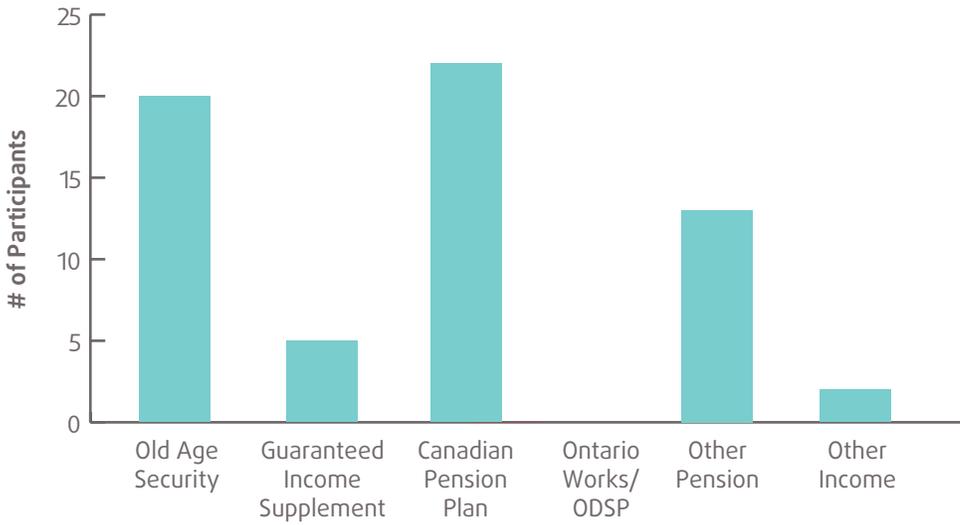
Image 2. Workshop Activity Cards

<p>Support</p>  <p><b>No Organized/Formal Support</b> -1 points</p> <p>No support is formally organized by the residence. Check-ins with residents are not arranged.</p>	<p>Support</p>  <p><b>Ambient Technology</b> 1 points</p> <p>Technology embedded in the home helps check in on the general wellbeing of individuals, and detect risks and emergencies, while respecting privacy.</p>	<p>Transportation</p>  <p><b>Nearness to Public Transit</b> 0 points</p> <p>Public transit is accessible within very close proximity to the residence.</p>	<p>Other Amenities</p>  <p><b>On-site Storage</b> 1 points</p> <p>On-site storage facility is available for items that cannot fit in the unit.</p>
<p>Support</p>  <p><b>Community Watch</b> 0 points</p> <p>The community self organizes a friendly regularly check-in on one another to ensure well being.</p>	<p>Support</p>  <p><b>Virtual Village</b> 2 points</p> <p>A suite of services are available to residents - can order and manage from their own apartment food, social activities, support, transportation, shopping etc.</p>	<p>Transportation</p>  <p><b>Easy Access to Self Driving Vehicles</b> 1 points</p> <p>Self-driving vehicles are easy to book and can pick you up at the front entrance of the residence.</p>	<p>Other Amenities</p>  <p><b>Space for your own Family to Stay</b> 1 points</p> <p>Families can have access to guest/overnight accommodations.</p>
<p>Support</p>  <p><b>On-site Coordinator</b> 1 points</p> <p>An on-site wellbeing coordinator checks in on residents and helps arrange support as needed.</p>	<p>Transportation</p>  <p><b>Parking</b> 1 points</p> <p>A parking space is available.</p>	<p>Other Amenities</p>  <p><b>Private Outdoor Space</b> 1 points</p> <p>The residence has private outdoor space accessible to its residents.</p>	<p>Other Amenities</p>  <p>0 points</p>
<p>Health Care Programs</p>  <p><b>Home Care</b> 0 points</p> <p>Select, government supported health care services provided in person in your home. Option to supplement publicly funded services with private services.</p>	<p>Social, Community Programming</p>  <p><b>Organized Social Programming</b> 1 points</p> <p>Programming, events, activities and social engagements that are planned by a dedicated team assigned to your building.</p>	<p>Physical Space</p>  <p><b>Fully Independent Apartments</b> 1 points</p> <p>Private apartments with bathroom, kitchen, bedroom, living room.</p>	<p>Intergenerational Living</p>  <p><b>Home Share with University Student</b> -1 points</p> <p>Share with a university student in exchange for additional rent income, companionship, or support. Each person has their own bedroom and bathroom, but shared common spaces.</p>
<p>Health Care Programs</p>  <p><b>On-site Health Programming</b> 2 points</p> <p>Primary healthcare services on the main floor.</p>	<p>Social, Community Programming</p>  <p><b>Volunteering</b> 0 points</p> <p>Residents volunteer to organize activities, and community and social events.</p>	<p>Physical Space</p>  <p><b>Shared Apartments</b> 0 points</p> <p>Private bedroom with shared kitchen, bathroom and living room. Shared with one or more other seniors.</p>	<p>Intergenerational Living</p>  <p><b>On-site Primary School or Nursery</b> 0 points</p> <p>A primary school or child care centre is located on the ground floor. Local residents have the opportunity to get involved and work with children.</p>
<p>Health Care Programs</p>  <p><b>Virtual Health Care</b> 1 points</p> <p>Ability to have virtual appointments with different health care providers from your home or from a room in your building.</p>	<p>Social, Community Programming</p>  <p><b>Self Organized</b> -1 points</p> <p>Each resident provides a minimum amount of time to support the community.</p>	<p>Physical Space</p>  <p><b>Cluster Co-Living</b> -1 points</p> <p>Share a living space with 5-10 other people. Each person has their own bedroom and bathroom, but share common spaces.</p>	<p>Intergenerational Living</p>  <p><b>Some Units Occupied by Families</b> 0 points</p> <p>The building is not exclusively for seniors, but also accommodates families, singles and couples.</p>

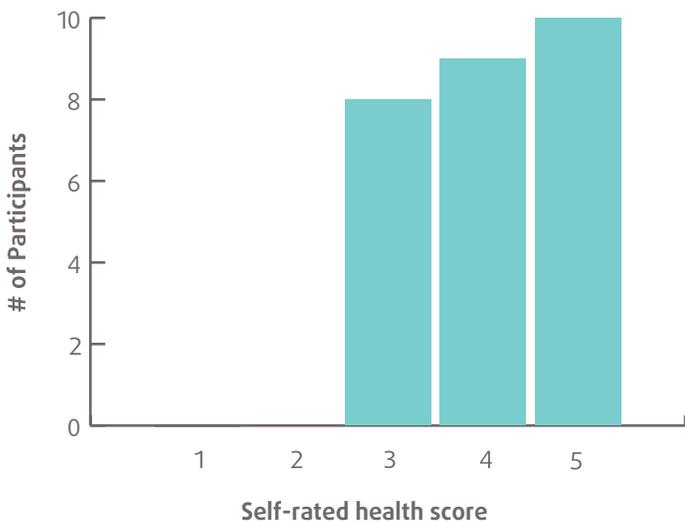
**Figure 1. Age of Participants**



**Figure 2. Number of People on Each Income Strata**



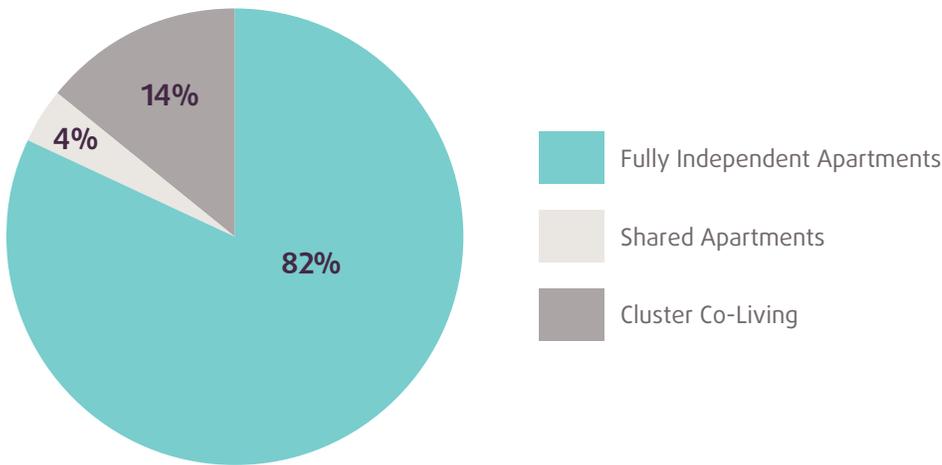
**Figure 3. Self-Reported Health Status of Each Participant**



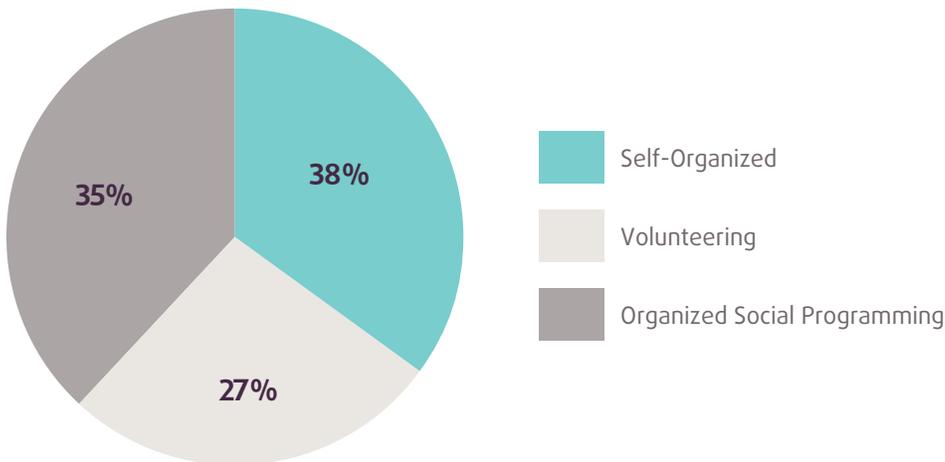
**Table 3.** Summary of Living Situations of Participants

Category	Options	# of Participants
Reside with someone?	Yes	14
	No	14
Rent or Own?	Rent	8
	Own	18
Current Home	Detached or semi-detached	16
	Mid Rise	1
	High Rise	10

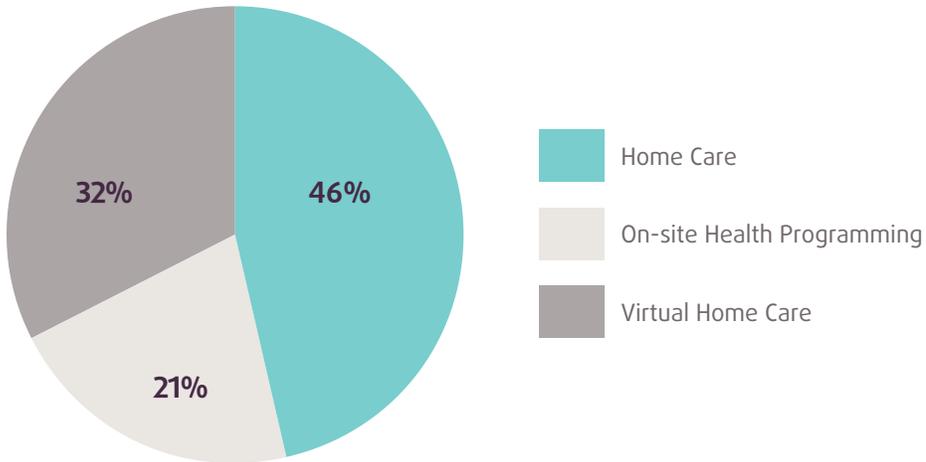
**Figure 4.** Respondent Choices for Physical Space



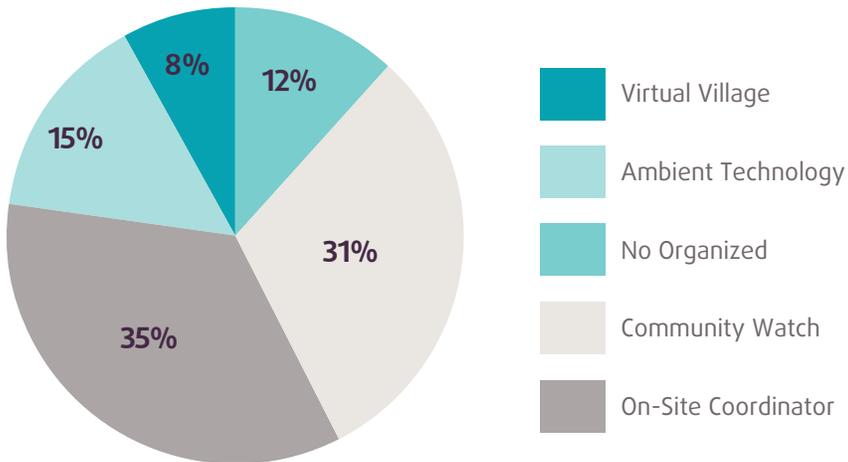
**Figure 5.** Respondent Choices for Social and Community Programming



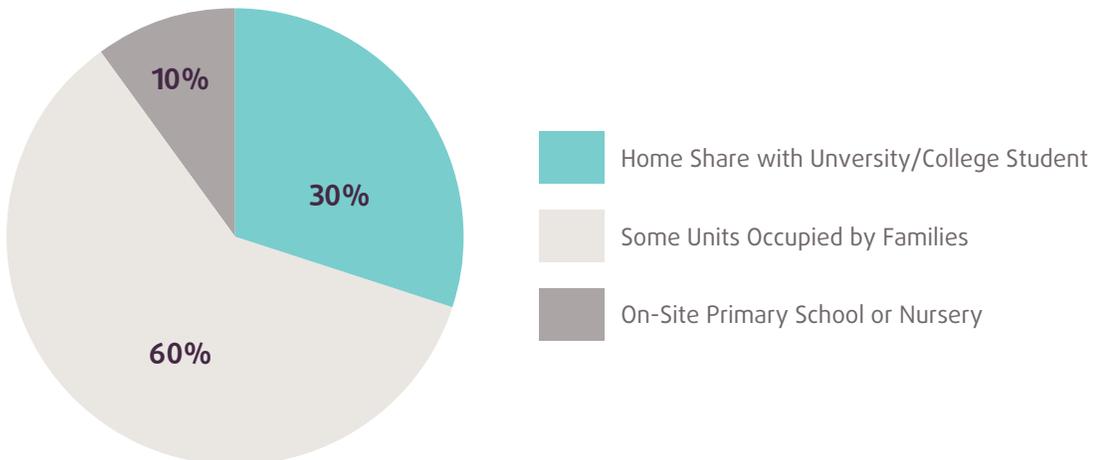
**Figure 6.** Respondent Choices for Health Care Programs



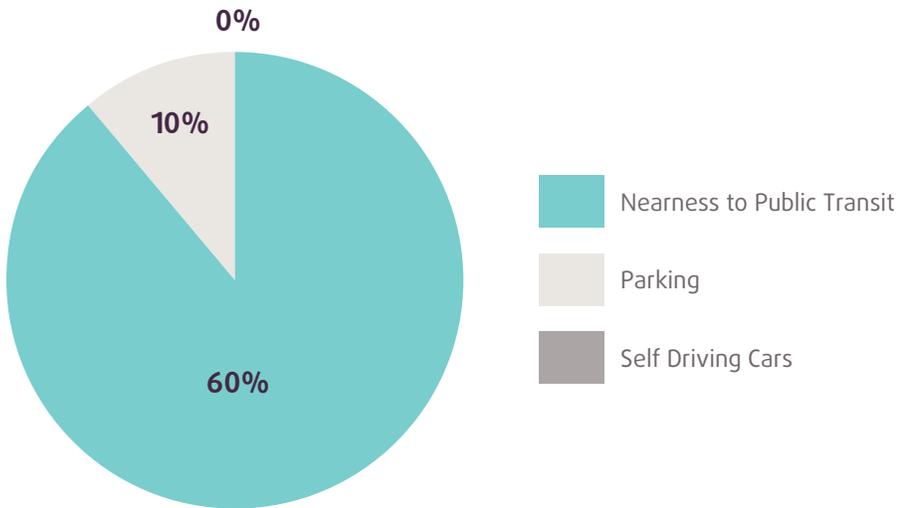
**Figure 7.** Respondent Choices for Support



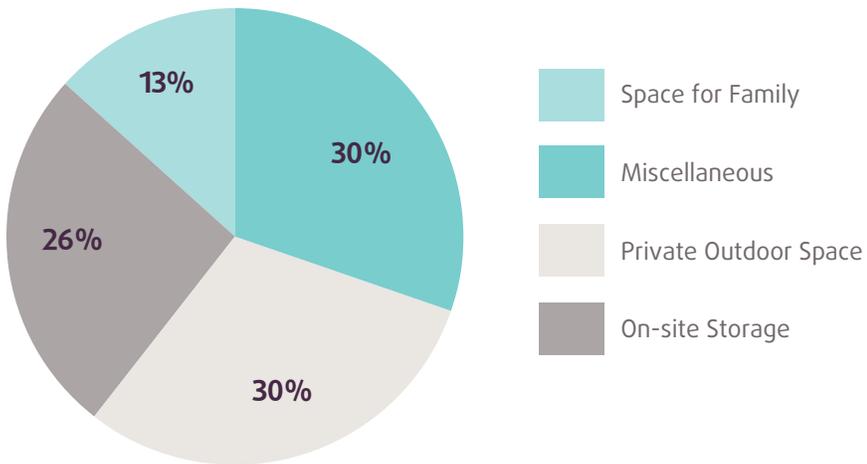
**Figure 8.** Respondent Choices for Intergenerational Units



**Figure 9.** Respondent Choices for Transportation



**Figure 10.** Respondent Choices for Other Amenities



General Notes	Physical Space	Social/ Community Programming	Health Care Programming
<ul style="list-style-type: none"> <li>• Staying at home as long as possible – when will we know when we have to move?</li> <li>• “Support to remain Independent”</li> <li>• “This is the most thought I have given to the issue”</li> <li>• Seniors need help with transition</li> <li>• “If I move from my own home... it can’t be to an institution”</li> <li>• “Too many friends were moved into a home” (deteriorating health)</li> <li>• Human factor: everyone is an individual</li> <li>• Owners need to have a cooperative collaboration agreement with residents to ongoing improvements</li> <li>• Signage matters “ageing eyes”</li> <li>• Don’t make it look like a big boxy building</li> <li>• Curb appeal is important</li> <li>• “Designing a budget but should be designing a community”</li> <li>• Universal design is key; don’t pay to modify units</li> <li>• Sustainability is key - net zero buildings</li> <li>• Priorities: Transportation access; expect compromises based on living arrangements; must allow for access to experiences</li> <li>• Being able to live a purposeful life; external enablers; access to place</li> <li>• Continuous learning opportunities; school, talks, seminars Help with navigating the health and social system, a go to person to answer their questions and advocate for them was important.</li> <li>• They don’t have a desire to go to a “nursing home”.They need help navigating the social and healthcare system.</li> </ul>	<ul style="list-style-type: none"> <li>• Independent but having access to services</li> <li>• “Living on your own until the 90s ... she fell asleep and didn’t wake up”</li> <li>• Do you cocoon yourself – be more alone with old age</li> <li>• If shared or cluster how do you pick</li> <li>• Question: is this the last place you move to? What if it is the second last?</li> <li>• Suggestion that all housing options be available (ie. Cluster model, independent and co-housing)</li> <li>• Design bathrooms to enable assistants (big enough and moveable)</li> <li>• “don’t want to be seen as a prisoner or child in my home”</li> <li>• “people value social interaction”</li> <li>• Would trade off kitchen for own bedroom and bathroom accommodations as cluster and co-living option would be second choice</li> <li>• “Shared apartment don’t have the same options”</li> <li>• Want to age in place in the community (not necessarily home) with different levels of housing within</li> <li>• Co-living shared home with 50+ residents creating social community, people to talk to but really like their own space</li> <li>• Independent with accessible common spaces such as libraries, green room in building, variety store</li> <li>• Tub and toilet bars are a must</li> <li>• Start independent living then move to shared accommodation when you become more mobile</li> <li>• Control of your own thermostat is important</li> </ul>	<ul style="list-style-type: none"> <li>• Community driven is good; but we need a referee</li> <li>• Ability to engage lessons in later life</li> <li>• Is it condescending to tell people what to do</li> <li>• Isolation – do you pull yourself away?</li> <li>• “Everything as family... but now the unit is changing”</li> <li>• Social activities – intergen (not cut by seniors lens)</li> <li>• Organized activities become harder to do as residents age</li> <li>• Can we have “students” to volunteer to run/ organize events</li> <li>• More than 50% of residents do not have computers</li> <li>• If doing a collaborative model how might we make it equitable or enforceable</li> <li>• Exercise/ tea time/ workshops (mental health)/ theatre/ movie</li> <li>• Drop in coffee area</li> <li>• Do not encourage virtual social isolation</li> <li>• “I would not pick self-organized activity because of politics and people are rigid”</li> <li>• Want opportunities to give back to people and help others with shopping, or a daycare</li> <li>• Would like it to be self organized and would want to help people get around – this way I would help connect and build a community</li> <li>• Must have community hub in the community</li> <li>• Library, gym, health facilities, school with shared library, pool, shared meeting rooms, community centre</li> <li>• Self organized programs only if community centre is near by</li> <li>• Enjoy handy work, walking and gardening etc</li> </ul>	<ul style="list-style-type: none"> <li>• Medical transportation is an issue</li> <li>• Preference for going to access their own terms</li> <li>• “I just want a friend to call me”</li> <li>• Medic alert/watch... don’t like it</li> <li>• “I don’t want to be flooded with ads for walk in bath tubs”</li> <li>• Must have health care 24hours/day</li> <li>• Virtual care needs to be AMBIENT</li> <li>• Keep costs of healthcare down by providing services to the greater community outside of building</li> <li>• Virtual visits plus (supported by hands on care)</li> <li>• Consider designing a primary care model that supports cluster care ... to encourage physician to support the building</li> <li>• “One day robots are going to change our diapers and I would rather that than my son”</li> <li>• Virtual appointments to have independent health care – 5 years from now I might need this</li> <li>• Virtual care is ideal because regular care takes too long to get</li> <li>• Would want a mix of home care and virtual care so I have everything I need when I become compromised in my health</li> <li>• Specialized home care program that gives everything – even surgery from home</li> <li>• Want all 3 – need services nearby in the community hub</li> <li>• Bring in care that you need until you need to much and you can’t stay</li> <li>• Need dietician, social worker, programming space, nurse, medication support</li> </ul>

Support	Intergenerational Living	Transportation	Other Features
<ul style="list-style-type: none"> <li>• AI ↔ Independence</li> <li>• Members will not be able to support each other</li> <li>• Must have on site coordinator</li> <li>• If you provide strength in social and coordination you may not need as much health care support</li> <li>• If you have strong coordinators you could reduce organization social programs</li> <li>• Move ambient technology to healthcare or for services</li> <li>• Make sure the tool is senior friendly Don't limit computer use</li> <li>• "I want an independent unit and I want to be safe. That is why I want ambient technology"</li> <li>• "My home runs by alexa"</li> <li>• Virtual village already exists with apps like foodora</li> <li>• "I like the idea of a virtual village because people will come to me"</li> <li>• "I like it because it can help you take your pills"</li> <li>• Ambient technology would be fine if it respects privacy</li> <li>• Hurdles to adoption result around privacy and legislation – need the system to be integrated</li> <li>• "I am an early adopter"</li> <li>• Use tech for falls and for emergencies for people living alone</li> <li>• Community watch in a volunteer structure</li> <li>• Request daily check-ins</li> <li>• Emergency services is key</li> <li>• Who responds? EMS is a volunteer</li> <li>• Onsite – needs are so personal</li> <li>• Community watch; medically trained can pay attention to peace-keep</li> <li>• Everything is so close by</li> </ul>	<ul style="list-style-type: none"> <li>• Problem → mindset of "housing is a parking spot"</li> <li>• Problem with families → elevators</li> <li>• Opportunity to interact; but not live with → "on my terms"</li> <li>• "Students wanted a mom and I don't want to hear their problems"</li> <li>• Prefer a handy man!</li> <li>• Home share requires contract to commit to services</li> <li>• Occupied by families – a mix could be good – would be good to give them a purpose and earn points "help"</li> <li>• Tie into a university to provide financial support to keep cost down</li> <li>• Would be nice to have daycare</li> <li>• "I do not want to live in a place that is one generation because I will be treated like I am another"</li> <li>• Young people would be nice to have around to help with technology</li> <li>• Families would be fine in the units and I do not care that sometimes they are unpredictable. I live in a small community with families and everyone helps each other</li> <li>• "It is better to be an individual paired with an individual to agree and understand with each other expectations"</li> <li>• Sharing with university students is not popular in apartment as it is too small</li> <li>• If amenities in community are rich enough don't need all kinds of thing in buildings eg. Home childcare with volunteer opportunities</li> <li>• Young artists nearby and display their artwork</li> <li>• Sometimes a husband passes and we need to change how we live</li> </ul>	<ul style="list-style-type: none"> <li>• Walking is the preference</li> <li>• Prioritize the sidewalk; public realm</li> <li>• Where is the public transport stop?</li> <li>• What is the speed limit?</li> <li>• Are the street cars barrier free?</li> <li>• Slope is an issue</li> <li>• Comfortable area to wait for wheelchair transportation that has windows and includes a phone</li> <li>• Self-driving vehicles should be no point</li> <li>• Shuttle busses with scheduled places</li> <li>• Negotiate with ttc for this (seniors centre)</li> <li>• "having a car is stressful as well as driving because I cannot see well, a self-driving car would be great for me"</li> <li>• Environmentally conscience and going to use the TTC</li> <li>• "If I need to get out of town 5 years from now can I?"</li> <li>• Parking is important for independence</li> <li>• Public transit is collaborative major project that I cannot control</li> <li>• Tradeoff – "I cannot spare another point for self driving cars, therefore I can use something like a garage for space and downsize"</li> <li>• "Nice to have walkable, pedestrian friendly community"</li> <li>• No parking needed</li> <li>• If need a car would rent</li> <li>• Discourage use of private cars</li> <li>• Visitors should take public transit</li> <li>• Near Waterfront; access to beach could be great is walkable</li> </ul>	<ul style="list-style-type: none"> <li>• Gym – common amenities space</li> <li>• Choice being made... got rid of car for bigger space and gym</li> <li>• Doors must be bigger (38"); corridors need to be 2 wheelchairs wide</li> <li>• Challenge; putting limits on people (they will find ways to break the rules)</li> <li>• Self-regulated heating in every apartment</li> <li>• Reduce/Eliminate affordable negotiations/not government subsidized</li> <li>• Green house</li> <li>• Library book exchange/puzzle exchange and put in massage chairs</li> <li>• Theatre room (multipurpose)</li> <li>• HMW... help "downsize" this can be emotional/physical – design a strategy. Make recommendations "red coats" is a company that does this</li> <li>• A garden for residents would be great because it promotes community</li> <li>• Onsite storage to put my Christmas packages/décor and out of season clothes</li> <li>• Trade-off: Private outdoor space is what I pick but toss up because also wanted space for family. However because day to day I would use the outdoor space and family doesn't always come</li> <li>• Space for pets</li> <li>• Food: want restaurants nearby. Do not want to cook so want other options</li> <li>• Grow herbs by windows and garden in unit or have shared gardening</li> <li>• Affordability: need something between market and subsidized</li> <li>• Rent to own</li> <li>• Options for homes; Capital appreciation mortgage; second mortgage with no interest</li> </ul>

Continued...

General Notes	Physical Space	Social/ Community Programming	Health Care Programming
<ul style="list-style-type: none"> <li>• Money and affordability was important to them.</li> <li>• Adaptability of their space based on their needs was important to them.</li> <li>• Don't like being treated as a demographic.</li> <li>• "I will work until I'm dead". Some volunteers or worked 1 day a week etc.</li> <li>• "I hate to be a demographic. It's like calling it the ghetto"</li> </ul>	<ul style="list-style-type: none"> <li>• Co-living with; a big dining room, need escape hatch, and physical and social programs</li> <li>• I am not going to go in a room with a wall to wall bed"</li> <li>• I get claustrophobic "leaving a house"</li> <li>• High ceilings to add volume and space</li> <li>• Know I'll be in a smaller space</li> <li>• Full sliding windows</li> <li>• Mid-lighting</li> <li>• Any wasted space = storage</li> <li>• Militant about reducing stuff</li> <li>• "After 30 years – I was looking to get rid of things"</li> <li>• "Remember the young people go out to work. To be an older person in a little dark cramped space is depressing"</li> <li>• Independence, universal design and adaptability of physical space to that it can change with their need was key.</li> <li>• "I need space to interact with my grandchild"</li> <li>• "Many seniors do not like showers! They like bathtubs".</li> <li>• Tons of lighting.</li> <li>• One watched "some" Netflix</li> <li>• Physical space should be wired in for virtual health</li> </ul>	<ul style="list-style-type: none"> <li>• People's enthusiasm varies over time</li> <li>• Have room for people to organize their own things</li> <li>• Hard to enforce when people are not pulling their weight – what if health interferes</li> <li>• Musical instruments available for use – need a wide range of offerings</li> <li>• Important for quality of life – Alzheimer's</li> <li>• Design for sociability</li> <li>• Apt: don't know neighbors</li> <li>• How to give people "jobs"</li> <li>• Community workshop + tools / garden, in resident B + D</li> <li>• Participant to organize based on personal interest; exercise, learnings, George brown seniors</li> <li>• Volunteer at the rom</li> <li>• Volunteer based on trade</li> <li>• Want your hobbies to come to you</li> <li>• "At 65 it is important to have a purpose"</li> <li>• "I need to be accountable for my physical, mental (medication), fun stuff with no exclusions I like variety → new = I am curious and I want to experience it</li> <li>• "I tend to be a very private person. I only want to see my family and friends not strangers"</li> <li>• Bingo, arts and crafts.</li> </ul>	<ul style="list-style-type: none"> <li>• Government funded services are much less than you need</li> <li>• Virtual is the second best option to not having someone on site</li> <li>• NORCS means these three options will be buried and mixed</li> <li>• Virtual in common space to help navigate not necessarily from home</li> <li>• Virtual pharmacy would be present too</li> <li>• Apple tree clinic model works for me</li> <li>• Volunteer to come into the space</li> <li>• "I want to come visit you – how you live and where you live – want to make sure its accessible"</li> <li>• On site nurses is totally okay</li> <li>• We do not have patient advocates</li> <li>• More advocacy than care delivery</li> <li>• "I look forward to visiting the doc – its something to do"</li> </ul> <p><b>Key takeaways</b></p> <ul style="list-style-type: none"> <li>• Availability of health care options as well as their affordability was very important to them.</li> <li>• It needs to be adaptable as their needs change.</li> <li>• "Most pressing is senior's limited income". So home care (public pay) will be important.</li> </ul>

Support	Intergenerational Living	Transportation	Other Features
<p><b>Key takeaways</b></p> <ul style="list-style-type: none"> <li>• Help with navigating the system (health, transportation, financial and beyond) and an on-site coordinator was really important to them.</li> </ul> <p><b>Notes/Quotes</b></p> <ul style="list-style-type: none"> <li>• Notion of community watch: More of an informal community where people can keep an eye on each other and support each other. In Toronto Senior Housing they are always promoting community watch but people have to buy into that.</li> <li>• On- site support should include how they can navigate all the services that are available to them. E.g. a social worker</li> <li>• Not sure healthcare, but link them to other resources like how to their taxes, transportation etc.</li> <li>• “This is like plumbing you have to have it”.</li> <li>• Need someone to advocate for seniors.</li> </ul>	<ul style="list-style-type: none"> <li>• 65% of seniors or couples; don’t want teens, want to “feel young”; intergenerational living is what life is all about</li> <li>• Cultural variation; homogeneous is a bonus</li> <li>• From time to time, share my extra room – don’t want to share common space</li> <li>• This was more mixed. Some preferred being around other generations but others absolutely hated it. They all seemed to like the idea of different floors with catering to different generations.</li> <li>• There were questions about whether this site is being contemplated for renting or buying</li> <li>• “Seniors don’t want to be around children. That’s absolutely awful”.</li> <li>• On the other hand – I see diversity and aging to be really vital. I think it’s very healthy to have a mix.</li> <li>• “I would never move into a nursing home because I don’t want to be around crabby negative people. That would never happen”.</li> </ul>	<ul style="list-style-type: none"> <li>• Walk to subway is great not just bus</li> <li>• Self driving – prefer the use of vehicles</li> <li>• “I wouldn’t go in a self driving vehicle. They are not safe.”</li> <li>• Self driving would be useful for ambulance</li> <li>• These are not happening in the next 10 years so they are not in my plans</li> <li>• Build parking so it can be changed later</li> <li>• Ride share in the city is needed</li> <li>• Sales zones to cross, safe riding cyclists with out separated love</li> <li>• Want access to a car – I drive to the subway</li> <li>• Shuttle bus 6 days a week</li> <li>• “Flexibility of schedule”</li> <li>• Accommodations wheelchairs/ strollers/walkers require redesign of the transit</li> <li>• Shuttle shared with three other condos – every 20 mins. It has a schedule and specific locations day by day</li> <li>• “The reason I love my place is all the shops, medical buildings, grocery stores etc around me and public transit.”</li> <li>• “Put me in the burbs and I’ll die quickly”.</li> <li>• “I have a bus pass and I go everywhere I want to go”. I go to different coffee shops etc.</li> <li>• Another person limits their use of public transportation because it costs too much.</li> </ul>	<ul style="list-style-type: none"> <li>• All concerned about moving with a bedroom with no windows</li> <li>• “Health and housing go together. Without housing we have no health”</li> <li>• Need community too “age friendly”</li> <li>• Meditation space</li> <li>• Private for building residents and interact</li> <li>• Different noise levels – policy or different spaces</li> <li>• Spaces for family members</li> <li>• In a 500 sq foot space think of summer versus winter</li> <li>• Lessons for seniors and activities for seniors – subsidized; more park space- provide space that is safe</li> <li>• This is all in the context of living well beyond our prime years – purposeful life</li> <li>• Storage seemed like an important theme.</li> <li>• The suite model is ridiculous. E.g. there is no closet space. “Where would you put your clothes”?</li> </ul>



Futures