



George Pearson Centre Redevelopment:

Resident & Family Engagement Report Part 1: Housing Design

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Background

George Pearson Centre (Pearson) is a 114 bed residential care facility for adults with disabilities who have complex care needs. Built in 1952 the Pearson Centre sits on an eighteen-acre parcel of park-like land that also includes Dogwood Lodge – a residential care facility for seniors.

One-third of Pearson residents require ventilation and/or have tracheostomies, or need continuous oxygen. While some Pearson residents are able to speak and direct their own care, approximately half of Pearson residents are non-verbal and many are seriously cognitively compromised. Some residents are also coping with addictions. For some, Pearson has been their home for twenty or more years and there is a strong sense of community among residents and staff.

Both the Pearson Centre and Dogwood Lodge facilities are aging and no longer meet current facility standards. As such, Vancouver Coastal Health has been working to redevelop the Pearson Dogwood Lands - replacing Dogwood, building homes for Pearson residents on the site and building a surrounding community of market housing and a community health centre.

In 2014, following the municipal policy paper process, Vancouver Coastal Health created a Pearson redevelopment project steering committee. The purpose of this committee, consisting of residents of Pearson, members of CARMA (a Pearson resident advocacy group), local disability advocacy organizations, and VCH staff, was to collaboratively develop the housing model that would provide homes for Pearson residents after redevelopment. Together this steering committee decided that the housing available for the first fifty residents to move out of Pearson would consist of:

- Ten single units
- Four group units, each supporting six residents
- Four group units, each supporting four residents.

As these decisions were made the Pearson Resident Council felt that greater engagement of Pearson residents was needed. Vancouver Coastal Health also felt that it was a good time to engage residents and families, particularly given that the rezoning process was approaching. So, the Pearson Residents Council worked with VCH to plan a resident engagement process to:

- Inform Pearson residents and their families about what has been planned in terms of housing and care for Pearson residents in the new development.
- Gather the thoughts and concerns about these plans in a report that would be presented as part of the rezoning application.

This interim report is a summary of the findings of the first engagement process, which focused on the planned housing model. Further engagement of residents and families regarding the care model is forthcoming and will be summarized in a subsequent report.

Engagement Process

Working in partnership with a representative of the Pearson Resident Council and members of CARMA, Vancouver Coastal Health’s Community Engagement (CE) Team planned to conduct one-hour information sessions/focus groups with each of the five wards (known as neighbourhoods) at Pearson.

This methodology was selected: a) because of the large amount of information about the housing model that needed to be shared, and the need to give residents and family members an opportunity to ask questions; and b) because it was deemed to be the most accessible to residents (written responses to a survey, for example,

would not be possible for most Pearson residents without assistance).

As a means of encouraging participation, the Pearson Resident Council paid residents who participated in the ward information sessions \$10 for their attendance. A one-hour open house was also held for those who could not attend ward information meetings. Following each session, VCH CE held informal one-to-one conversations with residents to solicit their feedback and the opportunity to be formally interviewed was offered to residents and family members. This engagement process took place over two weeks in February 2017.



Project Director, Joy Parsons, speaking at GPC open house, February 14, 2017.

During these sessions, the project director provided a presentation about the housing model planned for Pearson residents. The presentation included an overview of where housing would be located on the site, what the housing would look like and a high-level discussion of how care would be

delivered to residents. Following the presentation, VCH Community Engagement facilitated a question and answer session and asked participants:

1. What did they like about the housing model?
2. What were they concerned about?

Detailed notes were taken during the sessions. The notes were then organized thematically by VCH Community Engagement.

How many people participated?

	Pearson residents	Family members
Information sessions	49	12
Open house (about half also attended information sessions)	17 (9 new)	8 (6 new)
Interviews	1	0
Total	58	20

Limitations

While this report summarizes what was heard through this engagement process, it is important to note that many Pearson residents who participated in information sessions did not voice their opinions during the sessions. As a result, many of the comments captured for this report came from family members and staff.

Residents may have been quiet during information sessions because they are not physically able to speak or not cognitively able to understand the content. It may also be the case that some Pearson residents did not feel comfortable expressing their views in public. Among Pearson residents, families and staff some are supportive of the planned housing model, and some are skeptical, deeply concerned, or even angry about the move away from institutionalized care. The close-knit nature of life at Pearson may have prevented some from speaking their minds during the information sessions.

While the clinical and social context of Pearson presents significant challenges to achieving greater resident participation in engagement, it is suggested that greater opportunity for residents to express their opinions in private be considered for future engagement efforts.

What We Heard

Feedback from residents was summarized into the following themes:

Theme 1: Improved privacy and dignity

During information sessions, several residents indicated support for the housing model and description of the surrounding community. While most did not offer explanation for why they liked the plans, residents seemed to express the most support for design features that promote greater privacy and dignity, including:

- Having their own bedroom
- The large size of the bedrooms
- Having their own bathroom and shower
- The inclusion of ceiling lifts from bed to the bathroom.

“I want to live in an independent apartment... more freedom to do what I want, more privacy.” - Pearson resident

<<Thumbs up motion>> [when told the planned size of the bedrooms] – Pearson resident

“I’m happy to hear everyone will have their own bedroom. The open wards on Ward 2 are terrible. There’s no privacy.” – Pearson resident

Theme 2: Improved access to the broader community

Some residents indicated that the community amenities proposed for the new development would mean an improved quality of life from life at Pearson.

*“I like all the access to the coffee shops.”
– Pearson resident*

“It feels like a community.” – Family member

Theme 3: Skepticism that the housing described during the presentation would be delivered on-time or at all

Redevelopment of the Pearson Dogwood Lands has been talked about for twenty years or more leading to a significant level of skepticism among some residents and staff that this redevelopment will happen. Some residents felt that the permitting processes and construction problems would create significant delays in the housing being ready for move-in. Others mentioned that a change in provincial or municipal government would likely stall or terminate the project.

Following one of the information sessions, one resident cautioned the facilitator to be very clear about the likelihood of delay to avoid disappointing residents who were eager to move into this new development.

Theme 4: Concern that elements of the housing design were inadequate or inappropriate

A small number of stakeholders identified features of the housing design as being inadequate or inappropriate for residents. Kitchen design was identified as an area that needed careful consideration and engagement of residents to maximize functionality. One family member who operates group homes for people with disabilities felt that the kitchens were too small and lacked sufficient fridge space and dishwashers for feeding six adults plus staff.

Theme 5: A desire to live with loved ones or have overnight guests

In several sessions Pearson residents mentioned wanting to be able to accommodate overnight guests. Two residents also spoke about wanting to have a two- bedroom unit so that they would be able to live with their families again.

“We’ve been married 56 years. I took care of her as long as I could. I spend every day here but we want to live together.” – Family member

Theme 6: Parking needs to be free

Visitor parking was also raised as an issue in several information sessions. At present, staff and visitor parking is free at Pearson. Many family members spend whole days at Pearson with their loved ones. Expensive parking may reduce visits, put financial strain on families or put additional pressure on street parking in the surrounding community.

Although the focus of the information sessions in this phase was on the housing model, many of the comments and concerns raised by participants focused on the care that would be provided.

Theme 7: Concern that quality of care will suffer

Some participants expressed skepticism that a Total Support Worker can provide the same level of care as the specialized staff roles at Pearson.

“Nurses notice a lot of things that Care Aids don’t pick up on.” – Pearson Resident

“If a Total [Support] Worker is mopping the floor and then my son needs immediate suction, they’re supposed to drop the mop and go and suction him? That’s an infection control risk.” – Family member

Several family members questioned the apparent inefficiency of the housing and care model, for example, having clinically trained staff shop and cook for individual or small groups of residents as opposed to a centralized kitchen. Underlying these concerns is a fear that quality of clinical care will suffer because of the higher costs of housing, food, etc.

One resident questioned who would coordinate the care and wondered what would happen if she had a complaint or concern with a Total Support Worker.

Theme 8: Fear that care won't be available in an emergency

Some participants, particularly family members, stated that the proposed housing and care model may be appropriate for some residents of Pearson, but would not be appropriate for those with very complex care needs.

There is a sense of fear that residents, particularly those with tracheostomy and ventilators would be at higher risk for infection or suffocation in this type of housing. At Pearson, staff members including a respiratory therapist, are available very quickly to intervene, particularly for emergency suctioning or ventilator trouble-shooting.

Stakeholders worry that this quick response won't be possible in this housing model because a nurse may not be present, or because three staff members are needed to respond to a respiratory emergency (code blue) and

there may be an insufficient number of staff, especially at night.

Theme 9: Concern about greater social isolation and appreciation for organized group recreational activities

Social isolation is a serious issue for many people with disabilities. For many residents, Pearson is their community and the move to more independent forms of housing means a loss of that community and a risk of greater social isolation. For some residents, simply being able to independently move around the halls of Pearson is an important source of social interaction. Likewise, a Pearson family member described the stimulation that her son receives living on a busy open ward. She fears a move to a private room will be detrimental for his mental wellness.

At present, Pearson operates a recreation department that offers a range of activities on-site, in the local community, and day-trips for residents. In every information session and interview, stakeholders raised concerns that this recreation department would be lost which would negatively impact quality of life for residents.

“The Recreation staff [at Pearson] pull some people into activities. Who will do this?... I want to make sure residents are proactively engaged in activities.” – Family member

Some participants asked that space be made available on the site to allow groups of residents to continue to participate in gatherings and group recreational activities. A couple of participants spoke passionately about the importance of the monthly community kitchen program currently organized by CARMA with community volunteers. This community kitchen brings together residents and volunteers to cook and share a meal together. An appropriate accessible kitchen and large dining space, as well as staff to provide coordination would be required to continue to hold such a program.

Conclusion

This interim report summarizes feedback from Pearson residents and families on the plans for the first fifty units of housing to be built for Pearson residents on the Pearson Dogwood Lands. Once the care model to be delivered in these units has been developed in greater detail, further engagement with Pearson stakeholders will take place and feedback will also be captured in a final report. This report will be submitted to Vancouver City Council as part of the rezoning process for the Pearson Lands redevelopment project.

For further information about the engagement process or content of this report please contact ce@vch.ca.

For further information about the Pearson Lands redevelopment project, please visit:

<http://www.vch.ca/about-us/development-projects/pearson-dogwood-redevelopment>