Kiel Adult Day Center
Kiel, WI

Theme
Welcome to our home.

What this case study shows:
• The challenges associated with integration and adaptation of a community landmark for use in adult day care.
• The benefits of small scale for a dementia population.
• The benefits and drawbacks of having a high level of personal involvement from the board of directors.

Place Profile

Directors
Dorae Fietz, Adult Day Service Coordinator,
Family Services Lakeshore
Diane Grube, Director of Services, Kiel Adult Day Center

Facility type
Former family residence

Building size
Approximately 1,700 square feet

Construction completed
1922

Architect/designer
NA

Program

Mission and goals
Since 1991, Family Services Lakeshore has offered programs for elderly who are frail or suffer from confusion or memory loss. At sites in Kiel, WI and Manitowoc, WI, these programs allow families to keep their loved ones at home in familiar surroundings for as long as is reasonable. According to Dorae Fietz, Adult Day Service Coordinator of Family Services Lakeshore, the goal of Kiel Adult Day Center is to provide respite for primary caregivers.
The three-season porch overlooks a park.

**General description**

Kiel Adult Day Center, which began operations in 1994, operates in a residence formerly owned by a prominent Kiel family, the Stoelting. In the mid-1980s, the home was donated to the City of Kiel, which used it initially to house a community center. In 1996, the community center moved into a new purpose-built facility next door. At that time, the city agreed to lease the home at no charge to Family Service Lakeshore for the purpose of providing adult day care services. Overseeing the center is a nine-member board of directors, which includes the mayor of Kiel and two members of the Stoelting family who are now in their 80s.

**ADC 1**

Even though they've given (Stoelting House) to the city and the city owns it, the board really reviews everything that happens to it. When we bought the two recliners, we had three members of the board come with us. They had to approve the furniture. So the two chairs that are here were not our original choice, but these were the ones that met their approval.

**Institute**

So essentially every single detail is overseen, and the board and the Stoeltings are extremely involved in all the decisions.

**ADC 1**

Right. But they really let us do our own thing. If a coffee cup is broken they do want to have it left there so they are aware of it. It isn't a big deal.

**ADC 2**

Or moving the furniture in the living room. I called one day and said it really would be nice to have that piano on the outside wall so we could get into a better social circle. I called and they said that's okay, go ahead and move it.

Because the home is owned by the city of Kiel, Stoelting House is occasionally used during off-hours for community events. In addition, rooms on the home's second floor are let out to civic organizations for storage.

**Institute**

You mentioned that Stoelting House is occasionally used for weddings and receptions and the like. Do you think that has repercussions for the adult day program?

**ADC 2**

Possibly.

**ADC 1**

Everything so far is being done at night or weekends...
They appreciate us in the building from what they've said to me...

...because we're a program that's there all the time, and Diane brings it to their attention when things are not being kept up. When there was a problem with the floor she was the one bringing it to their attention. And so they really feel she's looking after their building for them. So, I really don't think that our status would be threatened that much, because, again, we're not just a party, we're a community service also.

Do you ever have any activities that carry over from one day to the next, with materials or things that you might want to leave out? How do you handle that?

We don't leave it out; it goes upstairs.

Do you find that a disadvantage or just something that you work with?

We work with it.

So it's not very bothersome?

No. We've been able to keep more things out more and more. We couldn't keep anything in the dining room buffet for two years, and then finally I just said this is what we have to do, we have to run this up and down the steps, and they said okay.

Originally we couldn't keep files; we couldn't keep anything here. So, I was taking a case back with me with every day. I brought the whole program with me every time I came. Really that's how we started.

As long as we put everything back and it looks neat, they're happy.

Kiel Adult Day Center operates from 10:00 a.m. to 2:00 p.m. on Wednesdays, Thursdays and Fridays only. Plans to expand operation to additional days are currently under discussion. In general, each day's program provides opportunities for social interaction, a morning snack and hot lunch, cognitive activities, a gross motor exercise session and a relaxation period. Fees are charged on a sliding scale according to each participant's ability to pay. The maximum daily charge is $35; the minimum is $5.

Staffing

Kiel Adult Day Center has a professional staff of two; one is .75 FTE. In addition, the center relies heavily on a well-run volunteer system that provides a minimum of one or two volunteers each day. Volunteers include members of the center's board of directors as well as the community. Paid staff to participant ratio is 1:4; with volunteers, the staff to participant ratio is 1:2.
Participant profile

Kiel Adult Day Center has 11 enrolled participants, a maximum capacity of 15 and an average daily census of six. Its participants range in age from 57 to 88 with an average age of 79. All of its participants are Caucasian. The female/male participant ratio is 3:1. All participants have some degree of cognitive impairment, and require assistance with an average of one ADL. Ten percent of participants use wheelchairs. At this time, no participants are incontinent.

Institute
If the needs of a member changed, exceeding the ability of the program, what would happen? Would they go to another adult day care program in the area? Have you had someone become, say, incontinent, or develop other medical or physical needs that you are not equipped to deal with?

ADC 1
Well, with incontinence, as long as they are cooperative in allowing us to assist them in changing and they cooperate in wearing some type of incontinence undergarment, then it isn't a problem. But if their needs are safety issues like falling—if they wouldn't allow us to have a gait belt and walk with them and things like that, then we would have to have some type of a meeting with the caregiver and/or social worker.

ADC 2
Or if they become combative.

ADC 1
Right. We try to keep people in our program as long as the family can have them at home.

ADC 1
In the case of increased needs, do they become apparent from the family's perspective as well as yours?

ADC 2
We seem to see it sooner. Families don't want to recognize it...because they know what the next step has to be.

Institute
What kind of communication goes on between you and the family? Daily or monthly reviews?

ADC 2
It's so individualized. I think with some it's on a daily basis, and with others not. We have some members who have professional caregivers, or a family out of town; then there isn't that much exchange of information. But even for those with families out-of-state, we send at least a six-month update. If there's a social worker, they get a three-month written update.

ADC 1
If the physical needs couldn't be met here at this program, we would have the option of sending them to Manitowoc, transporting them by Handicare (a transportation service) or something if all involved were agreeable. It has never happened. The people who have left our program have gone directly into a nursing home because the family couldn't cope with the needs.
Physical Setting

Kiel Adult Day Center operates in a former private residence that is located on a cul de sac off Main Street, flanked by the city library and community center. Behind the house is a one-acre natural pond encircled by a paved walking path and surrounded by park benches and tall mature trees. A bridge over the pond provides access to the adjacent community park and cemetery.

Stoelting House is a two-story center entrance Colonial, built in 1922. The exterior is wood siding, painted white. The center entrance features a porch supported by pairs of wood columns. Three concrete steps lead to the front door; handrails are wrought iron. Traditional black shutters trim the windows.

All primary program spaces for Kiel Adult Day Center are located on the first floor of the house. These spaces consist of the living room, the dining room, the kitchen, and the three-season porch. There is one bathroom on the first floor, which contains a residential toilet and sink.

Barring a mobility impairment, entrance to the program is up the three steps and through the aluminum storm door and original paneled wood interior door. Those in wheelchairs or for whom the steps are not manageable must use the exterior ramp located at the rear of the building. This ramp opens onto the screen porch; access is through the kitchen door.

From the front door one arrives in a small enclosed vestibule; along one wall is an exposed hanging rod with hangers labeled with each participant's name. A second solid wood door opens into the central entry hall. The entry hall features the original oak stairway and balustrade, muted contemporary wallpaper and a residential telephone on a wooden stand.

To the right of the entry hall is the living room, a generous (23’ x 14’) room created by the removal of the original partition wall between two parlors. The living room has a working fireplace, dark-stained oak trim and a wood window seat. Walls are painted off-white. Windows on three sides of the room admit plenty of natural light, which is supplemented by incandescent lighting from the house's original fixtures and floor lamps. A large picture window provides a view of the pond.
Vinyl roller shades are the sole window treatment. Flooring is industrial-style tight loop carpeting that is light brown in color. Vintage recliners and Early American style chairs and a sofa with wood arms and upholstered seats and backs line the perimeter of the room. A television and upright piano are used for entertainment. Accessories include framed prints, silk plants and flower arrangements, and an American flag.

To the left of the entry hall is the dining room. It features a residential double-pedestal dining table that seats ten. As luck would have it, wheelchairs fit easily under the table. Dining chairs are all wood or wood and upholstery. Flooring is light stained oak, and walls are papered in a muted floral pattern of cream, pink and green. In the window bay is a wooden window seat. Mounted in the bay is a room air conditioning unit that cools the entire first floor. A built-in buffet of oak, mirrors and stained glass sits in an arched alcove; the buffet is used for storing activity items and to display a vintage glass compote set.

The three-season porch is accessed from the dining room through French doors. The porch has windows on three sides as well as a street-side exterior door. Flooring is indoor-outdoor carpeting in a pink tone, and the ceiling is light stained wood bead board. The room is furnished with folding card tables and chairs of metal and vinyl, and stackable white resin chairs.

The home's original kitchen is intact and used daily for preparing coffee and snacks as well as plating the hot lunch that is delivered in bulk by arrangement with the adjacent community center. Walls are painted white. Flooring is vinyl. The one incandescent ceiling fixture leaves the space somewhat underlit. Appliances include a residential refrigerator, range and microwave.

In the kitchen, the shallow cast iron and porcelain sink with integral drainboard is vintage. Wood cabinets painted white are primarily solid-fronted, although three are glass. Most food preparation is done on the kitchen worktable, which is covered by a vinyl tablecloth; other counter space is negligible. The room has two windows and one door that leads to the three-season porch.

One of the second-story bedrooms houses the office of the center's director; others are used for storage for the day care as well as for unrelated civic organizations.
Coming and going

Kiel Adult Day Center operates on Wednesdays, Thursdays and Fridays from 10 a.m. until 2 p.m. The director is on site those days from 9 a.m. until 5 p.m. Generally, participants arrive slightly before 10 a.m., although it is not uncommon to have one or two arrive as early as 9:15. Participants are transported individually by family member or community services station wagon. One participant is transported by a volunteer from her church.

Except for the one participant who is in a wheelchair, all others successfully manage the front steps into the center with some assistance. Outerwear is removed in the foyer and stored in the vestibule on decorated and personalized hangers. Purses and other personal items are stored in a closet located in a corner of the living room.

**ADC 1**

We open at 10:00, and today members started coming at 9:30. With as many volunteer drivers as we have, we need to have some flexibility.

**Institute**

Is that a challenge for you when you're planning for 10:00? Say three people are dropped off between 9:15 and 9:30, what would happen? Do you have an activity for them?

**ADC 2**

Usually it's a social time for them. They go to the bathroom, put their purses away, and then they kind of mingle with each other and talk to each other. Then another group comes in.

**ADC 1**

Then that's a whole new social time.

**ADC 2**

Right. They all really care about each other: they're friends.

Departure is an equally calm transition. All departures occur within a 15-minute time period. The last activity of the day occurs in the living room, and participants are summoned individually as a family member or driver arrives to take them home. A relaxed discussion of the day's last activity provides low-level distraction, and little agitation or anxiety in remaining participants was observed.

**Institute**

So around 2:00 residents are getting ready to leave. How does that work? Usually they're in the living room?

**ADC 2**

Yes. The driver will pick up two or three at a time so there isn't this big rush. They
usually take home city people first, and then they come back for the ones who live further out.

Institute  Is there usually one driver that takes people home and picks them up?

ADC 2  Pick up and drop off is the same driver, but each day is a different person.

Institute  When they're waiting to go home, do members ever get antsy or agitated? Does it seem to bother the ones who are last to go?

ADC 1  Occasionally you'll have some that, with some people....

ADC 2  It's more of a problem if they see the other people going, but if they don't see them leave it's not an issue.

Institute  Do you actively engage them in activity right around departure time?

ADC 1  Yes. I've also noticed if the members' name tags are coming off, it seems like a signal that it's time to go...so we keep name tags on.

Primary program spaces

Programmed activity at Kiel begins with coffee and a morning snack, which is taken in the dining room. The snack is followed by a cognitive activity also conducted around the dining room table. The group then moves into the living room for a physical exercise session, at which point the dining room is prepared for lunch. After lunch, the group returns to the living room to engage in a cognitive activity game or to watch a video that has been borrowed from the library located next door to the center.

Special events and outings are conducted throughout the year. Holiday performances or children's art shows are staged at the Kiel Community Center; participants often receive formal invitations to these events and the excursion is much anticipated. Support of the center by community members is evident through the sponsorship of walking trips to local shops.

Institute  Given your population, do you schedule certain activities depending on who is coming that day?

ADC 2  Yes and no. We do try to meet their skill levels. Like with card games, for example, we have some who can play Sheepshead and some who can't play Fish. We try to
balance it—find an activity that all levels can do or find a volunteer to go with one group and a staff person with the other group.

**ADC 1**  
We don't have cards every day. We play bingo every day.

**ADC 2**  
Some of them are invited over to the community center to play cards with their friends from the old neighborhood.

**Institute**  
So some people, even while they’re under your care for the day, can and do engage in activities as they used to do.

**ADC 2**  
We do lots of "regular" activities. We go to the park. We feed the fish, feed the birds. We save our leftover bread...it all depends on the weather. We're planning to walk over to Dairy Queen (across the street). Quik Trip gave us a tour of the back of the building, inside where they have their freezer section. We walked up to the jewelry store. They asked us to stop in and visit.

**Institute**  
What about providing quiet times? Is there any place someone can go if they want to be alone for a couple of minutes?

**ADC 1**  
We have one woman, for health reasons and her age (she's in her late 80s), will go sit in the other room and put her feet up.

**Institute**  
But generally you don't have other people who need to take naps?

**ADC 2**  
No.

**ADC 1**  
It's only four hours, so by the time you get social time, have a snack, do some activities, then it's lunch time. After lunch those who want to can put their feet up, while others are helping with wiping the table or sweeping. After that it's on to more activities. It's really a short period of time, it goes very quickly.

**ADC 2**  
Yeah, they complain sometimes about that.

**Institute**  
About the short time period?

**ADC 2**  
Yes.

**Institute**  
It seems activity-packed.

**ADC 2**  
They sleep better at night.
Kitchen and kitchen work

The kitchen at Stoeiling House is original to the 1922 vintage house. Copious cabinet space and broom closets provide storage for dinnerware and cleaning implements as well as a variety of activity props. Glass-fronted cabinets provide visibility for stored items.

While participants are allowed to use the space, the room's size, awkward positioning of the appliances (jutting into the room), and lack of seating preclude most kitchen activity. As a result, the kitchen space is used most as a walkway to the toilet room.

Institute  It's a nice touch to use the coffee cups and china that's here. Really homey. Do you do any activities in the kitchen: cooking, baking?

ADC 2  Applesauce.

ADC 1  You went to the orchard.

ADC 2  We went to the orchard, they picked the apples and brought them back and made applesauce. That was a three-day process...

ADC 1  Eating was on day three!

Institute  Do people wash dishes? Do they clean up?

ADC 2  They'll clear the table, but because of state rules we have to be real cautious. They'd like to dry dishes, but they can't because we have to air dry them and then there's bleach out. You give some of them a wash cloth, and they'll wipe the table. They can do things like that. Or they'll wipe the stove off, clean the refrigerator or sweep.

Institute  So you try to find an ancillary activity that doesn't interfere with regulations?

ADC 2  Right. They'll fold the dishcloths.
Dining

Dining at Kiel consists of the morning coffee session and hot noon meal. By contract, lunch is delivered in bulk from the Kiel Community Center next door and individually plated by day care volunteers as well as passed family style when appropriate. Lunch is served on plates at the dining room table, with cloth napkins and metal utensils for each participant. No participant requires assistance with eating. Staff and volunteers eat lunch with participants at the dining room table.

ADC 2  We've always done just regular family style.

ADC 1  Unless they have a special diet that would need to be brought in and portioned. Other than that it's family style. Family, staff, everybody eats together, like the Waltons', you know, everybody at the big table. People who need assistance with cutting and that type of thing...it's really easy.

ADC 2  We've had the reverend come and volunteer, and he gets candles out every once in awhile. He comes and sets the table and lights the candles. It's very relaxing.

Institute  So the table is set. Do you bring the food out and put it on each plate, or do the members sit down and serve themselves?

ADC 2  It depends on their needs. Usually the food is brought out, they sit down, and we help with serving the food. They don't always remember to pass the serving dish on to the next person.

Institute  So you initiate, they serve themselves and pass it to the next person.

ADC 2  Yes. We do like them to stay as independent as possible.

Institute  How many people typically need assistance?

ADC 2  Oh gosh, assistance with just cutting or buttering bread--two of eight.

ADC 1  And I know that according to the national ADL standards, if they can use an instrument to get food to the mouth then they can feed themselves. By those standards, all of our members are independent and able to feed themselves.

Institute  You talked about special diets. How many people have special diets?
ADC 2  We have two diabetics. Really the big difference is in their Jell-O, their salad and dessert. The main course is the same.

ADC 1  And in the morning when everyone's having coffee time with cookies. There were no diabetics today, but if there were they would have been having something a little bit different than the regular snack. It's not meant as a nutritional snack, it's just a social snack.

Institute  What sorts of foods are on the menu?

ADC 2  Yesterday we had baked chicken and baked potato.

ADC 1  We have salmon loaf, lasagna.

ADC 2  Salmon loaf last week, and today we might have chili. Just regular old-fashioned cooking is what it really is. In summer they (the community center food service) focus more on the senior center because they don't have to cook for the schools. Through the school year there's a difference in menus, because the kids like pizza burger or chicken nuggets. We don't necessarily get that. They still pretty much serve what's better and more familiar for the elderly.

Toileting

There is a one toilet room with one toilet fixture. The room is located in the back of the house, midway between the kitchen and the living room. Thus, while the location ensures easy access to and from the toilet room, there is no direct visual access from the center's two primary program spaces.

Institute  Have you ever noticed any problems in that hallway between the bathroom and the stairs? What about for someone in a wheelchair?

ADC 2  No...it's not unusual to have maybe one person waiting. They'll stand there by the radiator and wait for a few minutes.
Definitely the need is here for more bathrooms....

A few moments ago we were talking about how with eight people, one bathroom seemed overused.

Right. I've come when someone's had to wait. We have one member who uses it quite frequently.

You would hate to have that lead to accidents.

It hasn't.

Is that part of your strategic plan, to do some upgrades to this building?

No. First of all, how would we get people upstairs? I don't think it's an option to use that second floor space for members or anything other than storage. We've talked about it. At some point we may have to look at a different facility because the bathroom is a major issue.

You couldn't build from the existing house?

No, the family is very protective of maintaining it in its original form.

So there's no way that you could knock out a wall and put in another bathroom?

We don't think so.

Advice For Other Providers

We've covered so many interesting topics today. There's a lot here that we haven't seen in some of the other sites. We talked a little bit about the interaction with families. Is that important to you?

Oh yes, and follow-through, too.

Interaction among the members is important, as is community involvement.

Because of the community that we're a part of, and because of the size of our program, there's more personal involvement here than at a larger program. We can afford a more personal approach to caring for people. We can be flexible. We can treat people individually, with respect. We can take the time to deal with situations like the time when somebody came to the program in jammies or when they were not adequately dressed. We get them in the car, take them home, get them dressed and then back to the center.
ADC 2  And I think in the small community it's essential to keep that personal relationship, I really do. Everybody knows everybody, and they know we're going to take care of Mom and not let her sit in those pajamas all day.

ADC 1  What ever happened to the kitten that (one member) had brought with her one day? A day-old kitten wasn't going to survive in her purse.

ADC 2  She brought it in for us to take care of. She figured we could help it. She knew something wasn't right.

Institute  What happened to the kitten?

ADC 2  I asked the volunteer to take it to the vet. Apparently it had apnea the whole trip. But then they got to the Humane Society where there were dogs. And this little tiny kitten got up and started hissing right back. It ended up in a good foster home, a foster farm actually. Her family was very happy that we could help.