Advisory Committee Minutes



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Meeting of the HM Information Clearinghouse Advisory Committee

3 June 2010

At 2.00 p.m.

Meeting Room 2046

Level Two Red Centre, West Wing,

The Faculty of the Built Environment

University of NSW

Present: Roslyn Barlow - SCOPE Access

David Gonzalez - Lifetime Care and Support Authority Jordana Goodman - Physical Disability Council of NSW Lesley Radbron - Lifetime Care and Support Authority

Sandy Lightfoot-Colins - Macarther Home Modification Service

(via Teleconference)

Ian Maxwell - Wesley HMMS

Margaret Kay – Local Government & Shires

Susan Dinley - Department of Veteran Affairs NSW State Office

Nicolas Loder - NSW Dept. of Housing

Apologies: Maj-Britt Engelhardt - NSW Dept of Ageing Disability and Homecare

Mark Flynn - NSW Dept of Ageing Disability and Homecare

Stacy Sheppard Smith

Shalla Thomas - NSW Home Modification & Maintenance State Council

Chair: A/P Catherine Bridge (UNSW)

Notes: Louisa Achille and Rachel Walls

Notes Actions

1. Welcome, introduction & apologies

Dr Catherine Bridge opened the meeting at 2.00 p.m. Apologies were noted.

Minutes from the last meeting were accepted and passed.

2. Clearinghouse update

Website Contracts and Webstats: The quarterly webstats report was tabled and spoken to, including:

- Relocation of website from AC3 to UNSW server due to AC3 price increase.
 UNSW is housing the site at no cost, and is using the Drupal CMS of HMInfo's
 site as a case study of the Drupal system for other purposes by the University.
 CB explains the function and needs of the CMS, and expresses that the UNSW
 hosting environment's Apache handler will increase the robustness of the CMS
 overall. The dev and live versions have been seamlessly relocated to their new
 home at UNSW and modifications/developments are ongoing. Current contract
 with AC3 will expire on 30 June 2010, but for all intents and purposes this
 relationship has functionally closed.
- There are now over 1200 pages of website and over 150 publications. This will
 increase over time, and therefore a stable server environment is critical to
 ongoing functionality.
- CB has requested that Ashley develop a reporting module for registered users, so that data can be tracked on an ongoing basis to provide strong user data, as distinct from a more general viewing report as available from Google Analytics. Data supplied by the developer suggests that during 2009 there was a period of high 'spamming', and this generated the need for a more robust development to contain the onslaught of bots on the site. This has now tapered off due to further development, however it highlights the ongoing need for vigilance on the part of web administration to check new users for validity.
- Google Analytics and Web Stats were provided in tandem for the first time
 covering the same reporting period for the entirety of the period. A clear picture
 of who was viewing the site and using it was presented using the collated data.
 An important new figure presented an emerging mobile user group, namely
 those browsing via Opera, a technology devised to allow web content to be
 displayed on mobile technology devices (iPhone, etc).
- CB highlighted the fact that the website has been developed using Opera, and is future-focused to include mobile users by design.
- International statistics were discussed. Google Anlalytics and web stats were compared, and the emergence/presence in statistics of nations such as India, Malaysia, China was noted.
- RB commented on the uptake in Asian nations may be concurrent with general technology uptake in the region.
- SD suggested there were a lot of OTs and Physios there without local access to information.
- CB clarified that technology uptake in Asia has actually been highly progressive

and that users in the region were on par technically with local infrastructure, and that it was not likely due to professional lacking, but a general representation of market share.

- RB commented on the quantity of Chinese requests that were not emerging from Beijing.
- RMK suggested that a lot of people are researching for their circumstances.
- RB suggested that a lot of OT purchases in the region originated in Australia, and so it made for a logical place to seek out information.
- Google Analytics data shows that in primary, visitors to the website are coming from Google search engine (78.73%), followed by direct traffic (12.21%), Yahoo (2.02%) and other sources (inc. internal UNSW referral) (1.36%)
- Google Analytics data overall corroborated data from web statistics.
- Visits by country since last report placed Australia as the top country with 6971 visits (53.14%), followed by the United States 4310 visits (32.86%), Great Britain 484 (3.68%), Canada 170 (1.30%), India 136 (1.04%), New Zealand 82 (0.63%) and representation from Singapore, Ireland, Malaysia, Phillipines, Germany, Hong Kong, South Africa and China.
- Visits by region since last report ranked New South Wales as the top region with 3479 visitors (28.29%). This was followed by Washington, US 1482 (12.29%), California, US 1256 (10.41%), Victoria 1232 (10.21%), Queensland 1075 (8.91%), Western Australia 379 (3.14%), and representation from ACT, Tasmania, London (UK), New York (USA), Ontario (CAN), Armed Forces (Europe, Middle East, US, CAN), and New Jersey (USA).
- Visits by city since last report ranked Sydney as the top city with 1860 visitors (15.42%). This was followed by Redmond, WA (USA) 1451 (12.03%), Beverly Hills, CA (USA) 1060 (8.79%), Brisbane 824 (6.83%), Melbourne 771 (6.39%), Perth 336 (2.79%), and representation from Adelaide, Canberra, Mountain View, CA (USA), London (UK), Newcastle, Apo (Armed Forces, Europe USA), Mosman, and Singapore.
- The top browser during the reporting period was Internet Explorer, with 9,892 visitors (74.61%). This was followed by Firefox, Safari 586, Google Chrome, Netscape, Opera, Mozilla, Other unknown types, and Konqueror. While the presence of Opera is a modest figure, (35 visits 0.26%) this marks the uptake of mobile browsing technologies as a method of accessing the website, and has significant implications for ongoing user traffic and mobile uptake.
- E-journal functionality was discussed, and the cost for creating this module will run roughly at \$4000.00. The purpose of the e-journal module is to build evidence and provide a peer-reviewed international journal, which will provide credibility to the research project and allow external researchers to access and utilise the research within an accepted framework. It will provide a much-needed platform for publications specific to this area of research. HMInfo will follow the example set by AHURI in this matter. A large part of the process will be automated thanks to the development of the e-journal module, prompting reviewers, allowing submissions, providing reminders for feedback, etc. This opens up the project to publication submissions from all over the world, and will constitute a peer-reviewed online journal. It is intended that this development module be functional before the next meeting of the advisory committee. Once the journal is ready for publication, ISSNs will be sought, and this will require a limited print run for supply/distribution to 15 different libraries. The works will also automatically be picked up by Google Scholar.
- RC Does this make editing and publishing easier?

CB – No, hardcopies still need to go to libraries to meet requirements. That's not
costed as part of the project. What e-journal can do is automate aspects of the
project so that reviewers are notified and reminded about the articles they need
to review. The system will know who they need to go to.

Please refer to WebStats report for further details.

Top 10 downloads

Top 10 HMINFO Publications Downloaded: Since Last Report

Rank	Publication Title	Reads
1	Consumer Factsheet: - Arranging Home Modifications	2449
2	Dementia Design Guidelines: Home and Community Care Capital Works Program (2nd Edition)	2188
3	Home Smoke Alarms: Hard Wired and Battery-Powered Systems - SUMMARY BULLETIN	1971
4	Industry Checklist: Designing home environments for people with problems with cognition who display aggressive or self-injurious	1949
5	Gardening at Home: Summary Bulletin	1681
6	Industry Factsheet: Designing home environments for people with problems with cognition who display aggressive or self-injurious	1429
7	Designing home environments for people who experience problems with cognition and who display aggressive or self-injurious behaviour	1403
8	Thermostatic Mixing Valves – Summary Bulletin	1257
9	Understanding Aboriginal Australians for more Effective Provision of Home Modification Services – Summary Bulletin	1222
10	Orientation: Evidence Based Research: Effectiveness of Grabrail Orientations During the Sit-to-Stand Transfer	1156

Publication and Research Activities: Research activity report was tabled and spoken to, including:

- Funded for discrete blocks current funding is very different to previous work.
- Paper: Home modifications and their impact on waged care substitution still
 needs to undergo peer review, draft presented for confidential review/comment.
 Special thanks to Sue Dinley for supply of as yet unpublished data. Case
 analysis and systematic review using de-identified client reports on health
 status, environment appropriateness, care hours, care costs, etc. Utilizes
 Canadian SMAF tool for functional assessment and ongoing assessment as
 clients transition from one classification of need to another (degenerative or

rehabilitative). Recommendation: that a much bigger longitudinal study of care costs in relation to environmental factors is indicated.

- CB The study outlines a reliable way to collect data that can reduce verbiage and allow an informed decision around modifications and care to be made for the client.
- IM query re correlation between HMods cost and care cost does this generate an efficiency or just a shifting of costs?.
- CB There are two issues subsidized service and cost of benefit analysis – look at Cordell and other ways industry computes stuff.
- o IM can knock 50% off the prices
- CB availability of materials is an important factor.
- NL Might get material costs down, but service costs could be more
- CB Well we intended to find out what the situation was, and it was pleasing to find out what we did (statistics corroborating projected outcomes).
- IM Exhaustive home mods is not the real cost.
- O CB That's another issue. Informal care possibilities need to be considered. Someone who does not live alone may have higher needs, but also has more support. Someone who lives alone will have more care needs. Functional prognosis is also important. The time at which an assessment is made is a 'snapshot in time' an estimate at best and does not have a great deal of accuracy for more than a year to five years at best. Designed to enable easy comparison. The report will be out to peer review by 30 June 2010.
- RC Looks great.
- CB This is how we should be documenting things. The different systems and formats presented in different sectors are problematic. We need to consider ideas – ways to standardise data within different government bodies and organisations that have different functional information needs – this is out of our control. Veterans is now Federal – but was previously by states. Legislation and bodies make it hard to get consistency.
- o RC we need to find a way to reduce the red tape system
- CB new technology allows for clear filtering and reporting of data for a range of user needs. There is no reason why we couldn't keep a wide range of information and output the reports required by different organisations. QA application could be done in the homes using an iPad for a quick 'tick and flick' solution.
- SD I like that if the people doing the ticking and flicking have experience – there are significant professional problems with recent graduates and people who don't have experience.
- CB there are two issues here university training needs to be part of the solution – there needs to be some feedback system – matching what is on the ground and what is coming out of universities. Secondly, 'tick and flick', would mix OT with disability services (construction) but again we have to be careful how to set up dependence on professions as a first explorative step.
- RMK suggest broad parameters
- o IM site constraints
- RMK suggests preferred system and link into other legislative bodies.

- o RC It could produce prompt to therapist to look at something.
- CB Yes, it would allow an attention directing framework.
- RMK reasserts previous statement re system for reporting prompts a closer look at service provision. System will increase efficiency.
- CB Yes, the funding decisions can be entirely made based on findings.
- Research Cost benefit analysis of lifts versus ramps: methods, models, life cycle evaluations. A systematic review, from a pool of 992 cases 32 were included in the study.
- SD QLD VA are embarking on a similar study. The level of evidence is low, and there are zero controls. It's mostly a case study and professional opinion.
- IM Installation costs are not much different between timber and concrete.
- SD there is only a difference after 500ml height then timber becomes more expensive. There is also the fact that concrete is permanent – there is the aesthetic consideration and removability of wood, which accounts for 53% of ramps.
- IM issue for HMInfo industry dealing with in regards to lift installation and assistive technology – once the installation is complete, all responsibility for ongoing maintenance, modifications and liability are passed onto the owner (client).
- SD DVA used to be this way, but after seeing so many lifts hanging by threads, we decided to do annual maintenance on lifts, although we have contracts that reduce liability. It's expensive but these can be deadly devices if not kept well.
- IM with HAC any home mods going into the home, ownership refers to clients after 12 months, but even when the warranty expires, clients are still eligible to apply for maintenance on an ongoing basis.
- SD we get authority from the tenant to remove the item when it is no longer in use, but HAC will leave them and accept no liability. We have problems with storage – it's not cost effective to do that. So we usually write to the new owner and alert them that we are giving them the item – and the responsibility.
- IM In our contracts, we put initially that we don't deal with what happens afterwards. We give up liability up front. That's with any assistive technology. We transfer ownership to the client.
- o RMK what kind?
- CB all ranges of lifts
- RMK what cost for lifts?
- O CB looked at prices of lifts, there were five cases given to us there was some variable but wheelchair lifts were \$37,000 variable. There is an area of overlap for lifts and ramps based on materials and conditions, so there are other factors in play. There are, for instance, heights and distances at which one is more appropriate to another. Costings are from comparative analysis of home mods.
- o RMK we've used a car hoist to create elevation.
- o IM platform with bend what is that?
- CB it's a platform with a turn

- IM in our terminology that is a stair climber there's a conflict in terminology, with platform lift (curved) and a stair climber, as well as between lifting two floors or two levels.
- RMK that cannot be used in comparative research for ramps, is this part of the study?
- CB What it actually says cost guides are useful, but length is critical.
 Unless we have a real case it is not possible to make a comparison.
- SL In one instance a ramp was suggested but a lift was cheaper the judgement can only be made on a case by case basis.
- CB You can't make that call based solely on material costs.
- IM can use a ramp up to a metre, a platform lift up to 1.7m, and a shaft lift in excess of 1.7m, but that differs to stair climbers.
- CB explains complexity of costings using cases as examples.
- SL got level 3 to agree to a lift ramp would take up whole of front yard - will forward to CB – another factor is whether carers can easily push the person up a ramp versus a lift
- SD we used to reject lift and stairclimbers because of installation costs

 in the last couple of years, some suppliers have become cheaper. Our clientele doesn't necessarily need them for a long period of time (so maintenance ongoing is less problematic).
- o RMK physical maintenance of lift is there a quantifiable cost?
- o CB there are safety issues involved.
- RMK there's also the cardio load to consider, it's not just joints but respiratory as well.
- NL AS1428.1 1:14 ratio 9 meters before a landing where did this figure come from?
- RMK that's a long way.
- NL Australian Standards are obliged by law but I wouldn't recommend this, it's too far.
- IM it depends on the design.
- CB the first tests were done with returned Vietnam war vets in the states and they came up with 1:12 – they were in peak physical condition. Ed study in UK showed that 60% of older people could not manage 1:12, and there were concerns with 1:14.
- o SD it was 1:12 in the 80's
- CB there is an immense problem with best practice versus minimum standard.
- o IM which is why we require home mods to be assessed by an OT.
- CB the problem with OTs is that they can't take a client to test these kinds of things, it's not like they have adjustable ramps to test people out on.
- RMK the problem is that the standard is what we have to do [adhere to].
- IM we can make judgements
- o NL we need a common language, it's not productive
- RMK it depends on the circumstances and the individual.

- CB with someone's home, you need to be able to get in on your worst day, in the worst weather, in the worst physical condition, when you aren't feeling good.
- o RMK What do you tell the designers?
- IM we adopt Australian Standards unless an OT varies it.
- RMK there is a big onus on the OT.
- SD we don't do that. We base it on a client's physical function –
 however regardless of the work orders, builders sometimes vary the
 work or materials –I expect a builder to tell me if that's going to happen,
 but it isn't always the case. New grads won't understand that.
- IM we adopt the Australian Standards on a minimal basis, it represents the lowest possible accepted standard, it is not best practice.
- SL we're dealing with mods and we want to develop standards for new properties
- RMK if you are on 1:20 for a long period of time, you need rest points
- RB it comes back to the client's function
- CB we are required to submit the final report to ADHC on the 30th of June, so this is great input
- Paper: Review of Aboriginal Housing guidelines in relation to adequacy and appropriateness of functional impairment provisions
 - CB we planned to do quite a lot of case studies, but out contact in Wilcannia moved on. So we made an executive decision to take this out and repurpose for a literary review in primary, with extensive studies to come in future.
 - RB There's a new OT who?
 - o NL Are you in touch with the contact I gave you?
 - CB Yes but there's only small research component. The issues are culture, climate, and attention direction framework. You can't apply for aboriginal and disabled housing at the same time! They are two separate housing options.
 - RB There is an area with a high population of disabled aboriginals due to Machado Joseph Disease, so there's a lot of wheelchair users in that area. There is a research foundation based in Sydney.
 - RMK offering an aboriginal housing officer?
 - RB how are they managing in WA?
 - CB Major problems. I have info about this.
 - RMK are we looking into universal design geared towards Aboriginals?
 - CB yes, and how bureaucracy can manage this.
 - RB and they have to be cyclone proof as well.
 - RMK that's not a hard consideration.
- Mentoring/Training
 - Mention of Jenny Fishpool project
 - NL training Public Housing Richard, Sue and Kelly attended.
 Specialist officers told about the training session. Discussing protocol OT/client services, etc. Put information on what clients and applicants

- can expect on the public facing website, so as to set up a series of public expectations in the form of public policy.
- IM subsidy for our clients this has a different meaning
- RMK diagnosis for long term needs who do we go to?
- NL needs to be a specialised OT more funding is required for housing to access more qualified OTs.
- RB we need a process that leads new graduates into being competent field workers.
- IM that's a matter of training and experience
- CB that's what the mentoring is all about.
- o RB taking an interdisciplinary approach on the 1st visit is very valuable.
- NL we need to know how to best come to appropriate solutions it can be a very emotional experience for the client.
- RB home mods are very emotional. If you can't function in your home, you can't function outside because you can't get out of it. KW in charge of Falls conference, 23rd June – is it a Wednesday?
- CB (tables the Enabling Environments Template) The wheelchair template is meant to be an A-90, but is not really to my liking, it's just a stretched version of an A-80 having said that, nothing is available to check this has come from Standards, thus this is the first piece. One of the big mistakes people make is to design around the turning of a wheelchair, and not an ambulance stretcher. (referring to plastic template) We're planning to use this material (CB shows material to committee). I'm showing this to you in confidence, the next step is to write to the organisations that own copyright for the designs and request permission to do this. The drawings are not their drawings, Pip created them, but the actual IP for the designs is something we need to consider and request permission for use.
- NL how does this affect turning into a doorway?
- CB well consider the bathing trolley it's got a wide turning base so
 yes it affects the design requirements. But the ambulance trolley is the
 largest item, and this is something that needs to be considered.
- IM it enables the design of door widths in conjunction with other widths such as hallways
- NL − I guess the only thing is that we'd need to know where the wheels are to figure out the turning basis
- CB exactly. I need to know what info is missing that's why I am sharing it with you. It would be great if in the long term we could sell this through architectural bookshops.
- RMK I think a commode is more important in a bathroom than a wheelchair.
- IM there's a booklet that was designed in the 90's
- NL report in the late 90's A21.60 is this still current?
- JG you need to firstly get into the bathroom
- CB yes, it is. We want to make sure everything is correct and make sure we are 100% ok with copyright clearance, etc.
- o IM leaves meeting @ 15:50
- CB there is no money from ADAC for OT liaison and website

- NL we need more information on falls on tiles. People prefer tiles to vinyl, it's got a less industrial feel, but there are a lot of problems re noise. It's good from the point of view that we don't have ongoing costs to replace carpets, I'm not in favour of carpets. Carpet tiles look too industrial. A lot of falls seem to occur due to mats and carpets (rugs) being used on tiles. People trip as they transition from the tile to the carpet. Requests input from committee
- RB I'm not sure if it has a large implication.
- CB we'd need to organise to look at it.
- DG Older people wear socks and walk around on the tiles, it's a terrible combination, tiles are not a good solution
- SD people are tripping on them
- DG walking in socks is a big issue to consider
- CB yes it requires more work.
- NL sock free zones!
- CB we did receive \$417,000.00 non-recurrent funding from ADHC. Tweed, Dubbo & Wollongong – with Office of Ageing and Living Centre. We only have \$65,000 recurrent, convincing government this is a valuable resource is tricky. If you have any ideas, I would be grateful.
- o RB you'd have more success with the Commonwealth.
- CB National Home Mods Evidence
- RB well you are the only clearinghouse, so it puts you in a unique position. Dept of Aging – the timing is right – I'll give you the contacts.
- SD National Home Mods will be interested, Vet Affairs also.
- SD leaves meeting at 16:01
- SL Ots using coupon model –instructional assessment and port of post assessment. Differs from 1st – end/sign off/month current. Opposed to this if client further deteriorates/deviates. Will call CB outside of this meeting to find if there is a fit. We can't get the data, it needs to be objective, we need hard-core data.
- CB I'd be happy to chat with you.
- SL positive feedback there's not a lot out there to validate from a set perspective.
- o LR can you explain the sytem?
- SL measured what OT value quality of life type issues. Also have home mods qualification – pre mods and post mods – assessment. Have there been any deviations- have builders done this without consulting the OT – often the OT only finds out on sign off, as they are a level-2 service provider.
- LR We have experienced that, it gets deferred back to the OT from the builder before we sign off.
- o SL we need hardcore OT data to validate it.
- CB Canadian Occupational Health as a source of data to assess priorities? Where they are as opposed to where they are going.
- o RMK is that objective enough?
- CB tells clients perception of improvement 3 levels: Satisfaction, Perception, Outcomes

- o RMK is it objective enough?
- CB the Canadian tool makes it quite simple to find out the needs and requirements of the clients.
- RMK as long as we know the limitations.
- CB we can aggregate the data.
- SL looked long and hard and could not find the appropriate tool. We have 5 OTs here and thought we would have a look at it. No high level mod accepted unless client is fully compliant. This is done first to tidy things up. It provides a better outcome for everyone.
- CB ADHC wants to know if the money being spent is making a difference.
- NL environmental mods? Is this what we want to use (terminology)?
- RB Mods not disabled.
- CB yes, like 'accessible toilet'. There are 2 issues. Firstly, therapists are under pressure to deliver services – so often follow-up gets dropped. Secondly, Follow up is not given as feedback.
- RB Skill level may continue to improve from the initial time the leave rehab.
- RMK- Housing NSW Forum long term prognosis need body of data built into mod. Not just here and now – need forseeability.
- SL Absolutely. Show what has been put in place has an outcome.
 Need something to give us more data.
- RB many disabilities prognosis is individual.
- LR clients require care throughout their lifetime, can't always predict the outcomes

3. Deliverables

- Home design and modifications and their impact on carers and waged staff to support people with a disability and/or ageing.
 - This report is currently in draft form as a literature review and is on track to completion by June 30th.
 - The report addresses levels and types of care. A systematic literature search
 has been completed and we are working with the Home Maintenance and
 Modification Services in the development of case studies demonstrating cost
 implications of substitution.
- Review of Aboriginal Housing guidelines in relation to adequacy and appropriateness of functional impairment provisions.
 - A systematic literature search has been completed and here have been a number of discussions with aboriginal groups such as the MJD Foundation, which seeks to provide a better quality of life for Indigenous Australian sufferers of Machado Joseph Disease and their families in Arnhem Land and beyond. Because of the complexity and difficulty locating good practice case examples the project is taking longer than expected and a draft is not yet ready for consultation.
 - CB to draft an attention-directing framework in checklist form identifying the physical (climatically); social (attitude to disabilities) and cultural (kinship relations etc) factors relevant to best practice housing outcomes. For instance, achieving level access can be difficult for a number of reasons i.e. in the tropical North there are issues with monsoons and wildlife. Thus one-size fits all approach is unlikely to be practicable.

- Training and education of home modification and Allied Health Staff
 - Lyndal Millikan has been the project manager for this and has collaborated with Home Maintenance and Modification Services State Council Occupational Therapist to ensure that the Fact Sheet Series is based on evidence and current scholarship in the topic area.
 - SS informed the committee that she has received overwhelming positive feedback from industry and consumer alike in regards to the HMinfo Factsheets.
 - CB discussed in more detail the training materials that the HMinfo Clearing website provides such as you-tube clip and we plan to share more relevant podcasts to assist users evidence-based practice and in helping first-time users to access the available evidence more easily.

• Home Modification Information Clearinghouse Website

- A program of website upgrading and enhancement is progressing.
- CB described a new module that she would like to introduce on the website called 'E-Journal' http://drupal.org/project/ejournal This DRUPAL module is a powerful production publishing system. It allows you to create and control an electronic (and possibly printed) journal, add authors and editors. The Open Journal System, that is online submission and manuscript tracking system, inspired this module. Moving to International journal status will enable better academic credits such as inclusion in the Higher Education Research Data Collection (HERDC) and Excellence in Research for Australia (ERA). This is important because research standing and resource allocation depend on this. CB as a University researcher is under pressure to provide evidence at this level and this is a win-win situation for the following reasons.
 - Manage Peer review from domestic through to international.
 - All Electronic Journals so much more cost effective.
 - Imperial Research Stream, design guidelines.
 - Inclusive Design E-General first of its kind internationally which will garner far more credibility. Will be possible for other academics to publish – build evidence based with less cost.
 - E-General no publication costs.
 - Creative Commons no fee
 - Ed Steinfeld and CB will choose where it goes and same costs involved to do reviews. Will be an initial start up cost of developing templates and managing the editorial. Progress is being made and this should be undertaken before the next meeting.

4. Events and Training

- The Australian Association of Gerontology Rural Division Conference on <u>'Ageing at home: sustainable housing and communities for older people'</u>- CB will present a keynote address on day two called 'Social sustainability and the Environment'.
- FBE symposium on Housing and Older People at the International Federation on Ageing 10th Global Conference 2010 <u>'Climate Change: Ageing into the</u> <u>Future'</u>. CB, and other UNSW researchers will present a symposium on "Home Truths".
- <u>ICADI International Conference on Ageing, Disability and Independence</u> will take place in the UK in September and is a biannual conference and the only international conference that includes a home modification stream. Ed Steinfeld will be the Convener and CB will take part to some degree.
- <u>NSW HMMS Biennial Conference</u> will take place in September and Stacey explained the background to the event and that she wrote to CB in regards to preparing something for this state conference. CB suggested that HMinfo will

put on a workshop entitled from Quality Assurance to Masters and Beyond which will provide information in relation to how quality assurance data can be used in Masters research and other studies.

- <u>FICCDAT Festival of International Conferences on Care-giving, Disability, Ageing and Technology</u> will take place in June 2011 in Toronto.
 Jeff Furney and Ed Steinfeld are heavily involved in this conference and there will be a home modification stream. CB will be involved in some capacity.
- 3rd International Conference for Universal Design in Hamamatsu will take place in October this year. CB has been invited to be a reviewer for academic papers by Satoshi Kose <http://homepage2.nifty.com/skose/papersSK.htm> who has been a leader of universal design Internationally.
- NSW Falls Conference last year HMinfo teamed up with the Independent Living Centre to put on a trade display. The last conference was on site at UNSW and possible that this one will take place at UNSW also. CB will email this information to all committee members.

5. Other Funded Projects

- CB involved with <u>Sustaining 'aging in place': Towards a multidimensional analysis of informal care within the Asia pacific region for the Association of Pacific Rim Universities, Institute of Gerontology, University of Tokyo Partner. This project was funded by a Japanese company and involved interviews in each country with a policy focus and is now complete.
 </u>
- AHURI Age Specific Housing Markets and housing and care for low to moderate income older persons – this is due in September and the positioning paper has been submitted for peer-review.
- AHURI Older People's Housing Policy: An Essay CB and Andrew Jones (University Of Queensland).
 In final draft.

6. Other Business

• General Discussion re: Stoneware tiles

NL – wanted to discuss the benefits of slip resistance tiling (for the Falls Conference?).

CB – stone wear tiles are the best for many aged and disabled peoples as they are semi glazed and quite smooth and easy to clean and maintain. They are smaller tiles with larger grout.

NL – Are they expensive?

CB – Stone wear tiles are available in sheets.

SD – And easy to grade

CB – stone wear are the best option for domestic floors apart from vinyl.

RB – Most people don't want vinyl in their house as it has a hospital feel and likeness.

NL – These tiles are expensive and we need to develop a technique to make it more cost-effective – big noise between units.

CB – this should be turned into a funded article.

NL – stone wear tiles – careful in regards to the performance specification. A lot of performance based does not pass Australian Standards.

CB – Will try and get some research underway – possibly with an ARC grant. Housing research goes to AHURI.

NL – Spoke with Mark? and people in Melbourne did research in regards to this area. A Commonwealth green lit premises modified the standard and as a result forced a review of all Aus. Standards – whatever falls under clause 428.1.

CB – Australian Standard 428.1 is clear and only applies to common areas.

SD - Reference as a baseline.

NL – Should not be used in homes but a lot of people do it.

SD – use it as a baseline. Good 18 months off – no access panels and cannot

design on preferred solutions. Is there a difference between 428.1 and 99?

NL – Beside a door – 850 on every door.

CB – Will need to make this information available to the group and larger committee via the HMinfo website.

SD – There was a recent study in regards to rails – how close a rail needs to be to a wall.

CB - 50mm

SS – mentions the entrapment case.

CB – For the design to be approved an arm is not able to fall through the gap between the rail and the wall. Entrapment case is about a man whose arm went through a handrail and he suffered significant damage to his ligaments as a consequence.

Meeting closed at 4.16pm.

Next Advisory Committee Meeting

The venue for the next meeting is will be held on Thursday the 2nd September 2010 at the Faculty of The Built Environment, University of NSW.