Report on visit of architects Sitka and Kaserer in Saalfelden, and Social Center Pillertal in Fieberbrunn near St. Johann, in Tyrol, Austria, We. 13 Mar. 2019

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Fig. 1. Social Center Pillerseetal (Image source: http://www.fieberbrunn.tirol.gv.at/Sozialzentrum)

Part I. At the architect's office Sitka and Kaserer

In the afternoon at 13:45 I arrived (driven by a local police officer) at the architectural office of Sitka and Kaserer (SK) in Saalfelden/Tyrol in Austria. A colleague gave me some initial explanations, showing me a 2013 report in ecoms (https://ecoms.sus.co.jp/magazine/pdf/EC_0035.pdf, pp. 23+24), a Japanese magazine about the Social Center Pillerseetal in Fieberbrunn project of 2011. He

pp. 23+24), a Japanese magazine about the Social Center Pillerseetal in Fieberbrunn project of 2011. He also showed me some poster on the wall from which I learned, that it was a Europa wide architecture competition among 120 companies, and SK won the bid.



Fig. 2. Certificate of 10th Vorarlberger Wood Building Prize.

Also, they received in 2013 a special wood architecture award (10th Vorarlberger Holzbaupreis) for the project, see Fig. 2.



Fig. 3. Mr. Planegger and the author.

Then I had the opportunity to discuss for about one hour with Mr. Planegger (Fig. 3), who was actually in charge of the project in Fieberbrunn. He graduated in architecture (engineering oriented) from Innsbruck University. Before the project, they had the opportunity to speak with the local care managers in older facilities. They did not want to make it look like an old fashioned nursery home. Rather in the style of a hotel. It has a concrete core and on both sides, across three floors modular wooden cross laminated timber (CLT) rooms are attached, which were prefabricated by Kauffmann Bausysteme GmbH in Reuthe, Vorarlberg, a company very advanced in wood module architecture. The rooms were completely equipped with bathroom, windows, electric and water installations in the factory, before being transported by trucks onsite. At the beginning it took Kauffmann Bausysteme quite some time to assemble the modules, but the more they did (altogether 70), the faster they got. Also, for Kauffmann Bausysteme it was a pioneering project. The mayor of Fieberbrunn, was a traditional building company owner. Mr. Planegger told me, that clients live longer in the Social Center Pillerseetal, than in other facilities, because of the good environment and the excellent care. The tall and light filled wooden room atmosphere may contribute to that. Also, on one side of each room the wall is left white for the residents to decorate it themselves with pictures, etc. Rubber blocks are used for module to module sound insulation (three modules are stacked vertically), because wood otherwise transmits sound rather well. The elasticity of the rubber means vertical shifts on the third layer of up to 2cm, compared to planned construction measures. Ideally, CLT boards should also be glued together not only interlayer, but also from board to board (sideways), so as to avoid the development of openings due to humidity and thermal working of the wood. These openings across layers can principally significantly reduce the desired air tightness, an important parameter contributing to overall energy efficiency. Outside solar shading is done with vertical boards (lattice) that can be horizontally shifted on rails (Figs. 6 and 8). But this system needs relatively high maintenance.

Also experience with vapor transmitting roof membranes, shows that in the summer sufficient heating by the sun needs to be guaranteed (it helps to make them black!) in order to create enough vapor pressure for the water to be pressed back out in the summer time. If there are some installations on the roof, which shade certain areas permanently, water may remain for good in the roof structure and that could lead to deterioration (based on experience with other projects).

The architects planned three atria (Fig. 4) with light to come in through ceiling windows. One has a fountain, one a billiard table, plants and places to sit comfortably. One even has in the 2nd floor a kind of balcony for a view into the atrium.

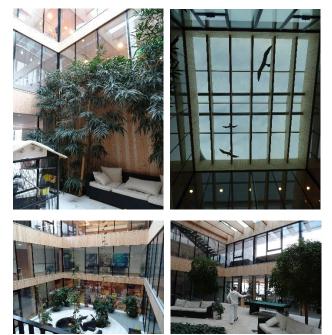


Fig. 4. Photos of atria with birds (top), plants and balcony (bottom left) and billiard table (bottom right).

Also spacious outdoor balconies (Fig. 6) provide splendid views to breathtaking alpine scenery.



Fig. 5. Panorama balcony.

The land originally belonged to the local church, but they sold it at a relatively affordable price. It was the first such project and so far the last for SK. But they learned a lot from it. Now there is a photo guide in the social center café, showing all stages of the construction, and Mr. Planegger said, he would have liked to have had a similar guide before doing his planning. There is also openness to receive delegations from Japan (e.g. from companies like Meiken Kogyo, or the CLT Association). SK may also be willing to brief a visiting student group (e.g. supported by the Japan ICU Foundation).

Moreover, there is a kindergarten (Figs. 1 and 6) uphill and frequent interaction between kindergarten kids and nursery home residents.



Fig. 6. Entrance to Social Center Pillerseetal with kindergarten to the left.

The Social Center has a café (Fig. 7) inside and an event space, that has become very popular in the surrounding community.





Fig. 7. Café bar (left) and café space (right).

Local politicians have seen the facilities and

surprisingly oppose the construction of further ones like it, not based on costs, but because it looks rather like a hotel, too luxurious, even though the construction and maintenance costs are not more than in other facilities. I wonder if this may indicate deficits in political moral, including in understanding and applying Christian ethics?

Part II: Visit of the Social Center Pillerseetal

I drove by taxi to the Social Center Pillerseetal (SCP) in Fieberbrunn. Along a main road (federal road), and off to the church of Fieberbrunn, on the left side, and soon after it a little uphill appears the SCP, behind a school facility. The drive cost about 46 Euros. There is also a bus connection.

Mr. Herbert Breitmayer, the care service director (Pflegedienstleiter) received me in the café, offered me delicious cake, coffee and a canned bio lemonade, quite refreshing. He first had to finish off a seminar course. He handed me the photo book of the construction to see. I found the building has relatively high ceilings (Fig. 13). On the outside it looks plain grey. Vertical boards and high windows appear alternately. The wood module structure is not discernible from the outside (Figs. 6+8).



Fig. 8. Part of Social Center Pillerseetal with two floors of stacked CLT module rooms.

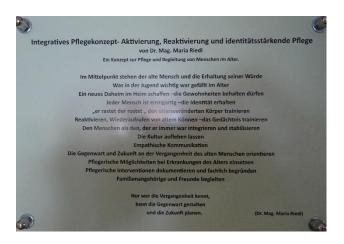
In the center following the entrance is one of the three atria. The café is on the other side, also a special needs staff works there confidently. From the café one can see the event space, that can be connected by removing sliding doors (with windows) to the café space. The event space and café are very popular and often external event organizers reserve it, this provides strongly welcomed interaction with the community.

Then Mr. Breitmayer briefed me and answered my many questions. He thinks, that the energy efficiency (now water heating with natural gas) could still be improved. They have some solar modules on the roof, but had more in the past, which did not survive the heavy snow loads (seven months per year). Maybe with heat pumps high temperatures in the water heating (for space heating) facilities, could be further exploited for energy efficiency. Wood chip boilers or wood gas cogenerators are currently not used, due to costs and the question if the wood chips would always be ecologically locally sourced and supplied or if cheaper wood chips from eastern European countries would be purchased instead.



Fig. 9. Photo installation with 48 faces of residents.

One side wall has a photo installation (Fig. 9) with some 48 faces of residents. Each of them smiling with great happiness. Mr. Breitmayer can tell about each of them, how they arrived, how he got to know their personal biographies and how they began to open up, relax and brighten up over time in the SCP. People who were completely written off before, and had 25 diseases diagnosed including immobility and dementia, started a new life. Some who had been exploited for heavy work at low wages, and broke down exhaustedly, were well received, well respected, greeted, trusted (e.g. bringing the mail each day to the post office, taking care of a garden, or of animals, etc.) all according to their particular biographies – a key notion of the care given here. At the beginning of the millennium Mr. Breitmayer started in an old previous facility with low quality rooms (three occupants in low ceiling rooms with less natural light) and an old top down care approach, that depressed residents and staff alike.



Integrative care concept – activation, reactivation and Care that strengthens identity

by Dr. Mag. Maria Riedl

A concept for care and accompaniment of people in (high) age

In the center is the old person and the preservation of his dignity

What was important at young age is still pleasant (at high) age

Creating a new home in the (care) home – being allowed to preserve habits

Every person is unique – preserving identity

"Who pauses will corrode" – training the body that has changed due to (high) age

Reactivation and recall of old skills – training memory Integrating and stabilizing the person as it always has been

Reviving culture

Communication with empathy

Orienting presence and future along the past of the old person

Utilize care potential for old age diseases

Documentation of care interventions and provision of expert reasons

Accompany relatives and friends

Only who knows the past, can form the present, and plan the future.

Fig. 10. Principles of Integrative Care Concept of Dr. Maria Riedl (top), and translation by author (bottom).

Mr. Breitmayer discovered the biographic approach (Fig. 10), and the idea to do holistic animation of all aspects of a personality (values, 5 senses, reflection on past and introduction to modern society, interaction with kids, involvement of many volunteers, etc.), see Fig. 11.







Fig. 11. Chapel (top), seminar room with mannequin (center), interior decoration (bottom).

Family and visitors are so impressed, that later they often become volunteers. Professionals and volunteers together (Fig. 12) constitute now about 100 staff, including a beauty shop and hair dresser, something very, very important for the clients.



Fig. 12. Notice board showing current care givers, etc.

The *best* was for me seeing the old people taking their dinner together in their local community groups (no more than 20), together with the volunteers. Mr. Breitmayer greeted everybody cheerfully and was greeted back equally cheerful. *Nobody* looked emotionless, depressed or absent. It was like the clients live literally in a big family, and I observed them also helping perfectly naturally to clean up the tables and dishes and help with the dish washing after the dinner. A friendly elderly lady happily gave us permission to inspect her room (Fig. 13). One said, it is so valuable to have your own room to withdraw.





Fig. 13. Spacious, light filled, high ceiling, full height panorama windows (top). Left side wall white for personal decoration (bottom).

At the same time the rooms are grouped around the dining space, which makes meeting easy. Mr. Breitmayer said, in his old facility, they had three beds in one room, and a low 195cm ceiling. One room now has 27 square meters.

Ever so often he receives outside donations for an animal facility (chicken), a herb spiral garden, a five senses garden (Fig. 14), a high garden (Hochbeete), etc., in order to further enrich the living environment for the clients.





Fig. 14. Garden taken care of by resident (left). Summer impressions of the garden (right).

Usually 20 to 30 % of newly moved in clients die during the first year, because it is difficult for old people to move to a new place. In SCP, this rate is down to only 1%! In Mr. Breitmayer's view, biography based care should be made the mandatory standard in all nursery homes across Austria. He learned this type or care from Dr. Maria Riedl (https://maria-riedl.at/IPK/), see Fig. 10, it was introduced to him by a colleague. Usually nursery homes have a very high throughput of staff, who cannot go on with this difficult work for long in the same place. This is *not* the case in SCP. Also Mr. Breitmayer is critical about the new tendency in Austria to make care giving a more and more academic profession with bachelor degrees, and less and less practical training.



Fig. 15. Day care center for elderly citizens.

SCP also has a day care center room (Fig. 15) to serve the local community, which greatly reduces the burden on families. The very popular day care is open five days per week.

The oldest resident is 107 years old. People who came immobilized, have been mobilized again, so only three out of 70 residents are not mobile, but still get regular mobility therapy. This gives them the feeling of not being abandoned. A wood carver has his own wood carving corner, where he apparently likes to work. I saw on a photo the widely smiling face of an old resident,

who in a small competition won a trophy for the first time in his life. A former restaurant operator, likes to pour drinks for other clients. One client takes great care of the five senses flower garden.

The SCP is a very popular place for internships, starting with school children. The waiting list for becoming a client of SCP is long. One reason is that people here do not die early, but enjoy life. They resolve their conflicts and live happily the last years and days of their life and often die relaxed in a few hours, being able to let go, not being held back by unresolved conflicts. In the past Mr. Breitmayer experienced in the old facility situations of dying clients taking three months in bed, which was very depressing. He likes to guide people around and is happy to receive visitors, but is not confident himself as lecturer. He thinks living groups of no more than nine clients would be ideal with a local group staff, no central staff, where also cooking etc. is done locally inside the group. This would also allow combination with living groups of handicapped people. It may even be possible to involve handicapped people in the service of the facility. Also combination with student living groups would be a good option, if personal time with the old clients is sufficiently guaranteed. For example, in the form of joint meals, joint play time (cards, board games, billiard), and other joint activities. The SCP has a billiard table (Fig. 4) and some clients request their families as a birthday present to get a billiard cue for them.

Notes:

- 1) Dr. Mag. Maria Riedl has published her concept in the following four books (German):
- [1] Integratives Pflegekonzept, Band 1: Grundlagen, BoD Books on Demand GmbH; Auflage: 1 (1. März 2006). (English: Integrative Care Concept, Vol. 1: Fundamentals.)
- [2] Integratives Pflegekonzept, Band 2: Zeit- und Kulturgeschichte, BoD Books on Demand GmbH; Auflage: 1 (1. April 2006). (English: Integrative Care Concept, Vol. 2: History of Time and Culture.)
- [3] Integratives Pflegekonzept, Band 3. Pflegeprozess, BoD Books on Demand GmbH; Auflage: 1 (1. April 2006). (English: Integrative Care Concept, Vol. 3: The Care Process.)
- [4] Integratives Pflegekonzept, Band 4: Pflegediagnosen, BoD Books on Demand GmbH; Auflage: 1 (12. März 2008). (English: Integrative Care Concept, Vol. 4: Care Diagnosis.)

2) All photos (except Fig. 1) were taken by the author during his visit on 13th of March 2019.