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Where is Vermont's Burgeoning Population of Seniors Going to Live?

By KEN PICARD



The Residence at Quarry Hill

COURTESY OF HEATHER PROHASKA

Vermont is preparing for a demographic shift that has been described with all manner of ominous-sounding metaphors: the elder earthquake, the geriatric time bomb, the demographic cliff, the silver tsunami.

Call it what you will, the numbers are sobering: According to U.S. Census figures, Vermont's population is the second oldest in the nation and on track to claim the top spot soon. In the next decade, Vermont is projected to add another 100,000 people to the 60-and-older age group, a 16 percent increase. The number of Vermonters 85 and older is expected to *double* by 2030.

This population change will have an impact on state coffers: Retired people, who are no longer working, pay fewer taxes. Those who live in rural isolation are harder to reach and costlier to care for. Tiny Vermont lacks the resources to expand public transportation or make older houses affordable and safe.

The state's current inventory of more than 100 senior living communities, including independent living, assisted living, memory care and nursing homes, won't be enough. Bottom line: "We're going to see an increased need for many different retirement options," says Monica Hutt, commissioner of the Vermont Department of Disabilities, Aging and Independent Living.

Four new projects — three bricks-and-mortar facilities and one “community” concept — illustrate the ways in which Vermont’s developers and senior housing advocates are responding.

Room With a View

South Burlington’s **Residence at Quarry Hill** looks more like a five-star luxury resort than a senior facility or nursing home. With its large stone fireplace, high ceiling and white linen tablecloths, the main dining room has a stunning view of the Green Mountains — and easy access to Interstate 89 and the University of Vermont Medical Center.

In the elegant eating area, gourmet chefs offer a restaurant-style menu and “anytime dining.” Residents can drop in between 7 a.m. and 7 p.m. and order a freshly grilled steak for breakfast or pancakes for dinner.

“It’s more of a hospitality model,” says Cathy Stroutsos, Quarry Hill’s senior director of sales and marketing, of the premier senior living community that opened in July 2016. “You’re not going to see people walking around with stethoscopes around their necks.”

Quarry Hill’s other amenities are equally luxurious: on-site movie theater, hair salon, art studio, gymnasium and library. There are classes in tai chi and yoga, concerts and lectures. A van is at the ready to chauffeur residents to appointments, shopping, social events or religious services. Elders in need of physical, occupational or speech therapy can get it right there.

The 104-resident community offers independent-living, assisted-living and memory-care apartments, the last of which cater to people with dementia.

“Once you come in, you don’t have to leave,” Stroutsos explains. As residents age, they can progress from independent to assisted living without having to physically move to a different studio, one- or two-bedroom apartment. The more services they require, the more rent they pay.

Those who develop Alzheimer’s disease or another form of dementia relocate to a more secure floor, known as “Reflections.” In Quarry Hill’s memory-care “neighborhood” — staffers eschew medical words such as “ward” or “unit” — apartments are like hotel suites, with private, hazard-free bathrooms and kitchenettes.

Pine-scented aromatherapy is used to stimulate cognitive activity. The staffers all wear green, which is the last color that people with dementia forget. Adjustable lights and shades allow residents an easier transition from day to night, thus reducing anxiety.

Such amenities and attention to detail come at a price. Quarry Hill is elegant, comfortable, homey — and expensive. Rents start at \$5,450 and get up to \$10,000 *per month*, which is typically paid for out of pocket or via private insurance.

“There’s no question that these communities aren’t cheap,” says Ted Doyle, director of corporate marketing and public affairs for LCB Senior Living of Norwood, Mass. The company owns 16 communities throughout New England, including two others in Vermont: The Residence at Shelburne Bay in Shelburne has 196 apartments; the Residence at Otter Creek in Middlebury rents 101 apartments and 11 cottages.

The average resident is typically about 80 and ready to spend down his or her nest egg, according to Doyle. Many are moving to Vermont from out of state in order to be closer to their children and grandkids. If you factor in all the expenses included in the rent — food, transportation, utilities, property taxes, entertainment — he says, the cost sounds more reasonable.

“We certainly position our communities to be on the nicer end of the spectrum in terms of beauty and services,” Doyle says. “But it’s definitely not for everybody.”

Not Forgotten



Residents at Memory Care at Allen Brook making bird feeders

COURTESY OF KAREN PIKE

Premium, private-pay senior housing is great if you can afford it. Most Vermonters can't.

Cathedral Square, one of the state's largest providers of housing for seniors and people with disabilities, provides nearly 1,000 homes in 26 properties throughout Chittenden and Franklin counties for low-income and impoverished Vermonters.

Two years ago, 600 people were on the waiting list, according to Kim Fitzgerald, Cathedral Square's president and CEO. Today, there are more than 800.

Cathedral Square's newest facility, which just opened in December, addresses a fast-growing segment of that population: low-income seniors who need affordable memory care. Last year, Cathedral Square purchased the former Vermont Respite House in Williston and converted it into the 14-bed Memory Care at Allen Brook, Vermont's first dementia-care facility that accepts Section 8 vouchers and Medicaid.

On a recent visit to Allen Brook, six residents sat in the dining room watching a black-and-white Shirley Temple movie on television while their cook, Tonnie Sullivan, played cards with one of the residents, as she does almost every day. An LED "fireplace" added to the cozy ambience, without posing a burn hazard to residents.

Allen Brook isn't fancy, but it feels more like a bed-and-breakfast than a nursing home. Staffers wear normal clothes, not medical scrubs. The halls and bedrooms don't look or smell like a hospital. Rooms are bright and airy. A telemedicine room allows doctors to see patients remotely rather than requiring them to travel outdoors, especially difficult in winter.

"Everything is done to make people less frightened. If you reduce fear, you reduce anxiety," explains manager Ken Bridges. "Our main focus is the residents' well-being. It takes in medicine, but what you're really focusing on is their hearts."

Resident bedrooms are the size of single college dorm rooms, but each has its own half bathroom — tubs and showers are communal. Outside each bedroom is a memory box, where residents can place photos, stuffed animals and other mementos. The boxes add a personalized touch to the rooms, Bridges explains, and help residents find their way back to their personal living space.

Families can also bring in furniture and rugs. One resident's family re-created her entire bedroom from her previous home. "It looks like an apartment in Italy," Bridges observes with a smile.

As Fitzgerald notes, one previous resident lived in a pricey, private-pay facility — until she exhausted her \$500,000 in retirement savings in two years and got kicked out.

"There are a lot of market-rate options where you pay \$9,000 to \$10,000 per month for memory care, but none of our residents can afford that," Fitzgerald says. "Most of the people I know cannot afford that."

As a consequence, Fitzgerald adds, many Vermonters with dementia live in private homes, often in unsafe conditions, or languish in hospital beds with nowhere else to go. It's one reason, she notes, that UVM Medical Center invested \$250,000 in this memory-care facility.

Allen Brook already has a waiting list of 30.

"The need is tremendous," Bridges says. "Every day someone calls us looking for a bed. This is a pilot, but we know we need so much more."

'Vertical Main Street'



Rendering of the Village at White River Junction

COURTESY OF THE VILLAGE AT WHITE RIVER JUNCTION

Proportionally, rural communities across America are home to more seniors than are urban areas. People move to the country in search of a better quality of life, as the *Journal of Rural Health* reported in the fall of 2012, only to find that those areas often lack what elders need in terms of social services, medical facilities, public transportation and walkability. Rural seniors are thus more likely to live solitary lives.

Why not move to a city that is busy with people, restaurants, cabs and buses? One reason is the high price of real estate. Not many downtown lots lend themselves to affordable senior housing.

Developer Gates & Dickson has found a sweet spot in downtown White River Junction. There it's constructing a new, \$27 million assisted-living and memory-care community close to shopping, a quaint historic district, social services and several large health care facilities, including the White River Junction VA Medical Center and Dartmouth-Hitchcock medical center.

The goal of the Village at White River Junction, explains executive director Sandy Conrad, is to create a "vertical Main Street" within the four-story building where seniors can access nearly all of their needs on-site.

As she explains, the Village shifts the focus of senior living away from a medical-centric model to one that's about the arts, culture, social activities and quality of life. "Aging," she says, "is not all about getting to the doctor and taking your meds."

To that end, the 80-unit complex — 50 assisted-living and 30 memory-care apartments — includes a cinema, dog park, gym, spa, conservatory, bistro and rooftop gardens. Local shops and cafés are one block away, and ambulatory residents can also walk to shows at the Barrette Center for the Arts, the **Briggs Opera House** and the **Main Street Museum**.

White River Junction is also a centrally located transportation hub, near the intersection of interstates 89 and 91 and home to Amtrak's rail station.

The Village, which opens in July, will be operated by Life Care Services of Des Moines, Iowa. With 119 properties, LCS describes itself as the nation's third-largest operator of senior housing. The company estimates that the Village will add 50 jobs to the local economy.

Rents range from about \$8,400 to \$10,000 per month. As Conrad explains, the all-inclusive price is based on apartment size, not the level of care provided, because the company doesn't want to "nickel and dime" people.

Despite the price, Conrad sees communities like this one as cost-effective and sustainable. The model anticipates Vermont's labor shortage will continue as the state's population ages, which will make it difficult to recruit nurses, caregivers or volunteers willing to drive long distances to assist individuals. The Village, as Conrad points out, won't need Meals on Wheels to feed 80 seniors. "We're never going to get millions of people to move to Vermont, become our caregivers and help us fill this gap," she says.

It Takes a Village

Affluent seniors have their pick of fancy facilities in Vermont. Those on the other end of the economic spectrum can count on some government accommodation. But where will everybody else go?

"I am really concerned about that big group in the middle," says Hutt of the Vermont Department of Disabilities, Aging and Independent Living.

Many will have to "age in place" — a fancy term for staying put. Luckily, nine out of 10 Americans say that's their preference, according to AARP surveys.

Enter Mount Mansfield Villages, which incorporated just last week. It's not a housing or cohousing development but a community of volunteers who agree to help local seniors meet basic needs — transportation, maintenance, shopping and companionship — thereby allowing them to live at home for as long as possible.

Jeanne Hutchins, executive director of UVM's Center on Aging, helped set up the nonprofit membership organization, which is composed of mostly Cambridge and Underhill residents. It's based on a model launched 16 years ago in Boston's Beacon Hill neighborhood. Today, more than 200 such "villages" exist nationwide, according to the Village to Village Network.

These cooperatives, which charge anywhere from zero in membership fees to \$900 annually, vet local contractors — roofers, plumbers, housekeepers, electricians — through background checks, then negotiate discounted rates for their members.


In urban areas, Hutchins explains, a high-rise housing community may start its own village. More geographically dispersed villages often use a hub-and-spoke model to provide services to farther-flung areas using traditional agencies such as Visiting Nurse Association and Home Health & Hospice. There's a strong social component, too, as volunteers agree to bring seniors to movies, book clubs, concerts and other community events.

Some villages have paid staff, such as an executive director; others have paid social workers. MMV is managed by volunteers and plans to get up and running by this fall.

"Since we started working on this in Cambridge and Underhill, I've received calls from Huntington and Montpelier. They want us to come down and speak to them about starting one," Hutchins says. The appeal, she says, is self-evident: "It's your community taking care of your community."

The original print version of this article was headlined "Gray Areas"

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