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ADMINISTRATION OF OLD AGE HOMES: A CASE STUDY ON MOTHER MARTHA MEMORIAL TRUST: DEVA KRIPA SENIOR CITIZENS' HOME ATTAVAR, MANGALORE

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ABSTRACT
The qualitative study conducted at Devakripa Senior Citizens' Home in Attavar, Mangalore, explores various aspects of the eldercare facility, focusing on financial sustainability, hiring policies, caregiver training, and infrastructural conditions. It encompasses extensive exploratory, archival, and observational research, as well as structured interviews. The study aims to identify key challenges and propose effective solutions to enhance resident care and operational efficiency. Key findings highlighted the need for comprehensive financial planning, improved hiring and training practices, reformed administrative policies, increased marketing efforts, and infrastructural improvements. The recommendations put forth include integrating services with local institutions, fostering community engagement, and conducting awareness programs on aging dynamics. These measures are designed to ensure the long-term sustainability and well-being of the residents, aligning with Mangalore's broader commitment to eldercare.

KEY WORDS: *Deva Kripa, old age homes,inmates, Financial planning, Administrative efficiency.*

INTRODUCTION
In India, the traditional practice of elderly care within joint families is declining, with more seniors moving into age care homes due to the rise of nuclear families and high living costs. This shift has led to the proliferation of old age homes providing social, emotional, and physical care for seniors living alone. These homes come in two varieties: free and paid. Free old age homes are typically run by charitable organizations or the government, offering basic amenities and care to those who cannot afford to pay. Paid old age homes, on the other hand, provide a range of services, often including better facilities, medical care, and recreational activities, for which residents or their families pay a fee. Despite having children, many elderly are left to live in these institutions. There are over 1,660 old age homes across India, mostly in the south, with 47 located in Mangalore alone. Financial difficulties and lack of emotional support often compel the elderly to seek residence in these homes, which are becoming crucial support systems for them. In paid old age homes, residents generally receive a higher standard of care and more comfort, while free homes cater to those in need, ensuring no elderly person is left without support. This case study delves into the daily life and management of an aged care home in Mangalore, providing a personal glimpse into the experiences of its residents and staff. Through this exploration, we aim to uncover the unique challenges and triumphs faced by the elderly in India. Comparing these findings with international aged care systems will offer a broader perspective on how cultural, economic, and social factors influence elderly care. As noted in a previous study, "By examining these dynamics, we hope to identify best practices and areas for improvement to better support the aging population in India (Gupta, A., Mohan, U., Tiwari, S. C., & Singh, V. K., 2014). Geriatric care in India: A long way to go: Tripathy, J. P. (2014) & J Midlife Health, 5(4), 205–206."

HISTORY OF DEVA KRIPA
Devakripa, which means "God's Grace," is a special home for senior citizens located in Attavar, Mangalore. It is a part of the Mother Martha Memorial Trust® and is dedicated to the loving memory of Mother Martha, the first member and first Superior General of the Sisters of the Little Flower of Bethany (Bethany Sisters) initiated by the Servant of God, Mgr Raymond Francis Camillus Mascarenhas. Devakripa is one of the earliest age care homes in Mangalore that focused on providing care exclusively for women and was a paid service, which is also one of the key missions of the congregation. The motto of the Bethany Sisters is "PROMOTING FULLNESS OF LIFE FOR ALL," and their aim is to provide opportunities for fullness of life to senior citizens during the later years of their lives. The vision, goal, and objectives are focused on promoting the glory of God, facilitating fullness of life for all, and sharing the compassionate love of Jesus with the residents. The home is under the administration of the Mother Martha Memorial Trust, with the Superior General of the Bethany Sisters serving as its President. The affairs of the home are managed by an appointed Bethany Sister who oversees the general management and day-

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to-day administration, while a Managing Committee assists in its administration.

LITERATURE REVIEW

The Maintenance and Welfare of Parents and Senior Citizens Act, 2007,

serves as a cornerstone for the legal framework surrounding the care of senior citizens in India. This act mandates the responsibility of adult children and heirs to provide for parents and senior citizens, including provisions for food, shelter, medical care, and safety. It also sets forth guidelines for the establishment and maintenance of age care homes by the government and private sector, ensuring that these facilities meet certain standards of care and operational efficiency. The act emphasizes the protection of the rights and dignity of senior citizens, incorporating mechanisms for redressal and grievance handling. Through its comprehensive approach, the act aims to create a supportive environment for the elderly, recognizing their right to live with dignity and security.

National Policy on Senior Citizens, 2011

The National Policy on Senior Citizens, 2011, outlines a strategic vision for the welfare of elderly citizens in India, addressing the challenges posed by the aging population. The policy advocates for the development and implementation of quality standards in age care homes, including regular inspections, licensing requirements, and staff training programs. It stresses the importance of creating a conducive environment that respects the rights and autonomy of senior residents, promoting their physical, mental, and emotional well-being. Additionally, the policy calls for the establishment of a regulatory framework to oversee the operation of age care facilities, ensuring accountability and transparency. By providing a robust guideline, the National Policy on Senior Citizens aims to enhance the quality of life for the elderly and ensure their inclusion and participation in society.

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Deva Kripa Senior Citizens' Home

One of the significant contributions of the Bethany Congregation to elder care is the Deva Kripa Home for the Aged in Mangalore. This facility was established with the objective of providing a nurturing and supportive environment for senior citizens, particularly those who are without family support. The home aims to ensure that the residents live with dignity and receive the care and attention they need in their twilight years. Deva Kripa Home for the Aged offers a range of services, including medical care, nutritious meals, recreational activities, and spiritual support. The home is managed by the Bethany Sisters, who are dedicated to upholding the values of compassion, service, and respect for the elderly. The staff at Deva Kripa are trained to address the physical, emotional, and social needs of the residents, fostering a sense of community and belonging.

Impact and Community Involvement

The Bethany Congregation's efforts in running Deva Kripa Home for the Aged have had a profound impact on the local community. By providing high-quality care and support to the elderly, the congregation not only enhances the lives of the residents but also raises awareness about the importance of elder care in society. The home often collaborates with local organizations and volunteers, creating a network of support that extends beyond its walls. The legacy of the Bethany Congregation in Mangalore is marked by its unwavering commitment to service and its ability to adapt to the changing needs of society. Through institutions like Deva Kripa Home for the Aged, the congregation continues to make a meaningful difference in the lives of the elderly, embodying the principles of kindness, respect, and care. By reviewing the history and contributions of the Bethany Congregation, we gain a deeper understanding of the origins and operations of Deva Kripa Home for the Aged, appreciating the congregation's enduring dedication to elder care.

Bethany Congregation and Deva Kripa Senior Citizens' Home

"The Bethany Congregation, established in 1921 by Raymond Francis Camillus Mascarenhas, has a long-standing history of service in Mangalore. One of their significant initiatives is the Deva Kripa Senior Citizens' Home. This home provides a range of services including medical care, nutritious meals, recreational activities, and spiritual support, emphasizing the dignity and well-being of its residents. The Bethany Sisters, who manage the home, are committed to addressing the physical, emotional, and social needs of the elderly."

St. Anthony's Home for the Aged

Another notable institution is St. Anthony's Home for the Aged, which has been providing care for elderly individuals in Mangalore for several decades. This home is known for its comprehensive care programs that include medical services, social activities, and personalized care plans. The home aims to create a homely atmosphere where residents feel secure and valued.

Little Sisters of the Poor

The Little Sisters of the Poor also operate a well-respected age care home in Mangalore. Their facility is dedicated to providing compassionate care to the elderly, particularly those from economically disadvantaged backgrounds. The home offers a variety of services, including healthcare, accommodation, and

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social engagement activities. The emphasis is on creating a community where the elderly can live with dignity and joy.

Challenges Faced by Age Care Homes

Age care homes in Mangalore, like many across India, face several challenges. These include funding constraints, staffing shortages, and the need for continuous training for caregivers. Additionally, there is a cultural expectation that families should care for their elderly relatives, which can sometimes lead to underutilization of these facilities. However, with increasing urbanization and changing family dynamics, the role of age care homes is becoming more critical.

India is undergoing a rapid demographic transition with increasing life expectancy and declining birth rates, leading to a growing elderly population. Despite early recognition of the need for social security, with schemes like the Employees Provident Fund and the Public Provident Fund, coverage remains inadequate, reaching only 11% of the working population. Project OASIS was initiated by the Ministry of Social Justice and Empowerment to address old age income security through comprehensive reform. The project, led by a committee chaired by Surendra A. Dave, emphasizes the need for increased coverage, better returns on investments, and the introduction of new contributory pension schemes. It highlights the importance of professional fund management, improved governance, and public awareness to ensure sufficient savings for old age. Recommendations include phasing out government subsidies, enhancing existing provident fund systems, and creating a competitive annuity market. The overarching goal is to establish a robust framework for economic security during old age, reducing reliance on traditional family support systems and mitigating poverty risks among the elderly.

Old age homes in India have gained importance due to the migration of young couples to cities or abroad for better job opportunities, leading to the alienation of elders. Conflicts between generations and the inability of some elders to care for themselves further necessitate these homes. Two main types of old age homes exist: free homes for destitute elders providing basic necessities and medical care, and paid homes, which are becoming popular as retirement homes, offering comprehensive services for a fee.

Location, Design, and Staffing of Old Age Homes in India

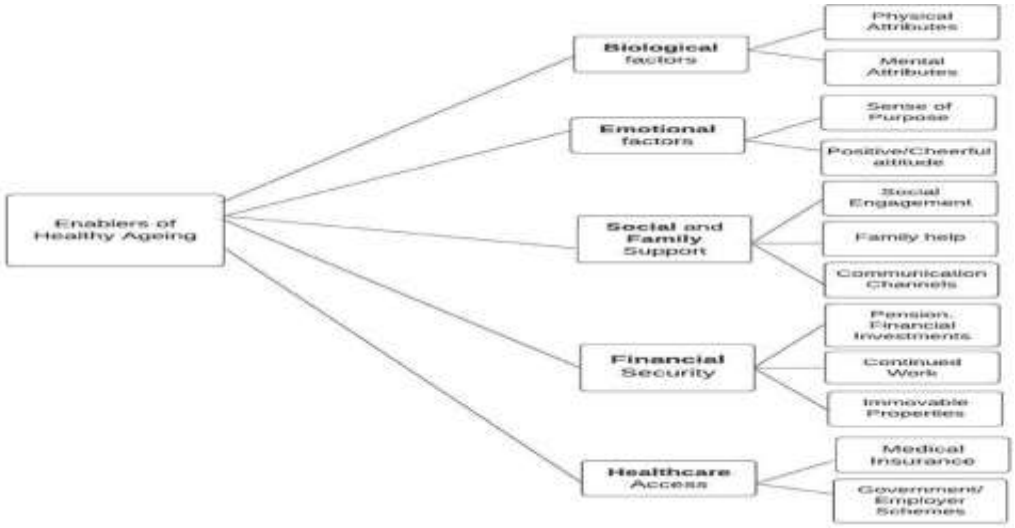
Old age homes should be situated in calm, pollution-free environments, either rural or urban, depending on resident preferences. Design considerations include dormitory-style, independent rooms, or cottages, with well-ventilated spaces and facilities ideally on the ground floor. Necessary features include rough-floored bathrooms with support railings, a sick room, and recreation and medical care rooms. Essential staff includes an administrator, clerks, nursing staff, cooks, and a part-time medical officer, nutritionist, and social worker. Medical care should ensure the availability of essential medicines and equipment, with transport for emergencies. Additional amenities such as recreational facilities, internet access, and opportunities for resident participation in daily activities are also important.

The Karnataka State Police provides information and support for senior citizens on their FAQ page. It addresses common concerns such as legal protections under the Maintenance and Welfare of Parents and Senior Citizens Act 2007, how to handle harassment from relatives, and ways to seek police protection. Senior citizens can also register with the Seva Sindhu portal for continuous monitoring and support from local police. For immediate assistance, they can dial 112.

The elderly population in India is increasing rapidly and is expected to triple by 2050, as per the 2011 census. While healthcare improvements have enhanced physical health, subjective well-being among the elderly remains underexplored. This study aims to assess the quality of life (QoL) among elderly individuals residing in family homes versus old age homes. An analytical cross-sectional study was conducted with elderly participants above 60 years, utilizing the World Health Organization-BREF QoL questionnaire. Among the participants, 56.3% were male, and 43.8% were aged 70–79 years. Results showed no significant difference in QoL between those living in old age homes and those living with families, though there was a slight, non-significant increase in psychological, social, and environmental domains for those in old age homes. The study concludes that QoL should be examined with a greater focus on psychological, social, and environmental factors.

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SOCIAL AND CULTURAL INSIGHTS INTO HEALTH AGING



Source : Social and cultural insights into healthy aging: A Qualitative study from the south indian city of bangaluru, India . Indian Journal of Public Health68 (1):31-37, Jan- March 2024

This image represents all the various Social, Financial and cultural insights play a significant role in healthy aging, influencing lifestyle choices, access to healthcare, and support networks. Understanding and respecting diverse practices, modules, financial benifits, beliefs, traditions, and social structures that enables and promotes the well-being in aging populations.

OBJECTIVES

- To develop and implement a financial planning program to ensure the long-term sustainability and financial security of the age care home residents.
- To review and revise existing hiring policies and implement a comprehensive caregiver training program to ensure high-quality care for the residents.
- To conduct research and training on the dynamics of aging to better understand and meet the needs of the aging population in the care home. 4. To assess and implement infrastructural improvements, such as installing elevators, to enhance the living conditions and accessibility for the residents.

RESEARCH METHODOLOGY

Resarch methodology : This is a qualitative study that involved

1. Exploratory Research: Exploratory research was conducted to gain a comprehensive understanding of the current financial situation, existing hiring policies, caregiver training programs, dynamics of aging, and infrastructural conditions of the age care home. This phase involved:

· Reviewing relevant literature on financial planning for care homes, caregiver training programs, aging dynamics, and infrastructural improvements in care facilities.
· Conducting preliminary discussions with stakeholders including management, staff, residents, and families to identify key issues and concerns.
· Analyzing financial records, operational data, and historical trends to identify strengths, weaknesses, opportunities, and threats (SWOT analysis) regarding financial sustainability and care quality.

2. Archival Research: Archival research was conducted to gather historical data and documents related to the financial management, hiring policies, training programs, and infrastructural development of the care home. This phase included:

· Reviewing Annual Reports (2018 - 2024) financial statements, budgets, and expenditure reports to assess past financial performance and identify areas for improvement.
· Examining past hiring policies, employee turnover rates, and performance evaluations to understand the effectiveness of the existing recruitment and retention strategies.
· Reviewing the PROSPECTUS of the institution
· Analyzing past infrastructural plans, renovation projects, and accessibility assessments to identify previous challenges and proposed solutions.

3. Observation: Observational research was conducted to gather real-time data on the daily operations, interactions, and living conditions within the care home. This phase involved:

· Observing the daily routines, activities, and interactions between caretakers and residents to understand the quality of care and level of support provided.
· Assessing the physical environment, amenities, and safety features of the care home to identify areas for improvement and enhancement.
· Documenting observed challenges, barriers, or areas of excellence in the provision of care and support to the residents.

4. Conducting Interviews: Structured interviews were conducted with key stakeholders including management, staff,

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residents, families, and external experts to gather qualitative insights and perspectives on the identified issues and proposed solutions. This phase included:

- Developing interview protocols made for each group to explore their experiences, perceptions, and suggestions related to financial planning, caregiver training, aging dynamics, and infrastructural improvements.
- Conducting one-on-one or group interviews to gather in-depth information, opinions, and feedback on the identified research objectives.
- Transcribing and analyzing interview data to identify recurring themes, emerging trends, and actionable recommendations for addressing the identified challenges and achieving the research objectives.

This research methodology integrated various research methods including exploratory, archival, observation, and conducting interviews to comprehensively address the objectives of developing and implementing a financial planning program, revising hiring policies, conducting research on aging dynamics, and assessing infrastructural improvements in the age care home.

DETAILS ABOUT MOTHER MARTHA MEMORIAL TRUST : DEVA KRIPA SENIOR CITIZENS' HOME, ATTAVAR - MANGALORE 575001

Management and Administration

The management and administration of Devakripa Senior Citizens' Home is overseen by the Mother Martha Memorial Trust, with the Superior General of the Bethany Sisters serving as its President. The Board of Trustees establishes policies and provides ongoing guidance.

The Administrator

The Administrator of Devakripa Senior Citizens' Home is a Bethany Sister appointed by the President of Mother Martha Memorial Trust. She holds direct responsibility for the general management and day-to-day administration of the home. The welfare of the senior citizens and the accountability of all staff members fall under her purview.

The Managing Committee

The managing committee of the Senior Citizens' Home assists in the administration. It is comprised of the board of trustees of Mother Martha Memorial Trust.

Local Administrative Body: The following **religeous sisters** render their full time services to the inmates in the following capacity:

Aministrator
Staff - Operations
Staff – Kitchen Incharge
Nurse (1)
Nurse (1)

Details of the Inmates

There are 19 inmates, 16 of whom are above the age of 75, and 1 of them joined in the year 2023-2024. The residents who cannot manage by themselves have an exclusively appointed caretaker who is present 24/7 with them.

Regulations Relating Admissions

Terms and Conditions

1. It is open for Christian women.
2. To those who have completed 70 years and above.
3. The admission will be done after an appropriate enquiry. The Administrator will have discretionary powers in the admission of residents.
4. Admission will not be possible for those suffering from contagious or mental diseases or those charged with criminal offences involving alcohol, drugs, chemical/ psychotropic substances.

Admission Procedure

1. Those seeking admission to the Home register their names by paying a non-refundable sum determined by the Management. Upon confirmation of the vacancy, the person needs to join the Home within 30 days. Otherwise, the vacancy may be given to the person on the waiting list.
2. The one desirous of becoming a resident of 'Devakripa' fills up the prescribed Admission Form.
3. A separate written agreement is signed in the presence of two witnesses, agreeing to abide by the Rules and Regulations of the Institution.
4. At the time of Registration/Admission, the applicant is accompanied by the Guardian responsible for the resident.
5. Applicants are required to submit the following documents along with the Admission form:
   a. Medical certificate from their doctor indicating the present state of health
   b. Previous medical records, if any
   c. A letter of introduction from the Parish Priest d. Four recent passport size photographs e. Copy of the ID Proof – Voter ID and Aadhaar Card/PAN Card f. An undertaking by the Guardian or Sponsor to ensure regular payment of the resident for whom she stands guarantee.
6. In addition to the above, each resident provides two solvent sureties who guarantee payment of all the dues of the resident to 'Devakripa'.
7. At the time of the interview and registration of the applicant, the two responsible Guardians - Guardian 1 and Guardian 2 - preferably family members or close relatives, will execute the bond in favor of the Institution, undertaking to pay the full fee and all other expenses and amounts payable to the Institution by the applicant.
8. The Administrator is notified at the earliest when there is any change in the addresses and telephone numbers of the guardians. If the guardians of the resident cease to be sponsors by death or for any other reason, the surviving guardian will fulfill the responsibilities towards the resident.
9. Any resident who obtains admission by producing false documents of any kind is dismissed from the institute.

Remittance

Every Applicant is expected to remit security deposit, monthly fee, service fee

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at the time of admission and is charged for special nurse if any and charged for other additional services.

Accommodation

'Devakripa' provides **4 types of rooms** as noted below:

a. Single rooms with attached toilet with rails and balcony
b. Single rooms with attached toilet with rails, kitchenette and balcony
c. Special rooms with attached toiletwith rails , kitchenette and a spacious balcony
d. Cubicles with common toilets

Facilities

1. A Chapel for daily Eucharistic Celebration and for personal prayer
2. Lobby with sofas, floor incharge room, balcony and a TV in each floor
3. Solar lights on passages and common places
4. Hot water in bathrooms and refectory
5. A physiotherapy room
6. Elevator
7. Wheel chairs and stretchers
8. Waterbeds for bed ridden residents
9. Daily newspapers, periodicals, magazines and library books
10. Intercom facility in all the rooms

Guidelines

1. All rooms are equipped with basic furniture and fittings. Residents are responsible for furnishing other desired items in living spaces.
2. Residents are accountable for their personal belongings, and the management is not liable for any loss or damage.
3. Intercom facilities are available in rooms, and residents may have personal mobiles at their own expense. A common phone is available for use with payment.
4. Residents have no tenancy or occupancy rights to their allotted rooms.
5. Residents are not allowed to change rooms without permission from the Administrator.
6. Excessive electrical appliances are not permitted in rooms, but available on request with additional charges.
7. Residents are responsible for maintaining cleanliness and personal hygiene in their rooms and bathrooms.
8. Laundry facilities are provided for the residents.
9. Residents are encouraged to use water sparingly due to scarcity.
10. 10.Residents should approach the Administrator for room repairs and other concerns. 11. Residents are discouraged from giving tips or gifts to helpers.
11. Residents are encouraged to live harmoniously and contribute positively to the community.
12. Residents should address clarifications or queries to the Administrator and not interfere in the affairs of others.
13. Residents must refrain from engaging in illicit activities, including alcohol and drugs.
14. Overnight stays of family members/guests/friends in residents' rooms are not permitted.
15. Residents are encouraged to maintain silence at night to avoid disturbing others.
16. Those leaving the premises must return by 7:00 pm and record their movements in a book at the reception counter.
17. Residents are engaged in various beneficial activities, including physical exercises, sessions with resource persons, and reading for occupational therapy

Food and Diet

1. 1.The residents are served a wholesome and balanced diet. Special food is provided on prior request with a doctor's prescription.
2. Food is served in the dining hall at specific meal times. All residents are encouraged to have their meals in the dining hall. For those unable to walk to the dining hall, food is provided in their rooms.
3. Wastage of food is avoided, considering it as God's gift and in consideration of the millions of starving people.
4. Bed coffee/tea is provided in all rooms in the morning, and hot water for drinking is also provided for those in need.
5. When a resident is absent or delayed for meals, they need to inform the Administrator on time.

Medical Care

1. General nursing care is provided for all, and a qualified doctor is available for routine check-ups and emergencies.
2. Each resident is responsible for their own medical expenses and may engage their own family doctor if necessary.
3. If a resident needs constant or special care, the guardian or sponsor can appoint an attendant at their own expense.
4. A Nurse/Sister provides normal nursing care, checks blood pressure, assists with hygiene, and administers medicine when needed.
5. When a resident becomes seriously ill, the Administrator informs the family members/guardians/sponsors and takes immediate action to shift the resident to a hospital, with all related expenses covered by the family members/guardians/sponsors.
6. The close proximity to Hospitals like KMC, Fr. Muller Medical College, Unity and Highland Hospital is a very big boon to the management and residents.

In the Event of Death

1. In the event of the death of a resident, their family members/guardians/sponsors take full responsibility for the funeral rites and the expenses connected with it, and also the decision regarding the place of burial/funeral rites to be held.
2. The belongings of such a deceased resident are handed over only to the family members/guardians/sponsors whose name is furnished at the time of admission or to the legal heirs in the absence of the above-mentioned persons.
3. The guardian also sees to clearing any outstanding dues on behalf of the deceased resident.
4. If an adjustment in the room is made to set the room as per the desire of the resident, such modification will not be dismantled or returned if it is fixed on the walls.

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5. **Special Deposit** for the Last Medical Service / **funeral rites:**

The resident deposits Rupees one lakh with the Administrator as Special Deposit for the Last Medical Service and funeral rites. Should the family members/guardians/sponsors take responsibility to meet such expenses, this deposit is returned to them but without interest.

6. In confirmation of the above terms and conditions, each applicant submits the original agreement to 'Devakripa' duly signed by the applicant, family members/guardians/sponsors, and two witnesses at the time of admission.

Visiting Hours

1. Family members, relatives, friends, guardians, sponsors of the residents are welcome to visit the Home during the following hours:

10.00 am to 12.00 am
04.00 pm to 06.00 pm

2. No relatives/ friends or anyone else is allowerd to stay overnight in the room of the resident.

Amendments of Rules and Regulations

The Terms and conditions are subject to change and may be modified from time to time as per need and as the Management deems necessary without notice. Any such change made is notified to the residents.

FINDINGS

- The assessment revealed inadequate retirement planning and policies in terms of long-term care, highlighting the need for comprehensive financial planning for residents.
- Significant improvementto be made in hiring and training staff, ensuring high-quality care and better service delivery for the residents.
- Reforms in administrative policies, particularly regarding remittance and services provided, were necessary to enhance operational efficiency and resident satisfaction.
- There is a marked need for improved marketing and digital presence to increase visibility and accessibility, alongside the necessity for financial planning to ensure the home's long-term sustainability.

SUGGESTIONS

- Implement comprehensive financial planning programs to address inadequate retirement planning and ensure the long-term financial security of residents, including consulting with financial advisors. By conducting group sessions or one on one sessions with the financial advisors for tips to plan income and expenditure.
- Enhance staff hiring and training processes to ensure high-quality care, incorporating value-added courses in gerontology and home care to further improve caregiver expertise.
- Reform administrative policies related to charges and services provided to streamline operations and improve resident satisfaction. Specially with regard to making decisions in admissions and including more inclusive options.
- Increase marketing efforts and strengthen digital presence to enhance visibility and accessibility of the care home by using social media platforms and print media.
- Integrate services with local schools and colleges to foster mutually beneficial relationships, such as intergenerational programs and volunteer opportunities.Arrange programms where children of different age groups to spend time with the inmates on a regular basis and make it a policy.
- Organize regular consultations with social workers, lawyers, and chartered accountants to improve residents' knowledge and address legal and financial concerns.
- Establish awareness programs in collaboration with the Mangalore City Corporation to educate residents and the community about senior citizens' rights and available helplines.
- Encourage community building within the care home through social activities, support groups, and resident councils to foster a sense of belonging and mutual support.
- Implement infrastructural improvements, such as installing elevatorsthat are spacious and stretcher friendly and enhancing accessibility, to improve the transfer and shifting conditions for residents.
- Conduct AWARENESS training on the dynamics of aging to continually adapt and meet the evolving needs of the aging population in the care home.

CONCLUSION

Devakripa Senior Citizens' Home, under the administration of the Mother Martha Memorial Trust and the oversight of the Bethany Sisters, exemplifies a well-structured and compassionate eldercare institution. The robust management and administrative framework ensures that the daily operations and welfare of the residents are meticulously attended to. The Administrator, a Bethany Sister, plays a pivotal role in the seamless execution of responsibilities, supported by a dedicated Managing Committee and a local administrative body comprising skilled staff in various operational roles.

The residents, predominantly over the age of 75, are provided with comprehensive care, tailored to meet their individual needs. The facility's approach to accommodating varying levels of independence and dependence through diverse room options, from single rooms with amenities to cubicles with shared facilities, demonstrates its commitment to inclusivity and personalized care.

The array of facilities, including a chapel, recreational areas, solar lighting, physiotherapy room, and modern conveniences like elevators and intercom systems, contribute to a supportive and enriching living environment. These amenities not only enhance the quality of life for the residents but also underscore the institution's dedication to holistic care.

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Financial considerations are transparently managed, with clear guidelines on remittances for admission, monthly fees, and additional services. This financial structure ensures that residents and their families are well-informed and can make necessary arrangements for the services provided.

Devakripa Senior Citizens' Home stands out as a beacon of exemplary eldercare, driven by a mission of compassion, respect, and comprehensive support for its residents. The strategic leadership of the MMMT, the dedicated service of the Bethany Sisters, and the committed staff collectively create an environment where the elderly can thrive with dignity and care.

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