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"Integrated Medical and Nursing Care" Service Practice: The Adaptive Roles of Social Workers in Elderly Care Institutions and Implications for Age-Friendly Modifications

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Abstract

This study examines elderly care institutions to investigate how the scope and quality of age-friendly environmental modifications continuously shape the effectiveness of integrated medical and nursing care services, and analyzes the adaptive responses and practices of social workers within this process. Based on qualitative research, the findings reveal that inadequacies in the built environment directly trigger service disruptions and potential risks, forming a "hidden bottleneck" that restricts service quality. Social workers exhibit significant agency by proactively adopting assessment, advocacy, and coordination strategies. Nevertheless, their effectiveness is constrained by structural factors including resource shortages and institutional limitations. This study advocates for a synergistic "Environment–Service–Person" framework and highlights age-friendly environmental modification as a core determinant of service quality. Such a perspective is critical to promoting the operationalization of integrated medical and nursing care and improving overall service quality.

Keywords: Age-Friendly Modifications; Integrated Medical and Nursing Care; Social Worker; Adaptive Role

1. Introduction

Population aging is one major social challenge for modern China. Older adults need medical care and daily living support. China has promoted the "Integrated Medical and Nursing Care" strategy since 2015. The strategy aims to combine health care resources with elderly care services. Macro-level conditions have improved step by step. Service work inside care institutions still runs

poorly and inefficiently. Most existing research focuses on structural factors. It pays little attention to the physical environment. The physical environment limits service delivery in specific ways. Research does not fully explore how social workers deal with these limits.

This study uses elderly care institutions as research sites. It adopts participatory observation and semi-structured interviews. It answers two core questions. The first question is how age-friendly changes limit service effects. The second question is how social workers carry out adaptive practices. Results show that small problems in the physical environment form a hidden bottleneck. The bottleneck lowers service efficiency. Social workers act as assessors, advocates and coordinators at the same time. These roles are limited by many structural factors. These factors include lack of professional knowledge, insufficient institutional support and no feedback mechanism. The study suggests using the "Environment–Service–Person" combined view. The physical environment provides structural support for service quality. Social workers' adaptive actions connect environment and services in a dynamic way. Their work helps improve the quality of care.

2. Literature Review

2.1. Integrated Medical and Nursing Care Service Practice

The National Health Commission (2025) gives a clear definition. Integrated medical and nursing care combines medical and health services with elderly care services. It provides older adults with continuous services. These services cover prevention, treatment, rehabilitation, long-term care and hospice care. Huang, Nie and Li (2025) point out one fact. This model is a key strategy for China to deal with population aging. It aims to break barriers between medical and care services. It achieves deep integration. Care includes medical support. Medical services include care components. Policies have experienced a clear development path. Early integrated care focuses on building basic services. Practices keep moving forward. People pay more attention to resource integration and service quality improvement.

Many research results show one common situation. Local implementation of integrated care still faces many difficulties. Policies, funds and workforce conditions keep getting better. Daily operation of integrated care services still gets affected by small environmental details. People need to study two key variables. They are age-friendly modifications and adaptive roles of social workers. These studies help people understand micro mechanisms of service implementation.

2.2. Age-Friendly Modifications: A Key Factor Influencing Service Difficulties

The idea of age-friendly modifications comes from a classic theory. Lawton and Nahemow (1973) put forward the Person-Environment Fit Theory. The core idea of this theory is easy to understand. Environment matches personal ability. The individual keeps the best function and positive emotion. Environment exceeds personal coping ability. The individual shows bad behaviors. He or she feels emotional pain. He or she may even lose some functions. Environment gives too little pressure. Personal functions may weaken gradually. This theory offers a basic tool. It helps people explain how environment affects the well-being of older adults.

Recent empirical studies show more details. They explain how physical environment influences service processes. Wang et al. (2025) study the built environment carefully. They check its effects on social interactions of older adults in care homes. Results show clear patterns. Environmental elements include recreational spaces, functional equipment and accessibility. These elements influence many things. They affect how often older adults talk with each other. They affect participation in activities. They affect relationship quality with caregivers. These findings prove one point. Environmental design has strong effects on service processes and social interactions.

Social work research includes physical environment into professional practice. Cashwell (2024) puts forward a clear idea. People should add physical environment into the "person-in-environment" framework. This becomes an important task in modern social work practice. Social workers need certain abilities. They need to find risks and resources in the built environment. They need to use professional methods to intervene. Interventions happen at micro, mezzo and macro levels. Research on age-friendly modifications also changes its focus. It no longer only centers on barrier removal. It aims to build supportive environments. Zhou (2018) gives a clear opinion. Age-friendly modifications should do more than remove obstacles. Good environmental design supports older adults actively. It helps them keep personal functions and life quality.

These studies all show one close relationship. Environment, service and person affect each other dynamically. This study focuses on this interactive relationship. It tries to explore this topic in depth.

2.3. Research on the Adaptive Roles of Social Workers

The role of social workers helps people understand the "Environment–Service" interaction. Traditional views define institutional social workers clearly. They mainly provide non-medical services. These services include psychological support and recreational activities. They often stay at the edge of institutional work. Integrated care keeps developing. Scholars begin to notice the key role of social workers in service integration.

NASW Standards for Social Work Services in Long-Term Care Facilities (2003) gives clear rules. Core social work services in long-term care settings include assessment, treatment, rehabilitation and supportive care. The basic goal is clear. It helps older adults keep and improve physical, psychological and social functions. This standard shows a clear trend. Professional roles of social workers expand. They change from activity organizers to service integrators and environmental assessors. Greene et al. (2023) study resilience of social workers in nursing homes. They find one important function. Social workers reduce risks and strengthen protective factors. They help older adults keep social functions and personal identity in complex institutional environment.

Chen and Lin (2024) study coping strategies of social workers. These strategies are used in integrated care facilities. They focus on spatial constraints. They use the "Relationship–Space–Function" analysis tool. Research shows clear behaviors. Social workers use interpersonal advantages. They bridge service gaps across different spaces. They show practical wisdom when facing physical environment limits.

These studies show potential functions of social workers. Social workers do not only provide services. They also act as mediators. They help build good relationships between older adults and their living environment.

2.4. Summary

Many factors lead to implementation challenges of integrated medical and nursing care. Challenges come from dynamic interactions among “Environment–Service–Person”. Age-friendly modifications belong to physical environment. They directly affect service continuity and safety. Adaptive roles of social workers act as a dynamic link. They connect environment and services. They find problems. They push for improvements. They coordinate available resources. The three parts influence each other closely. Physical environment lays structural foundation for service quality. Adaptive practices of social workers connect environment and services dynamically. Service delivery shows final results of these interactions.

3. Research Methods

3.1. Research Framework

Based on the analysis of the interactive relationship among environment, service and human beings in the literature review, this study constructs the research framework shown in Figure 1. Integrating the Person-Environment Fit Theory (Lawton & Nahemow, 1973) and relevant literature on the adaptive roles of social workers, this framework aims to provide clear conceptual guidance for subsequent empirical analysis.

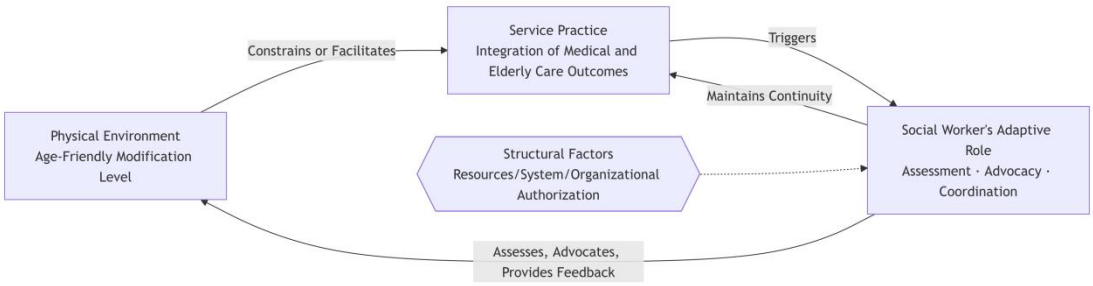

Figure 1. "Environment–Service–Person" Collaborative Interaction Model

Within the framework, the physical environment (level of age-friendly renovation) directly restricts or facilitates service practice (effectiveness of integrated medical and elderly care services). Problems emerging in service practice trigger the intervention of social workers in adaptive roles (assessment, advocacy and coordination). Social workers exert counteractive effects on the physical environment through assessment, advocacy and feedback, while compensating for environmental deficiencies by maintaining service continuity. External structural factors (resources, systems and organizational authorization) moderate the scope of effectiveness of social workers’ adaptation. The direction of the arrows reflects the bidirectional and dynamic interactive relationship between the three elements.

3.2. Participatory Observation

Participatory observation belongs to qualitative research. The observer takes a specific role in the research field. The setting keeps natural and real. The observer collects first-hand data on purpose. He uses senses and auxiliary tools to finish the work.

This study uses participatory observation. It checks age-friendly environment and integrated care services in institutions. It aims to understand specific situations. It sees how small environmental details limit service effects. It records interactions of social workers. It documents their responses when facing environment limits. This method offers real and concrete data. It helps analyze "Environment–Service" conflicts. It helps study adaptive strategies of social workers.

3.3. Semi-Structured Interviews

Semi-structured interviews serve as the main research method. It keeps information comparable across different interviewees. It allows flexible in-depth exploration. It finds out how environmental details limit service processes. It records how social workers adjust and respond. Researchers use this method to select key informants. These informants offer key information for research questions.

This study uses purposive sampling for sample selection. Purposive sampling follows a clear logic. Researchers choose participants actively based on research goals. They pick people with rich and relevant information. These people help answer research questions better. Critical case sampling is used on this basis. Researchers select influential people in the institution. These people have access to core information. They represent different role perspectives.

Researchers choose administrators and social workers as interview subjects. They do not select random employees from other positions. Two groups of people offer different views. These views can check and support each other. They show interactive dynamics of "Environment–Service–Person". This method ensures data diversity. It makes data more complete and credible.

A total of 12 participants were interviewed in this study, including 6 institutional managers (coded A–F) and 6 social workers (coded G–L). The basic information of the respondents is presented in Table 1 and Table 2. Each participant received one semi-structured interview, with the duration ranging from 45 to 90 minutes and an average length of 60 minutes. All interviews were conducted in independent meeting rooms or quiet office areas within the institutions, with full audio recording and verbatim transcription. The interview outline covered multiple dimensions, including physical environmental constraints encountered in daily services, specific coping strategies adopted by social workers, experiences in cross-departmental collaboration, and feedback channels for environmental improvement suggestions.

Data collection was conducted in an iterative manner. Preliminary coding and thematic summarization were performed after every two to three interviews. After the tenth interview, new information began to overlap and no new themes emerged. The interviews with the eleventh and twelfth respondents further verified the saturation of existing themes. Accordingly, theoretical saturation was achieved, and participant recruitment was terminated.

The transcribed interview data were analyzed through thematic analysis. First, each transcript was read repeatedly to familiarize with the materials and extract information relevant to the research questions. Relevant contents were then compared and categorized to generate initial codes, and similar codes were further aggregated into preliminary themes. Finally, core themes were refined by cross-checking original materials and comparing narratives from different respondents. The entire analytical process adhered to the principle of identifying research problems from raw data, refining themes from practical problems, and verifying themes with original evidence, so as to ensure that analytical findings are strictly grounded in empirical materials.

Table 1. Basic Information of Interviewed Administrative Personnel

Code	Gender	Age	Education	Professional Background	Years of Experience	Position/ Title	Main Responsibilities
A	Female	32	Bachelor's	Gerontology	5	General Manager	Overall Manager institutional operations, resource coordination, external partnerships
B	Female	51	Associate Degree	Nursing	11	Head of Nursing Department	Nursing team management, coordination of integrated care services
C	Female	36	Bachelor's	Nursing	6	Nursing Supervisor	Staff scheduling, care quality supervision, nursing training
D	Female	41	Bachelor's	Administrative Management	8	Operations Manager	Daily operations environmental maintenance, logistical support
E	Male	39	Bachelor's	Administrative Management	4	Director of General Office	Facility maintenance, safety management
F	Female	53	Bachelor's	Gerontology	8	Care Assessment Supervisor	Admission assessment, care planning, interdepartmental service coordination

Table 2. Basic Information of Interviewed Social Workers

Code	Gender	Age	Education	Professional Background	Years of Experience	Position/ Title	Main Responsibilities
G	Female	28	Associate Degree	Gerontology	5	Junior Social Worker	Activity organization, environmental safety inspections
H	Male	25	Bachelor's	Social Work	2	Junior Social Worker	Psychosocial support, interprofessional coordination
I	Female	39	Bachelor's	Social Work	11	Intermediate Social Worker	Service integration, interdepartmental communication
J	Female	24	Bachelor's	Social Work	1	Junior Social Worker	Case follow-up,activity assistance,needs assessment
K	Female	42	Associate Degree	Psychology	8	Intermediate Social Worker	Elderly care, environmental assessment
L	Male	38	Master's	Social Work	6	Intermediate Social Worker	Service project management,work supervision

4. Environmental Constraints: The Level of Age-Friendly Modifications and Service Difficulties

4.1. Dilemma of Environmental Pressure in Rehabilitation Training

Researchers carry out in-depth interviews. They talk with institutional administrators, frontline social workers and nursing staff. The research finds clear manifestations. Environmental constraints appear in typical service scenes. These scenes include rehabilitation training, daily care and support for residents with cognitive impairments.

Rehabilitation training is a core part of integrated care services. It has clear goals. It does not only finish prescribed exercises in the therapy room. It transfers training effects into daily life functions. Current institutional environment design has an obvious gap. Training effects cannot connect well with daily life.

C: The medical rehabilitation area stays far away from living quarters.

I: The rehabilitation room keeps a long distance from residents' rooms. The connecting corridor has thresholds. These thresholds block wheelchairs.

K: Many older adults use walkers or wheelchairs. The path from rooms to rehabilitation room has a necessary section. It includes two consecutive steps with uneven height. It has no ramp. One older man finished knee surgery recently. He came to the steps with his walker. He hesitated for a long time. He turned back at last. He said it was too dangerous. He refused to take rehabilitation training. Environmental barriers reduce motivation of older adults directly. This harm is bigger than lack of basic facilities.

This separation typically embodies the environmental pressure dimension in the Person-Environment Fit Theory. The value of rehabilitation training lies in the transfer of capabilities acquired in the training room to the real living environment. When the distance between the training area and living area is artificially extended, and obstacles such as thresholds exist on the access path, the physical strength of the elderly is partially consumed before reaching the training room, and rehabilitation effects can hardly be consolidated in natural daily situations. Wang et al. (2025) also verified that environmental obstacles can significantly reduce the activity participation willingness of the elderly, with its influencing paths including both movement limitations and psychological withdrawal. From "Environment–Service–Person" Collaborative Interaction Model, this represents a direct restriction of the environment on services. The fragmentation of physical space breaks the continuity of rehabilitation services and forms an implicit bottleneck.

4.2. Environmental Defects in Daily Care

Daily care is the most basic and frequent service in institutions. It includes help with toileting, bathing, moving and eating. These tasks have high requirements for physical environment. Environmental problems turn into care difficulties directly. They increase safety risks.

D: The most serious environmental problem is high bed density. Some rooms put four beds closely together. The aisle only allows a person to pass sideways. Care workers find it hard to turn residents over or change bed sheets. Back injuries happen often among nursing staff.

This reveals the transformation path from physical environmental defects to human resource costs and occupational health risks. From the perspective of the "Environment–Service–Person" Collaborative Interaction Model, it reflects the restriction of the environment on services at the human resource level. When environmental design fails to meet the basic requirements for operational space, institutions tend to compensate for environmental deficiencies through human input, which inevitably increases the work intensity of caregivers and raises the risk of occupational injuries. As indicated in the systematic review by Chaudhury et al. (2017), environmental quality is significantly positively correlated with care quality in long-term care facilities. Spatial congestion directly impairs the safety and comfort of daily care operations. This also constitutes an implicit bottleneck. Although bed density is rarely reflected in service quality evaluation reports, it continuously undermines service delivery on a daily basis through caregiver lumbar injuries and the physical discomfort of the elderly.

A: Family members complained before. They pointed out insufficient anti-slip measures in bathrooms. Staff always stay with residents in toileting and bathing. The institution added anti-slip mats on the floor later. It installed an extra handrail.

This case shows a common pattern. Environmental problems lead to complaints from families. Complaints push institutions to make improvements. Administrators point out one fact. Staff always accompany residents in toileting and bathing. The institution relies on extra manpower to make up for environment limits. This compensation method brings extra costs. It increases workload of nursing staff. It reduces sense of autonomy and personal dignity of older adults. Cashwell (2024) also pointed out that when practitioners are accustomed to compensating for environmental deficiencies through human resources, they tend to overlook the value of the environment itself as an intervention resource. From the perspective of the Environment–Service–Person Collaborative Interaction Model, this case also indicates the necessity of social workers' role adaptation. Without feedback from family members, environmental defects may be long concealed by human resource substitution, while professional assessment conducted by social workers is essential to break such concealment.

L: I work with a newly admitted resident. He is not familiar with the environment. Small design flaws make him feel upset easily. He complains most about light switches and call buttons. These devices are placed in unreasonable positions. Older adults feel very difficult to use them. Small design flaws bring big obstacles for older adults.

This interview reveals the causal relationship between micro environmental design flaws and daily service barriers. The concept of "supportive environment" proposed by Zhou (2018) emphasizes that age-friendly renovation should not be limited to the crude standard of mere facility availability. Instead, it needs to delve into operational details including layout arrangement, usability intensity and feedback mechanisms. Even a minor positional deviation may render certain facilities virtually ineffective. Small design problems bring big troubles to older adults. Environmental assessment should not stay at macro level. It should look into small details of daily use.

4.3. Allocation Barriers to Dementia Support

Environment design offers insufficient support for special groups. It hinders targeted services clearly.

G: Residents with cognitive impairments are very sensitive to environment. Special dementia care unit has no obvious difference from standard units. Corridors are too long. Signage is not clear. Residents enter wrong rooms frequently. They cannot find the restroom easily.

In the absence of differentiated corridor signs and visual landmarks, elderly individuals with cognitive disorders cannot receive effective support for spatial orientation, which further exacerbates behavioral and psychological symptoms such as wandering, anxiety and incontinence. This issue also brings two results. Residents may lose control of bowels and bladder. They lose personal dignity deeply. Nursing staff have to deal with behavioral problems caused by environment confusion. Their workload increases clearly. Respondent G once attempted to assist the elderly with wayfinding training, yet achieved limited effects. This fully demonstrates that

when the physical environment itself acts as an obstacle, mere behavioral intervention proves ineffective. A dual approach integrating environmental optimization and behavioral support is therefore indispensable.

F: The most serious environmental flaw is lack of clear functional zoning. Residents with dementia live with independent older adults. Interpersonal conflicts happen easily.

This observation also reveals the embodiment of environmental constraints on services at the spatial zoning level. Ambiguous functional zoning directly triggers frequent service conflicts and gives rise to implicit bottlenecks: Older adults have different physical and cognitive conditions. They need different environment supports. Mixed living arrangements reduce sense of security of residents. They bring extra pressure to care workers. Age-friendly modification should adopt a differentiated design approach. Customized environmental support should be provided for elderly residents with varying care needs, instead of simply applying a uniform standard for all seniors.

5. Social Work Intervention: Three Adaptive Roles

Faced with the aforementioned conflicts between environment and services, social workers within institutions do not accept such predicaments passively, but develop a series of proactive adaptive practices. From the perspective of the Environment–Service–Person Collaborative Interaction Model, the problems emerging in service practices activate the proactive role adaptation of social workers. When coping with environmental dilemmas, social workers exert three core roles. As evaluators, they identify environmental defects and translate practical problems into systematic evidence. As advocates, they deliver relevant evidence to the management and promote environmental optimization. As coordinators, they connect available resources and implement minor adaptive adjustments to maintain service continuity when large-scale renovation is restricted. These three roles constitute a progressive logical chain of identification, promotion and compensation, while their practical effectiveness is constrained by structural factors including resources, institutions and organizational authorization.

5.1. Risk Identifier and Assessor

Social workers intervene in “Environment–Service” conflicts. They start with quick risk identification. Nursing staff focus on work efficiency. Administrators care more about cost control. Social workers have a unique professional view. They notice direct influences of physical environment on behaviors of older adults. They care about psychosocial meanings behind environment.

G: I organize older adults into a Safety and Environment Inspection Group. I collect their feedback. I report these feedbacks to management formally.

This practice reflects the participatory strategy adopted by social workers during the assessment stage. From the perspective of the Environment–Service–Person Collaborative Interaction Model, this marks the starting point of social workers’ evaluative feedback on the environment. Rather than speaking for the elderly on their own behalf, social workers build communication platforms to transform the personal experiences of older adults into collective

demands. This practice fulfills at least three functions. First, it enhances the persuasiveness of improvement proposals. Second, it strengthens the elderly's sense of self-efficacy and participation awareness. Third, it integrates scattered individual complaints into structured feedback lists, facilitating systematic handling by management departments. This aligns with the resilience-oriented working approach advocated by Greene et al. (2023). By empowering older adults, social workers help them shift from passive recipients of environmental predicaments to active providers of feedback.

K: I use two steps in my work. The first step is adaptive training. I walk with residents along difficult paths. I teach them safe ways to pass steps. I give them psychological encouragement. This method solves surface problems only. It does not change root causes. The second step is environmental advocacy. I work with rehabilitation therapists. We draft a simple improvement plan for the corridor. I attach case records of six months. These records show situations of residents. They give up rehabilitation or feel afraid of training because of steps.

The interview content clearly demonstrates two levels of the social worker's evaluative role: micro adaptive intervention and meso environmental advocacy. In accordance with the research framework, the primary adaptive training aims to enhance the individual coping capacity of older adults when the environment cannot be altered, which constitutes remedial adaptation. It serves as an essential approach for social workers to maintain the continuity of services, representing the intervention of social workers upon services.

Nevertheless, social workers do not confine themselves to this stage. They proceed to the second step: transforming case-based experiences into systematic evidence. By compiling half-year case records, designing simple renovation drawings, and establishing alliances with other professionals, social workers elevate individual difficulties into organizational issues that require institutional responses. This transition from temporary mitigation to fundamental resolution embodies the core professional competence that distinguishes social workers from other service practitioners.

5.2. Internal Advocate and Communicator

Social workers turn identified problems into real improvements. This work forms the core of adaptive practice. Social workers act as advocates at this stage. They use effective communication strategies. They help administrators and other departments notice problems. They help others understand importance of these problems. They push others to take improvement actions.

J: I reported the problem to logistics department at first. Staff told me the speed bump meets municipal requirements. It cannot be removed. I made a temporary solution. I arranged two staff members at the gate. They help wheelchair users pass in and out. The method needs too much labor. It cannot last for a long time. I made a detailed record later. I recorded all incidents in three months. These incidents show how speed bump blocks normal passage. I added feedbacks from residents. I submitted the record with photos to General Office.

This practice clearly reveals the core strategy of social workers in the role of advocates: shifting from verbal reflection to evidence-driven advocacy. After the initial casual feedback was

rejected by the logistics department on objective grounds of municipal requirements, social workers did not cease their efforts.

Confronted with the constraints of structural factors, social workers externalize implicit experiential knowledge. Through systematic documentation, including three months of continuous observation, incident statistics, collection of elderly residents' feedback, and photographic evidence, they convert invisible daily difficulties into presentable, comparable and traceable factual materials.

As emphasized by Greene et al. (2023), when individual voices are insufficient to drive institutional changes, evidence can construct a community of facts and enhance the organizational visibility of practical problems. Meanwhile, this strategy reflects the feedback loop through which social workers intervene in the environment, so as to cope with environmental constraints on service delivery.

J: I changed my expression when talking with Operations Manager. I got breakthrough progress. I described convenient access as a soft asset. It shows service quality of the institution. It influences community reputation directly. The institution approved my suggestion finally. Workers installed a portable rubber ramp next to the speed bump.

The experience shared by Interviewee J reveals an effective way of advocacy: Managers tend to prioritize institutional performance indicators such as institutional reputation, occupancy rate and resident satisfaction, rather than trivial environmental details. Social workers redefined the issue of speed bumps from a technical matter of accessibility renovation to a brand issue related to institutional soft power and public reputation within the community, thereby resonating with the core concerns of managers. By translating professional demands into shared organizational interests, social workers can greatly improve the likelihood of their suggestions being accepted and implemented.

K: I formed a Rehabilitation Support Team. Team members include rehabilitation therapists and nursing assistants. We put forward improvement suggestions to Nursing Department and senior management. Nursing Department worried about possible problems. A ramp may take up walkway space. It may block normal traffic. Rehabilitation therapists gave professional explanations. They confirmed gradient and width of the ramp meet safety standards. I collected real voices and opinions from residents. I reported these materials to General Manager together with other team members.

This typical case fully reflects the core function of social workers as coordinators in cross-professional collaboration. Rather than addressing environmental challenges on their own, social workers integrate the practical experience of nursing staff, the professional expertise of rehabilitation therapists, and the real needs and feelings of elderly residents into a persuasive joint proposal. This collaborative approach effectively makes up for the limitations of a single professional perspective. When environmental renovation involves the interests of multiple departments, opinions from different professional backgrounds can support one another, reduce managers' concerns in decision-making, and form compelling improvement proposals that are difficult to refuse. Chen & Lin (2024) also pointed out in their research on social workers in

medical-elderly integrated care institutions that social workers can effectively alleviate service fragmentation caused by physical environmental constraints through integrating service spaces and leveraging interdisciplinary linkage advantages. This represents an effective pathway for social workers to feed back to the environment via multi-professional collaboration.

5.3. Resource Coordinator and Broker

Comprehensive environment improvements cannot be finished at once. Social workers develop another set of adaptive strategies. They coordinate internal resources. They build external connections. They find practical solutions under current environment limits.

L: I provide personal guidance for new residents on the first day. I help them get familiar with room layout. I use easy-to-understand methods. I tell them locations of light switches, call buttons and bathroom. I record unreasonable design elements. I make a list of personalized micro-modification suggestions.

The practice of Interviewee L reflects social workers' flexible coordination capacity in resource integration. When large-scale environmental renovation is not feasible, social workers turn to personalized and low-cost interventions. They help the elderly adapt to the existing environment through on-site guidance, visual signs and tailored suggestions. Although such measures cannot fundamentally resolve inherent design flaws, they can effectively ease the elderly's frustration and reduce potential safety risks in the short term. From the perspective of the Environment–Service–Person Collaborative Interaction Model, this refers to the pathway through which social workers directly intervene in services. Specifically, they sustain service continuity via minor adaptive adjustments, and reduce the elderly's sense of frustration as well as potential safety risks.

J: The institution approved a portable rubber ramp. Workers put it next to the speed bump. People can store it when not in use. They take it out when wheelchairs need to pass.

Faced with the rigid rule that speed bumps could not be removed, social workers avoided the simplistic thinking of either full renovation or no adjustment at all, and instead found a middle solution: installing removable temporary ramps.

While this solution cannot completely renovate the environment, it removes the last accessibility barrier under current conditions, while complying with municipal requirements and meeting the practical needs of the institution.

This reflects the creative intervention of social workers on the environment. When the inherent attributes of the environment cannot be altered, social workers innovate its modes of utilization. Such ability to make flexible and creative compromises constitutes an essential professional competency for social workers working under resource constraints.

L: I set up a standard process. All new residents receive formal environment guidance. I designed a checklist. Nursing assistants and I check the room together in the first week. We finish the checklist item by item. Some problems can be solved by quick micro-modifications. We use a fast approval process. We finish these changes in short time.

This approach reflects how social workers elevate their work from individual case adjustment to institutional improvement. By designing inspection checklists, clarifying clear timelines and responsibilities, and setting up a dedicated fast-response channel, social workers turn previously scattered and experience-dependent informal practices into standardized, replicable, and sustainable working procedures. Social workers attempt to improve structural constraints so as to sustain the continuity of service delivery.

6. Practical Pathways for Enhancing Social Workers' Adaptive Capacity

Previous analysis shows a clear fact. Social workers show strong initiative in handling “Environment–Service” conflicts. Their adaptive practice faces many limits. These limits include insufficient professional knowledge, weak institutional support, no formal feedback channels and bad cross-professional cooperation. People need to improve adaptive capacity of social workers systematically. Improvements happen at four connected levels. They are individual ability, team cooperation, organizational support and institutional guarantee.

6.1. Individual Level: Consolidating Professional Foundations and Enhancing Adaptive Skills

Social workers need to improve environment observation ability. They need to learn systematic recording methods. Adaptive practice starts with sensitive environment awareness. Current environment observations are often separate. They lack systematic records and accumulation. Social workers need to turn subjective feelings into presentable evidence. This change helps improve advocacy effects. Social workers should form a standard habit. They observe and record environment conditions regularly. Records should include clear information. They mark time and location of observation. They describe specific environmental flaws in detail. They explain concrete influences on service delivery and resident safety. They put forward possible improvement directions.

Social workers need to improve professional assessment ability. They need to analyze relations among environment, behavior and psychology. Professional trust of social workers relies on clear expression. They need to turn simple judgments into professional analysis. They need to explain why certain designs do not work well. Social workers need basic knowledge in related fields. These fields include environmental psychology, environmental gerontology and dementia-friendly design. Reflective Professionalism theory puts forward a core idea. Social workers need to understand relations between theory and practice. They need to reflect on case work under social environment framework. These reflective views also apply to physical environment assessment. Social workers should improve environment assessment ability systematically. They can take targeted learning and external training. They can read related academic literature.

Social workers need to optimize advocacy strategies. They need to improve communication skills. Research shows a clear rule. Advocacy becomes more effective when connected with administrator concerns. These concerns include safety risks, operation cost and institutional reputation. Social workers should change expression ways. They should not only use moral appeals. They should add simple cost and benefit analysis. They explain potential risks of no

actions. They describe expected benefits of improvements. Social workers should learn to use data to support opinions. They use evidence to strengthen persuasion. They use real cases to make problems more concrete.

6.2. Team Level: Strengthening Internal Collaboration and Sharing Practical Wisdom

Institutions should build experience sharing mechanisms. They should promote knowledge transfer within social work teams. Research finds many effective solutions. Individual social workers develop these methods to handle environment challenges. These practical wisdoms often stay at individual level. They are not systematic. They are not shared within the team. Scholars point out clear features of practical knowledge. It interacts with specific situations. It stays implicit in individual minds. It develops in dynamic ways. Team members need to communicate actively. They need to reflect together. These steps help share and spread practical knowledge. Social work teams can hold regular experience sharing meetings. They summarize effective strategies from individual practice. They turn these strategies into unified guidance for the whole team.

Teams need to develop standard adaptive tools and working templates. Members share practical experiences. They turn mature adaptive strategies into formal working tools. Standardization makes adaptive practice more consistent. It makes practice more evidence-based. It improves overall problem-solving efficiency of the team.

Teams need to build peer support and supervision mechanisms. Social workers put forward suggestions many times. These suggestions get delayed or refused. Social workers feel frustrated easily. They may experience job burnout. Teams can set up peer support and supervision system. Members talk about challenges and dilemmas regularly. They discuss coping strategies together. The system improves psychological resilience of the team. It keeps long-term motivation of team members.

6.3. Organizational Level: Securing Managerial Mandate and Constructing Collaborative Networks

Social workers should communicate proactively. They show management value of adaptive work. Many adaptive efforts happen behind daily scenes. Administrators cannot notice these efforts easily. Social workers can use multiple channels. These channels include work briefings, case reports and monthly summaries. They update management about progress and results regularly. Administrators can recognize unique contributions of social workers in environment optimization. Management will treat social workers as problem solvers. They will not regard them as troublemakers. Social workers will get stronger work support naturally.

Social workers should push for formal work rules. Environment assessment should be added into official job descriptions. Current environment observation and advocacy work lack clear identity. They are not listed as formal job duties. Social work teams can talk with management. They ask to add related tasks into formal roles and assessment rules. These tasks include environment risk identification, user feedback collection and improvement suggestion submission. The change turns adaptive practice into formal duty. It is no longer an informal extra task.

Social workers should build cross-professional cooperation networks actively. Cooperation improves professional level of advocacy. It makes advocacy more persuasive. Social workers can take the first step. They build formal communication channels with Nursing and Logistics departments. All parties join in problem identification. They carry out joint assessment. They push for improvement suggestions together.

6.4. Institutional Level: Promoting Feedback Channels and Refining Response Mechanisms

Institutions should build formal environment feedback systems. Current communication relies on informal ways. Social workers mention suggestions in elevators. They talk about problems in dining rooms. These ways are flexible. They have an obvious defect. People cannot track suggestion status clearly. They do not know whether suggestions are received, reviewed, accepted or refused. Social workers can push for a formal feedback system. It handles environment improvement suggestions. The system has clear and traceable steps. It starts with suggestion submission. It includes receipt confirmation and progress update. It ends with result feedback to submitters.

Institutions can build a quick response system for micro environment modifications. Some improvements do not need large investment. They do not change building structure. Social workers can push for simplified approval process. They ask for a small special fund. Frontline problems can get quick attention and solutions. Long approval procedures will not delay improvement work.

Social workers should seek chances to join early design of environment projects. They can negotiate with management actively. They take part in planning and design stages of modification projects. They put daily observations and accumulated experiences into design details. Newly renovated spaces will meet user needs better. It avoids repeated changes and resource waste.

7. Conclusion

Through qualitative analysis, this study has examined internal relations between two factors. These factors are age-friendly modifications and implementation challenges of integrated care services. It highlights adaptive roles of social workers. It explains practical logic of these roles under complex environment. Results show a clear phenomenon. Physical environment has many flaws and blind spots. These problems appear frequently in specific service scenes. They act as hidden barriers to service efficiency. The finding supports a core idea of environmental gerontology. Environment is not a static background for services. It interacts with human behavior, emotion and well-being dynamically. Environment influences older adults in a two-way way. People are shaped by surroundings. They also adapt to and change surroundings actively.

Social workers face these challenges. They do not accept environment limits passively. They develop active adaptive roles. They use assessment, advocacy and coordination strategies. They keep service continuity when environment and care do not match well. This study puts two factors into a unified analysis framework. These factors are age-friendly modifications and adaptive roles of social workers. It explains a clear interactive mechanism. Environment limits

service delivery. Service needs push social workers to take actions. Social workers give feedbacks to promote environment improvements.

Small details of physical environment are hidden but decisive. They influence service quality deeply. International research proves a close relation. Good physical environment relates to high care quality in long-term care settings. Institutions that pay attention to environment details achieve better results. Residents have higher life quality. They show higher care satisfaction. They keep better cognitive functions. Social workers act as key mediators. They bridge gaps between environment and services. Their advocacy and coordination work is irreplaceable. It pushes environment improvements. It helps raise overall care standards.

Environment influences services mostly through small details. Social work shows its value at these points. Social workers cannot change all conditions. They can make small and careful adjustments in each service case. These adjustments keep care continuity. They pass on human care and warmth. The finding offers important implications for similar institutions. They do not need to wait for large-scale environment renovations. They can recognize and support frontline adaptive wisdom. They do not need to pursue perfect ideal design. They can support professional initiatives of social workers under current limits. These small adaptive actions seem ordinary. They form the most basic guarantee for high service quality.

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