



Foundations

Possible adaptations for people with dementia

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Changing floor surfaces

Choosing the right flooring can be important for people with dementia for a number of reasons. New carpeting can be safer for older or frail people to walk on, as it reduces trip hazards, and changing hard flooring, such as tiles, floorboards or laminate flooring can reduce noise disruption for people with dementia. Specialist carpeting which can be cleaned easily can be sourced, where incontinence is a consideration.

Changing a floor covering so that it is the same throughout the house can be beneficial, as some people with dementia may interpret changes in floor colour or texture as holes in the floor, a barrier, or an object that they may try to step over.

Areas that have a hard floor surface, for example kitchens and bathrooms, need to have surfaces that are non-reflective, slip resistant and plain in colour. Shiny surfaces could be interpreted as being wet, and patterns or flecks maybe seen as items on the floor that need to be picked up. Patterns that make the floor appear uneven or damaged could affect someone's confidence to walk across it, or they could adjust their gait which can lead to falls.

Windows

As well as helping with energy costs and warmth, changing windows can be beneficial for people who are disturbed by outside noise, but they must be able to be opened to allow some sounds and scents to enter the home if the person wishes it, particularly if they open onto a garden. Safety catches which restrict windows opening too far, to avoid accidents or other safety issues may also recommended.

Windows that are unobstructed by foliage or outside structures will allow more light to enter, and allow more engagement with life outside the home.

Plumbing and bathroom fittings

Traditional styles of bathroom fittings are often recommended for people with dementia, as it is obvious how to use them, and can be familiar to people whose memory is impaired. Taps in traditional styles (for example cross-head taps) are therefore preferred to mixer taps which may be confusing for people with dementia to use, and temperature controls can be fitted, which can stop scolding accidents. Other fittings such as sink and bath plugs, soap dishes and cisterns should also be changed to traditional, simple designs.

Mirrors can be disorientating to some people who may not recognise themselves, or that the mirror is not a window. They may need to be moved, taken down or covered depending on a person's needs. Similarly, reflections in other surfaces such as tiles and windows can be difficult to interpret for some people, and shiny surfaces may look wet.

Handrails, toilet seats, towel rails and other fittings should be in contrasting colours to the walls, and white tiles behind white sanitary wear should be avoided.

Doors

Changing doors to a contrasting colour to the walls may assist with seeing where a doorway is. Also architrave and skirting boards in contrasting colours help people see where the floor ends and the wall begins. Depth and colour perception diminish with age and by making these changes, disorientation can be reduced. Similarly, if there are doors the person should not be using (for example, meter cupboards or cellars if it is dangerous for them to do so) painting these the same colour as the wall can discourage their use.

Steps and stairs

Stairs should contrast with the staircase frame and walls to help people see their way, and as with any stairs, well fitted carpeting and even treads are essential. Good lighting is very important and changes to lighting fittings may be advisable.

Where ramps are used to help with changes in floor level, they should be slip resistant, but care should be taken that they don't form a cognitive barrier to someone being able to use it, for example by being a dark colour that could be interpreted as being a hole or gap in the floor.

Lighting

Energy saving lighting is not always as bright as other forms of artificial lighting, and can take time to reach full luminosity. This can increase the chances of disorientation and anxiety for a person with dementia whose eyesight may well be poorer than normal. This is particularly important in stairwells and halls. Changing fittings for brighter forms of light (i.e. LEDs) or increasing the number of fittings to increase the number of light sources may help reduce these risks.

External lights, such as movement sensors used as safety devices, can be disruptive as the person may get up in the night to investigate the source of the light. In this case, they may need removing, or blackout blinds fitted to windows to obscure the light when it comes on.

Acoustic testing and adaptation

People with dementia may suffer from impaired hearing or tinnitus because of age and this may lead to changes in behaviour and unnecessary stress for them. Testing the acoustics in the home, and making changes to diminish external noise and 'declutter' the internal auditory environment can improve communication and reduce disorientation caused by noise. Anxiety also increases sensitivity to noise, and is a common complaint in dementia cases.

Depending on the amount of work required this may be a large adaptation (for example, if windows need replacing to reduce outside noise).

Bedroom

Where space allows, providing an en-suite toilet can be beneficial for people who need toilet access during the night, but may find it difficult or dangerous to go to a different room to do so. Automatic lighting may also be useful in these cases. The best place to place an en-suite is where it can be seen from the bed. This is beneficial for the person with dementia and for their carers, as disturbed sleep due to movement around the house at night is distressing and exhausting for everyone.

Decorating a bedroom in plain colours can be helpful, as strong patterns can become confusing, and the person may try to 'pick' flowers or other shapes off the walls, or think they are seeing something that is not there (for example faces or animals). Mirrors may need to be taken down or covered for the same reasons; reflected movement can cause people with dementia to think that there is someone in the room with them.

People with dementia can lose the ability to read or understand words and forget where things are, so where built in cupboards and wardrobes are present, changing doors to glass fronted ones so that the person can see what is inside can be helpful, as is using pictorial signs to identify what is inside drawers.

Kitchens and eating areas

Stopping people with dementia cooking or providing for themselves can be counter-productive, but risks in the kitchen can be reduced with assistive technology and other adaptations.

Decluttering the kitchen and using cupboards with clear fronted doors can help people with memory loss locate items they need and can be helpful in maintaining independence; keeping lockable doors on cupboards where it is less desirable for them to go, such as meter cupboards or where hazardous substances such as cleaning materials are kept may help stop people from trying to accessing them. Changing appliances to more traditional styles such as stove top kettles, may be advisable in some circumstances.

Changes to white goods, such as installing a fridge with a glass door, can help show people when they have food available, but can also show carers immediately when food is not being eaten or has gone off.

Adult Social Care or other charitable sources may be able to help with purchasing devices for helping to use kitchen equipment, such as lifting or tipping saucepans and kettles, or opening jars and tins. The HIAs can assist with sourcing funding for such items, or making referrals to Social Care when appropriate.

Halls and landings

Safety is a paramount for older people and people with dementia when using halls, stairwells and landings as falls can be extremely dangerous for them. The person may be tired or sleepy when using these areas, or may be rushing to get to a bathroom or to the door. As mentioned above, lighting is very important in this area, as is good floor covering and hand rails where necessary.

Light switches and power points should be contrasting so they are easy to see, and at an appropriate height.

Gardens

Gardens are generally very good for people with dementia, as it allows them to get out into the sunshine and green space while also being relatively safe. It also allows people with dementia a space to practice their skills and get some exercise if they are, or were, used to gardening.

Although garden maintenance is not something generally undertaken by HIAs, some one-off works may be possible to enable people to utilise their gardens safely. Paths should be level and well laid to avoid trips, fences and gates should be well maintained and secure, and building seating area is usually welcomed. Building raised beds for vegetables and flowers can help where bending and mobility is difficult.

Pictorial labels

Short term memory loss and difficulty remembering new things can lead people to forget where things are kept or which rooms are behind standard interior doors. Pictorial labels on drawers and cupboards in the kitchen, bedroom or bathroom can help people understand what is in there when things are needed, or can help identify rooms such as the bedroom, toilet or bathroom.

Blinds and curtains

Older people need more light than younger people, and for people with dementia who may be having difficulties relating to their environment or who forget to wear their glasses for example, may be especially susceptible to hazards caused by poor visibility.

Access to daylight is very important to people with dementia, whose diurnal rhythms (body clock) may be disrupted by the disease. Changing venetian or slatted blinds for curtains which can be pulled right back, can substantially increase the amount of natural daylight coming into the home. Similarly, installing blackout blinds for night time can reduce the amount of light coming into the home at night (for example street lights or passing car headlights) which can be disruptive and lead to confusion.

Technology

Many assistive technology items can be purchased or obtained through Social Care or from equipment suppliers. These could be, for example, door alarms, pressure mats, tracking devices, alarms for reminding about medication or carer visits, automatic light switches, bathroom sensors, falls alerts or day/night clocks etc.

Ensuring smoke, CO2 or heat alarms are fitted in appropriate areas is also important, as cooking or other activities (including smoking) can be forgotten and constitute a fire hazard or lead to noxious fumes in the home.

Many alarms and devices can also be linked to assistance call centres and/or carers, so that if the person with dementia does not understand the alarm or gets confused about where they are for example, help is at hand quickly.



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