

Is your health centre dementia friendly?

EHE Environmental Assessment Tool



First edition

The EHE assessment tools

In order to help as many health and care organisations as possible to develop more supportive design for people with dementia, the King's Fund has developed a suite of dementia friendly assessment tools. Tools are available for wards; areas of hospitals where patients are ambulatory such as clinics; care homes; extra care housing and health centres.

Dementia friendly design

Many people with dementia, especially those with Alzheimer's disease, have difficulty in interpreting what they see and might for example think that a shiny floor is wet and or slippery. They may also struggle to understand unfamiliar environments so providing simple, cost effective, dementia friendly design features will help to reassure them whilst they are in the health centre.

Health centres

The proportion of people with cognitive problems and dementia accessing primary care services is increasing. If health centres are designed to be dementia friendly it can significantly improve the experience for people with dementia by reducing agitation and maximising their independence and engagement in their care.

Dementia friendly design is likely to assist everybody who uses the health centre to read and navigate the building.

The term 'health centre' has been used to cover a wide range of buildings from which primary and community care services are delivered. It includes premises for single handed and groups of GPs, spaces in which community nurses and other health staff run clinics

or undertake minor surgery, and polyclinics. The tool focuses only on areas that are accessible by patients and visitors.

The environmental assessment tool has been designed to be practical and easy to use. It focuses on those aspects of the physical environment known to impact on people with dementia. It assesses both the physical environment (such as floor coverings and use of paint colours) and the way that the environment encourages people to behave and interact.

How to use the health centre assessment tool

The assessment tool can be used by a single individual but involving others who have a different perspective, for example; people with dementia or a carer, GPs, clinical staff, practice managers or maintenance staff, can offer valuable opportunities for gaining different views on the care environment and how to improve it. Completing the tool together can also encourage constructive conversations about the philosophy and purpose of care.

Date

Health Centre

.....

Assessment carried

out by.....

The assessment tool contains seven sections and a set of questions to prompt discussions. It should be completed in full. Walk around the health centre/GP clinic being assessed and consider each of the questions in turn. Give each question a score out of five, where five indicates that it is met completely and one indicates it is barely met. If any of the questions are not relevant they should be marked as not applicable N/A. For example if people are only attending for short consultations the building is unlikely to provide outside space and not all centres will use electronic check-in systems.

A summary sheet has been provided at the end of the assessment tool which should help pinpoint the areas that might be considered for initial improvement. Notes about how others have used the results, together with The King's Fund's overarching design principles for dementia friendly design, are reproduced at the end of the tool.

How the tool was developed

The first assessment tool for the ward environment was developed in collaboration with NHS trusts participating in The King's Fund's Enhancing the Healing Environment (EHE) programme. Since then over 70 care organisations have been involved in field testing the tools.

The tools have been informed by research evidence, best practice and over 300 survey responses from those who have used the tools in practice. Each of the sections draws on this evidence to develop a rationale for effecting change in care environments. These rationales also address the visuospatial problems often associated with dementia.

For further details go to **www.kingsfund.org.uk/dementia**

Before using the tools

Before carrying out the assessment please ensure that all relevant management backing has been secured to build support and commitment to the results.

It may also be useful to take photographs as these can be used to mark progress and act as a record of improvements. If photographs are taken all relevant permissions need to be obtained.

If you would like to provide any feedback on the tool or to contact us please email **ehe@kingsfund.org.uk**

1 The environment promotes meaningful interaction between patients, their families and staff

Rationale

Being unable to find the entrance and/or reception desk can cause anxiety. Uncared for and unwelcoming spaces can provoke concerns in patients and their relatives about standards of care. The arrangement of furniture provides clues as to the purpose of the space. Seating that enables carers to sit alongside the people they are accompanying will reduce agitation and older people are likely to need chairs with arms.



Questions

Please score each answer from 1 - 5
(1=barely met, 5=totally met)

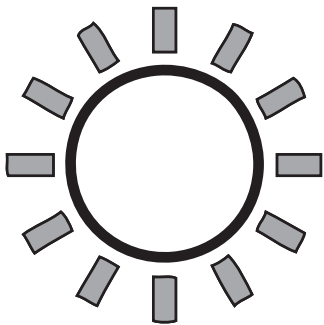
- A** Does the approach to the centre look and feel welcoming?
- B** Is the entrance well signed and easy to find?
- C** Is there a ramp with handrails and is it clear of obstacles/articles which may cause confusion e.g. bicycles?
- D** Does the centre give a good first impression i.e. is it well lit, clean, tidy and cared for?
- E** Is there an obvious main reception/enquiry desk near the entrance?
- F** If there are separate reception areas for some services, are these easy to see and clearly signed?
- G** Are seating/waiting areas obvious?
- H** Is there a choice of seating provided including chairs with arms?
- I** Is there space for those accompanying patients to sit with them?

Please give examples of good practice/
areas of concern

2 The environment promotes well-being

Rationale

Older people need higher light levels and people with dementia may interpret shadows or dark areas as holes in the floor or different levels and avoid or try to step over them. Appropriate artworks can provide interest while waiting. Views and access to nature promote well-being. Planting should be colourful and non-toxic.



Questions

Please score each answer from 1 - 5
(1=barely met, 5=totally met)

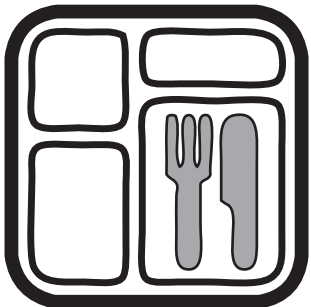
- A** Is the level of light comfortable and appropriate?
- B** Is the lighting even e.g. without pools of light and/or dark areas, stripes or shadows which could be confusing and disorientating?
- C** Is there good natural light?
- D** Is there good colour contrast between the chairs and the flooring?
- E** Are there artworks to provide interest while waiting?
- F** Are views of nature maximised e.g. by having low windows so people can see out from a seated position?
- G** Is there access to pleasant, safe outside space e.g. garden, courtyard, or terrace?
- H** Has planting been chosen to be non-toxic and to provide interest throughout the seasons?

Please give examples of good practice/
areas of concern

3 The environment encourages active engagement of people with dementia in their care

Rationale

People with dementia can become very anxious in unfamiliar environments but being able to have their carer with them throughout is likely to be reassuring. Noisy environments and patient call display systems which use TV screens can be misinterpreted. Keeping people calm will enable them to better participate in their assessment. Distress can be eased by providing a quiet waiting area or room. Avoiding dehydration is an important part of caring for people with dementia.



Questions

Please score each answer from 1 - 5
(1=barely met, 5=totally met)

- A** Is there a separate quieter seating/waiting area which could be used by people with dementia and their carers?
- B** Are there appropriate facilities to enable a relative/carer to be present throughout the consultation and episode of care?
- C** Is any electronic check-in system large enough so as to be easily visible?
- D** Is the electronic check-in system easy to use?
- E** Is the patient call display easily visible from the seating area/s?
- F** Is the patient call display separate from any TV screen so as to avoid confusion?
- G** Is water freely available and independently accessible?
- H** Are snacks and hot drinks available if patients are spending a long time in the centre?

Please give examples of good practice/
areas of concern

4 The environment promotes mobility

Rationale

Being able to walk independently is important. Safety can be enhanced by providing handrails and small seating areas where people can rest. People with dementia may interpret shiny floors as being wet or slippery and changes in flooring colour, for example a dark floor mat, as something to step over. Speckles or pebble effects in flooring could look like pieces of litter. Interesting artworks will encourage mobility as well as helping people find their way around.



Questions

Please score each answer from 1 - 5
(1=barely met, 5=totally met)

- A** Is the flooring matt rather than shiny and in a colour that contrasts with the walls and furniture?
- B** Could the lighting or natural light from windows make the floor appear to be wet or slippery?
- C** Is the lighting or natural light from windows even e.g. without pools of light and/or dark areas, stripes or shadows?
- D** Is the flooring a consistent colour i.e. does not have speckles, pebble effects, stripes or patterns?
- E** Are any threshold strips or floor mats between areas in the same colour and tone as the flooring?
- F** Do the handrails contrast with the walls and can they be grasped properly?
- G** Are there small seating areas for people to rest along any long corridors and outside the centre?
- H** Are lift controls easy to understand and clearly visible?
- I** Are dead ends avoided by putting a chair or artwork at the end of long corridors?
- J** Are staircases well lit and are stair nosings in a contrasting colour to enable the edges of the steps to be clearly distinguishable?

Please give examples of good practice/ areas of concern

5

The environment promotes continence and personal hygiene

Rationale

Not being able to find the toilet provokes anxiety and using the same signs and door colours to denote all toilets will help people find them more easily. Ensuring good colour contrast on sanitary fittings will make toilets and basins easier to see and use. Traditional and familiar designs will help ease anxiety and promote self-care. Being plunged into darkness if sensor lights go out can be very frightening.



Questions

Please score each answer from 1 - 5
(1=barely met, 5=totally met)

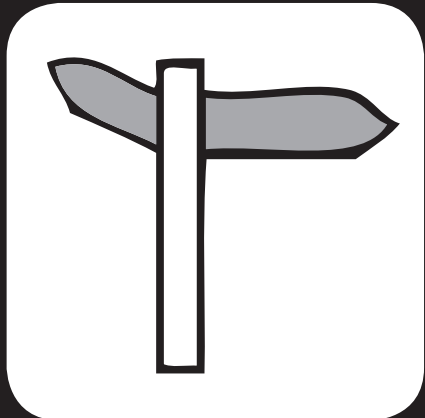
- A** Can the signs to the toilets be seen from all areas?
- B** Are all toilet doors painted in a single distinctive colour and do they have the same clear signage?
- C** Are the toilet seats, flush handles and rails in a colour that contrasts with the toilet walls and floor?
- D** Are the toilet flushes, basins and taps of a familiar design?
- E** Are the taps clearly marked as hot and cold and are they and the toilet flushes of traditional design?
- F** Are the toilet roll holders of familiar design and can they be easily reached from the toilet?
- G** On each floor is there access to a toilet big enough to allow space for a wheelchair and carers to assist with the door closed?
- H** If sensor lights have been installed do they allow sufficient time for completion of toileting?

Please give examples of good practice/ areas of concern

6 The environment promotes orientation

Rationale

People with dementia are likely to become agitated in unfamiliar surroundings and providing visual clues and prompts, including accent colours and artworks of local landmarks, to help them find their way around is particularly important. Signs need to be placed at a height where they can easily be seen and should be placed on doors, not beside them. Strong patterns on walls, curtains or furnishings can be misinterpreted. Providing clocks and signs indicating the name and address of the centre will help with orientation.



Questions

Please score each answer from 1 - 5
(1=barely met, 5=totally met)

- A** Do doors have a clear or transparent vision panel to show where they lead to?
- B** Are signs of a good size and a contrasting colour and hung at a height (approximately 4 foot/1.2m) that makes viewing them easy?
- C** Are signs denoting consultation room number or name clear and easy to read?
- D** Are signs placed at key decision points to assist navigation through the building?
- E** Have strong patterns been avoided in wall coverings, curtains, furnishings and screens?
- F** Is there a large face clock easily visible in all areas?
- G** Is there clear internal signage denoting the name of the centre and its location?
- H** Are there points of interest and way finding clues throughout the centre e.g. different colours or artworks used to denote each floor?

Please give examples of good practice/
areas of concern

7 The environment promotes calm, safety and security

Rationale

Clutter and distractions, including notices, can cause added confusion and should be avoided. Noise can make concentration difficult and can increase anxiety. Locked doors and window restrictors can lead to frustration and anger when they cannot be opened.



Questions

Please score each answer from 1 - 5 (1=barely met, 5=totally met)

- A** Are notices kept to a minimum to avoid distraction and confusion?
- B** Are spaces clutter free?
- C** Has adequate space been provided for wheelchairs and pushchairs?
- D** Have noise absorbent surfaces been used e.g. on floors and ceilings, to aid noise reduction?
- E** Is background noise kept to a minimum?
- F** Are the ways out/ fire exits clearly marked and easy to see?
- G** Are doors to 'staff only' areas disguised e.g. by painting the doors and door handles in the same colours as the walls?
- H** Are all hazardous liquids and solids e.g. cleaning materials, locked away?

Please give examples of good practice/ areas of concern

Summary

Please add your scores for each criterion here

A B C D E F G H I

1 The environment promotes meaningful interaction between patients, their families and staff

2 The environment promotes well-being

3 The environment encourages active engagement of people with dementia in their care

4 The environment promotes mobility

5 The environment promotes continence and personal hygiene

6 The environment promotes orientation

7 The environment promotes calm, safety and security

How the results might be used

Scores can be benchmarked against other health centres or more widely to look at comparisons and to highlight particular priorities for improvement. Remember it is often the simple things that can make a big difference such as de-cluttering spaces or providing small seating areas. Similarly a local photographic competition can produce stunning artworks.

If there are low scores in a particular area, think what action can be taken immediately and what actions need to be addressed with others. If the scores are low overall this should help inform discussions on the need for environmental improvements with senior management in the organisation.

How others have used their results

Evaluations of the tools indicate that people have already used their results to:

- secure finance from their boards to improve the care environment
- influence their managers and estates colleagues to support change
- educate staff and help change attitudes
- improve signage, flooring and colour schemes as part of maintenance programmes.

Overarching design principles

The design principles focus on promoting well-being and independence rather than providing detailed room by room guidance. They have been developed as a result of the EHE programme and bring together best practice in creating more supportive care environments for people with cognitive problems and dementia. The principles are drawn from a number of sources, including research evidence and the learning gained from changes tested in a range of care environments.

www.kingsfund.org.uk/sites/files/kf/EHE-developing-supportive-design-for-people-with-dementia-bibliography1.pdf

Each of the five sections contains a list of design elements that are known to support, encourage and enable people with dementia in care settings. It is unlikely that all the elements can be addressed at the same time unless a new build or comprehensive refurbishment is being planned. However, many of the principles are simple, can be introduced with very little financial outlay and are known to be helpful in creating a more supportive physical environment for people with dementia and those that care for them.

