

# **Is your care home dementia friendly?**

## EHE Environmental Assessment Tool



Second edition

Date .....

Care home

.....

Assessment carried  
out by.....

## 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 for use in care settings. Tools are available for wards; areas of hospitals where patients are ambulatory such as clinics; care homes; extra care housing and health centres.

### How to use the care home 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 family member; clinical, managerial or estates staff; or dementia specialists, 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.

The assessment tool contains seven sections and a set of questions to prompt discussions and should be completed in full. Walk around the care home 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.

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](http://www.kingsfund.org.uk/dementia)**

### Before using the tool

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

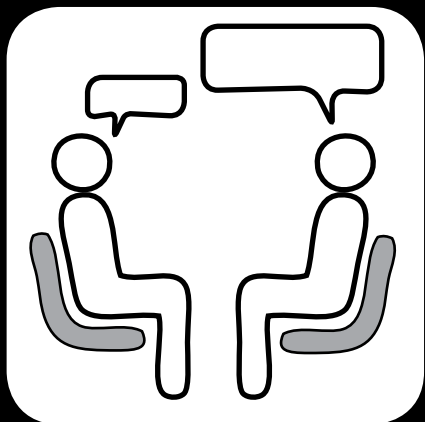
It may also be useful to take photographs as these can be used to mark progress and act as a record of improvements. If photographs are taken all relevant permissions need to be obtained.

If you would like to provide any feedback on the tool or to contact us please email **[ehes@kingsfund.org.uk](mailto:ehes@kingsfund.org.uk)**

**1** The environment promotes meaningful interaction and purposeful activity between people who live in the care home, their families and staff

### Rationale

**Uncared for and unwelcoming spaces can cause anxiety and provoke concerns both for residents and their relatives about the standards of care. Furniture arrangement gives clues to the use of the space. There should be a choice of seating, including chairs with arms. Arranging chairs in clusters will encourage conversation. Residents should also have access to quiet seating areas. People with dementia are adults with a lifetime of experience and so activities should be carefully and deliberately chosen to reflect the age of the residents and their individual interests.**



## Questions

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

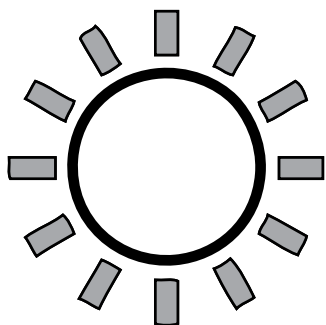
- A** Does the approach to the care home look and feel welcoming? ☐
- B** Is the entrance obvious and the doorbell/entry phone easy to use? ☐
- C** Does the care home give a good first impression i.e. does it look clean, tidy and cared for? ☐
- D** Are there social areas such as day rooms and dining rooms? ☐
- E** Are the chairs in these social areas arranged in small clusters to encourage conversation? ☐
- F** Is there a choice of seating e.g. settees as well as single chairs? ☐
- G** Are there dedicated quiet areas, spaces and resources for individual and group activities e.g. books, memorabilia, artworks? ☐
- H** Does the environment support residents to engage in home life e.g. doing laundry? ☐

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 on the floor as holes and try to step over them. Stripes on flooring could be confusing and disorientating. Appropriate light levels can help promote normal patterns of waking and sleeping. Views and access to the outside are essential for well being.



### Questions

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

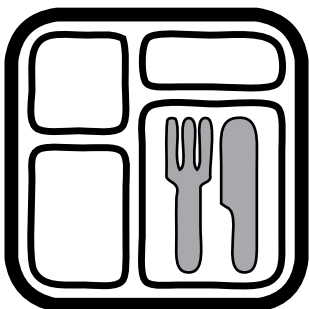
- A** Is there good natural light in bedrooms and social spaces? ☐
- B** Is the level of light comfortable and appropriate and can it be adjusted for care needs? ☐
- C** Do the light switches contrast with their surrounds/the walls so that they are easy to see? ☐
- D** Is the lighting and natural light from windows even e.g. without pools of light and/or dark areas, stripes or shadows? ☐
- E** Is the lighting designed to support normal sleep and wake patterns e.g. can bedrooms be made completely dark using black out curtains/blinds? ☐
- F** Is the decor age appropriate and culturally sensitive? ☐
- G** Are links to and views of nature maximised e.g. by having low windows, using natural materials and colours? ☐
- H** Is there independent access to the outside space? ☐
- I** Has internal and external planting been chosen to be colourful and non-toxic? ☐

Please give examples of good practice/  
areas of concern

# 3 The environment encourages eating and drinking

## Rationale

Having a choice of where to eat, e.g. with others or by themselves, may encourage people to eat and drink as will the provision of nutritious drinks and snacks. For people with dementia table cloths, crockery, cutlery and drinking glasses should be chosen with care to look familiar (beakers and specially shaped plates may not be recognised). People may not be able to distinguish white food presented on a white plate so crockery needs to offer a colour contrast to food and drink.



## Questions

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

- A** Do the people living in the care home and/or their relatives have constant independent access to hot and cold drinks? ☐
- B** Do residents have independent access to snacks and finger food? ☐
- C** Are the people living in the care home and/or their relatives able to make food and wash up? ☐
- D** Is the crockery and glassware of familiar design and in a distinctive colour that contrasts with tables, trays and food? ☐
- E** Is there a choice of where to eat? ☐
- F** Are large dining areas divided so as to be domestic in scale? ☐
- G** Is there enough space and chairs for someone to assist residents with eating and drinking and/or eat alongside the residents? ☐

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 in corridors and gardens. People with dementia may interpret shiny floors as being wet and or slippery and changes in flooring colour 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. Access to the outside throughout the year is essential for well being and circular or continuous pathways will help people return to the entrance.



## Questions

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

- A** Is there space to walk around independently both inside and outside the home? ☐
- B** Is the flooring matt rather than shiny and of a consistent colour i.e. does not have speckles, pebble effects or stripes? ☐
- C** Is the flooring in a colour that contrasts with the walls and furniture? ☐
- D** Are the handrails in the corridors in a colour that contrasts with the walls? ☐
- E** Are there small seating areas for people to rest along corridors? ☐
- F** Are there age appropriate points of interest e.g. photographs or artworks of a size that can easily be seen? ☐
- G** Are lifts easy to find and do they have large control buttons? ☐
- H** Have sheltered seating areas and points of interest been provided in the outside space? ☐
- I** Have the outside areas been designed to encourage engagement and activity e.g. circular/returning pathways, raised flower beds, a clothesline? ☐

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)

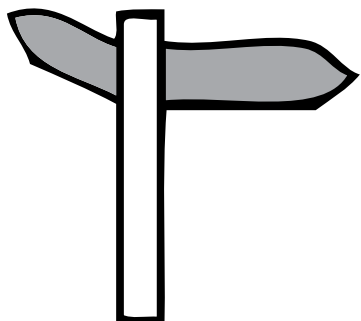
- A** Can the signs to the toilets be seen from all areas? ☐
- B** Are all toilet doors painted in a single distinctive colour and do they have the same clear signage? ☐
- C** Are the toilet seats, flush handles and rails in a colour that contrasts with the toilet/bathroom walls and floor? ☐
- D** Are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

Please give examples of good practice/ areas of concern

# 6 The environment promotes orientation

## Rationale

Providing visual clues and prompts, including accent colours and artworks, personalising bedrooms and providing clocks and calendars will help with orientation. Signs using both pictures and text need to be placed at a height where they can easily be seen. Signs should be placed on doors not beside them. Badly placed mirrors can increase disorientation. Strong realistic patterns and life size images of e.g. flowers or bus stops are likely to further disorientate people with dementia. Personal objects are reassuring and will help to promote self care.



## 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 of a contrasting colour so as to be seen easily? ☐
- C** Do signs e.g. for toilets or day rooms use both pictures and words and are they hung at a height (approximately 4 foot/1.2m) that makes viewing them easy? ☐
- D** Are pictures/objects and/or colours used to help people find their way around? ☐
- E** Are bedrooms/bed spaces personalised e.g. through the use of names, accent colours, memory boxes, coloured linen or personal furniture and photographs? ☐
- F** Have mirrors been placed carefully to avoid disorientation and can they be covered if required? ☐
- G** Have strong patterns been avoided e.g. in wall coverings, furnishings and flooring? ☐
- H** Are personal objects, including self-care items, situated where individual residents can find them? ☐
- I** Is there a large face clock easily visible in all areas including bedrooms? ☐
- J** Are the people who live in the care home able to see a calendar? ☐

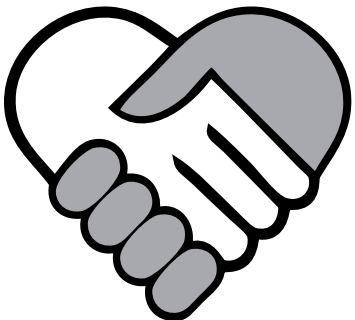
Please give examples of good practice/ areas of concern



# 7 The environment promotes calm, safety and security

## Rationale

Clutter and distractions, including notices, can cause added confusion and should be avoided. Signs should be kept to the minimum. 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. Dementia is a terminal illness and research indicates that people prefer to die in places and amongst people that are familiar to them. All staff should be familiar with current statutory and regulatory requirements for Deprivation of Liberty Safeguards.



## Questions

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

- A** Are spaces clutter free and notices kept to a minimum to avoid distraction and confusion? ☐
- B** Have noise absorbent surfaces been used e.g. on floors and ceilings, to aid noise reduction? ☐
- C** Is background noise kept to a minimum including doorbells, call systems and machine/sensor alarms? ☐
- D** Do the people who live in the care home have any control over the sounds they hear e.g. can they listen to their own choice of music, watch their own choice of TV programme? ☐
- E** Are doors to exits clearly marked but 'staff only' areas disguised e.g. by painting the doors and door handles in the same colours as the walls/continuing the handrail across the door? ☐
- F** Are the people who live in the care home cared for in the least restrictive environment possible while maintaining the appropriate level of safety and security? ☐
- G** Are there appropriate facilities to support enhanced and/or end of life care e.g. provision of a folding bed or reclining chair for relatives to remain within or near bed areas overnight or dedicated accommodation on site? ☐
- 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 J

1 The environment promotes meaningful interaction and purposeful activity between people who live in the care home, their families and staff

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

2 The environment promotes well-being

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

3 The environment encourages eating and drinking

☐ ☐ ☐ ☐ ☐ ☐ ☐

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 care homes, 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
- redesign dining areas and change crockery.

## 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](http://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.

