## ENVIRONMENTAL ASSESSMENT TOOL HANDBOOK

**RICHARD FLEMING KIRSTY A BENNETT** 

### **RESOURCE 3**

Environ<mark>mental</mark> Design Resources

February 2017



Dementia Training Australia

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# ENVIRONMENTAL ASSESSMENT TOOL HANDBOOK

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## **RESOURCE 3**

Environmental Design Resources

February 2017

This resource is No 3 in a set of seven Environmental Design Resources.

## DEMENTIA TRAINING AUSTRALIA ENVIRONMENTAL DESIGN RESOURCES

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## INTRODUCTION

This handbook is Resource 3 in a set of six Environmental Design Resources. The purpose of this handbook is to assist users of the Environmental Assessment Tool (EAT) to systematically review and create better environments for people living with dementia. The EAT was first published by NSW Health in 2003 as the Environmental Audit Tool.<sup>1</sup> It is organised around a number of key design principles.

There are four parts in the handbook.

- **Part 1** 'Key Design Principles' contains a description of key design principles.
- **Part 2** 'The Environmental Assessment Tool' introduces the EAT and provides directions for its use.
- **Part 3** 'Using the Spreadsheet' contains a guide to scoring the EAT and showing the results graphically.
- **Part 4** 'Applying the Principles' provides information about the questions contained in the EAT and outlines design considerations for each of the questions.

References

1. Fleming, R., I. Forbes, and K. Bennett, Adapting the ward for people with dementia, 2003. Sydney: NSW Department of Health.

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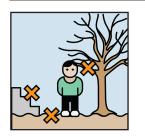
Environmental Assessment Tool Handbook

## PART 1 KEY DESIGN PRINCIPLES

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## PART 1 KEY DESIGN PRINCIPLES

### 1. UNOBTRUSIVELY REDUCE RISKS



People with dementia require an internal and external environment that is safe and easy to move around if they are to continue to pursue their way of life and make the most of their abilities. Potential risks such as steps must be removed. All safety features must be unobtrusive as obvious safety features, such as fences or locked doors, can lead to frustration, agitation and anger or apathy and depression.

### 2. PROVIDE A HUMAN SCALE



The scale of a building can affect the behaviour and feelings of a person with dementia. The experience of scale is influenced by three key factors; the number of people that the person encounters, the overall size of the building and the size of the individual components (such as doors, rooms and corridors). A person should not be intimidated by the size of the surroundings or confronted with a multitude of interactions and choices. Rather the scale should encourage a sense of wellbeing and enhance the competence of a person.

### 3. ALLOW PEOPLE TO SEE AND BE SEEN

The provision of an easily understood environment will help to minimise confusion. It is particularly important for people with dementia to be able to recognise where they are, where they have come from and where they can go. When a person can see key places, such as a lounge room, dining room, their bedroom, kitchen and an outdoor area they are more able to make choices and see where they want to go. Buildings that provide these opportunities are said to have good visual access. Good visual access opens up opportunities for engagement and gives the person with dementia the confidence to explore their environment. It can also enable staff to see residents. This reduces staff anxiety about the residents' welfare and reassures the residents.

### 4. MANAGE LEVELS OF STIMULATION - REDUCE UNHELPFUL STIMULATION



Because dementia reduces the ability to filter stimulation and attend to only those things that are important, a person with dementia becomes stressed by prolonged exposure to large amounts of stimulation. The environment should be designed to minimise exposure to stimuli that are not specifically helpful to the resident, such as unnecessary or competing noises and the sight of signs, posters, spaces and clutter that are of no use to the resident. The full range of senses must be considered. Too much visual stimulation is as stressful as too much auditory stimulation.

#### 5. MANAGE LEVELS OF STIMULATION - OPTIMISE HELPFUL STIMULATION

Enabling the person with dementia to see, hear and smell things that give them cues about where they are and what they can do, can help to minimise their confusion and uncertainty. Consideration needs to be given to providing redundant cueing i.e. providing a number of cues to the same thing, recognising that what is meaningful to one person will not necessarily be meaningful to another. Using text and image in signs is a simple way to do this. Encouraging a person to recognise their bedroom through the presence of furniture, the colour of the walls, the design of a light fitting and/or the bedspread is a more complex one. Cues need to be carefully designed so that they do not add to clutter and become over stimulating.

#### SUPPORT MOVEMENT AND ENGAGEMENT 6.

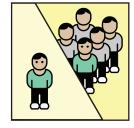
Purposeful movement can increase engagement and maintain a person's health and wellbeing. It is encouraged by providing a well defined pathway, free of obstacles and complex decision points, that guides people past points of interest and opportunities to engage in activities or social interaction. The pathway should be both internal and external, providing an opportunity and reason to go outside when the weather permits.

#### 7. **CREATE A FAMILIAR PLACE**

A person with dementia is more able to use and enjoy places and objects that are familiar to them from their early life. The environment should afford them the opportunity to maintain their competence through the use of familiar building design (internal and external), furniture, fittings and colours. The personal backgrounds of the residents need to be reflected in the environment. The involvement of the person with dementia in personalising the environment with their familiar objects should be encouraged.

#### 8. **PROVIDE A VARIETY OF PLACES TO BE ALONE OR WITH OTHERS - IN THE UNIT**

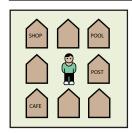
People with dementia need to be able to choose to be on their own or spend time with others. This requires the provision of a variety of places in the unit, some for quiet conversation and some for larger groups, as well as places where people can be by themselves. These internal and external places should have a variety of characters, e.g. a place for reading, looking out of the window or talking, to cue the person to engage in relevant activity and stimulate different emotional responses.











### 9. PROVIDE A VARIETY OF PLACES TO BE ALONE OR WITH OTHERS - IN THE COMMUNITY

Without constant reminders of who they are, a person with dementia will lose their sense of identity. Frequent interaction with friends and relatives can help to maintain that identity and visitors should be able to drop in easily and enjoy being in places that encourage interaction.

Stigma remains a problem for people with dementia so the unit should be designed to blend with the existing community and not stand out as a 'special' unit. Where possible a 'bridge' should be built between the unit and the community by providing a space that is shared by the community and people with dementia. A coffee shop near the unit, for example, may enable a person with dementia to go there easily without needing assistance. Where the unit is a part of a larger site, there should be easy access around the site so people with dementia, their families and friends can interact with other people who live there.

### 10. PROVIDE OPPORTUNITIES FOR ENGAGEMENT WITH ORDINARY LIFE



An environment that provides opportunities for engagement with ordinary life allows people to make decisions and exercise choice and independence, both in the way they spend time and what they do. The environment should allow people to continue to do the things that they have done throughout their lives. These activities will vary enormously as they will be influenced by people's expectations and life experiences. The places found in a familiar house are often important (such as a lounge room, dining room, kitchen and outside area) so that people have the chance to use their remaining abilities.

These principles are an extension of work first published in 1987 [1] and continued in 2003[2].

#### References

- 1. Fleming, R. and J. Bowles, Units for the confused and disturbed elderly: Development, Design, Programming and Evaluation. Australian Journal on Ageing, 1987. 6(4): p. 25-28.
- 2. Fleming, R., I. Forbes, and K. Bennett, Adapting the ward for people with dementia, 2003. Sydney: NSW Department of Health.

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## PART 2 ENVIRONMENTAL ASSESSMENT TOOL (EAT)

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## PART 2 ENVIRONMENTAL ASSESSMENT TOOL (EAT)

### **INTRODUCTION TO THE EAT**

The Environmental Assessment Tool (EAT) was developed to provide a systematic framework for reviewing the environment and identifying areas for improvement. It is organised around key design principles and contains questions that respond to each principle. These principles are evidence based (refer to Resource 1 of these Environmental Design Resources for more information).

A copy of the Environmental Assessment Tool can be found in Appendix 1 at the back of this handbook.

### **BACKGROUND TO THE EAT**

The EAT was first designed to assist with identifying modifications to wards in rural New South Wales hospitals so they could be more suitable for the people with dementia who tended to be admitted for prolonged periods. It was published by NSW Health in a book 'Adapting the Ward' (R Fleming, I. Forbes and K. Bennett 2003). It was subsequently modified in the light of surveys of the literature (Fleming, Crookes et al. 2008; Fleming and Purandare 2010). It has been used extensively in residential aged care settings and its psychometric properties have been examined (Fleming 2011). Refer to Resource 2 for more information.

### **USING THE EAT**

The EAT is designed to be used by a non-design professional and can be completed by a member of staff or a person visiting the facility.

Some key steps have been identified as valuable when using the EAT:

- 1. It is important that the person completing the EAT is familiar with the design principles underpinning the EAT (refer to Part 1 of this handbook). Attending a presentation by a person who is experienced in using the principles is a good way of gaining an understanding of the principles.
- 2. Prior to starting the assessment, users should familiarise themselves with the EAT by reading it thoroughly.

If a group of people is completing the EAT there are two ways to approach this:

- The group completes the assessment together and the answers are determined by consensus. This encourages discussion, familiarises more people with the design principles and facilitates ownership of the results of the assessment.
- b. A number of people complete the assessment independently. (In this case the different results are entered and a median score is provided in a spreadsheet (refer to Part 3 of this handbook).

#### 3. Undertaking the assessment

Before commencing the EAT, it is important to clearly define the area that is to be assessed i.e. the extent of the unit and what features are included in it. Is the courtyard garden, for example, part of the unit being assessed, another unit or both? In a large facility, it may be helpful to assess units separately as this will allow for more accurate responses to questions. Ask someone who knows the unit well about the boundaries of the unit so that the area that is to be assessed is accurately defined.

It is important to ensure that the questions are answered as accurately as possible. Spending time in the facility and observing daily life will help generate a feel for the place. This will also create opportunities for interaction with residents so that they can enjoy the visit, rather than being the subject of scrutiny.

The EAT questions typically require a 'yes' or 'no' answer.

Some questions are best answered by sitting in a central position and others by moving around. If the correct answer is not obvious, ask a staff member who works in that part of the facility, e.g. 'Is the wardrobe that the resident uses full of a confusing number of clothes?' It may be that there is a difference of opinion between the staff and the person completing the EAT, for example as to whether the noise from the kitchen is too great. In this case the person completing the EAT will need to determine the correct response. If in doubt as to the intent or aim of the question, refer to part 4 of this handbook where information about each question is provided.

It may be that on the day of the visit something is observed that is unusual and not representative of a typical day. Before leaving the facility confirm the results with the manager (or the liaison person).

### **RESULTS OF THE EAT**

The results of the EAT can be entered on an Excel spreadsheet which is available at http://www.dementiatrainingaustralia.com.au. This allows the data to be shown graphically and enables the creation of a *Room for Improvement (RFI)* report as discussed in Part 3 of this handbook.

It is important to remember that the purpose of the EAT is not to achieve a particular score, but to provide a framework for reviewing the environment and identifying areas for improvement.

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## PART 3 USING THE SPREADSHEET

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## PART 3 USING THE SPREADSHEET

### **ENTERING THE DATA**

The results of the EAT can be entered into an Excel spreadsheet which is available at http://www.dementiatrainingaustralia.com.au. This allows the data to be shown graphically and enables the creation of a *Room for Improvement (RFI)* report.

The spreadsheet allows the scores of up to five EAT users to be entered. In this instance the median of the ratings is used in the graph and *RFI* report.

### WHAT DO THE EAT SCORES MEAN?

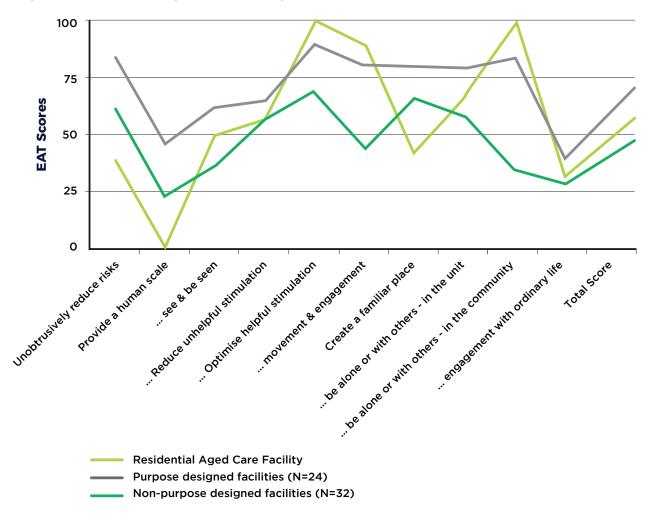
It is important to remember that the purpose of the EAT is not to achieve a particular score. There is no perfect design. Even the best facilities can do things better. The purpose of the EAT is to provide a systematic framework for reviewing the environment and identifying areas for improvement.

It is important to recognise that the EAT questions are not a set of rules that are to be applied in the same way every time. There are many ways in which the EAT questions and principles can be applied. How the design principles are best interpreted will depend on the particular context of the facility. Geographic location, climate, site, culture, socio economic background and lifestyle of the residents are just some of the things that will influence the responses to the principles. They will be applied differently in different settings and in response to a range of needs.

### **DISCUSSION OF RESULTS**

a. Look at the overall picture presented by the graph that summarises the sub-scale scores. This graph enables a comparison to be made with a sample of purpose designed and non-purpose designed Australian residential aged care facilities.

In the example in Figure 1, the EAT has been used to evaluate a residential aged care facility. It can be seen that the facility compares well with a sample of purpose designed and non purpose designed facilities in some areas, but not in others. The most obvious area of concern is the principle of 'Provide a human scale'. 'Create a familiar place' and 'Provide opportunites for engagement with ordinary life' also do not score well. On the other hand, the facility responds well to the principles 'Optimse helpful stimulation' and 'Provide a variety of places to be alone or with others - in the community'. There is clear room for improvement with the principles 'Allow people to see and be seen' and 'Reduce unhelpful stimulation'.



#### **Figure 1: Residential Aged Care Facility EAT results**

**b.** Look at the 'Room for Improvement' (RFI) report

The spreadsheet provides the means of generating a 'Room for Improvement' (RFI) report for the EAT. This is simply a table in which the EAT items are ranked according to the amount of room for improvement that is available, i.e. the possible maximum score minus the actual score. When a number of people complete the EAT and enter the data into the spreadsheet, the 'actual score' in the table will be the median of the scores entered.

The RFI table can be used to structure the discussion. Start at the top and discuss the items one by one until the point where there is no room for improvement (because the item is scored at the maximum). This will ensure that all of the main points are discussed.

The Not Applicable items (N/A) have been placed at the top of the list to encourage consideration of the possibility that they may be relevant. In the example in Table 1, a number of items regarding the lounge room have been scored N/A. Putting these at the top of the RFI report provides an opportunity to discuss whether the provision of a lounge room is important in the facility.

#### Table 1: Abbreviated EAT 'Room for Improvement' report

Look at the items below that have been scored as Not Applicable (N/A). Would the facility be improved if they were considered to be applicable?

Toilet is seen from lounge room	N/A	1	N/A	Allow people to see and be seen
Bedrooms are seen from lounge room	N/A	4	N/A	Allow people to see and be seen
Dining room is seen from lounge room	N/A	1	N/A	Allow people to see and be seen
Garden exit is seen from lounge room	N/A	1	N/A	Allow people to see and be seen
Kitchen is seen from lounge room	N/A	1	N/A	Allow people to see and be seen

#### Discuss the following items in turn.

These are ordered according to where there is the most room for improvement.

Dining room is seen from bedrooms	1	4	3	Allow people to see and be seen
Number of people in unit	0	3	3	Provide a human scale
Residents have kitchen access	0	2	2	Provide opportunities for engagement with ordinary life
Residents involved in main meal preparation	0	2	2	Provide opportunities for engagement with ordinary life
Residents involved in making snacks	0	2	2	Provide opportunities for engagement with ordinary life

The items below (RFI = 0) do not need as much discussion (but may still have room for improvement).

Resident areas are well lit	1	1	0	Unobtrusively reduce risks
Kitchen is seen from dining room	1	1	0	Allow people to see and be seen
Doorbell is intrusive	1	1	0	Reduce unhelpful stimulation
Kitchen is noisey	1	1	0	Reduce unhelpful stimulation

**c**. Use the structure of the Planning Template in Table 2 to guide the discussion and to record proposed actions

The discussion should begin by asking the question 'Can we improve this situation by using our existing resources differently?' '*How can we re-use what is there*?' There might be some chairs available, for example, that can be used to furnish a small area for conversation.

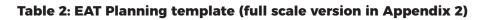
If this isn't the case then the next question is 'What can we do in the short term?', which may mean 'What can we do with the money in the petty cash?' or 'What can we do as part of our planned maintenance works?'

If this isn't sufficient to improve the situation the next question is 'What can we do in the medium term?', eg 'What can we do at the end of the financial year when there are some funds left over or when the Auxiliary has held their jumble sale? Can we allocate some money in next year's budget to achieve this change? Can we apply for a grant or contact the local service organisation?'

The final question is '*What can we do in the long term*?' or 'Does this need to be put into the capital works budget? Does this need to be the subject of ongoing strategic planning and fundraising?'

When action items have been agreed, add the response to the appropriate cell of the table according to the relevant principle(s) and the time frame that is proposed. In the example shown in Table 2, the use of the EAT identified that there was little for residents to do outside apart from move about. Chairs or benches were not available for them to sit on and shade was not provided along the path. Discussion focussed on how this could be addressed, and it was agreed that the first step was to take some vinyl chairs from inside and put them outside. While not a long term response, staff felt this was something that could be done quickly and easily, *re-using* what is already there. Intentionally using the garden for activities that already occur, such as morning tea, was seen as another easy thing to do and so this was a *short term* action item. More permanent seating will take time and require some work on the path to ensure easy access to the seats and so this was seen as a *medium term* solution. Finally, the provision of a permanent shade structure was seen as ideal but a *long term* goal.

It is important to recognise that making changes can take time. Some changes, such as altering the layout of the building, will be possible but very expensive. Others, such as moving a piece of furniture will be relatively easy to implement. Don't lose heart! The advantage of systematically considering environmental changes is that it is possible to identify a schedule of priorities and then work through them as opportunities arise and as part of a regular maintenance program.



KEY DESIGN PRINCIPLES											
		Unobtrusively reduce risks	Provide a human scale	Allow people to see and be seen	Manage levels of stimulation - reduce unhelpful stimulation	Manage levels of stimulation - optimise helpful stimulation	Support movement and engagement	Create a familiar place	Provide a variety of places to be alone or with others - in the unit	Provide a variety of places to be alone or with others - in the community	Provide opportunities for engagment with ordinary life
ACTIONS	ISSUES						Nothing to do outside No seats No shade				
	How can we <b>re-</b> <b>use</b> what is there?						Take some seats and put them outside				
	What can we do in the <b>short</b> term?						Plan to have morning tea outside on fine days Use an umbrella to provide shade				
	What can we do in the <b>medium</b> term?						Increase path width and create permanent seating areas				
	What can we do in the <b>long</b> term?						Build a shade structure				

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## PART 4 APPLYING THE PRINCIPLES

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## PART 4 APPLYING THE PRINCIPLES

This section is organised around the key design principles contained in the EAT and the questions that relate to each principle (refer to Part 1 and Appendix 1 of this handbook).

Each question in the assessment tool is discussed. Under each question there is a brief statement of what is important and why, and some key design considerations. For most (but not all) items three categories follow: Ensure, Avoid and Consider. These give suggestions and examples of design responses, problem areas to avoid, and items that may be considered depending on the particulars of a project and the people who will live there.

Some questions are found under more than one principle and some information is duplicated. This section has been designed so that each question stands alone, allowing the reader to use it as a reference document rather than being required to read it from beginning to end.

The Indigenous Aged Care Design Guide by Paul Pholeros, Kirsty Bennett, Adrian Welke and Maureen Arch is a key source document for this part of the handbook (Resource 6 of these Environments Design Resources or http://www.dementiatrainingaustralia.com.au).

### 1. UNOBTRUSIVELY REDUCE RISKS

# **1.1** Is the garden secure i.e. are residents prevented from getting over/under fence or out of the gate without the assistance of a staff member?

It may be important that the environment is able to be secured to prevent residents leaving the unit. Having a fence and gate that are sturdy and difficult to climb (or go under) is vital in this regard.

The gate needs to be able to be locked while allowing for exit in an emergency (if this is part of an emergency evacuation route). Mechanical keypads or keypads which are linked to a staff call system can be installed on gates. If keypads are linked to a staff call system, they will release automatically in the event of a fire.

Double handles/latches and handles which open in an anti clockwise direction may also be effective to prevent easy opening by residents from within the grounds. It is also important that residents cannot reach over a gate and open it from the outside while inside the grounds.

It is important that measures to create a secure garden are as unobtrusive as possible to avoid frustration, agitation and anger.

#### **ENSURE:**

- fence is continuous and well maintained
- fence is 1.8m high
- fence design does not allow for climbing (in or out)
- gates are secured but allow for controlled coming and going

#### AVOID:

- fences and gates with openings or horizontal members which can be used as foot holds
- planting near the fence which can be used for climbing
- · latch on outside of the gate

#### **CONSIDER:**

- designing the fence so that it blends into the landscape
- using vegetation to hide the fence so it is not foreboding or institutional
- creating a front yard which can be easily accessed from the street to encourage entry to the front door and a side/back garden which is secure
- double handles/latches, handles which open in an anti clockwise direction, keypads to secure exit

#### **1.2** If the front door leads out of the unit is it secure?

It may be important that the front door of the facility is able to be secured to prevent residents leaving the unit. The front door should be able to be secured but allow for controlled coming and going. Internally, the front door should be screened inside the unit to prevent residents being continually confronted by a locked door.

#### ENSURE:

- the front door is clearly recognisable from outside
- the front door can be secured

#### **CONSIDER:**

- screening the front door from inside the unit to prevent residents being continually confronted by a locked door
- location of the front door within the facility
- the type of security mechanism selected to allow for ease of use by staff

#### **1.3** Are all side doors leading out of the unit secure?

It may be important that all side doors leading out of the unit are able to be secured to prevent residents leaving the unit. Side doors should be be able to be secured but allow for controlled coming and going. The type of security mechanism selected will be important to allow for ease of use by staff. Any measures should be unobtrusive to avoid residents being confronted by locked doors.

NB Side doors that do not lead out of the unit (but, for example, lead to a secure garden) are not the subject of this question.

#### **ENSURE:**

side doors can be secured

#### AVOID:

residents being confronted by locked doors

#### **CONSIDER:**

- screening side doors from inside the unit to prevent residents being continually confronted by a door which may be locked
- designing side doors so that they do not lead out of the unit (and so do not need to be secured)



## Are bedroom windows restricted in the extent to which they open so that residents cannot climb out?

The extent to which bedroom windows can be opened is another component of creating a secure environment. Limiting the opening of bedroom windows can prevent residents leaving the unit if they shouldn't and people coming in through the window and bothering residents. Climbing out of windows is dangerous. Awning, double hung and sliding windows can all be unobtrusively modified to ensure that they cannot be opened wide enough to allow a person to pass through.

#### **ENSURE:**

extent of window opening is controlled

#### **AVOID:**

windows that can be opened and allow for climbing in or out

## **1.5** Is the garden easily supervised from the point(s) where staff spend most of their time?

It is important that residents are able to spend time outdoors and enjoy fresh air and sunshine. It is important that staff can easily see residents when they are outside and are able to assist them if required. This will help staff to feel comfortable about encouraging residents to go outside. Supervision of the garden should be unobtrusive.

#### ENSURE:

good visual access to the garden from different parts of the facility and in particular the point(s) where staff spend most of their time

#### AVOID:

a large, official, central staff base (which can be intimidating)

#### **CONSIDER:**

general transparency of building (planning, placement of windows, sill height, glazed doors)

## **1.6** Is there a way to keep residents who are not safe with knives and/or appliances out of the kitchen?

The ability to restrict access to certain areas helps to create a safe environment for residents. Some residents may present a danger to themselves or to others in a kitchen, and so access to the resident kitchen needs to be able to be controlled. It is important, however, that this does not result in all residents being denied access to the kitchen. The design and layout of the kitchen will be instrumental in allowing controls to be well designed and effective. The measures used (such as a half door or bench with a raised ledge on one side of the bench to limit access) need to be discreet and integrated into the design, so that they cannot be easily removed and so that the limits which are being put in place are not being emphasised. Demands on staff time will be reduced if residents can potter in a kitchen.

#### **ENSURE:**

design allows for access to resident kitchen to be discreetly restricted if required

#### **AVOID:**

open plan kitchen

#### **CONSIDER:**

- half height door with key pad, swipe card or magnetic lock
- bench with a raised ledge on one side

## **1.7** If the kitchen is used by residents is there a lockable knife drawer in the kitchen?

The ability to restrict access to certain areas helps to create a safe environment for residents. Some residents and visitors may present a danger to themselves or to others when using knives. Knives should be placed in a lockable drawer. This should be done unobtrusively so that it does not become a source of frustration for residents.

#### **ENSURE:**

knives are placed in a lockable drawer

#### **AVOID:**

making lockable drawer obvious

#### **CONSIDER:**

 including one cupboard which contains appliances, a lockable knife drawer and switch to control power

## **1.8** If the kitchen is used by residents is the cooker a gas cooker?

A gas cook top is preferred for resident use as there is no residual heat once a gas flame has been extinguished, thereby minimising the risk of injury to residents. Also, a gas flame can easily be seen and so a person is able to know that the cook top is in use.

#### **ENSURE:**

- auto ignition on cook top
- automatic shut off on cook top

#### **AVOID:**

electric hot plates

## **1.9** If the kitchen is used by residents is there a master switch that can be turned off quickly?

It is important that electrical power to the resident kitchen is controlled so that residents who are not able to use appliances and power points safely are not prevented from entering the kitchen to undertake other tasks, such as washing dishes and wiping benches.

The ability to isolate the power will also mean that those residents who are able to use electrical appliances safely can continue to do so. This control needs to be discreet, so that it cannot be easily overridden and so that the limits which are being put in place are not being emphasised.

#### **ENSURE:**

power to both stove and power points can be isolated

#### AVOID:

isolating fridge and lights

- including a lockable cupboard which contains appliances
- including a lockable knife drawer

## **1.10** Is the temperature of the water from all taps accessible to residents limited so that it cannot scald?

People with dementia are less able to respond to water temperature and react appropriately if water is too hot. Water temperature must be controlled to ensure residents' safety.

#### **ENSURE**:

- water temperature is controlled
- water temperature control systems are maintained in accordance with statutory requirements

#### AVOID:

 systems which are not easy to maintain and service (e.g. due to lack of qualified tradespeople in the area)

## **1.11** If the residents are involved in meal preparation are the pots and pans used small enough for them to lift easily?

If residents are to participate in cooking the pots and pans will need to be able to be lifted easily. This will impact on the size of the pot or pan and the material from which it is made.

#### **ENSURE:**

- pots and pans are light
- handles are firmly fixed and heat resistant

#### **AVOID:**

- large, heavy pots and pans
- metal handles

## **1.12** Are all floor areas safe from being slippery when wet (water or urine)?

A fall can result in a significant injury for an older person and so it is important to create an environment which minimises the risk of slipping and tripping. Floor finishes need to be slip resistant, even when they are wet. An appropriate cleaning regime is essential to ensure that the slip resistance of the outside finish is maintained.

#### **ENSURE**:

- floor finishes are even and slip resistant
- an appropriate cleaning regime is in place

#### AVOID:

- unnecessary changes in floor finishes
- strong contrast between changes in floor surfaces as these can result in the floor being perceived as a step or hole

#### **CONSIDER:**

a selection of materials to retain domestic finish

## **1.13** Is the lounge room easily supervised from the point(s) where staff spend most of their time?

It is important that residents are able to spend time in the lounge room on their own or with other people as they choose. It is important that staff can easily see residents and can assist them if required. Supervision of the lounge room should be unobtrusive.

#### **ENSURE:**

 good visual access to the lounge room from different parts of the facility and in particular the point(s) where staff spend most of their time

#### **AVOID:**

a large, official, central staff base (which can be intimidating)

#### **CONSIDER:**

general transparency of building (planning, placement of windows, window sill height, glazed doors)

#### 1.14 Are all areas used by residents well lit?

Lighting plays a key role in making a place easy to navigate and pleasant to be in. There should be sufficient natural and artificial lighting to ensure that residents are able to see rooms and what is in them at all times. Glare must be avoided.

#### **ENSURE:**

sufficient natural (and artificial) lighting for daytime and nighttime use

#### **AVOID:**

• glare

- lighting that uses dimmers, task lighting for reading and craft
- the design of window furnishings

### 2. PROVIDE A HUMAN SCALE

#### 2.1 How many people live in the unit?

It has been shown that small scale settings are beneficial for older people and especially for older people with dementia. Group size, or the number of people in a unit, is the most important factor in achieving a small scale setting. In a small unit, a resident needs to relate to fewer people, and is able to do things in a group which is more familiar to them. There are less comings and goings, and less noise and distractions.

The number of residents in a unit has a big impact on the overall size of the unit, as the number of bedrooms and the amount of circulation space that is required increase with more people. By default, a smaller group size means a smaller unit.

A small scale environment can be successfully created in many ways. A large facility can be made up of many units, each of which contains the areas that are important in the residents' daily life, such as the lounge room, dining room, residents' kitchen, bedroom, sitting areas and outdoor areas.

#### **ENSURE:**

- creating a unit for around 15 people or less
- staffing models are prepared at the design stage to confirm the best mix of unit size and operation

#### **AVOID:**

larger unit sizes greater than 15 people

- creating units for 10 people for less
- breaking up larger units into smaller units

### 3. ALLOW PEOPLE TO SEE AND BE SEEN

## **3.1** What proportion of confused residents can see their bedroom door from the lounge room?

Bedrooms are important in the lives of residents as they are likely to want to spend time there and return there at different times of the day and night. Bedrooms need to be easy to find and recognise. If residents can see their bedroom door when they leave the lounge room this will help them know where they are heading and give them a hint of what they will find when they get there.

#### **ENSURE:**

- bedrooms are located near the lounge room
- bedroom doors are identifiable (e.g. by the use of colour and other finishes)

#### **AVOID:**

• repetition of finishes which don't distinguish between bedroom doors

#### **CONSIDER:**

how clear lines of sight between bedrooms and lounge room can be created

## **3.2** What proportion of confused residents can see the lounge room as soon as they leave their bedroom?

The lounge room is a place where residents are likely to want to spend time relaxing and socialising with others or on their own. It needs to be easy to find and recognise. If residents can see the way to the lounge room when they leave their bedroom this will help them know where they are heading and give them a hint of what they will find when they get there.

#### **ENSURE:**

- the lounge room is located in a prominent position in the unit
- the lounge room is identifiable when leaving the bedroom (e.g. by furniture, furnishings and/or colour)

- how clear lines of sight between bedrooms and lounge room can be created

## **3.3** What proportion of confused residents can see the dining room as soon as they leave their bedroom?

The dining room is a place where residents are likely to want to spend time eating, relaxing and socialising with others or on their own. It needs to be easy to find and recognise. If residents can see the way to the dining room when they leave their bedroom this will help them know where they are heading and give them a hint of what they will find when they get there.

#### **ENSURE:**

- the dining room is located in a prominent position in the unit
- the dining room is identifiable when leaving the bedroom (e.g. by furniture, furnishings and/or colour)

#### **CONSIDER:**

how clear lines of sight between bedrooms and dining room can be created

#### **3.4** Can the exit to the garden be seen from the lounge room?

The lounge room is likely to be the place where residents spend most of their time. Being outside for part of the day is important so it is vital that residents are able to see the way to go outside from the lounge room.

#### **ENSURE:**

- that the door to outside is clearly recognisable as a door
- clear lines of sight to outside areas where activities may be occurring
- easy access to outside area

#### **AVOID:**

- obstructing the view of the door to outside
- obstructing the view out of the lounge room

#### **CONSIDER:**

window design to ensure windows can't be confused with doors

#### **3.5** Can the dining room be seen into from the lounge room?

When the lounge room and dining room are visually connected a resident can easily see another place that could be of interest to them. They can also see how they can go from one of these places to another.

#### **ENSURE:**

- the dining and lounge room are located near each other
- there is a clear visual connection between lounge and dining room
- a clear path of travel between lounge and dining rooms

#### **AVOID:**

obstructing the view from the dining to the lounge room

#### **3.6** Can the kitchen be seen into from the lounge room?

When the lounge room and resident kitchen are visually connected a resident can easily see another place that may be of interest to them. They can also see how they can go from one of these places to another. Being able to see the activities in the kitchen also helps the resident to keep track of time and alerts them to what is expected of them, e.g. to come for a meal.

#### **ENSURE:**

- · resident kitchen can be seen from the lounge room
- clear path between resident kitchen and lounge room

#### AVOID:

- obstructing the view of the resident kitchen from the lounge room
- obstructing the path between resident kitchen and lounge room

- keeping the benchtop hob height low to enable easy viewing into the kitchen by residents and staff
- planning the kitchen layout so that the connection to the lounge room allows for conversation between the rooms

### 3.7 Can the kitchen be seen into from the dining room?

When the dining room and resident kitchen are visually connected a resident can easily see another place that may be of interest to them. They can also see how they can go from one of these places to the other. Being able to see the activities in the kitchen also helps the resident to keep track of time and alerts them to what is expected of them, e.g. to come for a meal.

### **ENSURE**:

- resident kitchen can be seen from the dining room
- clear path between resident kitchen and dining room

### **AVOID:**

• obstructing the view of the resident kitchen from the dining room

### **CONSIDER:**

- keeping the benchtop hob height low to enable easy viewing into the kitchen by residents and staff
- planning the kitchen layout so that the connection to the lounge room allows for conversation between the rooms

### 3.8 Can a toilet be seen from the dining room?

A toilet is a room which needs to be used often and therefore needs to be easy to find and get to. If it is in close proximity to the dining room this can be helpful for both residents and staff.

### **ENSURE:**

- toilet is visible but still private
- clear path between toilet and dining room

### **AVOID:**

- locating the toilet so that it dominates the dining room view
- locating the toilet pan so that if the door is left open residents' privacy is compromised
- · obstructing the view between dining room and the toilet

### **CONSIDER:**

- the location of screens and the placement of fixtures in the dining room
- use of appropriately adjusted door closer so that the toilet door closes but residents can easily open the door

### **3.9** Can a toilet be seen from the lounge room?

A toilet is a room which needs to be used often and therefore needs to be easy to find and get to. If it is in close proximity to the lounge room this can be helpful for both residents and staff.

### **ENSURE:**

- toilet is visible but still private
- clear path between toilet and lounge room

### **AVOID**:

- locating the toilet so that it dominates the lounge room view
- locating the toilet pan so that if the door is left open residents' privacy is compromised
- obstructing the view between lounge room and the toilet

### **CONSIDER:**

- the location of screens and the placement of fixtures in the lounge room
- use of appropriately adjusted door closer so that the toilet door closes but residents can easily open the door

### **3.10** Can the lounge room be seen into from the point(s) where staff spend most of their time?

Residents are likely to be reassured if they know staff are around and so good visual access between the point(s) where staff spend most of their time and the lounge room is important. Staff have a responsibility for responding to residents' needs. If they can see the residents from where they spend most of their time they are able to do this more easily and they feel more at ease.

#### **ENSURE:**

good visual access to circulation routes around the lounge room

#### **AVOID:**

central staff base (which can be intimidating)

### **CONSIDER:**

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- general transparency of building (through planning, placement of windows, sill height and glazed doors). Perforated screens, small inside windows and low walls may increase the transparency between rooms and curtains, whereas solid walls and furniture may decrease the transparency
- Placing kitchen or small work area, e.g. roll top desk, in a central location

### 4. MANAGE LEVELS OF STIMULATION - REDUCE UNHELPFUL STIMULATION

### 4.1 Does the doorbell attract the attention of residents?

The sound of a doorbell can be intrusive and disturbing to residents, especially if they are unable to answer the front door. In these instances it can highlight that the front door is a barrier, and that residents do not have the freedom to come and go.

### **ENSURE**:

doorbell is used by visitors only (and not for deliveries)

### **AVOID:**

loud, piercing tones

### **CONSIDER:**

 separating service and visitor entries so that door bell is only relevant to residents

### 4.2 Is the noise from the kitchen distracting for residents?

Distracting noise from kitchens can be the banging of pots and pans, or loud conversation. (These are often most prevalent in non resident kitchens as they are predominantly staff work areas.) Such noise can significantly add to the amount of unhelpful stimulation the resident is exposed to.

### **ENSURE**:

non resident kitchen is separated from all residents' areas

### **AVOID:**

direct sound paths from kitchens to residents' areas

### **CONSIDER:**

- planning/location of kitchen
- · placement of doors and windows
- services access
- acoustic isolation measures

### 4.3 Are doors to cleaner's cupboards, store rooms and other areas where residents may find danger easily seen (i.e. not hidden or painted to merge with the walls)?

Residents have no need to open doors to cleaners' cupboards. More importantly, these cupboards will contain equipment that could be harmful. It is important that residents' attention is drawn only to those doors which they can open and may lead to somewhere of interest, rather than to those which may be locked, are irrelevant or present a potential danger to the resident or visitors.

### **ENSURE:**

- doors to cleaners' cupboards are unobtrusive
- doors to cleaners' cupboards and doors to residents' areas are not the same

### **AVOID:**

· doors to cleaners' cupboards in residents' areas

### **CONSIDER:**

- planning/location of cleaners cupboards
- locating cleaners' cupboards in staff zones

## 4.4 Is the wardrobe that the resident uses full of a confusing number of clothes?

It is important that residents have the opportunity to put their clothes or possessions away. Sometimes, however, too many choices aren't helpful and can leave a person feeling frustrated and confused. Limiting the number of things that can be easily accessed in a wardrobe is a good way of minimising this. Providing a hidden wardrobe, where the majority of clothes are stored, and an obvious wardrobe with only two sets of clothing (preferably chosen by the resident) is one approach.

### **ENSURE:**

- residents have access to a wardrobe containing only a small number of items
- simple layout of wardrobes

### **AVOID:**

- large wardrobes with many wardrobe doors
- locking all wardrobe doors
- overcrowding wardrobe with a lot of contents

### **CONSIDER:**

- hiding some wardrobe doors
- reducing the number of wardrobes

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## 4.5 Are deliveries of food, linen etc taken across public areas such as the lounge or dining room?

A residential aged care facility requires many deliveries. These are 'back of house' functions and need to remain that way. The introduction of unnecessary noise and the visual distraction of trolleys and new people making deliveries may interrupt residents' lives and compromises their ability to focus on the important things.

### ENSURE:

there are separate entrances and circulation routes for deliveries

### AVOID:

deliveries through residents' areas

### **CONSIDER:**

 zoning activities within the building to ensure service areas (such as laundry washing and drying, food preparation and bulk supplies and cleaning stores) do not conflict with resident areas

## 4.6 Is there a public address, staff paging or call system in use that involves the use of loud speakers, flashing lights, bells etc?

The noise from public address and staff paging systems can be disturbing. Bells, lights and public announcements can interrupt residents' daily life and cause distraction and confusion. They often give information which is not directed to the residents, and so provide an unnecessary and unwelcome intrusion.

There are many types of staff call systems available. All have advantages and disadvantages and it is important to do research to determine which is the most appropriate system in a particular location. There are also a number of additional items which are available and can be linked to a staff call system (such as a bed sensor). These can significantly enhance the ability of the staff to do their work and play an important role in meeting residents' needs.

### **ENSURE:**

- staff paging systems are unobtrusive
- staff call system is operational and can be maintained

### **AVOID:**

• loud, bells, flashing lights and public announcements

### **CONSIDER:**

whether a public address system is required

### 4.7 Is the front entry to the unit easily visible to the residents?

Activity at the front door can be disturbing for residents if they are not able to come and go as they wish. It is important that such activity is screened so that residents are not constantly prompted to think about trying to leave or faced with unnecessary distractions.

### **ENSURE:**

design allows for a discreet entry that is not easily observed from the main public areas of the facility

### **AVOID:**

direct entry into lounge or dining rooms

### **CONSIDER:**

making an obvious entry less obvious by painting it the same colour as the wall or disguising it in another way, e.g. with a mural. (It is important to carefully consider the content of any mural so that it is relevant, age appropriate and not confusing.)

## **4.8** Is the service entry (where food, linen etc is delivered to) easily visible to the residents?

As with activity at the front door, activity at the service entry is unhelpful for residents. These functions relate to the 'back of house' services of a unit which should be carried out unobtrusively. The service entry should be screened and hidden so that it is not a focus for residents and instead their attention is drawn to other more fulfilling areas of the unit. For staff, this separation will make their job easier as the likelihood of inappropriate involvement by residents is minimised.

### **ENSURE:**

separate unobtrusive service entry

### **AVOID:**

- deliveries through the front door
- noise from service entry interrupting residents

### **CONSIDER:**

if no separate service entry, using side gates and doors for deliveries

### 5. MANAGE LEVELS OF STIMULATION -OPTIMISE HELPFUL STIMULATION

## 5.1 Is the dining room either looked into from the lounge room or <u>clearly</u> marked with a sign or symbol?

The dining room is a key place in a facility. Therefore it is important that it can be easily recognisable through visual connection and/or through signs or symbols so that residents find it easy to locate. An indication from outside the room as to what is inside can help highlight the room for residents.

### **ENSURE:**

- the dining room is recognisable
- the presence of multiple visual, auditory and olfactory cues

### **AVOID:**

· barring entry to the dining room either physically or visually

### **CONSIDER:**

- the transparency of the dining room (for example, perforated screens, glass, small inside windows and low walls may increase the transparency between rooms and curtains, solid walls and furniture may decrease the transparency)
- introducing signs or symbols near the dining room approach such as a painting of food on the wall, menu board, hall table
- promoting food smells, the sight of tables being laid

### 5.2 Is the lounge room either looked into from the dining room or <u>clearly</u> marked with a sign or symbol?

The lounge room is a key place in a facility. Therefore it is important that it can be easily recognisable through visual connection and /or through signs or symbols so that residents find it easy to locate. An indication from outside the room as to what is inside can help highlight the room for residents.

### **ENSURE**:

- the lounge room is recognisable
- the use of multiples cues such as visual, auditory and/or olfactory cues

### **AVOID:**

barring entry to the lounge room either physically or visually

### **CONSIDER:**

- the transparency of the lounge room (for example, perforated screens, glass, small inside windows and low walls may increase the transparency between rooms and curtains, solid walls and furniture may decrease the transparency)
- introducing signs or symbols near the lounge approach such as arts and crafts by residents, newspapers and magazines, photos of recent outings
- encouraging music and conversation

## **5.3** Do bedrooms have a sign, symbol or display that identifies them as belonging to a particular individual?

It is important to be able to identify the room before the door is opened so that residents can find it and feel confident it is theirs. The finish on bedroom doors can be varied (in texture or colour). Name plates, photos, art work and shadow boxes which allow a person to display some of their favourite things outside their door can all be used to identify bedrooms from outside the room as belonging to a particular person.

### **ENSURE:**

- residents have the opportunity to identify their room from outside the door
- residents can personalise their rooms

### **AVOID:**

• repetition (for example of door finish, colour, layout)

### **CONSIDER:**

colour, name plates, photos, art work and shadow boxes

## 5.4 Are the shared bathrooms and/or toilets <u>clearly</u> marked with a sign, symbol or colour coded door?

Shared bathrooms and toilets need to be clearly recognisable. These rooms will be used frequently, and if they can be easily found when they are needed it will reduce stress and anxiety. The finish to doors to shared bathrooms and toilets should be different from bedroom doors. All signage should be in an appropriate size and language. Signs should combine words and symbols, be placed at eye level or lower, and contrast with the background.

#### **ENSURE:**

doors are recognisable

#### **AVOID:**

doors to bathrooms and toilets being same colour and finish as bedroom doors

### **CONSIDER:**

colour, plates, sign, symbol, lighting

## **5.5** Is the kitchen either looked into from the lounge or dining room or <u>clearly</u> marked with a sign or symbol?

A resident kitchen can play an important part of the life of the facility. Therefore it is important that it can be easily seen and recognised from the lounge and dining room so that residents can find it easy to move between these places. If there is no visual connection between these rooms an indication from outside the room as to what is inside can also help identify the room for residents.

### **ENSURE**:

- resident kitchen is recognisable
- the use of multiples cues (include visual, auditory and olfactory)

### **CONSIDER:**

- placing resident kitchen near lounge and dining
- introducing signs or symbols near the kitchen approach and promoting food smells

## **5.6** Are toilets visible as soon as the toilet/bathroom door is opened?

If residents are able to see the toilet pan as soon as the toilet door is opened it will assist them to recognise the room and to use it. If the ensuite toilet door can be left open at night so that the resident can see the toilet pan from the bed it will be easier for them to find it. This can reduce inappropriate use of other parts of a room and minimise discomfort and embarrassment for the older person, their family and staff.

### **ENSURE:**

- toilet pan is visible from doorway of shared ensuite, bathroom or toilet
- · contrast between toilet seat and background
- contrast between the toilet pan, cistern and the background

### AVOID:

placing the toilet around a corner

### **CONSIDER:**

- a low level of night lighting to the toilet and ensuite area
- placing a skylight over toilet

### **5.7** Is there a lot of natural lighting in the lounge room?

Lighting plays a key role in making a place easy to navigate and pleasant to be in. There should be sufficient natural lighting in the lounge room so that artificial lighting is not required during the daytime. This will increase the usability of the room and ensure that residents are able to see the room and what is in it at all times, rather than being reliant on someone turning on the light for them. Natural and artificial lighting should be designed to avoid glare to ensure that residents can see easily within the room and to the outside.

### **ENSURE:**

sufficient natural lighting for daytime use

### **AVOID:**

glare

### **CONSIDER:**

- lighting that uses dimmers, task lighting for reading and craft
- the design of window furnishings

### **5.8** Is the artificial lighting bright enough in all areas?

Lighting plays a key role in making a place easy to navigate and pleasant to be in. There should be sufficient artificial lighting in all areas so that people can use a room irrespective of the time of day or night. Artificial lighting should be designed to avoid glare to ensure that residents can see easily within the room, and to outside.

### **ENSURE:**

sufficient artificial lighting for night time use

### **AVOID**:

glare

### **CONSIDER:**

· lighting that uses dimmers, task lighting for reading and craft

## **5.9** Is the lighting free from glare, e.g. from bare bulbs, off shiny surfaces?

Natural and artificial lighting should be designed to avoid glare to ensure that residents can see easily within a room and to outside. The type of lamp and light fitting, the selection of surfaces and finishes, and the use of glass (which can reflect the light) need to be considered.

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### **ENSURE:**

• light fittings and shades protect from glare

### AVOID:

highly reflective surfaces and finishes

### **CONSIDER:**

- · light paint colours around windows to reduce contrast around windows
- orientation of windows
- adjustable internal window shading treatment such as curtains or blinds
- outside awnings

### 6. SUPPORT MOVEMENT AND ENGAGEMENT

6.1a Is there a clearly defined and easily accessible (i.e. no locked exit) path in the garden that guides the resident back to their starting point without taking them into a blind alley?

It is important that residents are able to move freely and continuously when outside. They should not end up at a dead end where they cannot easily see how to go back. Paths need to be laid out so that residents can find their way back to their starting point easily, so that a pleasant walk outside doesn't become a nightmare as they feel lost and confused about where they are and where to go. This will give residents more confidence to explore the outside environment.

It is important to ensure that paths themselves are well designed. Attention needs to be given to the selection of path surfaces, edges, width, camber, drainage, and obstacles.

### **ENSURE:**

- paths do not contain hazards such as potholes, slippery or uneven surfaces, overhanging branches
- that path edges are clearly marked with contrasting coloured materials or textures

### **AVOID:**

- dead ends/paths that lead to nowhere
- multiple decision points

### **CONSIDER:**

widening paths occasionally to provide sitting areas

## 6.1b Does the external path allow the resident to see into areas that might invite participation in an appropriate activity other than wandering?

The goal of designing the path layout is not to keep residents moving, but rather to give them a rewarding experience. Residents may not have a clear idea of what they would like to do or what they are looking for. The journey should offer residents opportunities to engage with others, to sit quietly by themselves, to take in a view and to engage in activities, e.g. saying 'hello' to the birds in an aviary or using some tools. In this way residents are offered an experience that it is interesting and engaging.

### **ENSURE:**

places of interest are easy to see

### **AVOID:**

paths with no view to other areas

### **CONSIDER:**

- changing landscaping to create a varied outside environment
- the range of things that a resident (their visitors and staff) may enjoy participating in

### 6.1c Is the path within a secure perimeter?

A secure perimeter will allow residents to be outside without the risk of leaving the facility (intentionally or unintentionally).

### **ENSURE:**

- the fence is no less than 1.8m high
- the fence is continuous and well maintained
- the fence design does not allow for climbing (in or out)
- the fence is not obviously there to keep people in (see principle 1 'Unobtrusively reduce risks')

### AVOID:

- fences and gates with openings or horizontal members which can be used as foot holds for climbing
- planting or furniture near the fence which can be used for climbing

### **CONSIDER:**

 designing the fence so that it is integrated with the landscape topography or is hidden by vegetation so that the height is not visually imposing

## **6.1d** Can this path be easily and unobtrusively surveyed by staff members?

Staff are unlikely to allow residents to go outside to use the path if they cannot observe the residents from where they spend most of their time and assist them if required. Residents are also likely to be reassured if they can see where staff are and so good visual access between the point(s) where staff spend most of their time and the path is important.

### **ENSURE:**

 good visual access to the full length of the path from the points where staff spend most of their time

### **AVOID:**

- paths in seldom used parts of the site
- paths that lead residents a long way from points of entry

### **CONSIDER:**

 general transparency of building (planning, placement of windows, sill height, glazed doors)

## 6.1e Are there chairs or benches along the path where people can sit and enjoy the fresh air?

A resident can become tired while walking and may need a place to rest to avoid a fall and injury or simply to enjoy being outside. The provision of seats and benches at frequent intervals around the path is important.

### **ENSURE:**

seating is provided at frequent intervals

### **AVOID:**

• seating with sharp edges and rough surfaces

### **CONSIDER:**

- a variety of different seats (heights, materials and locations)
- allowing for wheelchair stopping points near seating
- combinations of seats to allow people to be alone or in conversation with others.

### 6.1f Are there both sunny and shady areas along the path?

There will be times when sunshine is sought after and others when shade is required. Residents can become hot and dehydrated if they are outside in summer or cold if they are outside in winter. Opportunities to be in the shade or in the sun are therefore important if residents are to enjoy being outside.

### ENSURE:

• places along the path offer residents shade and sun

### **AVOID**:

- making outside sitting areas in places that are windy in summer and/or winter
- large surfaces that reflect the heat of the sun on to residents walking on the path

### **CONSIDER:**

where and when sun will be shine in winter and summer in relation to the building, outside structures and verandahs

### 6.1g Does the path take residents past a toilet?

Residents may have difficulty remembering where the toilet is. It is therefore important that there is ready access to a toilet while outside and that the toilet is easily found.

### **ENSURE:**

- the toilet is at an appropriate height with grab rail supports
- · direct and unobstructed path to toilet from outside area
- the toilet is made obvious by the use of multiple cues, e.g. colour of door and signage
- · contrast between toilet seat and background
- · contrast between toilet pan/cistern and background

### **AVOID:**

 locating the toilet pan so that if the door is left open residents' privacy is compromised

### **CONSIDER:**

 carefully siting the toilet to make it convenient to residents and staff whilst not dominating the outside area that it serves

## 6.2a Is there a clearly defined path inside that takes the resident around furniture and back to their starting point without taking them into a blind alley?

The need for uninterrupted and clear circulation is as important inside as it is outside. It is important the residents are able to move freely and continuously without confusion. They should not end up at a dead end where they can go no further and cannot easily find their way back. Corridors need to be laid out so that residents can see their way back to their starting point easily, so that a pleasant walk doesn't become frustrating or a cause of anxiety. This will also give residents more confidence to explore the inside environment.

### **ENSURE:**

• corridors are kept to a minimum

### **AVOID:**

- long corridors
- · dead ends/corridors that lead to nowhere
- dog leg corridors

## 6.2b Does the internal path allow the resident to see into areas that might invite participation in an appropriate activity other than wandering?

The goal of designing the circulation within a building is not to keep residents moving, but rather to give them a rewarding experience. Residents may not have a clear idea of what they would like to do or what they are looking for. They may also have forgotten how to get to where they want to go. If places of interest are easy to see, or have clear markers along the way, they can reinforce the destination and make the journey more interesting. This journey should offer residents opportunities to engage with others, to sit quietly, to take in a view and to engage in some activities, e.g. look at a newspaper, fold some laundry, or reminisce and use some old garden implements. In this way residents are offered an experience that it is interesting and engaging.

### **ENSURE:**

- there is good view to lounge room, dining room, outside veranda areas or outdoor shelter
- the internal path is clearly defined by the placement of furniture and the use of connecting corridors

### AVOID:

corridors with no view to other areas

### 7. CREATE A FAMILIAR PLACE

## 7.1 Are there any colours in the furnishings or the decoration that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?

Colour plays a key part in creating an atmosphere in a room, as do the furnishings and decorations. It is important that the colours in the furnishings and decoration are familiar to residents, as this can contribute to a sense of wellbeing and calm. If these are familiar to residents the whole room will be more recognisable.

### **ENSURE**:

 colour selection and layout for the lounge and dining areas are domestic, not commercial or institutional.

### **AVOID:**

dark colours throughout the lounge and dining areas

### **CONSIDER:**

- colours which reduce outside glare in the lounge and dining areas
- materials and colours that may have special significance to the residents (sports teams, traditional colour combinations)

# 7.2 Are there any taps, light switches, door knobs that are to be used by residents that are of a design that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?

It is important that taps, light switches and door handles are familiar to residents as these are all things that need to be used by them daily. If residents wish to wash their hands or get a drink of water, they will need to recognise the tap. Similarly, using easily recognised and operated light switches and door handles is vital if residents are to be able to go in and out of rooms safely.

### **ENSURE**:

- capstan style (old fashioned cross) handles are used
- hot and cold indicators on the handles are clear and bold

### AVOID:

- mixer taps with single handles that control water flow and temperature
- dark light switches
- architrave light switches as they are too small to be seen easily
- cylindrical shaped door handles and round door knobs

### **CONSIDER:**

larger rocker type light switches

# 7.3 Are there any pieces of furniture in the lounge room or the dining room that are of a design that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?

Residents are likely to spend a large amount of time in the lounge and dining room. It is therefore important that these rooms are familiar to residents, as this can contribute to a sense of wellbeing and calm. The presence of familiar furniture will not only help to create a warm and inviting atmosphere in the room, but will encourage residents to use the places and enjoy them.

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### **ENSURE:**

- there is a variety of furniture types i.e. several familiar styles of chairs
- a variety of furniture heights
- a variety of familiar furniture coverings and finishes

### **AVOID:**

- commercial or institutional furniture selection
- the use of only one type of furniture

### 7.4 Are there any pieces of furniture in the bedrooms that are of a design that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?

As with the lounge and dining room, the bedroom should provide the comfort of familiarity. As the bedroom is often used only by one resident there are many opportunities to make the room reflect the early life of the individual. The selection of furniture can take many forms and will depend on the residents' life experiences and preferences. The presence of a lot of modern furniture will indicate that the room is unlikely to be familiar to the resident.

### **ENSURE:**

- at least some of the furniture has been selected to reflect the experience and preferences of the person who will sleep there
- hooks and rails on walls to hang photos and other objects

### AVOID:

Selecting furniture without a clear understanding of the experiences and preferences of the residents

## 7.5 How many residents have their own ornaments, photos in their bedroom?

If residents' bedrooms are to be familiar to them, it will be vital that they are able to choose to decorate these themselves. The things people will wish to display will depend on the residents' life experiences, hobbies, likes and dislikes.

### **ENSURE:**

- residents are able to hang pictures
- residents have places to put ornaments and photos

## 7.6 How many residents have their own furniture in their bedroom?

If residents' bedrooms are to be familiar to them, it will be vital that they are able to choose to furnish these themselves. The furniture people wish to bring will depend on the residents' life experiences, hobbies, likes, and dislikes.

### **ENSURE:**

- bedrooms are not filled with built in furniture so there is no room for residents' furniture
- rooms are of an adequate size to allow for residents' own furniture while not impeding the use of necessary equipment

### **AVOID:**

 decorating rooms prior to residents having an opportunity to personalise the room

### 8. PROVIDE A VARIETY OF PLACES TO BE ALONE OR WITH OTHERS - in the unit

## 8.1 Are there small areas (nooks) that provide opportunities for casual interaction and quiet chats?

Small areas or nooks are an important way of giving people choices of places to be. They can be an area to the side of a corridor, a space at the end of a corridor, a bay window in a larger room, or a little room off a lounge or dining room. The provision of a number of these will enable residents and their visitors to choose an area that allows them to talk and hear each other comfortably.

### **ENSURE:**

- small areas for quiet conversation/interaction are provided
- large lounge or dining rooms are edged with nooks and smaller areas for small groups and individuals
- corridors, especially long corridors, are broken up by the provision of a space and furniture that enables people to have a conversation

### **CONSIDER:**

varying corridor and hall widths to accommodate small sitting places

## 8.2 How many of these areas or nooks have views of pleasant or interesting scenes (outside, the living room, the nursing station)?

If small areas or nooks have views of pleasant or interesting scenes, not only will they be places where residents, friends, staff and families can sit, they will be places which can offer them a rich experience. They can have an inside focus, affording the opportunity to look at a painting or decoration or an outside focus, with a view to a garden or courtyard.

### **ENSURE:**

• a good view from smaller sitting places to inside and/or outside

### **CONSIDER:**

where possible incorporating a close, mid and far view from sitting places

## 8.3 Do the shared living areas support small group activities (4-6 people) without rearranging the furniture?

People can do different things and feel different emotions when they gather in a small group. In a small group people may have a private conversation, listen to music, or play cards. It is important that small groups of people can comfortably gather in the lounge or dining room without rearranging the furniture. If the furniture has to be rearranged for people to gather in this way it is less likely to happen and so opportunities for people to enjoy social interaction will be lost.

### **ENSURE:**

furniture layouts accommodate small groups

### **CONSIDER:**

the use of main dining and lounge areas for different group sizes

## 8.4 Does the dining room provide opportunities for residents to eat in small groups (2-4)?

Food often plays an important part in the lives of residents and their families. Eating with a small number of people is a very different experience to eating in a group of five or more people. People's preferences for who they eat with will vary and will be influenced by their life experiences and their culture. Residents' preferences can also change according to the climate and the day, as some days are a cause for celebration and others for quiet reflection. It is important that residents have the opportunity to eat inside in a small group when they choose, as this is one way that they can influence how they live their lives.

### **ENSURE:**

- dining room can accommodate small group dining
- furniture suits small group and individual dining

### AVOID:

- large open dining rooms with undifferentiated furniture layouts only suited to dining in large groups
- fixed furniture that precludes small group dining

## 8.5 Does the dining area provide opportunities for people to eat alone?

Some people will prefer to eat alone, either all the time or sometimes. It is important that residents have the opportunity to eat alone when they choose, as this is one way in which they can influence how they live their lives.

### **ENSURE:**

opportunity for discreet individual dining

### **AVOID:**

- large, open dining rooms with undifferentiated furniture layouts only suited to dining in large groups
- fixed furniture that precludes individual dining

### 9. PROVIDE A VARIETY OF PLACES TO BE ALONE OR WITH OTHERS - IN THE COMMUNITY

**9.1** Is there an area or room somewhat removed from the main dining room where families can share meals with their relatives?

Sharing a meal together is a pleasure for many people. Much of life in a residential setting is communal and although this is often familiar and desirable, it is important that residents and their families also have the opportunity to gather in a more private setting to eat and relax if they wish to. The inclusion of such places are likely to encourage family and friends to visit a facility as they feel welcome and are able to interact with their loved one in the way they are used to.

### **ENSURE:**

 one or more areas or rooms which can be used by families to dine with a resident

### **AVOID:**

· distractions near the area such as main circulation pathways

### **CONSIDER:**

flexible furnishings, flexible screening to accommodate small or large groups

## 9.1a Is this room/area domestic and familiar in nature, to reassure family members and friends and encourage them to visit and to participate in the care of the resident?

While the first step is to provide a more private setting inside or outside where residents can eat and relax if they wish to, the way in which this is designed is important. For these places to be most meaningful, they need to be familiar and comfortable.

.....

### **ENSURE:**

• area is attractive and comfortable

### AVOID:

• signage with lots of rules and instructions

### 10. PROVIDE OPPORTUNITIES FOR ENGAGEMENT WITH ORDINARY LIFE

### **10.1** How many residents have access to a kitchen?

A small kitchen may be important to allow residents to continue to use their remaining skills and encourage them to pursue tasks of daily living that are familiar to them. Whilst potential risks need to be managed unobtrusively (see principle 1), these should not limit possible access to a kitchen for all residents.

### **ENSURE:**

- a small kitchen for resident use is provided
- familiar items are placed in this kitchen to encourage use

### **CONSIDER:**

 providing galley style kitchens if there is insufficient room to provide a separate kitchen for resident use

## **10.2** How many residents have a significant involvement in main meal preparation?

It is important that if a facility contains a kitchen for residents, they are able to use it to do meaningful things. Making a meal with friends or family will reinforce the independence of residents. It may help retain skills and ensure that favourite foods continue to be enjoyed.

### **ENSURE:**

residents are able to enter and use a kitchen

### **CONSIDER:**

ways to remove objects that could be dangerous, and so allow for unrestricted use of the kitchen by residents and visitors (see principle 1 Unobtrusively reduce risks)

## **10.3** How many residents have a significant involvement in making snacks or drinks?

Enjoying snacks and drinks between main meals is a part of daily life for many people. Creating opportunities for residents and their families to be involved in making snacks or drinks will retain the informality associated with home life where meal times are not regimented.

### **ENSURE:**

residents are able to enter and use a kitchen

### CONSIDER

ways to remove objects that could be dangerous and so allow for unrestricted use of the kitchen by residents and visitors (see principle 1 Unobtrusively reduce risks)

## **10.4** How many residents have a significant involvement in keeping their bedroom clean and tidy?

Tidying personal places, organising personal belongings and doing even light cleaning can reinforce a resident's familiarity and sense of belonging in their living place as they are able to influence the day to day activities that take place there. Encouraging residents to be involved in keeping their bedroom clean and tidy will also allow residents to continue to use their remaining skills and to encourage them to pursue tasks of daily living that are familiar to them.

### **ENSURE**:

residents are given the opportunity to do the tasks they wish to contribute to keeping their bedroom clean and tidy (e.g. making the bed or dusting)

### AVOID:

adopting a cleaning regime which alienates residents

### CONSIDER

• times and ways of cleaning bedrooms to involve residents, this may involve decision making rather than undertaking cleaning tasks.

## **10.5** How many residents have a significant involvement in personal laundry?

Having the ability to wash even a few, light personal items may help the resident retain the feeling of independence. Families may also like to take advantage of a laundry. A large tub, slip resistant flooring, water resistant power points and tempered water supply can make the activity safe for the resident.

### **ENSURE**:

• a small laundry for resident use is provided

### AVOID:

 laundries with 'commercial' items and fixtures that would be unfamiliar to residents

### CONSIDER

introducing washing, drying and folding of clothes into the daily lifestyle of residents so that residents can participate as they are able

### **10.6** How many residents are involved in gardening?

For many residents gardening may have been a large part of their lives. Having a small area where residents can garden will give residents, and their families, opportunities for meaningful activity, and a sense of the familiar.

### **ENSURE:**

- · garden beds and plants do not impede paths or cause trip hazards
- some raised garden beds are provided to improve residents' participation

### **AVOID:**

- types of plants and gardens that would be unfamiliar to residents
- poisonous plants

### CONSIDER

- linking gardens to living areas so the results of the gardening can easily be appreciated by staff and residents
- providing a small garden store room with simple tools and supplies close to the garden area

## **10.7** How many residents have constant and easy access to a lounge?

The lounge room is likely to be an important place for residents and their families and friends as they continue to try and do all the things they want to do in daily life. It can be a place to relax, to enjoy a chat, to gather to share stories, to listen to music.

### **ENSURE:**

residents are able to access and use the lounge easily

### **AVOID:**

restricting access to a lounge room

### CONSIDER

- designing the lounge room to invite use through scale, layout, finishes and vision into room
- managing use of the lounge room to invite entry, for example by ensuring that the lights are on in the evening and temperature is appropriately controlled

## **10.8** How many residents have constant and easy access to a dining room?

The dining room is likely to be an important place for residents and their families and friends to enjoy meals together. It can be a place to relax, to enjoy a chat, to gather to share stories, and to eat a meal.

### **ENSURE:**

residents are able to access and use the dining room easily

### AVOID:

restricting access to a dining room

### CONSIDER

- design of the dining room to invite use through scale, layout, finishes for easy cleaning, vision into the room
- managing use of the dining room to invite entry, for example by ensuring that the lights are on in the evening

### **RESOURCE 3**

Environmental Assessment Tool Handbook

## APPENDIX 1 ENVIRONMENTAL ASSESSMENT TOOL

**185** Feb. 2017

### ENVIRONMENTAL ASSESSMENT TOOL

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Time:

Unit:

Facility

Observer:

1	UNOBTRUSIVELY REDUCE RISKS	N/A	ON	YES	ADD 1 IF UNOBTRUSIVE	SCORE
ı	Is the garden secure, i.e. are residents prevented from getting over/ under fence or out of the gate without the assistance of a staff member?	N/A	0	1	٦	
2	If the front door leads out of the unit is it secure?	N/A	0	1	1	
3	Are all side doors leading out of the unit secure?	N/A	0	1	1	
4	Are bedroom windows restricted in the extent to which they open so that residents cannot climb out?	N/A	0	1	1	
5	Is the garden easily supervised from the point(s) where staff spend most of their time?	N/A	0	1	1	
6	Is there a way to keep residents who are not safe with knives and/or appliances out of the kitchen?	N/A	0	1	1	
7	If the kitchen is used by residents is there a lockable knife drawer in the kitchen?	N/A	0	1	1	
8	If the kitchen is used by residents is the cooker a gas cooker?	N/A	0	1		
9	If the kitchen is used by residents is there a master switch that can be turned off quickly?	N/A	0	1		
10	Is the temperature of the water from all taps accessible to residents limited so that it cannot scald?	N/A	0	1		
11	If residents are involved in meal preparation are the pots and pans used small enough for them to lift easily?	N/A	0	1		
12	Are all floor areas safe from being slippery when wet (water or urine)?	N/A	0	1		
13	Is the lounge room easily supervised from the point(s) where the staff spend most of their time?	N/A	0	1	1	
14	Are all areas used by residents well lit?	N/A	0	1		
	Total score					

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2	PROVIDE A HUMAN SCALE	1-10	11-15	16-29	30+	SCORE
1	How many people live in the unit?	Score 3	Score 2	Score 1	Score 0	

### **3** ALLOW PEOPLE TO SEE AND BE SEEN

1	What proportion of confused residents can see their bedroom door from the lounge room?	N/A <b>0 25%</b> Score Score 0 1		<b>50%</b> Score 2	<b>75%</b> Score 3	<b>100%</b> Score 4		
2	What proportion of confused residents can see the lounge room as soon as they leave their bedroom?	N/A O Score		<b>25%</b> Score 1	<b>50%</b> Score 2	<b>75%</b> Score 3	<b>100%</b> Score 4	
3	What proportion of confused residents can see the dining room as soon as they leave their bedroom?	N/A 0 Score 0		<b>25%</b> Score 1	<b>50%</b> Score 2	<b>75%</b> Score 3	<b>100%</b> Score 4	
4	Can the exit to the garden be seen from the lounge room? If there is more than 1 lounge room answer with reference to the one used by most confused residents.	N/A NO N/A Score 0		Score		YES Score 1		
5	Can the dining room be seen into from the lounge room? If there is more than 1 dining room or lounge room answer with reference to those used by most confused residents.	N/A		NO Score 0		Score Sco		
6	Can the kitchen be seen into from the lounge room? If there is more than 1 lounge room answer with reference to the one used by most confused residents.	Ν	/A	NO Score 0		YES Score 1		
7	Can the kitchen be seen into from the dining room? If there is more than 1 dining room answer with reference to the one used by most confused residents.	Ν	/A	NO Score 0		YES Score 1		
8	Can a toilet be seen from the dining room? If there is more than 1 dining room answer with reference to the one used by most confused residents	N	/A	Sc	O ore D	Sc	ES ore 1	
9	Can a toilet be seen from the lounge room? If there is more than 1 lounge room answer with reference to the one used by most confused residents.	N/A		Sc	O ore D	YES Score 1		
10	Can the lounge room be seen into from the point(s) where staff spend most of their time?	N/A		N/A Score 0		YES Score 1		

**Total score** 

4	MANAGE LEVELS OF STIMULATION - REDUCE UNHELPFUL STIMULATION	YES	Q	SCORE
1	Does the doorbell attract the attention of the residents?	0	1	
2	Is the noise from the kitchen distracting for the residents?	0	1	
3	Are doors to cleaner's cupboards, storerooms and other areas where residents may find danger easily seen (i.e. not hidden or painted to merge with the walls)?	0	1	
4	Is the wardrobe that the resident uses full of a confusing number of clothes?	0	1	
5	Are deliveries of food, linen etc. taken across public areas such as the lounge or dining room?	0	1	
6	Is there a public address, staff paging or call system in use that involves the use of loud speakers, flashing lights, bells etc?	0	1	
7	Is the front entry to the unit easily visible to the residents?	0	1	
8	Is the service entry (where food, linen etc is delivered to) easily visible to the residents?	0	1	

### Score is number of NO responses

5	MANAGE LEVELS OF STIMULATION - OPTIMISE HELPFUL STIMULATION	õ	YES	SCORE
1	Is the dining room looked into from the lounge room or <u>clearly</u> marked with a sign or symbol?	0	1	
2	Is the lounge room either looked into from the dining room or <u>clearly</u> marked with a sign or symbol?	0	1	
3	Do bedrooms have a sign, symbol or display that identifies them as belonging to a particular individual?	0	1	
4	Are the shared bathrooms and/or toilets <u>clearly</u> marked with a sign, symbol or colour coded door?	0	1	
5	Is the kitchen either looked into from the lounge or dining room or <u>clearly</u> marked with a sign or symbol?	0	1	
6	Are toilets visible as soon as the toilet/bathroom door is opened?	0	1	
7	Is there a lot of natural lighting in the lounge room?	0	1	
8	Is the artificial lighting bright enough in all areas?	0	1	
9	Is the lighting free of glare, eg from bare bulbs, off shiny surfaces?	0	1	

### **R3 THE ENVIRONMENTAL ASSESSMENT TOOL**

6	SUPPORT MOVEMENT AND ENGAGEMENT		Q	YES	SCORE
la	Is there a clearly defined and easily accessible (i.e. no locked exit) path i garden that guides the resident back to their starting point without tak them into a blind alley?	0	1		
	If answer to 1a is YES answer 1b,1c,1d,1e,1f and 1g		•		
1b	Does the external path allow the resident to see into areas that might in participation in an appropriate activity other than wandering?	nvite	0	1	
lc	Is the path within a secure perimeter?		0	1	
1d	Can this path be easily and unobtrusively surveyed by staff members?		0	1	
le	Are there chairs or benches along the path where people can sit and e the fresh air?	0	1		
1f	Are there both sunny and shady areas along the path?	0	1		
١g	Does the path take residents past a toilet?	0	1		
2a	Is there a clearly defined path inside that takes the resident around furn and back to their starting point without taking them into a blind alley?	0	1		
	If answer to 2a is YES answer 2b				
2b	Does the internal path allow the resident to see into areas that might participation in an appropriate activity other than wandering?	invite	0	1	
	Total Score is number of Y	/ES re	espor	nses	
7	CREATE A FAMILIAR PLACE	MANY	A FEW	NONE	SCORE
1	Are there any colours in the furnishings or the decoration that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?	0	1	2	
2	Are there any taps, light switches, door knobs that are to be used by				

2	Are there any taps, light switches, door knobs that are to be used by residents that are of a design that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?	0	1	2	
3	Are there any pieces of furniture in the lounge room or the dining room that are of a design that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?	0	1	2	
4	Are there any pieces of furniture in the bedrooms that are of a design that would <u>not</u> have been familiar to the majority of residents when they were 30 years old?	0	1	2	
5	How many residents have their own ornaments, photos in their bedroom?	2	1	0	
6	How many residents have their own furniture in their bedroom?	2	1	0	

**Total Score** 

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### 8 PROVIDE A VARIETY OF PLACES TO BE ALONE OR WITH OTHERS - IN THE UNIT

SCORE

1	Are there small areas (nooks) that provide opportunities for casual interaction and quiet chats?	None Score 0	1 Score 1	2 Score 2	3 or more Score 3	
2	How many of these areas or nooks have views of pleasant or interesting scenes (outside, the living room, the nursing station)?	None Score 0	1 Score 1	2 Score 2	3 or more Score 3	
3	Do the shared living areas support small group activities (4-6 people) without rearranging the furniture?	N/A	NO Score 1	YES Score 2		
4	Does the dining room provide opportunities for residents to eat in small groups (2-4)?	N/A	NO Score 1	YES Score 2		
5	Does the dining area provide opportunities for people to eat alone?	N/A	NO Score 1	YES Score 2		

**Total score** 

9	PROVIDE A VARIETY OF PLACES TO BE A OR WITH OTHERS - IN THE COMMUNITY	LON	١E	Q	YES	SCORE		
1	Is there an area or room somewhat removed from the main dining where families can share meals with their relatives?	room		0	1			
	If answer to 1 is YES answer 1a							
1a	Is this room/area domestic and familiar in nature, to reassure family members 0 1 and friends and encourage them to visit and to participate in the care of the resident?							
	Total Score is number o	of YE	S res	por	nses			
10	PROVIDE OPPORTUNITIES FOR	ų	2	Щ	Ζ.,	RE		
	ENGAGEMENT WITH ORDINARY LIFE	NONE	UP TO 50%	IOW	THAN 50%	SCORE		
1		0	<b>C 05</b>		2	SCO		
	ENGAGEMENT WITH ORDINARY LIFE How many residents:					SCO		
1	ENGAGEMENT WITH ORDINARY LIFE How many residents: Have access to a kitchen?	0	1		2	SCO		
1 2	ENGAGEMENT WITH ORDINARY LIFE         How many residents:         Have access to a kitchen?         Have a significant involvement in main meal preparation?	0	1		2 2	SCO		
1 2 3	ENGAGEMENT WITH ORDINARY LIFE         How many residents:         Have access to a kitchen?         Have a significant involvement in main meal preparation?         Have a significant involvement in making snacks or drinks ?	0 0 0	1 1 1		2 2 2	sco		
1 2 3 4	ENGAGEMENT WITH ORDINARY LIFE How many residents: Have access to a kitchen? Have a significant involvement in main meal preparation? Have a significant involvement in making snacks or drinks ? Have a significant involvement in keeping bedroom clean and tidy?	0 0 0 0 0	1 1 1		2 2 2 2	sco		
1 2 3 4 5	ENGAGEMENT WITH ORDINARY LIFE How many residents: Have access to a kitchen? Have a significant involvement in main meal preparation? Have a significant involvement in making snacks or drinks ? Have a significant involvement in keeping bedroom clean and tidy? Have a significant involvement in personal laundry?	0 0 0 0 0	1 1 1 1		2 2 2 2 2 2			

SUMMARY OF SCORES	POSSIBLE SCORE	ACTUAL SCORE	PERCENTAGE				
Unobtrusively reduce risks	22						
Provide a human scale	3						
Allow people to see and be seen	19						
Manage levels of stimulation - reduce unhelpful stimulation	8						
Manage levels of stimulation - optimise helpful stimulation	9						
Support movement and engagement	9						
Create a familiar place	12						
Provide a variety of places to be alone or with others - in the unit	12						
Provide a variety of places to be alone or with others - in the community	2						
Provide opportunities for engagement with ordinary life	16						
Total Score	112						
The Total score is the average of the percentage scores above.							

The Environmental Assessment Tool copyright is held by NSW Health.

See - Fleming, R., I. Forbes and K. Bennett (2003). Adapting the ward for people with dementia. Sydney, NSW Department of Health.

### **RESOURCE 3**

Environmental Assessment Tool Handbook

## APPENDIX 2 EAT PLANNING TEMPLATE

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### EAT PLANNING TEMPLATE

### (FACILITY NAME) - NEXT STEPS

### **KEY DESIGN PRINCIPLES**

K	EY DESIGN	<b>PRINCIPLI</b>	ES			
		Unobtrusively reduce risks	Provide a human scale	Allow people to see and be seen	Manage levels of stimulation - reduce unhelpful stimulation	Manage levels of stimulation - optimise helpful stimulation
	ISSUES					
	How can we <b>re-use</b> what is there?					
ACTIONS	What can we do in the <b>short</b> term?					
	What can we do in the <b>medium</b> term?					
	What can we do in the <b>long</b> term?					

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### (FACILITY NAME) - NEXT STEPS

### **KEY DESIGN PRINCIPLES**

KEY DESIGN PRINCIPLES						
		Support movement & engagement	Create a familiar place	Provide a variety of places to be alone or with others - in the unit	Provide a variety of places to be alone or with others - in the community	Provide opportunities for engagement with ordinary life
	ISSUES					
	How can we <b>re-use</b> what is there?					
ACTIONS	What can we do in the <b>short</b> term?					
	What can we do in the <b>medium</b> term?					
	What can we do in the <b>long</b> term?					

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