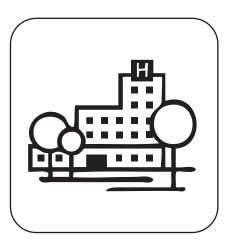
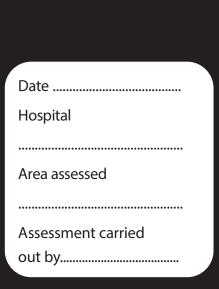




Is your hospital dementia friendly?

EHE Environmental Assessment Tool





#### The EHE assessment tools

In order to help as many health and care organisations as possible to develop more supportive design for people with dementia, in 2014 The King's Fund developed a suite of environmental assessment tools for use across health and care settings. This 2020 version of the tool has been produced by the Association for Dementia Studies, University of Worcester, with the kind permission of The King's Fund.

#### How to use the hospital assessment tool

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

The assessment tool contains seven sections and a set of questions to prompt discussions and should be completed in full. Walk around the area being assessed and consider each of the questions in turn. Give each question a score out of five, where five indicates that it is met completely and one indicates it is barely met.

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

#### How the tool was developed

The 2014 assessment tools were developed in collaboration organisations delivering care to people living with dementia, including organisations who had participated in The King's Fund's Enhancing the Healing Environment (EHE) programme. The 2020 editions have been updated to reflect the latest research evidence, best practice and survey responses from those who have used the tools in practice.

Each of the sections draws on this evidence to form a rationale for effecting change in care environments. The rationales recognise that people with dementia often have co-morbidities together with sensory impairments and can experience visuospatial problems.

#### Before using the tool

The assessment should be undertaken during normal working conditions. However, if this is not possible due to exceptional circumstances, for example control of infection requirements that limit visiting, please mark any appropriate questions as non-applicable and note the reason under 'areas of concern'.

Before carrying out the assessment please ensure that all relevant management backing has been secured to build support and commitment to the results. It may also be useful to take photographs as these can be used to mark progress and act as a record of improvements. If photographs are taken all relevant permissions need to be obtained.

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

#### Rationale

Uncared for and unwelcoming spaces can cause anxiety and provoke concerns in patients and their relatives about the standards of care. To avoid creating trip hazards sufficient space needs to be provided for wheelchairs, mobility aids and pushchairs. The arrangement of furniture provides clues as to the purpose of the space. There should be a choice of seating. Older people are likely to need chairs with arms, and arranging chairs in clusters will encourage conversation.

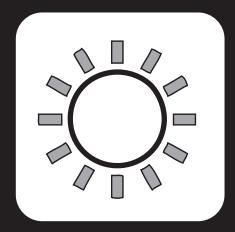


Que	estions	Please give examples of good practice/	
	se score each answer from 1 – 5 arely met, 5=totally met)		areas of concern
Α	Does the approach to the hospital/ department look and feel welcoming and is the entrance well signed?		
В	Is there a ramp with handrails and is it clear of obstacles/articles which may cause confusion e.g. bicycles?		
С	Are any automatic doors easy to use?		
D	Is there an obvious main reception/enquiry desk near the entrance?		
E	Are any separate reception areas for clinics/departments clearly signed?		
F	Does the hospital/department give a good first impression i.e. does it look clean, tidy and cared for?		
G	Is seating arranged to encourage conversation and support from an accompanying family carer?		
Н	Is there a choice of seating including chairs with arms?		
	Is there adequate space for mobility aids including wheelchairs and for those accompanying patients to sit together?		

## The environment promotes well-being

#### Rationale

Older people may have co-morbidities and broader sensory impairments. People with dementia may interpret shadows or dark areas e.g. threshold strips or mats, as holes in the floor and try to step over them. Older people need higher light levels in order to see properly. Appropriate artworks can provide interest and distraction while waiting. Views and access to the outside are essential for well-being.

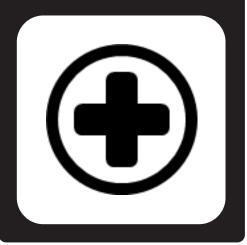


Que	estions	Please give examples of good practice/	
	se score each answer from 1 – 5 arely met, 5=totally met)		areas of concern
Α	Is there good natural light in all seating and examination areas?		
В	Is the level of light comfortable and appropriate and can it be adjusted e.g. by the use of dimmer switches, to suit care needs?		
С	Is the lighting and natural light from windows even e.g. without glare, pools of light and/or dark areas, stripes or shadows?		
D	Is the temperature of the department comfortable and can it be adjusted in hot and cold weather?		
Е	Are artworks chosen to provide interest and distraction while waiting?		
F	Can any TV, digital screen or music in waiting areas be turned off if not wanted by patients?		
G	Are links to and views of nature maximised e.g. by having low windows and using natural materials and colours?		
Н	Is there independent access to a pleasant, sociable, safe outside space e.g. garden, courtyard or terrace with sheltered seating areas?		
	Is planting non-toxic and chosen to offer colour and variety throughout the year?		

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

#### Rationale

People with dementia can become very anxious when dealing with distractions and interruptions. Keeping them calm will enable them to better participate in their assessment. Distress can be eased by providing a quiet waiting area or room. It will also be reassuring if they are able to have their family carer with them. Encouraging eating and drinking is an important part of caring for people with dementia.



Questions	Ques	tions	
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Please score each answer from 1 – 5 (1=barely met, 5=totally met)

- A Is any electronic check-in system easy to see and use?
- B Is there a separate quieter seating/waiting area which could be used by people with dementia and their family carers?
- Is the patient call system suitable for those with sensory impairments e.g. hearing or sight loss, and dementia?
- Is there a designated assessment room for people with dementia in a quieter area of the hospital/department?
- E Is there a hoist available if required?
- Are there appropriate facilities to enable a family carer to be present throughout the assessment and episode of care?
- G Is drinking water freely available and independently accessible?
- H Are snacks and hot drinks available if required?

Please give examples of good practice/

## The environment promotes mobility

#### Rationale

Being able to walk independently is important. People with dementia may interpret shiny floors as being wet and speckles can look like litter. Changes in flooring colour including stripes, patterns, shadows, dark areas or mats can be misinterpreted and look like holes to step over. Safety can be enhanced by providing handrails and small seating areas where people can rest. Life size images and floor to ceiling murals can be confusing and disorientating. Interesting artworks, with contrasting frames to the wall, will encourage mobility and help people find their way around.



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

- A Is there space for patients to walk around independently?

  B Are the flooring and thresholds of a consistent colour, matt, non-reflective, non-patterned and not slippery?

  C Is the flooring in a colour that contrasts with the
- walls, any skirting, and furniture?
- D Are slopes, steps and stairs clearly marked?
- Are the handrails in a colour that contrasts with the walls and is it possible to grip them properly?
- Are there small seating areas for people to rest along corridors?
- Are artworks e.g. photographs of local scenes, hung on the walls at a height where they can be seen easily?
- H Are lifts easy to find and do they have large control buttons?

Please give examples of good practice/

## 5 The environment promotes continence and personal hygiene

#### Rationale

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



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

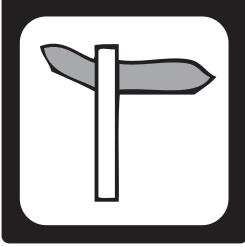
- A Do the signs to the toilets include clearly identifiable images and text and can they be seen clearly from all patient areas?
- Are all the doors to the toilets painted in a single distinctive colour and do they have the same clear signage?
- Are the toilet seats, flush handles and rails in a colour that contrasts with the toilet walls and floor?
- Are the taps clearly marked as hot and cold and are the basins, taps, soap dispensers and toilet flushes of familiar design?
- Are the toilet roll holders of familiar design and can they be easily reached from the toilet?
- F Is there easy access to a toilet big enough to allow space for a wheelchair and carers to assist with the door closed?
- If sensor lights have been installed do they allow sufficient time for older people to use the facilities?
- H Have mirrors been placed to avoid disorientation or confusion?

Please give examples of good practice/

### The environment promotes orientation

#### Rationale

People with dementia are likely to become agitated in unfamiliar surroundings. Providing visual clues and prompts, including accent colours and artworks, to help them find their way around is particularly important. Signs using both images and text need to be placed at a height where they can easily be seen. Signs should be placed on doors not beside them. Strong patterns on wall coverings or furnishings can be misinterpreted. Providing clocks, calendars and signs indicating the name/type of department will help with orientation.



Que	estions	Please give examples of good practice/
	se score each answer from 1 – 5 arely met, 5=totally met)	areas of concern
Α	Do doors to corridors and waiting areas have a clear or transparent vision panel to show where they lead to?	
В	Are signs for patients placed on, not beside, doors and of a good size and of a contrasting colour to be seen easily?	
С	Do all signs e.g. for a toilet, use both images and text and are they fixed at a height (approximately 4 foot/1.2m) that makes viewing easy?	
D	Are signs for staff e.g. sluice or treatment room, out of general eyesight?	
Ε	Have colours, numbers or signage been used to clearly identify each floor of the building?	
F	Have strong patterns or images been avoided in wall coverings, curtains, furnishings and screens?	
G	Have artworks/objects and accent colours been used to enhance orientation and wayfinding?	
Н	Is there a large, accurate and silent clock (approx 18"/45cm diameter) clearly visible in all patient areas?	
1	Is there signage showing the name of the hospital and the department?	
П	Is an easy to read internal hospital map available?	

## The environment promotes calm, safety and security

#### Rationale

Clutter and distractions, including notices, can cause added confusion and should be avoided. Noise can make concentration difficult and can increase anxiety. Pleasant smells can be evocative whereas unpleasant odours can case distress. Locked doors and window restrictors can lead to frustration and anger when they cannot be opened. All staff should be familiar with current statutory and regulatory personal liberty protection standards.



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Que	estions	Please give examples of good practice/	
	se score each answer from 1 – 5 arely met, 5=totally met)		areas of concern
Α	Are notices kept to a minimum to avoid distraction and confusion?		
В	Are spaces and corridors clutter free?		
С	Has adequate space been provided for wheelchairs and mobility aids?		
D	Has noise management been considered and noise absorbent surfaces been used e.g. on floors and ceilings, to aid noise reduction?		
Е	Has the use of heavily scented air fresheners and other materials been avoided?		
F	Is equipment on display kept to a minimum?		
G	Are the exit doors/fire exits clearly marked and easy to see?		
Н	Are doors to exits clearly marked but 'staff only' areas disguised e.g. by painting the doors and door handles in the same colours as the walls/ continuing the handrail across the door?		
	Are safety and security measures as discreet as possible?		

Are all hazardous liquids and solids e.g. cleaning

materials, locked away?

#### Summary

### Please add your scores for each criterion here

1 The environment promotes meaningful

ABCDEFGHI.
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interaction between patients, their families and staff	
2 The environment promotes well-being	
3 The environment encourages active engagement of people with dementia in their care	
4 The environment promotes mobility	
5 The environment promotes continence and personal hygiene	

For further details about the EHE programme go to www.kingsfund.org.uk/dementia

For further details about the assessment tools go to www.worcester.ac.uk/discover/ kings-fund-environmentalassessment-tools.html

If you would like to provide any feedback on the tool or to contact us please email dementia@worc.ac.uk

#### How the results might be used

and security

The environment promotes orientation

7 The environment promotes calm, safety

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

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

#### How others have used their results

Evaluations indicate that people have already used their results to:

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

Is your hospital dementia friendly? © The King's Fund and University of Worcester, UK 2020

#### Overarching design principles

The design principles focus on promoting well-being and independence rather than providing detailed room by room guidance. They have been developed as a result of the EHE programme and bring together best practice in creating more supportive care environments for people with cognitive problems and dementia. The principles are drawn from a number of sources, including research evidence and the learning gained from changes tested in a range of care environments. www.worcester.ac.uk/documents/ Assessment-Tool-Bibliography-2020-FINAL.pdf

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

MEANINGFUL ACTIVITY Can be encouraged by providing:

Books and games

Drinks, snacks and finger foods

Gardens

Memorabilia

Places to walk with handrails

Resting points

Social spaces

**FAMILIARITY** 

senses

cutlery

self care items

Can be enabled by:

and dining areas

Domestic scale seating

Engagement with the

Familiar crockery and

Photographs, personal and

Recognisable sanitary ware

Reducing agitation

Encouraging independence

**Enabling activities** of daily living

OUTCOMES

Easing decision-making

and distress

and social interaction

Promoting safety

ORIENTATION

Can be supported by:

Artworks that reflect the seasons and local

scenes

**LEGIBILITY** 

Clear sight lines

Even lighting

Noise reduction

**Uncluttered spaces** 

Can be aided by ensuring:

Discreet security measures

Matt, even-coloured flooring

Calendars and clocks

Clear signage

Natural light

Outside spaces

Views of nature

Visible staff

WAYFINDING

Can be helped by using:

Accent colours and colour

Signage – images

contrast

Artworks/points of interest

Identification of beds. bedrooms and social spaces

and text