

A guided walkthrough: care environments



This guide aims to help care and support staff consider the care home from the perspective of the resident. People living with dementia are unique and need different things from the people and spaces around them. Sometimes, in order to better understand behaviour(s), it can help to look at these spaces from a different viewpoint. No matter how long you have worked in the care setting, your experience of, and relationship to, the environment as a place of work, will be very different from that of a person with dementia who lives there.

- You can use the checklist as you walk around or use it as a discussion aid.
- We suggest that you start in the space where the behaviours take place. For example, if a resident appears anxious in the dining room, start your walkthrough there.
- Try and undertake the activity at the same time it occurs, for the resident. Spaces can be very different between day and night, for example.
- If the resident is seated in a space when the behaviour occurs, think about seeing the space from this perspective.
- What do you see, hear and notice? You can use our guide to think about what the resident you care for might be experiencing.
- We provide two case examples overleaf to illustrate.

“Your experience of, and relationship to, the environment as a place of work, will be very different from that of a person with dementia who lives there.”

Continued overleaf



Example one - Jenny's experience

Background

When Jenny was referred to Dementia Support UK, staff reported that she would enter her friend Audrey's bedroom and urinate on the floor. Audrey was very distressed by this. Jenny's bedroom is next to Audrey's and during the day they share a bathroom and toilet.

Using the guided walkthrough

Stand inside Jenny's room - what do you see from the bed? Can you easily see the toilet? Are there signs that help you to locate the bathroom? Could you see the bathroom at night? Walking out of the room, stand outside the bedroom door - what can you see? Are there any signs or directions that might tell us what room is Jenny's or Audrey's? Can you find where the toilet is or how to get there? What can you see in front of you and to either side? What can you hear? Do you meet anyone?

What we found

There are no signs or directions from inside Jenny's room that explain where the bathroom is. The corridor to the right of Jenny's door is darker than the corridor to the left, as it leads to a large picture window. Audrey's bedroom door is to the left and immediately next to Jenny's. The door is open, and you must pass this to get to the bathroom. The carer hears music coming from Audrey's room.

Suggestions

Jenny has only recently moved to the care home and may not remember the route from her bedroom to the toilet. Being in unfamiliar surroundings may make her anxious, and urgency may make her seek the quickest solution. When she leaves her bedroom looking for the toilet, there are no signs to help. The corridor to the right is not as well-lit as the one to the left, perhaps, prompting her to go that way. Audrey's bedroom door is always open with music playing. Not only is this the first door Jenny comes to, but it may look inviting too.

“ Can you easily see the toilet? Are there signs that help you to locate the bathroom? Could you see the bathroom at night? ”

Continued overleaf



Example two - Gerald's experience

Background

Gerald was referred to Dementia Support UK when he tested positive for COVID-19. Staff reported that Gerald became 'verbally aggressive' when they asked him to stay in the downstairs lounge for isolation purposes. He tried to remove the masks worn by the staff, to go upstairs and push staff away if they attempted any personal care. Prior to this, Gerald would spend his day walking about freely within the home and following carers as they went about their day. The lounge looks out on the gardens. Another resident, Ray, spends his day sitting just outside the lounge as this is his designated smoking space. When Gerald is in the garden, he approaches Ray and will attempt to hold his hand and stroke his face so staff do not feel that social distancing would be possible.

Using the guided walkthrough

Standing inside the lounge, what can you see, hear and smell? Who comes to the lounge to spend time with Gerald? How do they enter and leave? What can you see outside the lounge? How is the garden used? How do you get there and why can Gerald not walk in the garden? How might this feel to Gerald

if he cannot understand the reasons for his isolation/restricted movement.

What we found

The lounge feels very bright and open, and the long line of windows provides a great view of the garden. You can smell the flowers from the garden through the open windows but also the smell of cigarette smoke. Staff enter and leave the lounge through a glass door that opens onto the foyer and reception. The only other exit from the lounge is into the garden, but this is locked. You can hear music from the reception or possibly out in the garden. There is traffic noise on the road and children playing in the gardens beyond the care home's garden wall.

Suggestions

Gerald might be frustrated at being able to see and hear the garden but not able to access it. Hearing music and children playing might be contributing to this as Gerald responds to these sounds. Gerald may not remember why staff are wearing masks, or that he is supposed to isolate from others. Is it possible to work with Ray to find an alternative space to smoke? That way Gerald could have access to the garden at those times.

“Residents may not remember why staff are wearing masks, or that they are supposed to isolate from others.”



Continued overleaf

Guided walkthrough

Ask	Notes/observations
<p>Where does the behaviour occur or start? Where does it end? Are spaces linked?</p>	Lounge area:
	Dining area:
	Bedroom:
	Corridors:
	Toilets and bathrooms:
	Outdoor space/garden:
	Exits:
<p>What happens in this space? Is the behaviour focused around a space or activity?</p>	
<p>Does it tend to occur at the same time of the day or night?</p>	
<p>Is it focused around other people or a specific person?</p>	

“ People living with dementia are unique and need different things from the people and spaces around them. ”

Continued overleaf

Is the space calm or confusing?

How it should be	Notes/observations
The items in the room tell us what it is used for.	
It is not cluttered.	
Institutional signage is avoided.	
Reflective surfaces are avoided.	
The space smells clean/ there are no unpleasant odours.	
There is not too much noise/ the noise levels can be adjusted.	
Echoes are minimised.	
There are no loud patterns on carpets or shiny floors.	
Signage and cues tell me where I want to go to.	
The space is well lit/ avoids shadows.	
Corridors make sense and don't lead to exits I can't open/they have spaces to sit or stop.	
There is enough space.	
There are handrails and help-points where I need them.	

Continued overleaf

Does it feel like home?

How it should be	Notes/observations
There are enough comfortable places to sit.	
I can move about freely avoiding obstacles.	
Organisational noise (kitchen clatter, office chat, etc) is avoided.	
The temperature is comfortable and can be adjusted to my comfort levels.	
The space is familiar, and I know my own private room/space from that of a shared area.	
I can enjoy hobbies, activities and interests here.	
There is domestic routine which I recognise - sounds, sights and activities which are comforting.	
I can see outside and have access to outside space.	
The place where I sleep is welcoming and feels like mine.	
I know where the toilet is, or I can use signs/cues to help me get there.	
I have privacy.	
I can spend time with family and friends.	

Continued overleaf

