

ADaTHOME

IMPROVES QUALITY OF LIFE

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HANDBOOK for Safety and Security

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1. INTRODUCTION

Safety and security include a large array of domains, such as mobility and wandering, orientation and perception, contribution of house arrangements to safer living space and a sense of security. These can be divided into two main areas of physical safety and conceptual safety. Feeling physically safe would include the ability to move around your house and the outside environment freely, without the danger of injuring oneself or causing any other harm to one self. Whereas feeling conceptually safe would refer to the house being a protective environment, where one feels safe, does not feel threatened and stressed. Therefore, to feel safe and secure in your own home is important for both, the care partner and the individual with dementia.



People with dementia see their home as a place for safety and security, where they can avoid stress and do everything at their own pace. Their own home environment allows them to cope and provides the feeling of comfort. However, if they did not feel safe and secure in that environment, these positive associations would not be there anymore. Therefore, if the home becomes a place where they feel unsafe and threatened, this might lead to feelings of anger and anxiety for both, the care partner and the person with dementia.



2. CONCEPT

2.1 Safety and security in dementia

Changes in the brain and body caused by dementia can affect one's sense of conceptual and physical safety and security. Impaired judgement, sense of time and place, confusion, sense of suspicion and fear, reduced balance, changes in vision, hearing and depth perception are all contributing factors to exposing oneself to harm. Safety problems are a major concern for dementia care partners.

Short-term memory problems may lead to potentially dangerous and harmful situations. People with dementia are at a higher risk of injury, they tend to forget to take their medication and pose threat to their general safety. Impaired executive functions, problems in planning, sequencing and attention control, cause an inability to carry out daily tasks that puts the PwD at risk.

Individuals with dementia also struggle with sleep disturbance, which is related to night time falls. Night time falls cause injuries, such as fractures and dislocations, that can prevent people from returning home.

Other safety issues for the people with dementia in their own homes are wandering, fires and burns, injury from falls and ingesting dangerous substances, leaving the home and getting lost, injury to self or others from sharp objects, inability to respond rapidly to crisis situations, side effects of improper use of medications, injury from aggressiveness, choking or swallowing problems. Falls are more common among people who have experienced cognitive loss and they become more of an issue as dementia progresses. As mobility gets affected by decline in physical and visuo-spatial difficulties.

2.2 Impact on Quality of Life

Dementia affects people's ability to successfully maintain a safe and secure environment at home and consequently their feeling of safety and security are negatively affected by those difficulties. In addition, one's safety and security can be negatively affected when they are outside their home. Therefore, an inability to maintain safety and security both, outdoors and indoors, puts PwD at risk and it might lead to early institutionalization. Therefore, this will affect people's self-worth,



independence and

autonomy, leading to reduced QoL. Thus, it is important to consider actions that can be undertaken to maintain people's autonomy in this dimension.

2.3 STRATEGIES

2.3.1 Using reminders to lock the door and windows.

The objective of this strategy is to ensure the PwD's safety and security at home by using reminders to lock the doors and close/lock the windows.



Explain the role of each participant in each strategy

How do I develop the strategy?

- Who will develop the strategy? PwD. Families and care partners.
- What role does each participant have? PwD and their family and care partner should come with reminder notes and the perfect location to put them.

Explanation of the different steps to using reminders to lock doors and close windows:

- PwD and their family should design the reminder notes to lock the doors and close the windows.
- They should then decide the best location to put them up (whether they would be at eye level or lower, etc.)

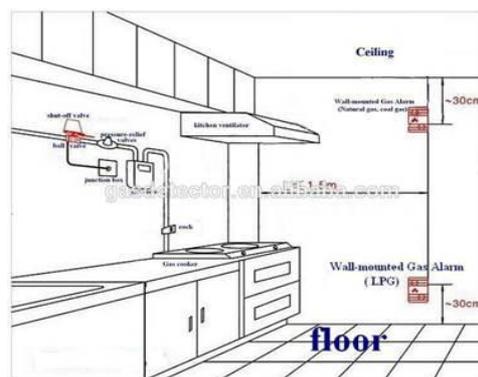
- The PwD

and family should practice the strategy and the family should assess if this is suitable for the PwD.

To arrange activities trainers have to keep in mind:

- The duration of the activity should be approximately 15min.
- The trainer should briefly introduce the Alarm Systems as a potential ICT that can be used together with this strategy.
 - Revisit the strategy and modify it if necessary. The guidelines for modification:
 - N/A
 - It is time to practice at home.
 - Empowering and supporting the PwD to practice the strategy at home.

2.3.2 Gas detectors and Photocell Faucets



Gas detectors and Photocell Faucets

Explain the role of each participant in each strategy

How do I develop the strategy?

- Who will develop the strategy? PwD. Families and care partners. Professionals.
- What role does each participant have? Professionals would provide PwD and their families with information about specifications of Gas detectors and Photocell Faucets for a PwD and strategies to use them. PwD and family/care partners could think about their home environment and consider some

changes to involve

gas detection system based on the information learnt in this session.

Explanation of the different steps to using reminders to lock doors and close windows:

- The trainer should provide the information about the importance of Gas detectors and Photocell Faucets and suggest some strategies.
- Then the PwD together with family/care partner should consider their home environment and what modifications could be done to benefit the PwD. The PwD and family should practice the strategy and the family should assess if this is suitable for the PwD.
- To arrange activities trainers have to keep in mind:
 - o The duration of the activity should be approximately 15min.
 - o The trainer should briefly introduce the Gas detectors and Photocell Faucets as a potential ICT, that can be used together with this strategy.
- Revisit the strategy and modify it if necessary. The guidelines for modification:
 - N/A
- It is time to practice at home.
 - Empowering and supporting the PwD to practice the strategy at home.

2.3.3 Lighting and Automatic Lights



The objective of this strategy is to inform PwD, families and care partners about the importance of appropriate lighting for PwD's safety and security, so a secure and safe environment can be maintained for the PwD whilst promoting their autonomy.

How do I develop

the strategy?

- Who will develop the strategy? PwD. Family or care partner. Professionals.
- What role does each participant have? Professionals would provide PwD and their families with information about specifications of proper Lighting and Automatic Lights and strategies to use them. PwD and family/care partners could think about their home environment and consider some changes to improve lighting based on the information learnt in this session.

Explanation of the different steps to employ the strategy:

- The trainer should provide the information about the importance of lighting and suggest some strategies.
- Then the PwD together with family/care partner should consider their home environment and what modifications could be done to benefit the PwD.

Checking the strategy and modifying if necessary. The guidelines for modification:

- The trainer should emphasise that the same strategy might not work for everyone.

To arrange the activity, Trainers must keep in mind:

- The trainer should have information and examples of good lighting.
- The strategy should not take longer than 15 min.
- The trainer should have examples of automatic lighting, to introduce the ICT.

It is time to practice at home:

- Empowering and encouraging the PwD to practice the strategy at home.



2.3.4 Using a

peephole and using a check list with steps to follow, when someone is at the door

The objective of this strategy is to ensure that the PwD are maintaining their safety and security at home, by not letting unknown people in to their home and that they open the door to the ones that they do know. As sometimes, PwD can forget their



loved ones, nurses or doctors, that have been scheduled to come in.

How do I develop the strategy?

- Who will develop the strategy? PwD. Family or care partner.
- What role does each participant have? PwD would select pictures of people that they know, by choosing ones that they find the most useful and easy to identify people from. Then these pictures can be compiled into a poster or a face book, for the PwD to keep by the door. Family or care partner should help the PwD to identify the important people in their life and come

up with reminder
notes and instructions, when somebody comes at the door.

Explanation of the different steps to develop the strategy:

- The PwD and their families should be asked in advance to bring some photographs of people in their lives that should go up in a picture collage or face book. If people do not wish to use the photographs, they could come up with a list of people and any identifiable information.
- The PwD and family should come with a set of questions that the PwD should ask the person at the door and a reminder to use the peephole.
- Once the photographs or the information have been collated and the questions and reminders have been created, this information should be hung on the door.
- Then families and PwD should practice this strategy, where a family member pretends to be a visitor and the PwD follows the developed steps.
- Then the family can assess if this activity is suitable for the PwD and make any amendments accordingly.
- Checking the strategy and modifying if necessary. The guidelines for modification:
 - o The activity should be suitable for PwD's abilities and preferences.

To arrange the activity, Trainers must keep in mind:

- The duration of the strategy should be approximately 45 minutes.

It is time to practice at home.

- Empowering and supporting the PwD to practice the strategy at home.

3. CONCLUSION

Since dementia and other co-morbid conditions might affect people differently, it is important to consider these strategies in terms of individual differences, as the same strategy might not work for everyone. It is essential to work in collaboration with PwD, as well as other health professionals, to come up with an optimal strategy and monitor it, and if it is not working, amend or change it.



Minimising risk

and making the environment safe is one of the main strategies to support safety and security for the individual with dementia and their care partner. To solve any arising issues, continual assessment and planning is necessary. As soon as the care partner notices any behavioural changes, like risky behaviours, they should start implementing changes straight away, rather than waiting for more pronounced symptoms. It might be helpful to involve the individual with dementia in identifying any issues and contributing in decision making on any changes in their home environment, when possible. Various modifications will be suggested later in the text, but it is important to remember that these changes must suit the person and respond to specific problems. Modifying the environment just for the sake of it, may not yield any beneficial results, it may only confuse the person with dementia. When modifying the environment, it is important to do it in steps, changing as little as possible, trying simple solutions first, so the environment is kept familiar. In addition, any changes that are made to the house must comply with a maintenance of a safe environment for other people living there and visiting.

Home environment should be designed in a way that it encourages correct decisions and avoids wrong one's. To prevent any accidents related to exiting the property, installation of security locks or guards on windows and balcony doors, putting marks or stickers on glass door have been suggested. To prevent falls and confusion, any unstable or low furniture should be replaced by strong and sturdy furniture. In addition, moving furniture, like wheelie chairs should be avoided, as well as clutter that can be a trip hazard and may cause confusion. Any clutter and unnecessary furniture should also be removed from corridors and stairways. Also, removing any picture memorabilia from stairwells and ensuring that stairwells are adequately lit up can reduce the risk of falling and confusion. Rugs can act as major trip hazards, so they should be removed from around the house. The carpets and flooring should be even to avoid tripping up. Wires, cables, etc. in pathways should be moved by fixing them to the walls. Installation of grab-bars and railings, where required, can prevent falling and allow the individual with dementia to move more freely.

As dementia progresses, some characteristics of the ageing eye change and impose general constraints on lighting and surface finishes. Therefore, people with dementia might perceive the environment different and they might need adjustments in lighting to support these changes. Generally, lighting for PwD needs to be much brighter than normal indoor lighting to counteract the loss of visual acuity that occurs with aging.



Good lighting and

an enhanced visual environment often result in renewed interest and optimism, PwD may regain mobility and remain more active. It is recommended to achieve high levels of illumination whilst still maintaining a homely feel, as well as keeping light at a similar level throughout the room as uneven brightness patterns can produce frightening shadows causing agitation and confusion. Where transitions are necessary - for example, between outside daylight areas and indoor spaces - changes should be gradual as older eyes adapt much more slowly to changes in light levels. People should be aware of glare. Direct glare, which comes from inadequately shielded light sources, must be avoided. Looking directly into bright light, whether that's sunshine through a window or at a bare bulb, is not healthy for anyone but damage may be even more noticeable in the elderly. Reflected glare is created by strong light bouncing off smooth, reflective surfaces. Reducing glare not only contributes to comfort, it also helps to minimise falls and maximise attention span.

Specific task lighting should be provided when necessary so patients can see and enjoy what they are doing instead of becoming frustrated. Desk lamp offers both light therapy and effective task lighting in one. Lighting should not distort the true colours of the environment or the people who live in that environment. People should choose bulbs with higher colour-rendering indexes (CRI) instead - triphosphor tubes with 80-91 CRI will produce better colour differentiation and more vibrant colours. Most importantly, night time lighting is very important to PwD in maintaining their safety and security. Appropriate lighting at night time can help reduce the risk of falls. Strips of LEDs around doorways and along pathways (e.g. to the bathroom) were found to work better than leaving a dim nightlight on in these areas.

To prevent injuries, furniture and items with any sharp features should be removed or put out of the way. The same applies to items made from glass. In addition, shelves should be fixed, and heavy items should not be stored high up. The items of interest should be placed in a visible, easy to reach place. Hazardous substances should be locked up or stored out of reach to avoid ingestion. In addition, the medication use should also be closely monitored. PwD could be encouraged to use blister packs or medication dispensers to avoid wrong use of medication.

To reduce wandering, one should refrain from hanging coats, putting boots and walking sticks in visible places. To ensure that the PwD can return home safely, if they do wonder out of their home, they should either have a note, a card or a bracelet with them, with identifiable information (name or their number, if they are registered to



the police as a

PwD) and care partner's or next of kin's details on there. Any personal information, such as home address, should be avoided, so people cannot take advantage of such information. Also, PwD should be discouraged to carry large sums of money with them or bank cards, in case they are in a situation where someone can take advantage of this. To avoid being locked out of the house, a key safe could be installed by the front door with a spare key. A note by the door, reminding to pick up the keys and lock the door, might be useful to ensure safety and security is being maintained.



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