



Improving the experience of people living with dementia



Some policy context:

- People, Place, Partners
- Director of Public Health 2017/18 Annual Report “Ageing Well in Kirklees”
- Joint Health and Wellbeing Strategy
- Creating an inclusive Kirklees
- Vision for Adult Social Care (in development)



What is Dementia?

Dementia is an umbrella term caused by diseases of the brain which cause the ongoing decline of the brain. Below are a few of the more common forms:

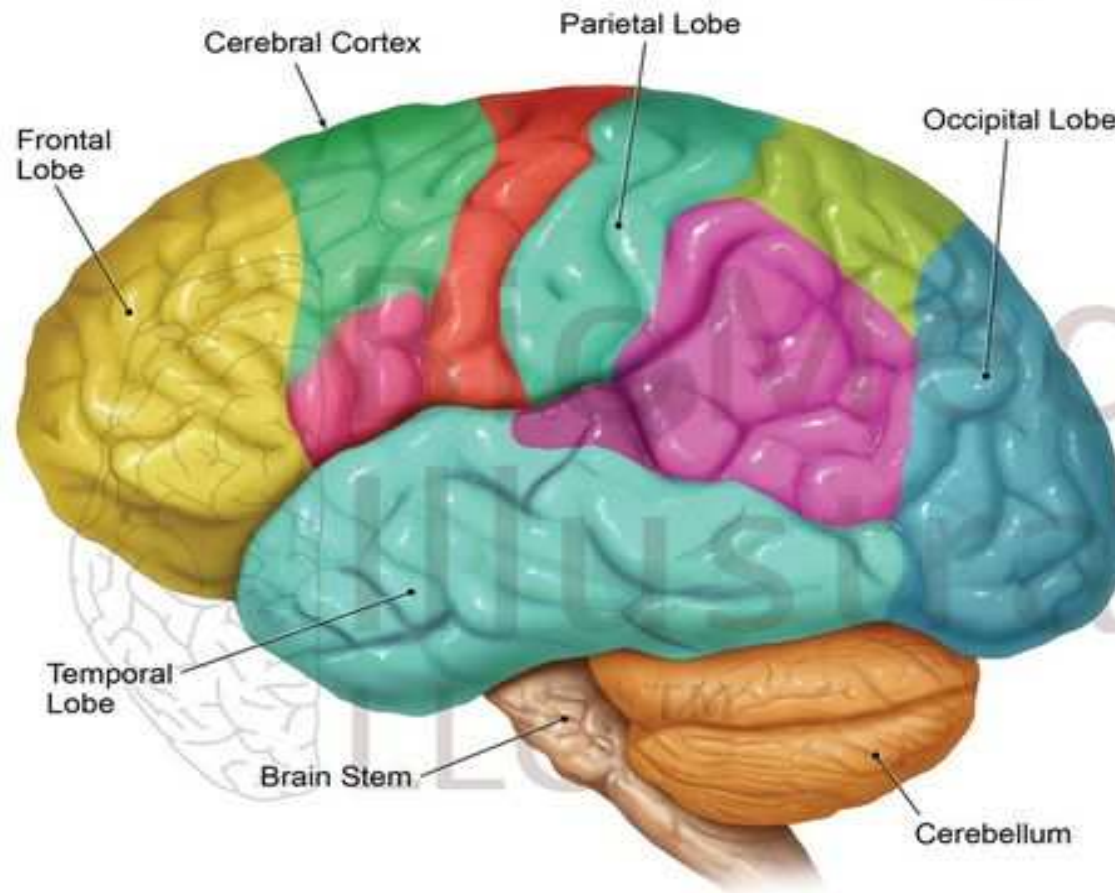
- Alzheimer's Disease
- Vascular Dementia
- Dementia with Lewy Bodies
- Frontotemporal Dementias
- Mixed Dementias
- Korsakoff Syndrome (Alcohol Related Dementia)



- A person does not suddenly become just a collection of symptoms
- People experience dementia differently
- Our attitude has a significant impact on the experience of dementia
- People can live well with dementia
- Early diagnosis is important



Brain Surface Anatomy & Functions



Cerebral Functions

- Higher Mental Function:**
Problem Solving, Thinking, Planning, Judgement, Emotional Expression, Creativity, Behavioral Control
- Motor Functions:**
Orientation, Head and Eye Movements, Posture
- Broca's Area:**
Control of Muscles for Speech Production & Ability to Comprehend Grammatical Structure
- Motor Functions:**
Initiation of Voluntary Muscles, Movement
- Sensory Functions:**
Sensation from Skin and Muscles
- Wernicke's Area:**
Comprehension of Speech Sounds & Language
- Auditory Functions:**
Perception of Sounds
- Tactile Perceptions:**
Processing of Multi-Sensory Information
- Visual Functions:**
Coordination of Eye Movements, Perception, Image Recognition, Association, Visual Memory
- Association Area:**
Short Term Memory, Equilibrium, Emotion

Cerebellar Functions

- Motor Functions:**
Coordinates Voluntary Movements:
Posture, Balance, Coordination, & Speech

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Some numbers:

Because dementia is significantly under-diagnosed, it is hard to be exact but:

- 850,000 people are thought to be living with dementia
- 25 million people know a close family member or friend living with dementia
- 1 in 3 people born this year will develop dementia in their lifetime
- More than 45,000 people of working age are living with dementia



A social model of disability

- It's not the person, it's not the wheelchair, it's the stairs
- Put the person at the centre and understand their experience
- Everyone is unique



We inadvertently “disable” people

“We got a load of smart plugs, lights and Hive to make sure my dad was OK when were not at home. We also have an Alexa but never showed dad because of his dementia. Then, we got a call one day from a carer saying Alexa was constantly playing 1950s music. When we got home and checked Alexa, we found Dad had been playing music for days. It makes him so happy. He loves singing all day long. More than we do to be fair ;-)”



Creating the right environments for people living with dementia

Kirklees Council is working with the University of Stirling internationally renowned dementia design research centre:

- Training events for key staff across the council (social care, highways, planners and assets)
- Input into the refit of Almondbury Library as a dementia friendly library
- Supporting the development of 2 new specialist dementia day centres and a resource centre for carers



Enabling and Inclusive Environments

Dementia
Friendly
Environments

We ALL benefit
from good design
and environments

We don't have to
give them a 'label'

Autism
Friendly
Environments

Family Friendly
Environments



Disabled Friendly
Environments



Good Design: for everyone

Good dementia design works for lots of people because it:

- Supports the individual's needs
- Maximises independence
- Reinforces personal identity
- Enhances self esteem / confidence
- Is orientating and understandable
- Demonstrates care for people



Good Design: for everywhere

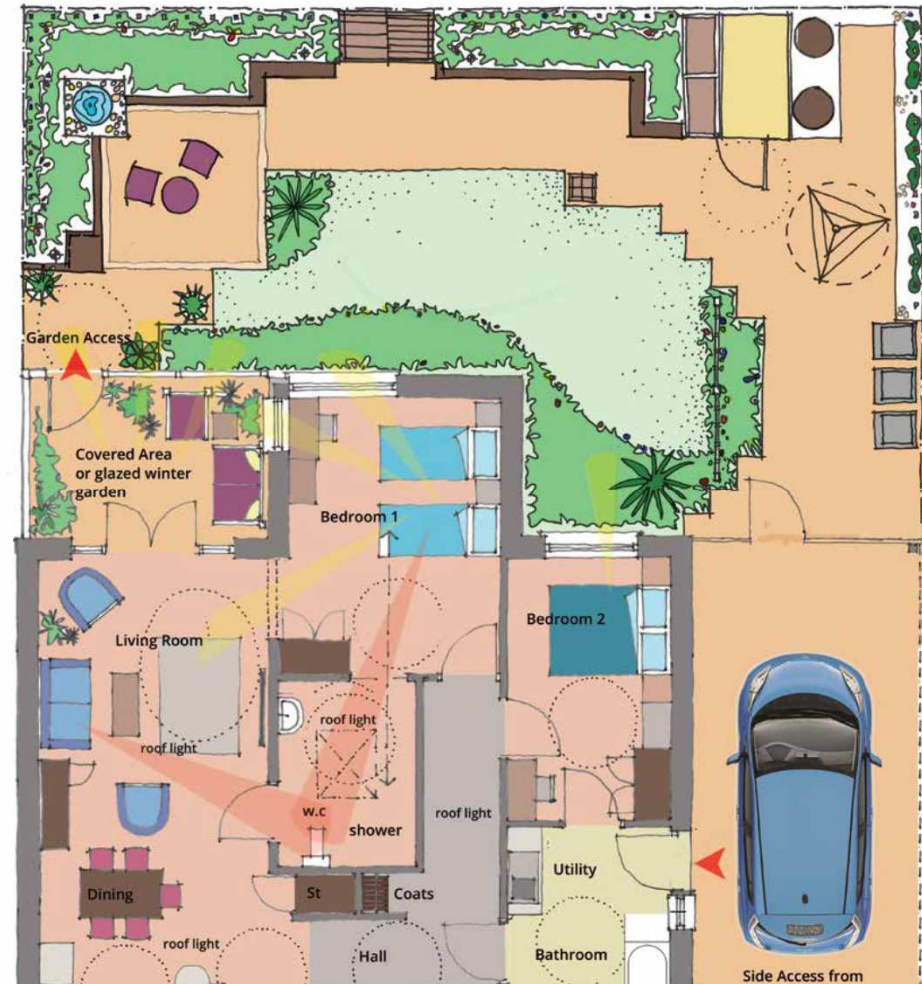
- Public buildings
- Public spaces
- People's own homes
- Specialist care provision



Safe and Accessible Outside Space

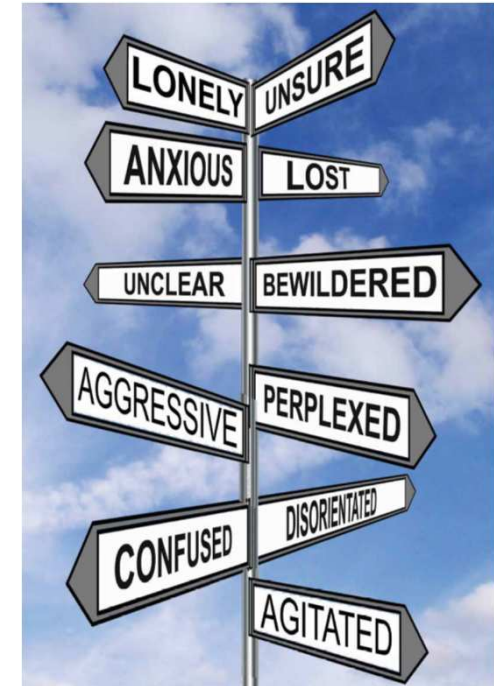
Enable people to:

- Participate in their community
- Wayfind and remain independent
- Benefit from physical activity even in more institutional settings



Good signage and multiple cues

The provision of signs and aids to wayfinding is integral to the design of many special environments for people with dementia. Signs on doors and directional signs are required to aid wayfinding.

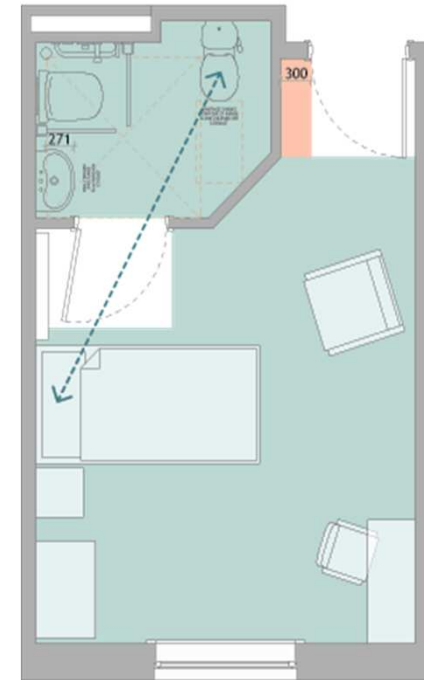


Enhancement of visual access

- Better chance of finding something if you can see it



- Utilise lighting to aid prompts at night



Examples of Design Features

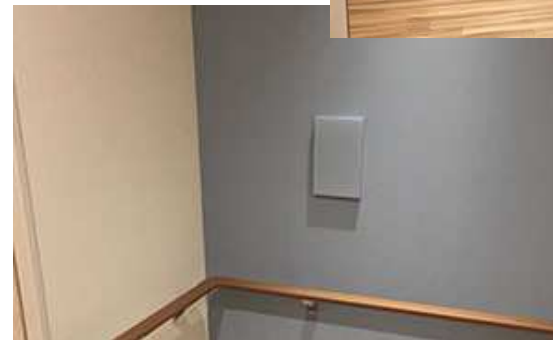
Domestic & Home Like and Activities for Daily Living



Transparent cupboard doors make finding items easier

Unobtrusive safety features

Disguised / painted out features where residents in a care home do not need to go eg COSHH cupboards



Control of stimuli

People with dementia have difficulties dealing with high levels of stimulation. Their ability to screen out unwanted stimuli appears to reduce. They can become confused, anxious and agitated when overstimulated.

Try to reduce visual and acoustic clutter such as noisy extractors or too many posters and signs.



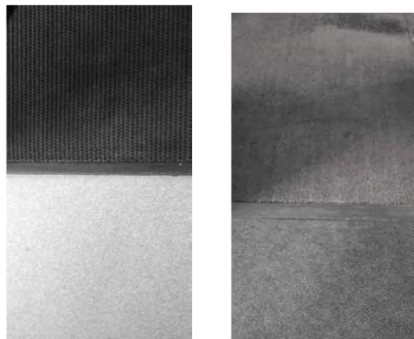
Colour and Contrast

Depth perception is more difficult. Contrasting mats or patchy tarmac can appear to be holes so people with impaired vision may not want to cross them or may high step over them, increasing risk of falls.



x

✓



x

✓

Choosing finishes at junctions

Matching LRV (light reflectance value) is vital to avoid giving the impressions of steps, ledges or black holes.

A useful tool to check LRV levels, is the tonal view option on a mobile phone.



Lighting

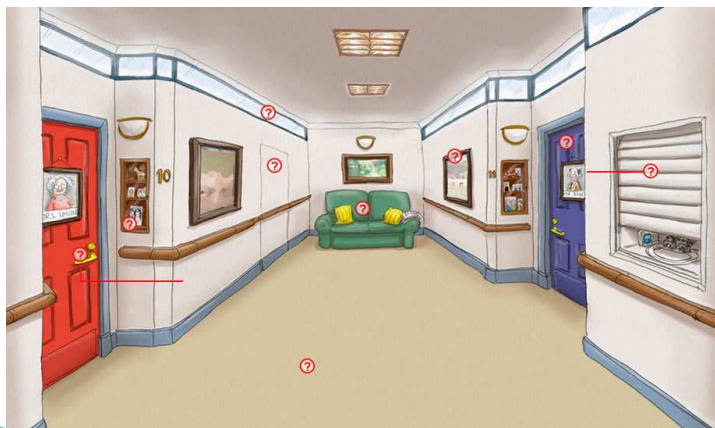
Lighting is important to people with sight loss and dementia. Good lighting helps to compensate for poor eyesight.

Daylight provides higher levels of light than most domestic electric lighting.

Ensuring windows are clean and not covered. Ensuring bushes are not limiting sunlight getting in is important.



Changes in daylight over the course of the day help to signal the passing of time and to maintain normal sleeping patterns. Circadian lighting solutions support wellbeing.



Fixtures and fittings

Well designed fixtures and fittings can facilitate independent living.

Providing user-friendly kitchen devices may encourage people to prepare their own food, and suitable handrails and grab rails will support people to move independently around their homes.

Mirrors in bathrooms may cause confusion and upset people with dementia who no longer recognise their own reflection.



Fixtures and fittings



Simple analogue controls on a cooker



Mixer taps can be difficult to understand

Traditional cross head taps would be better



What else are we doing in Kirklees?

- Working with EHCU / HR colleagues to update HR policies to be more supportive of staff affected by dementia
- Working to introduce a set of design standards for Kirklees
- Revisiting training packages to ensure basic awareness is available to all staff and to family carers
- Planning staff awareness sessions in conjunction with our Working Carers staff network
- Working with NHS colleagues to ensure consistent design principles and to educate trainee GPs



Useful links

Video; Hallucinations by Dr Jennifer Bute

<http://gloriousopportunity.org/dementia-issues.php>

University of Stirling website: <https://dementia.stir.ac.uk/>

Checkout this SCIE video: <https://www.scie.org.uk/dementia/about/dementia-from-the-inside.asp>

Design for Dementia – A guide

https://www.housinglin.org.uk/assets/Resources/Housing/OtherOrganisation/BRE_design_guide_vol_1.pdf

Thank you for listening
Now over to you for some group work

