Dementia-friendly housing charter

Guidance on delivering a dementia-friendly approach to housing
Document purpose
To inform housing organisations, corporate bodies and sector professionals on how housing, its design and supporting services can help improve and maintain the wellbeing of people affected by dementia.

Title
Dementia-friendly housing charter:
Guidance on delivering a dementia-friendly approach to housing

Publication date
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Target audiences
Housing providers, planners, architects, builders, surveyors, landlords, occupational therapists, home improvement agencies, property maintenance companies, building control, telecare providers, property developers.

Acknowledgements
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Dementia is one of the greatest challenges we face in society today. It is a challenge in which all areas of the housing sector can contribute. From planners to builders and homecare providers to housing with care, everyone has a part to play.

The Prime Minister’s challenge on dementia states that, by 2020 we would wish to see an increased number of people with dementia being able to live longer in their own homes when it is in their interests to do so, with a greater focus on independent living. This will only be achieved with greater support in people’s own homes from trained professionals and by improving the homes that people live in to ensure they are adaptable as circumstances and needs change.

When someone is no longer able to remain in their own home we need to ensure that housing providers who support them are knowledgeable and have the processes in place to ensure the most appropriate solution for each individual. This includes considering what housing options will best meet the needs of the person with dementia.

At Alzheimer’s Society, we believe that life doesn’t end when dementia begins. Becoming a more dementia-friendly housing provider means being able to help people to stay in the setting of their choice for as long as possible. By developing an understanding of the condition, housing providers can make a huge difference to people living with dementia and their quality of life.

Jeremy Hughes
Chief Executive
Alzheimer’s Society
Dementia and other conditions pose challenges for the housing sector, especially that part of the sector which provides housing for older people.

Awareness and understanding of dementia is increasing, which is leading to a wealth of information, knowledge and resources on how to ensure the wellbeing of people affected by dementia. This presents an ideal opportunity for everyone in housing to play their part and plan, develop and manage housing which helps maintain the wellbeing and independence of people living with dementia and their carers.

We hope that, through your work in housing, you are able to commit to making a positive difference to enable people living with dementia to live in housing that is appropriate to their needs.

Bruce Moore
Chief Executive
Housing & Care 21
Stakeholder endorsements

Jeremy Porteus
Housing Learning and Improvement Network (LIN)
The Housing LIN welcomes this sector-led dementia-friendly housing charter. Targeted at housing professionals, it guides housing organisations in becoming dementia-friendly, reinforces the key contribution the sector can make in enabling people with dementia and their family carers to live well and independently in the home of their choice. It also complements other initiatives and tools such as the Dementia and housing assessment tool for local commissioning and the Code of practice for the recognition of dementia-friendly communities in England. These resources are a must for all housing-related organisations whose work brings them into contact with people who are living with dementia.

Ali Rogan, External Affairs Director
Tunstall Healthcare and Chair of Dementia Friendly Communities’ Technology, Housing and Utilities thematic groups
This document is vital in bringing together all the relevant information for the housing sector in relation to dementia. It’s easy to think that being dementia-friendly is not your business priority, but it’s everyone’s business. This charter brings great learning and examples of how to become a dementia-friendly housing organisation that is making a real difference for people living with dementia.

Paula Broadbent
Keepmoat
This housing charter will inform the sector and hopefully inspire many organisations to become dementia aware. It is essential for housing professionals to recognise how awareness and dementia friendly practices can make a real difference to people’s lives who live within our communities. Being a dementia-friendly organisation will not only enable professionals to make a difference to those living with dementia, but also to those who provide care and support to them each day. The built environment is only one element of what makes a place a home. Feeling safe, secure and confident in the place in which you live and work is vital to wellbeing and, with the help of this housing charter, organisations can become dementia friendly to make these environments a home.

Damian Hutton
Pozzoni Architecture
Dementia-friendly design, and in particular the design of housing, can contribute to the health and wellbeing of everyone, including people with dementia. We all benefit from an easily understood built environment.
Housing has a significant, but under-recognised, role to play in supporting people living with dementia. I recommend this charter to every organisation and individual working in the housing sector who wants to become more dementia friendly by improving the physical, social and emotional environments that they provide. The charter takes a practical approach across the three themes of people, places and processes and also provides links to a range of useful tools and resources.

Sue Adams, Chief Executive Care and Repair England
Care and Repair England welcomes this dementia-friendly housing charter. It promotes the importance of a person’s home in supporting their health and wellbeing. It sets an agenda for the whole housing sector to better understand and respond to the growing numbers of people with dementia. It offers a wealth of resources and advice. We hope all housing organisations that touch the lives of people living with dementia will become dementia friendly so that people can stay living well and independent in their chosen home.

Trudi Elliott, Chief Executive Royal Town Planning Institute
Good quality housing, located in the right places, along with well-planned, enabling local environments can have a substantial impact on the quality of life of someone living with dementia, helping them to live well for longer. The RTPI welcomes this dementia-friendly housing charter as an important step in making this a reality for everyone with dementia.

Ruth Eley Director and Vice-Chair, Life Story Network CIC
The housing sector is well placed to improve the lives of people living with dementia and their carers, both through direct practical help and advice and through working strategically with other partners to bring about change. The sector’s role and contribution are often undervalued and unrecognised. We hope this charter will provide a lever for housing organisations to understand and promote the importance of home and take a leadership role in achieving positive changes in the lives of people with dementia and carers.
Introduction

People with dementia face a range of challenges. These may include memory loss or difficulty communicating, mobility and navigation issues and other associated problems. Across every part of the housing sector, organisations can make a valuable contribution to supporting people with dementia facing these challenges.

To hear more about this and to inform this charter we consulted with people living with dementia from five Alzheimer’s Society service user review panels (SURPs) on issues regarding housing. We asked the following three questions to prompt discussions:

1. What would you like to see in a housing charter?
2. What actions would you like the housing sector to take?
3. What difficulties do you have in relation to housing? What difficulties do you worry you might have in the future?

Further details on the feedback from the SURP groups are included in Appendix 1 but the following subjects and examples show the range of issues discussed:

- location – the importance of familiarity
- design – colour and layout
- technology – alarms, sensor and lights
- accessibility – the importance of local amenities
- signage – clarity and appropriateness
- dementia awareness training for housing staff and planners
- opportunities for social interaction
- adaptability as needs change
- loneliness and isolation.

Hearing directly from people with dementia highlights the scale of this issue. However, their insight also shows how sometimes small changes can make a significant difference. This charter covers areas from all stages and aspects of housing. It includes case studies and instructions on how to sign up to the charter.

The range of issues identified above shows that there is a role for all housing professionals to influence and create a better living environment for people with dementia. Their personal examples are testament to how important this is.
Aims and objectives

This dementia-friendly housing charter seeks to make the housing sector including housing organisations, corporate bodies and sector professionals aware of the challenges of living with dementia so that it can improve home environments for people with the condition.

Housing, its design and supporting services, can subsequently help to improve and maintain the wellbeing of people affected by dementia by taking the following actions:

■ Engagement with a wide range of stakeholders within the housing sector to encourage increased awareness of the contribution of housing to the challenges posed by dementia.

■ Provision of relevant resources and examples of good practice to encourage their integration into all aspects of people (staff), places and processes.

By equipping housing sector professionals with information and additional resources, the charter aims to improve knowledge and understanding of dementia so that all projects consider ways of minimising risks and enhancing wellbeing for people living with dementia. This resource can be used to influence and support all target audiences.

Who is the charter for?

The charter is aimed at the full range of professionals working in the housing sector, from planners and architects to landlords and developers, housing managers and handypersons. It is designed to help all professionals support people living with dementia in their homes and facilitate consistency and good practice.

Organisations are encouraged to improve existing action plans or develop new ones in order to future-proof their organisations and services, and sign up to deliver a number of the commitment statements within the charter.
Waltham Forest Housing Association (WFHA):
How can small housing associations support their tenants to live with dementia?

WFHA is a small, locally-based housing association predominantly providing sheltered housing. As many as 14% of their tenants, including 20% of their sheltered tenants, live with dementia. To become more dementia friendly, they have:

■ appointed Dementia Champions – operational and strategic – who lead the integration of dementia into all work processes rather than treat it as a separate topic
■ audited properties as part of estate inspections and support planning to give them a broad knowledge, from which an internal action plan was developed which is reviewed and updated regularly (at least every six months)
■ set up Waltham Forest Dementia Action Alliance and currently chair this group
■ trained all staff on the Board and the main contractors as Dementia Friends
■ introduced the Sunshine Club to raise awareness with tenants at fun sessions: they meet once a month for activities such as a pamper sessions, arts and crafts, fitness and black history celebrations
■ developed a dementia-friendly specification for works on empty properties
■ incorporated dementia design into our cyclical and planned maintenance programmes.

Within the community, WFHA is delighted to work in partnership with Alzheimer’s Society and Leyton Orient FC, who for the third year have dedicated a match to raising awareness of dementia.

For more information, please see the story from May 2015 at www.wfha.org.uk/news

See article in the December 2016/January 2017 edition of Living with dementia magazine at alzheimers.org.uk/magazine
Why sign up to the charter?
The number of people with dementia is increasing. This presents challenges to society as a whole and has specific implications for the housing industry.

By recognising this, and by committing to the charter, organisations will publicly announce their agreement to deliver on a number of statements which they will commit to in ways appropriate to their size, state of maturity and the level of available resources in the organisation. See section 4, What does committing to the charter mean?, for more information on the commitment statements.

The benefits of signing the charter include:

- demonstrating leadership within the sector by proactively addressing the societal challenges posed by an increasing incidence of dementia
- increased awareness of how dementia and its challenges affect the services and products that an organisation offers
- ensuring that the needs of customers are met in a consistent and appropriate manner
- creating an organisation in which customers feel comfortable discussing their needs
- being perceived by partners as dementia friendly, which may enhance reputation.

Over the last decade, a significant amount of work has been undertaken to understand how physical spaces and design can be developed, constructed and managed to help people living with dementia to live well in all types of housing.

There is an increased need and demand for suitable housing for older people, including those living with dementia. This charter draws on relevant research and learning into a single guidance document and signposts to additional resources.

This charter is a key deliverable of the Prime Minister’s challenge on dementia 2020 which calls on all sectors to explore ways in which they can provide a more dementia-friendly approach and to produce guidance and share best practice across sectors.

‘By 2020, we would like to see an increased number of people with dementia being able to live longer in their own homes when it is in their interests to do so, with a greater focus on independent living.’

Housing is also a key ‘area for action’ outlined in the creation of a dementia-friendly community as dictated by the BSI Code of practice (see Useful resources, page 43).

As well as providing guidance, the dementia-friendly housing charter contains commitments that we encourage organisations to sign up to. By committing to the charter, organisations will publicly announce their agreement to deliver on the commitment statements that are most relevant to them.
Hyndburn Homewise:
A home improvement agency in Accrington runs Memory Matters, supporting people living with memory issues and their carers

This project, funded by NHS East Lancashire CCG, supports people to stay at home, continuing to live independently, and keeps them safe and out of hospital and residential care.

Simple innovations in the home can make all the difference to people with dementia with visual and orientation problems. Examples include changing white grab rails in bathrooms to blue or light switches to red or blue to improve visibility, the use of memory aids to remind people to lock doors or close the fridge and the use of signage and pictures to aid orientation.

If the home is a safe environment people can remain there for longer, holding onto their memories at home, which is better for their quality of life. Since 2013, Memory Matters has helped over 414 families with focused work to meet a variety of needs about the home – from £50 for improved lighting to £4,000 for a level access shower. The adaptations have been funded through charitable donations.

As well as advice and support to improve the home, Hyndburn Homewise offers advice on care and welfare benefits and has brought together a network of support for the families who are helped to ensure the continued independent, health and wellbeing of the clients and their carers.

See article in the February/March 2016 edition of Living with dementia magazine from Alzheimer’s Society at alzheimers.org.uk/magazine
The Guinness Partnership: Becoming a dementia-friendly organisation

Guinness wanted to make a real difference for their customers living with dementia, helping them to remain independent and live in their own homes for longer and live well with dementia.

Research indicated that there are likely to be more than 1,000 older people living with dementia in Guinness homes or receiving their care services. They estimate that one third of these are living in general needs housing.

Over 200 staff responded to the survey, approximately 20 senior managers were interviewed, and a focus group for customers was undertaken. The results indicated that Guinness could do more to be dementia friendly by providing information and support to staff and customers, making services more flexible to respond to customers living with dementia and their carers, and the delivery of maintenance, aids and adaptations.

Customers particularly thought that the telecare and assistive technology services should be prioritised as well as tailoring maintenance services and improving staff awareness and information provision.

For more information, please visit www.guinnesspartnership.com/case-study/dementia/
1
The difference that suitable housing can make
Two thirds of people with dementia in the UK live in their own home in the community, with one third living on their own. Approximately one third of people living with dementia are in a housing with care setting.

Housing and housing-related services can play an important role in ensuring that people living with dementia and their families and carers, live happier, healthier and more independent lives.

It is not just specialist supported housing providers and those involved with adaptations who can play an important role in this – other organisations can make a significant contribution. This includes those involved with aspects such as the design of space in ordinary housing, or training staff in all housing professions to understand the needs of those with dementia.

Essentially, all housing and housing-related services can help to ensure that people living with dementia and their carers can reach the outcomes outlined in the National dementia declaration, shown below.

In order to see this happen, it is vital for the housing sector to:

■ ensure that policies incorporate the need to provide suitable housing for people living with dementia

■ encourage the adoption of good practice in providing housing and housing-related services for people living with dementia, wherever they live

■ ensure that all stakeholders identify what they are able to contribute towards developing and maintaining dementia-friendly communities

■ promote awareness of dementia and how living well can help reduce social exclusion and discrimination.

The National dementia declaration (2009) identified seven outcomes that people living with dementia and their carers would like to see in their lives:

1. I have personal choice and control over the decisions that affect me.

2. I know that services are designed around me, my needs and my carer’s needs.

3. I have support that helps me live my life.

4. I have the knowledge and know-how to get what I need.

5. I live in an enabling and supportive environment where I feel valued and understood.

6. I have a sense of belonging and of being a valued part of family, community and civic life.

7. I know there is research going on which delivers a better life for me now and hope for the future.
2

The scale of the challenge
Improving the different areas of housing to help support people with dementia requires many hundreds of thousands of people working across the housing sector, as well as involvement from many other stakeholders. Working together to understand and address the wide range of issues people with dementia face, they can create the change needed.

The infographic from Housing & Care 12 below highlights some of the key facts about housing and people with dementia.

- There is only enough specialist housing to accommodate 5% of the over 65 population.
- Two-thirds of people with dementia live in the community, mostly in mainstream housing, a third live on their own, predominantly in the owner occupied sector.
- 95% of homes lack even basic accessibility features.
- Home adaptations improved the quality of life for 90% of recipients as well as for carers.
- An Alzheimer’s Society’s report found that more needed to be done to ensure homes were designed and built with the needs of people affected by dementia in mind.

The International Longevity Centre UK has predicted:
- A shortage of 160,000 retirement housing by 2030;
- By 2050, the gap could grow to 376,000.

**Target audiences**

The broad definition of the housing sector used in this document includes a whole range of stakeholders, occupations and organisations. While the specialisms may be divided into the three areas shown in the table below, there is some crossover between the different occupations because of the wide scope of some disciplines.

**Breakdown of the housing sector**

<table>
<thead>
<tr>
<th>Sector specialism</th>
<th>Stage of housing provision process</th>
<th>Occupations responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designing and building</td>
<td>From inception, through design to ‘ready to occupy’</td>
<td>Planners, architects, building control, facilities, property management, builders, surveyors, designers, developers</td>
</tr>
<tr>
<td>Managing and supporting</td>
<td>The daily running activities of all housing types</td>
<td>Landlords, developers, estate or letting agents, housing managers and officers, court/scheme managers, occupational health, facilities or property management</td>
</tr>
<tr>
<td>Modifying and adapting</td>
<td>The modification, repair, maintenance and adaption of housing and the built environment to meet changing needs</td>
<td>Occupational therapists, community equipment or telecare providers, handypersons, environmental health officers, home improvement agencies, builders, property maintenance companies, technical officers and architects</td>
</tr>
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</table>
Influencing policy and decision making

The charter can also be used to influence policy and decision-making by the following bodies in regards to their work within the housing sector:

- local authorities and commissioning bodies
- adult social care services
- clinical commissioning groups (primary care services)
- NHS hospital trusts (acute health services)
- estate agents and property management companies
- other local networks, organisations and partners
- regulators and funders.

The following services are not considered within the scope of this charter:

- care homes
- hospices
- independent homecare organisations (other than those delivering care in specialist housing).

Mold Llys Jamsine: Putting dementia into the heart of extra care housing in Wales

Llys Jasmine, in the heart of Mold, Flintshire, is one of the first Welsh sites to feature dedicated apartments for people with dementia within the extra care housing facility. It was shortlisted in this year’s development of the year at the Housing Awards in 2014, the only specialist housing scheme to be shortlisted.

The apartments were designed in accordance with the Development quality requirements of the Welsh Government and Lifetime Homes standards. Dementia care apartments follow the Dementia Services Development Centre best practice guidelines.

The main aim was to create a ‘home from home’ – designing a building that is sympathetic to its neighbours and residential in appearance rather than institutional.

For more information, please visit www.housinglin.org.uk and search for case study 86.
Addressing dementia-related housing needs

The many ways that dementia affects people’s cognitive and physical functioning presents challenges to the housing sector. People with dementia may have difficulties recognising familiar places, objects or people, they may leave the house and walk for a long period of time, become disorientated, display behaviour that challenges or be unable to retain information about services. Even dementia-friendly features may not be perceived as such by some people with dementia and their individual reaction may be rooted in culture misidentification or previous traumatic experiences. The table below shows common symptoms of dementia.

Common symptoms of dementia

<table>
<thead>
<tr>
<th>Early stages of dementia</th>
<th>Middle stages of dementia</th>
<th>Later stages of dementia</th>
</tr>
</thead>
<tbody>
<tr>
<td>■ loss of memory for recent conversations or events</td>
<td>■ needing more support with managing day-to-day living</td>
<td>■ gradually more dependent on others for care and support</td>
</tr>
<tr>
<td>■ sometimes confused</td>
<td>■ increasingly forgetful, particularly of names</td>
<td>■ pronounced loss of memory</td>
</tr>
<tr>
<td>■ harder to make decisions</td>
<td>■ failure to recognise people or confusing them with others</td>
<td>■ increasing frailty and reduced mobility</td>
</tr>
<tr>
<td>■ mislay items around the house</td>
<td>■ confusion between night and day</td>
<td>■ difficulty in eating or swallowing</td>
</tr>
<tr>
<td></td>
<td>■ putting themselves at risk through forgetfulness</td>
<td>■ increasingly restless, distressed or agitated</td>
</tr>
</tbody>
</table>

The BSI Code of Practice (Useful resources, page 43) identifies the key provisions required in the housing sector for people living with dementia as:

■ adaptations, built environment and design

■ assistive technologies, including telecare

■ access to outdoor spaces

■ support of family and paid carers in private homes

■ training of all staff in the housing sector – appropriate to the settings in which they work and their roles

■ maintenance of tenancy if a person with dementia is temporarily admitted to care.
Selwood Housing: Supporting people to stay in their own homes for longer in Wiltshire & Somerset

Selwood Housing has 5,500 homes across Wiltshire and Somerset and also offers ‘floating support’ to people in their own homes, which helps people to live independently as well as offering community alarm and telecare services called Selwood Lifeline.

The telecare service is provided free of charge for adults in the West Wiltshire and Devizes areas who are affected by dementia or memory loss and those who have a critical or substantial need for the service.

The intended outcomes of the pilot were to:
- prevent the number of re-admissions to hospital
- delay the need for admission to a care home
- promote independence
- enable customers to stay at home longer
- provide support to the carers of customers
- form part of care packages, reducing the staffing hours and cost.

Mrs Green is a 96 year-old lady with a diagnosis of Alzheimer’s disease who lives alone. Mrs Green was referred to the telecare dementia pilot by her occupational therapist as she was having cooking accidents regularly and had burnt her legs by sitting too close to her gas fire. Mrs Green would also leave her home to go shopping alone and then become disorientated. The family spent a considerable amount of time looking for Mrs Green and they received several calls from neighbours concerned about her safety.

Mrs Green was supported to remain safe in her own home by the following adaptations:
- A Lifeline unit and pendant was installed to enable Mrs Green to call easily for help.
- A smoke detector and carbon monoxide detector were provided to raise an alarm at the monitoring centre if Mrs Green gets into difficulty cooking a meal.
- A temperature extremes sensor was fitted in the sitting room to monitor for sudden bursts of heat from the gas fire which would hopefully prevent any further burns to Mrs Green’s legs.
- A property exit sensor was installed that would inform the monitoring centre when Mrs Green had left her home and not returned within the pre-determined time. The monitoring centre would then contact the family so they could respond.
Addressing these needs can make the housing sector and its professionals more effective and efficient by:

- understanding the cause of an issue early and tackling it appropriately
- dealing more appropriately with risks to health and safety
- reducing the risk and cost of litigation
- reducing the rate of property turnover and the cost of voids
- avoiding or reducing decorating and repairs to properties damaged by incidents that could have been prevented
- being alert to simple adaptations that can be installed early as preventative measures.

**Brookside Retirement Village, Lancashire:**

Taking extra care with dementia-friendly design

With 111 extra care apartments, Brookside Retirement Village opened in May 2012. The Brookside Extra Care scheme caters for all levels of physical ability from the fully able to the very frail and provides specialist health, care and support services for older people with dementia. It offers a home, for as long as a resident’s social care and health needs can be supported in that environment, by providing facilities which are flexible to all, backed up with flexible services which can be adapted to meet individual need.

Designed by Pozzoni Architects, who specialise in designing for older people, in keeping with dementia principles, Brookside includes a fitness suite, beauty salon, day care centre, library/IT room, multi-purpose/cinema room, treatment rooms, music room and offices for NHS Central Lancashire.

The public access to Brookside brings life, activity and stimulation for the residents and anecdotal evidence from the staff at Brookside suggests this has a very positive effect on people with dementia.

For more information, please visit [www.housinglin.org.uk](http://www.housinglin.org.uk) and search for case study 68.
Early intervention, housing and quality of life

Housing is one factor that can affect the quality of life for someone with dementia. The infographic below identifies types of interventions alongside the relative effect of living in residential care or their own home.

These interventions include adaptations in the home as well as social interaction and demonstrate the positive impact they can have for the person with dementia and their ability to remain in their own homes for longer.

*Intervention
- social interaction
- talk to neighbours
- improve noise levels
- take more exercise
- assistive technology
- good diet and hydration
- make adaptations to home
- access information and advice
- respite and support to return home
- integrated/proactive services
- manage any physical illness
- rehabilitation from hospital

Infographic supplied by Dementia Services Development Centre
© 2013
Instigating change: People, places and processes
Every individual and organisation working in the housing sector can make a difference to the lives of people living with dementia. In working towards this, everything should be considered from the viewpoint of someone with dementia and how ‘people’ (staff), ‘places’ and ‘processes’ can support them.

**People**

In all housing (social, private, specialist and general), this covers staff who manage properties: landlords; people providing other services including modifications, adaptations, repairs, home maintenance and handyperson services; architects and planners.

Considerations include how to interact with, communicate with and support people with dementia, their families and other unpaid carers.

**Places**

The creation and maintenance of suitable housing which incorporates space and design can support people living with dementia. This includes both the interior and exterior of buildings, areas around buildings and the location in which they are built. It also includes retrofitting existing housing.

Physical spaces should be easy to navigate and be accessible for people living with dementia to enjoy a more meaningful and inclusive life.

**Processes**

This includes housing systems and infrastructure used in all residential provision, planning, design and development, and housing-related services such as repairs, maintenance, adaptations and management.

Processes should be designed to reduce barriers and ensure that people and places are successful in supporting people with dementia.

Ensuring all policies are designed to be dementia-friendly and staff training reflects these policies.
People

Staff in all areas of housing should be able to recognise and support the needs of people affected by dementia and their carers. The breadth and depth of knowledge and skills needed by the workforce depends on how closely they work with people who may have dementia or a memory impairment. This in turn will depend on the nature of the organisation they work for, their particular role in it and the customer base. Largely, staff can be broken down into the following three categories, shown below.

The need for awareness and understanding is not limited to directly employed staff but should also include external contractors, volunteers and board members, residents and customers.

Staff should also be attentive to the needs of family carers and others who support people with dementia on an unpaid basis.

1. **Staff who have significant contact with people living with dementia (including indirect contact)**
   - support workers; scheme managers; adaptations, repairs and maintenance staff and contractors
   - staff working in the homes of people living with dementia
   - line managers of those staff
   - staff responsible for developing strategies and policies for customers.

2. **Staff who have some contact (including indirect contact)**
   - staff who have face-to-face or telephone contact with a wide range of customers, including people with dementia
   - line managers of those staff
   - staff responsible for property management, repairs and maintenance.

3. **Those who have minimal or no contact with residents or customers**
   - finance officers and accountants
   - builders, architects, planners etc.
Dementia-friendly housing charter

**Places**

Place is defined as the interior and exterior of buildings, areas around buildings and the location in which they are built.

Places should incorporate design features, in and around buildings, which are accessible for everyone and include the needs of people living with dementia, as well as other conditions including sensory and physical impairment.

Existing places can be retrofitted to support people with dementia. Recognition should also be given to the fact that people living with dementia will react differently to their surroundings and that their needs will change over time.

**Processes**

This includes processes and systems related to housing management. It covers services such as repairs, adaptations and modifications that need to take into account the needs of people living with dementia and be responsive to their aspirations and requirements.

This includes:

- ease of access to services and processes designed to incorporate the needs of people with dementia
- clear follow-up information and advice on dementia, particularly post diagnosis
- clear opportunities for people with dementia and their carers to contribute to decisions about their home
- policies and procedures
- record-keeping and a database of health and care related conditions.

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**Midland Heart:**

Dementia-friendly organisation

Midland Heart provides and maintains 32,000 homes and is committed to making a difference to people through a mix of general needs and specialist housing, as well as support and care services.

The organisation has taken a holistic approach to being dementia friendly by:

- developing a dementia strategy
- raising awareness among staff, residents and communities through imaginative events
- developing roadshows with its customer panel
- employing external trainers for specialist staff.

It is also now exploring the potential for a partnership approach to training and supporting staff with Worcester University’s Association of Dementia Studies. It also makes use of a 1950s dementia pod to stimulate memories and conversation and is looking to train staff in ‘design and build’ principles via Stirling University.
What does committing to the charter mean?
By signing the charter, your organisation undertakes an important two-step process:

1. **Sign-up to the charter and commitments**

   You will sign up to the charter through the Alzheimer’s Society website. Using your communication channels, you should then publicly announce your intention to deliver on the relevant charter commitment statements.

   Incorporate specific actions into your Dementia Action Alliance action plan if applicable.

2. **Delivery of the commitments specific to your stakeholder group within a set, individually determined and planned time-frame**

   A commitment to this charter will involve selecting a senior member of staff to champion the initiative and ensure that the appropriate delivery plan is established and progressed with the objective of completing the identified commitments.

   You should provide evidence on your progress and report back on this and your outcomes on the identified commitment statements.

   A commitment to the charter should also ensure that housing for people with dementia features in any of your housing policy, asset management and commissioning discussions.

Housing organisations should act as ambassadors for dementia-friendly communities and build relationships with local stakeholders to encourage them to adopt dementia-friendly practices.
Funded by the Department of Health as part of the post-diagnostic care and support programme in the Prime Minister’s challenge on dementia, the Life Story Network has explored what ‘home’ means to people with dementia and their carers in order to support them better when deciding whether to move home and during the actual transition.

It is apparent that home means not just the physical place – the house or flat, garden, street and local neighbourhood – but also the people: partners, spouses, family, friends and neighbours. It is where people feel safe and secure, surrounded by familiar belongings or people. The implications for housing providers include the following important aspects:

- **Provision of clear, concise and timely information about what is available to enable people to make informed choices**: A striking example is sheltered housing. Several residents of schemes described how other people perceived sheltered housing as nursing homes, with associated stigma.

- **The importance of enabling active involvement in decision-making**: Housing needs for the person with dementia and family carers for the retention of sense of identity and self-esteem and consequent wellbeing.

- **Recognition of the importance of cultural factors in supporting any transition**: For example, understanding the specific needs of LGBT people, older people without children and people from different ethnic backgrounds.

- **Consideration of people’s plans and aspirations**: The recognition that people with dementia still consider that they have a ‘life to live’ with hopes and wishes for their future.

- **The significant role played by housing officers and scheme managers in smoothing the transition from one home to another**: Their knowledge and attitudes towards people with dementia and their carers can make the difference between a successful move and one that is stressful and unsatisfactory.

- **The importance of retaining what is familiar, including social networks, when people do move**: Though well-intentioned, the temptation for families and professionals is often to get rid of treasured possessions and items of furniture to start afresh in the new home. These items can keep people connected and help them adjust to new living environments.
Commitment statements within the charter

The tables in Section 5 outline a number of commitment statements, grouped around the pillars of people, places and processes. These are intended as a guide for activity or to further inform your current work on dementia. It is not intended that the actions need to be standalone documents or actions; they should be incorporated into existing or planned work.

There are some commitment statements which will be relevant to all housing stakeholders and some which will only be relevant to some types or size of organisation. Each organisation should choose which actions to adopt or undertake. The commitment statements are presented as ‘building blocks’ – each progressive step requires more resources and/or time.

Hyperlinks and web addresses are included where there is reference to one single source. Alternatively, please refer to the Useful resources on page 43.
Commitment statements
<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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</thead>
<tbody>
<tr>
<td>Organisations don’t understand the challenge that dementia places on services.</td>
<td>■ Become a <a href="#">dementia-friendly organisation</a>.</td>
</tr>
<tr>
<td>Diagnosis is often at the point of crisis.</td>
<td>■ Arrange training and guidance for employees (particularly front line staff) to be able to <a href="#">identify the signs of dementia</a> and know how to seek support for early diagnosis as appropriate.</td>
</tr>
<tr>
<td></td>
<td>■ Develop a signposting pathway for the local area. See article in the December 2016/January 2017 edition of Living with dementia magazine at <a href="#">alzheimers.org.uk/magazine</a>.</td>
</tr>
<tr>
<td>People with dementia face challenges with communication making it difficult for organisations to respond to their needs.</td>
<td>■ Ensure staff are aware of <a href="#">advice and advocacy</a> services locally to support people with dementia to make decisions.</td>
</tr>
<tr>
<td></td>
<td>■ Produce information and guidance in easy accessible formats for people with dementia on services and facilities available and how they are provided.</td>
</tr>
<tr>
<td></td>
<td>■ Ensure staff are aware of techniques and approaches that engage people with dementia. Raise awareness in housing and local communities through Dementia Friends and <a href="#">dementia-friendly community</a> engagement.</td>
</tr>
<tr>
<td></td>
<td>■ Build an understanding with staff on the implications of <a href="#">mental capacity</a> and deprivation of liberty legislation including <a href="#">lasting powers of attorney</a> to support better communication.</td>
</tr>
<tr>
<td></td>
<td>■ Develop and implement <a href="#">training for all staff</a> on dementia awareness and on practices taken to support people with dementia.</td>
</tr>
<tr>
<td>The health and wellbeing of unpaid carers is affected.</td>
<td>■ Staff should be aware of and able to signpost unpaid carers to <a href="#">local support services</a> for help and advice.</td>
</tr>
</tbody>
</table>
## Commitments to understanding

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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</table>
| There is a lack of understanding by staff of the different needs of people with dementia and associated stigma. | - Appoint a Dementia Friends Champion or Champions in the organisation who provide leadership, promote dementia awareness, keep staff up to date with resources, and act as a support and sounding board for staff.  
  - Develop protocols for staff that cover dementia awareness, signs to notice and appropriate actions to take.  
  - Provide training on dementia so staff can develop their understanding of how it affects people differently.  
  - Develop a proforma document for use by front line staff to assess how suitable a person’s home is, including information on who to contact to take action.  
  - Share research into the suitability of housing features for people with dementia to make recommendations for change. |
| There are negative reactions from residents and/or communities towards people living with dementia. | - Increase awareness through the Dementia Friends initiative or other training as appropriate.  
  - Address negative language and perception and promote more positive messages about living with dementia.  
  - Promote engagement with dementia-friendly community activity and engagement using public body networks as catalysts.  
  - Work with other agencies who come into contact with people with dementia to share learning and improve responses, such as Alzheimer’s Society, Dementia UK and AT Dementia. |
<table>
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<tr>
<th>Issue</th>
<th>Actions</th>
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</table>
| The level of awareness of dementia amongst staff is lower than is necessary, coupled with inappropriate attitudes. | ■ Sign up to [Dementia Words Matter](#).  
■ Encourage all staff to become [Dementia Friends](#) and Dementia Friends Champions.  
■ Embed appropriate ways of working in line with a [dementia-friendly organisation](#).  
■ Ensure staff are aware of the relevant legislation, for example the Mental Capacity Act and Deprivation of Liberty Safeguards.  
■ Promote a dementia-friendly ethos and associated culture and values. |
| An increase in staff understanding and skills in working with people with dementia is needed. | ■ Develop a training programme which is tailored to staff roles and the organisation’s remit, reflecting the depth of understanding and level of skill needed.  
■ Develop or source a bespoke training programme, as required by different roles and occupations. |
| Staff members may develop dementia or need to care for a loved one with dementia. | ■ Ensure HR policies are supportive of staff who develop dementia or have caring responsibilities, tailoring the support to the individual’s assets, needs and wishes. |
## Commitments to signposting/navigation/advice and information

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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</table>
| **Staff do not understand where to access specialist advice and information.**    | ■ Develop signposting documentation and keep it up to date for staff and customers.  
■ Improve the accessibility of information and signposting for staff and customers.  
■ Ensure that staff know who to contact in their organisation for greater support. |
| **Staff are unaware of how to respond to the physical and sensory challenges faced by people with dementia.** | ■ Ensure staff know where to find guidance produced by relevant organisations concerned with physical and sensory impairments. See: [www.rnib.org.uk/nb-online/top-tips-guiding](http://www.rnib.org.uk/nb-online/top-tips-guiding) and [www.actiononhearingloss.org.uk/your-hearing/ways-of-communicating/communication-tips/tips-for-hearing-people.aspx](http://www.actiononhearingloss.org.uk/your-hearing/ways-of-communicating/communication-tips/tips-for-hearing-people.aspx)  
■ Consider what equipment and adaptations might help to make the home environment more comfortable and safe. |
| **People with dementia are at risk of becoming socially isolated and/or lonely.** | ■ Increase staff awareness to identify the signs of social isolation and/or loneliness and ensure reporting mechanisms are in place to address this.  
■ Ensure staff are able to signpost to relevant organisations, groups and activities in the local area.  
■ Staff engage with and develop community-based activities where appropriate. |
### Commitments to navigation/setting

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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</thead>
<tbody>
<tr>
<td>The services required for people to stay in their own homes are not widely known and therefore not accessed or offered.</td>
<td>- Staff need to know what options are available locally for care and support at home.</td>
</tr>
<tr>
<td>There is a lack of appropriate adaptations in properties to provide a more dementia-friendly environment.</td>
<td>- Communication of the principles and ways for home adaptations to be more dementia-friendly (for example, Alzheimer’s Society ‘Making your home dementia friendly’ and Stirling University booklet ‘10 helpful hints for dementia design at home’).</td>
</tr>
<tr>
<td></td>
<td>- Ensure dementia design principles (and other relevant design) are incorporated, including people living in their own homes.</td>
</tr>
<tr>
<td>People in housing with care settings are likely to be older and with more advanced dementia and co-morbidities.</td>
<td>- Consider how HAPPI design principles (and other relevant design) are incorporated.</td>
</tr>
<tr>
<td></td>
<td>- Where possible, co-produce the housing with care setting in conjunction with the Commissioner and housing and care staff.</td>
</tr>
<tr>
<td></td>
<td>- Make links with other local services to ensure people with co-morbidities are able to access the correct support.</td>
</tr>
<tr>
<td></td>
<td>- Develop policies that ensure that the housing with care setting remains appropriate for individuals as their dementia progresses.</td>
</tr>
<tr>
<td>People living in their own homes may need support to ensure that their home is safe and suitable and is adapted to meet their needs.</td>
<td>- Make staff aware of potential risks within a person’s home – for example prevention of falls.</td>
</tr>
<tr>
<td></td>
<td>- Use an audit toolkit to make an assessment of risk within the person’s home and potential management.</td>
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<tr>
<td></td>
<td>- Develop a referral pathway to manage risks where additional support is needed.</td>
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</tbody>
</table>
## Commitments to navigation/setting (continued)

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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</table>
| Confusion occurs because residents with dementia become lost or are unable to find their way. | ■ Identify individual strategies to support the person and minimise risk.  
■ Incorporate appropriate wayfinding into **landscape design** where people live in a housing with care scheme. |
| Consequential issues when people leave their homes to walk around (eg dehydration, exhaustion). | ■ Work with local areas/authorities to develop **dementia-friendly communities** to aid wayfinding and orientation in local areas.  
■ Contact local specialists for local advice and support.  
■ Provide or support people to access meaningful activities, points of interest, or stimulation, so for example, if they like to walk about, they can do so safely. |
| People with dementia experience stress in response to specific triggers in the environment. | ■ Arrange awareness-raising for staff to reinforce the very personal nature of dementia and ensure an appropriate response. Develop a ‘life story’ in conjunction with the individual and their carer/family for use by carers to ensure that appropriate responses are provided. |
## Commitments to raising awareness

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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<tbody>
<tr>
<td>There is a lack of knowledge about dementia within the local community.</td>
<td>▪ Run (where appropriate) or join Dementia Friends sessions aimed at stakeholders within the community to actively raise awareness.</td>
</tr>
<tr>
<td></td>
<td>▪ Engage with local <a href="#">Dementia Action Alliance</a> and <a href="#">dementia-friendly community</a> initiatives.</td>
</tr>
<tr>
<td>There is a lack of awareness about the risk of loneliness and isolation for people living with dementia.</td>
<td>▪ Increase staff awareness to identify the signs of social isolation and/or loneliness and ensure reporting mechanisms are in place to address this.</td>
</tr>
<tr>
<td></td>
<td>▪ Ensure staff are able to signpost to relevant organisations and groups and activities in the local area.</td>
</tr>
<tr>
<td></td>
<td>▪ In Housing with Care schemes, create opportunities for ‘accidental’ contact between people. For example, incidental seating areas.</td>
</tr>
</tbody>
</table>
### Processes

#### Commitments to applicability

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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<tbody>
<tr>
<td>People with dementia experience loss of memory for recent conversations or events and are sometimes confused, finding it harder to make decisions.</td>
<td>■ Through training, ensure staff understand, respond sensitively and keep a record so that an emerging pattern can trigger appropriate action, for example speaking to family or supporting individuals to make appointments.</td>
</tr>
</tbody>
</table>
| Processes and/or systems are not appropriately designed and are not dementia-friendly. | ■ Increase staff awareness of how memory loss of recent conversations and events impact on the ability of someone with dementia to engage with current systems and processes.  
■ Review current processes and systems, identify and make possible changes.  
■ Make a plan to implement longer term changes and updates to policies, procedures, services and practices to make them more dementia friendly. Involve customers in these processes, co-producing where possible. |
### Commitments to communication

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
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</thead>
<tbody>
<tr>
<td>There is incomplete and unclear information available.</td>
<td>- All information should be of good quality and produced, where possible, in conjunction with people living with dementia.</td>
</tr>
<tr>
<td></td>
<td>- Make use of DEEP guides, such as involving people living with dementia and the importance of language.</td>
</tr>
<tr>
<td>People with dementia lack capacity to maintain a tenancy.</td>
<td>- Develop a policy to outline how the organisation will support a potential resident and family and carers.</td>
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<tr>
<td></td>
<td>- Raise awareness amongst staff to identify a decreasing lack of capacity in existing residents.</td>
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<td>- Ensure policies and procedures are developed to ensure the correct support and response is in place.</td>
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### Greater information and support for people with dementia to access housing options

<table>
<thead>
<tr>
<th>Issue</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dementia-friendly practices can get overlooked at busy periods and moments of crisis.</td>
<td>- All information should be of good quality and produced, where possible, in conjunction with people living with dementia.</td>
</tr>
<tr>
<td></td>
<td>- Make use of DEEP guides, such as involving people living with dementia and the importance of language.</td>
</tr>
<tr>
<td>People with dementia lack capacity to maintain a tenancy.</td>
<td>- Promote active dissemination of work and contribution to consultations and discussions.</td>
</tr>
<tr>
<td></td>
<td>- Identify opportunities for continual professional developments specific to role and requirements.</td>
</tr>
</tbody>
</table>
Useful resources
Dementia-friendly housing charter

General


Journal of Care Services Management (2009) Volume 3 Number 3
This special edition of the journal was dedicated to housing and dementia and contains a range of evidence and experience-based papers on many aspects of housing and dementia. While access to the journal online has to be paid for, the Housing LIN has some hard copies available.
Dementia-friendly housing charter

**People**


Deep guides (various). The Dementia Engagement and Development (DEEP) Project. Available online at: dementiavoices.org.uk/resources/deep-guides/


**Places**


Places (continued)


Design


10 helpful hints for dementia design at home. Dementia Services Development Centre, University of Stirling (2010). Available online at: www.dementiashop.co.uk/products/10-helpful-hints-dementia-design-home


Adaptations and modifications

Dementia-friendly technology: a charter that helps every person with dementia benefit from technology that meets their needs. Alzheimer’s Society (2014). Available online at: www.alzheimers.org.uk/technologyCharter


Processes


Other useful organisations
Dementia-friendly housing charter

Care and Repair England
careandrepair-england.org.uk
Care and Repair England is an independent charitable organisation which aims to improve older people’s housing. It believes that all older people should have decent living conditions and be able to live in a home of their own choosing.

Chartered Institute of Housing
www.cih.org
An independent voice of housing which sets professional standards.

Dementia Engagement and Empowerment Project (DEEP)
www.dementiavoices.org.uk
The Dementia Engagement and Empowerment Project (DEEP) brings together groups of people with dementia from across the UK. DEEP supports these groups to try to change services and policies that affect the lives of people with dementia.

Dementia Action Alliance
www.dementiaaction.org.uk
This national body brings together a wide range of organisations, individuals and families committed to taking action to achieve the seven ‘I’ statements of the National Dementia Declaration.

Elderly Accommodation Counsel
www.eac.org.uk
EAC holds the most comprehensive database of accommodation available in the country. It also runs the First Stop information and advice telephone line.

First Stop Advice
www.firststopcareadvice.org.uk
This website offers a range of leaflets including one on housing options for older people.

Foundations
wwwFOUNDATIONS.uk.com
Foundations is appointed by the Department of Communities and Local Government to oversee a national network of nearly 200 home improvement agencies (HIAs) and handyperson providers across England.

Homes and Communities Agency
www.gov.uk/government/organisations/homes-and-communities-agency
The agency provides housing-related data on topics such as housing/dwelling numbers.
Housing and Dementia Research Consortium
housingdementiaresearch.wordpress.com
This is the only group that brings together housing providers, commissioners and others specifically with the aim of achieving robust research into accommodation and care for people with dementia.

Housing Learning and Improvement Network (LIN)
www.housinglin.org.uk/Topics/browse/HousingandDementia
www.housinglin.org.uk/Topics/browse/CareAndSupportatHome
(Housing LIN Care and Support at Home website)
Leading ‘knowledge hub’ for a growing network of housing, health and social care professionals in England involved in planning, commissioning, designing, funding, building and managing housing with care for older people. It also has a large range of resources on care and support at home, which include amongst others: co-production and communities; commissioning and procurement; innovative provisions; safeguarding.

Housing and Safeguarding Adults Alliance website
www.housinglin.org.uk/AboutHousingLIN/HASAA
The Alliance focuses specifically on improving practice and co-operation between the housing sector and adult social care and other organisations. It has a website hosted by the Housing LIN with some excellent resources focusing on housing and safeguarding.

National Housing Federation
www.housing.org.uk
National trade body for housing associations. The NHF has regional representatives keen to work in collaboration with health and social care commissioners and providers.

Social Care Institute for Excellence (SCIE) Dementia Gateway website
www.scie.org.uk/dementia/
Good resources on dementia.

SITRA and Homeless Link
www.sitra.org
A member organisation which brings together health, social care and housing and publishes useful resources.

Stirling University Dementia Services Development Centre
dementia.stir.ac.uk/housing-dsdc
Stirling University, Dementia Services Development Centre (DSDC) has gathered together a specialist team dedicated to helping commissioners and providers tackle the complex and practical issues which they are wrestling with now.
Appendix 1

To support the production of the charter, five Alzheimer’s Society service user review panels were asked for feedback on issues regarding housing.

The following 3 questions were asked to promote discussion:

**Question 1:**
What would you like to see in a housing charter?

**Question 2:**
What actions would you like the housing sector to take?

**Question 3:**
What difficulties do you have in relation to housing? What difficulties do you worry you might have in the future?
The feedback from five service user review panels highlighted the following issues and aspirations for people with dementia in relation to housing:

- To be enabled to live where you are familiar and are happy living
- Design – wet rooms, few steps, open plan layout, separate space for everyone.
- Technology – provide sensor alarms, built in whiteboards or screens (maybe accessed remotely to enable family to prompt), computers that are easy to use
- Accessibility for amenities/locality would be key
- Boredom – need to keep busy so within housing complexes perhaps wellbeing areas, hobby areas, meeting rooms / events to facilitate social connections
- When thinking of accommodation, need to consider space for another room for a carer or another member of family if needed.
- Staff etc need to have knowledge and a broad awareness of dementia.
- Accommodation needs to meet people’s needs as their dementia progresses and needs to be suitable for adaptations to be made as needed.
- Design – such as bath rail/aids, sockets at arm level, same texture/colour of flooring throughout – not blue as it can look like water
- Assistive technology – provide sensors/alarms for cooking, for example an intermittent alarm to make you keep returning to the cooker to check and stir it, sensor lights, sensors for movements
- Signage – such as doors labelled with pictures of the room’s use, ‘hot’ and ‘cold’ written on taps
- Training for housing staff and planners to be taken seriously
- Finding their own flat – need to be able to distinguish it from others with an item, familiar symbol or colour
- Loneliness and isolation.
Alzheimer’s Society is the UK’s leading dementia charity. We provide information and support, improve care, fund research, and create lasting change for people affected by dementia.

If you have any concerns about Alzheimer’s disease or any other form of dementia, visit alzheimers.org.uk or call the Alzheimer’s Society National Dementia Helpline on 0300 222 1122. (Interpreters are available in any language. Calls may be recorded or monitored for training and evaluation purposes.)