Enhancing the lives of people with dementia

Dementia design standards
Service Users Bedroom

A service users bedroom should be personalised and identifiable to the person.

Walls

- Avoid bold patterns and high contrasting borders, stripes or wallpaper with real life objects, as this can be confusing.
- Muted or plain walls should be used.
- Skirting boards and doorframes should be in a contrasting colour.
- Eggshell or Silk finish paint is recommended as it reduces glare. (May need repainting more frequently as not as durable)
- Good practice: pictures should be personalised and recognisable to the person.

Floor covering

- Avoid floor coverings with bold patterns or flecks as people with dementia often mistake this for dirt and will pick at the carpet.
- If an alternative to carpet is used flooring should be non-slip, plain and matt finish.
- All flooring should be in a contrasting colour to walls and skirting boards.
- Carpet strips should not be used as people with dementia often see this as a step.
- Dark rugs should not be used as people with dementia often see this as a hole in the floor.

Curtains

- Curtains should be plain or muted in design and pastel in colour to contrast with the walls.
- Good practice: Close curtains at night to reduce reflective glare as this can be disturbing for the person as this may have the effect of a mirror.
- Blackout curtain linings should be used in bedrooms.

Bedding

- Bedding should be plain or muted in design and pastel in colour to contrast with the carpet.
- Good practice: Use different colour sheets to help the person get in and out of bed more independently

Lighting

- For general lighting use ceiling mounted pendant lights. For single bedrooms use two, for double bedrooms use four.
- For reading in bed, use supplementary angle poise or directional light fittings.
- At dressing tables provide additional wall mounted light, a free standing up lighter or table lamp.
• Two-way switches located at the door and beside the bed should control principal lights.
• Provide facilities for dimming.
• Provide facilities for a night light
• Light sensors are available to detect movement.

Furniture
• Wardrobes should have an open fronted section to display a selection of daily clothing.
• Hinges on wardrobe doors should have piano hinges to prevent injury.
• Handles on drawers should be a contrasting colour.
• Chairs should be comfortable and constructed with rounded timber or padded upholstery to minimise collision injuries.
• Furniture should have rounded edges to prevent injury.

Vanity Unit:
• Vanity units should be in a contrasting colour to the sink.
• Taps should be traditional in appearance and be separate for hot and cold (not mixer taps or lever handled).
• Wall mounted mirrors should be removable or have doors that can cover the mirror as people with dementia often do not recognise themselves.
• Shelving should be near to the vanity unit to house or display personal toiletries.

Bedroom door
• Bedroom doors should be recognisable for the person with dementia; this can include any form of personalised features that the person can recognise e.g. pictures, colours, or photos. Memory boxes are available that can be wall mounted.

Commodes
• Commodes should have contrasting toilet seat to the commode (primary colour should be used e.g. red or blue.

Bedroom Chair
• This should be in a contrasting fabric to the commode to avoid confusion
**Lounge**

Lounge layouts need to accommodate lots of varied activities without conflict. Large areas should include areas for larger activities and quieter areas for personal space. Lounges should be as homely as possible, which should include safe traditional looking fireplaces to provide a social focus of attention.

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- Good practice: pictures should be personalised and recognisable to the person.

**Floor covering**

- Avoid floor coverings with bold patterns or flecks as people with dementia often mistake this for dirt and will pick at the carpet.
- If an alternative to carpet is used flooring should be non-slip, plain and matt finish.
- All flooring should be in a contrasting colour to walls and skirting boards.
- Carpet strips should not be used as people with dementia often see this as a step.
- Dark rugs should not be used as people with dementia often see this a hole in the floor.

**Curtains**

- Curtains should be plain or muted in design and pastel in colour to contrast with the walls. Pelmets and drapes should be avoided as this takes a lot of light out of a room.

**Lighting**

- Ceiling lights should be pendant or chandelier. Uplighters should be fitted on the walls to illuminate ceilings. Floor lamps and table lights should be used to provide extra lighting.

**Armchairs**

- There should be a variety of armchairs in the lounge to accommodate personal comfort.
- Armchairs should be in a contrasting colour to the floor
Dining rooms

The dining room should be homely and not look like a canteen.

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- Skirting boards and doorframes should be in a contrasting colour.
- Eggshell or Silk finish paint is recommended as it reduces glare.

Floor covering
- Avoid floor coverings with bold patterns or flecks as people with dementia often mistake this for dirt and will pick at the carpet.
- If an alternative to carpet is used flooring should be non-slip, plain and matt finish.
- All flooring should be in a contrasting colour to walls and skirting boards.
- Carpet strips should not be used as people with dementia often see this as a step.
- Dark rugs should not be used as people with dementia often see this a hole in the floor.

Curtains
- Curtains should be plain or muted in design and pastel in colour to contrast with the walls.

Lighting
- Ceiling lights should be multiple ceiling lights. Uplighters should be fitted on the walls to illuminate ceilings. Table lights should be used to provide extra lighting on sideboards.

Tables
- Round tables can give greater flexibility in terms of numbers that can be accommodated in different size groups and should prevent injuries as there are less sharp edges than rectangular tables

Chairs
- Chairs should not have any sharp angle corners and be easy to move. Designs should be available that are easy to slide over carpet to help residents pull their chair up to the table. Chairs need to have arms to assist people getting to their feet.
**Crockery**

- Crockery should be a contrasting colour to food e.g. crockery with a border or blue to enable people to see what is on their plate or in their cup. This will enable people to see their food on the plate and has proven to increase food consumption.

**Table Linen**

- Tablecloths and placemats should be in contrasting colours to each other and crockery to differentiate between the table, table setting and plate.

**Kitchen Units if appropriate**

- Dining rooms often have kitchen units, if this is the case wall units should be fitted with glass or opaque doors to identify what is in the cupboard. Cupboards with a solid door should have a picture describing what is behind the door e.g. dishwasher.

**Entrance and Corridors**

Entrance areas to the building should be clearly identified, a couple of planted containers either side of the entrance and a sign is all that is needed. Reception areas should be welcoming and pleasant with comfortable seating and lighting that guides the eye towards important elements such as signs and waymarkers. There should be landmark features like floral displays and significant ornaments to enable orientation. This area should be clear of clutter including the wall area which often has registration details certificates etc. Corridors should be wide with variations in width to create interest and to avoid the dull vanishing point appearance. Seating areas at frequent intervals can provide opportunities to rest and relax. These areas can be used to display points of interest e.g. memorabilia. Handrails should be comfortable and contrast with the walls this will enable physical assistance and also give a sense of the distance travelled. Every effort must be made to avoid corridors that end with a window or locked glazed door as this can create frustration to the person with dementia.

**Walls**

- Avoid bold patterns and high contrasting borders, stripes or wallpaper with real life objects, as this can be confusing.
- Muted or plain walls should be used.
- Skirting boards and doorframes should be in a contrasting colour to walls and doors.
- Eggshell or Silk finish paint is recommended as it reduces glare.
- Communal toilet doors should be clearly identified with appropriate signage and should be a completely different colour to other doors.
- Signage should be no higher than 4ft high.
Floor covering
- Avoid floor coverings with bold patterns or flecks as people with dementia often mistake this for dirt and will pick at the carpet.
- If an alternative to carpet is used flooring should be non-slip, plain and matt finish.
- All flooring should be in a contrasting colour to walls and skirting boards.
- Carpet strips should not be used as people with dementia often see this as a step.

Curtains
- Curtains should be plain or muted in design and pastel in colour to contrast with the walls. Drapes and pelmets should be avoided to allow for natural light.

Lighting
- Corridors should have multiple ceiling lights with Uplighters, lights should be on 3 different circuits and switches should contrast with walls

Pictures
- Pictures should provide points of local interest or memorabilia e.g. film stars from the 50s etc. Pictures of food near the dining room can point to the right direction.
- All areas should be clearly signposted with pictorial prompts (homely and age appropriate)
- Low reflective glass is needed to reduce glare and reflections.

Communal Bathrooms/Toilets
Shared bathrooms should be furnished and decorated to provide a pleasant experience, avoiding a sterile hospital like appearance. Shelving should be used to accommodate ornaments, towels and toiletries rather than mirrored cabinets. If bathroom fittings are white e.g. bath, sink toilet, shower or tiles are light in colour consider using coloured sealants at the joints to improve visibility.

Walls:
- Walls and tiling should be a different colour to the bathroom fittings. Tiling should be soft in colour and relaxing rather than jazzy and gaudy. Avoid 3 dimensional representations of objects.
- White tiling creates a clinical rather than homely appearance.
- Doors should be clearly identified with appropriate signage and a different colour to other doors.
**Flooring:**
- Flooring should be non-slip and matt with no patterns or flecks.
- Black and white tiles should be avoided, as people with dementia will see this as large holes in the ground.

**Lighting:**
- Bathrooms should be well lit with a minimum of 2 ceiling lights and one above the sink area on the wall.

**Taps:**
- Taps should be traditional in appearance and simple to operate with clear indications of hot and cold. Lever and mixer taps should be avoided.

**Toilets:**
- Toilet seats should contrast with the toilet and should be plain in colour, this will assist with positioning for sitting and direction for males when standing to urinate.
- Use traditional cisterns rather than concealed with contrasting handles.
- Toilet roll holders should contrast with the walls

**Grab rails**
- Handrails should contrast with the walls and bathroom fittings

**Showers**
- Showers should be level based and have controls that are simple to use and the shower head should have adjustable levels as people with dementia often do not like water over the top of their heads.

**Washbasins:**
- Washbasins should be traditional in appearance and should contrast with tiling and walls.
- A traditional plug and chain should be used, if a person is likely to flood the bathroom anti flood plugs can be useful.
- Soap holders and other fitments need to contrast with the wall tile or painted backgrounds.
- Mirrors should be removable or have doors to cover the mirror if needed.

**Ensuite Bathrooms**

Ensuite bathrooms should be furnished and decorated as above.
**Lighting:**
- As above but should include low-level lighting operating overnight to improve visibility. A movement sensor, which automatically switches the light on when a resident gets out of bed, can be used.
- The WC should be visible from the bed head position.

**Gardens**

Gardens can provide exposure to natural light providing vitamin D. A garden is a place for activity, exercise (important for people for people who walk a lot), a place for reflection etc.

Gardens should have a circular path rather than straight paths this should include areas of the garden with different points of interest.

Areas should include:
- Herb garden
- Sensory area with highly scented plants and shrubs with different textures e.g. lavender
- Communal patio
- Seating area
- Features e.g. bird table
- Barbecue area
- Planters with annual displays
- Pergola and trellis for climbing plants
- Working area for planting
- Sheltered area to avoid full sun but with warm aspect
- Easy level access to and from the building, ideally from the social and communal rooms
- Some privacy if bedrooms overlook the patio
- Direct access from the home to the path leading to and around the garden
- If the garden has fencing or railings, shrubs of varying heights should be planted close to the fencing to distract people living in our homes wanting to climb over the wall