

KEY POINT SUMMARY

OBJECTIVES

The objective of this paper is to document the development of an environmental audit tool suitable for use across the spectrum of people with dementia.

Assessing the Quality of Environmental Design of Nursing Homes for People with Dementia: Development of a New Tool

Fleming, R., & Bennett, K. 2015 | Australasian Journal of Ageing Volume 34, Issue 3, Pages 191-194

Key Concepts/Context

An existing Environmental Audit Tool (EAT) was modified with items that address the environmental needs of people in the final stages of dementia. The 56 items that were added to the EAT tool were developed from the Dementia Collaborative Research Center. The tool sought to define the desirable characteristics of physical environments for the delivery of support and care to people in the final states of dementia. The items were organized around 10 principles:

- 1. Be safe and secure
- 2. Be small
- 3. Be simple with good visual access
- 4. Have unnecessary stimulation reduced
- 5. Have helpful stimuli highlighted
- 6. Provide for planned wandering
- 7. Be familiar
- 8. Provide opportunities for a range of social interactions
- 9. Encourage links with the community
- 10. Be domestic in nature

Methods

This study represents a validation of this modified tool. Two independent raters assessed 30 care homes using the modified EAT tool as well as the Therapeutic Environment Survey for Nursing Homes. The latter was used to validate the tool against.



DESIGN IMPLICATIONS

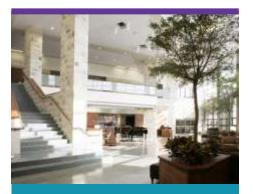
Tools like this audit survey instrument can help us understand how to design better environments for people with late-stage dementia.

Findings

The sample of 30 residential facilities included a wide range of provision of high care accommodation for people with dementia. The mean EAT-HC score for the 14 units that provided dementia-specific accommodation was significantly higher (P= 0.02, 2-tailed) than for the other units. The study provided an opportunity to evaluate the new questions added to the EAT. In the end, 50 of the 128 questions were deleted due to poor internal consistency (did not measure desired criteria). The other questions were validated through the evaluation process.

Limitations

This tool is new and needs to be utilized to be validated further in similar communities. The authors also noted that it is acknowledged that as the TESS-NH and EAT-HC were completed by the same raters, it is possible that correlations have been inflated by their knowledge of the scores given in the first assessment they used.



The Center for Health Design: Moving Healthcare Forward

The Center for Health Design advances best practices and empowers healthcare leaders with quality research that demonstrates the value of design to improve health outcomes, patient experience of care, and provider/staff satisfaction and performance.

Learn more at www.healthdesign.org