

# Safety in the home

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**Many people with dementia want to live at home for as long as possible. Often, this is with support from others. However, it can be difficult managing everyday situations if you have dementia, particularly as the dementia progresses and you get older. As a result, some people may not be as safe at home as they used to be. This factsheet looks at how a person with dementia can stay safe at home and in the surrounding environment. It identifies some risks in the home environment and suggests ways to manage them.**

It is important to find the right balance between independence and unnecessary harm. The person with dementia should, where possible, be involved in decision-making and their consent sought and given about changes. If this is not possible, it is important that those making the decision do so in the person's best interests.

Many of the issues in this factsheet are related to the normal ageing process. However, having dementia can place a person at higher risk of experiencing some of these issues. Everyone will experience dementia in their own way. The type of risks they face, and strategies to manage these, will depend on the individual and their situation.

## Tips: ways to manage risks

There are a number of ways to make a home and surrounding areas safer.

## **Seek advice from an occupational therapist**

Occupational therapy provides practical support to help people do the things they need and want. This includes day-to-day tasks, hobbies, interests and activities.

Occupational therapists can:

- suggest ways to carry out daily living activities (eg bathing, eating, dressing)
- help to select and use assistive technology and equipment to enable safe activity, and make adaptations to the home – eg hand rails in the bathroom
- assist with participation in a wide range of activities to help with physical, psychological, social and spiritual wellbeing
- provide advice to carers.

To arrange an occupational therapy assessment, speak to your GP or local social services department. For a private occupational therapy assessment, contact the British Association of Occupational Therapists and College of Occupational Therapists (see 'Other useful organisations').

## **Avoid falls**

Falls are a common and potentially serious problem affecting older people. The risk of falls increases with age. This may be because of a range of factors: medical conditions (such as stroke), medication, balance difficulties, visual impairment, cognitive impairment and environmental factors. Falls can have detrimental effects on people, including injuries, loss of confidence and reduced activity.

For some people with dementia, the condition can also increase the likelihood of falling. They may be less likely to recover as successfully as someone who does not have dementia. People who have been diagnosed with Parkinson's dementia or dementia with Lewy bodies are at a higher risk of falling.

There are a number of things that can be done at home to reduce the risk of falling:

- **Home safety** – Check the home for potential hazards such as rugs, loose carpets, furniture or objects lying on the floor. An occupational therapist may be able to help with identifying hazards and suggesting appropriate modifications.
- **Exercise** – Regular exercise can improve strength and balance and help to maintain good general health. A referral to a physiotherapist may also help. Speak to your GP to find out more.
- **Healthy feet** – Foot problems, including foot pain and long toenails, can contribute to an increased risk of falls. Seeing a podiatrist (a health professional who specialises in feet) can help. Contact your GP to find out more.
- **Medicines** – Medication can have side effects, including dizziness, which could increase the risk of a fall. Changes to medication or dosage, as well as taking multiple medicines, can increase a person's risk of falling. Speak to the GP about a medicine review if the person with dementia is taking more than four medicines.
- **Eyesight** – Regular eye tests and wearing the correct glasses may help to prevent falls.
- **Keep objects in easy reach** – If something is going to be used regularly, keep it in a cupboard or drawer that is easy to access.
- **Try not to rush** – Do things at an appropriate pace; many people fall when they are rushing.

## Improve lighting

As people get older they need more light to see clearly. This is because of age-related changes to the eyes. These changes include:

- pupils becoming smaller
- increased sensitivity to glare
- reduced amount of light reaching the retina.

Dementia can cause damage to the visual system (the eyes and the parts of the nervous system that process visual information), and this can lead to difficulties. The type of difficulty will depend on the type of dementia. Problems may include:

- decreased sensitivity to differences in contrast (including colour contrast such as black and white, and contrast between objects and background)
- reduced ability to detect movement
- reduced ability to detect different colours (for example, a person may have problems telling the difference between blue and purple)
- changes to the visual field (how much someone can see around the edge of their vision while looking straight ahead)
- double vision.

Improved lighting can reduce falls, depression and sleep disorders, and improve independence and general health. The following tips may help:

- Increase light levels and use daylight where possible.
- Minimise glare, reflection and shadows. Glare can be distracting and can reduce a person's mobility.
- Lighting should be uniform across any space, and pools of light and sudden changes in light levels should be avoided. This is because when a person gets older, their eyes adapt slowly to changes in light levels.
- Remove visual clutter and distractions such as carpets with floral patterns.
- Use colour contrasts to make things clearer, eg a light door with a dark frame.
- Leave a light on in the toilet or bathroom during the night. A night light in the bedroom may help if someone gets up in the night.

For more information see factsheet 527, Sight, perception and hallucinations in dementia.

## **Store dangerous substances safely**

Dangerous substances, including medicines, should be stored somewhere safe. If the person with dementia is unable to administer their own medication safely, arrangements should be made for someone else to do this. A dosette box could be helpful. These have separate tablet compartments for days of the week and/or times of day such as morning, afternoon and evening. Speak to the GP or pharmacist for advice on ways to manage medication safely and easily.

## **Adaptations to the home**

As people get older they may experience difficulties in managing everyday activities such as cooking or bathing, for a variety of reasons. People with dementia may experience additional challenges as their dementia progresses, because of memory problems or a reduced ability to carry out tasks in the correct sequence.

Adapting the home can help people with dementia to maintain their independence and reduce the risk of harm. It can also help to adapt some everyday tasks slightly. The following tips may help:

- Label cupboards and objects with pictures and words so that they can be identified.
- Where possible, use devices that only have one function and are easy to identify, for example a kettle.
- Place clear instructions that can easily be followed somewhere visible.
- Make sure the kitchen is well lit.
- If there are concerns about using gas or electrical appliances inappropriately, contact the gas or electricity company and ask for the person to be put on the priority service register. This means that they will be eligible for free regular safety checks and will be able to get advice about safety measures such as isolation valves (advice is also available for carers).

- Fit an isolation valve to a gas cooker so that the cooker cannot be turned on and left on. Devices are also available for electric cookers.
- Look into products that may help to maintain independence and safety such as electric kettles that switch off automatically.
- If the person's ability to recognise danger is declining, consider removing potentially dangerous implements such as sharp knives, but place other items for everyday use within easy reach.

For more information, see factsheet 437, Assistive technology – devices to help with everyday living.

## **Avoid fire**

There are ways to minimise the risk of fire in the home, including fitting smoke alarms and carbon monoxide detectors, and checking home appliances.

Local fire and rescue services can provide free home safety visits. They offer advice about how to make the home safer, as well as fitting smoke alarms and planning escape routes. To arrange a visit, contact your local fire service.

Electric and gas appliances can be dangerous. It is important to check appliances to make sure they are working safely. Some appliances will have built-in safety features.

## **Stay safe outdoors**

Being outdoors is important for people of all ages, and has many benefits. It is good for mental and physical health, including wellbeing, sleep and appetite. Being outdoors can have psychological benefits such as reduced depression and agitation. Activity can also enhance a person's independence and wellbeing. A garden, balcony or outdoor space can help to bring these benefits to people with dementia. It is important to manage any risks that may come with being outdoors.

The following suggestions may help:

- Make sure the area is well lit. This could be done with a sensor light, so that if a person is outside and daylight is fading they are still able to see adequately.
- Put a rail on any stairs to help the person get up and down them. It can also help to highlight the edges of each step.
- Avoid trip hazards such as loose paving slabs, unravelled hosepipes or uneven surfaces.
- Have seating areas so that the person can take a rest or enjoy being outside if they are unsteady on their feet.
- Use shelter to protect people from the elements if they want to spend a long time outside – eg a gazebo or a parasol over a table and chairs.

## **Use support networks**

If a person is on their own for long periods of time, or if they live alone, it is a good idea to establish if there is anyone (possibly a relative, friend or neighbour) who they would like to support them. It may be possible to arrange for them to keep an eye out for signs that something is wrong. If appropriate, they may be able to keep a spare set of keys and the phone number of who to contact if any concerns arise.

## **Arrange access**

Make plans for how someone can gain access if the person with dementia or their carer are unable to answer the door.

One option is to consider a key safe. A key safe is a secure box fitted outside the home where keys can be placed. Each key safe has an individual access code. This can be given to anyone who needs access if the person with dementia is unable to answer the door, eg a family member or care worker.

Community alarms are available to buy. These are pendants that enable someone to call for help in an emergency or when they are having difficulties, by pressing a button. To find out more about community alarms in your area, contact social services.

## **Record contact names and numbers**

It is a good idea to keep a list of useful phone numbers in a convenient location, or to programme them into the phone. These might include the numbers for:

- carers, friends or family members
- the local GP and hospital
- social worker and home care agency
- gas, water and electricity providers (especially in an emergency)
- local police.

You could use a system such as the In case of emergency (ICE) system, which helps people to know who to contact in case of an emergency. This is usually done by putting the name of the person you want to be contacted with the prefix ICE into the contacts section of your mobile phone, eg 'ICE – wife'.

A crime prevention officer can advise on any concerns about security. Contact the local police for more information.

It may also help to list information such as:

- practical steps on who to contact and how to deal with an emergency, eg how to use an alert system
- any medications the person with dementia may need
- advice on strategies that work for the person with dementia if they become distressed, eg to aid communication or reduce anxiety
- where to find the gas and electricity meters, the fuse box and stopcock

- where to find the point to turn off the main gas supply
- location of the first aid box.

Tell anyone who might need this information where to find the list.

You could also keep basic personal and medical details in an easy-to-access place in case of an emergency.

For details of Alzheimer's Society services in your area, visit [alzheimers.org.uk/localinfo](http://alzheimers.org.uk/localinfo)

For information about a wide range of dementia-related topics, visit [alzheimers.org.uk/factsheets](http://alzheimers.org.uk/factsheets)

## Other useful organisations

### **AT Dementia**

Trent Dementia Services Development Centre  
9 Newarke Street  
Leicester LE1 5SN

T 0116 257 5017

E [info@trentdsdc.org.uk](mailto:info@trentdsdc.org.uk)

W [www.atdementia.org.uk](http://www.atdementia.org.uk)

A web-based information resource on assistive technologies (including telecare) for people with dementia. In addition to general information the website contains a database of products that may be appropriate for people with dementia.

## **British Association of Occupational Therapists and College of Occupational Therapists**

College of Occupational Therapists  
106–114 Borough High Street  
Southwark, London SE1 1LB

T 020 7357 6480 (reception)

W [www.cot.co.uk](http://www.cot.co.uk) [www.cotss-ip.org.uk](http://www.cotss-ip.org.uk) (to find a private occupational therapist)

The British Association of Occupational Therapists is the professional body for all occupational therapy staff in the UK. The College of Occupational Therapists operates as a registered charity. The College sets the professional and educational standards for the occupational therapy profession and represents the profession at national and international levels.

## **Disabled Living Foundation**

Ground Floor, Landmark House  
Hammersmith Bridge Road  
London W6 9EJ

T 0845 130 9177 (helpline 10am–4pm weekdays)

E [info@dlf.org.uk](mailto:info@dlf.org.uk)

W [www.dlf.org.uk](http://www.dlf.org.uk)

[www.dlf.org.uk/living-made-easy](http://www.dlf.org.uk/living-made-easy) (advice and information website)

Charity that provides information about finding solutions to help with independent living, such as mobility aids.

## **Rica**

G03, The Wenlock  
50–52 Wharf Road  
London N1 7EU

T 020 7427 2460  
E mail@rica.org.uk  
W www.rica.org.uk

A national research charity that provides independent consumer information aimed at increasing mobility for people with disabilities and older people.

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This factsheet has also been reviewed by people affected by dementia. A list of sources is available on request.



## Alzheimer's Society National Dementia Helpline

England, Wales and Northern Ireland:  
**0300 222 11 22**

9am–5pm Monday–Friday  
10am–4pm Saturday–Sunday

[alzheimers.org.uk](http://alzheimers.org.uk)

Alzheimer's Society is the UK's leading support and research charity for people with dementia, their families and carers.

**Alzheimer's Society** | **Leading the fight against dementia**

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