## DEMENTIA AWARENESS TOOLKIT:

### Positive Risk Management Tool



#### INTRODUCTION

This document is intended to support your organisations risk assessment procedures, enabling you to quickly identify and reduce the risks associated with supporting people living with dementia. It has been designed to help you to firstly focus on positive risk benefits, before moving on to consider potential hazards, barriers and their associated risks. It has not been designed to covering every possible scenario as each organisation is different and unique. However, we hope that you find this document comprehensive and a useful tool to use and adapt to suit your situation.

You may have existing risk assessment procedures similar to sections 2 and 3 and therefore may only wish to use sections 1 and 4. The document has been designed to be used flexibly to suit the needs of your organisation.

The Positive Risk Management Tool in Section 4 identifies both barriers & their associated risks. It then goes on to highlight some of the common causes for these. There is a great deal of detail in this section, but this has been included <u>for reference only</u> to support individuals that may be unfamiliar with the symptoms people living with dementia may experience during their dementia journey. This detail has therefore been provided to <u>help to identify and evaluate the specific risk reduction measures</u> that may be appropriate for your event, experience, or activity. You may find it useful to give the risks a 'risk rating' using the scale provided. However, the most important task is the identification of actions that you plan to undertake to minimise the risk and deal with them should they occur.

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#### Section 1: Risk Rating Scale (used in Sections 3 & 4)

For each area identified in section 3 and 4 please do the following:

- 1. Identify the likelihood or chance of this causing harm to the people you are supporting by giving a score rating of 1 to 3 using the scale in the first column of the table on the left (A Likelihood/ Chance of harm).
- 2. Identify the potential degree of harm or severity to the people you are supporting by giving it a score rating of 1 to 3 using the scale in the second column of the table on the left (B Degree of harm/ Severity).
- 3. Add the score ratings from A and B together e.g. A + B = \_\_\_. The total of these two numbers added together is the risk rating scale for that hazard or risk you have identified. Hazards or risks scoring a total of 1-3 are judged as 'Low Risk', scores of 4 are regarded as 'Medium Risk', with scores totalling 5-6 are regarded as 'High Risk'. The higher the score the more attention should be given to putting in appropriate control measures to reduce or remove these hazards or risks.

A - Likelihood / Chance of harm	B - Degree of harm/ Severity
1. Remote	Slight - Very minor injury (minor scratches/cuts/grazes)
2. Possible	2. Serious - More serious injury such as sprains, more serious cuts, bruising. Injury needing medical attention from a first aider or medical practitioner. Reportable to RIDDOR.
3. Likely	3. Major – Serious injury requiring medical attention reportable to RIDDOR & HSE.

1-3	Low Risk
4	<b>Medium Risk</b>
5-6	High Risk

	1	2	3	Degree of Harm
1	1	3	4	
2	3	4	5	
3	4	5	6	
Likelihood				

#### **Section 2: Positive Risk Benefit Assessment**

Activity:		
Location:		Approved by:
Date:	Documented by:	Date:

#### Benefits – to the individual or group

1	Achievement	10	Improved daily functioning	19	Partnership role	28 Self-worth
2	Activist role	11	Improved mobility	20	Physical health	Sense of meaning and purpose
3	Autonomy	12	Improved sleep	21	Pleasure and joy	30 Sensory stimulation
4	Choice and control	13	Interest/Motivation	22	Pride	31 Wellbeing
5	Communication	14	Involvement	23	Promoting positive outlook	32
6	Community cohesion	15	Maintaining social networks	24	Promotion of independence	33
7	Contact with nature	16	Mood enhancement	25	Relationship role	34
3	Decision making	17	New Skills/increased knowledge	26	Satisfaction	35
9	Dream fulfilment/upholding wishes	18	Orientation improved	27	Self-Identity	36

COMMENTS ON BENEFITS:

#### Section 3: Hazards – to the individual or group

Ticl	call the hazards that apply an	d add	any additional hazards as ne	ecessa	ry		
1	Air quality/confined spaces	11	Manual handling	21	Transport/car parking		
2	Clothing and footwear	12	Medical facilities: location	22	Vulnerable adults		
3	Disease and infection - Covid	13	Medical facilities: quality	23	Walking safety		
4	Equipment/tools	14	Mobile phone – emergencies	24	Weather		
5	Fire/evacuation procedure	15	Noise and vibration	25	Absence of cover		
6	First aid provision	16	Safeguarding	26			
7	Flammables/COSHH (Control of Substances Hazardous to Health)	17	Suppliers: insurance	27			
8	Food provision	18	Supporters: ratio numbers	28			
9	Injury: slips, trips and falls	19	Terrain - paths, cliffs etc	29			
10	Lone working	20	Time of day	30			

A detailed assessment of each hazard ticked above should be given in Section 4: Positive risk Management of Hazards on page 6.

#### **Section 4: Positive Risk Management of Hazards**

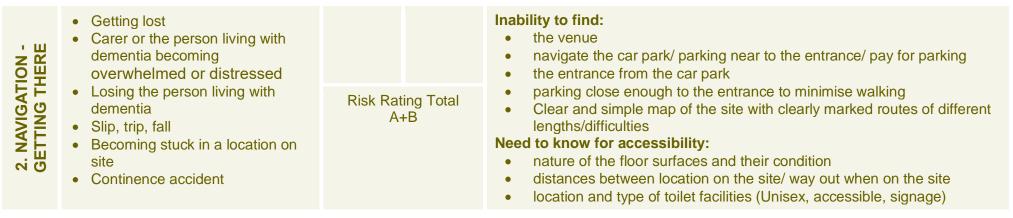
ree of harm erious Major 2 3	Risk Rating  A + B  1-6
	1-0

#### Section 5: DEMENTIA AWARENESS TOOLKIT: Positive Risk Management Tool В Likelihood Degree of BARRIER **CAUSES** RISKS 1 Remote <u>harm</u> 2 Possible 1 Slight 3 Likely 2 Serious 3 Major **Inability to find:** Getting lost 1. PLANNING TO Becoming overwhelmed or location route, transport links ATTEND distressed Risk Rating Total accessibility information including the security of the site · Losing the person living with A+B facilities and opening times of café/ number for enquiries dementia clear and simple map of the site with clearly marked routes of different

lengths/difficulties

knowledge of support available for people with a disability

Positive Risk Management (actions taken to minimise risk and deal with events should they occur)



BARRIER	RISKS	A Likelihood  1 Remote 2 Possible 3 Likely	B Degree of harm 1 Slight 2 Serious 3 Major	CAUSES
3. FINDING YOUR WAY AROUND	<ul> <li>Getting lost</li> <li>Carer or the person living with dementia becoming overwhelmed or distressed</li> <li>Losing the person with dementia</li> </ul>		ing Total ⊦B	<ul> <li>Inability to locate the following due to poor or the lack of signage:</li> <li>toilets (signage to get in &amp; out, how to use mixer/automatic taps)</li> <li>help &amp; support if required</li> <li>route to exit</li> </ul>

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4. COLOUR CONTRAST

- Disorientation caused by flooring/ changes in flooring
- Slip, trip or fall causes by disorientation
- Inability to use toilet facilities

Risk Rating Total A+B

#### **Inability to find:**

- details or photos of floor surfaces
- items such as threshold of steps, handrails, doors, door handles, inside and outside seating, toilet furniture

Positive Risk Management (actions taken to minimise risk and deal with events should they occur)

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BARRIER	RISKS	A <u>Likelihood</u> 1 Remote 2 Possible 3 Likely	B Degree of harm 1 Slight 2 Serious 3 Major	CAUSES
5. MOBILITY	<ul> <li>Fatigue or exhaustion</li> <li>Slip, trip, fall</li> <li>Becoming stuck in a location on site</li> </ul>	Risk Rat A-	ing Total ⊦B	<ul> <li>Inability to find:</li> <li>seating or places to lean and rest</li> <li>information on routes of different distances</li> <li>approximate timings of route/ events</li> <li>mobility aids</li> <li>support from staff if required</li> <li>find signage to indicate the way out easily when on site</li> </ul>

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# 6. NOISE/BUSY ENVIRONMENT

- Over stimulation leading to a change of behaviour/ shutting down and becoming non communicative
- Distress, anxiety, embarrassment

Risk Rating Total A+B

#### Inability to find:

- times when the venue is less busy/ telephone enquiries
- seating/ a quiet place to rest
- help & support if required quickly and easily

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#### В BARRIER Likelihood Degree of **RISKS** harm **CAUSES** 1 Slight 1 Remote 2 Possible 2 Serious 3 Likely 3 Major 7. SUPPORT/ STAFFING Becoming overwhelmed or **Inability to find:** distressed because of lack of whether staff will be easy to locate and identify sympathetic staff that will be understanding their needs support and understanding Risk Rating Total staff that will recognise methods of communication for support e.g. A+B sunflower lanyards, dementia cards, continence cards etc.

Positive Risk Management (actions taken to minimise risk and deal with events should they occur)

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## 3. COVID 19

- Contracting COVID 19
- Social distancing not being maintained
- Anxiety caused by feeling of being unsafe

Risk Rating Total
A+B

#### **Inability to find:**

 information about COVID 19 compliant modifications to the venue e.g. sanitising on entry to a building, wearing of masks, social distancing measures in the café, cleaning regimes etc.

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BARRIER	RISKS	A Likelihood  1 Remote 2 Possible 3 Likely	B Degree of harm 1 Slight 2 Serious 3 Major	CAUSES
9. BEHAVIOUR/ SOCIAL BOUNDARIES	<ul> <li>Over stimulation from external factors causing a change of behaviour/ shutting down and becoming non communicative or agitated</li> <li>Causing offence to others through inappropriate speech or physical contact/touching</li> <li>Fear of being judged due to a lack of understanding of professionals/ members of the public</li> <li>Fear of being stigmatised</li> <li>Fear of embarrassment and</li> </ul>	Risk Rati A+	_	<ul> <li>Inability to:</li> <li>becoming overwhelmed due to the inability to cope with sensory stimulation from everyday sounds, lighting, busy environments, unfamiliar settings, patterned surfaces, crowds of people, too many questions, lack of time to process what is happening, inability to gradually familiarise with the surroundings</li> <li>diminished social boundaries or using socially unacceptable speech when talking with others e.g. saying what they are thinking without realising, being blunt and appearing unfeeling or uncaring, using swear words.</li> <li>diminished boundaries around socially acceptable physical contact with others e.g. touching or hugging. Behaviours may be associated with aggression and frustration or expressing affection inappropriately.</li> </ul>

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BARRIER	RISKS	A <u>Likelihood</u> 1 Remote 2 Possible 3 Likely	B Degree of harm 1 Slight 2 Serious 3 Major	CAUSES
10. SENSORY IMPAIRMENT (INC. PROPRIOCEPTION)	<ul> <li>Physical injury (slip, trip, fall, cut, scald etc.) caused by lack of appropriate supervision and support</li> <li>Injury caused by eating inedible/dangerous or poisonous items/plants etc.</li> </ul>		ing Total +B	<ul> <li>Inability to have:</li> <li>the appropriate supervision and support based on the individual's sensory impairment e.g. vision, spatial awareness, depth/distance/speed perception, hearing, touch, smell, taste</li> <li>the correct level of support and supervision for the person living with dementia ('No body can care for like I can!')</li> <li>Proprioception, also known as kinaesthesia, is your body's ability to sense movement, action, and location. It's present in every muscle movement, allowing us to walk without consciously thinking about where to place our feet or arms next. It allows us to move around objects without collision or fear of injury. For some people living with dementia, this ability can be affected which may cause an individual to have an increased tendency to trip or bump into things or becoming injured by low hanging objects.</li> </ul>

Risk Rating Total
A+B

Positive Risk Management (actions taken to minimise risk and deal with events should they occur)

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