# UNDERSTANDING THE ENVIRONMENT

### **Questions to Ask**

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This is an adaptation of the Handout from Session Three of the Cognitive Abilities and Intervention Strategies (CAIS) Educational Series.

The CAIS Educational Series of five sessions can be found on the Michigan website called Improving MI Practices at https://www.improvingmipractices.org

The questions in this handout are some of the questions that are elaborated and more formally structured in the *Cognitive Abilities and Intervention Strategies* (*CAIS*): *Environment Questions to Ask* and the *CAIS*: *Environmental Intervention Strategies* by S Weaverdyck, available on the above website.

In this handout are examples of many questions you can informally ask yourself about a person's environment to better understand how well their physical environment supports this person's cognitive abilities. These questions are based on brain functioning and specific cognitive skills. However, you do not need to know anything about the brain or cognition to ask them.

The questions are organized under general intervention concepts that address needs a person might frequently experience in most environments.

A "Yes" answer suggests the environment is currently effective in supporting this person's cognitive abilities. The answers to these questions can suggest environmental changes that could build on this particular person's cognitive strengths and that could increase support for this person's cognitive needs.

These questions apply to any room in any setting.

More information about these questions is on the last few pages of this handout.

A. CONTRAST: Look for contrasts in:

- Color intensities (dark against light)
- Amount of lighting (dim versus bright)
- **Busyness** (patterns versus plain solids, or commotion versus quiet)
- 1. Are there contrasts that draw attention to areas of the room this person might need or want to use? (For example, are the room decorations in safe areas more visibly engaging than room decorations near dangerous exit doors?)
- 2. Are there contrasts that highlight objects this person might need or want to use? (For example, is the toilet seat different from the floor; the closet door different from the wall around it?)
- 3. Are edges of surfaces and changes in floor height highlighted with contrasts? (For example, edges of stair steps?)

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- 4. If this person needs to avoid an object, does that object look similar to the area around it? (For example, is an electrical outlet or dangerous exit door the same color as the wall around it?)
- 5. Is there a variety of moods created by various spaces, so this person can be drawn to an area that matches the particular mood they are in at the moment? (For example, busy high energy living room versus cozy quiet den?)

**B. PATTERNS**: Look to ensure there are no visual patterns that could:

- Be distracting
- Be misinterpreted
- Cause nausea or dizziness
- **Camouflage** an object
- 1. Are the floor and other surfaces free of patterns that seem to "move" when this person looks at them or when this person moves? (For example, free of alternating squares or blocks on floors, and free of plaids and repetitive patterns on floors, chairs, and shirts?) (Note your shirt and the clothes other people are wearing.)
- 2. Are all surfaces free of patterns, stripes, borders, or figures that look like changes in height or depth, bugs, specks, or pieces of paper to pick up? (Note for example, floors, walls, curtains, counter tops, and clothing.)
- 3. Are all objects easy to see because they are not in front of or beside a patterned surface or object? (For example, a pill or comb is not held in front of a patterned shirt?)
- **C. CLUTTER**: Look to ensure there are not:
  - **Too many objects** in the environment
  - Objects and information that are **recognized** or **useful only to other people**, and **not to this person**
  - Objects that are too **distracting** or **confusing**
  - Objects, people, sounds, or unusual lighting that are **inappropriate** for this person, causing them to feel overwhelmed, confused, or tired. Instead, look to ensure these are appropriately limited and selected to be **useful**, **interesting**, **inspiring**, and to **offer choices** to this person.
  - 1. Is there an appropriate amount of clothing in the closet and drawers?
  - 2. Is there an appropriate number of items served at a meal or placed on the table?
  - 3. Is there an appropriate limit to the variety, frequency, and volume of sounds?
  - 4. Are all sounds recognizable?
  - 5. Is there an appropriate limit to the number of people?
  - 6. Are all people familiar to this person?
  - 7. Are all notes, instructions, and equipment for other people out of sight? (For example, are notes and equipment for care partners or caregivers and health professionals inside drawers or behind cupboard doors?)
  - 8. Is the room free of sounds that, while not intended for this person, might elicit a response from them? (For example, doorbells, phones, conversations between other people, announcements, alarms, televisions, radios?)
  - 9. Is the room free of objects that attract unnecessary attention and prevent other important objects or spaces from being noticed?

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- 10. Is the room free of objects that are dangerous to this person at this time? (For example, small rugs on the floor or sharp corners on tables?)
- **D. CUEING**: Look for information that this person:
  - Can understand
  - Can see easily without searching
  - Can see without moving too much
  - Recognizes through various senses of hearing, seeing, feeling, touching, and tasting
  - Can use and trust
  - Is stimulated by
  - 1. Does the room tell this person what they need to know? (For example, that lunch is at 12:00 and the time is now 12:00?)
  - 2. Does the room say what is expected of this person and give ideas of what to do? (For example, we want you to feel at home here, or now it is time to sing or take a bath or shower, or would you like to fold the laundry in this basket?)
  - 3. Are all signs recognizable? (For example, do signs use written words only if this person can read and understand the words they read?)
  - 4. Are all cues low enough or high enough for this person to see?
  - 5. Are the cues frequent enough so this person doesn't have to remember? (For example, multiple signs directing to the bathroom?)
  - 6. Are other people in the room performing the same task as this person is? (For example, everyone is eating the meal, or singing the song?)
- E. NORMAL: Look for objects and spaces that:
  - Are familiar and recognizable to this person
  - Match their history, preferences, expectations, culture
  - Are in the **normal**, **expected place** for them
  - 1. Does the room look like a room this person would recognize or expect? (For example, does the bathroom look normal or like this person's bathroom in the past?)
  - 2. Do objects look normal? (For example, the bathtub looks like a recognizable bathtub, dishes like normal dishes?)
  - 3. Are tasks performed in the room where that task is normally done? (For example, hair combed in the bedroom rather than living room?)
  - 4. Are objects in normal, expected places? (For example, mirrors over sinks or dressers rather than in hallways or on doors?)
  - 5. When an object doesn't look normal, is it because it's dangerous or distressing and has been made to look like something else? (For example, does a door lock or an elevator button look like a picture of a flower?)
- F. HOMEY: Look for spaces and decor that:
  - Feel cozy
  - Help this person feel **comfortable and relaxed**

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## • Look and feel like **home**

- 1. Is the room cozy and emotionally comforting?
- 2. Are the colors warm and bright?
- 3. Are all objects in the room recognizable and comforting? (For example, no medical equipment in sight?)
- 4. Would everything that is visible in the room normally be in a home? (For example, no blood pressure cuff or scale in the living room?)
- 5. Would all sounds normally be in this person's home? (For example, no announcements, all bed or chair alarms sound like music or are audible only to you?)
- 6. Is the temperature warm or cool enough?
- G. LIGHTING: Look to ensure there are no areas where:
  - This person must work hard to see well
  - Eyes are required to **change** because this person moves **from light to dark** spaces or vice versa
  - Shapes and movement could be easily misinterpreted
  - 1. Is the lighting bright enough to read and see well?
  - 2. Are floors, walls, and surfaces free of all shadows?
  - 3. Do all areas of the room have the same amount of light (that is, no darker areas) even by windows, in corners, down hallways, and in closets?
  - 4. Are stairwells as bright as or brighter than other spaces?
  - 5. Are all objects easy to see and recognize? (For example, no objects are in front of windows or down long hallways that look like frightening or confusing shadows and shapes?)

### H. TEXTURE: Look for varied textures that:

- Reduce noise
- Reduce glare
- Identify objects
- Are stimulating to touch
- 1. Do the floors, walls, and ceilings absorb sound?
- 2. Are objects, the floor, wall pictures, and other surfaces free of glare (that is, they do not reflect light)? (Glare can make objects and surfaces look wet or difficult to see.)
- 3. Are there interesting surfaces or objects to feel?
- 4. Are floors non-slippery, even when wet?
- 5. Are hard surfaces covered to be more interesting, easy to identify, and sound absorbent? (For example, are there cloth wall hangings on the wall?)

## I. PRIVACY: Look for ways this person can:

- Be **alone**, but able to see and get company or help when desired
- Keep **personal items** away from others, yet readily accessible when this person needs or wants them

- 1. Is there space that belongs only to this person? (For example, a bedroom when dressing or bathroom when bathing?)
- 2. Are there doors in rooms that prevent other people from entering without knocking?
- 3. Are there drawers or objects that belong only to this person?
- 4. Does this person always have access to their own private space and possessions?

# **MORE ABOUT THESE QUESTIONS**

This handout lists examples of many **questions** you can **ASK YOURSELF** to understand how well the physical **environment meets** a person's **cognitive needs**, and how well the environment relies on or **uses** a person's **cognitive strengths**. The questions are based on specific brain functions and cognitive abilities. They focus on ways in which the **environment** can make it **easier** or **harder** for a person to communicate, perform tasks, and to feel competent and comfortable.

The environment has a major impact on behavior, on the amount of **distress** and **fatigue** a person experiences, and on how easily and successfully you can assist a person. These questions help explore why a particular person communicates or performs a task more easily some times than other times, is distressed, or is acting in a way that is distressing to others, as well as why the environment or **our own** behavior might be **unintentionally** distressing to this person. They also **suggest intervention** or support **strategies**.

While this handout focuses on the cognitive abilities, some rooms or environments are more likely than others to trigger **emotional distress** for a person. This is especially true for a person who has in their past or recently experienced a sexual, physical, or emotional encounter that was uncomfortable, painful, or traumatic. Rooms where such encounters might have occurred could easily cause distress for this person (for example, bedrooms, bathrooms, shower rooms, or others that involve removing clothing or being touched or someone else having control over this person). It is important to stop an interaction or task, or help this person leave the room if this is the case. Watch and listen closely to notice how this person seems to be feeling. Moving slowly, gently, and with respect and compassion is important.

A person with many cognitive needs usually **works** much **harder** to understand a room, communicate, or do a task than you or even they realize. Even for a person who moves around an environment, communicates, or performs a task well, **making** the **environment**, communication, and task **easier** for them can **conserve their energy** for more difficult or more pleasurable experiences, and can help **prevent fatigue**, **confusion**, and **emotional irritation** or **distress**.

These are questions to **ask yourself** or other care partners or caregivers, NOT to ask the person you are observing. The questions can be asked **informally** or more systematically by family, care partners or caregivers, or health and other professionals.

They should be asked **frequently** enough to accommodate changes in this person's needs, strengths, and desires.

The "**Cognitive Abilities and Intervention Strategies (CAIS): Environment Questions to Ask**" presents these questions in more detail and in a more formal structure in two formats: a Yes/No response format and a Four Point response format with additional instructions for quantifying your observations. It also includes additional questions.

The "Cognitive Abilities and Intervention Strategies (CAIS): Environmental Intervention

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**Strategies**" presents a variety of intervention strategies for each question in the "CAIS Environment Questions to Ask".

The CAIS consists of **four parts**, each with a list of questions and ideas of intervention strategies. The four parts are: 1) Cognitive Abilities, 2) Environment, 3) Communication, and 4) Task and Daily Routines.

The questions are meant to be asked through **observation** in general, while communicating with a person, or while you are helping this person with a task. The answers to these questions can help you **adapt** the **environment**, the **task**, or your **communication** strategies to accommodate this person's cognitive abilities and challenges. When you answer the questions during a task or while communicating with this person, you can **intervene immediately** and respond to subtle changes that occur minute by minute in this person's cognitive abilities.

The interventions generated are individualized to a particular person and a particular situation.

These questions apply to **any environment** (for example, any **room** or **building**) in **any setting**, and to **any task** (for example, decision making, housekeeping chores, hygiene, leisure activities, or a visit with a friend).

Answers to all of these questions can help determine which intervention strategies might be most effective in helping this person be **happier** and function more **independently**.

#### For more information

- The Michigan website called Improving MI Practices at https://www.improvingmipractices.org
   This website has updates and many additional handouts and resources, including all of these CAIS Handouts (43 total), the entire CAIS Educational Series, the Cognitive Abilities and Intervention Strategies (CAIS): Questions to
   Ask and the CAIS: Intervention Strategies, CAIS Background Resources, and the CAIS Online Course, as well as
   the Caring Sheets: Thoughts and Suggestions for Caring that are a part of the Michigan Dementia Care series.
- Mace, N., Coons, D., Weaverdyck, SE. (2005) <u>Teaching Dementia Care: Skill and Understanding</u>. Baltimore, Md.: Johns Hopkins University Press.

#### **Original Sources**

- 3. Weaverdyck, S.E. (1990) "Neuropsychological Assessment as a Basis for Intervention in Dementia". Chapter 3 in N. Mace (Ed.) <u>Dementia Care: Patient, Family, and Community.</u> Baltimore, Md.: Johns Hopkins University Press.
- Weaverdyck, S.E. (1991) "Assessment as a Basis for Intervention" and "Intervention to Address Dementia as a Cognitive Disorder". Chapters 12 & 13 in D. Coons (Ed.) <u>Specialized Dementia Care Units.</u> Baltimore, Md.: Johns Hopkins University Press.

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