



Assessing the Environment of the Person with Cognitive Impairment: Questions to Ask

Here are some questions to ask ourselves about the environment to assess how well the environment meets the needs of a person with cognitive impairment. These questions are based on brain functioning and specific changes in cognition. However, we do not need to know anything about the brain to ask them. The questions are organized under general intervention concepts that address common needs among persons with cognitive impairment.

A “yes” answer suggests the environment is doing a good job of compensating for cognitive impairment. The answers to these questions can suggest effective intervention strategies. These questions apply to any room in any setting.

More information is on the last page 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 (e.g., brighter lighting in safe areas and dimmer lighting near dangerous unused exit doors)?
 2. Are there contrasts that highlight objects she might need or want to use (e.g., toilet seat different from floor; closet door different from wall)?
 3. Are edges of surfaces and changes in floor height highlighted with contrasts (e.g., edges of stairs)?
 4. If she needs to avoid an object, does that object look similar to the area around it (e.g., 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 she can be drawn to an area that matches the particular mood she’s in at the moment (e.g., 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. Is the floor free of patterns that seem to move when this person looks at them or when he moves (e.g., alternating linoleum blocks on floors, patterns on chairs or blouses)?
 2. Are all surfaces (e.g., floors, walls, curtains, counter tops) free of patterns, stripes, borders, or figures that look like changes in height or depth, bugs, specks, or pieces of paper to pick up?
 3. Are all objects easy to see because they are not in front of or beside a patterned surface or object (e.g., a pill or comb held in front of a patterned blouse)?

C. CLUTTER: Look to ensure there are not:

- Too many **objects** in the environment
 - Objects and information that are **recognized or useful only to the caregiver, and not to this person**
 - Objects that are too **distracting or overwhelming**
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 sitting 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 a limited number of people?
 6. Are all people familiar to her?
 7. Are all notes, instructions, or equipment for caregivers out of sight?
 8. Is the environment free of sounds that, while not intended for her, might elicit a response (e.g., doorbells, phones, conversations between other people, public address systems, intercoms, televisions, audible pagers)?
 9. Is the room free of objects that attract unnecessary attention and prevent other objects or spaces from being noticed?

D. CUEING: Look for information this person:

- Can **understand**
- Can **see easily without searching**
- Can **see without moving too much**
- Recognizes though **various senses** of hearing, seeing, feeling, touching, and tasting

1. Does the environment tell him what he needs to know (e.g., that lunch is at 12:00 and the time is now 12:00)?
2. Does the environment say what is expected of him (e.g., we want you to feel at home here, or now it is time to sing or take a bath or shower)?
3. Are all signs recognizable (e.g., do signs use written words only if he can read and understand the words)?
4. Are all cues low enough or high enough for him to see?
5. Are the cues frequent enough so he doesn't have to remember (e.g., multiple signs directing him to the bathroom)?
6. Are other people in the room performing the same task as he is (e.g., 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 her **history, preferences, expectations, culture**
 - Are in the **normal, expected place** for her
1. Does the room look like a room she would recognize or expect (e.g., does the bathroom look normal or like her bathroom in the past)?
 2. Do objects look normal (e.g., the bathtub look like a recognizable bathtub, dishes like normal dishes)?
 3. Are tasks performed in the room where that task is normally done (e.g., hair combed in bedroom rather than living room)?
 4. Are objects in normal, expected places (e.g., 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 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 & relaxed**
 - Look like **home**
1. Is the room cozy and emotionally comforting?
 2. Are all objects in the room recognizable (e.g., no hospital equipment in sight)?
 3. Are the colors warm and bright?
 4. Would everything that is visible in the room normally be in a home (e.g., no blood pressure cuff or scale in the living room)?
 5. Would all sounds normally be in his home (e.g., no intercom or public address system, no alarms)?
 6. Is the temperature warm or cool enough?

G. LIGHTING: Look to ensure there are no areas where:

- This person has to **work hard to see** well
 - Her eyes are required to **change from light to dark** or vice versa
 - She can easily **misinterpret shapes and movement**
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 (i.e., no darker areas) even by windows, in corners, and down hallways?
 4. Are the insides of closets as bright as the rest of the room?
 5. Are stairwells as bright or brighter than other spaces?
 6. Are all objects easy to see and recognize (e.g., 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 walls and ceilings absorb sound?
 2. Are there interesting surfaces or objects to feel?
 3. Are objects, the floor, and wall pictures free of glare, so that surfaces do not reflect light and noise, or look wet?
 4. Are floors non-slippery, even when wet?
 5. Are hard surfaces covered to be more interesting, easy to identify, and sound absorbent? (e.g., cloth seat cover on a toilet)?

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 and accessible when needed or wanted
1. Is there space that belongs only to him (e.g., 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 him?
 4. Does he always have access to his own private space and possessions?

More about these Questions

This handout lists questions a caregiver can ask to discover how well the physical environment is accommodating the strengths and needs of a person with cognitive impairment. The questions are based on very specific changes to the brain and ways in which the environment can make it easier or harder for the person to perform tasks of daily living.

The environment has a major impact on behaviors, on the amount of distress and fatigue a person experiences, and on how easily and successfully a caregiver can assist the person with cognitive impairment. These questions help explore why a person is in distress, having trouble performing a task, or engaging in a particular behavior. They also suggest intervention strategies.

The caregiver is expected to ask these questions to her/himself or to other caregivers, but NOT to the person with cognitive impairment. The questions can be asked informally by family and other caregivers or more systematically with formal recording by professionals.

The “Cognitive Impairment Assessment Protocol (CIAP)” presents these questions more formally as an assessment instrument in two formats: a Yes/No and a six-point response format with instructions for quantifying observations.

The “Cognitive Impairment Intervention Protocol (CIIP)” presents a variety of intervention options for each question on the CIAP.

The CIAP and CIIP consist of four parts, each with a series of questions and intervention options: Cognition, Environment, Caregiver interactions, and Task and Daily Routines. The questions here are part of the Environment CIAP and CIIP.

The questions are meant to be asked either as a general assessment or while the caregiver is helping with a task. The answers to these questions can help a caregiver modify the environment, the task, or communication strategies in order to be more helpful by accommodating the person’s feelings, abilities and cognitive difficulties. When they are asked during a task, the caregiver can intervene immediately and respond to subtle changes that occur minute by minute in the person’s cognitive abilities.

These questions apply to any environment (e.g., any room) in any setting.