



# Planning for my future:

## **Step 2** to strengthen independence

(Clinician Version)

Name.....

Date of birth.....



**Authors:** Professor Dimity Pond, Robin Scott, Dr Jenny Day, Evelyn Mueller, Nigel Catzikiris, Glyn O'Toole, Elizabeth Cunningham and Deborah McKinney.

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# Introduction

The '*Planning for my future*' booklets have been developed to assist older people, particularly people with changes to their cognition, to reflect and identify aspects of their everyday functioning that are difficult or troublesome. Following a supportive decision making conversation with their health care provider (e.g. GP, Practice Nurse, Care Co-ordinator, Community Nurse), which assesses risks to their health and wellbeing, strategies are collaboratively negotiated and planned to enhance or maintain independence and quality of life.

The two booklets, which involve the risk assessment and risk management steps, have been designed with six key community care and chronic progressive disease management principles in mind:

1. Person centred care
2. Consumer directed care
3. Supported decision making
4. Wellness/Healthy ageing
5. Risk enablement
6. Enablement/Independence

Each of these cross-disciplinary care principles facilitates ageing-in-place through better management and self-management of chronic progressive conditions, such as dementia, enhancing independence, and assisting older people to maintain as much control over their health care decisions as possible.

The risk enablement approach embodied in the booklets considers both physical and psychological aspects of risk. For example, the impact on wellbeing and identity if an older person is unable to engage in regular social engagement with friends and leisure activities, such as card playing. The process of assessing risk involves identifying the least restrictive actions/alternatives through balancing both the positive benefits of taking risks with the negative effects of risk avoidance. It also involves monitoring changes in an older person's priorities and abilities over time.

# How to use the booklets

Two booklets and two steps comprise the '*Planning for my future*' process with older people.

## Step 1:

The first booklet is a patient self-assessment tool. It is intended to be used by older people who want to improve or maintain their current level of independence and remain living independently for many years to come, particularly where they have concerns about changes to their cognition. The Step 1 booklet is designed to help them, their family, friends/others who are important in their life, to identify changes in what the person can do now and risks in their daily activities that may threaten independence and their quality of life.

In completing the first booklet, the older person, with or without the support of a carer/family member, considers:

- What they would like to be different (i.e. about their way of living) and what they would like help with,
- One or more functional aspects of their lives and the difficulties they face in daily living, and
- Why they have trouble and what might help.

Once completed, the older person is encouraged to use the booklet to have a conversation with their health care provider (e.g. GP, Practice Nurse, Care Co-ordinator, Community Nurse) about risks to their health and wellbeing and strategies to enhance or maintain independence and quality of life.

## Step 2:

The second booklet (i.e. **this** booklet) is designed to be used by you, the health care provider, in conversation with the older person/their carer/family member and in conjunction with their completed Step 1 booklet. It is important to discuss what the older person identifies as changes to their functioning and the risks these changes pose to them so that, together, you can introduce strategies that reduce risks and enhance independence/quality of life. In completing Step 1, they have thought about their concerns and looked at the list of activities covered by their booklet and rated themselves using the traffic light system; green meaning "**never happens**" (or is of little/no concern), amber "**sometimes happens**" and red "**happens more frequently**" (or is of greater concern). In the column to the right, they have said why they think they might have these troubles and what they think might help their independence or quality of life. Based on this information and your conversations with the older person, identify the level of risk for each question/activity and discuss ways to enable continuation of activities with less risk. Resources are provided to support discussion of functional changes and the introduction of strategies, which enhance independence/wellbeing, including those identified by older people themselves. A copy of each of the two booklets can be kept in the patient's health records so that strategies and change in the older person's function can be monitored and re-visited over time.

Questions in Booklet 2 denoted with \* indicate these questions were not asked in booklet 1 – patient self-assessment.

Where the older person does not wish to complete a self-assessment (Step 1) independently, the Step 2 booklet can be complete together.

## Booklet Completion *Example*



### 5) Emotional Wellbeing

Contact with other people is very important for our emotional wellbeing and how happy and content we feel. Exclusion from social activities can affect how we feel and lead to depression and anxiety.

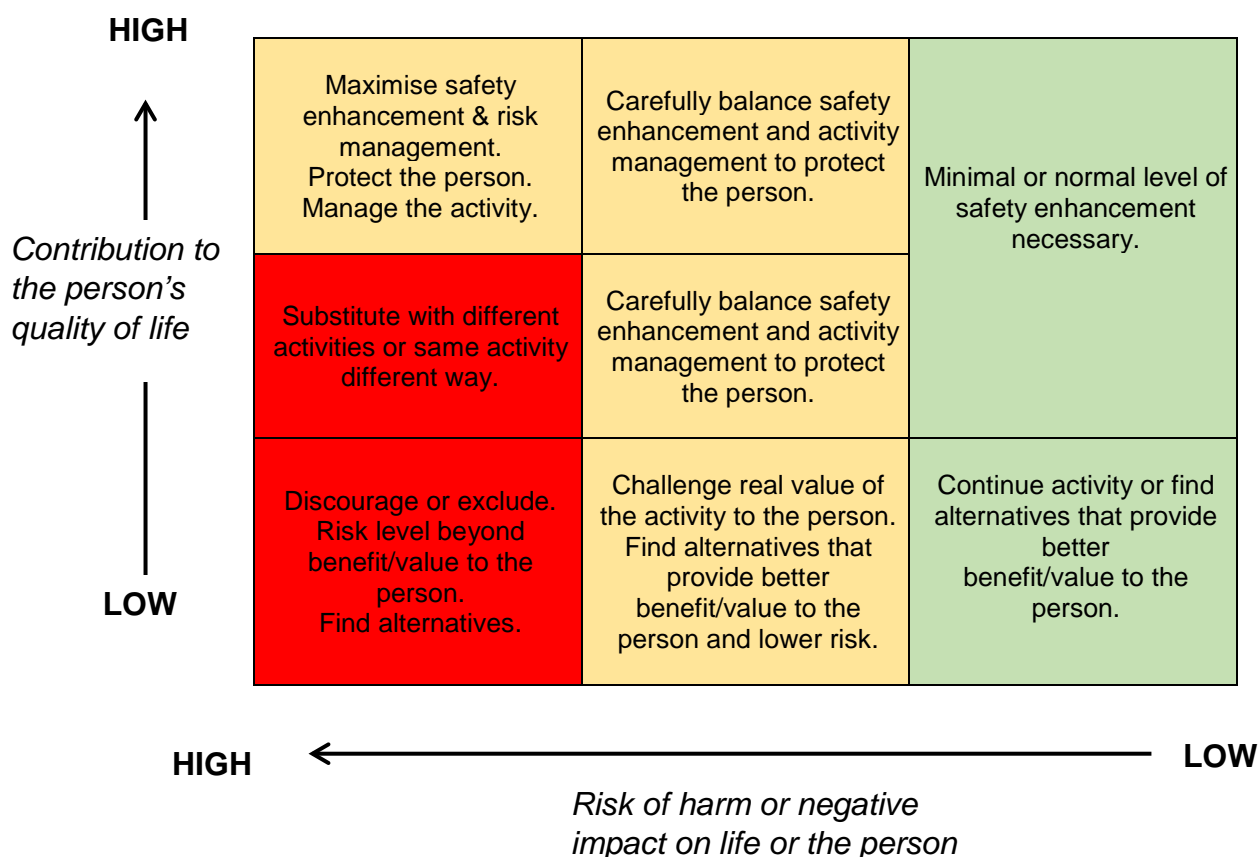
Emotional Wellbeing	How often does this happen? N = Never, S = Sometimes (1-3 times/fortnight) F = Frequent			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	Suggest reasons for this and ways to manage it.
Do your family, friends or neighbours visit you? You them?	X					X	Encourage/discourage visits Frequent family visits in past when he could drive and family less busy. Now needs transport help to visit family and friends – also for social outings. Discussed- public transport options, community transport help, car-pooling with friends for card games/leisure
Do you have regular contact with family, friends or neighbours via the telephone?		X				X	Occurrence waits for family/friend to ring. Especially family as he dislikes interrupting when they are busy with work and children. Discussed-planning a regular 'good time' to ring family twice per week. Introduced idea of Skype and emailing via tablet for family and friends.
Do you prefer to stay at home and do not like to leave the house			X			X	Embarrassment, falls issues Feels less confident now that he no longer drives and has been at home more. Feels safe at home and not a 'bother'. GDS 5. Discussed- inviting his card group to meet and play at his home/carpooling to card games.

# ‘Risk’ Enablement Assessment

(Adapted from: UK Department of Health, National Dementia Strategy (2010). ‘Nothing Ventured, Nothing Gained’: Risk Guidance for People with Dementia.)

The definition of ‘risk’ varies from person to person and over time. ‘Risk’ is also often mixed with terms such as ‘danger’ and ‘hazard’. However, in healthcare we tend to identify a hazard to health and wellbeing and then judge how likely it is (i.e. the risk) that the hazard will cause adverse effects or harm. However, risk is often context- and person-specific and risk assessment needs to consider the impacts on the older person’s wellbeing and physical safety as well as their autonomy. Importantly, assessments and decisions about risk should not be based on assumptions. For example, that all people with dementia are ‘at risk’. Rather, they should be based on an understanding of the person, their abilities and the hazards/risks they face. Risk enablement strategies should identify both risk likelihood and seriousness.

One suggested assessment framework (the ‘Heat Map’ below) balances each activity or behaviour (risk) against contribution to the person’s quality of life.



(Adapted from: UK Department of Health, National Dementia Strategy (2010). ‘Nothing Ventured, Nothing Gained’: Risk Guidance for People with Dementia.)

## Can You Help?

Health care practitioners from different disciplines have helped to put together the resources in this booklet. However, to ensure this resource works well in practice, all clinicians are encouraged to share effective strategies which have been ‘road tested’ in their practice. Together we can support one another to achieve healthy ageing and enhance the quality of life for older people with dementia. To suggest addition/change of resources contact Professor Dimity Pond, University of Newcastle (dimity.pond@newcastle.edu.au).

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General Questions	YES	NO
Do you have vision problems		
Do you have hearing problems		
Do you have dentures		
Do you have diabetes – type		
Do you have arthritis – type		
Do you have asthma		
Have you recently had surgery – type		
Do you have a heart condition		
Do you have any tremor conditions		
Have you had a stroke		
Have you had a heart attack		
Any other health related conditions/diagnoses?		
<p>Consider the person's responses to the following questions (from Booklet 1):</p> <p><i>What do I want to be different (i.e. about my way of living)?</i></p> <p><i>What do I want to do for myself?</i></p> <p><i>What am I happy for others to do for me?</i></p> <p><i>What would a great day look like for me?</i></p>		





# 1) Sleeping

Getting a good night's sleep is important. Adequate sleep and healthy sleeping habits can improve your health, wellbeing and enjoyment of life.

Sleeping	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	Suggest reasons for this and ways to manage it.
You go to bed earlier or later than before							How much earlier / later
Your sleep pattern is disturbed (e.g. getting to sleep or back to sleep, get up during the night)							Continence issues, caffeine before bed
When you wake up you feel unsure of where you are							Disorientation
Are you reluctant to get out of bed in the morning?							Mood, sleep quality
Do you nap during the day?							Fatigue
Other issues or problems or additional comments:							

## Sleeping – how to manage risks?

To help you remain at home, but also to ensure you get adequate sleep and reduce fatigue, please select some of the options below that you would feel comfortable to have organised:

- ☐ Heavy curtains or blinds to block excess light in bedroom
- ☐ Air conditioner to regulate temperature
- ☐ Pressure care mattress
- ☐ Bed height adjustments
- ☐ Night-light with sensor
- ☐ Talking alarm clock
- ☐ Calendar (either paper or electronic)
- ☐ Energy conservation education

Sleep Hygiene or Good Sleeping Habit Advice	
Get regular	Go to bed at more or less the same time every day
Sleep when sleepy	Only try to sleep when you actually feel tired
Get up and try again	If you cannot get to sleep after trying for 20 minutes or more, get up and do something calming or boring
Avoid coffee and nicotine	Best avoided for 4-6 hours before going to bed
Avoid alcohol	Best avoided for 4-6 hours before going to bed
Bed is for sleeping	Try to only use your bed for sleep and sex
No naps	Try to avoid day time naps
Sleep rituals	Develop a ritual or pattern at bed time
Bath time	Have a hot bath 2-3 hours before bedtime
No clock watching	Clock checking can result in negative sleep patterns
Use a sleep diary	Track how your sleep is going
Exercise	Regular exercise can help with getting a good sleep
Eat right	Nutritious and well-balanced diet will help you sleep
The right place	Make sure your bed and room are comfortable
Daytime routine	Keep the same day routine even if you are tired
Do not rely on sleeping pills	Only help temporarily

Adapted from Sleep Hygiene (2016), retrieved from [https://www.sleepoz.org.au/images/FactSheets/AT09-Sleep\\_Hygiene.pdf](https://www.sleepoz.org.au/images/FactSheets/AT09-Sleep_Hygiene.pdf)

**Online resources and printable fact sheets:**

<https://www.otaus.com.au/find-an-occupational-therapist>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-sleepdisturbances-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-bedroom-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<http://www.cci.health.wa.gov.au/docs/Info-sleep%20hygiene.pdf>

[https://www.sleepoz.org.au/images/FactSheets/AT09-Sleep\\_Hygiene.pdf](https://www.sleepoz.org.au/images/FactSheets/AT09-Sleep_Hygiene.pdf)



## 2) Eating & Drinking

It is important to eat well – especially if we have medical conditions (such as diabetes), which benefit from healthy eating and drinking. Eating well can be harder when you live alone or have difficulty preparing/cooking food.

Eating & Drinking	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others? L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you think your current diet is nutritious?							Food variety
Do you forget to eat meals?							Pattern / Occurrence
Do you have trouble using eating utensils?							Which type
Do you have difficulty bringing food to your mouth?							Tremor, stiffness, vision, pain
Are you gaining or losing weight without trying?							Amount/ in what time period?
Are you eating or drinking less than you used to?							Amount
Are you eating or drinking more than usual?							Amount – snacks, meals

Eating & Drinking	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you feel less hungry or interested in food now?							Occurrence
Do you have trouble swallowing food or fluids?							Oral examination – dentures, ulcers
Do you have pain when you chew or swallow?							Oral examination
Do you feel dizzy when you eat or drink less than usual?							Occurrence, hydration
Do your friends / family express concern about your eating and drinking?							Who and how so
Other issues or problems or additional comments:							

## Eating & Drinking – how to manage risks?

To help you remain at home, but also to ensure you are able to prepare/cook nutritious meals, please select some of the options below that you would feel comfortable to have organised:

- ☐ Lunch clubs
- ☐ Community or collective kitchen (seniors' community centre dining room)
- ☐ Food co-operative
- ☐ Meals on Wheels
- ☐ Education on food nutrition
- ☐ Menu Planners
- ☐ Improved variety and quality of food
- ☐ Consultation with dietician
- ☐ Consultation with dentist
- ☐ Consultation with GP regarding dysarthria or dysphagia

### Other strategies:

- Using a straw when drinking
- Using a 'knork' to replace cutlery (weighted fork designed to cut food to reduce risk of cutting fingers or mouth)
- Plates with lips or rims
- Change food textures, temperature and/or seasoning levels

### Online resources and printable fact sheets

<http://www.seniorservicesguide.com.au/>

<http://www.homeinstead.com.au/services/>

<http://www.accesshomes.com.au/content/home-help-all-states>

<http://www.activeandhealthy.nsw.gov.au/assets/pdf/7-falls-prevention-healthy-eating.pdf>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-nutrition-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>



### 3) Physical & Leisure Activities

One of the most important things we can do to maintain our health and our independence is physical and leisure activities.

\* Indicates questions not asked in booklet 1 – patient self-assessment

Physical & Leisure Activity	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you participate in physical activity?							What types, when
Do you participate in leisure activities (e.g. reading, craft, gardening)?							Occurrence
Do you feel tired or short of breath when you do light exercise?							Duration/Occurrence
Do you feel unsteady on your feet?							When
Does pain prevent you from being physically active?							Medical condition
Do you have problems with your sight that cause you to trip or fall?							Scanning, vision assessment / correction

Physical & Leisure Activity	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you have difficulty judging distances?							Long or short
* Do you have unexplained bruises or grazes?							Where and what level
Have you tripped or fallen at home or in the community?							Where and cause
Do you avoid going out because you are scared of tripping or falling?							History of falls
Have you lost your balance or fallen using stairs?							Getting up or down
Do you feel dizzy or lightheaded when getting up from a chair or out of bed?							Getting up or down
Have you lost your balance or fallen getting in or out of a chair?							Chair type
Have you fallen out of bed?							Occurrence



Physical & Leisure Activity	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	Suggest reasons for this and ways to manage it.
When walking do you steady yourself by holding onto furniture or objects?							Furniture type
*Do you avoid areas in your house because you fear you will fall?							
*Do you put off participating in leisure activities that you previously did/enjoyed?							
Other issues or problems or additional comments:							

## Physical Activity– how to manage risks?

To help you remain at home, but also to ensure you are able to maintain your activity levels, please select some of the options below that you would feel comfortable to have organised:

- ☐ Getting a walking aid (walking stick or frame)
- ☐ Community exercise group
- ☐ Community Day Centres
- ☐ Attend a local falls prevention program
- ☐ De-cluttering of home environment (rugs, unused coffee tables, etc.)
- ☐ Improve lighting in home
- ☐ Having handrails installed in your home
- ☐ Highlighting steps or doors
- ☐ Have a personal alarm system installed
- ☐ Having rails or bed stick fitted to bed
- ☐ Plastic guards on furniture
- ☐ Consultation with occupational therapist
- ☐ Consultation with podiatrist
- ☐ Consultation with physiotherapist

### Others strategies:

- Wearing suitable footwear
- Place everyday items that are used regularly within easy reach to avoid overreaching
- Completing brain exercises (puzzles)
- Completing light strength training exercises
- Improved lighting within the home

### Online resources and printable fact sheets:

[http://www.activeandhealthy.nsw.gov.au/exercise\\_at\\_home](http://www.activeandhealthy.nsw.gov.au/exercise_at_home)

<http://www.activeandhealthy.nsw.gov.au/assets/pdf/12-how-to-get-up-if-you-have-a-fall.pdf>

[http://www.activeandhealthy.nsw.gov.au/home\\_safety\\_checklist](http://www.activeandhealthy.nsw.gov.au/home_safety_checklist)

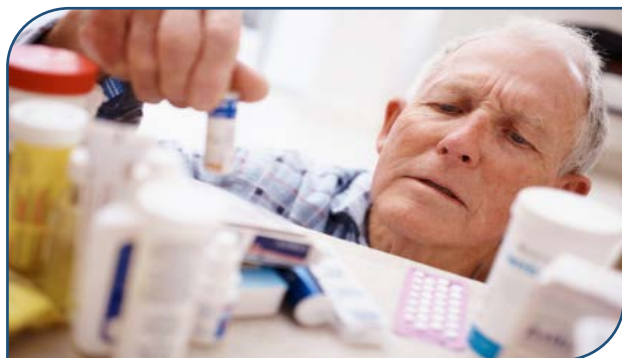
[http://www.mdfoundation.com.au/resources/1/MD\\_S-TandF\\_2013\\_Web.pdf](http://www.mdfoundation.com.au/resources/1/MD_S-TandF_2013_Web.pdf)

[http://www.mdfoundation.com.au/resources/1/MD\\_LowVision\\_2013\\_Web.pdf](http://www.mdfoundation.com.au/resources/1/MD_LowVision_2013_Web.pdf)

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-falls-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-leisurelifestyle-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://fightdementia.org.au/national/support-and-services/carers/activities-for-people-with-dementia>



## 4) Medications

Knowing what medications to take, when to have them, and why they are important for your health can be quite difficult. Taking the right medications helps you to feel well and stay active.

\* Indicates questions not asked in booklet 1 – patient self-assessment

Medications	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and if necessary ways to manage this</i>
Do you take medications not prescribed by your doctor (e.g. multi-vitamins, herbs, fish oil)?							Which type and reason
Do you have trouble reading medication labels and/or instructions?							Vision, language
Do you have trouble opening medication containers / packets?							Physical strength/pain/container type
Do you take medication to help you sleep, reduce pain or improve your mood?							Prescribed or over the counter

Medications	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and if necessary ways to manage this</i>
Do you take five (5) or more medications?							List
Do you visit more than one (1) doctor for treatment?							Include specialists
Do you get your medications from more than one (1) chemist / pharmacy?							What types
Do you keep old or expired medications?							Stockpiling, drug interactions
*Do you have difficulty understanding medication instructions?							Comprehension
*Do you have trouble swallowing some / all medications?							Which medications? (tablets, liquids)
Have you forgotten that you have taken, or forget to take medication?							Taking twice the amount next time

Medications	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and if necessary ways to manage this</i>
Do you not take some of your medication because of the side effects?							What side effects
Do you drink alcohol?							Duration / occurrence
Do you drink caffeine (tea, coffee, energy drinks)?							What type and occurrence
Do you smoke?							Occurrence
*Do you use illicit drugs?							What type and occurrence
Other issues or problems or additional comments:							

## Medications – how to manage risks?

To help you remain at home, but also to ensure you are able to manage your health, please select some of the options below that you would feel comfortable to have organised:

- ☐ Consultation with chemist/pharmacist
- ☐ Webster-paks
- ☐ Electronic Medication Reminders/Dispensers
- ☐ Talking labels
- ☐ Printed labels and signs on cupboards
- ☐ Alarms and reminders on watches, clocks, phones and / or computers

### Other strategies:

- Magnifiers
- Larger print labels and instructions
- Have instructions for medication printed in your mother tongue

### Online resources:

<http://www.nps.org.au/health-professionals/for-your-patients>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-medication-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>



## 5) Emotional Wellbeing

Contact with other people is very important for our emotional wellbeing and how happy and content we feel. Exclusion from social activities can affect how we feel and lead to depression and anxiety.

Emotional Wellbeing	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do your family, friends or neighbours visit you? You them?							Encourage/discourage visits
Do you have regular telephone contact with family, friends or neighbours?							Occurrence
Do you take part in social activities (i.e. dancing, bingo, meet friends)?							
Do you prefer to stay at home or do not like to leave the house?							Embarrassment, falls issues, confidence, mood
Have you become less interested in other people or the world around you?							Motivation, embarrassment

Emotional Wellbeing	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you no longer enjoy activities that you once used to?							What type
Do you feel left out or excluded?							By whom
Do you avoid family gatherings?							Occurrence, embarrassment
Is your hearing / eyesight making being with other people hard?							Check up
Are you bothered by other people's behaviours?							Which behaviours and reactions
Do you have less patience or are you more irritable?							Under what circumstances
Do you have feelings of love and care expressed toward you?							By whom
*Are you sexually active?							Occurrence
Other issues or problems or additional comments:							



## Emotional Wellbeing – how to manage risks?

To help you remain at home, but also to ensure you are able to manage your emotional wellbeing, please select some of the options below that you would feel comfortable to have organised:

- ☐ Picture phone
- ☐ Hearing amplifier
- ☐ Consultation with occupational therapist
- ☐ Consultation with psychologist or social worker
- ☐ Peer support groups
- ☐ Family/carer education
- ☐ Therapy pets
- ☐ Community awareness programs
- ☐ Consultation with sex worker

### Other strategies:

- Have photographs of family and friends displayed around the home
- Plan regular structured visits from family and friends
- Use phone calls instead of face-to-face visits
- Use technical devices to assist you to communicate (e.g. Skype)
- Reach out to support services (i.e. bi-cultural support workers/volunteers)

### Online resources and printable fact sheets

[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

<http://www.helpguide.org/articles/depression/dealing-with-depression.htm>

[https://www.beyondblue.org.au/get-support/get-immediate-support?&utm\\_source=google&utm\\_medium=cpc&utm\\_campaign=&utm\\_term=depression%20help](https://www.beyondblue.org.au/get-support/get-immediate-support?&utm_source=google&utm_medium=cpc&utm_campaign=&utm_term=depression%20help)

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-communication-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://fightdementia.org.au/services/counselling>



## 6) Driving and Mobility

For most of us, driving has been an important skill in our daily lives and is our link with family, friends and the wider community. However, as we age some health conditions create limitations and impact on our capacity to drive safely.

Please tick 'YES' or 'NO' in the boxes provided.

If you answer 'NO' to both questions, please move to the next section.

	YES	NO
Do you currently drive a motor vehicle?		
Do you currently use a motorised scooter?		

Driving & Mobility	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others? L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you forget where you are going when driving familiar routes?							Duration/Occurrence
Do you have problems maintaining your attention and concentration while driving?							Duration/Occurrence
Do you have trouble using the indicators, wipers or radio?							Which functions
Do you have trouble changing lanes, turning or merging into traffic?							Which direction, visual scanning

Driving & Mobility	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you have difficulty recognising and understanding road signs, traffic signals and roundabouts?							Which signals / signs
Do you have difficulty judging distance and space between objects?							Visual
Do you take longer to react (e.g. slower to stop at traffic lights)?							Occurrence
Do you mix up using the brake and accelerator?							Occurrence
Are you having more near misses or bump into objects (e.g. cars, trees, gates, poles, fences)?							Occurrence
Are you getting frustrated and irritable when driving?							Which situations
Do other drivers beep or yell at you?							Occurrence

Driving & Mobility	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you forget where you have parked your vehicle?							Type of parking lot
Do you find you drive much slower than other drivers?							How much slower
Do you have painful / stiff joints even after short trips?							Medical condition
Do you think your vision and / or hearing is affecting your driving?							Check up
Do you have difficulty driving at night?							Vision/fatigue
Other issues or problems or additional comments:							

## Driving – how can I manage risks?

You might want to consider talking to your family or GP about your concerns. Your GP can discuss current health issues and future risks related to your medical conditions – some conditions may be temporary and maybe medication-related. However, it is very important to have this discussion with your regular GP so that further monitoring and/or a driving assessment can be arranged.

- ☐ Disability parking permit
- ☐ GPS system
- ☐ Seat belt alarms
- ☐ Consultation with occupational therapist for driving assessment
- ☐ Have refresher driving lessons

**Some changes to your driving routine may help to limit your risk of an accident and could include:**

- Not driving at night – especially if you have problems with your vision
- Making adjustments to or installing more mirrors to decrease blind spots
- Limit your trips to areas you know well (GP surgery, local shops, social clubs)
- Check that your medications do not affect your driving skills
- Avoiding busy traffic areas or times
- Utilise public and community transport options

**Online resources and printable fact sheets:**

<http://www.austroads.com.au/drivers-vehicles/assessing-fitness-to-drive>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-transportdriving-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

## National Licensing Requirements for Older Driver

State & Road Service Organisations	Requirements
<p>Victoria</p> <p><a href="https://www.vicroads.vic.gov.au/safety-and-road-rules/driver-safety/older-drivers">https://www.vicroads.vic.gov.au/safety-and-road-rules/driver-safety/older-drivers</a></p> <p>RACV</p> <p><a href="http://www.racv.com.au/wps/wcm/connect/racv/Internet/Primary/road+safety/older-drivers">http://www.racv.com.au/wps/wcm/connect/racv/Internet/Primary/road+safety/older-drivers</a></p>	<p>Victoria does not require drivers to pass a licence test when they reach a certain age, e.g. 65 or 70. However, there may come a time when a person will need to reduce or stop driving. Drivers need to be aware of changes that could affect their driving ability.</p>
<p>New South Wales</p> <p><a href="http://www.rms.nsw.gov.au/roads/licence/older-drivers/index.html">http://www.rms.nsw.gov.au/roads/licence/older-drivers/index.html</a></p> <p>NRMA</p> <p><a href="http://www.mynrma.com.au/motoring-services/education/older-drivers.htm">http://www.mynrma.com.au/motoring-services/education/older-drivers.htm</a></p>	<p><b>70-74 years old</b> There are no special requirements if you are between <b>70 and 74</b> years old, <b>unless</b> you hold a <b>multi-combination</b> (class MC) licence. If you hold an MC licence, you will need to pass a practical driving test every year to keep your MC licence, once you turn 70.</p> <p><b>75-79 years old</b> When you reach <b>75</b> years old, you will need to have a <b>medical review every year</b> to keep your licence, regardless of the class of licence you hold. See <a href="#">Are you fit to drive?</a> for more information.</p> <p><b>80-84 years old</b> If you are between <b>80 and 84</b> years old, and hold a <b>car</b> (class C) or <b>rider</b> (class R) unrestricted licence, you <b>do not</b> need to take a practical driving assessment, although you do need to have a medical review every year, to keep your licence. If you hold a <b>heavy vehicle</b> licence (classes LR, MR, HR or HC), you need to have a <b>medical review</b> and a <b>practical driving</b> assessment <b>every year</b>. See <a href="#">Are you fit to drive?</a> for more information. You must pass all the reviews and assessments <b>before</b> your birthday. If you are unable to meet this requirement, contact Roads and Maritime Services for advice.</p> <p><b>85 and older</b> When you reach <b>85</b> years old, you will need to have a <b>medical review every year</b>, to keep your licence. See <a href="#">Are you fit to drive?</a> for more information. You also have the choice of taking out a <b>modified</b> licence, or keeping your unrestricted licence. If you wish to keep your <b>unrestricted</b> licence, you'll need to successfully pass a practical driving assessment, every second year.</p>
<p>Australian Capital Territory</p> <p><a href="http://www.rego.act.gov.au/licence">http://www.rego.act.gov.au/licence</a></p> <p>NRMA (Canberra)</p> <p><a href="http://www.mynrma.com.au/members/member-benefit/regional/canberra.htm">http://www.mynrma.com.au/members/member-benefit/regional/canberra.htm</a></p>	<p>On reaching 75 years of age, drivers must provide an annual medical certificate signed by their doctor or a Medibank Health Solutions Medical Officer to confirm that the driver continues to be medically fit to drive.</p>

<p>Queensland</p> <p><a href="http://www.qld.gov.au/seniors/transport/safe-driving/">http://www.qld.gov.au/seniors/transport/safe-driving/</a></p> <p>RACQ</p> <p><a href="http://www.racq.com.au/cars-and-driving/driving/driving-as-an-older-road-user">http://www.racq.com.au/cars-and-driving/driving/driving-as-an-older-road-user</a></p>	<p>Everyone 75 and over who holds a Queensland driver licence must carry a current <i>Medical Certificate for Motor Vehicle Driver*</i> at all times when driving. You must also comply with any conditions listed on the certificate—you can be fined if you do not.</p>	
<p>Northern Territory</p> <p><a href="http://www.transport.nt.gov.au/mvr/licensing">http://www.transport.nt.gov.au/mvr/licensing</a></p> <p>AANT</p> <p><a href="http://www.aant.com.au/">http://www.aant.com.au/</a></p>	<p>Northern Territory does not require drivers to pass a licence test when they reach a certain age, e.g. 65 or 70. However, there may come a time when a person will need to reduce or stop driving. Drivers need to be aware of changes that could affect their driving ability.</p>	
<p>Western Australia</p> <p><a href="http://www.transport.wa.gov.au/licensing/renew-my-drivers-licence-seniors-80-84.asp">http://www.transport.wa.gov.au/licensing/renew-my-drivers-licence-seniors-80-84.asp</a></p> <p>RAC WA</p> <p><a href="http://rac.com.au/">http://rac.com.au/</a></p>	<p>80 - 84, every year</p>	<ul style="list-style-type: none"> <li>• Complete a Medical assessment certificate - senior driver's licence renewal declaration (Form M108A).</li> <li>• Undertake a medical examination with your Health Professional (to assess your fitness to drive).</li> <li>• Health Professionals concerned about a seniors medical fitness to drive may still recommend a person take a Practical Driving Assessment (PDA).</li> </ul>
	<p>85 and every year after</p>	<ul style="list-style-type: none"> <li>• Complete a Medical assessment certificate - senior driver's licence renewal declaration (Form M108A).</li> <li>• Undertake a medical examination with your Health Professional (to assess your fitness to drive).</li> <li>• Complete an annual Practical Driving Assessment (PDA), if recommended by your health professional.</li> <li>• If your licence allows you to drive vehicles such as motorcycles, light rigid (LR) class vehicles or above, you will need to complete a PDA in a vehicle of the highest class you wish to continue driving before you are able to renew your licence.</li> </ul>
<p>South Australia</p> <p><a href="https://www.sa.gov.au/topics/transport-travel-and-motoring/motoring/drivers-and-licences/maintaining-and-updating-your-driver-s-licence/requirements-from-70-years-of-age">https://www.sa.gov.au/topics/transport-travel-and-motoring/motoring/drivers-and-licences/maintaining-and-updating-your-driver-s-licence/requirements-from-70-years-of-age</a></p> <p>RAA</p> <p><a href="http://www.raa.com.au/motoring-and-road-safety/safety-for-road-users/motorists">http://www.raa.com.au/motoring-and-road-safety/safety-for-road-users/motorists</a></p>	<p>South Australia does not require drivers to pass a licence test when they reach a certain age, e.g. 65 or 70. However, there may come a time when a person will need to reduce or stop driving. Drivers need to be aware of changes that could affect their driving ability. If you are 85 years of age or older and hold a class of licence other than a 'car' you will need to pass a practical driving test each year to retain that class of licence.</p>	
<p>Tasmania</p> <p><a href="http://www.transport.tas.gov.au/licensing/renewing/renewing_a_driver_licence">http://www.transport.tas.gov.au/licensing/renewing/renewing_a_driver_licence</a></p> <p>RACT</p> <p><a href="http://www.ract.com.au/motoring-services">http://www.ract.com.au/motoring-services</a></p>	<p>Tasmania does not require drivers to pass a licence test when they reach a certain age, e.g. 65 or 70. However, there may come a time when a person will need to reduce or stop driving. Drivers need to be aware of changes that could affect their driving ability.</p>	



## 7) Public Transport

Public transport is a viable alternative to driving. It can be a safer and more reliable option than driving oneself – and it is cheaper.

Please tick 'YES' or 'NO' in the boxes provided.

\*If you answer 'NO', please move to the next section.

							YES	NO
Do you currently use public transport?								
<b>Public Transport</b>	<b>How often does this happen?</b>  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			<b>What is the risk of harm or serious injury to yourself or others?</b>  L = Low M = Medium H = High			<b>Why do you think this happens?</b>  <b>How can you reduce or eliminate the risk?</b>  <b>Any other comments?</b>	
	N	S	F	L	M	H	Suggest reasons for this and ways to manage it.	
Do you catch the wrong public transport?							Vision, Cognition, Orientation	
Do you have problems getting on or off public transport?							Mobility	
Do you have trouble finding the correct stop?							Orientation	
Do you have difficulty crossing streets safely?							Occurrence	
Do you have trouble with transport cards / travel passes or timetables?							Familiarity	
Other issues or problems or additional comments:								



## Public Transport – how to manage risks?

To help you remain at home, but also to ensure you are able to manage your use of Public Transportation, please select some of the options below that you would feel comfortable to have organised:

- ☐ Travel Training Program
- ☐ Transport/Travel Cards
- ☐ Timetables
- ☐ Visual cueing for correct transport route
- ☐ Consultation with occupational therapist

## What are the alternative transport options?

- Walking – ask friends and family to walk with you for company
- Ask family and friends for a lift – or arrange a regular time to go shopping with them
- Community transportation
- Taxi subsidy schemes

## Online resources:

New South Wales

<https://www.opal.com.au/>  
<http://www.transport.nsw.gov.au/>

Victoria

<http://ptv.vic.gov.au/tickets/myki/>  
<http://ptv.vic.gov.au/>

Queensland

<https://www.qld.gov.au/transport/public/transport/>  
<https://translink.com.au/tickets-and-fares/go-card>

Australian Capital Territory

<https://www.transport.act.gov.au/>  
[https://www.transport.act.gov.au/catch\\_a\\_bus/myway](https://www.transport.act.gov.au/catch_a_bus/myway)

South Australia

<https://www.adelaidemetro.com.au/Tickets/Metrocard/Getting-a-metrocard>  
<http://www.dpti.sa.gov.au/>

Western Australia

<https://www.wa.gov.au/information-about/getting-around/buses-trains-public-transport>  
<https://www.transperth.wa.gov.au/SmartRider/Types-of-SmartRider>

Northern Territory

<https://nt.gov.au/driving/public-transport-cycling>



## 8) Chores at home

The various tasks involved in managing at home include house-cleaning, laundry and small repairs and these jobs can be overwhelming. Managing well at home can contribute to a better quality of life.

Please tick 'YES' or 'NO' in the boxes provided.

\*If you answer 'NO', please move to the next section.

	YES	NO
Do you complete your own house chores and maintenance?		

Chores at home	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you find maintaining and cleaning you home difficult?							History
Do you find it difficult to complete lighter tasks (e.g. dusting, dishes)?							Occurrence/mobility
Are you unable to do some tasks because they are too physically demanding?							What difficulties
Do you lack motivation to do chores at home?							Which tasks/difficulties

Chores at home	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Have you left chores unfinished (e.g. left washing in the machine)?							Which tasks
Do you not complete chores properly (e.g. forgotten to use washing powder)?							Occurrence
Do you have difficulties with changing light globes?							Occurrence
Do you have difficulties mowing the lawn?							Mobility/ falls risk
Do you sometimes forget you have completed a chore and do it again?							Mobility/ fatigue/strength
Other issues or problems or additional comments:							

## Chores – how to manage risks?

To help you remain at home, but also to ensure you are able to maintain a clean home and clean clothes, please select some of the options below that you would feel comfortable to have organised:

- ☐ Combined washer and dryer
- ☐ Iron with safety features
- ☐ Prompts, signs and labels
- ☐ Daily schedule or planner
- ☐ Home care services
- ☐ Raised garden beds

### Other strategies:

- Home Care Packages
- Dry cleaning service
- Gardening and lawn mowing services
- Home maintenance services
- Ask neighbours and/or family for assistance
- Other community services (i.e. through churches, local councils, cultural groups, etc.)
- Have reminders/instructions on how to complete tasks printed in your mother tongue around the house

### Online resources and printable fact sheets:

[http://www.mdfoundation.com.au/resources/1/MD\\_LowVision\\_2013\\_Web.pdf](http://www.mdfoundation.com.au/resources/1/MD_LowVision_2013_Web.pdf)

<http://www.ilcaustralia.org.au/>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-laundry-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-kitchens-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-outdoorareas-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>



## 9) Grocery shopping

Grocery shopping is an essential skill that most people do without much thought. However, it can become quite challenging over time. These skills are important for your daily life and eating well.

Please tick 'YES' or 'NO' in the boxes provided.

\*If you answer 'NO' to both questions, please move to the next section.

	YES	NO
Do you do your own grocery shopping?		
Do you go grocery shopping with someone?		

Grocery shopping	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others? L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you have difficulties using shopping trolleys and baskets?							Physical size/complexity
Do you have difficulty finding items in a familiar store?							Size of store, vision, sensory
Do you find it difficult to reach items on low and high shelves?							Medical conditions
Do you have difficulty recognising items / packets?							Vision, memory

Grocery shopping	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you avoid supermarkets with no seating or toilet facilities?							Fatigue/continence
Do you get tired and go home without buying all your shopping?							Fatigue, strength
Do you have problems carrying your groceries?							Fatigue, strength
Do you avoid shopping as you fear falling?							Falls risk, mobility issues
Do you not feel confident when paying?							Recognition of denominations, safety
Do you feel unsafe when in the community?							Falls risk, physical safeness, mobility
Do you shop less often than you would like?							
Is it difficult to buy culturally suitable foods?							
Other issues or problems or additional comments:							

## Shopping – how to manage risks?

To help you remain at home, but also to ensure you are able to do your shopping, please select some of the options below that you would feel comfortable to have organised:

- ☐ Home delivery service
- ☐ Cheap/free transport to food outlets ('shopping shuttle')
- ☐ Cheaper public transport to shops
- ☐ Home/internet shopping
- ☐ Improved household storage
- ☐ Clear storage containers
- ☐ Energy conservation education
- ☐ Assistive equipment (long handled reacher)
- ☐ Consultation with occupational therapist

**Other strategies:**

- Home Care Package
- Other community services (i.e. through churches, local councils, cultural groups, bicultural support workers, MRC (Migrant Resource Centres), Red Cross volunteer, etc.)
- Use a shopping list with pictures if necessary
- Map of grocery store
- Take your own trolley/basket
- Have a neighbour, friend or family member assist you
- Ask shop attendants for assistance

**Online resources and printable fact sheets:**

<http://www.seniorservicesguide.com.au/>

<http://www.accesshomes.com.au/content/home-help-all-states>

[http://www.mdfoundation.com.au/resources/1/MD\\_LowVision\\_2013\\_Web.pdf](http://www.mdfoundation.com.au/resources/1/MD_LowVision_2013_Web.pdf)

<http://www.ilcaustralia.org.au/>

<https://www.otaus.com.au/find-an-occupational-therapist>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-falls-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-payingbills-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>



## 10) Cooking

Cooking and preparing food is important. After all, it is how we feed ourselves. However, cooking can also be more difficult as we get older – not only can it be exhausting, but it can also be quite dangerous.

Please tick 'YES' or 'NO' in the boxes provided.

If you answer 'YES' to either question, please fill out the relevant questions below.

	YES	NO
Do you currently cook for yourself?		
Do you make simple meals or hot drinks?		

Cooking	How often does this happen?			What is the risk of harm or serious injury to yourself or others?			Why do you think this happens?
	N	S	F	L	M	H	How can you reduce or eliminate the risk?
Have you burned yourself on the stovetop or oven?							Occurrence
Have you left the oven or hotplates on after using them?							Occurrence
Have you spilt hot liquids from the kettle or pots and pans?							Occurrence
Do you have problems using common kitchen appliances and utensils?							Occurrence, recognition, which items



Cooking	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you find some food packages difficult to open?							Fatigue, strength, cognition
Have you slipped or fallen trying to get food, pots and pans from cupboards?							Mobility, over-reaching, occurrence
Have you forgotten to return food to the fridge or freezer?							Risk food contamination
Have you had nausea, vomiting, and/or diarrhoea after eating meals cooked or prepared at home?							Food poisoning/allergies
Do you have difficulty following a recipe or preparation instructions?							Cognition
Do you sometimes forget you have completed a chore and do it again?							
Other issues or problems or additional comments:							

## **Cooking – how can I manage risks?**

To help you remain at home, but also to ensure you are able to prepare/cook nutritious meals, please select some of the options below that you would feel comfortable to have organised:

- ☐ Lunch clubs
- ☐ Community or collective kitchen (seniors' community centre dining room)
- ☐ Food co-operative
- ☐ Meals on Wheels or other meal suppliers
- ☐ Menu Planners
- ☐ Improved variety and quality of food
- ☐ Cooking lessons
- ☐ Improved household cooking facilities
- ☐ Signs, labels and or picture cards
- ☐ Electric or gas stove isolation systems

### **Other strategies:**

- Oven guard
- Kettle with automatic cut-off switch
- Kettle tipper to avoid lifting boiling water
- Keep everyday items within reach and/or on bench tops to avoid lifting
- Simplified recipes
- Label and date food
- Freeze excess cooked food for later date

### **Online resources and printable fact sheets:**

<http://www.seniorservicesguide.com.au/>

<http://www.homeinstead.com.au/services/>

<http://www.accesshomes.com.au/content/home-help-all-states>

[http://www.md.foundation.com.au/resources/1/MD\\_LowVision\\_2013\\_Web.pdf](http://www.md.foundation.com.au/resources/1/MD_LowVision_2013_Web.pdf)

<http://www.ilcaustralia.org.au/>

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-kitchens-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>



## 11) Bathing & Waterworks

Good hygiene is important to be healthy and comfortable. Not having bladder or bowel leakage helps us to keep doing the things we love: playing with your children or grandchildren, socialising with friends

Bathing & Waterworks	How often does this happen? N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Are you showering or bathing less often than you would like / need to?							Bathroom layout, heating
Do you have difficulties setting the water temperature (too hot / too cold)?							Sensory issues, dexterity
Have you slipped or fallen getting into, or out of, the shower or bath?							Occurrence
Do you have difficulty removing or putting on clothes (e.g. inside out or underwear over clothing)?							What clothing and difficulties
Do you have difficulty with clothing fasteners (buttons, zips, laces)?							What types

Bathing & Waterworks	How often does this happen?			What is the risk of harm or serious injury to yourself or others?			Why do you think this happens?
	N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			L = Low M = Medium H = High			How can you reduce or eliminate the risk?
	N	S	F	L	M	H	Any other comments?
							<i>Suggest reasons for this and ways to manage it.</i>
Do you have trouble getting onto and off the toilet?							Height
Have you reduced your food or fluid intake to avoid going to the toilet?							Impact, changes, timing, total intakes (food/fluid)
Do you have difficulty locating the bathroom or toilet in time within familiar settings?							When and where
Do you have urine leakage when you cough, laugh, sneeze or when lifting, pushing or pulling?							Occurrence
Do you have disturbed sleep due to needing to go to the toilet or not making it to the toilet?							Occurrence
Do you see your GP about urinary infections?							Occurrence
Do you have difficulty using continence devices or aids?							Which devices

Bathing & Waterworks	How often does this happen?  N = Never, S = Sometimes (1-3 times per fortnight) F = Frequently			What is the risk of harm or serious injury to yourself or others?  L = Low M = Medium H = High			Why do you think this happens?  How can you reduce or eliminate the risk?  Any other comments?
	N	S	F	L	M	H	<i>Suggest reasons for this and ways to manage it.</i>
Do you have difficulty attending regular appointments (e.g. hairdresser, dentist)?							Which appointments
Do you have constipation / diarrhoea?							Duration/occurrence
* Do you have faecal incontinence?							Occurrence
Do you avoid leaving the house because you feel embarrassed by bowel or bladder problems?							Occurrence
Other issues or problems or additional comments:							

## Bathing and waterworks – how to manage risks?

To help you remain at home, but also to ensure you are able to manage your continence, please select some of the options below that you would feel comfortable to have organised:

- ☐ Continence education
- ☐ Continence assistance equipment (pads, commode, etc.)
- ☐ Thermostatic mixing/shut off valves
- ☐ Non-slip floor matting
- ☐ Assistive bathroom and toilet equipment
- ☐ Consultation with occupational therapist
- ☐ Home Care assistance
- ☐ Appointment planner

### Other strategies:

- Ask your carer to place a plastic protection cover on the car seat and to carry a bottle of nice perfume so you can go out for a drive
- Take a change of underwear and clothing on outings and something to put soiled items into
- Label clothing to aid in recognising and orientation of such
- Use elastic wasted pants, Velcro fasteners and or loose fitting clothing

### Online resources and printable fact sheets:

<https://baptistcare.org.au/assets/Living-With-Dementia-PDFs/pdf-bathroomtoilet-helpsheets-living-with-dementia-our-care-approach-BaptistCare.pdf>

<https://fightdementia.org.au/support-and-services/families-and-friends/personal-care/continence>

[http://www.continence.org.au/data/files/ResourceCentres/DL\\_incontinence\\_bro\\_LR.pdf](http://www.continence.org.au/data/files/ResourceCentres/DL_incontinence_bro_LR.pdf)

<http://www.bladderbowel.gov.au/assets/doc/brouchures/02GoodBladderHabits.pdf>

<http://www.ilcaustralia.org.au/>

<https://www.otaus.com.au/find-an-occupational-therapist>

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