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The Dementia-Friendly Home Workbook

Safety, wandering prevention, cueing and labeling, and calming environments: a hands-on workbook for adult children who are making a parent's home work for memory loss.

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Welcome

When a parent has dementia, the home that was once comfortable can become confusing and risky. The good news is that many problems can be eased by changing the **space** and the **cues** around your parent, instead of asking your parent to change.

This workbook walks you through that process. You will learn about your parent, look at the home with fresh eyes, plan for wandering, add labels and cues, create calm, and practice what to do in hard moments.

How to use this workbook

- **Write in it.** Use a pencil if you like. Print extra copies of any worksheet you want to repeat.
- **Go at your own pace.** You do not need to finish a part in one sitting.
- **Use it with the companion checklist.** The *Dementia-Friendly Home Checklist* lists the actions. This workbook helps you decide which ones fit your parent, and how to do them well.
- **Share it.** Siblings, spouses, home health aides, and neighbors can fill in parts too.
- **Review it.** Dementia changes over time. Come back every three months.

A note on wording

This workbook speaks to adult children, so it says "your parent." If you are caring for a spouse, relative, or friend, just swap in their name. If you are an older adult planning for yourself, read "your parent" as "me."

What is inside

Part 1	**Know Your Parent**	Strengths, routines, and what helps
Part 2	**Home Safety Walk-Through**	Room-by-room worksheets and hidden dangers
Part 3	**Preventing Wandering**	Why it happens, exit audit, emergency plan
Part 4	**Cueing and Labeling**	Labels, routine boards, and how to talk with cues
Part 5	**Calming Environments**	Sensory audit, late-day log, calm corner
Part 6	**What Would You Do If…?**	Scenarios to practice, with idea guide
Part 7	**You, Your Family, and Next Steps**	Action plan, family meeting, resources

Safety first

In an emergency, call 911. If your parent suddenly becomes much more confused, drowsy, or agitated, call the doctor right away. A sudden change can be a sign of an infection, a medicine problem, or another health issue that can be treated.

Five ideas to keep in mind

- **Change the space, not the person.** Your parent cannot learn new habits easily. The home can change.
- **Keep independence as long as it is safe.** Aim to lower risk, not to remove every choice.
- **Go slowly.** Too many changes at once can feel upsetting. Start with the biggest risks.
- **Watch, test, adjust.** What works this month may need to change next month.
- **Respond to the feeling.** Behind most upsets is a need: comfort, safety, purpose, or rest.

Keep this in mind

Nothing here is a test and you are not expected to do everything. Even three small changes can make a home safer and calmer.

Part 1 Know Your Parent

The best dementia-friendly home is built around the person who lives there. Fill this in with what you know today. Add to it as you learn more.

About your parent

Parent's full name: _____

Name they like to be called: _____

Date I filled this out: _____

Diagnosis and stage, as told by the doctor: _____

Doctor or care team contact: _____

Lives: alone / with spouse / with me / other: _____

Life story and what is meaningful

Memories from long ago often stay longer than recent ones. These details help you choose calming activities, music, photos, and ways to connect.

Work or career (including homemaking or caring for others): _____

Hobbies and things they loved to do: _____

Favorite music, singers, or radio shows: _____

Favorite foods and drinks: _____

Faith, traditions, or rituals that matter: _____

Pets, people, and places they ask about: _____

Daily rhythm

Routines make the day predictable, which lowers stress. Write what a typical day looks like.

Part of day	What usually happens	How is my parent doing then?
Wake up		
Breakfast		
Mid-morning		
Lunch and afternoon		
Dinner		
Evening and bedtime		

What can your parent do today?

Mark one box per row with an X. This shows where a cue, a change to the space, or a helper would make the most difference.

Task	Alone	With a cue	With help	Cannot do
Dressing				
Bathing or showering				
Using the toilet				
Eating and drinking				
Taking medicines				
Using the phone				
Finding the way around the home				
Using the stove or microwave				
Going outside safely				

What helps my parent feel calm and safe? (people, objects, music, routines, words)

What upsets or frightens my parent? (noise, crowds, certain times, certain tasks)

What is my parent still very good at? How can I build more of the day around these strengths?

Occupational therapy tip: use strengths, not just limits

An occupational therapist looks at what a person **can** do and then sets up the space so that ability can keep working. A parent who loves folding towels, sorting buttons, or watering plants may feel useful and calmer. Plan meaningful jobs into the day. Do not only plan around problems.

Part 2 Home Safety Walk-Through

Walk through each area **as if you were your parent**: walk slowly, look at the floor, notice glare, noise, and anything that might confuse you. Then fill in the table for each room. Use the companion checklist to find the specific fixes.

Three questions to ask in every room

1. What could my parent trip on, bump into, burn on, or swallow here?
2. What could confuse my parent here (glare, reflections, patterns, clutter, no cues)?
3. If my parent felt scared or lost here, where would they go?

Sketch your parent's home

Draw a simple floor plan. Mark every exit with an X. Circle the rooms where your parent spends the most time. Star the places where you have already seen a close call.

Floor plan

Entry, front door, and outside steps

Look especially for: uneven steps, poor porch lighting, doors that look inviting to leave through, mailbox or driveway hazards, keys left in view.

What I see	What could go wrong	My fix	Who / by when

Kitchen

Look especially for: stove and oven controls, small appliances left plugged in, spoiled food, cleaning products under the sink, knives, and drawers that are hard to understand.

What I see	What could go wrong	My fix	Who / by when

Bathroom

Look especially for: slippery surfaces, hot water temperature, toilet visibility at night, razors and medicines in the cabinet, a locked door that cannot be opened from outside.

What I see	What could go wrong	My fix	Who / by when

Bedroom

Look especially for: the path from bed to bathroom, bed height, clutter on the floor, lamps that are hard to switch on, mirrors that may frighten, closets with too many choices.

What I see	What could go wrong	My fix	Who / by when

Living room and hallways

Look especially for: rugs, cords, low furniture, glare from windows, busy patterns, TV volume, and places where your parent often sits or paces.

What I see	What could go wrong	My fix	Who / by when

Basement, garage, yard, and storage areas

Look especially for: tools, chemicals, gas cans, gates, pools or ponds, uneven ground, and areas your parent should not enter alone.

What I see	What could go wrong	My fix	Who / by when

Hidden dangers beyond the rooms

Some risks do not show up on a room walk-through. Rate each one and make a plan.

Topic	What is happening now	My plan / who I will ask
Medicines		
Driving		
Money, bills, scams		
Cooking		
Firearms or alcohol		
Visitors and strangers		

My top 5 safety fixes

Look back over your walk-through. Choose the five changes that would lower risk the most. Start with the fastest and cheapest.

Priority	Fix	Cost / supplies needed	Date done
1			
2			
3			
4			
5			

Which fix will my parent resist most? How can I introduce it gently?

What changes could I make without my parent noticing or feeling controlled?

When to bring in a professional

An occupational therapist can do a home safety evaluation and suggest equipment and routines for your parent's exact abilities. Ask your parent's doctor for a referral. A licensed contractor can install grab bars, handrails, and lighting safely.

Part 3 Preventing Wandering

Wandering means moving around, leaving home, or getting lost in a way that puts a person at risk. It is common in dementia. Wandering usually has a reason, even if your parent cannot explain it. If you can guess the reason, you can often prevent the next episode.

Why might your parent wander?

Tick every reason that sounds like your parent.

- ☐ Looking for a person, such as a spouse, child, or parent, or for a former home.
- ☐ Trying to “go to work,” pick up children, or do a job from the past.
- ☐ Restless or bored, with extra energy and nothing to do.
- ☐ Hungry, thirsty, in pain, or needing the toilet but not knowing how to say so.
- ☐ Overwhelmed by noise, crowds, or too much activity.
- ☐ Frightened or confused in a place that no longer feels familiar.
- ☐ Confused at dusk, when light changes (late-day confusion).
- ☐ Starting after a new medicine or a health problem. (Tell the doctor.)
- ☐ I am not sure yet. I need to watch and write it down.

Has my parent ever left home, tried to leave, or gotten lost? Describe what happened.

_____

_____

_____

_____

What did my parent say they were trying to do or find?

_____

_____

_____

Wandering and trigger tracker

Write down every attempt to leave, pacing episode, or time when your parent seems anxious. After two weeks, look for patterns in time, place, and triggers.

Date and time	What happened	What was going on before?	What helped?

After tracking: patterns I notice (time of day, noise, hunger, boredom, toileting, visitors)

Exit audit

Check every door, gate, and window your parent could use. Mark what is true now and decide what to add. Remember: alarms tell you your parent is leaving. They do not stop it. A calm routine, meaningful activity, and supervision matter most.

Exit	Easy to see / reach?	Alarm or alert?	Plan to secure or camouflage
Front door			
Back door			
Garage door			
Patio or sliding door			
Gate or fence			
Windows (ground level)			
Other:			

Ideas to consider

- Chimes, door sensors, and smart-home alerts that send a message to your phone.
- A cover, curtain, or paint that makes the door blend in with the wall.
- A door lock placed higher or lower than eye level. Check local fire safety rules so your parent can still get out in a fire.
- A wearable GPS tracker your parent will accept, and a medical ID bracelet.
- Moving tempting items out of sight: coats, shoes, purse, keys.

If my parent goes missing: my plan

Fill this out now, while things are calm. Make copies. Keep one on the fridge, one in your phone, and give one to a trusted neighbor or relative.

Full name and nickname: _____

Age, height, weight: _____

Hair and eye color: _____

Clothing and shoes they often wear: _____

Medical needs and medicines: _____

Where they might go (old home, church, work, park): _____

People to call, in order

Name	Relationship	Phone

What to do, in order

1. Check the house, yard, garage, and nearby spots first. Many people are found close to home.
2. Ask neighbors to check sheds, hedges, ditches, and porches while you look.
3. If you cannot find your parent within about 15 minutes, **call 911**. Do not wait. Act sooner if it is very hot or cold, dark, or your parent is not dressed for the weather.
4. Tell the dispatcher your parent has dementia. Give the photo and description.
5. Stay by the phone, and have someone stay at the home in case your parent returns.

Part 4 Cueing and Labeling

A **cue** is a clue in the space that tells your parent what to do or where to go. When memory fades, the environment can do some of the remembering. Good cues are simple, clear, and placed exactly where the person needs them.

Tips for labels that work

- **Words and a picture.** Many people understand a photo or drawing better than words, and some do better with both.
- **Plain and large.** Use big, dark letters on a light matte background. Avoid fancy fonts and shiny paper.
- **Eye level and right at the spot.** Put the label on the door, drawer, or cabinet it describes.
- **Show what is inside.** Clear containers or a photo of the contents on the outside help your parent find things.
- **Try it, then adjust.** If a label upsets or confuses your parent, take it down. It is only a tool.
- **Keep it respectful.** Use adult words and images. Avoid signs that sound like orders or scold.

Label and cue planner

List each place or item that needs a cue. Decide the words and the picture. Tick Done once it is up (and take it down if it does not help).

Place or item	Words on label	Picture to use	Done
Bathroom door			
Bedroom door			
Kitchen cabinet: plates and cups			
Drawer: socks and underwear			
Drawer: shirts			
Closet			
Light switch (hall)			
Front door (if you want a “stay inside” cue)			

Verbal cues: how you say it matters

Cues are also what you say and do. These simple habits make a big difference.

- Come from the front. Make eye contact. Say your parent's name and yours if needed.
- Use **one step at a time**: "Put your arm in here." Then wait. Then the next step.
- Use short, kind sentences. Pause and give extra time to answer.
- Point, show, or hand over the item. Gestures and touch (if welcome) help words make sense.
- Ask yes/no or either/or questions: "Do you want the blue shirt or the green shirt?"
- Avoid "Why?" and "Don't you remember?" These questions can cause shame and stress.

Practice: turn these into one-step cues

Rewrite each request so it is short, kind, and has just one step.

"Mom, it's time to get ready, so go put on your clothes, brush your teeth, and come eat breakfast."

_____

_____

"Dad, why did you take your pills out again? You already took them!"

_____

_____

"You need to take a shower now. You smell and it has been five days."

_____

_____

Daily routine board

A routine board shows your parent what comes next, so they do not have to ask again and again. Use big print and simple words. Cross off or flip each item as it is done.

Time	Activity (words and picture)	Cue I will use	Who helps

Where will the board go so my parent sees it at the right moments (kitchen table, bedside, by the chair)?

_____

_____

What cues work best for my parent so far? (a photo, music, a hand on the shoulder, a smell, a set time)

_____

_____

_____

Part 5 Calming Environments

People with dementia can become overwhelmed by sound, light, crowds, and clutter, because the brain has a harder time sorting what matters from what does not. A calm space lowers the number of demands on your parent's brain. That often means fewer upsets, less restlessness, and better sleep.

Sensory audit

Sit in your parent's favorite chair for ten minutes. Close your eyes, then open them. What do you notice?

Sense	What I notice	Might this upset my parent?	Change I will try
Sounds			
Light			
Sights			
Touch and temperature			
Smells			
Crowds and visitors			

Think about: TV and traffic noise, echoes; glare, shadows, dark corners; clutter, patterns, mirrors; drafts or heat; cooking, cleaners, or bathroom smells; visitors, kids, pets.

Quick calming ideas to remember

Turn off background TV. Open the curtains by day and turn on lamps before dusk. Reduce reflections. Use solid colors instead of busy patterns. Keep surfaces clear. Add soft textures and familiar objects.

Late-day confusion log

Some people become more confused, anxious, or restless in the late afternoon or evening. This is sometimes called sundowning. Tracking it helps you plan calming activities and share exact details with the doctor.

Date	Time it began	What was happening	What I noticed	What helped

What could I change earlier in the day (light, naps, caffeine, activity, meals) to help the evening?

What is a calming activity I can start at the same time every late afternoon?

Design a calm corner

A “calm corner” is a comfortable spot where your parent can rest, look at familiar things, or enjoy a quiet activity. It should feel inviting, never like punishment.

Sketch the spot: where is the chair, light, table, and storage?

Supplies to gather (tick the ones you will use)

- ☐ Comfortable chair with arms and a soft blanket
- ☐ Lamp with a warm bulb, or a window with soft daylight
- ☐ Photo album or memory box with captions in large print
- ☐ Music player loaded with favorite songs from long ago
- ☐ Simple activity: sorting buttons, folding washcloths, large-piece puzzle, or a coloring book
- ☐ Hand lotion with a pleasant, familiar scent
- ☐ A small table for a drink and snack within reach
- ☐ Something to hold, such as a soft toy or fidget item (if your parent likes it)

My parent’s calming toolkit

Top 5 songs, singers, or sounds that calm my parent:

Top 5 activities or objects that my parent enjoys, especially from earlier in life:

Words, phrases, or touch that help my parent feel safe:

People who calm my parent, and people who tire or upset my parent:

Remember

When your parent is upset, the problem is often unmet needs: pain, hunger, thirst, toilet, tiredness, too much noise, or fear. Check these first. Then respond to the feeling instead of arguing about the facts.

Part 6 What Would You Do If…?

These scenarios help you think through hard moments **before** they happen. There is no single right answer. Write what you would try first, second, and third. Then read the idea guide at the end of this part.

1. The “go home” afternoon

It is 4:30 p.m. Your mom is at the back door with her coat on. She says she has to go home to make dinner for the kids. She is home, and her kids are grown.

What is she feeling? What does she need right now?

2. The neighbor’s call

A neighbor phones you. She found your dad two blocks from his house, in slippers, looking for his old workplace. He seemed fine but would not turn around.

What do you do today, this week, and long-term?

3. The burner left on

You visit and smell something burning. A pot has boiled dry on the stove. Your mother says, “I’m a perfectly good cook!”

How do you protect safety and her dignity?

4. Someone in the mirror

Your dad becomes upset and says a stranger is in the bedroom. He is pointing at the closet mirror.

How do you respond in the moment? What could you change in the room?

5. The door alarm did not sound

You come back from the store and cannot find your mom. The door alarm is silent. The back door is unlocked.

What are your first five steps?

6. Where is my husband?

Your mom asks over and over where Dad is. Dad died four years ago. Each time you tell her, she cries as if hearing it for the first time.

What else could you say or do?

7. “I am not a prisoner!”

Your dad lives alone. You installed a door chime. He yanks it off the wall and says you are treating him like a child.

What do you do about safety, trust, and his sense of control?

8. Evening pacing

Every night around 5:00, your parent paces, wrings their hands, and keeps trying doors. Nothing you say helps.

What could you change earlier in the day? What could you try in the moment?

9. The sibling disagreement

Your brother says locks and alarms are cruel and that Mom “has the right to be free.” You think they are necessary to keep her safe.

How do you talk through safety and freedom together?

10. The labels come down

You put pictures and signs on drawers and doors. Your mom tears several off and says they make her feel stupid.

What do you try next?

Idea guide for the scenarios

These are starting ideas, not rules. Your parent's history and the doctor's advice come first.

1. Respond to the feeling: she may want to feel useful or needed. Say, "You take such good care of everyone." Offer a simple task (set the table, fold towels) or a snack and a walk in the yard together. Avoid arguing about where home is.

2. Thank the neighbor and share your number. Today, check he is safe and rested. This week, review door alerts, ID, a GPS device, and a supervision plan. Tell the doctor, and ask about adult day programs or added help at home.

3. Do not shame. Turn off the stove and clear the area. Add a stove shut-off device or remove the knobs. Offer cooking together or ready-made meals so cooking is still part of her day.

4. Stay calm, do not argue. Say, "I am here. You are safe." Cover the mirror with cloth, move it, or use a matte film. Check lighting for shadows.

5. Search quickly close to home first: yard, garage, nearby sheds. Ask neighbors to help. If not found in about 15 minutes, call 911 and say she has dementia. Afterward, add a second alert and check every exit.

6. Repeating the loss can hurt again each time. Many families respond to the feeling and redirect: "You miss him. Tell me about him." Look at photos together. Ask the doctor or a counselor for guidance on what works for your mom.

7. Involve him in choosing. Explain in terms of your own worry, not his failings: "I worry and want to sleep well at night." Try a sensor that alerts you instead of a loud chime. Ask a trusted friend or doctor to support the plan. Revisit whether living alone is still safe.

8. Check basics first: hunger, toilet, pain, thirst. Earlier in the day, add sunlight, activity, and a calm routine. Close curtains and turn on lamps before dusk. Offer a walk, music, or a folding task.

9. Start with shared goals: both of you want Mom safe and respected. Use the tracker data to show real events. Consider asking the doctor or a care manager to join a family meeting.

10. Take them down: your parent's feelings matter more than the label. Try a picture only, a different wording, or a different place. Sometimes a door left open, or a clear photo on the item, works better than a sign.

Part 7 You, Your Family, and Next Steps

Caregivers who are rested and supported make better decisions. This part helps you plan the next 30 days, bring family together, and find help.

Caregiver check-in

How am I doing, honestly? (sleep, mood, health, work, relationships)

What help do I need most right now, and who could I ask?

What is one thing I will do this month to take care of myself?

30-day action plan

Pick small steps you can finish. Suggested focus: Week 1 safety basics. Week 2 wandering plan. Week 3 labels and routine. Week 4 calm space and review.

Week	Focus	What I will do	Done
Week 1			
Week 2			
Week 3			
Week 4			

What will tell me the changes are working? (fewer upsets, better sleep, safer mornings, less worry for me)

What will I do if a change does not work?

Family meeting worksheet

Everyone involved should hear the same plan. Use this page to prepare.

What are we worried about? (safety, wandering, driving, money, who helps)

_____

_____

_____

What has changed since our last conversation?

_____

_____

_____

Task	Who will do it	When	How we will check

Next family check-in date: _____

Who will keep the master copy of this workbook: _____

Resources and next steps

Look for these types of help. Ask your parent's doctor or a local organization for names near you.

Your parent's doctor or memory clinic	Diagnosis, medicine review, driving safety, and referrals to specialists.
Occupational therapist (OT)	Home safety evaluations and plans that fit your parent's abilities. Ask for a doctor's referral.
Alzheimer's Association	Education, local support groups, and a free 24/7 Helpline: **1-800-272-3900**.
Area Agency on Aging	Local programs, respite care, meals, and caregiver support. Find yours through the national Eldercare Locator: **1-800-677-1116**.
Medical ID and wandering-support programs	ID bracelets and registries that help reunite wandering family members. Ask your local police non-emergency line what is available.
Adult day programs and respite care	Safe, structured days for your parent, and breaks for you.
Home care agencies and care managers	Paid helpers, and professionals who coordinate care for families who live far away.
Elder law attorney	Powers of attorney, long-term care planning, and protecting finances.
Support groups and counselors	Space for you to share, learn, and be heard by others who understand.
Senior Safety Advice	Articles and printable resources on home safety and aging in place at **seniorsafetyadvice.com**.

My local contacts

Who	Name	Phone
Doctor		
Occupational therapist		
Area Agency on Aging		
Support group		
Neighbor		

Notes

Please remember

This workbook is general education to help families get organized. It is not medical, legal, or financial advice, and it does not replace the guidance of your parent's doctor, an occupational therapist, or other professionals. In an emergency, call 911.

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