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Information sheet

No. 30 Check listflat sharing communities for individuals with dementia

This check list intends to help you selecting a flat sharing community (WG) for individuals with dementia. It helps you to clarify, what is important to you. Carefully consider what you can and want to contribute, but also what the other relatives want and what you, possibly, expect from them. You can adapt the catalogue to your personal requirements by removing or adding items and using the free fields for entries.

Use the catalogue as selection help or guide line for your own decision. It may be the basis for a discussion with the relatives, the care service provider and the landlord. It may also help to strive for improvements.

Please consider: Not everything can be implemented in situ on a 1 to 1 basis. However, the relatives can, together, exercise significant influence the well-being of their family member suffering from dementia.

1. How many people live in the flat sharing community? Does the group size match my

Residents

wishes?

2. Do all residents suffer from dementia?	yes 🗌 no 🗌
3. Does your ill family member match the other residents regarding a) disease progression, b) age, c) specific interests and treatments?	a) yes no c) yes no no
4. Does the flat sharing communityseem harmonic and equable? Is there interaction between the residents?	yes 🗌 no 🗌
Self-determination	
1. Do the relatives meet a) often, b) rare c) not at all?	often 🗌
As a potential new resident you should ask for contact information of active relatives and legal guardians. You may, have to ask the care services to ask the relatives and caregiver, if they agree to passing on their information.	rare
2. Do the relatives invite the caregivers or the landlord to the meetings?	
3. Is there a relatives committee?	yes 🗌 no 🗌
4. Is there a relatives speaker?	yes 🗌 no 🗌
As potential new resident ask for the contact information.	
5. Is there an oral or written agreement for regulating the essential questions of living together? As potential new resident ask for a copy of the agreement.	yes 🗌 no 🗌
6. Do a) the relatives, b) the care services with participation of the relatives or c) the care services decide about a new resident or possible leaving?	
7. Do a) the relatives, b) the care services with participation of the relatives or c) the care	

services decide on larger purchases, e.g. washing machine or furniture?	
8. How many residents are represented by legal guardians? Do they take active part in the	
flat sharing community? Do they participate in meetings, in which important decisions are	
made? Do they order third parties within the scope of their legal possibilities?	
9. Are there agreements regarding the handling of conflicts (a complaints management)?	yes 🗌 no 🗌
10. Do the relatives have access at any time to the care documentation? Is the care	yes 🗌 no 🗌
documentation locked away – as stipulated?	yes 🗌 no 🗌
11. Do the residents, not under care or the relatives have house and residence keys?	yes 🗌 no 🗌
This should be standard, as they are the heads of the households.	
12. How many residents are visited by their relatives or legal guardians? How many are	
visited a) weekly, b) monthly, c) never?	
By this you can easily recognise in how involved relatives and legal guardians are.	
13. How many relatives take active part and how, into the everyday of the flat sharing	
community?	
14. Can I easily reach the flat sharing communityfrom my home?	
15. Does the location of the flat sharing communityallow my ill relative to remain in his usual	yes ∐ no ∐
environment? Is the residence located in a lively living quarter with possibilities for outside activities, e.g. for walks in gardens or shopping?	
16. Does the flat sharing communitymake it easy for potential new residents to get to know	
them? Is there an option of a) several hours of visiting, b) trial residence, c) participation in a	
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meeting of the relative committee d) talks with relatives and the care services?	
Personnel	
i ersonner	
1. Is there more than one care service provider at the residence? If yes: Are there any	yes 🗌 no 🗌
agreements for cooperation?	yes 🗀 🔟
2 Are there fixed promises for staff employment?	yes 🗌 no 🗌
2746 there fixed profiles to stail employment.	yes 🖂 110 🗀
3. How many employees care for how many residents?	
Note the number. From this an approximate care ratio is apparent.	
4. Is there a care specialist with 3-years education, regularly active at the residence?	yes no
Note number. You can then calculate the approximate percentage of specialist carergivers in	, — —
the total personnel in the residence.	
5. Is trained personnel present at all time of day or night?	yes 🗌 no 🗌
The personnel regulation of the residence participation law – WTG- stipulates this, as soon as	,
a resident in the residence has a care level II or higher and is demented.	
6. Is there double presence during core hours? If not: Why is this not required or possible?	yes 🗌 no 🗌
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7. Do the relatives and legal representatives always know which staff members are present	yes 🗌 no 🗌
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and at what time, and what qualifications they have? Are there any current overviews?	yc3 🗀 110 🗀
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12.Does the care service provider cooperate with other services, therapists and facilities?	yes 🗌 no 🗌
What do they contribute?	
Note the cooperation partners, e.g. mobility help services, visiting services, low-threshold	
care service offers.	
Living and living environment	
1. How many square metres (individual room plus share of the common areas) are available per resident?	
Note the amount of square metres. The SWA sets an area requirement of about 30 m ² per	
person. The minimum size of the individual rooms should not be less than $12m^2$ and not	
exceed 20 m^2 . Also, ensure that the amount of m^2 conforms to the accommodation costs. The	
social services office is only allowed to take over costs within the set guidelines. Get	
information on this from the social services office before entering a contract, if your mother	
will need social benefits from the social services office now or possibly in the future.	
2. Does the residence have a protected and freely accessible outdoor installation, e.g. a	yes 🗌 no 🗌
terrace, a balcony or a garden?	
3. Are the common areas, such as kitchen, living room or corridors large enough and well	yes 🗌 no 🗌
arranged for the number of residents?	
For instance, pay attention that	
• the dinning area and table are large enough for the residents and staff to have meals	
together, • the kitchen is large enough for several persons carrying out work in the kitchen,	
one or more additional comfortable sitting areas exist,	
there is sufficient parking and moving space for rollators and wheelchairs.	
4. Does every resident have his own room?	yes no
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5. Are there sufficient sanitary facilities according to the number of residents and is this also	
the case for increasing care need?	
6. Is the residence free from barriers and easy accessible?	yes ∐ no ∐
Pay particular attention that the residence is easy accessible and free from steps and thresholds and that the doorways are wide enough for rollators and wheelchairs	
7. Is the residence furnished cosy and need-oriented designed? Do the colouring and lighting	
appeal to your relative with dementia and you? May the residents bring their own furniture	
with them? Is there a door lock?	
8. Have precautions been taken for fire protection?	yes 🗌 no 🗌
Is there a second rescue route, an early smoke warning installation e.g. a smoke	
alarmdetector, fire extinguisher, technical measures for preventing fire in the kitchen area,	
like such as switching off the cooker if the care personnel are not present? Are care	
personnel, residents and relatives sufficiently trained for the case of fire? Is at least one	
carergiver always present?	
Discuss this among each other or with the care personnel and the landlord.	
Care, housekeeping, social care	
1. Is there a care and provision concept especially for individuals with dementia?	yes 🗌 no 🗌
Let someone explain the concept and possibly, ask for a copy.	
2. Can the caregivers of the flat sharing community, in which not only individuals with	yes 🗌 no 🗌
dementia reside, comprehensibly explain how they meet the different requirements of each resident?	
Ask for the concept to be handed over and explained. Ask which advantages or	
disadvantages are connected with the make-up, what plans exist and how the	
caregiversmeet the often different demands.	

3. Can residents stay in the residenceeven if thier health status decreases; possibly to their	yes 🗌 no 🗌
death?	
4.Does the care personnel include the residents in the daily activities, e.g. cooking and	yes 🗌 no 🗌
washing up?	
5. Does the flat sharing communityoffer group activities? Do the residents actively take part?	yes 🗌 no 🗌
6. Does the flat sharing communityoffer activities outside the residence, e.g. outings,	yes 🗌 no 🗌
shopping, walks? Can they cover this with own staff or cooperation partners?	
7. Is biography work performed in the residence?	yes 🗌 no 🗌
Memory weakens with age, particularly with dementia. Biography work serves as the key to	
keep still existing abilities, which are promoted, in order to keep them as long as possible.	
8. Is validation used in the residence?	
Validation is a special method to communicate with old individuals with dementia.	
9. Are techniques of Basal Stimulation used in the residence?	yes 🗌 no 🗌
Basal Stimulation also serves the purpose of opening up access and communication	
routes,particularly by addressing the five senses.	
10. Are the offers and activities, e.g. cooking, eating, occupation offers, use of the media	yes 🗌 no 🗌
directed to the wishes and needs of the residents?	
11. Are the times for meals and sleeping times adapted to the individual habits of the	yes 🗌 no 🗌
residents? How flexible is this handled?	
12. Can a pet be brought?	yes 🗌 no 🗌
13. Is the way of speaking respectful and acknowledging between all involved?	yes 🔃 no 🗌
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Financing	
Are there separate contracts for rent and care?	yes 📗 no 📗
2. Do landlard and care providers actually assent a balinder and art from each other?	yes no
Do landlord and care providers actually seem to be independent from each other?	yes 🗀 110 🗀
Are the costs and services presented transparent and comprehensible?	yes 🗌 no 🗌
There must be a separation between accommodation costs, housekeeping money, care and	,
nursing, and administration flat rate. Have all costs, you will potentially face, specifically be	
explained? Also note what services you will get for this. Ask for a written quotation. Speak with	
other relatives and legal guardians. Ensure that all residents are treated the same	
4. Can all costs be permanently covered from income of the resident?	yes 🗌 no 🗌
If not, ask the responsible social services office before moving into the residence for advice	,00
as to which costs can be accepted and how much you must possibly contribute as a relative.	
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This check list is based on the check list in the brochure "Flat sharing communities for individuals with dementia. An alternative housing and care form".

The federal state of Berlin provides additional information in the care portal regarding outpatient care in flat sharing communities; there is also an overview with contact information and tasks of the most important contact partners in Berlin. Internet: www.berlin.de/pflege/index.html

The staff at the nursing support centre is happy to advise you.

www.pflegestuetzpunkteberlin.de

The responsible body for the nursing support centre are the insurance companies of Berlin and the state Berlin.

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