

What do we mean by assistive technology?

This Page provides information on assistive technology and telecare and how they can play a role in supporting the independence of people with dementia.

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Assistive technology and dementia

There is a growing awareness of how technology (when used appropriately) can help support the independence of people with [dementia](#) (which includes [Alzheimer's disease](#)), and other conditions where people may experience difficulties with their memory.

The term 'assistive technology' can be defined as "any device or system that allows an individual to perform a task that they would otherwise be unable to do, or increases the ease and safety with which the task can be performed." (Royal Commission on Long Term Care 1999). This includes a wide range of devices from simple 'low tech' items such as calendar clocks to more 'high tech' items such as automatic lighting and telecare sensors.

The atdementia website provides information on assistive technology that can help to compensate for some of the difficulties experienced by people with dementia (e.g. forgetting where items have been placed or forgetting to turn off unlit gas on a cooker).

Many of these devices are "passive" in that the person does not need to press a button to activate them, which is often helpful for people with memory difficulties such as dementia. Examples of passive devices include a light that automatically switches on when a person enters a room, a bath plug that releases water if the bath becomes over-full or a sensor that alerts a carer if someone exits a room in the middle of the night.

If you are a carer or a person with memory difficulties, and are considering the use of assistive technology, we recommend you seek professional advice

from a health, social care or housing professional. Please see our page on ['Obtaining assistive technology'](#) for further information.

If assistive technology does not meet the individual needs and preferences of the person it may be ineffective or may even cause additional confusion or distress. There may also be [ethical issues](#) involved in the use of assistive technology, for example where a person lacks the capacity to give their informed consent.

Our [case studies](#) provide examples of how assistive technology devices have been used in situations that have supported a person's independence at home, but also highlight situations in which they have been less successful.

Daily living aids

If you are looking for information on general daily living aids (for example special utensils that might help people with eating and drinking) please see our [Daily Living Aids](#) useful links.

Stand alone devices

Throughout the atdementia website we have used the term 'stand alone' to describe assistive technology that can be used in isolation (i.e. without being linked to a community alarm or monitoring centre). Examples of stand alone devices include calendar clocks, memo minders, 'picture' telephones and touch lamps.

Some stand alone devices will trigger an alarm or pager to alert a carer that the person may need assistance. For example some pressure mats and sensors will send a signal to a pager to let the carer know that the person is getting out of bed or leaving the room or house. These devices usually have a limited range (distance) and their use may be restricted to adjacent rooms.

Stand alone devices are often mains or battery operated and usually do not have any installation requirements. However, batteries will need to be tested and replaced on a periodic basis or when there is a battery-low alert. Devices such as gas detectors and shut-off valves are more technical and need to be installed by a qualified person e.g. an electrician, corgi registered gas fitter or other technician. For shut-off devices, arrangements will also need to be made for reconnecting the supply. We recommend that you check the cost of

installation and re-connection before purchasing such devices, as this may be more than the cost of the equipment itself.

Telecare

Throughout the atdementia website the term 'telecare' is used to describe sensors or detectors (for example movement, flood, gas, smoke or fall detectors) that automatically send a signal via a base unit connected to a telephone line ('tele') to a carer, community alarm or monitoring service and which can call for assistance ('care') when it is needed. The person with dementia does not have to press a button or dial a number to raise an alarm.

For example, if a sensor detects gas, smoke, water or a fall, it can automatically send a signal to a community alarm service who will respond accordingly. This might be by providing reassurance, contacting an agreed key holder such as a relative, friend or warden to provide help, or contacting the emergency services. A loud speaker on the alarm base unit lets the call centre talk to the person and they can talk to them. Even if they are unable to talk or are too far away from the loud speaker the service will still send help.

Telecare is often used to help support people living at home on their own to provide 'care at a distance'. Community alarm and monitoring services are provided 24 hours a day, 7 days a week, every day of the year.

Telecare can only be used where there are sufficient carers or care support available to respond quickly when an alarm is raised.

Telecare alarms and sensors are usually provided by a community alarm or monitoring service. If you are interested in telecare solutions please contact your [local authority](#) social care services or housing department for further information about community alarm and telecare schemes in your area.

Simple solutions

Sometimes very simple things such as a wipe-board or well-placed "post-it" notes acting as prompts and reminders can be helpful 'aids' for a person with memory difficulties. We hope that people will use the [discussion forum](#) to share their ideas and experiences of those items (however unusual) they have found helpful in supporting their independence at home or when out and about.