SARAH: Good afternoon everyone and welcome to Digital Design for Dementia.

The webinar has just started I can see that people are flooding our digital doors.

I will give it a few more second for people to join us.

Then I will introduce you to Daniel our Accessibility and Usability Consultant he will be talking to you today about Digital Design for Dementia.

My name is Sarah.

I will give you all a brief overview to AbilityNet for those of you who haven't encountered us before.

Welcome to everybody who has joined us today.

Welcome Daniel, thanks for agreeing to present on this topic today.

I will run through some housekeeping and a little bit of information on

AbilityNet I will hand over to Daniel he will talk about dementia, why it's important to design for dementia as part of an overall inclusive design approach.

The importance of involving users in that

process.

He will go into some more of the detail around structure, design and language.

As I mentioned, live captions are appearing at the bottom of the screen.

As I also said, please do use the Q&A window for any questions.

That is because just makes it easier for us to monitor one area.

Also for people who are using screen readers, it's not great for accessibility to have that chat box turned on.

Following the webinar, we will send you an email

that will have a link to the slides, a transcript and a recording.

You will be notified of that.

There will also be a follow-up email for any feedback.

Please do share feedback with us.

So, a brief overview of AbilityNet's services.

Our mission, which you can see in the middle of a wheel here is a digital

world accessible to all.

So, we provide support for individuals at home, at work and in education.

We also provide accessibility products and services and consultancy for people who want to ensure that their website or digital products are accessible to everyone.

That is part of our focus today.

We also do run two events annually one TechShare Pro where we pull together leaders within the accessibility community to share tips and learnings around creating accessible digital products and another where we celebrate Tech4Good.

Hi, Daniel.

I will just pop myself on mute and keep an eye on any questions coming in.

DANIEL McLAUGHLAN: Thank you, Sarah.

Welcome everyone to this session on Digital Design for Dementia.

My name is Daniel McLaughlan I'm an Accessibility and

Usability Consultant here at AbilityNet.

I will be talking about what we mean when we say

dementia talking about why it's important it design for dementia and

walking you through a range of key considerations that

you can put into practice when you are or thinking about designing your

digital product and services.

There will be time for questions at the end.

Do use that Q&A window to flag up any questions and Sarah will keep an eye

on those as well.

So first of all, what is dementia?

So that we are all on the same page I have the definition on my slide here.

By the Alzheimer's Society.

It reads "dementia is the name for a group group of symptoms that commonly

include problems with memory, thinking, problem-solving, language

and perception.

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" I highlighted some of the key information that definition.

The first being that it's a group of symptoms.

We tend to almost assume that dementia itself is a disease or an illness when

at thes the over arching description the unbrem la term

that we give to a range of symptoms which can then lead on to cause

problems with those areas on the slide there, memory,

thinking, problem-solving, language and perception.

There are lots of different kind of types

and causes of dementia.

There is five main types.

Of those, the two that you commonly hear of the most are Alzheimer's

disease a build-up of protein which damages

structures within the brain and vascular dementia restriction of blood

flow to the brain.

Ultimately, dementia is describing the

symptoms that occur when the brain is impacted whether that be through some

other kind of disease or head injury, for example.

It is a progressive condition and everyone's experience of dementia is

different.

While people may start off having different

symptoms, they will progress and experience commonly quite similar

symptoms as the condition progresses.

I have linked to my speaker notes to some of the Alzheimer's resources

about this to cover in more detail more information about the different

incompetence too of dementia.

So I mentioned that it is just a term that we give to a group of symptoms.

Some of the key symptoms that people can experience.

Bear in mind this is not exhaustive.

Include memory loss.

Trouble with kind of day-to-day memory.

Remembering recent events or recalling information.

Difficulty with concentration a and planning.

So, making decisions.

Carrying out a sequence of actions, particularly as part of a task, or

solving problems.

Language problems.

So, particularly with difficulty finding the right words

or following spoken language particularly as well.

And visual perception as well.

So, not necessarily interpreting what we see

correctly or having difficulty judging distances as well.

But, again, this is an non exhaustive list.

Dementia can be a life-changing experience for not only

the individual but also their family and friends as well.

So we need to bear in mind that dementia can also cause a person to,

you know, experience kind of frustration, anxiety, looking from the

outside in we may feel their personality changes or their

behaviour changes as well.

It can be quite a distressing experience.

Again, everyone's experience of dementia is different.

The symptoms can be different.

It also depend on which part of the brain has been affected

which symptoms are kind of experienced first.

Key takeaway here is that all of the symptoms I listed on my slide here,

memory loss, difficulty with con kren

strayings/planning, language problems and be visual perception they can all

impact a person's ability to use our digital products

and services.

Now we know what dementia is, why should we factor that in when we are

designing our digital products and services?

Well, one of the initial reasons to think

of is that the sheer volume of people that do experience dementia.

I have on my slide here a figure from 2019.

The Alzheimer's Society listed that 850,000 people in the UK were living

with dementia.

That figure is growing.

Partially because we do have an ageing population.

One of the misconceptions here is that dementia is just older

persons condition, it's not, but it does affect people over the age

of 65.

We are living longer and have an ageing

population we are seeing more and more people now experiencing dementia.

To put that in perspective 36 million people worldwide

that experience ghengs as well.

Particularly in black Asian and minority ethnic communities a study in

2011 said there was 25,000 people with dementia in the UK.

That number is expected to double by the year 2026.

It's a growing audience of people experiencing challenges around things

like attention, memory loss and language as well.

Many of our services are now heavily digital we have definitely seen this during

the global pandemic the way we get our news, you know, access public

services, do our online shopping and banking.

The way we socialise now is all heavily digital.

If aside from dementia, for whatever reason you

are not part of that digital space there is a divide there.

A lack of opportunities there if you don't have access to the same

materials and information.

There are also legal obligations.

While it's not mentioned the Equality Act 2010 sets protective

characteristics and one is age.

Dementia can impact people regardless

of age predominantly older age as well.

Discriminating based on age is effectively

discriminating against someone who experiences dementia as well.

The public sector bodies regulations 2018 which requires all

public sector websites and apps to ensure their services meet the

guidelines 2.1 Level AA the key considerations I will be talking about today map quite nicely against some of those guidelines so if

you are not meeting those, you are falling foul of

the public sector body regulations as well.

Regardless of all of that, the last point on my slide there, designing for

dementia benefits everyone.

A lot of the things I will be talking about today, yes, they

will benefit people with dementia it goes beyond that.

This is why we call it inclusive design.

The intention is that, you know, we kind of consider the experience of the

one or the single and then expand to many to

make sure as many people as possible can use our products and services.

So, designing for dementia I will run through the key considerations now and tell you a bit about what they are and why they are beneficial.

So, the first thing you should consider when you are developing any products

or service is to think about the users that will be using that service.

Particularly in the case of disability, but also with something

like dementia you want to make sure that you are listening to the

people that are going to be interacting with that service.

You don't want to fall into the pattern of talking for people.

You want to seek their input to make sure that you are designing the best

solution for them, that they have involvement with.

There is a few ways to do this.

One is to kind of make them part of that process.

We call it co-design they are affectively

involved in designing the services you can recruit representative users.

Whether that is depending on the kind of where they

are on their experience of dementia, it could be reaching out to them directly

through social media or networking groups.

It could be going to charities like the Alzheimer's Society.

And asking for resources that way.

Going on forums looking up local support groups for carers, people with

dementia and older individuals as well.

Getting their feedback and giving them a

mechanism to give feedback in which ever format is most comfortable to them.

I mentioned organising co-design sessions.

There was a study done, I think it was 2019, which looked at 26 different

co-design sessions with people with dementia.

I linked it in my speaker notes.

It's an interesting read.

It identified there are positive benefits to

including people with dementia in your design approach.

Both for those people, in terms of giving them a voice, making them feel

valued and included, but also for the designers because it challenges those

assumptions that we have.

It challenges the kind of inherent stigma we might Foster if we

rely on those assumptions.

It also included notes about some of the strategies to working

with people with dementia.

So, things like having smaller focus groups.

Focussing on a single activity at a time.

Using topic guides to steer the conversation and

using external memory aids to compliment the topic that is being

discussed, for example.

That can be done regardless of the stage of dementia.

That study found that since 2014 there has been more focus on people at

the later stages of dementia as well being involved in those sessions.

That is not to say that someone at the start of their

journey also couldn't contribute as well.

I have linked to that article, you can read it.

The other link on my slide here is by what is called DEEP, this is a network

of groups of people with dementia that very much empowers them to speak their

own words and share their experience.

So that is another really good approach to involving these people in

your designs.

Now I will walk through some of these key considerations that I mentioned.

The first one is using a clear structure.

So breaking -up the content of our webpages or our

app screens into smaller chunks of content to make it easier to visually

scan and understand.

It can be helpful for people with dementia it avoids us being

overwhelmed it's beneficial for us all it

gives logical structure to the con be tent we are presenting.

The techniques to do include organising your content under clear

headings and sub-headings.

Particularly with those headings you want them to be descriptive.

They should reflect the hierarchy of the content and give content of

what the section contains.

Breaking up your wall of text into smaller paragraphs,

particularly only having a single idea in each paragraph.

Not relying on someone with dementia to recall what was in the

previous paragraph.

Trying to have discreet chunks so I can consume that at my own pace.

Grouping related items together.

Using things like ordered lists.

You can also use call-out boxes to highlight particular information,

particularly if it's something that the individual will need to refer

to regularly, having it separated from the main body of content can be useful.

Good use of whitespace.

Give elements room to breathe.

Give me time to consume certain parts of the content before moving on to the

next as well.

Just break it up into more digestible chunks of information.

Thinking about providing a consistent navigation.

So, helping users to orientate themselves and not only know where

they are now, but also where they have been and

where they can go next.

So this partly comes in line with mentioning descriptive headings.

You want to make it clear descriptive headings.

Avoid ambiguous terms saying things like "news or services" are you

talking about local news or regional news?

When you say "services" what do you really mean?

Thinking about headings that are similar to

each other and how it might be quite easy to misinterpret those meanings

and get those mixed up as well.

Thinking about your page titles.

Typically the first thing that a user will encounter when they arrive at

your website.

Typically we advocate a kind of page category organisation approach.

So not only know where I am, where it sits in the wider website, and

actually whose website I am on in case there is ambiguity.

Providing consistent options.

If you have a certain set of links in your navigation

making sure those are repeated on subsequent pages so that I gain that

familiarity and that confidence to know where those are.

That is not to say you can't add additional links.

Keep that relative order about the order of your links.

Particularly for things like what we call breadcrumbs.

Examples on my slide here.

On the NHS website on the BBC Sport site they have links

which show where I've come from.

NHS website says "home, health A-Z BBC Sport it says women's football,

scores and fixtures, table and top scorers.

These show me that I've drilled down from a

previous category to get to the section that I'm in you but by making them

links I can back track and find my way back to where I was.

I raise these two examples here because they are very clear distinct

examples of where you are, particularly the second one.

There is actually a yellow underline under the scores & fixtures option on

BBC Sport it draws attention to - this is where

you are now.

You have come from Women's Football from the example.

The links themselves should be descriptive.

Avoid links that say "click here and read more" it should be clear from the

link itself what the outcome of interacting

with that particular link will be, particularly when I don't have the

context if it's a link on a page bye which isn't in a

paragraph for example or a link in your navigation I want to have confidence

about where that is going to take me.

Think about the language we are using in general.

Using clear appropriate language.

If language appears to be too long or too complex

or appears to be irrelevant to what they are trying to do, it can be

difficult to understand, it can be off-putting.

Some of the ways to consider a language is to use simpler words will

less syllables.

Avoid big, long sentences with complicated words

in there that might be difficult to read.

I mentioned one idea per paragraph.

Typically, one subject per sentence would be the

way to go here.

Use a direct and active voice.

Subject verb, action to really kind of

convey the key information there.

If it is the case that it's actually the action that is more important than

the subject, then, yes, you can use a passive voice instead.

Just remember your audience.

Particularly when you are giving instructions, sometimes

it can be helpful to be quite direct and active.

When you are giving air messages, for example, sometimes that can come

across as a bit harsh.

Use your best judgment there.

Use acronyms sparingly or avoid them if you can, describe them when you

introduce them so that the meaning is clear.

Same with jargon.

Again, that might be quite a stumbling block.

Making sure that you either avoid it or describe it.

Thinking about abstract concepts as well.

Things like thinking outside the box.

Crunch, 9 to 5.

Lots of those concepts.

Things that we understand but might not be as

meaningful as saying literally what we mean on the page.

The last point there is actually key, avoiding harmful language.

At the end of the day, when we talk about people with dementia, we are you

can talking about people.

We want to always bear that in mind.

So, avoiding language that be littles or de-humanises people with dementia.

They have just as much right to be treated with

respect and support as the rest of us as well.

Instead, try and use language that empowers them.

Try avoiding language like "suffers from dementia" or reinforcing stigmas

around memory loss and kind of incapacity.

Instead, as I said, to empower people

and make them feel included as well.

See the person ultimately.

A lot of these problems with language can impact people with dementia, they

can also impact people with dyslexia or learning

disabilities or learning difficulties as well.

Again, just like the rest of the principles here, they can benefit the

audience beyond the one that they are initially

intended for.

As well as your language think about the actual text that you are

presenting that language in and providing clear legible text.

If appropriate, using styling to

reinforce concepts.

So, when it comes to your font choice, avoiding fonts that can seem

cluttered and a bit busy like the serif fonts with the curly flourishing on

them and using aerial or Verdana, known as

sans-serif fonts so they don't have little tails on them.

If you need to, using things like bold text to draw attention to

particular words.

Bearing in mind if you use italics or underlines predominantly, they can

appear quite busy and fussy, particularly if someone has multiple

conditions if this is an older person experiencing dementia it may be that

their eyesight is affected.

Having text that italics or underlines can become harder to read.

Where possible using left to line text is quite

typical.

Avoiding centred or fully justified text.

A couple of images on my slide two or three paragraphs.

One is left aligned.

We have this clear, hard left edge.

The other is centred and we get this kind of staggered edge.

Your eyes have having to do more work to track the left-hand edge

to find the beginning of the next sentence.

Avoiding using all caps.

Putting letters in capital letters where possible.

There is different schools of thought, the predominant feeling is that

we recognise words by shape.

If you are using all caps you are presenting me with a block shape.

It can be quite tiring and it can be quite difficult

to read.

Particularly online digital the equivalent of shouting.

Not what you want to be writing your body copy in.

OK in moderation for the odd heading, but

not in the actual body copy as well.

Use a suitable font size.

12 point or higher.

Crucially, allow me to adjust that size.

Don't restrict your website or your app to just a fixed font size.

Again, beneficial for older individuals who may want to

increase the size of fonts.

But actually beneficial for all of us as well if we are, for

example, looking at your website on a mobile device, in bright sun light it

might be harder to see some of the information on

there regardless of whether I experience dementia or not as well.

Thinking about colour and contrast.

So vision does decline with age.

As I said at the beginning, most people with dementia are

in that older age bracket.

Blue in particular can be a particular problematic colour if it's used for

user interface elements to show that something is selected or has

focus, for example.

Avoiding that where possible.

But also thinking about the colour contrast of your text.

So, the web content accessibility guidelines sets out minimum

requirements here for regular size text

being 4.5 to 1.

Larger size text 3-1.

If you can aim for 4.5 to 1 as a baseline, treat that as the absolute minimum, then you

should certainly do so.

Then thinking about user interface elements.

That is that minimum baseline of 3 to 1 contrast ratio,

making it clear that I know which elements are focused, which elements

are selected, knowing which element is a link, for

example, in a paragraph.

Not relying on colour alone to communicate that information.

In the case of that link, you can provide

an underline.

In the case of something like a chart or a graph, you can use patterns to

distinguish different colours.

If it's something like showing kind of

selected items you can use bold or a block of colours on a background to

indicate the different items are selected as well.

Ultimately, just making sure we are providing good colour contrast and

using colour appropriately to draw our attention to different sets

of information to benefit people with dementia, particularly when it comes

to attention as well.

Avoiding having to do more work to try and understand the content that is

there, the information that is there.

Thinking about providing media alternatives, particularly images, are

really good way of complimenting tech actual information

and reinforcing that with an image.

Be mindful when you are using images for people with dementia if it's an

illustration it can come across childish, patronising.

So favouring realistic photographs, but again making sure that they are

quite subject specific.

Not too artistic that the meaning becomes a bit ambiguous.

Not overusing those images.

So, using them when they do add value and compliment the text.

Like the example on my slide here.

If it was an talking about using your Oyster card on the

London Underground it would be appropriate to have an image there

which also shows how to use that card to travel on the London

Underground, for example.

Thinking about the icons that you use, particularly if they are ambiguous.

If you spend time on social media, you have probably realised that

most of the heart icons have four or five different meanings depending

which social media platform you are using.

Choosing words wisely making sure the meaning is quite distinct from the

icon.

Ultimately, providing text labels where possible

because that just reinforces the meaning there.

There is no ambiguitity, for example.

Thinking about that combination of

text and images.

Avoiding putting text on top of an image because you can run into colour

contrast issues.

It makes that a busy element to understand.

There are typically ways around that.

Can you have a solid colour behind the text.

Ultimately, I would suggest for a person with dementia you want to

separate the two and have that separation of

image and text so that I can consume each individually.

If you have multi-media, have you have videos and odd Yeos it can be

beneficial for all audiences to present that in another format such as

captions or transcripts.

Transcripts there is no reliance on timing there I can navigate that in

my own time.

I can hopefully increase the font size.

Change the styling on it to better consume that content rather than just

getting the visual or audio channel of information.

I can consume that at my own pace as well.

Thinking about offering help and support.

Particularly for processes when you are completing a journey.

You are signing up for something.

You are buying something.

Then anticipating and offering support where it's needed.

I mentioned at the beginning that one of the symptoms of dementia can be

difficulty with kind of problem-solving and attention and also memory loss as

well.

So anticipating that and providing the

relevant information when it's needed.

So things like instructions.

If you are expected a certain input from me.

Giving me really clear accurate instructions about what is expected of me.

Particularly when you want a particular format giving a clear

example is a really good way of giving confidence about what I should be

entering in that input field, for example.

Providing input assistance.

So, using things like auto complete or the "remember me" options when you are

logging into a site, for example.

To help me complete forms.

Taking advantage of the technology of the platform you are

designing for.

If it's a mobile guise quite often they have face ID built in -- device.

Providing that as an option to access services rather than remembering long

user names and passwords, for example.

If you do have a journey that is over multiple screens, carrying that

information forwards.

There is a good example of this on the Government's visa eligibility

checker it carries forward the information that you have already entered.

So, again, that can help keep a person with dementia on

task in terms of where they are in the process, what information they have

already entered, but it saves having to ask them for

that information repeatedly.

It's there as a reference point if I need to check anything

again as well is.

Where possible, avoiding long journeys.

Because, you know, you are kind of energy levels for a person with

dementia can wait it may be in the morning that you are quite attentive.

You have good level of energy.

You are quite motivated.

That is not to say that would be the case for everyone and that that can't

fluctuate throughout the day.

Trying to focus on kind of distinct, discreet tasks, if it is quite long, saving my progress so I can return to it another time as well.

Thinking about your air messages and thinking about where you put those air

messages.

It's quite easy to miss something that appears below the input field.

So, you potentially want to have them above or beside the input field.

But not only telling me that something went wrong, but what

went wrong.

What do I need to do to fix it?

Again, anticipation, if you could have

pre-empted that error, to avoid it entirely.

Whether you need me to enter a date of birth so I choose from something like

a picker rather than manually typing in

characters where I might get the digits the wrong way around, take that

approach as well instead.

If there are multiple errors, listing those.

Particularly at the top of the form can be useful.

It just gives me that concrete information about – here’s the

four errors I need to step through to address those before I can continue,

for example.

Also with errors and labels, thinking

about the proximity.

So with labels you want them to be close to your form field.

Particularly avoid having place holders.

This is the text that is inside the font field because typically as soon

as I put my cursor inside the form field, the

place holder disappears and I lose that information.

So having always visible permanent labels

in close-proximity to their input field to help me complete those forms.

Avoiding distractions.

I mentioned that energy and attention can fluctuate throughout the day.

Avoiding things that can be disorientating, distracting or tiring.

Having adverts around the side of the page, as we have seen on some

websites where you are effectively competing for my attention.

Particularly if I'm trying to read an informative article or

complete a form, for example.

If you have videos making sure they are not auto-playing because that

immediately bombards me with sensory information which can be quite

disorientating and distracting.

Also, things like animations as well.

It's not only an issue for people with dementia but

people with disorders where it might be triggering I might feel nauseous or

ill from experiencing that.

Key information I need to know putting

it in the page as static information rather than having pop-ups, dialogs

appearing because they can take me out of my

current context and, again, be quite disruptive particularly if I'm in the

middle of a process as well.

If there are essential messages like "you are about to be logged out" it's

appropriate to an immediate dialogue make that interaction as clear and

simple as possible.

you are about to be logged out.

You press this one button to extend the

time available.

Don't expect me to kind of hunt down that dialogue and perform a

complicated action in order to remain logged

in, for example.

Related to that, providing enough time.

So being mindful that users, particularly people with dementia,

might need additional time.

Whether that is due to, as I said, that lack of attention or energy.

Potentially due to language, trying to recall certain words.

Trying to work out where we are in the process and what we need to do next.

Additional time might be needed to complete

tasks and consume information, particularly dense information.

Again, if you are using complex language, for example.

There are security reasons why we have to have

time-outs more often than not.

Avoiding them if you can or at least giving me the option to

extend them or remain signed in.

If I have advance notice there will be a time-out after half an hour, for

example, some method to increase that time-out period, that

can be very beneficial.

Again providing that static information that I can remain on and

work through at my leisure.

Not providing information inside a carousel.

This is where you have like a slide and they typically

advance to show the next slide.

If they are constantly advancing, and you are expecting me to read key

information in there, I might not have enough time to, not

only read, but also comprehend and decide what to do with that

information before that slide has moved on again.

So, where possible, avoiding auto-advancing carousels, just like

the auto playing videos as well.

I mentioned pop-ups.

Think about tool tips as well.

If it's a critical piece of information that I need in order to

complete this form, for example, have that on

the page, not hidden away in a tool tip where I might over look it or miss it.

-- critical.

Particularly also this can be a challenge because quite often with a

tool tip if I move my mouse pointer over the

little button the tool tip will appear.

When I move the mouse pointer away the tool tip will disappear again.

There are technical minimum requirements that

the web context guidelines set out for how to hand that will situation.

If you are putting information in there that I need in

order to complete the current transaction, there's a potentially

chance I might miss it or not have the dexterity to be able to

as that information when I need it at the important time.

Also think about supporting different interactions.

I said that dementia can affect older people, but regardless just not making

assumptions about the way that people

are interacting with our content and our services.

Being mindful that not everyone might be using a mouse or a touch screen,

for example.

And if it is an older person, it might be that is because they have tremors

or joint pain or that lack of fine motor

control to use something like a mouse.

It can also be the case with touch screens that, as

we get older, our skin becomes dry and leathery and the touch screens become

less effective.

It might also be I'm using some other kind of device whether that is

keyboard or speech recognition or some kind of voice control like that as well.

Particularly in the case of voice control.

It's quite important that you are labelling is accurate so when I call

out a particular button the correct element

is targeted as well.

Also just remembering that digital and particularly digital

technologies require a certain level of technological confidence.

So not everyone is comfortable just using a tablet device or

using a desktop web browser.

Trying to make your app, your website, as simple to use as possible.

Not requiring me to understand the environment that that sits in and

how I can navigate around within that.

Particularly with apps especially.

They might not be using mouse, providing support for a

keyboard they could potential be using a keyboard they could be compound

conditions here.

So someone who is traditionally a

screen read user can also develop dementia and may also be using a

screen reader as well.

Providing larger hit targets on

things, particularly if I lack that fine motor control.

Making it so that I don't run into the

situation of not being able to interact with something or accidentally

interacting with something.

A minimum size of 44x44 pixels.

Google sets out a size of 48x48le pixels making sure your buttons and

links, anything interactive has a large enough

hit area that I can be quite confident about interacting with that element

and giving me the space around that so that I don't

inadvertently trigger something else instead.

Avoiding interactions based on complex gestures, particularly path based

gestures when you expect me to drag something through a

particular motion or move my fingers through a certain shape.

That might be challenging to remember, but also challenging to

physically do as well.

Thinking about motion as well.

Particularly with mobile devices and tablets, they have built in so you

can move them around to trigger interactions if you base your

experience around that and whether it is that I'm an older

individual who experiences tremors or using your tablet app in a care home

setting earthquakes potential, passing the device

around it my pierce, that motion might inadvertently trigger interaction

making sure that either you don't design with motion at

all or you provide the option to disable that and turn it off so I can

choose the type of input that is most suitable for me.

not inadvertently triggering

functionality based on motion or accidentally touching the screen and

making a particular gesture when I didn't want to, for example.

That was quite a few key considerations.

As I say, they are not only beneficial for people with dementia

they are also beneficial for everyone.

There is a lot of inclusive design principles built in there that can

benefit us all when we are using digital technologies.

I have summarised some of the key takeaways here on this slide.

So, first and foremost, if you are designing for any group of people,

particularly people with dementia, involving them in that process,

collaborating with them to find out how best they want their

voice to be represented.

How best they want to use your products and services.

That may involve pulling in their wider support

networks, support workers, carers, friends, family to be part of that

conversation as well.

Using things like your headings and your links and your navigation to help

people orientate themselves.

Have confidence about where they are.

What options are available to them.

Where they can go next.

Thinking about the language that you are using.

Particularly avoiding language that just reinforces stigma about dementia

being something that only happens to older

people or is only concerned with memory loss.

Appreciating that, you know, ultimately, this is still a person at

the end of the day.

They have just as much right to be valued and respected as everyone else.

Ensuring good colour contrast on your text and

user interface elements.

Do I have confidence about which elements are selected or which

elements are interactive?

Is your text nice and legible because you have used

good colour contrast there?

Do I know what the links are because you provided a clear

signifier such as an underline to differentiate it from the paragraph,

for example.

Providing clear instructions and good labelling that is visible on the

screen in close proximity to the input.

Error assistance, not only can you pre-empt errors to

avoid them in the first place, when do go wrong not blaming the user.

Making it so that the system helps the user to understand

what went wrong and what do they need to fix to, swiftly and conveniently.

In combination with that, providing support for

recall and understanding.

So, if you are expecting me to enter certain sets of information,

remembering that across multiple screens.

Supporting things like auto complete.

Remember me options.

If you are expecting me to perform complicated options

providing calculator and things that can do a lot of the heavy lifting for me.

When it comes to comparisons as well.

Avoiding jargon or acronyms and explaining

these if you are going to use those.

Allow enough time and space.

Making sure I have the breathing room around the content.

Allowing me enough time to navigate the content at my own pace.

So, warning me if there is going to be a time-out.

Avoiding having auto playing videos and animations and auto-playing

carousels and things as well.

Supporting different interactions.

Understanding that not everyone will be using a mouse or a touch screen.

It might be that I'm using a keyboard.

It might be that I'm using my device in a setting that you didn't anticipate.

But having clear, simple interactions that don't rely on things

like gestures and motion to account for that as well.

I have seen that the Q&A has been flashing up.

I will see if there are any questions that I can hopefully answer.

SARAH: Thank you for that Daniel.

I think that was a really brilliant whistle-stop tour in plain English and

a lot of what you are talking about have very accessible.

A few questions have come through.

I will pick some out.

So one from Mike Ward saying - some of the design aspects mentioned

are subjective and don't appear in 2.1 how can a contract with a web design company can be written to ensure their web design is OK for dementia?

DANIEL: Really good question.

The web content guidelines sets out quite clear criteria with clear

requirements on how to pass.

There are lots of things that are not included in there.

Some of the things I was talking about, about grouping content.

We can use things like landmarks and things.

Some of the more subjective stuff around language and things doesn't

really come into play until much later on.

I think it really needs to be a bit of a dialogue with that agency.

Perhaps something you could build into your policies when you are setting out your procurement policies as well that you expect certain providers to demonstrate.

Whether that is something as simple as with language we use an automated checker to make sure we are targeting secondary level education for example with our language.

Or if we provide any content that has acronyms we make sure a gloss, are you

is presented, things like that.

But also just that, not only do they state they adhere to the web context accessibility guidelines, they follow a set of best practices.

A lot of the things I mentioned today follow into best practices, widely

known.

You can make that part of your policy

agreement with them when you are procuring those services as well.

Craig asks apart from gov.uk, is there good practice any other sites you suggest are doing a particularly good job around accessibility.

DANIEL: Gov.uk make an effort when it comes to accessibility. They have very high contrast

they try to have headings and links in clear language and really good articles on there about writing for I think it's actually writing for disability and write engage plain English, for example.

The good resources were on that DEEP dementia engagement website.

They have a dementia voices section where they have resources around how

to produce kind of clear legible text and presenting

information in a clear accessible way.

Beyond that, unfortunately a lot of mainstream websites, our news websites and things, unless you go and find the easy read versions, the

landing home page is not always that clear.

Particularly a lot of the language I

think that they tend to use as well.

Gov is a good example.

The NHS, yes.

But obviously they also have to include a lot of

medical jargon by the nature of what they do.

But they are two of the clearest examples when

it comes to prioritising accessibility in the way their websites are built

and the way they present information with good kind

of chunking and layers of content.

SARAH: A question from somebody

saying, from a text perspective, do you feel at the moment that HSBC UK send

helpful messages or do you feel it could be improved for

sufferers of dementia, anyone with accessibility?

I don't know if we can comment on the specifics.

The question is, how well are text messages optimised for people with

dementia?

DANIEL: I read that as messages in general.

So like instructions, notifications.

I can't comment specifically on HSBC, like any

financial institution I think there can be a lot of kind of cognitive needs in

terms of - I need to log into my account with

multiple sets of information.

I need to know that certain tokens have expired, things like this.

I definitely think that in general this is not HSBC specific,

that could be an easier process.

But that is more a criticism of the wider digital web.

The world that we live in unfortunately.

We do have all these kind of security restrictions as well.

Financial institutions it's the nature of the industry, isn't it, a lot of

heavy terminology and language.

I have definitely seen institutions

presenting quite nice, clean, a lot of the onboarding journeys are quite nice

and clean, simple language, simple layout.

So carrying that forward into the actual day-to-day banking operations,

for example, would definitely be a lot more beneficial for everyone.

Not just people with dementia.

SARAH: I guess a related question here about whether it would be useful for a bank to know that a customer suffers from dementia and then to hyper personalise the services.

So, yeah, for example, removing ads or flashing messages?

DANIEL: So I would be mindful of asking customers to disclose that information.

There is a big conversation piece on accessibility around particularly

around disability.

Do we have the right to know that someone is disabled?

I definitely think there are ways to, if not capture that

information, capture preferences.

So, you know, particularly in AbilityNet when we are capturing people's reasonable adjustments we ask questions around - how do you prefer information to be presented to you?

People have disclosed things like.

I prefer to know ahead of time what information I'm going to need for a

meeting, for example.

So you can be quite generalist but being

helpful and implying the different strategies there.

In terms of removing ads and motion, you

should avoid that.

There are people can set at system level, preferred reduced motion when

they land on your site those elements should be disabled so you shouldn't

assume that everyone is quite happy with kind of, I think ads is

contentious with animations you shouldn't assume everyone is

comfortable having those auto-playing.

Making sure in your style sheets you are respecting the

fact that some people might want to have those turned off so they are not

playing by default.

SARAH: I think we have probably got time for one more and then a couple of pieces we want to wrap up.

John is asking about optimising a website around terms such

as dementia, cognitive decline, in terms of search but balancing that

against people who may be insulted or put off

Any tips around that.

DANIEL: It's challenging.

For example, people don't like the term "service users" that is prevalent

in that sector as well.

That is more something that can be done

under the hood that you are, you mentioned search.

That you just accept those kind of synonyms.

You have the fuzzy searching.

If I enter a certain term, it branches out and finds alternative information.

I don't know if I drew attention to it.

Alzheimer's Society has a good positive language document on

dementia it would be worth referring to that to see their best

practice in terms of the language specifically that should be used.

Just bearing in mind that, you know, unfortunately everyone

is different.

Well, that is a great thing.

But unfortunately, not everyone will agree on

the same terminology that should be used.

So, I think just trying to cater to that as much as possible is all we can do.

SARAH: One here which may or may not

be a quick one.

Someone asking, you talked earlier about dementia and age.

So they are asking, is dementia classed official as a disability or is it only the age part in terms of discrimination?

DANIEL: My understanding is that under the Equality Act it's the age part is the protected characteristics. So while you could discriminate against someone for

having dementia, it may be that the case can be argued that you are actually

discriminating against them based on age and so that would fall under the Equality Act , not aware it's specifically calls attention to dementia.

Happy to be corrected on that if I'm wrong.

SARAH: That is brilliant. Mindful we only have a few minutes left.

That hour has flashed by, thank you very much, Daniel.

We have a few bits of information to share.

I wonder if we should just do that and then wrap up.

DANIEL: Something you and I discussed this morning, Sarah, any questions that we didn't get to or any we could maybe answer in a fuller form we can certainly put together a blog post with this information as well.

To help you.

SARAH: Absolutely.

I'm not going to read all of this out.

There was a question earlier about support from AbilityNet.

There are some links here, so please do, the

slides will be made available via slide share.

Embedded into the landing page and you will

get a link to that afterwards.

Please do have a look and hopefully some of the resources will be useful

for people afterwards.

All the links that Daniel has shared as well and, like you say, within your notes.

DANIEL: Yes.

SARAH: Just a couple of upcoming webinars which are also free, which may be of interest to people. Next week on Tuesday, at 1pm, we are looking at creative approaches to dementia using technology.

We will be joined by a company called Tover, who make a magic table.

An interactive table that is used in a lot of care settings for people with

dementia.

Please do join us for that one.

We will be joined by digital voices, who help people create life books

using tablets and technology.

Life stories of am people living with dementia.

The week after that we have Tech Tips for Independent Living.

That will be looking at smart devices in the home. It will include some specific tips from an Occupational Therapist who has been working with Smart technology and older people, some of whom have dementia.

Things like tips for setting up regular reminders for taking medications. Putting the bins out, that kind of thing.

You may be interested in some of those as well.

That is it.

Just to say thank you very much again to you Daniel and also thank you to

everyone who has attended the webinar.

As I say, all the information will be

made available afterwards.

You will get an auto email which will share all that information

with you.

Thank you very much for attending.

Thank you Daniel for your expertise.

I hope everyone has enjoyed it.

I will end the webinar there.

Thank you very much.

Cheers, Daniel.

DANIEL: Thank you everyone.