

# Optimizing Safety and Wellbeing for Cognitively Impaired Patients

UW Medicine  
MEMORY & BRAIN  
WELLNESS CENTER

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## Disclosures

- None

# Learning Objectives/Overview

- Explore quality of life in persons with dementia and factors that limit wellbeing
- Identify common safety risks of people with dementia
- Discuss strategies and resources to navigate risks while honoring patient values

## Quality of Life

It's possible to 'live well' with dementia (many people with dementia rate QOL as good or excellent, despite the challenges)



Logsdon, R. G, McCurry, S.M., Teri, L. Evidence-Based Interventions to Improve Quality of Life for Individuals with Dementia. *Alzheimer's Care Today*. 2007; 8(4): 309-318.

# Dementia Stigma

**“Living death”**

“Robbed my husband of his identity...”

“The long goodbye”

“... my mother is no longer there...”

“... my mother is no longer there...”

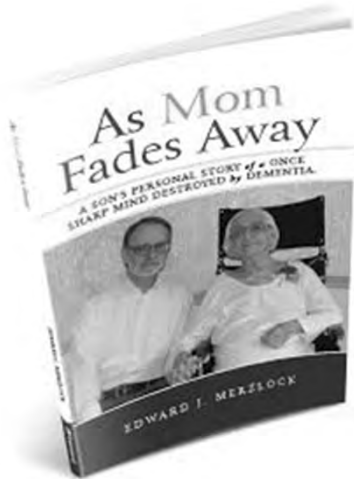
“Rather have cancer”

## Challenges of Living w/ Dementia

- Reactions of medical providers, friends, family were more damaging to well being than the disease itself
- Worried about control and autonomy
- Desire to advocate and improve QOL for self and others

Peter Reed, PhD, MPH, Jennifer Carson, PhD, and Zebbedia Gibb, PhD, “Transcending the Tragedy Discourse of Dementia: An Ethical Imperative for Promoting Selfhood, Meaningful Relationships, and Well-Being, *AMA Journal of Ethics* July 2017, Volume 19, Number 7: 693-703

# Reframing dementia



## Risk Focus

### Health Professionals:

#### Physical Risks

- Medication
- Nutrition
- Cooking
- Falls

### People Living w/ Dementia:

#### Day to Day Impact of Disease

- Loss of independence (driving, finances, working)
- Social isolation
- Mental Health

Dickins, Goeman, O'Keefe, Iliffe, Pond. *Understanding the Conceptualization of Risk in the Context of Community Dementia Care*

# Domains of Well-Being in Dementia



Power, G. A. *Dementia Beyond Disease: Enhancing Well-Being*. Baltimore: Health Professions Press, 2014.

## ASK: what does QOL mean to you?

- Who are you, and what is important to you today?
  - Who are some people you care about?
  - What is something that makes you feel good?
  - What gets you out of bed in the morning?
- Notice what stands out in your discussion. Reinforce what you hear. Brainstorm ways for the person to incorporate more of this into their life.



## Negotiating Risk

- Discuss in detail
- Explore values
- Empowerment
- Collaborative Agreement
- Monitoring Results

Power, G. Allen. Dementia Beyond Disease: Enhancing Well-Being. Baltimore: Health Professions Press, 2014.

## Common Safety Risks

- Driving
- Home Safety
- Falls
- Medication management
- “Wandering”
- Firearms

# Driving Safety

- Certified Driving Rehabilitation Specialist Evaluation
- The Hartford Group “Conversations About Alzheimers, Dementia & Driving [www.thehartford.com/resources/mature-market-excellence/dementia-driving](http://www.thehartford.com/resources/mature-market-excellence/dementia-driving)
- Alternative transportation options (Hyde Shuttle, Lyft, Go Go Grandparent - [www.GoGoGrandparent.com](http://www.GoGoGrandparent.com))



## Is it safe to be alone?

- Are they anxious or fearful when alone?
- Can they recognize a danger in the home, i.e. a fire?
- Are they able to get help in an emergence? Call 911?
- Has the person left home and become lost or disoriented?
- Do they attempt hobbies alone when supervision is warranted?

## The Dignity of Risk

- High value on independence and autonomy
- $\frac{3}{4}$  of Americans prefer to remain in their current residence

Binette, Vasold [www.aarp.org/research/topics/community/info-2018/2018-home-community-preference.html](http://www.aarp.org/research/topics/community/info-2018/2018-home-community-preference.html)

*“Our society takes protections of personal freedom very seriously. There is a good and bad side to it.”*

*- Dr. Michael Persenaire, UW Memory and Brain Wellness Center*



## Additional Support

- There are a variety of ways to increase support (family, COPES, TSOA, CGers respite programs, volunteers, technology, adult day health)
- Contact your local Area Agency on Aging

## Fall Risk

- 1/3 of adults aged >65 experience a fall annually
- Adults with dementia are **twice** as likely to experience falls, compared to older adults without dementia.
- People with dementia who fall are 5 **times more** likely to be admitted to long-term care facilities.
- People with dementia are at higher risk for fractures, head injuries, and even death.

Fernando MPT, Fraser MPT, et al, 2017. Risk Factors Associated with Falls in Older Adults with Dementia

## Actions That Could Help Preserve Cognition and Potentially Help Prevent Falls

- Reviewing medications
- Providing strength, balance, and cognitive training
- Correcting vision and hearing problems
- Correcting Vitamin D deficiency
- Checking the home to remove any hazards to walking safely

Montero-Odasso and Speechly, 2018 Falls in Cognitively Impaired Older Adults: Implications for Risk Assessment and Prevention

- Home safety education  
[www.nia.nih.gov/health/home-safety-checklist-alzheimers-disease](http://www.nia.nih.gov/health/home-safety-checklist-alzheimers-disease)
- In home OT safety evaluations
- Community Resources

# Medication Management

- Risks from taking medications incorrectly can be dire.
- Align around understood QOL goals (independence, improved mood, clearer thinking)
- Ideally, start with oversight in early stages
- Medication management aids

# Medication Resources

- **Smart Medisets**



Pill Organizer  
**MED-E-LERT**  
Automatic Pill  
Dispenser  
f t G+ @  
• SKU: 104-190

## MedMinder™



- **Pharmacy services**



# Medication Management Apps



## “Wandering”

- 67% of persons with dementia may exhibit wandering behavior.

N. M. Silverstein, G. Flaherty, 2006.

- A “need directed activity”

## Reasons Why People “Wander”

- Anxiety or fear
- Searching
- Boredom
- Basic needs
- Restlessness
- Following past routines
- Injury to the brain from the disease process.
- Delirium

## What To Do To Help

- Ensure basic needs met
- Daily Routines, structure
- Community engagement
- Think about a person’s daily rhythms
- Create a calm environment. Provide reassurance. Use validation
- Remove visual reminders like keys, coats, umbrellas
- Supervision

# Medical Alert IDs

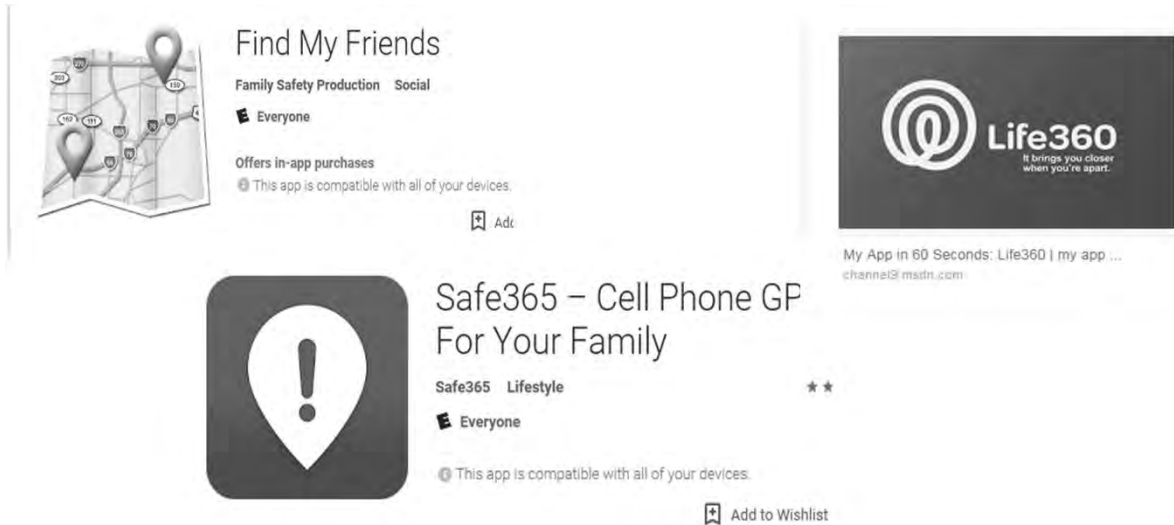


# Safe Returns Program<sup>®</sup>

- Alz Assoc and MedicAlert joint program
- Safety Hook
- Coordination w/ local authorities if a person is lost
- Sponsorship available for low income



# GPS Phone Apps

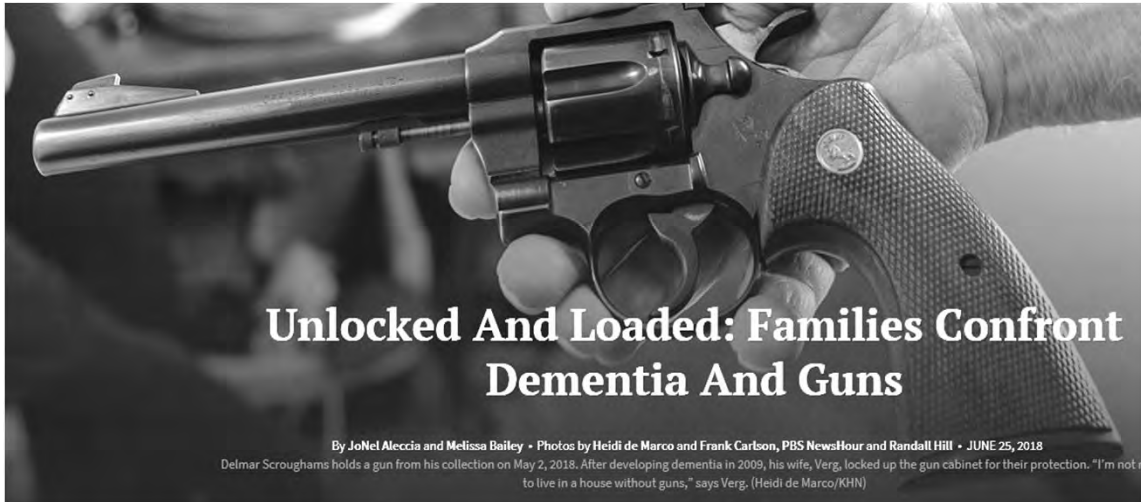


The screenshot displays two app listings. The first is 'Find My Friends' by Family Safety Production, categorized as Social, with an 'Everyone' age rating. It features a map icon with location pins and notes that it offers in-app purchases and is compatible with all devices. The second is 'Safe365 - Cell Phone GP For Your Family' by Safe365, categorized as Lifestyle, with an 'Everyone' age rating and a 2-star rating. It features a location pin icon with an exclamation mark and notes that it is compatible with all devices. A 'Life360' logo is also visible in the top right corner of the screenshot.

## Technology Resources

- GPS “tiles” and smart shoe inserts
- GPS watches
- Medical Alert Systems/Fall detection monitors
- PERS for patients on COPES

# Gun Safety



## Creating a Plan for Gun Safety

- Creating a legacy
- Utilize a trusted authority figure
- Tend to emotions
- Utilizing as a resources to pay for care (?)





## Info Kit

### Safety Concerns for People with Dementia

Not all memory loss is due to dementia. Memory loss and/or confusion may be a result of many conditions, some of which are reversible. If you or someone you know has memory loss or confusion that's getting worse, it's important to talk with a health care professional about it. If it does turn out to be dementia, there are steps you can take to live well, and plan for a future with it.

Dementia affects each person differently, but symptoms typically include increasing memory loss, confusion, and disorientation. Changes in the brain can also impact how individuals interpret what they see, hear, feel, taste or smell, and their sense of time, place and judgment – each of which can impact safety.

The best environment for a person with memory loss or dementia is one that helps them feel as



<https://www.dshs.wa.gov/sites/default/files/ALISA/stakeholders/documents/AD/Dementia%20Safety%20Informational%20Toolkit.pdf>

## Questions?

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