

How to Reduce Wandering in Patients with Dementia

Support Infection-Control Measures During Covid-19

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Wandering in Patients with Dementia

- Definition: “Syndrome of dementia related locomotion behavior having a frequent, repetitive, temporally-disordered and/or spatially-disoriented nature that is manifested in lapping, random, and/or pacing patterns, some of which are associated with eloping, eloping attempts, or getting lost unless accompanied (*Alagase, D.L.et al, 2009*).”
- More common in middle or later stages of dementia



Wandering in Dementia



6/10 people with dementia will wander (Alzheimer's Association).

Wandering is not necessarily harmful if it occurs in a safe and controlled environment

However, wandering among people with dementia can be dangerous, e.g. they may:

get lost

leave a safe environment

Put oneself in a dangerous situation

Negatively impact the privacy/space of others

Spread germs if they are sick and not adhering to infection-control precautions

Best Practice in Addressing Wandering

1

Identify common triggers for wandering

2

Address triggers for wandering – person centered

3

Provide appropriate supervision

4

Remind and redirect to follow infection control protocols

Common Reasons for Wandering



Loss of Memory/Searching for the Past



Change in Environment



Anxiety/Agitation/Excess Energy

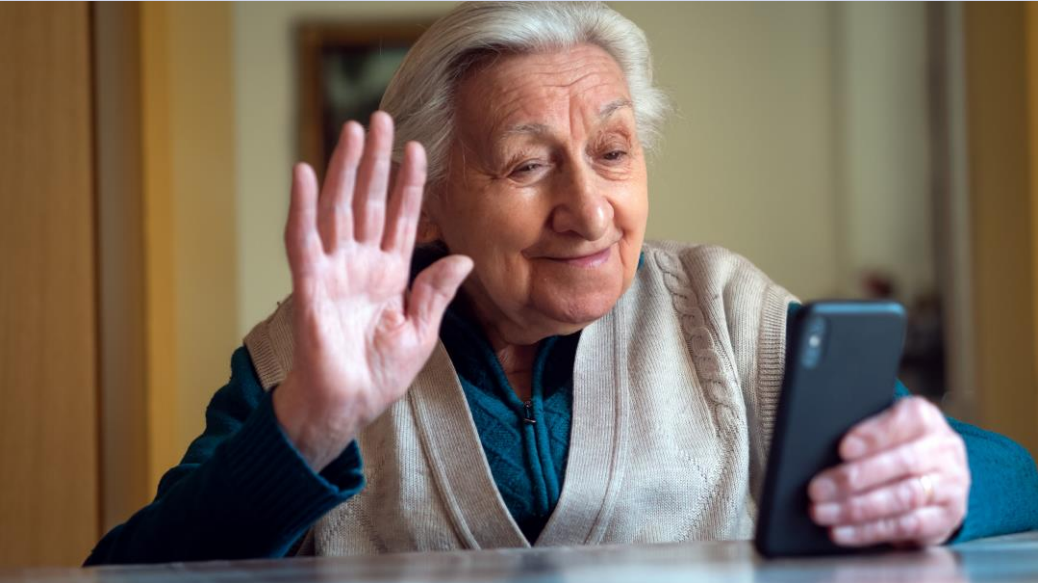


Expressing Boredom



Discomfort or Pain

Loss of Memory/Searching for the Past

Cause	Behavioral Interventions
<ul style="list-style-type: none">•A person may set off to go to somewhere, and then forget where they were going or why•The person could also be searching for something that they have lost or think is lost•This could be someone/something from their past; they may believe they need to go to work 	<ul style="list-style-type: none">•Gently reorient and redirect•Keeping personal possessions in view•Use memory compensatory interventions (calendars, white boards, etc. with orienting information)•Try to meet the need of the patient – e.g. Facetime call with family•Try to help find an activity that gives the patient a sense of purpose (e.g. folding towels)

Change in Environment

Cause	Behavioral Interventions
<ul style="list-style-type: none">•A person with dementia may feel uncertain and disoriented in a new environment such as a change in unit/room•The person may also want to escape from a noisy, busy, overstimulating environment	<ul style="list-style-type: none">•It may help to show the person familiar items, such as photographs or clothing, in order to indicate that they belong in a new place•Use orienting tools, such as names and pictures on their room door, etc.•They may need extra help in finding their way about and the layout of their new environment•Reduce environmental triggers, e.g. loud noise, etc.

Anxiety/Agitation/Excess Energy

Cause

- Agitation and anxiety can cause some people to pace up and down or to wander
- Patients may wander and pace to relieve excess anxious energy

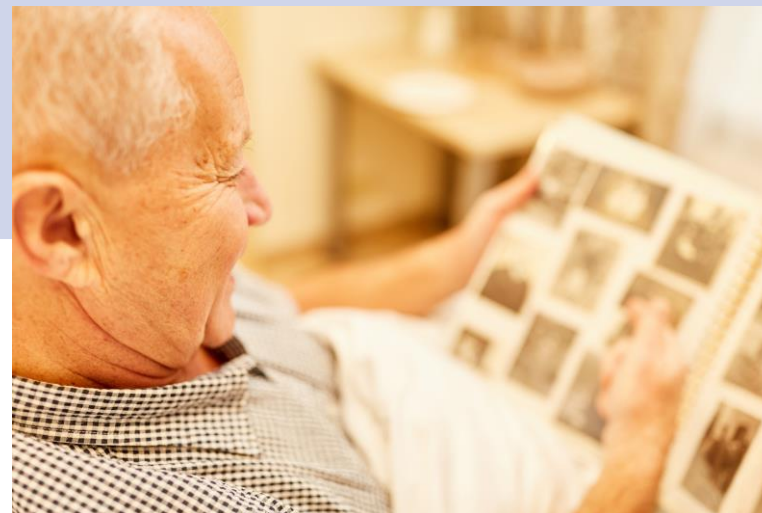


Behavioral Interventions

- Use nonpharmacological interventions to reduce anxiety
- Can the person go outside? Provide safe opportunities to walk. Provide PPE for the patient (mask and gloves)
- If the patient is a falls risk, provide other opportunities to use up excess energy, such as stationary exercises or sitting in a rocking chair with supervision

Boredom

Cause	Behavioral Interventions
<ul style="list-style-type: none">•Some patients with dementia may wander because they simply do not have enough to do•As dementia progresses people find it harder and harder to concentrate for any length of time•They may forget what activities are available or how to initiate them•With reduced activities and social events, the patient may be struggling with increased down-time and change in routine	<ul style="list-style-type: none">•Try* to find ways to keep the person mentally engaged and physically active via independent activities•Identify the most likely times of day that wandering may occur. Plan activities at that time•Staff should help remind patient of activity options and help them get set up



Discomfort or Pain

Cause

- Patients with dementia may be unable to adequately communicate their concerns/discomforts
- Wandering and walking may be due to pain and discomfort that the patient cannot communicate
- Walking in and of itself may ease discomfort



Behavioral Interventions

- Ensure all basic needs are met. Thirst/hunger, toileting, temperature, etc.
- Identify the cause of physical discomfort
- If you think pain may be a concern, request a follow-up from the patient's PCP

Other Interventions to Ensure Safety

- Camouflage doors by painting them the same color as the walls
- Use “Stop” screens across other patient room doors
- Use devices that signal when a door or window is opened
- Provide supervision: Increased staff supervision may be necessary
- Help patients use PPE – mask and gloves – monitor and remind frequently
- Support more frequent hand washing
- Increase cleaning and disinfection during the pandemic – i.e. more frequent cleansing of surfaces throughout the day



THANK YOU



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