



Managing Wandering & Elopements

Lesson Plan

*To use this lesson for self-study, the learner should read the material, do the activity, and take the test. For group study, the leader may give each learner a copy of the Learner's Guide and follow this plan to conduct the lesson. You may copy certificates for everyone who completes the lesson and passes the test. **Approximate time: One hour.***

Objectives

At the conclusion of this lesson, participants will be able to:

1. Explain why people with dementia wander and elope.
2. Use multiple techniques to manage clients who wander or elope.
3. Provide a safe environment for clients who wander.
4. Respond appropriately to an elopement.



Preparation

1. Cut out the yellow cards at the end of the lesson and laminate them together for staff to carry with them while they work.

Activity

1. Give participants a copy of the Activity Sheet entitled "Elopement Facts and Incidents." Ask different participants to read one of the facts or one of the incidents until they have read all the information aloud.
2. Or, prepare in advance by cutting the Activity Sheet apart, separating each fact and incident. Tape a fact or incident under the chairs in your meeting room (or, put them in a basket for participants to draw from). During the training time, ask participants to look under their chairs for the slip of paper. Ask them to read their paper to the group.

Lesson

1. Using the Learner's Guide, prepare a mini-lecture from the material in "Dementia" and "Reasons for Wandering."
2. The rest of the lesson contains specific tips and techniques for managing wandering and elopement behaviors and responding to an elopement.
3. Have participants read small portions of each section, and then ask for discussion. Talk with participants about how to implement these techniques in your facility and with your clients.
4. If your facility has a procedure for responding to an elopement, copy the procedure for the participants and review it together.

Evaluation

Ask participants to complete the test and grade their work. Distribute certificates to those who complete the test with at least 7 correct answers.

Test Answers: 1. behavior; 2. purpose; 3. communication; 4. lighting; 5. diversion; 6. false; 7. d.; 8. false; 9. supervision; 10. c.





Managing Wandering & Elopements

Learner's Guide

Dementia



Dementia is a medical condition that interferes with the way the brain works. A lot of different things can cause dementia, such as:

- Alzheimer's disease
- Brain tumors
- Strokes
- Parkinson's disease
- Alcoholism
- Head injuries



These conditions (and others) destroy brain cells, sometimes immediately and sometimes over many years. As brain cells die or are blocked, parts of the brain cease to work properly, causing one or more of these six major losses:

1. Memory loss
2. Language loss
3. Attention loss
4. Judgment loss
5. Perception or sensory loss
6. Muscle organization loss

These losses make it difficult for a person to take part in day-to-day life. Changes in mood and personality may occur. The individual may lose the ability to control his or her own behavior.

Behavior problems develop, like:

- Physical aggression
- Wandering behavior
- Inappropriate words or actions
- Withdrawal from social contact

Some of these behaviors can put the client at risk for injury or harm.

Wandering or **pacing** (aimless continuous walking) and **elopement** (unauthorized leaving of home or a facility) are quite common in persons with dementia, and make them susceptible to injuries and to getting lost. Poor memory and poor communication ability may make it impossible for the wanderer to remember where he or she is supposed to be, or to explain the reason he or she wanders.



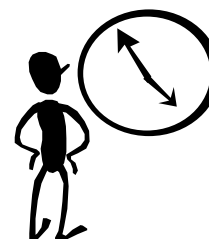
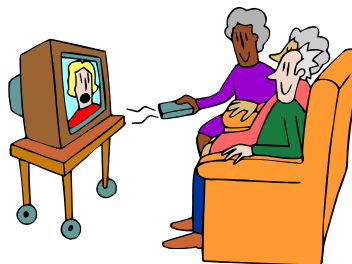
Reasons for Wandering or Eloping

Wandering usually has a purpose. It may be a form of communication when language skills are lost. A client with dementia may be trying to communicate that he needs to urinate, or perhaps he is hungry or thirsty, or he needs to rest. Many things can trigger wandering—loud conversations in the background, noise of kitchen utensils, or a loud TV.



Other reasons for wandering:

- Loss of memory
- Excess energy
- Discomfort or pain
- Stress, anxiety, and agitation
- Being in a new environment
- Inability to recognize familiar people, places, and objects
- Restlessness or boredom
- Trying to express emotions such as fear or loneliness
- Curiosity
- Medication side effects
- Sight of things that trigger memories, such as boots and a coat next to the door may signal it is time to go out
- Wanting to escape from a noisy or busy place
- Confusing night and day
- Fatigue. Clients with dementia tire easily and become restless.
- If wandering occurs at the same time everyday, it may be an old routine that causes it. For instance, if a client attempts to leave every day at 5 p.m. he may believe he is going home from work. When he sees staff leaving it reinforces his thought.



Sundowners Syndrome

If wandering usually occurs in the late afternoon or evening or during the night, the individual may have ***Sundowners syndrome***.

Sundowners is also called ***nighttime confusion***. When it begins to get dark, the person becomes increasingly more confused. The individual may act very anxious, agitated, or angry. This may lead to wandering, pacing the floors, and nervousness.

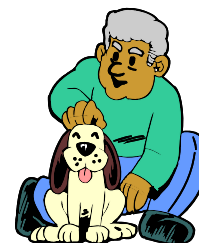


Sometimes people with Sundowners have rapid mood changes, crying or becoming paranoid, aggressive, or even violent. Often they begin looking and calling for family members or try to leave the building.

Managing Wandering and Elopements

Diversion activities may help with wandering or pacing behaviors. These activities can capture the client's interest and take his or her mind off the feelings that are causing the wandering:

- Hobbies
- Reading
- Social interaction
- Listening to music
- Pet therapy



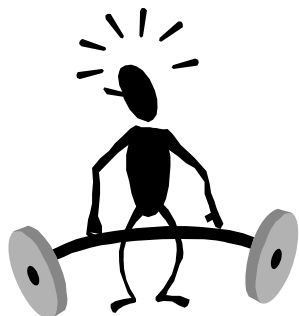
Provide a platform-style rocking chair that moves back and forth easily but has a stable, immobile base. Studies have shown that people with dementia who rock at least 30 minutes every day often become much calmer. The more they rock, the more effective this therapy is on easing depression, anxiety, and tension. When someone is upset or restless, offer a rocking chair.

A client may be looking for a family member. A memory album, memory box, or photographs of family members on the wall might help.



Put away items such as coats, purses, or eyeglasses. Some clients with dementia will not wander without taking certain personal articles with them. If they can't find them, they won't leave.

To minimize restlessness, excess energy, or boredom:



- Provide and encourage regular exercise.
- Wandering may be a way of keeping occupied, so help occupy the person by involving them in a fun activity.
- Let the client pace where it is safe.
- Are bright lights and noise from the TV or radio adding to the confusion or restlessness?
- A person who has spent a lifetime doing chores may need something to do. Provide purposeful activities, such as folding towels or cleaning.

Clients may wander because they have forgotten where they are, or are having difficulty finding the bathroom or their room.

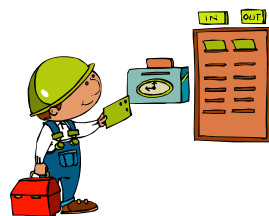
- Post photographs on the doors to various rooms, including a picture of the client on the door to his room. Use a picture of the client as a young adult, since that may be more recognizable.
- Use color schemes to identify different areas.





To minimize restlessness and confusion late in the afternoon or evening (Sundowners):

- Keep the client active in the morning and encourage a rest after lunch.
- A walk outdoors while it is still light outside might reduce restlessness.
- Turn the lights on inside the individual's room or apartment before it gets dark out.
- Take advantage of as much natural light as possible while it is still light outdoors, but before it begins to get dark close the blinds and shades so the person can't see outside.



If the individual tends to wander at about the same time every day, try to find out the person's history. Is she a mother who picked her children up at three o'clock every afternoon? Staff may need to leave by a door that the individual cannot see, so he or she doesn't get the idea that it is time to go.

It is particularly important to watch exit doors when visitors are coming or going. Seeing people leave may make the person with dementia think it is time for him or her to leave also. Slipping out the door behind visitors is a common exit strategy for wanderers.

Creating a Safe Environment for Wandering

If you determine the wandering is not associated with a physical need, such as thirst, hunger, pain, fatigue, or the need to urinate, you might just provide space for walking or exploring. Some facilities make the halls circular so clients won't come to a dead end.

It is not a good idea, however, to let clients pace constantly for long periods of time. Some people with dementia will walk most of the day and sometimes the night, exhausting themselves in the process unless someone stops them. Many sleep for only short periods and walk most of the night, not even stopping to eat. This kind of excessive wandering is harmful, but short periods of walking can work off restlessness if done in a safe setting.



- Remove throw rugs, electrical cords, and other things that might cause a client to trip or fall.



- Arrange furniture simply and keep public areas uncluttered to provide room for walking. Keep the furniture arrangement consistently the same so the environment stays familiar.
- Night lights may help at night. Ensure adequate lighting at all times.



- Putting a stop sign on an exit door may stop a confused individual from going any further in that direction. Or, a black mat in front of the door will stop some wanderers (it may look like a hole in the ground to them). Some facilities have used murals with paintings of books or furniture on exit doors, so a wanderer thinks the door is part of the wall and does not attempt to leave by that door. If you want to use this strategy, check with the fire marshal to be sure you are not hindering recognition of an exit door in the event of a fire.



- Try changing the feel of doorknobs that the wandering client might try to turn. Door knob holders made out of felt material, for example, slip on the knob and make it feel different. This has been effective in preventing some wandering clients from opening doors.



- Have clients with a potential for elopement wear an identity bracelet with name, address, and phone number.
- Keep exit doors alarmed and check alarms daily to ensure they are working.
- Consider safety bracelets that sound an alarm if a wanderer succeeds in getting through any exit doorways.
- Use Check-In/Check-Out Logs so staff is aware of who has left the building for authorized or legitimate reasons.

- Change door codes regularly.
- Do regular checks at certain times of the day and night to see if every client that is supposed to be in the building is present. You can target these checks specifically for clients with an elopement risk if a total building check is not reasonable or desired. Meals can be good times to ensure that confused clients are where they should be.



No building is elopement-proof!
Supervision of individuals with dementia is absolutely ESSENTIAL.



RESPONDING TO AN ELOPEMENT

Your facility may have a procedure to follow if someone elopes.

Here are the steps to take for an elopement attempt:

1. If you see a client that you know should not leave trying to exit the building, stop the client by distracting him or her with something of interest. Offer a diversion activity or a snack to get attention.
2. If that doesn't work and the client refuses to cooperate, get help from other staff if possible.
3. Whether or not you have help, ***do not leave the client for any reason***. A confused person can wander out into the street or fall into a ditch in seconds. Continue redirecting the client into the building.



Here are the steps that staff should take as soon as you discover that a client is missing:

1. **Conduct a thorough search of the building immediately and rapidly. Organize the search so that you know all areas are covered.**
 - a. All staff should gather in one place and agree to a plan.
 - b. Each employee should have specific instructions for the places he or she is to search. For example, one person might check one side of a hallway while another searches the other side. If the building is a continuous circle or square, have staff members start from opposite directions and meet in the middle.
 - c. Look carefully but quickly in every room, every bathroom, every closet, every opening of any type large enough for a person (and remember that people can sometimes fit into very small spaces). Check locked rooms as well.
 - d. Look under all beds and in all showers.
2. **Do a thorough search of the grounds.**
 - a. If there is enough help, two people should go outside and walk around the building, each going in the opposite direction and meeting behind the building, then returning inside.
 - b. One staff member should stay in the residence at all times, so if only two people are working, one will search outside while the other stays with the clients inside.
Be calm and keep order.



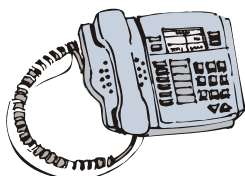


- c. If only one person is working, that individual should conduct a quick search of the premises immediately around the building.
- d. **NEVER** leave the other clients unattended for more than a few seconds. It may be necessary to go to every exit door and look around immediately outside that door.
- e. If you are able to conduct a thorough search of the grounds, do the following, using a flashlight if it is dark outside:
 - Look in every car parked near the building
 - Check under and behind bushes
 - Look closely in any bodies of water
 - Look behind and under rocks and mounds.
 - Look inside any ditches, holes, or hollow areas.
 - Walk around any near-by hill.
 - Look into and under any construction materials or other objects on or near the premises.



3. If you do not find the client, do the following:

- a. Call the Administrator and explain what has happened. Follow his or her instructions.
- b. Depending on your Administrator's instructions, you may need to call 911 to notify the police and emergency responders. ***A general rule of thumb is to notify the police if you have not found the client within thirty minutes.***
- c. Someone will need to contact the client's responsible family member or other authorized representative. The Administrator will probably do this.
- d. The Administrator may want you to call the client's physician.
- e. Only share information with people authorized to receive it.



4. If you do not locate the client and the police take over, be ready to provide important information about the client:

- a. Name, nickname, age, and gender
- b. A photograph
- c. Physical description, including height, weight, race, eye and hair color, and color and type of clothing worn (if known)
- d. Time discovered missing, and where client was last seen
- e. Mental and physical condition
- f. Addresses and phone numbers of any known friends and relatives, and previous home address (if known)





When the Client Returns or is Found

- Do not scold or show anxiety. The client may be confused and frightened.
- Reassure the client.
- Get the individual back into a regular routine as soon as possible.
- Contact everyone who you informed of the elopement, letting them know the client has been located.
- A nurse or physician should assess the client as soon as possible.



Documentation

In addition to documenting the elopement in your service notes, whoever discovered the client missing will need to fill out an incident report. Also complete an incident report if the client tried to elope but was not successful. In the report, be sure to include the following information:



- The time the client was last seen, what the staff did, and the facts of how the elopement occurred.
- The client's physical, emotional, and mental status before the elopement.
- How, when, and where the client was found, and the client's condition when found.
- Describe any injuries and what was done to treat the injuries.
- Describe the client's clothing, the temperature outside, and how much and which areas of skin were exposed.
- List all the people that were notified of the elopement.

IF A RESIDENT IS MISSING

1. **Confirm Absence.** Check the client's apartment and all common areas.
2. **Search Entire Building.** Look in each apartment, in all closets, under beds, in showers, & in all rooms, even locked rooms.
3. **Search Surrounding Area.** Check the courtyard, parking lot, and building property.
DO NOT LEAVE THE RESIDENCE UNATTENDED FOR MORE THAN A FEW SECONDS.

IF A RESIDENT IS MISSING

4. **Search Thoroughly.** Look in all cars, under and behind bushes, in bodies of water, behind hills, rocks, or mounds, in holes & ditches, & under objects such as construction materials. Look into & under every potential hazard.
5. **Get Help.** Contact the Administrator.
6. **Re-Establish Order.** Calm the clients. Do not share information about the situation with anyone not authorized to receive information.





Elopement Facts and Incidents

Elopement: A client leaves a facility without staff knowing about it.

1. Seventy percent of elopement lawsuits involve a client's death.
2. In eighty percent of elopements, the facility knew the client was a wanderer with prior elopements.
3. In forty-five percent of elopements, the event occurred within the first 48 hours of move-in.
4. The main causes of elopement-related deaths include:
 - Being struck by a vehicle
 - Being exposed to heat or cold
 - Drowning
 - Physical and sexual abuse



Real Life Incidents

- ✕ An 83-year-old client eloped from her personal care facility around midnight. She fell into a watery pit at a construction area on the facility's grounds and drowned in the mud.
- ✕ A client walked away from her care facility, fell in a drainage ditch, and drowned.
- ✕ A 67-year-old woman died after staff mistakenly locked her out of the facility overnight.
- ✕ A 64-year-old assisted living client with dementia left the facility without anyone knowing and drowned.
- ✕ A 92-year-old assisted living client with dementia broke a window in his apartment, crawled out, and wandered across the parking lot into a field. He collapsed in the field and died in freezing temperatures. He was looking for his wife, who was in the hospital.
- ✕ An 80-year-old person with Alzheimer's disease wandered away from the facility and drowned in a nearby creek. They found the client's body four days later.





Managing Wandering & Elopements: Test

Name _____ Date _____ Score _____
(7 correct answers required to pass)

Directions: Fill in the blanks or circle the correct answer.

1. Dementia causes changes in the brain, which in turn cause _____ problems.
2. Wandering usually has a _____.
3. Wandering may be a form of _____ when language skills are lost.
4. To help someone with symptoms of Sundowners syndrome, provide good _____ before it begins to get dark.
5. _____ activities may capture a client's interest and distract him or her from the feelings that are causing problem behaviors.
6. If you see a client eloping, you should call for help before doing anything else.
 - a. True
 - b. False
7. What is the first thing you should do when you discover a client is missing?
 - a. Write an incident report
 - b. Call the police
 - c. Call the family
 - d. Conduct a thorough search
8. When you find a client who has eloped, be sure he or she knows how angry you are and how much trouble he or she has caused.
 - a. True
 - b. False
9. Since no facility can be elopement-proof, staff _____ of clients with dementia is essential.
10. If a client with dementia that usually comes to meals doesn't appear for a meal, it is best to:
 - a. Assume the client is sleeping or not feeling hungry, and leave him or her alone.
 - b. Remind yourself to go check on the client later, when you're not as busy.
 - c. Immediately look for the client.
 - d. Call the family.





Certificate of Completion

Awarded to: _____
(Name of Participant)

**For Completing the
One-Hour Course Entitled
*Managing Wandering &
Elopements***



Date of Course: _____

Organization: _____

Presented by: _____
(Signature of presenter, or write "self-study")

