



ECHO IDAHO: **Alzheimer's Disease and Related Dementias**

Safety Evaluation in Dementia: Addressing Finances, Driving, Aging in Place, Firearms, and More

8/27/2024

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The Idaho ADRD ECHO Series is supported by funding from the State of Idaho Alzheimer's Disease and Related Dementias Program.

Learning Objectives

- Develop skills and improve confidence in addressing safety concerns for those living dementia as it pertains to finances, medications, living alone, driving, firearms, planning for the future
- Learn phrases to help improve engagement in safety conversations
- Understand when safety is the power of attorney's responsibility

Dementia And Driving

- Warning Signs:

- Forgetting how to locate familiar places or your target destination
- Failing to observe traffic signs
- Making slow or poor decisions in traffic/Driving at an inappropriate speed
- Becoming angry or confused while driving
- Hitting curbs; errors at intersections
- Using poor lane control
- Confusing the brake and gas pedals
- Returning from a routine drive later than usual

<https://www.alz.org/>

- Evidence:

- [Drivers With Dementia and Outcomes of Becoming Lost While Driving](#)

Hunt, L., Brown, A., & Gilman, I. (2010) *The American Journal of Occupational Therapy*, 2010, Vol. 64(2), 225-232.
<https://doi.org/10.5014/ajot.64.2.225>

Driving and Dementia

- Cognitive Impairments Affecting Driving
 - Attention: Difficulty maintaining focus on multiple stimuli
 - Executive Function: Challenges in planning, decision-making, and problem-solving
 - Spatial Awareness: Issues with navigation and spatial awareness
 - Increased risk of accidents and traffic violations
- Assessment Tools
 - Cognitive Assessments
 - Driving Simulators and On-Road Evaluations
- Evidence-Based Recommendations
 - Regular monitoring as dementia progresses
 - Educate patients and caregivers about alternative transportation options and safe driving practices
- Ethical Considerations
 - Ethical Dilemmas: Balancing patient autonomy with public safety concerns

Driving and Dementia

- Evaluation:
 - Involve your medical professional – ask questions
 - Evaluation by OT driving specialist
 - Testing involves clinical testing with standardized assessments and on-road or simulator component
 - Results shared with physician
 - Cessation and other options
- What to do if you are concerned?
 - Talk using guidelines
 - <https://www.alz.org/>
 - [AARP smart driver](#)
 - [AAA and CarFit program](#)

Driving Assessment Providers in Idaho/Utah

- Jeff Hines (Twin Falls) 208-814-2570 (CDRS)
- Renae Scott (Coeur d'Alene) 208-625-5315 (CDRS)
- St. Luke's (Boise) 208-381-2222 stlukesonline.org
- Idaho State MOT clinic (Pocatello) 208- 282-4285
- Lisa Hong (Idaho Falls) 208-521-3253

- University of Utah (Salt Lake City) 801-581-2221

Firearms and Dementia

- Risks and Implications
 - Cognitive Decline: Impaired judgement and motor skills increase the risk of accidents, self-harm, and unsafe handling of firearms
 - Behavioral changes such as increased agitation or paranoia
 - Memory loss and confusion also affect safe storage and use
- Evidence-Based Recommendations
 - Secure firearms in a safe location, ideally out of reach
 - Engage with family members to discuss safety and potential removal
- Legal and Ethical Considerations
 - Local firearm regulations and policies
 - Ethical Challenges: Balancing patient rights with safety concerns

Living Alone and Dementia

- Challenges of Living Alone
 - Challenges with Activities of Daily Living: Cooking, cleaning, and medication management
 - Safety Risk: Increased risk of falls, neglect, and emergencies
 - Social Isolation
- Indicators of Risk
 - Signs of poor self-care or unsafe living conditions
 - Frequent confusion or disorientation
- Evidence Based Recommendations
 - Technology Solutions (smart home devices, emergency alert systems)
 - Home Modifications
 - Community Resources and Supportive Services: Home health, assisted living, etc.
- Support Strategies
 - Interdisciplinary Collaboration
 - Family Engagement
 - Preventive Measures
 - Regular check-ins from family, friends, or neighbors

References:

- AAA: <https://exchange.aaa.com/safety/senior-driver-safety-mobility/aaas-advocacy-additional-resources/>
- AARP: <https://www.aarp.org/membership/benefits/auto/driver-safety/>
- Alzheimer's Association: <https://www.alz.org/help-support/caregiving/safety/dementia-driving>



Planning for the Future: Plan B

- Many people do not want to consider leaving their home to move into assisted living, discuss it as follows:
 - Plan A: stay in your current home.
 - Plan B: What does that look like?
- We say things like, “If you or your care partner had a sudden illness or injury, and you found yourself needing some help, what would you like that to look like? It is important to be prepared by thinking about how you would afford additional in-home care or consider living somewhere else like a certified family home or assisted living. We recommend you start exploring these options now and have your “Plan B” prepared.

Medications



- Are they routinely refilling medications at the right time? How do you know?
 - Look at fill date on prescriptions bottles
 - If you don't have access to the bottles, call pharmacy to inquire when medication was last refilled.
- If not, what can be done?
 - Get someone to set up pill boxes and assist with timely refills
 - Set up blister packs (pill packs, medi packs) with the pharmacy
 - If patient was not routinely taking medications and now something has changed such that patient will start taking medications daily (blister packs, move into ALF), perhaps consider reducing some doses to avoid overmedicating or harmful side effects from suddenly re-starting at too high of a dose.

Finances



- Are they paying bills on time, making double payments? How do you know?
 - Encourage a team approach. Use language like, “we are all subject to scamming, especially as we age. It can be helpful to have a friend or family member on our accounts to help us look for signs of scamming.”
- What can be done?
 - Get a friend or family member on bank accounts to provide an extra set of eyes
 - Set up a Durable Power of Attorney for finances in case of emergencies. Use normalizing language. “any one of us could get in a car wreck tomorrow and we would need someone to be able to access our accounts and pay our bills. We should all have a back-up person on our accounts and a DPOA for finances.”

Capacity

- Does patient have Capacity to make his or her own decisions? How do you know?
- Aid to Capacity Evaluation (ACE)
- If he/she/they **does** have capacity:
 - Complete the following:
 - Durable Power of Attorney for Health care: free, no lawyer required.
 - Durable Power of Attorney for Finance: no lawyer but will need to be notarized.
 - You can find these forms on www.idaholegalaid.org search for “advance directives”
 - Remember: while this person has capacity, the individual ultimately has the right to make unsafe decisions, have poor hygiene etc.. (except when public safety is at play such as with driving).
- If he/she/they **does not** have capacity:
 - A letter needs to be written by the provider who does the capacity assessment and the DPOA for health care and finances is in effect.
 - If NO DPOA for health care and/or finances exists, then a lawyer and judge will have to get involved to establish guardianship and/or conservatorship. This process can be initiated with a call to Adult Protective Services if not other route identified.
- You can report vulnerable adults to this registry in Ada county
 - <https://adacounty.id.gov/sheriff/safety/vulnerable-population-registry/>

Agitation

- **Prevention!!!**

- Maintain calm in the home
 - [Creating a calming, helpful home for people with dementia | healthdirect](#)
- Avoid triggers
- Address unmet needs

- Learn tools to de-escalate

- [Anxiety & Agitation | Alzheimer's Association](#)

- *The above website suggests Rexulti as a treatment for agitation. I do not support this choice as first line therapy.

- If after hours, call Alzheimer's Association hotline

- 1-800-272-3900
- <https://www.alz.org/>

- New Emergency Protective Placement Law

- Will allow for a 24 hour hold to try and identify underlying medical etiology and treat as appropriate
- Call police if patient is a danger to self and others.



911

Emergency



References

- Doucette et al. Firearms, Dementia, and the clinician: Development of a safety counseling protocol. J Am Geriatr Soc 2020 Sep ;68 (9): 2128-2133
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- Lee. L, Molnar. F Driving and Dementia: Efficient Approach to Driving Safety Concern in Family Practice. Can Fam Physician 2017. Jan 63(1) 27031.

Questions?