As dementia progresses, there are risks to a person's health and safety that need to be taken into consideration, whether they are living alone or with someone else. This edition, we will address four common topics in dementia care and offer practical steps to lower risks while providing resources to consider when beginning at home safety planning. Our goal is to empower care partners with knowledge, to enhance a person with dementia's independence while increasing safety at home while living in the community!

We will focus on the following safety topics:

- Driving
- Firearms
- Wandering
- Living Alone

### Driving

A driver's license is a symbol of independence. Dementia can make it unsafe for a person to drive because of changes to their memory, attention, reaction time, ability to problem solve or anticipate consequences. Doctors are required to alert the DMV when they determine someone isn't safe to drive. This can be a very difficult and emotional conversation if the person doesn't understand and may not have insight to understand the seriousness, or they forget and try to drive anyway.

**When is the right time to stop driving?** It's not always clear nor is it the same for every person. A few questions to ask that may help you determine when to talk to the person and the doctor:

- Are there any unexplained dents or scrapes?
- Have they become lost?
- Have they received traffic tickets?
- Has there been risky driving, like driving too slow for traffic conditions or making turns into traffic?

### Facts

People with dementia are 2 to 8 times more likely to get in an accident while driving compared to people of the same age without Alzheimer's or dementia. (Journal of Geriatric Psychiatry and Neurology)

40-60% of people living with dementia are in homes with firearms. (Alzheimer’s Association)
Driving continued...

When brain changes affect someone's ability to reason, extreme measures may be needed to ensure safety of the person and others when someone refuses to stop driving. Here are some ideas to try limiting or eliminating driving:

- **Get a written statement from the doctor.** May help as a visual reminder or the seriousness.
- **Disable the car.** Remove the battery or spark plugs. Use a wheel clamp or empty the gas tank.
- **Hide or pretend to lose the car keys.** Could also replace the key with one that doesn't work.
- **"Bring the car to the shop."** It's in for seasonal maintenance, a factory recall, repairs or storage.
- **Replace with alternative.** You'll take them, arrange for a friend or call ADRC for transportation.
- **Have a police officer come speak to them.** They may oblige to the authority.
- **Ask your doctor for a referral for a driving eval.** Often not covered by insurance but helpful.
- **Fill out a 'Driver Condition or Behavior Report' with DMV.** Form MV3141. wisconsindot.gov/Pages/dmv/license-drvs/mdcl-cncrns/citizens.aspx

Helping a care recipient to stop driving can be difficult. Don't hesitate to reach out to ADRC for help!

Additional reading: www.alz.org/help-support/caregiving/safety/dementia-driving

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**Firearms**

When someone is living with Alzheimer’s or another dementia, firearms can pose a significant risk if not addressed. Early on in a diagnosis, there can be suicide risk due to inability to cope with the news or early symptoms. As the disease progresses, the person may not recognize someone they've known for years and view this person as an intruder or may experience frightening hallucinations or paranoia which may cause a person to try defending themselves. Even if the person has past experience with guns, their current abilities can be altered because safe use of firearms requires complex cognitive abilities and quick decision-making skills, all of which may be compromised due to dementia. While acknowledging the dangers associated with guns, many people in the early stages can safely possess firearms in order to participate in healthy recreation, social bonding and a sense of security by keeping their firearms.

**Tips & Tools to consider:**

- **Plan and Communicate EARLY!** Check out: https://firearmlifeplan.org/
- **Gun Trust or Advance Directive, Legacy Sharing**
  - Learn more at https://www.wisbar.org/
  - Additional reading: https://dementiacoconnections.org/dementia-inclusive-gun-safety/
- **Gun Safes and Locks** - Safes can be purchased at sporting goods store. Locks are available for free at ADRC. 608-785-5700
- **Removing Guns from Home:**
  - At some point in the disease, it will not be safe for a person to manage firearms safely and it may be best to remove them entirely. Consider asking trusted family or friends who are knowledgeable about firearms to move OR contact local firearms community (gun retailers, gunsmiths, or law enforcement) to support if you do not have a succession plan in place.
  - Once removed, remove reminders of firearms: cases, ammunition, racks, holsters, pictures.
Wandering

Wandering means getting lost. Your loved one may think they are leaving for a purpose but may not be able to find their way home. This can put them in dangerous situations (walking into traffic, no access to food/water/medication, exposure to weather elements, or taken advantage of). Wandering can happen any time and caregivers need to prepare for the first time it may occur. Usually, people wander due to an emotion (boredom, restlessness, agitation, anxiety, stress), an unmet basic need (hunger, thirst or needing to use bathroom) or they’re searching for something or feel a task needs to be completed.

Tips for wander prevention:

- **Make sure basic needs are met.** Provide regular meals or snacks, address bathroom needs and make sure their day includes adequate stimulation and engagement.
- **Secure the house.** Camouflage the doors, use door alarms and cameras. Stop signs on doors, black mat in front of door.
- **Supervise when out at community activities.** Never leave your loved one alone in a public setting.
- **Consider a medical ID bracelet.**
- **Wandering devices.** A GPS device that is not easily removed.

If they do wander:

- **Search the immediate area.** For about 15 min. If not found, file a police report stating the person has dementia.
- **Supply an updated photo to the police.** Used in SilverAlert.

Living Alone

Many people with dementia can live alone for some time in the earlier stages. In addition to addressing the topics above, consider:

- **Cooking and Eating**
- **Medications & Falls**
- **Frauds and Scams**
- **Loneliness and Isolation**

Some of these risks may not apply now but will over time. Regular assessment of these areas can prevent accidents/injuries. Helping your loved one establish a routine and remain connected can support their independence.

For ideas to minimize risks:

- Call the ADRC 608-785-7500. Discuss resource options that fit your needs with local aging experts.
- Trualta, online caregiver learning portal- register for free at wisconsincaregiver.trualta.com/login

Facts

60% of People with dementia will wander. Wandering can happen to anyone with dementia who's mobile (walk, use wheelchair, cane or walker) (Alzheimer's Association)

Estimates indicate that 13.8 million older adults live alone in the U.S., including one-third of people with dementia and one in seven of those with Alzheimer’s disease. Even more problematic, 50% of this population doesn't simply live alone; they have no identified caregiver, either. (Benjamin Rose Institute on Aging)
UPCOMING SUPPORT & EDUCATION
April - May - June 2023

MONDAYS
- **OASIS Day Respite** 608-780-0471 *Register
  Weekly Mondays, 9-11 am
- **Coffee Connect Support** – All Stage Caregiver
  only 608-386-0767. Mondays, 10 am virtual
- **Club Connectivity** - Early diagnosis/MCI
  & Caregivers 608-519-2088
- **Once/month outing**, 11:00 am-2:30 pm
- **Parkinson’s Disease Support Group** 1st
  Mon/Monthly 5-6:30 pm Black River Beach
  Neighborhood Center 608-789-8640
- **Caregiver Education Hour** Register 608-785-5700
  Mon. April 3, 9-10 am - Emergency Planning
  Mon. April 17th 9:30-10:30 am - At home care
  plan and setting up a dementia friendly home

TUESDAYS
- **Caregiver Support Group** – All Stages
  Caregiver 608-386-8908. 2nd Tuesday/month
  1:15-3:00 pm Good Shepard La Crosse
- **ALS Care Connections Support Group** – All
  Stages 608-461-2905. 1st Tuesday/Month
  4-5:30 pm @ Community Connections Center

WEDNESDAYS
- **Connect Smart** PWD&Caregiver 608-519-2088. 2nd & 4th Wednesdays, 12:30 pm-2 pm
- **SPARK! at Clearwater Farm Onalaska**
  3rd Wed/Month, 10:30 am-12 608-385-4819
- **Grief Support & Education**
  @Community Connections 608-519-2088
  April 12, May 10, June 14, 10-11:30 am

THURSDAYS
- **OASIS Day Respite** 608-780-0471 *Register
  Weekly Thursdays, 11-3 pm
- **Dementia Friendly Coalition** – 608-386-0767
  1st Thurs/Monthly 1-2:30 pm virtual & in person

FRIDAYS
- **Giving Hearts Choir** – All Stages, Caregivers,
  Friends. Call Ruth 608-792-8608
  Weekly Rehearsals Fridays 10 am,
  North Presbyterian La Crosse
- **Brain & Body Fitness** – Early Stages/MCI PWD
  Fridays 10-11 am First Free Church
  Pre-register 608-785-5700

Alzheimer's Association Education - 800-272-3900

Dementia Awareness month is to inform and unite
individuals, organizations and the community with
brain health opportunities, awareness of dementia
and the variety of supports and resources available.

Event Highlights:
- All Month- Movies at the County Libraries
  BrainFit Healthy Activity Bingo
- 6/1 Community Book Discussion
- 6/5 Make a memory Book
- 6/7 Interactive Memory Cafe
  Engagement Skills Workshop for Caregivers
  & Professionals
- 6/8 & 6/22 Experience Dementia Simulations
- 6/14 Ice Cream Social & Coulee Region Giving
  Hearts Choir Performance
- 6/15 Future Planning Class "Your Affairs"
  Nutrition and Brain Health Presentation
  Elder Abuse Awareness Walk
- 6/20 Emergency Preparedness
- 6/23 #EndAlz Fest Fundraiser

There's More! Get a copy of the full schedule!
Call the ADRC 608-785-5700 and find "Dementia
Friendly Community" on Facebook

Sign up for a copy of this newsletter: 608-785-5700