



## WORKING WITH A RESIDENT

## WHO IS EXIT-SEEKING:

A LEARNING MODULE FOR LONG-TERM CARE STAFF

This learning module was a collaborative project, developed by the St. Joseph's Healthcare, Halton Seniors Mental Health Outreach Program, through funding received from the Mississauga-Halton LHIN.

Acknowledgements are made to the following MH LHIN LTC homes who participated in quality improvement exercises which led to the conceptualization of this project: Cawthra Gardens, Mississauga LTC, Post Inn Village and Wyndham Manor

# Working with a Resident who is Exit-Seeking: Learning Module

What you will need to facilitate this module:

1. “Understanding Exit-Seeking Behaviours” information sheet
2. Flip chart paper and markers for group problem solving and discussion
3. “Exit-Seeking Drill” instructions
4. “What to Do in the Moment” guide
5. 3 staff members to role play the exit seeking scenario, plus additional drill supplies

Instructions:

1. Review/provide “Understanding Exit-Seeking Behaviours” handout with staff members. As you proceed through the material, there are several discussion prompts, as indicated by the icon below. When you see this icon, take a moment to ask staff to reflect on the following discussion points:



- What are some of reasons why exit-seeking is challenging for us as care providers?
  - What are some of the possible reasons and/or triggers of exit-seeking behaviours in persons with dementia: What needs are the resident trying to fill?
  - How would you feel if you were “walking in their shoes,” and what are some of the things that would help you to feel better/worse in these situations?
  - What are some possible best care strategies to respond to exit seeking WHILE IT IS OCCURRING? Review/provide “Intervention Strategy” sheet.
2. Review/provide “What to do in the Moment” guide. Highlight the G.E.M.!
  3. Review drill sheet and complete the role playing scenario.
  4. On flip chart paper, ask staff to list some possible best care strategies TO PREVENT exit-seeking behaviours in their residents. Highlight the G.E.M.! Review/provide “Prevention Strategy” sheet. Ask staff to reflect on the following discussion points:
    - How might these prevention strategies be incorporated into your LTCH?
    - Are there any residents to consider for implementing these care strategies?
    - What other resources/team members could be involved?

# Understanding Exit-Seeking Behaviours: Information Sheet

## Background

Exit-seeking wandering behaviour is commonly observed in persons with Alzheimer's disease and other types of dementia. It is characteristic of residents with middle-stage dementia, as these residents still have many higher functioning physical abilities (Lucero, 2002). Recent statistics identify that 15-60% of individuals with dementia will exhibit wandering behaviours (Tufanaru, 2013), and it is estimated that 72% of individuals who elope will attempt to elope again (Wick & Zanni, 2006).



There are numerous challenges that accompany exit-seeking behaviours in residents with dementia (Aud, 2004; MAREP, 2005). What are some of these challenges?

- Anxiety that results from the resident's desire to leave, and further agitation if staff attempt to redirect or distract the resident
- Conflicts with co-residents from wandering into others' rooms
- Fatigue and falls from excessive exit-seeking or wandering
- Elopement from the facility which poses a significant safety risk for staff and residents
- Potential for decreased family visits if staff identify that family visits are a trigger for wanting to leave

Exit-seeking wandering behaviour is considered a goal-directed behavior that is purposeful, and attempts to fill a particular need for the person with dementia (Algase et al, 1996). It is also a fairly high level task as it requires the cognitive ability to form a thought, plan an action, and carry out the plan. Despite having these abilities, these individuals have little insight into their present circumstances and often believe they still have responsibilities (Lucero, 2002). Although it can be a problematic and challenging behaviour, consider for a moment that this person is simply trying to fill a need and that they are using their remaining cognitive abilities to figure out the best way to accomplish this.



With this in mind, what needs might your residents be trying to fill when they are trying to leave your facility?

- Trying to go "home"
- Trying to escape the noise of an over-stimulating environment
- Belief that they have "responsibilities" to keep – to their loved ones, to their homes, to their daily chores/tasks
  - "I need to get to the bank."
  - "I need to go to work."
  - "I need to get home. My children are coming home from school."

# Understanding Exit-Seeking Behaviours: Information Sheet

## Putting yourself in their shoes

1. It is 3:00 and your shift has just ended. You have to pick up your children from school at 3:25, and you have just enough time to get there. I stop you at the front door and tell you that you can't leave, and you'll have to stay the night. You don't have anyone else to call who can pick up your children.



How would you be feeling in this situation?

What would help you to feel better?

What would make you feel more upset?



2. You have to deposit money into your bank account before the bank closes at 4pm. If you don't get there before 4pm, there won't be enough money for the mortgage payment, which is automatically withdrawn the next morning. As you are getting ready to leave, I stop you at the front door and tell you that you can't leave, and you'll have to stay the night. You know that your bank account will go into overdraft if you don't get there in time.



How would you be feeling in this situation?

What would help you to feel better?

What would make you feel more upset?

If someone said to you:

- "You can't leave the building. You have to stay here."
- "Your family is taking care of those things for you. You don't need to worry about it."
- "I'm here for you. Let's see who we can call that can help."
- "I can see how important this is to you, and that you're really worried. Let's go together."



**How would  
these different  
responses make  
you feel?**

# Understanding Exit-Seeking Behaviours: Intervention Strategies

| TO DO:   | TO AVOID:  |
|--|--|
| <p><b>REMAIN CALM AND USE A CALM SOOTHING VOICE. ATTITUDES AND MOODS ARE CONTAGIOUS.</b><br/>Research shows that residents with dementia are acutely sensitive to the moods and attitudes of caregivers.</p>   | <p>Avoid responding with distress, as this is likely to increase the resident's sense of distress, as well.</p>  |
| <p><b>IDENTIFY RESIDENT'S AGENDA BEHAVIOUR</b><br/>What is his/her plan of action and what are the emotions or needs related to this?<br/>Allow the resident to play out his/her agenda of leaving the facility (accompanied by staff). This requires a team approach (nursing staff, dietary, administration, housekeeping, etc.)</p> | <p>Do not try to prevent the resident from leaving the facility. Research shows that it takes a lot more time to de-escalate a resident who is verbally and physically responsive when you are trying to prevent them from leaving the facility than it does to accompany the resident outside for 5-15 minutes.</p> |
| <p><b>USE CONCRETE, SIMPLE AND EXACT INSTRUCTIONS</b><br/>Research shows it to be much more effective to tell residents in slow, concise and concrete sentences what you WANT them to do.<br/>Example: "Let's walk over here."</p>   | <p>Avoid telling the resident what you DON'T want them to do. If I tell you "Don't go outside," you have to think about outside first, and then you have to un-think it. This is a complex cognitive process.</p>  |
| <p><b>IDENTIFY FEELINGS AND NEEDS THAT UNDERLIE THE BEHAVIOUR</b><br/>Provide a Genuine Encounter Moment (G.E.M.) to connect with the resident and let them know you hear what they're saying.</p>   | <p>Avoid dismissing or negating the resident's feelings and needs. If the resident is worried because he/she needs to get home in time for children, try to relate to this underlying concern versus trying to convince him/her to stay.</p>   |
| <p>(Cohen-Mansfield, Werner, Culpepper &amp; Barkley, 1997; Lucero, 2002; Rader, 1987)</p>   |  |

# Understanding Exit-Seeking Behaviours: Prevention Strategies

“Research has identified that there are four times a day in a long term care setting that the environment routinely and inadvertently prompts exit-seeking behaviour in many middle-stage residents – after every meal and at the afternoon change of shift.” (Lucero, 2002, pg. 278).

1. **Promptly engage residents with a known history of exit-seeking in purposeful, work related activities as soon as they complete their meals. This should be added to care plans** (Lucero, 2002).
  - a. Use activities that would have been normal chores in their home and experience.
  - b. Request assistance with meal clean-up, sweeping floors, wiping tables, arranging chairs, sorting flatware, etc.
  - c. Polishing silver
  - d. Watering plants
  - e. Clip coupons or scrap paper for memo pads
  - f. Sort and fold tea towels, wash cloths, etc.
  - g. Request assistance to make things for “the children,” such as felt or sock puppets, sorting blocks, etc.
2. **Consider use of structured recreational group activities during the time of afternoon change of shift, in a setting away from the staff interchange** (Lucero, 2002).
  - a. Sing-a-longs that provide comfort, solace and/or inspiration
  - b. Videos with simple story lines and lots of action, such as old comedies (“I Love Lucy,” “Little Rascals”), videos featuring dancing (Lawrence Welk), old cartoons (“Betty Boop,” “Felix the Cat”)
  - c. Exercise activities that involve rote, reflexive responses (kickball, ball toss, parachutes)
  - d. Completing the end of familiar proverbs and titles to familiar old songs
3. **Environmental considerations at change of shift:**
  - a. Put on coats when out of view of residents
  - b. Be mindful of not openly declaring your departure
  - c. Consider use of alternate doors if possible



**How might you incorporate these strategies into your LTCH?**

# Working with a Resident who is Exit-Seeking: Exit-Seeking Drill

## Exit-Seeking Scenario

- Mr. Ellen is an 83 year old male resident with moderate dementia who was admitted to the third floor of your facility over one year ago.
- Prior to admission, he was living in his own home, but also owned a summer cottage up north, where he had planned to spend his retirement years.
- As spring-time approaches, he begins to talk more and more about “heading to the cottage” despite the fact that family have informed him that the cottage has since been sold.
- This evening, he has packed up his suitcase, added it to his walker, and is heading toward the elevators because he needs “to get to the cottage to sort things out.”
- He has made it to the first floor of your facility, and is heading toward the front door. It is starting to get dark outside, and the weather is cold and windy.

## Supplies Needed

- cell phone
- winter coat and/or reflective safety vest

## Drill Instructions

1. After reviewing the scenario, ask 1 staff member to role play the part of a resident who is heading toward the front entrance of the building with his walker and suitcase, stating “I need to get out of here so I can get up to the cottage.”
2. Ask 1 staff member to role play the part of a staff member who is the first to respond to the situation, using the “What to Do in the Moment” guide as a resource. This staff member should note the following:
  - Do not attempt to stop or prevent resident from leaving
  - Remain calm and speak in calm voice
  - Through conversation, try to identify resident’s agenda/unmet need
  - Provide concise and simple instructions
3. Ask 1 staff member to role play the part of another staff member who observes what is happening from afar, using the “What to Do in the Moment” guide as a resource. This staff member should note the following:
  - Do not intervene unless asked to do so
  - Inform supervisor of event
  - Gather supplies (above) to assist staff member to exit building safely, if needed
4. Remaining staff members are to observe and provide input to responding staff members.
5. Facilitate a discussion regarding the following:
  - Why is it important to NOT prevent resident from leaving, if possible?
  - What questions can we ask to help identify the resident’s agenda/unmet need?
  - Why is it important for the second staff member to NOT intervene, if possible?
  - Why are the supplies needed?
  - What is our plan for safely guiding the resident while outside? Where? How far?
  - What is our plan upon the resident’s return from his/her walk outside?

# Working with a Resident Who is Exit-Seeking: What to Do in the Moment

## Resident is trying to exit the building & I'm responding

Do not attempt to prevent or stop the behaviour as this may escalate the resident's fear and evoke a physical response.

Always remain calm and speak in a calm, soothing voice. Attitudes and moods are contagious.

Use concrete, simple and exact instructions: tell the resident what you want them to do, not what you DON'T want them to do. For example: Instead of saying, "Don't go outside," try saying "Let's go over here."

Identify the resident's agenda and allow him/her to play out the agenda. Allow him/her to leave building and go outside for a walk if needed.

Throughout the interaction, try to identify the feelings that underlie the behaviour:  
Provide a Genuine Encounter Moment (GEM) to connect with the resident and to let them know you hear them. A lot of good can happen in a moment.

## Resident is trying to exit the building & My co-worker is responding

Only enter the interaction if you are asked to do so by the person who is responding, as too many people talking at once can escalate behaviours.

Inform charge nurse, supervisor or manager.

Help to find a staff member who has a good rapport with the resident, as this person might have an easier time relating to and redirecting the resident.

Ensure the safety of staff and resident if they are preparing to exit the:  
Is a winter coat or umbrella needed?  
Is a cell phone needed?  
Should they wear a reflective vest if walking outside in the dark?

What needs to be done upon resident's return? Gather necessary items:  
Are there particular staff members?  
Supplies? (cup of tea, snack, etc.)  
Family member on the phone line?

## References

- Algase, D.L., Beck, C., Kolanowski, A., Whall, A., Berent, S., Richards, K. & Beattie, E. (2006). Need-driven dementia compromised behaviour: An alternative view of disruptive behaviour. *American Journal of Alzheimer's Disease and Other Dementias*, November-December, 10-19.
- Aud, M.A. (2004). Dangerous wandering: Elopements of older adults with dementia from long-term care facilities. *American Journal of Alzheimer's Disease and Other Dementias*, 19(6), 361-367.
- Cohen-Mansfield, J., Werner, P., Culpepper, W.J. & Barkley, D. (1997). Evaluation of an inservice training program on dementia and wandering. *Journal of Gerontological Nursing*, 23(10), 40-47.
- Lucero, M. (2002). Intervention strategies for exit-seeking wandering behaviour in dementia residents. *American Journal of Alzheimer's Disease and Other Dementias*, 17(5), 277-280.
- MAREP & Alzheimer Society of Hamilton & Halton, Brant, Haldimand-Norfolk, & Niagara Region, Allcroft, K. & Loiselle, L., editors, (2005). *Managing and accommodating responsive behaviours in dementia care: A resource guide for long-term care*. Waterloo: University of Waterloo.
- Rader, J. (1987). A comprehensive approach to problem wandering. *The Gerontologist*, 27(6), 756-760.
- Tufanaro, C. (2013). Evidence summary: Dementia: Wandering. *The Joanna Briggs Institute*.
- Wick, J.Y. & Zanni, G.R. (2006). Aimless excursions: Wandering in the elderly. *The Consultant Pharmacist*, 21(8), 608-618.