When Is My Relative With Dementia No Longer Safe Alone?

There is no easy answer to this question. Every person with dementia and every set of family circumstances are unique. For example, the progression of the disease, the responses of the person to the disease, and the environment the person lives in are factors that can impact safety. Also, all of us have differing levels of risk tolerance, that is, how comfortable we are with taking risks. Within a family there can be very different ideas about what is an acceptable level of risk.

Although there are no easy answers, the key to addressing this challenging issue is by thoroughly assessing for safety risk. The following is a list of items to consider as you make decisions about the safety of your relative.

- **Smoking.** Does your relative smoke? If so, does he/she leave burning cigarettes unattended? This can occur when someone has memory loss. If the person has a progressive dementia such as Alzheimer’s disease, this can become a dangerous problem. Sometimes the person forgets about smoking altogether. Working on ways to decrease or end the smoking habit will become important.

- **Leaving the stove on.** This can become dangerous when people are regularly burning up tea kettles or pans. However, all of us do this occasionally, so should be interpreted cautiously. There are fairly straightforward ways to handle this: automatic shut off electric tea kettles, disabling the stove by removing knobs or turning off circuits, or having an electrician install automatic shut off timers on stoves and ovens.

- **Responding to emergencies.** Would your relative know what to do in an emergency, for example, if there were a fire in the house? This is an important question to ask. However, even if the person can answer it correctly that does not always mean he/she can actually do what’s needed. It’s important to ask him/her to demonstrate calling 911, leaving the house and going to the neighbor’s, using the fire extinguisher, etc.

- **Getting lost.** Does your relative leave the house alone? Go for walks? The National Alzheimer’s Association estimates that about 60% of people with Alzheimer’s disease will “wander” at some point in the illness (which really means that they get lost, often in a familiar place). If your relative is going out alone, it would be good to invest in a safety system such as the Safe Return program through the Alzheimer’s Association (1-800-272-3900; www.alz.org). Safe Return is a medic-alert bracelet with an 800 number on it which hooks into a national database of emergency contact numbers. There are also GPS systems available, including Comfort Zone, endorsed by the Alzheimer’s Association.

Some individuals are afraid to leave the house and may never be at risk of getting lost, but may be at risk in a fire or other emergency. If your relative talks a lot about going home or leaving, he/she may be at risk for getting lost even if he/she has not walked out to date.

- **Leaving the house at night.** Some people with dementia get days and nights mixed up and may be up and dressed in the middle of the night. If this is becoming a problem or if the person has ever left the house in the middle of the night, then it becomes important to think about supervision at night. If other people are in the house, it may mean securing the doors in some way, either with an alarm system or with simple door securing devices designed for children (try Toys-R-Us childproofing section). If the person is alone nights and has ever left the house during the night, he/she is probably not safe alone at night.
• **Opening the door to strangers.** What does your relative do if someone rings the doorbell? Does he/she open the door to strangers? People with dementia gradually lose the ability to make safe/good decisions and judgments. This can become very dangerous if the person is likely to answer the door and invite a stranger in or give the person money.

• **Giving money away.** Mail, phone, and computer solicitations make life increasingly dangerous for individuals with poor judgment. Individuals with dementia are at high risk for financial exploitation from strangers or relatives. Sometimes it is a matter of giving donations, but doing so repeatedly. Repeated credit card purchases can lead to financial difficulties. If mail is the issue, one approach is to get a PO box and have someone else in the family monitor it. Phones can be changed to unlisted numbers. Computers may be more difficult to monitor if your relative is still able to use a computer. Sometimes it becomes important to limit access to money or to leave a small amount in a checking account for the person to use.

• **Falling repeatedly.** If your relative is falling often, safety alone becomes a problem. In the early stages of dementia the person may be able to use a cell phone or a lifeline system to call for help, but as the disease progresses it is likely that he/she will not be able to remember to use it.

• **Attempting former hobbies.** Some hobbies – hunting, woodworking, cooking, sewing, mowing the lawn – may involve appliances or devices that are potentially very dangerous. Closely monitoring the person’s ability to handle equipment safely becomes very important. Guns and ammunition should be locked up. Sometimes it becomes important to remove tools or appliances from the person’s home or to keep them under lock and key.

• **Handling alcohol, medications, household toxins.** It is imperative to monitor both alcohol and medications. You may want to ask your relative’s physician about the appropriate amount of alcohol that is safe. If medications are simple, your relative may be able to manage them safely for a period of time. Some families gradually take over administering medications; others use alarmed dispensers. At some point locking up medications may be important to prevent a person with memory loss from accidentally overdosing. Also, pay attention to household cleaners that may be used inappropriately.

• **Calling frequently or exhibiting a lot of anxiety.** If your relative calls repeatedly, this is probably a sign that he/she is feeling anxious and is looking for reassurance. This may be a point at which you need to think about increased supervision or a companion. It is not surprising when people with memory loss feel anxious as they often forget important pieces of information to help them understand what they are supposed to be doing. That kind of anxiety may lead to safety risks such as leaving the house or inviting strangers in because they are looking for reassurance.

**Living Alone.** When should a person with dementia no longer live alone? Again, there are no easy answers. Frequently families gradually bring people into the home part time as companions or housekeepers. The person may be safe for short periods of time alone, but not for 24 hours, seven days a week. Sometimes families may arrange for the person to spend nights at a relative’s house. Most often a combination of approaches is tried: home care, adult day programs, regularly scheduled time with relatives. Paying attention to the signs outlined above can help you determine when your relative may not be safe alone anymore.

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**Good resource on home safety:**  [http://www.nia.nih.gov/Alzheimers/Publications/homesafety.htm](http://www.nia.nih.gov/Alzheimers/Publications/homesafety.htm)