WANDERING, INTERVENTIONS FOR PREVENTING

1. Request that all staff members support residents in every way they can, especially if they appear to be wandering because of relocation stress.
2. Help residents find their places on the unit.
3. Make eye contact with residents.
4. Have staff or volunteer accompany residents outdoors.
5. Encourage residents to follow any favorite routines from the past.
6. Promote the use of rituals.
7. Encourage families to visit frequently.
8. Agree with residents' statements rather than challenge or refute them.
9. Observe the nature of residents' wandering by staying alert to patterns.
10. Try to determine the meaning of the behavior from the residents' viewpoint.
11. Request a psychiatric consultation to assess resident for depression.
12. Transfer residents to units where they may wander safely.

INTERVENTION FOR PREVENTING AND DEALING WITH AGITATION

1. Teach staff how to recognize warning signs, particularly an increase in motor activity (e.g., pacing, humming, crying out).
2. Educate staff about environmental precipitants of agitation.
3. Assess the resident for constipation, fatigue, pain, and infection.
4. Make as few demands on residents as possible when they appear agitated.
5. Listen to the residents' feelings.
6. Provide a quiet place for agitated residents, away from stimulation.
7. Nurture, reassure, and comfort agitated residents.
8. Allow residents as much control over their daily lives as possible (e.g., offer them bounded choices, such as "Would you like to sit here and be quiet, or go to your room?").