

Package of Resources

A package of resources to accompany the print version of the Driving and Dementia Roadmap website.



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WARNING SIGNS FOR DRIVERS WITH DEMENTIA



A diagnosis of mild dementia alone is not an automatic reason to stop driving. Families can use this list as an objective way to monitor any changes in driving skills over time. The signs are ranked from minor to serious. Written notes of observations can help you make informed decisions and may be useful in conversations with healthcare providers.

Consider the frequency and severity of incidents. Several minor incidents or an unusual, major incident may warrant action. Look for patterns of change over time. Isolated or minor incidents may not warrant drastic action. Avoid an alarming reaction. Take notes and have conversations at a later time, instead of during or right after an incident.

Driving Behavior Warning Signs - When Noticed, How Often

1. Decrease in confidence while driving	16. Uses a “copilot”
2. Difficulty turning to see when backing up	17. Bad judgment on making left hand turns
3. Riding the brake	18. Near misses
4. Easily distracted while driving	19. Delayed response to unexpected situations
5. Other drivers often honk horns	20. Moving into wrong lane
6. Incorrect signaling	21. Difficulty maintaining lane position
7. Difficulty parking within a defined space	22. Confusion at exits
8. Hitting curbs	23. Ticketed moving violations or warnings
9. Scrapes or dents on the car, mailbox or garage	24. Getting lost in familiar places
10. Increased agitation or irritation when driving	25. Car accident
11. Failure to notice important activity on the side of the road	26. Failure to stop at stop sign or red light
12. Failure to notice traffic signs	27. Confusing the gas and brake pedals*
13. Trouble navigating turns	28. Stopping in traffic for no apparent reason*
14. Driving at inappropriate speeds	29. Other signs:
15. Not anticipating potential dangerous situations	

* Stop driving immediately

Although this is not an official driving assessment, use it as a starting point to assess your ability to drive safely. It was provided by the Canadian Automobile Association.



SeniorsDriving.caa.ca

Simple Driving Assessment

This simple driving assessment will help evaluate whether a senior driver needs to take steps to improve their driving skills, and pinpoint specific areas for improvement. It should take 10-15 minutes to complete the assessment.

Instructions:

For each of the following 15 questions, check the symbol (✓) of the one answer that best describes you.

	Always or Almost Always	Some- times	Never or Almost Never
1. I signal and check to the rear when I change lanes.....	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I wear a seat belt.....	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I try to stay informed on changes in driving and highway laws and techniques.....	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Intersections bother me because there is so much to watch from all directions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
5. I find it difficult to decide when to merge with traffic on a busy highway.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
6. I think I am slower than I used to be in reacting to dangerous driving situations.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
7. When I am really upset, it affects my driving.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
8. My thoughts wander when I drive.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>



Simple Driving Assessment

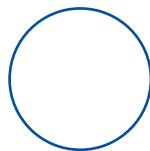
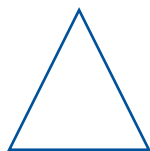
	Always or Almost Always	Some- times	Never or Almost Never
9. Traffic situations make me angry.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I get regular eye exams to keep my vision at its sharpest.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I check with my doctor or pharmacist about how the medications I take affect my driving ability. <i>(If you do not take any medication, skip this question)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I try to stay informed of current information about health and wellness habits.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. My children, other family members or friends have expressed concern about my driving ability.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	None	One or Two	Three or More
14. How many traffic tickets, warnings, or "discussions" with law enforcement officers have you had in the past two years?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. How many collisions (major or minor) have you had during the past two years?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Simple Driving Assessment

Self Scoring:

Count the number of checkmarks in the squares and record the total in the square below. Follow the same procedure for the triangles and circles.



These are your Check Mark Totals.
For score and interpretation, see below.

Calculate Your Scoring:

Step 1: Write the Check Mark Total recorded from the square above into the square on the right.....

$$\square \times 5 = \underline{\hspace{2cm}}$$

Step 2: Write the Check Mark Total recorded from the triangle above into the triangle on the right.....

$$\triangle \times 3 = \underline{\hspace{2cm}}$$

Step 3: Multiply the number in the square by 5.

Step 4: Multiply the number in the triangle by 3.

Step 5: Add the results of Steps 3 and 4.

YOUR SCORE IS:

Interpretation of Score:

In general, a checked square for an item reflects an unsafe practice or situation that should be changed immediately. A checked triangle means a practice or situation that is unsafe, or on its way to becoming unsafe, if nothing is done to improve it. Checking circles is a sign that you are doing what you should to be (and remain) a safe driver.



Simple Driving Assessment

Interpretation of Score:

No matter what your score, look at the areas where you need to improve by reviewing the questions. Review the information in the CAA Seniors Driving portal to find advice and tips that can help you maintain your driving skills. If you feel there are areas that you can't improve yourself, talk to your doctor or a loved one about making adjustments to your driving habits.

Score Meaning:

- 0 to 15** **GO!** You are aware of what is important to safe driving and are practicing what you know. Review the CAA Seniors Driving information, and take steps to maintain your driving skills.

- 16 to 34** **CAUTION!** You are engaging in some practices that need improvement to ensure safety. Talk to a doctor or a loved one about adjusting your driving habits, such as limiting driving at night.

- 35+** **WARNING!** It might be time to talk to a doctor or a loved one about changing your driving habits to ensure your safety, and the safety of other people on the road. This doesn't mean you have to give up your keys. More information on determining readiness to drive and on consulting a medical professional can be [found here](#).

These scores are based on what drivers 65 and over have stated about driving practices and habits.

Your score is based on your answers to a limited number of important questions. For a complete evaluation of your driving ability, many more questions would be required, along with medical, physical, and licensing examinations. *This evaluation is in no way intended to take place of a comprehensive evaluation by a doctor, and should simply be used as an indicator of your driving skills.*

CONVERSATION PLANNER: HOW CAN I HAVE GOOD CONVERSATIONS ABOUT NOT DRIVING?



You want your conversations with the person with dementia to be positive, progressive and productive. You can use these points to guide those conversations.

Who should be the messenger? The person who answers yes to these questions may be in the most favorable position. Is it you or someone else? If it's not you, you may need to have a preliminary conversation with the person in the most favorable position to take action.

Is the driver your spouse or your parent?	Yes___	No___
Do you have the person's best interests in mind?	Yes___	No___
Do you know the person's physical and cognitive condition?	Yes___	No___
Do you know the person's driving abilities?	Yes___	No___
Do you have a good relationship with the person?	Yes___	No___

When is a good time to talk? It's never too early to talk about driving issues, but these conversations warrant careful attention, planning and serious discussion. Here are some good opportunities to start a conversation naturally.

- Change in frequency or severity of warning signs
- Change in health, medication or cognitive status
- Change in financial situation or vehicle ownership

What do you want your conversation to accomplish? Keep your conversations simple, short and direct. Focus on one or two key points at a time. Here are some appropriate topics with some sample conversation starters. Which of these topics do you need to discuss?

- ___ Family's willingness to help. "When you go to the grocery store, can I go? Or instead, let me drive." "We're willing to drive, but you have to let us."
- ___ Transportation needs and alternatives. "The mall is having a sale. What if I pick you up at 10?"
- ___ Observations of warning signs. "How did those scrapes get on your car? They may mean that there could be a problem judging distances. What do you think?" "We need to talk to your doctor about this."
- ___ Planning alternative transportation. "The van driver said he would make sure you got to your appointment on time."

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AGREEMENT WITH MY FAMILY ABOUT DRIVING



To My Family:

The time may come when I can no longer make the best decisions for the safety of others and myself. Therefore, to help my family make necessary decisions, this statement is an expression of my wishes and directions while I am still able to make these decisions.

I have discussed with my family my desire to drive as long as it is safe for me to do so.

When it is not reasonable for me to drive, I desire _____
(person's name) to tell me I can no longer drive.

I trust my family will take the necessary steps to prohibit my driving to ensure my safety and the safety of others while protecting my dignity.

Signed _____

Date _____

Copies of this request have been shared with:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(This is an example of a letter the doctor can provide for the person with dementia to remind the person of the need to stop driving. A copy can be given to the family caregiver.)

Date: _____

Name: _____

Address: _____

Dear Mr. (Mrs.) _____:

I realize that this is a difficult recommendation for you, but based on the results of tests performed, I am recommending you do not drive.

You have undergone assessment for memory/cognitive problems. It has been found by comprehensive assessment that you have _____ dementia. The severity is _____.

Even with **mild** dementia, your risk of a car accident in the next year is eight times that of other people your age. Even with **mild** dementia, the risk of a serious car crash is 50% within two years of diagnosis.

Additional factors in your health assessment that raise concerns about driving safety include:

As your doctor, I have a legal responsibility to report potentially unsafe drivers to the Provincial Registrar. I have no choice in this matter. Even with a previous safe driving record, your risk of a car crash is too great for you to continue driving. Your safety and the safety of others are too important.

_____ M.D. _____ Witness

_____ Date

Copies given to: _____

* Used with permission of the Regional Geriatric Program of Eastern Ontario.

TRANSPORTATION COST WORKSHEET



Owning and operating a vehicle can be more expensive than you think! By writing down your actual expenses, you can get an idea of how much money could be available for alternative transportation if you were to stop driving.

To determine the annual expense to own and operate a car, list all the related expenses below. Don't forget to multiply by 12 for monthly expenses, or by 52 for weekly expenses. For less frequent expenses, such as tires, estimate the cost and divide by the number of years between expenses. Once you have the annual expense for owning and operating the vehicle, you can get a better idea of how much you are already spending on transportation.

VEHICLE COST PER YEAR	ANNUAL COST
Car/Lease Payment	
Regular Operating Expenses	
• Gas	
• Washer Fluid	
• Parking	
• Tolls	
• Other	
Regular Maintenance	
• Oil Changes	
• Minor Tune-ups	
• Wiper Blades	
• Lights	
• Car Wash/Wax	
• Other	
Long-Term Maintenance <i>(Estimate the cost and divide by the number of years between expenses)</i>	
• Tires	
• Brakes	
• Major Tune-ups	
• Repair/Replace Parts	
• Other	
Insurance – Annual Cost	
Motor Club/Roadside Assistance	
Registration/License Plate Fees	
License Fees	
Vehicle Inspection/Emissions Fees	
Total Cost Per Year	\$

Excerpted from "We Need to Talk ... Family Conversations With Older Drivers," The Hartford Center for Mature Market Excellence.
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DRIVING ACTIVITIES: WHERE, WHEN AND WHY?



This worksheet can help you determine where, when and why your relative with dementia drives, and then how to reduce the need to drive without compromising the physical and social benefits of driving.

Type of Activity	Activity or Destination	How often? What day and time?	Who is he/she with while going to or participating in activity?	What changes could reduce the need to drive?*
Routine: Frequent trips (daily or weekly), usually for tasks (shopping, exercising, visiting, etc.)	<i>Example: To a local convenience store for milk, bread, etc.</i>	<i>2 or 3 times/week</i>	<i>Travels alone. Chats with store manager</i>	
Periodic: Regular, maybe monthly (e.g., doctor's visit, card games with friends)				
Occasional: Special events like a vacation, concert, sporting event, family celebrations, out-of-town visits				

* scenarios to consider on next page

GETTING THERE: USING ALTERNATIVE TRANSPORTATION



When looking for alternative transportation, you need to explore all options - from informal arrangements with relatives and friends, to formal public services. You can use this worksheet, along with the questions on the back side, as you explore all your transportation options.

Transportation Alternatives	Telephone	Availability, Destination (day, time, route)	Cost	Notes (pros & cons)
Family Members:				
Friends:				
Demand-responsive Services:				
Private Program Services:				
Taxi/Car Services:				
Mass Transit:				
Other Local Programs:				

(continued on next page)

Family and friends. Getting rides from family and friends is usually the first alternative to driving, for reasons of ease and familiarity. The degree of willingness and the cost of mileage and time need to be considered. Consider the following:

1. Who is available to provide rides at the times required?
2. Will they provide rides willingly or resent personal inconveniences?
3. What informal arrangements might give the rider opportunities to give something in return (e.g., making dinner, taking the driver to lunch, paying for gas)?

Demand-responsive services, private programs or other local services.

Demand-responsive services such as Dial-a-Ride or elderly and disabled transportation services offer door-to-door services by appointment. These are often government-subsidized and are available at reasonable fees. Types of destinations may be limited to medical or grocery shopping purposes. Private program services may be available from adult day centers, assisted living facilities, malls or stores. Other local programs, often sponsored by faith-based or non-profit organizations, provide older adults transportation for donations or nominal fees. Consider the following:

1. What are the criteria for using the service (e.g., minimum age, disability, affiliation)?
2. How much does it cost? Do passengers tip drivers? Can an account be set up in advance with the service?
3. How far in advance should arrangements for a ride be made?

4. Is there a limit to the number of trips or types of trips (medical or grocery only)?
5. Where and when does the service run?
6. Will drivers provide assistance to people with physical or other health constraints?
7. Can companions accompany the person on the service?

Taxis or car services. These offer flexible scheduling and can actually be cheaper than owning and maintaining a car. Some car services may be willing to set up accounts for relatives to pay for services. Consider the following:

1. How is the cost calculated?
2. How long in advance should I call for a ride?
3. Can an account be set up in advance? How are tips handled with an account system?
4. Will drivers provide assistance with bags or packages?

Mass transit. This may be appropriate for those with mild dementia who are accustomed to taking a bus, subway or train. Consider the following:

1. How much does it cost? Are there discounts for older or disabled people?
2. Can an account be set up in advance with the service? Are there monthly passes?
3. What are the hours and geographic area of service?
4. Most important, is mass transit appropriate, considering my relative's cognitive or physical limitations?

NOT GOING IT ALONE: WHO CAN OFFER SUPPORT?



Support from others can reduce stress and increase chances for success. Your circle of support can include people inside and outside the family who might provide emotional support, observe driving skills, discuss family concerns with the driver, pay for in-home services, provide alternative transportation, and look for public transportation alternatives.

Here's how you can identify, and possibly expand, your circle of support.

Step 1. On the next page are four circles.

1. In the inner circle, place the name of your loved one.
2. In the second circle, write the names or initials of those people currently providing ongoing assistance to you or your loved one.
3. In the third circle, indicate those who look after your loved one in a limited way – perhaps neighbors, friends, relatives or healthcare professionals.
4. In the outer circle, indicate those who are not currently involved but who could be asked, even if only in a limited or professional way.

Step 2.

1. How comfortable are you with the number of available support people?

Uncomfortable

Comfortable

1

2

3

4

5

2. Are you using your support network to the fullest extent you need? Yes___ No___
3. If you are underutilizing your support network, what is keeping you from it?
(Examples: beliefs, attitudes, concerns, relationships)
4. In what ways could you encourage improvement in the quantity and quality of support that you and your loved one receive?

Person

How They Help Now

Realistic Helpful Changes

<u>Person</u>	<u>How They Help Now</u>	<u>Realistic Helpful Changes</u>

(continued on next page)

CIRCLE OF SUPPORT

