



TITLE: Locked Units to Limit Access for Dementia Patients in Long-Term Care Facilities: Clinical Evidence

DATE: 31 October 2014

RESEARCH QUESTION

What is the clinical evidence regarding the use of locked units to limit access for dementia patients residing in long-term care facilities?

KEY FINDINGS

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, or non-randomized studies were identified regarding locked units to limit access for dementia patients in long-term care facilities.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library (2014, Issue 10), University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2009 and October 23, 2014. Internet links were provided, where available.

SELECTION CRITERIA

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria	
Population	Adults with dementia residing in a long-term care facility
Intervention	Locked units to restrict access to adjoining units within a long-term care facility

Disclaimer: The Rapid Response Service is an information service for those involved in planning and providing health care in Canada. Rapid responses are based on a limited literature search and are not comprehensive, systematic reviews. The intent is to provide a list of sources of the best evidence on the topic that CADTH could identify using all reasonable efforts within the time allowed. Rapid responses should be considered along with other types of information and health care considerations. The information included in this response is not intended to replace professional medical advice, nor should it be construed as a recommendation for or against the use of a particular health technology. Readers are also cautioned that a lack of good quality evidence does not necessarily mean a lack of effectiveness particularly in the case of new and emerging health technologies, for which little information can be found, but which may in future prove to be effective. While CADTH has taken care in the preparation of the report to ensure that its contents are accurate, complete and up to date, CADTH does not make any guarantee to that effect. CADTH is not liable for any loss or damages resulting from use of the information in the report.

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Comparator	Unrestricted access to adjoining units within a long-term care facility, none
Outcomes	Clinical benefits (e.g., decreased polypharmacy) and harms (e.g., increased agitation, decreased quality of life, other behavioural or safety issues for dementia patients)
Study Designs	Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies

RESULTS

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, or non-randomized studies were identified regarding locked units to limit access for dementia patients in long-term care facilities.

References of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

No relevant literature was identified regarding locked units to limit access for dementia patients in long-term care facilities; therefore, no summary can be provided.

REFERENCES SUMMARIZED

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-analyses

No literature identified.

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies

No literature identified.

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APPENDIX – FURTHER INFORMATION:**Systematic Review – Special Care Units (Locked Units Unspecified)**

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[PubMed: PM19821370](#)

Non-Randomized Studies*Special Care Units (Locked Units Unspecified)*

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[PubMed: PM24381136](#)
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[PubMed: PM20077498](#)

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[PubMed: PM20462932](#)
10. Marquardt G, Schmieg P. Dementia-friendly architecture: environments that facilitate wayfinding in nursing homes. *Am J Alzheimers Dis Other Demen*. 2009 Aug;24(4):333-40.
[PubMed: PM19487549](#)

Study on Wanderers

11. Algase DL, Beattie ER, Antonakos C, Beel-Bates CA, Yao L. Wandering and the physical environment. *Am J Alzheimers Dis Other Demen*. 2010 Jun;25(4):340-6.
[PubMed: PM20378834](#)

Review Articles

12. Kok JS, Berg IJ, Scherder EJ. Special care units and traditional care in dementia: relationship with behavior, cognition, functional status and quality of life - a review. *Dement Geriatr Cogn Dis Extra* [Internet]. 2013 [cited 2014 Oct 31];3(1):360-75. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3884203>
[PubMed: PM24403908](#)
13. Park-Lee E, Sengupta M, Harris-Kojetin LD. Dementia special care units in residential care communities: United States, 2010. *NCHS Data Brief*. 2013 Nov;(134):1-8.
[PubMed: PM24314070](#)
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Guidelines and Recommendations – Uncertain Methodology

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Additional References

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