

An Aging Club Membership - Dementia

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John Smith is in his late 80s and has been a Club member for decades. The Club is the center of his activities and he has several long – time friends. His health is such that he can no longer play golf but has lunch with his friends and plays cards on Wednesday evenings. His wife recently passed, and he is now alone in a rather large house about two miles from property. Staff and his friends are concerned for his mental capacity, he is clearly in latter stages of dementia.

Recently, General Manager Chris received the following report from the Club security department: “Smith was following a white SUV as he passed the gatehouse. Both he and the SUV made a u - turn after they passed the gate. The SUV continued through the bar-code entrance, but Smith stopped. We heard some yelling and found Smith outside his vehicle, laying on the ground, his foot partially under the back of the front wheel, and the shoulder harness around his mid-section – the vehicle was in reverse. We rolled the vehicle forward to release Smith’s foot, put the vehicle in park, released Smith from the harness, and helped him to his feet – he refused medical attention. We told him that we would take him to his home and would arrange to deliver his vehicle tomorrow. Smith was clearly agitated and pushed the guard away, got back into his vehicle, and drove off.”

The report continued, “We spoke to the driver of the SUV, who reported that they had seen the vehicle driving circles in one of the neighborhood areas; they stopped him and found that he was a bit dazed and said he was lost. They then led him to the front gate and, wanting to go back to their home, made the u - turn, and headed back into property.”

Chris was in a tough spot: First there was a high degree of empathy for John; but, even more important was the issue of John being a danger to others and himself. Chris knew of several of John’s close friends. As is often the case, friends will naturally avoid or deny the obvious decline by thinking that it is temporary. It only takes one person from outside the circle of friends to “snap them out of it,” so they realize that their friend is in serious trouble. Chris asked that they keep close watch over John and that they accompany him when he comes to property. The staff were alerted to keep a watchful eye when he was at the Club and to assist in any manner possible.

After some detective work, Chris located John’s daughter and told her the situation. After lengthy discussion, the daughter agreed that John would only go to the Club when accompanied. John was admitted to an assisted living care facility and visits the Club with friends, still playing cards and enjoying a meal.

In arriving at the above scenario, I posed the situation to 233 managers from across the country asking how they would have handled the situation. In addition to the summary above, some suggestions were: Call the police and alert them to this potential hazard - Chris' first responsibility is to protect the Club; call John's physician and alert that doctor of John's decline, although, there is nothing that the doctor will do to assist Chris; but, the vast majority of the responses were to have a caregiver assist John in allowing him to enjoy the Club as he had for decades.

Our health care, while often bemoaned, is helping our community to live longer and with that come some consequences. According to the Center for Disease Control, the number of diagnosed cases of dementia are on the rise, but the rate of that rise is decreasing. There are an estimated 3.8M people diagnosed with dementia and, in line with the growth rate of an aging population, the number could quadruple in the next thirty years. Our aging population means that the above scenario will, in most cases, increase, as well.

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