DEFINITION OF SEVERITY

- **MILD (1)** behaviors respond to interventions (IPI) and remain stable once IPI is withdrawn
- **MODERATE (2)** behaviors respond to IPI only to relapse when IPI is withdrawn
- **SEVERE (3)** behaviors do not respond to IPI
- **NP** not present

DISORGANIZED BEHAVIORS

- Appears “vacant” or “lost” in facial expressions, mental lethargy
- Disorganized thinking, unintelligible/garbled speech
- Rapid shifts in or incongruency of emotional states
- Inappropriate mixing of food or dressing of clothes and layering, smearing fecal matter
- Playing with things in the air, responding to auditory hallucinations, picking things from the floor
- Mental or physical lethargy or general functional decline

MISIDENTIFICATION BEHAVIORS

- Misidentification of persons, places, objects
- Misidentification of sounds, smells, tastes or touch
- Misidentification of events or occurrences
- Mis-perception or interpretation of comments or behaviors of others

GOAL DIRECTED BEHAVIORS

- **Goal-Directed Thinking:** e.g. I am going home today, I am going to the bank, I am getting married today, where can I pay my bills etc
- **Goal-Directed Activities:** e.g. (rummaging, hoarding, rifling or emptying drawers; stripping of clothes, rearranging furniture or fixing items in milieu; stripping bedding or pulling curtains/fixtures on the walls; bed/chair exiting or exit seeking; intrusiveness or purposeful wandering (seemingly driven, 'on the go')

VOCAL BEHAVIORS

- Explosive, argumentative and quarrelsome
- Talking loud and fast, acting manic-like
- Yelling and screaming to get things done
- Rattling bed rails/table tops, persistent calling out for staff/family or 'parents'
- Making strange noises or making repetitive sounds

EMOTIONAL BEHAVIORS

- Appearing sad, despondent or tearful
- Expression of themes of despair, morbidity, gloominess and somatic complaints
- Mimicking or mocking and being dismissive
- Sarcastic or teasing, derogatory comments, being critical and negative of others
- Feeling rejected or increased sensitivity to comments from others
**FRETFUL/TREPIDATION BEHAVIORS**

- FEARFUL OR SCARED FACIAL Expressions
- ANXIOUS OR DISTRESSED FACIAL Expressions
- CLINGY OR "LATCHES ON", RINGING OF HANDS, RUBBING FACE/BODY
- EXPRESSING WORRY, FEAR, FOREBODING OR CATASTROPHY
- HOARDING OR COLLECTING

**IMPORTUNING BEHAVIORS**

- PERSISTENTLY SEEKING REASSURANCE OR ASKING FOR ASSISTANCE
- BEHAVING IN WAYS FOR DEMANDS TO BE MET IMMEDIATELY
- SHADOWING STAFF, Being a pest and crowding personal space of HCP
- ATTENTION SEEKING OR 'MANIPULATIVE' BEHAVIOURS

**APATHY BEHAVIORS**

- INDIFFERENCE AND LACK OF CONCERN RE: SELF AND ENVIRONMENT
- LACK OF SELF-INITIATION, LOW SOCIAL ENGAGEMENT (INTER-PERSONAL INTERACTIONS AND LILIEU STRUCTURE) AND POOR PERSISTENCE
- EMOTIONAL INDIFFERENCE AND LACK OF EMOTIONAL REMORSE

**OPPOSITIONAL BEHAVIORS**

- NEGOTIATING AROUND CARE AND OTHER NEEDS
- WORKING AGAINST EVERYTHING THE CARE GIVER OR CARE PROVIDER IS ATTEMPTING WITH PATIENT
- EVASIVE TO DIRECTIONS FROM CARE GIVER or PROVIDER
- RESISTIVE TO CARE, MEDICATION OR MEALS OR OTHER DIRECTIONS
- BARRICADE AND TERRITORIALISM

**PHYSICALLY AGGRESSIVE BEHAVIORS**

- SELF-ABUSIVE
- PULLING, PUSHING, GRABBING
- KICKING, BITING, SCRATCHING, PUNCHING
- SPITTING, THROWING THINGS, BREAKING OBJECTS

**SEXUAL BEHAVIORS**

- VERBALLY SEXUAL (COMMENTS, GESTURES, INNUENDOS)
- PHYSICALLY SEXUAL (GRABBING BREASTS, BUTTOCKS ETC.)
- SELF STIMULATION

**MOTOR BEHAVIORS**

- ROAMING, STROLLING, WANDERING
- FIDGETY, ROCKING IN W/C, RESTLESS, AGITATED
- SEEMINGLY DRIVEN, "ON THE GO", W/C PROPPELLING, CHAIR/BED EXITING

*FREQUENCY AND DURATION OF THE IDENTIFIED BEHAVIORS IS MEASURED BY TRANSFERRING BEHAVIORS TO DEMENTIA OBSERVATION SCALE (AKA Q - 30 MIN CHECK LIST)*