

# IACP: Alzheimer's Initiatives Program

## Responding to Alzheimer's Disease:

*Techniques for Law Enforcement and First Responders*

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**BJA**  
Bureau of Justice Assistance  
U.S. Department of Justice

*Serving the Leaders of Today, Developing the Leaders of Tomorrow*





# ALZHEIMER'S INITIATIVES PROJECT

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- Started in 2009- through grant from Bureau of Justice Assistance, U.S. Dept. of Justice
- Advisory Board formed, curriculum developed
- Created a series of tools and resources
- 2012- Launched in-person training program





**What do you  
know about  
Alzheimer's?**





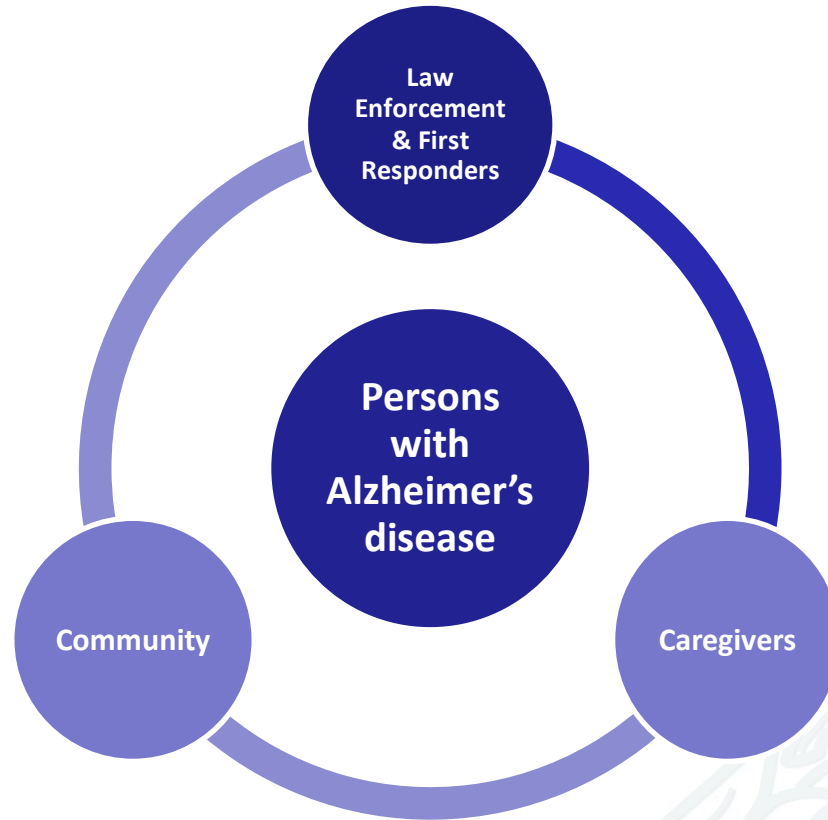
# OVERVIEW OF DISEASE

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- Fatal medical condition – not a normal part of aging
- 1:8 over age 65 and 1:2 over age 85 will have Alzheimer's
- Progression of disease is unique to each person
- Driving – one of the last forms of independence
- Policy Considerations



# ALZHEIMER'S DISEASE AFFECTS EVERYONE





# How would Alzheimer's affect driving?





# WARNING SIGNS FOR LE

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- Erratic driving
- Initial observation of vehicle
- Initial interaction with driver
- Preliminary investigation
- Vague responses
- Delayed reaction to questions





# DEALING WITH THE “INSISTENT UNSAFE DRIVER”

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- Review common dangers
- Suggest DMV medical review form
- Recommend getting a ‘no driving prescription’
- Suggest disabling or selling the vehicle





# USE YOUR CRUISER CAUTIOUSLY

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# To CUFF OR NOT TO CUFF?

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# COMMUNICATING EFFECTIVELY

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**What TO DO in any  
situation involving a  
person with  
Alzheimer's...**





# COMMUNICATING EFFECTIVELY

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**What TO AVOID in  
any situation involving  
a person with  
Alzheimer's...**



# TIPS & TECHNIQUES FOR LAW ENFORCEMENT

- Interview the driver
- **VERY IMPORTANT** to properly identify characteristics of the disease
- **ALWAYS** write a citation
  - \*Start the paper-trail
- DMV referral
- Internal reporting
- **Follow up with caregivers**





# REMOVAL OF DRIVING PRIVILEGES

- Loss of independence for both patient and caregiver
- “I don’t want to hurt them...this is their last freedom”
- Denial of disease
- Caregiver does not know exactly how far disease has progressed until LE gets involved





# THE MODEL POLICY

*MISSING PERSONS WITH  
ALZHEIMER'S DISEASE*

## Model Policy

<i>Effective Date</i> September 2010		<i>Number</i>
<i>Subject</i> Missing Persons with Alzheimer's Disease		
<i>Reference</i>		<i>Special Instructions</i>
<i>Distribution</i>	<i>Reevaluation Date</i> September 2011	<i>No. Pages</i> 5

### I. PURPOSE

The purpose of this policy is to provide guidance for the response and investigation of missing persons with Alzheimer's disease and related dementias (AD/D).

### II. POLICY

The mind-set of a person with AD/D is much different than that of other missing persons. Therefore, questioning, report-taking, investigation and search considerations should be appropriately expanded.

variety of situations. Those missing with AD/D fall into three categories: 1) individuals who seem normal and oriented during encounters with law enforcement and other persons, and who may not be classified as missing but whose behaviors suggest that they are lost, or at risk of become lost; 2) those who are missing but have not yet been noticed or reported missing by caregivers; and 3) those who have been reported as missing by caregivers.

### IV. PROCEDURES

A. Identifying the At-Risk Older Adult



# THE ALZHEIMER'S INITIATIVES PROGRAM

## QUESTIONS?

If you have any questions or are interested in additional resources, please contact:

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