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DISCLAIMER

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ALZHEIMER’S AWARE

A Guide for Implementation of a Law Enforcement Program
to Address Alzheimer’s in the Community

Introduction
Today’s headlines are all too often riddled with stories of missing aging seniors who have wandered off, sometimes unaware that they are in potentially dangerous situations or become lost and are unable to find their way back to their residence. For instance, the high profile cases like Ronald Westbrook, a 72-year-old man with Alzheimer’s disease, who was shot by a neighbor who mistook him for a burglar. Authorities stated that Mr. Westbrook was disoriented and possibly suffering from exhaustion as he wandered his neighborhood in Chickamauga, Georgia in the early morning hours. Mr. Westbrook rang the doorbell and repeatedly jiggled the front door handle of an area home, prompting a confrontation with the homeowner who shot and killed him (Caufield, 11/29/13).

Consider, cases such as the one where police repeatedly used a Taser on a person with Alzheimer’s because he became agitated and was confused and officers may not have been provided training to equip them with the skills and strategies to appropriately interact with a person diagnosed with Alzheimer’s disease or other form of dementia (Vankin, 2013), to other local reports such as Vinny DiNatale, of Marshfield, Massachusetts, who went for a walk and didn’t return. His wife contacted the Marshfield Police Department and informed them that her husband, who was diagnosed with Alzheimer’s, was missing but was enrolled in the SafetyNet™ by LoJack® service. Officers immediately began a search eventually finding him in a remote area, close to a river, trapped in a patch of briars and unable to get out (Boston Herald, 5/23/12).

While Vinny’s story had a happy ending, many others do not. The frequency of such stories underscores the importance of ongoing efforts to prevent wandering from ending in tragedy by improving law enforcement’s approaches when encountering or searching for someone with Alzheimer’s disease. These stories also highlight the importance of law enforcement agencies’ need to work in partnership with the communities they serve to develop a holistic community approach to increase awareness of Alzheimer’s and other forms of dementia; prevent those diagnosed with Alzheimer’s from wandering; and work effectively to locate a missing person with Alzheimer’s.

Never before in American history has our population included so many people 65 years of age or older; 40.3 million Americans, an estimated 13% of the population, according to the U.S. Bureau of the Census. This number is expected to more than double to 89 million by 2050. The 2010 U.S. Census indicates that for the first time in history, the number of people aged 65 and over are becoming an increasing larger portion of the population than the younger segments.

According to the National Institute on Aging’ Alzheimer’s Disease Fact Sheet:

“Alzheimer’s disease is an irreversible, progressive brain disease that slowly destroys memory and thinking skills, and eventually even the ability to carry out the simplest tasks. In most people with
Alzheimer’s, symptoms first appear after age 65. Estimates vary, but experts suggest that as many as 5 million Americans age 65 and older may have Alzheimer’s disease. “Alzheimer’s disease is the most common cause of dementia among older people. Dementia is the loss of cognitive functioning—thinking, remembering, and reasoning—and behavioral abilities, to such an extent that it interferes with a person’s daily life and activities. Dementia ranges in severity from the mildest stage, when it is just beginning to affect a person’s functioning, to the most severe stage, when the person must depend completely on others for basic activities of daily living.”

Experts estimate that approximately 500,000 new cases occur each year. It is projected that by 2050 as many as 16 million Americans will develop Alzheimer’s. Some of this number may be younger than 65. The Alzheimer’s Fact Sheet says, “Early-onset Alzheimer’s is a rare form of the disease. It occurs in people age 30 to 60 and represents less than 5 percent of all people who have Alzheimer’s disease. Most cases of early-onset Alzheimer’s are familial Alzheimer’s disease, caused by changes in one of three known genes inherited from a parent.”

As the nation’s population continues to age, there will be more cases of Alzheimer’s disease and therefore, more and more opportunities where those with Alzheimer’s or other forms of dementia may come in contact with local law enforcement and public safety officials.

Law enforcement could become involved with individuals with Alzheimer’s and their caregivers under a variety of every-day circumstances. Below are a few examples of behaviors or situations that could get the attention of law enforcement:

- Exhibiting erratic driving or breaking general rules of the road
- Crossing a road way or walking through traffic seemingly unaware of the danger
- Wandering with a dazed/lost like appearance
- Sitting in a car along the side of the road (perhaps the car is out of gas)
- Being out of place in a particular situation (on a hiking trail/park late at night)
- Inappropriately dressed for the situation or weather (not wearing a coat in winter, or inappropriately barefoot)
- A call to police regarding missing items or a “break-in”
- Inability to follow or understand simple requests (May I see your driver’s license and car registration, please?)
- Difficulty interacting appropriately with others
- A domestic violence or physical abuse call that turns out to be a situation with a caregiver and an individual with Alzheimer’s disease
- A shop-lifting accusation, “stealing” from local businesses but actually believing they paid for the item or that the item is already theirs

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Responding to a call for a welfare check and having concerns about abuse, neglect or domestic violence, based on observations

Whatever the situation, it can be difficult for an officer to know what to do, and how to address the problem, and, as the world’s population ages, these types of situations will only increase in frequency and will impact all law enforcement agencies at some point or another. Many law enforcement agencies across the nation are already working to increase positive outcomes when someone with Alzheimer's or other form of dementia is reported missing, or when an officer encounters someone with Alzheimer’s, or a caregiver, during the normal course of their duties, through specialized trainings, resources and policy development which may include:

- Recognizing the signs of Alzheimer's disease
- Learning best practices in approaching and communicating with persons who have Alzheimer’s
- Being aware of situations where an officer might encounter individuals with Alzheimer’s and effective ways to respond during those interactions
- Insights and best practices in conducting searches for missing persons with Alzheimer’s – which is different than the manner one would plan or conduct a search for other missing persons

Alzheimer’s Aware – Program Overview

“Alzheimer’s Aware” is a national initiative funded by the United States Department of Justice, Office of Justice Programs - Bureau of Justice Assistance. Alzheimer’s Aware provides a variety of practical resources and tools that can be used by any law enforcement organization – or other interested group – that is working to increase positive outcomes during interactions with persons with Alzheimer’s disease, particularly when related to the issue of wandering.

These resources and tools can be used to assist in the development and implementation of a community educational campaign by, or in partnership with law enforcement. The resources have recommendations for developing a strategic plan with practical action steps and activity implementation, in order to develop a holistic community approach to responding in crisis situations, involving persons with Alzheimer’s disease, as well as increase awareness of Alzheimer’s and other forms of dementia.

In order to reach the goals and objectives of increased awareness, appropriate response and interactions and improved outcomes as related to Alzheimer’s disease and wandering, the national Alzheimer’s Aware initiative is built around three (3) over-arching areas of focus:

- Law Enforcement Engagement
- Community Involvement
- Public Information / Awareness

All three focus areas center on an understanding that awareness – both at the law enforcement and community level – needs to be increased in order to improve the safety and well-being of these individuals, their families and the community as a whole. The following provides a more detailed description of the three focus areas.
Program Development

Law Enforcement Engagement
While most people understand that an individual with Alzheimer's will have memory loss and an inability to recognize persons or landmarks or other things that would be familiar to someone without the disease, persons with Alzheimer's can also be irrational, confused and even combative because of their perceptions of where they are, what they are doing and what is happening around them.

Law enforcement officers may come in contact with persons with Alzheimer's disease or other forms of dementia in a number of different types of situations and, having the ability to identify that a person who initially seems to be coherent may actually be confused and at-risk, may make the difference in what could become a potentially life threatening situation. After agency leadership has made a commitment to address the issue, there are four (4) critical areas on which law enforcement should focus its attention:

Officer and Staff Training
There are currently a number of options for training and the Department of Justice continues to work to develop additional types and avenues to increase those opportunities. The following is a list of organizations that currently provide some type of training for law enforcement on the basics of Alzheimer's disease and the impact of the disease. Some of these trainings are offered free of charge, others may involved fees. This is not an all inclusive list and additional training opportunities may be available through local organizations in your area that work with the elderly or health care providers and systems. Examples of trainings we are aware of include, but are not limited to:

International Association of Chief of Police (IACP)

IACP currently has 2 different types of training available to law enforcement agencies: A 1-Day, Direct Training Program and, a 2-Day Train-the-Trainer Program.

1-Day, Direct Training Program
The IACP Alzheimer's Initiatives training program, Responding to Alzheimer's Disease: Techniques for Law Enforcement and First Responders, is a program dedicated to providing public safety administrators, law enforcement officers, supervisors and executives, firefighters, EMS, EMT, and others from the first responder community with the most current Alzheimer's and dementia training available. The one-day program is offered at no-cost, and features in-depth instruction to help a department enhance its capacity to handle calls involving people with Alzheimer's disease and related dementia. The program offers its training seminars to law enforcement and first responders nationwide. As a result of this training, participants will:

- Have a better understand Alzheimer's disease
- Be able to identify situations first responders might encounter persons with Alzheimer's disease
- Distinguish symptoms of Alzheimer's disease from other conditions
- Learn techniques to effectively question and interview persons with Alzheimer’s disease to determine the most effective response
- Communicate and collaborate with caregivers
- Engage community resources
- Establish protocols for search-and-rescue specific to this population
**IACP Train-the-Trainer Program**

In addition to the one-day, on-site training program, IACP now is offering a **two-day** Train-the-Trainer program for selected participants and experienced trainers who will continue to support and deliver the one-day training program. Positions in the two-day Train-the-Trainer program are limited. Trainers/facilitators will be drawn from those with law enforcement and/or first responder backgrounds, and those with community experience and expertise in the area of Alzheimer’s disease and dementia. Training and facilitation experience is preferred. Participants in the Train-the-Trainer will learn and demonstrate parts of the Responding to Alzheimer's disease workshop and receive feedback. **PARTICIPANTS CHOSEN FOR THIS TRAINING WILL BE EXPECTED TO CONDUCT AT LEAST ONE RESPONDING TO ALZHEIMER'S DISEASE WORKSHOP FOR YOUR AGENCY OR COMMUNITY WITHIN 90 DAYS OF COMPLETING THE PROGRAM.** IACP will provide guidance, materials and support for local workshops but costs of trainer time and travel, training space and equipment, and participants’ time and travel are born by local agencies and/or individuals. Persons selected to attend a training will be notified of enrollment prior to the start date for the course. It is anticipated that several agencies across the country will become trainers for this topic and may be able to assist training officers in other nearby jurisdictions.

**IACP Roll-call Training Videos**

The IACP's Alzheimer's Initiatives training program has developed 4 short training videos which discuss various situations that law enforcement and first responders may encounter a person with Alzheimer’s disease or dementia. The videos cover the topics - Driver Assessment (traffic stop); Missing Person (on foot); Missing Person (by car); and Overview of Search Protocol. Each video includes a companion discussion guide and are available either for download from the IACP web site at [http://www.theiacp.org/Alzheimer-Training-Video](http://www.theiacp.org/Alzheimer-Training-Video) or on a DVD that can be ordered by emailing alzheimers@theiacp.org.

**Alzheimer’s Association**

Almost every part of the continental United States, Alaska and Hawaii are covered by a Chapter of the Alzheimer’s Association. Many local chapters will provide direct training to law enforcement and first responders on the disease and its impact. Contact your local chapter for information on their educational offerings. The Alzheimer’s Association is on the web at [www.alz.org](http://www.alz.org). Additionally, the Alzheimer’s Association has an on-line training available for first responders that was created with the assistance of first responders. It is an interactive training with video scenarios and other tools that is available 24/7 at: [www.alz.org/care/alzheimers-first-responder.asp](http://www.alz.org/care/alzheimers-first-responder.asp).

**National Council of Certified Dementia Practitioners (NCCDP)**

National Council of Certified Dementia Practitioners is an organization open to health care professionals, front line staff and First Responders who qualify for [CDP® certification](http://www.theiacp.org). The Council was formed to promote standards of excellence in dementia and Alzheimer’s disease education to professionals and other caregivers who provide services to dementia clients.

The NCCDP seminar is an 8 - hour training designed for First Responders, Law Enforcement, EMT's and Fire Fighters and is additionally recommended for Trainers who are responsible for First Responder Training. The Train the Trainer seminar provides over heads, power point, text book, video and hand outs.
The NCCDP course includes the modules on: Introduction to Dementia (Diagnosis, Prognosis, Treatment), Communication and Feelings, Depression and Repetitive Behaviors, Paranoia, Hallucinations, Wandering, Hoarding, Aggressive Behaviors, Catastrophic Reactions, Intimacy & Sexuality, Dementia & Driving, Activities, Staff and Family Support, Recognizing Abuse and Neglect in The Home, Diversity and Cultural competence, Spiritual Care and End of Life Issues.

Each participant receives handouts about each module. Upon completion of the seminar, each person receives a certificate of attendance. In order to accommodate all shifts, the NCCDP can provide training and dates to accommodate the entire force.

**Local Alzheimer's support organizations**

Check with local health care systems, Alzheimer's providers, hospitals or support organizations in your area to determine if they may offer educational courses on Alzheimer's disease. For example, in a sub-grantee pilot site in Arizona, Banner Health's Alzheimer's Institute, a Center of Excellence in the Banner Health System, has been working with the local law enforcement agency to develop a training program to train all of the sworn officers in the agency.

**Agency Policies and Procedures**

- Review existing agency policies and procedures, to ensure that they appropriately address and take into account contacts with persons with Alzheimer's or other cognitive disabilities and take necessary steps to adjust them accordingly and as appropriate, ensure that all future policies and procedures have been adjusted accordingly.

- Adopt standard policy for addressing reports of missing persons with Alzheimer’s disease. The International Association of Police has researched and developed an Issue s and Concepts Paper, along with a Model Policy related to Reports of Missing Persons with Alzheimer's disease and related dementias. The policy provides an overview of the disease and addresses a variety of issues and situations related to law enforcement practice and the disease. (IACP model policy can be viewed at [http://www.theiacp.org/MPAlzheimers.](http://www.theiacp.org/MPAlzheimers.)

- Development, implementation or adjustment of local projects / operations related to at risk populations. Many law enforcement agencies currently have programs that are related to seniors, such as participation on groups addressing elder abuse or neglect, driver education or assessment classes held for senior citizens, or community advisory councils that provide input for the department. With some minor additions or adjustments to programs currently in place program, additional information can be added or adjusted to address Alzheimer's related issues.

**At-Risk Population Registry**

- Development and implementation of a local registry program
- Promote the of use of a national registry
- Encourage the use of locative device technology, when appropriate

Many local law enforcement agencies have developed and implemented their own local registries that are housed or maintained in the area – either at the law enforcement agency or with a local community
organization – for persons who are at risk of wandering or those who have already experienced an incident of wandering. Having a registry can be a relatively easy project and may only involve a few changes to the current CAD system.

One national registry program, the MedicAlert® + Alzheimer’s Association Safe Return® program, through a direct connection to law enforcement’s RISS (Regional Information Sharing System) makes information, on more than 200,000 individuals with Alzheimer’s disease who are currently enrolled in the program, available to any law enforcement agency. This program does not require any participation or equipment to be based at the local law enforcement agency in order to get community members enrolled. Increased use of this registry by individuals would be an easy and relatively inexpensive way to have valuable information and resources available to law enforcement when an individual with Alzheimer’s wanders. The only requirement of the agency is access to RISS or FBI’s LEO (Law Enforcement Online). Other programs exist and may be included as an additional component of locative technologies.

Encourage the Use of Locative Technologies
As the world’s use of technology expands, a variety of electronic tracking and locative devices have been developed for use in tracking not only property, but also persons. Devices vary in both the way they are used and the type of technology. Some devices dating to the Viet Nam War, use radio frequency transmitters and receivers; others newer cell phone technology and yet others are as simple as a hard-wired, electric door alarm.

The use of these devices has proven successful in not only preventing at-risk persons from wandering or leaving a safe environment, but have saved the lives of many individuals who have wandered or become lost and were able to be located before anything serious happened to them. A variety of devices are described in the Locative Technologies brochure, published by the IACP. The use of a locative device should be strongly encouraged for those who have a history of wandering. Familiarity with the various types of devices is critical to successful use, as effectiveness and usability vary with terrain, etc. Some of the devices require specialized training for those conducting searches to locate a missing person.

Community Involvement
Just as law enforcement personnel need to be educated to their potential involvement and interaction with persons with Alzheimer’s disease, the community – both those who are currently touched in some way by this disease and those who have not as yet realized that Alzheimer’s can impact them- needs to be informed about the ways that Alzheimer’s can have an impact on them and how they can effectively handle situations in which they have contact with a person with Alzheimer’s. Some suggestions for involving and educating the community include:

- Establishment of a community or senior citizen liaison committee (or alteration to currently existing local advisory committees) to aid the local law enforcement agency and get community input into programming.

- Designation and advertising of a “Senior / Elder Liaison Officer” at the law enforcement agency to address issues impacting senior citizens in the community, such as driving or fraud and abuse issues.

- Partnering with a local healthcare system or community organization to implement an Emergency Plan Safety Program so that emergency information regarding caregiver continuity can be in a
recognizable place for first responders. (While some seniors with Alzheimer’s have caregivers, a
crisis could occur if the caregiver suddenly has a health emergency, or if a person with Alzheimer’s
is taken in an emergency situation by first responders and is unable to communicate who should be
called and alerted to the situation.)

- Use volunteers to supplement / help to focus on senior issues. Obviously, the costs involved in
  program development and implementation have an impact on what can be accomplished for this –
or any program. The use of volunteers in programs that might connect Alzheimer’s patients or
caregivers with other community services or check on a repeat wanderer’s welfare is a good use of
volunteer time.

For example, the Alzheimer’s Aware pilot site at the Lee County, Florida Sheriff’s Office developed a
project called WeCare, that involved trained volunteers checking on persons who had been
identified as having Alzheimer’s or other form of dementia that might indicate a need for some type
of welfare check.

- Establish a page or tab on the law enforcement agency website to provide general information on
Alzheimer’s disease, with links to agencies at the federal, state and community levels, for additional
information, resources or services.

Public Education Regarding Alzheimer’s Disease
There are a significant number of educational opportunities available across the United States related to
Alzheimer’s disease. With just a few exceptions, the Alzheimer’s Association has chapters that cover each
state and provide education and support for persons with Alzheimer’s and their caregivers. In addition to
local trainings and educational opportunities, the national office of the Alzheimer’s Association has online
training that can be accessed by anyone. Also, other local organizations, research foundations and resource
centers offer education and training on Alzheimer’s related issues.

Getting the message out to the community that everyone has the potential to be impacted by this disease –
whether they know it or not – is key to engaging community members and organizations in the effort to
address Alzheimer’s disease. With little effort or funding, a local law enforcement agency can develop a
plan or strategy to link the variety of persons impacted by the issue to educational opportunities in their
local area, as well as resources that might be available.

Specifically, Alzheimer’s Aware initiatives attempt to increase awareness and provide educational
opportunities in the community. Community relations staff at law enforcement agencies can increase
awareness by doing community presentations about the disease, the interaction with law enforcement, and
what steps caregivers or members of the community can take to have a positive outcome for persons with
the disease. The Alzheimer’s Aware initiative has developed a community presentation that can be used to
update and engage community groups and organizations, including, but not limited to:

- Public safety personnel, including first responders (fire, EMS, etc.) and staff from regulatory and
  utility agencies (e.g. water & electric services; code enforcement, etc.)
- Families and caregivers of persons with Alzheimer’s disease
Health Care Professionals (general practice physicians or medical associations, EMT's who provide care to caregivers of Alzheimer's patients, etc.)

Local businesses, industries and retail locations that may come in contact with persons who have wandered, are confused and need assistance or who may be confused about whether or not they have purchased items

**Conclusion**

The Alzheimer's Aware Initiative can be locally implemented at a relatively low-cost but with the potential to have a significant impact when it comes to the welfare and safety of those in the community with Alzheimer's disease or other form of dementia. The initiative has a variety of resources, best practices and practical tools which can be used free of charge and can be adapted to the needs and abilities of the local law enforcement agency and community.

Implementing a local Alzheimer's Aware initiative starts with the recognition that Alzheimer's will impact your community and your agency – if not now, at some point in the near future. **Recognize** that the issue is important and is coming. **React** to the need for leadership in the area and the need for consideration of the impact your agency can have on the growing population of older Americans in communities all across the country. And, **Respond** by making your agency Alzheimer's Aware and ready to respond appropriately.
RECOMMENDED STEPS
For Law Enforcement Agencies
PROGRAM DEVELOPMENT AND IMPLEMENTATION
OF ALZHEIMER’S AWARE

1. **Secure a leadership commitment** to address improving outcomes related to Alzheimer’s disease and law enforcement. How the staff reacts and considers this effort will be greatly impacted by the commitment to the program by agency leadership.

2. **Appoint a lead staff person** for the local agency Alzheimer’s Aware effort. Having an individual who can shepherd activities and programmatic efforts throughout the agency is key to success.

3. **Establish an internal team of varying ranks and positions** to discuss and plan for policy review and modifications, training assessment and planning, as well as community engagement strategies. This internal team comprised of front-line officers, administration and non-sworn staff and department volunteers, should review any prior calls for service involving persons with persons with Alzheimer's and assess response and outcomes. Including dispatch, on the internal team, brings an important perspective as they are generally the first contact family, friends, patients or others may have when contacting the law enforcement/public safety agencies.

4. **Appointment of a community/local advisory committee** or, use of a current agency advisory group, such as a senior advisory committee or community advisory committee, with added members or specific community agencies that can represent various community partners with regard to this initiative. Regular engagement of advisory committee members and other community groups or agencies is critical in successfully implementing your strategic plan.

   Example: The Alzheimer’s Aware pilot site at the Mesa, Arizona Police Department, in collaboration with their advisory committee, developed innovative strategies to distribute Alzheimer Aware Adult ID Kits among hair salons and other businesses frequented by the aging population in the area.

5. **Commitment to training all officers and non-sworn staff** on the basics of Alzheimer’s disease and effective ways to approach those who are displaying symptoms or behaviors indicative of the disease. This training can be multi-layered using available training options. Trainings that come highly recommended are:

   a. IACP’s Alzheimer’s Initiatives 8-hour in-house training, Responding to Alzheimer’s Disease: Techniques for Law Enforcement and First Responders

   b. The University of Illinois - Center for Public Safety and Justice Alzheimer’s Aware: Roll Call Training for Law Enforcement 4-part series

   c. IACP’s Alzheimer’s Initiatives Roll-call training videos covering various situations that law enforcement might encounter

6. **Convenient on-sight access to resources** for local officers’ non-sworn personal and volunteers to use when interacting with persons with Alzheimer’s disease, their caregivers and the community.
Many documents and resources have been produced to assist with identifying possible cases of dementia, what steps should be taken when an incident occurs, the “do's and don'ts” of how to communicate with someone with the disease, as well as resources to provide to caregivers such as the Adult ID Kit. These resources are available free of charge via the International Association of Chiefs of Police website and through the Center for Public Safety of Justice.

7. **Review of department missing persons and other applicable policies** with consideration to policy modification, as needed, to include special accommodations that can be used when dealing with a person with Alzheimer’s disease. IACP has published an Issue Paper and Model Policy on Alzheimer’s disease. The IACP Model Policy is specifically related to missing persons with Alzheimer’s disease but could be incorporated into other existing policies. Additionally, information identified in the Model Policy relates to the behaviors and hallmarks of the disease which may have an impact on other policies, such as use of force, handcuffing, domestic violence or others, all of which should be reviewed.

8. **Development and implementation of a local public information campaign** to raise awareness among community members and local businesses about Alzheimer’s disease, its impact on the community and how the community can play a key role in instances of wandering and during day-to-day interactions with individuals with Alzheimer’s disease or dementia. Consideration should be given to the delivery of the *Alzheimer’s Aware Recognize, React, Respond: Caregivers and Community Awareness Workshop* developed by the Center for Public Safety and Justice. Law enforcement agencies are requested to do public presentations to community groups, including senior related groups or community service organizations. The Caregivers and Community Awareness Workshop would be a presentation that could be made to raise public awareness.

As a part of an effort to raise awareness, an Alzheimer’s Aware pilot site at the Lee County, Florida Sheriff’s Office, in collaboration with their community partner, contacted the local medical community via letters to ensure that physicians seeing patients understood the importance of early diagnosis and planning by patients and family members. A key area where healthcare professionals can be of critical support, to caregivers, is determining when the patient should be assessed for their ability to operate a motor vehicle. Often this decision is easier to accept with healthcare professional involvement, avoiding the sole burden and ramifications of the decision being the family member or caregiver’s responsibility.

**Development and implementation of a local “registry”** to allow the law enforcement agency to more quickly respond to and be able to identify persons in their community with Alzheimer’s disease or related dementia, during routine calls for service or during a “wandering” incident.

Local registries have been developed by a number of law enforcement agencies across the country. In some instances, the law enforcement agencies have formed partnerships with a local community provider or service agency to assist them in collecting and proving pertinent data that is then either maintained in the CAD system or a system designed and maintained by dispatch to allow for easy and immediate access to the data. Examples of minimum data set to be collected and maintained include information on the Alzheimer’s Aware Adult ID Kit Brochure of the Mesa Police Department ([http://www.mesaaz.gov/police/PDF/AdultIDKit.pdf](http://www.mesaaz.gov/police/PDF/AdultIDKit.pdf)) or the Alzheimer’s Alert project by the Prescott Police Department ([http://www.prescott-az.gov/.d/alz_alert_form.pdf](http://www.prescott-az.gov/.d/alz_alert_form.pdf)).
Some programs include use of identifying jewelry with numbers that coincide to registry files, others involve electronic locative devices, or other equipment. A registry can be designed to fit the needs and budget of the agency.

When developing a local registry, care must be taken to address issues of confidentiality of data submitted to the Department and that the data would not be considered “public information”.

A local registry can also encourage participation in a national registry for persons with Alzheimer’s. The local registry should be maintained in a safe environment, that allows for easy search capabilities using a variety of data fields and should include a recent photograph of each person included in the registry.

10. **Encourage the use of electronic monitoring and/or locative devices** by those individuals with Alzheimer’s disease who have a history of wandering. The agency should research the functionality and performance of the various technologies in their area and provide information to families and caregivers, in an effort to ensure the safe return of the person, should they wander again.

9. **Review of ongoing local projects/operations** to determine where there exists commonalities to Alzheimer’s at-risk populations and where information to increase awareness and preparedness can be effectively distributed community-wide. For example the distribution of Alzheimer’s Aware Adult ID Kits through participation in senior health fairs, driver assessment courses, a local Meals-on-Wheels program or through the faith-based community.

10. **Development and collection of statistics** illustrating the impact policy and practice changes have on law enforcement interactions, with individuals with Alzheimer’s disease, their caregivers and the local community. Data collection should also measure general awareness by the community, proactive preparedness by caretakers and registry use. It should also include measures to demonstrate the project’s impact on sworn and non-sworn agency employees’ behaviors, attitudes and overall awareness of available Alzheimer’s Aware resources and the use of resources and tools.