LAW ENFORCEMENT TRAINING MATERIAL ALZHEIMER'S DISEASE AND THE SAFE RETURN PROGRAM N.J.S.A. 52:17B-77.7



Peter C. Harvey, Attorney General

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Alzheimer's Disease

Alzheimer's Disease afflicts approximately 4 million Americans and an estimated 150,000 people with Alzheimer's Disease live in New Jersey alone. Alzheimer's Disease is a progressive, degenerative disease of the brain in which brain cells die and are not replaced. It results in impaired memory, thinking and behavior. It is the most common form of dementing illness. The causes of Alzheimer's Disease (AD) are still unknown and there is currently no cure. Alzheimer's Disease strikes equally at men and women, all races, and all socioeconomic groups. Alzheimer's Disease usually has gradual onset. Early symptoms include problems remembering recent events and difficulty performing familiar tasks. Additionally, the person with Alzheimer's Disease may experience confusion, personality change, behavior change, impaired judgement, and difficulty finding words, finishing thoughts or following directions. How quickly these changes occur vary from person to person, but the disease eventually leaves the individual totally unable to care for himself or herself.

You have been called to respond to a shoplifting incident at the local grocery store. Upon arrival, you notice a woman being restrained by a store security guard, who claims she walked out of the store without paying for the bread and deli meats she has in her hand. She claims she did pay for them, but cannot produce a receipt. The woman is approximately 5'5", 150 pounds, 65 years old. She is annoyed and claims she is being mistreated by the store security guard.

What should you do?

The way in which Alzheimer's Disease affects communication will vary with each person. A variety of physical conditions and medications can also affect a person's communication. The person with dementia may find it increasingly difficult to express himself or herself in words and may have trouble understanding what has been said. Delusions may occur and often remain fixed in spite of all rational evidence to the contrary. People with Alzheimer's Disease may report that they have been victimized when in fact they have not. Problems affecting a person with Alzheimer's Disease, as well as their caregiver, which may require police assistance include: home safety, driving, gun safety, suicide, behavior problems, shoplifting, abuse/neglect, and wandering.

Recognizing Someone with Alzheimer's Disease

Often a person with Alzheimer's Disease will appear physically well, strong and agile. There are no obvious physical characteristics. However, people with Alzheimer's Disease share a number of behavioral patterns and symptoms identified below that will aid a law enforcement officer in determining if the person has Alzheimer's Disease or a related dementia.

Physical Clues

- Blank facial expression
- Unsteady walk/loss of balance
- Age (common age of onset 65+)
- Repeats questions
- Inappropriate clothing for season
- Safe Return Identification

Psychological Clues

- Inability to grasp and remember the current situation
- Difficulty in judging the passage of time
- Agitation, withdrawal or anger
- Inability to sort out the obvious
- Confusion
- Communication problems
- Delusions and hallucinations
- Inability to follow directions

It is 3 am and you have been called to respond to a domestic disturbance. Upon arrival, you notice an elderly woman crying saying that her son had assaulted her. Her son claims that his mother is suffering from Alzheimer's disease and he did not assault her, but merely found her outside in the yard, without proper clothing, and assisted her back in the house.

How should you handle this call?

Tips on Responding to the Wandering or Lost Person Who Has Alzheimer's Disease

Almost 70% of people with Alzheimer's Disease will wander and become lost. Triggers for wandering behaviors include:

- Confusion related to time of day and night
- Stress, noise, crowds, or isolation
- Delusions, hallucinations or misinterpreted sights or sounds
- Concerns about fulfilling past obligations involving a former job, home, friend or family member
- Recent move or change of routine

When confronting a person who has wandered and is lost, police officers may find that the person:

May not remember with any degree of accuracy where they have been, where they are going, or how long they have been wandering.

- May make up a story rather than admit that they have no recall of recent events.
- May only be able to recall destinations, addresses or phone numbers from years ago.
- May become agitated or aggressive.

When you encounter a person you suspect may have Alzheimer's disease, follow these guidelines in responding to that person:

- Approach that person from the front and establish and maintain eye contact .
- Introduce yourself as a law enforcement officer and explain that you have come to help. Due to their impaired short-term memory, victims may repeatedly ask who you are. Thus, you may need to reintroduce yourself several times.
- Treat people with dignity. The deterioration of their mental abilities does not mean they are without feeling.
- Remove the person from crowds and other noisy environments as this can cause restlessness, pacing, agitation, and panic in people with Alzheimer's. Also, turn off your car's flashing lights and lower the volume on the radio.
- Establish one-on-one conversation. Talk in a low-pitched, reassuring tone, looking into the victim's eyes. Alzheimer's shortens attention span and increases suspicion. Your calm support can make victims less agitated and panicked. Speak slowly and clearly, using short, simple sentences with familiar words. Repeat yourself. Accompany your words with gestures when this can aid in communication, but avoid sudden movements.
- Include the person in all conversations, out of respect and so you will not arouse their suspicion.
- Explain your actions before proceeding. If the person is agitated or panicked, gently pat them or hold their hand, but avoid physical contact that could seem restraining.
- Expect difficulties making yourself understood. Do not assume the person understands you or is capable of answering your questions and complying with your instructions.
- Give simple, step-by-step instructions and, whenever possible, a single instruction. For example, "Please sit here. I'll take care of everything." Avoid multiple, complex, or wordy instructions, such as: "Please sit here, don't get up or go anywhere, and wait for me to come back." Also, substitute nonverbal communication by sitting down if you want that person to sit down.
- Ask one question at a time. "Yes" and "no" questions are better than questions that require the person to think or recall a sequence of events. Be prepared for answers that are confusing and keep changing. If a person's words are unintelligible, ask them to point, gesture, or otherwise physically communicate their answer.
- Never argue with the person or challenge their reasoning.
- Do not leave the person alone; they may wander away.
- Find emergency shelter for the person with the help of a local Alzheimer's Association chapter or Adult Protective Services if no other caregivers can be found.

Alzheimer's Association Safe Return Program

The Alzheimer's Association Safe Return Program is a nationwide identification, support and enrollment program working at the community level which assists in the safe return of individuals with Alzheimer's or a related dementia who wander and become lost. When a memory-impaired person wanders away from home or an institution and the 800 number is called, the safe return operator will work with the missing person's care giver and police to gather critical information. The program includes a nationwide participant registry that contains the full name of the registrant, a photograph, identifying characteristics, medical information, and emergency contact information which enables the police officer to easily identify a person with Alzheimer's disease. When you call the program's crisis number at (800) 883-1180, a *Safe Return* clinician will contact the registrant's caregivers.

When you approach a person you believe has or may have Alzheimer's disease, ask for identifying information. In addition, look for a *Safe Return* bracelet, necklace, lapel pin, key chain, or label inside their clothing collar. *Safe Return* identification provides the first name of a person bearing this ID, indicates that he or she has a memory impairment, and gives the 24-hour toll-free number for the Alzheimer's Association's *Safe Return Program*. You have been called to respond to a report of a missing nursing home resident who is known to have Alzheimer's disease.

What is the first thing you do?

Where should you begin your search?

The Safe Return program can also be used by police to send an alert to area agencies, such as shelters or hospitals, that a person with Alzheimer's disease is missing. This may help recover a person with Alzheimer's Disease faster.

Receipt of Missing Persons Report of Person with Alzheimer's Disease

If your agency receives a missing persons report on a person believed to have Alzheimer's Disease or related disorder, the Safe Return Hotline should be contacted immediately and a photograph and/or description, if available, should be disseminated to all officers on shift. Such photograph and/or description should also be included in all shift briefings until the person is found.

Since it is necessary and important to the safety of the person to be found within the first 24 hours, any predetermined waiting period to file a missing persons report should be waived, and an immediate search should ensue.

When searching for a person with Alzheimer's Disease who is lost or has wandered, remember:

- Most found within ½ mile of last location
- The person may have a typical intended destination
- Usually found a short distance from road (perhaps following a railroad track)
- They will not be crying for help
- They will not respond to shouts
- They may be suffering from exposure to the elements
- May be found in familiar area, such as former residence or workplace
- Ask caregiver or other person familiar with the lost individual if he/she has any daily or weekly routines, and check those locations that person tells you about.

New Jersey Alzheimer's Association Contact Information:

Alzheimer's Association Greater NJ Chapter 400 Morris Avenue Suite 251 Denville, NJ 07834 1-800-883-1180 Alzheimer's Association Southern NJ Regional Office 3 Eves Drive Suite 310 Marlton, NJ 08053 1-800-272-3900

Alzheimer's Association Delaware Valley Chapter 100 N. 17th Street, 2nd Floor Philadelphia, PA 19103 215-561-2919

Other Contact Information:

NJ State Police Missing Persons Unit 609-882-2000 ext. 2894