

Working with Law Enforcement

by Jim Lorentz



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As a police officer for over 35 years, I have worked in a variety of different assignments from uniformed patrol, SWAT, undercover vice and narcotics, internal investigations, to Division Chief of Police. Some of my most rewarding experience has been teaching law enforcement officers how to respond to calls for service involving persons with dementia and working with family and professional caregivers. I have taught somewhere around 2500 cops in this area in several different agencies. One of the main things I talk about with law enforcement officers is to emphasize the importance of listening. People need to know that their concerns are heard and that they have voice. They should feel that decisions by police are transparent and are made with fairness and impartiality. These are the basics of procedural justice.

When I mention to caregivers that I teach 1st Responder Training Involving Persons with Dementia (PWD), they are very curious about what it is that I teach. Caregivers often tend to be a sponge, always looking to soak in ways to do things better. How are police officers trained in this area? How do police deal with people with afflictions like dementia and Alzheimer's? As police officers, we have to look at these situations critically. We understand that people with dementia can act inappropriately, but we need to look at the law to determine if the offense requires a mandatory arrest, or can we use critical thinking to find other options that address the specific issue and solve problems. How do we get help for caregivers and PWD who need it? So, here is an introduction to police training, and what your role as a caregiver or interested person might be to assist law enforcement in general, and specifically in cases of PWD.

How to Talk to the Police

One of my favorite quotes about dementia is, "if you have met one person with dementia, then you have met only one person with dementia." Everyone is different and has unique issues that defy blanket statements about circumstances and behavior, but sometimes we have to make generalizations to learn concepts and find solutions to problems. I say the same thing about police officers. "If you have met one cop, then you have met only one cop." All cops are different, but I am going to make some generalizations.

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First of all, a little understanding of the psychology of cops might be in order to help you talk to police. Let's say you have called the police to report a PWD missing. Do you think that the officer taking the report seems a little standoffish or preoccupied? Downright lacking in personality? "Just the facts, Ma'am." Your perceptions are probably valid. The officer is probably racing through several different ideas all at once. Besides that, from the very first day of the police academy, cops are taught that they must control every situation that might arise and not to trust everything that they see or hear. If they don't Control More and Trust Less they could get killed or assaulted. In 2015, there were 57,892 officers assaulted and 154 killed. Most cops don't think about the probability or statistics that they could be hurt, but they do think about the possibility that they could be hurt if they make a mistake in judgment. They also think that by being aware and careful, they can take care of themselves, their partners, and the community. And so they tend to be very observant. They don't let their guard down often and so they are not always the best conversationalists.

There is training going on to help police officers understand the gap between policing and the community. Policing philosophy has evolved in the last 20 years. The concepts of traditional policing have been:

- Random Patrol - Highly visible, drive around to prevent crime and catch crimes in progress.
- Rapid Response - When something happens, get there very quickly. This becomes an expectation of the community even when your car was broken into sometime last night, when you call the police, they should come right away.
- Investigate and Arrest - Coercive power of criminal law to gain control.

The concept of Community Policing is replacing some of the notions of the traditional model. While random patrol, rapid response, and investigation and arrest will always have their place, Community Policing is a philosophy that promotes organizational strategies



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that support the systematic use of partnerships and problem solving techniques to proactively address the immediate conditions that give rise to public safety issues such as crime, social disorder, and the fear of crime. In other words, how can we work together as a community to solve problems before they happen? Instead of waiting for a PWD to wander and then establish a plan to find them, why not work with families, care facilities, and the community to present wandering and have a plan already in place if a PWD does wander?

So how do you connect with your local law enforcement agency? The best idea is for you to take the initiative and connect with them before a problem occurs. Research your local law enforcement on their website. Check out their Facebook or Twitter page. Do they sound like a community policing philosophy agency? Can you find references to a Senior Liaison Officer, Community Resource Officer, or titles to that effect? Can you find listings for Captain, Commander, Division Chief, or Chief of Police that you can call or e-mail and talk about what concerns you might have, not just as a caregiver, but as a member of the community? Can you schedule a meeting for police to come to your home or care facility to talk about services that they may have such as care consultations, assistance with combative PWD, security assessments, or emergency drills? Are your local law enforcement officers trained as 1st Responders for PWD?

What We Teach Law Enforcement about PWD

Dementia is a general term to describe problems with cognition, the process of acquiring knowledge and understanding through thought, experience, and the senses. It is serious enough to interfere with daily living. It is not a normal part of aging. While some causes of dementia are reversible (9%), others are progressive and fatal. Abilities that the PWD has today will begin to fade and over time will be lost. Strategies for managing daily activities have to change and be adapted over time. Agitation and emotional upset can become common and can lead to physical aggression. Caregivers need to acquire special skills and knowledge to be successful interacting and caring for a PWD. Without knowledge and



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understanding of the disease process, caregivers often unwittingly exacerbate behavioral issues.

Recognizing a PWD

- Facial Expression: a blank or confused expression may signal a problem
- Language Skills: trouble with word find or sentence structure / using nonsensical words or expressions / overuse of chit-chat / avoiding your questions or attempts to change the topic
- Attire: may be inappropriate or mismatched
- Look for MEDIC ALERT bracelet or wallet card
- Balance/gait: unbalanced or shuffle / navigating over uneven surfaces or patterned floors may cause problems
- Actions: behavior appears unsafe or illogical

Police Communication tips for dementia: “do’s”

- Approach from the front
- Introduce yourself, explain you are there to help
- Speak slowly, use simple language
- Remain calm, smile, use friendly voice
- Be mindful of body language
- Change the topic if the person becomes agitated
- Provide security and comfort

Police Communication tips for dementia: “don’ts”

- Don’t take comments by PWD personally
- Don’t correct the person
- Don’t approach from behind without warning
- Don’t argue
- Don’t touch without asking/explaining
- Don’t repeat a question too many times as it may provoke agitation



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What We Teach About Wandering

About 70% of people with dementia will wander. Wandering is considered an emergency. If not found within 24 hours, 50% of PWD risk serious injury or death. Wandering can happen on foot, by car or other forms of transportation. We ask the community to report wandering right away and do not wait 24 hours (that comes from too much TV!).

Encourage persons to sign up for MedicAlert® + Alzheimer's Association Safe Return®.

This is a 24-hour nationwide identification and medical information program for people with Alzheimer's disease and dementia. Will fax or e-mail a missing person report to the local law enforcement agency.

Encourage persons to sign up for a GPS wrist band or radio transmission system designed to assist law enforcement and rescue agencies in locating lost or missing persons who have been diagnosed with Alzheimer's, autism, dementia, or other disorders. Many law enforcement agencies offer this as a free service. Most states have a Missing Senior Citizen Alert system, often called the Silver Alert. This system can be utilized by law enforcement to incorporate Emergency Broadcast System, media, and highway information signs to notify the public regarding missing seniors where the person has a verified impairment, medical condition, or the disappearance poses a credible threat to the safety and health of the person as determined by local law enforcement.

What We Teach About Driving

At some point, persons with dementia and caregivers have to face the surrender of driving privileges. Often, it is a very difficult process to convince PWD to stop driving, especially among men. Driving is very much connected to a person's self-esteem, independence, and control and it difficult to admit that impacted judgment, slow reaction time, less awareness of other drivers, and poor driving in general can be very dangerous for all persons. There is a high likelihood of becoming lost and causing property damage, injury and death.

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Traffic Stops with Suspected PWD Drivers

- Identify yourself and explain why the person is being pulled over
- Don't argue with the person
- Contact caregivers
- Confiscate the license and refer to Department of Motor Vehicles (Driving Re-Examination)
- Don't let the person drive home
- Issue a citation

While it may seem harsh to take the license, request a re-exam, and write a citation, it is necessary for all parties involved to understand the serious danger of PWD drivers. Often when families can involve their medical providers and the court system, PWD can understand that the problem is significant and that it is not just the caregiver being “unreasonable.”

Crime (PWD as Victims and Suspects)

PWD can easily become victims of crime, particularly from phone and e-mail scams. Officers should take the time to ask questions about unusual bank activity, coercion, sudden influences of friends or relatives. PWD can also be the victim of domestic violence and physical abuse. They sometimes are unable to articulate the actions of others. Caregivers are susceptible to stress, social isolation, and depression which may lead them to physical and mental abuse of the PWD. Deadly weapons should not be accessible in the home of a PWD.

PWD can be suspects of crimes. As mentioned before, they can become frustrated, agitated, and can become physically abusive. Shoplifting and indecent exposure are also common types of crime committed by PWD. While citations are appropriate for driving violations, it is rarely a good idea to issue criminal summonses to PWD. The best option is to consider having a PWD who has committed a crime evaluated by a medical provider and contacted the local District Attorney's Office for a determination regarding the sus-



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pect's culpability. This is an issue that best addressed in local law enforcement department policy before the question arises.

Suspected neglect and abuse are important thing for caregivers, medical providers, banks, neighbors, and generally, everyone in the community to report. All states have some type of mandatory reporting of elder abuse. Most states are very specific about who is required to make suspected reports of abuse to law enforcement.

Summary

In conclusion, take the time to connect with your law enforcement agencies to discuss issues of importance to you. This is especially helpful if you are a caregiver of a person with dementia. It always make sense to develop a plan to address difficult situations before you are ambushed by circumstances beyond your control.

About the Author

Division Chief Jim Lorentz has served at the Wheat Ridge, Colorado Police Department in a variety of functions including commander, Internal Affairs supervisor, SWAT Team Leader, and narcotics detective. He is an instructor in numerous police disciplines, specializing in leadership, anti-bias policing, police ethics, and dementia education. Chief Lorentz has earned a Bachelor of Arts degree in Forensic Studies from Indiana University and a Master of Criminal Justice degree in Police Executive Leadership from the University of Colorado. He is a graduate of the FBI National Academy and the Police Executive Research Forum (PERF) Senior Management in Policing (SMIP). Chief Lorentz has received training from the International Association of Chiefs of Police, Alzheimer's Initiatives Program and in partnership with the Alzheimer's Association, he teaches classes for 1st Responders to Persons with Dementia (PWD) and law enforcement responses to the community. Chief Lorentz is a member of the Emeritus Board of Directors for Family Tree, Inc., a non-profit organization to help people overcome child abuse, domestic violence, and homelessness to become safe, strong, and self-reliant. Chief Lorentz is happily married to Jill Lorentz, President of Summit Resilience Training, Inc.



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