



Dementia Friendly Public Safety and Emergency Services



Public safety professionals ensure protection, safety and compassionate response during emergencies and daily interactions. This Dementia Friendly America Sector Guide outlines practical actions that law enforcement, fire and rescue, EMS and dispatch teams can take to provide supportive and accessible responses for people living with dementia and their care partners, with simple steps to strengthen communication, reduce distress and improve safety.

UNDERSTANDING DEMENTIA

Dementia is a general term used to describe a group of symptoms that affect memory, thinking, communication and decision-making in ways that interfere with daily life. It is not a normal part of aging. Common symptoms include memory loss, confusion, trouble finding words, difficulty planning or solving problems and changes in mood or behavior. Alzheimer's disease is the most common cause of dementia. Other types include Vascular Dementia, Lewy Body Dementia and Frontotemporal Dementia.

During emergencies, dementia may appear as confusion, fear or difficulty following directions.

BUILD DEMENTIA AWARENESS

Provide dementia-awareness training for all staff through programs such as Dementia Friends or invite local experts to lead educational sessions or workshops.

Integrate dementia education into new employee orientation and annual refreshers.

Support employees who are providing care to someone with dementia by offering flexible scheduling, access to employee assistance programs or referrals to resources like the Eldercare Locator and the Alzheimer's Association Helpline.

INTEGRATE DEMENTIA AWARENESS INTO SYSTEMS AND PARTNERSHIPS

Create short reference guides or tip cards to help staff identify and assist people with dementia.

Participate in Silver Alert and other missing-person programs.

Coordinate with law enforcement, fire, EMS, emergency management and health services to align dementia-response protocols.

Incorporate dementia-awareness messages into public education and community preparedness outreach.

ENSURE SAFETY AND COMPASSION DURING RESPONSE

Check for medical ID bracelets, cards or home signage indicating dementia.

Observe for confusion, disorientation or inconsistent answers; explain actions calmly and step-by-step.

Keep the person calm and supervised to prevent wandering or distress.

Minimize sirens, flashing lights and radio chatter when safe to reduce overstimulation.

Use the least restrictive methods; avoid physical restraint.

Report suspected abuse, neglect or self-neglect through proper channels.

LAW ENFORCEMENT: RESPOND CALMLY AND WITH EMPATHY

Approach slowly and non-confrontationally; maintain open body language and stand at eye level.

Identify yourself and your purpose in plain language; use the person's preferred name or title.

Give clear, simple, one-step directions and allow extra time for responses.

Use empathy and validation; acknowledge feelings, avoid arguing or correcting delusions and gently redirect.

Request consent before touch when possible; avoid sudden movements.

Verify identity using medical ID, care partner input or registry information rather than prolonged questioning.

Use verbal de-escalation strategies before any physical intervention.

Document observed signs of confusion, known triggers and care partner information for referral or follow-up.

Activate Silver Alert or local missing-person protocols promptly when appropriate.

911 DISPATCH: COMMUNICATE CLEARLY AND PATIENTLY

Ask if the person involved has dementia, memory problems or confusion and note the caller's relationship to the individual.

Use a calm, reassuring tone and short, direct questions that are easy to answer.

Allow extra time for responses; repeat and confirm the address and callback number.

Capture helpful details such as preferred name, communication needs, known triggers, hearing/vision limitations, mobility concerns or care partner contact information.

Keep the caller on the line when appropriate and provide simple, one-step instructions.

Flag suspected or confirmed dementia in call notes for responding units.

Use registry or prior-call information (e.g., MedicAlert® + Safe Return) when available and allowed.

FIRE AND RESCUE: EVACUATE AND ASSIST WITH REASSURANCE

Announce your presence and role; use the person's preferred name/title and give simple, one-step instructions.

Explain equipment and actions before use (e.g., masks, monitors, tools); show items first and ask before touching.

Offer your arm for guidance rather than pushing or pulling; walk at the person's pace and keep mobility aids nearby.

Keep care partners nearby when safe and ask about known triggers or calming strategies.

Assess carefully for injury or smoke inhalation; recognize that pain or distress may be expressed non-verbally.

Observe for home and environmental hazards (e.g., unattended stoves, trip hazards, unsafe wiring, expired food) and refer concerns to appropriate local agencies.

EMS: DELIVER DEMENTIA-SENSITIVE MEDICAL CARE

Introduce the crew and roles; address the person by preferred name/title and explain each action before performing it.

Assign one responder to maintain consistent, calming communication throughout care.

Use short, concrete explanations; ask one question at a time and allow extra time for responses.

Limit lights, sirens, noise and movement in the treatment area; keep glasses, hearing aids and mobility aids with the person whenever possible.

Ask the care partner about baseline cognition, medications, allergies, known triggers and calming strategies.

Use observational pain assessments or simple pain scales if communication is limited.

Communicate cognitive status, observed behaviors, triggers and care partner details during hospital hand-off.

Document effective calming strategies and observed behaviors for continuity of care.

FOR ADDITIONAL RESOURCES



Become a Dementia Friend
dfamerica.org/become-a-dementia-friend/

Alzheimer's Association Helpline
800-272-3900 | www.alz.org



Find or Start a Memory Cafe
dfamerica.org/

Eldercare Locator
800-677-1116 | eldercare.acl.gov



Scan or visit
dfamerica.org/resource-listing



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