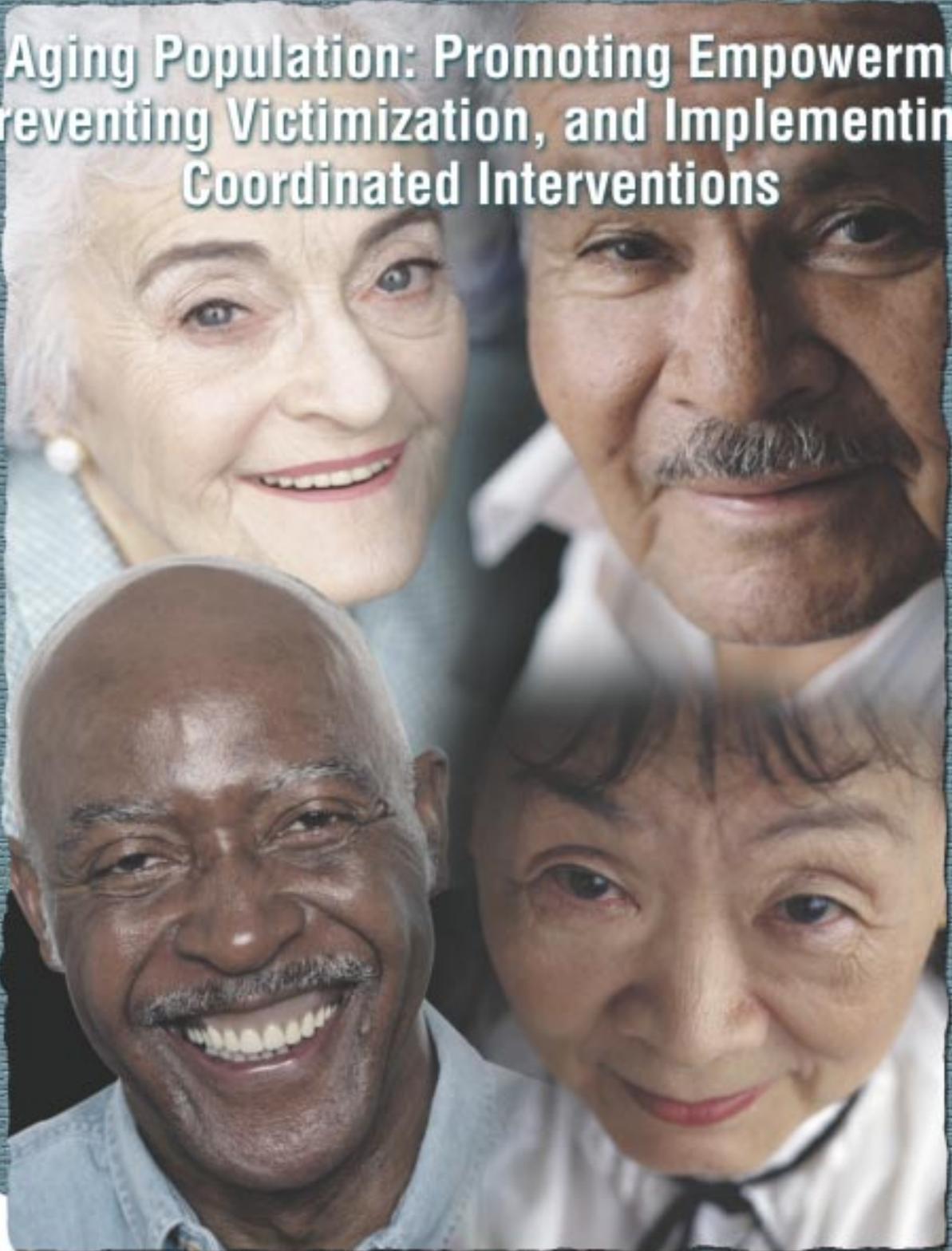




# Our Aging Population: Promoting Empowerment, Preventing Victimization, and Implementing Coordinated Interventions



**AN**  
**OJP**  
**ISSUES &  
PRACTICES  
REPORT**

**A Report of Proceedings**

A National Symposium sponsored by U.S. Department of Justice  
and U.S. Department of Health and Human Services

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A Report of Proceedings



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# Executive Summary

Hundreds of policymakers and practitioners representing public safety, social services, health care, and advocacy assembled in Washington, D.C., October 30–31, 2000, for a rare opportunity to share information across disciplines about innovative ideas and programs to enhance efforts to prevent, reduce, and respond to the crime victimization of older people throughout the country.

## Background

Experience has demonstrated that multidisciplinary approaches, combining diverse expertise and the tools of a variety of entities, are most effective in addressing crime against older people. Indeed, experts and practitioners strongly and consistently urge greater coordination among those who serve our aging population, those who create and regulate programs that serve older persons, and those who enforce laws designed to prohibit and redress abuse, exploitation, fraud, and neglect. With this in mind, the U.S. Departments of Justice (DOJ) and Health and Human Services (HHS) combined their respective public safety and social services approaches in planning this symposium. The symposium featured promising programs and projects that have brought together social service agencies, advocates, medical professionals, public safety officials, law enforcement personnel, and others to work toward empowering older people to live safely and implementing more effective strategies to prevent and respond to victimization.

The symposium was framed around three topical themes: financial exploitation and consumer fraud, elder abuse and neglect at home, and institutional abuse and neglect. Each topic was addressed in a plenary session and a number of associated workshops focusing on promising approaches featuring strong collaborations between the public safety and social services disciplines.

## Symposium Attendees

Reflecting this emphasis on public safety and social services collaboration, nominations were invited from each state attorney general (and from the District of Columbia Corporation Counsel) and the director of each state unit on aging (and in the District of Columbia)—representing the public safety and aging/social services fields, respectively. Additionally, a number of Indian tribes were invited to send delegates to the symposium. Because the focus of the symposium was on policy and program development, the nomination of individuals at the policymaking level actively engaged in issues related to the victimization of older persons was sought. The symposium was aimed at participants who would use the symposium as an opportunity to gather information that would enable them to provide leadership in policy and program development at the state, tribal, and local levels.

Symposium attendees were organized into state and tribal teams, which were given an opportunity each day of the symposium to meet and begin formulating plans for collaboration on elder victim issues. The symposium's closing session provides an opportunity for participants to hear from Attorney General Janet Reno and then for selected teams and the Tribal Caucus to report to Attorney General Reno. The participants were then invited to engage in a discussion with her.

## **Building the Case: Why Policymakers Should Focus on Elder Victimization**

The opening plenary session provided participants with the framework on policy and collaboration for the symposium and set out in broad terms the impact of the victimization of older people. Panelists conveyed the importance of policymakers focusing on elder victimization and thereby set the stage for the three thematic plenaries and respective workshops.

The need to demonstrate the prevalence of elder abuse is a central issue in generating public support and funding for prevention efforts. Dr. Rosalie Wolf, President and Founder of the National Committee for the Prevention of Elder Abuse, explained that policymakers continue to underestimate the occurrence of elder abuse, thereby limiting political awareness and financial support for prevention, intervention, prosecution, and further research. Dr. Wolf cited examples in which obscure and inadequate research has prevented progress in the field and suggested that a reporting mechanism using those who have close contact with potential victims would elicit a more accurate number of abuse and neglect cases and reveal the extensive nature of the problem.

Financial fraud is a seriously debilitating element in the lives of many seniors. Telemarketing scams, Medicare fraud, investor fraud, and a host of new fraudulent practices related to the Internet are widespread. John Rother, Director of Legislation and Public Policy for AARP, said the organization is focusing its efforts on combating consumer fraud, and already has many effective programs in place. AARP has devoted much effort to educating older people who are susceptible to intimidation and harassment, and has committed to opening an office in every state in order to work more closely with law enforcement, legal, and medical services.

David Baldrige, Executive Director of the National Indian Council on Aging, provided insight into the issues that directly and indirectly affect elder abuse in the tribal nations. Poverty, enormous stresses on the family, serious long-term health problems, increasing violence, and constraints on community

resources for the care of older people are contributing factors. Additionally, the cycle of alcohol abuse, gang-related deaths, and suicides among younger tribal members has undermined the community's ability to sustain time-honored values of family-based support. Mr. Baldrige concluded, "If our teens are not believing in and taking care of themselves, how can we ask them to take care of their elders?"

Victims often suffer from embarrassment and shame and need sensitivity from the agencies and personnel who provide help. Sue Ward, representing the National Association on Units of Aging, and Andrew Ketterer, representing the National Association of Attorneys General, each discussed the importance of being alert to older people's needs for self-respect and self-determination. Elderly people should be involved in planning elder programs and should not be made to feel dependent when they are victimized. Respect for diversity and cultural history is critical.

## **Financial Exploitation and Consumer Fraud**

The second plenary session provided an overview of the problems of financial exploitation and consumer fraud and their impact on society and individual victims. Under the control of a financially motivated stranger, elder citizens are vulnerable. Jill Thomas related the personal experience of her father and a woman who became a part of his life after he won \$6 million in the Florida lottery. This woman gained increasing control over the father's life and excluded family members, especially after he suffered a stroke. Investigators and courts offered no recourse and no consolation to the Thomas family, and argued that the law did not permit them to conclude that he had lost the capacity to decide how to dispose of his money.

Financial crimes are difficult to investigate and difficult to prosecute, and there is often confusion about which jurisdiction (local, state, or federal) has authority over a given case. Lisa Nerenberg, a private consultant, identified a fundamental issue of financial fraud: "[These] cases really challenge our understanding of decisionmaking capacity. We are trying to figure out what someone understood as informed consent." The challenge for investigators is similar across different domains: they must protect victims' rights to

choice and self-direction, and in cases of undue influence and financial exploitation they must discover whether a victim's capacity to decide is diminished.

Lee Norrgard, Senior Program Coordinator for the Consumer Protection Section of AARP, noted that several surveys have shown older people's vulnerability to consumer fraud, especially telemarketing fraud. He noted that focus groups have shown that educating older people about the existence of scams may not be enough to prevent the crime.

Included in the mission of the HHS Office of the Inspector General is prevention, detection, investigation, and prosecution of fraud, said Inspector Barbara Harriman. The percentage of people who commit fraud is small, but the outcome has been devastating; in 1996, the country lost \$23 million in health care fraud and abuse. By 1999, there had been a significant decrease in losses due to fraud, but new financial scams appear faster than investigators and policymakers can act.

## Elder Abuse and Neglect at Home

The focus of the third plenary session was elder abuse and neglect at home, the forms it takes, and its impact, framing the many issues involved.

Joyce Speakman shared with participants the story of how her mother died of abuse and neglect at the hands of a financially dependent, mentally ill daughter. Ms. Speakman's story exposed how the lack of awareness, education, and system response among various agencies can lead to extreme suffering, continued abuse, and sometimes death. Eva Kutas, president of the National Association of Adult Protective Service Administrators, noted, "Stories like this tell us we are at the very beginning" of addressing the problem.

Ms. Kutas spelled out the responsibilities that Adult Protective Services (APS) has to the elder community. The agency is legally obligated to respond to concerns of abuse in every state. It provides a system through which workers go into the home to investigate and ameliorate the situation with legal, psychological, and medical support. While APS is resource-poor in many states and struggles with funding issues, they continue to work on finding better tools for evaluation

and pushing authorities to challenge undue influence by relatives with intentions to control older family members.

Bonnie Brandl, Project Coordinator of the National Clearinghouse on Abuse in Later Life, brought attention to policies and protocols that are in place to deal with elder abuse, and challenged conference participants to realize that victims are not always protected under present systems. In several examples, she noted that law enforcement often is reluctant to arrest or remove abusive husbands, and interventions such as caregiver support to relieve stress do not change the pattern of abuse at home. "Victims fall between the cracks" and are left to the domination of abusers, Ms. Brandl said. She asked participants to consider whether the current interventions truly address the suffering of victims.

Elder sexual abuse, discussed by Dr. Holly Ramsey-Klawnsnik, a sociologist and licensed marriage and family therapist, is extremely difficult for most people to contemplate, and many agencies are reluctant to credit evidence and investigate. This kind of abuse is particularly insidious for vulnerable elder adults, some of whom are completely dependent on their perpetrators for care, food, and medicine and therefore have few options. The system does not provide safe havens for abused and chronically ill elderly women. Dr. Ramsey-Klawnsnik reminded participants that the circumstances of elder sexual abuse are heinous, but rather than deny the occurrence of sexual abuse, the system needs to develop a more sophisticated response.

## Institutional Abuse and Neglect

The fourth plenary panel was devoted to issues surrounding the abuse and neglect of older people living in long-term care facilities. There are multiple legal tools to combat abuse and neglect in nursing homes and other institutions caring for older people. States in the best position to take advantage of those tools are those with multidisciplinary teams that can share information and resources. The levels of pain and suffering in many institutions are extraordinary, and states often are ill-prepared to respond to families' pleas to help their loved ones.

Senora Russell told of her father's suffering because a nursing home staff delayed care and ignored family requests for hospitalization until it was too late. In another account, Michelle Lujan-Grisham, Director of the New Mexico State Agency on Aging, found similar abuse and incompetence when she went undercover to evaluate first-hand the conditions of a small residential facility. Reporting extreme isolation, improper feeding, and emotional abuse, Ms. Lujan-Grisham advised participants to hold facilities accountable. By linking Medicaid payments to facility complaints and preventing access to funds until complaints are resolved, facilities could become financially motivated to improve the care of residents.

Medicaid fraud, too, is a complex area to investigate and prosecute. Officials often have to pursue cases without sufficient medical evidence and without witnesses. Medicaid Fraud Control Units receive tens of thousands of referrals and prosecute hundreds of cases each year. David Waterbury, Director of the Washington State Medicaid Fraud Control Unit, noted that law enforcement relies heavily on others to respond to these cases. There is "no other area of law enforcement that requires so much collaboration, networking, and partnership."

DOJ's Nursing Home Initiative has worked to bring people from a wide variety of disciplines together to focus on elder abuse. Coordinator Marie-Therese Connolly reported that the Initiative recently sponsored four regional conferences to help participants identify roles and issues and to provide training. The Initiative has three areas of focus: enhanced enforcement, evaluation, and recertification of nursing homes; prosecution of criminal and civil cases; and information sharing. State working groups that developed as a result of the Initiative also have identified a national problem in prosecuting abuse and neglect: the lack of research into the signs and symptoms of abuse and neglect in the elderly.

## Closing Session

In the closing session, Attorney General Janet Reno delivered remarks to the participants. "Today, about 34 million Americans are over the age of 65, and in 30 years that number will more than double," she said. "Today, too many older Americans are victims of abuse and neglect in places where they should

be safe: in their homes, in long-term care facilities. And too many are victims of fraud. We can do a lot better than we have."

"I think this whole effort is about the defense of the human spirit," the Attorney General told conference participants. "We have got to make sure that this nation is not just focused on its future, but on its present, the present in terms of the remarkable human spirit, the wisdom, and the greatness of older people. They will overcome if we give them half a chance."

Attorney General Reno outlined an agenda for the future of the elder justice movement. The first priority, she said, is prevention. For example, by promoting an economic infrastructure that helps older people remain self-sufficient, the country also can promote respect for aging Americans. The next priority is to form multidisciplinary efforts to design interventions, and to move quickly in creating them. "The quicker you see it, the faster you move, the lesser the problem," she said. The third priority is prosecution, and the Attorney General pledged that DOJ is committed to pursuing hard cases, coordinating closely with HHS and others. She also encouraged efforts at the community and individual levels and praised community advocates and community policing in building a foundation of neighborhood concern and shared local support.

The Attorney General told conference participants that, "We have got to develop a comprehensive, coordinated, well-funded national plan to prevent elder abuse in the first place, and to pursue it correctly if it has occurred. But we don't have to reinvent the wheel ... We can learn so much from one case to the other." She encouraged participants to collaborate with experts from many fields and to seek out best practices.

Attorney General Reno outlined several collaborative efforts DOJ has pursued:

- In the late 1980s, DOJ began funding the Triad Program, a collaboration of AARP volunteers, the National Sheriff's Association, and the International Association of Chiefs of Police (IACP).
- In 1998, DOJ established five elder fraud prevention teams, composed of AARP volunteers, and federal, state, and local law enforcement officials, to educate older consumers about scams.

- The Office of Justice Programs has awarded grants to train lawyers and victim advocates about elder abuse, to provide technical assistance to programs dealing with domestic violence in later life, and through its formula grant programs, to support direct services for victims of elder abuse.
- Since 1999, the Nursing Home Initiative has sponsored cross training for more than 1,000 federal and state law enforcement, regulatory, social service, public safety, and health care professionals.
- DOJ has formed multidisciplinary state working groups to provide infrastructure and focus on these issues at the state and local levels.
- DOJ remains committed to regular productive interagency coordination with the Health Care Financing Administration and HHS Office of Inspector General on cases and policy issues.

Throughout the conference, the state and tribal caucus teams met to discuss how they could use information from the conference to enhance collaboration on elder victimization issues in their jurisdictions. Eight teams were selected to report to the Attorney General and the other conference participants on their plans: South Carolina, Nevada, New Hampshire, Yakama Nation, Texas, Minnesota, Montana, and Northern Cheyenne Tribe.

Included were plans to:

- Develop collaborations among all the key players dealing with elder abuse, establish common languages and protocols, and resolve jurisdictional and turf issues.

- Make elder abuse a community policing priority.
- Create or improve legislation and codes dealing with elder abuse.
- Establish an emergency shelter.
- Create more training programs for law enforcement.
- Ensure better reporting from law enforcement.
- Develop stronger educational efforts for judges, law enforcement, the legal and medical communities, and the general public, especially elders.
- Develop a pool of experts that prosecutors can call on in elder abuse cases.
- Convene a Tribal Summit and state conferences on elder abuse.
- Develop the capacity for telemedicine and teleconferencing.
- Improve data collection.
- Establish a tribal Elder Review Board.

Additionally, at a Tribal Caucus on the first evening of the symposium, the tribal teams and several state teams and other state representatives formulated recommendations that were reported to the Attorney General.

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# Opening Remarks

## **Speaker:**

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Daniel Marcus  
Acting Associate Attorney General  
U.S. Department of Justice  
Washington, D.C.

Daniel Marcus, Acting Associate Attorney General, welcomed participants and told them that Attorney General Janet Reno has made addressing elder abuse and neglect a priority. DOJ works with other departments and national organizations to build prevention programs, encourage multidisciplinary interventions, and prosecute cases of elder abuse, neglect, and fraud.

A growing concern about elder abuse led to a groundbreaking multidisciplinary roundtable discussion in October among scholars and professionals in health care, social services, and law enforcement regarding the medical forensics issues in elder abuse and neglect. Crucial issues were identified and communications among experts in the field were strengthened, Mr. Marcus said.

HHS also has engaged in comprehensive efforts to combat elder abuse and has made significant reforms through its nursing home quality of care programs and working through the Administration on Aging and its Long-Term Care Ombudsman Program.

Early collaborations have been successful and are beginning to make an impact on public awareness, Mr. Marcus said. But elder abuse and neglect is significantly underreported and therefore efforts to address it do not receive as much funding and general support as they need. He invited conference participants “to explore what more can be done to address elder abuse.”

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# Plenary I

## Building the Case: Why Policymakers Should Focus on Elder Victimization

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### Moderator:

Mary Lou Leary  
Acting Assistant Attorney General  
Office of Justice Programs  
U.S. Department of Justice  
Washington, D.C.

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### Presenters:

David Baldrige  
Executive Director  
National Indian Council on Aging Inc.  
Albuquerque, New Mexico

The Hon. Drew Ketterer  
Attorney General, State of Maine  
President, National Association  
of Attorneys General  
Augusta, Maine

John Rother  
Director, Legislation and Public Policy  
AARP  
Washington, D.C.

The Hon. Sue Ward  
Secretary, Board of Directors, National  
Association of Units on Aging  
Secretary, Maryland Department on Aging  
Baltimore, Maryland

Rosalie S. Wolf  
President and Founder  
National Committee for the Prevention  
of Elder Abuse  
Worcester, Massachusetts

Mary Lou Leary, Acting Assistant Attorney General for the U.S. Department of Justice, Office of Justice Programs (OJP), explained that the purpose of the conference was to bring together multidisciplinary teams from around the country so that participants could “develop or enhance the action strategy in your [own] community.” She noted that participants would have an opportunity to meet with their state and tribal teams to focus on these issues. Ms. Leary suggested that participants use the opportunity to learn from each other, get to know the needs of other states and tribal nations, and network with the purpose of stimulating ideas and actions. Ms. Leary stated that the purpose of the opening plenary was for presenters to provide a framework for the symposium, focusing three topical themes: financial exploitation and consumer fraud, elder abuse and neglect at home, and institutional abuse and neglect.

In this session, presenters conveyed the importance of policymakers focusing on victimization of older persons, thereby setting the stage for the three areas to be addressed. Panelists presented the central issues for participants to consider as they developed strategies to enhance multidisciplinary approaches to elder abuse and neglect in their jurisdictions.

Dr. Rosalie Wolf, President and Founder of the National Committee for the Prevention of Elder Abuse, offered an overview of the development of the theoretical conception of elder abuse and neglect over the past 20 years. The lack of statutory and theoretical definitions of elder abuse and neglect has hindered legal and scientific understanding, she said. Traditional conceptions have discounted the cultural context in which abuse and neglect occur, instead focusing on the individual pathology of the perpetrators. More recently, experts have begun to place elder abuse and neglect within an ecological framework, suggesting that such violence results from individual, interpersonal, social contextual, and societal factors. This shift mirrors similar progressions that have occurred in the analysis of child abuse and domestic violence. In applying the ecological model to elder abuse, the frame of reference is broadened, allowing providers to better determine the cause of the problem and to promote interventions at all levels of the environment. At the individual level, such a framework suggests treatment for both victims and perpetrators. The interpersonal level analysis allows for the introduction of social services for situational problems within the home. At the community level, there can be improved responses to mental illness, substance abuse, and unemployment, among other contributing problems. And for society, the ecological model urges changes in cultural values and beliefs that have fostered ageism and sexism.

The lack of an agreed definition has hindered research to determine the prevalence of this problem. According to Dr. Wolf, there have been five such research studies conducted in five different countries. Despite the differing methodologies, these studies all placed the prevalence of elder abuse and neglect at between four and six percent of the population. A survey of state programs by Adult Protective Services found that the number of reported cases of elder abuse and neglect in the United States increased from 117,000 in 1986 to 296,000 in 1996. A more recent national elder abuse incident study mandated by Congress used the sentinel approach, which assumes that reported cases are only the tip of the iceberg. This study not only looked at case information obtained from Adult Protective Services, but also examined data from agencies and programs serving older persons, such as hospitals, clinics, law enforcement agencies, and banks. In the 20 counties that

served as the sample, the study found that in 1996, 450,000 persons aged 60 or older were abused, neglected or exploited. However, only 71,000 cases were reported and substantiated by APS. Dr. Wolf cautioned that this study has some flaws, including the small sample size of 20 counties (of a total 3,300 in the United States) and the failure to account for those older persons who are homebound or isolated.

What little research that has been conducted in the first 20 years of the elder abuse movement has focused primarily on mistreatment in family settings, ignoring the problem within institutions. Dr. Wolf suggested a number of risk factors within institutional settings that could lead to abuse, including the lack of staff training, low regard for older persons, inadequate facilities and management skills, employees who are ill-suited by temperament or history for their positions, communication and cultural differences between staff and residents, and staff turnover and shortages. In pointing toward the future of the elder abuse and neglect agenda, Dr. Wolf cited some positive legal processes that had been instituted such as the emergence of Medicaid Fraud Control Units, the 1987 Nursing Home Reform Act, and this year's public awareness campaign initiated by the Health Care Financing Administration. However, elder abuse and neglect involves medical, legal, psychological, social, environmental, and ethical issues that require intense coordination among different agencies.

Dr. Wolf concluded by asserting that "policymakers need to focus on a system to ensure cultural competence among practitioners; reduce fragmentation among the forms of family violence; create better tools for identification and diagnosis; support research on prevalence, risk factors, consequences, and other aspects of the problem; promote evaluation of elder abuse interventions; and encourage collaboration among the multiple systems that are involved with elder abuse, neglect, and exploitation."

John Rother, Director of Legislation and Public Policy at AARP, discussed the steps that AARP was taking to combat consumer fraud perpetrated on older persons, and announced that by next year the organization will have staffed offices in all 50 states to better coordinate efforts with local groups. AARP is working to change the attitudes and raise awareness among the older population in the areas of telemarketing and health care fraud. According to a 1996

AARP survey, 56 percent of all telemarketing fraud victims were aged 50 or older, yet this age group makes up only 26 percent of the U.S. population. Annually, telemarketing fraud costs \$40 billion dollars, with the most popular forms being prizes and sweepstakes scams, slamming, pay-for-call services, work at home sales, and magazine sales. The major types of health care and investment fraud that AARP has documented include Medicare fraud, living will scams, and home improvement fraud. Determining the prevalence of consumer fraud perpetrated on the older population is hindered by their reluctance to report such incidences. This reluctance stems from embarrassment, as well as fear that they will lose their independence, control of their financial decisionmaking, or even be institutionalized. Mr. Rother identified several steps that AARP is taking to prevent and intervene in consumer fraud, including providing consumer education; working with business associations to set and monitor standards; promoting early detection by educating people who come in contact with older persons daily, such as bank tellers and postal carriers; and pushing for effective enforcement of existing laws.

David Baldrige, Executive Director of the National Indian Council on Aging, informed participants that in the 558 Indian tribes across the nation, honoring older persons is a universal value, yet the incidence of elder abuse is very high. To explain this discrepancy, he pointed to socioeconomic disparities between tribal communities and the rest of the country. The poverty rate for older Indians is three times the overall U.S. rate. A U.S. Department of Housing and Urban Development (HUD) report found that 33 percent of Indian homes are overcrowded compared with 5 percent in the general population. The federal expenditure for health care is 34 percent less per person in Indian communities. Additionally, there are only 12 nursing homes in Indian Country with 90 percent of long-term care being provided by family members who are themselves under severe stress.

This stress often leads to drug use and violence: 19.6 percent of Indian teenagers use illegal drugs. Alcoholism impacts 95 percent of Indian families with alcohol-related deaths among 15–24 year olds at 17 times the national average. According to a 1997 Department of Justice report on law enforcement in Indian Country, there are only 1.3 officers for every

1,000 citizens compared with 2.9 in non-Indian communities. The homicide rate for Indian males is nearly three times higher than that of white males. And there are a total of 375 Indian gangs with 5,000 members. Given these grave statistics, Mr. Baldrige contends, “we’re losing the battle of belief.” And he asked those present, “So how will we as tribal leaders, as providers, as advocates, deal with these questions of human belief with hope, with the will to change? I think that’s our challenge.”

Sue Ward, Secretary of the Maryland Department on Aging, spoke on behalf of the National Association of State Units on Aging (NASUA) and stressed the importance of collaboration in addressing elder abuse and neglect. NASUA is the lead agency for the National Center on Elder Abuse, a partnership of six organizations (the others are the American Bar Association Commission on Legal Problems of the Elderly, the Clearinghouse on Abuse and Neglect of the Elderly at the University of Delaware, the Goldman Institute on Aging/San Francisco Consortium for the Prevention of Elder Abuse, the National Association of Adult Protective Services Administrators, and the National Committee for the Prevention of Elder Abuse) funded by the Administration on Aging.

Explaining that the demographic shift (or, alternatively, the aging of the population) will increase the number of vulnerable older persons, Ms. Ward said “Collaboration has to be our watchword. Neither the social service nor the public safety systems can respond to current challenges or prepare for the future without talking to each other. None of our programs, individually, has the resources necessary; none has the specific expertise needed to respond to these difficult situations. We know that referrals for adult protective service assessments are not simple one dimensional situations: cases often involve multiple issues such as transfer of property, alcoholism/drug dependence, hoarding behavior, eviction, depression, mental illness, family dysfunction, spousal abuse, assault, and theft. Each of these issues requires a special expertise to (a) assess and document the problem, and (b) clarify the options for assistance and/or intervention. It is only through collaboration and coordination that we can effectively offer assistance.”

Andrew Ketterer, Attorney General of Maine and President of the National Association of Attorneys

General, addressed the unique challenges that law enforcement faces in working with older persons. On the whole, older persons are reluctant to admit that they have been victimized and to seek help, he said. In cases of domestic violence when the perpetrator is a family member, it is even more difficult for the older victim to report abuse. To improve services to older victims, Mr. Ketterer suggested that all prosecutors receive elder abuse training, that public education programs be offered to increase awareness of older persons' issues, and that state attorneys general take the lead in coordinating the efforts of professional

and community organizations. There is a long way to go in improving law enforcement response to older victims. At present, there is no statutory consistency from state to state on how to address elder abuse. There are no national standards or best practice guidelines, no model statutes, no research think tanks, and no consistent data collection or reliable data management systems. In addressing these deficiencies, Mr. Ketterer stressed that the diversity of the elder population must be recognized and that older people must be included in the planning process.

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# Plenary II

## Financial Exploitation and Consumer Fraud

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### Moderator:

Diane Justice  
Principal Deputy Assistant Secretary for Aging  
U.S. Department of Health and Human Services  
Washington, D.C.

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### Presenters:

Barbara Harriman  
Inspector, Office of the Inspector General  
U.S. Department of Health and Human Services  
Washington, D.C.

Lisa Nerenberg  
Consultant in Elder Abuse Prevention  
Redwood City, California

Lee Norrgard  
Senior Program Coordinator  
Consumer Protection Section  
AARP  
Washington, D.C.

Jill Thomas  
Independent Consultant  
Bay Village, Ohio

Older people are especially vulnerable to financial exploitation in a variety of forms, often aggravated by violence or the threat of violence, because they tend to be more trusting and less cynical than younger people in dealing with fraudulent telemarketers and other scam artists. They are especially vulnerable to home-repair scams, since so many own their own homes but cannot do their own repairs. Aging may bring disability and dependence upon caregivers, some of whom may prove exploitative. To others, the older person's dependence may seem like complicity in their own abuse.

On a panel mediated by Diane Justice, Principal Deputy Assistant Secretary for Aging at the Department of Health and Human Services, presenters outlined a variety of schemes to defraud older persons directly. Panelists described the way HHS and DOJ, employing partnerships with such agencies as the Internal Revenue Service (IRS) and Federal Bureau of Investigation (FBI), gather evidence and act to prevent or prosecute fraud and abuse. There was general agreement that judges and others in the legal system need to be educated about elder abuse so that they have a better understanding of the use of undue influence and alienation of affection to exploit older persons. Older people, too, need better education about the dangers of financial abuse.

These efforts can build on existing collaborations, some of them long-term, between HHS and DOJ against health care fraud and abuse, noted Ms. Justice. She cited the Nursing Home Quality Initiative and other efforts to fight health care fraud and abuse throughout the country; the Long-Term Care Ombudsman program, advocating for residents of nursing homes for the past 25 years; and the elder abuse prevention program, which provides funding to the states for education and services related to elder abuse.

Jill Thomas, a consultant and specialist in geriatric nursing home care, highlighted the problems of financial exploitation by telling a painful story about the exploitation of her father by a "gold digger" and the inability of Florida agencies to protect him.

Ms. Thomas' father was a divorcee of 69 when, in 1994, he won \$6 million in the Florida lottery. He enjoyed his newfound wealth, and began searching for female companionship. He met Stephanie, a 40-year-old woman of obscure background. The two dated on and off for a while, then went their separate ways. Ms. Thomas' father suffered a stroke and was recuperating in a rehabilitation hospital, with both physical and mental impairments, when Stephanie turned up again.

In the following few weeks, she took effective control of his life. She secured control of his assets through a power of attorney, and placed her name on his deeds, bank accounts, and even the trust fund Ms. Thomas' father had established for himself and his four adult children. After he left the hospital, he and Stephanie sold his "beloved" beachfront condominium.

Stephanie has succeeded in cutting off all contact between the father and his old friends and with his family. Ms. Thomas has learned that her father has been in and out of a succession of assisted-living facilities and hospitals, and is currently in a nursing home in the Tallahassee area. The last time Ms. Thomas saw or spoke with her father was in court, in 1998, when she and her brother attempted unsuccessfully to gain guardianship of their father. "I'm worried about my father," Ms. Thomas said, "and I don't want him to die alone without being reunited with his children, who have always been a very important part of his life."

In years of court hearings and trials that cost tens of thousands of dollars, the Florida court system has offered no help or relief, she said. A detective in the Tallahassee Sheriff's Department Fraud Division told her that while current Florida law would not help, the problem of financial abuse of elders had grown so large that it might be time to set a precedent. He referred her to Adult Protective Services, which told her, "It's your father's money, and he can give it to anybody that he wants." In her search for a solution, she contacted the FBI, police, and sheriff's departments in Florida and Georgia, the Florida Attorney General's Office, and U.S. Senators in a committee hearing at which she testified. All agreed that crimes had been committed, but after learning of the failed guardianship attempt and the APS response, they all said there was nothing they could do.

Ms. Thomas recommended more standardized testing and requirements for guardians, and greater judicial discretion in financial exploitation cases. In her father's case, Ms. Thomas originally saw no immediate need to seek legal redress, and was afraid of alienating him until Stephanie's intentions became quite obvious. But when the adult children applied for guardianship—even though the examining committee reports stated he could not handle his own finances or drive—a committee recommended against the guardianship, and the judge, the only one who heard the family's side, felt that his hands were tied and that he was required to deny the guardianship. (Professionals who reviewed the reports said that either her father was not competent or that the testing was inadequate.)

Ms. Thomas also recommended that state legal systems recognize alienation of affection in cases like her father's. When Stephanie sued the family for defamation of character, Ms. Thomas and her brother filed a countersuit on the only legal ground their lawyer could find: "impediment of inheritance," since Florida law doesn't recognize alienation. (The countersuit ended when the court dismissed Stephanie's suit as "frivolous.")

Lisa Nerenberg, a consultant in elder abuse prevention in Redwood City, California, explained that financial abuse of older persons spans a broad spectrum. It includes the attendant who steals from a charge; the teenager who uses his grandmother's credit card to buy stereo equipment; the son or daughter who is in financial trouble or is addicted to alcohol, drugs, or gambling, who sees the older person as a way out of the difficulty; and the expectant heir who wants to accelerate the time of inheritance.

Other forms of financial abuse include criminal home-repair scammers and predatory lenders who trick, mislead, or coerce older homeowners into taking out home equity loans they can't possibly repay because of inflated fees and balloon payments. Ms. Nerenberg also noted telemarketing scams for overpriced or nonexistent products, and "sweetheart" scams, in which a person uses an older person's emotional vulnerability to bilk them out of money. "Identity theft," in which a criminal obtains a person's Social Security number or other personal information and runs up debts or gains control of assets, is another

problem. Victims of identity theft who have handled their finances for a lifetime can end up harassed by creditors for debts they never contracted.

The abuse or misuse of legal documents and legal authority—such devices as joint bank accounts, powers of attorney, trusts, and guardianships—is another aspect of financial abuse. These legal devices were created as protections, she said, but have in some cases become “licenses to steal.” It is necessary now to build more accountability into them.

If pressure, coercion, and trickery don’t do the job, financial exploiters may turn to other forms of elder abuse, including violence and neglect. Caregivers withhold care or food, or both, to hasten decline or death. It is difficult to investigate such cases, Ms. Nerenberg said. The evidence is in the hands of the perpetrator, and there is confusion about jurisdiction—civil or criminal; state, local, or federal.

Finally, she said, it is impossible to talk about financial elder abuse without discussing capacity—whether the victim understood and had sufficient capacity to exercise informed consent when he or she signed a document or gave a gift. Formerly, people were deemed incompetent if they were diagnosed with dementia or were making what were considered poor decisions; sometimes they were deemed incompetent simply on the basis of age. Now, the all-or-nothing concept of incompetence has given way to the idea of using a “functional assessment” to determine capacity and of looking at what level of understanding is necessary to execute a particular legal document. To execute a will, for example, one must understand how much one has and the “natural objects of one’s bounty.” In cases of suspected elder abuse, more often questions arise as to the capacity needed to give a gift or get married. And while an older person has a right to choice and self-determination, she said, some complex psychological choices come into play. Many victims do not realize they have been abused and refuse to take action against their abusers; some even seem complicit.

Recently, Ms. Nerenberg said, there has been increasing interest in the concept of undue influence—this is when a strong person gets a weaker one to do something they would not otherwise have done—and the techniques used

by abusers to exert it. These include isolating the victim, inducing fear, and convincing them that the manipulator is the only person to be trusted.

It is important that outreach programs warn people about abuse, Ms. Nerenberg said, but it is also important to hold perpetrators accountable. To do that, victims must come forward, even though it may be traumatic for them to go to court. There should be more incentives to come forward, she argued. Currently, victims agree to go to court in order to get back something that was stolen and to prevent the same thing from happening to other people. But few victims now get retribution, and the current sentences do not discourage predators. Ms. Nerenberg recommended stronger penalties, some for restitution to victims, and services for victims that address their psychological traumas.

Lee Norrgard, Senior Program Coordinator for the Consumer Protection Section of AARP, noted that several surveys have shown older people’s vulnerability to consumer fraud, especially telemarketing fraud. For example, a 1996 Princeton University survey of victims of telemarketing fraud found that 56 percent were 50 and older. They were not, as had been assumed, socially isolated; they had friends and relatives nearby. Nor were they stupid, but they were less wary and generally unable to recognize signs of fraud. Focus groups of victims and non-victims revealed a qualitative difference: The victims were *looking* for evidence of legitimacy; they wanted to give people the benefit of the doubt. The non-victims were immediately ready to hang up when they first heard something suspicious. As a result, Norrgard said, AARP changed its message to “Fraudulent telemarketers are criminals. Don’t fall for a telephone line.” and this has proved effective.

That survey also showed older persons’ vulnerability to home-repair fraud and predatory home lending. Mr. Norrgard noted that 86 percent of those over 55 own their own home, and 89 percent of them want to remain in their homes. They live in aging housing stock, which often needs repairs. Half the homeowners older than 65 had made repairs in the past 2 years, and 80 percent of them used an outside contractor (often they couldn’t climb around to make repairs, or even to check on the repairs). The fact that persons older than 65 have far less debt than younger

people makes them especially lucrative targets for unscrupulous contractors, who often act as mortgage brokers.

Educating older people about the existence of scams may not be enough to prevent the crime. Mr. Norrgard noted the results of a focus-group interview of eight victims of senior fraud, plus one adult child, conducted jointly by AARP and the Attorney General of Wisconsin. One woman, who had a master's degree, was quite familiar with telemarketing scams, but still found herself unable to hang up on the telemarketers.

More generally, a 1998 survey commissioned by AARP examined a sample of 1,504 persons aged 18 and older regarding, in part, broad knowledge of financial matters. Only 8 percent were in the category of high-vulnerability to financial exploitation. Twenty-five percent of older persons own stocks or mutual funds, and more than one-third of the older people (but only one-fifth of the entire group) thought the FDIC would cover losses if they lost money in a mutual fund purchased at a bank. Only half the older people thought that diversification reduced the risks of investment. More than 20 percent were unaware that truth-in-lending requires disclosure of the annual percentage rate of a loan. More than 20 percent of people 65 and older were unaware they had a right to see their own credit reports. Of the 8 percent in the high-vulnerability category, Mr. Norrgard said, 20 percent were women aged 75 and older and 15 percent were men in the same age group.

Barbara Harriman, of the HHS Office of Inspector General (OIG), noted that the abuse of federal health care programs serving older persons can be especially costly. For example, the Medicare Trust Fund has lost billions to health care fraud or abuse in which medical providers billed for services that were not provided or filed false cost reports. The fraud, Ms. Harriman said, occurs not only in large cities but

in communities of all sizes throughout the country. The amounts involved may be small in specific instances, but taken together, they constitute a large deficit in the Medicare Trust Fund.

The fraudulent parties, she said, can be doctors, podiatrists, ophthalmologists, hospitals, nursing homes, and laboratories. Examples include:

- An ophthalmologist who had his receptionist diagnose cataracts, and even operated on people who had no cataracts.
- The operator of a chain of nursing homes who charged expenses for redecoration and refurbishments to his private residence that included a baby grand piano, an Olympic pool, a bowling alley, and Persian rugs. Investigation showed he allowed two cents per resident per day for food in his nursing homes.
- A physician who hired an unlicensed layman to care for patients while he was on vacation, and billed as if he was performing the services.

The 1996 Health Insurance Portability Act (HIPA) provided funding that enabled the OIG Office of Investigations to add criminal investigators and open state offices, services that will be extended to every state in 2001. Due to HIPA, Ms. Harriman said, there was a 42 percent reduction in fraud and abuse in 1999—down from \$23 billion a year to \$13.5 billion. A major result of that savings is that the Medicare Trust Fund's solvency has been extended from 1999 to 2025.

The OIG Office of Investigations also has been included in important and effective national, state, and local outreach programs, such as the "Who Pays? You Pay" program, throughout the country. As a result, the office's telephone tip line last year received more than a half-million telephone calls.

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# Lunch

## Investigating the Systems That Protect and Care for Vulnerable Populations: A Reporter's View

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### Introduction:

D. Jean Veta  
Deputy Associate Attorney General  
U.S. Department of Justice  
Washington, D.C.

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### Speaker:

David Jackson  
Investigative Reporter  
*The Chicago Tribune*  
Chicago, Illinois

D. Jean Veta, Deputy Associate Attorney General for the Department of Justice, recognized the importance of the media's role in uncovering the "victimization of older people," and welcomed David Jackson, Pulitzer Prize-winning investigative reporter for *The Chicago Tribune*, as someone who has demonstrated repeatedly how to use public records and other investigative techniques to help protect those in need.

Mr. Jackson explained that he has focused much of his work on children in poverty. At the *Tribune* he was recognized for his investigative reporting on the significant privatization of juvenile detention facilities and foster care programs, and how that privatization affected the provision of care and services. On previous assignments he used his investigative skills to track the Oklahoma City bombers through Missouri and Kansas, to unveil the secret financial deals of Nation of Islam leader Louis Farrakhan, and to uncover the inner-city empire of Chicago slumlord Lou Wolfe. Acknowledging the diversity of his topics, Mr. Jackson noted that his investigative strategies "work just as well for examining the conditions of care for institutionalized people."

Through several case studies, notably his exposé of the Westbridge Treatment Center, a detention center for troubled adolescents in Phoenix, Arizona, Mr. Jackson outlined for conference participants the "basic tools of the investigative reporter's trade." He noted that "the methods that I have learned may be of some practical value in your unsung work of protecting older Americans from abuse, neglect, and exploitation."

Initially viewed as an "island of hope" in the landscape of despair that for so long has defined juvenile justice, the Westbridge Treatment Center received front page coverage in the *Tribune* for its innovative approach. Only 2 years later, however, Mr. Jackson's series revealed patterns of sexual abuse of young residents by their older peers.

With increased reliance on private entrepreneurs creating a "fundamental shift" in the way America handles its troubled youths, Mr. Jackson noted that the "lucrative" private programs touted as an "antidote to wretched conditions found in state institutions" were themselves found to be rife with corruption and abuse. Mr. Jackson observed that he and his colleagues found that "in the best of circumstances, private detention and foster care

programs offer a host of potential benefits, but while some children unquestionably fared better in private hands, there was no conclusive evidence that those sent to private programs as a whole were better off, or that taxpayers saved money as the companies had promised.”

Elder abuse and victimization are becoming increasingly important, Mr. Jackson acknowledged, and although his comments addressed the “opposite end of life’s spectrum,” the “challenge” of penetrating institutions that house these “imperiled lives” where care is supposed to be dispensed remains the same—“the tools you use to get inside are also the same.” Mr. Jackson outlined three basic tools of investigative research: first, the use of “public records” that can be viewed by any citizen in public agencies, and municipal, state, and federal courts; second, “relationships with people who can give you a view from the interior”; and third, the Freedom of Information Act “to obtain government files, databases, and government reports.”

Mr. Jackson showed conference participants how, by using public records to uncover the Westbridge story, he gained access to a “closed world.” To begin the investigative process, the “Rosetta Stone” is the blue pages, or the government listings of any local telephone book, he said. “Chances are the person or organization being studied has had contact with a variety of government agencies listed in the blue pages,” he noted. “[At] the Bankruptcy Court ... you’ll find a wealth of data in the court proceedings ... [At] the County Recorder of Deeds ... a quick check of land records will show liens and court judgments ... [And] county and federal court records ... can offer a rich portrait of an organization’s corporate ownership and finances.” Using this method, Mr. Jackson discovered federal court records showing that a \$25 million dollar bank debt threatened Westbridge’s parent company, “driving down conditions of care at the facility.”

Reviewing public records, Mr. Jackson recounted, provided “the blueprint of the second stage of my

work—locating people who could tell me what went on inside.” A good investigation reaches out to the “full range of employees,” he observed, “from janitors to skilled professionals and administrators, treating every one, every fact, diary, or correspondence file that they offer, with an equal mix of welcome and skepticism.” In the Westbridge investigation, he talked with the former clinical director, who told him that she resigned when she realized that the facilities’ “marketing promises were hollow—instead of two kids to a room we had three, and violent kids were mixed with psychiatric patients.”

These human resources led Mr. Jackson to the third phase of his investigation, using the Freedom of Information Act (FOIA). Information provided by individuals closely associated with the Westbridge facility told him about the types of inspections and monitoring reports filed with various local, state, and federal agencies. Obtained by Mr. Jackson through FOIA requests, these reports showed the human cost of the cutbacks that the former clinical director at Westbridge had described. Mr. Jackson recalled how “a 13-year-old sexual predator had been placed in a children’s unit where he bullied smaller youth into a sex ring, according to Phoenix police and other records. Documents obtained through an FOIA request showed that a 10-year-old youth told Phoenix police that he was being molested repeatedly.” In the end Mr. Jackson concluded, “Illinois officials who’d sent more than 40 children to the Westbridge facility were unaware of the \$25 million dollar lawsuit revealed in federal court records, or of its implications.”

Mr. Jackson contended that many of the tools of reporters are not used by state governments, noting that he was “surprised that skilled investigators did not know the power of public records.” A lot of the basic research that a reporter employs in looking up public records and developing sources “would profit state agencies enormously,” he observed. “If you were able to couple a reporter’s toolbox with a state investigator’s powers and skills,” he concluded wistfully, “you’d have a bionic investigator.”

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# Financial Exploitation and Consumer Fraud

## Workshop 1: Federal and State Initiatives To Educate Consumers

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### Moderator:

Lee Norrgard  
Senior Program Coordinator, Consumer Protection Section  
AARP  
Washington, D.C.

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### Panelists:

Alexis Barbieri  
Executive Deputy Attorney General  
Pennsylvania Attorney General's Office  
Harrisburg, Pennsylvania

Dan Drake  
Executive Assistant U.S. Attorney  
Office of the U.S. Attorney  
for the District of Arizona  
Phoenix, Arizona

Robert Kuykendall  
Federal Trade Commission  
Washington, D.C.

Jeffrey LaGrew  
Assistant Deputy Attorney General  
Kentucky Attorney General's Office  
Frankfort, Kentucky

Lee Norrgard, Senior Program Coordinator of the Consumer Protection Section at AARP, opened the workshop by opining that tracking down, arresting, and prosecuting those who defraud or abuse older persons is important. However, he added, preventing those crimes in the first place—by marshaling public and private resources in a team effort to educate as many consumers as possible about the threats and how to counter them—casts a much wider net and leads to better results overall.

The need for new protection strategies has never been greater. Alexis Barbieri of the Pennsylvania Attorney General's Office reported that in Pennsylvania, for example, 15 percent of the population is older than 65, and nearly 1 million residents there will turn 75 this year. Likewise, Jeff LaGrew of the Kentucky Attorney General's Office noted that in Kentucky, some 600,000 of the state's 4 million residents are older than 60; indeed, about 3,000 are 100 or older, reflecting the fact that centenarians make up the fastest-growing age group in the United States.

But making potential victims aware of elder fraud and abuse is not easy. Among the hurdles:

- Many older persons live independently. These difficult-to-reach individuals are a prime target for telemarketing scams, sweepstakes pitches, and other schemes.
- Many older persons don't believe that those who perpetrate fraud are really criminals.

- Expecting agencies to fight elder fraud and abuse single-handedly is unrealistic.
- Many fraud-awareness efforts, such as forums, typically engage small numbers of older persons, so their impact may be small.
- Many older people don't know about the myriad antifraud services available to them or whom to call when they have been victimized, in part because there is so much overlap among agencies.

States are tackling these and other challenges in different ways. Pennsylvania Attorney General Mike Fisher launched the 90-member Task Force for the Protection of Elder Pennsylvanians in 1998 by convening experts from throughout the state, according to Ms. Barbieri. The task force comprised six regional groups including representatives from law enforcement, consumer-protection, and Medicaid fraud agencies; the legislature; AARP; providers of services to older persons; and other groups.

Each of the six regional groups, in turn, investigated an elder fraud-related topic, such as home-improvement fraud, health care fraud, elder abuse, or telemarketing and sweepstakes scams, by taking public testimony at hearings on that topic. Two years of work culminated in a July 2000 report of findings and recommendations.

Arizona discovered it had much more clout in battling elder fraud if it boosted awareness by rallying law enforcement officials, care providers, elected officials, businesses such as grocery stores, the media, and other parties to join the fight. Authorities there were recovering only about 4 percent of all money lost in telemarketing swindles. "That's a horrible rate," said panelist Dan Drake from the Office of the U.S. Attorney for the District of Arizona, "so we decided we don't need more prosecutions—we need fewer victims."

In the past 2 years, the Arizona Elder Fraud Prevention Team has made or staged more than 60 presentations or events, many targeted to large audiences. One event was a 3-day "reverse telethon" at a public television station; instead of donating money, callers posed questions—a total of about 900—to a bank of experts. Another effort was a newspaper message about elder fraud, sponsored by a local supermarket

chain, that reached about 1 million readers each time it was published.

The fraud-prevention team also worked with the publicity-minded Arizona Cardinals, a professional football team, over a 12-week period to get the word out about telemarketing fraud. The campaign included calling and warning older individuals whose names had appeared on "mooch lists."

The Kentucky Attorney General's Seniors Crime College is a 2.5-hour educational session built around the slogan "Aware, Avoid, Alert." Experts make participants aware of the elder fraud threat, teach them how to avoid being victimized (measures range from door locks to proper lighting and trimmed bushes around a house) and explain who to call when they are suspicious. Each graduate receives a booklet about elder fraud that includes appropriate toll-free telephone numbers. A local, uniformed police officer or sheriff lends a great deal of credibility to these sessions, said Mr. LaGrew.

Noting that "there's no reason to reinvent the wheel," Mr. LaGrew explained that he borrowed many ideas from programs in other states, such as Massachusetts, Florida, and Arizona, when he established the Seniors Crime College 2 years ago. More than 10,000 older persons have attended thus far.

On the national level, Consumer Sentinel, the Federal Trade Commission's (FTC's) antifraud program, mailed out 120 million cards in November 1999 containing helpful fraud-fighting information, including toll-free telephone numbers. The card contents, said FTC's Robert Kuykendall, were based on results from focus groups and national surveys. Kuykendall also maintains a widely accessible database of fraud complaints nationwide.

Elder fraud and abuse may always be fixtures on the crime landscape. But there have been serious efforts in recent years to gauge the nature and extent of these problems and to learn which weapons work best against them. In addition to supporting the proven methods of using team approaches and reaching out to large audiences, panelists noted these recommendations:

- Increase sentences for crimes against older persons.

- Provide more legal protections against certain fraudulent practices, such as home-improvement scams and the unauthorized release of Social Security numbers, dates of birth, financial information, and other personal information that can lead to identity fraud and other illegal practices.
  - Require telemarketers and advertisers to abide by do-not-call and do-not-send lists of names.
  - Require licensing of health care workers to screen out the unscrupulous.
  - Better educate those in the justice system about elder fraud and abuse.
  - Provide more state funds to train caregivers so they are better able to recognize instances of elder abuse and neglect.
  - Obligate financial institutions to report cases of financial exploitation without incurring liability for doing so.
  - Develop a directory of toll-free numbers of organizations that help victims of elder fraud.
  - Give seniors useful, bite-size nuggets of information. Telling them that elder fraud in the U.S. costs \$40 billion a year is less helpful than telling them about the guy down the street who lost \$5,000.
  - Tailor antifraud efforts to local demographics. Avoid national, one-size-fits-all approaches.
  - Don't hold antifraud sessions at senior housing developments, because many older individuals live independently. Malls are a better option.
- “I guess if there was a lesson here,” Mr. Drake said, “it was, ‘Be vigorous in terms of reaching out to partners.’ Get as many partners as possible and think in nontraditional ways [about antifraud strategies]. The people who can help you the most are those you haven't used before.”

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# Financial Exploitation and Consumer Fraud

## Workshop 2: Effective Interventions To Address Consumer Fraud

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### Moderator:

John Firman  
Coordinator for Research Services  
International Association of Chiefs of Police  
Alexandria, Virginia

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### Panelists:

Cynthia Alexis  
Project Coordinator  
Special Emphasis on Elder Abuse  
Office of the District Attorney  
San Francisco, California

Jacqueline Case  
Director, New York City Long-Term Care  
Ombudsman Program  
New York, New York  
(*on behalf of* Faith Fish, New York State  
Long-Term Care Ombudsman, New York State  
Office for the Aging, Albany, New York)

Marta Sotomayor  
President  
National Hispanic Council on Aging  
Washington D.C.

Jim Wright  
Program Director  
Triad and Operation Fraud Stop  
National Sheriffs' Association  
Alexandria, Virginia

John Firman, Coordinator for Research Services at the International Association of Chiefs of Police (IACP), guided the panelists through a discussion of consumer fraud against older people, including various subpopulations. Panelists discussed several programs that might provide models for preventing fraud and successfully intervening when it occurs. These included programs addressing predatory lending in the senior African American community of San Francisco; collaborative efforts of law enforcement agencies and senior organizations in the work of Triad; overcoming cultural barriers to seeking help among Hispanic older immigrants; and the successful efforts of New York City's Long-Term Care Ombudsman Program.

Cynthia Alexis, a Victim Services Representative from the San Francisco District Attorney's Office, discussed effective interventions created by the We Are Family Leadership Group in the African American community. Primarily involved in mortgage, home equity, life insurance, and burial insurance fraud, the We Are Family program also was challenged by other issues of elder abuse such as the "over-extension of seniors as multigenerational caregivers." Racism coupled with literacy problems—"elders were signing documents they did not understand"—further complicated efforts to stem abuse.

To respond to the needs of the community, We Are Family hosted a number of community events in senior centers and health fairs to raise awareness concerning the issues of mortgage and home equity fraud and other crimes committed against the elderly. Focusing on the strengths of the African American community, the program sought out partnerships with churches “as a gateway” into the population.

The program’s underlying philosophy of “intervening early through education,” rather than engaging in “litigation, when it’s far too late” has led to a number of successes. Partnerships include the city’s Public Guardian’s office, the Sheriff’s department, the Department of Adult Protective Services, and the District Attorney’s office. “African American seniors are close-to-the-vest about their finances. For them to even talk about finances is a major accomplishment,” Ms. Alexis said. The We Are Family program provides culturally appropriate educational interventions with a great deal of success. For cases when litigation is necessary, the program, in collaboration with the Bar Association of San Francisco, trained more than 160 attorneys so they could handle mortgage and home equity fraud cases *pro bono*.

Jim Wright, Program Director for Triad and Operation Fraud Stop at the National Sheriff’s Association (NSA) in Alexandria, Virginia, discussed the successful partnership of Triad. It began 12 years ago when IACP, NSA, and AARP—the Triad—came together to identify ways to keep seniors safe from crime. The organization has grown to represent partnerships in communities across the country in 47 states, 750 counties, and 1,600 individual towns and cities. Partnering representatives from sheriff’s, police, and fire departments with public sector agencies such as offices on aging, Adult Protective Services, and social services and older volunteers such as retired teachers, retired federal employees, and members of the faith communities, Triad welcomes “whoever wants to come to the table to participate in keeping seniors safe from crime.”

A fundamental principle of programs developed by Triad members is that programs must be “implemented in the community according to community need.” For example, the Baltimore County Office on Aging, funded by a grant from the U.S. Department of Justice, Office for Victims of Crime (OVC), developed a program titled “Are You O.K.?” in which older

volunteers go to the local police station or sheriff’s office and call other older people, typically shut-ins, and ask “Are you O.K.?” Protocols are established for nonrespondents while opportunities to overcome isolation are offered through direct communication. Other programs developed by Triad partnerships include police visitations, in which police officers and sheriff’s deputies drop by; and “adopt-a-senior” programs, in which volunteers offer to do home repairs and conduct safety inspections. Many Triad organizations send speakers to nursing homes, take older people to health fairs, and connect pharmacologists with older persons to discuss medications, but the “primary focus” of the work of Triad, Mr. Wright affirmed, are “law enforcement issues and crime prevention.”

Citing statistics that “seniors are typically about 5 percent of all crime victims while they represent 13 percent of the population,” Mr. Wright noted “that’s not the case in consumer fraud or financial fraud—it’s probably the reverse. Seniors are far more likely to be victimized.” As a result, Triad has begun to look more closely at how older people are affected by consumer fraud and financial exploitation. Preventive efforts, such as those used by the Baltimore County Office on Aging, employ crime prevention and community policing officers to present lectures to older people about “different kinds of scams, such as home repair scams, deceptive telemarketing tactics, and foreign lotteries.”

Working with AARP, Triad has produced a “Stop Fraud” kit available for distribution to senior centers, health fairs, and law enforcement agencies. With funding from OVC, the Triad produced a three-part videotape in an effort to educate law enforcement personnel about crimes related to seniors. The videotape, to be viewed during police and sheriff departmental “roll calls,” is designed to be shown over a 3-day period. The videotape is based on the idea that most first responders to crimes against older persons are young male and female law enforcement personnel, mostly men and women in their 20s and 30s, who “don’t know a lot about seniors.” Mr. Wright observed, “We think the roll call videotape will be an effective intervention if it brings young officers up one notch in terms of what they know about consumer fraud, particularly fraud affecting the senior community.” Where crime prevention fails, Triad has developed a “court watch program” that helps older crime victims get through the court process.

Marta Sotomayor's work with the older Hispanic immigrant population is often times dictated by cultural norms. Dr. Sotomayor, President of the National Hispanic Council on Aging, a membership-based organization with chapters and affiliates throughout the country, advocates for older Hispanic immigrants through numerous programs dedicated to capacity building, skills development, technical assistance, demonstration projects, policy analysis, and the development of educational materials and research. She notes that older Hispanic immigrants are most vulnerable to fraud for a number of reasons: "An innate mistrust of government, limited English proficiency, difficulty in understanding and navigating government agencies and systems, and perceived and real anti-immigrant sentiment that prevents contact with police agencies."

A Council project focused on telemarketing fraud is in its third year of funding through OVC. The project educates older Hispanics so "they can defend themselves." Two issues have been special challenges. First, Dr. Sotomayor noted, the size of and cultural differences among the Hispanic and Latino populations makes these populations "very difficult to work with because it requires many areas of intervention." As diverse as Spanish-speaking populations are, so too are the problems that need to be solved. Second, she noted, telemarketing fraud often is eclipsed by other crimes and is not taken as seriously by law enforcement agencies serving Hispanic and Latino neighborhoods in some areas where "violent crime rates and drug use are very high."

Dr. Sotomayor's approach to overcoming these problems has been to build coalitions and establish strong partnerships in the communities. She cites the development of a Spanish language brochure on consumer fraud, paid for and distributed by Radio Shack, and the production of a Spanish language videotape, produced with funds from an OVC grant, as examples of successful collaborations. "An effective method of reaching this population," she concludes, "results from integrating, interfacing, or 'piggybacking' fraud issues with other projects designed to reach Spanish-speaking populations—such as diabetes awareness campaigns coupled with the issue of provider Medicaid/Medicare fraud."

The New York City Long-Term Care Ombudsman Program (LTCOP) is a federally mandated advocacy program created to protect the rights and improve the quality of life of residents in nursing homes, homes for adults, and board and care facilities, said Director Jacqueline Case. Her program oversees approximately 55,000 beds with a staff of 5 and an "army of senior volunteers." Although the LTCOP does not have citation powers, it does have "the right to access," Ms. Case noted, "which is critically important." Every facility in New York City must accept an LTCOP representative at least "once a week," she observes. With this "special right of access," trained volunteers, usually older people themselves, work with residents to "address concerns, advocate, and try to get what the resident wants or needs."

Another feature of Ms. Case's program, Operation Restore Trust, focuses on the issue of fraud in the supply and quality of durable medical equipment, such as "electric wheelchairs that constantly break-down," which is viewed as "a fraudulent practice." Operation Restore Trust, a program established by the Administration on Aging, recaptured over \$25 million dollars from providers for the provision of fraudulent durable medical equipment in New York State alone.

Ms. Case acknowledged that a large part of the program is getting people to see that "abuse and neglect in nursing homes is not just the prosecutable portion," such as physical abuse, "but it is also the lack of quality care or the lack of attention." She reported that more than 40 percent of LTCOP-generated complaints are resident care complaints. "Providers are getting a tremendous amount of money for the provision of service," she noted. "There's no reason why I should be getting complaints that 'my mom's diaper is changed once a shift.'" Ombudsmen provide an invaluable service, Ms. Case opined.

Concluding the workshop, John Firman noted four themes that emerged from the session: the importance of information-sharing and education, the use of partnerships, the use of technology, and the importance of volunteers.

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# Financial Exploitation and Consumer Fraud

## Workshop 3: Innovative Approaches to Financial Exploitation

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### Moderator:

Patrick Donely  
Senior Litigation Counsel,  
Criminal Division-Fraud Section  
U.S. Department of Justice  
Washington, D.C.

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### Panelists:

Chayo Reyes  
Law Enforcement Officer (Retired)  
Proprietor, Elder Financial Protective Services  
Cerritos, California  
*(on behalf of Susan Aziz, WISE Senior Services,  
Santa Monica, California)*

Aileen Kaye  
Program Coordinator, Abuse Prevention Unit  
Senior and Disabled Services Division  
Salem, Oregon

Kathleen Quinn  
Chief, Bureau of Elder Rights  
Illinois Department on Aging  
Springfield, Illinois

LaVerne Wyaco  
Director  
Navajo Area Agency on Aging  
Window Rock, Arizona

In order to address and prevent the financial exploitation of the older population, a coordinated response from many different public and private entities must be implemented. Moderator Patrick Donely, Senior Litigation Counsel of the DOJ Criminal Division-Fraud Section, led panelists through a description of specific programs established to counter such abuse in four communities. Each presenter highlighted the importance of networking and information sharing in ensuring a program's success.

The Los Angeles County Fiduciary Abuse Specialist Team (FAST) is a public/private partnership composed of law enforcement, medical, and financial services personnel, which proactively prevents and investigates cases of elder financial exploitation. In describing the team, Cesario "Chayo" Reyes emphasized the importance of working through the hurdles imposed by the many bureaucracies involved in support of the older victim. FAST works closely with bank personnel to gather information and secure assets of older persons at risk of exploitation. Mental health specialists train team members to administer assessments in order to determine if an older person is under undue influence or has diminished capacity. Law enforcement personnel on the team educate bank employees about their legal rights and liability in disclosing information to investigators in cases of suspected exploitation. Ultimately, by working through the bureaucracy, FAST makes it less likely that an older person will be financially exploited and, therefore, become dependent upon the government or family for survival.

Aileen Kaye, Abuse Prevention Program Coordinator of the Oregon Senior and Disabled Services Division, described an initiative by her agency to combat elder financial exploitation. The state attorney general formed a task force in 1994 to identify the major issues relating to elder abuse and neglect. The task force identified financial exploitation and focused on the crucial role that banks play in prevention. In many cases, the banks were reluctant to report suspected exploitation, the task force discovered, because they were unclear about their rights and liability regarding disclosure of confidential information. Despite the fact that Oregon law allows banks to report such information, they requested, and the legislature added, a provision granting banks immunity in such instances.

Additionally, the task force identified training of bank personnel as a key issue. Working with the Oregon Bankers Association, AARP, the state department of justice, and local agencies serving older people, with funding from OVC, a training program with materials was developed to educate bank personnel of the importance of and avenues for reporting suspicious activity. Ms. Kaye emphasized the crucial role that state banking associations play in reaching many institutions across the state and highlighting the importance of this issue. A pilot program in eight counties recently has been initiated as well, whereby retired financial experts are trained to investigate and gather evidence in cases of suspected elder financial exploitation. These experts assist local prosecutors by gathering all of the information needed to try a case. The program has already resulted in one indictment.

A similar task force was established in Illinois recently. According to Kathleen Quinn, Chief of the Bureau of Elder Rights for the Illinois Department on Aging, more than half of the reports of elder abuse that her agency receives involve financial exploitation. This exploitation often is tied to other abuse; securing the older person's money is, in many instances, a motivating factor for other physical or mental abuse.

Task force members were selected from state aging organizations, the Illinois Bar Association, the banking community, and major state agencies such

as the attorney general and police and prosecutors to ensure a broad-based group with influence and the power to implement the task force's recommendations. The first task was to educate these members on the issues relating to elder financial exploitation, and the efforts that already were underway. Although the task force has not yet completed its work, Ms. Quinn did discuss some of the possible recommendations. These include securing permanent funding to institutionalize a pilot program whereby state police lead investigations into elder financial exploitation. State police are equipped to handle these cases, which are often time consuming and span many jurisdictions. The task force also is considering recommending funding to support multidisciplinary teams to work on this problem, as well as more public education and training.

In tribal communities, there are unique circumstances that must be considered in attempting to establish elder abuse and neglect prevention programs. LaVerne Wyaco, Director of the Navajo Area Agency on Aging, cited the tribal council bureaucracy as the chief obstacle facing her tribe. Additionally, the Navajo Nation spans three states, creating additional jurisdictional hurdles. In 1996, the Elder Protection Act was passed but there was no funding attached. Under this Act, the Navajo Elder Protection Program was established to assist older people with abuse, neglect and mental health issues. The program was able to secure some funding over the past 2 years, which allowed it to develop a marketing poster and provide services. The program focuses on elder rights and providing legal, health insurance, and benefits assistance. In addition, a Long-Term Care Ombudsman Program position recently was filled to coordinate the filing of nursing home complaints with the states. In collaboration with AARP, Indian Health Services, and Social Security offices, an outreach counseling component also has been added to assist older tribe members with entitlement issues. Despite the lack of funding and the bureaucratic hurdles, Ms. Wyaco stressed that the program continues to work to ensure that older Navajos receive all the necessary protections and services.

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# Financial Exploitation and Consumer Fraud

## Workshop 4: Enhancing Prosecution of Financial Exploitation

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### Moderator:

Newman Flanagan  
Executive Director  
National District Attorneys Association  
Alexandria, Virginia

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### Panelists:

The Hon. Jane Brady  
Attorney General  
State of Delaware  
Wilmington, Delaware

Judith Kozlowski  
Assistant U.S. Attorney  
Office of the U.S. Attorney for the  
District of Columbia  
Washington, D.C.

Chayo Reyes  
Law Enforcement Officer (Retired)  
Proprietor, Elder Financial Protective Services  
Cerritos, California

Audry Rohn  
Deputy District Attorney  
Ventura County District Attorney's Office  
Ventura, California

Moderator Newman Flanagan, Executive Director of the National District Attorneys Association, recalled that the crime of elder abuse was not even on his radar screen until 1982 when, as head of a national task force, he held public hearings around the country that prompted a “rude awakening.” More recently, prosecutors are finding new ways to pursue successfully those who financially exploit the elderly. In some areas of the country, their more aggressive and creative efforts, together with greater awareness of the problem, tougher state laws, and multidisciplinary teams, are increasing the number of prosecutions and convictions.

Jane Brady, Attorney General of Delaware, got a glimpse of the financial exploitation threat more than 25 years ago after her grandfather died. Her grandmother was victimized by gypsies who put “black goop” on her roof, then wrote a check for the grandmother to sign.

At the beginning of her tenure 6 years ago, Attorney General Brady, learned that nursing home residents, at least in her state, have far more access to abuse services than other older persons do. She, like other panelists, also discovered that police shied away from instances of financial exploitation, viewing such cases as strictly civil matters. These findings prompted Attorney General Brady to hire a retired police officer to review current laws and suggest changes. Among other tasks, this person also makes law enforcement officers aware of their legal responsibilities—and duty to help victims—in financial exploitation cases. On another front, the Securities Division in her office helps prosecutors follow complex paper trails.

The Attorney General's office also:

- Trains police and nursing home employees how to spot and report financial abuse.
- Trains bank tellers to detect signs of financial exploitation.
- Encourages banks and credit card companies to adopt electronic systems that automatically monitor accounts for unusual activities. (The nation's largest credit card issuers are based in Delaware.)
- Trains older persons as peer advocates to guide abuse victims through the legal and medical services maze. These advocates remind victims about appointments, accompany them to court, arrange transportation, and even participate in initial interviews by police.

In addition, Attorney General Brady's office was instrumental in winning passage of the Delaware Home Solicitation Sales Act. This law regulates door-to-door sales organizations, which often victimize older persons. A pending bill, the result of 3 years of work with AARP and legitimate telemarketers such as banks and telephone companies, would require that telemarketers be registered and bonded.

The Ventura County (California) District Attorney's Office also had made great strides in combating elder abuse. In 1994, when Deputy District Attorney Audrey Rohn was assigned to focus on identifying, prosecuting, and preventing elder abuse (the first attorney there to do so), she handled two elder abuse cases; this year, she will prosecute about 150 cases.

In addition to persuading state lawmakers to crack down on exploiters, Ms. Rohn worked with a "plethora of players"—multidisciplinary teams of prosecutors, law enforcement officers, Adult Protective Services, legal aid societies and others—who, working together, could bring far more resources to bear on helping victims than any single player could. Building bridges was not easy at the outset. When the District Attorney's (DA's) Office began attending multidisciplinary team meetings and seeking cases to prosecute, it faced questions like, "Where have you been for the last 10 or 15 years? Why should we trust you?" It had to win the trust of law enforcement and

APS personnel, which are often the first agencies to respond to elder abuse. The DA's office also reached out to fire departments and emergency room doctors and nurses, who started referring cases too.

The Ventura County DA learned that with waivers from older persons or with the help of guardians or conservators, it could freeze victims' assets and "stop the bleeding" when there were signs of foul play. One new weapon is a protocol, developed with input from police, which spells out for all players the best ways to investigate and prosecute financial crimes. Ms. Rohn noted that police must learn not to dismiss older persons as confused when investigating cases, because such behavior may signal a swindle. The DA's office now routinely seeks speedy trials in elder abuse cases to help ensure that older victims will be able to testify. It also videotapes victims' testimony to ensure the durability of the evidence. Beginning in 2001, Ms. Rohn said, new laws will allow prosecutors to present powerful evidence in court showing that defendants previously have committed acts of elder abuse—financial, physical, sexual, or emotional.

In order to get a case into federal court, Judith Kozlowski, an assistant U.S. attorney who heads the Economic Crimes Section of the Office of the U.S. Attorney for the District of Columbia, said she hunts down "a mailing, a phone call, anything" that will serve as solid evidence and perhaps lead to forfeiture of exploiters' assets. She also consistently pursues money-laundering charges, because in all financial exploitation cases perpetrators must move money out of victims' accounts and into another account, "and I charge that as fast as I can."

Ms. Kozlowski agreed that search and seizure warrants work well because they stop money from flowing out of victims' accounts. She also has been able to reverse the transfers of house deeds and to track down notaries who have colluded in financial exploitation. In plea bargains, she may settle for less jail time in exchange for significant restitution, such as the return of a house or land.

A new financial-abuse consulting team in the District of Columbia comprises about 30 specialists from a broad spectrum of society—bankers, doctors, real estate experts, ethicists, and experts in estate law, among others. From their ranks, Ms. Kozlowski can quickly assemble a response team to speak with a

victim, find out what really happened, and take action. In one instance, a retired judge told her about possible exploitation by a disbarred lawyer. Within 3 days, Ms. Kozlowski had assembled a team (herself, a police detective, an APS worker, and another investigator to scope out other possible victims), had tracked down the suspect and was ready to prosecute.

Bank and credit-union staff must “grow a spine” when it comes time to freeze a victim’s bank account, said panelist Chayo Reyes, owner of Elder Financial Protective Services in Cerritos, California. A retired Los Angeles police detective, Reyes is co-author of a state law that authorizes law enforcement officers and APS to secure and protect the assets of older persons or dependent adults during an investigation.

Bankers typically demand to see a subpoena, search warrant, or court order barring them from releasing a victim’s funds, yet time and again Mr. Reyes has been able to convince bankers, without presenting such papers, to halt withdrawals by contacting the bank’s chief lawyer. The lawyer provides information, sometimes in the form of a declaration signed under penalty of perjury, to the effect that the depositor/victim and bank appear to be at risk and that there is probable cause to suspect a crime is being committed. Mr. Reyes explains to the bank that under the circumstances it could be held liable if it allowed the money to be withdrawn. Using this tactic, his former agency has secured more than \$91 million of victims’ assets in California since 1987.

Financial exploitation of older persons can be prevented if bank staff and others are on the same page as those who fight abuse, including public guardians, APS, ombudsmen, and police. There is always a pattern in the way both victims and suspects manage their money. Bank employees can spot a departure from that pattern, and coordination among players alerts everyone to potential fraud.

Panelists agreed that education and outreach play a key role in curbing exploitation. One common obstacle is the long-held belief on the part of law enforcement officers that such exploitation is a civil, rather than criminal, matter. Nevertheless, panelists noted that successful prosecutors are now:

- Freezing victims’ bank accounts quickly, with or without warrants for search or seizure, to “stop the bleeding.”
- Training police and medical and social workers to be on the alert for signs of abuse and to work with prosecutors in building legal cases.
- Collaborating with bank staff to detect and halt suspicious account activities.
- Promoting legislation to regulate telemarketing.
- Seeking restitution and forfeiture of assets in federal court.
- Charging perpetrators with money laundering.

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# Financial Exploitation and Consumer Fraud

## Workshop 5: Combating Consumer Fraud Through Litigation

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### Moderator:

The Hon. William Sorrell  
Attorney General  
State of Vermont  
Montpelier, Vermont

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### Panelists:

Jackie DeGenova  
Assistant Chief, Consumer Protection Section  
Ohio Attorney General's Office  
Columbus, Ohio

Deborah Zuckerman  
Senior Attorney, Consumer Protection Unit  
AARP  
Washington, D.C.

David Kirkman  
Assistant Attorney General  
North Carolina Attorney General's Office  
Raleigh, North Carolina

Vermont Attorney General William Sorrell moderated the panel, which featured litigation efforts to fight consumer fraud. Scamming older persons has a long and storied history, and finding and punishing the perpetrators can be difficult. Scam artists often work in collaboration with each other and agencies that work in isolation against them face an uphill battle.

A large part of the answer to bringing these criminals to justice is working with other agencies—both private and public. “There is no need to reinvent the wheel. There is experience out there; there is case law out there,” said Jackie DeGenova, Assistant Chief in the Consumer Protection Section of the Ohio Attorney General's Office.

Many states have formed initiatives such as North Carolina's Senior Consumer Fraud Task Force to bring together diverse agencies. In addition to traditional law enforcement, agencies that can be enlisted include Adult Protective Services, social services, AARP, departments on aging, U.S. Customs, the U.S. Post Office and Federal Express, Western Union, and bankers' associations.

David Kirkman, Assistant Attorney General in North Carolina, said the genesis of his state's task force was a highly organized group of “Travelers” based in North Carolina who worked the Southeast in an ongoing home repair scam against the elderly. He said the scammers work on those with cognitive problems or those in the early stages of Alzheimer's.

The scam ring would meet on Mondays and fan out across the southeast, victimizing older homeowners with inferior, bogus, or sometimes nonexistent home repairs. Others from the group would go back later and victimize the same individuals. Some homeowners lost more than \$100,000. “This was way too big. We needed to get together with other people,” Mr. Kirkman said.

He formed a task force of 36 agencies which met every month in Raleigh. It started with a list of 12 suspects and ended up with 152. The task force learned the techniques, tracked scammers on computers, and learned which homeowners had been cheated. Even with this evidence, though, the victims were reluctant to testify. Eventually, the son of one of the ring’s kingpins was arrested on drug charges and, facing prison for the rest of his life, began to incriminate others in the fraud scheme. “That brought the whole house of cards down,” Mr. Kirkman said.

But many of the con artists just moved on, a common problem, according to Ms. DeGenova. “Don’t be surprised if they come to your state next,” she said. Ohio formed its own Senior Protection Initiative Task Force to make the same kind of collaborative effort as North Carolina. The task force members concluded that because legal action needed to come from county prosecutors, it was essential to work closely with them, avoid turf battles, do training with judges and prosecutors, attend judicial conferences, and educate the bar and the judges on the issues of elder fraud.

Getting cooperation from a county prosecutor still can be difficult because the prosecutors are more accustomed to dealing with street crime. They are not used to litigating complex cases involving a great deal of paperwork, cases that often are time-consuming and difficult.

One often-successful tactic cited by Ms. DeGenova is to go to local senior citizens centers or AARP and

recruit older people to pack courtrooms in elderly fraud cases. “You’d better believe that judge is going to take notice,” said Ms. DeGenova. She added that she was not bothered by ethical questions of trying to influence the judicial process by bringing in the older people. “It’s either that or see another 25 seniors victimized. Use the influence wherever you can. It’s a collaborative effort,” she said.

According to Deborah Zuckerman, a Senior Attorney in the Consumer Protection Unit of AARP’s Washington, D.C., headquarters, AARP is involved in those collaborative efforts in every state. AARP’s primary role is filing amicus briefs at the appellate level. Consumer fraud and protection cases such as vehicle title pawn, payday loan, home repair, predatory lending, and privacy issues are typical. Two such cases recently were brought by the attorney general’s office in West Virginia against a large sweepstakes promoter. Another involved protecting older consumers in a pre-need funeral home bankruptcy.

The range of issues AARP takes up is broad but it does not involve itself in guardianship and conservatorship issues. Typically AARP is approached by either a private attorney or a state or county office. Many attorneys general have a standing relationship with AARP in consumer education and phone banking, but not in litigation.

Occasionally AARP will serve as a plaintiff instead of just filing an amicus brief. Getting AARP authorization through its internal review process can be difficult. “It’s a cumbersome process,” Ms. Zuckerman said.

AARP primarily looks for cases that have the potential to have a broad impact such as victimization by a national company, or a pattern or practice likely to affect a large number of people or a particular industry. “The plaintiffs don’t have to be 50 or older, but that certainly helps,” Ms. Zuckerman said.

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# Plenary III

## Elder Abuse and Neglect at Home

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### Moderator:

Kathryn Turman  
Director  
Office for Victims of Crime  
U.S. Department of Justice  
Washington, D.C.

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### Panelists:

Sara Aravanis  
Director  
National Center on Elder Abuse  
Washington, D.C.

Bonnie Brandl  
Program Director, National Clearinghouse  
on Abuse in Later Life  
Wisconsin Coalition Against Domestic Violence  
Madison, Wisconsin

Eva Kutas  
President  
National Association of Adult Protective  
Service Administrators  
Salem, Oregon

Holly Ramsey-Klawnsnik  
Sociologist/Social Worker/Marriage and Family  
Therapist  
Klawnsnik & Klawnsnik Associates  
Canton, Massachusetts

Joyce Speakman  
Oakland, California

Moderator Kathryn Turman, Director of the Office for Victims of Crime, opened the session by noting that older persons were identified by her office as an underserved group of victims several years ago, and said there has been subsequent development of new programs. The issue now is to facilitate cooperation among these programs and ensure that the varied needs of victims of elder abuse are being met. “As critical as it is to identify and coordinate law enforcement and prosecutorial resources around the victimization of the elderly,” she said, “appropriate systems must be in place to assist these vulnerable victims who may have complex problems and need multiple services. It requires creativity and coordination to meet their needs and move them on to a safe place.”

Despite the fact that elder abuse and neglect in the home is an increasing phenomenon, only about one in five incidents gets reported and efforts to identify and address situations of abuse are often ill informed, disjointed, lacking in resources, and ineffective. This is partly due to the complexity of the issue; elder abuse in the home is often carried out by family members, which not only inverts societal expectations of familial care but also makes it difficult for investigators to detect and determine the extent of the abuse. Long-term patterns of domestic abuse make it less likely that an older person will seek help, the isolation of the victim is more easily enforced by the abuser when the older person lives at home, and consideration of civil liberties makes the job of

the investigator who suspects elder abuse in the home an extremely difficult one.

Until recently there has been minimal funding directed toward educating professionals and the public on the issue of elder abuse in the home, and laws concerning the rights of the abused and prosecution of the abuser vary considerably from state to state. Numerous agencies and individuals who work with older persons are attempting to rectify this situation, and panelists presented different ways of understanding, responding to, and addressing the problem.

Joyce Speakman's personal experience highlighted the importance of the issue and the suffering that can be caused by elder abuse by family members. Ms. Speakman said that her mother, Hazel Speakman, who died in August 1998 at the age of 78, endured years of physical and emotional abuse and neglect in her own home at the hands of her youngest adult daughter, Joyce's sister. Five years before her mother's death, Ms. Speakman knew nothing about elder abuse and thought her suspicions were disloyal to the family, but she eventually contacted the county's Adult Protective Services agency. She found the agency representatives to be committed, compassionate, and eager to get at the truth, but each labored under the same limitations: her sister prohibited APS workers from interviewing her mother and thus they concluded that no determination of elder abuse could be made.

In her quest to discover the extent of her mother's abuse, Ms. Speakman involved numerous other agencies and individuals, including a nonprofit case worker who was sympathetic but inexperienced, a church pastor who was conciliatory but ineffectual, and the local mental health system which attempted to address, though only temporarily, her sister's mental health disorders. No one suggested involving the police, and when Ms. Speakman contacted them after her mother's death, they reported they would not investigate the prior circumstances of a dead victim. Medical records obtained after her death revealed that, among other things, Hazel Speakman had suffered 12 serious falls and numerous broken ribs.

Though Ms. Speakman realizes that her sister's efforts to isolate her mother made the APS agency's original investigation difficult, she was disillusioned by their conclusions and believes a more indepth

understanding of the dynamics of elder abuse and risk factors for potential abusers would have been helpful. "The laws on elder abuse need to be strengthened," she said, "so that the suspected abuser is unable to prevent an investigation of abuse, and so that service providers, attorneys, and police can work together to find solutions to stop this kind of abuse."

It is the legal obligation of the APS agency to respond to reports of abuse, neglect, and exploitation of vulnerable adults, including older persons, noted Eva Kutas, President of the National Association of Adult Protective Service Administrators (NAAPSA). The agency provides the system that receives reports of elder and adult abuse, investigates complaints, and attempts to ameliorate abuse. It operates under a mandate to protect safety, health, and civil liberties, and the social services it provides can include linkage with law enforcement, and legal, medical, transportation, housing, and psychiatric services.

APS caseworkers must make critical, life-changing decisions in complex situations, which can include matters of financial concern, legal issues, mental health concerns, issues regarding physical and sexual assault, and a wide variety of family situations. Consequently, agency administrators attempt to develop multidisciplinary teams that bring together representatives from the mental health system, law enforcement, victim services, domestic violence, and others.

NAAPSA recently conducted a survey of state APS programs and gathered data for 1999. Preliminary analysis of the survey data indicated that APS agencies in 48 jurisdictions, including the District of Columbia and Guam, had received 443,000 complaints of abuse, neglect, and exploitation, and that a majority of these incidents had occurred in the victim's home. As research indicates that one of every five cases of elder abuse is reported, there may be millions of older people who are abused, neglected, or exploited. Despite this overwhelming need, APS is resource-poor, funded primarily by state and local dollars. Ms. Kutas noted that the only federal funding available for elder abuse services continues to be directed solely at prevention, and has remained stable at \$4 million to \$5 million per year. In comparison, she said, NAAPSA has determined that domestic violence services receive approximately \$200 million in federal funding, and those addressing problems of child abuse receive about \$4 billion.

APS systems differ significantly from state to state but as Ms. Kutas pointed out, there is no federal elder abuse statute. She challenged conference attendees to investigate their state's laws as well as the resources available for identifying and combating elder abuse.

Bonnie Brandl, Program Director of the National Clearinghouse on Abuse in Later Life, Wisconsin Coalition Against Domestic Violence, discussed elder abuse in the context of domestic violence. While many people find the actions of those who abuse older persons to be incomprehensible, it is important to understand that both abusers and those who seek to intervene on the behalf of the abused operate within particular belief systems. Ms. Brandl argued that in order to understand what type of tactics abusers use and how victims are affected by abuse, belief systems on both sides of the problem must be examined.

She noted that family members who abuse other family members believe they are entitled to use whatever tactic they want to dominate or punish their victims, including physical abuse, sexual abuse, financial exploitation, isolation from other family members, the withholding of medication, the abuse of beloved pets, the ridiculing of spiritual beliefs, and a range of other behaviors and threats. Some of the belief systems subscribed to by abuse prevention and treatment professionals are more complex. They include the following theories about elder abuse:

- It is a problem of caregiver stress, and should involve social services rather than law enforcement.
- What happens within the family is a private matter, and law enforcement should make every attempt to fix the situation without making arrests.
- Some abusive situations are not particularly dangerous, and law enforcement officers should be discouraged from bringing abusers who might be older or disabled into a system that has no place for them.
- Most elder abuse victims will not access services anyway, so money and effort spent supplying them is wasted.

These belief systems do not consider the victim's safety to be of paramount importance. As a result,

victims are caught between their abuser and a community that does not want to think of this as an issue of power and control, or is not looking to make an arrest, or is not developing services for the abused. It is necessary to understand what barriers the victims face when the system fails them, said Ms. Brandl, and to use victim input to inform what types of programs are developed. "A lot of us measure success by whether we close cases or get funding or start a new program," she said, "but I would encourage you to measure success based on whether victims are safer as a result of the intervention options you create in your state."

Dr. Holly Ramsey-Klawnsnik, a social worker and family therapist, noted that one form of elder abuse often overlooked or ignored is sexual abuse, as there is a prevailing myth that elders and sex do not go together. She warned, however, "we've unfortunately had to get used to the idea that sometimes parents molest their children, and we also have to get used to the idea that sometimes adult children molest their elders. It is a difficult but necessary piece of information to swallow."

Elder sexual abuse occurs when a senior is forced, manipulated, or coerced into unwanted sexual activity, or when a senior lacks the capacity to grant informed consent to sexual activity. Dr. Ramsey-Klawnsnik discussed a number of substantiated cases of sexual assault of elderly victims perpetrated by paid or volunteer caregivers, family members, or spouses. Her cases illustrated that while the majority of identified victims are female, disabled males also are vulnerable. Most identified perpetrators are male; however, some cases have involved female perpetrators.

Several factors are correlated with the impact of sexual abuse on victims. These include the victim's pre-abuse level of function, and the type of abuse sustained ("hands-off" offense such as sexual harassment, "hands-on" offense such as rape or molestation, or harmful genital practices such as a caregiver unnecessarily performing invasive cleansing procedures). Victim impact also is related to the extent of abuse suffered (single versus recurrent episodes), and whether or not appropriate interventions are offered to assist the victim.

Professional and community response to elder sexual abuse often is denial or minimization. It is an

abhorrent issue to contemplate and discuss, and therefore it is easy to dismiss indicators and deny the existence of this type of victimization. Those involved with older persons need to realize that if signs and symptoms exist in an older person that would suggest sexual assault in an 8-, 20-, or 40-year-old, the matter should be investigated.

Sara Aravanis, Director of the National Center on Elder Abuse (NCEA), opined that identifying and addressing all types of elder abuse requires the involvement of more than just family members and caregivers. She theorized that older persons should be seen to be at the center of a number of different circles. Abuse prevention and treatment professionals make up the outer circle, with the ability to assess a client for social, mental health, and medical needs, determine whether abuse is occurring, offer solutions, and bring the force of the law to bear on criminal situations. These professionals rely, however, on the information they receive from people who are close

to the everyday life of older people, and who thus make up the inner circles around the older person at the center. The National Center on Elder Abuse calls these inner circle members “sentinels.” They can include home-delivered meal providers, senior center daycare workers, respite providers, long-term care ombudsmen, housing managers, health care professionals, pharmacists, pre-hospital service providers such as paramedics and ambulance drivers, and even utility and postal service workers.

Educating and engaging these sentinels is a vital part of the effort to help victims of elder abuse, Ms. Aravanis said. NCEA recently granted funds to five entities throughout the country to help create models on what is needed to educate sentinels on abuse identification and involve them in addressing the problem. “I’m convinced,” said Ms. Aravanis, “that if we learn how to work effectively with these sentinels, they will eventually link these cases of elder abuse with the helping system, one by one.”

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# Elder Abuse and Neglect at Home

## Workshop 1: Strengthening Interventions for Victims With Dementia

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### Moderator:

Nancy Coleman  
Director, Commission on Legal Problems of the Elderly  
American Bar Association  
Washington, D.C.

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### Panelists:

Georgia Anetzberger  
Associate Director for Community Services  
The Benjamin Rose Institute  
Cleveland Heights, Ohio

Frederick Brand  
Director of Program Services  
Alzheimer's Association, Greater  
New Jersey Chapter  
Denville, New Jersey

Anne Mastro  
Nurse Practice Manager  
Geriatric Evaluation and Management Service  
Kimball Medical Center  
Lakewood, New Jersey

Nancy Coleman, Director of the American Bar Association Commission on Legal Problems of the Elderly, began the session with a comment: “At lunch, someone asked, ‘Isn’t elder abuse like child abuse?’ I said, ‘Absolutely not,’ because most of us who are growing old have capacity, and we exercise capacity.”

To help adults with dementia, each person who has contact with them needs to take account of factors that are outside their normal field of expertise. They must respect each individual’s ability to make his or her own decisions, yet find ways to help these adults when their judgment fails. At the same time, dementia is a risk factor for elder abuse; caregivers of people with dementia are more likely than other caregivers to be physically or psychologically abusive to their care recipients, and dementia contributes to older adults’ self-neglect.

“A Model Intervention for Elder Abuse and Dementia” was a 2-year program in Ohio addressing the lack of communication between Adult Protective Services and local Alzheimer’s Associations. “What we found in greater Cleveland is, even though there is correlation between elder abuse and dementia, the systems dealing with these problems don’t come together,” said Georgia Anetzberger, Associate Director for Community Services at the Benjamin Rose Institute. During the 10 years prior to the start of the project, the local Alzheimer’s Association referred fewer than 10 cases to APS, and APS referred a similarly small number of cases to the Alzheimer’s Association—despite the fact that APS gets 2,000 reports of elder abuse each month and the Alzheimer’s Association sees between 300 and 500 caregivers in the same time period.

This lack of communication was due to many factors. The two systems distrusted each other and shared a feeling that “If I make a report, I’m going to lose this case” to the other agency. Staff in one system did not understand the strengths—or limitations—of the other system. Workers did not even understand *how* to make reports or referrals to the other organization if they wanted to, or what would happen if they did make a report, Ms. Anetzberger said.

With \$130,000 in funding from the Cleveland Foundation, The Benjamin Rose Institute collaborated with several other organizations to improve service delivery to people with dementia who were experiencing elder abuse or were at risk for elder abuse. The project had three main goals: to remove service barriers, to increase knowledge and skills, and to increase referrals and reports.

The project involved local Alzheimer’s Associations, APS, the local elder abuse network, and the Northeast Ohio University College of Medicine, which had experience in developing curriculums. Together, this consortium produced two major products. The first was a 156-page education curriculum for providing cross-training to APS workers and Alzheimer’s Association staff and volunteers. The curriculum had three modules: the first, concerning dementia and dementia care, was intended for APS workers; the second, on elder abuse and protective interventions, was intended for the Alzheimer’s Association staff; and the third module concentrated on bringing systems together to work cooperatively, and contained many case exercises, considerations of legal and ethical issues, and ways to collaborate. The curriculum includes faculty guides, participant workbooks, and interactive exercises. It also distinguished between the legal definition of competency under state guardianship laws and capacity under the state protective services law. A “gray-zone grid” helped readers see what abilities and deficits meet these definitions.

The second product was a set of screening tools and a referral protocol for use in elder abuse and dementia cases. As before, the dementia screening tools were intended for APS workers, while the abuse screening tools were meant for Alzheimer’s Association staff. These tools were “embedded” in the educational curriculum as well. The referral protocols

informed both groups whom to ask for assistance in areas outside their area of expertise, and what assistance would be provided. “The referral protocol also provides feedback loops, which is extremely important,” said Ms. Anetzberger.

The project also developed a handbook for caregivers of people with dementia. This 10-page guide contains advice on care and three self-test scales, so that caregivers can assess their own risks of stress, becoming overburdened, and elder abuse. If the caregivers identify these problems within themselves, the guide tells them where to turn for assistance.

When the project was evaluated, training participants had improved their knowledge and skills and had an increased understanding of the other agency’s problems and strengths. In the first year after the training, there were more reports and referrals made between the agencies than in the previous 10 years. The Alzheimer’s Association made 27 referrals to APS, 15 of which were substantiated as cases of abuse, and it made 18 referrals of potentially abusive situations to The Benjamin Rose Institute, 17 of which were accepted for service intervention. APS also began case collaboration with the Alzheimer’s Association in many instances in which adult abuse victims were found to have dementia.

The curriculum is currently used throughout the state, and has been used in Florida, Alaska, and other states.

The Lakewood, New Jersey, Safe Outreach for Seniors (SOS) program had a less formal beginning, said Anne Mastro, Nurse Practice Manager of the Kimball Medical Center Geriatric Evaluation and Management Service (GEMS). The SOS program trains police to identify older adults who may be suffering from the early stages of dementia. The program is run by Ms. Mastro, with no additional training materials or support. “It’s something I do in between other duties,” said Ms. Mastro.

The program was begun in Ocean County, New Jersey, where 130,000 residents are over the age of 65, approximately 27 percent of the county’s population. In the wake of the driving death of an elderly woman who had been scheduled to be evaluated for dementia, Ms. Mastro talked with local police about their encounters with this woman. “I asked the police

officers, ‘Did you know the woman who was killed?’ And they said, ‘Oh yes, oh yes. We’ve been to her house several times,’ ” said Ms. Mastro. The woman insisted that someone was trying to enter her house and would call the police department frequently to check on nonexistent prowlers—yet the police had never checked to see if this woman was still driving. Ms. Mastro’s subsequent conversations with local police revealed that there were several local residents who made frequent 911 calls. “The officers said, ‘They call us because there’s someone in the attic, and they don’t even have an attic,’ ” said Ms. Mastro. Police did not know how to respond to these calls.

The SOS program began as a way to train police to identify dementia in older persons who had motor vehicle accidents. The program has expanded to include cases of frequent 911 calls, multiple driving infractions, and older persons who are lost, or simply wandering at the side of the road. “It was just amazing—and the police honestly did not know what to do with them because they weren’t sure if they were APS cases or just a little confused,” said Ms. Mastro.

Police are trained to do home assessments, looking at several factors. Poor personal appearance and housekeeping can be signs of dementia, or signs of long-term habits. “They’re taught because it’s neat and clean, and the person inside is neat as a pin, that doesn’t necessarily mean that there’s nothing going on. Long-term behavior remains intact with dementia,” said Ms. Mastro. Police are trained also to look in the refrigerator and kitchen cabinets, to see if the resident has adequate food, and to examine the person’s car, to see if there have been frequent small accidents that might indicate confusion or poor judgment. Officers also ask questions that require judgment—“What would you do if there were a fire?”—and questions that test the person’s orientation in time and place.

Ms. Mastro teaches her program at the local police academy and four local police departments. In addition to the Alzheimer’s training, young recruits become more sensitive to older persons’ problems by putting on glasses and gloves that simulate cataracts and arthritis disabilities, so they can experience firsthand just how difficult it can be to do things like make change in a supermarket line. “The strength of this program is the phenomenal way the police

have responded, the phenomenal assessments, and the capability that I never thought law enforcement would have, as far as the assessment bit. Some people in nursing don’t have these skills,” said Ms. Mastro.

New Jersey police officers also participate in a nationwide program for persons with dementia called Operation Safe Return, a program of the Alzheimer’s Association that is funded by the Department of Justice. Between 60 and 70 percent of people with Alzheimer’s disease will wander at least once during their illness; Operation Safe Return seeks to help these older adults get back to their homes.

The number of adults with dementia who are prone to wandering is staggeringly high. “Nationwide, there are 4 to 5 million people with Alzheimer’s or related dementias. Seventy percent of those people with Alzheimer’s disease or related dementias actually live in the community in homes, with families, or alone,” said Frederick Brand, Director of Program Services of the Alzheimer’s Association, Greater New Jersey Chapter in Denville. People with Alzheimer’s disease can wander at any time of day, in any weather. Often, they will simply pace back and forth inside their rooms, but many become separated from their caregivers and their homes, and can become lost in the most familiar places. If these wanderers are found within 24 hours, they are almost always safe, but 50 percent of the adults who are found after 24 hours have passed are dead. “They are victims of an illness they can’t control,” said Brand. Locating these lost adults quickly is imperative.

In 1994, the National Alzheimer’s Association, in partnership with DOJ, created Operation Safe Return, a nationwide identification, support, and registration program to reunite Alzheimer’s disease victims with their loved ones. For a onetime cost of \$40, the registry records the adult’s first name, photo, identifying characteristics, and emergency contacts; the registered adults are given bracelets or necklaces with their first name, the fact that they are memory impaired, and a 24-hour toll-free number for anyone who finds them. When these adults are reported missing, Safe Return faxes their ID and photo to local law enforcement agencies. The Greater New Jersey Chapter of the Alzheimer’s Association offers scholarships to caregivers who cannot afford the registration fee, and also will send broadcast faxes to emergency rooms, multiple police stations, and other contacts.

The New Jersey Department of Law and Criminal Justice started working with the two New Jersey chapters of the Alzheimer's Association in 1997 to create a statewide education program on Alzheimer's disease and Safe Return. Together, these groups worked to establish mandatory training as part of disability training for new recruits, and to encourage voluntary training among veteran officers. The goal was to help police become more effective at dealing with wandering adults with Alzheimer's disease. A second goal was to increase the number of registrants in Safe Return. "Safe Return talks about having 60,000 to 70,000 people nationwide registered in the program, but with 4 to 5 million people nationwide with Alzheimer's disease, you can tell that we are just hitting the surface," said Mr. Brand.

The Initiative, which has distributed training materials to 611 law enforcement agencies and police academies, includes:

- A letter of support from the state attorney general encouraging training.
- A curriculum for training personnel.
- A book titled "Victim, Not Criminal," which illustrates the types of incidents likely to occur with people with Alzheimer's disease and how to intervene effectively. This has since been replaced by a pamphlet titled "A Guide for Law Enforcement Officials."
- A 12-minute video describing Alzheimer's disease, Safe Return, and intervention techniques to use with wanderers.
- Laminated wallet cards listing basic communication techniques to use with people with Alzheimer's disease.
- Safe Return registration forms.

After 1 year, 30,000 wallet cards were distributed, and 7,000 New Jersey police got training through their departments or the Alzheimer's Association. There was a 38-percent increase statewide in registrations for Safe Return. The Alzheimer's Association chapters continue to provide training, especially to new police officers.

One other important group needs training in dealing with dementia: caregivers, who may inadvertently or unthinkingly abuse their charges. "Caregivers must be given the tools and services to learn how to care. Many people don't know any different," said Mr. Brand. "From the moment of diagnosis, the education and the information that goes along with that diagnosis has to be provided to them so they understand options, so they understand which caregiving techniques work better than others." Mr. Brand stated that behavioral management techniques can reduce and prevent problems, and that caregivers can be taught to use them.

Restraints are a common ethical problem for caregivers and for APS agencies. APS workers commonly get calls from neighbors who are concerned about people with dementia who are tied or restrained by their caregivers. If there are no adverse physical consequences, this practice may be legally acceptable, if abusive. As part of a study of intergenerational attitudes toward elder abuse in different cultures (European Americans, African Americans, Puerto Ricans, and Japanese), Ms. Anetzberger discovered that the older people themselves had mixed feelings about restraints. "In most regards, the older people themselves thought that that was not abuse if it facilitated adequate caregiving. Their own definition was that there should be some accommodations made for caregivers, recognizing how difficult their task was, and how ethically charged it could be," said Ms. Anetzberger.

Older adults who are restrained cannot wander, but they also cannot escape fires or other disasters inside the building. Ms. Mastro recalled telling a woman who restrained her husband when she left the house, "If you go out, and there's a fire, that's abuse." Medication and adult medical day care are alternatives to leaving an adult with dementia restrained and alone.

The way to find resources for training, psychiatric evaluations, and other services for adults with dementia is to "start working with the local chapter of the Alzheimer's Association, as many chapters are developing their own state public policy aspects as part of their services, setting platforms and priorities,"

said Mr. Brand. In Cleveland, geriatric assessment units are funded by Medicaid/Medicare reimbursement, Ms. Coleman said. For law enforcement officials who want geriatric evaluations of adults, Ms. Coleman suggested contacting medical and nursing societies and other organizations. “Working

with Alzheimer’s Associations in your neighborhoods, have them put the pressure on, just as AARP state-wide offices and other groups that have effectively used the public policy/legislative arenas are very important here in pressing for these kinds of needs.”

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# Elder Abuse and Neglect at Home

## Workshop 2: Working Across Systems To Improve Services for Victims of Domestic Violence and Sexual Assault

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### Moderator:

Catherine Pierce  
Deputy Director for Program Development  
Violence Against Women Office  
U.S. Department of Justice  
Washington, D.C.

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### Panelists:

Bonnie Brandl  
Program Director, National Clearinghouse  
on Abuse in Later Life  
Wisconsin Coalition Against Domestic Violence  
Madison, Wisconsin

Mary Lynn Kasunic  
Executive Director  
Area Agency On Aging, Region One  
Phoenix, Arizona

Amy Judy  
Systems Advocacy Program Coordinator  
Wisconsin Coalition Against Sexual Assault  
Madison, Wisconsin

Moderator Catherine Pierce, the Deputy Director for Program Development of the Violence Against Women Office (VAWO), U.S. Department of Justice, led a discussion highlighting promising approaches to address domestic violence and sexual assault against older individuals. There is still less known about the scope, causes, and impact of sexual and domestic violence in older populations than in young and middle aged populations. Lack of federal, state, and local resources for research and services to elderly abuse and/or assault victims further complicates the design and delivery of effective services to this population.

Bonnie Brandl, Program Director of the National Clearinghouse on Abuse in Later Life at the Wisconsin Coalition Against Domestic Violence, noted several factors that are important for effectively identifying and responding to the needs of older victims of abuse and/or assault:

- Documenting the number of older people experiencing abuse/assault and documenting the types of services needed is important when developing services or building a case for funding. Ms. Brandl suggests collecting information from a variety of sources, including Adult Protective Services, aging programs, and domestic violence programs.
- A multidisciplinary approach to problem exploration, service design and delivery, and fundraising is more effective than organizing a single entity to do it all. This collaborative approach, though difficult in the

beginning, is more likely to sustain the effort over the long term because it allows each organization to contribute based on its recognized strengths.

- Participants in a collaboration should take time to develop a common language and clear definitions of terms so that all participants understand the values, principles, governance, and operating structures that direct the provision of services.
- The collaborative environment should allow for honest, up-front discussions about inevitable issues of turf, ego, and control. In order to get through this difficult time in collaboration-building, it is critical that relationships of trust and respect be established early in the process. One way to develop these relationships is by sharing quality information with each other, both in terms of organizational limitations as well as strengths.

Using the development of her organization as an example, Ms. Brandl noted there were several struggles among various entities in the early stages. These struggles often resulted from the fact that most organizations that were being asked to collaborate were already overwhelmed by the demand for services and yet underfunded.

Ms. Brandl recalled the initial response from many providers to a call to focus on older victims was, “we don’t do that work ... we see our population as 18 to 40 years of age and we’re having a hard time even keeping up with that population. We can’t begin to think about how we’d start working with older victims.” But persistence and well-documented information about the need for services paid off. In 1994–96, funds were allocated by the Administration on Aging to develop a demonstration project to address the needs of the abused older population.

The collaborative service model that evolved was the product of a statewide multidisciplinary task force that included representatives from aging services, domestic violence shelters, batterer treatment programs, health care efforts, faith-based organizations, and other community-based organizations. After building a common understanding about the issues, the goals of the new organization were set: promoting

the safety of the victims and holding perpetrators accountable for their actions.

The approaches chosen to achieve these goals included the development of educational materials, training, and technical assistance. The group then set priorities for target audiences. The first priority was to get the information, training, and technical assistance out to direct service providers—for example, domestic violence and sexual assault programs, victim witness coordinators, aging programs, and APS.

The second target audience was the criminal justice system. The initial material was enhanced with a booklet specifically designed to address the questions and concerns of justice system professionals. It described typical symptoms and behavior patterns that might be seen in victims of domestic violence, and noted appropriate responses and services that were available when abuse was suspected.

The health care community was targeted as the third audience, and the fourth target will be the faith communities; material still is being developed for the latter group.

The following approaches can help increase the effectiveness of collaborations, Ms. Brandl said:

- Take the time to build relationships of trust and respect among the collaborators.
- Be clear about the goals.
- Use data and information as the starting point for conversations about the scope of the problem and the potential solutions.
- Build on the strengths of the members of the collaboration.
- Clearly define and understand the target audience for services.

Amy Judy, Systems Advocacy Program Coordinator for the Wisconsin Coalition Against Sexual Assault (WCASA), began developing services for older victims of sexual assault when she noted two facts: services for older and/or disabled victims do not necessarily include services for victims of sexual assault, and most services for sexual assault victims focus on young populations. Using the model developed by the National Clearinghouse on Abuse in Later Life as a guide, Ms. Judy and her colleagues began collecting

information about sexual assaults on people who are older or who have disabilities. When research indicated a need for services, WCASA developed an educational manual and a video titled, “Widening the Circle: Sexual Assault and Abuse Against People with Disabilities and the Elderly.”

The WCASA staff identified two priority target audiences: members of WCASA, and the state’s 37 rape crisis centers. “Our work would not be successful if we didn’t have the support of professionals from many different disciplines coming together to work collaboratively,” Ms. Judy said. She defined collaboration as:

- A process of building strong relationships among professionals from multiple disciplines that allows for the development of a common agenda.
- Continual learning about each other as individuals and as professionals representing multiple organizations with various missions, philosophies, and policies.
- Building on the strength and capacity of each collaborating organization without getting frustrated with organizational limitations.

The Maricopa Elder Abuse Prevention Alliance (MEAPA) in Phoenix, Arizona, also has developed a model for addressing the needs of older abuse and assault victims. Mary Lynn Kasunic, Executive Director of the Area Agency on Aging in Phoenix, said MEAPA developed a program that emphasized alternatives to guardianship, combating financial exploitation, development of elder abuse assessment guidelines, advocacy, community mobilization, and public and professional education.

MEAPA began as a coalition of 20 individuals who wanted to work together to provide professional education on elder abuse. The membership now has grown to more than 100. It is multidisciplinary, including individuals from social services, APS, law enforcement, medicine, public health, Alzheimer’s service organizations, nursing homes, and others.

MEAPA research in 1995 on issues affecting older victims found that:

- There was underutilization of domestic violence shelter services by older women.

- Emergency shelter policies, most of which were designed to address the provision of services to younger women and their children, often were not appropriate for older victims.
- Older women required more time than younger women to “get back on their feet” and to develop a plan for self-sufficiency.
- Transitional housing, a core component of services to victims of domestic violence, was geared to younger women with children, leaving many older women with no place to go if they decided to leave an abusive environment.

With this understanding of the problem, members of MEAPA began developing an agenda for responding to the needs of elder abuse victims. Again, the key to success was a collaborative relationship among many community agencies. The relationships necessary to sustain collaboration were developed in a large degree through an educational campaign that included brochures, posters, training sessions, and the presentation of a one-act play called “The Dance.” The play later was developed as a video and widely distributed.

The expanded model of services that ultimately was developed included not only education, training, and technical assistance, but also the establishment of older women’s support groups and a process and structure to provide emergency housing for elder abuse victims. This model’s success is dependent on key stakeholders working together. The stakeholders include local police, APS caseworkers, local hospital emergency room personnel and social workers, volunteer victim’s advocates, local care homes and nursing facilities, and staff from domestic violence shelters.

“When the police or APS identify someone who is a victim, we ask them to take that person to the nearest emergency room,” Ms. Kasunic said. “The emergency room is very important because the staff there does the initial screening to ensure that the victim is drug-free and sober and is agreeable to emergency housing. Once the screening is completed, the volunteer advocate is notified and they have a list of the homes and nursing facilities that have vacancies. The advocate and the emergency room personnel and hospital social worker coordinate arrangements for shelter placement with the care home or nursing facility. Upon arrival at the care home or nursing facility,

the victim signs an agreement noting they can stay there for free for a maximum of 10 days to 2 weeks. Then, within 24 hours, staff from the domestic violence shelter visit and they work with the victim to develop a care and discharge plan that includes the identification and coordination of services needed by the victim.”

Because it tends to take longer to develop the support system necessary for self-sufficiency for an older victim of abuse, there is a need for longer-term transitional housing, Ms. Kasunic said, and MEAPA currently is developing plans to address this need.

Other workshop participants noted the discrepancy in services between urban and rural areas. Panelists agreed that services in rural areas often are very limited, and noted that current responses to rural elderly victims usually involve connecting them to ongoing support groups, working with them by telephone, and/or developing individual peer contacts who can be called on for support.

Other participants questioned how to help older victims who do not want to leave their homes, especially if they do not want to go into a shelter of any kind. Panelists discussed several ways to provide support in such situations, including providing legal advice and assistance regarding removal of the abuser from the home, obtaining a restraining order and filing for divorce, providing support groups specifically designed for those victims who choose to stay in their homes, and ensuring the availability of phone crisis lines.

Ms. Pierce noted that there are funds available through DOJ that can be used to address some of the issues discussed during the workshop. She encouraged participants to speak with their state’s administrator of the STOP Violence Against Women formula funds to find out more about how to access DOJ resources.

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# Elder Abuse and Neglect at Home

## Workshop 3: Engaging Law Enforcement, Prosecution, and the Judiciary

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### Moderator:

Cabell Cropper  
Executive Director  
National Criminal Justice Association  
Washington, D.C.

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### Panelists:

Candace Heisler  
Consultant and Trainer  
Assistant District Attorney (Retired)  
San Francisco, California

Charles Mendonca  
Public Relations Officer for the Elderly  
Pascua Yaqui Tribe of Arizona Law  
Enforcement Services  
Tucson, Arizona

Lori Stiegel  
Associate Staff Director, Commission on Legal  
Problems of the Elderly  
American Bar Association  
Washington, D.C.

C. Ronald Stromberg  
Assistant Director  
Division of Aging and Adult Services  
Salt Lake City, Utah

Cabell Cropper, Executive Director of the National Criminal Justice Association, told workshop participants that his association is fairly new to the problem of elder abuse. The association comprises state agencies that administer federal and state funding and set criminal justice policies and practices. While the association is new to the issue, many of the constituent state agencies have been working in the field of elder abuse, using both federal and state grants to set up programs.

Charles Mendonca, Public Relations Officer for the Elderly in the Pascua Yaqui Tribe of Arizona Law Enforcement Services, is an investigator. He described how he set up his one-man police program against elder abuse on the reservation in the 14 months since the tribe funded its program on elder abuse. The tribal code in 1984 defined elder abuse, established a duty to report it, and set penalties. But the funding to enforce it was delayed 12 years. Funding was provided finally because older persons complained to the director of the senior center and to some council members that their needs were being neglected. Resources remain limited. For example, there is no Adult Protective Services worker on the reservation.

The first thing Officer Mendonca had to do was learn about elder abuse. “That took some time,” he said. Once he had an idea what he was dealing with, he had to educate social workers, health care workers, other police officers and firefighters—nearly all tribal employees. The first referrals began to dribble in, but very slowly. So Officer Mendonca moved his office from the police station to the senior center—“the perfect environment” for it. He had to gain the confidence of older tribal members (he is not a member of the tribe) and this was easier on their turf. Now, he said, older people come in frequently, converse, and gradually get around to making their complaints.

As he investigates, he works closely with other departments, and this also involves education. At one time, the prosecutor was unaware of the tribal code section on elder abuse and Officer Mendonca had to educate him. He holds other departments accountable for doing their duty. A social worker who fails to report some aspect of abuse has to explain the circumstances to him. Sometimes, he said, a social worker is so concerned with confidentiality that he has to pry out the information, or even resort to subpoenas. But through establishing his own consistency and through education, that situation is improving.

Officer Mendonca is a lay advocate in civil cases in the Tribal Court, and he considers himself an advocate for elder rights. If he finds an older person in need of services, he goes to the housing or social services department for help. “Wearing a badge—that helps,” he said. “It really opens doors when I need to get somebody help.” For example, a woman complained to him that she had no heat, and Officer Mendonca asked the Housing Authority maintenance director why he had not fixed the woman’s furnace. The director suggested the woman was a malcontent, and finally said there was no money in the budget. “I advised him that if he didn’t fix it, it was abuse of an older person. He fixed it. It [the badge] works.”

Officer Mendonca has obtained several convictions and hopes to add a social worker to his office. In every case, he relies on education, and works with other departments, such as the Arizona APS. He also participates on a task force in Pima County to educate people about elder abuse. He believes he is the only one doing this work “in Indian Country,” and appealed to state and federal policymakers not to “forget the people in Indian Country. We have the same problems as everybody else. We just want to be part of the solution.”

In Utah, the first problem was simply to get the law to recognize elder abuse explicitly, said C. Ronald Stromberg, Assistant Director of the Division of Aging and Adult Services. APS was part of the child welfare system until 1993, when the present APS system was created to investigate abuse, neglect, and exploitation of people who are older or who have disabilities. The law on adult abuse consisted of just one paragraph, stating that it was illegal, so Mr. Stromberg and other elder advocates worked to broaden and strengthen the law. Their efforts were successful in

1996, which marked the first time that the term “elder abuse” had ever appeared in Utah law.

But when they showed the law to the police and said, “Okay, let’s go get ’em,” the police responded, “We investigate macho crimes—not \$300 Social Security checks but \$300,000 bank robberies,” Mr. Stromberg recalled. When he sought to speak on elder abuse at the annual Utah Prosecutors Conference, he got an e-mail stating that elder abuse “doesn’t rise to the level of our concern.”

APS felt they might solve the problem by training police in elder abuse, but the response to invitations was “less than overwhelming,” Mr. Stromberg said. Essentially, the police were not interested in talking with social workers. Finally, a state police unit dealing with white-collar crime told them, “you guys need your own cop.” The agency contracted with the State Department of Public Safety for one officer to work with APS, with statewide authority.

The officer was inundated with cases that had been backlogged for years. To deal more effectively with such a caseload, he began training local police; the agency found that local police were willing to listen to a fellow officer. Even in rural areas where only a few officers have attended training sessions, the result has been an increase in referrals. The current goal is to train at least one officer in each jurisdiction in the state, so that APS has someone to call for assistance with cases. So far, several hundred officers have been trained, and in Salt Lake City, every uniformed officer is receiving training. Statewide, elder abuse, neglect, and exploitation are now part of the training curricula for all new police officers.

Mr. Stromberg also noted the usefulness of a police officer’s badge in getting the attention of abusers. When the APS officer participates in a visit to the home of an exploiter, flashes a badge, and says, “What you’re doing is a felony,” the suspect is more apt to say, “Oh, you didn’t understand. This was a *loan*. I will have it paid back within the next 2 days. Can you give me 2 days to get the money back?” And often the individual does give it back, Mr. Stromberg said.

Arrests have increased dramatically, from none at all to a dozen or so a year, Mr. Stromberg said, and prosecutions have risen somewhat because the police officers know what evidence is needed and discuss the

cases with prosecutors. But the APS is “still battling for the hearts and minds of prosecutors,” he said.

The volume of cases is still a problem for the officer assigned to APS, who not only teaches but doubles as a consultant to any officer in the state who needs help, in addition to investigating cases no other officer will take on. Another problem is continuity: the officers who do good jobs are promoted away from APS.

Candace Heisler, a retired assistant district attorney in San Francisco and now a consultant and trainer, said a multidisciplinary approach, in which APS, long-term care ombudsmen, police, prosecutors, medical experts, and others contribute, is required to develop materials and effectively train police and prosecutors in elder abuse. An APS worker might know more about a subject than even an experienced prosecutor like herself, she noted, but that expert will be more credible to law enforcement if backed up by police officers.

The format for instruction should be tailored to different audiences, urban and rural, using a wide variety of materials, including publications, videos, and CD-ROMs. Training can be more effective when it is delivered to a multidisciplinary group, Ms. Heisler said. The National College of District Attorneys uses multidisciplinary training at the national level, and the California District Attorneys Association does the same at the state level for both domestic violence and elder abuse.

But even the greatest training program is useless if it does not attract an audience. Ms. Heisler told conferees, “You gotta have a gimmick; you gotta have a hook,” and gave these examples:

- Hang it on a legislative mandate. Police in California, for example, became interested only when a state law was passed requiring that they be trained in elder abuse.
- The best hook for attorneys is mandatory continuing legal education (CLE). If there is an attractive program, plus CLE credits, the lawyers will come.
- Local ordinances establishing elder abuse committees on which police and prosecutors are required to serve are very effective.

- Seek help from the press in publicizing high-profile cases of elder abuse, those involving deaths or frauds for large amounts of money.
- Encourage political candidates to use protection of older persons as a campaign issue.
- Urge inclusion of elder abuse outreach and training in efforts such as community policing and similar efforts by prosecutors.
- Persuade community agencies, including police and prosecutors, to participate in multidisciplinary teams. Then use the teams, including police and prosecutors, to give training on elder abuse and exploitation.
- Draw on multidisciplinary teams including prosecutors, police, and social workers to develop CDs and training courses on elder abuse.

The chances of a judge being trained in elder abuse are virtually nil, but there is hope, said Lori Stiegel, Associate Staff Director of the Commission on Legal Problems of the Elderly of the American Bar Association. The Commission has developed three model curriculums for judges and court staff on elder abuse, published in 1998. This emerged from an earlier project, also funded by the State Justice Institute, that found judges and court staff needed a better understanding of elder abuse. After testing in two states, the Commission produced a book of materials and background information for instructors, judges, and others taking the course. One of the curricula is designed to help judges understand the connections between domestic violence and elder abuse. Another curriculum is tailored to staff members who, Ms. Stiegel said, are the “front line of the court system”—the first people to encounter and identify cases of elder abuse. This is particularly important as lawyers grow more expensive and more people represent themselves, she said. The manual was widely distributed throughout the country, and Ms. Stiegel said the material is readily available.

The curriculums are probably ahead of their time, Ms. Stiegel said; they have not been widely used. However, the basic curriculum for judges has been employed in Washington, Florida, and Georgia, and in a 2½-day session for judges in Wisconsin. Ms. Stiegel said that Becky Morgan, from Stetson Law

School in Florida, teaches elder issues at the National Judicial College and uses the ABA model curriculum. But she said the issue is not yet a priority for national judiciary associations, and probably will not be until the number of cases increases.

The concerns about training judges are similar to those in training police and prosecutors, Ms. Stiegel said. With judges, though, it is necessary to understand the ways judges and court staff are trained. Judicial educators generally plan programs a year in advance. It is also important to identify which official or body in the state court system—the chief justice, the court administrator, the judicial training committee—actually has the power to decide on training. It is critical to have a judge with clout among his or her colleagues champion the idea of training on elder abuse. It is probably better to offer the training as part of an overall judicial conference rather than as a freestanding event, and better to draw a sparse crowd of people who really care than a large group of indifferent judges.

In advocating judicial training, Ms. Stiegel said, it is best to put the need in the context of a growing problem, rather than a failure by the courts, and relate it to increased involvement by police and prosecutors. She urged participants to use the ABA guidelines and materials, to cite the imprimatur of the ABA and the State Justice Institute, both of which enjoy great respect among judges.

Other conference participants offered suggestions for improving the education of judges. A police officer argued that one way to gain the attention of judges is to take “a hundred” seniors to court. “When they see their old schoolteacher” supporting an elder victim in court, he said, “it has a lot of impact.” A Maryland prosecutor said she usually asks for a session in the judge’s chambers before an elder abuse case opens, during which she explains the nature of elder abuse. The defense lawyers often do not want to accept this, she said, but they usually go along in order to avoid looking bad.

In many states and localities, law enforcement and judicial authorities are poorly educated about elder abuse and neglect, and resistance to prosecuting such cases is still strong because authorities lack both familiarity and experience with the elder abuse laws. However, once police are given training, they often become advocates for elder victims. The multidisciplinary approach advocated in other areas also is important in providing training to police, prosecutors, and judges. Training programs sponsored by national and state law enforcement, prosecutorial, and judicial associations, such as the American Bar Association and national and state associations of district attorneys, are now available. “Hooks” such as local ordinances and publicity can heighten interest in training courses.

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# Elder Abuse and Neglect at Home

## Workshop 4: Augmenting the Role of Medical Professionals

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### Moderator:

Sidney Stahl  
Chief, Health Care Organization and Social Institutions  
National Institute on Aging, National Institutes of Health  
Washington, D.C.

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### Panelists:

Carmel Dyer  
Associate Professor of Medicine  
Baylor College of Medicine  
Houston, Texas

Laura Mosqueda  
Director, Geriatrics  
Associate Clinical Professor, Family Medicine  
College of Medicine  
University of California-Irvine  
Orange, California

Randolph Thomas  
Manager, Domestic Investigations Unit  
South Carolina Department of Public Safety  
Law Enforcement Academy  
Columbia, South Carolina

Sidney Stahl, Chief of Health Care Organizations and Social Institutions at the National Institute on Aging, opened the workshop with an overview of the issues. Medical issues, not just social issues, can play a key role in the genesis of elder abuse and neglect at home. Although the connections might not be obvious at first glance, underlying ailments that may contribute to these problems include dementia, depression, psychosis, alcoholism, and early cognitive loss.

This relatively new understanding highlights the need for medical professionals to work with Adult Protective Services, law enforcement, and other parties to help diagnose and treat elder abuse and neglect. Yet physicians generally have done a poor job in this regard. Among other reasons, doctors are unaware of the need, have not been trained to recognize abuse and neglect cases, or fear that such cases will drag them into court or obligate them to provide free services. Lessons can be learned from experts in child abuse, criminal justice, social services, and victim advocacy, in addition to the medical community, that can help overcome these problems.

The Texas Elder Abuse and Mistreatment (TEAM) Institute, established in 1997, seeks to improve the lives of abused and neglected elders through clinical care, research, and education. It is an interdisciplinary collaboration between the Baylor College of Medicine Geriatrics Program at the Harris County Hospital District and the Adult Protective Services program of the Texas Department of Protective and Regulatory Services.

According to TEAM research, 90 percent of self-abuse cases among patients in Texas involved persons older than 65. In one small study, said panelist Dr. Carmel Dyer, Associate Professor of Medicine at Baylor College of

Medicine, TEAM found that 62 percent of abuse-and-neglect patients were depressed compared with 12 percent of those in the control group, and that 50 percent had dementia compared with 28 percent of the controls.

The clinical portion of TEAM's work entails an inpatient unit for abused or neglected older persons, the research portion involves outcome studies, and the education portion includes sending all third-year medical students at Baylor on APS investigations. "We don't want any one of them graduating from medical school not knowing what those three letters stand for," Dr. Dyer said.

TEAM has encountered some hurdles. One is that different disciplines assess the capacity of, and care for, patients in different ways. Medical experts, for example, use objective measures in coming up with differential diagnoses, while social workers and APS specialists use subjective measures.

Medical practitioners devote far more attention and expertise to abuse and neglect among children than they do to that among older persons. As a result, Dr. Laura Mosqueda, Director of Geriatrics at the University of California-Irvine Medical Center, studied child abuse and domestic violence care models to see how they might apply to elder abuse and neglect. That led to the creation of VAST (Vulnerable Adult Specialist Team) and the California Medical Training Center.

VAST includes Dr. Mosqueda, a nurse practitioner, a pharmacist, a psychologist, a social worker, and a gerontologist. Among its many duties, the team investigates and examines the medical and psychological injuries of older victims, documents injuries for subsequent legal action, encourages dialogue among an array of experts about the best role of medicine in such cases, is developing a standardized tool for documenting elder abuse, and educates health care providers, attorneys, law enforcement, and older persons. Dr. Mosqueda said housecalls, as compared to evaluations on caregivers' turf, are much more insightful because they reveal the physical and emotional environment in which older victims live.

The California Medical Training Center hosts day-long courses for medical practitioners on elder abuse. Instructors include a pediatrician and a district attorney.

Officials in South Carolina also realized the importance of developing a standard way to collect medical evidence in elder abuse cases, as better evidence means better criminal prosecutions. Randy Thomas, Manager of the Domestic Investigations Unit in the South Carolina Department of Public Safety's Law Enforcement Academy, said that after 2 years of input from—and "sometimes interesting debate" among—physicians, victim advocates, and experts in criminal justice and social services, and after pilot testing and fine-tuning, the South Carolina Vulnerable Adult Medical Protocol was launched in 1995.

The protocol relies on body charts to ensure that people who investigate cases of elder abuse and neglect collect evidence in a consistent way that will stand up in court. To boost awareness of the abuse and neglect problem, Mr. Thomas put together a videotape that was sent to doctors, nurses, law enforcement officers, and others. However, it is unclear how many professionals actually watched and understood the video.

Further, some medical practitioners simply don't use the protocol, Mr. Thomas said. And the protocol cannot catch elder abuse and neglect at facilities where the perpetrators may be the ones responsible for reporting such cases. Finally, some physicians are reluctant to participate in the protocol for legal reasons. "If you want to clear out all the physicians in an emergency room," said Mr. Thomas, "wave a subpoena."

How can society do a better job of battling elder abuse and neglect? Panelists offered these additional ideas:

- Make education a top priority. There are only 9,000 geriatricians in the United States to treat the 20% of the older population who are frail. More public resources, such as Medicare funds, should be devoted to training geriatricians. And more medical professionals need to know that tools such as the medical protocol are available.
- More funds should be earmarked for research and for testing of practical measures to see what really works.

- Using federal funds, medical schools should designate a clinical team to partner with APS or forensic specialists in fighting elder abuse and neglect.
- APS workers should be trained how to make referrals to medical consultants.
- Multidisciplinary teams must meet regularly to overcome stylistic differences and to engender trust.

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# Elder Abuse and Neglect at Home

## Workshop 5: Enhancing Victim Services

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### Moderator:

Diane Alexander  
Director, Field Services  
National Center for Victims of Crime  
Arlington, Virginia

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### Panelists:

Shanny Augare  
Assistant Executive Director, Child & Family  
Advocacy Center  
Director, Violence Prevention Program  
Browning, Montana

Kathi West  
Victim-Witness Coordinator  
Office of the U.S. Attorney for the  
Western District of Texas  
Austin, Texas

Judy O'Neal  
Manager, Victim Witness Branch  
Governor's Office of Criminal Justice Planning  
Sacramento, California

Moderator Diane Alexander, Director of Field Services at the National Center for Victims of Crime, stated that victims of elder crime are more likely to benefit if public agencies build bridges with each other when they establish programs and provide services. The agencies are more likely to benefit, too, because collaboration increases the likelihood of prosecutions and other successes. Collaboration is especially critical when a federal crime involves thousands of victims spread out over a number of jurisdictions.

Not the least of obstacles standing in the way of these efforts is the geographic size of some service areas. The U.S. Attorney's Office for the Western District of Texas, for example, has just eight offices to serve everyone, not just victims of elder crime. Moreover, law enforcement districts at the Federal Bureau of Investigation, Immigration and Naturalization Service, and other agencies may not coincide with other criminal justice districts. And fighting elder crime requires basic skills and awareness that may be lacking on the front lines.

Perhaps nowhere has cooperation proved more fruitful than in California, a large and very diverse state with a burgeoning older population. Using state and federal funds, California launched the Elder Abuse Special Emphasis and Special Victims Program in 1997, the Elder Abuse Advocacy and Outreach Program in 1999, and the Elder Abuse Vertical Prosecution Program earlier this year. Together, they funnel more than \$4.5 million to county-based elder-crime efforts.

In setting up these state programs, it became clear that the "missing link" was communication among agencies, said panelist Judy O'Neal, Manager of the Victim Witness Branch of the Governor's Office of Criminal Justice and Planning in California. So, in order to win grant funding under the Special Victims Program, local applicants now must explain how they would coordinate efforts among the courts, probation departments, prosecutors, law enforcement, long-term care ombudsmen, social and mental services, victim-witness programs and other parties.

California has been very aggressive in reaching out to older people, using displays at bus and rapid-transit stops, freeway billboards, public service announcements on radio and television, and other tactics. Such efforts greatly boosted the number of elder abuse cases for investigation and prosecution. An outgrowth of that success is the new Vertical Prosecution Program, which focuses on severe felony cases.

Those who battle elder abuse locally may not know at times whom they should call at the federal level for help. That's when a federal victim-witness coordinator can fill the gap, said panelist Kathi West, Victim-Witness Coordinator with the U.S. Attorney's Office for the Western District of Texas. These coordinators, unlike most harried U.S. attorneys, typically know who the best person to contact is, given the particular circumstances of a case.

Ms. West alone serves 22 federal prosecutors, without a secretary. Aside from the workload, among the special challenges she faces are tracking down, for restitution purposes, people who may have relocated or died since they were victimized years earlier.

Ms. West has found that older people are much more likely to report crimes by phone if they can reach her directly through an 800 number and leave messages on a dedicated voice-messaging system. She believes that in contacting older individuals by mail, it's best to avoid form letters and legalese, and it is critical to use large type and to tailor thorough messages in each instance so recipients fully understand why they are being contacted and what action they need to take.

Reaching out to other advocates for older persons also can be important. As Assistant Executive Director of the Child and Family Advocacy Center for the Blackfeet Tribe in Browning, Montana, which was started in 1998, Shanny Augare surveyed a cross-section of key players at the reservation—nursing home workers, housing authorities and authorities with the tribal business council, Indian Health Services, Bureau of Indian Affairs, and law

enforcement—to identify how older persons and others would most benefit from the advocacy center. The reservation encompasses about 9,000 square miles and 600 older members of the tribe.

The survey revealed a need to train criminal and civil investigators specifically about crimes against older persons, and to train the staff of an elder-protection team for which there is yet no funding. Mr. Augare also learned that current tribal and state laws don't adequately safeguard older persons.

Panelists offered these other tips for enhancing services to older crime victims:

- Consider training to be a key part of countering elder abuse. Staff must know how to reach out to older people and assuage their fears or embarrassment about having been swindled. Also, the general public must learn to detect signs of elder abuse.
- Attach strings to federal and state grant funds as a way to hold grant applicants accountable.
- Make sure grant applicants have the full support of their department heads. Otherwise, their programs may languish.
- Victims' individual needs vary; a one-size-fits-all approach is not effective.
- Give older victims information that will help prevent further victimization.
- Pair victim advocates with law enforcers. Such teams are more likely to gain the cooperation of those in a dispute, and to lead to stronger legal cases and more prosecutions.

Before a trial begins, arrange for victims to visit the courtroom so they become more comfortable with the surroundings, and especially with the witness stand, using the microphone and responding to questions. Prosecutors, in turn, can learn in advance if witnesses have medical problems or difficulty hearing, seeing, understanding dialogue, or moving about.

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# Opening Remarks Day Two

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**Speaker:**

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Alexa Verveer  
Deputy Assistant Attorney General  
U.S. Department of Justice  
Washington, D.C.

Alexa Verveer, Deputy Assistant Attorney General, Office of Justice Programs, U.S. Department of Justice, opened the second day of the symposium by welcoming the participants back and commending them for the productive discussion of the previous day. She thanked participants for their hard work to crystallize their thinking on the problem of elder abuse and on the steps needed to improve collaboration on this issue between public safety and social services professionals in their communities.

Ms. Verveer assured participants that their work at the symposium also would assist the Departments of Justice and Health and Human Services to understand better the “state of the nation” in preventing and responding to the victimization of older persons and what the federal role in these efforts should be. She also encouraged participants to use the time during the closing session to share their thoughts on elder abuse issues with the Attorney General. She emphasized that a hallmark of the Attorney General’s tenure has been the importance of listening to those at the state, tribal, and local levels and her rejection of a “top-down” approach to problem solving.

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# Plenary IV

## Institutional Abuse and Neglect

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### Moderator:

Steven Pelovitz  
Director, Survey and Certification Group  
Health Care Financing Administration  
U.S. Department of Health and Human Services  
Baltimore, Maryland

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### Panelists:

Marie-Therese Connolly  
Coordinator, Nursing Home Initiative  
U.S. Department of Justice  
Washington, D.C.

Michelle Lujan-Grisham  
Director  
New Mexico State Agency on Aging  
Santa Fe, New Mexico

Senora Russell  
Nashville, Tennessee

David Waterbury  
Director, Medicaid Fraud Control Unit  
Washington State Office of the Attorney General  
Tacoma, Washington

In a discussion led by Steven Pelovitz, Director of the Survey and Certification Group in the Health Care Financing Administration (HCFA), this panel examined the issues surrounding the problem of institutional abuse and neglect from the local, state, and federal perspectives.

To effectively prevent and stop abuse, agencies need to work together. Effective prosecution of abuse and neglect requires expert medical testimony, especially in cases where there are no competent witnesses, expertise that Medicaid fraud investigators or Adult Protective Service workers seldom have. Effective prevention of the problem involves interagency collaboration to enforce existing laws, strong financial sanctions for abuse and neglect, and more research into the signs of abuse, so that the problem can be detected early. In some states, new legislation to criminalize neglect will be required.

Several state and federal agencies already are working together to reduce abuse, and can help local efforts to improve nursing home care. Due to recent federal legislation, state Medicaid Fraud Control Units (MFCUs) can help investigate a broad range of institutional abuse and neglect. DOJ's Nursing Home Initiative has brought cases against nursing home operators under civil, bankruptcy, criminal, and civil rights statutes, and HHS' Health Care Financing Administration has done studies on minimum necessary staffing levels to prevent abuse and neglect.

Tennessee nursing home activist Senora Russell highlighted the problems by describing how her father died of nursing home neglect, despite frequent visits and intervention by Ms. Russell and her three siblings. An active, cheerful, outgoing man, octogenarian Willoughby Russell entered the Crestview Nursing Home in 1996 after he had begun to become disoriented at home. Crestview seemed like a good facility, and was one block away from one brother's home. "I was particularly concerned about finding a nursing home that would be good because I

had worked briefly in a nursing home laundry myself. I saw feces-soiled clothes being given back to residents as clean clothing, and there was no infection control, so I was worried about what would go on behind the scenes, that the public could not see,” Ms. Russell recalled. The siblings visited their father frequently, and he seemed well, but the family soon began to have doubts about his care. “Even though our family was in the facility all the time, it was hard for us to note what was actually going on,” she said. Medicaid helped pay for Mr. Russell’s care.

In April 1997, a visitor found Mr. Russell in his bed, quiet and withdrawn. “That was so unlike him, we knew something had to be wrong,” Ms. Russell said. The nursing home ignored the family’s requests for medical help, until they insisted that Mr. Russell be taken to a hospital. There, doctors discovered that he had a broken hip. Crestview never explained how he had broken his hip, or why there had been no medical intervention.

Mr. Russell’s condition deteriorated in the hospital. In May 1997, Mr. Russell was transferred to the Bethany Health Care Center, a skilled nursing facility, where Medicare and Medicaid paid for his care. After Mr. Russell had spent 3 months there, the family learned that he had developed decubitus ulcers (bedsores) on his back. “[We] were told from time to time that he had infections, but we did not realize that it was infected bedsores,” Ms. Russell remembered. “We thought that they meant that he had some kind of internal sickness. We saw that he had bandages, but we did not remove the bandages to look at the ulcers ourselves.” She and her brother asked that their father be treated for his infections at a hospital, but were told that any medical transfers had to be ordered by the medical director, who could be contacted only by Bethany personnel. The Russells did not press the issue. “I was worried that if we pushed too hard, someone might be cruel to Dad when we were not around,” she said.

Late in 1997, after Mr. Russell had been in Bethany for 8 months, the family was so worried that they decided to talk to facility administrators. Russell found her father with feces in his hand on one visit, and it was clear that he had not been bathed. She cleaned him herself, and spoke to a sympathetic nursing supervisor, who apologized. “She ... said that to

some of the staff, my father was just a body without a soul,” said Russell.

Before the family could meet with the administrators, Bethany staff called Ms. Russell’s brother on January 2, 1998, and told him that Mr. Russell was unresponsive, and might have to be taken to the hospital. Ms. Russell called the facility, and asked them to hospitalize her father immediately. He was not transferred until several hours later, when he was “near death,” Ms. Russell said; he was given three units of blood.

“When they removed the bandages from his ulcers, the smell was so terrible that one of the nurses was overcome by nausea,” she remembered. Her father had sores on his elbows, back, testicles, heels and buttocks, all deep and infected. “The hospital staff was so upset at his condition, that we suspect that the nursing home delayed transferring him so other medical people would not see his condition before he died,” she said. He died in the hospital a month later.

Nurses at the hospital were horrified at Mr. Russell’s condition, and referred Ms. Russell to the state health department’s regulatory board for nursing homes, which is composed primarily of nursing home operators. She began a long series of fruitless attempts to have her father’s death investigated. A state inspector who had asked her for more information was never heard from again. The next time Ms. Russell called his office, she was told that he was “no longer there.”

When it became clear that the state would not take her case, Ms. Russell’s family tried contacting other agencies. The Tennessee Justice Center, a public interest law firm, referred her to two law firms that might take her case, both of which turned down her request. “The Justice Center lawyer told me later that the reason those firms turned me down was that they felt the costs of bringing the case to trial were just too great, and because of Dad’s age and medical condition when he went to Bethany, they did not think they could get enough in damages to justify the risk of taking the case,” she said.

In 1998, the year Mr. Russell died, Bethany received \$4,873,394 in Medicaid payments, and \$779,567 from Medicare. “Those government payments provided Bethany’s owners with 74 percent

of their revenue. Bethany has never had to account for what happened to my Dad,” Ms. Russell said.

The abuse Mr. Russell suffered is far too common. “There are financial and exploitation types of abuses, there are physical and emotional types of abuses, there is absolute neglect, and this is happening in most of the facilities, whether they are for-profit or not-profit or small or big chains all across the country,” said Michelle Lujan-Grisham, Director of the New Mexico State Agency on Aging. Overworked and overstressed nursing home staff often give poor and reckless care.

States have made laws and regulations to protect the rights of nursing home residents and assure a high quality of care. However, the sheer number of different agencies charged with safeguarding older adults makes it difficult to hold abusive institutions accountable for the harm they do. All states have a long-term care residents’ rights program, usually termed a “long-term care ombudsman program,” and most have MFCUs, and inspectors general staff in their human services department to account for Medicaid funds, as well as social services staff, and APS units. In New Mexico, “*five* entities, all charged with accounting for funds, assuring quality care, making sure people are not abused or exploited in any fashion, assuring other rights outside of an abuse, neglect or exploitation setting ... the reality is we trip over each other in those investigations,” Ms. Lujan-Grisham said. “There are some folks who investigate and substantiate and some folks who don’t substantiate, which leads to the sort of evidentiary chain that leads others to conclude that these are poor and difficult cases to bring, or it’s not clear if abuse occurred or didn’t occur.”

Frustrated with the chaotic state of investigation, Ms. Lujan-Grisham decided to go undercover, and check herself into a long-term care facility. In 1998, Ms. Lujan-Grisham’s father checked her into a small board and care home for 3 days. Her cover story was that she was a young disabled adult, who could not perform any self-care, and could not eat, use a toilet, or move herself. She arrived with no records, no doctor’s orders, but with \$200 cash for a weekend’s care. “Cash talks!” said Ms. Lujan-Grisham. The home admitted her without an interview, and did not ask for any emergency phone numbers or contacts.

Ms. Lujan-Grisham was placed in a room with another resident, and had to wait 6 hours before she was toileted, or unpacked, or told anything about the facility. She was not toileted or fed properly, and was dressed only in an open day robe when she was put in the day room with all the other residents, including many men.

After Ms. Lujan-Grisham’s experience, her office did three more undercover investigations, in one state and two private facilities: one big chain and one small, local home. “We found even more serious problems,” she said. Undercover workers saw urine left on the floor, residents left in their feces, call lights taped to the foot of the bed so residents could not request care, residents left naked on top of their beds and, most ominously, intercom buttons taped down so that nursing staff could listen to residents’ complaints when the ombudsman came to interview the residents. Medical care was poor, and one home falsified records to show that an undercover worker was checked every 15 minutes, when that worker was missing for 12 hours before his absence was reported.

In response to these investigations, the state of New Mexico created a litigation task force to take on cases of institutional neglect, and made it easier to sue nursing homes for wrongful death. “We have improved the setting for damages, that these are good clients, that demented clients are viable clients, that wrongful death statutes are not prohibitive.” The state has passed legislation to continue the undercover program, and it is looking at Medicaid funds recovery. “Why would we pay for services in these facilities that are absolutely not received?” asked Ms. Lujan-Grisham. Under the funds recovery proposal, the state would put Medicaid payments into escrow when complaints are substantiated, and not release the money until the complaint is resolved.

Nursing home abuse also is important to MFCUs, said David Waterbury, Director of the Washington State MFCU. In 1978, federal legislation allowed states to apply for funding to establish MFCUs within their states to investigate the misuse of Medicaid funds; today, 47 states and the District of Columbia have these units.

MFCUs are “strike forces” involving attorneys, investigators, and auditors working together on a daily basis, generally in a state attorney general’s office.

Although the MFCUs were organized to investigate fraud, Congress has mandated that MFCU investigators should also look at patient abuse in Medicaid-funded facilities. “All units participate in patient abuse and resident abuse cases on a regular basis,” said Mr. Waterbury. The units also belong to the National Association of Medicaid Fraud Control Units (NAMFCU), which has been publishing guidelines for conducting patient abuse cases since 1988, including model statutes and policy language.

Initially, MFCUs only could investigate facilities that received Medicaid money. In 1999, federal legislation was enacted that allowed MFCUs to investigate fraud in other federally funded health care programs, and allowed sponsoring agencies (such as state attorneys general) to let MFCUs conduct investigations in non-Medicaid funded facilities. An MFCU “can be a bigger player in resident abuse than in the past, thanks to this legislation,” Mr. Waterbury said. NAMFCU is concentrating more and more of its resources on the connection between fraud and resident abuse, when diversion of resources leads to inadequate care—a situation known as “corporate neglect.”

Federal legislation requires that the MFCUs review referrals of patient abuse and take action where it is appropriate. The units are not required to investigate or prosecute cases, but they can take action where no other agency acts. “It’s as close as I can see to enabling legislation to ‘do the right thing,’” Mr. Waterbury said. The units’ roles vary in the states.

Prosecuting abuse and neglect cases is difficult, and requires extensive collaboration. Expert testimony on medical issues and nursing home operations can be crucial, especially in cases where there are no competent witnesses. Many states do not even have statutes to allow criminal prosecution of neglect cases. “These are the kinds of things I think you all can help these units do,” Mr. Waterbury said. “You have these connections, you have this knowledge, you have history, oftentimes you have relevant evidence that can be introduced in trials, that people like me would never know unless you come forward and help us with that.” He also urged conference participants to ask their states’ MFCUs for help. “Contact your Medicaid Fraud Control Units, help them develop their role, help them exercise their jurisdictional mandate, and let them know your feelings about what your needs

are in your particular state, and how you can work with them,” he said.

Even persuading law enforcement staff to intervene in abuse and neglect cases can be hard. “Lots of times, local law enforcement ... will say something like, ‘You know, this isn’t something that my city prosecutor or county prosecutor will prosecute. It’s just not,’” Waterbury noted. “Well, so what? Your job is not just to go work up a case that will be prosecuted, and you don’t do anything about public safety unless that’s an attainable goal .... Law enforcement is supposed to move into situations that are highly charged, and oftentimes emotional and dangerous, and separate the parties, whether somebody’s prosecuted or not. That’s what you do before somebody gets hurt.” MFCUs also train law enforcement personnel and social service agencies to be sensitive to evidence-gathering in abuse and neglect cases, and to law enforcement’s role in these cases.

DOJ’s Nursing Home Initiative brings lawsuits against negligent and abusive nursing homes, said Marie-Therese Connolly, the Coordinator. The Initiative has three broad mandates: enhance enforcement, enhance training, and enhance coordination.

DOJ’s lawsuits are in four main categories: civil and false claims work, civil rights, bankruptcy, and criminal cases. The False Claims Act allows DOJ attorneys to prosecute service providers who knowingly submit claims to the U.S. Government for services that were not rendered, or rendered so poorly as to constitute no services at all. DOJ started bringing false claims cases in Pennsylvania, seeking not just money but also remedies that would improve conditions in those institutions. There, consent decrees imposed a temporary monitor on nursing homes, and specific requirements relating to problem areas such as wound care or diabetes management. By comparison, the Civil Rights of Institutionalized Persons Act allows DOJ to pursue public facilities for abuse and neglect.

DOJ also has been collaborating with other agencies to pursue cases against bankrupt nursing home operators. “Five of the seven largest providers are now in bankruptcy,” said Ms. Connolly. In these cases, DOJ seeks to balance efforts to recoup Medicaid and Medicare payments from bankrupt providers—punishing and deterring wrongdoing—with its efforts to

protect current and future residents. “That’s a complicated mix, and it’s a constant balancing that requires the type of collaborative effort that you’ve heard mentioned here today,” Ms. Connolly said. “We at the Department of Justice don’t have either the training or sufficient knowledge to make those decisions on our own, and we have been relying heavily on our partners at the Department of Health and Human Services and others to help guide us through these turbulent waters.”

DOJ also has been litigating some criminal cases involving false statements and fraud. In one case, a woman who had “eloped” from a nursing home was found bleeding in a ditch by the side of the road. The nursing home brought her back, and falsified the records to say that she had fallen out of bed. The woman died within 24 hours of her return. The nursing home administrator and assistant director of nursing were convicted of lying to federal officials and are now in prison.

Training has been a high priority at DOJ, which has sponsored four regional conferences on institutional abuse and neglect. These conferences were intended to train federal and state law enforcement workers—such as attorneys, investigators, paralegals, auditors, and service providers (including APS workers and long-term care ombudsmen)—about abuse and neglect cases. One important issue at these conferences was information sharing. “Law enforcement doesn’t play well with others,” and has a reputation for being secretive, Ms. Connolly noted. In some cases, there are good reasons for law enforcement’s secrecy, as when a grand jury is considering a case. However, in cases of elder abuse and neglect, collaboration is vital to protect victims, and absolute secrecy is counterproductive.

Many health care providers are nervous about working with law enforcement and feel that court cases and jails may not be the best remedy for all abuse. “By working together, we are going to be able to better identify how to make law enforcement a force for good. Law enforcement doesn’t come into play until other systems break down,” Ms. Connolly said.

State working groups that developed as a result of the Initiative also have identified a national problem in prosecuting abuse and neglect; the lack of research into the signs and symptoms of abuse and neglect in

the elderly. “I had a firefighter, a medical examiner, [and an] emergency room doctor get up and say, ‘We don’t know how to detect where there is abuse or neglect. We don’t know when we go into a nursing home whether these bruises are signs of abuse and neglect, or whether they’re some natural phenomenon, whether these dehydrations or these ulcers are a sign of abuse and neglect,’” Ms. Connolly recalled. “... If the folks on the front line don’t know how to distinguish between what is abuse and neglect and what isn’t, then we have a problem. Back one step further, there isn’t very much research on this area. We don’t know what patterns of bruising are indicative of abuse. We don’t know what types of fractures are. There isn’t the research in this area, and if there isn’t the research, how do we train, and if we don’t have the training, then how do we detect?” That is why, on October 18, 2000, DOJ brought together a panel of experts to address this and other forensic issues related to elder abuse. DOJ is looking at how different agencies put together training, evaluate research proposals, and “how to move the ball forward,” she said.

DOJ also is trying to improve nursing home care from a corporate standpoint, by encouraging nursing homes to screen employees through use of the FBI database, which contains criminal records for 39 million people. Public Law 105–277 allows nursing homes to make requests to the FBI database and to run criminal background checks on their employees.

While DOJ is prosecuting nursing homes for inadequate care, HCFA has been investigating what a nursing home needs to run well. Each year, HCFA performs a survey via state agency contracts of the quality of care in nursing homes. “Information, and sharing of information, is critical to how we go about our jobs and how successful we are,” said Mr. Pelovitz. HCFA’s “Nursing Home Compare” Web site gives information about nursing homes, including the last survey results, and some self-reported staffing levels.

Unfortunately, it is difficult to compare results of these programs across states, as deficiencies and problems are reported differently across the nation. “We don’t expect ... that every state will look exactly like each other. That would be as false as what we have now. But we do need to have a common, consistent basis for how we cite deficiencies, how we react to

them, what the outcomes we are trying to achieve [are], and then we can compare performance on a more effective basis,” Mr. Pelovitz said.

Last year, HCFA submitted to Congress a report on Phase 1 of a staffing study of nursing homes. Phase 2 will be finished next summer. Phase 1 contained three sections: a history of work done on nursing home staffing, a time and motion study of the work necessary to deliver a set of tasks for residents, and research on whether there was a correlation between staffing levels and quality of care. The researchers found that in order to perform five tasks to care for a nursing home resident—feeding, toileting, repositioning a person in bed, performing “morning care,” and helping a person exercise—2.9 hours of certified nurse assistant time per resident per day was required. “Ninety-two percent of homes in this country do not meet that number,” Mr. Pelovitz noted.

The study also found that when staffing falls below 2 hours of certified nurse assistant time per resident per day, and below three-quarters of an hour a day of combined licensed nurse/registered nurse time, the quality of care dropped dramatically. “Homes that were above that minimum level [were where] 2 percent of the residents ended up in the hospital for avoidable occurrences ... When staffing dropped below that point, the incidence was 22 percent,” he said. This data was taken from three states. HCFA

plans to examine the issue again, with data from more states, and also to take into account the “case mix,” i.e., how the relative health of residents in a given home affects the requirements for care levels. HCFA also will “price out” what it would cost to increase staffing to minimum levels.

HCFA has collaborated with DOJ and the Inspector General’s office on several issues. “Part of it was putting aside personal organizational accomplishments to achieve the outcomes we wanted .... Sometimes, it’s best if Justice takes the lead, sometimes it’s best if the IG [Inspector General] takes the lead, sometimes it’s best if HCFA takes the lead, and sometimes ... we’ve found a way for all of us to advance all of our needs, by saying, ‘No, this is a federal government position, not a DOJ, IG, and HCFA position’” Mr. Pelovitz said.

In the end, preventing nursing home neglect and abuse is about preventing harm to people. “It’s very easy to fall into the trap of talking about residents, or beneficiaries, or patients, if you’re talking about some institutional settings, and to lose sight that who we’re talking about, in nursing homes at least, are our grandparents, our parents ... and someday ourselves,” he said. “You need to remember that when you talk about a resident, you’re talking about a human being. And if you keep that in mind, we will do a lot better job of getting to where we need to.”

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# Institutional Abuse and Neglect

## Workshop 1: Creative Initiatives To Educate Professionals and the Public

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### Moderator:

Nolan Jones  
Director, Human Resources Group  
National Governors' Association  
Washington, D.C.

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### Panelists:

Barbara Doherty  
Adult Protection Consultant  
Aging and Adult Services Division  
Minnesota Department of Human Services  
St. Paul, Minnesota

Diane Menio  
Executive Director  
Center for Advocacy for the Rights and  
Interests of the Elderly  
Philadelphia, Pennsylvania

David Waterbury  
Director, Medicaid Fraud Control Unit  
Washington State Attorney General's Office  
Tacoma, Washington

Pam Vocke  
Director, Division of Quality Improvement  
and Training  
Health Care Financing Administration  
U.S. Department of Health and Human Services  
Washington, D.C.

Moderator Nolan Jones, Director of the Human Resources Group at the National Governors' Association, introduced the panelists and guided a discussion highlighting innovative approaches to educating professionals and consumers about elder abuse and neglect that occur in institutions. Keys to preventing elder abuse and neglect are better information about the environments in which older people live and more extensive education of those who regularly come in contact with older people, including local law enforcement, nurse aides, Adult Protective Services workers, nursing home staff, state regulators, fraud fighters, long-term care advocates, and family members. Instead of simply responding to incidents of abuse and neglect with limited resources, advocates for older persons in some parts of the country have developed creative programs to accomplish these goals. For example:

- Developing creative, more effective, and more precisely tailored educational methods—through the use of computers, the Internet, and satellite programs—to reach larger audiences at lower costs than can be achieved through classroom teaching.
- Encouraging a greater focus on elder abuse and neglect in curriculums.
- Designing tools that make it easier to detect and evaluate abusive and neglectful environments.
- Fostering accountability through networks of personal contacts at public agencies so cases don't "fall through the cracks."

Pam Vocke, the Health Care Financing Administration's Director of Quality Improvement and Training, said she has found that inviting advocates and care providers to training sessions is a good way to impart valuable information. "Training the trainers" and developing educational materials that apply to different audiences can make a big difference.

In all this, Ms. Vocke said it is important to keep in mind that elder abuse and neglect can occur in a variety of settings, not just in nursing homes. Less obvious settings include acute care facilities, hospices, dialysis centers, and organ-procurement facilities. Rather than only evaluating such facilities in terms of how many older people they can accommodate, Ms. Vocke said specialists must examine patient outcomes to ensure that people are getting proper care.

One hurdle, according to Diane Menio, Executive Director of the Center for Advocacy for the Rights and Interests of the Elderly (CARIE) in Philadelphia, is that some care providers at nursing homes don't have the right temperament for their work and haven't learned ways to cope with stress and conflict on the job. Caregivers can feel particularly stressed, for example, when they are in a rush to feed incapacitated residents. Ms. Menio said abuse, which she described as both "subtle" and "even institutionalized," is more likely to occur when there is conflict between caregiver and patient.

Tests show that the attitudes and behavior of workers improve if they receive training about abuse and neglect. CARIE's training program teaches workers how to assess whether they are dealing with stress and conflict appropriately. It also teaches them about residents' rights and how to bathe, dress, and provide other care to residents in ways that will minimize problems. Indeed, Pennsylvania now requires that abuse and neglect instruction be part of the curriculum for nurse aides, who must also undergo annual in-service training.

Like Pennsylvania, Washington is taking a much more proactive approach than it once did. The catalyst for this turnabout was a series of revealing articles in the *Seattle Times* about elder abuse and neglect. They prompted the state attorney general to issue a reform challenge to David Waterbury, Director of the state's Medicaid Fraud Control Unit.

There are about 250 law enforcement agencies in Washington State. In the past, said Mr. Waterbury, the MFCU, which has only two investigators and a supervisor, sent abuse and neglect referrals to the appropriate agencies, but not to any particular individual there. Accountability for followup was lacking, and many cases languished.

The unit built a contact network in which one person at each agency and one in each prosecutor's office would be responsible for referrals. That enables Mr. Waterbury's outfit to "work a case from the bottom up or the top down," he said. If a sheriff's office didn't provide a contact name, the unit sent referrals to the sheriff personally; after a week of referrals, this tactic typically generated a contact name.

Mr. Waterbury also persuaded the state police academy to add training about elder abuse and neglect to its curriculum. "We knew that wasn't going to help our case immediately because [academy students] were not detectives," he said. "But it was the only way to break out of this cycle and reach a new generation."

The MFCU has taken other steps, as well. For example, it now queries law enforcement agencies about their needs in battling elder abuse and neglect, instead of assuming the unit itself knows best. Those needs may include stiffer state laws, guidelines for determining whether abuse or neglect has occurred, and more training of law enforcement personnel.

In addition, the unit issued a fact book to law enforcement agencies that makes it clear that they, rather than the MFCU, should be first to respond to reports of elder abuse and neglect. The book lists public entities that are fighting abuse and neglect, and addresses of group, boarding, and other homes for the elderly so authorities can monitor these places. The book also is a best-practices manual for conducting investigations.

Early next year, Minnesota will begin testing a "risk profile tool"—a quality yardstick—that public servants can use to spot potential problems at nursing homes. The Aging and Adult Services Division of Minnesota's Department of Human Services and the National Center on Elder Abuse together created the tool based on the results of a statewide survey of nursing home residents and staff, county adult protection and advocacy staff, and family members.

Barbara Doherty, an Adult Protection Consultant with the Aging and Adult Services Division in the Minnesota Department of Human Services, said the survey asked these four questions:

- What resident and/or family characteristics would put residents at higher risk and how could that risk be quantified?
- What staff or facility issues might contribute to a higher risk?
- Are there any prevention systems currently in place to adequately address these issues?
- What are your recommendations?

Risk factors include the potential for financial exploitation of nursing home residents. Ms. Doherty said it's important for everyone at a nursing home to understand unequivocally, from the outset, who is responsible for managing each resident's money. The risk profile tool shows, among other things, that the more money there is at stake, the higher the risk for exploitation.

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# Institutional Abuse and Neglect

## Workshop 2: Joining Resources To Combat Institutional Abuse and Neglect

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### Moderator:

Barbara Zelner  
Counsel  
National Association of Medicaid Fraud Control Units  
Washington, D.C.

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### Panelists:

Marie-Therese Connolly  
Coordinator, Nursing Home Initiative  
U.S. Department of Justice  
Washington, D.C.

The Hon. Frankie Sue Del Papa  
Attorney General  
State of Nevada  
Carson City, Nevada

Nicholas Cox  
Bureau Chief, Economic Crimes Unit, Tampa  
Florida Attorney General's Office  
Tampa, Florida

Becky Kurtz  
State Long-Term Care Ombudsman  
Division of Aging Services,  
Department of Human Resources  
Atlanta, Georgia

Moderator Barbara Zelner, Counsel of the National Association of Medicaid Fraud Control Units, introduced the panelists and asked them to outline various ways in which government agencies, nonprofit organizations, and individuals dedicated to identifying, prosecuting, and preventing institutional abuse and neglect can join forces.

Nicholas Cox, Bureau Chief of the Economic Crimes Unit in the Florida Attorney General's Office, described Operation Spot Check, an initiative that resulted from the increase in the older population of Florida, a similar increase in nursing homes and assisted-living facilities, and a "staggering" problem of neglect in those institutions. The Agency for Health Care Administration, responsible for licensing the institutions, was so bogged down that facilities could anticipate when inspectors were coming—every year for nursing homes, every 2 years for assisted living facilities—and put their best foot forward for the brief period required to qualify for a license.

So a group of agencies combined to create and operate Operation Spot Check. Participating agencies include the state attorney general's office, the Long-Term Care Ombudsman's Program, the Agency for Health Care Administration (which administers Medicaid in Florida), state and local fire marshals, sheriff's offices, police, and the Department of Children and Families, as well as the departments that enforce building codes. The object is to target abuse and neglect in nursing homes and assisted living facilities. Teams including representatives of participating agencies make random, surprise inspections of the facilities.

Participating agencies identify problematic facilities and Mr. Cox's office schedules spot checks. They tell no one, not even the agencies taking part, when the spot checks will be made. Only when the team members report

to a staging area for the visit is the target announced. Secrecy is paramount, Mr. Cox said.

In a spot check, the representative of the Medicaid Fraud Control Unit inspects the medical records for staffing and quality-of-care problems. Other members of the team apply the “smell test,” to see that diapers have been changed and clothing and beds are not soiled. Team members interview patients and, if possible, their families, about how they are treated. They also interview employees about the food served and other conditions.

A registered nurse checks medical records, and an LTCOP representative checks drug security (they usually find the drug closets open). Police and the Department of Children and Families are alerted to stand by, ready to take action in case the team finds evidence of neglect or abuse. Results have ranged from the issuance of warnings or fines to several outright closures. In a recent example, the team found raw sewage standing in the basement, as well as animal waste throughout an assisted living facility that housed older persons and persons with mental disabilities. It was shut down immediately.

To counter opposition to the spot checks by some nursing homes and assisted living facilities, Mr. Cox’s office notifies facilities when their spot checks have found good conditions, and works with responsible operators to demystify the process. When a legislator, angered at an inspection in her jurisdiction about which she had not been notified, threatened to hold a press conference, Mr. Cox said he’d like to attend. “The press eats it up,” he said.

Operation Spot Check requires no additional funding, Mr. Cox noted. It does a job the participating agencies are required to perform, but now they do it jointly and more quickly. “It really works,” he said.

In Georgia, a coalition of elder advocates, law enforcement, provider agencies, and others sought legislation to strengthen criminal penalties for elder abuse and give agencies, police, and prosecutors more tools to deal with patient abuse, said Becky Kurtz, the State Long-Term Care Ombudsman for the Georgia Division of Aging Services. She directs the state’s advocacy for residents of nursing homes and personal care homes.

Included in the coalition were the Georgia Bureau of Investigation, the state attorney general’s office, the MFCU, Adult Protective Services, district attorneys, the Prosecutors Council, social service agencies, and the Coalition of Advocates for Georgia’s Elderly, which adopted the effort as one of its three top priorities for the year and headed a successful effort to combine all the desired changes into an “elder abuse umbrella.” The group sought inclusion of elder exploitation in forgery and a fraudulent practice statute, increased penalties for simple and aggravated battery and assault, felony penalties for cruelty to older people, and stronger fiduciary obligations of persons who handle the financial affairs of older individuals.

Strong opposition from defense lawyers and lobbyists for the nursing home industry resulted in a significant weakening of the bill. A few improvements in the law survived that process: an extension of the statute of limitations so that it begins only when a report is made; a clarification of who must report abuse, and to whom; and a requirement that police, prosecutors, and social service agencies participate in joint training on elder abuse.

Despite these modest accomplishments, Ms. Kurtz said, the process of working for change was helpful in itself. Participating organizations and agencies developed stronger relationships and continue working together; they have an increased awareness of each other’s roles and needs. Police, sheriffs, and prosecutors developed an increased awareness of elder abuse, and learned new ways to share resources in fighting it. While there have been no prosecutions under the new law so far, Ms. Kurtz said, the increased interest in elder abuse from police and prosecutors bodes well for the future in terms of joint efforts on training and the prospect of more prosecutions. As an example of raised awareness, Ms. Kurtz cited the Elder Rights 2000 conference in Georgia for APS workers, her own office, legal services providers, and the Health Insurance Program staff. It was an opportunity to bring in law enforcement, which was enthusiastic in setting up working teams to focus on elder rights.

Frankie Sue Del Papa, Attorney General of Nevada, created the Nevada Medicaid Fraud Control Unit and chairs the state’s Domestic Violence

Prevention Council. Elder advocates in Nevada have worked to strengthen penalties for elder abuse and coordinate and improve protective services. Critical to these efforts has been the establishment of statewide task forces that involve all key players. Such task forces identify problems and develop plans to address them, but they can be successful only if they assign specific responsibilities and set deadlines for getting jobs done, she said.

Attorney General Del Papa noted that closing down bad nursing homes is a good thing, but high-profile programs like Mr. Cox's Operation Spot Check have statewide effects and should be supported by a media and marketing campaign. Before she does any "sting" operations (such as one to expose tobacco sales to children or an auto repair scam), Attorney General Del Papa holds a press conference to "let them know we're coming." She doesn't say where or when she's coming, she said, "But it helps with the good guys in the industry, and it acts as a deterrent."

Attorney General Del Papa said her office is currently concentrating on guardianship, due to the marked increase in the older population in Nevada. She offered copies of videotapes, distributed throughout Nevada, in which such film stars as Shirley Jones, Robert Conrad, and Vickie Lawrence dramatize guardianship issues and police training in them. Her office will conduct a "guardianship summit" in February 2001. It is important, also, to educate mandatory reporters of elder abuse, and Nevada task forces have issued separate publications on this. With limited resources, Attorney General Del Papa's office looks for partners. For example, the Peace Officers Training Group was a partner in the videotape project.

Marie-Therese Connolly, Coordinator of DOJ's Nursing Home Initiative, described two of the state working groups that developed as a result of the Initiative's training efforts.

The Louisiana group includes assistant U.S. attorneys, the MFCU, prosecutors, an FBI agent, the state inspector general, the state survey agency, the state long-term care ombudsman, and the state Department of Labor. The group identifies substan-

dard nursing homes and long-term care institutions, and pursues "the worst actors" of all. The U.S. Attorney's Office has now retained a nurse investigator who reviews medical records. Such collaborations between legal and medical experts are necessary for successful prosecutions, Ms. Connolly noted. The group also provides an efficient and informal referral process, in which the ombudsman, for example, can give a victim's family member the telephone number of an appropriate police office, rather than going through a complicating reporting procedure or compromising privacy.

At the first meeting of the Virginia working group, attendance was unexpectedly high and participation intense, Ms. Connolly said; the pent-up demand among participants for a forum in which to work together more effectively was remarkable. The group includes a wide variety of players: authorities with licensing authority over professionals hired in nursing homes; firefighters; ambulance and EMS technicians; medical examiners; and emergency room doctors. They have worked on getting pertinent information quickly to responding entities—police, regulators, and social service agencies. A remarkable result of the process is the new protocol used by local fire departments to begin a referral process. When firefighters see signs of neglect or abuse of elders—for example, when a nursing home operator states that a person died 10 minutes ago but the death obviously occurred much earlier—they notify supervisors, who determine where to report the incident.

Virginia also is creating elder abuse forensic centers similar to those that exist for child abuse, domestic violence, and sexual abuse. Practitioners see patients or check records to make diagnoses that can be used in court cases. This seems to be unique to Virginia so far, Ms. Connolly said, but there is discussion of creating a national elder abuse forensic center.

Finally, Ms. Connolly told of several volunteer peer programs and networks of older people, formed through both AARP and the Corporation for National Service. They include more than a half-million volunteers, a resource so far untapped by elder abuse organizations.

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# Institutional Abuse and Neglect

## Workshop 3: Enhancing the Survey and Regulatory Process

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### Moderator:

Helene Fredeking  
Health Care Financing Administration  
U.S. Department of Health and Human Services  
Baltimore, Maryland

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### Panelists:

Debra Green  
Supervising Attorney  
Texas Department of Human Services  
Austin, Texas

Catherine Morris  
Assistant Commissioner  
New Jersey Department of Health  
and Senior Services  
Trenton, New Jersey

Joyce Stockwell  
Assistant Director, Residential Care Services  
Washington State Department of Social  
and Health Services  
Olympia, Washington

Moderator Helene Fredeking of the Health Care Financing Administration facilitated this discussion, which addressed some state efforts related to the institutional survey and regulatory process. State agencies are the front line in providing protective services for institutionalized older people, and surveys are a major tool used to ensure that protection. They especially can provide the basis for making long-term care facilities accountable, and often are a critical evidentiary tool for prosecutors.

States use surveys for a wide variety of purposes. Some examine statistical patterns and are designed in accordance with strict statistical standards. Others are used by multidisciplinary teams for highly focused objectives. Some are used to gather evidence of neglect and abuse.

New Jersey is an example of a state that uses surveys for statistical purposes. It begins with the federally mandated Minimum Data Set (MDS) through which there is an assessment done annually of every long-term care resident in federally certified nursing homes. A standard database of resident-level information is created. In many states, MDS has been expanded beyond the federally certified nursing homes to state-certified homes and other facilities, noted Catherine Morris, Assistant Commissioner of the New Jersey Department of Health and Senior Services.

The reports show patterns of resident conditions in long-term facilities. Factors such as fractures, pressure sores, number of restraints, and hydration issues are examined. In addition, New Jersey provides a list of 24 indicators to help identify problems. These indicators generate an onsite, resident-oriented, outcome-focused process. A public report of findings is published on the HCFA Web site.

Although surveyors are rigorously trained and certified and their reports form the basis of many cases that are prosecuted, the New Jersey reports still cannot always meet the strict evidentiary standards required for prosecution. “There are frustrations working with the legal people because they expect more from the survey process than it provides,” Ms. Morris said.

Texas, on the other hand, makes a conscious effort to provide evidence of neglect and abuse that will stand up in court. Surveyors take photographs of alleged abuse and neglect and are provided with boilerplate forms which take into account the legal requirements for affidavits.

The surveys generate a wealth of information on the 1,150 registered nursing homes in that state. But Debra Green, Supervising Attorney for the Texas Department of Human Services, said unlicensed—and thus unsurveyed—homes were a large problem. In Houston, an initiative was begun to identify these homes by creating a task force that included law enforcement, the county prosecutor, ombudsmen, Social Security Administration officials, and licensed assisted living facilities providers, which are in competition with the unlicensed homes.

The task force used monthly Social Security check addresses to identify targets. It identified every home to which three or more of these checks were being delivered to residents who were unrelated to the home owner. More than 400 possible addresses were discovered and surveyors investigated each one.

“Through that effort we got a number of folks to get licenses or we went to court and shut them down,” Ms. Green said. “Unfortunately, once you take the pressure off, they go back to doing it again.”

Some unlicensed operators would find out that surveyors were coming and would drive residents around in vans for hours. Others would ignore injunctions, requiring contempt orders to be sought and fresh evidence to be obtained, since prosecutors demanded evidence to be gathered within a week of court action. The surveyors complied. “If you don’t take action, if you don’t show them you mean it, they will continue to violate the law,” Ms. Green said.

Joyce Stockwell, Assistant Director of Residential Care Services for the Department of Social and

Health Services in the state of Washington, reported that collaboration also is a major factor in her state. Quality assurance nurses, funded through Medicaid, are a vital part of the state agency’s elder protective program. These nurses are sent into nursing homes to ensure that Medicaid dollars are being spent appropriately on funded care and services. With these nurses and state surveyors, there is an enforcement official in each nursing home 10 to 15 times annually.

The state also brings together the provider community, the long-term care ombudsmen program, advocacy groups, and residents to look at the entire issue of abuse and neglect. Forums are held at which they can discuss how to improve the practices in facilities. A guidebook is sent to every nursing home in the state, listing what is expected of the home, how to perform self-investigations, what constitutes abuse and neglect, and when the state has to be called.

“What we’ve found is that when you have both the providers and advocates there, the framework that comes out for the state agency is much more balanced,” said Ms. Stockwell. The state Medicaid Fraud Control Unit, law enforcement agencies, and prosecutors also are part of the collaboration. “In resident protection cases, we make a call to law enforcement agencies to see who is going first. And many times we go together,” she said.

Keeping open licensed nursing homes that are not violating the law has become a problem in Texas, said Ms. Green. Homes are rapidly closing there, even when residents’ needs are being met, because of bankruptcy. In these cases, the jobs of surveyors change.

Approximately 320 of the 1,150 nursing homes in Texas are currently affected by bankruptcy, Ms. Green said. That number includes homes from both national and local chains. When bankruptcy becomes an issue, surveyors monitor the homes with a check sheet to make sure there are supplies and to ensure that the staff is showing up. “You never can tell what staff is going to do when they learn a facility is bankrupt,” she noted. When a chain of nursing homes missed a payroll recently, state agency staff monitored the homes and worked with other state agencies that have nurses on staff so that if the nursing homes’ staff walked out, the facility could be covered until trustees took over. No walkouts occurred and the payroll was met a short time later.

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# Institutional Abuse and Neglect

## Workshop 4: Holding Institutions Accountable Through Prosecution

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### Moderator:

David Hoffman  
Assistant U.S. Attorney  
Office of the U.S. Attorney  
for the Eastern District of Pennsylvania  
Philadelphia, Pennsylvania

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### Panelists:

Freda Fishman  
Chief, Consumer Protection and Antitrust Division  
Massachusetts Attorney General's Office  
Boston, Massachusetts

Randy Hey  
Assistant District Attorney  
Office of the Santa Clara District Attorney  
San Jose, California

Andrew Penn  
Senior Counsel, Office of the Inspector General  
U.S. Department of Health and Human Services  
Washington, D.C.

Linda Purdy  
Director, Medicaid Fraud Control Unit  
Vermont Attorney General's Office  
Waterbury, Vermont

Moderator David Hoffman, Assistant U.S. Attorney in the Office of the U.S. Attorney for the Eastern District of Pennsylvania, guided a discussion of federal, state, and local efforts to enhance prosecution of residential institutions for elder abuse and neglect. He noted that it is critical to hold nursing homes and other institutions accountable for abuse, neglect, and exploitation of older persons. Methods for doing so range from criminal prosecutions against both institutions and individuals, civil suits, and administrative remedies. All depend on collaboration among public agencies and on the initiative and courage of attorneys and prosecutors. Because it is the older victims who are likely to report abuse, this effort requires a search for evidence and witnesses.

In addition, powerful sanctions—such as cutting off federal funds, closing an institution, or strict monitoring of an institution for years to make sure it meets standards—can be imposed in administrative procedures. More generally, it is critical that all parties—prosecutors, judges, police, care providers, watchdog agencies, and the general public—be educated about abuse and neglect.

Mr. Hoffman cited a number of hurdles, particularly in cases involving institutions:

- Getting a report of elder victimization is easier said than done. If the victim is in an institution, who there will file the report? Generally, said Mr. Hoffman, the family is reluctant to do so, fearing recriminations against their loved one. A medical director or doctor is not likely to report such cases to prosecutors because that often can entail self-incrimination. Nurses or aides fear losing their jobs and not being able to find work in the future.

- Police and prosecutors often do not know how to investigate and prosecute quality-of-care cases. Prosecutors may not think of a nursing home as a crime scene.
- Physical abuse, as when an aide hits a patient, is more likely to be prosecuted because police are familiar with assaults. But people with dementia often are not good witnesses, and the defense can delay until the victim is unable to testify. Neglect, which is not a traditional crime, is even more difficult to prosecute, as police often do not call experts before a jury in such cases and “reasonable doubt” is the result.

Civil cases are easier, Mr. Hoffman said. He noted that he has brought several cases using the failure-of-care theory, when the quality of care amounted to no care at all. The argument is that if the government knew that the level of care it was paying for led to malnourishment, multiple pressure ulcers, severe dehydration, and chemical restraint, it would not have provided funds, he said. When an institution submits bills for substandard care, they are committing fraud.

The key is proper investigation and evaluation of such cases, Mr. Hoffman said. Not all malnourishment means fraud, any more than pressure ulcers do, but they must be investigated. When neglect is discovered, it is not enough for a nursing home to say “we’ll do better,” especially if it has been cited in the past. The government’s role in such cases is to prosecute in criminal or civil court, or seek administrative remedies.

Beyond financial penalties, the mandated remedy is constant surveillance of the institution. Geriatric nurse practitioners routinely visit to check on compliance with settlement agreements, with federal regulations, and with agreed-upon protocols. Noncompliance entitles prosecutors to seek contempt citations. One possibility is appointment of a temporary manager.

Randy Hey, Assistant District Attorney in Santa Clara County, California, once used a misdemeanor charge of neglect to take Guardian, a national corporate chain of nursing homes, to court. The strategy worked. This case arose when a patient’s bandage had not been changed for a month, and the wound was maggot-infested. Mr. Hey saw this as an institutional failure; he did not think that six overworked nurses

should be held accountable, and instead filed charges against management.

There were very large hurdles, however. Authorities in Santa Clara County thought it unlikely that “a local prosecutor in a little county” could have an impact on so many patients (he would prove them wrong). Also, there was a risk that if the nursing home were shuttered, it might cause more harm than good in the form of “transfer trauma.” Meanwhile, Guardian’s public relations troops pressured the district attorney to drop the case.

Mr. Hey overcame these challenges “and the payoff was tremendous,” he said. The publicity caused the quality of care at other nursing homes to rise. “They all know that we’ll prosecute for neglect, and that could put them out of business.” But for 5 years, Guardian nursing homes nationwide had paid the maximum fines and penalties for neglect. Management apparently considered them a cost of doing business, more sensible than making improvements in their homes.

At one point in the process, Guardian called Andrew Penn, Senior Counsel in the Department of Health and Human Services Office of the Inspector General, to complain. The company argued that the incident was “just a case of a couple of rotten eggs” and “a wild DA out there” who “doesn’t know what he’s doing,” Mr. Penn recalled.

But in speaking with Mr. Hey, and with counselors and surveyors at the California Department of Health, Mr. Penn learned that the problem—a funding shortage—was corporation-wide. Mr. Penn and Mr. Hey negotiated a corporate integrity agreement with Guardian under which the two worst facilities pleaded guilty and the others were to be closely monitored for 5 years.

A provider can lose its funding under Medicare and other federal health care programs if it files false claims or provides poor care, Mr. Penn explained. That exclusion can be waived if a company accedes to monitoring under a corporate integrity agreement. But Mr. Penn said he uses his exclusion powers judiciously, ever mindful of the potential impact on nursing home residents. Mr. Penn is entering into corporate integrity agreements with many nationwide firms, one of which has 500 facilities.

Oftentimes, said Mr. Penn, the Inspector General's office pursues higher level staff members who have caused harm, "not just the direct-care worker who may have abused a patient. It also could be the facility administrator or the corporate head of a chain who has become so tight with the purse strings that the facility is short-staffed—a situation like Guardian, where there just aren't enough people to attend to the basic care needs." Such pursuit is driven in part by the severity of wrongdoing, how long it lasted, whether it was an isolated instance, and whether the facility can be trusted to make amends. However, when a provider is convicted of a health-care-related crime or of elder abuse, the only option is exclusion.

Litigation in elder abuse cases is a kind of classroom for police, prosecutors, judges, and the public, said panelist Linda Purdy, Director of the Medicaid Fraud Control Unit in the Vermont Attorney General's Office. Ms. Purdy cited the case of a maintenance man who sexually assaulted a 74-year-old woman who had Alzheimer's disease. The perpetrator was sentenced to prison even though he pleaded guilty a few days before trial, when Purdy, in a 3-hour hearing, cited the impact that the man's actions had on the victim, the victim's family, and the nursing home.

In another aspect of public education, she said, her office issues press releases on every case, misdemeanor or felony, involving crimes against older residents, alerting institutions that they will be held accountable.

The cases Ms. Purdy prosecutes include those involving physical abuse, as when a nurse or staff worker hits or slaps a patient; criminal neglect, as when a patient is found with decubitus ulcers; sexual abuse, which occurs all too often in nursing homes; and financial exploitation. Prosecution targets are usually particular caregivers or other individuals who committed the abuse or exploitation.

Ms. Purdy's office employs the traditional felony statutes against abuse, sexual abuse, and assault, as well as a comprehensive patient abuse statute enacted in the mid-1990s, similar to those now on the books in most states. Another way to hold institutions accountable, she said, is through the mandatory reporting laws. She also works with the U.S. Attorney's Office on quality-of-care cases, and anticipates working with the Office of the Inspector General inspector,

whose first assignment will be to investigate a nursing home that is being monitored after a long series of deficiencies.

Ms. Purdy said collaborations often generate referrals of cases, but that other agencies are not always reliable partners. She cited the case of a woman in failing health, with moderate dementia, who was scheduled for close monitoring but who wandered out of the nursing home one night when it was 30 below zero. She was found 6 hours later, dead of hypothermia. Ms. Purdy did not learn about the case from Adult Protective Services but from an outside source, and her licensing and protection people asked her, "What do you care?" She got the same reaction when a person recovering from pneumonia in a nursing home was given a lethal dose of morphine.

Obviously, she determined, more education was needed on roles and responsibilities in protecting elders from neglect and abuse. She analyzed the roles of agencies involved, and stressed to all involved the need to act quickly, start an investigation, preserve essential evidence, and at times, to treat nursing homes as crime scenes.

Ms. Purdy argued that abusers "should go to jail," and noted several cases to make the point. APS referred her office to a nursing home in which an X-ray technician had sexually molested a 94-year-old woman. Investigation showed that the same man had molested an 86-year-old woman 4 days earlier in a New Hampshire nursing home. They coordinated the prosecution with the New Hampshire Medicaid Fraud Unit. In another case, a licensed nursing assistant volunteered to handle the finances of an 83-year-old man, and wrote herself \$10,000 worth of his checks.

According to Ms. Purdy, her office learned that people in the early stages of dementia can make "great witnesses." But it's necessary to videotape testimony as soon as possible, and file appropriate documents with the courts to be used in lieu of testimony, in the event of incapacity. It is also imperative to get an early trial date, since you're "working against the clock." Ms. Purdy's office "borrows" a victim advocate from the Attorney General's Criminal Division to work with older victims. They also have filed many motions to accommodate the special needs of older victims; in one instance, they were able to bring a man to court in a bed.

Ms. Purdy's aggressive stance has been noticed by nursing home staff. She recalled receiving a phone call recently from a registered nurse who reported that every time nurse surveyors visited, his nursing home succeeded in concealing the fact that the staff was too small to care properly for the patients. He wanted to know if something could be done. "So we must be doing something right," she said.

Freda Fishman, Chief of the Consumer Protection and Antitrust Division in the Massachusetts Attorney General's Office, termed herself "an evangelist" for holding nursing homes civilly accountable through the use of consumer protection laws. But the words "consumer fraud" in this context narrow the focus and tend to make attorneys, particularly in the offices of state attorneys general, believe there is more of a burden than is actually the case.

Consumer protection laws exist in every state in one form or another, and they prohibit unfair activities in the conduct of a business. Therefore, Ms. Fishman said, "you don't need fraud." It is sufficient to show that "this isn't right," which is an easier standard to reach. As to what type of nursing home abuse is "unfair," she said, "you name it." Whatever is exploitative and robs people of dignity or money. It

is unfair to the taxpayers, to residents, to families, to regulators, and to the employees of the nursing homes, she said. Such cases are easier to pursue in part because they do not require the testimony of patients. "All we have to prove," she said, "is that this is happening and it's *unfair*."

Ms. Fishman noted the limited resources often available for fighting elder abuse, and argued that participants should take resources wherever they can find them, usually through alliances.

She recalled a recent case in a nursing home in which both the patients and staff were ethnic Chinese. Ideally, to conduct the investigation, her office needed linguists, psychopharmacologists, actuaries, CPAs, and bankruptcy specialists. Such specialists were not available, but she still pursued the case. "You have to take what you can get," she said, and work with that.

Potential partners often are anxious to help once they understand the stakes, or when the issue is properly framed. "These cases really grab people's hearts; they want to do the work when they know the work is there to do." One source of potential support, she noted, is women's organizations, especially when they see it as a civil rights issue in which poor black women are caring for poor white women without proper institutional support.

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# Closing Session

*The following is a transcript of the closing session of the symposium. The session began with remarks by Attorney General Janet Reno to the participants, followed by the presentations of eight selected state and tribal teams who reported their team plans to address elder victimization, formulated over the day-and-a-half meeting. Additionally, the Attorney General heard the recommendations of the Tribal Caucus which met on the evening of the first day. After the reports, the Attorney General engaged in a discussion with participants.*

**MARY LOU LEARY:** This is an exciting day for all of us, I think. I am so pleased, as I know we are all so pleased, that you are able to take the time out of your schedule to join us at this closing session. And as you know, Ms. Reno, we've asked a number of the teams here today to report to you about what they've learned and what they're planning to do back home with all of the interesting and stimulating information that we've acquired over the last day-and-a-half. I know that all of you have been working so hard to develop your action plans to take home and I want to thank you for your commitment to this work, to improving the response to crime and other issues faced by older Americans. Your input will be extremely helpful to you I'm sure, when you go home, but it's also going to be really helpful to us as we move into a transition period and we make our efforts to ensure that this issue does not fall off the radar screen and that it continues to be a priority. As you know, during her tenure, the Attorney General has really re-energized the Department of Justice's efforts to combat crime against the elderly. She's placed a very high priority on this issue and on all the problems that we've been discussing at this symposium in the last day-and-a-half. We're very honored that she can be with us. Without any further ado I want to introduce my hero, Janet Reno.

**ATTORNEY GENERAL RENO:** The truth is that I talk a good line, but it's Mary Lou, you and people like you all across this country that make me look good. So you are my heroes and heroines.

I'm delighted that so many of you are here to discuss this issue because it is of critical importance to this nation, to me, to all of us, if we care about humanity and if we care about the human spirit. I suggested to Mary Lou that I let you go first because I'm here to learn. But I would like to spend just a few minutes outlining where I think we need to go as a nation to address this issue.

Today about 34 million Americans are over the age of 65. In 30 years that number will more than double. Today too many older Americans are victims of abuse and neglect in places where they should be safe, in their homes, in long-term care facilities, and too many are victims of fraud. We can do a lot better than we have.

That's the reason your work is so important. At the same time that we are supporting collaboration at the state and local levels, Secretary Shalala and I, along with our Departments, are continuing a very productive collaboration that we have pursued for the past 7 years, including this symposium. The efforts of the Department of Health and Human Services to promote healthy and safe aging are critical and they work nicely with our efforts in achieving elder justice.

Our justice system, if we are to truly achieve elder justice, must be responsive to the needs of older Americans. There's a wonderful statement on the wall of the Ninth Street side of the Department of Justice that says: "The common law issues from the will of mankind ... is derived from the will of mankind, issuing from the life of the people, framed by mutual confidence, and sanctioned by the light of reason."

When too many people do not have access to the law, then the law becomes more meaningless. We have got to make sure that all our elderly have access to the law and to justice. But I never met anybody that would rather achieve justice in a court than achieve it by not having the event happen to them at all. So I think we first have got to look, as I have looked in terms of youth violence or any other initiative: What can we do to prevent it?

I think this nation has got to take this number of people, organize itself in terms of the economic delivery of services that are designed to keep older people self-sufficient, involved, productive, and I think we can do a lot better than we have. I think we can provide answers to questions that enable people to be productive, how they can stay in their own home, what they can do—exercising, meals catered, so many other things. But we have got to develop an economy of service that will permit more Americans to afford it.

Old age does not have to be not fun. My mother was dying, but she always liked to go. So I said “Well, we can still go.” And she says “Oh.” I said, “You want to go to the rain forest in Costa Rica? I’ll take you to the rain forest in Costa Rica. You want to travel across Canada by train and stay in the Rockies? We’ll go do that. You want to go up the St. John’s River in a houseboat? Let’s go do that. You want to go to Maine to see your brother? I can’t do that.”

(Laughter.)

“Why can’t you do that?” “Because I like to sleep too much.” “Come on, we’ll get in a recreational vehicle and you can sleep whenever you want to.”

Now, people say that gets arduous. At the time it seemed arduous, but those are wonderful memories, and she even had fun after Hurricane Andrew. Looking at the desolation, she could recall the first hurricane she was in.

We can do so much to make older years fun, interesting, exciting, and productive. And it was her brother who first taught me about the Internet, he being age 75, so it doesn’t take these 17-year-olds.

(Laughter.)

So prevention is the first part. It’s critical. We need to develop and expand programs that teach older people how to avoid financial exploitation, mistreatment at home, and mistreatment in institutional settings. We should also be creative in thinking about how we tackle these problems, by using the Internet to warn and train people about consumer scams. When people are caring for their loved ones at home, we need to provide these caregivers with training and support to enhance their ability to provide better care.

It was amazing to me to reach out to find out how I made somebody comfortable. She wasn’t dying that soon, so there were limited opportunities, but I found some people who could help. It’s amazing what one bed, what one shift—you can do so much, and you can teach people so much, things that they don’t learn if they major in chemistry and go to law school and decide to pursue a career in the law and public service.

You can really make a tremendous difference if we start thinking of this part of the economy as an area of a group of people that can still be extraordinarily productive. But there is an increasing recognition that prevention won’t do it all, that we need multidisciplinary early interventions in this complex area. Such efforts are vital, not only at the state and local levels, but also at the national level. The quicker you see it, the faster you move, the lesser the problem.

Recognizing this, the Department has supported and pursued a number of multidisciplinary approaches, including the following. In the late 80s, the Department began funding the Triad program, a collaboration of AARP volunteers, the National Sheriffs’ Association, and the International Association of Chiefs of Police. The goal of Triad, now present in 730 counties, is to reduce victimization of older people, especially by street crime. In 1998 we established five elder fraud prevention teams composed of AARP volunteers and federal, state, and local law enforcement officials, to educate older consumers about scams. Our Office of Justice Programs has awarded grants to train lawyers and victim advocates about elder abuse, to support technical assistance on domestic violence in later life, and through its formula grant programs to support services for victims of elder abuse.

Since 1999 our Nursing Home Initiative has sponsored cross-training for more than 1,000 federal, state, and local law enforcement, regulatory, social service, public safety, and health care professionals. We also formed multidisciplinary state working groups to provide infrastructure and focus on these issues at the state and local levels, and we plan to continue our regular productive interagency coordination with the Health Care Financing Administration and the Office of the Inspector General on case and policy issues.

Earlier this month, the Department sponsored a multidisciplinary roundtable discussion among health care, social service, and law enforcement professionals about medical forensic issues related to elder abuse and neglect. It is very difficult to prosecute a case or to intervene or to know what the trouble is if you can't identify what the injury is or what the harm is. "She fell out of bed." The good forensic physician can tell you she didn't fall out of bed; that's a blow that caused that injury.

We have got to have the capacity both for intervention and for prosecution, to be able to prove what happened before we can take effective action in terms of the criminal justice system.

Community advocates also have the potential to play a key role in advancing elder justice. For example, those working in the Senior Corps, the Corporation for National Service, are a tremendous resource. The Corporation for National Service has collaborated with AARP in a demonstration program called Experience Corps for Independent Living, to promote independent living for older persons, provide respite services to caregivers, and supplement the efforts of professional providers.

Older volunteers such as these help prevent elder victimization. With proper training, older Americans can recognize and facilitate interventions when victimization appears to be occurring.

Our elders have so much wisdom. She, my mother, put a sign over where she sat that said, "Treachery and old age will overcome youth and skill." I said, "Mother, don't you mean wisdom?"

(Laughter.)

Whether it be wisdom or treachery, they have so much to give if only we can ask and make simple arrangements that can facilitate what they do.

Other exciting collaborative approaches are being used by some of our medical schools, where geriatric teams are working with Adult Protective Services and others to provide clinical care, multidisciplinary training, evaluations, interventions, and, where appropriate, referrals to law enforcement where elder abuse or neglect is suspected.

Community policing is another very valuable tool that can be used. You get a police officer that

knows the neighborhood, suddenly realizes that Mrs. Jones hasn't been out, he waved at her, but there's some pattern that's not right, he can intervene or knock on the door or a call to Mrs. Jones' daughter. Or sitting with Mrs. Jones on a door stoop on an afternoon watching the sun go down, he can learn. He can hear the tone. If he's properly trained, he can sense the depression setting in and make recommendations to Mrs. Jones' daughter to do something about it or, if we got ourselves organized right, call somebody, if Mrs. Jones' daughter lived halfway across the country, to make a difference.

But sometimes the appropriate course is going to be tough prosecution, and when I talk to people they say, "That's right." And then when I tell them, but there are difficulties: "Yeah, you're like those other prosecutors; they say it's impossible to prosecute those cases." It's not impossible to prosecute those cases. I've done it, but they are very difficult.

We have got to remember, when we get into the prosecution we are in a situation where we've got to prove that case beyond and to the exclusion of a reasonable doubt. We have got to be able to prove, not just we think he did it, not just we think she had a blow rather than a fall, but proof beyond and to the exclusion of a reasonable doubt.

So rather than berate prosecutors, we've got to make sure the prosecutors have the tools in terms of forensic expertise, in terms of witnesses skilled in interviewing elderly people, and in terms of prosecutors who have the same skills to make a difference. But it is vital, absolutely vital, that we not shy away from pursuing the hard cases.

The Department is strongly committed to pursuing cases against nursing homes and other health care providers under the False Claims Act and the Civil Rights of Institutionalized Persons Act where failures of basic care lead to profound malnutrition, pressure ulcers, and other harm. These cases raise novel and complex issues, particularly where there's financial distress or the potential for nursing home closures. We will continue coordinating closely with the Department of Health and Human Services and others to fashion remedies that balance enforcement goals, recouping lost funds, and punishing and deterring wrongdoing with the public health goals of protecting today's and tomorrow's older citizens.

Something else we can do. I have discovered when you go sometimes to a community they will say, "We just can't do it; we've tried." The best thing you can show them is something like what they're trying to do that worked, that has a track record, that's overcome the same obstacles that they are faced with. We've got to organize ourselves so that we show nursing homes how you can run a good nursing home or a good long-term care facility the right way, providing appropriate service at a price people can afford, in a humane way. It's possible, but we've got to show the best practices to make people believe that they can do the same.

We've got to develop a comprehensive, coordinated, well-funded national plan to prevent elder abuse in the first place, to pursue it correctly if it has to occur. But we don't have to reinvent the wheel. At the program on medical forensics, it was extraordinarily helpful to have a pediatrician who was an expert in forensic issues there. We can learn so much from one case to the other.

I really think that this whole effort is about defense of the human spirit. There is nothing so wonderful as an old person talking to that child and telling them what it was like to grow up long ago, when there were not all the things that we have now; to tell them what it was like to go fishing in a stream or to go scuba diving when they got older.

We've got to make sure that this nation is not just focused on its future, but on its present, the present in terms of the remarkable human spirit, the wisdom, the greatness of older people. They will overcome if we give them half a chance.

(Applause.)

**MARY LOU LEARY:** Thank you, Ms. Reno. As you know, we have a number of teams who will be reporting to you this morning and I'd like to call the first team. We'll go in this order: it will be South Carolina, Nevada, New Hampshire, Yakama Nation, Texas, Montana, Northern Cheyenne, and then we'll hear from the Tribal Caucus. So if we can hear from the representative from South Carolina please. And that is Catherine Christophillis. She's the Director of Elder Abuse and Adult Protection in the Office of the Attorney General. And I should tell you because we have a five minute rule here, I'll be "refereeing" and I'll hold up my pamphlet when you have a minute left.

**ATTORNEY GENERAL RENO:** Okay. If she's right in the middle of something can I ...?

**MARY LOU LEARY:** You can do whatever you want.

(Laughter)

**CATHERINE CHRISTOPHILLIS:** Thank you for this opportunity. It's truly an honor to be recognized. I would also like to thank Randy Thomas from the Criminal Justice Academy, Jeff Moore from the South Carolina Sheriff's Association, and Jennifer Aldrich, the [Assistant] U.S. Attorney here as part of our team. South Carolina's ongoing collaborative efforts include a legislatively mandated adult protection coordinating council which has conducted interdisciplinary training, developed a training manual, and facilitated development of memorandums of understanding and agreement to improve system response. At the present time we have a state-level financial exploitation team and a multidisciplinary committee to study system responses for facility investigation. South Carolina also has developed a medical protocol for abuse and neglect cases. Strategies that we helped develop as a result of this symposium include specific recommendations for legislative change as follows. First, to improve our banking reporting for financial exploitation modeled, after the seminar I went to, from Oregon statutes and training kits. We would also want to strengthen how our powers of attorney are administered to encourage accountability, modeled after the Illinois statute, which I heard from. Also, we want to allow law enforcement to freeze assets, recover victim assets. We will establish a fatality review team. We will add a victim representative to our adult protection coordinating council. And we will contact our medical community to develop multidisciplinary teams to address medical issues. We will ensure that our mandatory criminal domestic violence statutes include elder abuse training, and we will establish emergency shelters. Our biggest challenges in South Carolina are our resources, including the time, the people and funding, educating our judges and prosecutors, lack of public awareness and protecting our victims through education, and making elder issues part of the community policing and community prosecution environment which exists in South Carolina. Our biggest assets are our strong leadership through the adult protection coordinating council. We have an excellent statute in our omnibus adult protection act which was passed in 1993, which includes powers for

investigative entities of APS and the Ombudsman including subpoena powers. We have enhanced penalties. For example, it is a 30-year felony in South Carolina if you cause a death of an elder by abuse or neglect. We are a small state, which is an asset because we are geographically close to each other. We have established personal relationships between our agencies and we trust each other. And we have a special unit in the attorney general's office that was established a little bit over a year ago, and I, as that prosecutor, have been able to reach different communities in our state. In our first case we prosecuted, we assisted a small town in the state of South Carolina where a 64-year-old vulnerable adult was financially exploited; she lost over \$350,000 on the pretext of home repairs. From the attorney general's office I was able to work with the local town police in investigating and prosecuting that case. The jury in a trial convicted the defendant of 15 counts of financial exploitation. He had used all this woman's money for crack cocaine. She will never, unfortunately, get it back, but the judge sentenced the man to 41 years in prison which was an extensive sentence—the greatest sentence that we've had in this kind of area in South Carolina's history. The woman, the victim, was reluctant to testify, but did testify and she couldn't hear through the whole trial, but she sat through the whole trial and at the end when the defendant was convicted and sentenced she walked out of the courtroom together with me and said, "Well, I guess he won't be bothering me anymore." So that was a great feeling and we are just honored to be here. It's been a very good learning experience for our whole team and we look forward to going back to our state and accomplishing the goals that were set forth at this symposium. Thank you.

(Applause.)

**MARY LOU LEARY:** From Nevada. Bonnie Brand from the Office of the Attorney General.

**BONNIE BRAND:** Good afternoon, Attorney General Reno. It is an overwhelming pleasure to be here and I thank you greatly for putting this together. Our entire team is grateful to you and we have had a wonderful and enlightening experience. Most of all it is just wonderful to be in a room full of people who are impassioned about helping the elderly as I have been for a long, long time. We do have a number of strengths in our state. As some of you may know

we're the fastest growing state in the nation and because of our lovely weather in the south it's becoming quite a retirement mecca. So these issues have been important to us for quite some time. In 1996 we made an Elder Abuse Action Plan, bringing together all sorts of people including industry people as well as government people, and law enforcement and social workers as well. And that has continued on with an annual Elder Abuse Council Meeting that we have. We also have a law enforcement protocol, which was entered into with the major law enforcement people in our state and that includes an investigatory plan and how the social workers will work together with law enforcement. We have been doing the multidisciplinary thing for a long, long time and the people here, we all know each other, we're all in communication and we're thrilled to death with e-mail because we're going to be able to do all these things without saying it twice or three times. A couple of the important things that we intend to do as a result of this is to contact our statewide associations. For one thing the sheriffs' and chiefs' associations will hear from us. We need more reporting from their offices. Our aging division needs those statistics in order to get the money that we need from our legislatures, so we need that law enforcement reporting. We have a very strong conviction that there's a whole lot of reporting going on that doesn't come to Aging Services, it doesn't come to our attention. Another thing we plan to do is contact the Nevada League of Cities and the Nevada League of Counties; we need help from those levels to publicize this and to get their help with implementing prosecution and training for law enforcement. We did do some wonderful training, we got some legislative money—\$60,000—to produce some videos and we used movie stars to do it—Vicki Lawrence and Bob Conrad from *Wild, Wild West*. And those videos have been sent out to law enforcement and there's a quiz that goes with it so they get postcredit for watching that and for taking their quiz and succeeding. Lastly we came up with an idea that we would like you to consider and that is for publishing a nationwide resource for all of us to know the resources that all of us have. I've just mentioned two videos that we have and at this conference I've heard that California has a pretty good law enforcement video training program and if we could have sort of a resource directory that would tell all of us who has expertise in what area of law, I think it would be very, very helpful. And again with e-mail I think we can keep each other

abreast of important cases and breakthroughs and ways to help our prosecution of these cases. We know prosecution is difficult and one of the things we've done in our state is pass a civil law that allows for double recovery for civil cases that are won in the areas of elder abuse, neglect, and exploitation. And we're starting to see some of that because the proof level is lower and the cases can be won more easily. Lastly we'd just love it if we could have a copy of everybody's questionnaire because we think we would sure learn from that. So we thank you so much for putting this together and for coming to speak to us yourself.

**ATTORNEY GENERAL RENO:** Thank you.

(Applause.)

**MARY LOU LEARY:** Thank you Bonnie. We will be providing copies of the questionnaires—we'll find a way to put it all together and get it out to all of you because they were extremely, extremely helpful. From New Hampshire, Ann Butenhof, from the New Hampshire Legal Assistance Office.

**ANN BUTENHOF:** I'd like to thank the Department of Justice and Department of Health and Human Services on behalf of New Hampshire for hosting this conference and sponsoring us to be here—providing the cost of our way certainly encouraged us to have good participation. Our New Hampshire team is composed of representatives from our Department of Health and Human Services, our attorney general's office, local law enforcement, as well as the legal services program. So it's pretty wide representation. To give you some background, New Hampshire has many collaborative efforts that are currently in place, from reverse boiler room efforts to drafting legislation on mandatory bank reporting and strengthening adult protective laws. We have an active Triad program. We have ongoing community education related to consumer fraud issues and an innovative aspect is our quarterly meetings of Adult Protective Services administrators from six states in our region where everyone can learn about initiatives in the neighboring states. Despite these ongoing partnerships we're recognizing that our efforts have been quite fragmented and we were really struck at this conference by, "Boy, what if we did something very similar back home?" And so we proposed that we really need to get all the players at the same table and have a

conference very similar to this. We want to raise the awareness of the emerging issues in this area and to encourage multidisciplinary collaboration. We believe that for this really to be successful in New Hampshire that we would like to have leadership from the very top, so part of our plan was to approach our governor to get involved and we believe that the time is right for this in our state. To plan a symposium similar to this in New Hampshire we would use a collaborative model in the planning. I would want to involve elder consumers. We have many organizations who work with elders; we'd like to include the volunteers and elder advocates. Cosponsors would include Adult Protective Services, the AG's office, the Governor, AARP, Legal Services, and I'm sure we may have a couple more sponsors as well. We have envisioned two primary goals of our symposium; one is to create a statewide consortium relating to all elder abuse issues. This is important because we do have task forces and different regions of the state that are doing very good work, but it's not a statewide effort and so we'd like to make this statewide, and to have task forces that come out of the consortium that would be working on specific areas of their expertise. Our second goal would be to create a coordinated statewide education plan. As I mentioned, we do have ongoing education taking place; we'd like to see it more coordinated and make sure that it's ongoing and repetitive. Our biggest challenges are funding—that's not surprising—and our fragmented elder advocate network. Our strengths are that we have many organizations in New Hampshire that are involved in elder advocacy. We have a lot of strongly committed people. We're a small state—we think that is a strength similar to South Carolina—and we have many strong volunteer organizations. So thank you for allowing us to make this presentation.

(Applause.)

**MARY LOU LEARY:** We have a number of tribes represented here today. We're going to hear now from the Yakama Nation, from Anna Ward who is the Deputy Director of Justice Services.

**ANNA WARD:** Good afternoon, Madam Attorney General. I'd like to recognize our team: our Tribal Councilman, Clifford Moses; Tribal Councilman, Leo Aleck; our Chairman of our Yakama Nation Elders Advisory Board, Joe Sampson; the Director of Area Agency on Aging, Arlene Olney; our Police

Commissioner, Jonathan Whitefoot. We appreciate the opportunity to be here and for us to speak. The Yakama Nation is located in Toppenish, Washington, and we currently have a Tribal court system and police department that the people have access to for reporting incidence of abuse, theft, mistreatment by family and caretakers and that can assist in the protection and efforts to provide security and safety to elders in their living environments. In addition, the Yakama Nation has the long-standing Area Agency on Aging Office (AOA) and we are service area 10, and within that we have an active Elders Advisory Board and Advocates that address the complex issues of our aging population on the reservation. They involve the IHS—Indian Health Services—domestic violence program, mental health, and they work with outside agencies such as APS, AARP, and People for People in ongoing discussion towards the education and development of ways to protect the elders, their interests, their right to a better life. The Yakama Nation has adopted a strategic plan, which addresses the need for elder issues and the adoption of an elder abuse code. Currently, we are serving the elders and we need to work on the redevelopment of a comprehensive elder abuse code that deals with criminal and civil penalties. We need to establish an elder review board that includes a comprehensive team of personnel that deal in those issues. We want to provide for continued education of service providers to improve the quality of the courts, the prosecutors, the judges, the guardian ad litem advocates, and social services for elders. We want to utilize the courts, newspapers, AOA, Indian Health Services, to provide educational forums to educate with articles, newsletters, brochures on issues such as where to get help, how to get help, what their rights are, and what to do when they realize that they really need help, have an opportunity to participate in a Native American Elder Abuse Conference where we can share codes and issues relative to Indian Country. Our biggest challenge is jurisdiction of the Yakama Nation relative to the protection of the elderly from abuse by non-Indians that live on our reservation. We have a challenge for the need of money and qualified human resources allocated to those kind of programs that are necessary to assist the elders. We have the need for a complete and comprehensive code adopted by Tribal Council and presented to the General Council. Our biggest asset is that we have a Tribal Council supportive in the revision of the Elder Abuse Code and a willingness

to work with the codification of diverse and comprehensive issues to protect the elders and their families. The Tribal Courts and the Police Department are willing to exercise jurisdiction on behalf of the elderly for the protection of their rights, dignity, and the protection of their interests. And we have an Area Agency on Aging Program that is established and provides services to the elders in the community. Thank you.

**MARY LOU LEARY:** Thank you.

(Applause.)

**MARY LOU LEARY:** And from the state of Texas, Carmel Dyer, who's with the Baylor College of Medicine.

**CARMEL DYER:** Good afternoon, Ms. Reno, and other dedicated interested parties in the room. There are nearly 20 million elderly people in the state of Texas. We have the third highest number of nursing home beds in the country. We have an ethnically diverse state. There are over 254 counties that are both urban and rural. It takes 12 hours to drive across the state from end to end. Or as we say in Texas we have miles and miles and miles of miles.

(Laughter)

So there you see some of our challenges—geography and population. Also we felt that a challenge was a need for more public awareness, but then of course, once the public is more aware, what interventions are we going to apply once there are more cases? Certainly lack of research we identified as a challenge. The need for federal legislation and also, oh yes, funding.

(Laughter)

Our assets are the commitment of the involved organizations, including law enforcement, medicine, and social services. We have a strong state APS that is centrally located and organized with centralized training that is standardized. We have a central database which has been a repository of information and the first publication on that will be in the fall, next year. We have good working relationships among the organizations I described. Our ongoing collaborative efforts include a lot of initials, there's Triad, there's FACT, the Financial Abuse Cessation Team, there's SAF-T, the Seniors Against Fraud in Texas, there's CRCG, Community Resource Coordinating Groups,

which help HHS deal with and help Alzheimer's patients. There's APS collaboration with the DHS long-term care regs and services, MHMR advocacy's all working on institutional abuse. There's a TEAM Institute, which is our medical geriatrics team that's collaborating with the Adult Protective Services and based on the recommendations of Olga Trujillo from OVC we are now beginning to work with law enforcement. There's also a banking project that involves the APS, the AG offices, the Texas Department of Banking and other financial entities, modeling that which is being done in California, Utah, Oregon, and Massachusetts. But now what steps are we going to take from what we have learned here at the conference and this opportunity to meet? One, we're going to develop a pool of experts as a resource for law enforcement. We're going to hold a Texas summit to pull together interested parties. That's going to be sponsored by Triad and the TEAM Institute. Mark Jeffers is going to organize it and it will be in the first week of December.

(Laughter)

We hope to expense TEAM Institute with other entities so there's more funding. We have such a big space so we have vowed to use more telemedicine and teleconferencing. And, of course, we're going to seek different ways to fund research on the issues that we have all identified that are so very important. We're grateful for this opportunity to be here today. The entire conference has defined the word collaboration. And we are committed to go back to our state and implement the things that we learned here, take action on our action items, and hopefully turn those miles into smiles for the vulnerable adults in Texas.

(Applause.)

**MARY LOU LEARY:** Thank you. And Mark, if you need to leave early so you can get going on that conference .... You've got a lot of work to do. Minnesota—we'll hear from Barbara Doherty who is the Adult Protection Consultant at Department of Human Services there.

**BARBARA DOHERTY:** Good afternoon. I'd just like to echo the thank you from all of the other speakers to those who hosted this conference for bringing us together. I was chatting with Lori earlier and I said I think we got picked just because we said our priority was to go back and train the judiciary.

(Laughter)

So we've decided we've got a big task ahead of us. Our group has been meeting as an interagency focus group since the December 1999 conference hosted by DOJ in Iowa, and it's a very broad-based team representing the state attorney general's staff, the U.S. Attorney, a HCFA representative, our state long-term care ombudsman, the Department of Adult Protective Services at the state level and the local level, and we have really focused in on training and working together to coordinate that training as a key effort. And we do seriously recognize that within our state the next area that we have to approach is, in fact, the judiciary and the appeals refs who do hear the cases. We've made some progress, we feel, in terms of cross-training with law enforcement and regulatory inspectors in terms of cooperating on those investigations and with county APS, but we have not yet made any significant inroads into the judiciary and we realize that training them at their conferences, on their turf, with their colleagues will, in fact, be our hopefully successful contact with that group. We have been quite successful in coordinating training to date. As I said before, there's a specific statute line for the Adult Protective Services Law in Minnesota that mandates that training continue on an annual basis with the named lead agency investigators and law enforcement. But that does not include, as I have said earlier, the judiciary, so we've identified them as the next group that our collaborative task force will work with. I don't believe we are going to say we'll do this in December, but we will definitely do it in the year 2001. And again I thank you for the opportunity to come to the conference. We've all learned a lot. And if you'd like to come to Minnesota some time in the year 2001 and help us with this task we'd be glad to invite you.

(Laughter.)

(Applause.)

**MARY LOU LEARY:** Thank you. And from Montana, Rick Bartos, who's Chief of Protection Services in Montana.

**RICK BARTOS:** Madam Attorney General, on behalf of the Montana delegation, again we extend our appreciation for the opportunity to be here. We have representatives from the Montana Attorney General's Office, the U.S. Attorney's Office, the state

Insurance Commissioner, Adult Protective Services, the Medicaid Fraud Control Unit. We know each other very well. We're a small state in terms of population so when we have to take on elderly issues we wear multiple hats and we do our best to collaborate as much as possible. There are a number of ideas that we have learned through this conference, and thoughts that really enhance what we have been doing in Montana. There's a Billings Chapter on the Prevention of Elder Abuse, which is a nonprofit organization and has just released their financial exploitation packet following the examples of Oregon and Massachusetts. We have a very proactive and very active Department of Commerce, Telemarketing Fraud Unit. The State Insurance Commissioner has bent over backwards with his staff to help collaborate in these areas. We have a Medicaid Fraud Control Unit that is very closely aligned with Adult Protective Services. We know that as a result of the Los Angeles Conference on Nursing Facilities, again sponsored by the Department of Justice, there has been continued collaboration between the U.S. Attorney's Office and Adult Protective Services teams. It's unheard of to have representatives of the U.S. Attorney's Office meet almost on a monthly basis with Adult Protective Services teams and that is very important to link the federal and state government. But we went through some self-examination as we heard the various presentations here today and we do recognize that we have some limitations. Montana has seven Indian reservations; each reservation is governed by tribal government. Each tribe of (inaudible) sovereignty is an important component of their existence. There are no state collaborative efforts or at least components that help to bring the various tribal organizations and the state together in terms of Adult Protective Services. Consequently a lot of Adult Protective Services' and our response to elder abuse, exploitation, and neglect is done on a case-by-case basis, on an individual basis by individuals such as Adult Protective Service workers in collaboration with Indian Services, social service workers, the local deputy sheriff, local nonprofit organizations in each area. Describing briefly the strategies that we're going to develop as a result of this conference and our self-examination is that we will invite the tribal, APS, and social service personnel to state training. Attempt to collaborate again more and more of the importance of knowing that we are one people and elder abuse is the same whether it's on the reservation or off the reservation. We are going to

request the assistance of the state's Indian Coordinator to assist us in bringing these individuals together for purposes of providing training. We're going to continue to serve all persons on the Indian reservations if a referral is made, realizing that individuals that live on the reservation are also citizens of the state of Montana and we can let the jurisdiction issues kind of work themselves out; we're more interested in protecting the individual. We're going to approach the Montana/Wyoming Tribal Council, Chief Council—it's a group of 11 or 12 Tribal Chiefs who meet periodically to talk about common issues and attempt to seek some consensus on broad ranges of abuse, neglect, and exploitation. What is our biggest challenge, well there are a number of challenges, and again I won't repeat those that you have heard today, but like Texas, Montana is the fourth largest geographic state in size. Our population is less than 900,000 people; in fact, we have more Elk than we do people in Montana.

(Laughter.)

We have what we call the Eastern Region in Montana composed of 17 counties; that territory is larger than the size of Delaware and Rhode Island combined. In that one area there are only 2½ social workers dedicated to Adult Protective Services to serve that entire area. It is not unusual and it's the average mileage per one Adult Protective Services worker to travel 15,000 miles a year in order to provide social services. Our biggest challenge is tribal sovereignty and state jurisdiction issues as they relate to criminal prosecution and investigation; that is sometimes way above the heads of our social workers or the people that are directly involved in the protection of human beings. Many times that gets in the way. What is our biggest asset? Our biggest asset is the willingness of the state, the attorney general, the State Insurance Commissioner, the U.S. Attorney's Office to work together. We see opportunities of inviting individuals from the tribes as well as the state to help collaborate. We have a big asset that everybody has intended and continues to intend to cooperate as best as we can with the resources we have. And again, we extend our appreciation to this conference and on behalf of Montana and the tribes. We extend our appreciation for you to visit the Northern Cheyenne Tribe this last summer and have an opportunity to see eastern Montana. We will be following now with Jackie Tang, who is the Director of Social Services for the Northern Cheyenne Tribe.

**MARY LOU LEARY:** Thank you. Great basketball program.

**JACKIE TANG:** Good afternoon, my name is ... oh, he already told you my name.

(Laughter)

The Northern Cheyenne Tribe has one ordinance in the Tribal Law Order Code which deals with elderly exploitation. This ordinance has never been enforced. There are nonexistent laws to protect the elderly. Tribal prosecution and Social Services sometimes handle financial exploitation. Social Services sometimes become the payee to monitor the elderly and sometimes the disabled income such as Social Security payment, SSI, and lease payments. Abuse and neglect at home—any abuse or neglect at home—is usually reported to Child Protective Services since there is no Adult Protective Services on the reservation. Child Protective Services sometimes reports to the public health nurses; CPS and PHN sometimes conduct investigations together. Family members are referred to other agencies to assist them in their care of the elderly. Institutional care and abuse complaints are usually referred to the supervisor of the caretaker. We don't have an institution, but we have an elderly complex, which houses the disabled and the elderly. Strategy: to begin looking for funding for an adult protection services position. Begin a local team of professionals to discuss and implement a referral system and how to handle the referrals. Referrals will include financial exploitation, abuse, and neglect at home, medical neglect, institutional abuse and neglect. As a team they will decide how each referral should be handled and what services are to be provided. The team will also create tribal laws to handle elderly abuse and to define it. The team will also develop a tracking and monitoring system. Collaboration with other agencies will be a challenge since the elderly are one of the most important resources to the Tribe. I don't know if they'll let us do it. Funding is limited for Indian tribes, especially for our Tribe—we don't have funding. I think we just have limited funding from the state to feed the elderly; I don't know what other funding we have. Educating the public will be challenging due to the public's reluctance to try anything new. [Another strategy is to work] with the Tribal Council in implementing a law on mandatory reporting of elderly abuse. Our Administration, Tribal Administration, has just changed—elections are

coming up next week and hopefully we'll get people in that will help us enforce the ... work with our idea here. The Tribe, there's only two of us from our Tribe: Joanne Wolfblack, she's with the Elderly Program; and I'm with the Social Services. So we're the only two from the Northern Cheyenne Tribe and hopefully we'll go back and ... well, we will go back and try all this and hopefully, people will listen. Thank you.

(Applause.)

**MARY LOU LEARY:** Thank you. And Ms. Reno, last night, with some assistance from Norena Henry who you know from Office of Justice Programs, a Tribal Caucus got together. They didn't have enough working all day from 8:15 a.m. till 6:30 p.m. here in conference—they met until after 10:00 p.m. in a tribal group and they have some recommendations. So we will be hearing from Charlotte Bradley who's a Zuni Pueblo Tribal Council member.

**CHARLOTTE BRADLEY:** Attorney General Reno, Keshi, this is a greeting from the Zuni Pueblo. Last night we met; there were about 10 tribes and some state representatives that met to discuss the recommendations that would best assist our Indian tribes. At this time I'd like to recognize the group, if you would all stand, who were in that caucus last night.

(Applause.)

The group has asked me to present to you a list of 10 action items. These action items will assist Indian tribes in our response to continue to protect and care for our elders. They also will ensure the accountability of the offenders. Briefly the action items listed focus on: (1) increased resources, which is the funding; (2) interagency collaboration; (3) training; (4) tribal cultural development and implementation; (5) confidential testimony; (6) traditional mediation; (7) national summit for Indian Country; (8) Indian family violence and elder abuse; (9) interagency agreement; (10) data collection.

Our goal is to ensure safety of our community members, especially our tribal elders—they are the keepers of our religion, history, and our culture. Here is the list of items that we had presented. Lastly, I would like to thank the Department of Justice and the Department of Human Services for putting on this conference. It really opened our eyes and we learned that there are so many resources that we could

plug into and develop—our tribal codes and all the other regulations that we need to get together. So we want to thank those that help put on this conference. Thank you.

**MARY LOU LEARY:** Thank you.

(Applause.)

**MARY LOU LEARY:** Yes. (recognizing participant)

**LEO ALECK:** Good morning. I was a member of that caucus meeting last night ... all the Indian tribes representing their sovereign nations. Always address an honorable representative of the United States government as a trust responsibility person. And also, that these persons will honor the treaties that were made with the various Indian tribes. And lastly that the government-to-government consultations, in this regard, with our elderly people, need to be at least addressed in the formal terminology of government to government as well as the honoring of the treaties. And once again, we want to thank the Honorable head law enforcement person of these United States. Thank you very much.

**ATTORNEY GENERAL RENO:** You're quite correct. And the most important thing for me is early on I decided that we talk too much and that we should go listen to our Native American friends with whom we have a government-to-government relationship, and for whom we have indeed a trust responsibility created by treaties. In Albuquerque, I listened in what has to be the most extraordinary day-and-a-half that I've had as Attorney General. And then the second listening conference was, of all places, Harvard Law School. And then there was one in South Dakota. These have been immensely important for me and I just thank all the tribal representatives for being here and want to tell you that in whatever time I have as Attorney General and after that, both with my Miccosukee friends in south Florida and those friends I have met across the country, I'm going to try to do everything I can to see that the United States complies with its trust responsibilities. Thank you.

(Applause.)

**MARY LOU LEARY:** And now we'll open it up for questions, suggestions, and discussion. Yes. (recognizing participant)

**LAURA MOSQUEDA:** Once a year I take the skeleton out of my closet. My name is Laura Mosqueda. I'm a geriatrician with University of California-Irvine. I have four suggestions that I'd like to present based on what I've heard here and in previous forums. One: I think that the Department of Justice should have a section on elder justice, just as you have a lot of funding in agencies related to child abuse. And I think the elder justice section needs to be appropriately funded and it needs to be truly supported by the people in power at the DOJ.

(Applause.)

Two: I'd like to recommend a national task force that will drive and guide a national agenda on elder abuse. And that this task force really should include people from justice, social sciences, medical sciences, etc. Three: I think there needs to be increased federal funding for research from all agencies that have an interest in this area; that includes DOJ, CDC, NIA, etc ... because the science must catch up with the issues in elder abuse and we're very far from that. Four: I think that with your help and leadership we really need to raise public awareness about this issue. The citizens of this country should be outraged and we're not. Thank you.

(Applause.)

**MARY LOU LEARY:** Are there more questions out there? Here's your chance.

**ATTORNEY GENERAL RENO:** Can I ask some questions?

**MARY LOU LEARY:** You certainly may.

**ATTORNEY GENERAL RENO:** Go ahead sir. (recognizing participant)

**DAVE KESSLER:** My name is Dave Kessler and I'm with the Ohio Attorney General's office and I just want to play on the woman's comments which were right on. My prior career: I retired as a Police Officer from the State of Georgia. To be quite frank with you, there are so many law enforcement people in this country and the people in this room, we have to fight to do the right thing because the people at the level that can make the decisions aren't really attuned to what the problem is that we're dealing with when we go into the homes, or we go in the nursing homes and we see the devastation. Now one thing we have

to do is scales of justice—they should be like this with these types of offenses. Unfortunately, we're not recognizing them to be equivalent to our rapes, our robberies, our violent offenses, because when you sit with these elderly and you interview them and you take the time to do it right you don't get eye contact because of the shame, the embarrassment, humility. Their self-esteem is stripped. You can't put a price and label these as property crimes. We have to train our police officers, our first-line level guys and women, to go out to the home, go to the nursing homes because they're not recognizing these as the offenses that they truly are. They're violent offenses. You may not see the bruises, you may not see the blood, and particularly financial exploitation. They tell me "Mr. Kessler, I would much rather have been knocked out, beat up, my purse stolen, my wallet stolen than to have my dignity stripped." And until we recognize that these are crimes against persons, rather than equivalent on a police report where theft occurred; we have to realize that that's what we're dealing with. And there's very few people in this country—and I've had the opportunity to go around and teach on this subject—the Paul Greenwoods of San Diego, the Don Hendersons of Atlanta, Georgia, we have to take those people who say bring it to me, I want to prosecute it, I want to handle it, it's just as important as child abuse, it's just as important as the rape. And until we bring that awareness, whether it's the prosecutor, the law enforcement, or the judges, we have to do that to make it successful. Thank you very much.

(Applause.)

**ATTORNEY GENERAL RENO:** I would be interested ... one of the things that I have not heard as much about is how we organize this nation to deliver services to elder people so that they can continue to remain more self-sufficient than they have. Does anybody have any program under way or any knowledge of private sector efforts that are successful? Skeleton?

**LAURA MOSQUEDA:** (inaudible) Well, I think that the program that Dr. Dyer has at Baylor and a program that I have at UCI where we have ... we do a lot of house calls and we work closely with APS in doing house calls so that we can help with assessment. We're just collecting the data on it right now, but we at least believe, from our preliminary look, that we're helping keep people at home safely. That by working

with APS and law enforcement, rather than taking the elder out of the home, we get the perpetrator out of the home. And find other ways to get services so that the elder remains there safely and we believe that we're helping to avoid institutionalization.

**ATTORNEY GENERAL RENO:** What ... yes. (recognizing participant)

**JOANNE WOLFBLACK:** Hi. I'm from the Northern Cheyenne Reservation and we are the only Indian reservation in the whole United States that has a program called Congregate Housing Services Program, which we are very proud of. That's a program that has what Jackie had mentioned—we have a residential complex that houses elderly only. And we give them a minimum amount of services, which allows them to remain out of institutions, which is a meal service, housekeeping, and personal care. It started initially as a demonstration project with our Tribe 10 years ago and is in the last year of funding. And hopefully with the new Administration we'll get funded again because that has proved to be something that has given our people a will to live longer rather than send them off to a nursing home, which we don't have, which would be off-reservation and we can keep them there at home and that has worked.

(Applause.)

**ATTORNEY GENERAL RENO:** We'll take that person, and then you, is that okay?

**ANN MASTRO:** My name is Ann Mastro. I'm from the New Jersey team. New Jersey has a very large population of elderly and in Ocean County where I live, 27 percent of the population are 65 and older. We identified that early identification of at-risk seniors could only be done by training law enforcement. And we've come up with a program called Safe Outreach for Seniors, where the officers are trained to identify seniors that are living at home or possibly driving that should not be alone, living alone. The officers are trained to look in the refrigerator, they're trained to look at the clothing to see if they've lost weight, they're trained to ask judgment questions. And in doing so we've been able to identify dementia extremely early on, involve families, get Adult Protective Services, get outreach involved so these people are able to live at home with dignity and quality of life. Thank you.

**ATTORNEY GENERAL RENO:** Let me ask you this. Do you think healthy elderly who want to be involved could learn the same means of identification?

**ANN MASTRO:** Yes, I do, because a lot of neighbors, they try very hard to protect that other neighbor who may be in the beginning with dementia, so therefore they cover for them, they do the shopping for them. But I think if they understood that they were doing more damage [by doing this] rather than enlisting the help of some of the outreach programs that are available [like the one] in Ocean County, I think it would be a wonderful program.

**ATTORNEY GENERAL RENO:** Thank you.

**ANN MASTRO:** Thank you.

**MICHELLE LUJAN-GRISHAM:** I'm Michelle Lujan-Grisham and I'm the State Agency on Aging Director in New Mexico, and I think that you're right on in terms of looking at preventing the kinds of problems that we've been discussing for the last day-and-a-half. And I think that we've demonstrated, but on a small scale, primarily through the Administration on Aging's funding stream for home- and community-based services, that you can do an effective, cost-effective, aggressive campaign for in-home and community-based services. But I think here are still the barriers. One, federal policy in both Medicare and Medicaid is high and acute medical care, institutional care services—and as long as that's where all of our money is invested, lower cost home- and community-based investments are going to be scattered, depending upon the strength of a particular state. Now I think that the U.S. Supreme Court decision in *Olmstead* is going to help, but it's not going to do anything to address the medical model preference in Medicare. And I think that part of that stems still from a sense in this country (it's patronizing) that older people are clearly going to be safer in hospitals and nursing homes and institutional care environments and what we know is that is absolutely not true. People fall in nursing homes and people wander away from nursing homes and people die in nursing homes from lack of care and medical neglect. And we have to change that bias. And I'll tell you something else that I believe in absolutely, that regardless what we really decide, that supporting people to be independent in their homes and communities—your economy of scale and your earlier remarks—

absolutely works because we've got competition and prices are lowered and people have more options. And to get there, let's do life-plan clinics with families so that they know about the issues for their adult parents and grandparents and help people plan. It's very complicated to understand retirement, and health care and custodial care and Medicare rules, Medicaid rules. And let's not impoverish people so that they can't take care of themselves, which is the basic body of Medicaid policy anyway. I think if we do those things and you harness seniors to take care of themselves—they want to, they want to be engaged, they can help make a difference, they're a wealth of knowledge and opportunity—we can reverse this terrible pattern we have in this country to warehouse older people instead of to empower and engage them. Thank you.

(Applause.)

**ATTORNEY GENERAL RENO:** I have a concept—forgive me other lawyers in the crowd—but I have a concept that we can develop a better and more effective way of delivering services to people that is quasi-legal or legal if we recognize that there can be some areas of specialties where community advocates, who charge a fee, but a fee commensurate with the service that they're providing, and have a sufficient volume so that they can do it well. And I would foresee training people in advocacy for the elderly for planning, for services, for access, for all the questions that you raised. They would not have to go to law school; they'd get a four-year degree in elderly advocacy but they would touch on these legal issues and have training in that as well. And I think that could be a tremendous step forward. I'd like to see what we could do in terms of organizing or providing some incentive to the private sector to become better organized in the delivery of services. There are some efforts afoot in the Federal Government to develop technology that will be more ... technology to provide for safe, healthy, constructive older years. And there is just so much that we can do if we take the volume of people, the number and the increasing population and say "Hey you guys, you want a market, this is going to be your market, you better make them ... if you're not interested in it because of common humanity concerns, then be interested in it from the dollar because that's where your market's going to be."

**MICHELLE LUJAN-GRISHAM:** I think that you're exactly right. I mean these are the consumers. Whole

global economies will fail if we continue to practice health and long-term and independent living services the way in which we currently do. And there's someone in our state, I probably shouldn't do this, but to brag on her, her name is Virginia Sears and she is in her late 80s. I think she has a terminal illness and she has been advocating and teaching seniors, most people think she's an attorney. She's incredible, does legal clinics, lifetime clinics and solves people's problems so that they can obtain their living arrangement successfully and they understand about life-planning and they understand about these government benefits and they can get for free pharmaceuticals from the Pharm program. And she has a wonderful knowledge, but she's able to deliver it in a way that's nonthreatening, very empowering, and she's having real results in even the most rural settings of our state. And I'll tell you she's my role model and mentor.

**ATTORNEY GENERAL RENO:** Great. Thank you.

**MICHELLE LUJAN-GRISHAM:** Thank you.

(Applause.)

**MARY BEALS LUEDTKA:** My name is Mary Beals Luedtka and I supervise an Elder Rights Unit. And I'm not a lawyer. I used to be a nurse and I kind of do paralegal work so I kind of fit right where you are. We have a volunteer program; we include Medicare benefits counseling, ombudsman and legal advocacy for seniors, and I supervise legal advocacy for seniors with a supervising attorney's assistance. We have 40 volunteer attorneys in northern Arizona that also assist us if litigation becomes necessary. And I think it's a model program because we have 50 volunteers that are taught to be advocates in their communities. Our Area Agency on Aging, geographically, is the largest in the United States. I go from the Utah border to the New Mexico border, almost to Phoenix, over to Congress, if that means anything to those of you who know Arizona. And these volunteers are seniors. And they're seniors that are advocating for seniors, and our mission of the Elder Rights Unit is to empower seniors to advocate for themselves. It includes education, public awareness, and also, at the attorney general's office, senior advisory counsel. I hostess a local television program on senior issues as well to help educate on life-planning, on benefits, on what's available, and how can we come together. So I think that is a good model for those ideas.

**ATTORNEY GENERAL RENO:** That's great. Thank you. I think we have time for one more. Sir.

**JEFF CZARNEC:** From the New Hampshire team. I'm glad we're able to address some of the logistical efforts that we can make with regard to elder abuse, but I think I'd like to see the government become more involved in monitoring what cultural philosophy [our country] seems to be heading in. It's pervasive ageism, which is occurring in this country right now. As a father of four kids, all of whom consider me at age 42 over the hill, I'm finding that they're getting most of their cues, to be quite frank, from the media. There's a number of children's channels out there that are fanatically antiparent. They consider parents and elders as people that are either washed-up, useless and should have no attention, or pay no attention to any of the activities that they're involved in. To be quite frank, with this type of cue that they're taking from the media where in this country here, young is beautiful and nothing else serves that purpose. I'd like to see the government at least monitor some of this, the ageism that's occurring and that's extremely pervasive within the media. With regards to especially directing your attention towards the largest consumer group in this country right now which is our teens. And as a parent and I'm sure maybe a lot of other people can attest to this, there is a great deal of ageism that's occurring that is going to continue unabated at this point in time.

**ATTORNEY GENERAL RENO:** That's certainly true when you look at the television programs and see the programming.

I couldn't write fast enough to get all the points down, so I do want to get your notes and comments, and I understand that will be available. First of all, I want to pay tribute to the state attorneys general. They have been in this issue for some time now and you can see the impact in attorney general's offices across the country, and you all have done a great job.

I want to pay my respect to the tribes who are here. It is wonderful that you are here. I made the comment about the basketball court. When I was at the Northern Cheyenne Reservation, it was wonderful, and I am on the front page of the Billings newspaper with a basketball shot like that (indicating). How are the tee shirts going?

One of the points that I think is overwhelming and the message is loud and clear—we need to figure out how we can organize op-ed pieces and comments and how we can raise public awareness and put it in very graphic terms so that people will understand.

Secondly, I think your point about ageism is correct, but one of the things that I have discovered is that young people are far more idealistic than we give them credit for, certainly than the media gives them credit for. They are yearning for opportunities to help others. They oftentimes have a particular affinity for the elderly. They can be kind and supportive and they are really very special. Don't ignore young people as a source of tremendous compassionate service to the elderly.

I think we can do more in terms of training and I'd like to see what we can do in terms of distance learning, in terms of interactive video, in terms of video conferencing, and see if we can't get ourselves organized across this country in a way that provides a Web site that lists the latest training opportunities, then refers you to helpful hints to caregivers that you can follow, and then you can have resources and materials that you can follow that list the videos, that provides everything in terms of resources, expertise, training, the latest technology—all of these on the Web and otherwise available.

I think research is key. I would like to see the medical schools of the country joining with other professional schools in our university system to really focus on this issue. I think it is imperative that we figure what can be done in terms of technology, what can be done in terms of psychological and other supports.

Let me ask you one question. Is there any institute in this country that is doing something in terms of the whole approach of prevention, intervention, and prosecution?

**LISA CURTIS:** I'm Lisa Curtis with the Denver District Attorney's Office. I'm with the economic crime unit. My position in that unit is strictly to do crime prevention. We also have something we call a SWAT team approach to elder abuse, financial abuse, where our investigators immediately go out and do emergency intervention involving financial exploitation. Prosecution of elder abuse cases takes the highest priority in our unit.

**ATTORNEY GENERAL RENO:** What I'm interested in, though, is an institute, both academic and otherwise, that is developing the latest technology or finding the latest technology that's elderly friendly, that is developing the latest research in terms of geriatrics and the issues associated with it, that is collecting it and then distributing it across the nation, because I think, in addition to raising public awareness, we've got to look for something that can address—let's put it this way: There are veterinarian schools in a number of universities across this country, but there is none, there is no institute or university, that has become the specialist on these issues that we have discussed today.

Think of what we could do if we organized ourselves in that way. There would be tribally sensitive issues, there would be suggestions to the private sector as to what could be done. You could have a business school operating with some of these issues in mind.

Just don't put any boundaries on your thoughts. Let's see what we can do to really address the issue and create an economy, an infrastructure, an approach, an academic approach to the issues of the elderly that can ensure appropriate service.

One of the things I thought about in justice training is seeing what can be done in terms of the State Justice Institute and otherwise, and we will explore that—what can be done in terms of the multidisciplinary efforts through, again, the community police. I'm going to go back—I thought the points with reference to the community police were extremely important.

I've got the other notes here. I will try to do everything I can in the 3 months that I have left before I go home. I'm going to go home, figure out what I'm going to do when I grow up, get settled, and then get in my red truck and go. So, Northern Cheyenne, just wait; the red truck's coming.

(Laughter.)

But one of the things I do not intend to do is stop my concern and my interest in this area, and I want to continue to do everything I can after I leave office, because this is extremely important to me and I think we have so much to do.

I would appreciate any suggestions you have. I think we need to follow through with these symposiums with an op-ed piece and other pieces carefully placed across the country to spur concern. One of the things we might do, Mary Lou, is maybe with the state AGs, the state aging offices, have an organized effort around the country on a Thursday morning for my Thursday morning press availability, talking about the results of these conferences, talking about the demographics, talking about what can be done, and that we do not have to see what's happening.

Now, with public awareness, I suggest to you that America is far more aware of what's happening than it lets on, because there are too many people that just feel like they're at the end of their rope, that they can't cope, that they don't know where to turn or where to go. There are too many caregivers that are at the end of their rope, that don't know how to cope and don't know where to go, and they are yearning for answers. Let's provide them the answers.

(Applause.)

**MARY LOU LEARY:** Ms. Reno, thank you so much. You are an inspiration to all of us. I'd like to just take a moment to again say thank you to our colleagues at HHS who have been so helpful in this forum, including Secretary Shalala; Jeanette Takamura, Assistant Secretary for Aging; Diane Justice, Deputy Secretary of the Administration on Aging; and Carole Crecy from the Administration on Aging. I want to thank all of you for your tremendous energy and creativity. My mother will thank you also because I can tell you I have been rethinking a number of issues over the last day-and-a-half; I barely slept last night. My family will thank you for the efforts. And I hope that you will take useful thoughts, ideas, connections home with you, that you'll be in a better position to work together as catalysts and advocates for older Americans in your communities. Have a safe trip home.

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# Appendix 1



***Our Aging Population:  
Promoting Empowerment, Preventing Victimization, and  
Implementing Coordinated Interventions***

**A National Symposium Sponsored by  
the U.S. Department of Justice  
and the U.S. Department of Health and Human Services**

**The Washington Monarch Hotel  
October 30–31, 2000  
Washington, DC**

**AGENDA**

**Monday, October 30, 2000**

7:30–8:30 a.m.	<b>Continental Breakfast and Registration</b>	<i>Lower Level Foyer</i>
8:30–8:45 a.m.	<b>Opening Remarks</b>	<i>Grand Ballroom (Ballroom Level)</i>
Speaker:	Daniel Marcus Acting Associate Attorney General U.S. Department of Justice Washington, DC	
8:45–10 a.m.	<b>Plenary I–Building the Case: Why Policymakers Should Focus on Elder Victimization</b>	<i>Grand Ballroom (Ballroom Level)</i>
Moderator:	Mary Lou Leary Acting Assistant Attorney General Office of Justice Programs U.S. Department of Justice Washington, DC	
Panelists:	Rosalie Wolf, Ph.D. President and Founder National Committee for the Prevention of Elder Abuse Worcester, MA  John Rother Director of Legislation and Public Policy AARP Washington, DC	

David Baldrige  
Executive Director  
National Indian Council on Aging, Inc.  
Albuquerque, NM

Sue Ward  
Secretary, Board of Directors, National Association of Units on Aging  
Secretary, Maryland Department on Aging  
Baltimore, MD

The Honorable Andrew Ketterer  
Attorney General, State of Maine  
President, National Association of Attorneys General  
Augusta, ME

10–10:30 a.m.	<b>State and Tribal Team Discussions</b>	<b><i>Grand Ballroom</i></b> (Ballroom Level)
10:30–10:45 a.m.	<b>Break</b>	<b><i>Lower Level Foyer</i></b> (Ballroom Level)
10:45 a.m.–noon	<b>Plenary II–Financial Exploitation and Consumer Fraud</b>	<b><i>Grand Ballroom</i></b> (Ballroom Level)

Moderator: Diane Justice  
Deputy Assistant Secretary for Aging  
U.S. Department of Health and Human Services  
Washington, DC

Panelists: Jill Thomas  
Independent Consultant  
Bay Village, OH

Lisa Nerenberg  
Consultant in Elder Abuse Prevention  
Redwood City, CA

Lee Norrgard  
Senior Program Coordinator, Consumer Protection Section  
AARP  
Washington, DC

Barbara Harriman  
Inspector, Office of the Inspector General  
U.S. Department of Health and Human Services  
Washington, DC

Noon–1:15 p.m.                    **Working Lunch**                    *Grand Ballroom*  
(Ballroom level)

Introduction:                    D. Jean Veta  
Deputy Associate Attorney General  
U.S. Department of Justice  
Washington, DC

**Investigating the Systems That Protect and Care  
for Vulnerable Populations: A Reporter’s View**

Speaker:                        David Jackson  
Investigative Reporter  
*The Chicago Tribune*  
Chicago, IL

1:30–2:30 p.m.                    **Financial Exploitation and Consumer Fraud  
Workshops**

**Workshop #1: Federal and State Initiatives  
To Educate Consumers**

*Sulgrave*  
(Third floor)

Moderator:                    Lee Norrgard  
Senior Program Coordinator, Consumer Protection Section  
AARP  
Washington, DC

Panelists:                        Alexis Barbieri  
Executive Deputy Attorney General  
Pennsylvania Office of Attorney General  
Harrisburg, PA

Dan Drake  
Executive Assistant United States Attorney  
United States Attorney’s Office for the District of Arizona  
Phoenix, AZ

Robert Kurkendall  
Federal Trade Commission  
Washington, DC

Jeffrey LaGrew  
Assistant Deputy Attorney General  
Office of the Kentucky Attorney General  
Frankfort, KY

**Workshop #2: Effective Interventions  
To Address Consumer Fraud**

***Executive Forum***  
(Ballroom level)

Moderator: John Firman  
Coordinator for Research Services  
International Association of Chiefs of Police  
Alexandria, VA

Panelists: Cynthia Alexis  
Project Coordinator  
Special Emphasis on Elder Abuse  
San Francisco, CA

Faith Fish  
New York State Long Term Care Ombudsman  
New York State Office for the Aging  
Albany, NY

Marta Sotomayor, Ph.D.  
President  
National Hispanic Council on Aging  
Washington, DC

Jim Wright  
Program Director, Triad and Operation Fraud Stop  
National Sheriffs' Association  
Alexandria, VA

**Workshop #3: Innovative Approaches  
to Financial Exploitation**

***Roosevelt***  
(Ballroom level)

Moderator: Patrick Donely  
Senior Litigation Counsel, Criminal Division–Fraud Section  
U.S. Department of Justice  
Washington, D.C.

Panelists: Susan Aziz  
Vice President, Advocacy and Education Programs  
WISE Senior Services  
Santa Monica, CA

Aileen Kaye  
Program Coordinator, Abuse Prevention Unit  
Senior and Disabled Services Division  
Salem, OR

Kathleen Quinn  
Chief, Bureau of Elder Rights  
Illinois Department on Aging  
Springfield, IL

LaVerne Wyaco  
Director  
Navajo Area Agency on Aging  
Window Rock, AZ

**Workshop #4: Enhancing Prosecution  
of Financial Exploitation**

*Grand Ballroom*  
(Ballroom level)

Moderator: Newman Flanagan  
Executive Director  
National District Attorneys Association  
Alexandria, VA

Panelists: The Honorable Jane Brady  
Attorney General  
State of Delaware  
Wilmington, DE

Judith Kozlowski  
Assistant United States Attorney  
Office of the United States Attorney for the District of Columbia  
Washington, DC

Chayo Reyes  
Law Enforcement Officer (Retired)  
Proprietor, Elder Financial Protective Services  
Cerritos, CA

Audry Rohn  
Deputy District Attorney  
Ventura County District Attorney's Office  
Ventura, CA

**Workshop #5: Combating Consumer Fraud  
Through Litigation**

*Colonnade*  
(Lobby level)

Moderator: The Honorable William Sorrell  
Attorney General  
State of Vermont  
Montpelier, VT

Panelists: Jackie DeGenova  
Assistant Chief, Consumer Protection Section  
Ohio Attorney General’s Office  
Columbus, OH

David Kirkman  
Assistant Attorney General  
State of North Carolina Office of the Attorney General  
Raleigh, NC

Deborah Zuckerman  
Senior Attorney, Consumer Protection Unit  
AARP  
Washington, DC

2:30–2:45 p.m.	<b>Break</b>	<b><i>Lower Level Foyer</i></b> (Ballroom level)
2:45–4 p.m.	<b>Plenary III–Elder Abuse and Neglect at Home</b>	<b><i>Grand Ballroom</i></b> (Ballroom level)

Moderator: The Honorable Kathryn Turman  
Director, Office for Victims of Crime  
Office of Justice Programs  
U.S. Department of Justice  
Washington, DC

Panelists: Joyce Speakman  
Oakland, CA

Eva Kutas  
President  
National Association of Adult Protective Service Administrators  
Salem, OR

Bonnie Brandl  
Program Director, National Clearinghouse on Abuse in Later Life  
Madison, WI

Holly Ramsey-Klawnsnik, Ph.D.  
Sociologist/Social Worker/Marriage and Family Therapist  
Klawnsnik & Klawnsnik Associates  
Canton, MA

Sara Aravanis  
Director, National Center on Elder Abuse  
National Association of State Units on Aging  
Washington, DC

4:15–5:15 p.m.

**Elder Abuse and Neglect at Home Workshops**

**Workshop #1: Strengthening Interventions  
for Victims With Dementia**

*Sulgrave*  
(Third floor)

Moderator:

Nancy Coleman  
Director, Commission on Legal Problems of the Elderly  
American Bar Association  
Washington, DC

Panelists:

Georgia Anetzberger  
Associate Director for Community Services  
The Benjamin Rose Institute  
Cleveland Heights, OH

Frederick Brand  
Director of Program Services  
Alzheimer's Association, Greater New Jersey Chapter  
Denville, NJ

Anne Mastro  
Nurse Practice Manager  
Geriatric Evaluation and Management Service, Kimball Medical Center  
Lakewood, NJ

**Workshop #2: Working Across Systems  
To Improve Services for Victims of Domestic  
Violence and Sexual Assault**

*Executive Forum*  
(Ballroom level)

Moderator:

Catherine Pierce  
Deputy Director for Program Development  
Violence Against Women Office  
Office of Justice Programs  
U.S. Department of Justice  
Washington, DC

Panelists:

Bonnie Brandl  
Program Director, National Clearinghouse on Abuse in Later Life  
Madison, WI

Amy Judy  
Systems Advocacy Program Coordinator  
Wisconsin Coalition Against Sexual Assault  
Madison, WI

Mary Lynn Kasunic  
Executive Director  
Area Agency on Aging, Region One  
Phoenix, AZ

**Workshop #3: Engaging Law Enforcement,  
Prosecution, and the Judiciary**

***Grand Ballroom***  
(Ballroom level)

Moderator: Cabell Cropper  
Executive Director  
National Criminal Justice Association  
Washington, DC

Panelists: Candace Heisler  
Consultant and Trainer  
San Francisco Assistant District Attorney (Retired)  
San Francisco, CA

Charles Mendonca  
Public Relations Officer for the Elderly  
Pascua Yaqui Tribe of Arizona Law Enforcement Services  
Tucson, AZ

Lori Stiegel  
Associate Staff Director, Commission on Legal Problems of the Elderly  
American Bar Association  
Washington, DC

C. Ronald Stromberg  
Assistant Director  
Division of Aging and Adult Services  
Salt Lake City, UT

**Workshop #4: Augmenting the Role  
of Medical Professionals**

***Roosevelt***  
(Ballroom level)

Moderator: Sidney Stahl, Ph.D.  
Chief, Health Care Organization and Social Institutions  
National Institute on Aging, National Institutes of Health  
Washington, DC

Panelists: Carmel Dyer, M.D.  
Associate Professor of Medicine  
Baylor College of Medicine  
Houston, TX

Laura Mosqueda, M.D.  
Director, Geriatrics/Associate Clinical Professor, Family Medicine  
University of California, Irvine–College of Medicine  
Orange, CA

Randolph Thomas  
Manager, Domestic Investigations Unit  
South Carolina Department of Public Safety  
Columbia, SC

**Workshop #5: Enhancing Victim Services**

*Colonnade*  
(Lobby level)

Moderator: Diane Alexander  
Director, Field Services  
National Crime Victims Center  
Washington, DC

Panelists: Shanny Augare  
Assistant Executive Director, Child & Family Advocacy Center  
Director, Violence Prevention Program  
Browning, MT

Judy O’Neal  
Manager, Victim Witness Branch  
Governor’s Office of Criminal Justice Planning  
Sacramento, CA

Kathi West  
Victim-Witness Coordinator  
Office of the United States Attorney for the Western District of Texas  
Austin, TX

5:15–6 p.m. **State and Tribal Team Discussions**

**State and Tribal Teams A–N**

*Grand Ballroom*  
(Ballroom level)

**State and Tribal Teams O–Z**

*Colonnade*  
(Lobby level)

7:30–9:30 p.m. **Tribal Team Caucus**

**Tuesday, October 31, 2000**

7:30–8:15 a.m.	<b>Continental Breakfast and Registration</b>	<b><i>Lower Level Foyer</i></b> (Ballroom level)
8:15–8:30 a.m.	Opening Remarks (and Charge to State Teams)	<b><i>Grand Ballroom</i></b> (Ballroom level)
Speaker:	Alexa Verveer Deputy Assistant Attorney General Office of Justice Programs U.S. Department of Justice Washington, DC	
8:30–9:45 a.m.	<b>Plenary IV–Institutional Abuse and Neglect</b>	<b><i>Grand Ballroom</i></b> (Ballroom level)
Moderator:	Steven Pelovitz Director, Survey and Certification Group Health Care Financing Administration U.S. Department of Health and Human Services Baltimore, MD	
Panelists:	Senora Russell Nashville, TN  Marie-Therese Connolly Coordinator, Nursing Home Initiative U.S. Department of Justice Washington, DC  David Waterbury Director, Washington State Medicaid Fraud Control Unit Washington State Office of the Attorney General Tacoma, WA  Michelle Lujan Grisham Director New Mexico State Agency on Aging Santa Fe, NM  Toby Edelman Center for Medicare Advocacy Healthcare Rights Project Washington, DC	



Nicholas Cox  
Bureau Chief, Economic Crimes, Tampa  
Florida Attorney General's Office  
Tampa, FL

The Honorable Frankie Sue Del Papa  
Attorney General  
State of Nevada  
Carson City, NV

Becky Kurtz  
State Long Term Care Ombudsman  
Division of Aging Services, Department of Human Resources  
Atlanta, GA

**Workshop #3: Enhancing the Survey  
and Regulatory Process**

*Executive Forum*  
(Ballroom level)

Moderator: Helene Fredeking  
Health Care Financing Administrator  
U.S. Department of Health and Human Services  
Baltimore, MD

Panelists: Debra Green  
Supervising Attorney  
Texas Department of Human Services  
Austin, TX

Catherine Morris  
Assistant Commissioner  
New Jersey Department of Health and Senior Services  
Trenton, NJ

Joyce Stockwell  
Assistant Director, Residential Care Services  
Washington State Department of Social and Health Services  
Olympia, WA

**Workshop #4: Holding Institutions Accountable  
Through Prosecution**

*Grand Ballroom*  
(Ballroom level)

Moderator: David Hoffman  
Assistant United States Attorney  
United States Attorney's Office for the Eastern District of Pennsylvania  
Philadelphia, PA

Panelists: Freda Fishman  
Chief, Consumer Protection and Antitrust Division  
Massachusetts Attorney General's Office  
Boston, MA

Randy Hey  
Assistant District Attorney  
Office of the Santa Clara District Attorney  
San Jose, CA

Andrew Penn  
Senior Counsel, Office of the Inspector General  
U.S. Department of Health and Human Services  
Washington, DC

Linda Purdy  
Director, Medicaid Fraud Control Unit  
State of Vermont Office of the Attorney General  
Waterbury, VT

11–11:45 a.m. **State and Tribal Team Discussions**

**State and Tribal Teams A–N**

*Grand Ballroom*  
(Ballroom level)

**State and Tribal Teams O–Z**

*Colonnade*  
(Lobby level)

11:45 a.m.–noon **Break**

Noon–1:15 p.m. **Closing Session with the Attorney General**

*Grand Ballroom*  
(Ballroom level)

Moderator: Mary Lou Leary  
Acting Assistant Attorney General  
Office of Justice Programs  
U.S. Department of Justice  
Washington, DC

Speaker: The Honorable Janet Reno  
Attorney General  
U.S. Department of Justice  
Washington, DC

Reporters: Representatives From Selected State and Tribal Teams

1:15 p.m. **Adjourn**

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# Appendix 2



**Our Aging Population: Promoting Empowerment,  
Preventing Victimization, and Implementing Coordinated Interventions  
The Washington Monarch Hotel  
Washington, DC  
October 30-31, 2000**

**Participant List**

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# Appendix 3



# **A Guide to Featured Programs**

***Our Aging Population:  
Promoting Empowerment, Preventing Victimization,  
and Implementing Coordinated Interventions***

**A National Symposium Sponsored by  
the U.S. Department of Justice  
and the U.S. Department of Health and Human Services**

**Washington, D.C.  
October 30-31, 2000**

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## Introduction

Workshop presenters were asked to submit information about their programs in order to provide a “snapshot” of each program for compilation in this handout. This guide is intended to provide background information about each program and thereby help participants determine which workshops to attend.

The symposium planners hoped that the request for information would help guide presenters in thinking and presenting about the policy issues on which the symposium is focused. Additionally, the program descriptions will be compiled and published in the report of symposium proceedings that will be disseminated to presenters, participants, and other interested persons soon after the symposium.

A few of the program descriptions are missing from this handout. They will, however, be included in the report of symposium proceedings.

Because of the variety of efforts to be featured at the symposium, the word “program” was used generically to include such things as a program, project, initiative, collaboration, policy direction, or implementation, as well as litigation or prosecution effort.

# **Financial Exploitation and Consumer Fraud**

## ***Workshop 1: Federal and State Initiatives to Educate Consumers***

---

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#### **Description of Program**

Attorney General Mike Fisher assembled a diverse group of experts from across the state to identify critical issues facing elderly citizens in Pennsylvania and to recommend solutions to problems such as domestic violence, home improvement fraud, senior health care issues, financial exploitation, and telemarketing and sweepstakes exploitations.

#### **Why Program Was Developed**

The task force was established because of the need to identify the concerns and specific problems of older Pennsylvanians, and to determine what, if any, possible remedies or solutions there might be to these problems.

#### **How Program Was Developed**

The program was initiated in September 1998, when Attorney General Mike Fisher identified and brought together experts on issues affecting the elderly from throughout the state, and established regional groups to address these issues. Invitations were sent to individuals who were known to have an interest in these issues, including representatives of service organizations, the legal community, local law enforcement, and others.

#### **Accomplishments and Lessons Learned**

First, regional meetings were held across Pennsylvania to identify areas of concern. Then public hearings were held in five locations throughout the state, to address and focus on the areas of concern that had been identified as a result of the regional meetings. At the conclusion of these hearings, a report was issued that described the hearings and the issues raised and made recommendations regarding possible remedies or solutions to deal with these problems.

While the project has not faced any obstacles since its inception, it is likely that many challenges will arise during the process of implementing the recommendations issued by the task force.

The key lesson learned is the importance of getting participation of community leaders and other individuals who are concerned with issues affecting older persons. This includes representatives from the law enforcement community, health care and other aging services. The perspective of these individuals and their ability to help older persons is significant, and their contributions are invaluable.

*The Task Force for the Protection of Older Pennsylvanians Report is available at no charge.*

# Financial Exploitation and Consumer Fraud

## *Workshop 1: Federal and State Initiatives to Educate Consumers*

---

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### **Description of Program**

The U.S. Attorney's Office (USAO), in conjunction with AARP and the FBI, developed an education program about consumer fraud against the elderly. The goal of the program is to reduce, through preventive measures, the number of elders being victimized by fraud, and the impact of that fraud.

The program's objectives are:

- to inform and educate elders who might be targeted for fraud;
- to inform and educate family members, friends, and caregivers about frauds targeting elders and the warning signs that someone might be falling victim;
- to inform and educate government and provider organizations about frauds targeting elders so they might respond more effectively; and
- to raise the level of public awareness and discussion of frauds targeting elders and the devastating impact they can have.

### **Why Program Was Developed**

The program sponsors recognized that there was a high incidence of telemarketing fraud aimed at the elderly in Arizona, and public awareness needed to be raised.

### **How Program Was Developed**

In 1998, due to increased telemarketing-scam activity, the Justice Department was scouting four or five different sections of the country for program implementation. Jon Rusch of the Department of Justice visited Phoenix and met separately with the USAO, FBI, and AARP to encourage them to develop a program. The USAO, AARP, and the FBI began convening meetings in November 1998.

Agencies currently involved in the program are: USAO, FBI, Postal Inspection Service, Social Security Administration, Secret Service, Health & Human Services, Veteran's Affairs, Securities and Exchange Commission, Federal Trade Commission, Arizona Attorney General's Office – Elder Affairs Program, Arizona Corporation Commission – Securities Division, AARP, Better Business Bureau, Arizona Cardinals, CellularOne, Basha's Supermarkets, and KAET-TV, the local public television station.

## **Accomplishments and Lessons Learned**

The program has made staged more than 60 public presentations or events, including the largest public education campaign in the history of Arizona.

The USAO organized and conducted a reverse boiler room operation, using community members (including members of the Arizona Cardinals football team) and FBI agents to call seniors targeted for fraud on a telemarketing list in order to warn them of the dangers of the telemarketing scams. A local grocery store, AARP, and CellularOne, each of which has an intense interest in community service, provided support for the operation. A local talk-show host interviewed people who were involved, which increased awareness about the program. These events kicked off a 12-week public-awareness campaign to educate seniors, their families, and caregivers about telemarketing fraud.

Perhaps the greatest obstacle has been the fact that the population is widely dispersed in Arizona, making travel to more remote areas lengthy and sometimes prohibitive. It takes more than 10 hours to drive from one corner of the state to another. The program has tried to give personal service to some of the more remote areas, which has cost considerable time and energy. To overcome these obstacles, the program has tried to make connections with local leaders, such as the county attorneys and sheriffs, the chiefs of police, local media and others, in order to increase their capacity to direct local programs.

Key lessons learned are:

- It is worthwhile to spend more time trying to develop and improve the capacity of the local agencies and organizations to spread the program's message and assist with program activities. This can be challenging, however, because the lack of reporting by victims often means that local leaders don't see "the big picture." A more consistent and sustainable effort would likely stem from having local agencies conduct the education presentations. The use of distance learning technology would help as well.
- It is critical to constantly think of ways by which to involve old and new partners who can share and support program efforts.

*Materials are available for the cost of reproduction.*

# Financial Exploitation and Consumer Fraud

## *Workshop 1: Federal and State Initiatives to Educate Consumers*

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#### **Description of Program**

The "Seniors Crime College" teaches crime prevention to Kentucky's senior population. The program employs the slogan "Aware, Avoid, Alert" and educates seniors about how to recognize potential crimes, either physical or financial, before they occur. By making seniors *aware* of what cons and crooks are trying to do, they are better able to *avoid* becoming a victim. In addition, seniors are taught whom to *alert*, so that law enforcement has a better chance of getting these criminals off the street.

#### **Why Program Was Developed**

Seniors Crime College was developed by the Office of the Attorney General of Kentucky, because it became clear, through information obtained from the Kentucky Attorney General's Division of Consumer Protection, Victims Advocacy and Medicaid Fraud, that senior citizens of Kentucky were being victimized at a disproportionately larger rate than the rest of the population, and that this would continue until some positive action was taken. Realizing that crime prevention is the most effective tool available, Attorney General Ben Chandler formed the Office of Senior Protection in 1998. The 2000 General Assembly continued the funding of the initiative.

#### **How Program Was Developed**

The program was initially put in 20 locations for approximately 2,000 people in 1998, and had a very positive response that justified continuation and expansion. The following year, the Seniors Crime College was held in more than 60 locations throughout the state and 6,000 additional seniors learned about crime-prevention issues. These efforts have continued into 2000, with numerous presentations this spring and more than 10,000 seniors attending to date. The success of this program has created such a demand that programs are already scheduled through September 2001.

While the program remains under the direct control of the attorney general, numerous organizations are involved in supporting the program, either by providing speakers or assisting with logistics: the Sheriffs Association, Police Chiefs Association, Kentucky State Police, Kentucky Crime Prevention Coalition, AARP, Retired Senior Volunteer Programs (RSVP), the local area agencies on aging, Kentucky Bankers Association, local law enforcement agencies and local businesses. All funding for the program has come from the attorney general's office.

### **Accomplishments and Lessons Learned**

The program has been successful in raising public awareness about crime and the aging population. It was successful in getting legislation passed on identity theft, has raised awareness of con games, and is pressing for expansion of truth in advertising legislation to stop misleading practices for solicitations by mail.

To date, the Seniors Crime College has been held at more than 100 locations throughout Kentucky, and more than 18,000 seniors have been educated about crime prevention issues. In addition, more than 1,000 bank employees have been taught to recognize signs of elder abuse. The Seniors Crime College has been made a part of the Kentucky State Police in-service training to raise awareness among law enforcement of these crimes against seniors and how to deal with seniors. The Seniors Crime College was selected as the outstanding community service program of 2000 by the Southeast Association of Area Agencies on Aging.

The primary obstacle for the program has been getting past preconceived views by seniors that this information does not apply to them. However, through persistence and positive feedback from those that attend the program, the response continues to grow. Favorable media coverage and a very strong relationship with local law enforcement agencies, senior services providers and seniors groups have helped generate very favorable publicity.

Lessons learned include the importance of involving local law enforcement and seniors groups from the beginning. In addition, talking with seniors in each area before beginning a program allows appropriate customization rather than a less useful one-size-fits-all approach.

*Program handbooks and speaker outlines are available at no charge.*

# Financial Exploitation and Consumer Fraud

## *Workshop 2: Effective Interventions to Address Consumer Fraud*

---

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### **Description of Program**

Triad is a national community-policing program that partners law enforcement professionals with older volunteers for the purpose of reducing crime against older persons. Triads typically form a council made up of community representatives, including public officials, and then survey the older members of the community to ascertain their concerns. These councils then develop and implement programs to address the needs of those older persons.

In 1998, the Department of Justice Office for Victims of Crimes (OVC) awarded Triad a grant to combat telemarketing fraud aimed at older persons. The program, dubbed Operation Fraudstop, attempts to reduce the incidence of telemarketing fraud by working to enhance line officers' understanding of the issue and providing them with the tools necessary for early intervention in the fraud process. The underlying premise is that once older people fall victim to telemarketing fraud, they are likely to be re-victimized.

### **Why Program Was Developed**

Representatives from the National Sheriffs' Association, the International Association of Chiefs of Police, and AARP (then known as the American Association of Retired Persons) created Triad after they recognized how the concept of community policing could benefit older persons.

### **How Program Was Developed**

The Triad concept was conceived in 1988 by the three organizations named above. The first Triad agreement was signed in 1989 in St. Martin Parish, Louisiana. Nearly three-fourths of the Triad agreements have been signed since about 1994.

Presently, only the National Sheriffs' Association supports Triad on a national level, but local police chiefs and local AARP chapters provide enormous support and resources. The Triad program has grown more inclusive over time. Now any interested community member or organization is welcome to participate.

The Department of Justice has long funded the program, awarding grants to the National Sheriffs' Association as the lead agency. Triad formerly received its full operating funds from the Department's Bureau of Justice Assistance. Several years ago, OVC began contributing to the program as well, but now the DOJ award is only about 20 percent of the total operating budget.

## **Accomplishments and Lessons Learned**

More than 750 counties have signed Triad agreements, the public statement of partnership.

Although the general outcome of Triad programs tends to be about 50 percent crime prevention, 20 percent victim assistance (in cases where prevention fails), and 30 percent quality of life, the program has remained true to its mission of reducing crimes committed against the older persons.

Two primary obstacles are unreliable funding and unenforced overall program guidelines. Funding waxes and wanes depending on unrelated variables such as political interests, making financial planning difficult. Triad came about as a grass-roots program without the benefit of a strong national voice setting program criteria. Guidelines were established, but not always followed. Triad is working to overcome these obstacles.

Another obstacle is that local program managers sometimes resist seeking private support because of the strings attached to such funding. That leaves public funding their only option, however, and poses quite a challenge to program continuation.

One key lesson learned is that it would have been beneficial to first establish a national program, rules, chapter requirements, etc., and then form local efforts (rather than the other way around, as Triad did). Second, it is not wise to rely on only one opinion or one method for getting out the organization's message.

*It Isn't Just About the Money, an in-service training video for law enforcement officers, is available at a cost of about \$10 per copy. It can be obtained from NATI at the address provided above.*

# **Financial Exploitation and Consumer Fraud**

## ***Workshop 2: Effective Interventions to Address Consumer Fraud***

---

### ***“We Are Family” Project***

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In 1990, We Are Family (WAF) was established as a subcommittee of the Goldman Institute on Aging’s San Francisco Consortium for Elder Abuse Prevention (CEAP). The primary purpose of WAF is advocacy, education, and outreach to older African-Americans and professional service providers. WAF develops strategies for disseminating information and improving access to services to both older persons and caregivers who need them. WAF seeks to empower older persons and strengthen communities by building on the solid traditions of African-American culture. WAF works in partnership with service providers to find solutions that promote positive outcomes and respects the wisdom of older African-Americans.

The CEAP is a network of over 40 public, private, and city departments. It was formed in 1981, to address the needs of abused and vulnerable older persons living in San Francisco.

### **Why Program Was Developed**

WAF grew out of a deepening concern that older African-Americans, for a host of reasons, were under-utilizing valuable community resources and thus increasing their risk for abuse. WAF set out to explore the nature of elder abuse in the African-American community. To its surprise, members of the group discovered extremely complex and difficult issues. Some of the issues WAF has explored are burial and life insurance fraud, home equity fraud, family violence, health and nutrition, literacy, racism, and the extreme stresses of grandparenting.

### **How Program Was Developed**

The first step was to assemble a group of African-American service providers with expertise in aging and community issues, as well as individuals who had access to African-American churches. After considerable deliberation, the committee designed an approach that created opportunities to offer information and services, while at the same time, it acknowledged and reinforced the strengths of the

African-American families. The leadership group then articulated a set of principles for guiding outreach activities.

### **Accomplishments and Lessons Learned**

- Conducted a one-day workshop for professional service providers, 2000.
- Conducted community conversations to obtain information on how to reach and serve older African-Americans, 2000.
- Featured in an article in the Journal of Elder Abuse and Neglect, 1993.
- Featured in workshops at:
  - The annual Texas Adult Protective Services Conference
  - Silent Suffering Conference sponsored by FHP Foundation (now known as Archstone Foundation); Long Beach, California, 1997
  - Elder Abuse in Minority Communities Conference sponsored by the Archstone Foundation and the American Public Welfare Association, Long Beach, California, 1997.
- Received an award from Consumer Action for work in preventing older African-Americans from losing their homes through foreclosure, 1997.
- Received a recognition award from the California Assembly, 1997.
- Conducted numerous information fairs to alert older African-Americans to the risks involved in home equity loans, acquaint them with ways to tap into other community resources or stretch their own existing resources and reduce expenses, and introduce them to professional service providers who have expertise in this area.
- Conducted training programs to help older African-Americans reduce their risk of mortgage fraud.
- Collaborated with Bar Association of San Francisco, Volunteer Legal Services Program (VLSP) to establish and advertise the mortgage fraud “hotline.”

This has been a labor-intensive project. It requires consistent funding and a dedicated group of individuals who understand the intricate aspects of elder abuse. Project staff had hoped churches would have a more visible role in the project’s advocacy and outreach activities. Unfortunately, WAF has not been able to fully engage churches in addressing elder abuse. Also, it has been difficult for project staff to measure outcomes.

# **Financial Exploitation and Consumer Fraud**

## ***Workshop 2: Effective Interventions to Address Consumer Fraud***

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### ***National Hispanic Council on Aging Telemarketing Fraud Project*** **National Hispanic Council on Aging** **Washington, DC**

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### **Description of Program**

The National Hispanic Council on Aging (NHCoA) Telemarketing Fraud Project increases older Latinos' awareness of telemarketing fraud and their capacity to protect themselves from such victimization through education and coordination of prevention and intervention services at the local level. Geographic areas with large Latino elder populations at risk for telemarketing fraud were selected for interventions.

Currently, the Latino Education Project of Corpus Christi, Texas; La Liga Nacional de Consumidores of Indio, CA; and the State of Arizona's Office of the Attorney General are implementing the project at the local level as subcontractors. Other agencies have been involved with this project over time. For instance, AARP and outside production consultants assisted with the development of the video on telemarketing fraud (see below); and a consultant from New Mexico Highlands University conducted a survey on the incidence and prevalence of tele-marketing fraud among older Latinos.

### **Why Program Was Developed**

The Telemarketing Fraud Project was established to raise the level of awareness of older low-income Latinos and their families who are at-risk for becoming victims of telemarketing fraud because of their cultural upbringing and the preponderance of low literacy levels among that population.

### **How Program Was Developed**

This project was first established in March 1998 with support from the Department of Justice Office of Victims of Crime and with the cooperation of NHCoA consultants and chapters in Corpus Christi, Texas (The Latino Education Project). The Department of Justice realized that telemarketing fraud also adversely affects older persons within communities of color throughout the nation. Recognizing that generalities about the Latino population cannot be made, the NHCoA originally targeted Mexican-

American and Central American communities with concentrations of older persons. Since then, most project activities have centered around locations where NHC CoA chapters are strongest, which tend to concentrate on Mexican-American families. Funding support from the Department of Justice has totaled \$558,760 through December 2001.

### **Accomplishments and Lessons Learned**

Materials have been developed and translated into Spanish for dissemination to Latino populations. Also, a video on telemarketing fraud (see below) was produced. This year, the project has concentrated on integrating this project's information and activities with other activities within the partner chapters to maximize local outreach and use of resources such as the peer counselors, etc.

The greatest lesson learned from this project has been the importance of educating the Latino public on all types of fraud issues. While older Latinos are susceptible to telemarketing fraud in general, health care fraud, banking irregularities, scam artists in the communities, etc. are all forms of fraudulent activities that target vulnerable populations. The need to fight fraud never ends because fraud schemes never end; they spread and evolve over time and distance.

*A video entitled **Avíspese: No se deje engañar!!** is available for \$8.95 from NHC CoA offices. This thirteen-minute Spanish language video was developed as a training tool to be used with older Latinos and their caregivers. The video conveys information on identifying and avoiding telemarketing fraud.*

# **Financial Exploitation and Consumer Fraud**

## ***Workshop 2: Effective Interventions to Address Consumer Fraud***

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### ***Operation Restore Trust – Senior Medicare Patrol Project*** New York State Office for the Aging Albany, New York

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#### **Description of Program**

The Operation Restore Trust-Senior Medicare Patrol Project is a federally funded initiative to train retired persons to serve in their communities as volunteer expert resources and educators in combating health care waste, fraud, and abuse in the Medicare and Medicaid programs.

#### **Why Program Was Developed**

The U.S. Department of Health and Human Services, Office of Inspector General, estimates that, combined, Medicare and Medicaid lose about \$36 billion dollars a year due to waste, fraud, and abuse. Unscrupulous activities by some health care and medical equipment providers leads to this loss and depletes funding for the programs for current and future generations as well as adversely affecting the quality of services and care provided to beneficiaries.

#### **How Program Was Developed**

In 1995 the New York State Office for the Aging (NYSOFA) participated in a two-year demonstration project for the purpose of identifying innovative ways to fight health care fraud, waste, and abuse in Medicare and Medicaid. Education and outreach was identified as a primary component to that goal. In 1997 NYSOFA was awarded a grant by the Administration on Aging to recruit and train state and local long term care ombudsmen, health insurance counselors, the network of aging service agencies, older persons and their families, and retired professionals to identify and report waste, fraud and abuse. A State Workgroup was convened, with the NYS Long Term Care Ombudsman serving as Chair.

The Workgroup consists of the following members:

- State agencies: Department of Health, Attorney General, Medicaid Fraud Control Unit, Office of State Comptroller, Division of Criminal Justice Services, Commission on Quality of Care.

- Federal agencies: Administration on Aging (AoA), Office of Inspector General, Health Care Financing Administration.
- Medicare Carriers: Empire Medicare Services, GHI-Medicare, and Upstate Medicare

The Workgroup met bi-monthly during the first year to develop training goals, objectives and materials. Training consisted of educating individuals on what constitutes fraud and abuse, how to identify it when they see it, and where to report it. During the first year the Workgroup conducted 12 on-site full-day training events. The second year members provided refresher training and first year training to three additional counties. The third year the Workgroup trained by means of a tele-conference downlinked to approximately 61 sites. They also conducted two training conferences for Long Term Care Ombudsman Program (LTCOP) Coordinators.

NYSOFA also awarded funding to seven local LTCOP and Health Insurance Information, Counseling and Assistance Program (HIICAP) Coordinators to conduct local ORT education and recruitment after those coordinators received training by the Workgroup.

Additionally, the training developed by the Workgroup was incorporated into the 36-hour certification training required to become a local LTCOP Volunteer. The role of a LTCOP volunteer is to advocate for the rights and quality of care for residents in Nursing Homes and Adult Homes. ORT is consistent with that role and LTCOP volunteers are in a unique position to provide health care information to beneficiaries of these programs and their families.

The Workgroup continues to meet on an on-going basis to update and refine training materials and to coordinate future training events. Currently they are taking the lead on the development of a National Teleconference. New York is one of four states funded by AoA to be a National Consumer Protection Technical Resource Center for the purpose of replicating and expanding consumer education and awareness to targeted populations throughout the country.

## **Accomplishments and Lessons Learned**

The training programs described above were a significant accomplishment. In addition, the partnership formed through the program have led to systemic changes. To illustrate, as a result of the project the Medicare and Medicaid programs in New York began sharing information, resulting in the identification of \$47.9 million in double payments over a three-year audit period.

Important lessons learned include:

- Coalition building techniques should be applied consistently to keep partner participation at its highest and most effective level.
- Keeping the training message alive should be a priority. Use of various media forms and methods of distribution is recommended. For example, the project has developed manuals, brochures, personal medical record handbooks, videos, public broadcasting television shows, articles for the NYSOFA "Aging News" quarterly newsletter, posters, teleconferences, and materials about coalition-building best practices. Materials are distributed through a variety of forums: on-site group training to small or large groups; one-on-one discussion; nursing home resident councils and/or family councils; libraries; senior centers; congregate meal sites; and, national, state and local governmental agencies, etc.

# **Financial Exploitation and Consumer Fraud**

## ***Workshop 3: Innovative Approaches to Financial Exploitation***

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### ***Los Angeles County Fiduciary Abuse Specialist Team (FAST)*** **Wise Senior Services** **Santa Monica, California**

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### **Description of Program**

The Los Angeles County Fiduciary Abuse Specialist Team (FAST) is a countywide multidisciplinary team that provides: (1) consultation on difficult-to-resolve cases of elder financial abuse to caseworkers of Adult Protective Services (APS), the Long-Term Care Ombudsman Program, the Office of the Public Guardian (PG), and county- and city-funded care-management programs; and (2) education and training to service providers, members of the financial community, and the public on preventing, identifying, reporting, and stopping elder financial abuse.

The FAST has two goals: (1) to help these agencies serve their financially-abused clients, by aiding victims in recovering or preventing further loss of assets and in improving the quality of their lives; and (2) educating professionals and the public about elder financial abuse and how to combat it.

### **Why Program Was Developed**

The FAST was established in 1993 because APS and the Long-Term Care Ombudsman Program lacked skills and training to investigate and resolve increasingly complex cases of elder financial abuse.

### **How Program Was Developed**

FAST was developed through a collaborative public/private partnership of the Los Angeles County and City Area Agencies on Aging and WISE Senior Services, the contract agency that coordinates the countywide and citywide Elder Abuse Prevention Program that began in 1992. That same year, representatives of the three agencies identified the need for the team. WISE Senior Services reviewed existing models of multidisciplinary teams and conceptualized the FAST model with significant input from all of the partners. The model was presented to key agencies such as the APS, the Ombudsman, the Public Guardian, law enforcement and prosecution agencies, and others for constructive feedback and to elicit their participation and active support. A three-session training program for these agencies

and for care managers, utilizing team consultants as trainers, was planned and implemented prior to the first team meeting, in order to establish a good knowledge base.

Additional organizations now involved with FAST include the County of Los Angeles District Attorney's Office, Los Angeles City Attorney's Office, several law enforcement agencies, Community Care Licensing, public interest and private legal services, financial institutions, care-management programs, and community-based social service organizations. Other team members include securities and real estate brokers, and experts in finance, insurance, probate, gerontology, geriatrics, psychology, and psychiatry.

Initial funding for FAST was provided by the county and city area agencies on aging through their Older Americans Act monies, with matching funds from WISE. Currently, the county area agency on aging and WISE provide \$103,959 and \$9,172 in funding, respectively (plus in-kind).

## **Accomplishments and Lessons Learned**

Key accomplishments include:

- recovering or preventing the loss of millions of dollars in client assets;
- improving the ability of member agencies to intervene in financial abuse cases;
- enhancing networking opportunities among public and private sector organizations and professionals, resulting in increased access to technical knowledge and to resources;
- increasing understanding of member agencies' respective roles and responsibilities; and
- improving communication, cooperation, collaboration, and coordination of services.

The major program partners have utilized FAST members in numerous educational programs. These have included presentations to more than 1,325 bankers and fraud investigators statewide on "Financial Abuse of Seniors: How to Protect Your Customer and Financial Institution"; a conference on "Combating Elder Abuse: How to Build Your Criminal or Civil Case" for 275 police, prosecutors, investigators, and civil attorneys; and "Senior Action Fairs – Protect Yourself Against Fraud & Abuse" for 1,725 seniors, family members, and caregivers.

The FAST has faced two significant obstacles since it began. First, discontinuation of funding by both the city and county area agencies on aging during the federal budget crisis resulted in the temporary closure of the WISE Elder Abuse Prevention Program that coordinates the team. During that time, two FAST consultants assumed leadership and solicited support from the other team members in order to keep the team operating for three months until the funding was restored. Second, the large size of the team poses challenges that the FAST is working to overcome.

Two lessons learned from these experiences are that (1) all team members should have been invited to attend the three training programs that were offered to APS and the ombudsman and public guardian programs so that everyone would have had a similar knowledge base prior to the formal team orientation and commencement of the team meetings; and (2) it is critical to build mutually supportive and collaborative working relationships, and to recruit team consultants who not only have desired technical expertise but who are effective communicators and team players.

*A description of the FAST model, guidelines for replicating it and job descriptions are available by e-mail free of charge and by mail for \$7.*

# Financial Exploitation and Consumer Fraud

## *Workshop 3: Innovative Approaches to Financial Exploitation*

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### **Oregon Bank Reporting Project and R2T2**

Department of Human Services, Senior and Disabled Services Division  
Salem, Oregon

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### **Description of Program**

Oregon's bank reporting project built upon and expanded upon the first bank reporting project, developed in Massachusetts. The goals of the Oregon project were:

- to train bank employees how to recognize and report suspected elder financial exploitation; and
- to teach bank employees how to develop and conduct seminars in their own communities in order to educate older persons about how to avoid becoming victims of financial exploitation and telemarketing scams.

### **Why Program Was Developed**

The idea for the program germinated in 1995 when the Attorney General's Task Force on Elder Abuse became aware that the banks were not comfortable reporting possible elder abuse or exploitation. The bankers wanted to report these instances to Adult Protection Services, but they were concerned about liability and confidentiality issues.

### **How Program Was Developed**

In 1995 the attorney general met with the CEO of the Oregon Bankers Association (OBA). As the ability of bankers to contact local authorities about possible violations was already covered in state law, the attorney general and OBA decided to add an immunity clause to the Oregon statutes addressing financial institutions. The OBA made it clear that they did not want banking institutions to become "mandatory reporters." All on the attorney general's task force agreed that since the bankers

wanted to report, they did not need to be mandatory reporters. This resulted in smooth passage of the legislation.

A year later the OBA sponsored a day-long statewide conference for APS and bankers in order to increase awareness of the new law. The conference created a great deal of enthusiasm about the project.

After this conference, the project developed materials supporting the two aforementioned goals of the project. The project received a \$198,000 grant in 1998 from the Department of Justice Office for Victims of Crimes. Grant funds were used to prepare and disseminate nationally a training kit for bankers, and to conduct outreach to victims of telemarketing scams.

The organizations involved in the program were the Oregon Attorney General's Task Force on Elder Abuse, the Oregon Senior and Disabled Services Division, the Oregon Bankers Association, the Oregon Association of Area Agencies on Aging and Disabilities, and AARP Oregon. The Education Foundation of the American Bankers Association and the National Association of Attorneys General also were involved in the promotion and distribution of the banker kits.

As a result of these efforts, the APS offices, law enforcement and the district attorney's office were being inundated with referrals. Therefore, a new pilot program "Retiree Response Technical Team" (R2T2) was recently launched with funding from a private foundation. The R2T2 volunteers will assist local APS and other multidisciplinary team members in collecting and analyzing financial records for possible prosecution.

## **Accomplishments and Lessons Learned**

To date, the program has distributed 1,500 training kits to each Oregon bank branch, three complimentary kits to each state, as well as hundreds of kits to other states and four other countries upon request. The program has provided numerous training sessions in Oregon and at national conferences and provided technical assistance to two other states in the development and passage of immunity legislation for bankers.

Obstacles include not having enough staff to meet the training need. To remedy this, the SDSD has encouraged banks to call the local APS office in their area to assist with training. SDSD has also conducted annual statewide multidisciplinary training sessions to train prosecutors and law enforcement personnel. Oregon's credit unions have requested similar training to the banks, but resources were not adequate to allow the project to send free copies of the kit to each credit union.

The key lesson learned is that it is necessary to start the project with strong statewide partners, especially the state bankers association. Bankers trust other bankers and will check with each other before adopting the project. Also, it is very important to realize that bankers are extremely busy and must keep up with numerous regulations. Timeliness and a businesslike attitude are crucial to gain their trust.

*A training kit for bankers entitled, "Preventing Elder Financial Exploitation: How Banks Can Help" includes two manuals with two videos in a hardbound package, and is available for \$55.*

# **Financial Exploitation and Consumer Fraud**

## ***Workshop 3: Innovative Approaches to Financial Exploitation***

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### ***Illinois Governor's Task Force on Financial Exploitation of Older Persons*** Illinois Department on Aging Springfield, Illinois

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#### **Materials Contact:**

Same as program contact

### **Description of Program**

The Elder Abuse Task Force is a statewide group that is studying and developing recommendations for the Governor of Illinois on ways that the state can better address the problem of financial abuse of older persons.

### **Why Program Was Developed**

The task force was developed to address the growing problem of financial exploitation of older persons. Its creation represented fulfillment of a campaign promise by the Governor to address these issues.

### **How Program Was Developed**

Illinois Governor George Ryan appointed the task force in May 2000. It has met twice since then to learn about financial exploitation, to find out what Illinois is already doing to address the problem, and to hear what other states are doing. At future meetings the task force will focus on developing recommendations to present to the governor and General Assembly on how the state can further address this issue.

The Department on Aging recommended potential members to the governor's office. The current list of organizations and members includes:

- Alzheimer's Association;
- AARP;
- Attorney General Jim Ryan;
- Bloomington, Illinois, Police Department;
- Central Illinois Area Agency on Aging;
- Coalition of Limited English Speaking Elderly;

- Community Bankers Association of Illinois;
- Council for Jewish Elderly;
- Chicago Bar Association;
- Illinois Association of Area Agencies on Aging;
- Illinois Association of Chiefs of Police;
- Illinois Bankers Association;
- Illinois Coalition on Aging;
- Illinois Council of Case Coordination Units;
- Illinois Criminal Justice Information Authority;
- Illinois Department of Human Services;
- Illinois Elder Rights Coalition;
- Illinois Guardianship & Advocacy Commission;
- Illinois Law Enforcement Training and Standards Board;
- Illinois Sheriffs' Association;
- Illinois State Bar Association;
- Illinois State Police;
- Illinois State Triad;
- National Caucus & Center of Black Aged; and
- States Attorneys' Appellate Prosecutors Office.

### **Accomplishments and Lessons Learned**

Accomplishments of this very new program include forming and learning about financial exploitation and how it is currently being addressed.

The only obstacle the program has faced thus far is the need to educate the task force members on the issues very quickly so that recommendations can be made.

Lessons learned include the importance of thinking carefully about the specific goal of the task force and then deliberately selecting as task force members the organizations and people who can accomplish that goal.

*A copy of the report can be obtained in January 2001.*

# Financial Exploitation and Consumer Fraud

## *Workshop 3: Innovative Approaches to Financial Exploitation*

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### **Navajo Nation Elder Protection Program** Navajo Area Agency on Aging Window Rock, Arizona

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### **Description of Program**

The Navajo Area Agency on Aging (NAAA) administers the Dine' Elder Protection Program (DEPP), which uses caseworkers and court advocates to assist victims of elder abuse. The goal of the Dine' Elder Protection Program (DEPP) is to protect elders within the jurisdiction of the Navajo nation from abuse, neglect, exploitation, and maltreatment, consistent with the Dine' Elder Protection Act.

### **Why Program Was Developed**

The DEPP was developed because elder abuse in all its forms presents a major health and law enforcement problem to the people of the Navajo nation. The program reflects the belief that elder abuse can be prevented, alleviated, and deterred through the intervention of law.

### **How Program Was Developed**

Following several years of discussion about the problems of elder abuse and the need for an appropriate program, the DEPP was established by the Navajo Nation Council in 1996. The president of NAAA was very instrumental in obtaining support from the Health and Social Services Committee (HSSC) of the Navajo Nation Council. Originally, the Division of Social Services had responsibility for DEPP, but ultimately responsibility was shifted to the Navajo Division of Health, through the NAAA.

The Navajo Nation Council appropriate \$191,864 for five caseworker positions, one court advocate, and one-half the time of the DEPP director in 2000. Other sources of funding include \$19,675 from Title III of the Older American Act, and \$1,891 from New Mexico.

### **Accomplishments and Lessons Learned**

The NAAA has signed a protocol with the Division of Health and Division of Social Services that provides for a consistent and professional working relationship, prevents the duplication of services, and allows maximum and quality implementation of the case management systems from the Social Service and Health divisions. The NAAA's next goal is to seek amendment of the Dine' Elder Protection Act so that it will be more specific, akin to the Nation's Children Code.

The DEPP was enacted without any funding. In 1999, for the first time the Tribal Council provided funding in the amount of \$135,000. This year's appropriation of \$191,864 represents a significant increase and is a major accomplishment for the program. More funding is needed, however, and the lack of funding poses the greatest obstacle to the program.

The DEPP was the first program of its type every established on the Navajo reservation; its progress indicates that a key lesson to be learned from it is the necessity of perseverance.

*The Dine' Elder Protection Program is available in bound copies for the general public.*

# Financial Exploitation and Consumer Fraud

## *Workshop 4: Enhancing Prosecution of Financial Exploitation*

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### **Law Enforcement Recovery of Exploited Assets** Los Angeles, California

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#### **Materials Contact:**

Same as first program contact

### **Description of Program**

The Los Angeles Police Department developed a proactive approach to securing and recovering the assets of elder and dependent adults during the course of financial abuse investigations.

### **Why Program Was Developed**

In Los Angeles County, there were many elder victims of financial exploitation. The program was developed to protect victims' assets from further dissipation during an investigation of financial abuse. The process works by freezing the victim's remaining assets while the investigation is conducted, usually for a period of up to five days, and while efforts are made to take other available legal actions (such as appointment of a public guardian) to protect the assets.

### **How Program Was Developed**

The program was developed in 1987 by Chayo Reyes, who founded the Elder Person's Estate Unit for the Los Angeles Police Department. The agencies involved with this program are Adult Protective Services, the Los Angeles County Fiduciary Abuse Specialist Team (FAST), as well as various banks and other financial institutions.

## **Accomplishments and Lessons Learned**

The program has secured or recovered more than \$100 million for victims of financial exploitation. This recovery vastly improves the quality of life of the victims, as they can maintain their independence using their own funds rather than relying on family members or the government for help.

Chayo Reyes and his former partner, Dave Harned, have provided training about the Elder Estate Recovery Unit and the tactics they used to law enforcement officers, APS workers, and many others across the nation.

In order to expand use of the Elder Estate Recovery Unit methodology across California, Chayo Reyes and Dave Harned co-authored a bill supporting program expansion. That bill, California SB 1742, was signed into law by Governor Gray Davis on September 28, 2000.

The major obstacle faced by the program has been that many law enforcement officers and prosecutors are not aware of the procedure to freeze assets or the attendant law.

The key lessons learned are the importance of:

- educating law enforcement officers and prosecutors about procedures and laws that enable them to protect victim assets;
- networking with APS, the ombudsman, and other organizations and establishing a FAST; and
- enacting early on a law supporting the use of the Elder Estate Recovery Unit concept.

*Materials are available at no charge.*

# Financial Exploitation and Consumer Fraud

## Workshop 4: Enhancing Prosecution of Financial Exploitation

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### *Identifying, Prosecuting and Preventing Elder Abuse* Office of the Ventura County District Attorney Ventura, California

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### **Description of Program**

The Ventura County District Attorney, Michael D. Bradbury, created an elder abuse program to prevent and protect older persons from abuse and to prosecute their offenders. This is done by reaching out to the community and by educating seniors on how to identify, prevent, and report crimes committed against them. Great effort is put into recovering monies taken from senior victims and in enforcing restitution ordered by courts.

### **Why Program Was Developed**

The program initially was established due to the recognition that older victims have special needs. Those needs can best be served by offering specially trained victim advocates, prosecutors, and investigators to work with them and handle their cases.

### **How Program Was Developed**

The team has grown from one deputy district attorney (DDA) and one victim advocate in 1994 to two DDAs, one investigator, three investigative assistants, and three victim advocates.

After appointing a DDA to prosecute elder abuse offenders, the office started networking with other partners. Ventura County had a previously established Interagency Elder Abuse Council. The members of the council included Adult Protective Services (APS), law enforcement, Long Term Care Ombudsman, Area Agency on Aging, senior nutrition, senior outreach, mental health, Grey Law (non-profit), among others. The members of the council placed little trust in the DA's office, law enforcement, or APS since, historically, little had been done to protect Ventura County seniors. APS staff had been cut to the bone and they rarely cross-reported incidents of abuse to law enforcement, despite legal requirements to do so, due to (1) a lack of interest by law enforcement; (2) a philosophy that was hostile toward permitting law enforcement to criminalize abuse situations; and (3) a refusal to breach perceived "client confidentiality."

The District Attorney's office took the lead in uniting these critical partners by reaching out and establishing lines of communication with these groups. It worked with APS and encouraged them to cross-report incidents of abuse to law enforcement and educated them on what they could disclose without violating client confidentiality. The office trained law enforcement on how to investigate elder abuse cases and trained both APS and law enforcement on elder abuse prosecution and how their work is essential in successfully protecting seniors and punishing their offenders.

Presently, the office is involved with the District Attorney's Elder Abuse Prosecution Team, the Ventura County Interagency Elder Abuse Council, and the Adult Case Management Council (ACMC). The ACMC meets monthly, and APS workers profile seemingly impossible cases of abuse and neglect in a confidential setting. Partners work together to offer solutions to these particularly difficult cases.

The DA's work on elder abuse has been funded by three grants from state VOCA monies totaling \$377,500 as well as an Area Agency on Aging grant of \$25,000.

### **Accomplishments and Lessons Learned**

One of the proudest accomplishments of the program has been creating a working, multi-disciplinary team. Through great effort, mutual cooperation has been established among the DA's office and Adult Protective Services, the Long Term Care Ombudsman, the Department of Social Services Community Care Licensing Division, the Ventura County Public Guardian, and local law enforcement. Training has been provided to these groups on identification and prosecution of elder abuse.

The office has conducted an extensive community outreach campaign, including posters at bus stop, radio PSAs in both English and Spanish, presentations to thousands of seniors in a variety of settings, and dissemination of hundreds of thousands of senior crime prevention materials packets. The Elder Abuse Prosecution Team members have presented to audiences throughout California, Utah, Texas, and in nationwide symposiums.

The office has reviewed more than 250 cases of elder abuse since 1994. Cases are prosecuted vertically to ensure continuity for the victims and expertise in the area of elder abuse among the prosecutors. To date, the office has a 100 percent success rate in elder abuse prosecution.

One of the ongoing obstacles involves training law enforcement at the street level to spend sufficient time to properly investigate elder abuse cases. Elder abuse crimes require a great deal of investigative time and resources. Financial crimes require the gathering of information on numerous banks and real estate transactions, and other documentation. In many fraud cases, a professional must assess the mental capacity of an older victim. Law enforcement, which already is overtaxed, must find a way to provide ongoing training to their street officers and permit them to conduct proper investigations.

Key lessons learned include the importance of establishing lasting, trusting relationships through good communication. Be persistent. Don't be afraid to ask for help and don't be afraid to use the press as a tool for change and dissemination of ideas.

*A Law Enforcement Protocol, prescription cards, place mats, Senior Crime Prevention Handbooks, Senior Resource cards, and other materials are published in English and Spanish and include audio tapes for the visually impaired.*

# Financial Exploitation and Consumer Fraud Workshops

## *Workshop 4: Enhancing Prosecution of Financial Exploitation*

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### ***Delaware Attorney General's "Elder Abuse and Exploitation Project"***

Delaware Department of Justice  
Wilmington, Delaware

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### **Description of Program**

Since 1995, the Delaware Attorney General's Elder Abuse and Exploitation Project has hired two investigators to work on complaints and lend investigative support to police agencies investigating financial exploitation cases. In addition, a full-time prosecutor has been assigned to prosecute these cases. The goal of the project is to provide prosecution-based assistance to elderly victims of abuse, neglect, and exploitation.

### **Why Program Was Established**

The project was established due in large part to the Attorney General's commitment to protect the most vulnerable segments of the population. Prior to the inception of this program, financial exploitation cases were for all intents and purposes, not actively investigated. Traditional law enforcement agencies viewed most reported incidents as civil cases and would refer the complainant to private legal council or to a civil court. Therefore, General Brady assigned a Deputy Attorney General to meet informally with Adult Protective Services (APS) workers and screen their cases for prosecutorial merit. It became apparent that social services and law enforcement were not on the same page regarding how the cases should be addressed. The concept for the project was developed from these early meetings.

### **How Program Was Established**

The project was established in October 1995. Initially, the project involved the Department of Justice, APS, and law enforcement agencies throughout the state. The project received \$115,225 in Federal funds (Victims of Crime Act monies) and the State contributed \$28,806 during the three-year year period. The funding was used to hire personnel, purchase equipment, and cover other operating costs.

Because of this program, the Attorney General's office now has two investigators who actively work on complaints and lend investigative support to police agencies investigating financial exploitation cases.

The project now involves the entire aging network, as well as others interested in elder issues. All of these groups were brought to the table by the Attorney General while forming the Attorney General's Senior Victim Task Force. The task force is composed of representatives from the criminal justice system, social service agencies, volunteer service providers, community organizations, the banking and insurance industries, the medical community, and the community at large. The group meets monthly and has been broken down into subcommittees, which are examining the laws of Delaware, the policies of the courts and agencies, the communication and cooperation between and within the public and private sectors, and the coordination of services to address the needs of older victims. Of special note is the development of a statewide law enforcement protocol as well as significant changes to criminal statutes dealing with offenders who victimize the elderly/infirm.

### **Accomplishments and Lessons Learned**

Prior to the inception of this program, financial exploitation cases were not actively investigated. Traditional law enforcement agencies viewed most reported incidents as civil cases and would refer the complainant to private legal counsel or to a civil court. In 1993, APS investigated more than 200 cases of financial exploitation. During that year, the number of referrals by APS for criminal prosecutions was negligible because of lack of police and prosecutorial resources. By contrast, in the year 1997, APS referred 121 cases to the Attorney General's office, 84 percent of which represented allegations of financial exploitation. Augmented by the assignment of a full-time prosecutor, the project initiated prosecution in 25 cases, achieving an enviable 100 percent conviction rate. The great majority of those convicted were sentenced to jail terms despite sentencing guidelines suggesting probation.

The program has raised public awareness regarding the vulnerability of older citizens living in the community, either in their own home or the home of a relative/caregiver. In addition, the program has heightened awareness in the law enforcement community that these issues are not only a social service problem, but also a police problem. Raising both public and professional awareness have been accomplished through aggressive public education and in-service training programs.

The major obstacle in the Elder Abuse and Exploitation Project has been trying to improve the communication among social service and law enforcement agencies. However, through an aggressive training program and regular interaction with social service and law enforcement agencies, headway is being made. The statewide law enforcement protocol mentioned above is also helping to overcome this obstacle.

The key lesson learned is that interagency cooperation is essential to this sort of project.

*Materials are available at no cost.*

# Financial Exploitation and Consumer Fraud

## *Workshop 4: Enhancing Prosecution of Financial Exploitation*

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### ***Team-Building Strategies in the District of Columbia*** Office of the U.S. Attorney for the District of Columbia, Economic Crime Section Washington, DC

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#### **Description of Program**

The goal of the Financial Abuse Consulting Team (FACT) is to provide a structure within which cases of financial exploitation of the elderly in the District of Columbia can be presented, assessed, and referred as appropriate. By providing a multidisciplinary team approach involving law enforcement and social services resources as well as other areas of specific expertise, this program seeks to evaluate, investigate, and prosecute more quickly and effectively cases of financial exploitation in both the local and federal court systems.

#### **Why Program Was Developed**

FACT was formed to provide ready expertise in many areas to members of the Adult Abuse Prevention Committee who routinely handle financial exploitation cases. The professional expertise brought to these cases by the FACT will enable committee members, including the U.S. Attorney's Office Economic Crime Section, the District's Office of the Corporation Counsel Family Services Division, Adult Protective Services, and the Long-Term Care Ombudsman program, to work more quickly and effectively to reduce the harm suffered by victims of this form of abuse. Before FACT was formed, cases of financial exploitation languished because there was no central repository of information on how to handle them.

#### **How Program Was Developed**

The Financial Abuse Consulting Team (FACT) program is based on the Los Angeles County Fiduciary Abuse Specialist Team (FAST) model. The program was developed this year through the Adult Abuse Prevention Committee and the District of Columbia Office on Aging.

## **Accomplishments and Lessons Learned**

This is a new program, but through an informal program of the same nature and purpose, 40 cases have been referred, investigated, and prosecuted in the last three years.

The members of FACT are actively cooperating in drafting proposed legislation to encompass both civil and criminal issues that touch on financial exploitation of the elderly. Team members are seeking grant funding for the project.

The obstacles faced by the project to date include:

- the need to constantly create awareness of the severity and rampant nature of financial exploitation of the elderly; and
- the need to constantly educate others about the enormous time commitment involved in prosecuting cases of financial exploitation and the resulting need for adequate law enforcement resources.

The key lesson learned so far is that every single case needs a multidisciplinary approach and that teamwork and communication is critical to achieve successful prosecution.

*Available materials include an outline of the FACT program based on the Los Angeles County FAST model, and a directory of participants. The outline is free of charge.*

# Financial Exploitation and Consumer Fraud

## *Workshop 5: Combating Consumer Fraud Through Litigation*

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### **Ohio Attorney General's Senior Protection Initiative** Office of the Attorney General Columbus, Ohio

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### **Description of Program**

The Senior Protection Initiative is an effort of the Ohio Attorney General's Office that aims to establish statewide resource development, consumer education, and training opportunities for those working with senior citizens, people with disabilities, low income people, victims of abuse and victims of natural disasters. Under the Initiative, the Attorney General's Office has sponsored a statewide conference and formed an interdisciplinary task force. The Initiative also involves a number of litigation efforts.

### **Why Program Was Developed**

The Senior Protection Initiative began in March, 2000, as a means of gathering and exchanging information between organizations and individuals dedicated to assisting senior citizens and other vulnerable populations on Ohio. Attorney General Montgomery has pledged to identify and prosecute fraudulent conduct by unscrupulous businesses that prey upon Ohio's most vulnerable populations.

### **How Program Was Developed**

In June, 2000, the Ohio Attorney General's office hosted a state-wide conference, designed to identify successful programs, unmet needs, duplications of services, and goal setting for a more cohesive means of meeting the needs of Ohio's vulnerable populations. A task force developed as a result of the conference, including members of AARP, law enforcement, state and agency administrators, victim advocates, and adult protective services, to name a few.

## **Accomplishments and Lessons Learned**

Collaborations with other professionals and agencies, such as victim advocates, social services, and law enforcement are very important in helping to identify fraud against seniors. Victim advocates have prepared victim impact statements, which are submitted to the court. In addition, the advocates and social services professionals are trained to assist victims' emotional well-being. This, in turn, facilitates investigation and prosecution. Other important collaborations have involved state, federal and Canadian law enforcement, Triad, AARP, the Federal Emergency Management Agency, the Ohio Peace Officers Training Academy, Adult Protective Service, Meals on Wheels, the Ohio Department of Aging, the Columbus Urban League, Retired Seniors Volunteer Program, and the Ohio State University Extension.

As a direct result of the June conference, the Consumer Protection Section received several referrals for investigation. This collaboration has resulted in successful prosecutions and civil actions to obtain restitution. Of the 50 criminal cases currently active in the Section, half involve seniors as victims. The office has had tremendous success in criminal and civil cases made possible by the cooperative efforts with senior services agencies and law enforcement. These have involved coin con artists, home improvement fraud, telemarketing, cemetery scams, and "sweetheart swindles." Many of these cases involved multi-state issues, thereby making it necessary to work with federal entities as well as law enforcement and prosecutors in other states.

The primary obstacle to establishing collaboration with the various agencies was identifying what assistance already existed for vulnerable populations, where overlap of services existed, and how the Attorney General's office could be effective with the existing services. While the obstacles continue, overcoming them has been facilitated by networking and good communication among those involved.

Lessons learned include the importance of discussing cases involving fraud (civil or criminal) with local law enforcement, prosecutors, and judges and meeting with local and state senior services and professionals. Education of the public as well as those in the judicial system is crucial to getting the victimization recognized and prosecuted.

*Materials about the Senior Protection Initiative and consumer fraud litigation are available at no charge. Call 614-466-8831 or toll-free in Ohio at 800-282-0505.*

# Financial Exploitation and Consumer Fraud

## Workshop 5: Combating Consumer Fraud Through Litigation

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### **AARP Foundation Litigation** AARP Foundation Washington, DC

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### **Description of Program**

The AARP Foundation has filed a lawsuit with the Florida Attorney General's Office that challenges the marketing and sales practices of two living trust companies. Several amicus curiae (friend of the court) briefs have been filed in consumer protection cases brought by various attorneys general. The AARP Foundation learned about cases and found co-counsel through the National Association of Consumer Advocates, the National Consumer Law Center, the National Association of Attorneys General Elderly and the Law Committee, and the National Association of Consumer Agency Administrators.

### **Why Program Was Developed**

The living trust companies against whom the lawsuit were filed targeted older people and used AARP's name in their marketing materials. The amicus curiae briefs filed by the AARP Foundation have involved the following issues: the authority of the attorneys general to seek restitution for consumers; the rights of pre-need funeral purchasers when the funeral home goes out of business; whether an auto title pawn shop is entitled to the pawn shop exemption under a state consumer protection statute; and whether there was sufficient proof to support a judgment against a large sweepstakes promoter.

## **How Program Was Developed**

Collaborations with the organizations indicated above were established by conducting outreach to the organizations and their members, participating on their listserves, and by speaking at and attending their annual conferences.

## **Accomplishments and Lessons Learned**

A settlement has been reached with one living trust company defendant which requires the defendant to stop the practices alleged in the complaint and provide restitution to customers (unfortunately, the latter is unlikely since the company declared insolvency). The case is proceeding against the other defendant.

The major obstacle encountered is the failure of enforcement agencies to realize or remember that AARP is available as a resource to act as co-counsel, co-plaintiff, amicus, and/or as a source of possible victims. While this is most probably an oversight, a way of overcoming this is to make sure that the AARP is considered when an agency is investigating or initiating enforcement actions. Moreover, in some cases, an enforcement agency may decide not to bring an action that still might be appropriate for private litigation, and AARP might be able to represent the victims. Confidentiality issues are likely to arise in some instances, but probably can be overcome on a case-by-case basis.

A key lesson learned is that more outreach to these organizations, on a more regular basis, might help the organizations remember that the AARP Foundation is looking for good cases to litigate and support.

*A short "fact sheet" is available free of charge, and there are materials on the web site. Also available are copies of amicus curiae ("friend of the court") briefs in federal and state court cases challenging a range of financial fraud and unfair and deceptive acts and practices around the country.*

# Financial Exploitation and Consumer Fraud

## *Workshop 5: Combating Consumer Fraud Through Litigation*

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### **North Carolina Attorney General's Senior Consumer Fraud Task Force** Office of the Attorney General Raleigh, North Carolina

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#### **Description of Program**

The North Carolina Senior Consumer Fraud Task Force is comprised of three dozen agencies and associations, including the Federal Bureau of Investigation (FBI), U.S. Attorneys, Postal Inspectors, Better Business Bureaus, AARP, the State Bureau of Investigations, local police departments, the North Carolina Attorney General, the State Division of Aging, the Department of Insurance, the North Carolina Cooperative Extension Service, the Federal Retirees Association, local councils of government, the Senior Tarheel Legislature and the North Carolina Securities Division. Efforts include litigation, advocating for passage of responsible lending legislation, and other efforts to end improper practices involving senior citizens.

#### **Why Program Was Developed**

Often, social service or health care professionals are the first to spot a scam against senior citizens. After the identification of a scam, law enforcement can pursue the matter from there.

#### **How Program was Developed**

Initially, collaborations were established through cases on which law enforcement officials worked together and developed relationships of trust. The North Carolina Attorney General also worked with non-law enforcement groups to promote public awareness of scams and frauds. The North Carolina Senior Consumer Fraud Task Force and similar initiatives resulted from a desire to merge law enforcement and non-law enforcement interests and efforts. The Task Force was formed in 1998 and since then, other groups have heard about the Task Force and have joined. The Task Force meets quarterly and Senior Fraud Alerts go out to members every couple of weeks.

## **Accomplishments and Lessons Learned**

Collaboration with social service agency participants has proved highly beneficial. The North Carolina Senior Consumer Fraud Task Force has been responsible for successful litigation in a number of lawsuits on issues such as home repair fraud, mail fraud and telemarketing fraud. Additionally, the Task Force also is a participant in two new federally funded projects: Senior Fraud Patrol and the North Carolina Telemarketing Fraud Demonstration Site. Senior Fraud Patrol will train senior volunteers and others to spot and report “discrepancies” involving Medicare and Medicaid billings and reimbursement. The Demonstration Site was established in January 2000 and involves the Task Force teaming up with law enforcement officials from across the United States and Canada, to thwart telemarketing fraud.

However, there have been obstacles to overcome. Obstacles regarding collaboration among state, local and federal law enforcement officials primarily involve “turf” issues. Additionally, personal dislikes among members based on past case collaboration efforts were a cause for concern. Each agency has its own way of operating, and integrating these operations, even when a common goal was at stake, was difficult. Turf issues and personal dislikes were overcome by seeking out law enforcement agents with a demonstrated, abiding concern for elderly consumers.

An ongoing problem involves the amount of time that investigators and prosecutors can devote to Task Force activities. This has resulted in the task force becoming rather “lopsided” with representatives who are not law enforcement officials. Another problem is that many agents are now being taken off senior scams and are being thrown into investigating the new area of Internet fraud.

The key lesson learned is the importance of getting people invested in the idea of spotting and stopping senior scams and educating them on how to go about it. Also important is letting non-law enforcement participants know how important their efforts are. Giving credit all around when a case is brought is of paramount importance. Additionally, cooperative task force approaches need an administrator who can plan and keep operations flowing smoothly. The North Carolina Task Force has lacked such a person much of the time.

*A pamphlet describing the Senior Consumer Fraud Task Force and a brochure on North Carolina’s new Predatory Lending Law are available from the materials contact indicated above.*

# **Elder Abuse and Neglect at Home**

## **Workshop 1: Strengthening Interventions for Victims with Dementia**

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### **Operation Safe Return**

**Greater New Jersey Chapter Alzheimer's Association  
Denville, New Jersey**

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### **Description of Program**

The mission of the national Safe Return Program is to assist in the safe and timely return of individuals with Alzheimer's disease and related dementias who wander and become lost, and to provide wandering awareness, education, and training.

A key part of the program has been training law enforcement and emergency personnel about recognizing and managing dementia. This training has made an enormous difference, not just in cases of wandering but also in other instances involving alleged abuse or inappropriate behavior in which law enforcement and emergency personnel become involved.

The New Jersey program goals were:

- to increase law enforcement officials' awareness of wandering, Alzheimer's disease, and Safe Return; and
- to enable law enforcement officials to respond more effectively when a wandering incident occurs in their area.

### **Why Program Was Developed**

Attorney General Reno's recognition that law enforcement officials were coming in contact more frequently with situations involving people with Alzheimer's disease or dementia and wanted to ensure their proper handling and safe return prompted the development of the program by the national office of the Alzheimer's Association.

## How Program Was Developed

The program began in January 1997 with a series of meetings with the national Alzheimer's Association, the local New Jersey Chapters, and the Department of Law and Public Safety Division of Criminal Justice. The Division of Criminal Justice reached out to the Alzheimer's Association with the idea of adopting the Safe Return Program in New Jersey. The New Jersey chapter attended a program where another state chapter of the Alzheimer's Association talked about similar efforts in their state.

The program received formal support from Department of Law and Public Safety Division of Criminal Justice. Those state agencies and the New Jersey chapters of the Alzheimer's Association contributed equally to establish a \$6,000 budget to begin the program in New Jersey.

## Accomplishments and Lessons Learned

Key accomplishments include:

- 30,000 New Jersey police officers received wallet cards that contain common guidelines for interacting with persons with Alzheimer's;
- every municipal, county, and state police department received the *Roll Call* law enforcement training video, a 12-minute video made specifically for law enforcement officers that provides common scenarios and handling for them when dealing with those stricken with Alzheimer's;
- police academies throughout New Jersey received the *Roll Call* training video; and
- 7,000 police officers were trained in the first year of the project.

Other important accomplishments of the Safe Return program are:

- making Safe Return available to multicultural populations;
- making available financial scholarships for Safe Return registration; and
- beginning important discussions among law enforcement about older persons' issues.

The program faced important obstacles, including:

- the process of establishing training programs at police academies took longer than expected;
- ongoing efforts were needed to keep the training a priority among law enforcement officials and in local Alzheimer's Association chapters, and
- personnel changes and lack of follow-up made it a challenge to keep momentum going.

Lessons learned included the importance of:

- understanding the structure of each organization involved;
- being realistic and flexible about what can be accomplished in a public/private collaboration and about timelines;
- incorporating into your plans possible changes in personnel and priorities;
- ensure continuity of project, even after the initial rollout;
- debriefing participants about how to move forward 2-3 years post-inception; and
- incorporating the curriculum into law enforcement training academies.

*The following materials can be checked out from the Alzheimer's Association Green-Field Library by calling 312-335-5767: a January 1997 letter from the New Jersey attorney general; a Safe Return Roll Call training video for law enforcement; wallet-sized cards for law enforcement that address effective techniques for communicating with people from Alzheimer's disease or dementia; the Safe Return Alzheimer's curriculum used by police academies in New Jersey.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 1: Strengthening Interventions for Victims with Dementia***

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### ***A Model Intervention for Elder Abuse and Dementia***

**The Benjamin Rose Institute**

**Cleveland Heights, Ohio**

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#### **Description of Program**

This program brought together the leading agencies of the elder abuse and dementia service networks in the greater Cleveland area to build a community-response system that increased case identification, improved care planning and intervention, and promoted prevention of abuse, neglect and/or exploitation of persons with dementia.

#### **Why Program Was Developed**

Research over the past 15 years has shown that dementia and abuse often occur together. Despite this evidence, service providers tend to focus primarily on either abuse or dementia and receive very limited training regarding interface of the two problems. There is also a lack of trust and knowledge about how other agencies deal with the sensitive issues of elder abuse and dementia. Staff and volunteers in the dementia network, even those who are legally mandated to report suspected elder abuse, are hesitant to report suspected abuse to Adult Protective Services (APS) for fear of eroding the hard-won rapport with their clients and families.

#### **How Program Was Developed**

The program was developed with the involvement of personnel at several levels from the Benjamin Rose Institute, Cleveland Chapter Alzheimer's Association, the Cuyahoga County Department of Senior and Adult Services/APS, Northeastern Ohio Universities College of Medicine, and the Western Reserve Consortium for the Prevention and Treatment of Elder Abuse (now called the Consortium Against Elder Abuse).

The project Advisory and Work Groups both faced challenging issues during the program's development. Initial meetings were spent dispelling misconceptions about partner agency roles and discussing agency responsibilities and limitations. Members clarified legal, financial, and staffing constraints of their respective agencies. Issues of client confidentiality and violation of trust in terms of cooperative case management were examined. Clear lines of responsibility and authority were established to avoid confusion and duplication of effort when multiple agencies were involved in a case.

A variety of local foundations and the local area agency on aging funded the two-year project. Total funding equaled \$142,656. Two additional grants have funded product dissemination.

## **Accomplishments and Lessons Learned**

Accomplishments included:

- an educational curriculum on issues of elder abuse, a parallel curriculum on dementia, and an integrative curriculum on effective intervention in situations of elder abuse and dementia;
- cross-training for Alzheimer's Association and APS staff and volunteers based on the educational curricula;
- a screening tool for use by Alzheimer's Association staff and volunteers to identify abusive and potentially abusive situations, and tools useful in identifying cognitive impairment for APS staff;
- a handbook for caregivers to self-assess the risk of elder abuse and to identify community resources for assistance;
- protocols for referral and intervention among the three service-providing partners;
- increased and improved communications and referrals between the three service-providing agencies;
- dissemination of the curriculum across the national Alzheimer's Association network and various other agencies;
- training based on the curriculum for law enforcement personnel from 13 local police departments; and
- an extension of the project in order to develop a grid as a clinical guide for decision-making about involuntary protective intervention and guardianship.

Lessons learned suggest that the following elements are necessary for effective collaboration:

- a perceived value in interagency collaboration manifested in the release of staff time and commitment of agency leadership;
- a capacity to build and sustain trust, evident in the ability to risk and set aside past suspicions and misconceptions;
- a willingness to identify and solve problems, which requires honest and open communication.

These elements made it possible for the project members to face and overcome the challenges to successful collaboration that were discussed previously.

*A three-module manual containing a comprehensive curriculum for cross-training service providers in elder abuse and dementia is available for \$125 from Barbara Palmisano. A handbook for caregivers, including a self-assessment guide that identifies risk of mistreatment for caregivers of persons with dementia, is available from The Benjamin Rose Institute. An article describing the Model Intervention project was published in the Gerontologist and is available from Georgia Anetzberger.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 1: Strengthening Interventions for Victims with Dementia***

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### ***Safe Outreach for Seniors (S.O.S.)*** **Geriatric Evaluation and Management Service (GEMS)** **Lakewood, New Jersey**

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Web site: [www.sbhcs.com](http://www.sbhcs.com)

### **Description of Program**

The Safe Outreach for Seniors (SOS) program provides law enforcement officers with comprehensive training about the signs and symptoms of Alzheimer's disease and other types of dementia so that they will be able to identify older adults at risk who are living alone and/or driving. The training also informs law enforcement officers about referral sources for follow-up of older adults identified within the community who may be at risk for exploitation, emotional, and physical abuse as well as safety problems. The SOS programs serves as one of those referral sources, as well.

### **Why Program Was Developed**

The SOS program was implemented in 1997, after a female patient, who was scheduled for a dementia evaluation, was killed in an automobile accident while she was driving. After talking with the family,

it was revealed that the police had received multiple calls from the home for possible breaking and entering and that those calls had indicated paranoia, hallucinations, and delusional behavior. Many agencies in the county had been in contact with the patient, but no one had questioned her ability to drive. Further investigation indicated that officers were unaware of the agencies to which they could refer at-risk individuals. It became obvious that education in identifying dementia and a referral system was needed.

### **How Program Was Developed**

The SOS program was established in 1997 by the Geriatric Evaluation and Management Service (GEMS) at Kimball Medical Center, an affiliate of the Saint Barnabas Health Care System. GEMS contacted local police departments, which often had called on GEMS when situations arose with geriatric patients and help was needed. Law enforcement officers were very receptive to the training that GEMS offered, and the training eventually became part of the police academy curriculum.

Currently, Kimball Medical Center, four Ocean County police departments, and the Ocean County Police Academy are all involved with SOS.

### **Accomplishments and Lessons Learned**

To date, SOS has trained successfully more than 400 police officers. In the last year and a half, more than 200 seniors at risk have been identified and referred to the SOS program from four police departments. Reasons for referral include: hallucinations and or paranoia, confusion, wandering, motor vehicle infractions, domestic violence and frequent 911 calls. The average age of the client referred to the SOS program was 81. Of these seniors 59 percent lived alone, 32 percent with a spouse or friend, 6 percent with families, 2 percent in an assisted living facility and 1 percent with a live-in caregiver. Outcomes from these referrals show that 14 percent were hospitalized, 19 percent had family intervention, 36 percent were referred to Adult Protective Services, 14 percent for geriatric evaluation, 10 percent for psychiatric screening and 7 percent refused assistance.

With the growth of the senior population in Ocean County – 112,000 seniors age 65 and over living in 80 retirement communities – the number of referrals is growing. The obstacle encountered is the need for additional staffing, which is essential for the growth of the program.

The most important lesson learned is that communication is the key to a collaborative relationship with community and law enforcement agencies. A good relationship with the county office of aging services is vital as well.

*Materials are made available at the time of training at the Ocean County Police Academy. A training video and manual may be available in the future, but the cost has not yet been determined.*

# **Elder Abuse and Neglect at Home**

## **Workshop 2: Working Across Systems to Improve Services for Victims of Domestic Violence and Sexual Assault**

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### **Older Battered Women's Project** **Wisconsin Coalition Against Domestic Violence (WCADV)** **Madison, Wisconsin**

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#### **Materials Contact:**

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### **Description of Program**

The mission of the Wisconsin Coalition Against Domestic Violence (WCADV) Older Battered Women's Project is to end abuse in later life. Our goal is to ensure that older victims of family violence are offered safety, support and services, and that abusers are held accountable. To achieve our goals, we provide technical assistance, written materials, and training to professionals from a variety of fields in order to encourage a local collaborative response to the needs of older victims.

### **Why Program Was Developed**

The project was created to because domestic violence organizations traditionally have focused on working with women ages 18 to 45. It was necessary to determine whether older women had different needs for safety, support and services than younger women. It also was clear that professionals in the fields of elder abuse and aging were not working with domestic violence and sexual assault advocates on the local level. WCADV wanted to create and provide a vehicle to begin collaboration.

### **How Program Was Developed**

The issue of domestic abuse in later life was identified by staff at the Department of Health and Family Services in 1988. Jane Raymond, from the Bureau on Aging, approached the state domestic violence unit and governor's council on domestic abuse to discussed working collaboratively, but she was rebuffed. She was told that neither group worked with or wanted to work with older women. It took many years of discussion and negotiation before domestic violence organization in Wisconsin recognized the importance of addressing the needs of women across the life span.

WCADV began working with the Department of Health and Family Services informally in 1988. Funding came in 1990 from the Milwaukee Foundation for interviews of older abused women in that city and for development of recommendations about services. In 1992, AARP contracted with WCADV staff to complete a national survey of existing services for older abused women and a manual. In 1994-96, WCADV received one of six national demonstration grants on older victims of domestic violence from the Administration on Aging. In June of 1999, the Violence Against Women

Office gave WCADV a national technical assistance grant to open the National Clearinghouse on Abuse in Later Life.

Project staff have worked closely with the Department of Health and Family Services, the Elder Law Center of the Coalition of Wisconsin Aging Groups, the state attorney general's office, Wisconsin Coalition Against Sexual Assault, Wisconsin Council on Developmental Disabilities and local domestic abuse programs. As the project has gained national recognition, staff has worked with numerous national, state, and local domestic violence and elder abuse organizations.

### **Accomplishments of and Lessons Learned from Program**

Key accomplishments of the project since 1988 include:

- Organizing a statewide advisory committee including several older battered women as well as representatives from social services, aging, elder abuse, domestic violence, justice, health care, faith-based communities and batterers treatment.
- Developing and implementing a day-long cross-training program for professionals from domestic violence, sexual assault, aging, elder abuse and victim/witness organizations.
- Writing and disseminating a legal remedies booklet to help justice and law enforcement identify the range of criminal and civil responses possible in many cases of elder abuse. The remedies booklet has been used to train judges, prosecutors, victim/witness coordinators, legal services organizations, and other justice professionals on abuse in later life.
- Writing and disseminating a booklet for health care providers. The booklet was endorsed by the State Medical Society and distributed by the Department of Health and Family Services to more than 10,000 health care providers in Wisconsin. This booklet also provided the basis for a training module and project staff have trained numerous health care professionals throughout the state.
- Creating and disseminating a safety plan that incorporates concerns for victims of any age.
- Writing and disseminating a manual titled "Developing Services for Older Battered Women."
- WCADV staff and speakers bureau members have trained thousands of professionals throughout the country and written numerous articles that have been published in national journals and newsletters.

As a result of the project, leaders in the domestic violence and elder abuse fields have become more inclusive of older victims of domestic violence in their protocols, training and materials. Obstacles remain, however, including:

- finding an ongoing stable funding source for the project and local battered women's support groups;
- helping professionals understand the power and control dynamics present in many family violence situations and the importance of focusing on safety for victims and holding abusers accountable;
- finding the time and resources to create new materials and training on abuse in later life for others (e.g., faith-based communities, mental health and substance abuse professionals); and
- ensuring visibility for older victims in the domestic violence movement.

Lessons learned include the importance of working collaboratively with professionals from domestic violence, sexual assault, elder abuse, aging, social services, justice, health care, and other disciplines; and of including the voices of victims in all product development.

*Available materials include booklets on working with justice professionals and health care providers; a manual on developing services for older abused women (written for domestic abuse programs); for victims, several safety planning tools, including one focusing on financial safety planning; numerous articles about domestic abuse in later life. Contact WCADV for cost information.*

# **Elder Abuse and Neglect at Home**

## **Workshop 2: Working Across Systems to Improve Services for Victims of Domestic Violence and Sexual Assault**

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### **MEAPA's Domestic Violence Initiatives**

**Area Agency on Aging  
Phoenix, Arizona**

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#### **Materials Contact:**

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Web site: [www.aaaphx.org](http://www.aaaphx.org)

### **Description of Program**

The program, “Domestic Violence Does Not Respect Age,” was created to address a hidden population of domestic violence victims – the older battered women. The program addresses public awareness, professional education, and victim assistance.

### **Why Program Was Developed**

The late-life domestic violence initiative was established in 1995 by Area Agency on Aging (AAA), Region One, and Maricopa Elder Abuse Prevention Alliance (MEAPA), with more than 100 members, because neither the general domestic violence community nor the aging community were addressing older victims of domestic violence.

### **How Program Was Developed**

In 1995 MEAPA conducted a survey that revealed that fewer than 20 older women per year were utilizing domestic violence shelters in the county. Subsequently, educational materials, including a play, *The Dance* (later rewritten and produced as a video), were developed, training was provided to all domestic violence shelter staff in the county, and four older battered women support groups were established.

Some of the victims in the support groups needed emergency housing. The county’s domestic violence shelters are almost always full and turn away many victims. Older victims often do not feel comfortable at traditional shelters. Therefore, the Maricopa Elder Emergency Housing Program was established.

In addition to the AAA and MEAPA, there are currently 15 on-call volunteer advocates, 17 hospitals, and 30 assisted-living centers and skilled nursing facilities involved with the program.

## Accomplishments and Lessons Learned

The program's many accomplishments include:

- In-service training to staff of domestic violence shelters. Topics include the aging process; communication skills with older adults; elder abuse incidence and causation; dynamics of late-life domestic violence; and community resources for older adults.
- Educational materials with the theme "Domestic Violence Does Not Respect Age" were created and are widely distributed among older adults. This also included *The Dance*, a video that depicts the life of an older battered woman.
- Older battered women support groups, four of which were created throughout Maricopa County.
- Free temporary emergency housing was created in Maricopa County for victims of both elder abuse and late-life domestic violence, utilizing volunteer on-call advocates, hospital emergency room personnel, and donated space by assisted living homes and skilled nursing facilities. Victims may stay for up to two weeks in a facility. The AAA's domestic violence specialist works with the victim to identify options and community resources and provides support to begin the healing process.

Small grants have been received to develop the program and produce the video. Most of the on-going support is provided by volunteers and a small VOCA grant (\$24,500 per year) from the Arizona Department of Public Safety. The AAA also provides on-going financial support from its internal budget and is continually seeking more funding for late-life domestic violence programs.

The biggest obstacle for the program is lack of funding for staff to do more outreach to older victims. The number of older victims served is only about 200 annually, as compared with general domestic violence programs, which serve thousands annually. As a result, it is very difficult to convince domestic violence funders that older victims are a priority. In addition, after two weeks of emergency housing, 50 percent of victims end up going back to the abuser because there is no transitional housing for older victims. The Area Agency on Aging and MEAPA are working to develop transitional housing.

The most difficult issue for the emergency-housing program is determining what level of client frailty to accept. Initially, only persons who were completely independent were accepted, but in the last year, with the addition of skilled nursing facilities as sites, the program now accepts victims with impairments in ADLs (activities of daily living).

The key lessons learned are:

- Having a staff person dedicated to the program is essential.
- As the domestic violence initiative became known in the community, individuals less than 60 begged to utilize the services because they felt more comfortable with the older population rather than the very young domestic violence victim. As a result, the program eligibility was dropped to 50 years of age.
- Collaboration is the key to success.

*The following materials are available: "The Dance," a 28-minute video depicting the life of an older battered woman and her struggle to break free, \$100; Older Battered Women Support Groups: Facilitators Guide, \$20; Maricopa Elder Emergency Housing Program Manual, \$15; Mesa LEAPS (Leads in Elder Abuse Prevention Strategies): A Comprehensive Community Strategy to Combat Elder Abuse, \$14.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 2: Working Across Systems to Improve Services for Victims of Domestic Violence and Sexual Assault***

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### ***Wisconsin Coalition Against Sexual Assault “Widening the Circle” Project*** **Wisconsin Coalition Against Sexual Assault** **Madison, Wisconsin**

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Web site: [www.wscasa.org](http://www.wscasa.org)

### **Description of Program**

The Wisconsin Coalition Against Sexual Assault (WCASA) “Widening the Circle” Project was established to:

- initiate and/or enhance collaboration among human services, victim services, and criminal justice systems regarding sexual assault and abuse against people with disabilities and the elderly; and
- assist in identifying the needs of these systems and develop appropriate materials and training opportunities in order to enhance current responses to sexual assault and abuse occurring in institutional and community-based settings.

### **Why Program Was Developed**

WCASA recognized three problems that needed to be addressed:

- lack of awareness and/or recognition of the prevalence of sexual assault and abuse against the elderly and persons with disabilities;
- lack of appropriate response by systems and individuals who provide direct support to older persons or persons with disabilities who disclose that they have been sexually assaulted or abused; and
- the systems’ inability to hold perpetrators accountable for sexual assault and abuse against the elderly and persons with disabilities and to provide support services to those victims.

### **How Program Was Developed**

After years of remaining absent from initiatives to enhance services to abuse victims who are older or who have disabilities, WCASA recognized the importance of serving those populations largely due to the “indefatigable determination” of Wisconsin’s Advocacy & Protection Systems Developer (who administers the state APS program). Project-focused efforts began in 1997 with funding from the Centers for Disease Control Rape Prevention Education Grants. The formal project was commenced in July 2000 with \$54,804 in funding from the Violence Against Women Act STOP Formula Grants administered by the Wisconsin Office of Justice Assistance.

This effort began as a project with one staff person adding responsibilities to other supervisory and program operations duties. As a result of the growth of interest in this area and increased technical assistance requests, the project was developed into an organizational program and staff members were added to work permanently on these efforts.

## **Accomplishments and Lessons Learned**

WCASA has provided initial training to Wisconsin's sexual assault service provider programs and other state sexual assault coalitions regarding prevention and intervention services to the elderly and people with disabilities. WCASA has produced a guide/manual and accompanying video resource titled *Widening the Circle: Sexual Assault/Abuse and People with Disabilities and the Elderly* (available for \$45.)

WCASA and the Wisconsin Coalition Against Domestic Violence jointly convened an ad hoc work group focusing on elder abuse in facility settings. The work group, composed of numerous other pertinent organizations and service providers, is defining the problems faced by older victims of abuse and/or sexual assault and making recommendations for improvement in intervention. In addition, WCASA is meeting and working with several statewide agencies and organizations to initiate additional efforts for public awareness and service enhancement.

Two obstacles have surfaced:

- general lack of awareness among systems and the public of sexual assault and abuse against the elderly and people with disabilities; and
- lack of resources available to governmental agencies, service systems, and domestic violence and sexual assault organizations to respond to such abuse.

Efforts are underway in Wisconsin, spearheaded by many stakeholders, to overcome these barriers.

The most important lessons from this effort have been the value of systems collaboration and what is necessary to foster collaboration. Those who seek collaboration must realize that many individuals within other systems know a tremendous amount about their own systems. In order to initiate real change, partnerships must be formed that respect that knowledge and the culture within each system: its role, resources, and limits. Working in collaboration with Adult Protective Services (APS), criminal justice, and other systems provides the foundation from which real change in this area can occur – lasting change cannot be achieved alone.

*A guide/manual and accompanying video resource, "Widening the Circle: Sexual Assault/Abuse and People with Disabilities and the Elderly," was authored by several experts in the disability/elderly and/or sexual assault arenas, including Holly Ramsey-Klawnsnik, Ph.D. It is close-captioned and available for \$45, including shipping and handling. In the fall of 2000, WCASA will produce a booklet about sexual assault and/or abuse and older adults in English, Spanish and large print versions. Additional information is available on the web site.*

# **Elder Abuse and Neglect at Home**

## **Workshop 3: Engaging Law Enforcement, Prosecution, and the Judiciary**

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### **Adult Protective Services and Law Enforcement Teamwork Approach**

**Division of Aging and Adult Services  
Salt Lake City, Utah**

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**Materials Contact:**

Same as program contact

### **Description of Program**

In 1996, the State Department of Human Services hired a full-time law enforcement officer to work with its Adult Protective Services and law enforcement agencies throughout the state on elder abuse and exploitation cases. The program was established through a contract between Human Services and the State Department of Public Safety.

The goals of the program are:

- to consult with Adult Protective Services (APS) investigators regarding cases of financial exploitation of persons who have disabilities or are elderly and to screen those cases to assess whether law enforcement involvement is appropriate;
- to provide training and consultation to local law enforcement agencies on abuse, neglect and exploitation of persons who have disabilities or are elderly;
- to attempt to have at least one highly trained officer in each jurisdiction who can work with APS and handle adult and elder abuse cases;
- to serve as a consultant to APS and local law enforcement officers on individual case investigations;
- to work with county and district attorneys in an attempt to have cases prosecuted and establish good case law.

### **Why Program Was Developed**

In the mid-1990s, Utah law enforcement agencies were not always aggressive in pursuing elder abuse cases, often due to lack of training and resources. Previous attempts to train law enforcement officers about violations of elder abuse statutes, using social workers, had not been successful. Therefore, APS was seeking some way to create a cooperative working relationship with law enforcement to help stop elder exploitation.

## **How Program Was Developed**

A joint meeting between APS and the State Criminal Investigation unit on a specific case of exploitation led to a discussion of the problems APS faced generally when trying to get law enforcement to take a case. A brainstorming session generated the idea that APS needed a law enforcement officer who could talk “cop talk” and work directly with law enforcement agencies. Administrators in Human Services and Public Safety welcomed the idea of a contractual arrangement. It was a politically appropriate way to demonstrate cooperation between two large departments of state government and to serve a vulnerable population. APS used funding it already had for an existing vacant APS worker position; in essence, APS gave up a worker position to hire the law enforcement officer.

Currently involved with the program are the Department of Human Services, Department of Public Safety and local law enforcement agencies. Local prosecutors and the state attorney general’s office also have become involved in individual cases.

## **Accomplishments and Lessons Learned**

Program accomplishments include:

- several hundred law enforcement officers trained by APS and the APS Law Enforcement Officer;
- several officers in local jurisdictions identified as resources for APS;
- a number of cases investigated jointly and charges filed.

Partially as a result of the program and the stronger focus on elder abuse issues, a new Elder Abuse Criminal Code statute was passed by the state legislature in 1996.

Most of the program time is spent in training personnel and investigating individual cases; one program goal is to provide training to every law enforcement agency in the state. The biggest obstacle is getting some local law enforcement agencies to recognize the seriousness of working with older victims. As a general rule, county attorneys continue to resist prosecution of elder abuse cases, even when law enforcement has developed an excellent case, and many prosecutors have been unwilling to participate in the extensive training that is now available. Prosecutors see relatively few cases of elder abuse and exploitation. The issue is not a major focus for them, and they often are unfamiliar with the procedures and paperwork requirements for handling these cases.

A key lesson from this program is that properly trained law enforcement officers are more effective and productive in dealing with elder abuse and exploitation than Adult Protective Services working alone.

*Materials available at no charge.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 3: Engaging Law Enforcement, Prosecution, and the Judiciary***

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### ***Educating Law Enforcement and Prosecutors about Elder Abuse*** **Commission on Peace Officer Standards and Training (POST)** **Sacramento, California**

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### **Description of Program**

The Commission on Peace Officer Standards and Training (POST) develops training for California law enforcement agencies using a variety of formats. POST has developed elder abuse training, the goals of which are:

- to increase law enforcement awareness of the forms and indicators of elder abuse, the relationship to other forms of abuse such as family violence, skills for interviewing older adults, reporting laws and responsibilities, criminal statutes, evidence collection and case building, methods to protect older adults, community resources, and how to work with adult protective services (APS); and
- to demonstrate the value of working collaboratively with other disciplines.

### **Why Program Was Developed**

The Commission on POST was developed to certify minimum standards for law enforcement competency and to establish statewide guidelines in handling a variety of law enforcement situations and categories of crime, such as domestic violence. Over time, it became clear that law enforcement officers needed education about domestic violence (including elder domestic violence) and elder abuse and thus those courses were developed.

### **How Program Was Developed**

The Domestic Violence Subject Matter Expert Committee, including representatives from the law enforcement, prosecution, and advocacy arenas, grew out of a legislative mandate and was organized in 1992 to develop guidelines for response to domestic violence. Committee members developed

curricula for various domestic violence courses. Those experts, who represented law enforcement, prosecution, victim witness programs, and advocacy, later helped develop the elder abuse training curricula. They also helped to identify experts from other areas including aging services, APS, medicine, legal services for the elderly, conservatorship organizations and Medi-Cal/Medicaid fraud.

Most of the domestic violence and elder abuse curricula have been developed since 1997. Funding has come from the regular POST budget from the California legislature and from California's Violence Against Women Act STOP formula grant monies.

## **Accomplishments and Lessons Learned**

The commission has developed several telecourses, classroom courses, and a CD-ROM program that address elder abuse in various ways. These include:

- courses on elder abuse (1997); domestic violence and culture (1998); and court orders (2000);
- a 40-hour classroom course for domestic violence investigators that addresses elder abuse in a specific segment on elder domestic violence and contains other segments on dynamics, investigation, mandates, lethality assessment, safety planning, and court orders;
- an eight-hour course for first responders in domestic violence that briefly reviews elder abuse criminal laws;
- an eight-hour sexual assault course for first responders that includes a lengthy article on elder sexual assault; and
- a 24-hour domestic violence course for field training officers that reviews elder abuse criminal statutes.

The curricula address many policy-related issues, including the different needs of urban and rural victims, abusers, and law enforcement agencies and the complexities posed by the many cultures, languages, and underserved populations (e.g., elderly, same sex relationships) in California.

The domestic violence curricula committee faced obstacles when it commenced. These included a history of distrust and public finger pointing between many of the participants. Some law enforcement representatives lacked experience handling domestic violence cases and did not see the issue as significant. With time these problems disappeared, particularly as persons unwilling to change their attitudes and persons inexperienced with handling domestic violence were replaced. The remaining experts began to work together and with experience the obstacles were overcome.

The key lessons learned are that collaboration is necessary to develop and implement effective training; careful screening of committee members is necessary to assure they can work together and are not hostile to the project; involvement of agency leadership is critical in order to assure that elder abuse and related topics are an agency priority; and it is necessary to secure a funding stream that will continue past grant periods.

*Copies of telecourses are available from the Commission on POST. Call 916 227-4889. Telecourses often are available through local law enforcement agencies in the US that regularly download POST courses. The approximate charge for videos is \$100.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 3: Engaging Law Enforcement, Prosecution, and the Judiciary***

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### ***Elder Abuse Curricula for Judges, Court Staff and Victim Advocates*** American Bar Association Commission on Legal Problems of the Elderly Washington, DC

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#### **Web Sites:**

Commission on Legal Problems of the Elderly  
[www.abanet.org/elderly](http://www.abanet.org/elderly)

National Center on Elder Abuse:  
[www.elderabusecenter.org](http://www.elderabusecenter.org)

### **Description of Program**

The ABA Commission on Legal Problems of the Elderly (ABA Commission) has developed model national curricula on elder abuse for judges, court staff, and victim services providers. The curricula are intended for use by state judicial educators, victim services providers, and others in planning and implementing educational programs for their constituencies on the unique nature of and considerations related to cases involving elder abuse.

The goals of the ABA Commission's two curricula projects are:

- to heighten the sensitivity and knowledge of participants about the growing problems of elder abuse and about the laws and programs related to elder abuse; and
- to expand the awareness among judges who hear family violence cases or serve on family violence coordinating councils and among victim services providers that many instances of elder abuse are part of the continuum of family violence.

### **Why Program Was Developed**

The judicial and court staff curricula project was developed because of the recognition that the number of elder abuse cases in the courts is growing. The project implemented the first recommendation of the ABA Commission's State Justice Institute-funded project, "Recommended Guidelines for the State Courts in Handling Elder Abuse Cases," which called for training judges and court staff about elder abuse.

The curriculum for victim services providers was developed for similar reasons. The changing approach to handling elder abuse cases and the growing number of cases in the criminal justice system mean that victim services providers will increasingly be called upon to assist victims of elder abuse. Additionally, a DOJ focus group on elder victimization had recommended that such a curriculum be developed.

## **How Program Was Developed**

The State Justice Institute funded the judicial and court staff curricula project in 1996. The ABA Commission conducted it in conjunction with the National Association of Women Judges. Each of the three curricula for judges and court staff was pilot tested once during the course of the grant project that funded the curricula development.

The DOJ Office for Victims of Crime funded the victim services provider curriculum in 1998. This curriculum has been pilot tested five times: twice at the National Organization for Victim Assistance annual meeting and at victim services conferences in Missouri, Washington and Pennsylvania. This curriculum will be available in 2001.

## **Accomplishments and Lessons Learned**

Judges in Tennessee and Illinois and court staff in Tennessee were educated about elder abuse during the pilot phase of the curricula project. Since that time, the judicial curricula have been used at the annual meeting of the National Association of Women Judges and at judicial conferences in Washington, Florida (twice), Georgia, Ohio and Wisconsin.

Widespread implementation of the judicial and court staff curricula has faced obstacles. It seems likely that many judges and court staff, and the professionals responsible for developing education programs on their behalf, are still not seeing many cases of elder abuse and thus are not willing to expend the effort to learn about that issue.

In the states where the judicial and court staff curricula were pilot tested or subsequently implemented, it took concerted efforts by one or more concerned judges, judicial educators and advocates for elder abuse victims to make that happen.

The key lesson learned is that there are three critical factors for successful implementation of these model curricula:

- the support -- and preferably the active leadership -- of a concerned and well-respected member of the target audience;
- a multidisciplinary team of planners who represent and understand the target audience and who can and will adapt the curricula to the needs of the target audience; and
- a multidisciplinary team of trainers, led by one or more peers of the target audience, who understand the work done by and the specific laws, programs and issues affecting the target audience, and who can and will target their presentations to the needs of that audience.

*Elder Abuse in the State Courts – Three Curricula for Judges and Court Staff* is available from the ABA Commission at no cost to organizations that plan to use it for the purpose for which it was intended. The curriculum for victim services providers will be available from the DOJ Office for Victims of Crime in 2001.

# **Elder Abuse and Neglect at Home**

## ***Workshop 3: Engaging Law Enforcement, Prosecution, and the Judiciary***

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### ***Encouraging Tribal Law Enforcement*** **Pasqua Yaqui Police Department** **Tucson, Arizona**

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### **Description of Program**

The goal of this program is to provide a focal point for elderly residents of the tribe to help them resolve family problems and prevent elder abuse.

### **Why Program Was Developed**

While the tribal council adopted an elder abuse code in the 1980s, no one was appointed to enforce it and there was no focal point in the community for elder abuse prevention or enforcement.

### **How Program Was Developed**

Police Chief Dan Liston established the program in June 1999 by appointing Officer Charles Mendonca as the investigating officer on elder abuse and giving him responsibility for responding to elder complaints. The program operates solely within the police department; no outside funding has been obtained. All cases involving victims 55 years old or older are referred to Officer Mendonca's office for review, as are all elder complaints generally. Officer Mendonca functions partly as a "social worker" or "public relations officer for the elderly." He works with other organizations to find solutions, including the Housing Authority, Social Services, Behavioral Health, Adult Protective Services (APS), and shelter programs for the elderly.

## **Accomplishments and Lessons Learned**

This program has established a safe environment for seniors to communicate honestly with law enforcement about their situations. The program also has had success in mediating family disputes. In addition, elders now know whom they can call when they are unable to obtain services or otherwise resolve issues on their own.

There have been a number of obstacles in establishing this program. These include denial, the feeling of many of the tribe's elders that they are being neglected by the tribal government, and the withholding of confidential information from law enforcement by social workers and counselors due to a lack of understanding about immunity from prosecution. Through education and implementation of the program, however, more elders are coming forward to seek the help they need.

A key lesson learned is that it is important to place the right person in the right job. The police officer investigating cases and interviewing victims has to be part social worker and think "outside the box" of traditional law enforcement.

*Materials available.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 4: Augmenting the Role of Medical Professionals***

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### ***California Vulnerable Adult Specialist Team (VAST)*** University of California at Irvine Medical Center Orange, California

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### **Description of Program**

The purpose of the Vulnerable Adult Specialist team (VAST) is to design, implement, and evaluate the usefulness of an interdisciplinary medical team in the assessment, diagnosis, investigation, and prosecution of elder abuse cases.

The goals for this program are:

- to create a team of experts consisting of a geriatrician, nurse practitioner, pharmacist, psychologist, social worker, and gerontologist;
- to examine the medical and psychological injuries of elder abuse victims;
- to document injuries for subsequent legal action;
- to assess the cognitive ability of the victims and/or the alleged perpetrators;
- to stimulate discussion among a group of experts representing a diverse group of disciplines (criminology, law, ethics, social services, law enforcement, geriatrics) in order to establish the optimal role of the medical component;
- to develop criteria for addressing which victims would benefit most from the health team's evaluation and treatment;
- to send a geriatrician and/or nurse practitioner to community-based meetings on elder abuse;
- to provide urgent (within 48 hours) availability of individual team members for consultation with Adult Protective Services (APS) staff;

- to provide agencies and lawmakers sufficient and compelling information to enact legislation based upon the outcomes of the project;
- to develop a standardized tool for documenting elder abuse;
- to educate health care providers, attorneys, law enforcement, and seniors;
- to create a practical and replicable approach to elder abuse in which social, medical, and legal services coordinate efforts in order to successfully recognize, report, examine/document, and prosecute elder abuse and neglect.

### **Why Program Was Developed**

The program was developed to address the recurring complaint among people who work in the field of elder abuse that there is a lack of knowledgeable, trained medical clinicians to assist them. Additionally, the program is seeking to address other problems related to medical examination/documentation of elder abuse cases such as the lack of standardized tools for screening for elder abuse or documenting the signs and symptoms of elder abuse. By working with child abuse experts who have faced similar problems, the program is developing tools that will improve the quality of elder abuse examination and documentation, as well as the quality of evidence available to the criminal justice system.

### **How Program Was Developed**

The program was developed by the Program in Geriatrics, University of California Irvine, College of Medicine. It was funded in April 2000 through a three-year grant totaling \$881,775 from the Archstone Foundation.

Organizations currently involved with the program include adult protective services, the county mental health unit for elders, the local long-term care ombudsman, an advocacy group for community services, the local domestic violence shelter, the Public Guardian, the Orange County District Attorney, Family Violence Subcommittee on Elder Abuse, and the Orange County Financial Abuse Specialist Team. The program anticipates that as it grows other organizations will become involved.

### **Accomplishments and Lessons Learned**

The team has responded to 37 inquiries by APS and consulted about or conducted home visits on 19 documented cases in the first six months. Two cases have resulted in prosecution; there has been one conviction and the other case is in progress.

The program has experienced challenges in determining which APS cases would benefit most from the team's expertise. VAST has received referrals that need medical intervention but do not necessarily involve abuse; however, the consultant role does not permit the team to take on primary-care patients. To deal with this challenge, the team meets regularly with referring parties in order to encourage cross-training and learn more about unmet needs.

Two key lessons have been learned. First, it would have been beneficial if the program had conducted training for APS workers on using the medical consultants before it began accepting referrals. Second, there is a need for integration of a medical team into the current system.

*Materials are available free of charge.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 4: Augmenting the Role of Medical Professionals***

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***Texas Elder Abuse & Mistreatment (TEAM) Institute***  
Baylor College of Medicine  
Houston, Texas

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### **Description of Program**

The Texas Elder Abuse and Mistreatment (TEAM) Institute is a collaboration between the Baylor College of Medicine Geriatrics Program at the Harris County Hospital District and the Texas Department of Protective and Regulatory Service. The goal of the program is to improve the lives of abused and neglected elders through clinical care, education, and research.

### **Why Program Was Developed**

The TEAM Institute was developed to use an interdisciplinary geriatric medicine team as an adjunct to existing Adult Protective Services (APS) intervention in order to improve outcomes in the care of abused or neglected elders.

### **How Program Was Developed**

The TEAM Institute was developed in December 1997 by the Baylor College of Medicine Geriatrics Program at the Harris County Hospital District and the Texas Department of Protective and Regulatory Services –Adult Protective Service Division.

Additional organizations that have become involved with the TEAM Institute include: the Houston Area Women's Center; the Departments of Internal Medicine and Family Practice, Baylor College of Medicine; the VIVA Clinic at Ben Taub General Hospital; and the Harris County Attorney's Office.

The TEAM Institute has found that it addresses the following policy issues:

- care of minority elders;
- care of the uninsured and underinsured;
- advancement of research agendas in the area of elder mistreatment;
- the care of mistreated elders delivered by public agencies;
- educational imperatives for medical, nursing, and social work students;
- the education of APS specialists in the area of common medical conditions seen in elders;
- guardianship in elders who lack capacity to make decisions for themselves; and
- the root medical causes of elder abuse and neglect.

### **Accomplishments and Lessons Learned**

To date, the TEAM Institute has accomplished the following:

- provided direct care to more than 300 abused or neglected senior citizens;
- established an interdisciplinary team that includes physicians, nurse practitioners, social workers, and APS specialists;
- had more than 400 medical students accompany APS specialists on in-home investigations;
- trained more than 300 students of different disciplines in the TEAM Institute approach;
- made more than 30 presentations in eight states, educating APS specialists, physicians, nurses, and social workers about the TEAM approach;
- published five papers on various aspects of TEAM Institute's research and clinical approach;
- conducted a number of research studies and have five ongoing studies; and
- begun the process of expanding the program to multiple regions in the state of Texas.

The obstacles faced by the program relate to the differences in approach to patient/client care by the various disciplines. Traditionally, medical teams develop a list of differential diagnoses and then narrow down the possibilities using objective measures. Social workers and APS specialists have been trained to gather as much information as possible to broaden the possibilities and to use subjective data. Another obstacle, one faced by each discipline, is the assessment of capacity of the clients.

The obstacles are being overcome by holding regular meetings and a joint training course on assessment of capacity. In addition, the program is establishing guidelines for the referrals sent to the medical team.

The key lesson learned is that it is critical for members of APS specialist teams and geriatric medicine teams to meet regularly, to get to know each other, and develop trust with each other.

*Materials are available at no charge.*

# **Elder Abuse and Neglect at Home**

## **Workshop 4: Augmenting the Role of Medical Professionals**

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### **South Carolina Vulnerable Adult Medical Protocol** South Carolina Department of Public Safety Columbia, South Carolina

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### **Description of Program**

The South Carolina Vulnerable Adult Medical Protocol was designed to provide a standardized means for collecting evidence to support improved criminal prosecution in cases of elder abuse. The goals of the protocol are:

- to provide documentation of medical evidence for the prosecution of perpetrators;
- to enhance awareness of the problem of vulnerable adult abuse and neglect among physicians and other medical providers;
- to serve as an assessment tool to assist physicians.

### **Why Program Was Developed**

The South Carolina Adult Protection Coordinating Council, a statewide body, saw a need to develop a medical protocol for vulnerable adults in order to enhance the collection of evidence that will support improved criminal prosecution in cases of elder abuse.

### **How Program Was Developed**

The South Carolina Adult Protection Coordinating Council and the South Carolina Medical Association developed the protocol in 1995 through a multidisciplinary process that insured input from the criminal justice system, medical community, social services and victim advocates. The subcommittee charged with drafting the document looked at the protocols used in the child abuse community as a departure point for development of the vulnerable adult protocol.

There was a great deal of discussion in the medical community about the length and difficulty of the protocol. These issues were resolved through a pilot program that tested the form and made the necessary changes that ultimately resulted in consensus.

The form currently is supported through the South Carolina Law Enforcement Division, which manages the process for both vulnerable adult and child medical protocols.

The South Carolina Law Enforcement Division and the South Carolina Division of Victim's Assistance bear the costs of this program (printing, distribution and administration of the protocol).

### **Accomplishments and Lessons Learned**

A training program about the curricula has been developed and presented through South Carolina Educational Television.

The major obstacle faced by the program has been one of usage. The protocol has been distributed to all hospitals and other locations where vulnerable adults may go for medical treatment. However, the majority of abuse and neglect cases have not come from hospitals. They have been "in-home" or facility cases – e.g., nursing homes, residential-care facilities – and these incidents generally do not result in the victim coming in contact with medical personnel who are aware of or have been trained in the use of this procedure. While the protocol is an excellent tool for forensic screening, it doesn't reach the majority of victims at the present time. In order to reach the entire medical community, extensive training would have to occur; resources for this do not currently exist.

The key lesson learned is the importance of "getting the word out" and educating those medical professionals who need to use the protocol.

*Materials are available at no charge.*

# **Elder Abuse and Neglect at Home**

## **Workshop 5: Enhancing Victim Services**

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### **California's Victim-Witness and Prosecution Initiatives for Elder Abuse Victims** Governor's Office of Criminal Justice Planning (OCJP) Sacramento, California

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### **Description of Programs**

The office has three programs focusing on elder abuse.

- The Elder Abuse Advocacy and Outreach Program is the largest. Its goal is to provide a coordinated multidisciplinary team response to the needs of elder and dependent adults who have become victims or have the potential of becoming victims of abuse, either financial or physical.
- The Elder Abuse Special Emphasis and Special Victims Program also focuses on providing direct victim services, but moves a step further into serving underserved populations. Successful applicants select an ethnic minority population of elder citizens and spend at least 50 percent of their time working within the target community itself.
- The Elder Abuse Vertical Prosecution Program is a new arm of the overall effort of OCJP to provide consistent holistic approaches to solving problems in the criminal justice system and victim services. The goal of the program is to enhance or create special units in prosecutor's offices in California that handle felony crimes against the elderly or dependent adults through investigations and vertical prosecution of cases.

### **Why Programs Were Developed**

California has a burgeoning elder population, and this group of vulnerable citizens deserves recognition and services aimed at their protection and safety.

### **How Programs Were Developed**

The Elder Abuse Advocacy and Outreach Program began in April 1999; it was established by OCJP at the request of the Governor and State Legislature. It is providing \$1.7 million in VOCA funds to 24 counties.

The Elder Abuse Special Emphasis and Special Victims Program began operation in July 1997 and was developed by the OCJP due to internal recognition of the need to focus on this growing population. It is providing \$630,000 in VOCA funds to 6 counties.

The Elder Abuse Vertical Prosecution Program began in April 2000 and was established by legislative act at the request of OCJP in order to provide a multi-disciplinary approach to the problem. Funding is provided to 17 counties with \$2.217 million in federal Byrne monies and state general funds.

All these programs are continuing to grow as the communities begin to show results and media response shows the effectiveness of their efforts. More agencies become involved as more media attention is focused on the issue. Outreach efforts include billboard displays in prominent freeway commute areas; displays on rapid transit systems; bus kiosks; radio and television public service addresses and posters in emergency rooms of hospitals.

## **Accomplishments and Lessons Learned**

Accomplishments include:

- recognition that care facilities need constant monitoring by regulatory agencies to ensure compliance with safety requirements;
- improved community awareness that has resulted in overwhelming caseloads of abuse for prosecutors and law enforcement;
- consideration of new legislation that will allow banks to make disclosures about suspected financial abuse to law enforcement without fear of violating confidentiality laws; and
- expansion of advocacy by creating new positions has allowed more outreach and direct victim services particularly on a 24-hour call back basis.

The biggest obstacles have been the lack of training when task forces are established and the need for more personnel at the state funding agency to provide one-on-one technical assistance to each project. To overcome this, the office is starting grant programs with a mandatory meeting of the management of each agency to provide them with the policy and state and federal reporting requirements.

The following are the key lessons learned.

- Any new program created, whether a victim service or a criminal justice program, must address the need to educate the program respondents about the tasks ahead.
- Alliances with other state and federal programs to put in place all the services seen as critical to achieving program goals can help to overcome inadequate.
- Gathering all relevant agencies together and looking at the problem is challenging, but results in more success.

*Requests for Proposals for Prosecution and or Advocacy programs are available through the Governor's Office of Criminal Justice Planning Victim Witness Branch at 916-324-9128. Individual model projects within these two areas also may be requested by contacting a Program Specialist at that number.*

# **Elder Abuse and Neglect at Home**

## ***Workshop 5: Enhancing Victim Services***

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### ***Child and Family Advocacy Center/Triad Program of the Blackfeet Blackfeet Tribe Browning, Montana***

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#### **Materials Contact:**

Same as program contact

### **Description of Program**

The purpose of the Blackfeet Child & Family Advocacy Center, located on the Blackfeet Indian Reservation, is crime prevention and victim services. Its mission is to “to promote the health and well-being of children and families.” The main goals of the program are:

- to establish a Victims Office which provides crime prevention education and victim services;
- to provide training to all service providers about types of crime and their effects;
- to identify the needs of elder victims of crime; and
- to develop and implement policies and procedures, laws, protection codes, and criminal and civil ordinances.

As indicated by the third goal, the Center has focused a portion of its efforts on specifically addressing the needs of elderly crime victims.

### **Why Program Was Developed**

A survey of Personal Care Attendant workers conducted by the Center identified a significant need for training, protocols, and services related to crimes against the elderly. Therefore the Center has targeted this issue as part of its overall mission.

### **How Program Was Developed**

The Child & Family Advocacy Center developed the program in 1998. A Victims of Crime Act (VOCA) grant of \$25,000 provided support for establishing the Victims Office and completing a community needs assessment.

Agencies currently involved with the program include the Blackfeet Eagle Shield Program, the Heart Butte Senior Citizen Program, the Reservation nursing home, law enforcement, and community health agencies.

## **Accomplishments and Lessons Learned**

The Center's accomplishments include:

- completion of a community needs assessment;
- completion of a survey of personal care attendants;
- establishment of a planning and advisory council;
- establishment of a domestic violence protocol and other policies and procedures;
- establishment of a Domestic Abuse Victims Program, which has served more than 100 abused women and their children (including four elders) this year.

An Office for Victims of Crime evaluation in July 2000 found that the project had "achieved all objectives with limited funding," had "good staff/management skills," had established a "good computer data base," and that the "program has the capability to be used as a model program for other tribes."

The major obstacle is lack of funding to meet all the current needs, such as a permanent, specially trained investigator; training for law enforcement, the Tribal court, probation, and other criminal justice professionals; development of new laws; a domestic violence shelter; crime prevention education; emergency services; and a resource library.

Key lessons learned include:

- the value of having a qualified accountant when establishing a non-profit program to keep adequate financial records, complete tax reports and federal financial reports, do the payroll, and manage the drawdown of funding;
- the need to train all staff instead of a selected few; and
- the importance of adding indirect costs to grants to cover overhead expenses such as audits and building maintenance.

*Materials available.*

# **Elder Abuse and Neglect at Home**

## **Workshop 5: Enhancing Victim Services**

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### ***Victim-Witness Efforts of the U.S. Attorney for the Western District of Texas*** U.S. Attorney's Office for the Western District of Texas Austin, Texas

#### **Program Contact:**

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#### **Materials Contact:**

### **Description of Program**

The role of the federal Victim-Witness Coordinator is defined by statute in the Victims' Rights and Restitution Act of 1990 and the *Attorney General Guidelines for Victim and Witness Assistance* (1991). Variations exist between districts and between victim assistance programs within the districts. These variations are dependent upon the available resources in the district, level of the victim-witness coordinator's expertise, and the direction set by each U.S. Attorney's Office (USAO). After indictment, the USAO Victim-Witness Coordinators serve as the contact person for all crime victims, including elderly crime victims, going through the federal criminal justice system.

### **Why Program Was Developed**

The purpose of the Victim-Witness Programs in the United States Attorneys Offices is to ensure that federal crime victims are afforded their rights.

### **How Program Was Developed**

In order to provide comprehensive services, the federal victim-witness programs must rely on others in the service delivery system to provide necessary information and resources. Victim service delivery depends on information in possession of the Assistant U.S. Attorney, as well as federal law enforcement agencies, the courts, probation, corrections, and the local community service programs. The federal coordinators must keep up-to-date on all the various agencies within their districts that offer assistance to victims and maintain a good working relationship with these agencies. This collaboration is imperative in the event of a large multi-victim federal crime involving thousands of crime victims.

The Victim-Witness Coordinator can take the lead in educating the agents and prosecutors on a case involving elderly victimization and can advocate for a more victim-oriented approach.

## **Accomplishments and Lessons Learned**

The USAO for the Western District of Texas has established a “flexible” protocol for working large multi-victim fraud cases involving hundreds or thousands of older victims. The USAO set up a toll-free victim and witness line to encourage older victims to call when they have questions. This number is included on all correspondence from the U.S. Attorney’s Office. The USAO doesn’t use form letters and staff members avoid using legalese in written correspondence to older victims. The USAO prosecutors also often conduct a group court preparation session in the courtroom before the trial begins, letting each victim/witness take the stand to get comfortable with the room, microphone and prosecution team. An additional benefit of this procedure is that it allows the prosecution to determine what special needs each victim may have (hearing loss, vision problems, mobility and cognitive issues, medical problems, etc.).

Lessons learned include the importance of:

- NOT forcing older victims to use a complex voice mail system in order to leave a message
- NOT using form letters
- NOT forcing older victims to travel by air early in the morning or late in the evening
- providing a toll-free number for victims to call
- explaining thoroughly how the restitution process works
- making your program responsive to the victims’ needs on a case-by-case basis
- being creative and providing older victims with prevention and resource information to prevent further victimization.

*Many federal districts have a website that lists the phone numbers and addresses of each U.S. Attorney’s Office field office in each federal district. To locate the U.S. Attorney’s Office in your area you can go to [www.usdoj.gov](http://www.usdoj.gov) and then click on [Alpha list of U.S. Attorney’s components](#). Each federal district has a federal Victim-Witness Coordinator.*

# **Institutional Abuse and Neglect**

## ***Workshop 1: Creative Initiatives to Educate Professionals and the Public***

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### ***CARIE's Abuse Prevention Training Program*** **Center for Advocacy for the Rights and Interests of the Elderly** **Philadelphia, Pennsylvania**

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Web site: [www.carie.org](http://www.carie.org)

### **Description of Program**

The Center for Advocacy for the Rights and Interests of the Elderly (CARIE) created “Competence With Compassion: A Training Guide” to educate certified nursing assistants (CNAs) in nursing homes about abuse of residents. The three goals of the curriculum are:

- to increase staff awareness of abuse, neglect, and potential abuse in any setting where people are dependent upon others for assistance;
- to equip staff with appropriate conflict intervention strategies so abuse can be avoided;
- to reduce incidences of abuse, thus improving the quality of life for both the person who requires care and the caregiver.

### **Why Program Was Developed**

Recent studies by Dr. Karl Pillemer, the Senate Committee on Aging, and the General Accounting Office established in research the same resident abuse and staff training problems that CARIE had anecdotally identified through its Long-term Care Ombudsman program and Elder Abuse Task Force.

### **How Program Was Developed**

CARIE received funding from the Retirement Research Foundation in Chicago for its abuse prevention training programs in 1989. Additional funding later was made available through other foundations and the Pennsylvania Department on Aging. The Pennsylvania Department of Education funded a related project in 1999. Currently, the Pennsylvania Commission on Crime and Delinquency is funding statewide training using federal Byrne Grant funds.

## **Accomplishments of and Lessons Learned from Program**

Thousands of direct long-term care staff and hundreds of trainers have been educated. The program has been replicated throughout the United States and abroad.

Evaluations have been conducted to assess participants' satisfaction with the training program; their level of stress; conflict and resident aggression experienced by staff; staff reports of their own abusive behavior; and supervisors' ratings of participants performance on items related to the training. The response to the training has been overwhelmingly positive with 95 percent reporting they felt comfortable discussing the training topics. Ninety-five percent also stated they could relate the material covered to their own experience on the floor, and 98 percent reported they would recommend the training program to other nursing assistants.

Interestingly, one outcome of the training appears to be a decrease in aggression toward staff by residents, with 70 percent of staff reporting having been pushed, grabbed, shoved, or pinched two or more times in the last month at the pre-test, and only 45 percent reporting the same at the post-test.

Additionally, supervisors of participants were asked to rate the nursing assistants' performance in several areas during pre-test and post-test with handling conflict: 16 percent were reported to do this well at the pre-test and 26 percent were cited for good conflict resolution skills at the post-test.

The major obstacle has been maintaining funding. It has been overcome basically through the establishment of a fee-for-service program and the distribution of the training curriculum.

The key lesson learned is that the training program is most effective when trainees are actively engaged. The training makes use of exercises that maximize participation, including role-playing and group problem-solving.

*Materials are available for a fee.*

# **Institutional Abuse and Neglect**

## ***Workshop 1: Creative Initiatives to Educate Professionals and the Public***

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### **Washington State Medicaid Fraud Control Unit** Office of the Attorney General Tacoma, Washington

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### **Description of Program**

The Washington State Medicaid Fraud Control Unit has established an education initiative and “contact network” in order to improve the state’s response to elder abuse. The objectives of the project are:

- to aid law enforcement in understanding and responding to allegations of elder abuse;
- to make sure referrals go to the appropriate agency; and
- to initiate dialogue on issues.

### **Why Program Was Developed**

The program was created to improve the response of law enforcement agencies to elder abuse. The Medicaid Fraud Control Unit (MFCU) cannot handle all cases and therefore it needs law enforcement partners in the communities where crimes occur.

### **How Program Was Developed**

The Washington State Attorney General called together a work group in July 1999 to review the state’s response to elder abuse. The work group was made up of senior-level representatives from the MFCU, law enforcement statewide, the Washington State Prosecutors Association, and social service agencies.

Currently involved are the Washington State Attorney General, MFCU, Department of Social and Health Services, Washington State Prosecutor's Association, and approximately 250 law enforcement agencies. In September 2000 each of the 39 county prosecutors designated a contact person in each office to help coordinate local law enforcement.

### **Accomplishments and Lessons Learned**

The most important accomplishment was establishment of the fundamental recognition that elder abuse is the responsibility of each agency and should not be handed around from agency to agency. All agency representatives present at the first work group meeting through their response to elder abuse was appropriate until they realized that the existing system was not coordinated. Another accomplishment is the establishment of a contact network so that, for the first time, referrals are being received by the appropriate law enforcement organizations. Additionally, the Basic Law Enforcement Academy has begun providing training on elder abuse.

Obstacles included the scope of effort involved in building the contact network, which required soliciting cooperation from approximately 250 distinct law enforcement agencies. Notebooks were then prepared for each network member; these will be regularly updated and supplemented. The dedication of resources, follow-up with concerned agencies, and the high priority placed on project by the Attorney General allowed the obstacles to be overcome.

Key lessons learned include the importance of seeking partnerships, of continually reevaluating circumstances, and of addressing problems systemically and not just solving one problem at a time. The MFCU "should have begun this project years ago" and "been more insistent that agencies take responsibility."

# **Institutional Abuse and Neglect**

## ***Workshop 1: Creative Initiatives to Educate Professionals and the Public***

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### ***Risk Assessment Tool Demonstration Project***

**Minnesota Dept. of Human Services Aging and Adult Services Division  
St. Paul, Minnesota**

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Web site: [www.elderabusecenter.org](http://www.elderabusecenter.org)

#### **Description of Program**

The Minnesota Department of Human Services, Board on Aging, was selected by the National Center on Elder Abuse (NCEA) as a demonstration site to develop a nursing home abuse risk profile tool. The goal of the project is to design and demonstrate a tool that will assist in targeting prevention and early intervention efforts on the facilities where residents are at the greatest risk for incidents of abuse, neglect, and financial exploitation. The project began in May 2000, with a grant of \$18,325 from the NCEA.

Working in conjunction with NCEA staff at the National Association of State Units on Aging, the Board on Aging is developing and will pilot test the risk assessment tool. The pilot test will involve utilization of the risk assessment tool by the targeted audience: nursing home staff, county and state adult protection staff, advocates, ombudsmen, staff of prosecutors' offices, and nursing home regulators.

#### **Why Program Was Developed**

This project was established to develop a tool that can be used by adult protection staff, ombudsmen, advocates, regulators, and others in order to assess whether the environment of a nursing home is such that incidents of abuse, neglect, and financial exploitation of residents may be likely to occur. The Minnesota Board on Aging and the National Center on Elder Abuse are conducting the project with funding from the Administration on Aging and the Health Care Financing Administration.

## **How Program Was Developed**

The National Center on Elder Abuse (NCEA) developed the project and then invited all states to submit proposals to serve as the demonstration site. Minnesota was selected. A nursing home task force already established by the Minnesota Attorney General supported the Minnesota Department of Human Services/Board on Aging bid for the project.

## **Accomplishments and Lessons Learned**

The Board on Aging convened a state advisory committee, which has met four times. All of the recommended stakeholders have participated in the state advisory committee since its formation; these include the for-profit and nonprofit nursing home associations, the Minnesota Department of Health nursing home regulators, the Minnesota attorney general's staff, advocates and ombudsmen, and county adult protection staff. Project staff held a focus group for key informants and surveyed a broad category of interested parties in order to provide background on the project and solicit input in developing the tool. Among those surveyed were residents, family members, advocates, ombudsmen, county adult protection workers, and nursing home administrators and staff.

The work on this project has led the state advisory committee to recommend that the use of the risk profile be expanded beyond nursing home residents to include vulnerable persons residing in the community or in assisted-living facilities.

A significant obstacle was concern among nursing home industry participants about the intended use of the tool and whether it would be detrimental to their programs to provide additional documentation of risk faced by residents. However, nursing home industry staff has continued to participate actively in the survey, the focus group, and on the state advisory committee, and are willing to stay involved on a good-faith basis that the risk profile will benefit their residents.

Two key lessons have been learned:

- It would have been beneficial for project staff initially to spend more time discussing the project with nursing home participants in order to give them more background on it.
- It is very important to have a mix of urban, suburban, and rural participants in all phases of such a project.

*Materials will be disseminated by the National Center on Elder Abuse following the conclusion of the project.*

# **Institutional Abuse and Neglect**

## ***Workshop 1: Creative Initiatives to Educate Professionals and the Public***

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***HCFA's Division of Quality Improvement and Training***  
Health Care Financing Administration  
Baltimore, Maryland

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### **Description of Program**

The Health Care Financing Administration (HCFA) is responsible for overseeing the Medicare and Medicaid programs. The Survey and Certification program ensures that institutions providing health care services to Medicare and Medicaid beneficiaries meet Federal health, safety and quality standards. This program provides initial inspections of providers who request participation in the Medicare and Medicaid programs, annual recertification inspections of nursing homes and intermediate care facilities for the mentally retarded, and periodic recertification inspections of other health care providers. In addition, HCFA requires investigation of complaint allegations received concerning certified providers. The Division of Quality Improvement and Training is responsible for developing and providing training for the survey and certification professionals.

### **Why Program Was Developed**

The survey and certification program focus has moved from inspecting for the providers' capacities to provide care to the quality of care provided to the individual beneficiary. For example, in the nursing home setting, the Omnibus Budget Reconciliation Act of 1987 (OBRA87) strengthened the protections for residents of nursing homes and emphasized quality of life, quality of care and resident rights. More recently, in the hospital setting, there are new requirements concerning patient rights that include restrictions on the use of restraints. Ongoing training of the survey and certification professionals is necessary because:

- different regulatory requirements exist for different care settings (e.g., inpatient or residential care vs. outpatient care);
- different types of rules apply across settings (e.g., newer regulatory requirements are beneficiary centered and outcome oriented while older requirements focus on the capacity of the provider); and
- standards of professional practice across care settings continue to evolve.

## How Program Was Developed

HCFA is mandated to provide training for survey and certification professionals. The training program is funded as part of the HCFA budget within the annual Department of Health and Human Services appropriation.

## Accomplishments and Lessons Learned

Efforts to balance the mandate for training a specific audience with the desire to provide this information to a broader audience lead Division staff to do the following:

- Search for common ground across requirements for various providers/care settings. Aim for consistency in messages whenever possible. Examples include adopting common definitions of “abuse” and “neglect” which apply across all care settings; developing common guidelines for all Medicare and Medicaid settings and all types of inspections and investigations in determining whether patient health or safety are in a crisis (or “immediate jeopardy”) situation; and identifying key components of systems to prevent abuse across care settings.
- Use creative and expansive approaches to training when possible. Training developed by professional instructional designers who follow a “systems approach to training” results in streamlined, efficient courseware addressing a variety of learning styles, focusing on critical tasks and knowledge, and including front end buy-in on the message. It is important to use themes throughout training, e.g., for abuse and neglect training being developed, we will teach the inspector how to review the facility throughout the survey process, even when there has been no specific complaint or no obvious evidence of abuse and neglect exists. Another approach is to consider content development that goes beyond the primary audience, e.g., in addition to the inspectors, what does the provider/facility, family, caregiver or advocate need to know, and can this information be included in the training?
- Distribute training content in more expansive ways, including classroom training, development of replicable curricula and train-the-trainer materials, and distance learning media such as satellite broadcasts, webcasts, self-instructional CDs or manuals. It is also useful to disseminate materials directly to providers and post policies, procedures and training materials on the agency web site or make them available for purchase through the National Technical Information Service (NTIS).

A critical lesson learned is the need to get the views and needs from the end user of the information early in the planning process. Whenever possible, take advantage of common ground and common needs to make precious resources stretch as far as possible and reach the largest possible audience. Whenever possible, partner with other agencies, businesses, organizations, educational institutions, etc. to achieve common goals.

*Information is available on HCFA’s website, [www.hcfa.gov](http://www.hcfa.gov). To access information on quality of care, click “quality-of-care” in the third paragraph of text on the home page, then click “Medicare and Medicaid Survey and Certification”. For information on nursing homes and continuing care providers, click on “nursing home and continuing care providers” in the third paragraph of text on the home page.*

# **Institutional Abuse and Neglect**

## ***Workshop 2: Joining Resources to Combat Institutional Abuse and Neglect***

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***Department of Justice State Working Groups***  
U.S. Department of Justice, Nursing Home Initiative  
Washington, DC

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### **Description of Program**

The Department of Justice (DOJ) Nursing Home Initiative strives to enhance and focus coordination and communication relating to the prevention of nursing home abuse and neglect. It does this through, among other things, the provision of training and technical assistance to federal, state, and local prosecutors, law enforcement agencies, and other organizations serving victims of nursing home abuse and neglect. It also provides training and technical assistance to 25 state working groups that developed as a result of the Initiative.

### **Why Program Was Developed**

The Nursing Home Initiative was established to promote and enhance multi-disciplinary and interagency communication and coordination on nursing home-related issues of all types.

### **How Program Was Developed**

The United States Department of Justice established the Initiative, working with other federal, state and local entities. The 25 state working groups formed as a result of the Initiative's four regional Nursing Home Abuse and Neglect Prevention conferences that were held in the latter half of 1999 and early in 2000. In June 2000, the Initiative hosted a meeting of state working group members to provide a forum for them to share their successes and challenges and to discuss new opportunities.

Depending on the state, participants in the state working groups include federal, state and local law enforcement (including criminal and civil prosecutors, investigators, auditors, and police), federal and state regulators, surveyors, licensing entities, state and local long term care ombudsman programs,

adult protective services agencies, medical examiners, fire fighters and emergency medical services personnel, professional licensing entities, emergency room staff, and others. Some state working groups are reaching out to nursing home industry representatives, private advocates and non-government entities.

## **Accomplishments and Lessons Learned**

The existence of the state working groups is an important accomplishment. Some of those groups are taking steps to enhance inter-agency referrals, enforcement, and compliance; members are also seeking to improve training opportunities and relevant legislation.

DOJ is considering ways by which it can strengthen its support of the state working groups. These groups face numerous obstacles, including:

- extremely busy members, for whom state working group involvement is just one more task that is not likely to be part of their job description
- lack of training, referral protocols, funding, and infrastructure
- lack of the ability to easily communicate with state working group members in other states to compare and learn from the others' successes and challenges.

Two important lessons have been learned by Initiative staff and state working group members. First, it is critical to provide a forum for the many relevant entities to gather, discuss, and address these issues on a regular basis. Second, it is important to carefully evaluate the needs of relevant professionals when starting federal, state, or local collaborations to address nursing home abuse and neglect. For example, some state working groups have found that those working on the front lines have not been trained to recognize examples of abuse and neglect and thus those cases are not being referred to law enforcement. As a result, those state working groups have determined that it is necessary to first focus on training for the relevant parties and establishing effective referral protocols.

*DOJ Nursing Home Initiative staff are presently preparing materials that will be available at no cost. Contact Carol Cribbs (contact information provided above) in Spring 2001 to request a copy.*

# **Institutional Abuse and Neglect**

## ***Workshop 2: Joining Resources to Combat Institutional Abuse and Neglect***

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### ***Florida's Operation Spot Check*** **Florida Office of the Attorney General** **Tampa, Florida**

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### **Description of Program**

Operation Spotcheck is a collaborative project designed to conduct random, unannounced inspections of long-term care facilities (nursing homes and assisted-living facilities). It involves the Office of the Attorney General along with several other governmental enforcement agencies and industry watchdogs. The ultimate goal is to have the industry respond by consistently providing a safe and healthy environment for those in long-term care.

### **Why Program Was Developed**

Reports of abuse and neglect within long-term care facilities have been on the rise, especially in facilities that cater to Medicaid/Medicare and other government-subsidized patients. This rise also correlated with the drastic increases in the senior population and the number of long-term care facilities and beds. The annual schedule for facility inspections meant that facility management personnel were aware of when the inspections were to take place and would be prepared for the inspection; this meant that it was impossible for surveyors to get a true measure of the quality of care provided in and cleanliness of that facility. Often, abuses would be reported during periods when the facility was not facing re-licensing or undergoing an active investigation.

### **How Program Was Developed**

The program was initiated approximately four to five years ago by the Florida Office of the Attorney

General, local prosecutors, the Florida Agency for Health Care Administration, the Long-term Care Ombudsman program, the Department of Children and Families, local code enforcement officers, and local and state fire marshals. All of these agencies are still involved with the program. Representatives of each agency are included on the Operation Spotcheck inspection team, or else they are on standby in the event that a surprise inspection indicates the need for a criminal investigation.

Each of the regulatory and enforcement agencies involved were contacted and invited to take part in the program. Local authorities also were notified of the intention to begin conducting Operation Spotcheck within their jurisdiction when conducting a spot check. After that, teams were formed and the program began. All agencies that were invited to take part in the program agreed to do so; this is not a difficult program to “sell” to other agencies (or the public). No funding has been provided or sought for the program; participants view these unannounced inspections as part of their jobs.

## **Accomplishments and Lessons Learned**

The program has singled out numerous facilities with minor to severe deficiencies. As a result of some of these findings, many facilities have been given warnings, cited, and fined, and in some instances facilities have been closed. In most other cases, facilities have promptly and appropriately corrected the deficiencies, thus improving the quality of life of the persons residing within them.

The major obstacle has been the opposition of nursing home and assisted living industries to Operation Spotcheck. Most of those stating objections claim that the industry is already overregulated by government and that this is just further evidence of excessive regulation and industry scrutiny. Some of these objections have been made to certain members of the state legislature by members of the industry, and these legislators have at times asked for clarification on how the inspections are conducted. When this happens, project members respond by fully explaining the program, answering questions, or dispelling any rumors or misinformation that the legislators may have heard. Claims of over-regulation have not played well in the media; the obvious response is that if the facility is providing quality care and is well maintained, then management and staff have nothing to fear from Operation Spotcheck. No formal procedures or legislative action have been taken to curb this project. It has been a very popular program publicly and within the aging network.

The following important lessons have been learned:

- Taking the time to quickly answer facility questions about the program and speaking about it at meetings of the long term care facility associations is very valuable. After the program is explained, opposition from the industry or the facility decreases somewhat.
- Praising those facilities that get good marks from the inspection team is very important.
- Managing the program in one state agency is very useful. This enables the program to have one protocol and to ensure that the same method of operation is used statewide. The entire program can be at risk if varying methods are used in different parts of the state and in different facilities.

*Minimal materials are available from Nick Cox at no cost.*

# **Institutional Abuse and Neglect**

## ***Workshop 2: Joining Resources to Combat Institutional Abuse and Neglect***

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***Nevada Elder Abuse Prevention Council (NEAPC)***  
Office of the Attorney General  
Carson City, Nevada

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### **Description of Program**

The primary goal in creating the Nevada Elder Abuse Prevention Council (NEAPC) was to develop a coordinated and comprehensive approach to the growing problems of abuse, neglect and financial exploitation of the elderly in Nevada. The NEAPC has focused on the following: legislative changes; coordinating and improving the response (protective services, investigation, and prosecution ) to elder abuse reports; educating mandatory reporters, seniors, and the general public to encourage proper reporting of elder abuse; and assessing resources and developing them, especially those relating to guardianship issues.

### **Why Program Was Developed**

Nevada's Attorney General Frankie Sue Del Papa formed a partnership with the Division for Aging Services to assemble more than 60 advocates dedicated to protecting Nevada's fast-growing senior population from abuse, neglect, and financial exploitation.

### **How Program Was Developed**

Attorney General Del Papa and staff from the Division for Aging Services held meetings in northern and southern Nevada, bringing together in round table discussions representatives from more than 20 public and private agencies that shared an interest in preventing elder abuse. In the fall of 1996, they formed the Nevada Elder Abuse Prevention Council (NEAPC).

Organizations involved in the NEAPC are the Attorney General's Office and its Medicaid Fraud Control Unit, Division for Aging Services, Division for Health Care Financing and Policy (Nevada's Medicaid and Welfare agency), AARP, Clark County Senior Services, Clark County District Attorney Office, Clark County Public Guardian Office, Bureau of Licensure and Certification, Peace Officer Standards and Training, Washoe District Attorney Office, Washoe County Senior Services, Washoe

County Public Guardian Office, U.S. Attorney's Office, the office of Sen. Harry Reid (D-NV), the Department of Veteran's Affairs, representatives from local law enforcement agencies, and individual advocates.

Funding for specific projects have come from different sources. Most of the funding has come from the Division for Aging Services. However, a law enforcement training video project was funded by the legislature in the amount of \$60,000. The Bureau of Licensure and Certification used sanction money received from nursing facilities to fund publication of the Guide for Mandatory Reporters of Elder Abuse and materials used in a certified nursing assistants training project with the State Board of Nursing.

## **Accomplishments and Lessons Learned**

The following publications were created as a result of the project: "Elder Abuse: An Action Plan to Better Protect Nevada's Elderly," "Guide for Mandated Reporters of Elder Abuse," "Elder Abuse Neglect and Exploitation Protocols," and three brochures: "Elder Abuse Is a Crime," "A Practical Guide to Long-Term Care, and Preventing Financial Exploitation of the Elderly."

NEAPC sponsored three videos which featured well-known celebrities: "Rx for Abuse," geared toward health care professionals and their obligation to report elder abuse; "Help Is on the Way"; and "It Takes a Little More Time," which are geared to law enforcement. A training manual and other materials were included in the training kit provided to law enforcement agencies statewide. The video trilogy and training materials were produced through a partnership with Nevada's Division for Aging Services, Peace Officer Standards and Training Bureau and the Nevada Attorney General's Office.

In partnership with the Nevada State Board of Nursing, the Medicaid Fraud Control Unit conducted a statewide training program for certified nursing assistants, which included information about their mandatory obligation to report elder abuse. NEAPC also spearheaded legislation that increased the penalties for elder abuse, codified "criminal isolation of the elderly," and established special civil remedies for victims of elder abuse.

Obstacles faced by NEAPC include obtaining funding for projects, persuading law enforcement to require elder abuse training. The population distribution in Nevada, a state in which two counties contain the major population centers and the remaining counties are very rural and have very limited resources, also poses challenges. NEAPC still would like to obtain funding for a 24-hour elder abuse reporting hotline that was authorized by the legislature but not funded.

Lessons learned include that it is critical to:

- identify the problems and needs of one's state and solicit solutions from the people who will be able to implement them; And
- spend enough time building the program's foundation network so that no agency, individual, or resource is overlooked.

*A video starring Shirley Jones and Marty Ingalls entitled "Rx for Abuse," directed toward health care professionals and their obligation to report elder abuse, is subject to limited availability from the Nevada Division for Aging Services, 340 North 11<sup>th</sup> Street, Ste. 203, Las Vegas, Nevada 89101, phone 702-486-3545. Several publications are available, and a video trilogy and training materials may be borrowed for review, from the Nevada Attorney General's Office.*

# **Institutional Abuse and Neglect**

## ***Workshop 2: Joining Resources to Combat Institutional Abuse and Neglect***

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***Elder Rights Advocacy and Law Enforcement***  
Georgia Division of Aging Services  
Atlanta, Georgia

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### **Materials Contact:**

### **Description of Program**

Organizations in Georgia developed an initiative to improve legislation related to elder abuse in 2000. This collaborative effort grew out of legislative efforts begun in 1999.

### **Why Program Was Developed**

The initiative was developed to improve Georgia's response to elder abuse through improved coordination between the social service and law enforcement/prosecution agencies, and by coordinating and strengthening Georgia's statutes.

### **How Program Was Developed**

Initiated and led by CO-AGE (Coalition of Advocates for Georgia's Elderly), the effort also involved the Georgia Council on Aging; the Senior Citizens Advocacy Project (a project of the Georgia Gerontology Society); the Georgia Division of Aging Services through its Legal Services Developer and State Long-term Care Ombudsman Program; Adult Protective Services; the Office of Regulatory Services (responsible for regulating health care facilities) of the Georgia Department of Human Resources; prosecutors, solicitors, and the Georgia Prosecutors' Council; and the Georgia Bureau of Investigation/State Health Fraud Control Unit.

The next step of the project involved implementation of the new law by prosecutors, solicitors, law enforcement, adult protective services, and aging advocates throughout Georgia. The Elder Rights 2000 Conference, held in May 2000, brought many representatives of these organizations together to promote local coordination among the various players.

## **Accomplishments and Lessons Learned**

The initiative succeeded in updating and strengthening of several laws impacting elder abuse. However, the final bill lacked a number of the original provisions (e.g., sexual battery, allowance for victim testimony on two-way closed circuit television, hearsay exceptions) that were defeated by the defense bar and/or by the nursing home industry.

The amendments have led to increased involvement by law enforcement officers and prosecutors in Elder Rights educational events and in community multidisciplinary teams, as well as increased interest by police and prosecutors in pursuing elder abuse cases.

The initiative faced some obstacles including: (1) different goals in the social services and law enforcement communities that made it impossible to use uniform language in both civil and criminal statutes; (2) a resistance by prosecutors to developing an entirely new code section focused on elder abuse (analogous to Georgia's Family Violence Act), and (3) political opposition to major sections of the original bill by the defense bar and the nursing home industry. To deal with the second obstacle, the initiative developed a different approach that strengthened the existing criminal law and APS statutes. Hindsight indicated that different political strategies might have lessened the objections of the defense bar to the bill's provisions.

The most important lesson learned is that it is critical to build relationships among prosecutors, law enforcement agencies, advocates, and social services agencies in order to develop legislation that has a chance of passing, get the support to implement the laws once they are enacted, and encourage law enforcement to focus more on elder abuse issues.

*Legislation (SB 407 for 2000; ?Georgia Protection of Elder Persons and Disabled Adults Act of 2000?) in original form and in form that passed can be found at: [www.georgianet.org/services/leg/](http://www.georgianet.org/services/leg/)*

*Fact sheets regarding the legislation and information regarding CO-AGE (Coalition of Advocates for Georgia's Elderly) is available from the Georgia Council on Aging, 2 Peachtree Street, 35<sup>th</sup> Floor, Atlanta, GA 30303; phone 404/657-5344; [www.gcoa.org](http://www.gcoa.org)*

# **Institutional Abuse and Neglect**

## **Workshop 3: Enhancing the Survey and Regulatory Process**

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### **New Jersey Department of Health and Senior Services** Trenton, New Jersey

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### **Description of Program**

The New Jersey Department of Health and Senior Services is the licensure, survey and regulatory agency for all health care services and providers that are licensed by the State or certified by HCFA for Medicare and/or Medicaid participation. The Department is somewhat unique in that all regulatory activities for facility-based services for older persons, such as long term care, assisted living, residential health care, alternate family care and adult day health care, are located in the Senior Services Division of the Department. All the community-based services for older persons, the Public Guardian, the State Long Term Care Ombudsman Program, Medicaid home and community based waiver programs, and the Medicaid long term care reimbursement program are housed in the Senior Services Division as well.

### **Why Program Was Developed**

This organizational structure has been in effect since July 1, 1996. The New Jersey EASE (Easy Access, Single Entry) Program was established at the same time as the state level reorganization of Senior Services to provide a single telephone number and single point (usually the County Office on Aging) of access to aging services providers in each of New Jersey's twenty-one counties.

### **How Program Was Developed**

Adult Protective Services (APS) at the state level is part of the Department's Senior Services Division. When APS has authority for abuse and neglect investigations, the licensure and inspection program and APS share information as needed about Alternate Family Care providers. The Office of the State Ombudsman "is housed in but not of" the Department of Health and Senior Services. The Ombudsman in New Jersey has statutory responsibility for abuse, neglect and exploitation involving persons age 60 and above residing in institutions including nursing homes, assisted living, and residential health care facilities. The survey agency has federal survey responsibility for the abuse prevention protocols in the survey process; the investigation of all consumer complaints; and investigation of abuse, neglect, and exploitation for those persons under age 60. The two programs

meet quarterly to share information and discuss providers and issues of mutual concern. They communicate regularly on specific cases and conduct joint investigations in some instances.

The organizational relationship between the survey agency and relevant law enforcement agencies varies depending on the circumstances. Suspected crimes are reported to the appropriate law enforcement agency. Local law enforcement has been called on to assure surveyor access to properties or to verify the safety of residents when the surveyors receive an emergency call. Medicaid Fraud Control Unit (MFCU) investigative staff have accompanied surveyors in the field to monitor a specific case and to gain a better understanding of the survey process. Additionally, MFCU staff have used survey file information in case investigations. The Medicaid Fraud Section staff members of the Attorney General's Office and the Medicaid reimbursement programs meet regularly to review cases.

### **Accomplishments and Lessons Learned**

The lessons learned are that it is critical to open communications and to develop lines of communication between agencies and to educate each other as to the roles, responsibilities and limitations of each agency's mission and authority.

# **Institutional Abuse and Neglect**

## **Workshop 3: Enhancing the Survey and Regulatory Process**

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### **Collaboration to Improve the Regulatory Process**

**Washington State Department of Social and Health Services  
Lacey, Washington**

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### **Description of Program**

Licensure, survey, regulatory, and enforcement are organized and structured in Residential Care Services (RCS), which is a division of Aging and Adult Services Administration (AASA) within the Department of Social and Health Services (DSHS). DSHS is the state Medicaid agency and as such, enforcement for Medicaid certified nursing facilities is delegated to RCS. RCS is responsible for survey licensing and enforcement activities in nursing homes, boarding homes, and adult family homes.

Adult Protective Services (APS) is organized in Home and Community Services, another division within AASA. In long-term care residential settings, APS investigates abuse if the alleged perpetrator is a family member or visitor. RCS investigates if the alleged perpetrator is a staff member or another resident.

The long-term care ombudsman program (LTCOP) is an independent program and not part of DSHS.

### **Why Program Was Developed**

Collaboration was established in order to strengthen and enhance the regulatory effort.

### **How Program Was Developed**

RCS and APS are working together at the local level to develop law enforcement contacts. The Medicaid Fraud Unit has compiled a resource book of specific contacts within each law enforcement jurisdiction.

RCS collaborates with APS and law enforcement on specific cases. The LTCOP investigates issues and calls in complaints related to abuse and neglect to the RCS centralized complaint intake unit. RCS holds forums with the ombudsman, provider representatives, advocacy groups, and residents.

The Medicaid Fraud Unit took the lead in developing contacts with local law enforcement. APS is in a division within the same administration, and so APS and RCS work together at all levels of the respective divisions. RCS meets periodically with the LTCOP at all levels to address issues and develop clarity regarding the roles of the respective organizations. Meetings occur regularly to prevent miscommunication and promote clarity.

Collaboration comes from working together and getting to know each other prior to crisis situations. If major issues develop, the groups talk through situations and determine what needs to be done differently in the future.

Relationships among the groups are both formal and informal. There are memoranda of understandings between DSHS/RCS and Medicaid Fraud and also between DSHS/RCS and the LTCOP. The relationship between RCS and APS is informal. The fraud memorandum is very broad and gives a framework. The ombudsman agreement is specific in certain areas and the rest is covered by regulations. It appears that the relationships work as they have been established.

RCS also has a memorandum of understanding with the Department of Health related to nursing assistants and licensed staff (LPNs, RNs). RCS also works closely with other advocacy groups.

## **Accomplishments and Lessons Learned**

Each of our partners has different authority and will be in facilities at different intervals. Collaboration has enabled more organizations/individuals to take responsibility in a more effective manner for the vulnerable adults in these settings. As a result, the regulatory process has been strengthened and facility residents are better protected from abuse and neglect.

Some policy issues have arisen regarding the clarity of roles for each group, protocol for joint investigations, and the development of legislation that would strengthen protection of vulnerable adults. These issues have been addressed in a collaborative fashion.

The key lesson learned is that open communication is the key to establishing collaborative working relationships. It is important to understand the underlying operating principles/values so that the strengths of each group can be utilized for the best possible outcomes.

*Materials are available by calling 800-422-3263.*

# **Institutional Abuse and Neglect**

## ***Workshop 4: Holding Institutions Accountable through Prosecution***

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### ***Vermont Medicaid Fraud Control Unit Initiatives*** **Office of the Attorney General** **Waterbury, Vermont**

#### **Program Contact:**

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### **Description of Program**

The Vermont Medicaid Fraud Control Units (MFCU) is a part of the Office of the Attorney General. Federal law mandates MFCUs and all but a few states, which have received waivers from the federal government, have them. One of the primary responsibilities of a Medicaid Fraud Control Unit (MFCU) is to review and prosecute complaints of patient abuse and neglect in health care facilities that receive Medicaid funds. Traditional state criminal statutes are used by the MFCUs to prosecute individuals working in facilities who commit physical, sexual, and financial exploitation or abuse.

### **Why Program Was Developed**

MFCUs were established to prosecute patient abuse and mistreatment in residential health facilities that receive Medicaid funds, as well as fraud committed by Medicaid providers. The MFCU must be part of the Attorney General's office or be housed in another state department that "possess(es) statewide authority to prosecute individuals for criminal violations." The MFCUs are increasingly placing emphasis on prosecuting resident abuse and neglect. In addition to prosecuting staff members and management who abuse or neglect residents or allow such abuse or neglect to happen, many MFCUs are involved in collaborative efforts about elder abuse with other state agencies.

### **How Program Was Developed**

To create collaboration, the Vermont MFCU first identified the specific agencies, organizations, and professionals who needed to be involved. The group had an initial meeting with those agencies and individuals identified to discuss the need for coordination and collaboration. At this first meeting the group identified the issues and established a smaller working group to come up with a plan and protocol to handle cases of abuse, neglect, and exploitation in institutional settings.

The MFCUs rely heavily on coordination and collaboration with adult protective service agencies, the state departments of health, area agencies on aging, departments of mental health and mental

retardation, facility employees, the state long-term care ombudsman programs, and nurse surveyors. In addition, advocacy groups such as the National Citizen's Coalition for Nursing Home Reform and AARP are important partners in the efforts of the MFCUs to investigate and prosecute complaints of patient neglect and abuse in long-term care facilities.

There are a number of actions that MFCUs may take in addition to prosecutions under state law for resident abuse and neglect. For example, many MFCUs now are pursuing quality-of-care related cases arising in long-term care facilities; these cases may include charging the persons deemed responsible for the neglect, such as the nursing home administrator, the director of nursing, or the medical director of the facility. In addition, if the acts or omissions by corporate employees can be imputed to the corporation, the MFCU may charge the corporation with various versions of a criminal-neglect statute. The MFCUs may also use state civil actions and penalties to hold institutions accountable for abuse, neglect, exploitation, or health care fraud. For example, the MFCU may institute a state civil false claim action for serious quality-of-care violations or file a civil monetary-recoupment case against an institution depending upon what the specific state statutes allow.

In some states, such as Florida and California, the MFCUs are involved with programs that make unannounced inspections of long-term care facilities.

## **Accomplishments and Lessons Learned**

The many successes of MFCUs in prosecuting resident abuse and neglect are chronicled in the monthly Medicaid Fraud Report produced by the National Association of Medicaid Fraud Control Units (information on how to obtain the Report is provided elsewhere).

A substantial obstacle is that many of the other agencies with which MFCUs must deal are not well versed in how a criminal investigation is conducted. This has caused problems when the agency begins an investigation before law enforcement gets involved. This obstacle can be overcome, however, through education, regular meetings, and teamwork. Dual training projects work well to bring the different agencies together with the common goal of protecting the health and welfare of vulnerable citizens.

Key lessons learned are: identify appropriate players and form task forces; educate agencies, facilities, and the public on their duties to report resident abuse; and review the applicable laws and pass or amend legislation to strengthen patient abuse and neglect laws.

*The publication "Patient Abuse and Neglect: The Hidden Crime," May 1997 is available at no charge. The National Association of Attorneys General Medicaid Fraud Report is published 10 times a year and subscriptions are available from \$150. Direct inquiries to Barbara Zelner.*

# **Institutional Abuse and Neglect**

## ***Workshop 4: Holding Institutions Accountable through Prosecution***

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### ***HHS Office of the Inspector General's Role in Nursing Home Matters*** Department of Health & Human Services, Office of Counsel to the Inspector General Washington, DC

#### **Program Contact:**

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#### **Materials Contact:**

Same as program contact

Web site: [www.dhhs.gov/progorg/oig](http://www.dhhs.gov/progorg/oig)

#### **Description of Program**

Most of the Office of the Inspector General (OIG) investigations dealing with the quality of care in nursing homes are the result of False Claims Act cases initiated either by the government or by relators in qui tam suits. (Qui tam – “who sues on behalf of the king as well as for himself”– is a provision of the Federal Civil False Claims Act that allows a private citizen to file a suit in the name of the U.S. Government charging fraud by government contractors and other entities who receive or use government funds, and share in any money recovered.) Collaboration with health care professionals is very important in the OIG’s investigation efforts.

#### **Reason Program Was Developed**

When deciding whether to bring enforcement actions, the OIG relies heavily on health care professionals to provide expert opinions on the quality of care rendered at facilities. The OIG also relies on nurses and other health care professionals to monitor consent decrees and corporate integrity agreements (CIAs) that mandate provision of quality care.

#### **How Program Was Developed**

Not applicable.

#### **Accomplishments and Lessons Learned**

OIG agents have worked on several Civil False Claims Act cases that have achieved significant results for both the residents and the government. Consent decrees or CIAs have been signed, imposing substantial quality-of-care obligations upon the facilities and requiring the appointment of independent monitors and/or temporary managers in several cases.

In addition to the False Claims Act cases, the OIG was involved in settlement of a criminal action against Guardian, a nursing home chain in Northern California with 16 facilities housing approximately 600 residents. The Santa Clara County District Attorney indicted the entire corporation under the state's elder abuse and neglect statute based largely on incidents that occurred at two of Guardian's facilities.

The incidents, due to staff shortages, included abominable sanitation problems, failure to change bedpans and diapers, and failure to provide proper care for bed sores, to name a few. At the time of the indictment, the district attorney was unaware that if the corporation as a whole was convicted, all the facilities in the chain would be mandatorily excluded from participation in federal health care programs pursuant to the Inspector General's authority under Section 1128(a) of the Social Security Act.

To avoid the potential transfer trauma to residents from such wholesale closures, the OIG worked with the DA and the defendants to negotiate a plea and exclusion agreement with the two worst facilities. Guardian was allowed to reincorporate the two facilities into their own separate corporate entity known as Guardian North Bay, which pled no contest to the charges. Because of similar concerns of staff shortages at several of the remaining Guardian facilities, the OIG also entered into a CIA that requires Guardian to develop an effective internal quality assurance system and to pay for the cost of an outside monitor selected by the OIG, who will make sure that the CIA is implemented.

*Materials are available on the program web site.*

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# Appendix 4



## State and Tribal Team Strategies

Over the course of the day-and-a-half symposium, there was time set aside on the agenda for the state and tribal teams to meet a number of times. The meetings provided the teams with an opportunity to develop collaborative strategies for responding to elder victimization in their jurisdictions. As a part of this exercise, each team was asked to complete a questionnaire designed to assist in the development of an action plan. Reproduced below are the completed questionnaires that were submitted to the conference organizers. A point of contact has been identified for each team and contact information for each of them can be found in the participant list, Appendix 2. The point of contact listed is the member identified by the team to serve as the reporter if their team was selected to present to the Attorney General. Because the individual was only identified for this purpose, he or she may refer you to another member of their team or someone else in the state or tribe for more information.

The questionnaire asked the teams to identify: (1) ongoing collaborative efforts related to elder victimization; (2) any ideas or strategies for collaboration they might try to implement in their jurisdictions based on what they had learned at the symposium; (3) their biggest challenge in implementing these strategies; and (4) their biggest asset in implementing these strategies. In answering each question, the teams were asked to note whether any of the above items specifically related to: (a) financial exploitation and consumer fraud; (b) elder abuse and neglect at home; or (c) institutional abuse and neglect. In the reproduced questionnaires, the letters (a), (b), and (c) in lower case and in parentheses are used only in reference to those specific topics. (In some instances the topics are spelled out and in others they are not.)

Also, because many of the team questionnaires included acronyms, the following glossary of some of the more common acronyms is provided:

AAA	Area Agency on Aging
AG	Attorney General
APS	Adult Protective Services
CLE	Continuing Legal Education
DA	District Attorney
MFCU	Medicaid Fraud Control Unit
MOU	Memorandum of Understanding
OAA	Older Americans Act
POST	Peace Officer Standards and Training
SUA	State Unit on Aging
VAWA	Violence Against Women
VOCA	Victims of Crime Act

## Alabama

Point of Contact: Doris Ball

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a)
  - (1) Joint training efforts with universities to train law enforcement and adult protective services workers on financial exploitation.
  - (2) Increased prosecutions.
- (c)
  - (1) Memos of understanding between AG Medicaid Fraud Control Unit and Department of Public Health (DPH) on abuse/neglect referrals.
  - (2) Also memo of understanding between DPH and APS on assisted-living facilities.
  - (3) Increased coordination with Nursing Home Association. Videotaping of residents proposed.
  - (4) Governor's initiative on controlling abuse/neglect/exploitation in assisted-living industry: (1) revision of regulations; (2) APS workers assessing unlicensed facilities for abuse/neglect/exploitation; (3) Medicaid funding for care; (4) consideration of certificate of need.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates (a), (b), or (c) (see above), please so indicate.*

- (1) Reactive Elder Abuse Task Force to increase interagency coordination and education.
- (2) Include APS training in law enforcement and emergency management curriculums.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Need mandated funding for adequate staffing of APS program.
- (2) Define roles of each entity.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Commitment of leadership (Governor, Attorney General) to prevent and remedy abuse/neglect/exploitation of adults.
- (2) Commitment of line staff to make lives better.

## Alaska

Point of Contact: Dwight Becker

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

Adult Protective Services will be developing a new brochure, presentation plan using visual aids for educating and developing partnerships with law enforcement, district attorneys, and other social service agencies throughout Alaska, particularly in rural areas. We will develop written agreements specifying collaborative roles and steps to preventing and stopping abuse, exploitation and neglect.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates (a), (b), or (c) (see above), please so indicate.*

- (1) Seek more funding.
- (2) Develop detailed plan.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Lack of resources. We only have six adult protective services workers statewide.
- (2) Need funding for grants for training, designation agreements.
- (3) Geographically large. Travel is expensive.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Alaska prides itself on its excellent networking among agencies.
- (2) Alaska has a small population which facilitates communication.

## **Arizona**

Point of Contact: Terri Skladany

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

## **AG**

- Law Enforcement Elder Abuse Task Force
- Elder Issues Task Force
- Senior Advisory Council
- Statewide Elder Abuse Task Force

## **Federal**

- Elder Fraud Prevention Team

## **County**

- Maricopa County Attorney's Protocol Task Force
- Maricopa Elder Abuse Prevention Alliance
- Pima, Yavapai, Pinal/Gelu, Mohava, Yuma, Cochise Counties Task Force

## **Triad**

- Yuma, Pinal, Yavapi, Coconino Counties

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates (a), (b), or (c) (see above), please so indicate.*

- Bring all existing coalitions together to discuss best practices and common goals
- Share information to avoid duplication
  - (1) use e-mail/website with minutes of coalitions
  - (2) chat room
  - (3) list-serve
- Encourage all counties to have task forces

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Lack of funding
- Vast rural areas
- Lack of prosecution
- Limited law enforcement staff in rural community
- Officer and prosecutor training also judges/JP's; also social services providers – needs to be at academy level
- Rigidity among systems
- Case not followed through from direction to prosecution

- “Problem” of confidentiality – inhibits collaboration

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- This group – multidisciplinary nature/diverse backgrounds
- Excellent collaboration among agencies
- Our Attorney General is committed to fighting elder abuse
- Passion for innovation
- Willingness to share resources

## Arkansas

Point of Contact: Catherine Lyon

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

Regrettably, I am unaware of any collaborative efforts other than a recent endeavor of the AG's office to collaborate with the Office of Long Term Care (OLTC).

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The AG's office and APS have discussed possible areas of collaboration as it could relate to fraud among community-based service providers. (a) & (b)

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- The first challenge is to promote an ongoing interest/concern. Child abuse takes center stage with Arkansas' legislature and to that end they receive the majority of service dollars so funding follows as a close second.
- Turfism as it relates/facilitates a lack of responsibilities is significant. (b)
- Low provider reimbursements for institutional care further stress and already fragile system that too easily over looks the cost savings of quality care. (c)

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- The commitment of very small APS unit to make each life a little better for our having been invited into it. (Using the term "invited" quite loosely). (b)
- The strong leadership exhibited by AG Reno that brings into focus a need to address this issue the potential or the "political correctness" of getting involved and being a player in the solution(s) to the variety of long range/long term problems we will ourselves face as we age. (a), (b), & (c)
- Compliments of this gathering, APS and AG's office have met and agreed to collaborate on cases that couple our two areas of authority and responsibility. (a) & (b)

## **Blackfeet Tribe**

Point of Contact: Myra Magee-Red Fox

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

State of Montana contracts with the tribe to fund child protective services, but does not provide or fund for adult protective services on the reservation. Our tribe has a volunteer group that meet 2 times a month to review cases that are referred by family, individuals, or other concerned persons. Because we are a volunteer group, there is not the financial support to provide adequate investigation, law enforcement training, maintaining statistics, legal support, and community outreach and prevention. The volunteer group consist of BIA Social Services, Blackfeet Housing, Indian Health Services, Senior Citizen Center, and Personal Care Provider. There is no collaboration between the state of Montana and the Blackfeet Elderly Protection Team. We are a very creative team and try to utilize all team members, expertise. We deal with all the above issues.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

[Not answered.]

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Lack of funding to train law enforcement
- (2) High turnover in law enforcement
- (3) Outdated equipment for law enforcement officers (vehicles, video equipment, etc.)
- (4) Elder Abuse Codes are out dated, need to include issues on aids and hepatitis
- (5) Lack of adequate pool of law officers
- (6) Need an investigator
- (7) Need to educate Tribal Court System
- (8) Need to educate the community

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Our elderly protection team is very motivated and has been getting by for the past 5 years on very little support. We would be a better team and a stronger advocate with some financial support for the above listed areas. Because we represent different agencies within the tribal system, we have been effective in many cases.

## California

Point of Contact: Laura Mosqueda

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Financial exploitation – *Financial abuse specialist teams (FAST)* – in particular, Santa Clara County “Rapid Response Team” which pairs APS workers, public guardian workers, and DAs to act quickly to stop fraudulent practices (home sales); 8 Counties have FAST.
- (2) Abuse at home – *U.C. Irvine Medical Response Team* – uses geriatrician, pharmacist, psychologist, social worker, nurse practitioner to examine the medical and psychological injuries of elder abuse victims.
- (3) Institutional Abuse – *Operation Guardian* – AG’s inter-disciplinary team. Sends in a team of medicaid fraud investigator, fire code inspectors, doctor, ombudsman, etc., to do spot checks on nursing homes.
- (4) Multidisciplinary teams in most counties.
- (5) California nursing home working group.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Ideas for future collaboration:

- (1) Statewide task force of those interested in elder abuse – California APS, law enforcement, ombudsman, legal assistance, MediCal fraud, etc. – more coordination and communication amongst the agencies to develop statewide strategies
- (2) More involvement of local law enforcement, e.g., one officer (more or less) in every agency is an elder abuse expert
- (3) Use AG’s Office, California Department of Aging and APS (i.e., tripartite commission) to serve as catalyst to disseminate information and share information, to coordinate the proposed task force

Task force coalition should include (for example): EMT/paramedics; emergency room representatives; AARP; California Medical Association; California Advocates for Nursing Home Reform; California Nursing Association; Office of Criminal Justice Planning; Legal Aid Societies; federal regulatory agencies; law enforcement; district attorneys; County Welfare Directors’ Association; persons with disabilities

- (4) Develop a document that outlines the issues and the agencies involved in dealing with the issues
- (5) Educate judges about the complex issues of elder abuse

- (6) Surrogate decision-making
- (7) Persons with disabilities

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Geography
- (2) Funding for task force
- (3) Huge group can be unwieldy
  - How do we decide who ought to be on a task force?
  - How do we organize a big group so that useful outcomes are achieved and maintained?
- (4) Cultural diversity
- (5) Significant differences among the counties' agencies – some counties have strong DA offices, others have strong probate courts, others have strong APS, etc.
- (6) Only 17 of 58 counties in California have prosecutors dedicated to elder abuse

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) People in diverse areas, e.g., DA, law enforcement, APS, ombudsman, healthcare providers, are committed to their field
- (2) There are model programs in many counties, e.g.:
  - FAST
  - Specialized DA units
  - Operation Guardian
  - Medical response teams
- (3) Availability of academic institutions
  - Alzheimer's evaluation centers
  - Academic Geriatric Resource Centers on 6 of the UC campuses

## Colorado

Point of Contact: Jan Michael Zavislan

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Colorado coalition for Elder Rights and Adult Protection – began in 1993, multi-disciplinary group includes law enforcement, social services, cooperative extension, financial institutions, district attorneys, area agencies on aging and OTWS. “Project Colorado” is an out growth of this coalition, developing curriculum and a video program to train financial institutions to detect financial exploitation, abuse or neglect. Also “Dr. Be Wary” educational program to teach seniors about investment fraud also came out of coalition.
- (2) County Triads in 20+ counties combining law enforcement and seniors.
- (3) Thirty-two adult protection community task forces providing training and case-support under state mandatory reporting laws.
- (4) “November Sweeps” statewide direct mail sweep involving law enforcement, cooperative exchange and others.
- (5) S.A.F.E. (“Seniors Against Fraud & Exploitation) was a precursor to Triad – combining state/local and federal agencies, and senior organizations.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Last September (1999), Colorado held a day-long seminar on issues of fraud and abuse. One outcome was the desire to create a statewide clearinghouse to connect virtually every law enforcement office, prosecutor, adult protection service, mental health service, senior center, caregiver, financial institution, and others. Purpose is to begin to collect information on fraud and abuse of elderly throughout Colorado, to provide valuable information to seniors, and to train all of our partners in detection and prevention of fraud and exploitation. This clearinghouse, to be known as “senior watch,” is nearing its implementation at this writing.
- (2) Create a multi-county or statewide Triad to eliminate the problem of ineffective triads in small-population counties.
- (3) Modify P.O.S.T. curriculum to include mandatory training of prospective police officers on elder issues.
- (4) Develop curriculum for county prosecutors and judges training programs on elder fraud and abuse issues.
- (5) Combine resources for legislative solutions, including expanding victims services, mandatory reporting, licensing and bonding of homecare providers, and others.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

In no particular order:

- (1) Funding despite huge state surpluses
- (2) Legislature – doesn't want to spend huge state surplus (also some constitutional limitations on spending)
- (3) Geography – large, mostly rural state with 63 counties, 300+ separate law enforcement agencies, 22 prosecutors, 16 AAA's, and so on.....
- (4) Ethnicity – very diverse population with large Spanish-speaking and Indian populations. Growing Asian community adds another larger of diversity

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Very strong sense of family, community and partnership has broken down barriers between state and local agencies. Turf wars have never been an impediment.

## Connecticut

Point of Contact: Christine Lewis

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

The Elder Financial Abuse Project is a cooperative effort among Protective Services for the Elderly (PSE). The Area Agencies on Aging, AARP, State Police and financial institutions to curtail and prevent financial exploitation of the elderly. The AG's Office, which provides advice and representation to PSE, and the Chief States Attorney's Office, which investigates criminal complaints of abuse and exploitation of the elderly, were asked to support the project and attend meetings in an advisory capacity. Also, creation of the Consumer University, a collaborative program between the AG's Office, law enforcement, financial institutions, AARP, victims services, Department of Social Services, hospitals, and Area Agency on Aging. The program also addresses Latino communities. Finally, the Office of the Chief State's Attorney as of October 20, 2000 has created an Elder Abuse Unit which will prosecute financial and physical abuse of Connecticut's substantial senior population.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- The AG's Office will soon issue a formal opinion addressing the issue of the extent of information financial institutions can release to PSE the issue came to the AG's attention as a result of the project.
- The AG's Office and Department of Social Services will be proposing legislation to bolster PSE's investigative authority and enable financial institutions to cooperate with state authorities investigating complaints of abuse, exploitation, neglect, and abandonment of elderly persons.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The biggest challenges will be lack of funding and cooperation of resources.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The biggest asset is a willingness to collaborate. Representatives who attended this symposium have agreed to meet regularly to share resources and information and to identify topical issues reported by consumers and agency personnel.

## Delaware

Point of Contact: Vickie Artis

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, (b) institutional abuse and neglect.*

The Attorney General of Delaware recently convened the Senior Crime Victim Task Force which includes representatives from all segments of the aging community. The Task Force meets monthly. It has been broken down into subcommittees which are working on all three of issues mentioned. Target areas include prevention, resources, legislation, training and a law enforcement protocol.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

One theme has definitely emerged – you can never do enough. We have gathered some ideas for presentations which we will develop for a conference that concludes the work of the Task Force. Of particular interest is the area of service sensitivity, which is applicable to all three issues.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or local team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

This answer applies to (a) Financial Exploitation, and Elder Abuse and Neglect. The biggest challenge is in changing the mind set of the various disciplines that they cannot operate in a vacuum. The work of the Task Force will go a long way in addressing that challenge. Multidisciplinary teams, coalitions, and task forces are critical in finding remedies to this universal challenge.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Our biggest assets include:

- (1) Being a small state, it is relatively easy to get all of the key players to the table.
- (2) The commitment and passion of our AG on this issue has driven what we have accomplished thus far and what we will accomplish in the future.

## **District of Columbia**

Point of Contact: Thelma Chichester Brown

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

D.C. Office on Aging chairs the D.C. Adult Abuse Prevention Committee which is comprised of organizations involved in all aspects of adult abuse prevention and intervention in D.C. The committee develops a work plan each year that focus on different aspects of adult abuse.

- (a) This year a financial abuse consultation team (FACT) was established to provide expertise to members working on financial exploitation cases. The committee supports an ongoing Real Property Tax Program which keeps older people from losing their homes, which they are often in danger of losing because of financial exploitation.
- (b) The past three years the committee has sponsored conferences on aspects of family violence. There has been several other initiatives regarding the training of police officers and bankers and senior service network personnel.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Revisit bankers initiative. Work through the representatives of the bankers security association and the D.C. office of banking now active members of FACT to:

- Update use of banking institutions
- Identify reporting barriers of concern to bankers
- Determine need for legislative changes
- Sponsor training for bankers/notaries

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Funding is minimal (\$23,000) and supports the volunteer efforts of the committee members but is not sufficient to support even one staff person to tackle these initiatives in depth on an ongoing basis.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Willingness to collaborate. Strong committee members are willing to give their time to work on initiatives work well together; relate well personally.

## **Florida**

Point of Contact: Nicholas Cox

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a)
  - (1) Banking training in Department of Elder Affairs
  - (2) Home improvement stings
  - (3) Led fraud training in crimes against the elderly
  - (4) Combination of Office of the Attorney General (OAG), law enforcement officers, Social Services Agency, Better Business Bureau, efforts in detecting and educating victims and potential victims of crime
  - (5) Elder Justice Centers in Tampa and Broward circuit courts that educate, provide victim assistance, and track guardianship
  - (6) Work on alienation of affection law
- (b)
  - (1) Elder Justice Centers
  - (2) Use of Meals on Wheels, etc., as possible reporters
  - (3) Education to seniors to watch for themselves, friends and neighbors
  - (4) Use of college resources
- (c)
  - (1) Operation Spot Check with assisted-living facilities and nursing homes
  - (2) Better Certified Nursing Assistant registries

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) We have organized an OAG, Florida Department of Law Enforcement and Stetson Law School training/interest seminar
- (2) Also hope to pursue the same with the Florida Prosecuting Attorneys Association
- (3) We want to further promote bank training
- (4) Expanded use of Meals on Wheels and other groups that may frequent seniors' homes
- (5) Promote medical treatment vans (out of senior centers)
- (6) Use senior centers for education, etc. in concert with law students as educators/instructors
- (7) Senior assessment centers for law enforcement officers

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Funding is always an issue (as usual), but as far as the Office of the Attorney General goes, we have made extensive use of grant monies and fines recovered from consumer fraud cases.
- (2) The senior population in Florida is exploding while resources in agencies that protect or serve elders remains stagnant.

- (3) Geographically, the state is huge. Thus the need to have these issues addressed by statewide officials such as the Florida Department of Law Enforcement and the Attorney General with assistance from Elder Affairs and Children and Families.
- (4) One big obstacle has been a certain level of apathy by prosecutors, law enforcement, and others. Much as with child issues, we need specialists in such agencies for elder issues, but apathy plus funding prove to be an obstacle.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please to indicate.*

- (1) Leadership from numerous key individuals – i.e., legislators, law enforcement office heads, Attorney General, etc. who do not hesitate to use their “bully pulpit.”
- (2) Federal and state authorities want to collaborate.
- (3) Using university and law school resources has been vital to these issues.
- (4) The impact that private attorneys have also had in bringing problems to public light.

## Georgia

Point of Contact: Donald Henderson

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) (a) Consumer Fraud Task Force – 6 years in existence – functions as a statewide neighborhood watch. Did reverse “Boiler Room” in 2/00 – identified 125,000 victims.
- (2) (a) & (c) Office of Fraud and Abuse – Investigate/prosecute Medicare fraud and abuse – received “Best Health Care Fraud Unit” from HHS in 1999.
- (3) (a), (b), & (c) Coordination of Elder Advocates resulting in successful passage of legislation in identity fraud, elder abuse/exploitation, telemarketing fraud; funeral home industry standards, emergency relocation fund/ombudsman; 2001 issue is predatory lending; working through Coalition of Advocates for Georgia’s Elderly (CO-AGE) as advocates.
- (4) (a), (b), & (c) Statewide training including Consumer University; Elder Rights Conference; Commission on Family Violence annual Domestic Violence Conference; Elder Law Amendment Training; Criminal Justice Coordinating Council Victims Conference (Governor’s Office).
- (5) Good media coverage of victim stories.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Coordinate with law enforcement to provide P.O.S.T. training in elder abuse/neglect to police officers. Utilize grant funding to encourage use of programs. Also, use the leadership of the Georgia Association of Chiefs of Police and the Georgia Sheriff’s Association to effectuate law enforcement education in the elder law area.
- (2) Organize a meeting and planning session(s) in order for symposium participants to debrief on the issues and ideas and to form an action committee to implement these ideas.
- (3) Host a meeting to encourage and promote collaboration between local law enforcement and adult protective services officers.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Lack of funding.
- (2) Developing strategies to reach rural and diverse communities with services and to promote education in such areas.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

All of the applicable agencies are highly supportive of efforts towards the reduction of victimization of elders. Also, the state's elected officials, including the Governor, Lt. Governor, the Attorney General and the Secretary of State are highly supportive of these efforts in the elder abuse area. This collaboration has also flowed over to members of private industry resulting in public/private partnerships in the area of exploitation of the elderly.

## Hawaii

Point of Contact: James Pietsch

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

The Governor of Hawaii established a Committee on Elder Abuse in 1999. Last month the committee voted to make significant changes to the Adult Protective Services statute, the penal code and to establish an Elder Abuse Coordination System. The Governor's Elder Abuse Committee consisted of representatives from law enforcement, disabled/health care, social services, Attorney General, prosecutor, Aging, AARP, Legal Services, University of Hawaii. A legislative packet is being produced.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Look at innovative funding sources.
- Look at different Agency support – other than existing structures.
- Look at resources to develop public awareness, e.g. news media – capitalize on “name recognition” of Governor’s committee – while it lasts.
- Mobilize information campaign using local and national studies/resources to bolster support.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Lack of funding – Priority: Older persons are not a priority.
- Turf.
- Opposition by policy makers and administrators to change – especially Adult Protective Services Administrators – even though line-investigators want changes. The Administrators are most fearful of “opening the flood-gates” of abuse reports.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Willingness of other agencies to collaborate and work around bureaucratic obstacles.
- Willingness of multi-disciplinary team to approach legislators and other key decision makers to influence a change in policy.

## **Idaho**

Point of Contact: Omar Valverde

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) Idaho Bank Reporting Project/Financial Review Committee/Protocols Agreements
- (b) Protocols agreement – field training (medical professionals – law enforcement)
- (c) Protocols agreement – Department of Health and Welfare Ombudsman and APS – field training

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

### State Conferences

[Facility Standards – Ombudsman and APS – AG’s Offices]

- (1) Financial exploitation/law enforcement investigations
- (2) Gray homicide
- (3) Guardianship
- (4) Developmentally disabled mentally ill populations – interviewing techniques

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Funding – staffing – population – education
- (2) Deferment of responsibility at the local level
- (3) Violence [conflict of interest] – more service representation

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Strong commitment of Idaho Commission on Aging and willingness of all participants to collaborate

## Illinois

Point of Contact: Kathleen Quinn

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a)
  - (1) IL State Triad B\*SAFE (Bank Reporting)
  - (2) Elderly Service Officer(ESO) Training (40 hr)
  - (3) Attorney General Senior summit (Fraud)
  - (4) Flag (Bank Reporting)
  - (5) Governors Elder Abuse Task Force, State Police Financial Crimes Task Force
  
- (b)
  - (1) IL State Triad
  - (2) Elderly Service, Family Violence
  - (3) Coordinating Councils
  - (4) VOCA Committee
  - (5) Domestic Violence
  - (6) Advisory Council
  - (7) IL Violence Prevention Authority
  - (8) Grandparents raising Grandchildren
  
- (c)
  - (1) IL State Triad/ESO Training
  - (2) Pioneer Movement - Regional Committees
  - (3) Depts of Public Health/Aging Workgroup
  - (4) Dept. Public Health Certified Nursing Assistants Recruitment/Retention Committee
  - (5) MFCU/Public Health Coordination
  - (6) Meetings with Families/Surveyors/Ombudsmen Pilot

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) More public and professional education and training on the issue.
- (2) Develop resources for efforts to sustain and institutionalize them (Triad/B\*SAFE/ESO/Pioneers/State Police/Ombudsman Program)
- (3) Legislative Initiatives
- (4) Develop standards for facility Alzheimer's units
- (5) Improve recruitment and retention of Certified Nursing Assistants in facilities (also home care workers)

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Lack of funding and staff resources to support efforts.
- (2) Olmstead implementation/historical bias toward facilities (IL has one of U.S. highest institutionalization rates)

- (3) Reluctance of some funding sources to address elder abuse (e.g. historically almost no VOCA funds have gone to elder programs)
- (4) Lack of involvement by prosecutors except in 2 largest counties. Central IL workgroup to follow up on DOJ nursing home abuse conference had to be canceled due to lack of prosecutor interest.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) History of collaborative efforts and strong interest to continue; good working relationships among most players; strong leadership.
- (2) Enough resources and priority on collaboration to foster wide range of collaborative programs.
- (3) Strong legislation addressing issue.

## Indiana

Point of Contact: Scott Newman

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- In Indiana one unique feature is that APS units are located in 18 “hub county” prosecutors’ offices. This situates them well for collaboration with law enforcement and grand jury investigative units.
- During “after hours,” the Indiana State Police has agreed to answer all APS “hotline” calls, and to determine whether an immediate response is necessary.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- As a prosecutor, I have come to recognize that the limited resources available to APS unit must be leveraged through collaboration with other agencies serving the elderly, e.g., State Police white collar crime unit, Attorney General Consumer Protection and Home Improvement Fraud Sections, Central Indiana Council on Aging, etc.
- All parties felt that there has been a shortage of adequate, interdisciplinary training both to raise awareness and develop competence regarding elder abuse issues.
- There is a need to develop, for use by all agencies, good printed material designed to educate the elderly to prevent common forms of investigation, and we all need to seek out forums for it distribution.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Putting aside the pressure of every day, e.g., among police trainers, to make room for this topic on their agendas.
- Igniting among our colleagues at home the same level of awareness and enthusiasm in evidence here.
- Some “political” obstacles with changes in leadership and administrations.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Hoosiers are not by nature contentious – we tend to be trusting and collaborative, wanting to “get along” and seek common goals.

- Good public safety leadership with long-standing communities and relationships of trust.
- Strong commitment by state government to raise this as a priority issue, and to commit more resources.
- Strong leadership in central Indiana in the area of health care – potential for new partnerships.

## **Iowa**

Point of Contact: Sandi Koll

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

Efforts include:

- Elderly services officers (2) within Division of Criminal Investigation
- Triad – Training Manual
- Informally – AG, APS and SUA AAA working together
- Agencies working together on adult abuse issues (Public Safety, Human Services, Inspections and Appeals and SUAs)

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Bring law enforcement and Inspections and Appeals together to a meeting to share and develop a plan of action – search for funding
- Find out what requirements are for law enforcement for continuing education

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Funding
- Putting issues into practice
- Providing outreach with limited funding and human resources
- Changing peoples' attitudes about the existence of abuse
- Competing with other significant issues and resources
- Suspect abuse and not sure how to proceed

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your ideas or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Willingness and a history of collaboration
- Strong relationships among state agencies
- Strong commitment to Iowa's elderly as a large part of the state's demographics

## Kansas

Point of Contact: Ruth Ritthaler

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) Ongoing cooperation Attorney General/DA offices on consumer fraud
- (b) Enhanced penalties for violations of Consumer Protection Act when victims elderly
- (b), (c) (1) An interagency agreement on abuse involving Secretaries of Aging, Health and Environment, Social and Rehabilitation Services, Ombudsman regarding abuse
  - (2) Local elder abuse councils involving numerous agencies
  - (3) Safe House for elders in Wichita

*Briefly describe the ideas or strategies you have developed in the state and tribal meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Identify available funding sources for research, education
- (2) Inter agency/disciplinary task force (statewide)
- (3) Identify problem laws/statutes/procedures; target list of them that must be changed!

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Lack of funding/resources
- (2) Geography
- (3) Lack of consistency in administrative/criminal procedures and terminology

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Recognition of barriers of past and willingness to cooperate to develop partnerships

## Kentucky

Point of Contact: B.J. Jacobs

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

(a) Financial Exploitation and Consumer Fraud

- Senior Crime College (consumer education on financial fraud and personal protection – 100 sites across the state – AG’s Office, Senior Center, Office of Aging, APS, AARP, Triad, Area Agency on Aging/Area Development District)
- Triad
- Prosecutor’s Advisory Counsel (AG’s Office) coordinates training on crime against seniors for state and local prosecutors
- Telemarketing task force (AG’s Office, US Attorney’s Office, FBI, Secret Service) – collaboration on investigation and prosecution of telemarketing
- Bankers vs. Crimes (AG’s Office, APS, Office of Aging) – training tellers on fraud scams against seniors and reporting to APS
- Scam Jam (AG’s Office, AARP, Better Business Bureau) – consumer education/entertainment

(b) Elder Abuse and Neglect at Home

Statewide Elder Abuse committee – 35-40 public and private agencies represented with the focus on prevention, intervention, coordination, public awareness, elder rights and public policy; developing model protocol on elder maltreatment, multidisciplinary teams, Fatality Review Teams, website on elder abuse, training material and speakers bureau, elder shelter public forums on elder rights

(c) Institutional Abuse and Neglect

APS and AG’s Medicaid Fraud and Abuse Central (MF and AC) Division MOU between the two agencies for APS to report to MF and AC Division all reports of abuse neglect and/or exploitation that are likely to be substantiated or are substantiated for prosecution or investigation and prosecution by the AG’s Office

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Train/educate prosecutors, service providers and judiciary on elder issues to improve successful prosecution

- Measurable outcome to determine if the victim positively benefitted from intervention
- Review law (adult protection) to remove barriers or make amendments to prosecution and service provision

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Turfism
- Lack of funding
- Lack of staff
- Issues with confidentiality statute
- Lack of resources
- Overall plan for coordination of senior [efforts]
- Information about each agency and agency roles is not communicated effectively
- Lack of cooperative at local, regional and state level among agencies

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- A true interest in the issue of elder maltreatment, victim protection and perpetrator treatment among agencies
- Willingness among agencies to set aside the turf issues, etc. to work toward the development or enhancement of services regarding elder maltreatment issues

## Louisiana

Point of Contact: Audrey Thibodeaux

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) 1994 legislation formed the statewide Comm. for Coordination of Law Enforcement Services to Elderly (CCLESE) represented by Council on Aging, AARP, Governor's Office of Elderly Affairs, AG-Medicaid Fraud, Sheriff's, Chiefs, State Police and DAs. Issues (b) and (c).
- (2) U.S. Attorney Middle District Nursing Home Task Force – U.S. Attorney, Department of Health and Human Services, Gov. of Elderly Affairs and Aged Law Enforcement Response Team (ALERT). Issue (c).
- (3) 1999 legislation formed ALERT Program, 45 hr. P.O.S.T. certification provided to candidates meeting selection criteria. Goal to have 1 ALERT officer per parish. Issues (a), (b), and (c).

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your ideas or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Incorporate additional consumer fraud training into the ALERT Program to educate law enforcement officers. Currently, this is often seen as just a "civil" matter rather than a criminal offense against both persons and property. Issue (a).
- (2) CCLESE will add financial exploitation and consumer fraud representative from AG's office to address issue (a).
- (3) Future ALERT initiative in Phase II includes training for district attorneys. The goal is to have one ALERT trained ADA in each judicial district. Issues (a), (b), and (c).

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Turf issues could present a challenge in ALERT training for ADA's. Funding for this component of the training will also present a challenge. Issues (a), (b), and (c).

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Louisiana currently has in place a number of programs relating to issues (a), (b), and (c). Contacts made and information obtained by symposium attendees has given us much to consider, evaluate and implement to further improve services related to issues (a), (b), and (c).

## Maine

Point of Contact: Ricker Hamilton

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Triads – 11 areas involved in partnership and state steering committee hosted by Attorney General
- (2) Maine Reporting Project for Financial Institutions
- (3) Elder Crime Contact Officers Program – designates and officer in each local and state law enforcement department for elder issues
- (4) Collaboration between APS, Maine Community Policing, Department of Attorney General and AARP to develop training for law enforcement

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Coordinate, strengthen and improve existing state partnerships – ex: expanding necessary training for a number of disciplines (including health field, financial community, postal worker and faith community, EMTs)
- (2) Charge the criminal laws to strengthen provisions regarding abuse, neglect and exploitation
- (3) Listening sessions, “listening to elders”
- (4) Develop multidisciplinary team for southern (most populated) part of state, comprised of APS, prosecutor, AARP, AAA, domestic violence [advocate], law enforcement, AG, medical professional (PA)
- (5) Train elder abuse victims to talk to older victims about abuse neglect exploitation – increase self reporting

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Lack of prosecution of abuse, neglect and exploitation (cases substantiated by APS and referred for prosecution)
- (2) Lack of funding – training, resources to meet needs of older victims

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

People, professionals – large geographic area but small population with strong pool of dedicated professionals who serve that population who would respond to fresh approaches regarding collaboration.

## Maryland

Point of Contact: Jeffrey Myers

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) Project SAFE (Bank reporting project; Senior Sting (mail rip offs)
- (c) Statewide prosecutor devoted solely to institutional abuse and neglect
- (a), (b), (c) Special docket devoted to prosecuting illegal homes; interagency and interdisciplinary groups

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

(a), (b), (c):

- (1) Increase prosecutions by educating:
  - A: APS workers on what is important for prosecutors;
  - B: Local law enforcement on why elder abuse cases are true crimes;
  - C: States' Attorneys on the importance of elder abuse prosecution and ways to deal with some of the unique difficulties presented by these cases.
- (2) Re-engineering the APS referral process to law enforcement.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) People needed to implement are already 118% over-committed.
- (2) Different constraints and priorities of various agencies involved.
- (3) Providing statistics to prove problem justifies more funding.
- (4) Providing statistics to show work will have a measurable impact.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The Attorney General and Secretaries of Health and Mental Hygiene, Aging, and Human Resources all see elder/vulnerable adult abuse issues as high priority matters.

## Massachusetts

Point of Contact: Gregory Giuliano

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Bank Reporting Project: Massachusetts was the first state to train bank personnel on how to detect and report financial exploitation of the elderly. This project is led by Executive Office of Elder Affairs and involves the Attorney General's office, the Massachusetts Bankers Association, among others. It is being replicated in many states.
- (2) The Attorney General, the Executive Office of Elder Affairs and local DAs are developing legislation to make it easier to prosecute cases of financial exploitation of elders through joint bank account abuse.
- (3) The Attorney General's Elder Protection Advisory Committee: This group consists of state and local providers and consumers in order to promote collaboration among protective service professionals, law enforcement and others in responding to elder abuse cases.
- (4) Suffolk County Roundtable: This group consists of the local DA, elder service agencies and state agency representatives for the purpose of collaboration on specific elder cases before the DA's office.
- (5) State law requires elder protective service agencies to report serious incidents of elder abuse to the local DA prosecution or other appropriate remedies.
- (6) Mass Medical Society Initiative: The Executive Office of Elder affairs and the Mass Medical Society have developed a manual to train physicians on how to detect and report elder abuse and on their role on the assessment and treatment of these cases.
- (7) Community Education: All protective services agencies are required to conduct a minimum of 15 community education events a year in order to promote reporting and collaboration in responding to elder abuse cases.
- (8) Hotlines: Both the Executive Office and Elder Affairs and the AG's office have hotlines which refer elder abuse cases to the appropriate protective services agencies and answer questions for concerned consumers.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) To promote more consistency in the relationships between protective service agencies and local DAs, we propose to develop a training curriculum for protective services staff and local DA offices which will address:
  - the types of cases to report to the DA;
  - the types of cases that will be prosecuted; and
  - how other remedies can be used instead of prosecution in certain situations (i.e., restitution

agreements, treatment for drug-addicted or alcoholic perpetrators).

- (2) Develop a training curriculum for law enforcement personnel on how to conduct elder interviews.
- (3) Develop training for judges on elder involving protective services.
- (4) Intensify our efforts to educate elders on how to prevent themselves from being financially exploited or otherwise abused.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The lack of funding and turf issues are the biggest barriers we will face in implementation of our proposed initiatives.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The biggest asset is that state agencies have strong leadership and willingness to work together. Massachusetts is a very activist state. Also, we have many universities in Massachusetts that are very involved in elder issues and would support our proposals.

## Michigan

Point of Contact: Lynn Alexander/Carol Isaacs

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) Michigan's Family Independence Agency (FIA) and the Office of Services to the Aging (OSA) are integral partners in efforts to protect vulnerable adults from financial exploitation. In 1996, the two agencies formed the Senior Exploitation Quick Response Team (SEQRT) as a response to the growing community concern of protecting the elderly from financial theft from service providers, salespeople, family members or other new "friends." The team is made up of different agencies or organizations at the state level that have regulatory authority over the banking industry, funeral homes, real estate, etc. Other team members are representatives from the Office of Attorney General, the Michigan State Police, the Michigan Prosecuting Attorneys Association, the private bar, and the financial community. The SEQRT team makes training available to human service agencies, law enforcement agencies, prosecutors and the general public on recognizing the signs of exploitation through "Schemes, Scams and Swindles" regional conferences.

With the enactment of a new law that provides penalties for financial exploitation by those who have a trusting relationship with a vulnerable adult, OSA and FIA used the SEQRT model and targeted training seminars at banks, credit unions and other financial institutions throughout the state to educate and inform business on how to recognize when financial exploitation of an elderly individual may be taking place. Training was also provided to members of the Prosecuting Attorneys Association, and since it was so well received, plans are being made to offer this training to judges. FIA has also developed a "Risk Assessment" device as one other strategy to prevent or arrest financial abuse among senior citizens. This tool will soon be piloted by Home Help Agencies as part of an applicant's screening process for Independent Living Arrangements to detect incidences or patterns of financial exploitation. FIA will then measure the success of this instrument for statewide use.

- (b) Adult Protection in Michigan is mandated by Public Act 519 of 1982, which requires certain professionals and other employees in the fields of health care, mental health, social work, law enforcement, education and other human services to report suspected cases of adult abuse, neglect or exploitation to the Family Independence Agency. Each FIA local office has an adult protective services staff that receives and investigates complaints of alleged abuse, neglect, or exploitation of a vulnerable adult. FIA works in cooperation with local law enforcement agencies by providing training in correct response to situations involving adults who are at risk so that a proper referral can be done to an adult protected service worker for investigation. FIA statistics show that in FY 1999, there have been 9,414 adult protective service referrals, and a caseload of approximately 3,131 people who were served.

FIA and law enforcement agencies are also integral partners in local outreach efforts, in particular the establishment of "Community Protection Teams" – a joint effort with aging network agencies and seniors to educate the public as to the warning signs of exploitation or abuse. One form of a Community Protection Team is the Michigan Triad, a cooperative crime prevention program of the Michigan Sheriffs' Association, Michigan Association of Chiefs of Police, and the AARP. It is also important to note that some women's shelters are now becoming active in

providing services to elderly victims of domestic violence and substance abuse.

The Michigan Supreme Court has taken additional steps to improve the protection of adults who have guardians and conservators assigned to them. The Court's new emphasis attempts to protect adults victimized by unscrupulous guardians, and assist communities looking to strengthen their guardianship programs. The Court will identify problems in the guardianship system, advise local probate courts on service improvements which include volunteer services, and investigate complaints of neglect or abuse. Other functions include training all probate judges on the needs of the elderly, developing more information to help people better understand the guardianship system and its alternatives, providing available community resources and revising court rules to improve the guardianship process.

- (c) In addition to the aggressive campaigns sponsored by the Office of Services to the Aging and local area agencies on aging, over the past three years several thousand seniors, advocates and law enforcement officials have attended conferences that have been held in 11 different locations around the state. The "Long Term Care Information and Education Campaign" provides professionals, seniors, and their families with information about how to recognize and prevent elder abuse and exploitation.

*Briefly describe the ideas or strategies you have developed in the state and tribal meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (a) The Michigan Attorney General's Office, Consumer Protection Fraud Division, has done, and will be doing, more work with telemarketing fraud.
- (b) Additional trainings are planned for 2001 that will target elderly victims of domestic violence and sexual assault. This training will be a partnership with the Prosecuting Attorneys Association of Michigan and the Office of Services to the Aging.
- (c) Michigan continues to look at alternatives to long term care settings. All stakeholders are included in a statewide steering committee. They bring issues forward to the Human Services Council and draw stakeholders together for education of seniors and their families. We will follow nursing home protocol and do a better job of publicizing the work that is going on now at the state and local level.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Michigan has worked through many turf issues. Lack of funding, and consequently small staffs, is always a problem. Also, Michigan is a large state with a diverse population. Michigan has 13 federally recognized tribes and the second largest Arab population outside of the Middle East. Michigan also experiences seasonal increases in the migrant population. It can be difficult to develop programs and policies that are responsive to such diversity.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), (c) (see above), please so indicate.*

There needs to be a willingness to partner, the courage to be innovative, and the wisdom to draw in stakeholders as a collaborative team effort. Dedicated professionals in the state have already established a strong history of collaboration. In the past few years the number of collaborative trainings between state and local agencies has increased dramatically, particularly in the area of financial exploitation. Also, particular attention is now being given to direct client services, and training is available for professionals responding to domestic violence or sexual assault. We know that physical violence to the elderly happens most frequently in the home. Because of this emphasis on training, more prosecutors and law enforcement are dedicating staff to these issues.

## Minnesota

Point of Contact: Barbara Doherty

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Nursing Home Working Group (Department of Human Services (DHS), Department of Health, law enforcement, Ombudsman, County Adult Protection, U.S. Attorney): Group meets every 2 months to promote legislative and collaborative focus regarding (a) assisted living and (b) training and education
- (2) Adult Protection Teams: local (at the county level) law enforcement and APS – services
- (3) Law Enforcement training team – AG, Department of Public Safety, County Attorney staff, state and county APS
- (4) Pilot project for risk assessment tool
- (5) Annual training for lead investigative services – Department of Health, DHS licensing investigators, county APS, law enforcement, state and local attorneys

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

For (a), (b), and (c):

- (1) Training the judiciary – their convention
- (2) Training the DHS appeals referees

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Turf - biggest obstacle in getting prosecutions
- (2) Lack of knowledge: how to do training for judiciary or referees who don't typically accept training outside of their own profession  
  
community understanding – jury won't have background in adult protection as either civil or criminal
- (3) Lack of media messages: not consistent

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Collaboration – 3 groups already exist in state so build on this base – bring in more county staff – especially county attorneys and city attorneys

## Mississippi

Point of Contact: Donna Hodges

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

There has been a very loose collaborative effort, developed primarily through training programs financed through the Mississippi Leadership Council on Aging. The Mississippi Law Enforcement Officers Training Academy develops and presents the training, with assistance from the Attorney General's Office, Department of Human Services, Victims Rights Coordinators, Domestic Violence Unit Representatives, AARP. Attendance is by local Triad members, local law enforcement officers, ombudsman, and some social workers. All three topics are covered in the training.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Team members suggest developing a resource manual, describing services available from different agencies. In addition, members suggest developing a task force to meet periodically and identify problems and possible solutions, as well as locating and using funds available.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The biggest challenge is lack of funding to address abuse and neglect at home. The Attorney General's office is very active and proactive in dealing with consumers issues and institutional issues; however, lack of funding specifically designated for elder issues in the home results in the inability to address those problems.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The biggest asset is the willingness to collaborate. Participants at this conference have demonstrated their willingness to learn and share information, and expressed their desire to work more closely and to focus on these issues. In addition, leadership is strong in Mississippi on the part of state agency heads and in the local communities, many of whom are dedicated to individual interests.

## Missouri

Point of Contact: Mary Schaeffer/Brenda Campbell

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

### Collaborative Efforts

- State-sponsored annual APS Conference includes invitation to law enforcement (with POST/CLE Credit), Area Agencies, Department of Mental Health (DMH) Attorneys, etc. (No conference fee)
- New financial exploitation passed last session; working with Missouri Bar Association to develop training for banking professionals and APS workers together and community advocates and elder law symposium of St. Louis
- Annual APS conference has a “thread” of local supports interstate, interdisciplinary team panel presentation about what’s available in Missouri – prosecutors, law enforcement, Missouri Highway Patrol, etc., DMH
- Present at police departments, annual conferences for public administrators (Missouri Guardians), prosecutors, hospital association, etc., when invited/aware
- Missouri AG’s office very active in telemarketing/consumer fraud and sponsors annual investigator’s training for non-law enforcement investigators
- State Long Term Care Ombudsman Office in St. Louis has VOCA grant – also doing some advocacy work in hotline calls
- Women Elderly and Battered (domestic violence association) – collaboration regarding elderly victims – some funding for a study on seniors accessing domestic violence shelters/facilities

NOTE: In Missouri APS workers are state-employed social service workers who investigate, do pre-long term care screening, and case management of home- and community-based services

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (a) Deal with financial exploitation (new legislation) through public education and training. Establish relationship with banker’s industry and train banking professionals and AG’s Office.
- (b) Review the report from legislative public hearings on elder abuse (conducted last session) and establish a state level focus group to develop strategies/action plans for Missouri.
- (c) Explore the feasibility of a statewide workshop to educate/deal with new law – focus: prosecutors, police, sheriff, highway patrol, APS, AG, AAA, nursing facilities, home care services providers

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Resources – staff and money –

- Labor shortage
- Low pay scales
- Legislation that caps state budget/spending
- Growing Medicaid budget (and other entitlements) has funding priority

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- New legislation
- Legislative attention
- Large population of older adults
- Strong leadership in Governor’s Advisory Council, Silver Hair Legislature, Minority Commission, and (Olmstead) Advocacy Commission and Task Force on Disabled Adults

(NOTE: No AG [or other public safety] representation; Area Agency on Aging and Division of Aging only.)

## Montana

Point of Contact: Rick Bartos

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

Montana has 7 Indian reservations. Each reservation is governed by a tribal government. Each tribe views sovereignty as an important component for their existence. There is no statewide collaborative team because of the difficulty in seeking consensus. Collaboration typically occurs on a case-by-case basis and with local APS, state personnel and interested tribal officials.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Invite tribal APS and social service personnel to state training.
- (2) Request assistance of state Indian coordinator to assist.
- (3) Continue to serve all persons in Indian reservations if a referral is made to the state APS or other entity.
- (4) Approach Montana/Wyoming Tribal Chief Council requesting consensus on basic abuse/neglect/exploitation issues.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Montana is the fourth largest geographic state – population +900,000 people – with 30 APS workers. 2.5 FTE cover 17 counties, a geographic size equal to the size of Delaware and Rhode Island. On average one APS worker travels 15,000 miles per year.
- (2) Tribal sovereignty and state jurisdiction on criminal matters, including prosecution and investigation.
- (3) Fear on part of certain tribes to protect enrolled members.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Willingness of State, AG, Auditor, US Attorney's Office and APS to collaborate
- (2) Opportunities to invite personnel from tribes to attend state/federal training meetings.
- (3) Cooperation is best among people directly involved (APS, Indian Health Service, local sheriff, etc.) than it is on a state level.
- (4) All people on a reservation are also residents of the state of Montana.

## Nevada

Point of Contact: Bonnie Brand

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- Civilian leader of Abuse/Neglect Detail of Law Enforcement – Los Vegas Metro Community Emergency Response Team (CERT) (Southern Nevada)  
Senior Evidence Review Team (SEQRT) (Northern Nevada)  
Consumer fraud – not really handled on local levels – only state  
Bank reporting project – exploitation brochure
- (TADS – Temporary Adult Displacement; SAFE – Special Advocate for Elders; SALT – Seniors and Law Enforcement Together
- Ongoing task force

Our state elder abuse council/action plan addresses all three issues – (a), (b), and (c)

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- As a team, approach DAs, Sheriffs and Chiefs Associations
- Sandie Durgin – law enforcement metro – meet with Sheriffs, Chiefs
- Apply for grant funding (VOCA)
- Work to improve law enforcement reporting locally suggest red stamp on reports contact Sheriffs and Chiefs Associations
- Present to Nevada League of Cities, Counties

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Lack of funding
- Prosecutor reluctance
- Rural areas especially impacted by lack of resources
- Medicaid Fraud Unit cannot work on elder issues outside Medicaid-funded facilities

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Strong leadership
- Willing to collaborate/communicate
- Small state-encourages collaboration – first name basis – we know the players throughout our state

## New Hampshire

Point of Contact: Ann Butenhof

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

We have a number of collaborative efforts:

- (1) Financial exploitation and consumer fraud
  - Reverse boiler room - with AG, AARP, FBI, postal, local and Canadian law enforcement
  - Department of Health and Human Services (DHHS), private attorneys, courts re: durable power of attorney laws (strengthening)
  - Community education on consumer fraud: AG, local law enforcement and community leaders
  - Legislation re: mandatory bank reporting – DHHS and banking association
- (2) Abuse and Neglect
  - AG, AARP, DHHS and postal: strengthen adult protective laws and work on protocols for professionals dealing with abused elders
  - Police, sheriff and elderly community: Triad

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

We recognize the need for leadership from the top, and plan to convince the Governor to get involved (currently, the state does not have an elder commission). We plan to have an Elder Abuse Symposium, modeled somewhat after this symposium, with the goal of bringing all key players to the table. This is necessary because although we have many collaborative efforts, we are approaching these issues in a fragmented way. For planning the symposium, we plan to involve elder consumers and aging organizations – cosponsors could include: DHHS, AG, Governor, AARP, and Senior Citizens Law Project. Goals of symposium are to create a statewide consortium relating to all elder abuse issues, with sub-task forces, and to create a coordinated education plan.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Our elder advocate network is fragmented and funding for elder abuse is limited. There is currently no funding for new initiatives in our state. Also, New Hampshire has some very rural sections of the state, so any statewide initiative can be a challenge.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

We are a small state, with many committed people. We have strong volunteer organizations.

## New Jersey

Point of Contact: Dorothy Bargholz

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- Attorney General's Office working with state/county Divisions on Aging. (a)
- Attorney General's Office working cooperatively with the NJ Department of Health and Senior Services on its Medicaid fraud and abuse efforts. (c)

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

We propose to develop and sponsor a conference of interested parties state-wide to develop working teams as the county level – formatted after this conference. Sponsors would be: Attorney General, Department of Health and Senior Services, AARP. Invitees would include: County Prosecutors, County New Jersey EASE (Division on Aging) representative, State Police, emergency response, Red Cross, banking community, and professional health care associations.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Assembly of a team of key decision-makers from the above cooperating organizations to develop the foundation for county-level working teams.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Leadership of the Administration, Attorney General, and Commissioner of Health and Senior Services and the already established cooperative efforts.
- Establishment of the first county-level response/enforcement teams.

## New Mexico and Pueblo of Zuni

Point of Contact: Ellen Lietzer/Michelle Lujan-Grisham/Margaret Dosedo

*Briefly describe any ongoing collaborative efforts in your state or tribe between safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Joint protocol among investigative agencies such as Licensing and Certification, Ombudsman and Medicaid Fraud to share case information, collaborate on investigations and strengthen substantiation to prevent one agency from not substantiating when another does, leading to weak evidentiary components hurting overall prosecution efforts. This is a state-level and statewide effort.
- (2) Legislation authorizing “undercover” care evaluations by New Mexico State Agency on Aging. We believe this is only such statute in the country.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Duplicate the state-level protocol at the local level.
- (2) Host and participate in Judiciary Conference to enhance awareness and involvement in elder abuse cases, including financial exploitation.
- (3) Identify funding sources to implement (1) and (2) through fines, penalties and victim restitution.
- (4) To enforce adult abuse codes (including tribal codes); funding required to properly staff programs with investigators, case managers and prosecutors. Will organize cohesive group to collectively advocate for state legislative funds.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Stigma related to difficult case development and legal arena as well as general fear of industry perpetrators
- (2) Inequity between child abuse and elder abuse funding and policies.
- (3) Funding
- (4) Knowledge of elder abuse cases
- (5) Turf
- (6) Statutory limitations
- (7) Lack of training

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Enthusiastic leadership
- (2) Ability to implement “Zero Tolerance” policy
- (3) Ability to collaborate with diverse public and private entities including the 22 NM Indian tribes

## New York

Point of Contact: William Graham

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Multidisciplinary Annual APS/Aging Adult Abuse Conference
- (2) Statewide Triad – also Committee for Coordination of Police Services for Elderly (16 member committee by legislation)
- (3) Operation Restore Trust
- (4) MFCU – outreach to nursing homes, senior groups
- (5) Statewide Telemarketing Task Force
- (6) Reverse boiler room with AARP
- (7) Onondaga County Prosecutors Initiative focusing on elder abuse
- (8) Training with banks and video
- (9) Telephone reassurance – computer automated
- (10) Dementia trainings for APS, Alzheimer's Association, medical personnel and law enforcement

*Briefly describe the ideas or strategies you have developed in the state and tribe team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Ongoing team meetings of participants at this conference
- (2) Bring together geographic-based groups with issue-based group, local law enforcement, DAs, etc.
- (3) Intergenerational programs using teenagers to work with the elderly
- (4) Material – development and distribution

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Funding
- (2) Identifying the problems across a diverse geographic, ethnic and political state
- (3) A large rural population, isolation

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Wide range of academic centers
- (2) The diversity within the state
- (3) Communication and technology infrastructure
- (4) Tradition of an activist government and leadership

## North Carolina

Point of Contact: Debbie Brantley

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (1) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) David Kirkman, Co-Chair of Senior Consumer Fraud Task Force, distributes “fraud alerts” to members of Task Force regularly which provide information on emerging scams, etc., targeting seniors. Members further distribute the alert to their counterparts. Information is posted in senior centers and other local agencies/organizations where seniors frequent.
- (b), (c) The Division of Aging (state unit on aging) houses the Long Term Care Ombudsman Program. In North Carolina, the Ombudsman Program includes 25 Regional Ombudsman Programs located in area agencies on aging. These ombudsmen have utilized the elder abuse funding provided under the OAA to initiate First Responder Program which is a collaborative effort between social services, law enforcement, EMS and other medical professionals. The program educates these individuals on how to identify elder abuse as well as how to report it for further investigation.

Also, workshops held locally to educate general public, seniors and human service professionals on elder abuse; materials distributed at health fairs, doctors offices, etc. on elder abuse.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) An area, that we plan to strengthen this year is to work more closely with the North Carolina Bankers Association to enhance efforts of bankers to identify and report possible financial exploitation of seniors.
- (2) Another area we will be working on includes utilizing the elder abuse funding states (SUAs) receive to conduct more public awareness efforts which will focus on educating seniors about types of scams and other deceptive practices are in existence in an effect to reduce the number who became victims.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) The biggest challenges include lack of funding; many agencies on aging have small staffs and don't have sufficient time to focus on consumer fraud – although some are doing a lot to combat consumer fraud and are very effective.
- (2) The biggest challenge in regard to consumer fraud continues to be how to help seniors avoid becoming targets of scams and further deceptive practices.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The biggest asset at this time includes Senior Consumer Fraud Task Force which was established in 1998. This task force includes many of the agencies and organization that interact with seniors who may be victims of scams and deceptive practices – State Bureau of Investigation, law enforcement, aging advocates/agencies, AARP, Attorney General’s Office, Postal Service, Secretary of State’s Office which deals with fraud involving securities, promissory notes and investments, Better Business Bureau.

NOTE: We have focused most of our efforts on elder abuse prevention in North Carolina since 1992. As a result, we are expanding our focus to include financial exploitation.

## **North Dakota**

Point of Contact: Lynne Jacobson

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- North Dakota is in the process of organizing vulnerable adult services at the state and regional level.
- Consumer protection currently collaborates with social workers and law enforcement.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

More coordination between consumer fraud/protection and social services/aging services

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

### Funding

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Willingness of local/community organizations to contribute/participate

## Northern Cheyenne Tribe

Point of Contact: Jackie Tang/Joanne Wolfblack

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, (c) institutional abuse and neglect.*

- (1) The Northern Cheyenne Tribe has one ordinance in the Tribal Law and Order code which deals with elderly exploitation. This ordinance has never been enforced. There are no existing laws to protect the elderly.
- (2) Abuse and neglect at home – any abuse or neglect at home is usually reported to Child Protective Services (CPS), since there is no APS. CPS sometimes reports to the Public Health Nurses (PHN). CPS and PHN sometimes conduct investigations together. Family members are referred to other agencies to assist them in their care of the elderly.
- (3) Institutional Abuse/Neglect – complaints are usually referred to the supervisor of the caretaker.
- (4) Tribal Prosecution and Social Services “sometimes” handled financial exploitation. Social Services “sometimes” become the payee to monitor the elderly’s (and sometimes the disabled) income. Such as social security payments, SSI, Lease payments, etc.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Strategy – to begin looking for funding for an Adult Protection Services position. Begin a local team of professionals to discuss and implement a referral system and how to handle the referrals. Referrals will include financial exploitation, abuse and neglect at home, medical neglect, institutional abuse and neglect. As a team they will decide how each referral should be handled and what services need to be provided. Team will also help create tribal laws to handle “Elderly Abuse” and to define it. Team will also develop a tracking and monitoring system. Collaboration with other agencies will be a challenge since the elderly are one of the most important resource to the tribe.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Funding is limited to Indian tribes.
- (2) Educating the public will be challenging due to the public’s reluctance to try something new.
- (3) Working with the Tribal Council in implementing a law on mandatory reporting of elderly abuse.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Tribal team is willing to collaborate, with state and other agencies.

## Ohio

Point of Contact: Jackie DeGenova

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) Ohio Attorney General Montgomery commenced a “Senior Protection Initiative” in March 2000 designed to gather and exchange information between organizations dedicated to protecting Ohio’s vulnerable populations. Emphasis is on education, consumer fraud and resource identification.
- (b), (c) Collaboration exists between APS and the Ohio Department of Aging but a stronger network is needed to enforce existing laws and create mechanisms to assist, paralleled to those currently in place for child abuse issues.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

While Ohio is fortunate today to have 7 representatives (including 2 presenters) at this symposium, we recognize the need for increased collaboration and education between our agencies to better meet the needs of our seniors and vulnerable populations. Several of these 7 representatives have over 20 years experience involved with services for the elderly and law enforcement. We have seen various programs initiated through several administrations, many with excellent recommendations. The need for follow-up, however, continues to exist. Our representatives today have agreed to use Ohio Attorney General Montgomery’s initiative as a springboard to make our recommendation for a state-wide collaborative effort to combat elder exploitation and abuse. The keys are: education of public and law enforcement; accountability in enforcing existing laws; and protocol development for collaboration between state agencies.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Ohio’s biggest challenges lie in the fact that it is a “home rule” state, with 88 very independent counties and a diverse rural and urban population.
- In addition, Ohio’s regulatory schemes are fragmented into authority, without natural collaboration.
- Finally, follow-through on cooperation and education will be an obstacle to be overcome.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Ohio’s obstacles can also be seen as its assets: i.e., we have a state of 12 million, with seniors in rural and urban areas, conservatives and liberals, and an excellent cross-section of the nation. Ohio has thus historically been a proactive state, being one of the first to develop protection intervention services.

- Another asset is the Attorney General's willingness to be in the forefront in combating elder fraud, and engaging all aspects of adult services.
- Finally, the preauthorization of the Older American's Act is a useful asset.

## Oklahoma

Point of Contact: Barbara Kidder

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) OK-SAF (Seniors Against Fraud) – collaboration among 40 organizations and state agencies including the SUA and AG’s Office with funding from AARP and Southwestern Bell Oklahoma – Seniors Against Fraud provides seniors with information on telemarketing fraud, fiscal scams and housing repair; has held 2 statewide telethons on public television with responses from over 2,000 people; individual presentations to over 60,000 people by trained advocates using material provided by AARP, Southwestern Bell, state Attorney General, and Triad.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- State APS needs to contact Department of Public Safety, Chiefs of Police Association and others regarding training and collaboration -- how we can better work together to accomplish our jobs to protect vulnerable adults, with particular emphasis on the frail, minority elderly.
- Work to expand OK-SAF website to create more awareness of the problems facing vulnerable elders.

(NOTE: This questionnaire is being addressed only by the two aging representatives to the symposium.)

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Apparently, lack of interest by most of the state legislature and many law enforcement officials presents a barrier.
- Turf issues create fragmentation of services.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- The AG’s Medicaid Fraud Control Unit in Oklahoma is excellent. We’d like to see its duties expanded to include all medical fraud.
- Oklahoma also has a strong, statutorily created State Council on Aging, which was instrumental in getting advocacy groups included in recent legislation reauthorizing the state long-term care task force. (c)

## Oregon

Point of Contact: Stephen Schneider

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Created a statewide, interagency task force, under the Oregon Attorney General to look at elder abuse, problem-solve, create legislation and training protocols.
- (2) Setup elder abuse multi-disciplinary teams in 85% of our counties. They do: (1) staff codes, problem-solve; (2) begin cross-training activities between law enforcement and adult protective services; (3) public education activities for seniors in the community.
- (3) Oregon's bank project to deal with financial exploitation. Funding by Office for Victims of Crime and coordinated with the banking, law enforcement and senior services community. Also R2T2 Project.
- (4) Statewide training since 1195. Prosecutors college in 2000.
- (5) Oregon VOCA funded 6 programs for elders.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates (a), (b), or (c) (see above), please so indicate.*

- (1) Interested in state Department of Justice to create elder crimes/vulnerable adults unit for investigation and/or prosecution. County DAs need help in both areas.
- (2) Outreach to Oregon tribes including training to protective service, law enforcement and prosecutors. Assist tribes in elder abuse portions of their tribal codes.
- (3) Expand our retired financial experts program (these people volunteer with elder abuse multidisciplinary team and help in the investigation of financial exploitation).
- (4) Train law enforcement/prosecutors so they are better able to handle cases with vulnerable adults, including the disabled, mentally retarded and developmentally disabled/mentally ill.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Lack of funding!

- Staff elder abuse multidisciplinary teams
- Assist Department of Justice and DAs with investigation and prosecution
- Training materials cost money

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Excellent leadership from AG Ted Kulongoski and his successor Hardy Myers
- (2) Funding of specialized APS for mentally ill and developmentally disabled populating
- (3) Better leadership and willingness to work on the issue from:
  - prosecutors – we are now doing a yearly prosecutors college;
  - law enforcement – we teach cadets at the police and state police academy
- (4) Good coordination at state and county level on policymaking, legislation, creative funding strategies including statewide conferences

## Pennsylvania

Point of Contact: Alexis Barbieri

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (a) AG Mike Fisher's Task Force for the Protection of Older Pennsylvanians.
- (b)
  - (1) Act 128 training given to law enforcement and long term care givers to identify and report senior abuse and neglect. AG gives training through grant from Pennsylvania Commission on Council and Delinquency (PCCD).
  - (2) PCCD grant Department of Aging to instruct on cultural diversity.
- (c) Act 128 – above.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Mandated training for law enforcement in dealing with seniors issues with sensitivity. Applies to (a), (b), and (c).
- (2) Collaboration between law enforcement, Adult Protective Services and other social services agencies, and financial community to train tellers and bank employees to identify financial abuse and/or exploitation.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Funding is a big issue. (a), (b), and (c)
- (2) Geography of Pennsylvania is a problem. Pennsylvania is a large state with largest rural and populations in U.S. Also, second largest senior population in U.S. Lack of job opportunities force young folks to leave so seniors have no caregivers and greater isolation. Relates to (a), (b), and (c).

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Strong leadership and support from AG.
- (2) Strong senior network including area agencies on aging, victim services, AARP, PCCD.
- (3) Oldest coalitions for domestic violence and sexual abuse in U.S. Clearinghouse for both in Pennsylvania.
- (4) PCCD provides local match-free training because assumes cost for Byrne Program funding.

## **Rhode Island**

Point of Contact: Vivian Spence

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Working with Department of Attorney General and Department of Elderly Affairs on consumer outreach program to the elderly.
- (2) Department of Attorney General and Department of Elderly Affairs works with issues concerning financial exploitation. Responding to inquiries on financial exploitation cases.
- (3) State Plan on Aging, which meets monthly on neglect and guardianship issues.
- (4) Department of Elderly Affairs and Department of Attorney General work with senior centers, meal sites and local police.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Establish a statewide curriculum committee to establish training for law enforcement in all 3 areas.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Breaking agency barriers and making the challenge of working together.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Learning from the experts a better way to network with other states who have programs already in effect to address these problems.

## South Carolina

Point of Contact: Catherine Christophillis

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, (c) institutional abuse and neglect.*

South Carolina has a legislatively mandated Adult Protection Coordinating Council. This group has conducted multidisciplinary training, developed a training manual and facilitated the development of memorandums of agreement to improve system response. At the present time we have a state level financial exploitation team and a committee is looking at improving system response to facility investigations. The state has also developed a medical protocol for abuse and neglect cases. All these efforts have contributed to an ongoing climate of collaboration in South Carolina.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Legislative changes: improve bank reporting, strengthen power of attorney to encourage accountability, allow law enforcement to “lock down assets” and recover victim’s assets, fatality review teams
- Adult Protection Coordinating Council needs victim representation
- Contact medical community to develop a multidisciplinary team for medical issues
- Improved training for all “players” to include the mandatory domestic violence required by statute (must include judiciary)
- Establish emergency shelters

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above) please so indicate.*

- Resources (time, people, funding)
- Reaching judges and prosecutors
- Lack of public awareness
- Taking the program/information to the elderly
- Make it part of “community policing”

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Strong leadership (Adult Protection Coordinating Council)
- Excellent statute

- Small state, everybody knows other individuals in the system
- Special Prosecutor at the SC Attorney General's Office

## Tennessee

Point of Contact: Marilyn Whalen

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Statewide workgroup on facility abuse (includes Tennessee Bureau of Investigation, Aging, Protective Services, Health (regulators), mental health facility investigators, IRS, U.S. Attorneys). (c)
- (2) Annual Elder Abuse Institute with focus on Adult Protective Services and targeted other service providers and law enforcement (co-sponsored by Tennessee State University and Adult Protective Services) participants who are invited depend on topics presented (8+ years). (a), (b), (c)
- (3) By using VOCA, Title VII , and assorted grant funding rural West Tennessee area agency on aging sponsors an elder abuse forum annually which includes APS, law enforcement, other social workers and aging service providers (3 years). (a), (b), (c)
- (4) East Tennessee Coalition on Elder Abuse – multidisciplinary coalition which has provided training to the network, sponsored changes in state education and now working on banking project. (a), (b), (c)
- (5) APS and State Health Department has developed memos of understanding to enhance coordination between the licensing/certification staff and APS in investigating licensed and unlicensed facilities. Also – MOU with Department of Mental Health on investigations in state mentally retarded/developmentally disabled facilities. (c)
- (6) Statewide Task Force on Adult Protective Services (mid 1990's). (a), (b), (c)

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), (c) (see above), please so indicate.*

TN team will meet to explore the following:

- (1) Funding for (VOCA/VAWA?): Development of two additional regional Elder/Vulnerable Adult Coalitions;
- (2) Development of specialized investigative staff in at least one DA's office to be dedicated to elder abuse/crimes against frail elderly; and
- (3) Development of specialized investigative staff in at least one DA's office to be dedicated to elder sexual abuse/assault against frail elderly.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Funding
- (2) Willingness to target available funds to this population
- (3) Variation in geography/culture

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Team's willingness to continue the discussion

## Texas

Point of Contact: Carmel Bitondo Dyer

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (1) Triad (a), (b), (c)
- (2) CRCGS – Community Resource Coordinator Groups – all HHS groups helping Alzheimer’s victims (b), (c)
- (3) APS collaboration with the Department of Human Services (DHS), Mental Health/Mental Retardation (MHMR), Advocacy working with institutional abuse, personal care homes, MHMR setting (b), (c)
- (4) TEAM Institute – medical geriatric team collaboration with APS, now beginning to involve law enforcement (b), (c)
- (5) Banking Project – APS, AG’s Office, Texas Department of Banking and other financial entities modeling California, Utah, Oregon, Massachusetts (a)
- (6) FACT – Financial Abuse Cessation Team (a)
- (7) SAF-T – Seniors Against Fraud in Texas (a), (c)

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Develop a pool of experts as a resource for law enforcement: APS, medical, victim-witness, AG, DHS, AARP (a), (b), (c)
- (2) Texas Summit – to pull together interested parties, sponsored by Triad and TEAM Institute – begin with a planning meeting (a), (b), (c)
- (3) Possibly expensing TEAM institute with other entities (b), (c)
- (4) Utilize telemedicine/teleconferencing (a), (b), (c)
- (5) Need to fund research on senior victimization and services currently available (a), (b), (c)

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Geography – the size of our state presents challenges because it is difficult to provide comprehensive coordinated training and service models to such a large and diverse state. The cost of covering such a large state is also a challenge. (a), (b), (c)

- (2) Funding – the lack of funding at the local and national level (a), (b), (c)
- (3) Population – Texas has the 3<sup>rd</sup> largest population of elders in the U.S. (a), (b), (c)
- (4) Federal legislation – focus needed on elder abuse to make it a national issue (a)
- (5) Public awareness – at all levels, but even with increased awareness, there needs to be increased staff and interventions to deal with resulting increase in cases (a), (b), (c)
- (6) Lack of research (a), (b), (c)

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Commitment of the involved organizations – AG, victim-witness programs, US Attorney, TEAM Institute, DHS, Baylor College of Medicine, APS
- (2) Strong state APS – centrally-organized under the Texas Department of Protective and Regulatory Services, centralized training
- (3) Central database – an important repository of population-based data
- (4) Good working relationships – among agencies in the state: DHS, AG's Office, Department of Aging, Protective and Regulatory Services, Governor's Office, US Attorney, Victim Assistance

## Vermont

Point of Contact: Linda Purdy

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- (c) The Attorney General's Medicaid Fraud Control Unit works collaboratively with Licensing and Protection and the Office of Professional Regulation, and Adult Protective Services in processing referrals of abuse, neglect and exploitation. We have developed protocols and tracking forms to follow the referrals and cases: The AG's Office also has a full time prosecutor assigned to educating consumers and law enforcement about telemarketing fraud.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (a) (c) We are going to implement "Operation Elder Reach." We will identify all of the public, state, federal agencies, institutions, non-profit groups, advocacy groups that need to be educated on elder abuse issues and what resources are available to assist victims of elder abuse. To identify all of these individuals and agencies we will establish a working group to identify education, training and outreach needs.

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (a) (c) Vermont is a rural state. Funding is an obstacle, as well as turf issues. Population and geography are also issues, as all of the individuals who need to come to the table are overworked, under-resourced and cover rural, large areas

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

The biggest asset we have is strong leadership in the Attorney General's office and incredibly gifted, dedicated people who want to protect and enhance the lives of elder Vermonters. There is a willingness to collaborate and by defining a project – "Operation Elder Reach," we hope to accomplish these goals.

## Virginia

Point of Contact: Joy Duke

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

In Virginia our strengths lie in the beginning collaborative efforts that are ongoing in our state. To list a few:

- (1) Operation Restore Trust Medicare/Medicaid Patrol “Who Pays/You Pay” – slogan (26 public and private agencies)
- (2) Operation Sentinel by the U.S. Attorney (public, private agencies regarding nursing home abuse)
- (3) Law enforcement training for APS/elder abuse (Department of Social Services, Department of Criminal Justice, Virginia Coalition for the Prevention of Elder Abuse)
- (4) Opening in fall 2000 of the Virginia Elder Rights Center
- (5) Annual Elder Abuse Prevention Conference sponsored by law enforcement and multiple human resource agencies
- (6) Alzheimer’s/Dementia Training for law enforcement
- (7) Statewide Coalition for the Prevention of Elder Abuse

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Collaborative efforts will begin to examine ways of working with banks to facilitate voluntary referrals to APS when financial abuse is suspected
- (2) Collaborative development of strategies for providing information on elder abuse detection to medical professionals
- (3) Work with Interfaith Coalition and other interested groups to train clergy and religious professionals on detection and reporting of suspected elder abuse
- (4) Public awareness campaign in May

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c), please so indicate.*

Resources (money, staff), prioritizing

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- (1) Commitment to the task
- (2) Qualified, knowledgeable people
- (3) Willingness to collaborate, to find commonalities

## West Virginia

Point of Contact: Allen Pyles

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- West Virginia has an active Triad and has had several “Reverse Boiler Rooms” involving AARP, police, seniors and service providers
- West Virginia has an interagency committee of APS, facility surveyors, ombudsman, advocates, mental health, Medicaid Fraud discuss quarterly facility problems.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Interagency meeting recognizes potential problems and solutions, recommends corrections, promotes communication, and at times assists in setting up local multidisciplinary teams from respective agencies

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Lack of staff to carry programs in a timely manner do to various size of the agencies.
- Problem is to get police agencies and PA’s to recognize they have a role in APS. Discussions have occurred with various education committees and they are considering addition of APS issues to annual training.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

All team members have same responsibility but to carry them out within agency framework.

## Wyoming

Point of Contact: Nancy Vehr

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, and (c) institutional abuse and neglect.*

- At Risk Adult Group starting – will hold meeting in November to finalize “where to go”
- Senior Patrol Program – Health Care Financing Administration’s “Restore Trust” Program to help identify medicare fraud (aging and nonprofit organizations and health care industry and legal); grant received 3 weeks ago
- MFCU referrals to AG Consumer Protection
- Department of Family Services partners with law enforcement in state
  - joint investigations/share information
  - early involvement to identify criminal matters
- VOCA funding for community projects to do education to elder community on abuse, fraud with intention of pilot program to take what they learn and apply to other programs
- Elder and Disabled Adult Working Group which includes state agencies of Health, Department of Family Services, AG, Ombudsman, Aging, Developmentally Disabled

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Expansion of shareholders
- White paper presentation to other groups to share what we’ve learned and bring in other stakeholders
- Get on each other agendas so can attend each others trainings and workshops
- Explore funding sources for programs
- Take large committees and spin off specific focus groups; ex: financial exploitation

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

All the above, especially geography, funding, turf, population and lack of manpower

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

Heightened awareness and desire and willingness to change the system

## **Yakama Nation**

Point of Contact: Anna Ward

*Briefly describe any ongoing collaborative efforts in your state or tribe between public safety and social services professionals related to: (a) financial exploitation and consumer fraud, (b) abuse and neglect at home, (c) institutional abuse and neglect.*

- Police are willing to work with elders on reporting abuse, thefts, mismanagement of assets by family or caretakers, as victims of crime. Also, willing to educate elders on safety in their homes and vehicles.
- Indian Health Services (IHS) willing to document and ask if domestic violence occurs in home.
- Yakama Nation has a domestic violence family program and domestic violence team.
- Tribal courts can provide hearings for protection orders, guardianships, restraining orders and other legal issues over which the courts have jurisdiction.
- The willingness of Yakama Nation programs, APS, AARP, People for People, and other agencies in ongoing discussions to work towards the education, development of ways to protect elders.

*Briefly describe the ideas or strategies you have developed in the state and tribal team meetings about what you want to do to enhance such collaboration after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- The redevelopment of a comprehensive Elder Abuse Code with criminal and civil penalties
- Establishment of mandatory reporting of elder abuse by medical providers, caretakers, institutions
- Educating Elders to protect themselves from abuse and on recognition of abuse
- Establish a review board on elder abuse
- Continued education of service providers (i.e. courts, prosecutor, police, advocates, social services)
- Utilize courts, newspapers, Area Agency on Aging, IHS to provide an educational forum to educate with articles, newsletters and brochures on where to get help and how to get help, what their rights are and recognition of when they need help
- To develop an Elder Outreach Program
- Have an opportunity for an Native American Elder Abuse Conference

*Briefly describe the biggest challenge (e.g., lack of funding, turf, population, geography) your state or tribal team will face in implementing these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Jurisdiction of the Yakama Nation related to protection of elders from various abuses by non-Indians

- Lack of access to telephones by elders in remote areas, due to impoverished circumstances
- Lack of willingness to report abuse by victims (fear)
- Lack of money and human resources allocated to programs.
- The need for a complete, comprehensive code to be passed by Tribal Council and to be presented to the General Council.
- The need to educate Elders of their rights, the need to have a will, trust, power of attorney, living will to protect trust and deeded lands and financial assets and designate an executor/administrator/guardian in the event of incapacity to see to their wishes.

*Briefly describe the biggest asset (e.g., strong leadership, willingness to collaborate) your state or tribal team has to implement these ideas or strategies after this symposium. If your idea or strategy only relates to (a), (b), or (c) (see above), please so indicate.*

- Strong Elder's group to advise of their concerns and to advocate for rights
- Police Department willing to work and be involved with the revision and enforcement of Elder Abuse Code
- Tribal Council support in the revision of Elder Abuse Code and willingness to work on the codification of a diverse code to protect the Yakama Elders and their families
- Tribal courts are willing to exercise jurisdiction on behalf of the elderly for the protection of their rights, dignity, and protection of their interests
- Area Agency on Aging Program that is established and provides services to elders in the community

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# Appendix 5



***Our Aging Population:  
Promoting Empowerment, Preventing Victimization, and  
Implementing Coordinated Interventions***

**Tribal Caucus Recommendations  
October 30, 2000  
Washington, D.C.**

Interagency Collaboration

The DOJ should initiate a series of discussions between FBI, Bureau of Indian Affairs, and state and local law enforcement agencies operating in Indian Country. Topics should include issues related to domestic violence and elder abuse.

Training

The DOJ should facilitate domestic violence and elder abuse training for Indian Country law enforcement, judicial personnel, social services, and health care providers. Training should include recognition of financial fraud and abuse.

Tribal Abuse Codes

The DOJ should provide funding and technical assistance to develop and refine tribal elder abuse codes.

Confidential Testimony

The DOJ should fund demonstration projects to provide confidentiality for elders who are required to testify in court. Local and state law enforcement agencies may provide resources and opportunities.

Traditional Mediation

The DOJ should fund demonstration projects to examine the effectiveness of traditional mediation techniques to resolve domestic violence/elder abuse cases.

Elder Abuse Training

The DOJ should establish an initiative with the Indian Health Service, tribal, and urban Indian health providers to fund and facilitate training regarding:

- ! Adult Protective Services;
- ! forensic recognition of abuse;
- ! geriatric medicine;
- ! increased availability of occupational and physical therapy.

National Elder Abuse Summit

The DOJ should sponsor a national summit on Indian family violence and elder abuse, providing opportunities for collaboration and sharing of “best case” initiatives. Invitees should include Indian Country law enforcement, judicial, social services, and health personnel.

Interagency Agreement

The DOJ should join and contribute funding to the recently-established Interagency Agreement (IA) between the Health Care Financing Administration (HCFA), the Social Security Administration (SSA), and the Indian Health Service (IHS). The IA, established to provide Indian elder-specific outreach re: federal benefits and disease education, should be expanded to include abuse education for Indian elders.

Data Collection

The DOJ should develop new databases re: Indian elder abuse. Existing data should play a role in DOJ’s development of programs and allocation of funding.