

ADULT AT RISK

Any adult

ELDER ADULT AT RISK

Age 60+ vulnerability of age

ELDER ABUSE

(WI state Statutes)

1. Abuse
2. Financial exploitation
3. Neglect
4. Self-neglect



ABUSE

- Willful infliction of physical pain or injury
- Unreasonable confinement or restraint
- Emotional abuse
- Sexual abuse
- Treatment without consent
- Domestic violence can also be included as part of abuse

FINANCIAL EXPLOITATION:

Misuse of an elder's money
or property



NEGLECT:

Caregiver failure to provide adequate...

- Food
- Clothing
- Shelter
- Medical or dental care

...resulting in significant danger to the physical or mental health of an older person in his/her care.

SELF-NEGLECT:

An elder person is unable or fails to provide him/herself with adequate...

- Food
- Clothing
- Shelter
- Medical or dental care

...resulting in significant danger to the physical or mental health of the elder

SECTION
1

ELDER ABUSE OVERVIEW

GROUP DISCUSSION



DISCUSS:

- Have you ever experienced any of these situations in your professional work?
- Share some thoughts

SECTION
2

RECOGNIZING VICTIMS: Physical/behavioral signs and symptoms



There is no TYPICAL elder abuse VICTIM.



PHYSICAL/ENVIRONMENTAL SIGNS:

- Injuries
- Frequent use of the emergency room and/or hospital
- Changing health care providers frequently
- Evidence of medication mismanagement
- Lack of necessary equipment
- Lack of necessities such as heat, food, water

PHYSICAL/ENVIRONMENTAL SIGNS:

- Unsafe conditions in the home
- Poor skin hygiene
- Soiled clothing or bed
- Bruises, welts, discolorations, cuts, lacerations, puncture wounds, burns
- Dehydration and/or malnourishment
- Loss of weight without illness related cause

BEHAVIORAL CUES:

Certain behaviors may be clues to abuse or neglect.

Ask questions and look beyond the obvious.

BEHAVIORAL CLUES:

- Anxiety
- Withdrawal
- Confusion or disorientation
- Ambivalence
- Fear
- Depression
- Anger
- Isolation
- Resignation
- Hesitation to speak openly
- Non-responsiveness
- Contradictory statements

WATCH FOR:

- As you watch the video, look for cues that led people to suspect Martin was in trouble



[Click to play movie](#)

GROUP DISCUSSION:

- What were some of the cues that led people to suspect Martin was in trouble?
- Have you ever had an experience with an elder who showed any of the physical/behavioral signs you just learned?
- What do you think might have been the cause?
- How did it make you feel?
- What did you do?

FINANCIAL EXPLOITATION:

- Financial exploitation is very common
- Elders may fear harm or abandonment
- They may be legally competent to make decisions regarding finances and property
- Intervention can be difficult

FINANCIAL EXPLOITATION CAN INCLUDE:

- Theft or sale of personal property
- Occupation of elders' home
- Other exploitative acts involving funds or material goods

WATCH FOR:

- How did Bert get into this situation?

FINANCIAL EXPLOITATION:

- Bank accounts
- Power of attorney
- Wills
- Checks and legal documents
- Personal belongings
- Property deeds/bank
- Forgery



FINANCIAL EXPLOITATION CLUES:

- Use of ATM machines by others
- Checks bouncing
- Checks being written for "cash"
- Past due accounts
- Sudden increases in debt
- Bank statements/canceled checks no longer sent to elder's home
- Recent change in the title of a house

You can call the Aging Resource Center to discuss issues with a specialist without making a full report.

DISCUSS:

- How might an older person who is competent to make decisions be materially or financially exploited?
- Have you ever had any experiences that might lead you to think an elder is being exploited in this way?
- Share some thoughts

There is no TYPICAL ABUSER.



- Fear as a tool
- Family members as abusers
- Family relationships may be used as a “cover”
- Cycle of family violence
- Most abusers are close family members or people the victim trusts

WATCH FOR:

- Harvey's dilemma.
- What factors contributed to Harvey's family's belief that everything was OK?



[Click to start movie](#)

POWER AND CONTROL

- Limits communication
- Absence of assistance
- Indifference or anger
- Blame
- Aggression
- History of abuse
- Social isolation
- Withholding security and affection
- Problems with alcohol or drugs
- Flirtation, coyness, touchiness
- Reports by others
- Noncompliance with care plans

DISCUSS:

- How can family dynamics contribute to abuse and exploitation of elders?
- How can family dynamics interfere with recognizing abuse?

If someone is in IMMEDIATE LIFE-THREATENING DANGER, Call 9-1-1 immediately.

DISCUSS
YOUR
AGENCY
PROTOCOLS

Limited Reporting Rules in Wisconsin
Required as part of professional duties

- Doctors
- Nurses
- Psychologists
- Social workers
- Therapists
- Employees of state-licensed or regulated facilities

Limited Reporting Rules in Wisconsin

If the elder is being seen in the course of a person's professional duties...

- AND: the elder at risk has requested the person to make a report
- OR: there is reasonable cause to believe the elder adult is at imminent risk AND is unable to make an informed judgment about reporting
- OR other adults at risk are also at imminent risk

Limited Reporting Rules in Wisconsin

- NO report is required if the professional believes that it would not be in the best interest of the elder and can document these reasons in file.

SECTION
5

RESPONDING - What to do?



The Aging Resource Center of Milwaukee County is the lead Elder Abuse Agency for Milwaukee County

Trained staff investigate alleged abuse, of adults age 60 and over, residing in Milwaukee County.

Call: (414) 289-6874
Toll Free: 1-866-229-9695
E-mail: agingwebinfo@milwaukee.com

You may choose to remain anonymous; people cannot be held criminally or civilly liable for reporting in good faith

SECTION
5

RESPONDING - What to do?



CALLS TO THE AGING RESOURCE CENTER:

Callers are asked to provide as much information about the situation as possible.

- Anything about the elder
- Nature of the situation?
- How did you become aware of the situation?
- Is there an emergency contact that you know of?
- Do you think the elder will be receptive to help?
- Are there concerns about the condition of the home?

DISCUSS:

• In view of the previously discussed agency protocols for elder abuse reporting...How will you comply?

- An elder abuse investigation is INTERVENTION NOT a prosecution
- A closed investigation is not necessarily a resolution
- In some cases multiple reports over time are necessary

COMPETENCY ISSUES and CLOSED CASES

COMPETENT elders may refuse services and the case will be closed

A closed investigation is not necessarily a resolution. Each time a **NEW** report is made an investigation will take place.

INCOMPETENT elders needs are assessed and services are recommended. The investigation process concludes when appropriate services are in place.

WATCH FOR:

- Difficulties of Lula's situation
- Importance of a medical diagnosis
- Need for multiple reports over time



Click to start movie

SECTION
6

INVESTIGATIONS/INTERVENTIONS

VIDEO: Lula



DISCUSS

- Why might it seem like nothing is being done to help an elder who is competent?
- Why is it important to continue to report a situation like Lula's?

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SECTION
7

REPORTING: What happens next?

Report/Triage



**WHEN A CALL IS RECEIVED AT
THE CALL CENTER:**

- Caller discusses the situation with a trained specialist
- Information is entered into a computerized intake file
- Within 24 hours, the case is transferred for triage
- Reviewed by the elder abuse unit supervisor
- Case worker specialists assigned to conduct investigations.

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SECTION
7

REPORTING: What happens next?

Investigation



Evaluation of the situation as reported by the caller.

Assess need for interventions or services to ensure safety.

SECTION
7

REPORTING: What happens next?

Timeline

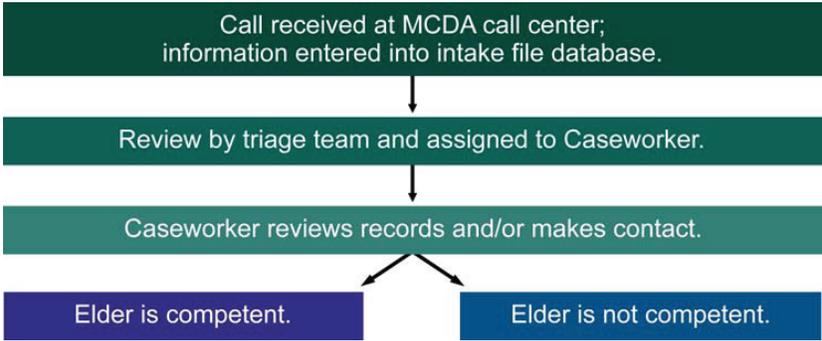


- Investigations must occur within 24 hours.
- Investigation begins when the Department on Aging receives the call. *(At that time critical decisions are already being made by trained personnel.)*

SECTION 7

REPORTING: What happens next?

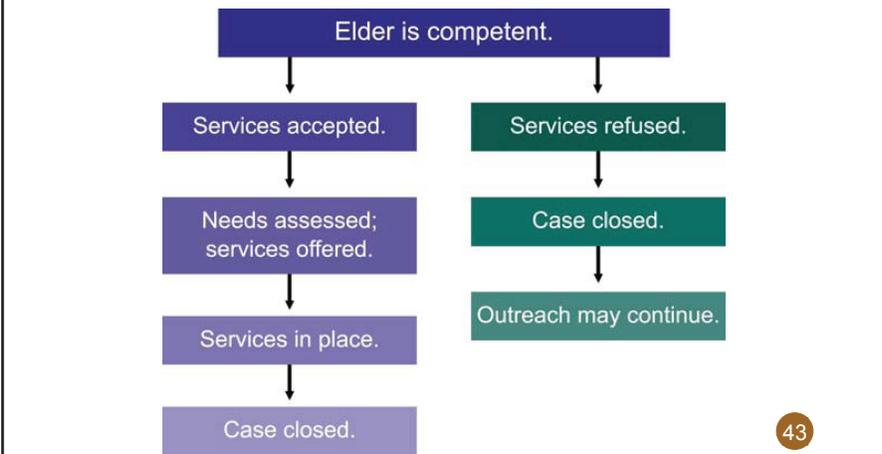
Timeline



SECTION 7

REPORTING: What happens next?

Timeline





CONFIDENTIALITY AND PRIVACY ISSUES:

Individuals

Individuals who make reports may not always be privy to information about investigation progress or results

Agencies

HIPAA regulations allow for the sharing of records among agencies involved in an investigation

Physicians

Physicians may receive follow-up information as it relates to service needs of the patient

SECTION
7

REPORTING: What happens next?

VIDEO: Responders



WATCH FOR:

- Review of signs/symptoms
- Aging Resource Center procedures
- Barriers to reporting
- Reasons to report

[Click to start movie](#)

SECTION
7

REPORTING: What happens next?

VIDEO: Responders



DISCUSS:

- Has this course changed the way you will react to suspected or real incidences of elder abuse? Share some thoughts.

SECTION
7

REPORTING: What happens next?

VIDEO: Responders



Thanks for participating in this training session.

**We hope we've provided you with the information
you need to help us identify and
STOP ELDER ABUSE.**