
TRAINING PURPOSE



Training Purpose

Purpose

Understand the prevalence, dynamics, and impact of adult abuse, neglect, and exploitation issues in Maine, and learn about the system of laws and services that exists to respond to the issues.

TRAINING OBJECTIVES



Training Objectives

1. Identify the prevalence and scope of abuse, neglect, or exploitation of dependent or incapacitated adults in Maine.
2. Discuss the dynamics and the impact on individual victims and families.
3. Describe the system of laws and services that exists to respond to the issues of adult abuse, neglect, and exploitation.

PERSONAL ASSESSMENT

Welcome to the Mandated Reporter Training for Suspected Child and Adult Abuse/Neglect. Please take a moment to reflect on your questions and thoughts about this training and answer the items below.

1. What is your most pressing concern that you want to learn more about today?
2. What is something you have always wondered about the Department of Health and Human Services but never got the chance to ask?
3. What has your experience working with the Department of Health and Human Services been like so far?
4. Have you ever made a report to the adult or child protective intake units? If yes, what was it like?
5. What kinds of information will be most helpful to you in your job?

INCIDENCE

- As many as _____ seniors are abused each year in the United States. (U.S. Senate Special Committee on Aging)
 - a) 5 million
 - b) 500 thousand
 - c) 2 million

- _____ of all elder abuse cases are never reported. (U.S. Senate Special Committee on Aging)
 - a) 70%
 - b) 66%
 - c) 84%

- Based on the above estimate, approximately _____ seniors are abused each year in Maine.
 - a) 5,000
 - b) 20,000
 - c) 12,000

- _____ adults were referred to Maine Adult Protective Services in 2003.
 - a) 725
 - b) 2,900
 - c) 1,050

- _____ of adults referred to Maine Adult Protective Services are over the age of 60.
 - a) 70%
 - b) 66%
 - c) 84%

- _____ of these are female.
 - a) 70%
 - b) 66%
 - c) 84%

THE EXTENT OF THE PROBLEM

- Older adults who are abused or mistreated are _____ more likely to die within the next decade than the same age adults who are not mistreated.
 - a) Three times
 - b) Ten times
 - c) Five times

- _____ of all elder abuse involves some sort of financial exploitation. This is of increasing concern because of our nation's household net worth is controlled by people over the age of fifty.
 - a) 70%
 - b) 85%
 - c) 40%

- _____ of Maine's referrals are for self neglect.
 - a) 82%
 - b) 46%
 - c) 12%

- _____ of adults under public guardianship and/or conservatorship in Maine are under the age of 60.
 - a) 53%
 - b) 28%
 - c) 37%

- _____ of adults under public guardianship and/or conservatorship in Maine are between the ages of 18-39.
 - a) 11%
 - b) 2%
 - c) 31%

ELDER ABUSE STATISTICS



Elder Abuse Statistics

- 13% abuse
- 55% self-neglect
- 20% caretaker neglect
- 12% financial exploitation

Elder abuse is under reported and under detected. The elderly are really bed-bound, and 95% of the time there are no witnesses to what goes on in the household

CONDITIONS THAT CONTRIBUTE TO THE PROBLEM



Conditions That Contribute to the Problem

- Social Isolation
- History of family violence.
- Mental state of the abuser (emotional, psychiatric, and substance abuse problems)
- Dependency of the abuser on the victim.

ADULT PROTECTIVE SERVICES ACT

A. Where do I find the law?

B. What is the purpose of the law?

C. Who is required to report? The law states:

D. When and where do I call to report suspected abuse?

E. Does it count if someone else calls for me?

F. What happens if I do report and it ends up not being abuse?

G. What happens if I don't report?

H. What if I work in a licensed MR facility?

REPORTABLE EVENTS FOR LICENSED MR FACILITIES

“Reportable Events” are events that happen to adults with mental retardation or autism that have or may have an adverse impact upon the safety, welfare, rights or dignity of adults with mental retardation or autism.

EVENTS THAT MUST BE REPORTED IMMEDIATELY INCLUDE:

Death
Abuse, Neglect, Exploitation
Serious illness or injury
Rights violations
Lost or missing person
Assaults
Suicide attempts or threats
Dangerous situations that pose an imminent risk of harm.

EVENTS TO BE REPORTED WITHIN ONE BUSINESS DAY INCLUDE:

Assaults which do not require medical attention (client to client or client to staff)
Medication errors/refusals
Failure to obtain consent to changes or failure to obtain consent to new medical orders
Non-emergency dangerous situations
Restraints
Mechanical devices and supports used without a doctor’s order or without supervision of a qualified professional
Self-injurious behavior not addressed and tracked in the person’s plan.

WHAT ELSE TO REPORT:

Emergency services
Licensing violations
Missing medications
Rights violations

Please call the regional offices of Mental Retardation Services with any questions.

169 Lancaster St.
Portland, Me 04101
1-800-269-5208
TDD (207)822-0272

141 State House Station
Augusta, Me 04333-0141
1-800-675-1828
TDD(207)287-4238

176 Hogan Rd.
Bangor, Me 04401
1-800-963-9491
TDD(207) 941-4751



Incapacitated Adult

Any adult who is impaired by reason of mental illness, mental deficiency, physical illness or disability to the extent that that individual lacks sufficient understanding or capacity to make or communicate responsible decisions concerning that individual's person, or to the extent the adult can not effectively manage or apply that individual's estate to necessary ends.

Title 17-A; Section 555



Dependent Adult

A dependent adult is one who has a physical or mental condition that substantially impairs the adult's ability to adequately provide for that adult's daily needs. This includes a resident of a nursing home or assisted living facility. It also includes a person considered a dependent person under Title 17-A;section 555.



Abuse

The infliction of injury, unreasonable confinement, intimidation or cruel punishment that causes or is likely to cause physical harm or pain or mental anguish; sexual abuse or sexual exploitation; or the intentional, knowing or reckless deprivation of essential needs.

Abuse includes acts and omissions.

(Title 22 3472)



Sexual Abuse or Exploitation

Contact or interaction of a sexual nature involving an incapacitated or dependent adult without that adult's consent. (Title 22 3472)

NEGLECT



Neglect

A threat to an adult's health or welfare by physical or mental injury or impairment; deprivation of essential needs or lack of protection from these. It also includes self-neglect.

(Title 22 3472)

EXPLOITATION



Exploitation

The illegal or improper use of an incapacitated or dependent adult or that adult's resources for another's profit or advantage. (Title 22 3472)

DEFINITION AND INDICATORS OF ABUSE

Abuse: The infliction of injury, unreasonable confinement, intimidation or cruel punishment that causes, or is likely to cause, physical harm or pain or mental anguish; sexual abuse or sexual exploitation; or the intentional, knowing, or reckless deprivation of essential needs. Abuse includes acts of omissions. (Title 22 3472)

Physical Indicators:

- Bruises from hitting, shoving, slapping, pinching, or kicking
- Bilateral injuries, or injuries on upper arms, face, neck or clustered on other body parts
- Burns caused by cigarettes or hot objects
- Friction from ropes, chains, or other physical restraints
- Fractures, sprains, lacerations and abrasions
- Injuries caused by biting, cutting, poking, punching, whipping or twisting of limbs
- Disorientation, stupor or other effects of deliberate overmedication
- Open wounds, cuts, punctures, and untreated injuries, and injuries in various stages of healing
- Person's report of being mistreated
- Abuses or kills pets

Behavioral Indicators

- Easily frightened or fearful
- Exhibiting denial
- Agitated or trembling
- Hesitant to talk openly
- Implausible stories
- Extreme upset when assisted with bathing or other physical care giving
- Depression or poor self-esteem
- Eating disturbances
- Sleep disorders
- Interactions between victim or abusers
- Inconsistencies in how they describe events or accounts for injuries
- Family does not interact with client
- Marital or family discord
- Caregiver lacks knowledge of adult's condition and needed care
- Doctor or hospital hopping
- A person's sudden change in behavior
- Compulsive behavior

DEFINITION AND INDICATORS OF NEGLECT

Neglect: A threat to an adult's health or welfare by physical or mental injury or impairment; deprivation of essential needs or lack of protection from these. It also includes self-neglect. (Title 22 3472)

Physical Indicators:

- Dehydration
- Neglected bed sores
- Untreated injuries or medical problems
- Poor hygiene
- Hunger, malnutrition
- Pallor, or sunken eyes or cheeks
- Lack of clean bedding or clothing
- Lack of glasses, hearing aid, dentures, prosthetic device
- Skin disorder or rashes
- Lack of prescribed medication
- Person's report of being mistreated.

Behavioral Indicators:

- Unresponsive or helpless
- Appears detached
- Exhibits hopelessness
- Expresses unrealistic expectations about his/her care

DEFINITIONS AND INDICATORS OF EXPLOITATION

Exploitation: The illegal or improper use of an incapacitated or dependent adult or that adult's resources for another's profit or advantage. (Title 22 3472)

Physical Indicators:

- Unusual volume or type of banking activity, or activity inconsistent with victim's ability.
- Nonpayment of bills
- Eviction
- Care of the person is not consistent with size of the estate
- Missing property or belongings
- Suspicious signatures on checks or other documents
- Caregiver has no means of support
- Signing blank checks
- Purchase of items that do not benefit the older person, i.e. boats, sports equipment, real estate
- Transfer of ownership of property to a "new friend" or relatives with little prior involvement in the elder person's life
- The person's report of financial exploitation.

Behavioral Indicators:

- Implausible explanations about his/her finances
- Unaware or doesn't understand financial arrangements
- Concerned or confused about missing funds from their account
- Abrupt changes in a will or other financial documents
- Change in spending habits.

DEFINITION AND INDICATORS OF SEXUAL ABUSE OR EXPLOITATION

Sexual Abuse or Exploitation: Contact or interaction of a sexual nature involving an incapacitated or dependent adult without that adult's consent. (Title 22 3472)

Physical Indicators:

- Bruises around the breasts or genital area
- Unexplained venereal disease or genital infection
- Unexplained vaginal or anal bleeding
- Torn, stained, or bloody underclothing
- Painful urination and/or defecation
- Difficulty walking or sitting
- A person's report of being sexually assaulted or raped.

Behavioral Indicators:

- Demonstrates inappropriate sex-role relationship
- Exhibits inappropriate, unusual, or aggressive sexual behavior
- Reveals extreme anxiety, including difficulty eating/sleeping, fearfulness, or compulsive behavior.
- Exhibits agitation or anger
- Feels confused
- Symptoms of emotional disorders

COMMON CHARACTERISTICS OF ABUSIVE CAREGIVERS

Common Characteristics of Abusive Caregivers

Substance abuse

Ongoing mental illness or emotional problems

Lack of caregiver experience

Reluctance of caregiver

History of abuse-more common in families with established patterns or histories of violent behavior.

Dependency-often the caregiver is dependent on the elder for financial support

Personality traits including:

- Exhibiting hypercritical and impatient behavior

- Displaying unsympathetic attitudes toward the needs of others

- Blaming the elderly person for caregiving problems

- Having an unrealistic view of caregiving and lack the understanding of what the adult needs

- Losing of self-control

- Feeling of losing their independence

- Very friendly and helpful people

Behavioral Indicators of Abusive Caregivers

Verbal berating, harassment, or intimidation

Threats of punishment or depriving of essential needs

Isolating a person from friends or other family members

Treating the individual like an infant

Leaving a person alone for long periods of time

Withholding affection to gain compliance

Unwillingness to comply with service providers in planning for care

Obvious absence of assistance, attitude of indifference or anger toward the victim

Giving a person no privacy

Denying a person the right to make decisions

Demonstrates inappropriate sex-role relationship

Inconsistent or implausible explanation of injuries

Handles the person roughly or in a manner that is threatening, manipulative, sexually suggestive or insulting

Excessive concern about cost of caring for the older person or reluctant about spending money or paying bills.

SUSPICIOUS EXPLANATIONS

“The injury was an accident.”

“The victim fell.”

“There was no abuse...she bruises easily.”

“It was a gift.”

“She owed me the money.”

“He gave me permission to have, use, borrow it.”

“I was going to give it back.”

“She refuses to eat anything.”

“He refuses services”

“Entitlement”



Information Required at Intake

Reports must be made immediately by telephone to the department and must be followed by a written report within 48 hours if requested by the department.

The reports must contain:

- A. The name and address of the adult
- B. Information regarding the nature and extent of the abuse, neglect or exploitation
- C. The source of the report
- D. The person making the report, that person's occupation and where that person can be contacted
- E. Any other information that the reporter believes may be helpful

OTHER HELPFUL INFORMATION



Other Helpful Information

If you know any of the following details, it may be helpful to the investigation

- A. Are there other people/ agencies providing assistance?
- B. Who might be helpful to the adult within the community?
- C. How might the adult react to intervention?
- D. Safety concerns including information about weapons in the home?
- E. Directions to the home
- F. Dates of birth and social security number
- G. Are there any relatives?
- H. Any information about an alleged abuser/ perpetrator.

CONTACT INFORMATION FOR REPORTING TO ADULT PROTECTIVE SERVICES

1. To report suspected abuse, neglect, or exploitation of an adult, 24 hours a day, call APS Intake at 1-800-624-8404.

2. To report using a TTY call: 1-800-624-8404 during business hours, or 1-800-963-9490 after business hours.

3. For Mental Retardation Services call:

169 Lancaster St.
Portland, Me 04101
822-0172
1-800-269-5208
TDD (207)822-0272
FAX (207) 822-0295

141 State House Station
Augusta, Me 04333-0141
287-8118
1-800-675-1828
TDD(207)287-4238
FAX(207)287-4052

176 Hogan Rd.
Bangor, Me 04401
941-4360
1-800-963-9491
TDD(207) 941-4751
FAX(207)941-4360



The Role of Adult Protective

Adult Protective Services:

1. Investigates the concerns of abuse, neglect or exploitation
2. Arranges services to help make adults safe
3. Seeks guardianship and/ or conservatorship for those adults who are unable to make decisions for themselves and have no suitable and available family/friends to help them out.



Definition: Guardian

Guardian: An individual, organization or State agency appointed by the Probate Court to make decisions on behalf of a person that the Probate Court has found to be incapacitated. The person under guardianship is called the “ward.”



Definition: Conservator

Conservator: An individual, corporation, or State agency, appointed by the Probate Court to protect and manage the money and property of a person that the Probate Court has found to be incapacitated. The person under conservatorship is called a “protected person.”

APS PRACTICE GUIDELINES

Practice is client-focused, individualized, and based on a social work model of problem solving.

The client is presumed to be mentally competent and in control of decision making.

The client actively participates in defining the problem and deciding the most appropriate course of action to resolve it.

The client exercised freedom of choice and the right to refuse services as long as the individual has the capacity to understand the consequences of his or her actions.

The service alternatives that are pursued are the least restrictive possible; more intrusive remedies, such as guardianship or placement, are undertaken as a last resort.

When guardianship or conservatorship is sought, the client has a right to an attorney to represent them in court. Only a probate court can determine that an adult is mentally incapacitated and in need of a guardian or conservator.

The Department is responsible to demonstrate that all other means of protection and support have been tried, including a private guardianship and/or conservatorship appointment, before seeking public guardianship and/or conservatorship. The Department is the guardian and/or conservator of last resort.

Public guardianship and/or conservatorship authority does not give the Department the ability to change or manage an adult's behavior. The Department is responsible to develop and implement a plan to make the person safe. If the client chooses not to participate in the plan, guardianship may be ineffective.

Probate Court determines if a guardianship is “necessary or desirable as a means of providing continuing care and supervision of the adult”.