



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

EDUCATIONAL ALERT

TO: DDA Licensed Service Providers
All Concerned

FROM: Renata J. Henry, Deputy Secretary for Behavioral Health and Disabilities
Nancy Grimm, Director, Office of Health Care Quality

RJH

NBG

DATE: June 15, 2011

RE: Abuse Prevention

Over the past couple of weeks, the DDA and OHCQ have been made aware of three¹ substantiated cases of sexual abuse of people with developmental disabilities. Regulations² and statutes³ currently require agencies to ensure people supported are free from abuse and neglect. The purpose of this memo is to remind providers of this obligation. To ensure this fundamental right, agencies must train staff to be able to identify and understand the factors creating the potential for abuse. Providers are encouraged to review their policies and procedures and consider:

- Does your agency provide training to staff regarding the definition of abuse?
- Do staff know how to identify abuse?
- If a staff member witnesses or suspects abuse, does he/she know who to call and how to immediately contact an agency administrator to report the abuse?
- If a person receiving services from your agency is being abused, does he/she know who to contact?
- Does your agency provide training to people with disabilities regarding how to say no to unwanted sexual advances by others?
- Do your agency's practices make it easy for people in services to reach out to the administration and report abuse?
- Do your agency's routine quality assurance activities include personal contact with the people being served?

June 15th is World Elder Abuse Awareness Day. Please take the time to conduct a self-assessment and consider how your agency can protect people in services from abuse.

¹ The three incidents occurred in Cambridge, Leonardtown and Baltimore County.

² COMAR 10.22.02.10 A licensee shall develop and adopt written policies and procedures for ensuring:

(2) Fundamental rights in accordance with Health-General Article, §7-1002, Annotated Code of Maryland;

³ §7-1002. (b) It is the policy of this State that, in addition to any other rights, each individual who receives any services provided by the Administration or by a licensee has the following basic rights:...(3)The right to be free from mental and physical abuse;... (d) Each licensee shall:... (4) Provide appropriate staff training to carry out the policy.

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DDA offers free training on a variety of topics. Information about upcoming training sessions and registration forms may be obtained by visiting the DDA web site at <http://ddamaryland.org/Training/output/webcal.html>. In addition, please review the three attachments to learn more about elder/vulnerable abuse prevention.

Thank you for your attention to this important issue. If you have questions, please contact Amy Daugherty, Statewide Quality Assurance Chief of DDA, at 410-767-5586, or Jennifer Baker, DD Program Manager of OHCQ at 410-402-8100.

Enclosures: Elder/Vulnerable Adult Abuse Prevention Public Awareness Fact Sheet
Why Should I Care About Elder Abuse
Abuse and Neglect of the Elderly-Prevention Strategies
World Elder Abuse Awareness Day announcement



ELDER/VULNERABLE ADULT ABUSE PREVENTION PUBLIC AWARENESS FACT SHEET



- Each year in the United States, 1 to 2 million reports of elderly and vulnerable adult abuse are made; however, the real number of victims is even higher because most cases are not reported.
- It is estimated that only 1 in 14 cases of elderly and vulnerable adult abuse is reported.
- The Maryland Attorney General's Office, Medicaid Fraud Control Unit, investigates and prosecutes incidents of abuse and neglect of vulnerable persons residing in facilities which receive Medicaid funds and in Assisted Living Facilities. **Every year, the Medicaid Fraud Control Unit receives between 400 and 500 referrals regarding abuse and neglect of vulnerable persons.** Each referral is reviewed and either investigated for criminal prosecution or referred to the appropriate regulatory agency. The Medicaid Fraud Control Unit also provides education and outreach to providers on how to prevent abuse and neglect as well as what to do if abuse or neglect occurs at a facility. For more information on protecting seniors from abuse and neglect, contact the Medicaid Fraud Control Unit at 410-576-6521 or at MedicaidFraud@oag.state.md.us.
- The Maryland Department of Aging, Long Term Care Ombudsman Program, receives, investigates, and resolves complaints made by or on behalf of long-term care residents. **Of the 2,797 complaints investigated by the Ombudsman Program in 2010, 192 of the investigated reports were alleged resident abuse cases.** For more information about programs and services for seniors, call the Maryland Department of Aging at 410-767-1100, toll-free 1-800-243-3425, or on the web at www.aging.maryland.gov.
- The Maryland Department of Health and Mental Hygiene, Office of Health Care Quality, receives allegations of abuse regarding residents/patients in all licensed and/or federally certified facilities. **In 2010, the Office of Health Care Quality received approximately 946 reports of alleged vulnerable adult abuse.** For more information about Office of Health Care Quality programs please call 410-402-8110, toll-free 1-877-402-8218, or on the web at www.dhmfh.maryland.gov/ohcq.
- The Maryland Department of Human Resources, Office of Adult Services, Adult Protective Services Program, investigates allegations of adult abuse, neglect, self-neglect, or exploitation of an elderly or disabled vulnerable adult in a community-based setting. **In FY 2010, the Adult Protective Services Program received approximately 6,005 reports of abuse, neglect, self-neglect and exploitation of vulnerable adults aged 18 years of age and older. Of these cases, 2,276 involved continuing Adult Protective Services case management services to monitor on-going risk factors.** For more information about adult abuse, neglect or exploitation contact the Maryland Department of Human Resources at 410-767-7000, toll-free 1-800-917-7383, or on the web at www.dhr.maryland.gov.
- The Maryland Department of Human Resources, Office of Grants Management, provides community-based services to victims of domestic violence. **In 2010, the Office of Grants Management served 414 victims of domestic violence who were 60 years of age or older.** For more information about services available to victims of domestic violence contact the Maryland Department of Human Resources at 410-767-7000, toll-free 1-800-917-7383, or on the web at www.dhr.maryland.gov.
- The Maryland Network Against Domestic Violence (MNADV) is a coalition of domestic violence programs, law enforcement agencies, and concerned citizens. **The MNADV reported that in 2010, 8 (21%) of the 38 persons killed in domestic violence incidents were 51 years of age or older.** For more information on the coalition's mission and services contact MNADV at 301-352-4574, toll free 1-800-MD-HELPS, or on the web at <http://mnadv.org>.

Why Should I Care About Elder Abuse?

Elder abuse is an under recognized problem with devastating and even life threatening consequences.

Every day, headlines throughout the U.S. paint a grim picture of seniors who have been abused, neglected, and exploited, often by people they trust the most. Abusers may be spouses, family members, personal acquaintances, or professionals in positions of trust; or opportunistic strangers who prey on the vulnerable.

How big is the problem? No one knows for certain because relatively few cases are identified. Research indicates that more than *one in ten* elder may experience some type of abuse, but only *one in five* cases or fewer are reported. This means that very few seniors who have been abused get the help they need.

One thing is for certain: elder abuse can happen to *any* older individual – your neighbor, your loved one - it can even happen to *you*.

What is Elder Abuse?

In general, elder abuse refers to intentional or neglectful acts by a caregiver or “trusted” individual that lead to, or may lead to, harm of a vulnerable elder. **Physical abuse; neglect; emotional or psychological abuse; verbal abuse and threats; financial abuse and exploitation; sexual abuse; and abandonment** are considered forms of elder abuse. In many states, **self-neglect** is also considered mistreatment.

Who is at Risk?

Elder abuse can occur *anywhere* – in the home, in nursing homes, or other institutions. It affects seniors across all socio-economic groups, cultures, and races. Based on available information, women and “older” elders are more likely to be victimized. Dementia is a significant risk factor. Mental health and substance abuse issues - of both abusers and victims - are risk factors. Isolation can also contribute to risk.

What Should I Do if I Suspect Elder Abuse?

Report Your Concerns.

Remember: Most cases of elder abuse go undetected. Don't assume that someone has already reported a suspicious situation.

To report suspected abuse in the community, contact your local adult protective services agency. For state reporting numbers, visit the NCEA website at www.ncea.aoa.gov or call the *Eldercare Locator* at 1-800-677-1116.

If you or someone you know is in a life threatening situation or immediate danger, contact 911 or the local police or sheriff.

To report suspected abuse in a nursing home or long-term care facility, contact your state specific agency. To find the listing, visit the Long-Term Care Ombudsman website:
<http://www.ltcombudsman.org/ombudsman>

Types of Elder Abuse

Physical abuse - Use of force to threaten or physically injure a vulnerable elder

Emotional abuse - Verbal attacks, threats, rejection, isolation, or belittling acts that cause or could cause mental anguish, pain, or distress to a senior

Sexual abuse - Sexual contact that is forced, tricked, threatened, or otherwise coerced upon a vulnerable elder, including anyone who is unable to grant consent

Exploitation - Theft, fraud, misuse or neglect of authority, and use of undue influence as a lever to gain control over an older person's money or property

Neglect - A caregiver's failure or refusal to provide for a vulnerable elder's safety, physical, or emotional needs

Abandonment - Desertion of a frail or vulnerable elder by anyone with a duty of care

Self-neglect - An inability to understand the consequences of one's own actions or inaction, which leads to, or may lead to, harm or endangerment

Remember: You do not need to prove that abuse is occurring; it is up to the professionals to investigate the suspicions.

Warning Signs

- **Physical Abuse** - Slap marks, unexplained bruises, most pressure marks, and certain types of burns or blisters, such as cigarette burns
- **Neglect** - Pressure ulcers, filth, lack of medical care, malnutrition or dehydration
- **Emotional Abuse** - Withdrawal from normal activities, unexplained changes in alertness, or other unusual behavioral changes
- **Sexual Abuse** - Bruises around the breasts or genital area and unexplained sexually transmitted diseases
- **Financial Abuse/Exploitation** - Sudden change in finances and accounts, altered wills and trusts, unusual bank withdrawals, checks written as “loans” or “gifts,” and loss of property

What Can I Do to Prevent Elder Abuse?

- *Report suspected mistreatment* to your local adult protective services agency or law enforcement. Although a situation may have already been investigated, if you believe circumstances are getting worse, continue to speak out.
- *Keep in contact* – Talk with your older friends, neighbors, and relatives. Maintaining communication will help decrease isolation, a risk factor for mistreatment. It will also give them a chance to talk about any problems they may be experiencing.
- *Be aware of the possibility of abuse* – Look around and take note of what may be happening with your older neighbors and acquaintances. Do they seem lately to be withdrawn, nervous, fearful, sad, or anxious, especially around certain people, when they have not seemed so in the past?
- *Contact your local Area Agency on Aging* office to identify local programs and sources of support, such as *Meals on Wheels*. These programs help elders to maintain health, well-being, and independence – a good defense against abuse.
- *Volunteer* – There are many local opportunities to become involved in programs that provide assistance and support for seniors.
- *World Elder Abuse Awareness Day* - Elder abuse is a global issue. Contact your local aging services organizations to find out how your community will observe World Day. Help to raise awareness by talking about the issue.
- *Learn more about the issue* - Visit the *National Center on Elder Abuse* website at www.ncea.aoa.gov.

This fact sheet was produced by the National Center on Elder Abuse (NCEA). Portions were adapted from the NCEA publication: *15 Questions & Answers About Elder Abuse* (July 2005). NCEA activities are supported in part by grants from the Administration on Aging, U.S. Department of Health and Human Services [National Adult Protective Services Foundation (90-AM-3144); National Committee for the Prevention of Elder Abuse (90-AM-3145); the University of Delaware (90-AM-3146)]. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official Administration on Aging policy.

The NCEA
is a national resource center
that provides technical support and
information to professionals and advocates
working on behalf of older individuals.
It also provides information
and referral to the public.

The NCEA is not an investigation, nor a
reporting, agency, and cannot intervene in
cases of suspected elder mistreatment.

For More Information:

NCEA

www.ncea.aoa.gov

Eldercare Locator

1-800-677-1116

www.eldercare.gov

National Long Term Care Ombudsman Resource Center

<http://www.ltombudsman.org/>

Contact Us:

National Center on Elder Abuse/NCEA
c/o University of Delaware
Center for Community Research and Service
297 Graham Hall
Newark, DE 19716
www.ncea.aoa.gov
ncea-info@aoa.hhs.gov



**Together, we have the
power to prevent
elder abuse.**

TYPES OF ABUSE

PHYSICAL ABUSE: any act that causes pain or injury or places a person in fear of imminent serious bodily harm

PSYCHOLOGICAL ABUSE: willful infliction of mental or emotional anguish by threat, humiliation, intimidation, or other verbal or nonverbal abusive conduct

ACTIVE NEGLECT: intentional failure of a caregiver* to provide basic necessities such as food, medications, shelter, and other needed assistance

PASSIVE NEGLECT: unintentional failure of a caregiver* to fulfill caregiving responsibilities, usually due to a lack of knowledge or inexperience, characterized by situations in which the person is left alone, isolated or forgotten

SELF-NEGLECT: inability or refusal to provide for one's own essential needs including eating improperly, living in unsafe conditions and taking medications incorrectly

SEXUAL ABUSE: unethical or forced sexual relationship, frequently involving those who suffer from dementia or are nonverbal

FINANCIAL ABUSE: illegal or improper use of an older person's assets or resources

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**Caregiver may be paid or unpaid, a family member or someone hired to provide care to an elderly person.*

SIGNS AND SYMPTOMS

PHYSICAL ABUSE:

- Bruises or welts
- Burns from cigarettes, appliances, hot water
- Fractures, sprains
- Disorientation or stupor from over medication
- History of multiple hospitalizations due to injuries

PSYCHOLOGICAL ABUSE:

- Sudden changes in sleeping or eating habits
- Feelings of helplessness or hopelessness
- Fearfulness
- Isolation
- Agitation or anger
- Sudden change in feelings of self worth
- Attention and affection seeking behaviors
- Confusion
- Depression

NEGLECT:

- Untreated bedsores
- Untreated injuries or medical problems
- Poor hygiene
- Hunger, malnutrition, dehydration
- Absence of food, water, heat, prescribed medications
- Lack of clean bedding or clothing
- Unsanitary or unsafe living conditions
- Absence of dentures, eyeglasses, hearing aids, walkers, wheelchairs, and other needed items

SELF-NEGLECT:

The person usually lives alone with little or no support networks; same signs as described in NEGLECT, but may also include the following:

- Depression
- Decreased mental and physical activity
- Confusion
- Malnutrition
- Appearance of mental illness
- Wandering

SEXUAL ABUSE:

- Painful urination/defecation, or retention
- Difficulty walking or sitting
- Torn, stained or bloody underclothing
- Genital or anal infection, irritation, discharge, bleeding, bruising, pain

FINANCIAL ABUSE:

- Nonpayment of bills; eviction or utility turn off notices
- Changes to legal documents that the elderly person did not understand at the time of signing
- Missing assets or funds
- Suspicious signatures on checks
- Unusual banking activity (use of ATM by bedridden victim; withdrawals or transfers affecting bank accounts)
- The abuser's standard of living rises suddenly, without explanation

PREVENTION STRATEGIES FOR ELDERLY PERSONS:

- Stay sociable; keep in touch with family and friends; volunteer outside the home
- Ask friends to visit your home
- Have your own telephone in order to maintain independence
- Post and open your own mail
- Take care of yourself, keep regular medical, dental, hairdresser or barber appointments
- If difficulties arise, talk with a trusted friend or family member
- Use direct deposit for Social Security and pension checks
- Get legal advice about arrangements for possible future disability (durable power-of-attorney, conservatorship)
- Review your will periodically
- Give up control of your property or assets only when *YOU DECIDE* you can no longer manage them

PREVENTION STRATEGIES FOR FAMILIES:

- Maintain close ties with elderly relatives
- Discuss health care issues, decisions and alternatives with your loved ones
- Use community resources such as home delivered meals, adult medical day care, home care services (chores and bathing), and transportation
- Talk with the older person about your ability to provide long-term care, legal issues such as durable power-of-attorney, alternative sources of care (nursing homes, assisted living and home care)
- Share caregiving responsibilities for the sake of the older person, don't overextend yourself

RESOURCES

The Baltimore County Department of Aging provides opportunities for socialization, recreation, education and assistance to older persons through:

- senior centers
- nutrition programs
- transportation services
- health screenings and educational programs
- case management services
- advocacy services for residents of long-term care facilities
- legal services
- health insurance counseling
- housing information
- caregiving information and programs

The Baltimore County Department of Social Services provides services to individuals of all ages through:

- case management services
- investigation of suspected abuse of individuals living in community settings
- public assistance programs
- in-home aide services
- housing options

Nationally, it is estimated that more than 1.5 million older persons are abused each year. Most incidents of abuse are not reported.

Help is available. Reporting suspected abuse could save a life. Resources are available to help the older person and his or her family.

*Abuse hurts . . . the older person
family members
the community*

The Baltimore County Department of Health provides health care services to individuals of all ages by offering:

- case management services
- in-home nursing and social work assessments
- health education
- home health nursing care
- medication management
- community health care clinics
- mental health-substance abuse services
- medical assistance, personal care and transportation services

For more information about services for seniors and their family members, call **Senior Information and Assistance at (410) 887-2594** or use the e-mail aginginfo@baltimorecountymd.gov

For health related services for vulnerable adults, call the **Baltimore County Department of Health, Bureau of Long Term Care at (410) 887-2754.**

To report suspected abuse of individuals living in community settings, call the **Baltimore County Department of Social Services at 410-853-3000.**

For suspected abuse of nursing home residents, call the **Baltimore County Long-Term Care Ombudsman Program at 410-887-4200.**

Baltimore County Department of Aging programs are open to all citizens without regard to race, color, sex, handicap, religion, age or national origin.

Coalition Partners

Baltimore County Department of Aging
Baltimore County Department of Social Services
Baltimore County Fire Department
Baltimore County Health Department
Baltimore County Police Department
Baltimore County State's Attorney's Office
Baltimore County Public Library
Various Community Businesses
and Service Providers

Baltimore County Restoring Elder Safety Today is a coalition working to educate and empower the community to identify, treat and prevent elder abuse, neglect and exploitation in Baltimore County through the development of strategic alliances, advocacy and resource development.

Any community organization or business with interest in preventing elder abuse or joining the coalition can contact 410-887-4200.

Abuse and Neglect of the Elderly

PREVENTION STRATEGIES



World Elder Abuse Awareness Day ~ June 15, 2011 ~

“My World... Your World... Our World - Free of Elder Abuse”



Public Call-To-Action

Celebrate the 6th Annual

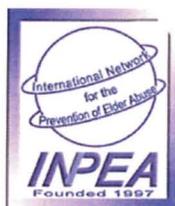
World Elder Abuse Awareness Day

Show the world you care about ending elder abuse and neglect by wearing something purple on June 15, 2011.



World Elder Abuse
Awareness Day 2011

If you do not take a stand, who will?



www.INPEA.net



www.aging.maryland.gov



www.dhr.maryland.gov