

Mandated Reporter Training

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Protective Services Program

- We investigate:

- Physical Abuse

- Emotional Abuse

- Sexual Abuse

- Neglect

- Financial Exploitation – Added in 1990

- Self Neglect – Added in 2004

- Adults 60+; community-based; ongoing relationship

Mass General Law

Chapter 19A §14-26

1982

Protective Services Overview

- Massachusetts General Laws (M.G.L.)
 - Chapter 19A, sections 14-26 (1982)
- 651 C.M.R. 5.00-5.20
- Applicable Program Instructions issued by the Executive Office of Elder Affairs

Program Philosophies

- Right to self-determination
 - Balances individual autonomy with mandate to protect
 - Exceptions: imminent danger to self/other
 - Need to complete an investigation/assessment within the first 30 days of a report
- Least restrictive, appropriate intervention
 - Elder involved to the greatest extent possible in decisions
 - Services provided with consent and least possible intrusion with goal of protecting elder from abuse

Program Mandates

- Consent for ongoing services
- Confidentiality
- Referral to the District Attorney's office for serious substantiated abused
 - Immediate referral for severe abuse and/or death due to abuse or neglect
- Legal Process
 - Protective Orders
 - Guardianship



DEFINITION OF ABUSE & FACTORS/SIGNS TO CONSIDER

Physical Abuse

- Intentional infliction of serious physical injury or threat to inflict serious injury and reasonable cause to believe the person has the intent and ability to carry out the threat

Factors/Signs

- Elder's physical condition
- Type, size, number and location of injuries
- Circumstances under which the injury occurred, including potential for serious injury
- Emotional impact
- Potential for escalation

Emotional Abuse

- Intentional act or omission -- verbal abuse, confinement, isolation, humiliation, intimidation, or other acts that
- Results in significant harm to emotional state, decisional or functional capacity of an elder or
- Creates risk of significant harm

Factors/Signs

- Name calling
- Ignoring the feelings
- Mental health or self-esteem declines or changes
- Fear or anxiety when around others
- Physiological changes
- Isolation

Sexual Abuse

- Sexual assault, rape, sexual misuse or sexual exploitation or threats of sexual abuse where the person has the intent and ability to carry out the threat.
 - Elder forced to engage in sexual activities they don't want to
 - Elder forced to watch pornography
- Harmful genital practices
 - Unneeded perineal care
 - Insertion of suppositories, etc. without a medical reason

Factors/Signs

- Frequent Urinary Tract Infections (UTIs)
- Injury to face, chest, abdomen, thighs or buttocks
- Evidence of unnecessary, intrusive and not medically prescribed treatments (Creams and ointments)
- Human bite marks or burn marks
- Evidence of being tied and/or restrained
- Presence of a sexually transmitted disease
- 'Acting out' or other dramatic changes in behavior away from the individual's norm
- Inappropriate, or sexualized, comments, behaviors and/or gestures

Care Taker Neglect

- Failure or refusal by a caretaker to provide one or more basic necessities essential for physical well-being, which has caused, or will immediately result in, serious physical injury to the elder.

Factors/Signs

- Malnourished or dehydrated
- Poor personal hygiene
- Inappropriate clothing
- Untreated injuries or medical conditions
- Mismanagement of medications
- Infestation- insects, rodents, or other pests
- Extreme clutter
- Inappropriate facilities
- Unsafe environment
- Lack of utilities
- Lack of appropriate services
- Financial mismanagement
- Lack of appropriate supervision

Self Neglect

- Failure, refusal, inability, or resistance by an elder to meet one or more basic necessities essential for physical or emotional well-being, which has resulted in, or has the immanent risk of, serious physical injury or emotional harm.
- Factors and signs the same as CGN

Financial scam

- Offered deal that is too good to be true
 - Send money to receive money
 - Cashier's checks
 - Requests to wire money or send cash
 - Usually request a hurried response
- Receiving unsolicited calls/requests for personal information
 - Requests for Social Security #, account numbers, PIN numbers, mother's maiden name

Financial Exploitation

- Intentional act or omission by another person, without the consent of the elder, which results in a substantial monetary or property loss to the elder or gain to the other person.
- May also result from consent obtained through misrepresentation, undue influence, coercion, or threat of force.

Factors/Signs

- Financial activity inconsistent with usual patterns
- Unusual changes in transaction patterns
- Withdrawals, trades, deposits
- Lack of knowledge regarding where the money is going
- Not receiving financial information
- Co-signers added
- Mailing address changes
- Request to change and/or release password
- Inappropriate influence by third party

Protective Services Parameters

Elder's Residence

- Private homes
- Homeless
- Elderly housing
- Congregate group homes
- Shelter
- Foster care
- Unlicensed boarding homes
- Licensed assisted living
- Hospital
- Licensed nursing home

Out of PS Jurisdiction

- DMH/DMR facility
- Staff group homes
- Prisons

Relationship Covered by PS

- Family/friends
- Others with ongoing relationships
- Guardian/conservator/POA
- Caretaker privately employed by elder
- Other facility residents with ongoing relationship

Relationship Not Covered by PS

- One time incident w/ no relationship to elder
- Resident to resident with no ongoing relationship
- Neglect by staff
- Patient to patient in a facility with no ongoing relationship

Who Should Report?

- Anyone may report
- Identity of reporter is kept confidential, except for DA referrals, court order
- Not liable for civil, criminal action or work demotion if report was made in good faith

Confidentiality of Information

- Protective Service case records are not public records {M.G.L. 19A (23)(a)}.
- Information collected as part of a case record can only be released in limited circumstances as outlined in Statute and Regulations.
- If a Protective Services record is released:
 - Identity of reporter redacted
 - Information that would lead back to reporter's identity is removed.

Where to file a report?

Mandated Reporters

- **M.G.L. 19A (15)(a):**
- Subject to fine versus not subject to fine for not reporting
- Must immediately file a verbal report
 - Contact the CIU – 1800-922-2275
 - Website – <https://fw1.harmonyis.net/MAAPS LiveIntake/>
- Must complete and submit a written report within 48 hours after a verbal report is completed
 - faxed to: 617-926-9783

Non-Mandated Reporters

- Should file as soon as possible
 - Filing process is to contact the CIU and or complete an online report.

What should be provided?

- Be as detailed as possible, including involved parties, injuries and examples
- Describe risk as much as possible
 - Names, addresses and age(s)
 - Extent of abuse, including examples
 - Caretakers if applicable
 - Medical treatment received or needed
 - Medications
 - Risk to elder and worker
 - Any other pertinent information

What happens after the report?



STEP 1: INTAKE

- A verbal report is made with information services and processed
- The report is reviewed by a PSS and a decision is made to **screen in** or **screen out**
- If the report is screened in, it is assigned to a Protective Service Worker
 - Initiate an emergency investigation within 5 hours
 - Initiate a rapid investigation within 24 hours
 - Initiate a routine investigation within 5 days

STEP 2: INVESTIGATION

- Completes unannounced home visit and discusses report/30 investigation
 - Elder provided a notice of assessment letter
 - No refusal accepted over the phone
- Gathers information from collaterals/alleged perpetrator
- Assesses risk
- Seeks appropriate legal actions
- PSW works collaborative with supervisor and other professionals
- Investigation must be completed within 30 days, unless an extension is granted
- If the allegations are not substantiated, case is not opened for services
 - Case record sponged within one year
- If the allegations are substantiated, case is opened
 - Case moves on to Intervention

STEP 3: INTERVENTION

- If the elder **has the capacity** to consent to services:
 - Protective Service worker presents variety of options for least restrictive, appropriate interventions
 - Elder may choose to accept or reject any or all of services offered by Protective services
 - Self determination
- If the Elder **lacks capacity** to consent:
 - Family member may agree to services to which elder does not object
 - Protective Order may be sought from Probate Court
 - Protective Services may petition court for an appointment of a conservator or a guardian
 - Open for up to 6 months with exception of Court cases

Reporting Clarifications

- Department Public Health versus Protective Services
- Disabled Persons Protection Commission (DPPC) versus Protective Services
- Expectations of changes once report is made
 - Elder resistant to changes
 - Limited community resources

Decisional Capacity

- Ability to understand and appreciate the nature and consequences of decisions, including
- Benefits and risks of and alternatives to any proposed protective services
- Ability to reach an informed decision while free from any apparent duress, intimidation, coercion, use of force, or threat of force by another

Actions for Group/IPA leaders:
share content with PCPs and other
physicians

Thank you.

Questions?