

At-Risk Adult Crime for 9-1-1 Personnel

Terminal Performance Objective

While answering emergency calls, 9-1-1 personnel will identify and respond appropriately to calls related to the possible abuse, neglect, or exploitation of an at-risk adult, in accordance with Georgia law and agency policy

Enabling Objectives

- Describe an at-risk adult
- Define abuse, neglect, and exploitation in accordance with Georgia law
- Describe types of abuse
- Explain the role of Social Services Agencies
- Describe tips for interviewing at-risk adult victims

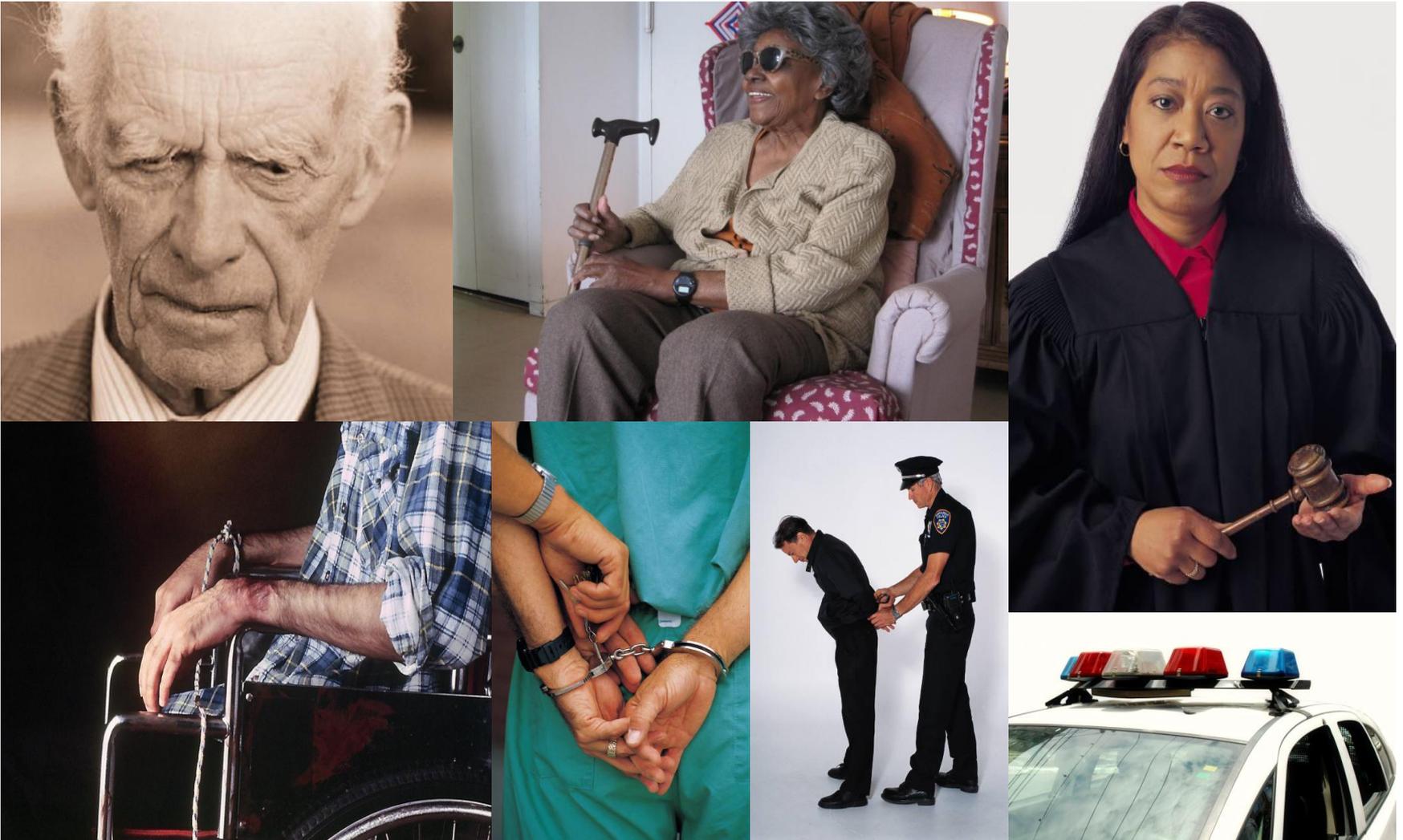
Why Addressing Abuse is Important

Adults over the age of 65 are the fastest growing portion of the population

Financial abuse costs older adults more than \$ 2.6 billion dollars per year nationally

Abuse threatens the economic security, lives, health and welfare of millions of older Americans and Americans with disabilities

At-Risk Adults/Georgia Law



What is an “At-Risk” Adult?

Disabled adult

A person 18 years of age or older who is mentally or physically incapacitated or has Alzheimer’s disease or dementia

Elder person

A person 65 years of age or older

O.C.G.A. 16-5-100

Exploit, Abuse, or Neglect

Any person who knowingly and willfully exploits a disabled adult, elder person, or resident, willfully inflicts physical pain, physical injury, sexual abuse, mental anguish, or unreasonable confinement upon a disabled adult, elder person, or resident, or willfully deprives of essential services a disabled adult, elder person, or resident shall be guilty of a felony

O.C.G.A. 16-5-102(a)

Physical Abuse



Physical Abuse (cont.)



Physical Abuse (cont.)



Neglect By Caregiver

A guardian or other person supervising the welfare of or having immediate charge, control, or custody of a disabled adult, elder person, or resident when the person willfully deprives a disabled adult, elder person, or resident of health care, shelter, or necessary sustenance to the extent that the health or well-being of such person is jeopardized

O.C.G.A. 16-5-101

Neglect By Caregiver (cont.)



Neglect By Caregiver (cont.)



Exploit

“Exploit” means illegally or improperly using a disabled adult or elder person or that person’s resources through undue influence, coercion, harassment, duress, deception, false representation, false pretense, or other similar means for one’s own or another person’s profit or advantage

O.C.G.A. 16-5-100

Essential Services

Social, medical, psychiatric, or legal services necessary to safeguard a disabled adult's, elder person's, or resident's rights and resources and to maintain the physical and mental well-being of such person

Essential Services (cont.)

Such services may include, but not limited to, the provision of medical care for physical and mental health needs, assistance in personal hygiene, food, clothing, adequately heated and ventilated shelter and protection from health and safety hazards

O.C.G.A. 16-5-100

Essential Services (cont.)

...but shall not include the taking into physical custody of a disabled adult or elder person without that person's consent

At-Risk Adult vs. Child Cases

Unlike cases that involve children that allow a child to be “deprived” and placed into protective custody, an at-risk adult has the autonomy and self determination

The right to live life as they choose, even if that includes making “bad decisions”

Mandated Reporting

It shall be unlawful for any person or official required by paragraph (1) of subsection (a) of Code Section 30-5-4 to report a case of disabled adult or elder person abuse to fail knowingly and willfully to make such a report

(2) Any person violating the provisions of this subsection shall be guilty of a misdemeanor

Mandated Reporters

Any person required to report child abuse under Code section 19-7-5 (c), and

Physical therapists, occupational therapists, day care personnel, coroners, medical examiners, EMS personnel,, emergency medical tech, cardiac tech, paramedic, first responder, employees of public/private agency engaged in health related services to elder persons or disabled adults, clergy, and employee of financial institution

Types of Abuse/Indicators



Physical Abuse

Physical abuse is physical force or violence that results in bodily injury, pain, or impairment

It includes assault, battery, and inappropriate restraint

Physical Abuse (cont.)



Physical Abuse Indicators

Sprains, dislocations, fractures, broken bones

Burns from cigarettes, appliances, or hot water

Abrasions on arms, legs, or torso that resembles rope or strap marks

Internal injuries and bleeding from orifices

Physical Abuse Indicators (cont.)

Bilateral bruising to the arms (shaken, grabbed)

Traumatic hairs or tooth loss

Injuries are unexplained or explanations are implausible (do not fit what is observed)

Emotional Abuse

Emotional abuse is the willful infliction of mental or emotional anguish by threat, humiliation, or other verbal or nonverbal conduct

Emotional Abuse Indicators

Weight loss/gain

Stress-related conditions, elevated blood pressure

Isolation of at-risk adult by suspect

Problem sleeping

Emotional Abuse Indicators (cont.)

Cowers in presence of suspect

Exhibits depression/confusion

Exhibits unusual behavior usually attributed to dementia (e.g. biting, rocking)

Sexual Abuse

Sexual abuse is any form of non-consensual sexual contact

It may include unwanted touching, all types of sexual assault or battery such as rape, sodomy, molestation, , coerced nudity, sexual explicated photographing or any sexual conduct with a person who lacks the mental capacity to exercise consent

Sexual Abuse Indicators

Genital or anal pain, irritation, or bleeding

Bruises on external genitalia or inner thighs

Difficulty walking or sitting

Torn, stained, or bloody underclothing

Sexual transmitted diseases

Sexual Abuse Indicators (cont.)

Behavioral indicators

Inappropriate sex-role relationship between at-risk adult and suspect

Inappropriate, unusual, or aggressive sexual behavior

Neglect

Neglect is the failure of caregivers to fulfill their responsibilities to provide needed care

There are three types of neglect:

Active Neglect

Passive Neglect

Self Neglect

Active Neglect

“Active” neglect refers to behavior that is willful (e.g. the caretaker intentionally withholds care or necessities) and may be motivated by financial gain

Active neglect can be a crime under O.C.G.A.
16-7-101 Neglect By Caregiver

Passive Neglect

“Passive” neglect refers to situations in which the caregiver is unable to fulfill his/her care giving responsibilities as a result of illness, disability, stress, ignorance, lack of maturity, or lack of resources

This type of neglect is usually not considered a crime

Self Neglect

Self neglect refers to situations in which there is no suspect and the neglect is the result of the at-risk adult refusing care

Self neglect is not a crime

Self Neglect Indicators

Poor personal hygiene (soiled clothing, head lice, presence feces and/or urine)

Unclothed/improper clothing for weather

Untreated medical conditions

Self Neglect Indicators (cont.)

Absence of needed eyeglasses, dentures, hearing aids, walkers, wheelchairs, etc.

Absence of necessities (food, water, heat)

Unsafe living environment (faulty wiring, inadequate sanitation)

Financial Abuse/Exploitation

Every year thousands of at-risk adults lose all or part of their life savings to financial exploitation

Many of these crimes occur within a family setting, often dismissed as a “civil matter”

Financial Abuse Indicators

Victim report/outcry

Unemployed adults living in home

Sudden changes in banking habits

New power of attorney

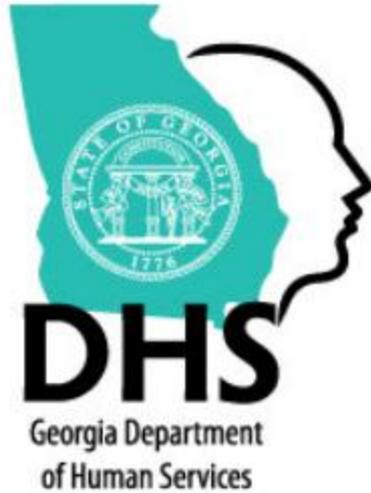
Financial Abuse Indicators (cont.)

Changing in will, property titles or other legal documents

Unpaid bills

Eviction/notice from facility

Georgia Social Services Agencies



Georgia Department of
Behavioral Health & Developmental Disabilities

Ombudsman
LONG TERM CARE
RESIDENTS' ADVOCATE

Adult Protective Services

Use to be part of DFCS, 2004 moved to DAS

Investigates reports of abuse, neglect, and exploitation of disabled adults age 18 to 64 and elder persons age 65 and older

Who do not live in a long-term care facility

Central Intake

APS utilizes a Central Intake reporting system

Gateway to all DAS/APS services

1-866-552-4464 or Fax 770-408-3001

Report [http://aging.dhs.georgia.gov/
adult-protective-services](http://aging.dhs.georgia.gov/adult-protective-services) click on report here

APS Investigations

Not a criminal investigation

Primary mission to put protective services in place

Autonomy/self-determinations

Client has right to refuse services

Healthcare Facility Regulation

Abuse, neglect, and exploitation in facility

Hospital, nursing home, long-term care facility,
or personal care home

Inspects facilities for compliance with federal
and state rules/regulations

Healthcare Facility Regulation (cont.)

Facility compliance report available on line

<http://167.193.144.216>

Can “cite” facility up to \$ 100,000+

Ensure compliance federal/state regulations

1-800-878-6442 <https://services.georgia.gov/dhr>

LTCO

Long-term Care Ombudsman Program (LTCO)

Established under Older Americans Act

Separate office within GA DHS DAS

DAS contracts with Area Agencies on Aging

LTCO (cont.)

Seek to improve the quality of life and well-being for residents of long-term care facilities

Is a resident advocate

Not a mandated reporter

Not a criminal investigation

DBHDD

GA Dept of Behavioral Health &
Developmental Disabilities (DBHDD)

People with mental illness, substance use disorders, and developmental disabilities

Operates seven regional hospitals, provides and oversees community based services

DBHDD (cont.)

DBHDD investigators respond to complaints of unexpected death, abuse-physical, neglect, sexual abuse, sexual assault, and exploitation staff to individual

Not criminal investigation

Ensure provider follows policies & regulations

Response by 911



Initial Report – 911 Call

Report of abuse

Request for welfare check

Uncovered while investigating another crime

Referral from social service agency

Initial On Scene Considerations

Injuries/EMS

Prior calls to location

Emotional/physical state of victim

Excited utterances of victim/suspect

Assumptions & Misinformation

He/she has dementia

What does “dementia” mean to you?

Dementia can be temporary (e.g. dehydration, illness) or permanent (Alzheimer’s disease)

Alzheimer's disease



Interviewing a Victim

One of the most important parts of responding to an at-risk adult crime

May suffer greater physical, mental, and financial injuries than other types of victims

Physiological process of aging decrease ability (physically & mentally) to heal after trauma

Tips for Interviewing

May need glasses/hearing aids

Oxygen/medication

Determine the best time – A victim with Alzheimer's disease may not do well late in the afternoon, schedule a morning interview

Tips for Interviewing (cont.)

May need a translator if non English speaker

Give victim time to hear and understand your words

Repeat key words/phrases

Be patient/avoid unnecessary pressure

Cognitive Limitations

A victim may suffer from Alzheimer's disease, dementia, a developmental disability or some other type of impairment

Temporary dementia may be caused by; trauma, lack of food, water, sleep, medications (too much, not enough), infections, running a fever – Once the condition passes, cognitive skills usually improve

Cognitive Limitation (cont.)

Do not discount the alleged abuse because the victim made statements that seem untrue or the result of delusions

Routinely ask about food, sleep, medicine (especially if the victim seems confused)

Ask if he/she can draw or show what happened

Cognitive Limitations (cont.)

Listen patiently and redirect as needed if the at-risk adult digresses

Use memory clues such as “What were you doing before this happened?”

Read written materials to the individual

Cognitive Limitations (cont.)

Use an interpreter if needed (avoid using family members if possible)

Ask short questions

Keep trying until you figure out what works best

Enabling Objectives

- Describe an at-risk adult
- Define abuse, neglect, and exploitation in accordance with Georgia law
- Describe the types of abuse
- Explain the role of Social Service Agencies
- Describe tips for interviewing at-risk adult victims

Questions



Resources

Adult Protective Services

1-866-552-4464 <http://www.aging.ga.gov>

Healthcare Facility Regulation

1-800-878-6442 <http://www.dch.ga.gov>

Long-term Care Ombudsman

1-866-552-4464

Resources (cont.)

Department of Behavioral Health and
Developmental Disabilities (DBHDD)

<http://www.dbhdd.ga.gov/regions>

Georgia Crisis and Access Line – GCAL
(Mental Illness, Intellectual Disability,
Substance Abuse) 1-800-715-4225

<http://www.mygcal.com>