

# **Preventing Elder Abuse: A Partnership Between Adult Protective Services and Primary Care**



**National Adult Protective Services Association  
Orlando, FL  
October 1, 2015**

**ROBERT BLANCATO, MPA  
CAROL ZERNIAL, MA  
RACHEL DUER, MA  
DEBBIE BILLA, BA**

# Elder Justice Coalition – An Overview of National Initiatives



**ROBERT BLANCATO, MPA**

**ELDER JUSTICE COALITION**

**WASHINGTON, D.C.**

# Elder Justice Coalition



- **The Bipartisan Elder Justice Coalition seeks to:**
  - Increase public awareness of the tragedy of elder abuse, neglect and exploitation at the local, state and national levels and discuss solutions at the federal level.
  - Increase awareness, support and funding for the Elder Justice Act in the Senate and House of Representatives as a comprehensive approach to addressing elder justice issues. Continue related advocacy work around funding for the Social Services Block Grant and the Older Americans Act.
  - Continue to work collaboratively with the Administration on elder justice initiatives.
  - Monitor and appropriately influence other relevant legislation and regulations that pertain to the prevention of elder abuse, neglect and financial exploitation.

# Priorities for 2015



- Fund the Elder Justice Act.
- Implement the rest of the Elder Justice Act.
- Pass the Older Americans Act.
- Protect Social Services Block Grant from cuts.
- Reauthorize the Elder Justice Act.
- Ensure new Victims of Crime Act funds go to underserved victims such as elder abuse crime victims (WHCOA outcome).
- Ensure other WHCOA recommendations on elder justice are achieved.

# Work to Date in 2015



- Obama's FY 16 budget request includes **\$25 million** to continue the **Elder Justice Initiative**. The Senate and House included **\$4 million** in their budgets for the Initiative.
- **2015 White House Conference on Aging** included elder justice as one of its 4 priority issues. 2 of 4 presenters (Zernial, Blancato) invited by the White House to attend. Key announcements made.
- 10<sup>th</sup> anniversary of **WEAAD** in 2015; Global Summit conducted, EJC participated.

# Work in 2014



- Elder Justice Act received \$4 million in **first-time funding**.
- New **Office of Elder Justice and APS** in ACL.
- **Renewal** of both the National Center on Elder Abuse and the APS Resource Center by the Administration.
- **Data collection project** from ACL with APS.
- Elder justice website launched by Department of Justice at [www.justice.gov/elderjustice](http://www.justice.gov/elderjustice).

# In 2014...



- High level observance of **WEEAD** including Presidential proclamation.
- Increased work of the **Social Security Administration** to combat elder financial abuse.
- Ongoing work in the Office of Older Americans in the **Consumer Financial Protection Bureau**.

# In 2014...



- Release of the **Elder Justice Roadmap** by Departments of Justice/HHS:  
([ncea.acl.gov/Library/Gov\\_Report/docs/EJRP\\_Roadmap.pdf](http://ncea.acl.gov/Library/Gov_Report/docs/EJRP_Roadmap.pdf))
- **Recommendations of the Elder Justice Coordinating Council** sent to HHS Secretary and later to Congress:  
([www.aoa.acl.gov/AoA\\_Programs/Elder\\_Rights/EJCC/docs/Eight\\_Recommendations\\_for\\_Increased\\_Federal\\_Involvement.pdf](http://www.aoa.acl.gov/AoA_Programs/Elder_Rights/EJCC/docs/Eight_Recommendations_for_Increased_Federal_Involvement.pdf))



# Finally... for 2015



- Ongoing work on the **grants** awarded by ACL, including this one.
- Need to accelerate work on dissemination from this grant as results continue to be achieved to help present this as a replicable national model for the future.

# Visit the Elder Justice Coalition Website!



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THE ELDER JUSTICE COALITION



A National Advocacy Voice  
Supporting Elder Justice in  
America

ABOUT US



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[www.elderjusticecoalition.com](http://www.elderjusticecoalition.com)

# WellMed Medical Management



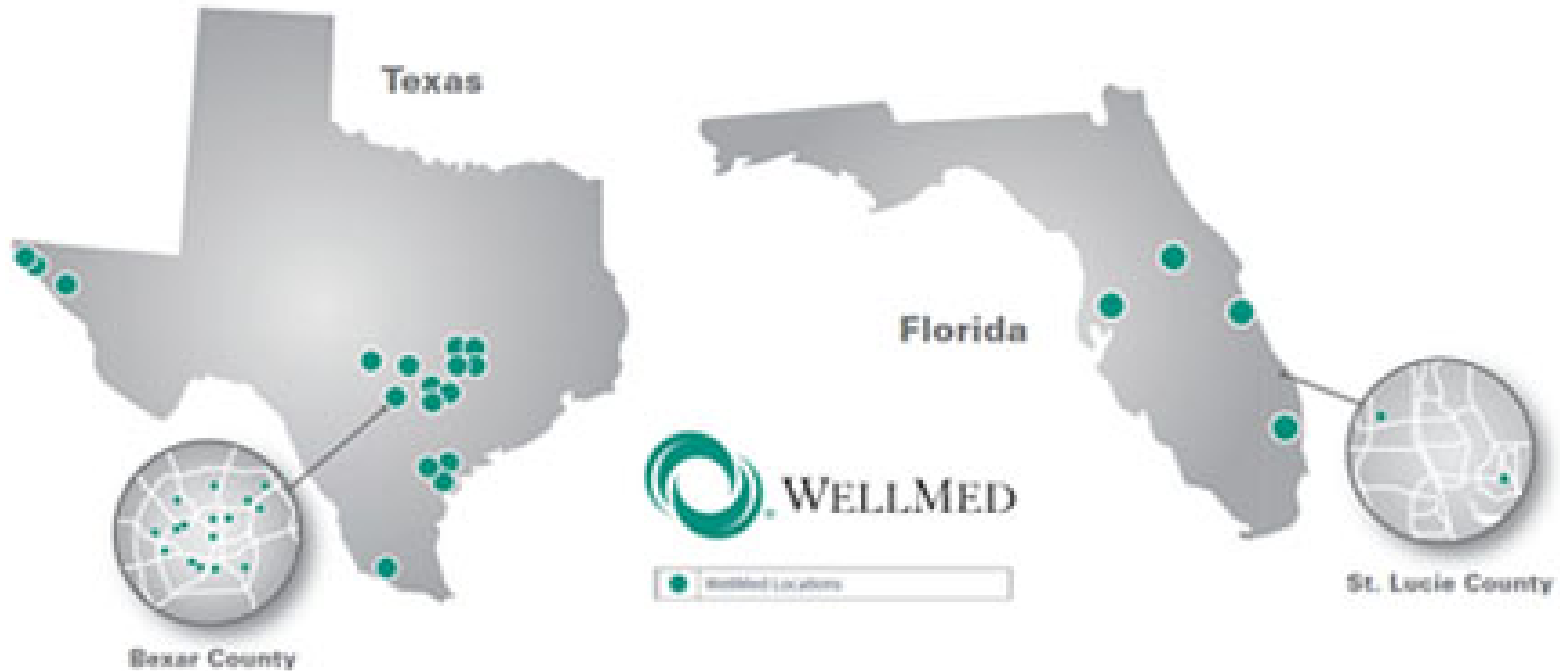
**CAROL ZERNIAL, MA**

**WELLMED CHARITABLE FOUNDATION**

**SAN ANTONIO, TX**

# WellMed Medical Management— Organizational Overview

93 primary care clinics (in-house lab, x-ray, pharmacy) with more than 227 primary care physicians in Texas and Florida.



# Organizational Overview

Primary Care Centric Medical Group (Family Practice, Internal Medicine + added Podiatry, Dermatology, Cardiology, Oncology, Pain Medicine, Palliative Care)

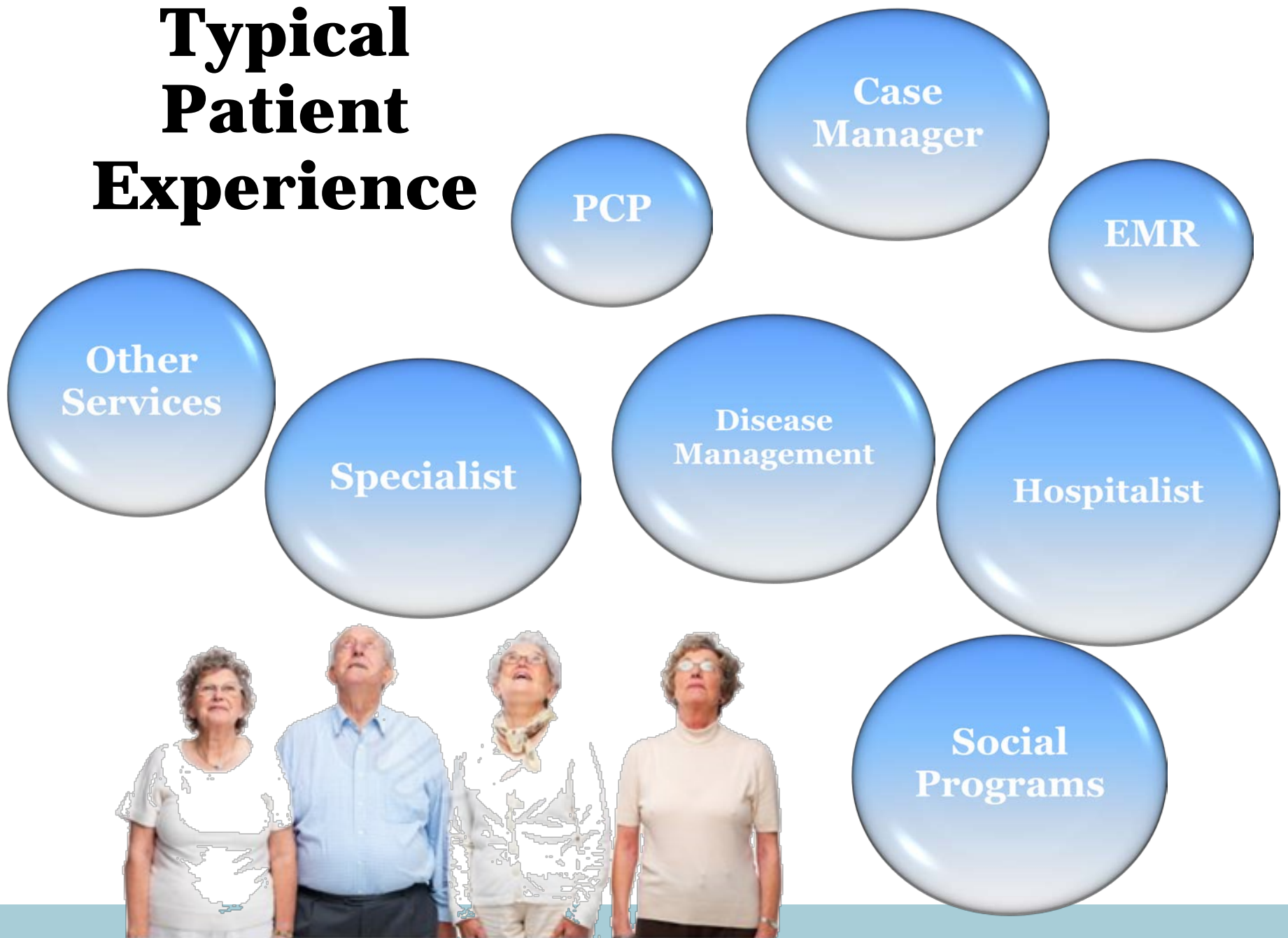
Manage Full-Risk Capitated Insurance Contracts

Specialize in Medicare-eligible Seniors – responsible for 165,000 lives

Contract for all Medical Services (Specialty, Hospital, Ancillary, Hospice)

- Fully functional primary care centric, patient centered medical home (PCMH) functioning as an accountable care organization (ACO)

# Typical Patient Experience

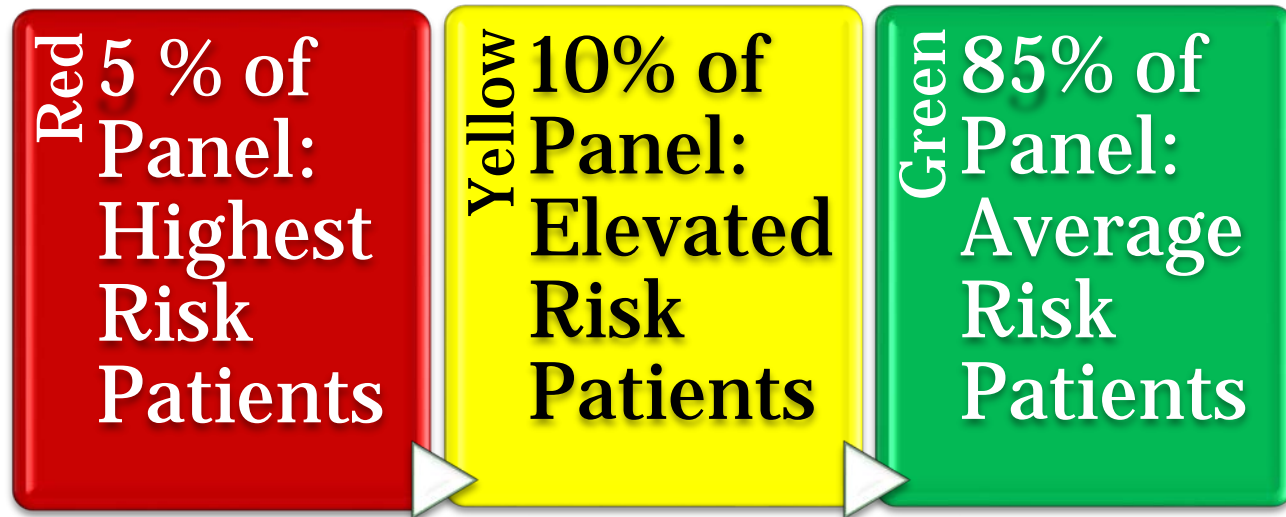


# One Team, One Goal



# “Stoplight” Stratification Process

*Approach for identifying the acuity level or hospitalization risk of a patient*





# DFPS Grant Overview



**RACHEL DUER, MA**

**TEXAS DEPARTMENT OF FAMILY AND  
PROTECTIVE SERVICES**

**SAN ANTONIO, TX**

# Elder Abuse Prevention Grants



- Grants awarded by the Administration on Aging/Administration for Community Living (AoA/ACL)
- Funds will be used to implement, test and measure performance of new approaches to identify, intervene and prevent elder abuse, neglect and financial exploitation
- Texas APS/WellMed collaboration is one of five grantees in the country

# Texas APS/WellMed Project Goals



- Implement the EASI - a short 6-item screening tool to identify and prevent elder abuse and neglect in primary care clinics
- Develop and test protocols for screening seniors at risk of elder abuse in a primary care setting including:
  - Embedding two APS staff into the WellMed system
  - Referrals to APS for “high-risk” patients
  - Monitor patients at “medium” risk of abuse through partnerships

# Texas APS/WellMed Project Goals



- Delivery of training to WellMed clinical staff on:
  - Identification of types of elder abuse and risk factors
  - APS referral mechanisms
  - APS reporting requirements
- Delivery of education materials to patients and caregivers on:
  - Targeted information to patients at risk of abuse based on results of the EASI tool
  - General patient/caregiver information

# Elder Abuse Suspicion Index – “EASI”



- Developed in Montreal, Canada at McGill University and CSSS Cavendish to raise suspicion about elder abuse
- Validated in ambulatory clinical settings in Canada with cognitively intact seniors
- 6 question survey administered by a clinician or trained staff
- Adapted by the World Health Organization and currently used in several countries around the world

## ELDER ABUSE SUSPICION INDEX © (EASI)

### EASI Questions

**Q.1-Q.5 asked of patient; Q.6 answered by doctor**

**Within the last 12 months:**

|  |     |    |                |
|--|-----|----|----------------|
| 1) Have you relied on people for any of the following: bathing, dressing, shopping, banking, or meals?   | YES | NO | Did not answer |
| 2) Has anyone prevented you from getting food, clothes, medication, glasses, hearing aides or medical care, or from being with people you wanted to be with?   | YES | NO | Did not answer |
| 3) Have you been upset because someone talked to you in a way that made you feel shamed or threatened?   | YES | NO | Did not answer |
| 4) Has anyone tried to force you to sign papers or to use your money against your will?  | YES | NO | Did not answer |
| 5) Has anyone made you afraid, touched you in ways that you did not want, or hurt you physically?  | YES | NO | Did not answer |
| 6) Doctor: Elder abuse <u>may</u> be associated with findings such as: poor eye contact, withdrawn nature, malnourishment, hygiene issues, cuts, bruises, inappropriate clothing, or medication compliance issues. Did you notice any of these today or in the last 12 months? | YES | NO | Not sure       |

# The EASI Tool Questions - Rationale



***Remember that the EASI Tool is meant to raise suspicion about the presence of elder abuse-it is not intended to confirm the presence of abuse.***

**1) Have you relied on people for any of the following: bathing, dressing, shopping, banking, or meals?**

- It is important to recognize that when an individual with any form of a disability and/or a need for assistance replies in the affirmative to this question, it increases his/her risk for abuse, neglect and/or exploitation.

# The EASI Tool Questions - Rationale



**2) Has anyone prevented you from getting food, clothes, medication, glasses, hearing aides or medical care, or from being with people you wanted to be with?**

- This question is meant to explore the possibility of someone trying to isolate the individual as well as having control of his/her basic physical and emotional needs. This can signal possible neglect, lack of choice, economic vulnerability and/or isolation.



# The EASI Tool Questions - Rationale



## **3) Have you been upset because someone talked to you in a way that made you feel shamed or threatened?**

- Making someone feel ashamed is a way of degrading the individual and controlling them. Individuals are particularly vulnerable when they are not able to control some of their behaviors; i.e., bodily functions, speech, ability to hear, etc.
- Threatening someone is a form of control and can result in an individual's increased dependence and vulnerability to manipulation.

# The EASI Tool Questions - Rationale



## **4) Has anyone tried to force you to sign papers or to use your money against your will?**

- A positive answer to this question raises suspicion of possible financial abuse, economic vulnerability as well as potential neglect, isolation and dependency.

## **5) Has anyone made you afraid, touched you in ways that you did not want, or hurt you physically?**

- This question is intended to raise suspicion about the presence of any sexual or physical abuse, intimidation, isolation, and/or the possibility of family violence.

# The EASI Tool Questions - Rationale



**6) Elder abuse may be associated with findings such as: poor eye contact, withdrawn nature, malnourishment, hygiene issues, cuts, bruises, inappropriate clothing, or medication compliance issues. Did you notice any of these today or in the last 12 months?**

- This question is specifically geared for the health care professional. If the findings described in this question are present, it may indicate the presence of abuse, even if the patient answered 'no' to all of the previous EASI questions.

# Project Details



**DEBBIE BILLA, BA**

**WELLMED CHARITABLE FOUNDATION**

**SAN ANTONIO, TX**

# EASI Scoring for Texas WellMed Clinics



- **RED** = at least one “Yes” to questions 2-5 and “Yes” to question 6
- **YELLOW** = at least one “Yes” to questions 2-5 and “No” to question 6
- **GREEN** = “NO” no responses to questions 2-6

# EASI Protocols for Texas WellMed Clinics



- **Score = “RED”**
  - Provide patient education materials related to the prevention of elder abuse
  - Refer to WellMed Complex Care
  - Report to APS and record reference number (tracking)
- **Score = “YELLOW”**
  - Provide patient education materials related to prevention of elder abuse
  - Refer to WellMed Complex Care
- **Score = “GREEN”**
  - Provide patient education materials related to prevention of elder abuse (Abuse/Neglect/Financial Exploitation) to both patients and caregivers

# Caregiver SOS/Stress-Busting Program



- EASI can not be administered to people with dementia/Alzheimer's
- For caregivers of these identified individuals, refer to the Caregiver SOS program and the Stress-Busting Program
- Caregiver SOS is available in San Antonio, Lower Rio Grande Valley and Corpus Christi
- Partner with the AAA's in Austin and El Paso to offer Caregiver Services in those areas

# **Texas APS/WellMed Grant Successes to Date**



- **Successfully tested and implemented the EASI tool and protocols in 63 clinics in San Antonio, Rio Grande Valley, Corpus Christi, Austin, and El Paso**
- **Misconceptions existed on both sides (WellMed/APS) of how the other entity operated**
- **Have already intervened with multiple patients who were at high-risk that would have not been identified without this grant**



# Local Evaluation of the Project



**FARIDA K. EJAZ, Ph.D. (PI)**

**BENJAMIN ROSE INSTITUTE ON AGING**

**CLEVELAND, OH**



**BENJAMIN ROSE  
INSTITUTE ON AGING**  
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# Two Parts to the Evaluation



## 1. Local evaluation:

- ✦ Benjamin Rose Institute on Aging

## 2. National evaluation of all 5 grantees

- ✦ NORC: National Opinion Research Center at the University of Chicago

# Texas Intervention: Components of the Local Evaluation



- **4 major components of the intervention**
  - I. Embedding APS workers in WellMed
  - II. Training clinicians on identifying abuse, how to screen for abuse using the EASI, and following clinical protocols to refer victims of abuse and suspected abuse to APS
  - III. Feasibility of using the EASI in primary care clinics
  - IV. Evaluating the effectiveness of the caregiver Stress Busting Program
- **IRB approval obtained**



# Focus of this Presentation: Training Clinicians



- **Piloting testing the training in 2013:**
  - Training piloted in 2 WellMed clinics
  - 44 clinicians participated
  - Completed a pre- and post-training survey
- **Based on the results of the pilot testing:**
  - Training modified
  - Pre-Post training surveys modified

# Modified Training



- Began February 2014
- Ended February 2015
  
- 733 clinicians trained
  - From 63 primary care WellMed clinics
  
- **Preliminary findings from:**
  - 530 clinicians who completed both pre-and post-training surveys

# Findings: Clinicians' Professions



- Medical Assistant: 36%
- Patient Services Representative: 18%
- Physician/Physician Assistant/  
Nurse Practitioner: 15%
- Nurse/Health Coach: 14%
- Administrator/Manager/Supervisor: 8%
- Technician: 5%
- Case Manager/Social Worker: 3%
- Support Staff: 1%



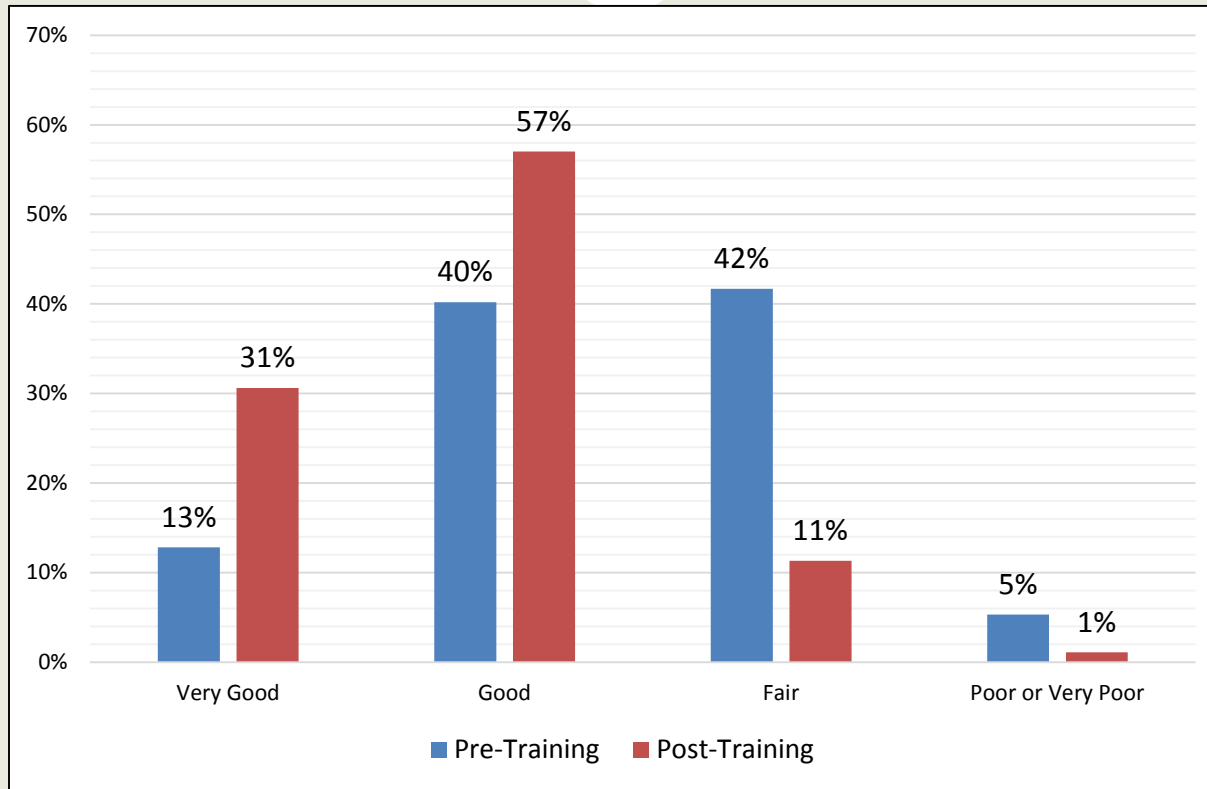
# Reporting Elder Abuse



- **26% of clinicians had referred a case to APS in the past**
  - **Among these clinicians:**
    - ✦ **53% had made a referral to APS in the past 12 months**
    - ✦ **59% said they referred 2-6 cases and 41% said they referred one case**
- **Only 13% of clinicians reported being familiar with the EASI tool prior to training**



# Knowledge of Abuse

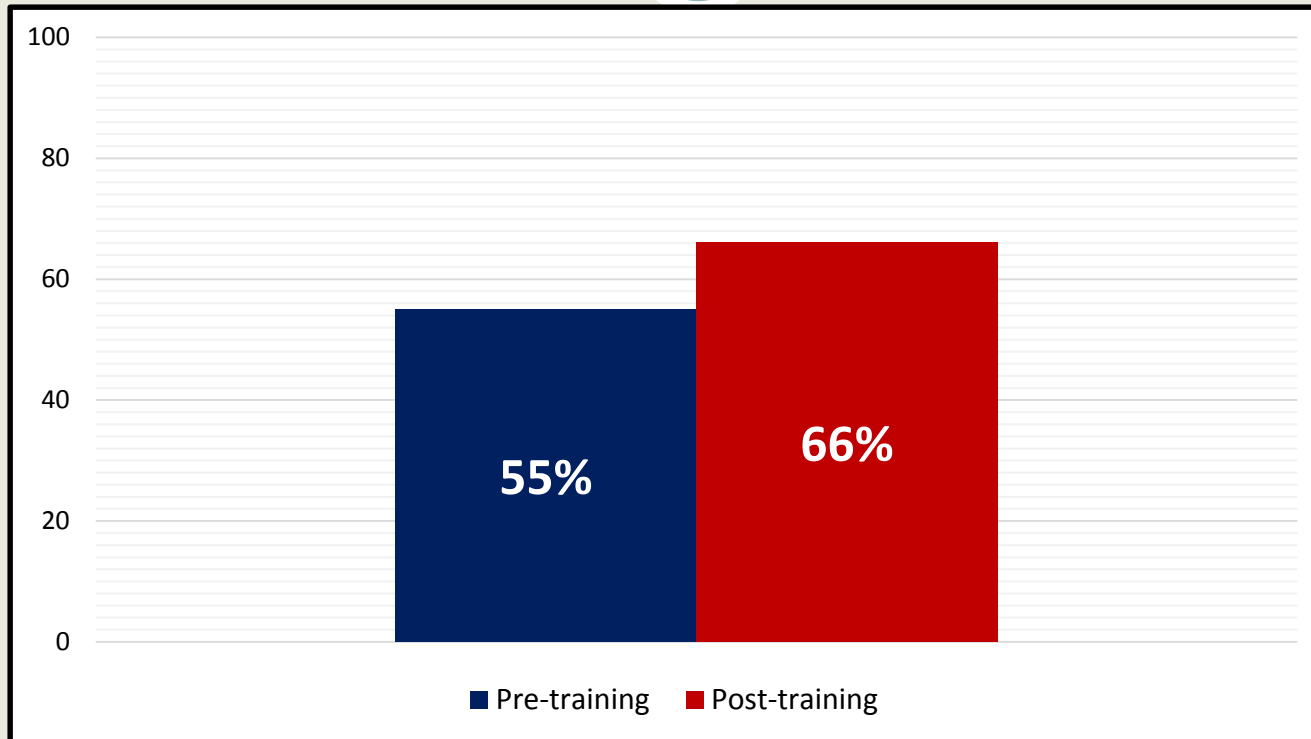


**Significant improvement in rating of one's knowledge of recognizing indicators of abuse, neglect, and exploitation ( $p < .0001$ ).**





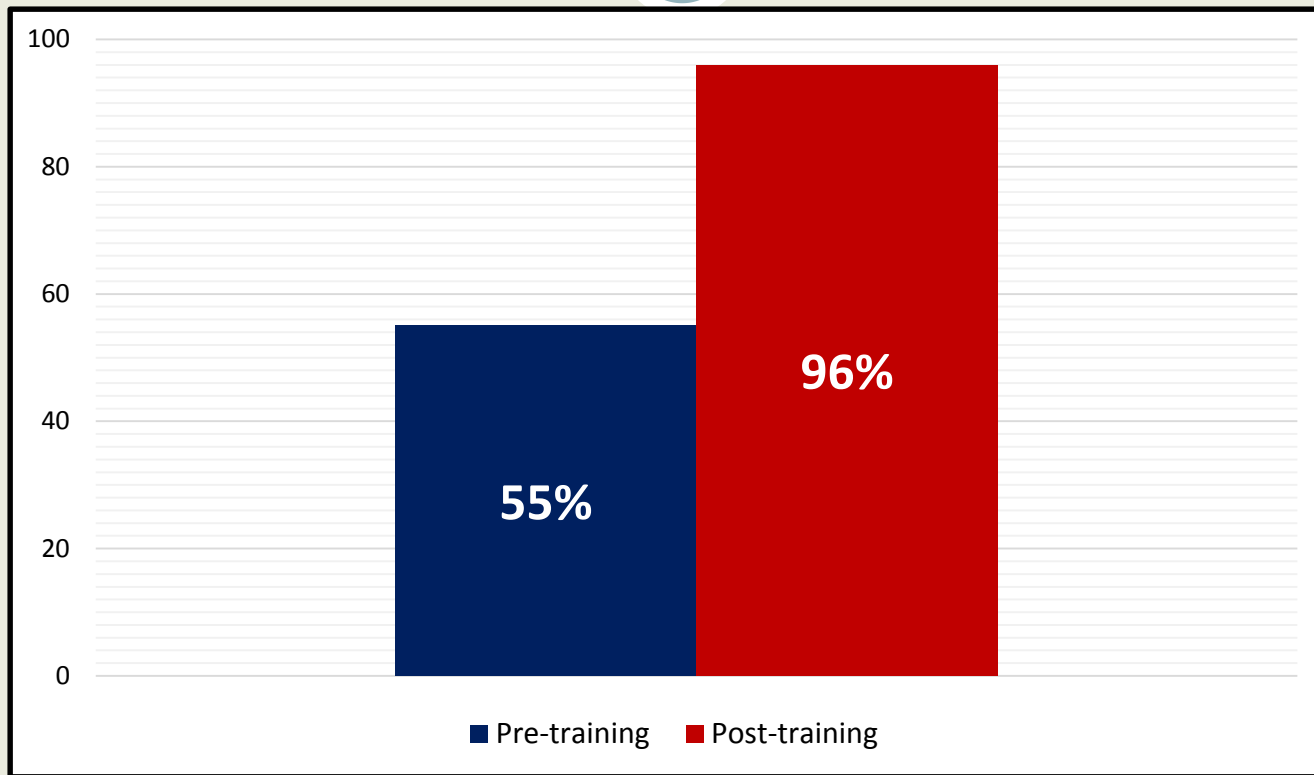
# Determination of Capacity to Consent



**Significant improvement in knowledge that a judge/the court makes the ultimate determination of whether a person has the capacity to provide consent ( $p < .0001$ ).**



# How Soon APS Investigates Abuse



**Significant improvement in knowledge that APS investigates cases within 24 hours ( $p < .0001$ ).**

# Comfort Level Using the EASI Tool



**After training, 80% of clinicians reported that they were comfortable or very comfortable using the EASI in a clinical setting.**



# Next Steps: Follow-up Survey



- **Approx. 1 year after training:**
  - Clinicians are completing a follow-up survey
  - Focus on clinicians who completed both pre- & post-training surveys
  - Follow-up occurring on a staggered basis
    - ✦ E.g. clinicians trained in May 2014 received a follow-up survey in May 2015
  - Follow-up survey conducted electronically, i.e., online
  - 30 questions – takes approx. 5-10 minutes to complete



# Questions



# Resources



**For a copy of the remarks:** [rblancato@matzblancato.com](mailto:rblancato@matzblancato.com)

- [www.elderjusticecoalition.com](http://www.elderjusticecoalition.com)
- Elder Justice Roadmap: [ncea.acl.gov/Library/Gov\\_Report/docs/EJRP\\_Roadmap.pdf](http://ncea.acl.gov/Library/Gov_Report/docs/EJRP_Roadmap.pdf)
- Recommendations of the EJCC: [www.aoa.acl.gov/AoA\\_Programs/Elder\\_Rights/EJCC/docs/Eight\\_Recommendations\\_for\\_Increased\\_Federal\\_Involvement.pdf](http://www.aoa.acl.gov/AoA_Programs/Elder_Rights/EJCC/docs/Eight_Recommendations_for_Increased_Federal_Involvement.pdf)
- Elder Justice Initiative: <http://www.elderjusticecoalition.com/current-issues>
- Department of Justice Elder Justice website: [www.justice.gov/elderjustice](http://www.justice.gov/elderjustice)
- **Other sites:**
- Administration on Aging: <http://aoa.gov>
- CFPB: [www.consumerfinance.gov/older-americans](http://www.consumerfinance.gov/older-americans)
- NCEA: [www.ncea.aoa.gov](http://www.ncea.aoa.gov)
- Ageless Alliance: [www.agelessalliance.org](http://www.agelessalliance.org)
- Center of Excellence on Elder Abuse and Neglect: [www.centeronelderabuse.org](http://www.centeronelderabuse.org)
- NCPEA: [www.preventelderabuse.org](http://www.preventelderabuse.org)
- Texas APS: [https://www.dfps.state.tx.us/adult\\_protection/](https://www.dfps.state.tx.us/adult_protection/)

# Contact Information



**Robert Blancato, M.P.A.**

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**[Rblancato@matzblancato.com](mailto:Rblancato@matzblancato.com)**

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**[Dbilla@wellmed.net](mailto:Dbilla@wellmed.net)**

**Rachel Duer, M.A.**

**Texas Adult Protective Services**

**[Rachel.Duer@dfps.state.tx.us](mailto:Rachel.Duer@dfps.state.tx.us)**

**Carol Zernial, M.A.**

**WellMed Charitable Foundation**

**[Czernial@wellmed.net](mailto:Czernial@wellmed.net)**

**Farida Ejaz, PHD, LISW-S**

**Benjamin Rose Institute on Aging**

**[fejaz@benrose.org](mailto:fejaz@benrose.org)**