



NYS ELDER ABUSE PREVENTION INTERVENTIONS INITIATIVE
(EAPI)

Enhanced Multi-Disciplinary Teams Pilot Intervention: Older Adult Financial Exploitation

NAPSA Conference
October 1, 2015

Presenters

- Paul Caccamise, LMSW, ACSW
Vice President for Program
Lifespan of Greater Rochester
- Peg Horan, LMSW
Elder Abuse Prevention Specialist/MDT Coordinator
New York City Elder Abuse Center
- Allison Campbell, LMSW
Coordinator, Finger Lakes E-MDTs
Lifespan of Greater Rochester

Objectives

- *Review background of Enhanced Multidisciplinary Teams (E-MDTs)*
- *Understand value of multidisciplinary collaboration in complex cases of elder mistreatment.*
- *Understand the unique role of forensic accountants in complex cases of financial exploitation.*
- *Review operation and outcomes of E-MDTs*
- *Understand the resources, challenges and community process in establishing Enhanced Multidisciplinary Teams in both urban and rural areas.*

Under the Radar: New York State Elder Abuse Prevalence Study (2007-2010)

NEW YORK *Takes Action* AGAINST
ELDER MISTREATMENT AND NEGLECT



Under the Radar – Project Partners

- **Lifespan of Greater Rochester Inc. (Lifespan)**
- **Weill Medical College of Cornell University (Cornell)**
- **The New York City Department for the Aging (DFTA)**

Principal investigators:

Mark Lachs, MD (Cornell)

Jackie Berman, PhD (DFTA)

The project was partially funded by the New York State Children and Family Trust Fund, a program administered by the NYS Office of Children and Family Services

NEW YORK *Takes Action* AGAINST
ELDER MISTREATMENT AND NEGLECT



Major findings of the Study

Incidence (one year rate) vs. Case Reporting

A total incidence rate of 76 per 1,000 older residents of New York State, in the past year, for any form of elder abuse was found (non-financial and/or financial).

The most common form of mistreatment was **major financial exploitation** (theft of money or property, using items without permission, impersonation to get access, forcing or misleading to get items such as money, bank cards, accounts, power of attorney) with a **rate of 41 per 1,000 (4.1% of all older adults in state)**.

Over 260,000 older adults in NYS are victims of elder abuse each year. (c. **150,000** experience financial exploitation.)

NEW YORK *Takes Action* AGAINST
ELDER MISTREATMENT AND NEGLECT

**Target:
Elder
Abuse**

Elder Abuse: Under the Radar

For every one case of elder abuse
that comes to the attention of a
responsible entity. . .

1

another twenty three cases
never come to light.

23

Source: NYS Elder Abuse Prevalence Study; Weill Cornell Medical College, NYC Department for the Aging; Lifespan; (2011)



Response Systems in Elder Abuse

- ❖ Health care system
- ❖ Criminal justice system
 - ❖ Law enforcement
- ❖ Adult Protective Services
- ❖ Aging services network
 - ❖ Elder abuse network
 - ❖ Gatekeepers
(Postal workers, doormen, hairdressers, etc)
- ❖ Mental health system
- ❖ Child Protective Services
 - ❖ Financial institutions
- ❖ Victim Service Networks/Sexual Assault/DV Network

An Elder Abuse Case Example: Response by Multiple Systems



Elder Victim



Medical



Elder Victim



Medical



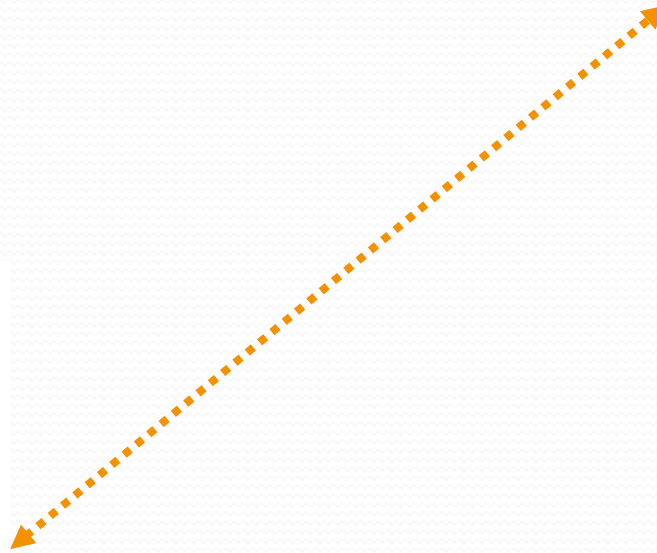
Adult Protective Services
(APS)



Elder Victim



Medical



Adult Protective Services
(APS)



Law Enforcement



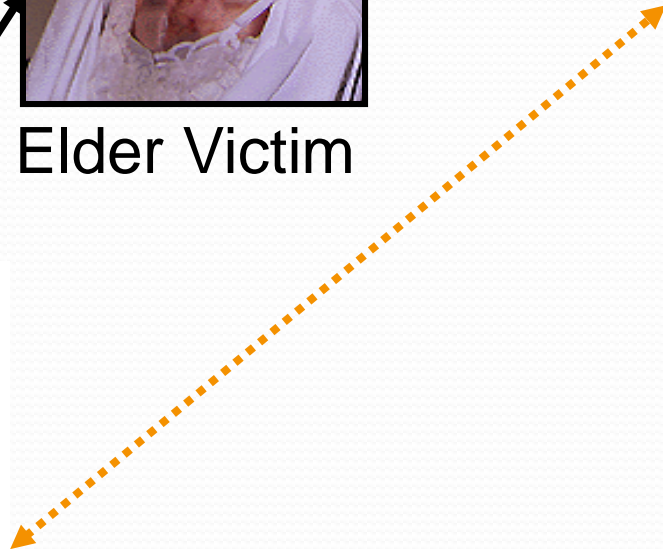
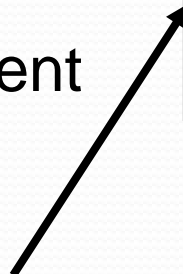
Elder Victim



Medical



APS





Law Enforcement



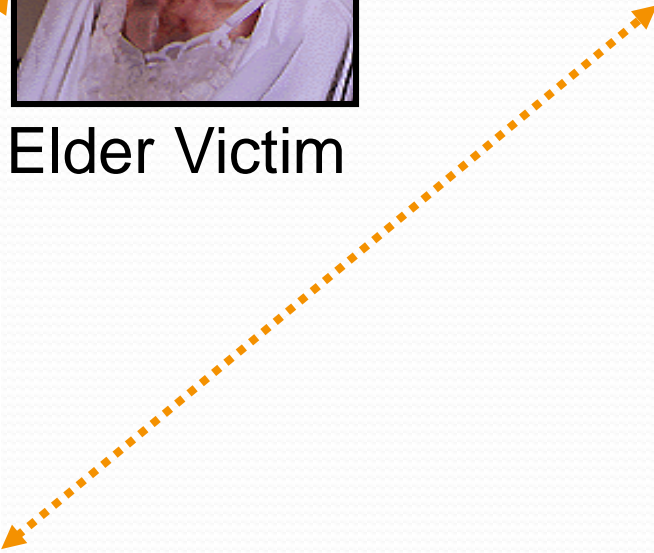
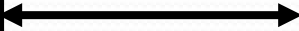
Elder Victim



Medical

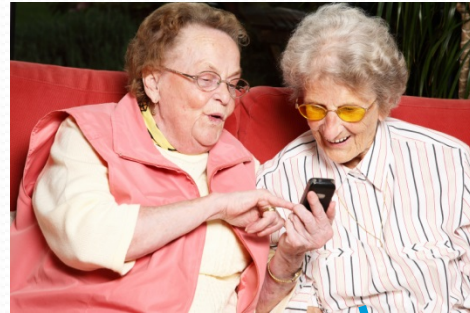


APS





Law Enforcement



Neighbor



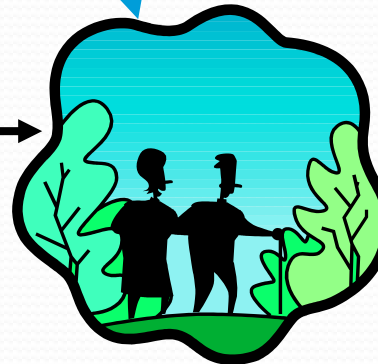
Medical



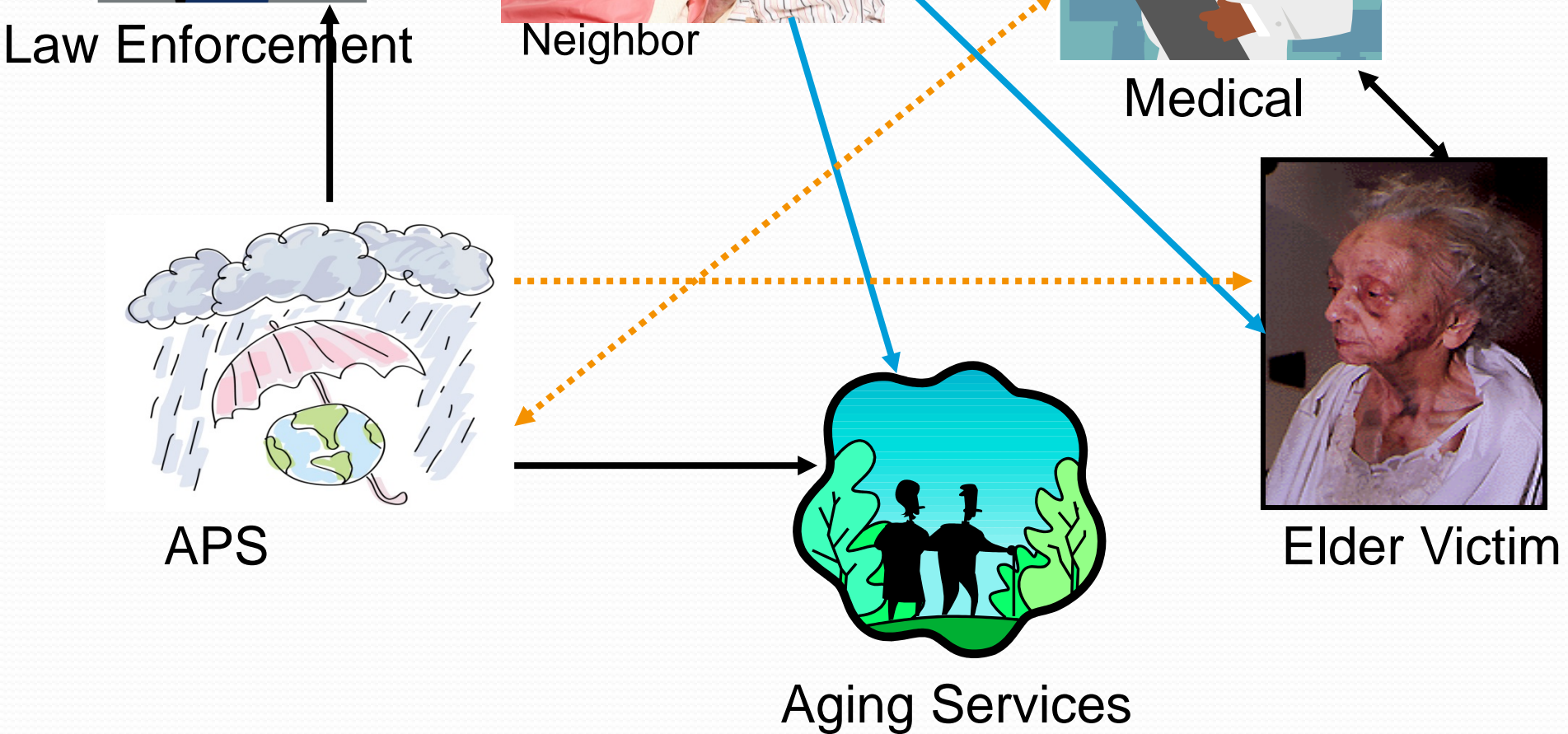
APS



Elder Victim



Aging Services





Law
Enforcement



DA



Medical



Neighbor



Victim



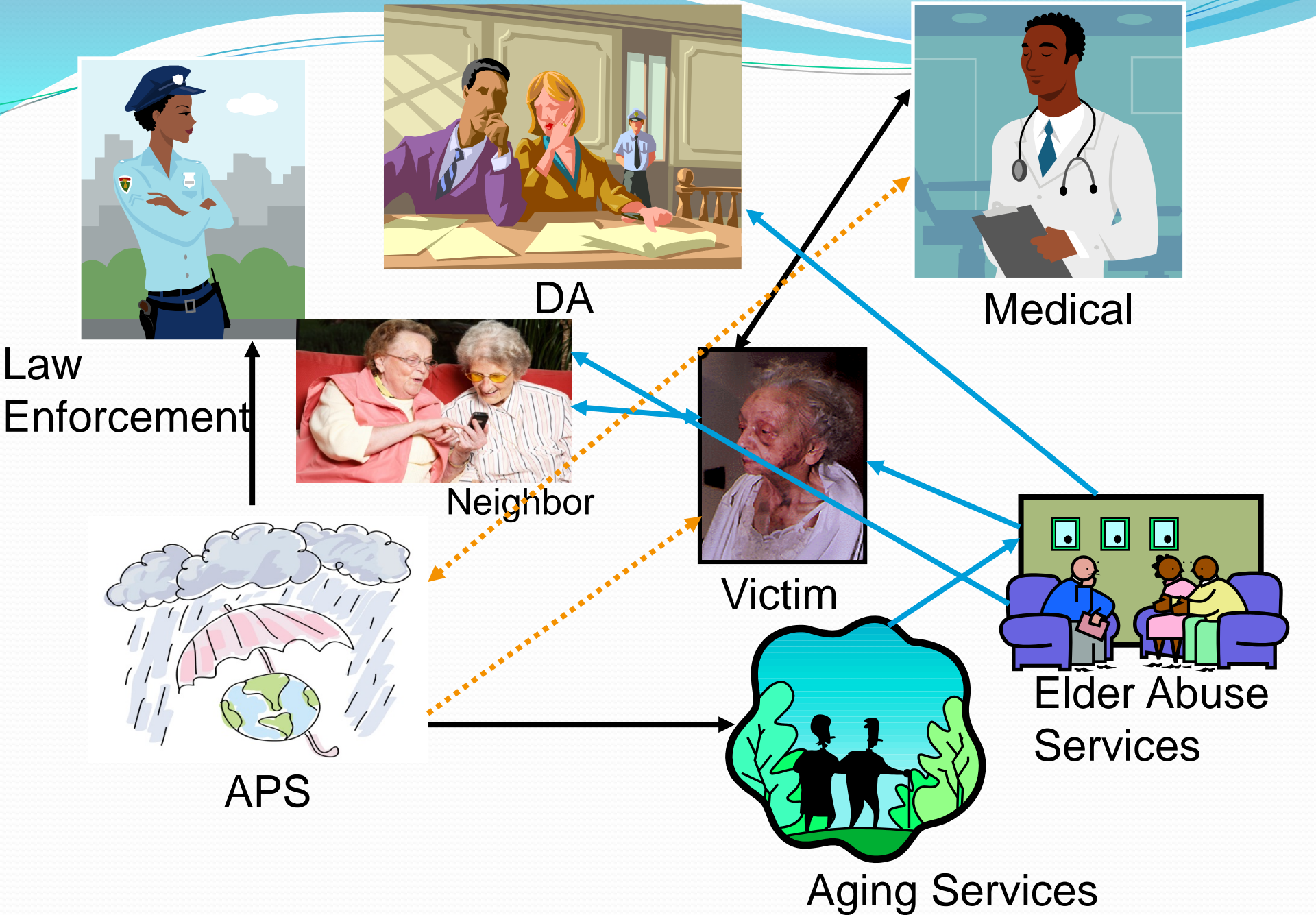
APS

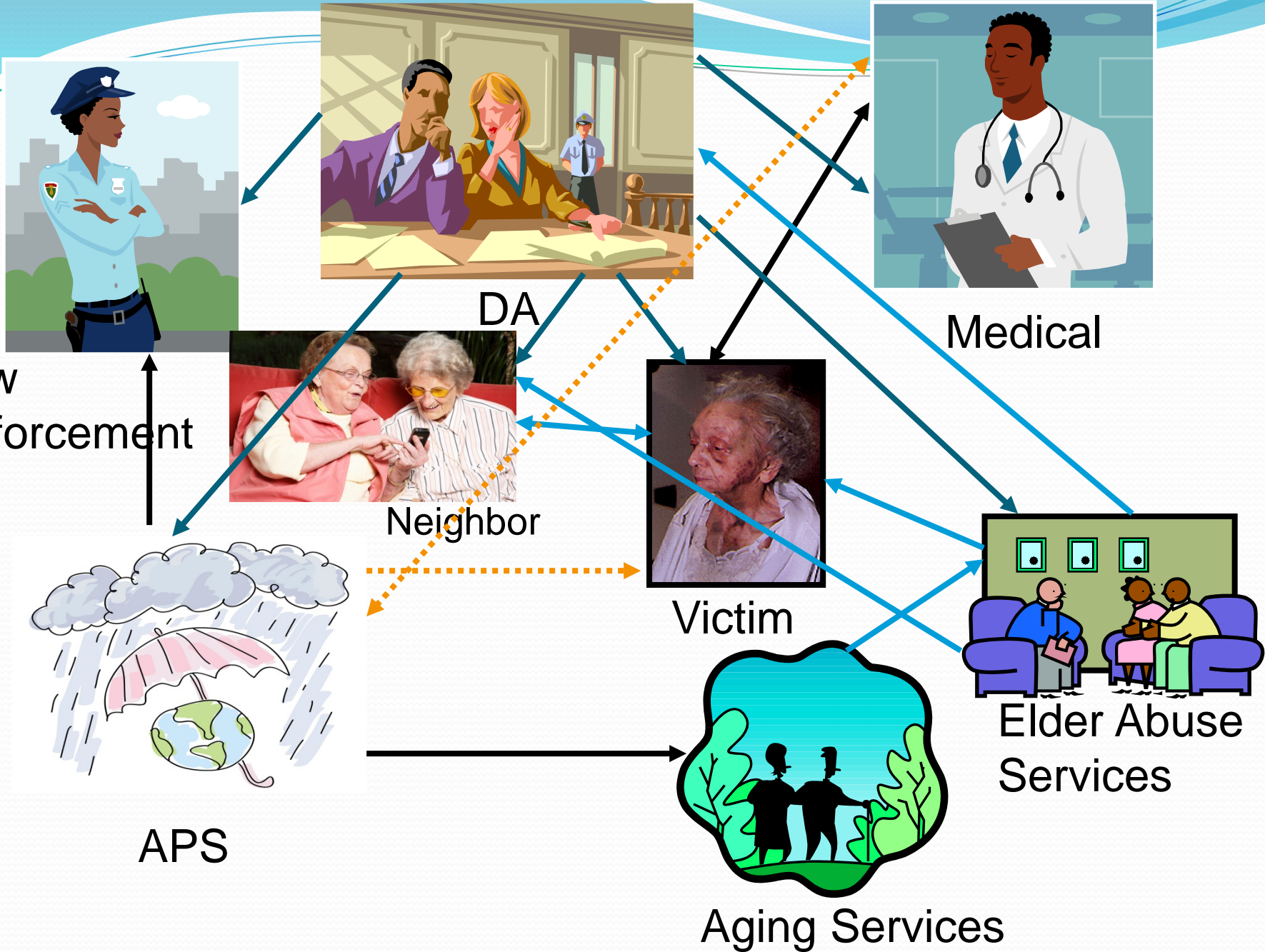


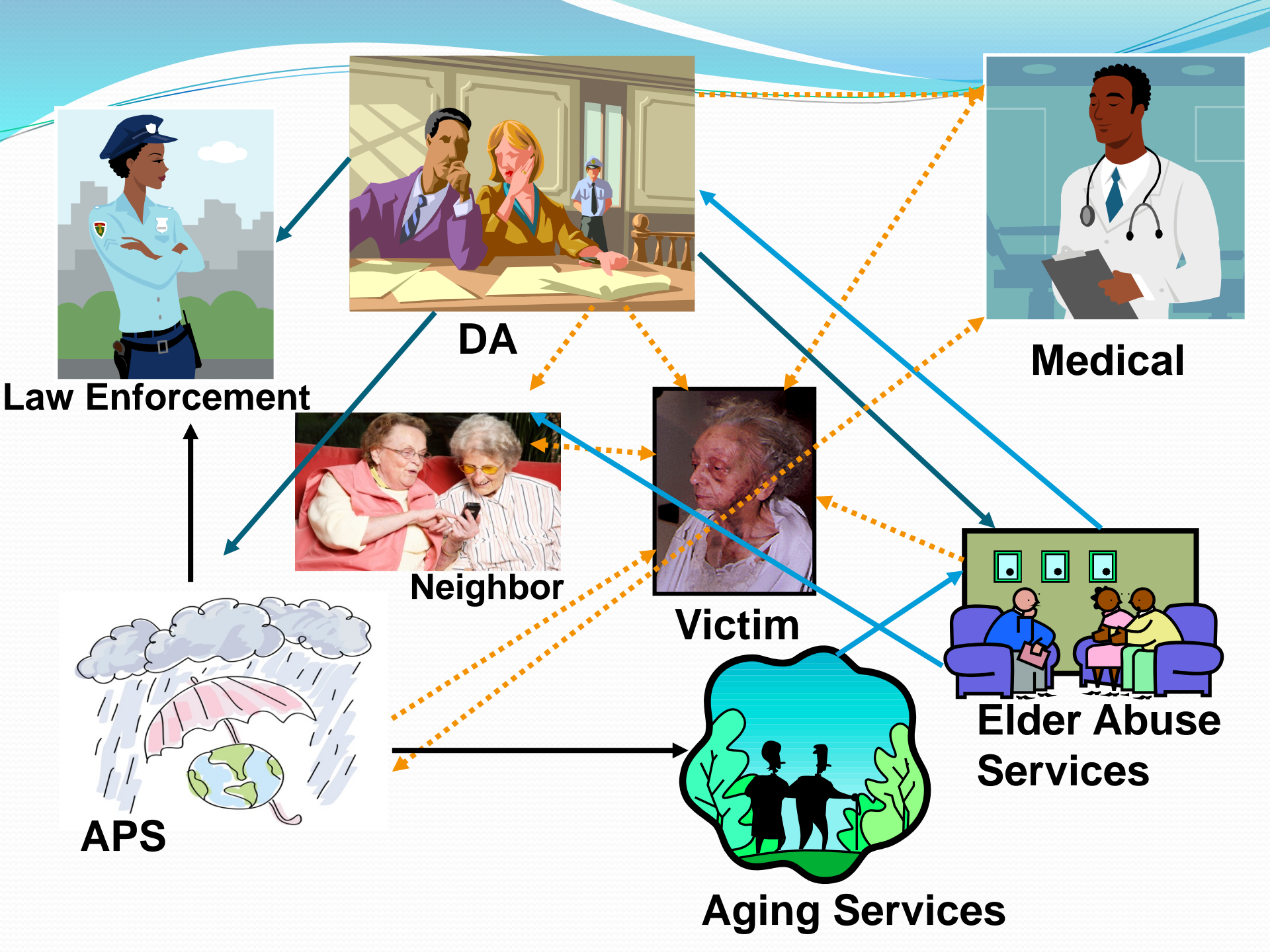
Elder Abuse
Services



Aging Services







There's gotta be a better way...



The Multidisciplinary Team Approach



What is a Multidisciplinary Team?

- *Multidisciplinary teams (MDTs) are:*
 - groups of professionals from diverse disciplines coming together to provide comprehensive assessment and consultation on abuse cases.
- *Benefits include:*
 - help resolve difficult cases;
 - promote coordination between agencies;
 - provide a "checks and balances"--ensure interests and rights of all concerned parties are addressed;
 - identify service gaps and breakdowns in coordination or communication between agencies or individuals;
 - enhance professional skills and knowledge of individual team members by providing a forum for learning more about strategies, resources, and approaches used by various disciplines.

Elder Abuse Prevention Interventions (EAPI)

PROJECT FUNDING

- Funded under 2012 Prevention and Public Health Fund (PPHF)
- AoA/ACL oversight – *program implementation*
- ASPE oversight – *project evaluation*

PROJECT GOAL

- Pilot an intervention that prevents and addresses financial exploitation and elder abuse by:
 - Bring together entities with unique resources, skills;
 - Form coordinated, enhanced multi-disciplinary teams (E-MDT); and
 - Provide improved and effective cross-systems collaboration and specialized responses, resulting in restored safety and security to older adults.

PROJECT Partners

- New York State Office for the Aging (project lead)
- New York State Office of Children and Family Services – Adult Protective Services (training of financial professionals)
- *Two pilot areas:*
 - Finger Lakes Region:
 - Monroe County Office for the Aging
 - Lifespan of Greater Rochester, Inc.
 - Seven counties (Monroe, Cayuga, Livingston, Ontario, Seneca, Wayne and Yates counties)
 - Private (community-based) Forensic Accountant
 - Manhattan:
 - Weill Cornell Medical Center – New York City Elder Abuse Center (NYCEAC)
 - New York City District Attorney’s Office – Forensic Accountant

TARGET POPULATION

- Targets frail adults ages 60 and over.
- Manhattan and the Finger Lakes region.
- Target population has a detectable sign of financial exploitation.

TARGET POPULATION

Target population *also* has at least one of the following characteristics:

- Health problems and/or physical impairments;
- Cognitive impairment or dementia; and/or
- Social isolation and inadequate social support –higher risk for becoming a victim of abuse.

EAPI Project Objectives

1. Develop a model for an E-MDT.
2. Implement the E-MDT model in two areas (Manhattan and Finger Lakes).
3. Create E-MDT policies and procedures to establish protocols for implementation of the two pilot teams.
4. Develop strategies for using technology / innovative methods for implementation of the E-MDT in rural Finger Lakes counties.
5. Conduct training for personnel from the financial industry (promote early detection, referral).
6. Develop methods for data collection.
7. Participate in an evaluation to determine the effectiveness of the new E-MDT model.
8. Disseminate results.

- E-MDTs Active
- Training Financial Industry Professionals
- Forensic Accountant
- Data Collection and Reporting



Enhanced Multidisciplinary Teams

(E-MDT)

Enhanced Multidisciplinary Teams

(E-MDT)

The E-MDTs are composed of professionals from various disciplines whose primary focus is to investigate, intervene, and prevent financial exploitation of older adults.

What makes it “Enhanced”?

- Focus specifically on cases of financial exploitation
 - Access to a forensic accountant
 - Access to a geriatric psychiatrist

Purpose of the E-MDT

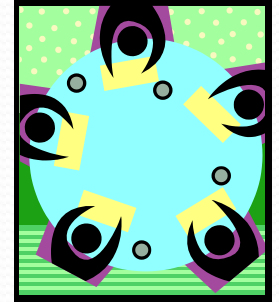
- Bring together agencies to provide improved and effective system collaboration
- Bridge system gaps to offer a prompt and holistic response
 - Efficiently use scarce resources
- Provide relief to the victim at the earliest possible juncture, stop the abuse, prevent further inappropriate use of funds, restore sense of safety and security

No single agency can do it alone!

Composition of an E-MDT

- E-MDT Coordinator
- Adult Protective Services
- Office for the Aging
- Elder Abuse Prevention Services
- Forensic Accountant
- Geriatric Psychiatrist
- District Attorney's Office
- Law enforcement
- Civil legal attorneys
- Bank/Credit Unions
- Financial Advisors
- Other community agencies

Key Elements to Development of Successful Collaborative Process



- **Developing a core group** who:
 - **share goals and commitment** to projects
 - share **diverse knowledge and expertise**
 - develop an **infrastructure** allowing future collaborative efforts to move forward with ease
 - easily facilitate ongoing, open **communication**
 - **share in decision making**
 - develop and sustain **trust**

The Collaborative Process



Collaborative Partners value **process** equally with **product**

- Spirit of consensus within the collaborative group
- Everyone's opinions are heard
- Everyone is present for important discussions and decisions
- Everyone is kept informed of meeting results

Collaboration Leads to Increased Efficiency and Effectiveness



- Formally cements informal relationship
- Diversity of thinking predicts innovation
- Characterized by mutual reciprocal relationships among the parties involved

References:

A. Michael Dougherty, *Psychological Consultation and Collaboration: In School and Community Settings* (2000)
3rd edition Brooks Cole

"Taking a closer look at community collaboration", by Denys Candy, in *The Rosamond Gifford Community Exchange Forums: Community Collaboration* (newsletter), vol.1, Issue 2, summer 2002.

Role of the Coordinator

- Organize/facilitate meetings
- Track cases
- Consult with referral sources
- Develop linkages
- Provide case consults
- Conduct outreach
- Case research:
 - Search public records
 - Review bank records
 - Review medical records
 - Piece together various aspects impacting a case for follow up presentations

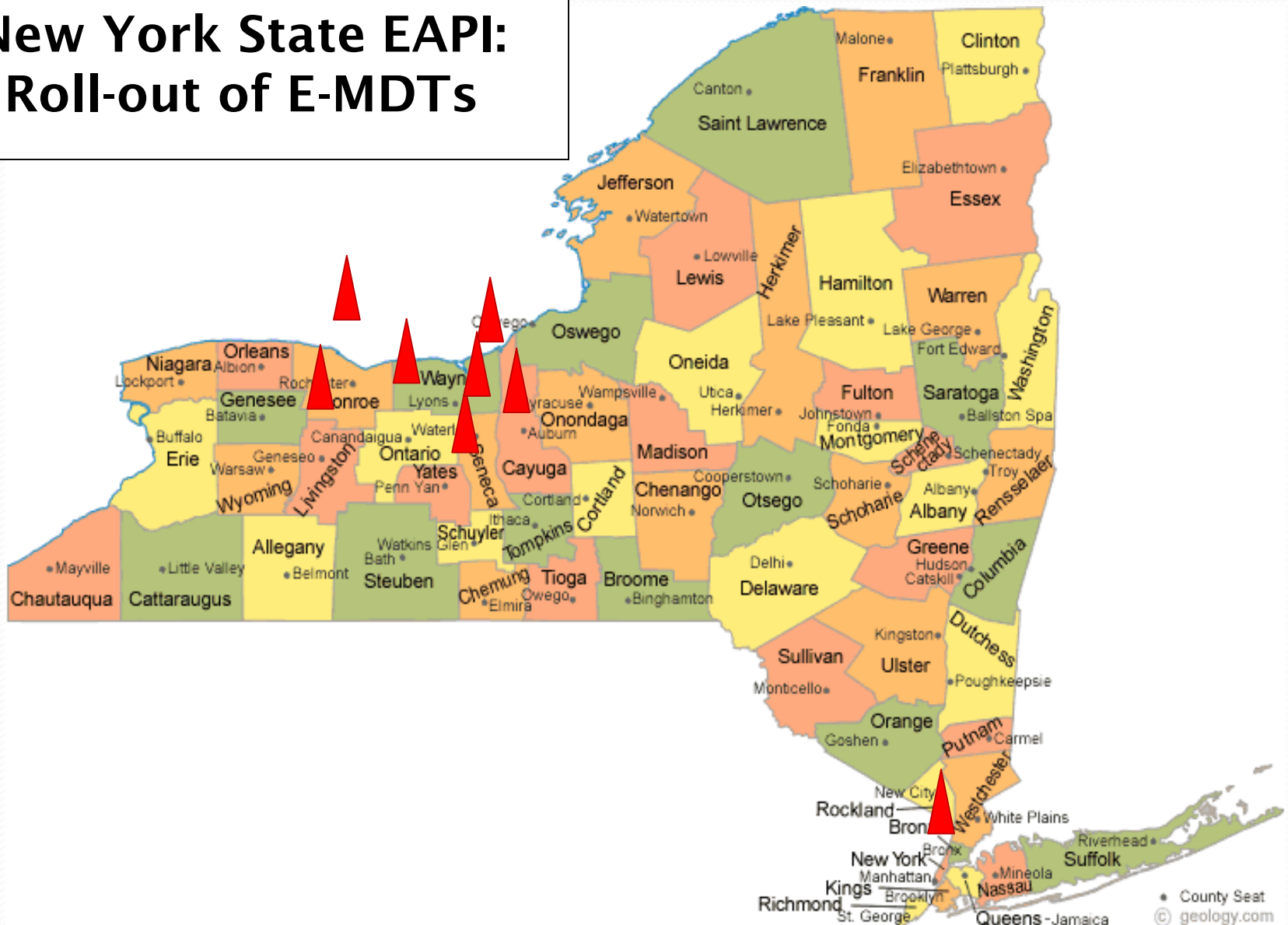
Role of Geriatrician/Geriatric Psychiatrist

- Differential diagnosis
- Case consultations with:
 - Medical/mental health providers
 - DA's Office
 - APS caseworkers
 - Law Enforcement
 - Community organizations
 - Coroner's office
 - Others (e.g., PCPs)
- Medical and capacity evaluations
- Ongoing mental health treatment

Role of Forensic Accountant

- In-depth review of bank, credit card, and investment statements
- Analysis of transactions- what belongs to the victim and what belongs to the suspected perpetrator
- Prepare report of findings
- Provide recommendations
- Testify in court, if needed

New York State EAPI: Roll-out of E-MDTs



Manhattan E-MDT 2014

- Number of E-MDT Meetings: 18
- Number of New Case Presentations: 17
- Number of Follow Up Case Presentations: 28
- Forensic Accountant reviewed: 17
- Prosecutions: 2 pending
- Case Consultations: 128 (April 2013 - December 2014)

Finger Lakes E-MDTs

January – July 2015

Cayuga	Seneca
Livingston	Wayne
Monroe	Yates
Ontario	

Across all seven counties:

- E-MDT Meetings: 23
- New Cases Presented: 29
- Follow Up Cases Presented: 38
- Case Consults: 23
- Forensic Accountant Review: 7
- Law Enforcement Involved: 21
- Arrests: 13 (since inception)

Outcome Examples

- Restitution:
 - Finger Lakes: Court ordered or agreed upon restitution to date: \$514,765, with \$129,258 returned to victims so far
- Finances secured
- Spending of funds on appropriate care or other needs
- Increase in Police Involvement

Aspects to consider with implementation

- Contacts and connections
- Team dynamics
- Participation
- Meeting schedules
- Referral sources
- Availability of resources
- Differences of missions across member agencies



Case Scenarios



THANK YOU

This presentation is provided as part of the Elder Abuse Prevention Interventions federal grant #90EA0004-01-00 from the Administration for Community Living/Administration on Aging awarded to the New York State Office for the Aging.

Presenter Contact Information

Allison Campbell, LMSW

Finger Lakes E-MDT Coordinator
Lifespan of Greater Rochester

(585) 244-8400 ext. 320

acampbell@lifespan-roch.org

Peg Horan, LMSW

Elder Abuse Specialist/MDT Coordinator
New York City Elder Abuse Center

(212) 746-7211

phoran@nyceac.com

Paul Caccamise, LMSW, ACSW

Vice President, Programs
Lifespan of Greater Rochester

(585) 244-8400 ext.115

pcaccamise@lifespan-roch.org