Illinois Department on Aging

Fatality Review Team Advisory Council Meeting

2:00 p.m., February 20, 2020

Members Present:

Chair Diane Michalak (Area 02), Yvonne Anderson (Area 01), Tammy Boose (Area 10); Telly Papanikolaou (Area 03); Loren Carrera (Area 02); Duane Northrup (Area 05), Holly Kozinski (Area 04), Nancy Hinton, (Area 09), Lana Sample (Area 05), Scott Kinley (Area 11), David Mitchell (Area 11), Brenda Fleming (Area 06), Jamie Farrell (Area 13)

Members Absent:

Co-Chair Teva Shirley (Area 08), Mark Thomas (Area 03), Clarissa Palermo (Area 12), Jim Allmon (Area 07), Amy Brown (Area 05)

IDoA:

Deputy Director Lora McCurdy, Division Manager Sue DeBoer, Deputy Division Manager Dana Wilkerson, Legislative Director Samantha Brill. APS staff: Maureen Squires, Claudia Kemple, Troy Yancy, Jaime Spears, Holly Zielke

Meeting called to order at 2:00 p.m.

Motion made by Scott to approve minutes from November 20; seconded by Duane. Meeting minutes unanimously approved.

Introductions:

Dana Wilkerson has joined IDoA as the new Deputy Division Manager over the Office of Adult Protective Services. Dana is a LCSW who joined IDoA from DHS-Office of Mental Health where she worked for nine years. Dana brings a wealth of

expertise on mental health to the Department having also worked in out-patient mental health centers for 20 years.

Samantha Brill is IDoA's Legislative Director. Previously, Samantha was Deputy Director of Organ and Tissue Donation for the Illinois Secretary of State's Office. Prior to that, Samantha worked in the Adult Education and Literacy Program for the Illinois Community College Board.

Two new members were welcomed to the FRT Advisory Council. Tammy Boose is replacing Donna Schnell representing Area 10. Tammy has an MSW and experience as a case manager for the homeless, prior to becoming a caseworker for APS. She has 20 years' experience as a social worker, primarily in the criminal justice system and DCFS. She is now an APS Supervisor.

Jamie Farrell is replacing Jon Hofacker, representing Area 13. Jamie is an LCSW and came to AgeOptions last year after working as an APS caseworker and supervisor at Metropolitan Family Services. Jamie is now working in the Elder Justice Programs at AgeOptions, which encompasses both APS and Ombudsman programs.

Jamie and Tammy both serve as Coordinators for their respective FRTs.

Jon Hofacker left AgeOptions to work for the University of Illinois at Chicago and Donna Schnell remains at SWAN but in a capacity outside APS. Maureen thanked them both for their years of service to APS, FRTs and the Advisory Council.

Jim Allmon, Council member and Chair of the FRT for Area 7, has recently been named Sangamon County Coroner upon the untimely death of Cinda Edwards. Cinda, a clinical nurse, was also a leader on the FRT and offered the use of her office for meetings. Jim was commended for his new role and his professionalism under such difficult circumstances.

Announcements: Lippert Consent Decree:

Maureen shared that the Lippert Consent Decree (III.M.2) directs the Illinois Department of Corrections (IDOC) to perform mortality reviews to identify any deficiencies in the delivery of care and initiate corrections actions in areas

needing improvement within prisons. Recently, IDOC hired new Deputy Chiefs to establish a process to review selected categories of deaths for the purpose of identifying opportunities to improve the access and quality of care provided to the patient-inmates. According to the decree, performing detailed mortality reviews will be a component of an overall Quality Improvement Program. The Deputy Chiefs must report back on their progress to a court monitor.

FRT Updates:

Maureen shared that FRT 5 is researching the use of capacity tools outside of CLOX/MMSE due to a case previously discussed involving a deceased person who had had some capacity but was lacking in capacity to make medical decisions. Current APS procedures include screening clients only for general capacity which can be problematic with clients who seem to be aware of consequences when making most decisions but lacking the same awareness when making medical decisions. Hence, they may be putting their life at risk without being fully aware of that risk. The FRT does recognize there are clients who knowingly make medical decisions that put their life at risk with full awareness of the consequences.

The dilemma has led to a member of the team recruiting University of Illinois social work students to explore what can be done and what instruments to employ when encountering limited capacity. The study is on-going.

In other accomplishments, Jamie Farrell has worked with Maureen to update team members to FRT 13. Recently, 11 individuals were reappointed and 12 were appointed to the team, for a total of 23 members.

Vital Stats Update

Maureen told the Council that an application was downloaded to her computer in December that allowed vital records to be shared with her by the Illinois Department of Public Health. Jamie then transferred the spreadsheet to her computer, narrowed data fields, and, using client name, Social Security Number, location and cause of death, compared it to our client database dating back roughly one decade. Jamie was testing the system using a one-month sample

based on deaths for 2018 (2019 deaths have not yet been released pending "certification" by IDPH) It revealed 300 APS clients who had died. She further narrowed the field by eliminating nursing home deaths, for example, and examining suspicious causes of deaths i.e. ulcers, organisms etc. listed for our clients living at home at the time of his or her death. This caused two deaths to surface that would be appropriate for FRT review, one for FRT 12 and one for FRT 13.

In the FRT 12 case, it appeared to be a case of financial exploitation and it was reported to APS but the individual died before any investigation could take place. It will warrant more information and has been referred. The other was shared with Jamie Farrell for possible case review after a recommendation to obtain more records from the attending medical examiner.

Because Maureen received a new computer after the program was downloaded, it is now scheduled to be reinstalled. Therefore, there has been no further sampling or referrals to FRT during this hiatus.

There was discussion by the Council about contributing factors to deaths that should not be missed, such as sepsis, malnutrition etc. Jaime explained that she reviews for such and does look at how many contacts the deceased had with APS etc. Duane said he would share terminology used by coroners to alert to any suspicious death. Lora said it is important to make sure all the necessary fields are captured; it was decided there be internal meetings held within IDoA to work on this process going forward.

Legislative Update

Samantha gave updates on two pieces of legislation. HB 5272/SB 3890 would require IDoA to work with workforce development providers through the federal Workforce Innovation and Opportunity Act to establish and implement an affirmative action employment plan for the recruitment, hiring, training, and retraining of persons 60 or more years old for jobs.

House Bill 4962/SB 3604 would amend the APS Act and would affect Suspicious Death Reports. Specifically, it states that any person may report information

about the suspicious death of an eligible adult to an agency designated to receive such reports under the Act or to the Department on Aging. If a mandated reporter has reason to believe that the death of an eligible adult may be the result of abuse or neglect, they would report to an agency designated to receive such reports under the Act or to the Department for subsequent referral to the appropriate law enforcement agency and the coroner or medical examiner. The bill is an IDoA-APS initiative.

The above bills are sponsored by Senator Crowe and Representative Stuart, who co-chair the Elder Abuse Task Force.

Federal Waiver – Data Collection:

It was previously emphasized by Lora that the Department's federal waiver demands assurance that the Department is doing all it can to safeguard and protect the health and welfare of participants. To that end, Lora said one strategic priority relates to the enhanced use of data to drive programmatic decisions and improve delivery of services.

Dana talked about the need to gather input and revise the current data collection form used currently by FRTs. It was shared with the Council members as well as templates used by other states as supplied by the American Bar Association.

She also supplied the Council with a "Framework for Root Cause Analysis and Action Plan" which she said may not work for FRT needs but is rather to show an example of how gathering data analytics may lead to corrective action.

Scott said it will be important going forward to use a uniform form to work in concert with an improved FRT database, stating that "you can't manage what you cannot measure."

FY 21 Goals- Establishing Priorities

The Council was surveyed as to establishing priorities for the current year. Troy recommended exploring interstate agreements with neighboring states to help

with the APS referral process. It was also noted that FRTs need more representation from persons with disabilities.

Maureen said many of the recommendations in the database for the current year expose problems outside of APS or the Department; therefore, there needs to be a means to address those. Dana said there also needs to be a mechanism established to report back to FRTs as well as the Council. In short, improvements will follow after some work groups come up with proposals. Holly, Lana, Scott and Duane all volunteered to work on this during the interim between meetings.

Additionally, the Council agreed it will undertake establishing a Mission Statement at its next meeting.

In closing, Maureen asked Council members to share any subject matter or presenters they feel would be appropriate for monthly webinar trainings or the Adult Protective and Advocacy Conference slated for mid-July.

Adjournment

The next meeting is May 21.