Adult Protective Services (APS) Program

An Office of Adult Protective Services Training
August 2024





Illinois' Adult Protective Services Program

The Illinois Adult Protective Services Program is managed by the Illinois Department on Aging and is operated through designated local Adult Protective Services Provider Agencies (APS PAs). These APS PAs include not-for-profit social service agencies, city and county public health departments and senior centers.

Reports can be made to the Illinois Department on Aging,

Adult Protective Services Hotline 1-866-800-1409.

Reports may also be made to the local Adult Protective Services Provider Agency or the local Area Agency on Aging.



Program Purpose

- The goal of Adult Protective Services is to maintain proper health, safety and welfare of older adults and adults with disabilities.
- APS will work with and on behalf of individuals to:
 - 1. Investigate reports of alleged abuse, neglect, self-neglect, and financial exploitation
 - 2.Intervene to prevent further mistreatment; and
 - 3. Allow the individual to remain independent to the maximum degree possible.



Limited Mandatory Reporting 320 ILCS 20/2 & 20/4 (Sections 2 & 4)

- "Mandated reporter" means a designated professional engaged in carrying out their professional duty
- Act Provides Immunity from:
 - Criminal liability
 - Civil liability
 - Professional disciplinary action
- Act Prohibits Retaliation
 - By an employer against an employee for reporting or helping with an investigation



Limited Mandatory Reporting 320 ILCS 20/2 & 20/4 (Sections 2 & 4)

- Mandated reporters include:
- Personnel of the Department of Human Services, the Guardianship and Advocacy Commission, the State Fire Marshal, local fire departments, the Department on Aging and its subsidiary Area Agencies on Aging and provider agencies, and the Office of the State Long Term Care Ombudsman
- For a listing of additional mandated reporters, please refer to 320 ILCS /20



Limited Mandatory Reporting Abuse, Neglect, Financial Exploitation and SelfNeglect

320 ILCS 20/4 (Section 4)

- The reporter's identity is confidential unless the reporter provides written consent for release or there is a court order
- Reporters may remain anonymous. However, as a mandated reporter, anonymous reports will not provide proof that an individual had fulfilled their reporting requirements.



Reportable Events

ILCS 20/2 & ILCS 20/4

- Abuse
 - Physical
 - Sexual
 - Emotional
 - Confinement
- Neglect
 - Passive
 - Willful Deprivation

- Self-Neglect
- Financial Exploitation
- Suspicious deaths



Physical Abuse

The causing of infliction of physical pain or injury to an older person or person with a disability.

- Assault
- Pulling Hair
- Slapping
- Battery

- Burning
- Hitting
- Over-medicating



Sexual Abuse

"Any sexual activity with an eligible adult who is unable to understand, unwilling to consent, threatened, or physically forced to engage in such sexual activity."

Joint Committee on Administrative Rules Title 89 Section 270.210



Emotional Abuse



Verbal assaults, threats of abuse harassment or intimidation.

- > Destruction of Property
- >**Humiliation**
- >Abuses Animals



Confinement

Restraining or isolating an older person or adult with disability for other than medical reasons.

- **≻**Restraining
- ➤ Denies access to phone/mail
- **≻**Isolation
- ➤ Controls activities
- Limits time the elder or person with disability spends with loved ones





Abandonment

"..the desertion or willful forsaking of an eligible adult by an individual responsible for the care and custody of that eligible adult under circumstances in which a reasonable person would continue to provide care and custody. Nothing in this Act shall be construed to mean that an eligible adult is a victim of abandonment because of health care services provided or not provided by licensed health care professionals."



Types of Neglect

Passive Neglect

Title 89 Section 270.210

Failure by a caregiver to provide an eligible adult with the necessities of life including, but not limited to, food, clothing, shelter, or medical care, because of failure to understand the eligible adult's needs, lack of awareness of services to help meet needs, or a lack of capacity to care for the eligible adult.

Willful Deprivation

Title 89 Section 270.210

The deliberate denial to an eligible adult of required medication, medical care, shelter, food, therapeutic devices, or other physical assistance, thereby exposing that person to the risk of physical, mental, or emotional harm. This does not include the discontinuation of medical care or treatment when the eligible adult has expressed a desire to forego such medical care or treatment.

Self-Neglect

Title 89 Section 270.210

A condition that is the result of an eligible adult's inability, due to physical or mental impairments, or both, or a diminished capacity, to perform essential self-care tasks that substantially threaten his or her own health, including: providing essential food, clothing shelter, and health care; and obtaining goods and services necessary to maintain physical health, mental health, emotional well being, and general safety. Includes compulsive hoarding which significantly impairs the performance of essential self-care tasks or otherwise substantially threatens life or safety.



Financial Exploitation

"Financial exploitation is the use of an eligible adult's resources by another to the disadvantage of that adult or the profit or advantage of a person other than that adult."



Joint Committee on Administrative Rules Title 89 Section 270.210



See It Report It

- If you are the one to see the abuse, neglect, self-neglect or exploitation you should be the one to report it.
- The report taker will ask questions that a person who did not witness the abuse, neglect, self-neglect or exploitation may not know.





Criteria of APS to accept a report of alleged or suspected ANE

There must be an alleged victim who is 60 years of age or an adult with a disability, age 18-59; 320 ILCS 20/2 (e)

Allegations must meet the criteria and definition for abuse, neglect or financial exploitation; 320 *ILCS* 20/2 (a)(g)(i-5) (f-1)

The alleged abuse must have occurred within the past twelve months, or, if the abuse occurred prior to the previous twelve months, the effects of the abuse must continue to adversely affect the alleged victim; $320 ILCS 20/4 (\alpha-5)$



Criteria of APS to accept a report of alleged or suspected ANE

The alleged abuse or neglect occurred outside of a facility and not under facility supervision by a family member, caregiver, or another person who has a continuing relationship with the alleged victim; 320 ILCS 20/2 (e)

The alleged financial exploitation was perpetrated by a family member, caregiver or another person who has a continuing relationship with the alleged victim, but who is not an employee of the facility where the alleged victim resides; 320 *ILCS* 20/2 (d)

The alleged abuse must have been caused by an identifiable person other than the alleged victim; who has continued access to the alleged victim 320 ILCS 20/2 (e)



Information needed to make a report

- Helpful information includes:
 - Alleged victim's and alleged abuser's names, addresses, phone numbers, sex, age, and general conditions
 - Circumstances related to the suspicion of abuse, neglect, and/or financial exploitation
 - If the alleged victim is in immediate danger, the best time to contact the person, if the person is aware of the report, and if there is any danger to the worker going out to investigate
 - Name, telephone number, and profession of the reporter
 - Names of others with information about the situation
 - Whether the reporter is willing to be contacted again
 - Any other relevant information.



Adult Protective Services Program Components

Services Provided:

- 1. Intake
- 2. Comprehensive Assessment
- 3. Case Plan and Interventions
- 4. Follow-up Monitoring



Defining Urgency of Response

Title 89 Section 270.240

>Priority 1 (24 hrs)

Serious physical harm or immediate danger

>Priority II (72 hrs)

Less serious consequences than Priority 1

>Priority III (7 Days)

Emotional abuse, financial exploitation, or with no immediate threat or harm

*Some exceptions may apply depending on the circumstance(s).



What Happens After a Report is Made?

- Information provided by the mandated reporter is forwarded to the APS provider agency in the alleged victim's coverage area.
- There are 37 provider agencies across 13 planning and service areas.
- The APS provider agency will make a follow-up call to the mandated reporter, if agreeable, to gather any additional information available.
- The APS provider may then reach out to other collaterals before initiating a face-to-face visit with the alleged victim.



Types of Interventions

Immediate/Short-Term/Crisis

- Early Intervention Services
 - Medical Care
- Law Enforcement Interventions
 - Orders of Protection

Long Term

- Medical/Health
 - Social
- Legal/Law Enforcement Involvement
 - Supportive Counseling



Case Closure

- Individual declines services
- Individual deceased
- Permanent placement in a LTC facility or group home
- Individual moved
- Individual no longer at risk
- Administrative closure



Report!



- Even if you are unsure if the report meets criteria, report it!
- It's always better to make the report and let the report taker determine if the report meets criteria.
- Even if you believe another report was already made, report it!
- The other report may not have been made and then someone might not receive needed assistance.
- Remember you are a mandated reporter. The only way to be sure a report was made, is to make it!



Suspicious Death Reports

Title 89 Section 270.210 and 270.241

- Suspicious death reporting is not a part of the mandated reporting requirements. However, APS does accept suspicious death reports for all eligible adults whose death is suspected to be the result of abuse, neglect, and/or exploitation.
- Upon receipt of a suspicious death report, the APS Provider Agency will immediately report the matter to both law enforcement and the coroner or medical examiner in the jurisdiction where the death occurred.

Joint Committee on Administrative Rules Title 89 Section 270.210 & 270.241



Suspicious Death Reporting

Common indicators that death <u>may be</u> related to abuse, neglect, and/or financial exploitation:

- Brain damage
- Loss or substantial impairment of a bodily function or organ
- Bone fractures
- Extensive burns
- Substantial disfigurement

- Evidence of sexual assault
- Serious bodily injury
- Extensive swelling or bruising
- Evidence of severe neglect
- Etc.





Report

Adult Protective Services 24/7 Hotline:

1-866-800-1409



Your Responsibility After a Report is Made

- Recognize that you may feel different emotions such as guilt, remorse, anxiety, sadness, etc.
- Discuss these feelings with your supervisor.
- Do not engage in conversation regarding the report unless directed to do so by your supervisor.
- You will receive a call from APS to verify your report.
- Remember that APS considers the reporter's identity to be confidential.
- Continue providing services as usual unless directed otherwise by your supervisor.



Contact Information

Office of Adult Protective Services

One Natural Resources Way, Springfield, IL 62702

Aging.APS@Illinois.gov





Additional Questions

For more information or to schedule in-person training please contact:

Office Adult Protective Services
Illinois Department on Aging
One Natural Resources Way, #100
Springfield, IL 62702-1271

E-mail: <u>Aging.APSTraining@Illinois.gov</u>

Senior HelpLine: 1-800-252-8966

