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agency shall be available to respond 24 hours per day, seven days per week. The amendment was signed into law August 13, 2007, and will become effective when the rules and procedures are finalized.

Elder Abuse Fatality Review Team.

Effective June 1, 2008, the Elder Abuse and Neglect Act was amended to include provisions, by giving IDoA, or any other State or county agency with IDoA approval, the right to establish regional interagency elder abuse fatality review teams. The purpose of an Elder Abuse Fatality Review Team is to review suspicious deaths of persons aged 60 years of age or older who reside in a domestic living situation.

FY 2008 Accomplishments

B*SAFE (Bankers and Seniors Against Financial Exploitation).

Fifty-three trainings were conducted by elder abuse caseworkers to bank personnel and elder adult groups throughout the state on how to identify financial exploitation, scams and other types of abuse. The training included how to follow simple guidelines for reporting suspicious circumstances to the IDoA Elder Abuse and Neglect Program and to law enforcement.

21st Annual Elder Rights Conference.

On July 17-19, 2007, IDoA sponsored its 21st annual conference. Nationally known speakers presented on elder abuse, long-term care ombudsmen, and legal issues to over 300 participants. The conference also gave recognition to an outstanding elder abuse caseworker, recognizing an individual who demonstrates integrity, compassion and commitment to vulnerable older adults in the community.

Break the Silence Campaign. In support of Elder Abuse Awareness Month in Illinois, IDoA continued its public awareness efforts with the "Break the Silence" campaign. To assist in outreach efforts, IDoA provided Elder Abuse Provider Agencies and RAAs funding and updated toolkits.

Elder Abuse Fatality Review (EAFR)

Teams Manual. As a result of the amendment to establish an EAFR Team, the EANP, along with professionals who served on the Kane County Elder Fatality Review Team, developed a how-to manual to guide Elder Abuse Provider Agencies on forming an EAFR Team.

Protocol for Law Enforcement. In partnership with the Illinois Family Violence Coordinating Council, IDoA convened a statewide Responding to Elder Abuse Committee. The purpose of the committee was to identify and develop resources to assist the courts, criminal justice systems, and communities in responding to the needs of abused seniors. As a result of the partnership, a protocol was developed to assist law enforcement in responding to victims of abuse, neglect and exploitation.

How does a person make an elder abuse report?

Anyone who suspects that an older adult is being mistreated should call the Illinois Department on Aging

Elder Abuse Hotline:

1-866-800-1409

TTY: 1-888-206-1327

All calls are confidential.

State of Illinois Department on Aging

421 East Capitol Avenue, #100
Springfield, Illinois 62701-1789

Senior HelpLine: 1-800-252-8966

www.state.il.us/aging

The Illinois Department on Aging does not discriminate in admission to programs or treatment of employment in compliance with appropriate State and Federal Statutes. If you feel you have been discriminated against, call the Senior HelpLine at 1-800-252-8966, 1-888-206-1327 (TTY).

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State of Illinois
Pat Quinn, Governor

Illinois Department on Aging
Charles D. Johnson, Director



Elder Abuse and Neglect Program Annual Report FY 2008

Illinois Department
on Aging



How many reports of elder abuse were received?

During the period of July 1, 2007, through June 30, 2008, there were **10,583** reports of elder abuse received by the program (includes case transfers). The city of Chicago received the largest number of reports, **2,088**, followed by Suburban Cook County with **1,627**. The number of reports received per 1,000 older adults is highest for elder abuse reports in the southern part of Illinois around Carbondale and the southeastern area around Mt. Carmel, where **828** and **242** reports were received respectively.

What is elder abuse?

Elder abuse refers to the following types of mistreatment of any Illinois resident 60 years of age or older who lives in the community and is abused by another person.

Physical Abuse — causing the infliction of physical pain or injury to an older adult.

Sexual Abuse — touching, fondling, or any other sexual activity with an older adult when the older adult is unable to understand, unwilling to consent, threatened, or physically forced.

Emotional Abuse — verbal assaults, threats of abuse, harassment, or intimidation so as to compel the older adult to engage in conduct from which s/he has a right to abstain or to refrain.

Confinement — restraining or isolating an older adult for other than medical reasons.

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

Willful Deprivation — willfully denying assistance to an older adult who requires medication, medical care, shelter, food, therapeutic device, or other physical assistance, thereby exposing that person to the risk of harm.

Financial Exploitation — the misuse or withholding of an older adult's resources to their disadvantage and/or the profit or advantage of another person.

Illinois Law

The Illinois Department on Aging (IDoA) administers the statewide Elder Abuse and Neglect Program (EANP), under the authority of the Elder Abuse and Neglect Act (320ILCS 20/1 et seq.) to respond to reports of alleged mistreatment of any Illinois citizen 60 years of age or older who lives in the community.

The Elder Abuse and Neglect Program is locally coordinated through 43 provider agencies, which are designated by the Regional Administrative Agencies (RAAs) and IDoA. All Elder Abuse Caseworkers are trained and certified by IDoA, which promulgates the program's policies and procedures and oversees the monitoring of services through the RAAs.

Depending on the nature and seriousness of the allegations, a trained caseworker will make a face-to-face contact with the victim within the following time frames: 24 hours for life threatening situations, 72 hours for most neglect and non life threatening physical abuse reports, and 7 calendar days for most financial exploitation and emotional abuse reports.

The caseworker has 30 days to do a comprehensive assessment, both to determine if the client has been mistreated and to determine his/her need for

services and interventions. If the abuse is substantiated the caseworker involves the older adult in the development of a case plan to alleviate the situation. The caseworker always attempts to utilize the least restrictive alternatives that will allow the older adult to remain independent to the degree possible.

Limited Mandatory Reporting. This applies to persons delivering professional services to older adults in the following fields: social services, adult day service, law enforcement, education, medicine, state service to seniors, and social work. The requirements for limited mandatory reporting apply when the reporter believes that the older adult is not capable of reporting the abuse himself /herself. The law also encourages any person to report voluntarily for an older adult, and provides immunity from liability and professional disciplinary action for anyone making such an elder abuse report in good faith.

Self-Neglect. Effective January 1, 2007, the Elder Abuse and Neglect Act was amended to include self-neglect. The amendment established that responding to such cases would be contingent upon sufficient funding. In the absence of sufficient funding for statewide implementation, elder abuse provider agencies began receiving reports of self-neglect and referred the reports to the appropriate agency(ies) for follow-up.

Self-neglect means 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.

24 Hour Response. In the case of a report of alleged or suspected abuse or neglect that places an eligible adult at risk of injury or death, a provider

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