

Elder Abuse Fatality Review Team.

Effective June 1, 2008, the EAN Act was amended to include provisions for the Department, or any other State or county agency with Department approval, the right to establish regional interagency Elder Abuse Fatality Review Teams. The purpose of an Elder Abuse Fatality Review Team (EAFRT) is to review suspicious deaths of persons 60 years of age or older who reside in a domestic living situation. The counties of Kane, DuPage and Madison each have a EAFRT.

FY 2009 Accomplishments

B*SAFE (Bankers and Seniors Against Financial Exploitation). Twenty-three trainings were conducted by elder abuse caseworkers to bank personnel and senior 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 Department's Elder Abuse and Neglect Program and to law enforcement.

22nd Annual Elder Rights Conference. The Department sponsored its 22nd annual Elder Rights Conference (ERC) in conjunction with the National Adult Protective Services Association's (NAPSA) Annual Conference August 26-29, 2008 in Chicago. This was the first time the ERC included topics to enhance attendees' knowledge and preparedness in addressing violence committed against persons with disabilities who are 18 years of age and older. Dr. Bertice Berry, the keynote speaker, enlightened and motivated attendees, which started the conference off on a very high and successful note. Over 500 people throughout the country attended the conference.

Compulsive Hoarding. Dr. Christiana Bratiotis presented a pre-conference intensive entitled "Compulsive Hoarding: Understanding, Assessing and Intervening" December 10, 2008, at the Governor's Conference on Aging in Chicago. The session provided attendees with a better understanding of compulsive hoarding including mental health diagnostic criteria,

demographics, prevalence, behavioral, emotional, and belief/meaning of the problem. Strategies for intervening and successful community models were also discussed. Elder abuse caseworkers and supervisors who attended were provided with 5.5 hours toward re-certification training.

Break the Silence Campaign. In support of Elder Abuse Awareness month in Illinois, the Department continued its public awareness efforts with the "Break the Silence" campaign. Elder Abuse Provider Agencies and the Regional Administrative Agencies were provided with funding and updated toolkits to assist in outreach efforts.

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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Illinois Department on Aging
Charles D. Johnson, Director

Elder Abuse & Neglect Program

Annual Report
FY 2009

Illinois Department
on Aging



Elder Abuse and Neglect

FISCAL YEAR 2009
ANNUAL REPORT

How many reports of elder abuse were received?

During the period of July 1, 2008, through June 30, 2009, there were **10,848** reports of elder abuse received by the program (includes case transfers). The city of Chicago received the largest number of reports, **2,028**, followed by Suburban Cook County with **1,707**.

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 42 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. The EANP received 1,298 self-neglect reports in Fiscal Year 2009.

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 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.