

Adult Protective Services (APS) Program Mandated Reporter Training

Office of Adult Protective Services Training
May 2023



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.

Guiding Principles

- Self Determination
- Advocacy Intervention Model
- Collaboration
- Intervention

Guiding Principles: Self Determination

- Competent adults have the right to:
 1. Decide how and where to live
 2. Choose whether to accept services and support
 3. Make their own decisions
 4. Develop personal relationships
- Allow room for unique personal and lifestyle choices which do no harm
- Competent adults have a right to privacy

Guiding Principles: Advocacy

- Recognize that the individual is in a vulnerable situation
- Assist the individual through interventions
- Serve as an advocate of the individual's rights
- Assist the individual in obtaining needed services
- Support the individual's right to self-advocacy

Guiding Principles: Collaboration

- Facilitate collaboration with community members to provide the individual with the broadest range of options, improve access to services, and increase the likelihood that they will receive help.
- Work with multi-disciplinary team members to address the varied needs of individual's served by utilizing the team member's individual talents, knowledge, and skills.

Guiding Principles: Intervention

- Involve the individual in decision making
- The individual's interest comes first
- Respect the individual's right to confidentiality
- Be direct in discussing the situation

Limited Mandatory Reporting

320 ILCS 20/2 & 20/4 (Sections 2 & 4)

- Combines voluntary and mandatory reporting for abuse, neglect and financial exploitation
- A mandated report must be made within 24 hours of suspicion
- A mandated report must be made when it is believed that the eligible adult, who because of a disability or other condition or impairment is unable to seek assistance for themselves and has within the previous 12 months, been subjected to abuse, neglect or financial exploitation by an identifiable individual with whom the eligible adult has continued contact.

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
- The law exempts attorneys, including legal services providers and bankers from mandatory reporting
- Provides for voluntary reporting for self-neglect
- Act Provides Immunity from:
 - Criminal liability
 - Civil liability
 - Professional disciplinary action
- Act Prohibits Retaliation
 - By an employer against employee for reporting or helping with investigation

Limited Mandatory Reporting

320 ILCS 20/2 & 20/4 (Sections 2 & 4)

For a listing of mandated reporters

See the APS Act: 320 ILCS 20/2 & 20/4 (Sections 2 & 4)



Limited Mandatory Reporting Abuse, Neglect, Financial Exploitation and Self-Neglect

320 ILCS 20/4 (Section 4)

- The reporter's identity is confidential unless, the reporter provides a 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
- Abandonment
- 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.”

Joint Committee on Administrative Rules Title 89 Section 270.210 & 270.240

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

May, 2023

Emotional Abuse

“Verbal assaults, threats of abuse harassment or intimidation.”

Confinement

“Restraining or isolating an individual for other than bona fide medical reasons.”

Neglect

“Another individual’s failure to provide an eligible adult with or willful withholding from an eligible adult the necessities of life including, but not limited to, food, clothing, shelter or health care.”

Types of Neglect & Self 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 exposes that person to 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.

Abandonment

“Abandonment is defined as 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.”

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.”



Criteria for 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 (a-5)*

Criteria for 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)

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

A reporter need only have a “suspicion” that the allegation(s) occurred. Proof is not required.



Helpful Reporting Information

- 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
- If there is any danger to the worker going out to investigate

Helpful Reporting Information

- The name, telephone number, and profession of the reporter
- The names of others with information about the situation
- Whether the reporter is willing to be contacted again
- Any other relevant information

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.

Suspicious Death Reporting

Common indicators that death may be 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
- Withholding of life-sustaining medication(s)

Reporting Process

If you have questions or concerns about the reporting process, please contact:

Aging.APS@illinois.gov

Please note: APS Reports are considered confidential. Information may not be available to provide to reporters after intake.

Defining Urgency of Response

Title 89 Section 270.240

Priority I (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

May, 2023

*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 36 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 others with information before initiating a face-to-face visit with the alleged victim.

APS Program Components

Services Provided:

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

Goals of Casework and Follow-Up

- Provide long-term support and intervention to prevent further abuse/neglect/self-neglect/financial exploitation
 - Development of a case plan
 - Arranging for services/interventions in the case plan
 - Monitoring progress in the case

Case Closure

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

How to Get Involved

- ▶ Multidisciplinary Teams (M-Teams)
 - ▶ Assist caseworkers with complex assessments
- ▶ Fatality Review Teams (FRT)
 - ▶ Review suspicious deaths for the purpose of reducing risks in similar situations

For information, please contact Aging.APS@illinois.gov



Report

1-866-800-1409



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: Aging.APS@Illinois.gov

1-800-252-8966