

Guideline for Elder Abuse and Neglect

“Making our communities healthy”



Limitations

Clinical Practice Guideline (CPG) materials are provided for the educational benefit of contracted providers of Fallon Health. This document is a guide, and is not meant to replace any practices based on clinical judgement, experience or specific aspects of individual patient situations.

Goals

- Provide effective and efficient criteria to assess elderly patients for abuse or neglect.
- Provide resources for the accurate identification and timely reporting of elder abuse and neglect.

Timeline

Date final draft approved: November 2018

Available to Fallon Health providers: January 2019

Last reviewed: October 2019



Elder Abuse and Neglect

A growing need exists to assist providers to assess elder abuse or mistreatment. Rather than relying on specific screening tools, this guideline is provided to raise awareness of elder abuse for clinicians.

Types of elder abuse	Definition	Indicators	Examples
<i>Physical</i>	Willful infliction of physical pain or injury or unnecessary restraint.	Unexplained bruising, wounds or welts, cigarette burns or other injuries including fractures or sprains. Delays between injury or illness and assessment.	Slapping, hitting, kicking, force-feeding, restraint, striking with objects.
<i>Psychological</i>	Willful infliction of emotional harm or mental anguish.	Sense of resignation or hopelessness: passive, helpless, withdrawn behavior: anxious, trembling, fearful behavior.	Verbal aggression or threat, threats of institutionalization, social isolation, humiliating statements.
<i>Sexual</i>	Willful non-consensual sexual contact.	Consider evidence of sexual trauma or sexually transmitted diseases found on examination.	Sexual suggestive talk, forced sexual activity, touching, fondling with a non-consenting competent or incompetent person.
<i>Financial exploitation</i>	Theft, fraud, misuse or neglect of authority, and use of undue influence over an older person's money or property.	Unexplained changes in Power of Attorney, wills or legal documents.	Theft of checks or money, coercion to deprive the elder of his or her assets such as forcible transfer of property.
<i>Neglect by others or self</i>	Failure by caregiver or self to provide for safety, physical or emotional needs.	Unclean appearance, underweight, frail, dehydration. Unpaid bills, threats to disconnect utilities (e.g. electricity, phone, water, heating).	Failure to provide adequate food, clothing, shelter, medical care, hygiene, or social stimulation.
<i>Abandonment</i>	Desertion of a vulnerable elder by anyone with a duty of care.	Evidence that a caretaker has withdrawn care precipitously.	

Risk Factors for Elder Abuse and Neglect

Domain	Risk factor
<i>Individual characteristics</i>	Advanced age (over 70) Gender (women)
<i>Physical and emotional health</i>	Behavioral health disorder Impaired cognitive function Impaired function (difficulty with activities of daily living) Chronic disease Increasing care needs
<i>Social factors</i>	Isolation Dependency on caregiver Potentially abusive or exploitative caregiver(s)
<i>Economic factors</i>	Evidence of financial exploitation



Reporting Elder Abuse

Elder abuse reports may be made to the appropriate designated public service agency or the Statewide Elder Abuse Hotline. Anyone can make an elder abuse report. However, the law requires certain professionals to report suspected incidences of abuse.

Mandated reporters who fail to make elder abuse reports when appropriate are subject to a fine up to \$1,000. In addition, the law provides mandated reporters with immunity from any civil or criminal liability that otherwise could result from making a report, provided the reporter did not commit the abuse. Persons who are not mandated reporters have the same immunity, as long as they make a report in good faith.

Phone numbers to report suspected elder abuse, neglect or exploitation

<i>Massachusetts</i>	Massachusetts Elder Abuse Hotline: 1-800-922-2275
<i>Connecticut</i>	Connecticut National Adult Protective Services Association: 1-888-385-4225
<i>New Hampshire</i>	New Hampshire Elder Abuse and Financial Exploitation Unit: 1-800-949-0470
<i>Rhode Island</i>	Rhode Island Division of Elderly Affairs Protective Services: 1-401-462-3000



Additional Information

For additional, up-to-date information about elder abuse and neglect, including 651 CMR 5: Elder Abuse Reporting and Protective Services Program, Mandated Reporter forms and legal assistance for elders, visit the Mass.gov Executive Office of Elder Affairs (EOEA) website at <https://www.mass.gov/orgs/executive-office-of-elder-affairs> and search “elder abuse.”

The National Center on Elder Abuse (NCEA) and its affiliates also publish materials to educate consumers about elder abuse prevention and intervention, including cultural issues surrounding the mistreatment of elders, faith-based outreach and resources for caregivers, available by topic at <https://ncea.acl.gov/>



References

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- Elder Abuse. American Psychological Association. 2019, <https://www.apa.org/pi/prevent-violence/resources/elder-abuse.aspx>
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