



Oregon Attorneys' Mandatory Duty to Report Elder Abuse

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Multnomah County Circuit Court
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1st Annual Attorney General's
Elder Abuse Conference
January 26, 2016



Changing Demographics



- In 2014, an estimated 16 percent of Oregonians were 65 or older.
- In 2030, an estimated 20 percent of Oregonians will be 65 or older.
- CDC estimates Oregonians have 15 expected "healthy" years beyond age 65.
- Average Oregonian's life expectancy is 84.3 years.



Reporting Duty

- As of January 1, 2015, all attorneys are mandatory reporters of elder abuse. See HB 2205 (2013).
- Attorneys remain mandatory reporters of
 - Child abuse, ORS 419B.005(3)(m);
 - Abuse of adults with mental illness or developmental disabilities, ORS 430.735(12)(i); and
 - Abuse of long-term care resident, *depending on relationship with resident*, ORS 441.630(6)(i).



Other Mandatory Reporters

- (a) Physician or physician assistant licensed under ORS chapter 677, naturopathic physician, or chiropractor, including any intern or resident.
- (b) Licensed practical nurse, registered nurse, nurse practitioner, nurse's aide, home health aide or employee of an in-home health service.
- (c) Employee of the Department of Human Services or community developmental disabilities program.
- (d) Employee of the Oregon Health Authority, county health department or community mental health program.
- (e) Peace officer.
- (f) Member of the clergy.
- (g) Regulated social worker.
- (h) Physical, speech or occupational therapist.
- (i) Senior center employee.
- (j) Information and referral or outreach worker.
- (k) Licensed professional counselor or licensed marriage and family therapist.
- (l) Member of the Legislative Assembly.
- (m) Firefighter or emergency medical services provider.
- (n) Psychologist.
- (o) Provider of adult foster care or an employee of the provider.
- (p) Audiologist.
- (q) Speech-language pathologist.
- (r) **Attorney.**
- (s) Dentist.
- (t) Optometrist.
- (u) Chiropractor.
- (v) Personal support worker, as defined by rule adopted by the Home Care Commission.
- (w) Home care worker, as defined in [ORS 410.600](#).

ORS 124.050(9)



Legislative Purpose

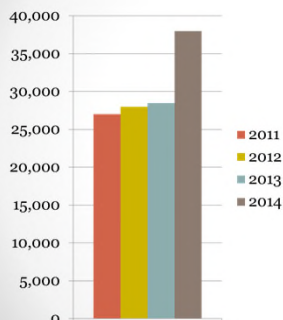
- "The Legislative Assembly finds that for the purpose of preventing abuse, safeguarding and enhancing the welfare of elderly persons, it is necessary and in the public interest to require mandatory reports and investigations of allegedly abused elderly persons."

ORS 124.055






Adult Abuse in Oregon




- 2014
 - Over 38,000 reports of potential abuse
 - 18,185 allegations of abuse investigated
 - More than half living in the community
 - 4,544 substantiated findings of abuse
 - 4,208 victims (multiple abuses / incidents)







2013 Complaint Outcomes in the Community

2013 Outcomes	Incidence
Risk reduced	673
Victim declined intervention	442
Issue resolved	429
Referred to District Attorney	369
Accepted services	235
Entered care setting	223
Guardian / Conservator appointed	112
Victim deceased	56
Moved out of the area	42
Services not available	35



Elder Abuse Fatality Review Task Force

- Purpose is to foster examination of and improvement in the response to elder abuse fatalities
- Program Participants:
 - Multnomah County Circuit Court
 - Oregon Department of Justice
 - Multnomah District Attorney's Office
 - Adult Protective Services
 - Multnomah Sheriff's Office
- Modeled on Domestic Violence Fatality Review Teams, ORS 418.712





Your Elder Abuse Reporting Duty

If you have:


- Reasonable Cause to Believe;
- Elder* Abuse Has Occurred; and
- Contact with Elder or Abuser

*Person 65 or older

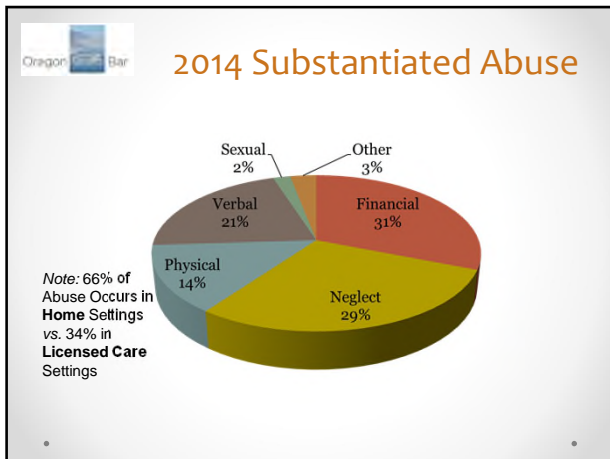
Then You **MUST** Report
UNLESS an Exception Applies.

Duty exists 24 hours a day, 7 days a week.

ORS 124.060



Abuse Has Occurred



Oregon State Bar

Financial Exploitation

- **Wrongfully taking** the assets, funds or property belonging to or intended for the use of an elderly person or a person with a disability. (See OAR 411.020-0002(1)(e))
- **Failing to use income or assets effectively** for support and maintenance of person.
- **Misappropriating, misusing or transferring** without authorization any money from any account
- **Alarming** an elderly person or a person with a disability by conveying a threat the person would reasonably believe.

ORS 124.050(4)

Oregon State Bar

Neglect

"Failure to provide basic care or services that are necessary to maintain the health or safety of an elderly person." ORS 124.050(7)

"...assumed responsibility or a legal or contractual agreement..." OAR 411-020-0002 (1)(b)(A)(iii)

Religious exception, ORS 124.095



Verbal Abuse



- ORS 124.050(13)
.. to threaten significant physical or emotional harm to an elderly person or a person with a disability through the use of
 - Derogatory or inappropriate names, insults, verbal assaults, profanity or ridicule; or
 - Harassment, coercion, threats, intimidation, humiliation, mental cruelty or inappropriate sexual comments.



Physical Abuse & Abandonment

- Abandonment
 - "... including desertion or willful forsaking of an elderly person or the withdrawal or neglect of duties and obligations owed an elderly person by a caretaker or other person." ORS 124.050(1)(c).
- Physical injury or pain
 - "Any physical injury to an elderly person caused by **other than accidental means**, or which appears to be **at variance** with the explanation given of the injury." ORS 124.050(1)(a).
 - Willful infliction of physical pain or injury upon an elderly person. ORS 124.050(1)(d)



Sexual Abuse

- Sexual contact between employee or paid caregiver and elderly person served.
- Any sexual contact achieved through force, trickery, threat or coercion.
- **Exception** for consensual sexual contact with paid caregiver. ORS 124.050(11)(b).
- Sexual Abuse, ORS 124.050 (11)(a), (1)(h)
 - Nonconsensual sexual contact
 - Rape, sodomy, unlawful sexual penetration, public indecency, private indecency, incest.
 - Verbal or physical harassment of a sexual nature or sexual exploitation.



Seclusion & Restraint

- Wrongful use of a physical or chemical restraint
 - "excluding an act of restraint prescribed by a physician licensed under ORS chapter 677 and any treatment activities that are consistent with an approved treatment plan or in connection with a court order." ORS 124.050(1)(j)
- Involuntary seclusion
 - "...for the convenience of a caregiver or to discipline the person." ORS 124.050(1)(i)





Warning Signs of Abuse

- Any unexplained injury that doesn't fit with the given explanation of the injury.
- The elder is not given the opportunity to speak for themselves without the presence of the caregiver.
- Being extremely withdrawn and non communicative or non responsive.
- Unpaid bills, overdue rent, utility shut-off notices.





Reasonable Cause to Believe

What is Reasonable Cause?

- DHS advice is to report any "reasonable suspicion of abuse."
- Reasonable suspicion is more than a hunch – ability to point to articulable facts based on totality of the circumstances.
- Court may look to "whether the evidence creates a reasonable suspicion of child abuse, not whether abuse in fact occurred or even probably occurred," *Berger v. SOSCF*, 195 Or App 587 (2004) (interpreting analogous child abuse reporting provision).



Contact with Elder or Abuser



What is Contact?

- Contact need not be to be linked to abuse
- Can have contact before or after learning of abuse
- Direct vs. Indirect Contact?
 - Oregon Attorney General interpreted "contact" element of child abuse reporting requirement to require more than board members' receipt of information about abuse through board because acquisition of information was too indirect.
AG Op. No. 5543
 - Email or phone?
- No statutory definition or case law interpreting





Then, Must Report If No Exception Applies

Exception Certain Client Confidences



- **Attorney-Client Privileged** under ORS 40.225 (OEC 503) **AND/OR**
- **Information communicated during representation that is detrimental to client** if disclosed (reconciles RPC 1.6 duty)



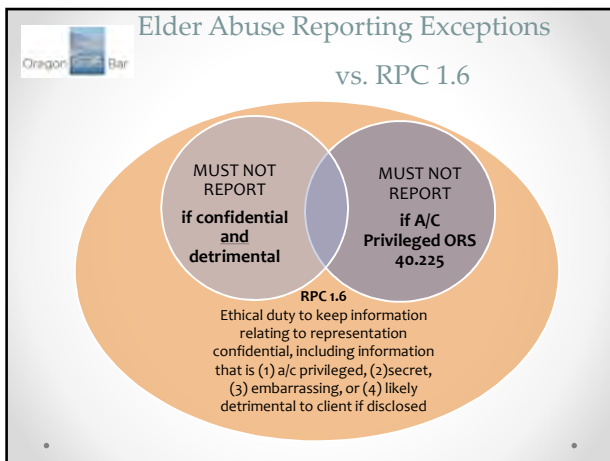
Your Ethical Duty

RPC 1.6(A) REQUIRES LAWYERS TO PRESERVE CONFIDENCES

- ✓ Attorney-client privileged information **AND**
- ✓ Other information gained during course of representation **IF**
 - ✓ Client requests to keep secret;
 - ✓ Embarrassing if disclosed; or
 - ✓ Likely detrimental to client if disclosed.

RPC 1.6(A),(B) ALLOW LAWYERS TO REVEAL CONFIDENCES IF

- ✓ Client consents;
- ✓ Required by law (including ORS 419B.010 et seq.);
- ✓ Client intends to commit future crime; or
- ✓ Necessary to prevent reasonably certain death or substantial body harm.



To Report or Not to Report?

MUST REPORT	MUST NOT REPORT	MAY REPORT
If you have reasonable cause to believe that elder abuse has occurred and you have had contact with elder or abuser	If you have reasonable cause to believe that elder abuse has occurred and you have had contact with elder or abuser	If you have reasonable grounds to believe that elder abuse has occurred, you report in good faith,
AND the information on which you would base your report is (1) not attorney-client privileged or (2) if confidential under RPC 1.6, would not be detrimental to client if disclosed.	BUT the information on which you would base your report is <u>either</u> (1) attorney-client privileged (ORS 40.225), or (2) is confidential and would be detrimental to your client if disclosed.	AND the information is confidential under RPC 1.6
		BUT your client consents, <u>or</u> reporting is necessary to prevent reasonably certain death or substantial bodily harm or to prevent client's future crime. RPC 1.6.

Nuts & Bolts of Reporting

- **Immediately** = **without delay** to DHS or law enforcement
- Oral report required
- Give as much as information as possible
- Explain allegation of abuse

Reporting Hotline:
1-855-503-SAFE

Or DHS Branch Offices:
<http://www.oregon.gov/dhs/spwpd/pages/offices.aspx>



Report Should Include ...

- Explanation given for the abuse.
- Any other information which the person you think might be helpful in establishing the cause of the abuse and the identity of the perpetrator.
- Names and addresses of the elderly person and any persons responsible for the care of the elderly person.
- Nature and the extent of the abuse (including any evidence of previous abuse).

ORS 124.065(1)



Behind the Scenes

- DHS
 - Screening
 - Investigation and Evaluation (Substantiated, Unsubstantiated, Inconclusive)
 - Follow-up with Reporter
- Possible Law Enforcement Involvement



Immunity & Anonymity

- Civil immunity if
 - Report made in good faith and
 - Reasonable grounds for report
 - Anonymity of Reporter
- ORS 124.075, 124.085, 124.090





Consequences

- Class A violation (fine)
- Failure to perform duties of office
- Tort liability
 - Failure to protect from foreseeable harm? Negligence per se?
 - ORS 124.110?
- Ethics violation – not in most cases





Related Laws?



- Family Abuse Prevention Act, ORS 107.700 to 107.732
- Elderly Persons and Persons with Disabilities Prevention Act, ORS 124.000 to 124.040
- Stalking Protective Orders, ORS 30.866



Your Elder Abuse Reporting Duty

If you have:

1. Reasonable Cause to Believe;
2. Elder* Abuse Has Occurred; and
3. Contact with Elder or Abuser

**Person 65 or older*

Then You **MUST** Report
UNLESS an Exception Applies.

ORS 124.060



Hypothetical No. 1

You are representing Pat, a 69 year old woman, in a dissolution. You notice that there are large withdrawals from Pat's savings account. Pat explains that her niece Jane has been taking care of her for the past year, and that she writes Jane regular checks to help pay for groceries. The checks total \$30,000. You share this information with Pat and she is shocked that the number is so high. You know that Pat has been experiencing some mild dementia and is under the care of a doctor. Pat is adamant that she loves Jane and doesn't want to do anything about it. Do you have a duty to report elder abuse?

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Hypothetical No. 2

At a hot yoga class, your yoga buddy Sam mentions that she is worried about her 71 year old mother, Sally. Sam explains that Sally is at home recovering from a knee replacement. Sam visited Sally yesterday and she had not bathed for two weeks and complained she had missed several doctor's appointments. Sam's sister, Amanda is being paid about \$750 a month by the state to take care of Sally, but Sam thinks Amanda may be using the money to improve her shoe collection. You remember meeting Sally at a yin yoga class a few months ago, prior to her surgery. Do you have a duty to report?

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Hypothetical No. 3

Your neighbor Jack approaches you while you are raking leaves on a beautiful fall day. Jack is concerned that his brothers are bilking his father John for free vacations and new cars. Jack explains that his father has been despondent after the death of his wife of 50 years, and seems to have lost all of his zest for life. Jack says he is upset because he feels like his family is taking advantage of his father when he is mired in grief. Do you have a duty to report elder abuse?

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Questions?

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Lawyers' New Mandatory Abuse Reporting Requirement

Elder Abuse

By Amber Hollister



Protecting and advocating for vulnerable older Oregonians is a critical part of the work many lawyers do — day in and day out. Expanding the list of mandatory reporters to include our profession is one more important way to help ensure these people are safe from harm.

—Attorney General Ellen Rosenblum

Lawyers across Oregon are talking about elder abuse reporting. On Jan. 1, 2015, legislation took effect making all Oregon lawyers mandatory reporters of elder abuse. HB 2205 (2013). As with any new law, there are still many questions about how the new requirements will apply and impact lawyers' day-to-day practice. This month's bar counsel column outlines the basics of the requirement.

The new reporting requirement was enacted at the recommendation of the Oregon Elder Abuse Prevention Work Group, which was tasked with studying how to better protect older Oregonians. As state Rep. Val Hoyle notes, "For four

years, the work group has focused on protecting some of Oregon's most vulnerable citizens. Integrating lawyers into Oregon's elder abuse safety net as mandatory reporters will provide our state with over 19,000 additional advocates."

While the elder abuse reporting requirement is new, lawyers have long been mandatory reporters of child abuse, abuse of developmentally disabled adults and abuse of long-term care residents. See ORS 419B.005(5)(m); ORS 430.735(12)(i); ORS 441.630(6)(i). These existing reporting obligations remain intact.

Part of the reason for the increased focus on elder abuse is that Oregon is in the midst of a demographic shift — as baby boomers age, our population as a whole is aging. The Oregon Office of Economic Analysis forecasts that between 2010 and 2020, the number of Oregonians aged 65 to 74 will grow by 36 percent. The median age of Oregon's population was 30.3 in 1980, but is forecast to rise to 39.7 by 2020.¹ And elder abuse is a significant problem in Oregon. In 2013, the state investigated and substantiated over 4,000 instances of elder abuse.²

The Legislature has high hopes that the new attorney reporting obligation will provide additional protection to elders. "The addition of Oregon lawyers as mandatory reporters of elder abuse will shine a bright new light on abuse in our communities," explains Rep. Vic Gilliam. "Lawyers who receive elder abuse prevention training will be even further equipped to recognize warning signs and report their concerns to appropriate authorities."

The Basics

So what exactly is the elder abuse reporting requirement? In its most condensed form, the new law requires a lawyer

to report elder abuse when he or she has reasonable cause to believe elder abuse has occurred, and the lawyer has had contact with the elder or the alleged abuser. See ORS 124.060. The requirement applies to lawyers 24 hours a day, seven days a week. The law includes exceptions to protect attorney-client privileged information and information learned during the course of representing a client that would be detrimental to the client if disclosed.

Much of the law's complexity stems from the way in which the terms *elder*, *reasonable cause* and *abuse* are defined. First, lawyers should note that the law defines elders broadly to include all people aged 65 or older who are not currently residents of a long-term care facility. ORS 124.050(2). An elder need not be vulnerable or lacking in capacity to be covered by the law.

Reasonable cause is not defined by the law, but has been interpreted by Oregon courts in an analogous child abuse reporting context to mean reasonable suspicion.³ A lawyer has reasonable suspicion to believe elder abuse has occurred if the

Ongoing Conversation

The elder abuse reporting requirement is part of an ongoing conversation in Salem about how to best prevent elder abuse. The Oregon Elder Abuse Prevention Work Group welcomes comments from attorneys about the new requirements. The work group's meetings are open to the public. Oregon bar members interested in attending should contact OSB Public Affairs Director Susan Grabe at (503) 431-6380 for more information.

lawyer can articulate facts, based on the totality of the circumstances, that would lead a reasonable person to believe that the abuse occurred. This means that the evidentiary standard for reporting elder abuse is relatively low. Because probable cause is not required, a lawyer need not believe it is more likely than not that abuse occurred to trigger reporting.

The definition of abuse is the most intricate piece of the reporting scheme. Elder abuse is defined to encompass a myriad of circumstances including physical abuse, neglect, financial exploitation, verbal abuse and sexual abuse. *See* ORS 124.050(1) *et seq.* For lawyers who are accustomed to analyzing their obligation to report child abuse, it is important to note there are some substantial differences in the definitions of elder abuse and child abuse.

Some of the definitions of elder abuse, including the definitions of physical abuse and neglect, are fairly straightforward. Physical abuse is elder abuse. Any willful infliction of physical pain or injury to an elder is considered abuse, as is the wrongful use of a physical or chemical restraint on an elder. More broadly, elder abuse is defined to include any nonaccidental physical injury to an elder, and any physical injury that appears to be at variance with the explanation given of the injury.

Neglect is also elder abuse. Neglecting an elder by withholding the basic care or services the elder needs to maintain health and safety is deemed elder abuse. Depending on the specific circumstances and capacity of the elder, what is considered a basic care or service may change. Abandonment of an elder is defined as abuse, particularly where a caregiver or other person is neglecting duties and obligations that are owed to an elder. Involuntary seclusion of an elderly person as a measure of discipline or for the caregiver's convenience is also abuse.

Sexual abuse and sexual exploitation are elder abuse. Any nonconsensual sexual contact between an elder and caregiver is included in the definition.

Certain categories of verbal threats are also considered elder abuse. Specifically, threatening an elder with significant physical or emotional harm by using "derogatory or inappropriate names, insults, verbal assaults, profanity or ridicule" or

"[h]arassment, coercion, threats, intimidation, humiliation, mental cruelty or inappropriate sexual comments" is deemed abuse. ORS 124.050(13).

Financial Exploitation

The type of elder abuse that has generated the most discussion in the legal community to date is financial exploitation. Financial exploitation is defined in ORS 124.050(4) as:

- a) Wrongfully taking the assets, funds or property belonging to or intended for the use of an elderly person or a person with a disability;
- b) Alarming an elderly person or a person with a disability by conveying a threat to wrongfully take or appropriate money or property of the person if the person would reasonably believe that the threat conveyed would be carried out;
- c) Misappropriating, misusing or transferring without authorization any money from any account held jointly or singly by an elderly person or a person with a disability; or
- d) Failing to use the income or assets of an elderly person or a person with a disability effec-

tively for the support and maintenance of the person.

Certainly, individuals who abuse their powers as an elder's attorney-in-fact, guardian or conservator to improperly enrich themselves would be engaged in financial exploitation. Similarly, individuals who threaten to harm an elderly person or an elder's loved ones in order to reap a financial benefit would be engaged in abuse. Refusing to use an elder's income or assets to pay for basics such as food, housing or medical care would also likely fall within the definition of abuse.

Lawyers who regularly represent elders in transactions or business deals have expressed a desire for more clarity in the definition of financial exploitation. In response, the work group is discussing possible amendments to the definition of financial exploitation and the phrase "wrongful taking."⁴ Open questions remain about how the new elder abuse reporting requirement will interact with existing civil financial elder abuse protections. *See* ORS 124.110.

Contact

Before the duty to report elder abuse is triggered, an attorney must have contact with an elder or alleged abuser. Although *contact* is not defined by the statute, *contact* is commonly defined as a coming together. Being in the room with a person or communicating with a person by phone or email is likely enough to meet the *contact* element. On the other hand, merely hearing news reports or reading pleadings about an incident of abuse will not be enough to trigger the duty to report.

Client Confidentiality

Even if a lawyer has reasonable cause to believe elder abuse has occurred, and has had contact with the elder or abuser, the lawyer still must examine whether the exceptions to reporting for client confidentiality apply. Lawyers do not have an obligation to report elder abuse if doing so would reveal attorney-client privileged information or would reveal information learned while representing a client that would be detrimental to the client if disclosed. ORS 124.060. If a client consents to the lawyer reporting the abuse, the lawyer could of course make a report. RPC 1.6(a).⁵

Some Warning Signs of Abuse

- Any unexplained injury that doesn't fit with the given explanation of the injury.
- The elder is not given the opportunity to speak for him or herself without the presence of the caregiver.
- The elder has become extremely withdrawn and noncommunicative or nonresponsive.
- Unpaid bills, overdue rent, utility shutoff notices.

Source: *Adult Abuse Investigations and Protective Services, DHS webpage. For a more extensive list of warning signs visit www.oregon.gov/dhs and search for "adult abuse warning signs."*

How to Report

To report elder abuse, lawyers should make an immediate verbal report to law enforcement or the Department of Human Services. Lawyers can call (855) 503-SAFE to report elder or child abuse any time of day or night. If harm is imminent, lawyers should call 911. Lawyers who have reasonable grounds to report elder abuse and report in good faith are entitled to civil immunity. ORS 124.075(1).

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Ethics opinions are published and updated on the bar's website, www.osbar.org/ethics/toc.html.

An archive of Bar Counsel articles is available at www.osbar.org/ethics/bulletin/barcounsel.html.

Endnotes

1. www.oregon.gov/DAS/OEA/docs/demo-graphic/OR_pop_trend2013.pdf
2. Office of Adult Abuse Prevention and Investigations, *2013 Annual Report* (August 2014).
3. In *Berger v. State Office for Services to Children and Families*, 195 Or App 587, 590 (2004), the court noted that the agency's determination of whether child abuse charges are founded is limited only to "whether there is evidence that creates a reasonable suspicion of child abuse; [the agency] does not decide whether child abuse in fact occurred or even probably occurred."
4. Although "wrongfully taking" is not defined by the statute, the Oregon Court of Appeals in *Church v. Woods*, 190 Or App 112 (2003), explored the meaning of "wrongful taking" in the separate context of meeting the standard for obtaining a temporary restraining order against financial elder abuse. See ORS 124.110 *et seq.* In *Church*, the court held that obtaining a joint interest in real property from an incapacitated elder was a "taking" of property, for purposes of establishing a statutory claim for financial abuse. The court also held that the taking was "wrongful" based both on the defendant's motives and the means by which property was taken. It is unclear whether a court would use this same definition when interpreting "wrongful taking" as used in the reporting statute, ORS 124.050(4)(a).
5. Similarly, if a lawyer reasonably believes that reporting elder abuse is necessary to prevent reasonably certain substantial bodily harm or death or to prevent a client's commission of a *future* crime, reporting is allowed. RPC 1.6(b)(1)-(2). These exceptions to RPC 1.6 have been narrowly construed.



Changes Due to Normal Aging and Potential for Abuse/Neglect

Aging Process Changes	Normal Aging Outcomes	Implications For Potential Abuse
Skin:		
Loss of skin thickness Atrophy of sweat glands and decreased blood flow Increased wrinkles and laxity of skin	Skin becomes paper thin Decreased sweating, loss of skin water, dry skin	Immobilization and neglect may cause bedsores, skin infection, bruises, skin laceration (potential for physical abuse)
Lung:		
Decreased lung tissue elasticity Decreased respiratory muscle strength	Reduced overall efficiency of gases exchanged Reduced ability to handle secretions and foreign particles	Immobilization and neglect may cause lung infection Decreased stamina may result in dependence and isolation
Heart changes:		
Heart valves thicken Increased fatty deposits in artery wall Increased hardening, stiffening of blood vessels Decreased sensitivity to change in blood pressure	Decreased blood flow Decreased responsiveness to stress, confusion, and disorientation Prone to loss of balance	Potential for falls/injuries, physical and psychological abuse
Gastric and intestinal:		
Atrophy and decreased number of taste buds Decreased gastric secretion Decreased gastric muscle tone	Altered ability to taste sweet, sour, salt and bitter Possible delay in vitamin and drug absorption Altered motility Decreased peristalsis Decreased hunger sensations and emptying time	Mal/under nutrition Fecal impaction (potential physical abuse) Change in how medications are absorbed, resulting in possible over-medicating, resulting in falls, confusion, etc.

National Clearinghouse on Abuse in Later Life (NCALL)

A Project of Wisconsin Coalition Against Domestic Violence
 307 S. Paterson St., Suite 1, Madison, Wisconsin 53703-3517
 Phone: 608-255-0539 • Fax/TTY: 608-255-3560 • www.ncall.us • www.wcadv.org

Aging Process Changes	Normal Aging Outcomes	Implications For Potential Abuse
Bladder:		
Decreased bladder muscle tone and bladder capacity	Increased residual urine Sensation of urge to urinate may not occur until bladder is full Increased risk of infection, stress incontinence Urination at night may increase Enlarged prostate gland in male	Incontinence along with immobilization and neglect may cause skin breakdown and/or bedsores Potential for falls and injuries when having to get up more at night Incontinence is the single most predictive factor for abuse
Muscles, joint, and bone:		
Decreased muscle mass Deterioration of joint cartilage Decreased bone mass Decreased processing speed and vibration sense Decreased nerve fibers	Decreased muscle strength and increased muscle clamping Greater risk of fractures; limitation of movement; Potential for pain	Immobilization and neglect may cause contracture deformities (potential for physical and psychological abuse) Increased potential for falls More likely to fracture under less impact than a bone of a younger person Less strength resulting in increased isolation and dependence on caregiver
Sensory:		
Changes in sleep-wake cycle Slower stimulus identification and registration Decreased visual acuity Slower light and dark adaptation Difficulty in adapting to lighting changes Distorted depth perception Impaired color vision Changes in lens Diminished tear secretion Decreased tone discrimination Decreased sensitivity to odors Reduced tactile sensation	Increased or decreased time spent sleeping Increased nighttime awakenings Delayed reaction time Prone to falls Increased possibility of disorientation Glare may pose an environmental hazard Incorrect assessment of height of curbs and steps Presbyopia (diminished ability to focus on near objects) Presbycusis (high frequency sounds lost) Less able to differentiate lower color tones e.g. blues, greens Dullness and dryness of the eyes Decreased ability to sense pressure, pain, temperature	Neglect and social isolation (potential for financial abuse) Falls, fractures, and injuries (potential for physical and psychological abuse)
Immune system:		
Decline in secretion of hormones Impaired temperature regulation Impaired immune reactivity Decreased basal metabolic rate	Decreased resistance to certain stresses (burns, surgery, etc.) Increased susceptibility and incidence of infection Increased incidence of obesity	Bedsores Infections Fractures Isolation Dependence

Aging Process Changes	Normal Aging Outcomes	Implications For Potential Abuse
Mental and cognitive:		
<p>Some cognitive and mental functions decline</p> <p>Some cognitive skills including judgment, creativity, common sense, and breadth of knowledge and experience, are maintained or improved.</p> <p>Some cognitive skills, including abstraction, calculation, word frequency, verbal comprehension, and inductive reasoning, show slight or gradual decline.</p>	<p>Short-term memory declines but long-term recall is usually maintained</p> <p>Difficulty understanding abstract content.</p> <p>Learning abilities change—older adults are more cautious in their responses; are capable of learning new things but their speed of processing information is slower.</p>	<p>Potential for financial abuse and exploitation</p> <p>Increased risk for self-neglect</p>

Source: California State University, Los Angeles, School of Social (2003). Adult Protective Services Worker Training for the California State University Department of Social Services

We connect you to services

- ▶ In-home service and support: bathing, dressing, housekeeping
- ▶ Choosing a care facility: adult foster care, residential care, assisted living and nursing homes
- ▶ Family and caregiver support
- ▶ Peer counseling
- ▶ Transportation
- ▶ Home-delivered meals
- ▶ Personal medication alerts
- ▶ Medicare counseling
- ▶ Medical equipment
- ▶ Programs and resources for healthy living
- ▶ Legal services

... and other services you may need.

The ADRC's services don't stop here. We follow up to make sure you are getting the help you need.

"[ADRC] was very, very helpful. My parents have warmed up to the idea of services in their home, obtained Lifeline™ and contacted the VA ... They are considering numerous options that were introduced to them."

— ADRC consumer

Contact your local ADRC



To locate the nearest ADRC in your area, call
1-855-ORE-ADRC (673-2372)
or visit **www.ADRCoforegon.org**.



This document can be provided upon request in alternate formats for individuals with disabilities or in a language other than English for people with limited English skills. To request this brochure in another format or language, email spd.web@state.or.us, or call 1-800-282-8096 (voice or TTY).

DHS 9381GE (1/2014)



Get connected.



www.ADRCoforegon.org
1-855-ORE-ADRC (673-2372)

► **Your ADRC connects you to the help you need...for free!**

The Aging and Disability Resource Connection, or ADRC, is a free service that offers the public a single source for information and assistance on issues affecting older people and people with disabilities regardless of their income. It is easy to access the ADRC. Simply call, walk in or visit our website.

► **Information and assistance**

Information and assistance specialists provide you with knowledge about public and private services and programs so you can choose options that fit your personal situation.

► **Health and wellness**

Today there are many ways to stay healthy and avoid injury as we age or live with a disability. The ADRC can make connections to local programs that will support your best possible health and safety.



► **Benefits counseling**

Benefits specialists can provide accurate and current information about private and government benefits and programs that you may be entitled to receive. Benefits specialists can cut the “red tape” when people run into problems with Medicare, Social Security and other benefits.

► **Vital connections**

If you or someone you know is at risk of abuse or neglect or is in crisis, the Resource Connection can connect you with someone who will respond to your urgent situation.

► **Long-term care options counseling**

Options counselors offer information about services and supports available to meet your long-term care needs. An options counselor discusses factors to consider when making long-term care decisions and assists you in making your decisions based on your wants and needs.

► **Help paying for long-term care**

ADRCs are the entryway to publicly funded long-term care programs. The Resource Connection helps assess your level of need for services and ensures that you are eligible. ADRC staff can provide information about all the options available and help you select the solution best for you.

► **Connecting with your local ADRC is easy**

You can walk in to your local ADRC, call us or visit our website at www.ADRCoforegon.org.

“ We take information and referral to the next level by actually connecting people to the resources they need. This work is very gratifying and people are very appreciative of the help we give them.”
— ADRC resource specialist



“ The ADRC located a contractor who allowed me to make financial arrangements. So now I have a ramp and can come and go independently with either my scooter or wheelchair.”
— ADRC consumer