which the death might have been prevented; and to report its
findings to the appropriate agency and Advisory Council and
make recommendations that may help to reduce the number
of at-risk adults and increase prosecutions, if appropriate. At
Risk Fatality Review Teams were formed in PSAs 01, 02, 06
and 07 in 2014.

Adult Protective Services Act. As a result of the
passing of the Adult Protective Services Act, effective July 1,
2013, the Department on Aging continued to work closely
with representatives from the Department of Human
Services, Divisions of Developmental Disabilities, Mental
Health and Rehabilitation Services to ensure clients received
the appropriate referral for services.

Suspicious Death Reports. The APS Act was also
amended to require provider agencies to immediately notify
law enforcement, the coroner or medical examiner if there is
reason to believe that the death of an older adult or adult
with a disability may be a result of abuse or neglect.

How Does a Person Make an Abuse Report?
How Does a Person Make an Abuse Report? Anyone who
suspects that an adult is being mistreated should call the
following number:
◆ The Department on Aging 24-hour Abuse Hotline at
  1-866-800-1409, 1-888-206-1327 (TTY)
◆ ALL CALLS ARE CONFIDENTIAL

FY 2014 Accomplishments

B*SAFE (Bankers and Seniors Against
Financial Exploitation). During Fiscal Year 2014,
provider agencies conducted training with 36 banks and
financial institutions, which resulted in 633 bank employees
being trained. Financial institutions conducted 12 trainings to
309 employees. Eight trainings were conducted with 103
seniors.

27th Annual Conference. The Department hosted
its 27th Annual Conference on July 30-August 2, 2013, at the
Chicago Marriott in Oak Brook Hills, Illinois. The conference
was the first held that focused on persons age 18-59 with a
disability. Shirley Paceley, M.S., Director of Blue Tower
Training, opened the conference with a powerful
presentation on how individual and collective decisions
impact the lives of people with disabilities. Ann Ford,
Executive Director of the Illinois Network of Centers for
Independent Living, provided a history and explanation of the
Independent Living/Disability Rights Movement. Other
presenters included Dr. Holly Ramsey-Klawsnik, who
provided insight on investigating and forensic interviewing;
Mark Pfeffer, M.S., presented on compulsive hoarding and
Scott Modell, Ph.D., presented on individuals with disabilities
and crime victimization. The Department hosted its second
summit on financial fraud and abuse. The summit focused on
why older adults are more susceptible to financial abuse,
how to gain knowledge from successful elder financial abuse
programs, how to identify fraud, and prosecuting
perpetrators. Presenters included Daniel Marson, J.D., Ph.D.,
Professor of Neurology, University of Alabama; Elaine Dodd,
Vice President of the Fraud Division, Oklahoma Bankers
Association; and Jenefer Duane, Senior Program Analyst,
Office for the Financial Protection of Older Americans at the
Consumer Financial Protection Bureau. The conference was
attended by over 400 participants in law enforcement, legal
services, social services and long term care ombudsmen.

How does a person make an abuse report?
Anyone who suspects that an older adult or an adult
with a disability is being mistreated should call the
Illinois Department on Aging Abuse Hotline:
1-866-800-1409
TTY: 1-888-206-1327
All calls are confidential.
How many reports of abuse were received?

During the period of July 1, 2013, through June 30, 2014, there were 14,371 reports of abuse received by the program, which included 2,607 reports involving adults with a disability age 18-59.

What is abuse?

Abuse refers to the following types of mistreatment of any Illinois resident 60 years of age or older and any adult with a disability age 18-59 who lives in the community and is abused by another person.

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

Sexual Abuse — touching, fondling, or any other sexual activity with person when the person 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 eligible adult to engage in conduct from which s/he has a right to abstain or to refrain from conduct in which the eligible adult has a right to engage.

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

Passive Neglect — another individual’s failure 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 lack of capacity to care for the eligible adult.

Willful Deprivation — willfully denying assistance to an eligible 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 eligible adult’s resources to the disadvantage of the eligible adult and/or the profit or advantage of another person.

Illinois Law

The Illinois Department on Aging administers the statewide Adult Protective Services (APS) Program, under the authority of the Adult Protective Services Act (320ILCS 20/1 et seq.) to respond to reports of alleged mistreatment of any Illinois citizen 60 years or older and any adult with a disability age 18-59 who lives in the community at the time of the report.

The APS Act is locally coordinated through 41 provider agencies, which are designated by the Regional Administrative Agencies (RAAs) and the Department on Aging. All Adult Protective Services Caseworkers are trained and certified by the Department, 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 alleged 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 seven 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 eligible 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 eligible adult to remain independent to the degree possible.

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

Self-Neglect. Effective January 1, 2007, the Adult Protective Services 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, provider agencies began receiving reports of self-neglect and referring the reports on to the appropriate agency(s) for follow-up. The APS providers received 1,363 self-neglect reports in Fiscal Year 2014.

Abuse Fatality Review Teams.

The APS Act includes provisions that the Director of the Department on Aging, in consultation with an Advisory Council, law enforcement and other professionals who work in the fields of investigating, treating or preventing abuse or neglect of at-risk adults, shall appoint members to a minimum of one review team in each of the Department’s Planning and Services Areas (PSAs). Each member of a review team shall be appointed for a 2-year term and shall be eligible for reappointment upon the expiration of the term. A review team’s purpose is conducting reviews of at-risk adult deaths to assist local agencies in identifying and reviewing suspicious deaths of adult victims of alleged, suspected or substantiated abuse or neglect in domestic living situations; to facilitate communications between officials responsible for autopsies and inquests and persons involved in reporting or investigating alleged or suspected cases of abuse, neglect or financial exploitation of at-risk adults and persons involved in providing services to at-risk adults; to evaluate means by