

ARIZONA HOUSE OF REPRESENTATIVES  
Fifty-fourth Legislature - First Regular Session

HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE  
ADULTS

Report of Interim Meeting  
Tuesday, October 1, 2019  
House Hearing Room 1 -- 1:30 P.M.

MINUTES RECEIVED  
CHIEF CLERK'S OFFICE

10-1-19

Convened 1:30 P.M.

Recessed

Reconvened

Adjourned 4:13 P.M.

Members Present

Representative Longdon, Chairman  
Representative Dunn, Vice-Chairman  
Dr. Christ  
Ms. Collins  
Ms. Kader  
Ms. Kennedy  
Ms. McFadden  
Ms. Ortiz  
Ms. Reed  
Mr. Rico  
Ms. Snyder  
Mr. Traylor

Members Absent

Ms. Knupp

Agenda

Original Agenda – Attachment 1

Request to Speak


Report – Attachment 2

Committee Attendance

Report – Attachment 3

Presentations

<u>Name</u>	<u>Organization</u>	<u>Attachments (Handouts)</u>
J.J. Rico	AZ Center for Disability Law	4
Dana Kennedy	AARP	5
April Reed & Phil Pangrazio	Ability360	6, 7



Hayley Howard, Committee Secretary

October 1, 2019

(Original attachments on file in the Office of the Chief Clerk; video archives available at <http://www.azleg.gov>)

convened: 1:30 pm

adjourned: 4:13 pm

Interim agendas can be obtained via the Internet at <http://www.azleg.gov/Interim-Committees>

## ARIZONA STATE LEGISLATURE

### INTERIM MEETING NOTICE OPEN TO THE PUBLIC

#### HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE ADULTS

**Date:** Tuesday, October 1, 2019

**Time:** 1:30 P.M.

**Place:** HHR 1

#### AGENDA

1. Call to Order
2. Presentations:
  - Arizona Center for Disability Law
  - AARP
  - Ability 360
3. Stakeholders:
  - Holly Reycraft
  - Faith McCloone, Task Force Against Senior Abuse
4. Committee Discussion
5. Public Testimony
6. Adjourn

#### Members:

Representative Jennifer Longdon, Chair  
Representative Timothy M. Dunn, Vice Chair  
Colby Bower – designee for Dr. Cara Christ  
Sherri Collins  
Sarah Kader  
Dana Kennedy  
Cheryl Knupp

Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Jami Snyder  
Michael Traylor

\* The committee may go into an executive session to receive testimony or documents that are pursuant to House Rules.

9/26/19  
jy

People with disabilities may request reasonable accommodations such as interpreters, alternative formats, or assistance with physical accessibility. If you require accommodations, please contact the Chief Clerk's Office at (602) 926-3032 or through Arizona Relay Service 7-1-1.

# Information Registered on the Request to Speak System

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## *House Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults (10/1/2019)*

### 5. Public Testimony

#### Support:

Cynthia Elliott, representing self; Christine Scianna, representing self

#### All Comments:

Cynthia Elliott, Self: Request to speak at the Oct 1 meeting.; Christine Scianna, Self: Requesting to speak at the meeting.

PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD



HOUSE OF REPRESENTATIVES

Please PRINT Clearly

Committee on Abuse + Neglect Bill Number \_\_\_\_\_

Date 10/11/19  Support  Oppose  Neutral

Name Lindsay James Need to Speak?  Yes  No

Representing Comm. Outreach Program <sup>for the Peat</sup> Are you a registered lobbyist? no

Complete Address 268 W. Adams St Tucson, AZ 85705

E-mail Address Lindsayj@copdaz.org Phone Number 520-792-1906

Comments: \_\_\_\_\_

\*\*\*FIVE-MINUTE SPEAKING LIMIT\*\*\*

**ARIZONA STATE LEGISLATURE**  
Fifty-fourth Legislature - First Regular Session

**COMMITTEE ATTENDANCE RECORD**

HOUSE AD HOC STUDY COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE ADULTS

CHAIRMAN: Jennifer Longdon VICE-CHAIRMAN: Timothy M. Dunn

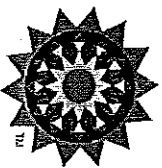
DATE	10/01/19	/19	/19	/19	/19
CONVENED	1:30 pm	m	m	m	m
RECESSED					
RECONVENED					
ADJOURNED	4:13 pm				
MEMBERS					
Colby Bower - <i>designee for Dr. Cara Christ</i>	✓				
Sherri Collins	✓				
Sarah Kader	✓				
Dana Kennedy	✓				
Cheryl Knupp	-				
Molly McCarthy - <i>designee for Michael Traill</i>	✓				
Erica McFadden	✓				
Elizabeth Ortiz	✓				
April Reed	✓				
Jose de Jesus V Rico	✓				
Jami Snyder	✓				
Dunn, Vice-Chairman	✓				
Longdon, Chairman	✓				

√ Present      --- Absent      exc Excused



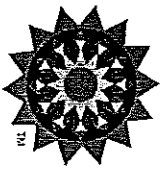
# ARIZONA CENTER FOR DISABILITY LAW

*J.J. Rico, Chief Executive Officer, October 1, 2019*



## **ACDL Mission & Vision**

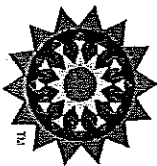
- **Our Mission:** *ACDL is a non-profit law firm that assists Arizonans with disabilities to promote and protect their legal rights to independence, justice, and equality.*
- **Our Vision:** *A society where people with disabilities enjoy full acceptance without barriers.*



## **Protection & Advocacy System (P&A's)**

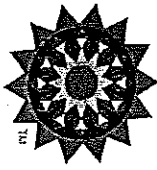
- Protection and Advocacy Systems (P&A's) were established by Congress in response to public outcry regarding abuse and neglect of persons with disabilities who resided in institutions.
- Congress created distinct statutory authority and programs to address the needs of various populations of persons with disabilities.
- Each state and territory has a P&A agency, which is designated by the Governor.





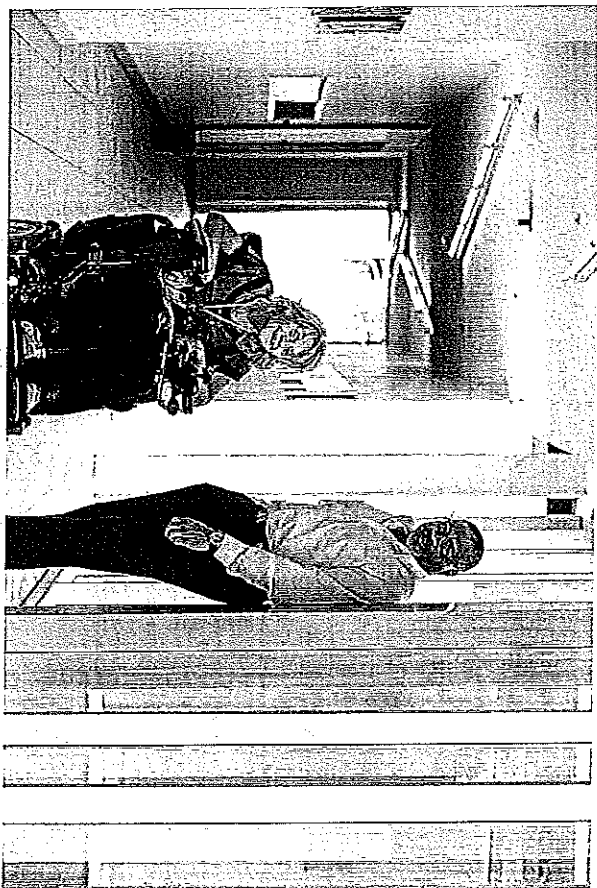
# **Federal Protection and Advocacy Programs**

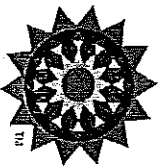
1. Persons with Developmental Disabilities (PADD)
2. Individuals with Mental Illness (PAIMI)
3. Individuals with Traumatic Brain Injury (PATBI)
4. Beneficiaries of Social Security (PABSS)
5. Individual Rights (PAIR)
6. Voter Access (PAVA)
7. Assistive Technology (PAAT)
8. Client Assistance Program (CAP)
9. Rep Payee (PABRP)



# Who is ACDL?

- Designated as the P&A in Arizona in 1974
- ACDL has authority to pursue legal, administrative, and other appropriate remedies or approaches to ensure the protection of, and advocacy for, the rights of individuals with disabilities within the State.
- As part of its protection and advocacy work, ACDL engages in impact and class action litigation on behalf of clients who face discrimination or other violations of civil rights and federal statutory protections.

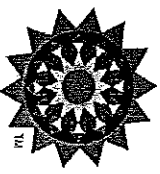




## **ACDL is currently engaged in complex litigation matters. Examples,**

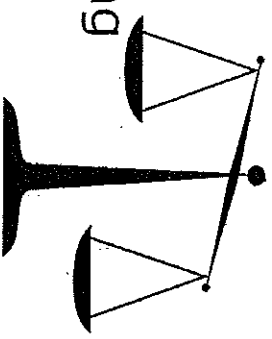
In *Arizona Center for Disability Law v. Cara M. Christ, et al*, 18-CV-02854 PHX MHB (D. Ariz.), ACDL is challenging the Arizona State Hospital's practices that interfere with ACDL staff's reasonable unaccompanied access to patients during monitoring visits and investigations of abuse and neglect, as authorized by the Protection and Advocacy of Individuals with Mental Illness (PAIMI) Act, 42 U.S.C. § 10801 *et seq.*

Additionally, in *Parsons et al v. Ryan et al*, 12-CV-00601 PHX ROS) (D. Ariz. Feb. 18, 2015), ACDL continues to serve as co-counsel (representing the P&A) with American Civil Liberties Union ("ACLU"), ACLU of Arizona, and the Prison Law Office (representing the class of prisoners in the Arizona Department of Corrections (ADC)) in monitoring and enforcing a class action settlement. ACDL continues to monitor prison facilities; interviewing prisoners, reviewing health care records, briefing enforcement issues, and representing the P&A during evidentiary hearings and mediation.



## **What issues does ACDL address?**

- Monitor health and mental health facilities
- Investigate abuse and neglect
- Employment discrimination
- Appropriate health and mental health care services
- Discrimination in health care programs
- Special education/transition services
- Discrimination in gov't programs, services, businesses and commercial facilities and housing

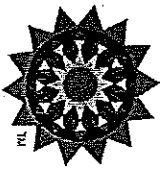




# **ACDL and its Access Authority**

## **ACCESS AUTHORITY:**

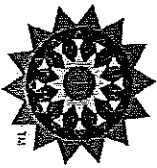
- ACDL may inspect all areas of the facility used by residents or accessible to residents without the presence of any facility employee. ACDL does not need the consent of any party to access to the facility.
- ACDL may speak privately with any resident, including minors or adults with guardians, at all reasonable times, including at any time necessary to conduct a full investigation of abuse or neglect. ACDL does not need the consent of a parent/guardian to speak with a minor or adults with guardians. The resident may choose not to speak to ACDL.
- When conducting an investigation of abuse or neglect, ACDL must have the opportunity to interview any employee or other persons, who ACDL reasonably believes has knowledge of the incident under investigation.
- ACDL may review and copy any records maintained by the facility. This includes records that may otherwise be confidential.



# **Hacienda – ACDL follow up**

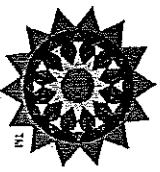
## **1/30/2019**

- January 30, 2019 - ACDL staff conducted an unannounced site visit due to media reports of a woman with disability becoming pregnant and giving birth while at the facility. Upon our arrival, staff at the front desk initially requested that we schedule an appointment for a later date, but ACDL was ultimately granted access to the facility after speaking with a supervisor.
- First, ACDL staff briefly met with employees of Benchmark, the third-party company that the State ordered Hacienda to retain to oversee the functioning of their facility. There was a staff to client ratio of 1:12 for RNs. We were informed facility staff are required to do safety checks on rooms every 15 minutes as well as room checks every 2 hours (for repositioning, diaper changes, etc.).
- We observed that rooms were considerable distance from the central nursing station. Since the above-described incident, Hacienda reported they have made the following changes:
  - Installing CCTV cameras, hiring security staff, modifying visiting hours, restricting building access, and increasing patient supervision



## **Hacienda Second Visit – 3/26/2019**

- On March 26, 2019, ACDL staff returned to Hacienda as part of a another program review. While a majority of our meeting occurred in an office away from the main building, ACDL reviewers toured the facility again while conducting a beneficiary interview. All of the security changes described above appeared to still be in effect. For example, ACDL staff were required to show the front staff identification, sign into an electronic security system, and wear name badges. Police officers and security personnel were again observed around the building and cameras were noted throughout the common areas of the facility.



## **Hacienda 3<sup>rd</sup> Visit – 6/27/2019**

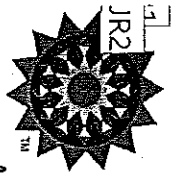
- News report on 6/18/19 of maggots being found in a patient's surgical incision.
- Hacienda reported doing an internal investigation. They provided ACDL with the incident report. Hacienda stated they found the incident to be isolated and all procedures were followed correctly. The client had been receiving respiratory care every six hours at the incision area; which they report is above the standard of care. The patient has been transferred.
- Since the incident, Hacienda reports they have implemented the following controls:
  - *Incorporated pest control into the infection control policy.*
  - *Had the facility inspected and sealed cracks and other areas where insects might enter.*





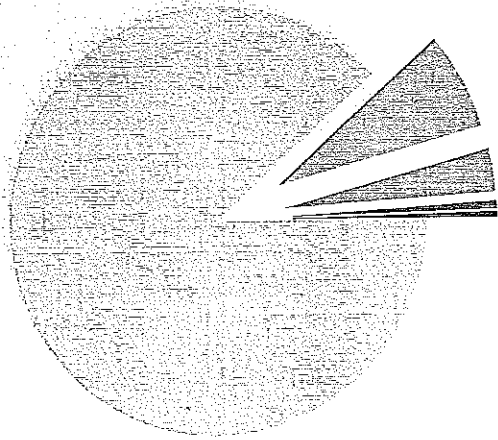
## **Hacienda update as of 9/26/2019**

- The skilled nursing part of Hacienda has closed. The 74-bed facility had 35 residents in June; however, ACDL was not able to obtain the exact number of patients that were moved due to the closure. Medicare halted new admissions in June 2019. Per, news reports the majority of patients were moved to Allegiant. Allegiant reported they had room for all of the Hacienda patients. ACDL was not able to confirm that with Hacienda.
- Per, Director of Nursing Theresa Dunlap, there is no plan to close the ICF-IID. The ICF is a 60 bed intermediate care that currently has 34 residents. 29 of whom receive respiratory care. No new residents have been admitted to Hacienda since 1/3/19. The age range of the residents are 16-67. *ADHS issued a Notice of Intent to Revoke the Hacienda ICF-IID license in June. Hacienda filed an appeal.*



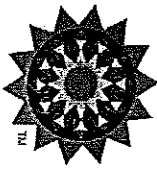
According to DDD's 2017 Family Support Annual Report, There are 39,160 DD eligible individuals. The residence of those served as of June 30, 2017 are represented below:

### People Served by Residence\*



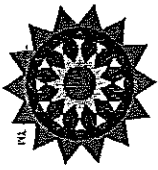
- Home 88.21%
- Group Home 7.42%
- Adult Dev Home 3.26%
- Child Developmental Home .62%
- Institution .45%

\*Behavioral Health Residential Facility 00% and Assisted Living Center 01% are



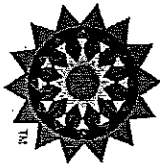
## **Arizona Group Homes (ACDL Research)**

- As of mid-2017, there were approximately 2,905 group home residents throughout the state
- There were at least 485 group homes in operation
- The Department of Economic Security's Quality Management Program Monitoring Unit is currently responsible for monitoring group homes



**36-592. Adult developmental homes; child developmental homes; license applications; investigation and operation; third-party contractors; rules; definitions (Passed 4/17/2018)**

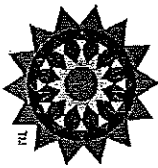
- A. An applicant for an adult developmental home or child developmental home license shall submit an application on a form prescribed by the department.
- B. Before issuing or renewing a license to an applicant, the department shall investigate the activities and standards of care within the setting, the financial stability of the applicant, the character and training of the applicant and the adequacy of services. Before issuing or renewing a license, the department shall determine that the applicant is able to meet the emotional, physical, social, developmental, educational, cultural and intellectual needs of clients. The department by rule shall establish standards for licensure. The department shall maintain a system of independent oversight of licensing. The department may contract with third parties to perform services in connection with oversight and licensing. The department may not contract with the same third party for both oversight and licensure under this subsection.
- C. Each license shall state in general terms the kind of setting the licensee is authorized to operate and shall prescribe the number, ages and sex of clients.



## **ARS 36-592... continued**

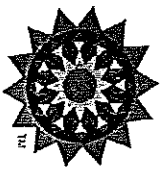
D. A licensee who holds an adult developmental home or child developmental home license shall:

1. Comply with applicable health, safety and sanitation codes or standards and document its compliance.
  2. File reports as prescribed by the department.
  3. Allow the department to inspect or monitor its services and facility and the facility's books and records.
  4. Comply with rules adopted by the department.
  5. Provide for the health, safety and welfare of the licensee's clients.
  6. Allow the inspection of the developmental home at reasonable times pursuant to section 36-595.01.
- E. A license expires one year from the date of issuance.



## **36-595.01. Access to facilities**

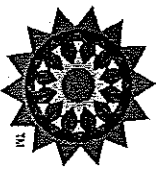
- A group home, adult developmental home or child developmental home shall allow the following to inspect the facility at reasonable times:
  - 1. Parents and guardians of facility residents.
  - 2. Members of the developmental disabilities advisory council.
  - 3. Employees or agents of an Arizona nonprofit advocacy organization that is a state chapter of a national advocacy organization, that has affiliated local chapters within this state and that has historical expertise with monitoring residential settings for persons with intellectual and developmental disabilities.



# **ARS 36-592... continued**

F. For each adult developmental home and child developmental home, the department shall:

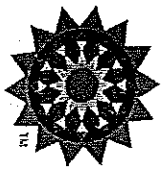
1. Conduct an annual licensing home visit.
2. Monitor the settings for compliance with health, safety, contractual, programmatic and quality assurance standards at least two times per year. The department shall maintain a system of independent oversight of monitoring. The department may enter into a contract with third parties to perform services in connection with oversight and monitoring. The department may not contract with the same third party for both oversight and monitoring under this paragraph.
3. Investigate a complaint within ten working days after receiving notice of the complaint, except that if there is a danger to a client, the department shall conduct the investigation immediately.
- G. The department shall establish by rule minimum qualifications, responsibilities and oversight for the licensing and monitoring of adult developmental homes and child developmental homes. The rules regarding minimum qualifications shall address professional judgment, conflicts of interest and training. The rules shall establish the frequency and type of visits for licensing and monitoring, maximum caseload ratios for those performing licensing and monitoring services and a system for appropriate public access to information regarding licensing and monitoring findings.



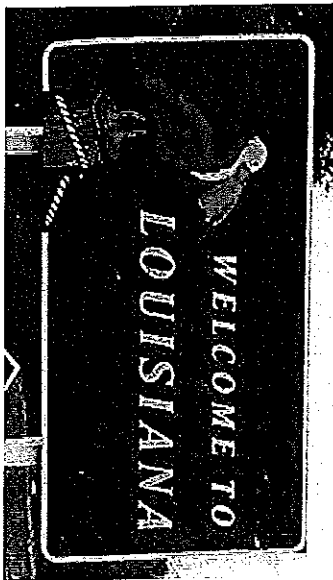
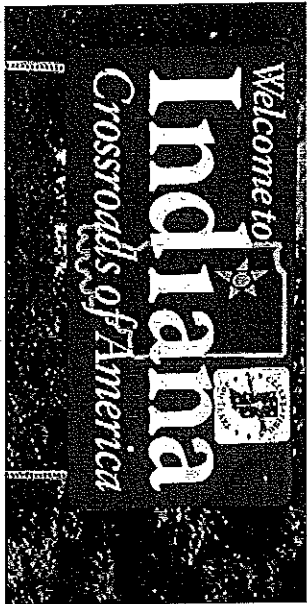
## **ARS 36-592... continued**

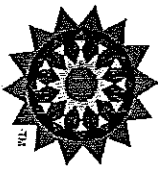
- H. The department may contract with the same third party to perform services in connection with the licensing and monitoring of an adult developmental home or a child developmental home.
- I. For the purposes of this section:
  - 1. "Licensing" includes recruiting and verifying qualifications of applicants.
  - 2. "Monitoring" includes monitoring health, safety, contractual, programmatic and quality assurance standards of an adult developmental home or child developmental home.





# Other State Models...





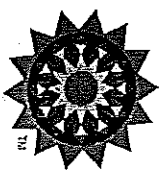
# Indiana's Monitoring Approach

The Division of Disabilities and Rehabilitation Services oversees the Statewide Waiver Ombudsman

- Ombudsman are responsible for receiving, investigating, and attempting to resolve complaints
- Monitoring is conducted on an individual basis to ensure compliance with the person's service plan
  - *Conducted by Case Managers*
  - *At least one face-to-face visit with the individual every 90 days*
  - *At least one unannounced monitoring visit each year*

Ombudsman statute <http://iga.in.gov/legislative/laws/2019/ic/titles/012#12-11-13>

Ombudsman functions and Case Manager monitoring <https://www.in.gov/fssa/files/ddrs%20hchs%20waivers.pdf>

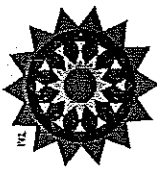


# Washington's Monitoring Approach

- Established the Office of Developmental Disabilities Ombuds, which is operated by a nonprofit contractor
- Competitive bidding was used to determine which nonprofit the Department of Commerce would award the contract to
  - *Chosen contractor is Disability Rights Washington*
- Office of Developmental Disabilities Ombuds is responsible for the monitoring of group homes and handling of complaints
- Office entirely funded by Washington Department of Commerce
  - *\$643,000 per year*

Legislation establishing ODDO <https://app.leg.wa.gov/RCW/default.aspx?cite=43.382.005>

ODDO website <https://adombuds.org/>

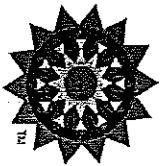


# Louisiana's Monitoring Approach

- Established Community Living Ombudsman Program to monitor group homes
  - Program is run by the Advocacy Center of Louisiana, which is a nonprofit organization
  - Each office visits at least 25% of the group homes in their region each month
  - Reports to the Attorney General's Office

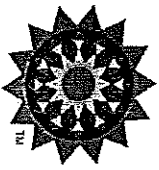
Statute establishing ombudsman program <http://legis.la.gov/Legis/Law.aspx?d=321103>

Statute for ombudsman responsibilities <http://legis.la.gov/Legis/Law.aspx?d=321104>



# Louisiana Program Funding

- Advocacy Center of Louisiana primarily operates on federal and state grants
  - *US Department of Health and Human Services*
  - *US Department of Education*
  - *Social Security Administration*
  - *State of Louisiana Governor's Office of Elderly Affairs*
  - *State of Louisiana Department of Justice*
  - *Louisiana Bar Foundation*
- Advocacy Center received \$647,264 in total grants for 2017



**Phoenix Office**

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1-800-927-2260

**Tucson Office**

177 N. Church Avenue, Suite 800  
Tucson, AZ 85701  
(520) 327-9547  
1-800-922-1447

**[www.azdisabilitylaw.org](http://www.azdisabilitylaw.org)**

# House Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults

**AARP** Real Possibilities in  
**Arizona**

Dana Marie Kennedy, MSW  
State Director, AARP Arizona  
October 1, 2019



# AARP

Enhancing the quality of life for all as we age—not just serving our nearly 38 million members—is our mission. At its heart, the work that AARP and its affiliates do can be summed up in just 12 words: “We fight for and equip each individual to live their best life.” It’s all about real possibilities.

AARP fights for age 50 and over individuals and their families at the local, state and national levels. We work on important issues, such as:

- Leading efforts to preserve Social Security and promote other retirement savings efforts to help everyone achieve lifetime financial security
- Promoting adequate, affordable health care, including prescription drugs and long-term care
- Fostering communities with affordable and appropriate housing, as well as supportive community features and options for getting around.





## What We Learned

- The focus was certainly on the Developmental Disability Community but we know that abuse also happens to vulnerable adults.
- We wanted to make sure that when agencies were looking at what happened at Hacienda was an opportunity to make sure we reviewed all the systems that have oversights of vulnerable adults.
- We commend the Governor for appointing a task force which was highlighted on Sept. 17<sup>th</sup> at the last Ad Hoc meeting and presented by DES. This task force is just wrapping up the work and has some comprehensive recommendations some are short term and others are long term.
- Erica McFadden did an excellent job of reviewing what we learned on Sept. 17<sup>th</sup> and I agree with the points she made and will attempt to not replicate them.

# What We Learned



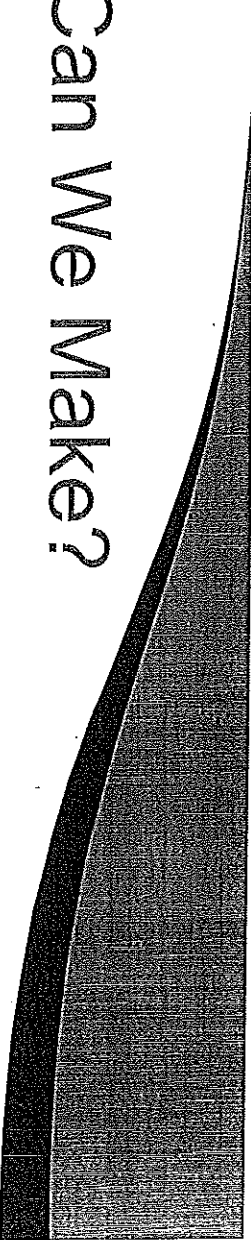
- There is little **reliable data** on the prevalence of abuse. Like other forms of abuse it is **underreported**, but older adult victims number in the hundreds of thousands. Furthermore, there is a **lack of a common definition of elder abuse** among states and federal agencies, which hampers comparisons of data that inform prevention and intervention efforts. A **lack of conformity among data collection instruments** further complicates research comparisons.
- We do not have a good system in place to make sure all the people who live in group homes have same oversight as those in skilled nursing facilities.
- We have a **huge** void to fill with recruiting, training and retaining paid caregivers who provide the majority of care to our love ones in the home, group homes, and skilled nursing facilities. Workforce shortages lead to lack of quality and quantity of staff.
- Cognitive impairment makes people more vulnerable and makes it difficult to communicate that they were abused.
- Lack of training for workers to understand what abuse is, how to report it, and who should report.



# What Changes Can We Make?

- Detecting and preventing elder abuse requires increasing awareness. The general public, and health professionals all must be made aware of the signs of abuse. In-home services, such as Meals on Wheels or home health care, play significant roles in preventing and addressing abuse of frail older adults. A broad range of protective services are needed to help prevent and stop abuse, ranging from simple assistance with household chores to outright guardianship. Other examples include community-based programs that provide services such as counseling, information and referrals, and personal money management.
- Enhancing legal protections against elder abuse could help prevent it. It would also allow victims to seek restitution. State laws typically offer victims a range of remedial services. Statutes also impose criminal penalties for various forms of elder abuse.

# What Changes Can We Make?

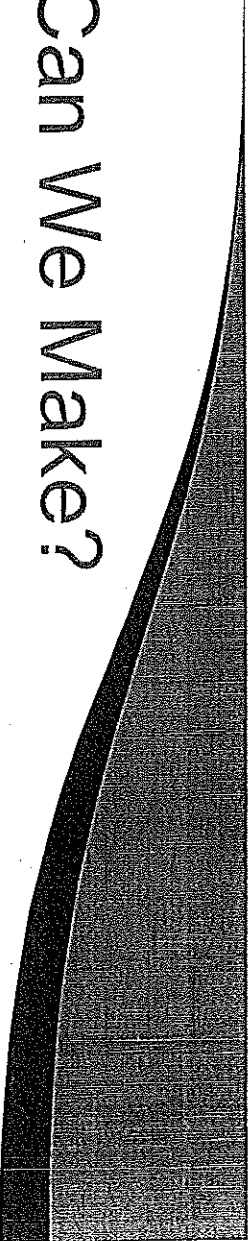


Explore Mandatory Reporting Statute to:

- Impose **Civil** Penalty on the *individual* failing to report, (See, interesting rationale for going the civil route at <http://publish.illinois.edu/elderlawjournal/files/2017/07/Bernal.pdf>) **OR**
- Impose stricter criminal penalty (as in NY/felony)

Impose Civil Penalty on *the institution* with a number of potentially escalating remedies which could include:

- (a) Revoke the facility's license and/or contract with the state to provide services;
  - (b) Deny payment;
  - (c) Assess and collect a civil monetary penalty with interest from the facility owner and/or facility administrator;
  - (d) Appoint temporary management;
  - (e) Close the facility and/or transfer residents to another certified facility;
  - (f) Direct a plan of correction;
  - (g) Assign monitors to the facility; or
  - (h) Reduce the licensed bed capacity.
- Require facilities to train all staff and contractors with potential for resident access and test on mandatory reporting. Mandate continuing education on same.



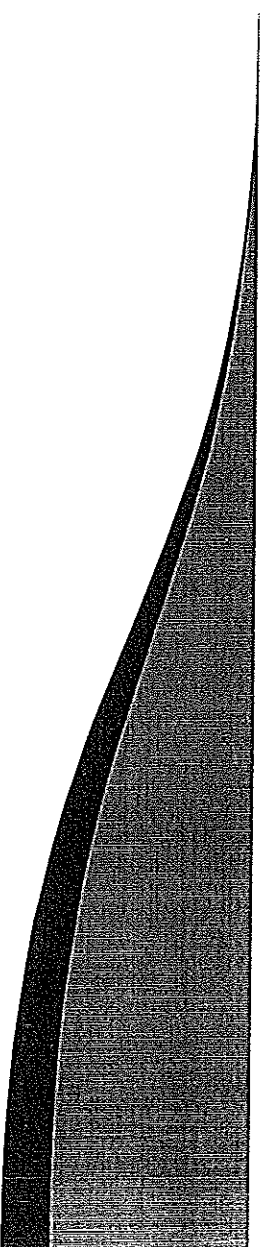
## What Changes Can We Make?

- Strengthen Criminal Background Checks to ensure coverage of all employees and contractors with direct access; Create a system to automatically alert facilities of new arrests (or even convictions) at the state and federal level.
- Strengthen penalties for facilities that fail to follow statutory or regulatory guidelines. Ensure that remedies are swiftly and consistently imposed.
- Pass Virtual Visitation Legislation requiring nursing homes to inform residents and their families of their right to utilize technology in their rooms to monitor their care and facilitate communication with family members. This was just recently passed in Louisiana.
- Facilitate family involvement in nursing home care planning.

## What Changes Can We Make?

- Strengthen nursing home family council requirements. Ensure that groups of family members can organize a group and meet without nursing home staff, to discuss concerns and make recommendations to the nursing facility for action.
- Fully fund agencies responsible for investigating abuse and neglect and ensure that they have the capacity to respond appropriately and follow-up.
- Implement and fund strong and *independent* LTSS ombudsman programs that go beyond federal requirements and include an adequate number of ombudsmen.
- Provide adequate funding to permit Ombudsmen to visit all facilities including group homes.
- Ensure that complaints and reports of nursing home abuse are fully investigated by those with skills, training and capacity to do so, and that cases of nursing home sexual abuse are handled by those with expertise in that area.

## Next Steps



- Look at model legislation from other states and introduce a package of bills to address the changes we can make.
- Develop a work group to explore best practice models to recruit, train and mentor paid caregivers.

Dana Marie Kennedy, MSW  
State Director, AARP Arizona

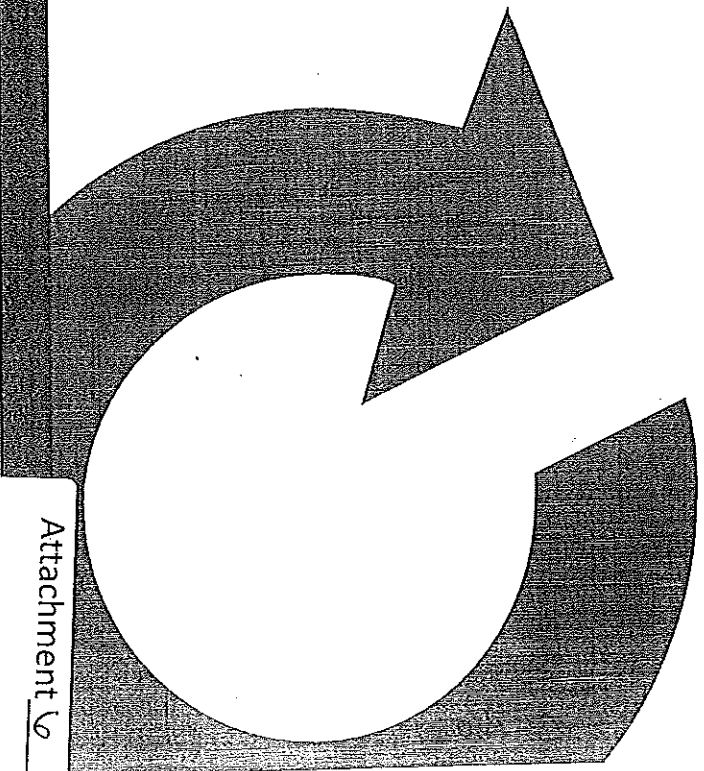
[dkennedy@aarp.org](mailto:dkennedy@aarp.org)

(602) 262-5191





# ABILITY360<sup>®</sup>



Attachment 

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# ABILITY360

## Our Mission

Ability360 is a nonprofit organization that offers and promotes programs designed to empower people with disabilities to take personal responsibility so that they may achieve or continue independent lifestyles within the community.

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# ABILITY360

“Center for Independent Living” is...

- A non-residential, private, nonprofit agency
- Designed and operated within a local community by individuals with disabilities.
- Provides an array of independent living services.

We are:

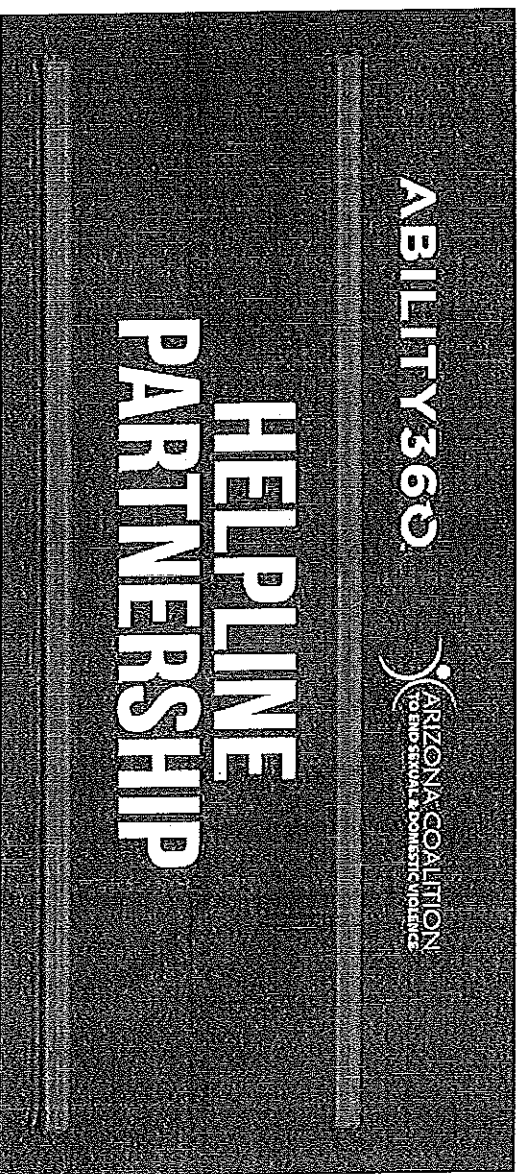
- Consumer-controlled (51%+)
- Community-based
- Cross-disability

Don't live in Maricopa, Pinal, or Gila County? Find your CIL on the ILRU Website.

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## Independent Living Philosophy

- We believe that the opportunity to fully participate in the political, economic, and social life of our own community is a basic human right.
  - The existence of a disability which inhibits personal function is not, in itself, a reason to deny those rights.
-



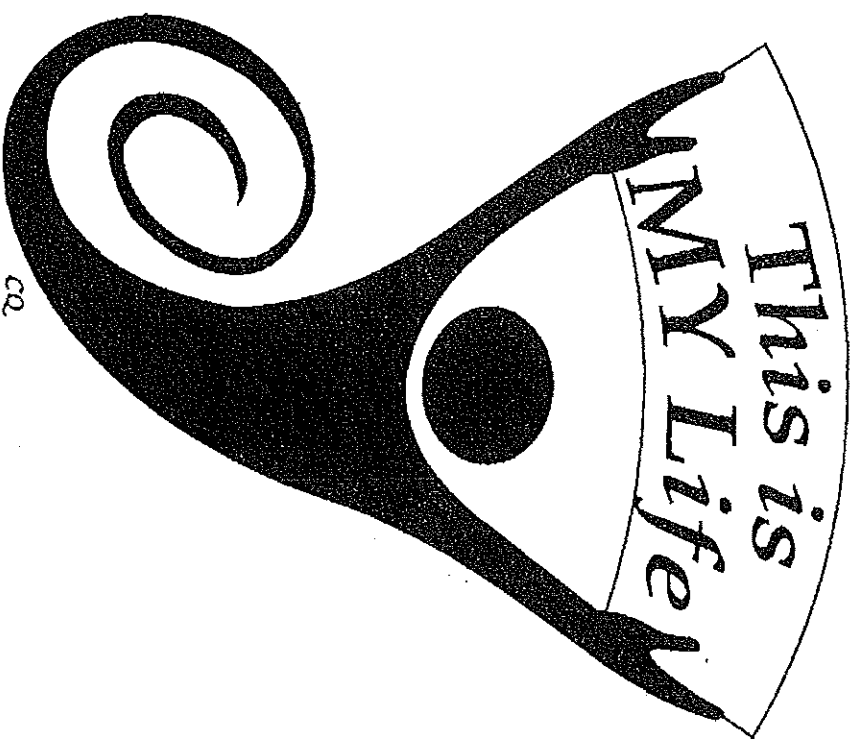
- A Victim Services Specialist is available every Thursday from 3 – 7 PM at the Ability360 Main Campus.
- Community members, including people with disabilities, family, caregivers, service providers, Ability360 Staff, or anyone needing support and services, can use this resource at no cost.
- Call 602-279-2900 or 1-800-782-6400

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# ABILITY360

## This is MY Life

- Free self-advocacy and self-determination skills program for people 16+ who receive services from the Division of Developmental Disabilities (DDD).
- Individual and group classes are available.



ca

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# ABILITY360

## Ability360 Home Care Services

Provides personal care attendants to elders or people with disabilities in:

- Maricopa
  - Pinal
  - Gila
  - Pima
  - Yavapai
- Funded Through:
- Arizona Long Term Care System (ALTCs)
  - Native American Community Health
  - AZDES Division of Developmental Disabilities (DDD)
  - NACCOG Area Agency on Aging
  - Private Pay

## Training on Legal Concepts

# ABILITY 360

- Abandonment – left w/o care of family or agency.
- Assault – intentional attempt or threat to touch a person without a person's consent.
- Battery – actual touching of a person's body without a person's consent.
- False imprisonment – Unlawful restriction of person's freedom of movement.
- Fraud – refers that a person intentionally gives false information in order to make money or gain an advantage.
- Invasion of privacy – exposing or making public person's personal and confidential info w/o consent.
- Liability – The state of being responsible for negligence, such as financial, neglect, and responsibility for damages.
- Malpractice – failure to exercise reasonable judgment in the application of professional knowledge.
- Negligence – action on your part or your failure to act that either causes or contributes to the cause of a personal injury or property damage to others.



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# ABILITY 360

## Ethical Principles

- **Honesty:** do not be afraid to politely say “no” to a task you are not assigned to do. Never steal, take consumer’s possessions, or falsify documents or reports.
  - **Respect:** a consumers religious or personal beliefs.
  - **Reliability:** Work hours scheduled on Service Agreement. Always finish your shift.
  - You should not take gifts or tips from consumer or families.
  - Follow the consumer’s service plan unless you consult with your supervisor.
-

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## Consumer's Rights

# ABILITY360<sup>®</sup>

- Considerate and respectful treatment and care.
  - Not be abused emotionally, sexually, financially, or physically.
  - Design their treatment or care plan, decide how their services will be provided, and who will deliver those services (including requesting a change of caregiver)
  - Refuse treatment – Service Plan states to give a consumer a shower and he/she refuses, you would respect their decision.
  - Privacy
  - File a complaint with the agency.
  - Confidential handling of their personal information.
-

Definition: adult and child abuse refers to any forms of maltreatment of a person by a caregiver, family member, spouse, or friend. Categories of abuse include:

- Abuse
  - Sexual
  - Neglect
  - Financial
  - Emotional
-

## Signs of Adult and Child Abuse

# ABILITY 360

- Physical: bruises, broken bones, cut, or other untreated injuries in various stages of healing.
- Sexual: bruises around breast or genital area; signs of sexual transmitted diseases (STDs), child (Pregnancy).
- Emotional: adult is upset or agitated, withdrawn, non-communicative, or paranoid. For a child - eating and speech disorder; developmental delay; and behaviors.
- Neglect: dehydration, malnutrition, pressure ulcers, poor personal hygiene and unsafe or unsanitary living conditions. For a child - poor hygiene; absenteeism; hunger, tiredness, no caretaker at home.
- Financial: unusual banking activity; missing financial statement or other personal effects; signatures on checks that do not match adult's signature.

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# ABILITY360<sup>®</sup>

## Observing and Monitoring:

Recognizing Changes – The Direct Care Worker (DCW) as

Detective:

- Early identification of changes in an individuals routines, behavior, appearance, etc.
- You are the first to observe any changes in a consumer.
- You get to know a person by spending time with him/her and learning what is usual for them.

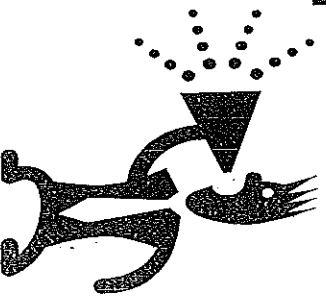
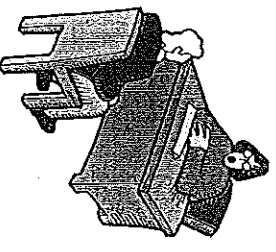
Tools the DCW may use:

- Observation – Use all your senses: sight, hearing, touch and smell.
- Communication – Ask questions and listen to answers.



## Reporting

- Any change in physical, emotional, or mental condition. (pressure sore, bruises, agitation, confusion, etc.)
- Problems with medication (new or existing medication).
- Abuse or Neglect.
- Change in the home environment.
- If the consumer is asking you to do something you are not supposed to do.
- If you do not understand a procedure or task.
- If you disagree with the consumer, contact your supervisor.



# ABILITY 360

## Abuse Reporting Requirements

- All persons responsible for the care of an incapacitated or vulnerable adult or child have a duty to report suspected abuse and neglect.
- Reports must be made immediately (by phone, on-line, or in person) to Adult Protective Services or Child Protective Services (depending on the persons age) or to the police. Failure to report is a misdemeanor.
- If the individual is in immediate danger, call 911.
- If abuse is NOT life-threatening, report it to your supervisor.
- If you notice suspicious bruises, report observation to the authorities/supervisor.
- (APS 1-877-767-2385 CPS 1-888-767-2445)

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## Prevention for Abuse

# ABILITY360<sup>®</sup>

- Community awareness
- Public and professional education
- Caregiver support groups
- Stress management training
- Respite care/In-home services
- The Parent Assistance Program

(Phoenix: 602 542-9580 or 1-800-732-8193)

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# Abuse HURTS US ALL

ABILITY360



AREA AGENCY ON AGING  
REGION ONE, INCORPORATED



## Recognize & Report Abuse

**JUNE 15:  
World  
Elder Abuse  
Awareness Day**

Attachment 7

# Together We Stand Strong Against Abuse



AREA AGENCY ON AGING  
REGION ONE, INCORPORATED

1366 E. Thomas Rd. Ste. 108  
Phoenix, AZ 85014-5739

## We are All Vulnerable to Abuse

Abuse can be Physical, Emotional, Sexual, or Financial.

- 1 in 4 women and 1 in 7 men will experience domestic violence in their lifetime.
- 1 in 10 older Americans experience elder abuse, neglect, or exploitation.
- Persons with disabilities are at least three times more likely to be victims of violent crimes than those without disabilities.

## Recognize and Report Abuse

If you suspect that a vulnerable adult has been a victim of abuse, call or text

- Law Enforcement at 911
- Adult Protective Services:  
1-877-767-2385 TDD: 1-877-815-8390  
[www.azdes.gov/reportadultabuse](http://www.azdes.gov/reportadultabuse)

**ABILITY360 602-256-2245 [ability360.org](http://ability360.org)**

**Area Agency on Aging 24-Hour Senior HELP LINE**

**602-264-HELP (4357) [aaaphx.org](http://aaaphx.org)**