

*Attorney General*  
**SCOTT HARSHBARGER**

# **ELDERLY PROTECTION PROJECT**

150722



## **ADVANCED LAW ENFORCEMENT TRAINING MANUAL**

**Third Edition**

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NCJRS

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ACQUISITIONS

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**Third Edition**

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## **A NOTE ON KEY SOURCES**

**There are two key sources that deserve special acknowledgement:**

**The information on demographics, myths and facts of aging, communication, elder vulnerability and victimization, the Milwaukee Study, and financial exploitation was developed and adapted from training materials produced by John Bordenet of the Criminal Justice Section of the American Association of Retired Persons (AARP). These materials will be referred to as the *AARP Law Enforcement Training Manual* throughout the text. Permission to use these materials was kindly granted by the Criminal Justice Section of the American Association of Retired Persons, 610 E Street, N.W., Washington, D.C. 20049 [Telephone: (202) 434-2222].**

**Much of the information on police protocol and the case studies are excerpted from the Police Executive Research Forum's (PERF's) final training package entitled *Improving The Police Response to Domestic Elder Abuse*, which is an impressive work that was funded by a grant from the Office for Victims of Crime within the U.S. Justice Department. Permission to include these materials was kindly granted by PERF, 2300 M Street, N.W., Suite 910, Washington, D.C. 20037 [Telephone: (202) 466-7820.]**



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## ACKNOWLEDGEMENTS

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Many people in the Commonwealth dedicate themselves to protecting elders. We want to acknowledge all the hard work and heartfelt concern that they bring to their work.

We also mention those particular individuals who have greatly contributed to the work of the Elderly Protection Project.

It only makes sense to begin with Dr. Dennis Humphrey and Rai Kowal of the Massachusetts Committee on Criminal Justice since both were the source of the Elderly Protection Project. We appreciate their support, encouragement and -- dare we say it -- funding.

Secretary Frank Olliviere of the Executive Office of Elder Affairs (EOEA) has graciously allowed us to work with his staff in this largely cooperative venture. Of incredible assistance to the project is Donna Reulbach, who is the Director of Protective Services for EOEA. Donna has been instrumental in coordinating a series of regional trainings for police officers interested in getting advanced training in elder issues. All of the twenty seven local protective service agencies have been very accommodating and eager to further strengthen their relationships with local police. A number of the agencies will be hosting our trainings throughout the year.

The American Association of Retired Persons (AARP) has also provided voluminous resources and expert assistance to help create this material. Lt. Colonel John Bordenet of AARP's Criminal Justice Division has taken it upon himself to be our walking elder resource person, even going so far as to travel to Massachusetts at AARP's expense to guide our project in the formative stages.

The Massachusetts Alzheimer's Association is also participating in our trainings. Gerry Flaherty of the Eastern Massachusetts Chapter has sensitized us to this

debilitating condition and to how we can help law enforcement to be more responsive in these situations.

The Police Executives Research Forum (PERF) has been developing police training materials at the same time we have been engaged in the Elderly Protection Project. PERF's project director, Martha Plotkin, has contributed a great deal to our work by sharing her materials with us and by allowing us to critique and refine our respective approaches to this important subject.

With respect to our work on domestic violence, we thank Chief George DiBlasi of the Norwood Police Department, who has given us the benefit of his "checklist" approach to domestic violence. His department is proving to be a model for other Massachusetts communities in this area of increasing importance for the street officer.

Finally, we must acknowledge the Massachusetts Association of Chiefs of Police under the able leadership of Chief Thomas O'Loughlin. The Chiefs are very receptive to receiving training in this area of growing concern for law enforcement. Beyond expressing interest, they are willing to provide the resources, personnel, and commitment to improve the quality of police and social services intervention and investigation into instances of elder abuse and neglect.

To all of the people and organizations -- too numerous to name -- who have worked with us and who will work with us in the future, we thank you for your important contribution and for the opportunity to help law enforcers and protective service workers throughout the Commonwealth.

SCOTT HARSHBARGER  
Attorney General

JOHN S. SCHEFT  
Director, Elderly Protection Project

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## INTRODUCTION

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By  
Scott Harshbarger

As Attorney General and, before that, as District Attorney of Middlesex County, I have made crimes against the elderly a priority of my office. Our experience has taught us that the problem of crimes against older Americans, particularly economic crime and elder abuse, is extremely serious and complex.

My concern about crimes against the elderly initially grew out of the recognition that the public generally had lost confidence in the capacity of government and the criminal justice system to protect citizens against crime. It was obvious that the lack of confidence was more extreme for the elderly, many of whom because of their age and changed status alone, felt less in control of certain aspects of their lives and hence increasingly vulnerable. It was clear to me, then as it is now, that: (1) the elderly had to be a focus of specific and special law enforcement and prosecutorial attention; and (2) that we had to do all we could so that they would not feel compelled, or be forced, to live their retirement years in fear of victimization.

For the most part, older Americans suffer most dramatically from the effects of actual crime and from the fear of crime. As victims, they are wounded several times over: their sense of security is eroded; their fear of lost control is heightened; they fear reporting; and they often believe, tragically, that they brought the crime upon themselves because of their age.

Historically, abuse of the elderly — whether physical, sexual, emotional or financial — remained shrouded in a veil of secrecy, protected by our notions of the family bond. To help change this, at the end of 1982, the mandatory elder abuse reporting law went into effect in Massachusetts. The law requires professionals, among them police officers, to report suspected incidents of elder abuse and neglect to the state-wide Executive Office of Elder Affairs or its designated local affiliates. This important initiative underscores the essential role

that the police play in uncovering elder abuse and neglect, and also establishes the critical alliance between police departments and protective service agencies. This alliance must be continually strengthened in order to effectively protect the elderly.

Our goal, through the Elderly Protection Project, is two-fold. We seek to ensure: (1) that crimes against older Americans and debilitating conditions for them are reported; and (2) through comprehensive and multidisciplinary work, that the elderly are not victimized a second time by the criminal justice system. I am convinced that we will encourage the reporting of more crimes, and in turn, be better able to respond to crimes and other difficult situations by: increasing public awareness; improving training of the professionals who deal with the elderly, and empowering elders with the knowledge of the resources available to them.

Together, we can restore the confidence of the elderly in our criminal justice system and, more importantly, assist them to once again take control of their lives and erase the fear of crime that increasingly diminishes their right to freedom, liberty and a life of power and dignity.

## **THE ELDERLY PROTECTION PROJECT: ITS BEGINNING, MISSION, AND PROGRAMS**

### **THE BEGINNING**

With funding from the United States Department of Justice, the Massachusetts Committee on Criminal Justice awarded a grant to Attorney General Harshbarger to design law enforcement training to help police departments address an emerging, fundamental concern - protection of our elderly citizens.

The need for this training is well documented. A Police Executives Research Forum (PERF) study commissioned by the American Association of Retired Persons (AARP) indicates that law enforcement is often unclear about its role in detecting and responding to all forms of elder abuse. PERF also reports that police chiefs across the nation express a strong interest in elder abuse training materials.

Many Massachusetts police executives echo this desire for more training on elder issues. They understand the critical need for increased attention to these issues in view of the dramatic increase in the elderly population which is expected well into the next century. Police executives recognize the accompanying demands for service that this population will have, and the particular care and sensitivity that patrol officers will need to exercise -- especially in the domestic violence context -- in dealing with older persons. Service to the elderly will be an important component of any community policing program.

To that end, Attorney General Harshbarger created the Elderly Protection Project in February of 1993. Attorney John Scheft was appointed as Project Director. Mr. Scheft has extensive experience in police training, having developed and taught several courses for the Massachusetts Criminal Justice Training Council and for Edmands & Hier Police Educational Services.

### **MISSION**

The Elderly Protection Project trains police officers to communicate more sensitively with our elder citizens and to collaborate more effectively with protective service workers so that officers will be able to successfully intervene, report and investigate instances of elder abuse, neglect and financial exploitation.

### **PROGRAMS**

The Project's programs are geared to three different levels of expertise:

- **INTRODUCTORY TRAINING FOR RECRUITS**

The Project has already presented its three to four hour seminar to recruits at the State Police Academy in New Braintree; the Boston Police Academy; and several training sites of the Massachusetts Criminal Justice Training Council.

- **BASIC IN-SERVICE TRAINING FOR VETERAN OFFICERS**

The Project is currently preparing to train police instructors to deliver programs of varying lengths at in-service training sites around the state.

- **ADVANCED TRAINING DURING REGIONAL SEMINARS**

Advanced Training is the centerpiece of the Project's initiatives.

- **TO CORRESPOND TO THE REGIONS COVERED BY LOCAL PROTECTIVE SERVICES AGENCIES:** Currently, there are 27 local protective service agencies (PSA) that are supervised by the Executive Office of Elder Affairs. These local agencies are responsible for investigating the

elder abuse, neglect and financial exploitation reports that are generated by local police departments and other mandated reporters. The PSA's also provide a number of services to elders in need of assistance.

It is clear that the foundation of an effective response to elder victimization begins with the cultivation and maintenance of a working relationship between local departments and protective service agencies. Promoting this police/protective service alliance is the primary goal of the Elderly Protection Project. For this reason, 16 regional trainings have been scheduled.

- **TARGET AUDIENCE:** Individual chiefs are in the best position to determine which officers they wish to receive advanced training. Some executives have sent their domestic violence detectives; others have sent crime prevention specialists; still others have seen this as an opportunity for training patrol officers who express an interest in elder issues. How each department is structured determines for whom this training is most appropriate. The Project strongly recommends that all departments send at least one officer to their regional training and we, of course, encourage departments to send more than one officer. Certificates are awarded to course participants.
- **TEACHING TECHNIQUES:** The course utilizes a variety of learning techniques: (1) lecture; (2) brief testing to stimulate learning; (3) written materials; (4) videotapes; (5) discussion and case studies; and (6) opportunities for professional interaction.
- **TOPICS COVERED:** Training sessions explore the following topics: the demographics of an increasing elder population and its implications for police services; myths and facts about aging; communicating more effectively through various techniques and by understanding the concerns, fears and vulnerabilities of the elderly; the value of specialized training as demonstrated by the Milwaukee Study; enhanced investigation through sound report writing and photographs; financial exploitation in its various forms; the elder abuse reporting law and working with

protective services; understanding domestic violence under 209A and its applicability to the elderly; Chapter 123 and mental health issues; the police response to missing persons with Alzheimer's disease; methods for the police to deal with impaired driving by elders; and case studies in elder abuse, neglect and financial exploitation.

## SOURCE MATERIALS

The studies quoted in this section were reported in Plotkin, M., *A Time for Dignity: Police and Domestic Abuse of the Elderly* (Washington, D.C.: AARP, 1988). Of the 200 police agencies surveyed by Ms. Plotkin, 175 responded. The results of the survey indicated that: (1) 82% of the respondents were unable to identify how many cases of elder abuse came to their attention in the previous year; (2) 31% were unaware of specific statutes governing the law enforcement response, when in fact they did have governing laws (this was especially important because departments with knowledge of statutes were nearly twice as likely to have special methods for dealing with domestic mistreatment of the elderly); (3) only 28% had written policies related to domestic abuse of the elderly; (4) 80% of all surveyed departments had no training on elder abuse.

## SECTION I

# DEMOGRAPHICS OF AN AGING POPULATION

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### I. INTRODUCTION

#### A. A GROWING ELDER POPULATION

Demographics tell the story.

*Demographics:* Data that reflect the characteristics of human populations, such as size, growth, distribution and other vital statistics. *American Heritage Dictionary* (2nd College ed.; Boston).

Industrialized nations are experiencing a significant aging of their populations as birth rates remain low and life expectancy continues to increase. In the United States, from 1980 to 1990, the number of people 65 years of age and older grew at over twice the rate of the rest of the population. This age group increased by 18% as compared to 7% for those under 65.

These statistics point to more than just a shift toward an older average age in this country. These demographic changes strongly imply many economic, social, and political consequences. Some of these cannot be predicted with any certainty while others can be anticipated and planned for.

Changes that might occur as a result of demographics may seem relatively unimportant to law enforcement agencies struggling with both the daily demands for more services and budgetary constraints. As the age distribution of this country continues to change, however, this issue will become increasingly difficult to ignore and will present law enforcement agencies with a variety of challenges and opportunities.

#### B. THE CHALLENGE FOR LAW ENFORCEMENT

Determining how best to interact with a large number of older people is the most obvious challenge for law enforcement.

##### 1. CALLS FOR SERVICE

As the number of elderly people increases, it is reasonable to predict this population will initiate more calls for service, and a higher percentage of crime victims and witnesses will be older.

##### 2. CRIME PREVENTION RESPONSIBILITIES

Also, those seeking crime prevention advice from police will likely be older persons.

##### 3. COMMUNICATION RESPONSIBILITIES

Officers need to be increasingly aware of the special needs of older citizens in order to communicate effectively.

###### a. Emotional Challenges

As people age, many experience emotional problems because they have lost family members and friends or believe they no longer have the status they attained during their working years. Many must also live on fixed incomes with little hope of improvement. In short, many older citizens are vulnerable to and fearful of losses that can result from criminal activity because their recovery potential is less than when they were younger.

###### b. Physical Challenges

Some of these older citizens may be experiencing hearing or vision losses and other physical problems such as decreased

resistance to injury and disease, and loss of strength and dexterity.

### **c. Officer Perspectives**

There is an additional challenge to consider. Most officers are relatively young; yet, the average age of the citizens they encounter is increasing. Citizens may have difficulty accepting police intervention, and officers may be inclined to lose their patience -- something that will greatly inhibit their effectiveness in the community.

## **C. OPPORTUNITIES FOR LAW ENFORCEMENT**

The aging of America will also provide increased opportunities for law enforcement personnel and older citizens to work together to achieve goals generally shared by both groups.

### **1. ELDER ASSISTANCE**

Older people can play a key role in supporting their law enforcement agencies. As this country continues to age, more older people, with a vast reservoir of talents and experiences, will: (1) become active in civic affairs; (2) serve on juries; (3) participate in Neighborhood Watch; and (4) be available as volunteers to assist law enforcement agencies in a variety of support roles.

### **2. POLITICAL SUPPORT**

The number and percentage of older voters will also rise. Older people generally exercise their right to vote more frequently than younger people and often can gather enough votes to elect officials whose decisions will impact police operations and services. As an interesting example, 96% of the members of the American Association of Retired Persons (AARP) are registered voters.

### **3. COMMUNITY SUPPORT**

The vast majority of older people tend to be very supportive of law enforcement officers. Most find comfort in reports of police successes and often sympathize with officers when they are

insulted or their authority challenged. Many older people remember when laws and legal processes were more easily understood. They also remember when most streets were safer than they are today, when crime was not so prevalent, when older people were few in number and generally respected rather than singled out by criminals as potential targets, and when those who broke the law were dealt with more swiftly than is common today. The presence of a police officer represents stability to most older people and provides them with a sense of security.

## **D. CONCLUSION**

Law enforcement personnel have a strong interest in understanding older citizens and developing the skills needed to communicate with them effectively.

Officers can work more effectively with older citizens if their training equips them to understand both the general physical and psychological characteristics of this age group, and how these factors can influence an older person's behavior when dealing with law enforcement officials under a variety of circumstances.

Officers can demonstrate their sensitivity toward older persons by responding to them as individuals, essentially, with the same basic respect and courtesy that they extend to anyone else. They should also be trained to recognize when an older person needs special help and when such help is not needed. Officers should not assume all older people have the same problems any more than they should assume all younger people have identical issues.

Because most older people are already supportive of their police, a minimum amount of training and extra effort on the part of law enforcement personnel can greatly enhance the communication processes between both groups.



## II. CURRENT AND PROJECTED DEMOGRAPHIC TRENDS

### A. EXERCISE

Use the questionnaire "Demographics of Aging" which appears as *Attachment A*. Review each question with the audience and allow a few moments for them to volunteer answers. The correct answer is indicated with each question, and some additional comments are provided should the presenter wish to discuss the answers in more detail.

1. Since 1900, how many years do you think have been added to average life expectancy in this country? Correct answer is "C" (26 years).
2. In Shakespeare's day, what percentage of children died by the age of 15? Correct answer is "D" (70%).

#### Instructor Comments:

Shakespeare lived from 1564 to 1601.

At that time, only about one-half of those born survived until the age of 10.

In the past, death was not linked to old age. People were expected to die at any age. The common experience in most communities was for the majority of deaths to occur during childhood.

Today, 70% of those born in the U.S. can expect to reach the age of 65; and those who live to 65 can expect, on average, to live to age 82.

3. In 1900, those who lived to the age of 65 constituted only 4% of the U.S. population. By 1990, what was the percentage of those over 65? Correct answer is "B" (12%).

#### Instructor Comments:

Since 1983, those 65 and over in the U.S. have outnumbered teenagers.

Between 1980 and 1990, the number of those 65 and over has grown over twice as fast as the rest of the U.S. population.

There are three basic reasons for the increase in number of older people.

- (1) *Advances in medicine* during the early part of this century were largely in the areas of infant survival and childhood diseases. Recent advances have focused on treating diseases affecting older people.
  - (2) The *rise in the birth rate* following World War II came about at a time when most babies were surviving to adulthood. These two factors produced the "Baby Boom" generation. Born between 1945 and 1964, the baby boomers are mostly middle aged but will become older citizens in the near future.
  - (3) Finally, the *"Baby Boom" generation is having only about half as many children* as their parents.
4. What is the projected percentage of those over 65 in the U.S. by the year 2020? Correct answer is "B" (20%).

#### Instructor Comments:

In 1990, about 18% of the population in Florida was 65 or over. By 2020, we can expect to see about the same proportion of older people nationally, not just in Florida.

In 1990, about 20% of the U.S. population was 55 and over. By 2020, 20% of the population will be 65 and over. The proportion of those we deal with today that are 55 and older will be 75 and older in a few years.

It is estimated that two-thirds of all the people who have ever lived to the age of 65 are alive today.

10% of those who are over the age of 65 are old enough to have children who are at least 65 years of age.

5. In 1900, a child born in the United States could expect to live to age 47. To what age can a child born in 1990 expect to live? Correct answer is "C" (75 years).

Instructor Comments:

In the year 1000, life expectancy was only 25.

The median age in the U.S. has increased from 16 at the time of the Revolutionary War to about 32 in 1990. It is projected to reach 36 by the turn of the century.

By 1990, most in the U.S. could expect to live 1/3 to 1/2 half of their lives past the age of 50.

Men have a shorter life expectancy than women. In 1985, life expectancy at birth for women was 78 years, while for men it was 71 years.

6. What is the fastest-growing segment of our population by age? The correct answer is "D" (90 and over age group).

Instructor Comments:

The 1990 census revealed that the number of people 90 years of age and over increased faster than any other age segment of the U.S. population. Between 1980 and 1990, the number of those under 65 grew by 7%, yet the 65 and over population grew by 18%, and the 90 and over segment grew by 38% (to 1 million). Researchers estimate that by the year 2000 those 100 and over will reach 100,000.

## SOURCE MATERIALS

The information on demographics, myths and facts of aging, communication, elder vulnerability and victimization, and the Milwaukee Study, were adapted from training materials produced by John Bordenet of the Criminal Justice Section of the American Association of Retired Persons (AARP). These materials will be referred to as the *AARP Law Enforcement Training Manual*. Specifically, information on demographics is found in Section I of the AARP materials.

## KEY CONTACTS

For information on the demographics of aging, communication issues, crime prevention, and law enforcement training on elder issues, contact:

**Mr. John Bordenet**  
Criminal Justice Section  
American Association of Retired Persons  
601 E Street, N.W.  
Washington, D.C. 20049  
(202) 434-2222

Another person with significant experience in training police officers on elder issues is:

**Mr. Randolph W. Thomas**  
Law Enforcement Instructor  
South Carolina Criminal Justice Academy  
5400 Broad River Road  
Columbia, SC 29210-4088  
(803) 896-7756

## SECTION II

### MYTHS AND FACTS OF AGING

---

#### I. INTRODUCTION

We learned conclusively that our population is growing older. In this section, we will go a step beyond demographics and look more closely at the characteristics of older citizens. Our goal is to learn something about the attitudes, behaviors, and capabilities of people who are at least 65 years of age, and then compare this information with the stereotypes some of us may hold regarding older persons. If we can improve our understanding of older citizens, we will be in a better position to work and communicate with them.

#### II. EXAMINING THE CHARACTERISTICS OF AGING

##### A. EXERCISE: AN EXAMPLE OF AGING

Instruct students to think of an older person (for example, a family member, friend or role model) who they have loved and/or admired. Ask students to make a list of five qualities, characteristics or skills that these individuals possessed. Students should think about each quality and reflect on whether these attributes increased or decreased as the person became older.

Ask participants to describe their lists, pointing out which attributes diminished with age and which were heightened. Ask participants what qualities or possessions they hope to acquire in old age. Allow time for discussion on the positive aspects of aging - for example, increased leisure time, independence, the chance to share in their children's milestones, more insight into oneself, and so forth.

This is a good exercise for officers because it gets them to look at growing older in a more balanced way. For many people, the prospect of old age is frightening and depressing. Some have misconceptions about the aging process, and many believe that old age is inevitably a time of loss.

This exercise is designed to illustrate that old age is a time of both gains and losses and, further, that while officers may be dealing with elders who are particularly vulnerable and infirm, they should not become discouraged or resigned to the belief that all elders fall into difficulties. Such a perspective can only help officers deal more effectively with elders.

##### B. EXERCISE: MYTHS AND FACTS OF AGING

Give students several minutes to complete the questionnaire "Characteristics of Aging," which appears in *Attachment A*. Discuss their answers. The information which follows is keyed to each statement in the questionnaire.

1. Advanced age is a good predictor of many things about someone's attitudes, behaviors, and capabilities. Correct response is "False."

##### Instructor Comments:

Age is a chronological measurement of time; it does not have a direct impact upon someone's attitudes, behaviors, and capabilities. There is no evidence that age has a direct impact upon personality traits.

People age at different rates depending upon many factors. For example, persons who subject their bodies to excessive stress, insufficient exercise, inadequate diet, immoderate consumption of alcohol, or who lack proper medical care, will probably show signs of aging sooner than those who have been more fortunate or more careful with their health.

2. The age of 65 is an accurate point at which to identify the onset of "old age." (Consider Social Security and pensions.) Correct response is "False."

Instructor Comments:

Because aging is an individual characteristic, there is no predictable time in anyone's life when they might be considered "old."

Birthdays are only convenient reference points and provide only very general information about people. We can learn more about someone if we are aware of their degree of physical functioning, satisfaction with life, self-perception, and willingness to accept challenge.

How old is "old"? At age 40, a person is considered old enough to bring a law suit alleging age discrimination in employment. People are old enough to begin withdrawing their IRA savings without penalty at age 59 1/2 and can receive reduced Social Security pension payments beginning at age 62. When the Social Security system was developed in 1940, eligibility to receive benefits began at age 65. At that time, life expectancy was only 61, or 14 years less than in 1985. Today, 8 out of 10 Americans who are 65 years of age and older are capable of conducting normal daily living activities and are not substantially limited by mental or physical illness.

3. People over 65 consider themselves to be old, and the majority are unhappy. Correct response is "False."

Instructor Comments:

Most people 65 and over do not think they are old. In a national survey of 1,000 Americans over 65 (average age of 72) most responded that they feel about 12 years younger than their chronological age.

Studies of happiness, morale, and life satisfaction either find no significant differences between age groups or reveal that only about one-fifth to one-third of older people score

"low" on various happiness or morale scales.

Research has shown that satisfaction with life does not usually change with advancing age. If a person is generally pleased with the direction of their life as a young adult, that person will probably feel the same when older. In other words, most optimists remain optimistic throughout their lives and most pessimists continue to emphasize negatives and anticipate that future events will also be unfavorable for them.

However, it is important to note that the suicide rate among the elderly is significantly higher than it is for the total population. While the national suicide rate in 1980 was 11.9 per 100,000, it was 17.7 per 100,000 among the elderly. The overwhelming majority of elderly suicides are committed by white males (46 deaths per 100,000). This was over two-and-one-half times the rate for older black men, over six times the rate for older white women, and almost 21 times the rate for older black women. Factors that place elderly men at risk for suicide are serious physical illness with severe pain, sudden death of a loved one, major loss of independence, and financial inadequacy. Signs that may signal suicidal intentions include the sudden decision to give away important possessions and a general loss of interest in one's social and physical environment. The most common method of suicide among older men is shooting themselves.

4. The 70 year old of today is more like a 50 year old of 20 years ago. Correct response is "True."

Instructor Comments:

Improvements in medical treatments have allowed more older people than ever before to participate fully in life. Although more people develop chronic conditions (arthritis, hypertension, hearing or sight impairments, heart disease, or respiratory problems) as they age, many medicines mitigate the effects of these problems. Moreover, during the past 20 to 30 years, many people have also become more

aware of the importance of proper nutrition and the need for adequate exercise. Today, 80% of those 65 and older are healthy enough to carry out normal life activities.

**5. Most older people live alone or in nursing homes. Correct response is "False."**

Instructor Comments:

Only 5% of the 65 and over population live in nursing homes during any one year. Even for those 85 and over, only about 20% live in nursing homes. The majority of people 65 years of age and older live with their families or in communities; 81% are home owners.

The overwhelming majority of seniors, even those with severe disabilities, want to live at home in familiar surroundings and near loved ones. Nursing homes carry a negative stigma for most older people. In fact, it is the fear of being placed in nursing homes that prevents many seniors from letting outsiders know when they are having problems or need assistance.

Nursing home services are also prohibitively expensive. The average cost is approximately \$2,000 to \$3,000 a month. While Medicaid will cover nursing home costs for low income seniors, the program requires that they deplete almost all of their assets before they are eligible. Since many older people want to hold on to their savings for their own use or to pass on to their children, this is not the option of choice for most seniors.

Because of the costs and attitudes associated with nursing homes, most older people who have health problems or disabilities receive the care they need from family members, neighbors or friends.

Most older people live with, or close to, family members and have frequent contact with them. Of the elderly over the age of 65 who have children, 80% live less than an hour away from at least one child, 50% have at least one child within ten minutes of their home, and 84% see an adult child at least once a week. 54% live

with their spouses, 15% live with others, and almost one third live alone.

The likelihood that the elderly will live alone increases with age. While one third of all seniors over the age of 65 live alone, this proportion increases to 47% for those over the age of 85.

**6. The majority of people over 65 are senile or mentally dysfunctional (defective memories or disoriented). Correct response is "False."**

Instructor Comments:

Most people experience some loss of memory and mental speed as they grow older; however, only 10 to 15% of adults over 60 have severe memory problems. Memory losses, for people of any age, may be the result of many factors such as depression, anxiety, grief, fatigue, various illnesses and medications, or failure to acquire the information correctly in the first place.

Only 5 to 10% of people over 65 are afflicted with Alzheimer's disease. [Estimates of the percentage of the population with Alzheimer's vary. AARP estimates 5%, while the Massachusetts Alzheimer's Association places the figure at 10%.]

Some older people may take longer than younger people to learn new material. Others may experience a decline in short-term memory and have difficulty taking tests. One reason for this may be that they are out of practice, as most older persons have not attended school in many years. In one study, 40% of a group of older people were able to regain basic memory abilities after 5 one-hour training sessions with specialists.

Dementia, which is the accepted term for intellectual deterioration, is not part of the normal aging process. The likelihood of contracting dementia, however, does increase with age.

7. Some older people get paranoid.  
Correct response is "True."

Instructor Comments:

While the incidence of paranoid disorders increases with age, it is still uncommon among the elderly. Paranoid disorder is an irrational suspiciousness that takes a variety of forms. It may be due to social isolation, a sense of powerlessness, or progressive sensory decline. Hearing impairments may be a contributing factor in paranoid disorders.

At times, law enforcement officers may be called upon to respond to abuse reports that come from people suffering from paranoid disorders. Self neglect may also occur as a result of paranoid tendencies. Consequently, it is extremely important to distinguish between actual threats and unfounded suspicions, as in any case of reported abuse.

Because the incidence of paranoid disorders increases with age, it is also important for law enforcement officers to understand how factors like sensory deficits can contribute to suspiciousness so that they may be sensitive to actions that may provoke fear. However, remember that paranoid disorders are uncommon, and officers should not discount victims' claims by assuming that they are the result of irrational fears.

8. Age causes the loss of mental abilities.  
Correct response is "False."

Instructor Comments:

The mental abilities people have developed and the knowledge they gain from their life experiences, do not suddenly evaporate at age 65, or on any other birthday in their lives.

There are many factors other than age that can influence people's mental functions. For example, those who remain active and consistently use their mental capabilities tend to retain them. Conversely, those who lose interest, avoid social contacts, or accept

treatment that implies that they are mentally inferior, tend to be influenced by this negative behavior.

9. Most older people are financially dependent and do not work. Correct response is "False."

Instructor Comments:

Most older people are financially independent. The poverty rate for people age 65 and older declined between 1960 and 1992. In the 1960's, one in three older Americans lived in poverty; by 1992, this had been reduced to one in eight.

81% of older Americans are homeowners, and 65% of this group own their homes mortgage free.

30% of American men 65 and older held part-time jobs in 1960. This rose to 48% by 1986. Many who no longer work perform volunteer services for their churches or communities.

A Wall Street Journal article in July 1990 reported that people over 50 control about 50% of U.S. discretionary income and 77% of U.S. household financial assets, and that this group will grow three times faster than the under-50 market through the turn of the century.

10. Most people in their 60's are either becoming frail or are in poor health.  
Correct response is "False."

Instructor Comments:

Approximately 8 out of 10 people in their 60's are in reasonably good health and capable of conducting normal life activities. Certainly, as people age, they are more susceptible to certain disabilities, diseases, and injuries than when they were younger. In fact, the next section discusses the physical changes often associated with aging. However, perfect health is not a prerequisite for useful activity. (The instructor might ask how many in the class under age 65 have taken some medicine during the past 30 days.)

Perfect health is a rare gift for people of any age. If one considers vision, for example, there are many young or middle-aged Americans who are visually impaired. (The instructor might ask members of the class how many wear glasses or contacts.)

## C. PHYSICAL CHANGES AND CONDITIONS ASSOCIATED WITH AGING

### 1. MUSCULO-SKELETAL CHANGES

Up to the age of 30, people's bone content increases. It remains constant until about the age of 45, after which it falls progressively. While this is true for both men and women, it falls more rapidly for women after menopause.

Osteoporosis refers to a reduction of the total amount of bone in the skeleton. It is characterized by loss of height and the downward inclination of the head. While it is a natural effect of aging, it becomes "clinical" osteoporosis when the total bone is reduced below a critical level at which fractures are more likely to occur and the bones become painful when stressed. Musculo-skeletal changes such as osteoporosis make it difficult for older people to perform some daily tasks, such as reaching up or getting up from a chair or bed. Such changes also make falls more dangerous, frequently resulting in broken hips.

### 2. ACUTE AND CHRONIC ILLNESS

The elderly are more susceptible to certain illnesses than other segments of the population. This includes both acute and chronic illnesses. Chronic conditions are long-term (more than three months), often permanent, and leave a residual disability that may require long-term management or care. People acquire some chronic ailments earlier in life that are never cured, while advanced age more likely brings on other illnesses.

The most common chronic conditions that cause limited activity in individuals over the age of 65 are arthritis, which affects 50 percent of the elderly; hypertension, which affects 39 percent; hearing impairment, which affects 30 percent;

and heart disease, which affects 26 percent. More than 80 percent of the over 65 population have at least one chronic condition, and many have multiple conditions. Some common conditions of the elderly include:

**Arthritis:** A variety of types of inflammations and degenerative changes of bones and joints resulting in limited functioning.

**Hypertension (high blood pressure):** While blood pressure often increases somewhat with age, significant elevations pose a serious health problem. Hypertension can damage the heart, lungs and kidneys and contribute to the development of heart disease.

**Stroke (cardiovascular accident):** A blockage of blood from the brain. The severity depends on the particular areas and amount of brain tissue that is involved.

**Congestive heart failure:** A set of symptoms related to the impaired pumping performance of the heart. The result is that one or more chambers of the heart do not empty adequately during the heart's contractions.

**Parkinson's disease:** A neurological disease which results in tremors, rigidity, a lack of expression and difficulty walking.

**Diabetes mellitus (sugar diabetes):** A disease associated with deficient insulin secretion, leading to excess sugar in the blood and urine. This type of diabetes begins in adulthood and develops slowly. It occurs most frequently in obese elderly. The retinas of the eyes are often affected.

### 3. NON-DISEASE RELATED CONDITIONS

The elderly are also more prone to a number of conditions that are non-disease related, including:

**Fractures and falls:** Unlike younger individuals, the elderly often sustain fractures without direct trauma. Falls in the home cause the majority of fractures. While fractures may result from the direct impact of hitting the

ground in a fall, they may also result from the forces of muscles exerted against bone. Falls may occur as a result of older people's diminished "righting reflexes." This is the body's ability to accommodate instinctively to changes in the environment, such as inclines, by bending, turning, shifting weight, etc. With diminished righting reflexes, the elderly trip or stumble easily and recover clumsily. Muscle contraction to recover balance plays a role in fractures. The elderly may fall as a result of tripping or stumbling on floor material inside the home or on irregular pavement outside of the home. Poor illumination, poor vision, confusion, and distraction all contribute to the risk of falling.

**Incontinency:** The inability to control the flow of urine (urinary incontinency) or fecal matter (fecal incontinency). Both types of incontinency are symptoms of disease. They are extremely disabling and a major source of stress for caregivers. They also increase the chances that an older person will be placed in an institution. Fecal incontinency is almost entirely preventable with proper diagnosis and treatment.

**Decubiti (also called bedsores or pressure sores)** result from immobility. While persons of any age can contract them they are particularly common among the elderly.

**Dehydration:** The loss of pure water or the loss of salt and water together. The elderly are at risk of dehydration as a result of diminished thirst sensation, immobility, or mechanical difficulties in swallowing. Lack of skin elasticity, dry skin, and confusion are warning signs of dehydration.

## SOURCE MATERIALS

The first exercise "An Example of Aging" was taken from *PERF's Improving the Police Response to Domestic Elder Abuse*, Module II-34.

Bordenet, J., *AARP Law Enforcement Training Manual*. The quiz questions and responses were adapted from his extensive training materials that appear in Section II.

The information on nursing home care in question 6, and all of question 7, along with all of the information on elder physical changes, was adapted from *PERF's Improving the Police Response to Domestic Elder Abuse*, Module II-10-22.

## KEY CONTACT

For information concerning physical conditions associated with aging as well as virtually any other clinical or social issue involving the elderly, an excellent source is:

**Dr. Rosalie Wolf**  
**Institute on Aging**  
**The Med Center-Memorial**  
**119 Belmont Street**  
**Worcester, MA 01605**  
**(508) 793-6166**



*A young woman learns firsthand how older people are treated*

# Undercover Among The Elderly

**A**S A YOUNG GIRL, PATRICIA Moore idolized her grandmother, who lived with her and her parents. "She was a wonderfully energetic, competent person," Patricia says of Margaret Mary Moore. "Sunday supper was her domain. I watched as she hand-cut homemade noodles." Nurtured by her tight-knit family, young Patricia entered the Rochester Institute of Technology. She dreamed of making her parents and grandmother proud of her, but fate intervened. "After my first semester of college," she recalls, "I came home and found that my grandmother was no longer able to make our dinner because her arthritis was so bad. It was like ice water in the face to see this proud matriarch suddenly viewing herself as having no value because she could no longer manipulate the tools by which she could cook meals."

Margaret Mary Moore became depressed. No longer able to peel a potato or measure out flour for her noodles, she withdrew deeply into herself. "She lost the will to live," Patricia says. Within a year, at the age of 78, she was dead.

Patricia Moore did grow up to be the successful designer she dreamed of becoming. After college, in the mid-'70s, she landed a job with Raymond Loewy, the industrial designer known for everything from streamlined locomotives to shiny chrome toasters. But the memory of her grandmother stayed with her. She was bothered that many of the designs she worked on would be difficult for people with arthritis to handle.

Soon after, she entered graduate school to study the needs of older people. However, Moore quickly realized that many older persons balk at talking about the difficulties they experience. "As a young designer, interviewing elders," she says, "the responses I was getting were, 'I'm fine, dear. Don't worry about me.' I knew why they were doing this—their independence and autonomy were threatened. They had a fear that if you let people know that you can't cook your own meals and you can't bathe yourself, they'll put you in a nursing home."

Moore consulted with her professors but found no good solutions. Then, at a party, she met a woman who handled makeup for TV's *Saturday Night Live*, transforming Dan Aykroyd and Jane Curtin into Coneheads. "I found myself blurring out, 'Can you turn me into an old



In disguise: Patricia Moore as a woman in her 80s. "I looked like my grandmother," she says.

woman?" And she said that she could," Moore recalls.

Her disguise—complete with prostheses that blurred her vision, dulled her hearing and made her joints stiff and slow—took weeks to perfect. Moore even gargled with salt to render her voice raspy and thin. When she first tried the disguise, she was stunned: "I saw this little old lady in the mirror. I looked like my grandmother."

Moore designed the disguise to make herself look and move like a woman in her 80s. She had three wardrobes—one each for a poor, a middle-class and an affluent woman—to measure the responses she received. She was surprised that the appearance of money didn't make much difference.

In all three costumes, Moore moved slowly, needed to have things repeated, and fumbled for change in her purse. Many of the younger people she came in contact with saw her as a hindrance or a nuisance. People slammed doors in her face and verbally abused her as she struggled to board city buses, holding up im-

*Disguised as an old woman, Pat Moore was able to talk with elders openly about the small and large challenges they face.*



The real Ms. Moore, holding a spatula she designed with a special easy-to-grip handle.

patient riders behind her. "I was knocked over in the Buffalo airport," Moore recalls. "Knocked to the ground like a turtle on its shell. This guy bumped into me while I was on the telephone and just kept going. I couldn't get up because I couldn't bend my knee. I eventually flipped to my side, and somebody helped me up."

Wouldn't such rudeness, while unforgivable, be experienced in any big city by people of any age? "But it wasn't in big cities," she says. "If anything, big cities are slightly more hospitable to elders (even though she was mugged twice

in New York City). In small towns, I felt the most vulnerable. There isn't the infrastructure of services for elders that you find in cities. I could walk for six blocks without being able to find a restroom. Rural elders are suffering. When I retire, it will be to a big city."

To make sure that her findings accurately reflected the reality of elder people's experience, Moore traveled to 116 big cities and small towns, from Florida to Canada, over a three-year period.

"I soon found out that people's reactions were very predictable," Moore recalls. "Some would be very sweet and kind. Usually, they had an elder in their lives. Another group was trying to be kind but often was patronizing. A cabdriver in New York hoped out to open the door for me, but he spoke so loud that, even wearing earplugs and non-working hearing aids, I got a headache. He was making the assumption that all elders are deaf."

Overall, her disguise served its purpose: She was able to talk with elders openly about the small and large challenges they face. Two of the more common: the assumption that elders are less competent and that they grow depressed after retirement.

Today, Patricia Moore is 40, travels widely and lectures to students, designers and gerontologists. A TV movie based on her experience is in the works. She has become a leader in a movement called Universal Design, a school of architects and designers who create products and environments for everybody—including the elderly.

Moore displays a variety of designs she has worked on: One is a spatula with a special foam handle, from her "Good Grips" product line; another is a pill bottle with a timer built into the cap. "We have made the point, very subtly, in our society that when you age, somehow you're not as good as you were," she says. "We need to understand aging is a natural, evolutionary process. Why is younger necessarily better? We have to learn to age well in our hearts." □

BY MICHAEL RYAN

## SECTION III

# FEAR, VICTIMIZATION, AND VULNERABILITY TO CRIMINAL ACTIVITY

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### I. INTRODUCTION

This section provides: (1) information about fear of crime among older people and their vulnerabilities to criminal activity; discusses the influence that this fear has upon their lives; and (2) suggests actions that law enforcement personnel and other service providers can take in response.

### II. FEAR OF CRIME

Many elders are profoundly afraid of crime. This fear stems from three related societal developments and the various perceptions that accompany them.

#### 1. CRIME HAS INCREASED

In the 1940's, most people in this country did not believe that crime was a major problem. By the 1960's, crime was a high-priority concern to many people. Polls detected this concern as people ranked their fears of crime above other issues such as health services, national defense, protection of the environment, and social services. Although the U.S. population increased 13% from 1960 to 1970, during this same period reported robberies increased 224%, purse snatchings increased 332%, and daytime residential burglaries increased 337%.

Polls continue to reveal that Americans of all ages rank crime among their principal concerns. One obvious reason for this fear is that crime touches so many people. The U.S. Bureau of Justice Statistics estimates that, at current crime rates, five-sixths of all people in the United States will be victims of personal theft at least three times and victims of attempted or completed violent crime at least once during their lifetimes. During a recent year, the Bureau estimated that almost 35 million personal and

household crimes were committed in the United States, affecting about 24% of all households.

#### 2. CRIME HAS CHANGED

Most older people recall when crime very rarely occurred in the majority of residential neighborhoods. Although there was commercial crime, and certainly mob related violence, criminal activity was less random and pervasive than today. Many of the crimes committed against older people are accomplished through violence that is far in excess of that needed to commit the offense. Often this "gratuitous" violence occurs after the purse or wallet has been taken or the home burglarized and leaves the older victim with permanent physical and emotional injuries. Today's criminals regard many elders as easy targets.

#### 3. SOCIETY HAS CHANGED

Many elders recall days when they did not lock their homes, when children played outdoors at night, and when older people were few in number and respected by most in the community. Today older people believe that society has changed in the way in which it responds to criminal activity. Many older adults are frustrated (as are a number of younger people) by the complexities of the current criminal justice system. They clearly remember a time when crime was not a major problem and, when it occurred, was dealt with quickly and in a manner that most people could understand. Many older people are shocked by what they consider the current lack of respect shown by younger people toward older persons and what they see as the inability of law enforcement and other governmental agencies to control crime. Many older people also feel

society is more tolerant of criminal activity. This is not reassuring for those whose vulnerabilities are increasing each year.

Older people have witnessed these changes and have had to adjust to them. They view most of these changes as evidence that many in society today do not respect them and are not concerned for their safety and security.

### III. VULNERABILITY

The vulnerabilities discussed in this section apply, for the most part, to people 65 or older; however, they do not apply to everyone over 65 and may, in fact, be associated with some younger persons, depending on their size, state of health, and lifestyles.

#### 1. PHYSICAL WEAKNESS

As people age, they become more and more aware that their physical capabilities are declining. They are more vulnerable to injury and disease and they recover more slowly than when they were younger. While some can postpone the most obvious signs of this deterioration, they cannot avoid it. The implications are obvious should they become victims of violent crime. Those who have lost some or a considerable portion of their physical abilities (strength, endurance, agility) may be more vulnerable to violent crimes. They are less able to resist or flee from attackers and their reaction times may be slower. If attacked, they are more likely to suffer physical injuries and, if injured, they may require longer recovery periods than younger people.

Lack of physical abilities can also increase vulnerability to certain frauds. For example, those who are no longer confident that they can accomplish minor repairs to their homes may be more vulnerable to unscrupulous contractors or individual repairmen.

#### 2. SENSORY IMPAIRMENTS

Those of any age who have diminished sight or hearing are more vulnerable because they may have difficulty seeing or hearing the approach of perpetrators and may be unable to identify

suspects if later called to testify.

Sensory impairments may also make it more difficult to read the "fine print" on a contract or to hear clearly and understand answers from salespeople.

#### 3. DECLINE OF ECONOMIC OPTIONS/RECOVERY POTENTIAL

Many older people live on fixed incomes and face an immediate decline in their standard of living if some of their money is stolen or they are defrauded out of a substantial portion of their savings. Those who own older homes may be unable to afford repairs or security improvements and cannot afford to move if their neighborhoods deteriorate.

As people age, they may become more aware that there are limits to the growth potential of their financial resources and they may be more easily influenced to take risks with their money in anticipation of large returns. The financial options that younger people often take for granted, such as working a second job, delaying retirement, or investing in a company with good long-term potential, are no longer open to most older people.

#### 4. MORE TRUSTING ATTITUDES

Because they grew up during a time when crime was not so prevalent, some older adults may be more trusting than younger people. Some may not take even simple precautions such as locking their doors or placing valuables out of sight.

Others may be inclined to believe a stranger who "appears" honest. They may not have developed a reasonably cautious attitude that could make them less vulnerable to criminal activity.

#### 5. LIFESTYLES AND BEHAVIORAL PATTERNS

People who live alone, including many older persons, may be vulnerable to personal crimes and fraud. If they are attacked in their homes, immediate help is usually not available. Their possessions may also be susceptible to theft because a home with only one occupant is vacant

when the owner leaves for any reason.

Those living alone may be vulnerable to fraud because it can be more difficult for them to consult with a friend if offered a deal "too good to be true."

Many older people carry cash and keep large amounts of cash in their homes because they prefer to pay for their purchases without credit cards or checks. Some older people also prefer to receive their Social Security checks in the mail rather than use direct deposit systems.

Many older people use public transportation. People of any age may be vulnerable to criminal activity when using public transportation because they must wait in designated locations at specific times, carry at least small amounts of cash, and accept the relatively close proximity of other people also waiting for the transportation.

Behavioral patterns of some older people may also be predictable. Some may go to their banks at certain times and days each month to cash their Social Security checks. Others may shop for food at the same time each day. It is normal for people of all ages to fall into routines to meet various recurring commitments or satisfy daily needs.

#### **6. EMOTIONAL CONDITIONS**

Some older persons may be unusually preoccupied with economic, physical, or other personal problems and, therefore, not be alert to their surroundings.

Older persons may also be lonely and even welcome strangers into their homes for the opportunity of conversation. This can make them susceptible to fraud as well as violent crime.

#### **7. KNOWLEDGE OF VULNERABILITIES**

Most elders are aware of at least some of the vulnerabilities previously discussed, and how these vulnerabilities apply to them. As a consequence, it is not surprising that older Americans fear being victimized by criminals

more than any other age group within society. Their fear of victimization is, in the truest sense, a type of secondary victimization. It may cause them to alter their lifestyle and, at times, to effectively withdraw from society by staying at home.

### **IV. THE INFLUENCE OF FEAR**

#### **A. RESPONSE: CONSTRUCTIVE OR INEFFECTIVE?**

In some situations, fear of crime can be channeled into constructive precautions that can reduce vulnerability to crime. Fear of crime can also cause citizens to become discouraged or take ineffective or even irrational actions to protect themselves from criminal activity. Fear can lead people to focus their prevention efforts on the wrong problem.

#### **B. DIMINISHED QUALITY OF LIFE: NOT AN ANSWER**

As a result of their fears, older people often take steps that diminish their quality of life and may, ironically, increase their vulnerability to crime. Some of these activities are:

##### **1. RESTRICTING BEHAVIOR**

Many stay home at night, limit shopping trips, and avoid social interaction with their neighbors. Some withdraw to the point that they impose upon themselves a form of "house arrest." Often this withdrawal may include a reluctance to become involved in activities such as Neighborhood Watch or to attend crime prevention presentations. It may extend to a refusal to report suspicious activities or even to call police when criminal activity is witnessed. Over dependence on caretakers may also occur.

## 2. THINKING IRRATIONALLY

Because of their fears, many older people may be unable to assess the crime threat in their neighborhoods.

### a. Crimes Less Frequently Committed

Fear can lead elders to fear crimes that they are least likely to experience. For example, most older people express high fear levels about violent crimes that receive extensive publicity such as homicide, rape, and aggravated assault. However, in most areas, the victims of this type of activity are not older people. A Department of Justice (DOJ) study of older victims during the years 1980 to 1985 found that the assault rate was 17 times higher for those under 25 than for those over 65. The figure for rape of women over 65 showed an even lower incidence. A 1987 DOJ report entitled "Elderly Victims" confirmed these findings. And this trend has persisted through 1990.

After considering the above statistics, one concludes that the fears of many older people may be misplaced with regard to the threat of violent crime. With the exception of those who live in the inner city, many may be taking precautions to reduce their potential vulnerability to crimes that are not, statistically, the greatest threat to them and, in some cases, no threat at all.

What accounts for this gap between fear and reality?

#### (1) Lifestyles

While they do worry, older people generally avoid situations that can lead to violent crime. If faced with such situations, most attempt to settle disputes without violence. Younger people, especially males, tend to seek out activities that can lead to violence and may either instigate or aggravate incidents that are later reported as crimes. As a result, although there is a high rate of victimization from violent

crimes for this age group, most young men do not express high levels of fear.

### (2) Vicarious Victimization

Some older people suffer from vicarious victimization, which occurs when those who have not been victimized learn of a crime committed against someone in similar life circumstances. When older people hear or read of a particularly shocking crime against another older person, irrational fears can develop. They may come to believe that the same type of crime will happen to them or may even experience the suffering even though they are in no danger.

Vicarious victimization can occur across space and time. People who live in neighborhoods with very low crime rates can vicariously experience crimes that take place elsewhere. This experience can be repeated in the minds of some older people even after the criminal is incarcerated or the particular type of crime ceases to occur.

Of course, fear of violent crime may be appropriate in certain situations. For example, the high crime rates in some large cities may be ample reason for the high fear levels expressed by most older residents of these cities.

### b. Crimes Frequently Committed: Caregiver Abuse and Financial Exploitation

Many older people are unaware of the fact that, as a group, they are more likely to be subjected to caregiver abuse and financial exploitation than to personal injury at the hands of a stranger.

When stranger crime does occur, it is mostly motivated by the perpetrator's desire to acquire property, not to be violent. Thus, while those over 65 are assaulted much less frequently than younger people, their victimization rate for the crime of robbery

risers to about one-third that of younger age groups. Older people are vulnerable to robbery because robbers have little fear of resistance since they can usually overpower elders, especially if taken by surprise. Robbers also believe they can intimidate older people not to report the crime or that the poor eyesight of their victims will prevent a positive identification; finally, many elders present an ideal target because they follow routines.

For the crime of burglary, the rate of victimization for those 65 and over rises to about one-half the rate for those under 65.

This trend continues for the crime of "larceny with contact" (e.g., purse snatching or pickpocket theft) as seniors are victims of this type of crime at least as often as younger people. The reason is that thieves count on the slower reaction time of older victims. Older persons are less likely to detect the approach of a pickpocket or purse snatcher because of hearing and vision limitations (e.g., constriction of peripheral vision). Additionally, older persons are more likely to carry cash than younger people and usually lack the ability to pursue someone who has stolen their purse or picked their pocket.

Finally, as will be addressed later, the crime of fraud poses a serious threat to older people. Although this type of crime has chronically low reporting rates, information obtained through both AARP research and discussions with police officers reveals that this is one of the most commonly committed crimes against older adults.

### **3. ACTING INAPPROPRIATELY**

Some people, regardless of age, may devote all their attention and resources toward preventing or avoiding the wrong types of crime. For example, they may use an excessive number of locks but pay little attention to the possibility of caretaker abuse or fraud by caretakers, lawyers and outsiders. Some may accept inappropriate limits on their freedom.

Those plagued by fear may be reluctant to report crime or suspicious activities and may even refuse to cooperate with law enforcement and social service agencies.

### **4. CAUSING OTHERS TO BE AFRAID**

Fear can build upon itself through rumor and word of mouth. Some people, of any age, who have heard of others' victimizations can be as fearful as the actual victims. Older people's feelings of frustration and helplessness are reinforced each time they hear or read of violent criminal activities, especially against older persons.

### **5. CAUGHT IN THE VICIOUS CYCLE**

Fear can cause people to lose pride in their communities, which in turn makes their communities less safe and pleasant places to live, which in turn causes people to become more fearful, and so forth. Fearful people may "give up" and no longer care enough about their community to participate in activities that promote economic and social viability. Such people may allow their property to deteriorate, avoid shopping in local stores, or fail to report criminal activity. As a result, property values can decline, businesses that promote community development and culture may leave the area, and unemployment may increase.

## **V. LAW ENFORCEMENT RESPONSE: COMMUNITY OUTREACH**

### **A. PERSPECTIVE**

Law enforcement agencies can implement programs that will help older people to understand the most prevalent crimes confronting them and the most effective measures to lessen their vulnerability. Suggested actions are:

### **1. FOCUS ON THE REAL CRIME PROBLEM**

Recognize that the public's fear of crime is not always based upon actual victimization. Determine if local attitudes and fears about crime reflect reality or speculation based upon fear or publicity.

If the reality of the crime problem is not understood, preventive resources may focus on the wrong problem; or, if the level of fear is allowed to develop to unrealistic proportions, it can unnecessarily restrict people's freedom of movement and reduce their quality of life.

### **2. EDUCATE THE PUBLIC BY TEACHING RISK REDUCTION**

Inform citizens of the facts, using crime analysis data as necessary. Replace myths and rumors with information that applies to the jurisdictions in which they live. This will influence people to concentrate their efforts on the likely possibilities of criminal behavior. Citizens of any age who are tormented by unlikelihoods, cannot expect to take effective actions to reduce their vulnerabilities.

Because a high percentage of crime is opportunistic and requires only a low level of skill to accomplish, officers should inform people that they are not defenseless against criminal activity.

Often, simple and easily implemented measures will be sufficient to discourage or frustrate many criminals. Examples are: locking homes and cars, walking in lighted areas away from buildings, walking in pairs, being aware of one's surroundings, carrying only small amounts of money, never leaving a purse unattended, and carrying a purse close to the body.

It can be especially useful and encouraging to older people to learn that they can exercise some degree of control to lessen their vulnerability. Because of their fears, many older people have come to believe that there is little they can do to avoid becoming crime victims other than isolating themselves from their friends.

People of all ages must be cautioned that some criminal activity is insidious and can be very difficult to detect. Frauds, street swindles, and various home invasion schemes fall into this category. Older people should understand that they cannot be defrauded unless they cooperate with the criminal. Learning to "just say no" will empower them to control the situation and frustrate the criminal attempt.

Finally, older people need to recognize that they are vulnerable to caretaker abuse and financial exploitation. Thus, they must take steps to keep their finances in order and outside the control of one person. They must also maintain their social contacts so that they do not rely exclusively on one caregiver for their social and living needs.

### **3. RECOGNIZE THE SPECIAL NEEDS OF OLDER PEOPLE**

Design crime prevention presentations and select locations that will interfere as little as possible with the ability of older people to see and hear. Speakers should limit presentations to older audiences to 30 or 40 minutes and speak slowly without sounding artificial.

In addition, it is best to integrate presentations into activities where seniors are already gathered -- for example, during a lunch at the local senior center or during a break at the church bingo game. Elders typically find it less convenient to make a special trip than to have the presentation be a part of their normal activities. Equally important, elders may appreciate the message more when it is communicated in a less threatening environment during an enjoyable activity, rather than the focal point of a special meeting.

Finally, it is very helpful to be knowledgeable about the social service agencies in the community that provide assistance to older people. *For an example of an officer working effectively with the community in Massachusetts, see Attachment B.*

**B. PROGRAMMATIC EFFORTS****1. SENIOR VICTIM ASSISTANCE TEAMS**

Referrals are often made to legal, medical and social services for the elderly. Many of these units help the elderly victim complete necessary forms to replace critical identification and credit cards, as well as licenses, food stamps, social security checks and medical equipment. Help may also be provided to repair broken locks or windows to secure the older person's home. Some programs use volunteers or police personnel to assist elderly crime victims through the trauma and ensuing criminal justice process, and to provide transportation for court appearances and medical appointments.

**2. PROGRAMS FOR AT-RISK ELDERLY CITIZENS****a. Database**

Police can create a database for citizens to voluntarily submit information such as their names, addresses, doctor's name, hospital, chronic illness, neighbor's name, whether neighbor has a key, next of kin, etc. Officers are then aware of this information when dispatched. These programs are also used to help citizens with Alzheimer's.

**b. Escort Services**

Escort services help reduce opportunities for victimization and fear of crime.

**c. Telephone Crisis Hotlines**

Volunteers take calls and can assist elders with their needs. Volunteers also prevent abuse by maintaining contact with elders who cannot leave their homes on a daily basis. If the elder does not answer the phone, the police department is notified and officers check on the residence.

**d. Adopt-a-Senior**

This program matches officers with seniors who are isolated and vulnerable to abuse.

Officers are encouraged to make contact on a regular basis, assess needs, and refer them to appropriate resources.

**e. Medical Information Inside Refrigerator**

Police encourage elder residents to place medical information inside a tube, which the department provides, inside their refrigerators. The refrigerator was selected as the storage area because of its resistance to fire. A sticker is placed on the refrigerator that indicates that emergency information is stored inside. Police are instructed to look for these stickers when called to an emergency at an elder's home.

**f. 3-Panel Mailing Report**

Patrol officers are given an innovative 3-panel, self-mailing brochure. An officer who identifies an older person who wants non-emergency services will give the elderly citizen the first panel of the brochure, informing the individual that a social worker will contact them. The officer then completes the middle panel of the brochure with a description of the problem and the contact information. The officer mails it to social service coordinator. After assessing and providing services, the social worker completes the third panel of the brochure with a description of the action taken and returns it to the original officer to provide feedback.

**3. COOPERATIVE EFFORTS****a. Neighborhood Canvass**

Police and Adult Protective Services use volunteers trained by the department to go door-to-door to canvass citizens in neighborhoods with high concentrations of older adults to determine their needs and assess their safety.



**b. Safe House**

Police and social services are well-advised to create a safe house for elderly victims of violence and for older persons in potentially dangerous situations.

**4. TRIAD PROGRAM**

The TRIAD is a formal cooperative agreement between chiefs and sheriffs and representatives of AARP. TRIADS take a variety of forms and involve such activities as crime prevention training, adopt-a-senior programs, volunteers, telephone reassurance, neighborhood watch, etc. Currently, the Sheriff of Norfolk County and the Sheriff and District Attorney of Hampshire County have excellent programs to help seniors learn about crime prevention. The Sheriff of Franklin County and police and protective service agencies in the Merrimack Valley have also begun to institute programs.

For more information about TRIAD, contact the key people listed at the end of this chapter. *Also see Attachment C.*

**VI. LAW ENFORCEMENT RESPONSE: THE ELDERLY VICTIM OR WITNESS****A. THE CONTEXT**

In general, reactions to victimization depend largely on: (1) the intensity and duration of the criminal event; (2) the victim's personality, life history, and perception of recovery potential; and (3) the victim's emotional state at the time of the crime. These factors are far more important than age in determining the reaction to crime and in predicting how a victim will respond to counseling efforts.

However, older crime victims may be subject to additional factors that potentially increase their crime stress reactions.

**1. LOSS OF RECOVERY POTENTIAL**

Physical injuries and financial losses may be beyond the recovery potential of some older victims. A younger victim, suffering the same injuries or financial loss, may have more physical and financial resilience.

**2. INTOLERANCE OF LOSSES AND ADJUSTMENTS**

As people grow older, they experience a series of losses that are caused by events other than crime. They lose their spouses; children (even if they only move away); friends and relatives through death; jobs and levels of income; the ability to drive; and certain aspects of their health. Many older people understand that these are mostly natural events and can usually learn to cope with them. As each loss occurs, however, remaining elements over which they still exercise some control become more important to them and they become less tolerant as each new loss occurs. This can cause extreme stress reactions when losses occur to property and health as a result of criminal activity. Furthermore, older people have had to adjust to many changes in their lives, such as advances in technology and changes in social attitudes. If victimized, they will be required, against their will, to make further adjustments.

**3. DISTORTION OF THE IMPACT OF THE CRIMINAL EVENT**

Depending upon the individual, any one of these factors may be significant enough to distort the victim's perception of the criminal event and intensify reactions to it. If this distortion occurs, it is important for victim assistance and law enforcement personnel to understand that the victim's reactions are most likely not caused by a mental disability that some might attribute to advanced age. Rather, they should view these reactions as normal when they consider the victim's life circumstances.

If this is understood, and those working with older victims are perceptive and sensitive, most older victims can re-establish some degree of control following the crime. This psychological

control can be manifested in ways that are useful to law enforcement -- such as a willingness to cooperate with authorities, identify the perpetrator and testify in court.

## **B. ATTITUDE AND ASSISTANCE**

Within this complex framework of emotions resulting from victimization, techniques exist that can help law enforcement and victim assistance personnel deal more effectively with older crime victims. In addition, the next section of this manual highlights ways to help older people overcome the vision and hearing losses they often experience.

### **1. SHOW RESPECT**

Showing respect should not be a problem. Simple courtesy is all that is required. For example, avoid the use of terms such as "young fella" or "old timer." Older people interpret such expressions as signs of disrespect and talking down to them. They have expectations of courtesy that should be respected. Remember, although service providers and officials may have many years of experience, they look very young to an older victim. This may make it very difficult for an older person to relate details of criminal acts such as sex crimes and certain frauds.

Another way to demonstrate respect is to instill a sense of control through the interview. This can be accomplished through simple actions such as asking for permission to enter the home or to sit down, or asking the older person what they would like to be called. Tell the victim what to expect during the investigation.

### **2. ASSUME CAPABILITY**

Do not assume senility. Remember that the older victim may have just been subjected to a terrifying experience and the shock may initially block their ability to think in a rational manner and recall details of the crime. This also happens in many situations involving younger victims.

### **3. OBSERVE BODY SPACE**

Some older people stand close (within a foot or less) to others. This may be their normal tendency, or their nearness to the officer or victim service provider may be to compensate for seeing or hearing difficulties.

### **4. RESPOND TO HANDSHAKE AND TOUCH**

Because of the stresses they are enduring, some older victims may hold a handshake longer than would normally be expected. Do not pull away before they begin to release their grip. Some may also periodically touch the officer when talking; again, it is best not to pull away.

### **5. CONSIDER THE ENVIRONMENT**

Inadequate lighting and the presence of background noise can be very disruptive to conversation, especially when dealing with a crime victim who may have hearing or seeing difficulties. Compensate for these problems as discussed in the next section.

### **6. ADJUST POSTURE AND BODY LANGUAGE**

Keep reasonably close to the eye level of older victims; sit when they sit and do not stand over them. Tone down all body language, which will help them to relax.

### **7. CONTROL VOICE TONE AND PACE**

Keep the voice as sympathetic and conversational as possible and speak slowly. Avoid any chance that the victim will be further frightened or intimidated.

### **8. EXHIBIT COMPASSION**

Provide victims of any age what they need most -- usually someone to talk to who can reassure them, answer their questions, and provide referral information. Let your actions and words tell them that you are sympathetic and that you care. Compassion does not mean that you have to indulge victims. In fact, contrary to belief, establishing rapport can increase your efficiency in handling situations. Once elders

understand that you care about them, it is easier to establish groundrules for a professional relationship. They can accept that you have a job to do and that there are limits on how much attention you can give to their case. The key is to tell the truth with compassion and to do what you say you are going to do.

## **SOURCE MATERIALS**

Bordenet, J., *AARP Law Enforcement Training Manual*, Section IV.

## **KEY CONTACTS**

For more information concerning the TRIAD program, contact:

**Kathleen O'Neil Alexander**  
Community Education Coordinator  
Hampshire County District Attorney  
One Court Square  
Northampton, MA 01060  
(413) 586-9225

**Richard E. O'Leary**  
Senior Services Coordinator  
Norfolk Sheriff's Department  
P.O. Box 149  
200 West Street  
Dedham, MA 02027-0149  
(508) 329-3705

**Kathleen Anastopoulos**  
Special Program Manager  
Elder Services of the Merrimack Valley, Inc.  
360 Merrimack Street, Building 5  
Lawrence, MA 01843  
(508) 683-7747  
(800) 892-0890 (*Mass. only*)

## **SECTION IV**

### **COMMUNICATING WITH OLDER PERSONS**

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#### **I. INTRODUCTION**

Contact between older adults and law enforcement personnel will increase as baby boomers age and as most older people maintain active lifestyles well into their 70's. As a result, more older people will likely: become crime victims; be called on to testify in court; and be available to help police through volunteer work or as members of community watch programs.

Consequently, law enforcement personnel must be able to communicate effectively with older persons under a variety of circumstances. In most cases, using techniques that apply to younger people can accomplish this goal. There are times, however, when older people who have vision and/or hearing problems need special care and attention.

As people age, their personalities and attitudes usually remain fairly consistent. Changes do occur, however, in physical abilities, which deteriorate at varying rates over time depending upon individual characteristics. The most obvious losses are strength and dexterity. Less obvious are diminishing vision and hearing capabilities.

##### **A. VISION AND HEARING PROBLEMS DIFFICULT TO DEAL WITH**

Vision and hearing problems may be the most difficult obstacle to communication because they often cannot be detected as easily as losses of strength or dexterity, and they do not occur in all older persons.

##### **1. THE CHALLENGE**

Officers face a distinct challenge: they must be able to recognize when older persons, and even some younger persons for that matter, have difficulty seeing or hearing, and they must be able to compensate for the problem. Many people (of all ages) tend to mask their hearing or

vision problems out of embarrassment, thus making communication almost impossible unless the officer can recognize clues (often very subtle) that the person cannot hear or see well.

Police should also be sensitive to the fact that, in some circumstances, the traditional respect that most older persons have for the police can further mask vision and hearing losses. Some older persons may be reluctant to insist that officers repeat statements, explain the meaning of certain terms, or ask that they move from an area where intense lighting is causing glare.

##### **2. THE CONSEQUENCES OF MISUNDERSTANDING**

If the police fail to detect subtle clues that the older person (as a victim, witness, complainant, or even accused) cannot hear or see well, they may believe that the older person is not interested in resolving the situation or is mentally deficient.

#### **B. THE PROPER PERSPECTIVE**

To avoid the very serious problems that could develop through the failure to recognize that a person has vision or hearing problems, police officers should keep the following in mind:

##### **1. EXPECT VISION/HEARING IMPAIRMENT**

Most, but not all, older persons have some vision or hearing deficiencies.

##### **2. CONSIDER THE ENVIRONMENT**

Always consider whether the environment is facilitating or hindering an older person's vision and hearing. For example, be aware of such things as glare, the size of the print on forms to

be filled out, and background noise.

### 3. *KNOW THE CLUES*

Know the most common clues that people can unintentionally give when they are having difficulty seeing or hearing.

### 4. *COMPENSATE*

Be prepared to react by implementing compensation techniques.

## II. VISION PROBLEMS -- CLUES AND COMPENSATION TECHNIQUES

About 75% of all older women and over half of all older men experience moderate to severe deterioration in visual functions. Not all older persons have vision deficiencies, however, and many younger adults have less than perfect vision.

There are eight common types of vision impairments. The following information defines each, identifies clues or behaviors that can indicate the existence of a problem, and lists compensation techniques.

### 1. *DIFFICULTY FOCUSING*

**Clues:** People who cannot bring objects into sharp focus may squint, continually change the distance of reading materials from their eyes, or appear to have no interest in or misunderstand the content of reading materials or displays.

**Compensation techniques:** For reading materials, use large letters. Use a simple, uncluttered type style. Headings, texts, and illustrations should have simple layouts. Maintain consistent spacing between letters. Present the message clearly in short paragraphs.

### 2. *SENSITIVITY TO GLARE*

**Definition:** Glare is excessive light that originates from either concentrated light sources (for example, car headlights from the opposite traffic lane shining directly into the eyes of a driver) or from objects that scatter light (for example, shiny paper or metallic-colored inks).

**Clues:** People who experience excessive glare may squint, shield their eyes, or turn away from the light source.

### Compensation techniques:

#### a. *Presentations*

During presentations, glare problems can be largely avoided. Adjust lights to distribute and balance the light level evenly, arrange seats so the audience faces away from a light source, and lower curtains and blinds to decrease the intensity of sunlight that could shine on a viewing screen or in the faces of the audience. Also, avoid glossy paper or metallic inks when preparing reading materials or presentation aids.

#### b. *Investigations*

In a law enforcement setting, consider problems of glare when approaching older persons at a traffic stop. During the day, try to avoid approaching them from the direction of the sun. At night, avoid shining flashlights directly into someone's wallet or purse. Also, consider possible glare problems for those viewing line-ups and reviewing photos in mug books.

### 3. *DECREASED SENSITIVITY TO LIGHT*

**Definition:** Light sensitivity refers to the amount of light needed to see various objects. As people age their eyes may let in less light and function less efficiently when lighting conditions are poor.

**Clues:** Those with this problem may appear uncertain when entering a building or room or may appear unable to read material under conditions of less than ideal light.

**Compensation techniques:** Balance the need for increased light with the requirement to avoid glare. Determine whether adequate lighting is available before evaluating an elderly person's response to a request, such as removing a driver's license from a wallet or identifying an individual in a police line-up.

#### **4. DELAY IN ADAPTATION TO DARKNESS**

**Definition:** People with normal vision require about five minutes for their eyes to adjust from bright light to dim light. It may take several minutes longer for some older people to make this transition.

**Clues:** Those whose eyes adjust slowly may appear confused upon entering a building if there is bright sunlight outside. These people may also appear to lose interest during presentations if lighting conditions are varied either drastically or frequently to accommodate slides or transparencies.

**Compensation techniques:** Allow a few extra minutes before beginning a presentation for older people in the audience to adjust to the lighting conditions in the presentation room. Equally important, consider changes in the lighting conditions when older victims and witnesses enter courtrooms, police stations, or victim assistance offices.

#### **5. DIFFICULTY DISTINGUISHING COLORS**

**Definition:** As people age, the lenses of their eyes may yellow. This condition reduces the amount of light entering the eye, thus reducing the eye's ability to distinguish colors.

Colors that usually fade fastest are those in the violet range of the spectrum (purple, blue, and green). As a result, these colors can become less distinct from one another.

Colors that usually fade least are those in the red range of the spectrum (yellow, orange, and red). These colors are often easier for older people to distinguish.

**Clues:** People who have difficulty distinguishing colors may not be able to identify the color of clothing, cars, or other objects they may have observed during the commission of a crime. Do not assume that this is a memory problem, especially if they are able to recall other information.

**Compensation techniques:** When presenting information, select colors from different ends of the color spectrum. Avoid mixing purples, blues and greens. Ensure that lettering stands out clearly from its background.

#### **6. INABILITY TO CHANGE FOCUS RAPIDLY**

**Definition:** The eyes of some older people become slower in shifting focus from one object to another.

**Clues:** This condition can make it difficult to take notes while attending a crime prevention presentation if, for example, those in attendance are required to constantly look up from their papers to the front of the room or to shift attention from one projected image to another rapidly.

**Compensation techniques:** When advancing slides or changing transparencies, presenters should wait for a few seconds after the new image appears on the screen before beginning to discuss the material. Also, allow time for older people to shift focus if viewing objects at varying distances (for example, looking at a handout on their desks, then viewing a slide at the front of the presentation room).

#### **7. LOSS OF DEPTH PERCEPTION**

**Definition:** Depth perception is the ability to judge distances between objects.

**Clues:** Individuals who have poor depth perception may hesitate when crossing streets because they are not confident of their ability to estimate distances from oncoming vehicles.

Witnesses who have poor depth perception may not be able to describe a crime scene fully; however, they may be able to give other perfectly reliable information, such as identification of suspects, sequence of events, color of clothing, and so on.

**Compensation techniques:** Arrange seating to limit variations in distance from the speaker. Keep transparencies, charts, and other training devices the same distance from the audience.

When interviewing a witness, give concrete examples to help them gauge distances as best they can (for example, do not ask for a distance measurement in terms of feet, perhaps use car lengths or some other clearer standard of measurement).

#### **8. CONSTRICTION OF PERIPHERAL FIELD**

**Definition:** Peripheral vision is the outer portion of the field of vision. The healthy eye has a 3 degree cone of "central vision" in which objects appear in clear detail. Peripheral vision extends to 90 degrees and surrounds the field of central vision. Although we cannot see sharp details of objects with our peripheral vision, we can detect motion, light, darkness, and varying shapes and sizes of objects. After about age 45, peripheral vision begins to constrict, and it can become worse after age 65.

**Clues:** Those whose peripheral vision is limited may appear to lose interest in a presentation or an interview if they are required to turn their heads constantly or change positions in their seats to view material or look at the speaker.

**Compensation techniques:** Whenever possible, stand in front of older persons when talking to them. Avoid the tendency to repeatedly pace back and forth in front of the older person or an audience.

Tables and chairs against the sides of a presentation room should be rearranged to face toward the center and front of the room so people can face the speaker without having to rotate in their chairs. Facing forward can also mitigate low back for participants.

### **III. HEARING PROBLEMS – CLUES AND COMPENSATION TECHNIQUES**

#### **A. INTRODUCTION**

Normal hearing is the ability to recognize comfortably all the features of speech under hearing conditions considered to be normal, i.e., when there is moderate volume and diction, absence of extensive background noise, and short distances from speaker to listener.

Fifteen million Americans have significantly impaired hearing. Fewer than half of these people are 65 or older. Some persons are born with hearing problems. It is estimated that some hearing loss occurs in one of every four persons over the age of 60.

Deterioration of hearing is usually gradual. As a result, most people are not aware of the degree to which their hearing deficiencies may be affecting their ability to communicate.

#### **B. HEARING IMPAIRMENT CLUES**

- 1. LACK OF NORMAL RESPONSE TO SOUNDS MOST PEOPLE HEAR;**
- 2. INATTENTIVENESS OR DIFFICULTY FOLLOWING SPOKEN DIRECTIONS;**
- 3. FREQUENT REQUESTS OF SPEAKERS TO REPEAT STATEMENTS;**
- 4. TURNING ONE EAR TOWARD THE SPEAKER;**
- 5. CUPPING A HAND BEHIND ONE EAR TO "CAPTURE" SOUNDS;**
- 6. MONOTONOUS OR UNUSUAL VOICE QUALITY;**
- 7. UNUSUALLY SOFT OR LOUD SPEECH;**

### C. COMMON TYPES AND COMPENSATION

There are three common types of hearing impairments. The following information defines each and lists compensation techniques.

#### 1. VOLUME REDUCTION

**Definition:** Less ability to hear sounds at their actual volume.

**Compensation techniques:**

##### a. Increase Volume, Not Pitch

Slightly increase the volume of the voice. But understand that too much volume can increase hearing difficulty for some people because many people tend to raise the pitch of their voices when they talk louder. Because most people with hearing problems do not hear sounds in the higher frequency ranges as well as they hear lower sounds, a louder voice (with a higher pitch) may be as difficult for them to hear as one that is too soft.

##### b. Speak Slowly

Speak slowly and distinctly. Keep the pace of the delivery at about 140 words per minute. Use the "extra" time to pronounce the words more carefully; this is good advice for any presenter speaking to an audience of any age.

#### 2. DISTORTION OF HIGH-PITCHED SOUNDS

**Definition:** Most people with hearing impairments have difficulty hearing high-pitched sounds. People with this condition also have a lessened ability to hear sounds such as "f," "th," "s," or "z." Many with this particular hearing problem can still hear sounds in the lower frequencies.

**Compensation techniques:** Avoid shouting, as this will often cause the pitch of the voice to increase to a point that it will be more difficult for older persons to hear.

Control the voice to keep the pitch as low as possible, but do not stress this technique to the point that the voice begins to sound strained or unnatural. Also, avoid rapid changes in the volume and pitch of the voice.

#### 3. INABILITY TO HEAR OVER BACKGROUND NOISE

**Definition:** Background noise originates from unintended sources and is often in the lower pitch range. It can cause considerable difficulties since, as mentioned, most older adults with hearing problems hear only the low pitched sounds. Therefore, background noise can cover up and distort the sounds people want to hear.

**Compensation techniques:**

##### a. Presentations

Eliminate as much noise as possible from outside the presentation room, such as sounds from a corridor. Also consider background noise coming from within the presentation room, such as the sound from a cooling fan on an overhead projector. And begin a presentation only after the audience has settled down and become quiet and attentive.

##### b. Investigations

Conduct interviews in offices or locations away from sources of outside noise.

### D. OTHER TECHNIQUES

The following additional techniques will also be useful when addressing an audience composed of older people:

#### 1. FACILITATE LIP READING

Always face the victim, witness or audience when speaking to them. And have sufficient light to allow the listener or audience to clearly see the face of the speaker. These steps will allow those who do not hear well to read your lips.



## 2. *CONTROL THE PACE*

Make the presentation slow and clear, and control the exchange of information between the audience and speaker, or between members of the audience, to ensure that those in attendance need only concentrate on one speaker at a time.

## 3. *REPEAT QUESTIONS*

Always repeat questions from members of the audience to the entire audience before answering them.

## 4. *DO NOT EXAGGERATE*

Be careful not to exaggerate any of the above techniques. This could cause some older persons to misinterpret the attitude of the speaker as being condescending.

## SOURCE MATERIALS

Bordenet, J., *AARP Law Enforcement Training Manual*, Section III.

Also see *PERF Improving the Police Response to Domestic Elder Abuse*, Module II.

## **Effective Communication with Hearing-Impaired Adults**

- Ask the person if he or she would prefer to use written communication or an interpreter.
- Arrange the room where communication will take place so that no speaker and listener are more than six feet apart, and all are completely visible.
- Concentrate light (but be sure it is not glaring) on the speaker's face for greater visibility of lip movements, facial expressions, and gestures.
- Position yourself directly in front of the person to whom you are speaking.
- Do not stand in front of a light source such as a window.
- Speak to the hearing-impaired person from a distance of no more than six feet, but no less than three feet.
- To get the person's attention, use a light touch on the arm or shoulder.
- Establish eye contact before you begin to speak.
- Speak slightly louder than you normally would.
- Speak clearly at your normal rate, but not too quickly.
- Use short, simple sentences. Keep language concrete.
- Eliminate as much background noise as possible.
- Never speak directly into the person's ear.

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**Effective Communication with Hearing-Impaired Adults, Continued**

- If the person does not appear to understand what is being said, rephrase the statement, rather than just repeating the same words.
- Do not over-articulate. Over-articulation distorts both the sound of speech and the face, making visual clues more difficult to understand.
- Include the person in all discussions about him or her.
- Avoid smoking, chewing gum, or covering your mouth while you speak.
- Repeat key words and phrases. Ask the listener to repeat what you have said.
- If you cannot understand the person's answer to your question, ask him or her to repeat or rephrase the response.
- Use open-ended questions, not questions requiring a "yes" or "no" answer.
- Use visual aids whenever possible — drawings, diagrams, etc.
- Watch for signs of fatigue in your listener.
- When using written communication, remember the following:
  - Keep your message short and simple.
  - Use short words and phrases.
  - Face the person after you have written your message.
  - Use visual aids.
- Always treat the elderly person with dignity and respect.
- Avoid a condescending tone.

## SECTION V

# THE IMPACT OF SPECIALIZED TRAINING ON POLICE RESPONSE TO OLDER VICTIMS

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### I. INTRODUCTION

Law enforcement agencies that sensitize their personnel to the needs of older people generally do so to accomplish two principal objectives: (1) to increase the effectiveness of law enforcement services to older adults, and (2) to gain increased support from members of this age group. Until recently, however, the purpose of this training was accomplished in theory only.

### II. THE MILWAUKEE STUDY

#### A. THE SENIOR CITIZEN UNIT

In 1980, the Milwaukee Police Department established a Senior Citizen Unit with an authorized strength of 15 officers and detectives. This seemed appropriate for a city whose population of older citizens was rapidly growing. In 1991, Milwaukee's population of persons at least 60 years of age was 78,137, or somewhat more than 9% of the city's total population.

Members of this Unit, also referred to as the "Gray Squad," were selected from volunteers. They then received specialized instruction that was similar to this training, including:

##### 1. INFORMATION ABOUT AGING PROCESS

Providing officers information about the process of aging to help them avoid stereotypes and recognize that older people constitute a diverse group of individuals with both strengths and vulnerabilities.

##### 2. COMMUNICATION SKILLS

Improving communication skills for interviewing older people, including sharpening the officers' ability to recognize both overt and subtle clues

indicating that someone, young or old, does not hear or see well.

##### 3. INFORMATION ABOUT ELDER FEAR

Increasing officers' knowledge of and sensitivity toward older people by helping them to understand why older people are so afraid of crime and how they react to criminal activity.

##### 4. UNDERSTANDING SOCIAL SERVICES

Broadening the ability of responding officers to refer victims to social services in the community.

### B. THE MISSION OF THE GRAY SQUAD

#### 1. INVESTIGATION

Investigate crimes against older citizens.

#### 2. CRIME ANALYSIS

Analyze all reports of crimes against people 60 years of age and older to determine patterns of criminal activity against older persons.

#### 3. CRIME PREVENTION

Prevent crime by informing older citizens about the functions of the criminal justice system and recommending actions that they can take to reduce their vulnerability.

### C. STUDY METHODOLOGY

In 1987, a study examined whether the additional effort and expense of training the Gray Squad led to positive perceptions of police performance by older persons receiving Unit Services.

The study was conducted by randomly selecting names of 314 older persons who had been victims of contact or confidence crimes during 1986 and 1987. This list was then divided into two groups: (1) victims whose cases had been investigated by Senior Citizen Unit officers, and (2) victims who had been responded to by non-unit investigators. Eventually, a total of 224 victims completed questionnaires -- 112 from the Senior Citizen Unit group and an equal number from the control group.

The victims answered a questionnaire designed to measure their attitudes toward police performance. The victims were asked to:

#### 1. PROVIDE BASIC INFORMATION

Provide basic demographic information such as their age, race, education, length of time in the neighborhood, and employment.

#### 2. IDENTIFY INVESTIGATIVE ACTIVITY

Identify the investigative activity undertaken by responding officers. Specific questions addressed: (1) how the police responded to the victim (for example, whether police came to scene, victim went to station, or report taken over the phone); and (2) the number of occasions when the victim talked to the police. The questions also covered investigative acts such as the taking of fingerprints, searching the area for clues, talking to neighbors, driving around looking for suspects, taking the victim to the station to look at pictures of suspects, having a social worker talk to the victim, and referring the victim to a social service agency.

#### 3. PROVIDE THEIR PERCEPTIONS OF POLICE CONCERN

Provide their perceptions of police concern, including questions that addressed how concerned the police appeared to be about the victims' physical and emotional conditions, and the degree of sympathy expressed by police.

#### 4. OFFER THEIR ATTITUDES ABOUT POLICE

Offer their attitudes and conclusions about the police. Victims were asked if they believe that: they can turn to the police for help; the police are honest; the police understand the problems of older people; and the police are doing the best job they can.

#### 5. RATE THE OVERALL PERFORMANCE OF THE POLICE DEPARTMENT

#### 6. COMMUNICATE WHETHER THE CRIME WAS SOLVED

### D. STUDY RESULTS

#### 1. SIMILAR FINDINGS

##### a. Demographics and Expectations

Demographic characteristics and the victims' expectations of the police were consistent between those assisted by the Unit and those assisted by other officers.

##### b. Investigation

The investigative activities of Unit members and other investigators were similar in most respects. This included the taking of fingerprints, searching for clues, talking to neighbors, driving around looking for suspects, and looking at pictures of suspects. There were significant differences, however, in the amount of police referrals to community social agencies. For example, Unit members referred 42% of their case victims to social service agencies, while other investigators referred only 6% of their case victims.

## 2. SIGNIFICANT DIFFERENCES

### a. Impression of Police Concern

Responses were significantly different when victims were asked their impression of the officers' concern for them and their expression of sympathy. Almost all victims served by Gray Squad members reported that these investigators were concerned and "sympathetic." Victims responded to by other officers reported that only about one third were concerned and only 10% were "very sympathetic" toward them.

### b. Attitude Toward Police

Responses of the older victims to questions involving their attitudes and conclusions toward the police revealed that a higher percentage of those interacting with the Unit believed strongly that victims could turn to the police for help. They also believed that the police: (1) were honest; (2) had one of the most difficult jobs in society; (3) understood the problems of older persons; (4) were doing the best job they could; and (5) made every effort to help them.

### c. Attitude Toward the Police Department

When asked to rate the performance of the Milwaukee Police Department, 92% the victims serviced by Senior Citizen Unit personnel stated that it was "Excellent" or "Good." Only 29% of those older victims responded to by other officers rated the department similarly.

### d. Crime Solution Rates

The Gray Squad solved twice as many crimes as the other officers. Specifically, 26% of the Senior Unit victims stated that the police had solved their crime, while 13% of the victims served by traditionally trained police reported their crimes solved. However, the interesting aspect of this statistic is that the difference in solution rates between the two groups was not nearly

as large as the difference in their levels of overall satisfaction with police services.

## III. CONCLUSIONS

Police who were members of the Senior Citizen Unit were evaluated highly by the crime victims whose cases they investigated. These officers had received specialized training that enabled them to work effectively with older people. This training equipped them to understand some of the problems unique to this age group, communicate with older people in a more effective manner, sympathize with their conditions and situations, and offer them meaningful referral services. Police who did not receive training were evaluated less favorably by victims whose cases they investigated.

Responses to questions regarding police sympathy and the ability to make social service referrals revealed the greatest difference in satisfaction levels. In general terms, almost 100% of Senior Citizen Unit members received satisfactory responses in these areas as opposed to only about one third of the traditionally trained police.

Although overall satisfaction levels with police services were considerably higher for those victims served by Unit officers, the level of technical police response, from a strictly investigative viewpoint, was remarkably similar for both groups of police. This implies, on the one hand, the overall professionalism of the Milwaukee Police Department, and demonstrates, on the other hand, that older victims regard the personal and humanitarian qualities of responding officers as more important than their technical knowledge. Case handling, or victim handling, seems to be more important than case solution and clearance rates to many older citizens.

## SOURCE MATERIALS

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Again, the Project thanks John Bordenet of AARP who assisted greatly with the development of this section of the manual.

## SECTION VI

### THE CONTEXT OF ELDER ABUSE

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#### I. INTRODUCTION

The abuse of older persons by their loved ones and other caregivers is not a new phenomenon. "The problem of elder abuse is as old as mankind," according to Dr. Rosalie Wolf of the Massachusetts Institute for Aging, an acknowledged expert on the subject. Consistent with the increased attention on all forms of domestic abuse, law enforcers need to be increasingly vigilant in recognizing, reporting, and investigating elder abuse.

Because abuse typically takes place in private settings, it can be very difficult for police to detect abuse and then intervene. And with the high costs of institutional care, the desire of older persons to remain with their families, the dependence of caregivers on their elderly parents and other factors, there are increasingly more opportunities for elder abuse. It has become a primary concern for law enforcement and social service providers.

#### II. NATURE OF THE PROBLEM

##### A. SCOPE

###### 1. INCREASED LEVELS OF ABUSE

The exact scope of the elder abuse problem is uncertain. However, the current prevalence of elder abuse is staggering compared with levels reported in the early 1980's. In fact, based on a 1990 survey of all state human service departments, elder abuse is up 50% from 1980. And the most scientifically reliable study of the prevalence of elder abuse estimates that 3.2% of the nation's elderly population may be the victims of some form of physical abuse, neglect, or chronic verbal aggression. This figure translates into 701,000 to 1,093,560 victims of elder abuse in America.

###### 2. THE IMPACT OF REPORTING?

Although the statistics indicate that the number of reported cases of elder abuse has increased in

recent years, it is unclear whether the increase in reported cases actually results from an increase in the incidence of elder abuse, or is simply the result of a reporting phenomenon. As of 1981, 16 states had mandatory reporting of adult abuse. By 1990, all fifty states had established reporting requirements, with 42 of them operating mandatory state-wide systems. Eight states -- Colorado, Illinois, New Jersey, New York, North Dakota, Pennsylvania, South Dakota, and Wisconsin -- have made reporting voluntary.

While statistics do show that elder abuse reporting is increasing, this data, unfortunately, also is interpreted as indicating that elder abuse is increasing without a parallel rise in reporting.

#### 3. PART OF THE NATIONAL TREND: THE MASSACHUSETTS EXPERIENCE

The Massachusetts experience is clearly consistent with the national trend as shown by the ever increasing number of reports that reach Executive Office of Elder Affairs. Still, elder abuse remains underreported even though, according to a study done by Dr. Pillemer and Dr. Finkelhor, "Massachusetts has one of the most active programs in the nation for identifying elder abuse." These researchers found, in their study of elders living in Boston, that only 1 in 14 cases of elder abuse is reported to proper authorities.

##### B. EXERCISE

**Directions:** Read the scenario which follows to class participants. The scenario places them in the position of an abused elder. Finish the reading by asking the question: "What might prevent you from contacting others for help?" Write down their responses on a chalkboard, then discuss them. This section offers reasons why elders may not report

their experiences of abuse.

Finish the discussion by asking: "Given the obstacles that many elders face in reporting abuse, neglect and financial exploitation, how can you as police officers better learn about these cases in your community?" Write down their responses. The key is to get officers to realize that they must be proactive, not reactive, if they are committed to protecting elders. *More information concerning an effective orientation for officers is conveyed at the beginning of Section VII of this manual.*

**Scenario:** "Imagine that you are 85 years old and cannot walk as a result of severe arthritis. You live with your son, who takes your pension and Social Security checks and uses the money to buy drugs. He buys and prepares food for both of you, but he leaves you for long periods of time, during which you are unable to get food or water for yourself, make phone calls, or contact anyone. While you have sufficient income to purchase services such as an attendant, or could go out to a senior center with assistance, your son prevents you from arranging for these services. He occasionally hits you, but you figure it is not that bad since the pain goes away pretty quickly."

### **C. UNDERREPORTING: LOOKING AT VICTIM RELUCTANCE**

According to the House Select Committee on Aging, elder abuse is less likely than child abuse to be reported. The elderly do not report abuse or verify reports and accept help because of:

#### **1. DENIAL**

Either consciously or unconsciously, the elder does not acknowledge that the abuse is occurring. Sometimes, the elder sees the abuse as "normal" because the elder has nothing to compare the abusive situation to. This kind of "denial" is common among victims of abuse and is also seen in children and younger battered women.

#### **2. SHAME AND EMBARRASSMENT**

Elders are ashamed to admit to being maltreated and further ashamed to name a relative or caregiver as the perpetrator. Elders may protect perpetrators because they want to protect their identities as parents, grandparents, and so forth.

#### **3. SELF-BLAME**

The effect of physical and psychological abuse over time wears away the victim's identity and self esteem to the point where the victim believes that the abuse must be deserved. Psychologically, it is often easier to identify themselves as the wrong-doers rather than their children, husbands, or whoever else is abusing them.

#### **4. LOYALTY TO THE CAREGIVER**

In most cases, the abuser does not treat the elder badly all the time. Thus, the elder may feel conflicted about making a report to the authorities because of her genuine love and loyalty towards the abuser, especially if the abuser is a family member.

#### **5. FEAR OF RETALIATION**

At the same time, the elder may be afraid that reporting may cause the abuser to retaliate and increase the punishment.

#### **6. FEAR OF LOSING THEIR HOMES OR FREEDOM**

The elder is often extremely afraid of being abandoned by the abuser and left to live alone or in a nursing home.

#### **7. PHYSICAL INABILITY**

Elders may lack the physical ability (for example, if they are bedridden) to report or may have limited access to authorities because of their lack of transportation.



## **8. PERCEPTIONS OF CRIMINAL JUSTICE AND/OR SOCIAL SERVICE AGENCIES**

Elders may not know who they should report abuse and neglect to, or they may perceive that the criminal justice and/or social services system will be unresponsive to their needs, with complicated court procedures, delays, and threats to their right to determine their own future. For example, victims may fear a court will rule unfavorably on their mental competency or will incarcerate their only caregiver, however inadequate, leaving them without the necessary support.

## **D. UNDERREPORTING: LOOKING AT INSTITUTIONAL DISTRUST**

In Massachusetts, the mandatory reporting law became operational in 1983. The value of the reporting law as a case identification tool is that it defines the responsibilities of the government and certain private citizens in responding to the problem of elder abuse and establishes official procedures for making, receiving, and investigating reports. Yet, in the first five years of its existence, only an average of 12 to 15 cases of "serious abuse" were annually reported or referred to the District Attorney's Office in Middlesex County, the largest and most populous county in Massachusetts. In analyzing the reasons for this low rate of referrals, it was concluded that the major reason seemed to be institutional distrust on the part of protective service workers towards law enforcement, the same factor that impeded child abuse referrals in the early days of the Massachusetts child abuse reporting law. Misunderstanding as well as a lack of contact and coordination severely limited the number of "serious abuse" cases that were reported by police to protective services and, in turn, by protective services to the District Attorney.

## **E. TYPES OF ELDER ABUSE**

Abusive behavior is not usually limited to one form of abuse. Furthermore, as clear distinctions do not always exist among forms of abuse, they may overlap. Officers should be familiar with the signs, indicators and evidence associated with various forms of abuse.

## **1. PHYSICAL ABUSE**

The non-accidental use of physical force that results in bodily injury or pain.

## **2. SEXUAL ABUSE**

Sexual abuse includes forced sexual contact or sexual contact with an individual who is incapable of exercising consent as a result of physical or mental impairment.

Some people in the field of elder abuse believe that many cases of sexual abuse go unreported because professionals fail to recognize or identify sexual abuse. They attribute this to the misperception that the elderly are not likely targets for sexual abuse. Consequently, officers may fail to investigate situations in which sexual abuse is likely to have occurred.

## **3. EMOTIONAL OR PSYCHOLOGICAL ABUSE**

The willful infliction of mental or emotional anguish by threat, humiliation, intimidation, or other verbal or nonverbal abusive conduct.

Psychological abuse is perhaps the most difficult to evaluate because it is the most subjective. What may cause great emotional harm to one person may have little effect on another person. This does not suggest that emotional abuse is less serious than other types of abuse. Constant threats, intimidation, or humiliation can have a devastating impact on an older person's health and their attitude toward life. Sustained psychological abuse can lead to a diminished sense of self worth, depression, and fear. These are conditions which reduce the likelihood that the person will seek help. Psychological abuse often occurs in combination with other types of abuse, and often must be addressed before successful intervention can occur.

## **4. FINANCIAL EXPLOITATION**

This is the unauthorized use of funds, property or resources of an older person. Financial exploitation may range from petty theft to much more complicated types of extortion. Family members, acquaintances or strangers may trick

or coerce the older person into giving away money or property. They may, for example, convince a confused older person who is legally incapable of transacting business to grant them authority over, or access to, their finances.

## **5. *NEGLECT***

### **a. *Active***

The willful failure by the caregiver to fulfill her caretaking obligations or duty.

### **b. *Passive***

The non-willful failure to fulfill a caretaking obligation. In most situations passive neglect is the tragic result of well-meaning family members who assume the care of a frail and dependent older person but who are incapable of meeting that person's needs.

### **c. *Self Abuse***

The neglectful or abusive conduct of an older person directed at herself that threatens the person's health or safety. Self-neglect usually occurs as a result of the older person's physical or mental impairment, or in a situation where the older person is socially isolated.

## **F. *CAUSES OF ELDER ABUSE***

Police should not view the following theories on causation as definitive statements about how abuse is stimulated. These are not bright-line rules, but the existence of any of these conditions in a particular setting should put the police on notice that abuse might be occurring.

### **1. *PSYCHOLOGICAL MAKE-UP OF THE ABUSER, INCLUDING SUBSTANCE ABUSE***

Physical abuse by offspring frequently arises when the abuser is experiencing mental health problems. The abuser may have a mental illness or a substance abuse problem. The victim may be living with their parent because they are unable to manage independently. In some situations, the adult child provides care to the

older person, while the older person provides the child with money, emotional support, and a place to live, resulting in a "mutual web of dependency."

Many abusers have had prior psychiatric hospitalization. Substance abuse, alcohol or drugs, can also be a factor by lowering inhibitions against violent conduct, by providing an excuse for violent actions, and by encouraging financial exploitation when the abuser needs to use the elder's finances to support his habit. Abusers that fall into this category frequently deny their responsibility and even deny that the victim is injured. They often attribute blame to the victim for maltreatment, condemn those who disapprove of the abuse, and rationalize that the abuse is only a minor deviation in an otherwise good relationship.

## **2. *TRANSGENERATIONAL FAMILY VIOLENCE***

Abuse is often correlated with violence learned in the home. Adult children who were abused as children may, in turn, be abusive to their parents in later life. This cycle of violence possesses elements of retaliation and imitation.

## **3. *CAREGIVER STRESS***

A caregiver may become increasingly frustrated as the elderly person becomes more dependent for financial, emotional and/or physical support. Caregivers may also be unaware of available resources or unprepared to cope with their responsibilities. In some cases, the caregiver is lending support to an individual with whom he has never had a positive relationship. The caregiver may resent the elder, particularly if the caregiver holds unrealistic expectations about what the elder can do. Finally, economic problems often contribute to the caregiver's escalating stress.

## **4. *SOCIAL ISOLATION***

Isolation is associated with unintentional neglect, but it may also be present with other forms of violence since the risk of discovery can be reduced by enforced isolation.

## G. CHARACTERISTICS OF VICTIMS

### 1. *DEMOGRAPHICS NOT A CLUE*

Age, race, religious, economic and educational background are unrelated to the level of risk of abuse. Elder abuse is present in any kind of setting.

### 2. *PHYSICAL AND PSYCHOLOGICAL ABUSE*

Victims of physical and psychological abuse tend to be functionally independent; physical violence is the most widespread form of maltreatment.

### 3. *ACTIVE AND PASSIVE NEGLECT*

Victims tend to be dependent on the caregiver to carry out functions essential to the victim's daily living situation (e.g., bathing, dressing, food, shopping).

## H. CHARACTERISTICS OF PERPETRATORS

Studies have found that the abuser's characteristics, rather than the victim's, most strongly predict abuse.

### 1. *FAMILY AND RELATIVES MOST LIKELY TO ABUSE*

Over 2/3's of perpetrators are related to the victim. Elders are most likely to be abused by the persons with whom they live. In fact, spouses constitute 58% of abusers; children 24% of abusers.

### 2. *MALADJUSTED BEHAVIOR*

Abusers are far more likely to be maladjusted or to have alcohol abuse problems than non-abusers. Abusers have a high incidence of arrests, psychiatric hospitalizations, violent behavior and limiting health problems. They are more likely to have unrealistic expectations of the elder's behavior and to have had a recent change in family relationships or living arrangements than non-abusers.

## 3. *DEPENDENT BEHAVIOR*

Ironically, a study by Karl Pillemer discovered that while dependency was a major factor in abuse, it was the abuser's dependency on the elder -- not the elder's dependency on the abuser -- that was the typical cause. Abusers become frustrated at their powerlessness in controlling or improving their lives, or being financially independent from the older person. Thus, abusers are substantially more likely to depend on the elders they abuse, particularly for housing and transportation. Spousal abusers, however, are no more likely to depend on their victims than non-abusive spouses.

## 4. *CHARACTERISTICS DEPEND ON THE NATURE OF THE ABUSE*

Researchers and clinicians are still trying to understand the causes of abuse and neglect. Recent studies show that the profile of the perpetrator differs according to the nature of the abuse or neglect and that the psychological state of the perpetrator is an important variable:

### a. *Neglect*

Most often a relative upon whom the elder depends for many daily living activities. The perpetrator is often socially isolated, may have suffered a recent divorce or separation and finds burdensome and stressful the care of the elder, who often has significant physical or mental impairments.

### b. *Psychological Abuse*

Commonly, a relative with mental health problems who may also be psychologically dependent on the elder. The elder victim is likely to be able to care for himself and is not likely to suffer from any significant cognitive or functional impairment, but may also have mental health problems.

### c. Financial Exploitation

Usually a distant relative or non-relative without any emotional involvement with the elder victim, who is likely to be socially isolated. Recently, increases have been noted in the incidence of financial exploitation, often accompanied by physical or psychological abuse, by caretakers or close family members.

### d. Physical Abuse

Most likely a relative, living in the same home, in poor emotional health and often abusing alcohol. Often, the perpetrator is financially dependent on the elder and the elder is socially isolated. Many times the perpetrator is a spouse although, interestingly, victim disability and dependence were small risk factors for spousal abuse. More than one half of the perpetrators of physical and psychological abuse of elders are spouses; one quarter are adult children.

## SOURCE MATERIALS

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## SECTION VII

# POLICE INVESTIGATIVE PROTOCOL

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### I. THE POLICE ROLE

#### A. INTRODUCTION

The staggering prevalence of abuse and the devastating effect it has on elderly victims demands that the police establish clear and thorough directives to guide them through the complex tasks for which they are responsible. The police are responsible for the criminal investigation of such cases while the local protective service agency (PSA) has ultimate authority for the provision of services.

Detecting elder abuse and neglect is difficult because elders are often socially isolated; elders' physical, mental and emotional problems are often attributed to illness or the natural aging process; and elders themselves are often reluctant to disclose.

Still, police officers may become aware of a potentially abusive situation in a variety of ways. Most often, they encounter abuse when they respond to a call for service at a particular residence. Sometimes they may learn about an abusive situation while speaking with someone from the community. At other times, a protective service worker may want to involve officers in a situation that may have criminal overtones. Several factors point to the reason for the key role that police must play in detecting abuse and neglect:

#### 1. 24 HOUR AVAILABILITY

Police are currently involved in elder abuse cases, whether or not they choose to be. In some communities, law enforcement is the only 24-hour, 7-day a week service provider. They are often the first to respond to domestic disturbances. Thus, officers are in a unique position to detect elder abuse if properly trained.

#### 2. COMMUNITY-ORIENTED POLICING

Quality response to the needs of the elderly is going to be an integral part of any departmental effort that will bring officers closer to the citizens they serve. Because the elderly population is increasing, police can expect to get greater calls for service involving the elderly. And, if law enforcement is not receiving calls to investigate, they must be trained to self-initiate elder abuse investigations, educate citizens, and work to ease the barriers that older adults face in reporting. For example, citizens must be made to understand that if the police are called to respond to a report of elder abuse, the victim will not be automatically removed to an institution.

#### 3. COMMITMENT AND VALUES OF THE OFFICER

Most important, officers are caring individuals who want to make a difference in their communities. Elder abuse prevention, detection, and enforcement allow officers to make a difference in the lives of older adults.

**B. ORIENTATION OF THE POLICE OFFICER****1. BE AWARE OF THE SIGNS OF ABUSE**

To detect abuse, police officers must first realize that it exists. When officers respond to calls where an elderly person is present, they must pay particular attention to the scene, situation, and "relationship dynamics" between the elder and the caregiver. It is important, if the officers have had experience with the elder previously, to pay attention to changes in the elder such as physical bruises, withdrawal or disorientation and not to routinely attribute them to old age or sickness.

**2. PRESENCE OF ANY SIGNS OF ABUSE WARRANTS AN INVESTIGATION****3. UNDERSTAND THE FULL RANGE OF OPTIONS**

Once on the scene, officers must understand the full range of intervention alternatives -- discussion, investigation, report to social services, protective custody, mental health detention, arrest.

**4. REPORT ABUSE, NEGLECT AND FINANCIAL EXPLOITATION**

After the immediate response has taken place, officers must then assess whether their experience should be reported to protective services. What conditions are reportable; the manner and method for filing reports; and the anticipated response and authority of protective services will be addressed in the next section of these materials.

**5. ENGAGE IN A MULTI-DISCIPLINARY APPROACH**

Investigating abuse cases poses a variety of challenges. Victims may be unable or unwilling to provide testimony. Their credibility or capacity may be in question as a result of

cognitive impairment. They may be under the influence of the abuser or may depend on the abuser to provide them with needed care. They may be ambivalent about taking action to stop the abuse, especially when the abuser is a family member.

That is why law enforcers are beginning to acknowledge that the complexity of the problem requires that they receive training on how to act in concert with other service providers in their communities. No single agency or program can solve the complex problem of elder abuse. Communities working together can take a stand against abuse and help prevent at-risk elders from becoming victims.

**II. CALLS FOR SERVICE****A. GENERAL INFORMATION****1. SOURCE OF CALLS**

Calls for service related to elder abuse are generally received at the department's communications center. However, reports of elder abuse (usually non-emergency calls) may be directed to other personnel.

**2. DETERMINE IF EMERGENCY RESPONSE NECESSARY**

The following situations constitute an emergency:

**a. Elder Alone**

An elder who cannot meet his or her needs is left alone.

**b. No Access**

Protective service workers or other human service providers receive a report of serious abuse and cannot gain access to investigate because the alleged abuser prevents them from doing so.

**c. Dangerous Investigation**

Protective service workers receive an abuse report and have reason to believe that investigating the complaint will place them in danger.

**d. Restraining Order Violation**

An abuser is on the premises in violation of a restraining order

**e. Risk of Losing Money**

An elder is at risk of losing money or property if immediate action is not taken (e.g., the elder is being taken to the bank by alleged abuser to withdraw savings)

**3. NECESSARY INFORMATION AND TRANSFERRING THE CALL**

Personnel who are recipients of information regarding possible elder abuse should attempt to determine if conditions exist that constitute a police or medical emergency. Before suspected emergencies are transferred to the communications center, personnel taking the call should attempt to obtain and record:

- a. The caller's name and telephone number
- b. The nature and location of the abuse
- c. The victim's name

**4. ANONYMOUS CALLS**

Information may be offered by persons who wish to remain anonymous. There is usually no obligation for callers to identify themselves, although officers should establish the source of each caller's knowledge.

Callers should be informed that the purpose of obtaining their names and telephone numbers is strictly to permit a call-back if calls are lost when transferred to communications or if responding officers cannot locate the victim.

**5. CHECK ON TRANSFERRED CALL**

The call taker should then place a follow-up call to the communications center to verify that the transferred call was received.

**B. NON-EMERGENCY REPORTS**

Non-emergency reports of elder abuse or calls to check on the welfare of an elderly person also warrant immediate, though not emergency, response. Reports of elder abuse should be given the same priority as reports of assault, sexual assault, child abandonment, or other serious matters that justify prompt police response.

Persons calling to report non-emergency situations that may involve elder abuse are often directed to the unit responsible for investigating elder abuse. If an investigator cannot respond immediately, the information should be acted upon by patrol officers without delay.

**C. PROVIDE REFERRAL INFORMATION**

Due to the 24-hour a day access the public has to its police department, many persons call the police for advice or information regarding services that may be available through other agencies. In these cases, once it has been determined that there is no need for police or other emergency services, the caller should be provided information regarding services and the telephone number of the appropriate agency.

**III. INITIAL INTERVENTION****A. RESPONSE**

When calls are identified as in-progress emergencies, response should be consistent with other priority calls. The emotional distress related to even non-emergency calls is often significant for the elderly victim. Thus, all calls should be handled without unnecessary delay.

**B. ENTRY**

Either as the first responder or when called to assist PSA or EMT personnel, officers may need to conduct a forced entry. Entry should be immediate when exigent circumstances exist or when authorized by court order. When the need for emergency entry is not evident, officers should seek supervisory guidance.

**C. BASIS FOR INTERVENTION**

There are two general reasons for officers to be called to a location.

**1. ESCORT/ASSISTANCE TO PSA OR OTHER SERVICE PROVIDER**

Sometimes the local PSA will request police presence at the scene of suspected elder abuse to afford the caseworkers protection or to assist in the entry. In these circumstances, the role of the officers is usually limited. Officers should provide appropriate assistance and prepare a report documenting the details of the incident, the names of PSA or other personnel on the scene, and the action taken.

**2. CALLS FOR SERVICE**

The vast majority of calls will involve various requests for service that place officers at the scene. It may be a domestic disturbance, a request by a neighbor to check on the house next door, a report of a missing person, and so forth. Whatever the reason for the officers being summoned to the particular location, they must be aware and attentive to the signs of abuse. And act accordingly.

**D. ASSESS THE NATURE OF THE PROBLEM**

The nature and extent of abuse cannot usually be fully determined by the preliminary investigation. Officers should, however, assess the available information to define the abuse, if any, or the potential for abuse that might be eliminated through appropriate referral.

**1. OBTAIN PRELIMINARY STATEMENTS OF THE VICTIM AND WITNESSES**

Frequently, it is wrongfully assumed that the elderly are incapable and they are denied the dignity of reporting the problem to the officer. Allow elderly victims to provide information. Ask open-ended questions that encourage further discussion. Dialogue of this type affords the officer an opportunity to begin assessment of the competency level of the victim. Information and observations gathered by the officer will later be useful to investigators and PSA personnel. A victim's complaint of abuse should not be discounted solely on the basis of his or her apparent incompetency.

Some elderly victims are reluctant to report abuse for fear of automatic removal to an institution. Victims who are capable of reporting must be reassured that legal remedies and removal procedures are not automatically invoked, but only when deemed appropriate as a result of a protective services investigation, in which the victim's needs and desires are given priority.

Preliminary victim and witness statements are intended to guide the officer in the early stages of investigation and can be verbal. Formal written statements can be obtained later in the investigation.

**2. POSSIBLE POLICE RESPONSES**

When officers encounter a situation, they should consider whether to exercise their official authority. The following sources of authority may apply:

**a. Domestic Violence Laws/Restraining Orders**

G.L. c. 209A sets forth laws that apply to domestic situations regardless of victim's age depending on the relationship between the victim and the suspect. This law stipulates mandatory arrest for the violation of any temporary or permanent restraining order in effect. It also encourages officers to make arrests for criminal acts that occur



within the context of "abuse" as defined under Section 1 of that statute. *For a complete summary of Chapter 209A, see Section X of this manual.*

Officers should inquire whether any restraining orders have been filed. If non-existent, officers, along with PSA personnel, may help the victim obtain an order to remove the abuser from the home. This can be done on an emergency basis through the "on-call" judge if necessary.

#### **b. Violations of Criminal Statutes**

Despite the victim's age and the victim-suspect relationship, elder abuse may constitute the violation of numerous felonies and misdemeanors. Their application should not be overlooked. Often the determination of whether criminal prosecution is an appropriate response to the identified abuse, and which specific law applies, can only be made after considerable investigation and consultation with prosecutors and the local PSA.

#### **c. Mental Health Laws**

Emergency mental commitments are authorized by G.L. c. 123 and should be considered when the suspect or the victim exhibits certain behavior that constitutes a danger to self or others. PSA personnel may be helpful in making these decisions when related to alleged elder abuse. *For more a complete understanding on the range of police options concerning mental health commitments, see Section XI of this manual.*

#### **d. Protective Custody**

G.L. c. 111B allows officers to detain people who are incapacitated by *alcohol* consumption. Placing a person in protective custody may be a useful alternative in situations where a lesser detention than arrest is warranted.

### **3. ASSESS IMPACT OF POTENTIAL ACTIONS AND FORMULATE AN ACTION PLAN**

Elder abuse investigations may be complex and lengthy. They should be conducted in conjunction with the local Protective Service Agency. The effect of actions taken and solutions proposed should be considered. Immediate measures to protect persons or property and steps to preserve evidence and detain fleeing suspects must be taken.

#### **a. Make On-Scene Arrest When Appropriate**

Non-exigent arrests may be premature before further investigation and consultation with protective services personnel. Arrest of a caregiver may leave an elderly victim without necessary support and may result in institutionalization. The effect of a caregiver's arrest on the victim should be considered in a way that does not conflict with police obligations under Chapter 209A.

#### **b. Non-Criminal Acts**

Personal care and financial responsibility for an older person may draw criticism from family members and others. However, allegations of misconduct may not constitute a criminal offense despite their offensive nature and devastating impact on the victim. While police officers do not generally become involved in the enforcement of non-criminal violations, these situations may rise to the level of a reportable condition. This is especially true in cases of neglect.

#### 4. EMERGENCY REMOVAL OF THE VICTIM

##### a. Justifications

In some situations, victims may need to be removed from their homes. Examples of such cases include:

- (1) *The victim is in need of hospitalization* as a result of serious illness, neglect, or injury.
- (2) *The condition of the home* poses a serious health or safety risk.
- (3) *The victim is in danger of retaliation* or further criminal acts by an offender who is at large.
- (4) *The victim is too debilitated* to care for him or herself, and there is nobody available to provide care in the home (efforts should be made to find in-home emergency care prior to removing a victim).

##### b. Final Decision with PSA Based on Several Factors

The *final decision* rests with protective services based on the following factors:

- (1) *The level of threat* to the older person's health or safety which exists if s/he remains in the environment.
- (2) *The impact of removing the victim* or the abusive caregiver.
- (3) *The psychological effect* of removing the victim from familiar surroundings.
- (4) *The victim's disabilities*, mental impairments, and need for assistance.
- (5) *The victim's ability and right to exercise self-determination.*

The age of a person does not render that person incapable of making informed decisions related to care options, residency, or any decision normally left to other individuals. The competent elderly victim, unlike a child abuse victim, has the right to refuse services and assistance.

Unreasonable decisions, serious abuse and instances when the officer has reason to believe the victim is being coerced to make certain decisions should be investigated and appropriate action taken regardless of the victim's desires.

##### c. Carrying Out the Removal

When emergency removal is needed, police and protective services should coordinate other needs and activities that may result from the removal. These may include transportation for the victim, finding appropriate placements, and securing the premises. The victim's family, physician or other responsible person should be notified. Court action may be required to effect an involuntary removal.

#### IV. INVESTIGATION AND REPORTING

##### A. ASSUME INVESTIGATIVE RESPONSIBILITY

A major problem in prosecuting abuse cases has been the failure to present convincing evidence. Victims may be unwilling or unable to testify in court, or they may make poor witnesses. Some cases are not reported to law enforcement until well after the abuse has occurred, leaving a cold trail for investigators. The circumstances surrounding the abuse may be difficult to substantiate. Despite these difficulties, cases can be proven, even when victims are unable to testify. These cases require careful investigation and the marshalling of all circumstantial evidence.

Patrol officers will generally conduct the preliminary investigation that leads to the request for more in-depth investigation. Except in those instances when the investigator is also the first responder, the

investigator's arrival does not negate the patrol officer's responsibility for the preliminary investigation and the initial police report.

## **B. PRELIMINARY INVESTIGATION**

Regardless of the nature of the crime, police departments are discovering that the preliminary investigation is typically the most important phase of the overall effort to secure a conviction or, in the case of neglect, to accurately assess a particular living situation. Responding officers should:

### **1. SECURE PHYSICAL EVIDENCE AND, IF NECESSARY, THE SCENE**

Officers should always gather and secure any physical evidence related to the crime. If the offense is particularly serious and warrants the assistance of investigators and evidence technicians, responding officers should simply secure the scene and await assistance. Depending on the nature of the crime, evidence may include:

- a. Weapons or other Instruments
- b. Clothing, bedding and towels
- c. Biological evidence (body fluids, food samples)
- d. Sexual aids, pornographic materials
- e. Personal papers (letters, telephone/address books, bank and financial statements, computer files and disks, and legal documents) belonging to the victim and the suspect

### **2. UTILIZE A CHECKLIST APPROACH**

Communities that have adopted a checklist approach to domestic violence investigations have been remarkably successful in these typically challenging cases. The checklist approach originated in San Diego where the police department and city attorney regularly prosecute 70% of the domestic violence cases in which victims refuse to testify and obtain convictions in 90% of them. This outstanding

achievement is due to three very simple steps: a checklist approach that yields a thorough investigation; detailed report writing; and basic photography conducted at the scene of the incident. In Massachusetts, the Norwood Police Department has successfully employed this approach. A copy of Norwood's checklist appears as *Attachment D*.

### **3. TAKE PHOTOGRAPHS**

Photographs are the most underrated investigative tool. They are essential in elder abuse cases because they provide documentation of injuries and the scene that cannot be refuted or denied in court at a later date. Consider photographing the following:

- a. Condition of the victim and/or injuries (both new and old).
- b. Weapons, restraints or instruments causing injuries.
- c. Living conditions/health and safety hazards (kitchen, bedroom, bath).

### **4. RECORD DETAILED ACCOUNTS OF THE VICTIM**

The value of this procedure will be explained in the next section on reports.

### **5. SEEK CORROBORATING INFORMATION**

The investigator should attempt to corroborate all information relating to the allegations of wrongdoing. Investigative steps that may provide corroboration include:

- a. Statements of other involved, knowledgeable persons

Many older adults receive services or have other social contacts on a regular basis. Social workers, doctors, home health aides, lawyers, friends, family, clergy, bankers and other health and social service providers are likely to have information about what has happened in the past or about the elder's

needs and mental capacity. They may also be able to provide expert testimony.

**b. Information concerning opportunity and access to the victim**

**c. Medical Information**

This includes any medical treatment and the name, address, and phone number of any emergency medical services personnel who dealt with the victim at the scene. In some cases, the victim's medical history, especially prior emergency medical services and pharmaceutical records, may be essential in proving the cause of the injury, establishing a pattern of abuse, or eliminating potential defenses that attempt to explain away the injury.

**d. Suspect's criminal and employment history (employment information is especially crucial in a financial exploitation case)**

**e. Legal records (conservatorship, power of attorney, durable power of attorney, will, living will, trusts, deeds for property, etc.)**

**f. Interview corroborating witnesses**

(1) Who saw the actual crime take place

(2) Who heard noises indicating that domestic violence or other abuse was taking place (for example, screams, cries, furniture being thrown, and so forth)

**g. Obtain the 911 tape with the victim/witness/suspect's statements**

**6. INTERVIEW THE VICTIM**

**a. Compensating for inability to recall time of events**

If the person is having difficulty remembering when events occurred, ask him to relate the events to things that he does

remember. For example, if an elder does not remember when his son arrived, ask what he was doing at the time. If he can relate his arrival to other events, you may be able to estimate the time. Questions like "Were you watching television at the time?" if so, "Do you remember what show you were watching?" or "Was your attendant here when he came?" may yield the desired information.

**b. Coordinate interviews whenever possible**

It may be difficult for elderly persons who have been abused to admit their vulnerability, particularly when the abuser is a family member or a loved one, or when sexual abuse is alleged. Every effort should be made by police and the PSA or other social service investigators to coordinate efforts, thereby eliminating multiple stressful and embarrassing interviews. Initially, it may not be possible to have a protective worker present when the officer first interviews the elder; however, at the later stages of the investigation, every effort should be made to coordinate interviews.

**7. INTERVIEW SUSPECTS**

It is best to interview the suspect as late in the investigation as possible. Explore possible explanations for allegations, suspicious activity, evidence (e.g., restraints or weapons found in the house, etc.), victim injuries and behavior consistent with abuse, and living conditions. Determine if the suspect had the opportunity and access to the victim necessary to commit the alleged acts.

Officers should also anticipate defenses so that they can close them off. For example, if officers anticipate that the suspect will claim that an injury was accidental, they may want to get an expert medical opinion about the injury prior to the interview and show it to the suspect.

Obtain written statements or, if available, employ video and audio equipment.

## Techniques for Interviewing Victims

- Make the victim as comfortable as possible.
- Tell the victim what to expect during the investigation.
- Minimize the number of interviews.
- Minimize the number of people present.
- Allow the victim to describe the incident in his or her own words.
- Be patient and reassuring. Some older people, particularly those in crisis, may need time to collect their thoughts and may need to take frequent breaks. Avoid unnecessary pressure.
- Acknowledge the victim's anxiety and try to discern its cause. For example, you may say, "You seem anxious. Are you concerned that your son will find out that you have talked to me?"
- Keep it simple. Phrase questions in a clear, concise fashion.
- Keep questions short.
- Ask open-ended questions that encourage further discussion.
- Accept and use the victim's terminology and language for acts, body parts, etc.
- Avoid influencing the victim's account of the alleged offense.
- If you feel that the older person is having difficulty understanding or communicating, ask him or her if he or she has assistant devices or someone who can help.
- Ask the victim if he or she would like assistance. If so, ask how he or she would like to be assisted. Do not guess.
- Even if the victim appears to be somewhat confused, do not discount the information. Make every effort to obtain the fullest possible response before relying on information from others.

Reprinted from PERF Improving the Police Response, Module III.

## Techniques for Interviewing Victims, Continued

- If you need to have another person assist in communicating or providing information for the victim, conduct the conversation in the victim's presence and look for signs of corroboration from the victim (e.g., nodding in agreement). Do not discuss the victim as if he or she is not in the room.
- Do not discount a complaint because the victim is unwilling to cooperate.
- Do not argue with the victim.
- Assess the likelihood of retaliation. If a threat is present, arrange for protection. APS may be of assistance.
- Determine whom the victim first told about the abuse.
- Show the victim records or other documents that suggest abuse. Record his or her response to each one that is in dispute.
- Conclude the interview in such a fashion that the victim feels free to contact the investigator again. Ensure that the victim is capable and has the means for contact. If not, take measures to facilitate follow-up with the victim.

## Techniques for Interviewing Witnesses

- Determine the witnesses' relationships to the victim and suspect.
- Ask where and how they received their information.
- Try to determine their motivation for offering information.
- Determine whether the witnesses are likely to be intimidated, made to feel guilty, or threatened with reprisal for providing testimony.
- Find out where they can be reached if follow-up is necessary.

## Techniques for Interviewing Suspects

- Advise the suspect of his or her rights, if appropriate.
- Encourage the suspect to relate the incident in his or her own words.
- Note the suspect's attitude or demeanor during the interview.
- Determine the relationship between the suspect, victim, and witnesses.
- Look for behavioral indicators of abuse.
- If the suspect provides care to the victim
  - Get complete information about his or her duties, training, pay, and length of service.
  - Find out how involved the suspect is with the victim's care and what he or she expects of the victim — determine if this is reasonable.
  - Find out whether the suspect is the only one caring for the victim.
  - Determine how well the suspect is coping with the caregiving responsibilities.
- Note statements that are inconsistent with other findings and evidence.
- If handwriting is an issue, collect handwriting samples.
- Do not communicate hostility or disbelief.
- Show disputed documents to the suspect one at a time and record his or her response to each one.
- If the suspect admits to abuse, ask him or her to specify precisely what he or she did and record it.

## C. REPORTS

Every allegation of elder abuse should be documented. In all cases of elder abuse, officers must fulfill their mandatory reporting obligations to protective services. In addition, officers should draft an incident report. Officers may incorporate any information from one report into the other. The important goal is that both reports be detailed and comprehensive.

### 1. FULFILL MANDATORY REPORTING REQUIREMENTS TO PROTECTIVE SERVICES

Pursuant to G.L. c. 19A, when officers have reasonable cause to believe that an elder, 60 years of age or older, has suffered or is suffering from abuse, neglect and financial exploitation, they must make an immediate verbal report to protective services and a written report within 48 hours. *Police reporting obligations and the role of protective services are explained in detail in Section VIII of this manual.*

### 2. INCIDENT REPORT

Officers must completely document all phases and aspects of an investigation in their police reports. Reports are extremely important to achieving successful prosecutions and are the catalyst for assisting victims. Every response from the criminal justice and social service systems (including prosecutors, victim advocates, and caseworkers) will flow from the written report. Therefore, officers must include:

#### a. Victim's Account

Be sure to include the victim's detailed account, including key quotes. This is the most important aspect of the police report because frequently an elder victim may not testify at trial. A detailed statement in the report can serve as the basis for the officer testifying in place of the victim, under the spontaneous exclamation exception to the hearsay rule. Moreover, even when elder victims manage to testify, they oftentimes get confused or fail to remember key aspects of their victimization. In these instances,

police reports can oftentimes be used to refresh an elder's recollection or to provide a recorded statement of the elder's past recollection. These three legal doctrines are explained below so that officers can appreciate their value to a prosecution.

#### (1) *Spontaneous Exclamation or Excited Utterance*

This is an exception to the hearsay rule that allows a witness to testify to out-of-court statements made by someone else if their "utterance was spontaneous to a degree which reasonably negated premeditation or possible fabrication and if they tended to qualify, characterize and explain the underlying event." *Commonwealth v. Fuller*, 399 Mass. 678, 682 (1987). Furthermore, there must be evidence to show how much time elapsed between the incident and the victim's statement to another. *Commonwealth v. O'Connor*, 407 Mass. 663, 670 (1990).

The rule in Massachusetts is interpreted broadly. The statement did not have to be made at the exact time of the incident so long as the exciting influence which prompted the statement had not "dissipated" (in other words, had not vanished) at the time the statement was made. *Commonwealth v. McLaughlin*, 364 Mass. 211, 223 (1973); *Commonwealth v. Brown*, 413 Mass. 648 (1992) (doctor, who treated three and half year old daughter of defendant's girlfriend, allowed to testify to the child's statement, made in response to the doctor's questions, that defendant hit her and placed her in a tub of scalding water. This was allowed because the child made the comments five hours after the abuse and was still terrified at the time of the disclosures).



**(2) Present Recollection Refreshed**

When a witness had personal knowledge of events at one time, but is unable to recall on the witness stand some or all of the facts, the questioning attorney may attempt to "refresh" the witness' memory with *any* written document, including a police report. See *McNaught and Flannery, Massachusetts Evidence: A Courtroom Reference*, 13:16 (1988). After the witness's memory is refreshed, the witness must then testify from present memory. In short, this legal doctrine allows an attorney to "jog" a witness' memory at any time during questioning, which can be particularly useful with an elder.

**(3) Past Recollection Recorded**

Past recollection recorded is another exception to the hearsay rule. It is used when a witness, who once had personal knowledge of events, now has insufficient recollection to enable the witness to testify fully and accurately. If a memorandum was made *or adopted* by the witness when the matter was fresh in his or her memory (although not necessarily at the time of the event), and if it reflects his or her own personal knowledge accurately, the memorandum may be read into evidence. *Commonwealth v. Dougherty*, 343 Mass. 299, 306 (1961) (witness read document to jury). It is not necessary that the witness be the author of the memorandum as long as the witness saw and approved it when his or her memory of events was fresh. *Commonwealth v. McDuffie*, 16 Mass. App. Ct. 1016 (1983) and *Commonwealth v. Bookman*, 386 Mass. 657, 662-665 (1982). Also, the memorandum does not need to be made in the regular course of business nor does the witness' memory need to be completely exhausted before the memorandum is used. *Commonwealth v. Murphy*, 6 Mass. App. Ct. 335, 343 (1978). Thus, the requirements for

employing past recollection recorded are:

- (a) The witness has *insufficient recollection* to testify fully and accurately.
  - (b) The *memorandum was made or seen by the witness when the events were fresh* in his or her mind.
  - (c) At the time when the *memorandum* was made, it *accurately described the events*.
  - (d) The *memorandum presented is the actual memorandum* written at the time (or a copy if the officer can account for the original).
- b. Name, address, telephone number, and age of the victim (and, if it is different, the current location of the victim)
  - c. Victim's condition/nature and extent of injuries, neglect or loss
  - d. Name, address, telephone number and relationship to the victim of the person making the report
  - e. Names, addresses and telephone numbers of those persons responsible for the victim's care
  - f. Names, addresses and telephone numbers of witnesses and any statements
  - g. Type of abuse and other alleged crimes (including date(s), time(s) and location(s) of abuse)
  - h. Suspect's statements or refusal to speak

i. Criminal history or background of the suspect

(1) *To Prove State of Mind*

Documenting a defendant's prior mistreatment of the victim is crucial since it may be admissible to show the defendant's mental state or intent to harm the victim. See, e.g., *Commonwealth v. Jordan (No. 1)*, 397 Mass. 489, 492 (1986) (in armed assault with intent to murder and kidnap trial, evidence concerning the defendant's beating the victim five to seven months prior was appropriately admitted because it was indicative of the defendant's state of mind at the time of the incidents at issue in the trial; the same held true for evidence concerning the defendant's throwing the victim's small dog onto the floor in front of the victim and having his bigger dog attack the victim's dog).

(2) *To Influence the Sentence*

Any information about the defendant, even if it cannot be used at trial, may be very valuable at sentencing. "In addition to considering the nature of the offense and the circumstances surrounding the commission of the crime, a trial judge properly may consider a variety of factors in imposing a sentence, many of which are inadmissible at trial. Hearsay evidence of the defendant's character, family life, and employment situation may be evaluated. A trial judge also may consider indictments or evidence of similar or recurrent criminal conduct if it is relevant in assessing the defendant's character and propensity for rehabilitation." *Commonwealth v. Coleman*, 390 Mass. 797, 805 (1984). However, judges "cannot impose punishment for untried criminal offenses." *Id.* But see *Commonwealth v. Goodwin*, 414 Mass. 88 (1993) (Judge appropriately considered other information concerning other sexual

misconduct by the defendant with young children -- two police reports and two DSS reports -- even though criminal charges were not brought; "[r]ecent scholarly studies emphasize the importance of understanding the full background of sexual offenders so that proper probationary and treatment terms can be established . . . it is recognized that recidivism rates among child molesters are particularly high.")

j. Other corroborating information or observations in support of the allegations

k. Physical evidence seized

l. Names of agencies and personnel requested and on the scene

#### D. DECISION TO PROSECUTE

Often the suspect is a close relative and the only caregiver available to provide for the continued needs of the victim. The victim may voluntarily continue to reside with the abusive caregiver after the caregiver is arrested. When the cause for abuse is determined to result from a correctable shortcoming of the caregiver, the preferred resolution may include education, counselling, or supplemental support or resources rather than the arrest of the caregiver and/or institutional care for the victim.

Instances when the abuse involves serious intentional injury or harm, or when the victim wishes to prosecute or has other care options available, the preferred solution should be the prosecution of the offender.

Criminal or non-criminal resolutions should be a joint decision of the competent victim, police, prosecutors and protective services personnel.

**E. CASE PRESENTATION FOR COURT**

Throughout the proceedings, investigators will be expected to consider the following:

**1. ASSISTANCE TO PROSECUTORS**

Additional corroboration or follow-up investigation may be needed to successfully prosecute.

**2. PRIVACY AND CONFIDENTIALITY**

The dignity of elderly victims should be respected at all times. Unnecessary publicity should be avoided.

**V. SIGNS AND INDICATORS OF ABUSE, NEGLECT, AND FINANCIAL EXPLOITATION**

**A. TYPICAL SIGNS AND SYMPTOMS**

There are no definitive profiles of victims or abusers. There are, however, factors that officers should look for in abuse cases. The following signs may be of value in identifying at-risk relationships, which, when observed in conjunction with indicators of abuse, should trigger further investigation.

**1. PERSONALITY TRAITS OF ABUSERS**

These may include emotional problems, drug and alcohol abuse, or previous psychiatric hospitalization.

**2. TRANSGENERATIONAL FAMILY VIOLENCE**

A history of domestic violence (elder, spousal or child abuse).

**3. WEB OF DEPENDENCY**

The lack of an otherwise positive relationship or hostility by the victim or suspect, feelings of resentment, or a caregiver's frustration over the elder's increased dependence on emotional, physical and financial support. Dependency of the caregiver on the elderly person may also exist.

**4. SOCIAL ISOLATION**

Aging and reduced mobility are often accompanied by a loss of contact with friends, family and the outside world. Sometimes a suspect will attempt to maintain the elder in isolation by refusing to apply for economic aid or services and resisting any outside help. Or the suspect may be unreasonably critical of social and health care providers and change them frequently to prevent them from assessing the elder's situation. Isolation can hide the effects of violence, exploitation and neglect.

**5. INTERNAL AND EXTERNAL STRESSORS**

Abusive relations between caregivers and elderly victims are often inflamed by economic difficulties, marital conflicts, deaths and illnesses of close friends or relatives, and other stressors. In some cases, aging caregivers may be providing care and/or support to their parents as well as their children. Caregivers who are unaware of outside resources and find themselves unable to cope with overwhelming responsibilities may resort to neglect or abuse.

**6. OBSTRUCTION OF THE INVESTIGATION**

When a suspect unreasonably obstructs the investigation, police should take this as a red flag that abuse may be occurring. Suspects may attempt to speak for the elder, dominate the interview, refuse to allow the elder to be interviewed alone, try to divert the interviewer from the subject, or act defensively.

**B. PHYSICAL ABUSE**

**1. INDICATORS OF PHYSICAL ABUSE**

Elderly persons may frequently exhibit signs of falls and accidents. These same signs may be indicators of physical abuse, especially when victims or suspects attempt to conceal their presence or offer inconsistent or irrational excuses for injuries. Sometimes, upon further investigation, police or protective service workers will discover a history of similar injuries and/or suspicious hospitalizations. Investigators should consider the presence of any

injury. The following injuries typically indicate abuse and should be considered together with an assessment of the caregiver/victim relationship and other observations.

**a. Bruises or welts**

Older adults bruise more easily than younger people, and they are also at risk for a variety of injuries that lead to bruising. For this reason, it is often difficult to distinguish between bruises and other injuries that are accidental and those that were inflicted.

There are, however, certain types of bruising or situations which may suggest abuse. These include the following:

- (1) *Bilateral bruises* are rarely accidental. These are bruises on both sides of the body -- for example, on top of both shoulders, both sides of the face, or insides of both thighs. Bilateral bruising to the arms may indicate that the older person has been shaken, grabbed or restrained. Bilateral bruising of the inner thighs may indicate rape or other types of sexual abuse.
- (2) *"Wrap around" bruises* are also unlikely to be accidental. These are bruises which encircle the older person's arms, legs or torso. They may indicate that the person has been physically restrained.

The shape or location of injuries can tell you a lot. Sometimes you can see pattern marks that resemble the instrument that was used to cause the injury. Rope or strap marks, for example, may indicate inappropriate restraint.

**b. Burns**

- (1) Caused by cigarettes, caustics, hot objects.
- (2) Fiction from ropes or chains.

**c. Other injuries or conditions**

- (1) Fractures, sprains, lacerations and abrasions.
- (2) Injuries caused by biting, cutting, poking, punching, whipping or twisting of limbs.
- (3) Disorientation, stupor or other effects of deliberate over-medication.

**2. BEHAVIORAL INDICATORS -- THE VICTIM**

Indications of abuse are not limited to visible wounds or injuries. The behavior of victims can reflect traits often associated with elder abuse. Presence of these indicators is not conclusive and should serve only to direct the focus of further investigation.

- a. Easily frightened, agitated or trembling
- b. Exhibiting denial
- c. Hesitant to talk openly
- d. Implausible explanations concerning injuries

Often when victims have injuries related to abuse, they are explained as being the result of accidents. By carefully assessing the type of injury and the explanation, it is possible to discover inconsistencies. For example, a bruise which is explained as the result of an accidental fall may be on a part of the body which is unlikely to sustain impact in a fall.

- e. Confusion or disorientation

**3. BEHAVIORAL INDICATORS -- THE SUSPECT**

Individually, none of these indicators constitutes evidence of wrongdoing on the part of a caregiver. However, when one or more indicators are present along with injuries, further investigation is warranted.

- a. Concealment of victim's injuries. For example, the victim is brought to a different facility for treatment each time there is an injury
- b. Inconsistent explanation for victim's injuries. Sometimes several family members provide different explanations of how injuries were sustained.
- c. History of making threats
- d. History of substance or alcohol abuse
- e. Victim of abuse as a child
- f. Dependent on victim's income or assets

### C. SEXUAL ABUSE

#### 1. INDICATORS OF SEXUAL ABUSE

Physical indicators of sexual elder abuse should direct investigators to search for other corroborating evidence. Many of these indicators cannot be identified without medical examination. Indicators may include the following:

- a. Torn, stained or bloody underclothing
- b. Genital and/or anal infection, irritation, discharges or bleeding, itching, bruising or pain
- c. Painful urination and/or defecation
- d. Difficulty walking or sitting due to anal or genital pain
- e. Psychosomatic pain such as stomach or headaches
- f. Physical evidence of pornography or prostitution
- g. Sexually transmitted disease

#### 2. BEHAVIORAL INDICATORS -- THE VICTIM

The embarrassment of recounting forced sexual activity often results in the refusal of an elderly victim to report and describe the crime. The following indicators are often present in (but not limited to) cases of sexual abuse.

- a. Inappropriate, unusual or aggressive behavior or curiosity about sexual matters.
- b. Fecal soiling.
- c. Eating disturbances (overeating or undereating).
- d. Fears, phobias, compulsive behavior.
- e. Thumbsucking, bedwetting, and other regressive behavior
- f. Sleep disorders (nightmares, fear of sleep, excessive sleeping)

#### 3. BEHAVIORAL INDICATORS -- THE SUSPECT

- a. Overprotectiveness, dominance, hostility toward others
- b. Inappropriate sex-role relationship between victim and suspect
- c. Social isolation

### D. EMOTIONAL ABUSE

#### 1. INDICATORS OF EMOTIONAL ABUSE

There is usually a lack of physical evidence in cases of emotional abuse. Often, emotional abuse accompanies other abuse and neglect. Officers should look for:

- a. Signs of inappropriate confinement or restraint
- b. Signs of deprivation of food or hygiene

## 2. BEHAVIORAL INDICATORS -- THE VICTIM

Although the presence of the following behavioral indicators may be reflections of abuse, they may also be symptoms of emotional disorders, dementia, or other conditions associated with aging.

- a. Sleep, eating, or speech disorders
- b. Depression
- c. Helplessness or hopelessness
- d. Isolation
- e. Agitation or anger
- f. Confusion
- g. Low self-esteem
- h. Seeks attention and affection

## 3. BEHAVIORAL INDICATORS -- THE SUSPECT

Emotional abuse of an elderly person may stem from the suspect's own low self-esteem and his or her unrealistic expectations of the victim. The suspect may exhibit irrational behavior and:

- a. Threaten the victim
- b. Speak poorly of the victim
- c. Ignore the victim's needs

## E. NEGLECT

It is common to observe a combination of indicators when neglect (including self-neglect) exists. Neglect may be found in varying levels and may be recent or long-standing. Care should be taken to photograph and document evidence that will likely change with better care.

There are non-criminal influences (poverty, family background/culture, ignorance) that may contribute to the appearance of neglect but which are consistent with normal living conditions for that elderly person's family. The need for action should be

guided by the likelihood of harm to the elderly person if allowed to remain in those conditions. Indicators of neglect include but are not limited to:

- a. Absence of necessities, including food, water, heat
- b. Decubiti (bedsores), skin disorders or rashes
- c. Untreated injuries or medical problems
- d. Signs of health and medication mismanagement -- e.g., empty or unmarked bottles or outdated prescriptions, the absence of needed dentures, eyeglasses, hearing aid, walker, wheelchair, or braces
- e. Poor personal hygiene, including soiled clothing, matted or lice-infested hair, odors or presence of feces, dirty nails/skin
- f. Hunger, malnutrition, dehydration (as evidenced by low urinary output, dry, fragile skin, dry, sore mouth, apathy, or lack of energy and mental confusion)
- g. Pallor, sunken eyes or cheeks
- h. Lack of clean bedding or clothing; or the elder's clothing is inappropriate for the weather
- i. Unsanitary of unsafe living conditions (e.g., animal/insect infestations)

## F. FINANCIAL EXPLOITATION

As elderly persons experience decreased mobility (loss of driving ability and personal mobility), they become dependent on others to assist and sometimes take over their financial matters. Although this increases the opportunity for abusive practices, caregivers may have a need to conduct legitimate financial business and handle funds as needed for the care of the person. The presence of the following activities may justify closer examination.

- a. A caregiver overly interested in the victim's financial situation; or with no means of support
- b. Unusual volume of banking activity or activity inconsistent with the victim's ability (e.g., use of ATM by a bedridden victim). Bank statements and cancelled checks no longer come to the elder's home. Suspicious signatures on checks or other documents.
- c. Implausible explanations given about the elderly person's finances by the elder or the caregiver. The elder is unaware of or does not understand financial arrangements that have been supposedly made on the elder's behalf.
- d. Excessive concern by another over the cost of caring for the victim or a reluctance to pay bills
- e. Recent acquaintances expressing interest in the elder's finances, promising to provide assistance or care, or ingratiating themselves to the elder
- f. Recent changes in ownership of the victim's property
- g. A will or other legal document (e.g., a power of attorney) drawn by an older person who did not understand it when signing
- h. Placement, care or possessions of victim inconsistent with the victim's estate; missing items (silver, art, jewelry)
- i. Caregiver isolates the elder from friends and other family
- j. Non-payment of bills leading to eviction notices or threats to discontinue utilities
- k. The quality of the elder's care is inconsistent with the size of the estate
- l. Absence of documentation about financial arrangements.

## SOURCE MATERIALS

This Protocol was adapted from a document created by Martha Plotkin of the Police Executives Research Forum (PERF) in Washington, D.C. In the section concerning signs of elder abuse, PERF's material was adapted from *Elder Abuse: Causes, Diagnosis and Treatment* by Mary J. Quinn and Susan K. Tomita. New York: Springer, 1986.

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Interview with Sarah Buel, Director of the Domestic Violence Unit, Suffolk County District Attorney's Office in June 1993.

## KEY CONTACTS

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## SECTION VIII

# THE ELDER ABUSE REPORTING LAW AND THE ROLE OF PROTECTIVE SERVICES

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### I. ELDER ABUSE REPORTING LAW

In 1983, the Massachusetts mandatory reporting law went into effect as G.L. Chapter 19A, sec. 14-26. This law requires that certain professionals report suspected occurrences of elder abuse, neglect and financial exploitation. Reports are investigated by social service professionals and, in serious circumstances, are referred to the district attorney.

#### A. EXERCISE

Ask class participants to take the pre-test that appears as *Attachment E*. This will allow students to check the extent of their knowledge on the elder abuse reporting law and the role of protective services. Tell students that each of the questions in the pre-test will be answered as the material in this section of the manual is presented.

#### B. POLICE ARE MANDATORY REPORTERS

While "any person" may report elder abuse to protective services, there are specifically designated occupations that must make reports. Police officers are mandated reporters.

The exact list of reporters is specified in Section 15(a) of the statute: "Any physician, a medical intern, physician's assistant, dentist, nurse, family counselor, probation officer, social worker, policeman, firefighter, emergency medical technician, licensed psychologist, coroner, registered physical therapist, registered occupational therapist, osteopath, podiatrist, executive director of a licensed home health agency or . . . homemaker service agency . . . ." Agency directors must establish procedures for staff members to report instances of abuse which, in turn, trigger the directors' reporting duties.

*Reader's Note:* The term "elder abuse" is used throughout this section as a shorthand expression that encompasses all three of the reportable conditions under the statute -- elder abuse (physical, sexual and emotional), neglect and financial exploitation. In addition, all statutory cites, unless otherwise noted, refer to G.L. Chapter 19A.

### C. PROTECTED POPULATION: 60 AND OVER

All persons who are 60 years old or older and residing in the community are covered by this law.

### D. REPORTABLE CONDUCT OR CONDITIONS

Mandatory reporters are responsible for reporting three kinds of conduct or conditions.

#### 1. ABUSE: PHYSICAL, SEXUAL, EMOTIONAL

Abuse is an act or omission (the failure to act) by another person that results in serious physical or emotional injury to an elderly person.

##### a. Physical Abuse

Physical abuse is the non-accidental infliction of serious physical injury, or the threat of serious physical injury, where the suspect may have the intent and capacity to carry out the threatened conduct. The following factors are considered in determining whether serious physical injury has occurred:

- (1) The elder's physical condition;
- (2) The type, size, shape, number and location of any injury, whether internal or external;



- (3) The circumstances under which the injury occurred including the potential for serious injury in the actual incident;
- (4) The emotional impact on the elder; and,
- (5) The potential for escalation of abuse.

#### **b. Sexual Abuse**

Any form of sexual contact or assault that occurs without the elder's consent -- or occurs with an elder who is incapable of giving consent -- falls within the definition of abuse.

#### **c. Emotional Abuse**

The non-accidental infliction of mental or emotional anguish by threat, humiliation, or other verbal or non-verbal conduct. Emotional injury is evidenced by extreme conditions such as anxiety, fear, depression or withdrawal. Emotional abuse may result from threats to harm the elder or place the elder in a nursing home.

This kind of abuse is typically the most difficult to define since what constitutes emotional abuse is highly subjective, depending on the particular experience and opinion of the person being asked to make a judgment. However, when officers encounter a persistent pattern or instance of emotional abuse that clearly goes beyond the bounds of legitimate family interaction, they should report the situation to protective services. Finally, emotional abuse is often found in combination with other forms of reportable abuse, such as physical, sexual or financial exploitation.

## **2. FINANCIAL EXPLOITATION**

**Definition:** Financial Exploitation is an act or failure to act by another person which causes a substantial monetary or property loss to an elder or causes a substantial monetary or property gain to the other person, which would otherwise benefit the elderly person. This is accomplished without the elder's consent, or when the elder is tricked, intimidated or forced into giving consent.

**Exceptions:** However, a person's conduct is not considered financial exploitation if the elder:

#### **a. Consent**

Knowingly consented to the transaction; or

#### **b. Gift**

Knowingly decided to give a gift to the alleged exploiter; or

#### **c. Fraud**

Was the victim of a fraudulent scheme or property crime perpetrated by a stranger; or

#### **d. Consumer Fraud**

Was the victim of an unfair consumer practice.

## **3. NEGLECT**

#### **a. Reportable Neglect**

Reportable neglect occurs when a "caretaker" fails or refuses to provide one or more of the necessities essential for the physical, intellectual and emotional wellbeing of an elder, such as food, clothing, shelter, social contact, personal care and medical care, which results in serious physical or emotional injury to that elderly person.

Perhaps the biggest myth about elder neglect is that the abuser is someone "bad" and that it must be intentional. However, neglect

occurs across a broad spectrum. At one extreme, it may be the result of a well-meaning caregiver who has simply lost the ability to render adequate care to the elder. At the other extreme, neglect may result from the caregiver cruelly depriving the elder of needed food.

Massachusetts does *not* differentiate between active and passive neglect in its abuse reporting laws. Distinguishing between passive or active neglect is often impossible, since it reflects the intent or motives of the caregiver, which are often impossible to determine. However, while the distinction is not important for reporting purposes, it is crucial in determining what kinds of services will be provided and whether there are likely to be other forms of abuse accompanying the neglect.

#### b. Exception

People may not be considered abused or neglected for the sole reason that they are relying on treatment based on the teachings of an accredited religious practitioner.

#### c. Significance of the Caregiver Requirement

Only neglect by a caregiver is screened in for investigation by protective services in contrast with physical, sexual and emotional abuse and financial exploitation, which are screened in for investigation regardless of the alleged perpetrator's caregiving relationship to the elder victim.

#### d. Caregiver Defined

A caregiver is responsible for the care of an elder as a result of:

- (1) *A family relationship* where the relative is *living* with the elder on a *regular* basis; or is providing *substantial assistance* that would indicate that the family member has assumed a caregiver role.

- (2) *A fiduciary relationship* imposed by law -- for example, guardians or conservators are the caregivers of the elders they assist.

- (3) *A contractual relationship* in which the person receives monetary or personal gain to act as a caregiver -- for example, a home health aid.

- (4) *A voluntary assumption of the caregiving role* in which the caregiver is *living* in the elder's household; or *related* to the elder and providing *substantial* care. Simply put, the caregiver relationship exists whenever the individual's actions indicate a voluntary assumption of caregiving responsibilities. Whether the elder relies on and believes the person to be the caregiver is also considered.

#### e. No Criminal Penalties for Neglect

At present, the law in Massachusetts fails to address the plight of victims of serious neglect beyond this reporting statute. The Legislature has not yet established a criminal action under which a person may be prosecuted for neglect. If the neglect is reckless and wanton and results in the death of an elder, the authorities can pursue a manslaughter indictment. *Commonwealth v. Michaud*, 389 Mass. 491, 495-496 (1983); *Commonwealth v. Gallison*, 383 Mass. 659, 665 (1981); *Commonwealth v. Welansky*, 316 Mass. 383, 399 (1944). On the other hand, if an elder does not die as a result of neglect, the options for criminal prosecution are severely limited. See *Commonwealth v. Raposo*, 413 Mass. 182, 185 (1992).

To remedy this situation, Attorney General Harshbarger has submitted legislation that, if passed, will create criminal penalties for the neglect of elders, disabled adults and children. Specifically, the bill, *H. 2353: An Act Creating the Crime of Criminal Neglect of an Elder, Child or Disabled Person which Results in Serious Bodily Injury*, will make

it a felony for caretakers to cause serious bodily injury to dependent persons through their wanton and reckless conduct. H. 2353 is presently before the Joint Legislative Committee on Criminal Justice.

**f. Self-Neglect**

Technically, officers are not required by the elder abuse statute to report instances of self-neglect -- that is, when elders who live alone are the cause of their own neglect. However, officers may report these situations to protective services. Protective services has the ability to access the *Elder At Risk Program*, which is a local unit, oftentimes within the protective service agency, that responds to reports of self-neglect.

In October of 1990, this new component of protective services was implemented. The purpose of the Elder at Risk Program is to target frail, self-neglecting, often marginally competent elders living in the community who are often not otherwise eligible and/or willing to accept services. An elder may be "at risk" due to a variety of factors including alcohol and drug problems, mental health problems, dementia, physical illness and inadequate resources. The goal is to provide short-term problem-focused intervention to enable elders to remain safely in the community.

**E. LEVEL OF INFORMATION: REASONABLE CAUSE TO BELIEVE**

Before making their report, officers must have "reasonable cause to believe" that the elder has died from, or has suffered or is suffering from abuse, neglect or financial exploitation. The standard of "reasonable cause" has been interpreted expansively. The standard is not intended to restrict the reporting of cases or the acceptance of reports and, furthermore, written documentation of "reasonable cause" is not required. *Op. Atty. Gen.*, May 27, 1975, p. 139 (specific issue concerned reporting under the child abuse law).

**F. LOCATION OF ABUSE**

**1. EVERYWHERE EXCEPT LONG-TERM CARE FACILITIES**

The Chapter 19A elder abuse reporting law covers all elder victimization *except* that which takes place in *long-term care facilities*. Thus, abuse to elders in private homes, apartments, housing projects, and public areas are the responsibility of local protective service agencies. However, incidents that occur in nursing, rest or convalescent homes are covered under a different reporting law, G.L. c. 111, sec. 72F-72L, discussed in *Section IX* of this manual.

**2. EXCEPTIONS**

However, protective services will become involved in three kinds of situations concerning nursing home residents. First, abuse to a resident during an out-of-facility visit with a family member or friend should be reported and investigated by protective services. Second, if the resident is being abused by a visitor to the facility, the facility should attempt to structure supervised visitation. If supervised visitation is insufficient to protect the resident or others in the facility, then administrators may seek assistance from protective services. Third, if there is the possibility that a resident will be discharged to an abusive community setting, facility staffers should notify protective services of their concern.

**G. REPORTING PROCEDURES**

To appropriately report elder victimization, officers must do the following:

## 1. IMMEDIATE ORAL REPORT

The oral report is given to the Executive Office of Elder Affairs (EOEA) or its designated local protective service agency (PSA).

### Practical reporting techniques:

#### a. Local PSA

If possible, officers should always report the incident to their local PSA since, in all likelihood, that is the agency who will conduct the investigation and provide any follow-up services.

#### b. Hotline: 1-800-922-2275

Appropriate for *any* after hours report

To report abuse during non-business hours - nights, weekends, holidays -- call the state hotline number: 1-800-922-2275 V/TDD. The screener at the hotline will decide whether an emergency response is warranted and convey the information to the appropriate worker at the local PSA. If it is an emergency, a PSA worker will respond immediately.

But remember, *the hotline should not only be used for emergencies*, officers can telephone in reports of any nature during non-business hours. In fact, the Hotline staff responded to 9,028 incoming calls in 1992. Of those calls, 606 required that protective service workers be paged to provide emergency intervention at the local level.

#### c. On-scene Officer

It is best if the on-scene officer calls in the report and not an officer who received the report of victimization second-hand. This approach is the most effective because the on-scene officer is in the best position to answer questions posed by the protective service worker answering the call which, in turn, allows the worker to properly assess what kind of response is needed.

## d. Key Information:

- (1) **Language issues:** Officers should be sure to explain if the elder speaks a language other than English, so that protective services can arrange for an interpreter if necessary.
- (2) **Telephone numbers:** Also, officers should give protective services a telephone number where they can be reached for follow-up.
- (3) **Specific concerns:** Remember to be descriptive, not general or vague.
- (4) **Safety issues:** Inform protective services whether the suspect lives with the elder and whether it would be safe for protective workers to go to the dwelling without a police escort.

## 2. WRITTEN REPORT WITHIN 48 HOURS

Within 48 hours of the oral report, an officer must file a written report

### a. Report Form

The EOEA has created a form to facilitate written reports, which appears on pages 64 and 65. The completed form should be sent to the local PSA.

### b. Appropriate to Attach Police Report

So long as their incident report contains sufficient information, officers may simply attach their police report to the mandatory reporter form to fulfill their 48 hour obligation. This approach avoids the unnecessary duplication of effort.

### c. Contents of report

#### (1) Mandatory Information

The report must include the name, address and approximate age of the elderly victim along with a description

of the nature and extent of the abuse, neglect or financial exploitation. Mandatory reporters must identify themselves by name, although non-mandatory reporters can make anonymous reports.

**(2) *Desired Information***

Officers should include the name of the caretaker; any medical treatment being given or immediately required; and any other relevant information.

**d. Confidentiality Rules**

**(1) *The Reporter's Name***

Regardless of the nature of the report -- whether mandatory or not -- protective services will keep the reporter's name confidential. As a practical matter, however, the subjects of the report will usually figure out that the report originated with the responding officer who came to their house.

**(2) *During the Investigation***

The statute explicitly exempts mandated reporters from the coverage of confidentiality rules. Consequently, mandated reporters do not need to be concerned about confidentiality issues that the victim or perpetrator may later try to raise (for example, G.L. c. 112, sec. 135 -- the social worker privilege -- or G.L. c. 233, s. 20B -- the psychotherapist/patient privilege). See *Commonwealth v. Souther*, 31 Mass. App. Ct. 219 (1991) (In interpreting an identical provision under the child abuse reporting law, the Court held that this reporting language "overrides" the psychotherapist-patient privilege under G.L. c. 233, s. 20B; consequently, the psychologist's filing of a report in response to the defendant's disclosure, during therapy, that he had sexually abused three young girls, was entirely proper. Those statements were used

against the defendant during his prosecution).

**H. POTENTIAL CIVIL OR CRIMINAL LIABILITY**

**1. MANDATORY REPORTERS**

**a. Filed Reports**

If a mandatory reporter files a report, there is never civil or criminal liability; unless the reporter actually perpetrated the abuse or the reporter, in some cases, was improperly motivated. Specifically, directors and staff of home health care or homemaker agencies are only insulated when they make their reports in good faith. However, the language used in the statute strongly suggests that medical personnel and police officers are completely insulated from liability, even if their reports are not made in good faith! Finally, supervisors may not retaliate, in any manner, against employee/reporters.

**b. Failure to File**

Mandatory reporters who fail to file a report are subject to criminal prosecution and the imposition of a fine up to \$1,000. However, directors and staff of home health care or homemaker agencies are not subject to prosecution or fine.

Civil liability is possible as well.

**2. NON-MANDATORY REPORTERS**

**a. Filed Reports**

If a non-mandatory reporter files a report, there is never civil or criminal liability; unless the reporter actually perpetrated the abuse or the report was not made in good faith. Furthermore, supervisors may not retaliate, in any manner, against employee/reporters.

**b. Failure to File**

No legal consequences.

EXECUTIVE OFFICE OF ELDER AFFAIRS  
COMMONWEALTH OF MASSACHUSETTSELDER ABUSE MANDATED REPORTER FORM

This form should be returned within 48 hours of the oral report,  
to the following Designated Protective Service Agency:

\_\_\_\_\_

\_\_\_\_\_

Reporter Information:

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Agency: \_\_\_\_\_ Address: \_\_\_\_\_

Tel. #: \_\_\_\_\_

\_\_\_\_\_

Information about Elder Being Allegedly Abused/Neglected:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Permanent: \_\_\_\_\_

Temporary: \_\_\_\_\_

Tel. #: \_\_\_\_\_ Preferred \_\_\_\_\_

Approximate Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Language: \_\_\_\_\_

Is elder aware report is being made? \_\_\_\_\_ Is English spoken? \_\_\_\_\_

\_\_\_\_\_

Description of alleged abuse incidents and/or condition of neglect:  
(Include name, dates, times, and specific facts and any information  
regarding prior incidents of abuse/neglect.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Persons or Agencies Involved or Knowledgeable about Elder:

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

Is medical treatment required immediately? Yes \_\_\_\_\_ No \_\_\_\_\_ Possibly \_\_\_\_\_  
 Describe treatment needed or already received: \_\_\_\_\_

Does reporter believe the situation constitutes an emergency?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ Possibly \_\_\_\_\_

Describe the risk of death or immediate and serious harm: \_\_\_\_\_

Additional information or comments:

\_\_\_\_\_  
 Signature of Reporter

\_\_\_\_\_  
 Date

## II. THE PROTECTIVE SERVICES NETWORK

### A. THE EXECUTIVE OFFICE OF ELDER AFFAIRS (EOEA) RESPONSIBILITIES

#### 1. DEVELOP AND MONITOR A COORDINATED SYSTEM

The Executive Office of Elder Affairs (EOEA) was created to develop a coordinated, state-wide system of protective services. At present, there are 27 local protective service agencies that fall under the direction of EOEA. *The addresses and phone numbers of these agencies appear as Attachment F.*

#### 2. ESTABLISH FINANCIAL GUIDELINES

By law, EOEA establishes financial guidelines. If the elderly person can pay, then EOEA or the protective service agency can collect all or part of the cost -- provided that the elderly person is notified before services begin and reimbursement is not required before services are rendered. If the elder cannot afford services, they must be provided at no cost.

### B. PROTECTIVE SERVICES AGENCY (PSA) RESPONSIBILITIES

#### 1. INVESTIGATION

The PSA must:

- a. Receive reports on a 24 hour basis [sec. 16(b)]. *For more information on the number and types of abuse reports received by protective services, see Attachment G.*
- b. Investigate reports by visiting the elderly victim's residence and consulting, if necessary, with other service agencies [sec. 18(a)].
- c. Communicate with the elderly victim by providing written notice of the assessment and allowing the elderly person to review the file upon request.

d. Complete the assessment within 24 hours after receiving an emergency report [sec. 18(a)].

e. Respond to non-emergency reports within 5 days.

f. Complete a comprehensive investigation within 14 days.

g. Refer to the District Attorney (DA) every reported case in which PSA has reasonable cause to believe that an elder has suffered serious abuse or died from abuse:

(1) *If Death Resulted, DA Referral Must be Immediate* [sec. 16(b)]. If a report of death as a result of abuse is made to the DA, then the PSA shall cease investigating in order not to jeopardize the DA's ability to investigate a possible homicide and pursue criminal prosecution when appropriate.

(2) *If Nonfatal Abuse Occurred, DA Referral Must be Within 48 Hours* [sec. 18(a)]

h. Inform the reporter within 45 days of the PSA's response to the abuse report (e.g., whether case was opened, whether it was referred to the DA, etc.).

i. Properly handle records by keeping all reports confidential except those investigative reports referred to the DA. And, if the allegations in a report are unsubstantiated, the PSA or EOEA must destroy related records or remove all personal identifiers within 3 months. However, EOEA and PSA can always retain statistical records for planning and reporting [sec. 23].

#### 2. PROTECTIVE SERVICES

The PSA develops a "Service Plan" [sec. 18(a)] that is appropriate to the functional capacity, situation, and resources of the abused elder; and



that utilizes the "least restrictive alternative."

The existence of various profiles of perpetrators and victims by type of mistreatment suggest that diverse approaches for treatment must be considered. In-home services, respite care, counseling, and day care might be the most effective interventions for very dependent and impaired victims neglected by overburdened caregivers, but such a treatment plan would not be appropriate for the fairly independent older person, physically abused by a son or grandson who is extorting money to support a drug habit. In this situation, legal intervention, victim support groups, drug treatment programs for the abuser, and housing services may be more effective strategies. Similarly, in cases of financial exploitation not involving a close relative, legal and criminal action for the perpetrator and financial management services for the victim may be the most fitting way to resolve the case.

Protective services include, but are not limited to [sec. 18(b)]; also see generally sec. 17]:

- a. The capacity to respond to an emergency;
- b. Assistance by a caseworker, homemaker, or home health aide;
- c. Transportation;
- d. Emergency financial and legal assistance;
- e. Medical and/or mental health care;
- f. Shelter;
- g. Nutrition services;
- h. Foster care and/or adult day care services;
- i. Petitioning the court, if appropriate, for:
  - (1) A *restraining order* [sec. 18(b)]; and/or

(2) The *appointment of a Guardian or Conservator* for the elderly person [sec. 17]; and/or

(3) An *injunction* to prohibit any interference with the provision of services to the elder.

### 3. WHAT ADULT PROTECTIVE SERVICES CAN DO FOR LAW ENFORCEMENT

Clearly, protective services offers important assistance to law enforcement. Specifically, protective services can often provide assistance in emergency situations; assist with the investigation and interrogation of physical and sexual abuse victims; assist by securing services for chronic substance abusers, by relocating an elderly or disabled adult who has been evicted, by securing services for "street people," by investigating a caretaker's theft of resources and property. Protective services can also provide services and support to an elder when a caretaker is arrested or removed, which tends to ease the mind of law enforcement personnel. The PSA can help ensure that elders on probation or parole receive the necessary resources to allow them to successfully reside in the community. Above all, protective services is available to provide advice and support when questionable situations relating to elders occur.

### C. SELF-DETERMINATION, CONSENT, AND LACK OF CAPACITY: THE ELDER'S RIGHT TO CHOOSE

#### 1. CONSENT REQUIRED UNLESS LACK OF CAPACITY OR INTIMIDATION

The elderly person must consent to the investigation and to receiving services [sec. 19]. If the elder refuses or withdraws consent, then no investigation can occur and no services can be provided *unless* the PSA or other appropriate applicant (in the case of an emergency) has reasonable cause to believe that the elder is suffering from abuse and lacks the capacity to consent to protective services or is refusing to consent because of intimidation or duress. *For an example of an informed consent to services*

form, see Attachment H.

## 2. SELF-DETERMINATION IS PARAMOUNT

### a. The Dilemma

Elder abuse cases can be extremely complex from a practical and philosophical perspective. In addition to posing challenges to workers' professional skills, they often raise troubling questions about when it is appropriate, helpful, or even ethical for outsiders to intervene in situations which usually occur within the family setting.

To complicate the matter, those working with victims often find themselves interacting with other professionals who approach similar situations from very different points of view. Health and social service providers often see their role as client advocates, protecting the rights and wishes of elder victims. Law enforcement's role, on the other hand, is to enforce society's code of conduct and punish those who violate the law while serving victims of crime. At times, it may seem that those working together on cases are actually at odds or in conflict with one another.

### b. Key Concepts

**Autonomy:** This is the view that adults have the right to choose their own lifestyles and live by their chosen values as long as they understand the implications of what they are doing and do not infringe upon the rights of others. These personal choices take precedence over community norms, agency policies, and the interests of third parties. Adults are free to live as they choose, even if their chosen lifestyles are unconventional, non-conformist, and dangerous.

**Privacy:** This is the view that an individual's personal affairs should not be revealed to others or intruded upon by others. Federal, state, and local laws honor privacy by prohibiting unwarranted intrusions into a person's way of life.

**Confidentiality:** This is the view that information obtained about clients and their circumstances should be held in secret in the course of professional service. Nothing which could cause embarrassment or other personal damage should be revealed to a third party without the client's informed consent. This is to protect clients from stigma or retaliation. When a person reveals information about a danger to him or herself or to others, however, confidentiality may be violated to protect the endangered person.

**Informed Consent:** This is the right of individuals to exercise self determination in agreeing to options or decisions that affect their lives. It assumes that consent is only free if the person has been made aware of all of the implications of consenting.

**Least Restrictive Alternatives:** Alternative options are often available to solve problems or stop abuse. In selecting options, priority should be given to those that are least restrictive to the person's autonomy and freedom. For example, older individuals may lose the ability to balance their checkbooks but may still make good decisions about how they want to spend their money. Options for assisting people with their finances fall along a continuum from informal money management (helping to pay the bills) to the appointment of a conservator, who has responsibility for all financial decisions of an elder. While a conservator would undoubtedly solve the problem of an elder who could not balance his checkbook, it would be unnecessarily restrictive if the person had the capacity to perform other tasks. Thus, in this case, limited money management would be more appropriate.

### c. The Policy of the Executive Office of Elder Affairs

The Executive Office of Elder Affairs and its local affiliates attempt promote self-determination by upholding an elder's right to autonomy, privacy, confidentiality, and

informed consent. They act in ways consistent with these principles and adhere to the following theory of adult protection:

***Allegiance to Adult if Competing Interests:***  
When interests compete, the adult client is the only person that elder services is charged to serve -- not the community concerned about safety; landlords concerned about property; families concerned about their own health or finances; and so forth. Above all, the adult client is in charge of decision-making until the client delegates responsibility voluntarily to another or the court grants responsibility to another.

***Freedom More Important Than Safety:***  
Protective service workers value their clients' freedom more than safety -- that is, a person may choose to live in harm or even self-destructively provided that he or she is competent to choose, does not harm others and commits no crimes.

In the ideal case, protective services seeks to achieve simultaneously and in order of importance: freedom, safety, least disruption of life-style and least restrictive care alternative.

### 3. PROCEDURE IN THE EVENT OF LACK OF CAPACITY

By authority of Section 20, the PSA may petition the Probate and Family Court (Court) for a finding that the elder lacks capacity to consent -- in other words, that the elder is incompetent. The petition must include specific facts in support of that PSA determination.

#### a. Definition of Competence

The elder must *currently understand the likely consequences* of his decisions concerning personal health, safety, and general welfare or finances. In addition, the elder must have the reasonable ability to understand the information conveyed, evaluate options, and communicate a decision.

#### b. Geriatric Evaluation

Under Section 21, the elder must undergo a geriatric evaluation process if a petition has been filed for the appointment of a guardian or conservator [sec. 17(3)] or emergency protective services [sec. 20(b)]. The evaluation must include at least the name and address of the elder and the agency or person, if any, who is currently providing services; a description of current services, if any; an evaluation of the elder's present physical, mental and social conditions; and a recommendation for the least restrictive services.

The EOEA or PSA must pay for the evaluation; however, elders have the right, at their own expense, to secure an independent examination.

#### c. Non-Emergency Procedure

In a non-emergency, the Court must hold a hearing within 14 days of the petition's filing; give notice to the elder at least 5 days prior to the hearing; appoint an attorney if the elder is indigent (if the elder lacks the capacity to retain or waive counsel, the court must appoint a guardian ad litem to represent the elder); allow the elder or attorney to present evidence and cross examine witnesses.

The court decides, based on a preponderance of the evidence, whether the elder has been abused or neglected, needs protective services, lacks the capacity to consent and lacks having another person available, willing and authorized to consent on behalf of the elder.

If the elder lacks capacity and there is no authorized person to consent, the court shall either appoint a Guardian or Conservator to consent to services or shall order the provision of services. In either case, the least restrictive alternatives must be used.

The order remains in effect for 6 months unless otherwise stipulated; but may be

extended for cause for 6 months or, if stipulated, for longer.

**d. Emergency Procedure**

Section 14 defines an emergency as a "situation in which an elderly person is living in conditions which present a substantial risk of death or immediate and serious physical or mental harm." In this situation, Section 20(b) defines the potential applicants for court intervention as the PSA; a member of the elder's immediate family; or a caretaker.

The court must hold a hearing within 14 days of the petition's filing and give notice to the elder at least 24 hours prior to the hearing. The court may dispense with notice upon its finding that immediate and reasonably foreseeable physical harm to the individual or others will result from the 24 hour delay and that reasonable attempts have been made to give notice. The court must also appoint an attorney if the elder is indigent (if the elder lacks the capacity to retain or waive counsel, the Court must appoint a guardian ad litem to represent the elder *after* the entry of an emergency order).

The court decides, based on a preponderance of the evidence, whether the elder has been abused; needs protective services; lacks capacity to consent; and is in the midst of an emergency.

If the elder lacks capacity and an emergency exists, the court shall order *only* those services necessary to remove the conditions creating the emergency with the order to remain in effect no longer than 14 days. However, the order may be extended for another 14 days if necessary to remove the emergency.

**e. Institutional Placement Possible, Mental Health Placement Not Allowed**

Whether proceeding under an emergency or non-emergency order, the court may *only* order an institutional placement or change of

residence for the elder when no less restrictive alternative will meet the elder's needs. Furthermore, the court may *never* commit an elder to a mental health facility under this statute [sec 20(c)].

**f. Modification or Set Aside**

Whether an emergency or non-emergency order exists, it may be modified or set aside by the court, at any time, based on a petition from the elder, court-appointed representative, or PSA [sec. 20(c)].

**D. POWERS AND DUTIES OF VARIOUS ACTORS IN THE PROBATE COURT**

**1. GUARDIANS**

Guardianship provides the most broad and controlling form of decision-making help. A guardian is a person appointed by the court to handle both the personal and financial affairs of another person: the "ward." The judge must find that the ward is incapable of handling his own affairs due to mental retardation, mental illness, inability to communicate as a result of a physical or medical condition, minority, or other specific conditions. In Massachusetts everyone 18 years or older is legally considered to be on his own. Parents are not presumed to be legal guardians and do not have any official decision-making authority over their adult children unless they go to court and are appointed guardians. Thus, a guardian would have to be appointed for even a severely mentally retarded person after he reached the age of eighteen.

Guardianship should only be sought when impaired judgment or capacity prevent a person from understanding basic information necessary for decision making and pose a major threat to his welfare. It is almost impossible to precisely define what constitutes a major threat to a person's welfare. A person's living situation and access to advice and help are major considerations in determining whether guardianship is necessary. For example, one should consider: how protected is the environment; how complex are the decisions that need to be made; and how much help in decision

making can the person get from friends, family, or staff; and will the person seek and accept advice and help.

However, a guardianship should not be used to protect a person from the normal daily risks we all face in working, having a residence, moving about, being consumers, or associating with others. A guardian should not be appointed simply because the person has made or is about to make poor or harmful decisions.

## 2. CONSERVATORS

Conservatorship is not as broad a form of control as guardianship. A conservator handles only the ward's financial affairs, allowing the ward to make personal decisions. Conservatorship should be considered only for people whose judgment or intellectual capacity is so seriously impaired that they cannot absorb the basic information needed for financial decision making.

## 3. REPRESENTATIVE PAYEES

A representative payee is a person or organization authorized to cash and manage governmental benefits for a person who is incapable of managing these benefits or managing bank accounts or simple banking transactions such as check writing. For people whose only source of income is benefit checks such as Social Security or Veteran's Benefits, who need help managing this income, a representative payee may provide adequate protection without the more intrusive aspects of conservatorship. In terms of appointment, preference is given to a legal guardian or relative, first; a friend, second; and, the agency having custody of the person, last.

## 4. POWER OF ATTORNEY

A power of attorney is a written agreement between people that authorizes one to act on behalf of the other. A person does not have to be an attorney to be granted power of attorney. A person who holds power of attorney has the authority to sign documents and conduct transactions on the granting individual's behalf.

The power of attorney delegates as much power as an individual desires; it can be limited to specific transactions or can be very broad. It can also be revoked at any time.

## SOURCE MATERIALS

The material in this section was developed by referring to the applicable statute, G.L. Chapter 19A, and regulations, 651 CMR 5.00-5.26. Also, Donna Reulbach, the Director of Protective Services for EOEA, offered a great deal of assistance in reviewing and editing this section.

Memorandum of Secretary Ollivierre concerning long-term care facility coverage by protective services, *EOEA PI-92-27* (August 18, 1992).

Statistical information and charts as well as information on available services came from the *Elder Protective Services Program Report for FY 1991 and 1992*, which is published by the staff of the Executive Office of Elder Affairs (EOEA).

Statement of Dr. Wolf, R., Exec. Dir. Institute on Aging, House Comm. on Aging, May 15, 1991 hearing.

Information on self-determination was adapted in part from the *PERF Law Enforcement Lesson Plan*, Module V.

The Executive Office of Elder Affairs has outlined its self-determination policy in a one page handout entitled: "A Theory of Adult Protection."

Jean Tolland, Director of Protective Services for West Suburban Elder Services, Inc. in Watertown, provided information concerning the definition of competence.

Also see the *Colorado Guidelines for Cooperation Between Law Enforcement and Adult Protective Services: A Training Manual* (Published by the Colorado Department of Social Services; Denver, Colorado, 1992; ed. Wright-Benedetti, B. and Marlatt, J.).

Descriptions of guardians, conservators, power of attorney and representative payees are excerpted from *The Handbook on Guardianship and the Alternatives* by Mental Health Legal Advisors Committee in Massachusetts (January 1993).

**KEY CONTACT**

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The Arizona State Police Department adopted the following legal and ethical principles as a general framework for decision making. These principles are reprinted from *PERF Improving the Police Response to Domestic Elder Abuse*, Module V-23. Arizona found that they provide greater clarity about how ethical concerns may be applied to specific situations.

## Practice Principles

1. Do no harm.
2. Respect the older person's right to make decisions.
3. Respect the older person's right to confidentiality.
4. Maintain the family unit whenever possible.
5. Document the situation.

1. Do no harm. Take no action that exacerbates the situation and increases the risk to the older person. Make no promises that cannot be fulfilled.
2. Respect the older person's right to make decisions. If mentally competent, the older person has the right to reject unwanted intrusions into his or her life, including benevolent intrusions. The older person has the right to privacy and the right to decide whether or not to accept help.
3. Respect the older person's right to confidentiality. Information about the individual's situation should only be shared with other professionals as it pertains to assisting the individual and as authorized by the individual or guardian. Follow the dictates of your own profession.
4. Maintain the family unit whenever possible. Experience shows that the family provides the best care for the older person. First seek solutions, like support services, that maintain the integrity of the family. However, if the abuse is a long-standing family pattern or the result of pathological conditions that endanger the older person, it may be necessary to separate the abuser and the victim.
5. Document the situation. Clearly and objectively detail, in written form, information pertaining to the older person's situation. This will help you in case you are later asked for information, and it will help others to assess the type and extent of abuse — whether or not legal action is taken.

## SECTION IX

# INSTITUTIONAL ABUSE

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### I. INTRODUCTION

We previously examined appropriate police and protective service responses to abuse and neglect involving elders still living in the community. This section discusses the procedures that apply when seniors that live in long-term care facilities are abused or neglected.

Just as abuse is prevalent in the community setting, so too is institutional abuse increasingly evident in our society. Dr. Karl Pillemer of the University of New Hampshire has conducted the broadest study to date concerning institutional abuse. Pillemer interviewed over 500 nurses and nurse's aides regarding instances of physical and psychological abuse that they witnessed or committed over the previous year. 81% of the respondents had observed one or more incidents of psychological abuse ["an act carried out with the intent . . . of causing emotional pain to another person (e.g., threats or insults)"] during the previous year. 40% of the respondents admitted to committing such acts. 36% of the respondents had observed at least one incident of physical abuse during the previous year.

Police are much more likely to encounter abuse and neglect in a community setting than they are in a long-term care facility — for the simple reason that their duties rarely require that they enter long term care facilities, commonly known as a nursing homes. Even so, officers should be familiar with the reporting procedures that apply to institutional abuse cases because there are times when they get called to nursing homes to investigate criminal offenses or for some other purpose.

### II. REPORTING ELDER ABUSE IN LONG-TERM CARE FACILITIES

The reporting law governing institutional abuse appears in G.L. c. 111, s. 72F - 72L. In most respects, the proper procedure is similar to that required under G.L. c. 19A. The major difference is that the proper recipient of allegations is the Department of Public Health (DPH) and the Attorney General (AG), not the Executive Office of Elder Affairs and its local agencies.

#### A. REPORTABLE CONDITIONS

There are three reportable conditions outlined in Section 72F:

##### 1. ABUSE

Abuse is physical contact which harms or is likely to harm a patient or resident. Note that this definition is broader than the definition of abuse under Chapter 19A for elders in the community.

##### 2. MISTREATMENT

Mistreatment is an additional category which encompasses the use of medications, isolation, or physical or chemical restraint that harms or is likely to harm a patient or resident.

##### 3. NEGLECT

Neglect involves the failure to provide treatment and services necessary to maintain the health and safety of a patient or resident.

**B. REPORTING PROCEDURES****1. MANDATED REPORTERS**

Where there is reasonable cause to believe that a patient or resident of a long-term care facility has been abused, mistreated or neglected, a mandatory reporter must report the situation to the Department of Public Health (DPH). Police officers are, of course, mandated reporters as are, for example, nurses, nurses' aids, nursing home administrators, and physicians. Most often a case will come to the attention of DPH because a nursing home administrator communicates the report made by a staff member against another staff member. Generally, the reporting institution will then suspend the offending staff member and further document the abuse.

Volunteers and staff members of the "ombudsman" program are obligated to notify DPH upon the receipt of an oral or written report that a resident of a long-term care facility has been abused, mistreated, or neglected. Created under G.L. c. 19A, s. 31, the ombudsman program is responsible for sending volunteers into nursing homes to serve as the elder residents' advocates. The volunteers offer companionship, represent their clients' needs and, at times, become aware of abusive situations.

Beyond the mandated reporters specified in the statute, anyone may report institutional abuse and neglect to DPH or the AG.

**2. IMMEDIATE ORAL REPORT, WRITTEN REPORT WITHIN 48 HOURS**

Similar to Chapter 19A, the reporter must make an immediate oral report concerning the abuse or neglect to DPH. A written report must be submitted within 48 hours.

**a. Criminal Sanction**

Under Section 72G, a reporter's failure to follow this course of action may result in criminal prosecution and the imposition of a \$1,000 fine.

**b. Professional Sanction**

Section 72L requires that the AG or DPH notify the appropriate board of registration concerning any licensed professionals who do not fulfill their reporting obligations. The board may then revoke or suspend an offending professional's license.

**3. DPH REQUIRED RESPONSE****a. DPH Investigation**

If there is an emergency, then DPH must respond within 24 hours. For non-emergencies, DPH must complete its investigation within 10 days.

**b. Notification of AG**

Under Section 72H, DPH must provide the AG with:

- (1) *A summary of DPH's findings and recommendations "within a reasonable time" after a case is initially reported, as well as a copy of its final complaint investigation report.*
- (2) *An immediate report of a patient's death if there is reasonable cause to believe that the patient died as a result of abuse, mistreatment or neglect. DPH must also report the death to the district attorney in the county in which the death occurred and to the medical examiner.*

**C. SANCTIONS****1. CIVIL REMEDIES**

Under Section 72K, the AG may commence a civil action against an abuser and recover up to \$2,500. The AG may also bring a civil action against the alleged violator under G.L. c. 93A, which is the Consumer Protection Act. These Chapter 93A suits can force a violator to pay triple damages and to reimburse the Commonwealth for its legal costs.



## 2. CRIMINAL REMEDIES

Of course, the AG or a district attorney may initiate a criminal action concerning any crimes that occur in a long-term care facility.

**Patient Abuse:** There is a special statute, G.L. c. 265, s. 38, that prohibits the wilful abuse, mistreatment or neglect of a patient or resident of a long-term care facility (defined as a facility licensed under G.L. c. 111, s. 71). The potential penalty is imprisonment in a house of correction for not more than 2 years and/or a fine of not more than \$5,000.

This statute is particularly useful in situations where the perpetrator's actions might not be prohibited under traditional criminal statutes, yet clearly fall within the proscribed conduct of Section 38. For example, on July 9, 1993, Attorney General Harshbarger's Medicaid Fraud Control Unit (MFCU) indicted a nurse's aid for patient abuse. The nurse's aid had left a 98 year old resident of a Dedham nursing home standing and unattended in a bathroom while the aid talked to a fellow employee. The victim fell and was found hanging over the edge of the bath tub, and was later placed into bed by the aid. The victim was transported to a nearby hospital where she was treated for a fractured rib. The victim, who was known by all staff to need assistance to and from the bathroom, was suffering from flu-like symptoms at the time of the incident.

## D. POLICE CALLED DIRECTLY TO THE SCENE

Sometimes nursing home administrators will call the local police directly to the scene, especially in cases of an aggravated crime such as the sexual assault of a patient. Officers should handle the scene as they would any other crime scene. To further maximize investigative effectiveness, we recommend that police officers report any institutional abuse directly to the AG and to DPH.

## 1. SIMULTANEOUS REPORT TO AG AND DPH

The AG's Medicaid Fraud Unit is responsible for handling these cases all across the state. Unit attorneys are specialists in patient abuse

cases, and they will handle virtually any kind of offense -- from simple A&B to rape -- that happens in an institutional environment. By reporting to the AG and DPH simultaneously, officers ensure that there will be no delay in AG notification.

## 2. BENEFIT OF AG PROSECUTION

Aside from immediate expertise, AG involvement encourages district courts to take this kind of abuse more seriously. Regardless of their age or infirmity, nursing home residents deserve a safe environment. Staff abuse is their domestic violence and, in the past, some courts and local prosecutors have been reluctant to aggressively pursue these cases.

## SOURCE MATERIALS

The law and information on police reporting procedures was adapted from applicable statutes and legal decisions. Also, Assistant Attorney General Joyce Meiklejon offered invaluable assistance in the preparation of this section.

Information on the Pillemer study was obtained from the *Report from the Secretary's Task Force on Elder Abuse* (U.S. Department of Health and Human Services, 1992 Report).

## KEY CONTACTS

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## SECTION X

### DEALING WITH DOMESTIC VIOLENCE

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#### I. INTRODUCTION

##### A. PURPOSE

Today, members of the justice system recognize that they have a duty to provide adequate legal remedies in domestic violence cases.

In the past, criminal justice policies reflected society's attitude that battering was a personal family matter rather than a crime. Actors in the system (judges, police officers, probation officers) tended to "look the other way" when confronted with domestic violence. That attitude began to change when a grass roots movement -- in response to certain highly publicized cases and in recognition of society's changing perceptions about women and victimization -- became a key force in effecting changes in the community response to spouse abuse. Domestic violence began to draw the attention of the public as well as government agencies at every level. In fact, Massachusetts police officers now estimate that 40 to 60% of their calls involve family violence.

Domestic violence generally represents a pattern of behavior rather than a single isolated event. The pattern of behavior can take on many different forms and levels of severity, but fundamentally it involves threats and/or physical violence. Among the most difficult and sensitive calls for police assistance are those involving domestic violence. Police officers must also remember that they are generally the victim's first contact with the criminal justice system.

##### B. DOMESTIC VIOLENCE FACTS

The statistics convey just how substantial the problem of domestic violence is in Massachusetts. In this state, on average, a woman was killed by her batterer every 22 days in 1990, every 16 days in 1991 and, as of September 1992, every 5 days. In

a national survey, over half of the males who were violent toward female partners also abused their children. In the United States, women are more at risk to be assaulted and injured, raped, or killed by a current or ex-male partner than by all types of assailants combined. Abused women make up approximately 22 to 35% of the women presenting with injury to hospital emergency rooms. Because of domestic violence, Mark Rosenberg, Director of the Center for Disease Control's Violence Epidemiology Branch, reports that women in America are in nine times greater danger in their own homes than they are on the streets.

The FBI reports that one out of every two women in America will be involved in a violent relationship in their lifetime. It is not that 50% of all men are batterers, but rather that those who are, tend to go through many relationships without serious intervention by the courts to stop the violence. Moreover, the abuse of pregnant women is the leading cause of birth defects and infant mortality.

The 1985 Massachusetts Department of Youth Services Study on the correlation between domestic violence and juvenile delinquency found that children growing up in violent homes do not need to be physically abused themselves in order to take on delinquent behavior -- witnessing the abuse of their mother is enough. They found that children growing up in violent homes in Massachusetts are: (1) six times more likely to attempt suicide; (2) 24 times more likely to commit sexual assault crimes; (3) 74% more likely to commit crimes against the person; and (4) 50% more likely to abuse drugs and alcohol.

## C. SOURCES OF LAW AND PROPER POLICE PROCEDURE FOR DOMESTIC VIOLENCE CASES

There are four major sources that regulate and instruct police officers about their responsibilities in domestic violence cases. It is important for officers to be familiar with all four.

### 1. G.L. CHAPTER 209A

Chapter 209A is a statutory framework that confers powers and imposes obligations on the police and courts to prevent and respond to domestic violence.

### 2. JUDICIAL DECISIONS

The domestic violence statute is often interpreted and applied to various factual situations. Key judicial decisions are published by the Supreme Judicial Court and Appeals Court that further regulate or define the role of the police and courts in implementing Chapter 209A.

### 3. DEPARTMENT OF PUBLIC SAFETY LAW ENFORCEMENT GUIDELINES

Standardized law enforcement guidelines have been created by the Commissioner of Public Safety [referred to as the "Public Safety Guidelines"] to ensure that the police consistently and properly respond to instances of domestic violence.

### 4. POLICE DEPARTMENT INTERNAL GUIDELINES

In addition to the Public Safety guidelines, individual departments may adopt their own specialized procedures so long as they are not in conflict with those promulgated by the Commissioner of Public Safety.

The creation of standardized guidelines demonstrates that police approaches to domestic violence must be strictly regulated. Contrary to popular belief, police officers have welcomed written policies and laws in the area of domestic abuse. In fact, research on spouse abuse by the Police Executive Research Forum found that: "Officers consistently mentioned their need for

'greater direction' and 'more specific guidance from top brass' on how to handle spousal violence calls. Rather than viewing [such policies] in a negative light, these patrol officers seemed to welcome advice and guidance. Several officers said they felt poorly equipped, with only 'seat of the pants' skills, and were eager to receive any available materials on the subject."

The following analysis of Chapter 209A completely incorporates relevant judicial decisions and public safety guidelines so that police officers can read this section and have a complete and integrated understanding of their obligations in this area.

*Reader's Note:* All statutory sections that are mentioned, unless otherwise noted, refer to Chapter 209A. Also, in describing victims, female gender references are used (i.e., she, her) rather than the cumbersome his/her formulation. This choice also acknowledges the reality that the vast majority of domestic violence victims are women, although there are cases involving male victims, particularly elderly males in long-term marriages.

## D. COVERAGE

### 1. "FAMILY OR HOUSEHOLD MEMBERS"

Section 1 defines family and household members as people who:

#### a. Married

Are or were married to one another; or

#### b. Living Together

Are or were living together in the same household, including same sex relationships; or

#### c. Related

Are related by blood or are/were related by marriage; or

d. **Common Child**

Have a child in common regardless of whether they have ever been married or lived together; or

e. **Substantive Dating Relationship**

The law was recently amended to cover those parties who are or have been involved in a "substantive dating relationship," including same sex relationships. The court determines whether such a relationship exists by considering the following factors. That is why officers should gather information concerning these factors if they anticipate activating the Emergency Judicial System while responding to a domestic scene:

- (1) The *length of time* of the relationship;
- (2) The *type of relationship*;
- (3) The *frequency of interaction* between the parties; and
- (4) If the relationship has been terminated by either person, the *length of time elapsed since termination*.

2. **CLARIFYING COVERAGE**

Chapter 209A can be used by both men and women, adults and minors. Under the definition of "family or household member," any person regardless of age or sex, who has been abused by a spouse, former spouse, household member or former household member (who need not be of the opposite sex), past or present in-laws, step-children, or a blood relative (including a minor child), may file an abuse petition. 209A also applies to college dorms.

Blood relatives, in-laws, step-children, or those in a substantive dating relationship need not reside or have resided with the victim who applies for an order.

3. **EXCLUDED FROM COVERAGE: THE SUPERIOR COURT RESTRAINING ORDER**

There are certain individuals, for example, neighbors or business partners, that may engage in harassment or present a danger and, yet, their relationship with the victim is not covered under Chapter 209A because it does not fall within the definition of family or household members mentioned above. In these instances, the victim must obtain a restraining order from the Superior Court.

E. **THE PROHIBITED CONDUCT NECESSITATING POLICE INTERVENTION: "ABUSE"**

Section 1 states that "abuse" occurs when a family or household member performs one or more of the following acts:

1. **ATTEMPTS OR ACTUALLY CAUSES PHYSICAL HARM**

Police should interpret this definition broadly when responding to a complaint. Virtually any type of physical harm qualifies (for example, kicking, shoving, punching, etc.) as well as assaults involving threats.

2. **PLACES ANOTHER IN FEAR OF IMMINENT SERIOUS PHYSICAL HARM**

This standard "closely approximates the common description of the crime of assault." *Commonwealth v. Gordon*, 407 Mass. 340 (1990). An assault involves placing another in reasonable apprehension that force may be used upon her. In determining whether an apprehension of anticipated physical force is reasonable, a court will look to the actions and words of the defendant in light of the attendant circumstances. In *Gordon*, the defendant's conduct constituted "abuse" because he visited his wife 5 days before his arrest and called her a "bitch" and a "whore." The day of his arrest he appeared unannounced, refused to leave and held the door open with his back as his wife tried to close it -- all this was done despite a court order directing him to refrain from abuse.

### 3. CAUSES ANOTHER TO ENGAGE INVOLUNTARILY IN SEXUAL RELATIONS BY FORCE OR THREATS

The parties' marital status is irrelevant since Massachusetts law allows a woman to charge her husband with rape. *Commonwealth v. Chretien*, 383 Mass. 123 (1981) (rape of one's spouse is subject to prosecution under G.L. c. 265, s. 22).

generated and additional collateral witnesses will be obtained in the event that the victim decides to abandon the prosecution.

### 3. HELP THE ABUSED PERSON AND CHILDREN GET TO A SAFE PLACE

Officers must assist the abused person and her dependent child(ren) in locating and getting to a safe place, including a shelter. Officers must consider the victim's preference and what is reasonable under all the circumstances.

### 4. PROVIDE NOTICE OF 209A RIGHTS

#### a. Procedure

Notice to the victim must be provided in English and, if necessary and possible to arrange, in the person's native language. [The Criminal Justice Training Council has a document with the rights written in a variety of languages.] Officers should hand a person a pre-printed copy of the statement and then read it to the victim (unless it is in another language in which case it should just be handed to the person).

#### b. Statement

You have the right to appear at the Superior, Probate and family District or Boston Municipal Court, if you reside within the appropriate jurisdiction, and file a complaint request any of the following applicable orders: (a) an order restraining your attacker from abusing you; (b) an order directing your attacker to leave your household, building or workplace; (c) an order awarding you custody of a minor child; (d) an order directing your attacker to pay support for you or any minor child in your custody, if the attacker has a legal obligation of support; and (e) an order directing your attacker to pay you for losses suffered as a result of abuse, including medical and moving expenses, loss of earnings or support, costs for restoring utilities and replacing locks, reasonable attorney's fees and other out-of-pocket losses for injuries and property damage sustained.

For an emergency on weekends, holidays, or week nights the police will refer you to a justice of the Superior, Probate and Family, District, or Boston Municipal Court departments.

You have the right to go to the appropriate district court or the Boston Municipal Court and seek a criminal

## F. ON SCENE POLICE INTERVENTION

Section 6 and the Public Safety Guidelines outline police responsibilities at the scene of domestic violence incidents. If officers encounter abuse or potential abuse, then the officers must control the situation and use all reasonable means to prevent further abuse, including:

### 1. REMAIN ON THE SCENE

The purpose of remaining on the scene is to protect the involved party as long as she is in immediate physical danger without the presence of a police officer.

### 2. ASSIST IN OBTAINING MEDICAL AID

This includes transporting the victim to the emergency room or arranging transportation to a health care facility.

#### a. Preferred Method of Transport

According to the Public Safety Guidelines, the preferred method of transportation is via ambulance or, if the victim is not seriously injured, in her own or a friend's vehicle.

#### b. Supervisor Approval

Officers should receive approval from their supervisor prior to transporting victims of domestic abuse in a cruiser, except in emergencies.

#### c. Corroboration

Even if victims are not seriously injured, it makes sense to take them to the hospital to corroborate the abuse. Reports will be

complaint for threats, assault and battery, assault with a deadly weapon, assault with intent to kill or other related offenses.

If you are in need of medical treatment, you have the right to request that an officer present drive you to the nearest hospital or otherwise assist you in obtaining medical treatment.

If you believe that police protection is needed for your physical safety, you have the right to request that the officer present remain at the scene until you and your children can leave or until your safety is otherwise ensured. You may also request that the officer assist you in locating and taking you to a safe place, including but not limited to a designated meeting place or a shelter of a family member's or a friend's residence, or a similar place of safety.

You may request a copy of the police incident report at no cost from the police department.

#### **5. *INFORM THE VICTIM ABOUT ABUSER'S BAIL STATUS***

Officers must inform the victim that the abuser will be eligible for bail and may be promptly released.

#### **6. *BE AWARE OF THE EXISTENCE AND TERMS OF ORDERS***

The police must ensure that a procedure exists so that on scene officers will know of the existence and the terms of any outstanding restraining orders.

#### **7. *FILE AN INCIDENT REPORT***

G.L. c. 41, s. 98G was amended recently to require that police officers file a written incident report concerning any situation that they respond to which involves abuse as defined by Chapter 209A. They must also specifically designate on the report that it concerns abuse, and the report must be provided to the victim at no cost.

### **G. ARREST POWER AND RESPONSIBILITIES**

Arrest as a response to domestic violence is increasingly mandated and, at a minimum, encouraged in Massachusetts. This reflects a national trend in which arrest is believed to: (1) prevent further criminal behavior; (2) prevent further

injury to the victim; (3) demonstrate to the offender that he will face legal consequences; (4) demonstrate to the victim, the offender, and the community that domestic violence is criminal behavior; and (5) increase the number of offenders subject to prosecution, court supervision, treatment, and other community intervention. Under a mandatory arrest policy for domestic violence cases, the Duluth Minnesota Police Department reported a 47% reduction in the number of repeat spouse abuse calls over the two-year period from 1982 to 1984.

The officers' legal obligations fall into two categories: (1) those offenses that require an arrest and (2) those offenses for which arrest is the preferred response.

#### **1. *MANDATORY ARREST: VIOLATION OF A TEMPORARY OR PERMANENT ORDER***

If the police have probable cause, then officers must arrest for the violation of any temporary or permanent vacate, restraining or no contact order issued under G.L. Chapter 208 or Chapter 209.

**Exception:** Superior Court restraining orders are enforceable in civil court only; there are no criminal sanctions for violation of a Superior Court restraining order; consequently, the police response should be the same as in any other non-domestic matter.

#### **2. *ARREST AS THE "PREFERRED RESPONSE"***

If there are no temporary or permanent orders in effect and officers have probable cause, then arrest is the "preferred response" for the following criminal activity:

- a. Felonies; or
- b. Assault & Battery under c. 265, s. 13A; or
- c. Misdemeanors involving abuse as defined by G.L. c. 209A, s. 1

Arrest for misdemeanors not committed in the officers' presence is a statutory

exception to the longstanding rule limiting misdemeanor arrests to those committed in the officers' presence. Officers are now permitted to arrest for past misdemeanors not committed in their presence so long as they have probable cause to believe that the misdemeanor involved "abuse." This statutory authority is an exception to the complaint and warrant requirements of G.L. c. 275, s. 2 and 3, which was discussed in *Wagenmann v. Adams*, 829 F.2d 196, 207-208 (1st Cir. 1987).

This misdemeanor authority includes threats to commit crimes against the person or property of another (G.L. c. 275, s. 2) or other types of misdemeanors (e.g., disorderly conduct, malicious damage, etc.).

In addition, the trespass law (G.L. c. 266, s. 120) has been amended to include violation of a "vacate" order issued under G.L. c. 208 or 209A.

Finally, an officer may arrest a person under an arrest warrant, even for a misdemeanor, without having the warrant in his possession so long as he has actual knowledge that the warrant is still in effect. See G.L. c. 276, s. 28.

### 3. OTHER ARREST CONCERNS

#### a. Safety Paramount

In deciding whether to arrest, officers must understand that the safety of the victim and involved children shall be the paramount consideration.

#### b. Victim's Preference is Irrelevant

Even if the victim is unwilling or reluctant to bring a complaint against the alleged abuser, officers are still expected to arrest where probable cause exists. Furthermore, the consent of the victim does not suspend or modify the order and the defendant can still be subject to prosecution. This interpretation of the law is firmly stated in the *District Court Administrative Regulation*

*No. 1-86, Standards of Judicial Practice: Abuse Prevention Proceedings (1986).*

#### c. Dual Arrest Highly Disfavored

Dual arrests like the issuance of mutual restraining orders, trivialize the seriousness of domestic abuse and increase the danger to its victims. Consequently, officers investigating domestic violence shall not threaten or suggest that all parties will be arrested in an effort to discourage requests for law enforcement intervention. In the event that a dual arrest is necessary, the arresting officer must submit a detailed, written report in addition to an incident report, outlining the grounds for dual arrest.

## H. CIVIL LIABILITY

### 1. ACTIONS IN GOOD FAITH

Section 6 clearly states: "No law officer shall be held liable in any civil action regarding personal injury or injury to property brought by any party to a domestic violence incident for an arrest based on probable cause when such officer acted reasonably and in good faith and in compliance with [the law] and statewide policy as established by the secretary of public safety."

### 2. FAILURE TO ACT

However, the failure to take appropriate action can subject the officer to civil suits under the Federal Civil Rights Act, 42 U.S.C. 1983; the Massachusetts Civil Rights Act, G.L. c. 12, s. 11H and 11I; and the Massachusetts Tort Claims Act, G.L. c. 258, s. 2. Furthermore, under both federal and state civil rights acts, in addition to the personal liability of the officer, the municipality may be held liable if the plaintiff proves that as a result of "policy or custom" the town was responsible for the plaintiff's injuries. *Monell v. Department of Social Services*, 436 U.S. 658 (1978). See *Balistreri v. Pacifica Police Dept.*, 855 F.2d 1421 (9th Cir. 1988); *Watson v. Kansas City*, 857 F.2d 690 (10th Cir. 1988); *Hynson v. City of Chester*, 864 F.2d 1026 (3rd Cir. 1988) (family of woman shot to death by her former

boyfriend prevailed in a section 1983 suit on the ground that the police had a policy of providing less protection to victims of "domestic violence" than to victims of other violent crimes).

## **I. RESPONSE AT THE SCENE**

### **1. IMMEDIATELY PROCEED TO THE SCENE**

On route, check with dispatch about previous incidents and existing orders. If possible, back-up should be dispatched on all domestic calls.

### **2. THE APPROACH**

Officers should not stop directly in front of the address. They should decide, prior to announcing their presence, which officer will do the talking and which officer will provide cover. The building should be approached from the side which makes the officers the least visible target. Be alert for toys in the yard that could indicate that children live in or visit the home. When close to the building, stop and listen in order to begin gathering information and to assist in assessing the situation. Upon entering, quickly scan the surroundings -- look for cover, and never forget that any household item may become a weapon at any time. It is important that responding officers not become complacent with domestic calls and that they always be mentally prepared. Remember, the majority of officers killed in domestics are killed out-of-doors. In fact, 74% of the officers killed in domestics between 1979 and 1988 were killed before ever getting into the residence.

### **3. ENTERING PRIVATE PREMISES**

Officers may enter private premises at the request of someone in lawful control of the premises, or to enforce the provisions of a protective court order, or to take reasonable measures to prevent further abuse under authority of G.L. c. 209A. In the majority of cases, officers will be allowed to enter upon request.

Officers must leave if both parties request that they do so, *unless*:

#### **a. Felony**

Probable cause exists that a felony has been committed and there is not sufficient time to obtain an arrest warrant and, in the case of a third party dwelling, a search warrant; or

#### **b. Uphold 209A Provisions/Exigent Circumstances**

The officers' continued presence is necessary to prevent physical harm or to carry out the provisions of G.L. c. 209A.

Under exigent circumstances officers may be left with no choice other than to force entry. Exigent circumstances in domestic cases exist if the officers believe that an assault or breach of the peace is currently occurring (typically, officers hear one or more sounds that signify an assault or breach of the peace). The officers will be expected to be able to articulate verbally and in their report why they believed emergency action had to be taken and why they could not wait to gain access by other means.

Officers should not take the word of a person at the door that all is well. Officers should consider a person not wanting to let them in as suspicious and an indication that something is probably wrong. If the door is open slightly, officers may have an opportunity to place their flashlight or nightstick in the door in order to block it from being closed. Under no circumstances should officers put their feet or hands into the door.

## **4. INITIAL CONTACT**

#### **a. Explain Presence**

State reasons for being present and display a professionally calm and helpful attitude.

#### **b. Avoid Movement, Separate Parties**

Prevent physical movement of parties as much as possible and control their access to potential weapons;



Separate the parties to prevent violence; however, if two officers are at the scene, they should remain within view of each other to avoid any subsequent allegations of mistreatment.

**c. Obtain Information**

Allow each party to present their story without interruptions or interference by the other party.

Obtain information regarding relationships and children. Be sure to acquire the phone number of the residence and include it in the report so that the bail magistrate can inform the victim about the abuser's release on bail.

Avoid emphasis or questioning on personal matters if a person indicates that she would not like to discuss them.

**d. Check for Prior Orders, Firearms, Warrants**

Ascertain if there is a prior history of disputes and restraining orders in effect. Moreover, obtain information about firearms and check, as a standard precaution, for outstanding arrest warrants.

**e. Be Aware of Children or Elders**

Officers must consider their responsibilities under G.L. c. 119, s. 51A and/or G.L. c. 19A, s. 15 to report to DSS and/or Elder Affairs when they have reasonable cause to believe that a child under eighteen or an elder (60 years of age or over) is suffering from serious physical or emotional injury resulting from abuse (including sexual abuse), or from neglect (including malnutrition or the presence of drugs or evidence of drug use).

**5. DEALING WITH THE PRESENCE OF FIREARMS OR WEAPONS**

The Public Safety Guidelines direct officers to initially request that a firearm or weapon be placed temporarily in their custody and then,

absent compliance, to search for and take temporary custody of a firearm or weapon to alleviate the threat of serious violence that it poses. In instances where one of the parties requests that they search for a weapon, officers should do so and take custody of any firearm or weapon they find. In all cases, officers must determine whether a firearm is lawfully possessed before returning it.

If the officers determine that a firearm cannot be seized, then they should pursue one or both of the following actions:

- (1) The judge can order the defendant to surrender guns, his license to carry and/or his FID card during the pendency of an order or criminal prosecution.
- (2) The chief can revoke and FID card and license to carry for felony convictions; drug use, possession or sale; and mental illness. Also, in the case of a license to carry, the chief may revoke the license on the grounds that the defendant is not "a suitable person."

**6. ACCOMPANYING THE DEFENDANT TO THE PROPERTY ONLY WITH JUDICIAL AUTHORIZATION**

The Public Safety Guidelines emphatically state: "Police need judicial authorization to accompany defendants to the property for any reason."

**J. THE RESTRAINING ORDER UNDER 209A**

**1. JURISDICTION**

The Superior, District, Boston Municipal Court (BMC), and Probate Court have jurisdiction to issue 290A orders. [sec. 1, 2]

**2. VENUE**

Venue exists in the court in the place where the plaintiff lived at the time of the abuse or, if the victim left her dwelling to avoid abuse, then the place where the victim currently lives. [sec. 2]

### 3. NO STATUTE OF LIMITATIONS

Section 3 clearly states: "A court shall not deny any complaint . . . solely because it was not filed within a particular time period after the last alleged incident of abuse."

## K. EMERGENCY ORDER

### 1. STANDARD

The order may be issued if there is "a substantial likelihood of immediate danger of abuse."

### 2. EMERGENCY SYSTEM PROCEDURE

The police are required to:

- a. Access the emergency judicial system when the court is closed for business

Section 6 establishes an emergency judicial system. Knowing how to use this system is critical since most cases of domestic violence occur during non-business hours. The State Police, in five locations statewide, serve as the contact point for law enforcement.

Interestingly, the Judicial Response System began in 1984. Since that time, justices have answered 29,764 emergency response requests as of July, 1992. In fact, from July 5, 1991 to July 3, 1992, calls to the system increased 73% over the previous year – 10,438 up from 6,048.

- b. Attempt to obtain an appropriate order

Any judge may issue a temporary order by phone. Section 6 provides: "In the discretion of the justice, relief may be granted and communicated by telephone to an officer or employee of an appropriate law enforcement agency."

- c. Record the order on the appropriate form

- d. Deliver a copy on the next court day to the clerk magistrate of the court with jurisdiction so that the order can be certified (Certification is not necessary for an emergency order to take effect.)

- e. Inform the victim that she must appear at court on the next business day to file a complaint

## L. TEMPORARY ORDER

### 1. FILING

The application must be filed before a court of jurisdiction [sec. 4] using the designated form [sec. 9] at no cost to the plaintiff [sec. 3].

### 2. INITIAL HEARING

The plaintiff appears alone and receives temporary orders.

### 3. SECOND, 10 DAY HEARING

The defendant is given an "opportunity to be heard" no later than *10 days* after the initial hearing and order. The order continues in effect if the defendant has been served, but does not appear at the hearing [s. 4]

### 4. SERVICE

Proper service of the order is addressed in Section 7:

The clerk must transmit two certified copies of all orders and one copy of the complaint and summons to the police.

Copies of the order go to the defendant, plaintiff, and the police. Unless otherwise ordered, the police must serve a copy of the order, complaint, and summons on the defendant. However, the police are *not required to serve the defendant in hand*. Service may be on a Sunday. And the police must make prompt return of service to the court which issued the order.

## 5. TIME

Every order must state the time and date that it expires (and the judge is required to set up a continuation hearing for that day). But no order may last longer than 1 year [sec. 3].

## 6. EXTENSION

The court may extend an order if the plaintiff:

- a. **Appears at court on the expiration date**, and the court decides to extend the order;
- b. **Files a motion at an earlier date.**

The fact that no abuse occurred while the order was in effect will not, by itself, prevent extension. The court must notify the police when an order is vacated.

## M. REMEDIES AND CRIMINAL PENALTIES

### 1. CIVIL REMEDIES

- a. Under Section 3, the Court may order the defendant to:

- (1) *Refrain from abuse*
- (2) Have *no contact* with the plaintiff or her child(ren)
- (3) *Vacate*. A vacate order means that defendant must:
  - (a) *Leave and remain away from:*
    - i) The house; and/or
    - ii) A multi-family dwelling; and/or
    - iii) The plaintiff's workplace (although the judge must consider whether the plaintiff and the defendant work in the same location or for the same employer).

- (b) *Surrender the keys immediately*

- (c) *Not damage any household property*

- (d) *Not disrupt utility service or mail delivery*

- (4) Give the plaintiff *temporary custody of a minor child* (note that the parties do not have to be married)

- (5) Pay *temporary support* for the victim and/or the child(ren), but only if defendant has a legal obligation to pay support. (Child support is determined in accordance with the Probate Court's Child Support Guidelines.)

- (6) *Reimburse the plaintiff for expenses* associated with the abuse (e.g., medical, moving, lost earnings, obtaining a new phone number, attorney's fees, etc.)

The Court may also:

- (7) *Draft specific orders tailored to the circumstances* (for example, ordering the defendant to surrender firearms, allowing the defendant to pick up clothes at the house, etc.);

- (8) *Recommend that the defendant attend a recognized batterer's treatment program*

- (9) *Impound (not reveal) the victim's current address* [see s. 9]

- b. **Excluded -- The Court may not:**

- (1) *Allow public inspection* of case records relating to Chapter 209A

- (2) *Compel the parties to attend mediation*

- (3) *Issue mutual restraining orders* unless the judge makes, as required by Section 3(j), "specific written findings of fact"
- (4) *Affect title to real property*
- (5) *Award visitation rights* to the defendant
- (6) *Issue orders for custody or support when there are prior or pending orders from the Probate Court.* That is why a person filing a 209A complaint must disclose any prior or pending divorce, custody, support, paternity, guardianship, or other abuse prevention actions. *Probate Court orders concerning custody and support supersede any such orders under Chapter 209A.*

## 2. CRIMINAL OFFENSE

### a. Conduct

Criminal penalties only apply when a vacate, no contact and/or refrain from abuse order has been violated. Since mandatory arrest is required for violation of vacate orders, and since a vacate order includes the surrender of keys, any refusal to do so is subject to mandatory arrest (as is utility and mail interference). On the other hand, violation of other aspects of a 209A order, such as awarded custody, are not subject to criminal prosecution. Interestingly, G.L. c. 208, s. 34C currently provides criminal penalties for the "violation of an order for custody issued pursuant to any abuse prevention action." Thus, while violation of a 209A custody order is not arrestable under that statute, it appears to be arrestable and a criminal offense by authority of G.L. c. 208, s. 34C.

### b. Penalties

Fine of not more than \$5,000 and/or imprisonment in the house for not more than 2 1/2 years [s. 7]

### c. Related Offenses

Officers should be thinking in terms of related offenses when they bring a 209A case. For example, violation of a vacate order is usually accompanied by a trespass; violation of a no-contact order is accompanied by threats or assault; violation of a refrain from abuse order suggests assault and battery and so forth; interference with the custody rights of another may, in an extreme case, suggest parental kidnapping.

## 3. CRIMINAL REMEDIES NOT EXCLUSIVE

Section 7 establishes that criminal remedies are *not* exclusive and "do not preclude any other available civil or criminal remedies."

**Contempt:** Courts "may enforce by *civil contempt* procedure a violation of its own court order." *Mahoney v. Commonwealth*, 415 Mass. 278 (1993) (government may prosecute the defendant on pending charges even if he has been held in contempt and placed in jail to force his compliance with a stay away order). In *Mahoney*, the defendant violated 209A orders directing him to stay away from his wife and his girlfriend. He beat his wife in her home and then made threatening phone calls to his girlfriend. The judge held a hearing following the defendant's arraignment and held the defendant in contempt. The judge ordered the defendant to be jailed for thirty days or, in the alternative, to post a \$5,000 bond to ensure his compliance with the stay away orders during the pendency of his prosecution. Since the punishment was remedial in nature -- that is, it was an attempt by the court to get the defendant to comply with its order -- the sanction did not violate the double jeopardy clause by punishing the defendant twice for the same offense. As a consequence, the sanction associated with the contempt ruling did not preclude the right of the court to also punish the defendant for the underlying violations of the criminal statute.

**Procedural Requirements:** Prior to imposing a contempt sanction, the court must provide the defendant with notice of the contempt hearing, representation by counsel, and a chance to prepare for and an opportunity to be heard during the hearing.

#### 4. BAIL

Judicial officers (judges, clerks and magistrates) making decisions on bail must consider two factors in addition to those typically considered. First, the official must consider whether the acts alleged in the criminal charges involve abuse as defined in G.L. c. 209A, s. 1 or the violation of a temporary or permanent protective order. Second, the official must consider whether the prisoner has any history of having protective orders issued against him. These two new bail criteria can be a basis for denying personal recognizance and setting bail.

### N. STALKING, G.L. C. 265, S. 43(A)

#### 1. PURPOSE

The Stalking law was enacted to combat instances of serious misconduct and harassment that, prior to the law's passage, were only punished as minor misdemeanors, such as annoying phone calls and trespass. This law creates a felony that serves as yet another tool in the domestic officer's kit to deal with persistent harassment.

#### 2. ELEMENTS

##### a. State of mind of perpetrator: "willfully, maliciously"

**Key point:** The victim and perpetrator need not have any special relationship (for example, "family or household member" as in G.L. c. 209A) for stalking to be charged.

##### b. Repeatedly

This term should be given its common sense meaning, that is, "more than once."

##### c. Follows or Harasses

**Definition of harassment:** "A knowing and willful pattern of conduct or series of acts over a period of time that seriously alarms or annoys the person" and is "such as would cause a reasonable person to suffer substantial emotional distress." Thus, it is an objective standard that must be met in terms of the harm that is reasonably viewed as intolerable.

Harassment is repeated if it occurs on more than one occasion; it is also repeated even if the offender uses different kinds of conduct during each incident (for example, he telephones the first time, then sends letters). It is not necessary for the harasser to repeat the same type of conduct.

##### d. Threatens "with the intent to place that person in imminent fear of death or serious bodily injury"

**Nature of the threat:** Remember, one does not commit the crime of stalking by following or harassing alone. There must be proof of an actual threat. The threat element of stalking is narrower than the familiar "threat to commit a crime" offense created in G.L. c. 275, s. 3. The threat in stalking requires proof that the offender intended to place the victim "in imminent fear of death or serious bodily injury." It is not enough that the victim feel threatened or that the offender's acts or words "seriously alarm or annoy" the victim. In practical terms, the offenders intent to place the victim in fear will need to be inferred from the offender's acts or words as reported by the victim. Also, it is not necessary (unlike harassment) to show that "a reasonable person" would have been placed in fear by the threat. Furthermore, the statute does not require that the threat be made in person.

A threat is the expressed intention to "inflict evil, injury, or damage on another." Typically, a threat becomes sufficient under law when the perpetrator expresses his intention to do the act and has the ability under the circumstances so that the recipient's apprehension is justified. *Robinson v. Bradley*, 300 F.Supp. 665, 668 (D.Mass. 1969). However, in *Commonwealth v. Ditsch*, 19 Mass. App. Ct. 1005 (1985), the Appeals Court softened the requirement that a defendant be able to effectuate his threat. In *Ditsch*, the Court stated that "[w]e do not think that the absence of immediate ability, physically and personally, to do bodily harm precludes a conviction for threats." The case involved a defendant who, while incarcerated, made threats in letters written to his mother-in-law. The Court found that the mother-in-law could reasonably have believed that the defendant actually had the ability to cause her bodily harm, either personally after his release or through his employment of an agent.

**Related Offenses:** If the particular circumstances do not support a charge of stalking, other offenses may be charged such as intimidation of a witness, G.L. c. 268, s. 13B; annoying phone calls, G.L. c. 269, s. 14A; threat to commit a crime, G.L. c. 275, s. 2; or annoying or harassing a person of the opposite sex, G.L. c. 272, s. 53.

### 3. PENALTIES

**Regular stalking:** Imprisonment for not more than 2 and 1/2 years in the house or 5 years in prison and/or a fine of not more than \$1,000.

**In violation of a Court Order:** If stalking occurs in violation of a temporary or permanent vacate, restraining or no-contact order pursuant to G.L. c. 208, 209, 209A, 209C, and/or a superior court injunction, then the violator must be punished by a mandatory minimum term of imprisonment of 1 year; the maximum penalty is 5 years.

**Second or subsequent offense:** If stalking occurs for a second or subsequent offense, then the violator must be punished by a mandatory minimum term of imprisonment of 2 years; the maximum penalty is 10 years.

### O. TYPES OF CRIMES SEEN IN DOMESTIC DISPUTES

1. **Violation of 209A restraining order** (G.L. c. 209A, s. 7).
2. **Threats** (G.L. c. 275, s. 2). *See Commonwealth v. Ditsch*, 19 Mass. App. Ct. 1005 (1985).
3. **Trespassing** (G.L. c. 266, s. 120).
4. **Assault Offenses:** Simple assault (G.L. c. 265, s. 13A). Assault with intent to murder or maim (G.L. c. 265, s. 15). *See Commonwealth v. Cowie*, 28 Mass. App. Ct. 742, 745 (1990), review denied 908 Mass 1103 (1990). Assault with intent to rob or murder; dangerous weapon (G.L. c. 265, s. 18). Assault with intent to rob or steal (G.L. c. 265, s. 20). *See Commonwealth v. Gauthier*, 21 Mass. App. Ct. 585, 591 (1986).
5. **Assault and Battery** (G.L. c. 265, s. 13A). *See Commonwealth v. Burno*, 396 Mass. 622, 625 (1986); *Commonwealth v. Jenner*, 24 Mass. App. Ct. 763, 774 (1987).
6. **Assault with a Dangerous Weapon** (G.L. c. 265, 15B). *See Commonwealth v. Appleby*, 380 Mass. 296, 308 (1980), cert. denied, 464 U.S. 941 (1983).
7. **Assault and Battery with a Dangerous Weapon** (G.L. c. 265, 15A). *See Commonwealth v. Burno*, 396 Mass. 622, 626 (1986); *Commonwealth v. Ferguson*, 30 Mass. App. Ct. 580, 584 (1991); *Commonwealth v. Salone*, 26 Mass. App. Ct. 926, 930 (1988).

8. **Indecent Assault and Battery on Person Fourteen or Older** (G.L. c. 265, s. 13H). *See Commonwealth v. Mosby*, 30 Mass. App. Ct. 181, 184 (1991).
9. **Rape** (G.L. c. 265, s. 22). *See Commonwealth v. Caracciola*, 409 Mass. 648, 651-654 (1991); *Commonwealth v. Sherry*, 386 Mass. 682, 694-697 (1982).
10. **Intimidation of a Witness** (G.L. c. 268, s. 13B).
11. **Attempt to Commit a Crime** (G.L. c. 274, s. 6).
12. **Breaking and Entering** (G.L. c. 266, s. 16).
13. **Disorderly Conduct and/or Disturbing the Peace** (G.L. c. 272, s. 53).
14. **Annoying Phone Calls** (G.L. c. 269, s. 14A).
15. **Malicious Destruction of Property** (G.L. c. 266, s. 127).
16. **Mayhem** (G.L. c. 265, s. 14).
17. **Unarmed Robbery** (G.L. c. 265, s. 19). *See Commonwealth v. Jones*, 12 Mass. App. Ct. 489, 491 (1981).

## II. PRIVATE CRIMINAL COMPLAINTS

If the abuse is of such a nature that police cannot file a criminal complaint against the alleged abuser, the victim should be advised of her right to apply for a criminal complaint from the Clerk of the District Court. Should the victim choose this option, the Victim Witness Advocate can accompany the victim to a meeting with the Clerk and assist the victim in filling out the complaint application. The Advocate will also assist with screening the complaint and notifying the victim of a show cause hearing if it is deemed necessary.

## III. STREET CRIMES AGAINST THE ELDERLY

### A. INTRODUCTION

Other than utilizing and being sensitive to the need for the enhanced communication skills that are addressed earlier in these materials, police officers should investigate and bring the same charges whether the crime involves an elderly or non-elderly victim. There are several exceptions to this rule, however. In addition, the Attorney General is currently attempting to promote legislation that will remove gaps in the criminal law in Massachusetts so that elders and other vulnerable individuals will be more protected.

### B. ENHANCED PENALTIES FOR CRIMES AGAINST THE ELDERLY

The following is a list of statutes which provide for mandatory minimum sentences of imprisonment for repeat offenders convicted of certain violent crimes committed against persons who are 65 years old or over. Bear in mind that these enhanced penalties only apply to repeat offenders:

1. **Assault and Battery By Means of a Dangerous Weapon (65 and over) -- G.L. c. 265, s. 15A.**

1st Offense: 10 years State Prison or \$10,000 or 2 1/2 years House of Correction.

2nd Offense: Mandatory minimum 2 years incarceration.

2. **Assault by Means of a Dangerous Weapon (65 and over) -- G.L. c. 265, s. 15B.**

1st Offense: 5 years State Prison or \$10,000 or 2 1/2 years House of Correction.

2nd Offense: Mandatory minimum 2 year sentence, with 1 year of incarceration to serve.

3. **Armed Assault With Intent to Rob or Murder (65 and over) -- G.L. c. 265, s. 18.**

1st Offense: 20 years.

2nd Offense: Mandatory minimum 2 years incarceration.

4. **Unarmed Robbery (65 and over) -- G.L. c. 265, s. 19.**

1st Offense: Life imprisonment or any term of years.

2nd Offense: Mandatory minimum 2 years incarceration.

5. **Larceny (65 and over) -- G.L. c. 266, s. 25.**

1st Offense: 5 years State Prison or 2 1/2 years House of Correction.

2nd Offense: Mandatory minimum 2 year sentence, with 1 year of incarceration to serve.

**No Pretrial Diversion:** G.L. c. 276A, s. 4 provides that persons charged with the above crimes are not eligible for pretrial diversion.

**Age is an Element:** Age is an element of these special crimes against the elderly. It must be alleged in the complaint/indictment that the victim is 65 years of age or older and proved beyond a reasonable doubt at trial. See *Commonwealth v. Pittman*, 25 Mass. App. Ct. 25 (1987) (Defendant was charged with unarmed robbery of a 65 year old person. Although the victim testified at trial, the prosecutor neglected to ask her age or to offer her driver's license or some other document that indicated how old she was. The government relied solely on the fact that the jury saw the woman's elderly appearance. This level of proof was insufficient. When proof of age is necessary to establish the offense, there must be some evidence in addition to the victim's physical appearance.)

### C. LEGISLATIVE INITIATIVE: INCREASED PENALTY FOR AGGRAVATED ASSAULT AND BATTERY

Attorney General Harshbarger has filed a bill in the current legislative session to increase the penalty for an assault and battery that causes serious bodily injury to an elder, defined as a person who is at least 65 years of age.

Currently, an assault and battery without the use of a weapon is a misdemeanor even if it causes serious injury to the victim. See G.L. c. 265, s. 13A.

The specific legislation, known as H. 2354, is called "*An Act Creating The Crime Of Aggravated Assault When An Assault And Battery Results In Serious Bodily Injury Or is Committed Upon An Elder, A Disabled Person, Or A Child.*" If it is passed, the newly created crime of "aggravated assault" will create the following penalties in three types of cases: (1) a 10 year felony for the commission of an assault and battery causing serious bodily injury regardless of the victim's status; (2) a 5 year felony for the commission of an assault and battery on a child, elder or disabled person regardless of the extent of the injury; and (3) a 15 year felony for the commission of an assault and battery on a child, elder, or disabled person which causes serious bodily injury.

### SOURCE MATERIALS

The law and police procedure information were adapted from the applicable statutes and legal decisions. In addition, these other works were consulted:

Commission of Public Safety, Thomas Rapone, *Standardized Law Enforcement Guidelines* (1991) (Published by the Department of Public Safety and distributed to police departments by that agency).

Scott Harshbarger, *Domestic Violence: Beyond Chapter 209A* (1992) (Published by the Attorney General and distributed to participants at domestic violence conference at Northeastern University on October 22, 1992).



The *Massachusetts Coalition for Battered Women* compiled all of the statistics cited in the section on domestic violence facts. The Coalition listed as its sources: Massachusetts Department of Public Health statistics; Finkelhor, et al., 1983; Finkelhor and Yllo, 1985; Browne and Williams, 1989; Randall, 1990; March of Dimes study; Massachusetts Criminal Justice Training Council Domestic Violence Manual, 1986.

Loving, N. *Responding to Spouse Abuse and Wife Beating: A Guide for the Police* (PERF, Washington, D.C., 1980).

Buel, S. "Mandatory Arrest for Domestic Violence," *Harvard Women's Law Journal*, Spring 1988; "Domestic Violence Arrests Deter Batters: Police Agencies Report," 5 *Justice Bulletin* 3 (1985). For reasons why arrest is an effective approach, see the National Institute of Justice's *Confronting Domestic Violence: A Guide For Criminal Justice Agencies* (1986).

The information concerning how officers should approach and physically enter a dwelling was supplied by Sgt. T. S. Duncan, "Home Sweet Home? Casting New Lights on Domestic Violence," *Police Magazine* (April 1990).

Statistics concerning the operation of the "on-call" response system for after-hours restraining orders, came from the *Report of the Administrative Office of the Massachusetts Trial Court*, "The Judicial Response System" (August 1992).

## KEY CONTACTS

For more information on domestic violence, the law, appropriate police responses, and current policy initiatives contact:

**Diane Juliar**  
Chief, Family and Community Crimes Bureau  
Office of the Attorney General  
One Ashburton Place  
Boston, MA 02108-1698  
(617) 727-2200

For information on other aspects of domestic violence, including the psychological dimensions and various social responses to the problem, contact:

**The Massachusetts Coalition of Battered Women Service Groups**  
107 South Street  
Boston, MA 02111  
(617) 426-8492

## SECTION XI

### DEALING WITH MENTAL HEALTH CONCERNS

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#### I. INTRODUCTION TO G.L. CHAPTER 123

##### A. ORIENTATION

For police to perform their "community caretaking" function, they need to understand Chapter 123 of the Massachusetts General Laws. This section provides a detailed overview of all the Chapter 123 procedures of relevance to street officers and supervisors.

For the most part, Chapter 123 sets out various methods for placing a person into mental health treatment. These methods are intended to balance the right of the community to peace and safety with the right of the individual to freedom. This balance becomes especially important given the fact that an emergency detention or other form of civil commitment constitutes a serious deprivation of personal liberty.

##### B. APPLIES TO MENTALLY ILL, NOT MENTALLY RETARDED

Chapter 123 only applies to the mentally ill, *not* to persons with mental retardation.

##### C. PROPER EXAMINATIONS

Finally, the police must bear in mind that qualified professionals (physicians, psychologists or psychiatric nurses) must be designated by the Department of Mental Health (DMH) to perform the evaluations that must precede any commitment under Chapter 123.

*Reader's Note:* All statutory sections mentioned, unless otherwise noted, refer to G.L. Chapter 123. Also, references are made exclusively to the male gender for simplicity and do not reflect an opinion that officers should only expect to encounter men with mental health

problems in the community. These procedures apply with equal force to women in need of assistance.

#### II. POLICE OPTIONS

There are six options that the police can pursue under this law: (1) the warrantless seizure; (2) the warrant of apprehension; (3) the petition to commit an alcoholic or substance abuser; (4) the voluntary commitment; (5) the process designed to ensure longer term hospitalization; and (6) the commitment of an individual in police detention.

##### 1. WARRANTLESS SEIZURE OF THE INDIVIDUAL

In an emergency situation under Section 12(a), a police officer may detain and transport a mentally impaired individual to the hospital. This procedure, often called the "pink paper" by clinicians and officers alike, is only appropriate when the following conditions exist:

##### a. Police Authority in Potentially Harmful Situation

A police officer must believe that the failure to hospitalize an individual will create a "likelihood of serious harm" because of the person's mental illness. This means there is either a:

##### (1) *Substantial risk of physical harm:*

- (a) To the person as shown by his threats or attempt to commit suicide or do bodily harm; *or*
- (b) To others as shown by his violent behavior or by others being placed in reasonable fear of his violent behavior.

- (2) *Very substantial risk of physical impairment to the person himself* because his judgment is so affected that he is unable to protect himself in the community and there is not a reasonable protective situation available.

**b. No Clinician Available**

The officer is at a scene without the realistic opportunity of consulting or acquiring the services of a psychologist or psychiatric nurse.

**c. Restrain and Transport**

The officer may restrain and transport the person. If practical, prior to transporting, the officer should call the facility to communicate the circumstances and known clinical history so that the staff can determine whether it is the appropriate facility. The officer should also notify the facility of any restraint used and whether additional restraint will be necessary.

**d. Application and Examination at the Authorized Hospital**

The officer must apply for hospitalization at an authorized facility. The patient can be held for a maximum period of *10 days*. The application must state the reasons for any restraint and other relevant information that will assist the admitting physician. The person shall be psychiatrically examined, and only the examining clinician decides whether to admit the person based on the clinician's assessment of whether this person poses a risk of serious harm.

This can be a difficult situation because sometimes a physician will not accept a person who, in the officer's opinion, clearly merits treatment. The officer must accept the physician's call. The best the officer can do is to fully document the behavior that caused the officer to bring the individual to the facility in the first place. The officer should also report what happened at the

facility (i.e., whether the person was admitted or rejected). The officer should be sure and report the results to a supervisor.

**2. THE WARRANT OF APPREHENSION**

**a. Any Person May Apply**

Any person [this clearly includes a police officer] may apply to a district court judge for a warrant of apprehension.

**b. Evidentiary Standard**

After hearing "such evidence as [the judge] may consider sufficient" [this standard is undefined and highly subjective], the judge may issue a warrant for the apprehension of the mentally ill person.

**c. Police Procedure**

With the warrant, the police may take the person into custody and bring him before the judge, who then:

- (1) Orders the person *examined by a physician* or psychologist; and
- (2) May commit the person for *up to 10 days*; however,
- (3) The facility superintendent *may discharge* the person at any time during that period.

**3. COMMITMENT OF AN ALCOHOLIC AND/OR SUBSTANCE ABUSER**

**a. Applicants Petition the Court**

Under Section 35, a police officer or physician, spouse, blood relative, guardian or court official may petition the district court in writing if the applicant has reason to believe that the person is an "alcoholic" or "substance abuser."

b. **Definition of Alcoholic or Substance Abuser**

These terms describe a person who chronically consumes or lacks self-control over alcohol or controlled substances to the extent that it substantially injures his health or interferes with his social or economic functioning.

c. **Court Procedure**

The court shall:

(1) *Immediately schedule a hearing* and may:

(a) Issue a summons and, in the event that the person fails to appear, issue a warrant; or

(b) Issue a warrant of apprehension if there are reasonable grounds to believe that the person will not appear and that any further delay will endanger this person's physical well-being. However, no arrest shall be made unless the person is presented immediately before a district court judge. As a practical matter, this means that officers should serve the warrant during the day or, if the court is closed, they should activate the judicial response system once the individual is taken into custody.

(2) *Order examination* by a physician or psychologist and, after hearing in which person is represented by counsel, may:

(3) *Commit the person up to 30 days at Bridgewater* for men and Framingham for women (although Framingham no longer houses women committed under Section 35; however, the statute has yet to be changed to reflect this different

placement approach). The committed person must be housed separately from convicted criminals and may be released by the superintendent prior to the expiration of the 30 day period.

4. **THE VOLUNTARY ADMISSION**

Sometimes the best way for a police officer to deal with a situation involving a mentally ill individual is to suggest to the family or guardian that they pursue a voluntary commitment under Section 10.

a. **Applicants**

An application for voluntary commitment may be made by:

(1) A person who is *at least sixteen* years old;

(2) A *parent or guardian on behalf of a person under eighteen* years old; and

(3) A *guardian on behalf of his or her ward* [no age limitation].

b. **Relaxed Standard**

The person must be "in need of care and treatment" at a mental health facility. People may also be committed to the Veterans Administration.

c. **Discharge From Voluntary Commitment**

(1) *A superintendent may discharge a person at any time*; provided that if a parent or guardian applied, they must receive 14 days notice prior to discharge.

- (2) *A person may leave at any time and/or a parent or guardian may withdraw the person at any time [see Section 11]; provided that:*

- i) The superintendent may *restrict departure to normal working hours and weekdays*; and
- ii) *Require 3 days written notice* of the patient's intention to leave.
- iii) Furthermore, a person *can be held beyond the 3 day period if prior to the expiration of the 3 day period, the superintendent files a petition for commitment* under Sections 7 and 8.

#### 5. LONGER TERM HOSPITALIZATION FOR MENTAL ILLNESS

The person committed pursuant to a warrantless seizure under Section 12(a) or pursuant to a warrant of apprehension under Section 12(e), may only be held up to 10 days. If voluntarily committed, the person may be held without their consent for approximately 3 days. For further hospitalization under any of these commitments, it is up to the facility superintendent to petition the court under section 7 for further, longer term commitment. Under section 8, the court must hold a hearing within 14 days to decide whether the person is mentally ill and whether discharge would create a likelihood of serious harm. If the court decides to hold the person, his commitment is valid for 6 months and must be reviewed every year thereafter. Males may be committed to Bridgewater upon an additional finding that they require strict security.

#### 6. MENTAL HEALTH PROBLEM WITHIN A POLICE DETENTION OR A CORRECTIONAL FACILITY

There are two types of commitments that can be arranged under Section 18 for detainees at a police station or prisoners at a jail or house of correction.

##### a. Involuntary

Section 18(a) allows the following procedure to be utilized.

- (1) If the *commander* of any place of detention [clearly includes a police lock-up]
- (2) Reasonably believes that a *person needs hospitalization* at a facility or Bridgewater
- (3) The commander must *arrange an examination at the detention* by a physician or psychologist
- (4) *The physician's report goes to the district court* which has jurisdiction over the place of detention; or, if the prisoner is awaiting trial, to the court which has jurisdiction over the criminal case
- (5) *The court may commit the prisoner to a facility or to Bridgewater for up to 30 days* for an evaluation. And during that time, the superintendent of the facility or the commander of the detention site may file a petition with the court for commitment under Sections 7 and 8.
- (6) *The prisoner may continue to be held in a facility or Bridgewater for up to 6 months while his case is pending* if the Commissioner of Corrections certifies that it is necessary. However, subsequent commitments must be secured under the provisions of Sections 7 and 8 for one year periods.

**b. Voluntary**

Section 18(b) allows the commander to approve the voluntary commitment, under Section 10, of a prisoner in detention. If the arrest is for a minor offense and a facility can be arranged by family or friends, the voluntary commitment may be the right solution for a commander who wants to be relieved of the responsibility of holding a mentally ill individual in lock-up. This is a judgment call for the commander.

**III. CIVIL LIABILITY AND RELATED ISSUES****A. CIVIL LIABILITY**

Under Section 22, police officers are "immune from civil suits for damages for restraining, transporting, or applying for . . . or admitting any person to a facility or . . . Bridgewater" when acting pursuant to Chapter 123.

**B. TRANSPORTATION AND RESTRAINT****1. TRANSPORTATION**

Under Section 21, police are authorized to transport patients committed to the Department of Mental Health. This is broad authority and covers voluntary commitments under Section 10, warrant and warrantless apprehensions under Section 12, transfers to Bridgewater under Section 13, and alcohol and substance abuse commitments under Section 35. Officers performing transportation tasks and applying necessary restraint should not be concerned about civil liability because they are acting under the authority of Chapter 123.

**2. RESTRAINT**

Section 21 also informs officers that they may only use physical restraint on a mentally ill person (i.e., handcuffs) and never apply chemical restraint of any kind (e.g., drugs).

**Adults:** Whenever practical, officers should remove the restraints or transport the person to a facility or Bridgewater for examination within

1 hour following restraint. If necessary, the statute permits restraint to be applied for up to 2 hours prior to examination by the superintendent or physician.

**Minors:** Officers may place a minor in restraint for up to 1 hour at which point the minor must be examined.

**C. MISSING PATIENT FROM FACILITY**

Under Section 30, if patient is absent without authorization, the superintendent must notify state and local police, the district attorney, and the next of kin. If a patient is absent for less than 6 months, the patient may be returned to the facility by a police officer. Interestingly, Section 30 does not say anything about what officers should do if the patient has been gone longer than 6 months, but this Section does state that the 6 month limitation does not apply if the missing person was committed after being found not guilty by reason of insanity or after being found incompetent to stand trial.

**D. RENDITION OF ESCAPED MENTAL HEALTH PATIENT**

An officer may detain a person who has escaped from an out of state mental institution and who may be dangerous to the public. The officer should hold the person and, with the help of the district attorney's office, initiate proceedings under Section 20. Section 20 is applicable to out of state escapees in Massachusetts and to escapees from Massachusetts who get caught in another state. The procedure under Section 20 is virtually identical to that used for renditing out of state fugitives. The officer delivering the patient to the out of state officer for transportation should be absolutely sure that the patient has been notified of his right to file for a writ of habeas corpus. Delivering a patient under a warrant for rendition without having advised him of his right to habeas corpus subjects the officer to a \$1,000 fine.

## SOURCE MATERIALS

This section was adapted from Scheft, J. "Your Guide to Massachusetts General Laws Chapter 123" in *The Sentinel* (The magazine of the Massachusetts Police Officer's Association; Spring Issue, 1993).

If you are interested in reading about proper police responses to a variety of situations in which officers encounter the mentally ill, be sure to read Gerard Murphy's *Special Care: Improving the Police Response to the Mentally Disabled*, published by PERF in 1986.

Currently, the Attorney General, Project Director Scheft and representatives from the Department of Mental Retardation are developing a pilot program for the Massachusetts Criminal Justice Training Council to teach recruits about how to deal more sensitively and effectively with the mentally ill and mentally retarded.

## KEY CONTACTS

For more information about police authority under Chapter 123, contact:

**John Scheft, Esquire**  
**The Elderly Protection Project**  
**Office of the Attorney General**  
**One Ashburton Place**  
**Boston, MA 02108-1698**  
**(617) 727-2200, ext 2888**

For information about the clinical aspects of mental retardation or mental illness, as well as suggestions about how to handle different situations that arise in the course of police work, contact:

**Dr. John Higgins**  
**c/o Hogan Berry Regional Center**  
**P.O. Box A**  
**Hathorne, MA 01737**  
**(508) 774-5000, ext 540**

## SECTION XII

### FINANCIAL EXPLOITATION

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#### TYPES OF PERPETRATORS

As the number of elderly increase in our population, so does the incidence of financial exploitation. Financial exploitation is most usefully categorized by the type of perpetrator. The reason is that the circumstances of the violation, the nature of the investigation, and the appropriate law enforcement response will typically differ depending on the type of perpetrator.

There are three offender types who financially exploit the elderly:

##### 1. CARETAKERS

Caretaker theft is undertaken by family members, "friends" or home care assistants of some sort, who use their association with elders to gain access to funds that they then divert for their own use.

##### 2. FIDUCIARIES

Fiduciary exploitation is the theft of elders' funds that is accomplished by professionals — for example, accountants, investment counselors, or lawyers — who use their positions of trust for their own personal benefit to the detriment of their elderly clients.

##### 3. SCAM ARTISTS

Scam artists — also known as confidence or con artists, swindlers, and other less flattering terms — engage in various frauds against the elderly. Scam artists, unlike the first two perpetrator types, are strangers to the elders they rip off. They conduct their swindles in person, through the mail, or over the telephone.

#### TYPICAL CRIMES COMMITTED

Common crimes which can be charged in a financial exploitation case include:

##### A. LARCENY

1. **General Larceny.** G.L. c. 266, s. 30. *See Commonwealth v. Hildreth*, 30 Mass. App. Ct. 963, 965 (1991); *Commonwealth v. Kelly*, 24 Mass. App. Ct. 181, 183-186 (1987).
2. **Larceny by Stealing.** G.L. c. 266, s. 25. *See Commonwealth v. Glowacki*, 398 Mass. 507, 514 (1986). This is the trespassory taking and carrying away of the property of another with the intent to permanently deprive the owner of possession. Also, having the intent to use the property for a long enough period to accomplish an unlawful purpose is a sufficient intent to steal. This is the only property offense that provides for enhanced penalties when committed against a person age 65 or older. Penalty for 1st offense: 5 years State Prison or 2 1/2 years House of Correction. 2nd offense: Mandatory minimum sentence of 2 years, with 1 year to serve.
3. **Larceny from the Person.** G.L. c. 266, s. 25. Under this section, the perpetrator must take and carry away property from the *victim's person* with the intent to permanently deprive the victim of the property.
4. **Larceny by False Pretenses.** G.L. c. 266, s. 30. For this offense, the perpetrator must make a false statement of fact, which the perpetrator knows to be false, because the perpetrator's intent is that the victim rely on



its truth and, in fact, the victim does rely the false statement which encourages her to part her money or property.

5. **Obtaining a Signature Under False Pretenses.** G.L. c. 266, s.31. See *Commonwealth v. Levin*, 11 Mass. App. Ct. 482, 495 (1981), review denied 383 Mass. 893 (1984). This is another type of larceny which involves obtaining the signature of a person to a written instrument, by a false pretense with the intent to defraud, where the false making of the signature would be a forgery.
6. **Larceny through Inducement to Part with Property.** G.L. c. 266, s. 34. See *Commonwealth v. Duddie Ford, Inc.*, 409 Mass. 387, 394-396 (1991).
7. **Larceny by Check.** G.L. c. 266, s. 37. This means that the offender wrote, or cashed, or delivered, or passed a check drawn on the account of a particular bank, and, by doing so, the person obtained money, property or services; and, when the person used the check in this manner, he knew that he did not have sufficient funds or credit at the bank on which the check was drawn; and, this person did so with the intent to defraud the bank or someone who received the check. See *Commonwealth v. Klein*, 400 Mass. 309, 312-313 (1987).

## B. EMBEZZLEMENT

Embezzlement is the fraudulent conversion of property by one entrusted with its lawful possession. The essence of embezzlement is the breach of a relationship of trust. See *Commonwealth v. Schmukler*, 22 Mass. App. Ct. 432, 434-436 (1986).

Fiduciary embezzlement is a specific form of this crime that occurs when a trustee under a trust created by a deed, will or other written instrument, fraudulently converts or appropriates money, goods or property held for the use or benefit of another person for his own use or benefit or someone else's use or benefit. G.L. c. 266, s. 57 and 56 (embezzlement by brokers and agents).

## C. OTHER OFFENSES

1. **Extortion.** G.L. c. 265, s. 25. Extortion means to verbally or in writing threaten to injure a person or his property unless he pays money or does any other act against his will.
2. **Destruction or Concealment of a Will.** G.L. c. 266, s. 39.
3. **Forgery.** G.L. c. 266, s. 1. Forgery is the making of a false writing having apparent legal significance. This must be done with the intent to defraud.
4. **Uttering.** G.L. c. 267, ss. 1 (record or certificate), 5 (contract). Forgery is the offering of a written document, known to be false, as if it is genuine. An example would be the tendering of a false, forged or altered check with the intent to defraud.

## CARETAKER EXPLOITATION

In cases involving financial exploitation by someone known to the elder, as previously mentioned, G.L. c. 19A requires that the incident be reported to EOEA/PSA. The matter may be simultaneously investigated by the local police and/or the district attorney for possible criminal prosecution. A civil action may be initiated by a private attorney depending upon the facts and circumstances of the case.

## FIDUCIARY EXPLOITATION

In cases involving exploitation by someone in a fiduciary relationship to the victim, the police may initiate an investigation and seek the assistance of the local District Attorney or the Attorney General's Office. For cases where criminal intent may be less clear, professional licensing boards or associations can be contacted for appropriate action. Fiduciary exploitation should be reported to EOEA/PSA pursuant to the elder abuse reporting statute, G.L. c. 19A. EOEA/PSA can then, as part of its efforts, contact the authority, if one exists, which created the trust relationship -- such as the Probate Court if a guardian or conservator is alleged to have misused funds. Finally, a civil action to recover the property taken may be appropriate.

## DEALING WITH CARETAKER AND FIDUCIARY EXPLOITATION

### A. CHALLENGES OF THE CASE

Financial abuse poses special problems for the following reasons:

Proving cases often involves demonstrating that a victim did not understand what was happening at an earlier point in time. For example, a severely incapacitated person may have signed a bank power of attorney granting someone authority to withdraw funds. If the older person did not understand what he was signing, the document is invalid. However, the suspect may claim that the victim understood what he was signing at the time.

In addition, victims are often unable to testify to elements of the crime or cannot recall complicated or lengthy series of events or transactions.

Finally, the suspect may have possession of the evidence or documents that are needed to prove the abuse, such as cancelled checks or wills, or may have destroyed the evidence.

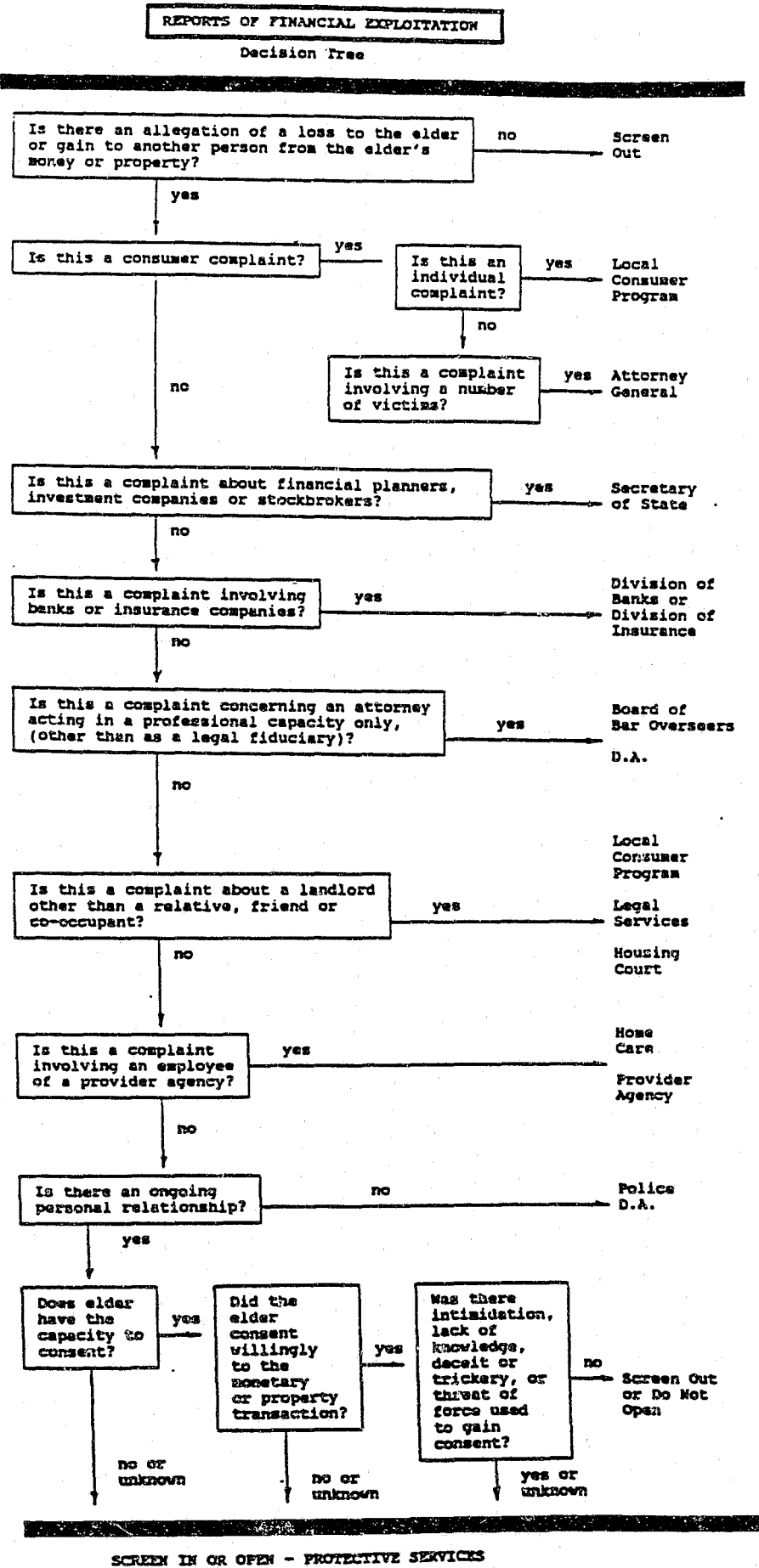
Despite these difficulties, many financial exploitation cases are successfully prosecuted.

### B. INVESTIGATIVE CONSIDERATIONS

To increase the likelihood of successful prosecution, investigators should determine:

1. **The relationship between the victim and suspect.** Is the person a family member? Are they in a position of trust? Do they live with the victim?
2. **The extent of the estate.** It may include real property, bank accounts, certificates of deposit, stock, home furnishings, personal belongings, and vehicles.
3. **Who owns the victim's home,** whose name is on the deed, who pays rent, and who pays taxes.
4. **Whose names are on bank accounts,** stocks, and investment accounts.

5. **Who pays the bills.**
6. **How the older person's pension, social security, or other income checks are received and deposited in the bank.**
7. **What documents were signed by the victim that placed the estate in the suspect's control.** This may include a power of attorney, a bank signature card, or a vehicle pink slip. *Be sure to get copies of those documents.*
8. **If the suspect is the victim's conservator or has power of attorney.**
9. **The victim's mental condition.** Is the person mentally capable of testifying?  
  
If the person is not capable, or if their capacity is questionable, contact family members, friends or service providers to obtain mental health evaluations and histories. This should include information about the length of time that the victim has had diminished capacity in order to determine if he was able to give consent at the time he supposedly gave it.
10. **The value of any questionable purchases and who they were made by and whether there has been a history of gifts.**
11. **If the estate of the older person is still at risk of theft, misappropriation or embezzlement.** If so, get legal assistance through protective services or family members to secure the estate as soon as possible.



## What to Look for in Assessing Financial Abuse

1. What are the client's income sources, dollar amounts, and payment due dates?
2. Where are checks deposited?
3. How is cash obtained?
4. How are bills paid? Who writes and/or signs the checks?
5. What is the amount of the monthly bills?
6. What debts exist?
7. Does the client have any credit cards or automated teller cards? Does he or she use them? Who else is listed on the accounts?
8. What is the total number of bank accounts? Where are they located? What is the approximate balance in each? What types of accounts are they? Is anyone else listed on any of the accounts?
9. Does the client have stocks or bonds? Where are they located? Does he or she have a brokerage account?
10. Does the client own a home, and is anyone else listed as a joint tenant? Who has deeds to the property?
11. Does the client have any safe deposit boxes? Where are they located and who has the keys? Does anyone else have access to them?
12. Does the client have jewelry, expensive collections, art, or other valuables? Where are they kept?
13. Does the client have insurance policies? What kinds?
14. Is anyone using the client's residence or utilities without permission?
15. Have loans or gifts been made or given recently?
16. Has the client given power of attorney to anyone?
17. Does the client have a conservator or guardian?
18. Does the client have a lawyer or accountant?
19. Is there a will and where is it located?
20. Has the client signed any papers recently?
21. Is the client getting adequate food, clothing, etc.?
22. Will any new forms of income become available soon?
23. What are the incomes of the client's supporters?
24. Does the client have any pets that may need to be cared for if the living arrangement changes?
25. Are other relatives available to help? Are they geographically and emotionally close to the client? Are they burdened with children or other concerns? Could they monitor someone else?
26. How often is the client in contact with this support system?

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## SCAM ARTIST EXPLOITATION

This part of the materials describes some of the most widely practiced confidence schemes and suggests attitudes and actions that people can take to reduce their risks of losing money to con artists.

### I. THE NATURE OF FRAUD

#### A. WHY THE ELDERLY ARE VICTIMIZED

The victimization rate for fraud is very high among older people. Although adults of all ages are swindled every day, con artists often select older people because some may seem more trusting, appear to be lonely, give the impression that they are easily confused by fast talk, or appear to have time to listen to the "pitch" of the con artist. Many older people also have relatively easy access to their savings, whereas many younger people have committed their money to raising families, educating children, or paying for their homes.

#### B. WHY FRAUD AND CONFIDENCE SCHEMES ARE SO SUCCESSFUL

No individual is immune to a con artist, and people of all ages and backgrounds have been swindled. P.T. Barnum said that there's a sucker born every minute, and he probably knew, for it has been said that he was swindled out of two fortunes. Con artists are so successful for several reasons:

##### 1. CON ARTISTS ARE VERY SKILLFUL

Many have the abilities of professional actors and can convincingly present themselves to their potential victims as legitimate businessmen, bank examiners, or just congenial people whom anybody might meet by chance on the street. As con artists play these roles, they can begin to win the trust of their victims. People who are trusting often relax their normal caution and vigilance and may fail to detect the contradictions in the swindle. They are deceived into believing something that often defies common sense.

John Murphy, former commander of the New York City Police Department's Pickpocket and

Confidence Squad, explains how the elder's loneliness and the con's skill often set the stage for the swindle:

"Why do people get taken? . . . I do not feel it is greed. I honestly feel the reason elderly people get taken in con games is because they are lonely. If they find someone to talk to them on the street, a stranger, some new person who will talk to them, they like this. That is how con games work. That is the reason it con women usually, because the average victim is a woman and she will relate to another woman . . . . The older people are not so much gullible as they want to meet somebody new. They want to be helpful. That is why they go for these games. If they did not talk to people, they would not be taken . . . The fact is that they have no fear of the confidence woman. She is nice-looking, well-dressed, reputable, and there is no fear of her."

##### 2. COMPLACENCY

Most people are complacent and believe they are too clever to be swindled. They think that such things only happen to people who were probably greedy and should have been more alert to what was happening to them. Law enforcement officers constantly hear victims of cons say, "How could this happen to me?" Older adults can become complacent if they believe their years of experience will help them detect a con artist.

##### 3. HARD TO DETECT

Con games are very difficult to detect. There are two reasons for this: First, frauds are committed without violence. Unlike a shooting or assault, people (even police) in the vicinity will normally be unaware that a fraud is being committed.

Second, frauds are seldom reported to authorities. Reporting rates for this crime are estimated at between 3 and 8%, which is the lowest of any major crime. There are several reasons for low reporting. Many victims are embarrassed to report that they have been swindled, some are not aware of their victimization, and others may conclude that there is nothing the police can do to catch the culprit and recover their money or other assets.

Sometimes the attitude of police officers contributes to the low reporting rates.

According to Detective Dennis Marlock of the Milwaukee Police, an acknowledged expert on confidence crime: "Some officers consider the term 'confidence crime victim' to be nothing more than a euphemism used to describe someone who is ignorant, greedy or just plain stupid . . . . In fact, the con artist's rule of thumb is that the more intelligent the potential victim, the higher their personal status -- the easier they are to deceive." Thus, nobody is immune from getting fooled by a confidence crime, and officers need to respond with sensitivity and understanding when they encounter a victim.

John Murphy of the New York City Police Department talks forcefully about the tragedy of the elder victimized by the con:

"If you want to see a horror story, when we get a victim down at the office, a victim in her seventies, she comes and she will sit there. First of all she has tremendous shame that she was conned. It is almost like a crime of rape. She will sit down and start telling the story and she is embarrassed and shaken. When they realize they just lost their life savings or that crutch that helps to stave off poverty; when you see the realization hitting them that they are going to have to move; the few extra measures they are getting they are going to lose; they have nothing to leave to their grandchildren; things like that -- you see a dead person in front of you, brutal as it sounds.

We had a woman last week who lost like \$33,000 . . . . She sat there and we had to shake her shoulders to question her. She stared at nothing . . . . I think they die more quickly when they've lost their pride . . . . I have worked in homicide, narcotics, . . . every facet of police work. I get used to it but con suffering is worse than anything. I think possibly because when you look at the victim you see your mother of you see yourself in 15 or 20 years. I am on the force 20 years . . . and without trying to con you, I go home at times and I am nauseated. It is a terrible feeling watching these people sitting there really lost to the world."

#### **4. DIFFICULT TO PROSECUTE**

Con games are very difficult to investigate and prosecute. First, people who swindle others cannot be easily traced. Con artists usually do not have ties to the communities in which they operate, and their lifestyles are characterized by mobility and frequent name and identification changes.

Even when the con artist can be identified,

successful prosecution is difficult because of the crafty way many con games are carried out. Con artists know that they can only be successfully prosecuted if law enforcement authorities can obtain evidence beyond a reasonable doubt that they conducted their activities with the criminal intent to defraud. All too often, the con artist is able to hide this intent behind such excuses as the following: "I did everything possible to make your investment pay off, but I couldn't help what happened"; "My supplier went bankrupt"; "My partner took off with your money and mine"; "I couldn't get anyone interested in promoting our product or service."

Finally, judges may be reluctant to send them to jail because of the need to reserve that punishment for violent criminals. Lenient sentences are not a very effective deterrent.

### **C. FOUR ELEMENTS OF A FRAUD PROMOTION**

The crime of fraud usually consists of four elements, all of which must be accomplished if the scheme is to succeed. If even one is defeated, the scheme will fail. These elements are:

#### **1. CRIMINAL INTENT**

The con artist develops an idea for a scheme that includes the criminal intent to defraud; for example, convincing people to invest in a phony gold mining venture.

#### **2. DISGUISE OF THE CRIMINAL INTENT**

The con artist must then disguise the criminal intent by producing (in the example of the phony gold mine) official-looking documents, such as an assay report or financial statements.

#### **3. EXPLOITATION OF HUMAN TRAITS**

As stated previously, con artists are experts at manipulating certain human traits that will influence people to part with their money: goodness, gullibility, greed, or fear. Con artists have a good working knowledge of human nature and use it to take advantage of people. For example, it is often said that there is a little

bit of larceny in all of us. Swindlers learn to prey upon this and other human motivations.

#### **4. VOLUNTARY PARTICIPATION OF THE VICTIM**

The con artist's objective is to induce people to participate voluntarily in the scheme by giving the con artist money.

### **D. DEFEATING FRAUD**

Two of the elements described above reveal areas that crime prevention officers can exploit to defeat frauds.

#### **1. VOLUNTARY PARTICIPATION OF THE VICTIM**

The con artist's weakness regarding this element is that fraud is a crime over which potential victims can exercise almost total control. People can always say "no" to a con artist. If they refuse to cooperate, they cannot be swindled. The challenge to the con artist is to convince people that the proposal is not a fraud. The challenge to crime prevention officers is to educate people about con games to the point that they can recognize when a swindle is taking place, regardless of anything the con artist may say to them.

#### **2. EXPLOITATION OF HUMAN TRAITS**

To exploit the human traits of goodness, gullibility, greed, and fear, the con artist must resort to a pattern of promises or claims that can be readily identified. These can serve as warning signs that a con game is taking place. When people become aware of these warning signs, they will be able to detect swindles and "just say no."

### **E. WARNING SIGNS OF CONFIDENCE SCHEMES**

There are numerous warning signs of a con game. Seven of the most common follow:

#### **1. GET RICH QUICK**

The swindler tries to convince the victim that participation in the proposed activity will bring an immediate and substantial return. The human trait of greed is being exploited. Note that the con can be exposed if one asks: "If this is such a good deal, why is the con sharing the information with a complete stranger?"

#### **2. SOMETHING FOR NOTHING**

The swindler tries to convince the victim that he or she will obtain an expensive item or service, such as home repair, for a price that is enticing and unrealistic. Again, the con artist can be exposed by asking, "If the item, vacation, or service is such a good deal, why is it being offered to a stranger?" If something is offered for nothing, its true value is probably nothing. There is no free lunch -- a "free" vacation in the sun is probably just a shady deal!

#### **3. A SECRET PLAN**

The con artist draws on the victim's sense of adventure with a story that the enterprise offered must be kept secret so that others cannot find out and also take advantage of the opportunity. Another twist to this approach is to convince the victim that he is participating in an investigation of some type (as a public service) to catch a thief. In reality, the only reason for the "secret" is to keep the potential victim from telling others who may not be as gullible. As a general practice, law enforcement agencies do not directly involve citizens in operational activities. The human traits being exploited are greed, gullibility, and goodness.

#### **4. MAKE A QUICK DECISION**

The con artist often tries to convince the victim that if he does not hand over the money, buy the product, or make the investment, the opportunity will be lost forever. The con knows that careful

thought may expose the game for the swindle that it is. In this situation, the con is exploiting the human traits of greed and gullibility.

### 5. OTHER WARNING SIGNS

These include statements that a medical cure is guaranteed, that the seller of a particular item is not making a profit, or that no written information is available about a particular item or investment. These statements exploit the human traits of fear, greed, and gullibility.

## II. PERSON-TO-PERSON CONFIDENCE SCHEMES

It is not possible to describe within this section all the different types of confidence games. It is possible, however, to cover the most common and most successful.

### A. THE BANK EXAMINER

This swindle usually begins with a telephone call. The caller identifies himself or herself as a bank examiner, a detective, a federal or FBI agent, or some other official-sounding title. This "examiner" tells the selected victim that some bank accounts, including that of the victim, show large withdrawals. He suspects a dishonest bank employee and wants the victim, as a valued customer, to help trap the thief.

The phony examiner may ask victims to meet them somewhere near the bank, where he will show some official-looking identification. Victims will then be asked to go to a particular teller at their bank and withdraw a certain sum of money, which is to be delivered to the "examiner," who may go through the motions of recording the serial numbers from the bills or state that the bills will be examined by experts to determine whether they are genuine. The "bank examiner" will usually give victims a receipt and inform them that the money will be immediately redeposited. Some may seem to return the money immediately; however, they will switch envelopes and give the victims an envelope that contains only paper.

This scheme is so successful that there are many versions of it. The story may be that a teller is suspected of stealing money from the victim's account and the bank has set up a new account in the victim's name. The phony examiner asks the victim to empty the old account, then allow the examiner to do a "control" redeposit of the victim's money into the new account to see whether the dishonest teller will try to transfer money from the new account back into the old account, then steal from it. Confusing? It's meant to be. The idea is to confuse potential victims with fast talk and, at the same time, gain enough of their confidence to prevent them from asking questions and thoroughly thinking through the proposal.

Another twist to this scam is the story that a teller is suspected of giving counterfeit money to depositors withdrawing cash, then stealing the same amount from their accounts.

Victims learn of the swindle when they go to their bank and find that their money has not been redeposited and that the bank officials are unaware of any investigation or any bank examiner.

### B. THE PIGEON DROP

This con game often begins when a pleasant person (usually a woman) approaches the intended victim and starts a conversation. For example, she may ask for something as simple as directions. She explains that she has just inherited some money or received money from an insurance policy and is looking for an apartment. A casual conversation follows and, at this point, all seems innocent.

Soon afterward, a second person, either another woman or a man, approaches and asks whether anyone has lost a package. As no one has lost a package, and no address or name is on it, the three agree to open the package. They discover a considerable sum of money and, usually, a note. The note is very brief and leaves the impression that the money in the package has been obtained from gambling, drugs, or some other illegal means.

A discussion usually follows about what to do with the money. Turning it in to the police is one idea, but the two con artists convince their victim that there is no way for the police to trace it. One of the



swindlers suggests holding the money for a few months to be sure it is not claimed and then splitting it. (Another variation is for one of the cons to say that a friend, a lawyer, can offer advice about what to do with the money.) Following the "recommendation" of the "lawyer," or by mutual consent, the three then decide to hold the money with the lawyer, or in an account in all three names, for a certain period of time before dividing it.

The cons then question each other about the possibility that one of the group will try to withdraw their share of the money during the time it is to be held. Both cons "prove" to their victim that they have money and will not need to draw on the money just found. It then becomes the victim's turn to show that she also has money immediately available. Because the victim will probably not be carrying a large amount of cash, she is asked to withdraw a certain amount -- \$2,000, for example -- from her bank and let the other members of the group see it before returning it to the bank.

When the victim brings the cash to the two con artists, they ask to count it. They take the wallet or envelope containing the victim's money and, while one of the cons counts the money, the other distracts the victim and the envelopes are switched. The victim gets back only a wallet filled with paper cut to the size of money.

**It Happens in Massachusetts:** For an example of this scam being perpetrated on a local resident, look no further than the Attorney General's files. On July 22, 1993, Josephine White, a 46 year old woman, was indicted for bilking \$5,000 from a 76 year old Norwood woman. She had been indicted earlier for defrauding an elderly Stoughton woman of \$11,000 in cash and jewels. White had initially made bail and then defaulted in the District Court. She was apprehended in Illinois and, at the time of her July Massachusetts indictment, was being held on similar charges in Connecticut.

White approached the elderly victim, saying she had found a large sum of money. Soon White was joined by her male accomplice, and they drove the woman to her bank where she made a \$5,000 withdrawal for her "good faith" deposit. White said

she would check with her boss, who was a "tax collector," to determine how the three could legally split the found money. When the three arrived at the office building, White took the victim's money inside the building. White came back to the car and told the victim that her boss would meet the victim inside the building on the second floor, return the \$5,000 deposit and give the victim approximately \$20,000, her after-tax share of the found money. The victim went to the second floor as directed and found that no one was in any of the offices. She went outside to find the man and White gone. The victim contacted the Norwood Police, and Detective Peter Curran conducted the successful investigation.

**C. THE HOME REPAIRMAN**

Usually, the "home repairman" will arrive at the victim's door and inform the homeowner that her driveway, siding, or maybe the roof is in very poor or even dangerous condition. He explains that he has just finished a job nearby and has extra material from the job that he could use to fix the problem. He claims he can do this very inexpensively because he won't have to charge for materials and nobody in his company will know the difference.

If any work is done, it will usually be of poor quality and with inferior materials. Often the repairs are not even needed. The entire operation is just a way to get money by convincing victims that they are getting something at a reduced cost.

Later, if the victim discovers a problem with the work and can find this phony contractor, there is little that can be done. The contractor may remind the victim that she accepted the stolen goods to do the job. The result is that the victim will probably not complain and will never know whether any repair was really needed, or if the work made things worse. The victim will know by this time, however, that he or she was conned.

**D. THE CITY INSPECTOR**

The potential victim answers the door to find a "city inspector" who flashes some identification (and probably a big smile) while informing the homeowner that the "inspector" is required to check the wires, the pipes, the furnace in the home, or a

tree in the yard for a possible problem that has been reported.

The "inspector" soon finds a serious problem and says it is a code violation that has to be fixed immediately or the power or water will be cut off that day. The "inspector" waits to see the look on the victim's face that will reveal to him whether the victim is hooked. Then the "inspector" takes the victim off the hook, but for a price. He just happens to know someone who can repair the problem immediately. Also, because the "inspector" knows that the job will be done right, he won't have to discontinue the service or check the work.

If the homeowner falls for this scam, the "inspector" will call the repairman and "conveniently" find that he is available. Because of the urgency of the situation, however, it will cost a bit extra, and the repairman will usually want cash. The victim soon finds that "a bit extra" is a lot of money, especially for work that was probably not needed in the first place.

## **E. OTHER FRAUDS**

There are so many other frauds that it is impractical to list them all. Five of the most common are briefly described below.

### **1. BAIT AND SWITCH**

There are many legitimate advertisements for products that merchants offer at reduced prices to attract people to their stores. When these products are not available, it is possible that customers are being conned by the "bait and switch" technique. The item or items were probably never available. The ad for them was "bait" and, when the victims arrive in the store and ask for them, they are "switched" to more expensive products that, of course, are immediately available. Ask for a raincheck; legitimate merchants will readily give one. Otherwise, do not take the bait.

### **2. CAR REPAIRS**

Car repairs probably head the list for the number of people swindled. For example, something as simple as checking a car's oil may

result in a rip-off. The attendant asks to check the oil, then tells the driver that the oil level is low. He may even show the driver a dipstick that indicates a low oil level. Car owners should know how to check their oil and all other fluid levels. Motorists have been sold water pumps, valve jobs, new wiring, ball joints, front end alignments, and batteries they did not need. Be certain all work paid for is actually accomplished. Be sure the oil was really changed by checking to see if it is clean (light brown, not black in color). Also, check the oil filter, which the car owner can mark in some way before it is changed. Mechanics can make an old filter look new by simply wiping the outside to clean it.

### **3. CONTRACTS**

No contracts should be signed until thoroughly understood. Remember, salesmen make their money by selling the product and getting the customer to sign the contract. They are not going to explain something that could cause a potential customer to reconsider a decision to buy. Also many sales contracts are immediately purchased by finance companies that move very quickly to collect overdue payments.

### **4. OFFERS TO NEWLY WIDOWED PERSONS**

Some con artists use obituary columns to find victims because recently widowed persons can be quite vulnerable to certain con games. Cons may claim that, before the victim's spouse died, he or she ordered a Bible or some other religious object. In memory of the deceased spouse, a widow or widower may be inclined to purchase the item, although it is probably vastly overpriced. Con artists also attempt to sell widowed persons such items as laminated obituaries, condominiums, insurance policies, and land development schemes.

### **5. THE RUSE ENTRY**

Some thieves use the skills of con artists to enter the homes of their victims. For example, two women may claim their car has broken down and they need to use the phone to call for help. While one distracts or occupies the victim with

requests to help find phone numbers or get a glass of water, the other slips into other rooms and steals money and valuables. There is also a variation on the home repair scheme where one of the "workmen" will come up with an excuse to enter the home and, while he distracts the occupant, his accomplices will go through the house and steal valuables.

### III. MAIL FRAUD

For over 100 years, the U.S. Postal Inspection Service has been the primary federal agency responsible for investigating fraudulent schemes conducted through the mail. These swindles include conducting phony contests and sweepstakes; selling misrepresented or nonexistent investments in annuities, stocks, securities, precious metals or real estate; touting worthless or dangerous medical cures; soliciting money for phony charities, promoting participation in fraudulent work-at-home schemes; and selling "dream vacation" packages that turn into nightmares. This is not an all-inclusive list, but it represents the extensive variety of mail frauds that can victimize senior citizens and younger people as well. Descriptions of a few of the most active fraud areas follow:

#### A. FRAUDS DIRECTED AGAINST CONSUMERS

##### 1. THE FAKE CONTEST

This fraud often starts with a notification to someone by phone or mail that they have won a prize or some type of contest or sweepstakes. In reality, there is no contest and no worthwhile prize. "Winners" are usually asked to send money to cover "handling charges." After they send their money, victims usually hear nothing further about that particular contest or prize. However, they are often later deluged with similar mailings containing yet more "congratulations" and asking, of course, for more money.

In other swindles of this type, victims may receive prizes that are worth far less than the "handling charges." Winners of fake vacations often receive only books of discount tickets, worth only a small fraction of the amount of money they have paid.

##### 2. CHAIN-REFERRAL SCHEMES

In this swindle, victims are enticed into paying money for appliances or products with the promise that they will eventually receive the items free. All they have to do is sell a number of similar items. The catch is that the items are very difficult to sell because they are usually of very poor quality or obviously overpriced. Victims get stuck with overpriced items they probably did not need in the first place.

##### 3. DEBT CONSOLIDATION

This is usually a service to consolidate debts and lower monthly payments. Although there are many legitimate services for debt consolidation and counseling, there are also many dishonest individuals in this line of work. These people usually demand large up-front fees and charge high interest rates that leave victims in far worse financial condition than before their debt consolidation efforts. *See Attachment I for an example of this type of fraud.*

##### 4. RETIREMENT ESTATES

This type of operation has become widely known in recent years, but many people are still victimized. Land that appears beautiful in an enticing ad is offered for an exceptionally low price. The pictures are often deceiving. The cost of the actual land (not the land in the pictures) is usually far higher than its market value.

#### B. FRAUDS DIRECTED TOWARD PERSONS SEEKING BUSINESS OPPORTUNITIES

Most of the frauds of this type that attract older people involve work-at-home schemes. Advertisements for such "enterprises" often appear in local "Neighborhood Shoppers" publications. The ads usually promise a guaranteed weekly income of several hundred dollars requiring little work or experience.

The Chief U.S. Postal Inspector has reported that one newspaper ad for a fraudulent work-at-home scheme drew over 200,000 inquiries. To qualify for "employment," respondents had to send in small

registration fees and perform sewing tasks to demonstrate their skills. No one qualified and none of the money was returned.

In a related type of scheme, readers were induced to mail money to a promoter who only advertised that, for the fee, he would provide details about how to make "big money" at home. All they received, if anything, were instructions to repeat the process by placing advertisements in local papers similar to the one they answered. Clearly, money obtained in this manner is fraudulent -- no product is produced, only false promises.

### C. MEDICAL FRAUD

#### 1. FAKE LABORATORY TESTS

In one investigation, the U.S. Postal Inspection Service discovered a laboratory that conducted more than 15,000 fake tests for cancer. The cost for each "test" to those who answered the solicitation was \$10. Not only was the profit considerable for the swindlers, the danger was extreme for those who may have incorrectly believed, as a result of the "test," that they did not have cancer.

#### 2. MIRACLE CURES

There is always someone, somewhere, who claims to have discovered a cure for any condition. These claims are often advertised in newspapers or magazines, and the quackery is completed through the mails when victims send in their money.

#### 3. MAIL ORDER CLINICS

In this swindle, the victim is drawn into the scheme by offers of a free medical diagnosis or some other bait, and then is enticed into expensive, long-term, and useless treatments.

### D. SELF-IMPROVEMENT FRAUDS

#### 1. EMPLOYMENT OFFERS

In this scam, victims are drawn into contracts requiring either a large initial payment or regular payments. The money is usually for overpriced or worthless services purportedly leading to attractive job opportunities. One company advertised that it accepted only the highest-qualified applicants and would return the initial fee if the applicant did not meet its exacting standards. In reality, all "applicants" were accepted when their checks cleared.

#### 2. CORRESPONDENCE COURSES

Many legitimate courses are offered, but some fraudulent correspondence schools remain active and make substantial profits. Many offer information in their courses that is available free to the general public. Victims are induced to sign contracts that trap them into regular payments from which they cannot easily escape.

### E. CHARITIES

Some charities spend over half of their income to pay professional fund-raisers. One way to check these is to contact the Council of Better Business Bureaus in Arlington, Virginia (703) 276-0100 for information on national charities and local Better Business Bureaus for assistance on regional and local campaigns. Furthermore, the Attorney General's Office is empowered to regulate charities. The Public Charities Division within the A.G.'s Office is directed by Attorney Richard Allen and is available to answer questions about charitable fundraising practices. As a rule, never allow yourself to be drawn into quick decisions about giving money to anyone, even someone claiming they represent a charity that sounds very worthy of your support. *For an example of a case handled by the A.G.'s Public Charity Division, see Attachment J.*

#### IV. TELEMARKETING FRAUD

Telemarketing fraud accounts for \$10 billion in investor losses annually, according to the North American Securities Administrators Association, the national organization of state securities regulators based in Washington, DC.

##### A. WHAT IS TELEMARKETING FRAUD?

Telemarketing fraud is a means of defrauding people over the phone by swindlers who seek money from victims in exchange for services or products that are either never furnished or priced far above their true market value.

##### B. HOW DOES TELEFRAUD WORK?

###### 1. THE BOILER-ROOM

Telefraud operators often employ people to make phone calls from banks of phones and on long-distance WATS lines. These are referred to as "boiler-room" operations.

Boiler-room callers use well-rehearsed, high-pressure sales pitches to convince customers to buy overpriced products, invest in fictitious enterprises, participate in contests to win worthless prizes, or contribute to phony charities.

###### 2. USE OF THE MAIL TO SET UP THE CALL

Many telefraud promoters may avoid U.S. postal statutes by asking prospects to call a toll-free number they have placed in an ad or by providing a card in a magazine that includes a notice that "inquiries without phone numbers will not be accepted."

Other telefraud promoters use the U.S. mail as the first step in their scheme. They use the mail to give the impression of legitimacy by sending out enticing letters or postcards to lure victims with promises of contest awards and prizes.

##### 3. THE "900" NUMBER SCAM

A unique technique used by telephone swindlers is to entice victims into calling them on 900 numbers. The swindle begins when the cons mail out thousands of letters or postcards to entice people into believing that they have won a contest and a prize of some type. Recipients are told that they must call a 900 number to claim their prize or learn which one of several prizes they have won. The solicitation letter may include a statement that callers will be charged for use of the 900 number; however, this information is usually printed in very small type and masked behind exaggerated claims of prizes that can be or have already been won.

Of course, there is no legitimate prize, and victims are billed for the 900 number calls. The swindle is completed when the promoters receive their portion of the charges for these calls from the phone company. Victims who place such calls usually hear a recorded voice that strings them along for several minutes during which phony "checks" are made to verify their identification numbers and determine which prizes they have won. Ultimately, there are no prizes. If callers listen and wait through the entire "yes, you have won, no, you haven't won" pitch, they can be charged \$30 to \$40 for the calls, only to learn finally that they have "won" a consolation prize of coupon books good only for the purchase of shoddy merchandise from the promoter's catalog.

##### C. WHAT ARE YOU LIKELY TO HEAR DURING ONE OF THESE CALLS?

Telefraud solicitations are cleverly worded and contain many different claims to entice their victims. The longer prospective victims allow callers to go through their scripts, the more difficult it is for many victims to resist. Before the victim knows it, he or she may be "dancing." This is a term some boiler-room operators use to refer to victims who start to show some interest in the products being offered.

Common approaches used by telefraud "salespeople" include the following: "Your recently departed (husband or wife) would have wanted you to (buy)

have this"; "You have been specially selected for this offer"; "You'll get a wonderful free bonus if you buy our product"; "You've won a valuable prize"; "This investment is low-risk and pays higher interest than you can get anywhere else"; "We will guarantee your investment or buy it back"; "You'll have to make up your mind right away"; "Just put the shipping charge on your credit card."

The specific order or product might involve the following: The "opportunity" to invest in oil or gas leases, gemstones, precious metals, rare coins, and stamps; the offer to test-market a product such as vitamins or a medical device (all the victim has to do is send money for shipping and handling charges); notification that the victim has won a contest and a valuable prize (again, the victim has to send money for shipping and handling); and the chance for a dream vacation either free or at a greatly reduced price.

#### **D. TECHNIQUES TO OVERCOME DOUBTS AND SUSPICIONS**

Con artists working in boiler rooms use prepared scripts to help them readily answer questions or objections. Some typical answers they might have available include the following:

**Check us out.** Cons may offer to let prospective victims call them back or refer them to one of the firm's "vice presidents."

**Send no money.** To confuse their victims, many boiler-room callers ask for victims' credit card numbers, assuring them that if they do not like the products or decide to return the items, they can cancel the sale and no money will have been lost. Others claim they need the credit card number to verify the victim's address or confuse victims by asking for the numbers at the same time they ask for the victims' addresses. The victim's money is usually lost the minute the credit card number is released.

#### **E. DOES REPEAT "BUSINESS" WORK?**

Some con artists keep records and lists of those they have previously conned. Because the people on these lists have been successfully swindled in the

past, they are considered "leads" for future swindles. These lists are sold to boiler-room operators by people referred to as "loaders." Loaders exist because some people do not learn from their past mistakes.

### **V. ATTITUDES AND ACTIONS TO REDUCE VICTIMIZATION**

#### **A. ATTITUDES**

Although there are hundreds, even thousands, of confidence games and swindles, people can protect themselves if they develop certain attitudes.

##### **1. BE AWARE**

Be aware that con games are perpetrated on thousands of people every day. Even though you have been provided some information about what to look for, do not become complacent. Con artists do not know you have been fortunate enough to be informed about some of their tricks. You may be their next target. Be alert for the most common characteristics of con games covered earlier.

##### **2. BE CAUTIOUS**

Be cautious of anything that sounds especially enticing. Examine the offer and determine whether it contains any of the obvious trademarks of con artists, such as the terms "get rich quick" or "something for nothing." Also, be cautious of letting strangers into your home. Verify their identities before you open the door. Be wary of cash deals, giving your credit card number to a caller, or agreeing to make a quick decision without consulting others.

##### **3. BE REALISTIC**

Accept as a basic rule of life that almost nothing is free; somebody pays for everything and it will most likely be you if you believe a con artist. The "free" prize you have won will quickly disappear once you tell the con artist that you will not pay a shipping charge.

**B. RECOMMENDED ACTIONS****1. ASK QUESTIONS OF THE PROMOTER**

Do not allow con artists to confuse you with fast talk. Their first goal is to gain your confidence and trust so that you will be inclined to believe whatever they tell you. Once they have your trust, you will be less likely to question closely whatever they want you to do. They use vague terms to describe their schemes, in the hope that you will not think their proposals through. Resolve all doubts by asking questions. Those who insist on clear explanations break the momentum of the con game and seize control of the situation. When faced with a smart consumer who asks questions and insists on clear and detailed answers, the con artist usually finds an excuse to pull back from the situation and leave as soon as possible.

**2. ASK YOURSELF QUESTIONS**

Hang up the phone or close the door on anyone offering any type of deal, prize, or investment if you can answer "yes" to one or more of the following questions:

Am I being pressured for a quick decision before I have time to make up my mind?

Is the salesperson refusing to mail me any written information?

Does the salesperson ask for my credit card number of for an immediate payment?

Is there an apparent inconsistency -- for example, am I told that I have to pay to win a "free prize," enter a "contest," or receive a "gift" of some type?

**3. DO NOT BE RUSHED INTO SIGNING ANYTHING**

If you have asked questions, take the time to consider the logic and clarity of the answers you receive. Con artists consider time their enemy, because careful consideration may reveal that their proposals are nothing more than swindles.

**4. LEARN TO SAY "NO"**

It is your money. Do not allow yourself to feel pressured into parting with it just because someone else, usually a stranger, has asked for it.

**5. TALK TO SOMEONE**

Do not make important decisions by yourself -- seek advice from people you trust. If someone offers to involve you in a situation concerning money, always say "no" until you discuss the matter with someone you trust. A con artist will almost always have many reasons why you should not seek advice from someone else. This is a sign that you are being conned.

**6. DO NOT GIVE OUT CREDIT CARD NUMBER**

Never, never give your credit card number to unsolicited callers.

**7. CALL THE POLICE**

If you have been the victim of a swindle, or even if you think you have been approached by a con artist, call and cooperate with law enforcement authorities. Do not be embarrassed about how you were swindled, it happens to people all the time.

**C. A MODEL PROGRAM: GETTING FINANCIAL INSTITUTIONS TO WARN SENIORS ABOUT FRAUD**

As we have mentioned previously, the key to the successful con is preventing the intended victim from thinking. Interrupting the con artist's momentum and giving the potential victim time, even an instant, to think, can often disrupt the scam. Since almost every victim of a large dollar scam must, at some point in the fraud, withdraw money from their bank account, the bank proves to be the best point at which to alert them to the possibility of fraud.

This strategy is being utilized throughout Milwaukee, Wisconsin and, recently, has been implemented by the Springfield Institution for Savings in cooperation with the Executive Office of Elder Affairs. In fact, the Milwaukee Police report

that since 1985, confidence crime has been reduced by 85% through this program. *See Attachment K for more information and forms.*

In Milwaukee, when someone enters their bank, savings and loan or other financial institution to withdraw a large sum of money, the tellers hand them a "cash withdrawal alert form." This form tells them about the latest schemes in use. Also, because they are asked to sign the form, they are forced to think about what they are doing.

Occasionally, some customers resist any interference from their bank and demand their money. However, the majority appreciate the bank's concern and do not object to the warning.

Interestingly, some con artists, who are now aware of these forms, take the extra step of coaching their victims prior to entering the bank and then stand beside their marks to make certain the withdrawal goes through. To overcome this tactic, tellers have been instructed to take two additional steps. First, they activate the surveillance camera. Second, they advise the customer that, due to bank policy, it is necessary for the manager to approve the transaction. This second step takes time and, regardless of how cool and collected con artists might be, time is their worst enemy. The more time consumed, the better the chances are that the scam artists will make a hasty retreat in search of easier prey.

Though this program works extremely well, financial institutions may resist any program that infringes on their customers' right to handle their money in whatever way they desire. As Detective Dennis Marlock of the Milwaukee Police mentions, the police can alter the institution's perception by pointing out: (1) the control of crime is not merely a law enforcement problem, it is a community problem where institutions and other segments of the business community need to fulfill their individual responsibilities; and (2) financial institutions are considered by most customers to be experts on handling and protecting their money. If these institutions possess any knowledge concerning anything which might jeopardize their customers' money, then it rightfully becomes their responsibility to advise their customers of these risks.

The best way to enlist the cooperation of financial institutions is to ask for their assistance in reducing confidence crimes in their community. When outlining a sample program, officers should be sure to stress that should the institution decide to implement such a program, the exact procedure used will be up to the individual institution. Officers should make it known, however, that their assistance in setting up a program or training tellers is available upon request.

## VI. WORKING WITH OTHER AGENCIES TO INVESTIGATE FRAUD

Many fraud cases demand a multi-jurisdictional response from the police. For example, a telefraud scheme operating in your community may, in fact, be the result of a "boiler room" operation in Phoenix, Arizona. Con artists engaging a series of home repair swindles may be heading toward New Hampshire. Given the current sophistication and mobility of fraud operations, the police officer must be well versed in the agencies that can lend assistance during an investigation. Consider the following agencies:

### 1. THE DISTRICT ATTORNEY

Your local DA's office is a natural starting point to assist in an investigation into financial fraud. If the exploitation has been reported to protective services, it is likely that the matter will be referred to the DA for follow-up investigation. It is useful to work with both protective services and the DA as quickly as possible, since the earlier a concerted effort is made between cooperating agencies, the more likely a successful outcome. All DA's offices have assigned state police and, in some instances, financial investigators that can help put together a strong exploitation case.

### 2. THE ATTORNEY GENERAL

**Criminal Response:** The Attorney General has a special unit devoted to investigating and prosecuting economic crime. Oftentimes the Attorney General will handle cases that are referred by local police departments.



**Civil Response:** Sometimes the exploitation does not rise to the level of criminal conduct, yet still deserves a strong response. In these instances, the Attorney General may bring a civil action against the perpetrator for consumer fraud, breach of contract, and other related legal actions. The Consumer Protection Division within the Public Protection Bureau, is responsible for handling these cases. If the situation involves a particular elder's consumer complaint, then the elder should call the Consumer Complaint Line at (617) 727-8400.

### **3. THE UNITED STATES POSTAL INSPECTION SERVICE**

The Postal Inspection Service, begun in 1737, is the oldest federal law enforcement agency. There are approximately 2,000 Postal Inspectors stationed throughout the United States, and they are a frequently underrated resource for local police departments.

#### **a. Mail Fraud**

Mail fraud is any scheme which uses the mail to obtain money or anything of value by offering a product, service or investment opportunity that intentionally does not live up to its claims. A mail fraud scheme can be prosecuted under the Mail Fraud Statute, 18 USC 1341. When proof of a promoter's intent is difficult to acquire, federal prosecutors can protect consumers from substantial monetary loss through proceedings under the False Representation Statute, 39 USC 3005. This requires proof that a false representation was made and that the promoter sought money or property through the mail. Types of schemes typically attacked under this statute include free-prize and free-vacation schemes, phony charity scams, deceptive credit card offers, and promotions of fake medical cures.

#### **b. Local Police Referral**

If officers want to make a referral for investigative assistance, it is critical to obtain the following information from the victim or through investigation:

- (1) Full name and address of the individual seller or firm suspected of fraudulent activities.
- (2) Copies of any advertisements relating to the order or transaction.
- (3) Copies of correspondence, including copies of envelopes, if possible.
- (4) Method of payment, including a copy of the receipt, canceled check or money order.
- (5) Whether money was required before receipt of any merchandise ordered, and the total dollar amount of the loss.

#### **c. Other Investigative Assistance**

In addition to their assistance during the investigation of certain fraudulent schemes, the Postal Inspection Service can also assist local law enforcement as follows: (1) facilitate investigations and the location of suspects by providing information from postal records; (2) institute "mail covers" to assist in the location of fugitives or the completion of felony investigations; (3) help serve warrants for on-duty postal employees on postal property; (4) following the arrest of an on-duty letter carrier on the street, help secure the mail and other postal property in the carrier's possession; (5) assist in obtaining a federal search warrant for, and making a controlled delivery of, mail containing illegal narcotics; (6) assist in child pornography investigations where the mail has been used to send or receive pornographic pictures of children; (7) help obtain an equitable share of private property or proceeds which have been illegally used or acquired, in any case where the federal forfeiture law is applied to postal crime; (8) provide forensic analysis of evidence when involved in a joint investigation with local police.

#### d. Crime Prevention

Postal Crime Prevention Specialist Inspectors can assist local departments in public education efforts in several areas of mutual interest, including fraud schemes conducted through the mail, theft of mail from house mailboxes and mailbox vandalism.

#### 4. OTHER FEDERAL AND STATE AGENCIES

Be open to working with other federal agencies or agencies from different states depending on the scope and nature of the fraudulent schemes.

#### 5. NETWORKING IS KEY

Since con scams are continually changing and since con artists are continually moving from state to state, it is essential for investigators to maintain contacts with other professionals throughout the country. There exist two law enforcement organizations that specialize in the identification, apprehension and successful prosecution of con artists. Calling these organizations can be especially helpful when officers are trying to identify suspects depicted in bank surveillance photographs and videotapes. Any suspect photographs officers obtain can be sent to either one or both of the following organizations for publication in their monthly law enforcement bulletins: The Professionals Against Confidence Crime and The National Association of Bunco Investigators. Finally, there is a new National Fraud Information Center that is beginning to develop data on the incidence of fraud schemes.

#### 6. THE NEWS MEDIA

Once it is learned that a particular confidence crime is being used within their jurisdiction, officers should contact their department's public affairs representative to immediately notify the news media of its existence. Con artists are known to closely monitor the media, and will quickly move on in search of easier prey once their particular scam has been publicly exposed.

#### SOURCE MATERIALS

The materials on caretaker and fiduciary abuse were developed by John Scheft, with materials provided by the Massachusetts Executive Office of Elder Affairs.

The information on investigation was excerpted from *PERF Improving the Police Response to Domestic Elder Abuse*, Module III 16-18 and handout.

Tewksbury, J. (former Assistant Attorney General in Massachusetts) and Heisler, C., "Fiduciary Abuse of the Elderly: A Prosecutor's Perspective," *Journal of Elder Abuse and Neglect*, Volume 3, No. 4 (1991).

Trapp, L., "Financial Abuse," *Serving the Victim of Elder Abuse*. San Francisco Consortium of Elder Abuse Prevention (1986).

Bordenet, J., *AARP Law Enforcement Training Manual*, Section V. His excellent section on fraud and the elderly provided the majority of information concerning elder confidence crimes.

The quotes from John Murphy of the New York City Police Department were excerpted from U.S. Cong., *Select Committee on Aging*, N.Y. field hearings, January 13, 1976.

Detective Dennis Marlock, "How to Spoil a Con Man's Day" reprinted in the *Milwaukee Police Department's Confidence Crime Prevention: A Program Implementation Guide* (Published by the Department in January 1990).

All information concerning the Milwaukee bank program is taken from the *Milwaukee Police Department's Confidence Crime Prevention: A Program Implementation Guide* (Published by the Department in January 1990).

The information concerning the U.S. Postal Service was adapted from from *A Law Enforcement Guide to Postal Crimes* (Published by the U.S. Postal Inspection Service, August 1992).

Friedman, M., "Confidence Swindles of Older Consumers," *Journal of Consumer Affairs*, Vol. 26, No. 1 (Summer 1992).

**KEY CONTACTS****INVESTIGATIVE ASSISTANCE FROM ATTORNEY GENERAL HARSHBARGER**

Criminal Bureau  
(617) 727-2200, ext 2801

Public Charities Division  
(617) 727-2200, ext 2101

Consumer Protection Division  
Public Protection Bureau  
(617) 727-2200, ext 2903

Consumer Complaint Line  
(617) 727-8400

**NATIONAL LAW ENFORCEMENT NETWORKING CONCERNING CONFIDENCE CRIME**

Sgt. Lawrence Miller, President  
The Professionals Against Confidence Crime  
20500 S. Cicero  
Matteson, Illinois 60443

Sgt. Jon Grow, President  
The National Association of Bunco Investigators  
400 E. Pratt Street, Suite 800  
Baltimore, Maryland 21202

The National Fraud Information Center  
800-876-7060

**GENERAL CONFIDENCE CRIME PREVENTION INFORMATION**

Mr. John Bordenet  
Criminal Justice Section  
American Association of Retired Persons  
1909 K. Street, N.W.  
Washington, D.C. 20049  
(202) 728-4363

Ms. Peg Schmitt, Coordinator  
Office of James Doyle, Attorney General  
Office of Consumer Protection & Citizen Advocacy  
P.O. Box 7856  
Madison, WI 53707-7856  
(608) 266-1852

**PREVENTION BY FINANCIAL INSTITUTIONS**

For more information on designing an effective bank education program to prevent financial exploitation, contact:

Elaine Reall, Esquire  
Assistant General Counsel  
Springfield Institute for Savings (SIS)  
1441 Main Street, P.O. Box 3034  
Springfield, MA 01101  
(413) 748-8294

Mr. Craig Fox  
Western Regional Supervisor  
Elder Protective Services  
Executive Office of Elder Affairs  
One Ashburton Place  
Boston, MA 02108  
(617) 727-7751

Finally, A. Paul Blunt, Esquire of Scottsdale Arizona is a nationally recognized expert on fiduciary abuse. He can be reached at (602) 949-8523. Attorney Blunt has written extensively on how banking institutions could prevent exploitation with greater vigilance.

**UNITED STATES POSTAL INSPECTION SERVICE**

Boston Office  
Postal Inspection Service  
25 Dorchester Avenue  
Boston, MA  
(617) 654-5825.

The Postal Service has a number of publications which officers can order from:

U.S. Postal Inspection Service  
Congressional & Public Affairs Branch  
475 L'Enfant Plaza, S.W.  
Washington, D.C. 20260-2160.

## SECTION XIII

# THE ELDERLY AND ALZHEIMER'S DISEASE

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### I. WHAT IS ALZHEIMER'S DISEASE?

First described by Dr. Alois Alzheimer in 1906, Alzheimer's disease is characterized by a condition known as "dementia," which refers to a collection of symptoms (loss of short term memory, thinking and judgment). Alzheimer's is a "degenerative" (it gets worse over time) disease of the brain that impairs the person's ability to remember, to think, to make sound judgments and eventually to care for him or herself. It is a terminal illness that can last anywhere from 3 to 20 years. It affects over 100,000 Massachusetts residents and more than 4 million individuals nationwide. It is the fourth leading cause of death for adults.

Alzheimer's is not a normal part of aging nor is it a psychiatric disorder. It is not a mental illness. There is not a single test for Alzheimer's. The best diagnostic method is for a team of diagnosticians to eliminate all the other possible causes of memory impairment (e.g., a head injury, brain tumor).

### II. NATURE OF THE PROBLEM

#### A. ANTICIPATED POLICE INVOLVEMENT

Alzheimer's is a disease of the elderly. The prevalence among those over age 65 is estimated by the Massachusetts Alzheimer's Association to be 10% and, in the over 85 age group (the fastest growing segment of the population in America), it is a staggering 47%.

Furthermore, of the estimated 100,000 Massachusetts residents with Alzheimer's, about 75% are cared for at home by their families -- and less than 5% of these families have support services such as day care or home health services. The typical caregiver at home is a woman who is 71 years old with at least two chronic health problems of her own to cope with in addition to caring full time for her Alzheimer's patient. Understanding this

state of affairs can help officers comprehend why patients end up wandering from their homes -- it is often because their caregivers are totally exhausted and physically unable to keep giving care. Indeed, caring for an Alzheimer's patient has been called "the 36 hour day." With this in mind, there is a significant chance that officers will become involved at some point in instances of abuse and neglect or other situations concerning this group. Perhaps more importantly, officers will come in contact with Alzheimer's patients who are out in the community, oftentimes disoriented and wandering.

#### B. RECOGNITION

There are no field tests to determine if someone has Alzheimer's so the officer has to look for clues.

##### 1. IDENTIFICATION

The most immediate and clear way to know if someone has Alzheimer's is to look for an ID bracelet with words such as "memory impaired" on it, or for a wallet card with the same message.

Families should be advised to register patients in *Safe Return*, the National Alzheimer's wanderers alert program. For a one-time \$25.00 fee, the patient's key information is placed in a central registry. The patient receives a bracelet with the person's name, the words "memory impaired," and the toll-free number 1-800-733-9596 on the back. The Registry operates around the clock, 365 days a year. When a patient wanders away from a home or institution and the "800" number is called, a FAX alert goes out immediately, after verification, to local agencies such as the police and hospitals. A local representative from the Alzheimer's Association, on call around the clock, then begins working with the missing patient's caregiver and with the

police and others to ensure that a thorough search is done and, afterwards, to try to remedy the situation that caused the elder to wander in the first place.

Still, keep in mind that less than 10% of people diagnosed with Alzheimer's wear an ID bracelet. If there is no explicit identification, check for other forms, such as a hospital bracelet, driver's license, wallet cards, etc. If the patient has no paper ID, then check for identification labels on their inner and outer clothing.

## 2. CLUES

Other than paper identification, pay attention to how the individual looks, interacts, and behaves. As a first responder, keep in mind that individuals with Alzheimer's can be sick or injured but may be unable to communicate this information effectively. Keep your interview and assessment simple and remain calm, as Alzheimer's patients take their action cues from your words and behavior. Consider the following clues in deciding whether you may be dealing with an Alzheimer's patient:

### a. Physical Clues

Inappropriately dressed for weather; vision problems; blank facial expressions (do not assume the person is intoxicated).

### b. Psychological Clues

Short term memory loss; repeats same questions; confused as to time and location; disoriented about their own and others identities; unable to communicate. A person may also be delusional, or even combative if very frightened.

### c. Situational Clues

An elderly person discovered in one of the following situations may be suffering from Alzheimer's:

- (1) **Wandering:** All patients are at risk for wandering and, thus, becoming missing persons. Wandering is caused by restlessness due to boredom, confusion about time or altered physical environment, fear caused by delusion or hallucination. It is estimated that 60 to 70% of Alzheimer's patients will wander from their residences at some point during their illness. Wandering is life threatening because the patient could die within 24 hours or be injured due to an unattended health condition or vulnerable mental capacity.
- (2) **Driving:** Because they may still be driving yet unaware of the severity of their disease, people with Alzheimer's can easily become lost or even leave the scene of an accident after literally forgetting what happened.
- (3) **Shoplifting:** Sometimes Alzheimer's patients simply forget that they have picked something up, that it is necessary to pay for the item, or even that they are in a store. Not all elderly shoplifters have Alzheimer's, but police should consider it a possibility, particularly if the elder appears disoriented.
- (4) **False Reports:** The Alzheimer's patient may report an "intruder in the house" who turns out to be a wife or a husband. Patients may also report thefts that did not occur, especially given that those with Alzheimer's may experience heightened suspicions.
- (5) **Indecent Exposure:** Patients often fidget with zippers and buttons, which can be misinterpreted. Many have also lost impulse control, so if it feels too hot, they may just take their clothes off. If they feel the need to go to the bathroom, they

may just do it without realizing that they are not necessarily in the bathroom.

- (6) **Victimization:** Alzheimer's patients are easy prey for con artists and muggers. Alzheimer's victims may come to your attention when you get involved in legal actions like evictions and repossessions because they have forgotten or just are not able to pay bills.

### **C. INTERACTING WITH THE POTENTIAL ALZHEIMER'S PATIENT**

In virtually any interaction, the object is to return the patient safely to his caregiver.

#### **1. CATASTROPHIC REACTION**

To facilitate a safe return, you must ease the situation and avoid prompting the Alzheimer's patient into a "catastrophic reaction." What most people would consider mildly stressful, like being stopped and questioned by a police officer, can get way out of proportion for an Alzheimer's patient. The patient may break down and cry uncontrollably, try to run, or get extremely angry.

#### **2. AVOID RESTRAINTS IF POSSIBLE**

Understandably, the use of handcuffs and other restraints are likely to cause a catastrophic reaction. You should take advantage of any leeway you may offer the patient by avoiding handcuffs. Bear in mind, however, that the Alzheimer's patient who is frightened and upset may threaten the safety of himself and others. In this situation, restraint may be the best alternative for maintaining order. When restraining an elder, practice techniques for preventing injury.

#### **3. KEEP THE "CLIMATE" COOL**

If you keep your voice "cool," you may help the impaired person -- and others involved -- to do the same. This is why it is also important to use non-threatening hand gestures. It is important to

be firm, but nonaggressive and reassuring. This posture will help you draw the most helpful response from an Alzheimer's patient.

#### **4. BEHAVIOR MANAGEMENT**

The Alzheimer's victim will tend to mimic your body language and the tone of your voice. For example, if the patient sits down in the middle of the sidewalk and will not get in your cruiser, sit down next to him. When you get up, he will get up. If you get in the car, he will get in the car. As another example, if the patient refuses to get out of the cruiser because he says that it is raining when, in fact, it is sunny, then tell him you have an umbrella for him. The disease prevents his brain from processing our reality, so humor the patient. It works and there is nothing wrong with that approach.

#### **5. MAKE COMMUNICATION SIMPLE**

If possible, you should speak to the patient one-on-one, away from crowds and noise. Overloading the patient with too much information in the middle of too much commotion may lead to a catastrophic reaction. Keep the following important considerations in mind:

##### **a. Introduction**

Tell the person who you are and why you are there. You may have to explain several times because the patient often will not remember, from moment to moment, what you think should be obvious.

##### **b. Speak slowly and calmly**

Look directly into the person's eyes.

##### **c. Ask only one question or give only one direction at a time**

Try to ask simple questions. Do not ask questions which require a lot of thought and memory. (Remember that the person's answers may not reflect what he really means to say.)

d. **Keep your instructions positive**

For example, say, "Please sit quietly in the car," not, "Don't try to get out of the car."

e. **Avoid instructions that require the subject to do more than one thing at a time**

f. **If the person does not respond to what you say, wait a few moments and then repeat exactly what you said earlier**

The person may not remember what certain words mean so it helps to reinforce your earlier statement.

g. **Do not assume that the person is hearing-impaired**

Shouting will probably not help someone with Alzheimer's understand the meaning of your words.

### III. **THE MISSING ELDER: POLICE AND THE ALZHEIMER'S NETWORK**

#### A. **ESSENTIAL ORIENTATION**

At the risk of being repetitive, it cannot be emphasized enough that a missing, wandering Alzheimer's patient is an emergency situation. Police cannot insist on a waiting period before taking action. Such a delay might be appropriate in the case of a missing young adult who has the ability to function in the community, but Alzheimer's patients can have a catastrophic reaction at any time when lost, especially as darkness approaches or as a physical impairment becomes more pronounced.

If nothing else, take these cases seriously.

#### B. **NOTIFICATION: THREE WAYS THAT POLICE LEARN ABOUT WANDERERS**

You will encounter or learn about Alzheimer's wanderers in three different ways.

##### 1. **THE STREET ENCOUNTER**

As discussed previously, sometimes you will encounter an Alzheimer's patient during routine patrol or while answering a call that you thought involved a different kind of issue -- for example, an elder being detained by a store owner for shoplifting when, in fact, you discover that the elder is likely suffering from Alzheimer's. In these instances you try to identify the elder and return the person safely to their caregiver. Keep in mind that any unattended person with Alzheimer's is a potential wanderer and likely to be lost and disoriented.

It is also advisable in these circumstances to alert the Alzheimer's Association so that their staff can assess the situation that resulted in the patient's wandering and attempt to develop a more permanent response to any gaps in caregiving or supervision of the patient.

##### 2. **CAREGIVER NOTIFIES THE POLICE**

###### a. **Collect Information**

When you receive a call from a caregiver about a missing Alzheimer's patient, be sure to obtain the following information from the caregiver:

- (1) Caller's name, number and address.
- (2) If patient registered with Alzheimer's program (if so, obtain I.D. number).
- (3) Length of time missing.
- (4) Where last seen.
- (5) Whether or not search of immediate area conducted (if not, request caller to do so).

- (6) Physical appearance.
- (7) Medical condition.
- (8) Whether on foot or driving.
- (9) Communication skills of patient.
- (10) If patient appeared to be agitated before disappearance.

**b. Call Safe Return Operator**

Then you should contact the operator at the *Safe Return* program at the toll-free number, 1-800-733-9596, to communicate the appropriate information that you previously collected.

**c. Anticipate the Distribution of Key Information**

The *Safe Return* program has a large fax communication network, which the operator can access immediately. Fax notices containing pertinent information will be sent to surrounding police departments; the State Police; MBTA Police and Amtrak Police (an important notification since some elders end up attempting to access public transportation); Emergency services agencies, ambulance companies and hospital emergency rooms; the Medical Examiner's Office; local shelters; and, in a recent system improvement, NCIC.

**d. Cooperate with the Local Chapter of the Alzheimer's Association**

The national operator will notify the local chapter to assist the police in coordinating their efforts to find the patient. You may also choose to call the local chapter in your area to seek their assistance and expertise.

**3. CAREGIVER NOTIFIES THE NATIONAL ALZHEIMER'S ALERT PROGRAM**

When this is the situation, the procedure is similar to that outlined above. The *Safe Return* program, having received a call from the caregiver, will obtain the requisite information from the caller and then:

**a. Notify the Local Alzheimer's Association Chapter**

**b. Have the Local Chapter Verify Information**

The on-call staff member at the local chapter will call the reporting caregiver, typically a family member or nursing home official, to verify that the patient is still lost and to discuss the circumstances.

**c. Local Chapter Contacts Police**

The local Alzheimer's staff member will call the police and discuss an appropriate response to the situation.

**d. Fax Network May be Activated**

Depending on the results of the verification process, the fax network at the national program may or may not be activated.

**B. OPERATIONS: THE POLICE SEARCH AND RELATED RESPONSIBILITIES**

The police have two major responsibilities when confronted with a missing Alzheimer's patient. They must handle communications and conduct an appropriate search.

**1. COMMUNICATIONS**

Certain kinds of communication are critical. Thus, the police must:

**a. Place the Report on the NCIC Network**

While it is true that the national Alzheimer's association has this capability, you should



not assume that it will be done. Consequently, be sure to check NCIC to see if the information has been logged appropriately. If not, make sure that it is done.

**b. Issue Radio Report to Surrounding Communities**

You should ensure that a radio report is issued to the surrounding community police agencies. Do not assume that a fax transmittal is a substitute for radio contact. The fact is that most police patrol officers use the radio as their immediate source of information. Especially in cases of lost Alzheimer's patients, time is of the essence.

**c. Ask Neighboring Police Departments to Include a Report in all Their Shift Briefings**

**d. Notify Change of Shifts at your own Department**

Take responsibility for ensuring that future shifts are notified about the missing Alzheimer's patient. Without this step, continuity in the search process can be severed when people on future shifts fail to be informed.

**e. Inform Media Outlets**

Media outlets should be notified eight hours from the time of the patient's disappearance. The media should be notified immediately if the missing person has a life threatening health problem or if the weather is extremely cold or hot, or darkness has begun to fall.

**f. Notify Local Postal Officials**

Postal officials can alert mail carriers, who provide an excellent network of eyes and ears in the community where the patient may still be wandering.

**2. THE SEARCH**

Officers should search the immediate and surrounding areas first. Most Alzheimer's patients are located within a fairly short distance from the place they left. Be sure to check the familiar places of the patient, such as the patient's past place of employment, favorite restaurant, and so forth.

**C. CONCLUSION**

There is another benefit to utilizing the national network. Once an Alzheimer's patient is located, the national operator can fax all of the previously notified agencies and outlets to inform them that the search is over. This saves countless hours of wasted effort and phone calls.

**IV. BOSTON POLICE PROCEDURES: A MODEL RESPONSE**

The Boston Police in cooperation with the Boston Commission on Affairs of the Elderly and the local Alzheimer's association have instituted a thorough procedure to deal with all varieties of missing persons, especially elderly residents and Alzheimer's patients. These procedures apply to a resident who is (1) suspected of suffering from Alzheimer's disease, or (2) of poor mental health, or (3) sixty years of age or older.

**1. NOTIFICATION**

When a missing persons report is received, the responding officer must immediately notify the Boston Commission on Affairs of the Elderly through the Mayor's Hotline: 635-4500. [Although not formally mentioned in the rule, the officer can access, and several commanders have, the *Safe Return* program in the manner discussed above.]

**2. REPORTING AND SEARCHING**

In all cases, a complete intake must be done and appropriate reports filed to activate a Departmental response and the NCIC network. The appropriate Area Commander, in conjunction with officers and the Senior Service Officer (there is at least one S.S.O. officer

assigned to each Area command that serves in this capacity), will coordinate a search for the missing individual.

### 3. FOLLOW UP

Perhaps most impressive about the Boston model, is its emphasis on effective follow up with the person who reported the missing person. Thus, the Area Commander must ensure: At least once each day for 5 days after a report is received, an officer contacts or visits the home of the informant (that is, the person who made the initial report) to ascertain whether the elder or patient has been returned. After the initial 5 day period, that an officer visits the informant at least once a week until the elder or patient has been located. The officer's name and date and time of each contact must be recorded on the missing person report.

## V. CONCLUSION

Increasingly you and other officers are dealing with Alzheimer's patients in the community. Effective intervention is a challenge for the individual officer and for the department.

The officer must demonstrate compassion and judgment when interacting with persons who, through no fault of their own, may be extremely difficult to reach and work with. In the midst of that frustration, remember to keep calm and to keep your perspective and humor. Beyond their obvious limitations, Alzheimer's patients are members of our society to be valued and protected. The neurologist A.R. Luria probably said it best: "People do not consist of memory alone. They have feeling, will, sensibility, moral being. It is here that you may touch them, and see a profound change."

Departments are beginning to understand that, like other issues involving the elderly, a coordinated response is necessary. Police are encouraged to use the network and support of the national Alzheimer's organization and its local chapters. They have the expertise to help find the missing person and to help alleviate the caregiver conditions that prompted the disappearance in the first place.

## SOURCE MATERIALS

This section was drafted by Project Director Scheft with material and information provided by Gerald Flaherty of the Alzheimer's Association of Eastern Massachusetts. Mr. Flaherty adapted much of his material from *Victim, Not Criminal: The Alzheimer Sufferer*, which is published by the National Alzheimer Association. Any reproduction of this material without the permission of the National Alzheimer's Association, Inc. is prohibited.

Also see the *Boston Police Rules and Procedures Manual*, Rule 317: "Missing Children and Persons" (amended rule as of December 30, 1992).

The quote from Dr. Luria is cited in materials used by the *Alzheimer's Association of Eastern Massachusetts* and originally appeared in a letter that Dr. Oliver Sacks mentioned in his book entitled *The Man Who Mistook His Wife For a Hat and Other Clinical Tails*.

## KEY CONTACTS

There are currently three local, Massachusetts chapters of the National Alzheimer's Association. The largest chapter is in Eastern Massachusetts.

**Mr. Gerald Flaherty**  
Director of Communications  
Alzheimer's Association of Eastern Massachusetts  
One Kendall Square, Building 200  
Cambridge, MA 02139  
(617) 494-5150

**Ms. Phyllis O. McGuane**  
Alzheimer's Association of Western Massachusetts  
240 Main Street  
Northampton, MA 01060  
(413) 586-5325

**Ms. Elinor Norwood**  
Alzheimer's Association of Cape Cod & the Islands  
Box 953  
Barnstable, MA 02630  
(508) 775-5656

For help in finding any missing person -- whether an elder, juvenile or disabled person -- a nationally recognized expert is:

Detective John D. Messia  
Area E  
Boston Police Department  
1708 Centre Street  
West Roxbury, MA 02132  
(617) 343-4566  
(617) 343-4595

## SECTION XIV

### MOTOR VEHICLE ISSUES CONCERNING THE ELDERLY

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#### I. INTRODUCTION

##### A. THE SOURCES OF CONCERN

Police officers regularly deal with situations involving individuals who drive in a dangerous manner due to some physical or mental impairment. Officers learn of dangerous driving in two ways:

###### 1. POLICE OBSERVATIONS

After stopping a person for dangerous or erratic driving, an officer may feel that the dangerous operation was caused by some physical or mental impairment rather than by carelessness or recklessness. The circumstances may not warrant the issuance of a citation but the officer may be concerned that if the person continues to drive in the future, public safety could be endangered.

Also, officers should bear in mind that, depending on the circumstances, a traffic stop of an elder who is operating erratically may indicate that the elder is being neglected by a caretaker or leaving an abusive situation. If the situation suggests that abuse or neglect is occurring — for example, if the elder is disoriented, dressed inappropriately, or has visible injuries — officers should inquire further and, if warranted, report the situation immediately to elder protective services.

###### 2. POLICE RECEIVE REPORTS FROM OTHERS

In other cases, police departments receive reports from other individuals concerning a person's dangerous driving behavior. In either instance, police officials may report the situation to the Registrar of Motor Vehicles so that the Registrar may review the matter and determine

whether a person's driving behavior presents a threat to the public.

#### II. IMMEDIATE THREAT LAW

##### A. IN GENERAL

Pursuant to G.L. Chapter 90, s. 22, if the Registrar receives a report indicating that an individual's physical or mental condition or driving behavior presents an immediate threat to public safety, the Registrar may revoke that individual's right to operate a motor vehicle pending a hearing at the Registry. Alternatively, depending upon the seriousness of the case, the Registrar may notify an individual of his intent to revoke a license for improper operation and schedule a hearing. Such action gives the individual an opportunity to offer evidence showing that the individual's driving does not threaten the public.

##### B. AS APPLIED TO THE ELDERLY

Many people drive for over a half century without committing a traffic violation or causing an accident. The Registrar will not, on the basis of age alone, revoke a person's right to operate an automobile. Police officers should not file an immediate threat complaint on the grounds of age alone. The law is intended to address dangerous driving behavior regardless of the age of the driver.

##### C. FACTORS TO CONSIDER WHEN FILING AN IMMEDIATE THREAT COMPLAINT

Police officers should focus on objective observations of factors that impair a person's ability to drive safely:

### **1. PHYSICAL FACTORS**

Physical factors include eyesight, hearing, strength, dexterity, mobility, flexibility, physical illness.

### **2. MENTAL FACTORS**

Mental factors encompass the operator's awareness of surroundings, of time and place, even of his or her identity. They also involve the operator's ability to understand and respond to questions, and to understand the nature of the driving behavior that gave rise to the officer's inquiry. A motorist's diagnosed mental illness or Alzheimer's disease is naturally an important consideration.

### **3. OTHER FACTORS**

Other factors include the motorist's adverse reactions to medication or some combination of treatments. Of course, frequent accidents or dangerous driving unrelated to mental or physical impairment (i.e., the person is just a poor driver) should be reported to the Registrar regardless of the driver's age.

## **D. INITIATING AN IMMEDIATE THREAT COMPLAINT**

### **1. REPORT OF IMMEDIATE THREAT AFTER POLICE OBSERVE DRIVING BEHAVIOR**

Like any police report, details are crucial. Because the report is based on direct observations of driving behavior and the operator, the officer should write the report with the same attention to detail as an O.U.I.L. report. There is an Immediate Threat Complaint Form promulgated by the Registry that should be used. *See page 130 of this manual.*

### **2. CITATION ISSUES**

In many instances, officers may be aware that an elder they have stopped for erratic driving is a well-respected member of the community and possesses a spotless driving record. Under Massachusetts law, officers may exercise discretion and choose not to cite the person for

a motor vehicle violation. Nevertheless, officers should issue a written warning as a means of documenting the dangerous driving behavior and corroborating their account of the incident in case the driver later challenges the immediate threat complaint. In the context of an immediate threat hearing, there is no harm in admitting that someone with a spotless driving record of fifty years got a break. The important issue at such hearings is whether continued driving will pose a threat to public safety.

### **3. FURTHER INVESTIGATION**

Officers should also take the opportunity during motor vehicle stops to make further inquiries. Officers should ask whether the driver has had similar driving problems in the past. Also, it is important to discover whether the driver is taking any medications or is suffering from some physical ailment that impairs the driver's ability to operate safely. Officers should keep in mind that if, after initial observations, the situation shifts to an inquiry seeking evidence of a criminal offense, or the person is considered to be in police custody, constitutional protections regarding criminal cases must be observed. Officers may not use an inquiry, ostensibly for the purposes of gathering information for an immediate threat report, as a subterfuge to sidestep constitutional protections.

### **4. REPORT OF IMMEDIATE THREAT -- CIVILIAN COMPLAINTS**

Depending on the circumstances, officers may wish to file an immediate threat complaint on behalf of the department or merely act as a resource to individuals who wish to report dangerous driving behavior to the Registrar.

At the scene of what appears to be a very minor accident, officers may receive reports from witnesses indicating that the driver's operation or behavior at the time of the accident was so erratic or unusual that the driver's ability may have been impaired for reasons other than alcohol or drug intoxication. On other occasions, a police department may receive reports from civilians who have observed a person's erratic or dangerous driving behavior

or from health care professionals who are concerned about a patient's ability to drive. In both cases, if the officer wishes to file an immediate threat complaint, a detailed investigation and report as described above should be completed. If individuals wish to file a complaint to the Registrar on their own, they must be cautioned that they cannot remain anonymous and that there may be severe sanctions for filing a false report.

#### **E. IMMEDIATE THREAT COMPLAINTS SHOULD BE FILED ONLY AFTER CAREFUL CONSIDERATION**

The immediate threat law is powerful because it enables the Registrar to revoke a license without a prior hearing based solely on a police officer's allegation of dangerous driving behavior. Immediate threat complaints should be initiated with restraint. They should not be used solely as an additional sanction for one bad driving incident. The law is intended only to address drivers whose regular driving behavior presents an immediate danger to the public.

As in all cases involving civilian reports or complaints, officers should satisfy themselves of the credibility and objectivity of the reporting person. It is well known that neighborhood disputes and family feuds can give rise to false, or at least heavily biased, complaints to police departments.

#### **F. REGISTRY ACTION ON IMMEDIATE THREAT COMPLAINTS**

##### **1. INTERNAL REGISTRY REVIEW**

Upon receiving an immediate threat complaint, a Registry official will evaluate it and determine whether the person's license should be revoked immediately or whether the individual should be given an opportunity to challenge the complaint at a hearing prior to any revocation. If the license is revoked without a prior hearing, the aggrieved motorist is entitled to a Registry hearing within 30 days of revocation.

#### **2. REGISTRY HEARINGS**

Depending on the circumstances, the Registrar may notify the party who filed the complaint of the immediate threat hearing. In many cases, especially those involving elders, the issue can be quickly resolved by providing evidence that the cause of the dangerous driving behavior has been corrected and that there is no likelihood of reoccurrence. Generally, a detailed letter from a physician addressing the issue will satisfy Registry officials. Medical concerns are ultimately cleared through the Registrar's Medical Affairs Branch prior to issuance of a license.

In cases where there is clearly dangerous driving behavior not based on an apparent physical or mental impairment, the Registry official may arrange for a driver competency test prior to restoring a license. The driver competency test is an extended version of the road test everyone takes when acquiring a driver's license for the first time.

If the Registrar refuses to restore a license, the person may appeal to the Board of Appeals on Motor Vehicle Liability Policies and Bonds. Pursuant to G.L. c. 90, s. 28 and G.L. c. 26, s. 8A, the three member Board has the authority to affirm, modify or annul the Registrar's decisions. Appeal forms and instructions are available at Registry offices.

#### **III. RESOURCES TO ASSIST ELDERLY DRIVERS**

Police officers are placed in the unique position of identifying and addressing dangerous driving behavior before there is any serious injury to individuals or property. At the same time, officers are traditionally viewed as protectors who people can turn to for help. While officers may feel obligated to report dangerous driving to the Registrar, they may also identify certain easily remedied behaviors in the course of their investigations. Stronger corrective lenses, hearing aids, a change in medications, another rear view mirror or just raising a driver's seat a few inches, may allow an elder to continue to drive safely. The elder can present proof of such remedies to the Registrar at any subsequent hearing.

In other instances, years of bad driving habits or certain physical restrictions may cause an individual to drive dangerously. For these cases, police officers need to be aware that the American Association of Retired Persons (AARP) in conjunction with the American Automobile Association (AAA) present the well known *55 Alive* program. This driving instruction program caters to the needs of the elderly and can help drivers correct bad habits and adapt to physical impairments so they may continue to travel safely. *For more information on this worthwhile program, see Attachment L.*

Numerous evaluations have demonstrated the effectiveness of *55 Alive*. Several studies conducted by a major insurance company, the California Department of Motor Vehicles, and the New York Department of Motor Vehicles, reach the same conclusion -- *55 Alive* graduates are involved in significantly fewer accidents. For this reason, a number of states currently offer a reduction on automobile insurance premiums to elders who have participated in the program.

#### **SOURCE MATERIALS**

The law and information on Registry and appeal procedures was adapted from applicable statutes and legal decisions. Special Assistant Attorney General Kevin Ryan drafted this section with editing assistance from Project Director John Scheft. Information on AARP's program, *55 Alive*, was supplied by the Massachusetts Coordinator, Harry F. Montgomery, Jr.

#### **KEY CONTACTS**

**Kevin Ryan, Esquire**  
**Special Assistant Attorney General**  
**Board of Appeals for Motor Vehicle Liability Policies**  
**and Bonds**  
**470 Atlantic Avenue**  
**Boston, MA 02210**  
**(617) 521-7794, Extension 7428**

**Harry F. Montgomery, Jr.**  
**Massachusetts Coordinator**  
**55 Alive Program**  
**27 Katy Hatch's Road**  
**Falmouth, MA 02540**  
**(617) 540-5455**

For information from the national office of AARP concerning the *55 Alive* program:

**AARP 55 ALIVE**  
**601 E Street, N.W.**  
**Washington, D.C. 20049**



ROBERT M. HUTCHINSON, JR.  
Registrar

*Registry of Motor Vehicles*  
100 Nashua Street, Boston 02114

Request for Immediate Threat License Suspension/Revocation

TO: The Registrar of Motor Vehicles  
100 Nashua Street  
Boston, Massachusetts 02114

Date of Request: \_\_\_\_\_

RE: Operator's Name: \_\_\_\_\_

Incident Date: \_\_\_\_\_

Address: \_\_\_\_\_

Incident Location: \_\_\_\_\_

City: \_\_\_\_\_

D.O.B.: \_\_\_\_\_

Lic.# \_\_\_\_\_

Lic. Exp.: \_\_\_\_\_

We believe that the above licensed operator has committed a violation of the motor vehicle laws of a nature that would give you reason to believe that his/~~her~~ continued operation will be so seriously improper as to constitute him/~~her~~ an immediate threat to the public safety.

The following incident(s), event(s), or circumstance(s) have led us to this belief:

After reviewing the above facts we would ask you to take whatever action you deem appropriate.

Signed under the penalties of perjury this  
Day of: \_\_\_\_\_ 19\_\_\_\_

\_\_\_\_\_  
Signature of Police Chief or  
Authorized Person

\_\_\_\_\_  
Signature and Title of Police Officer  
filing the request

(Please attach copies of any and all documentation to support this request.)

Form # 20385



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## CASE STUDIES

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### I. MRS. MEYERS

You receive a report from the Social Services Department of General Hospital. Mrs. Meyers was brought to the Emergency Room in the middle of the night and was admitted. She was covered with bruises and was comatose. The physician in the E.R. noted in the medical record that the bruises may have been inflicted by another person and instructed the social work department to follow up.

When you get to the hospital, Mrs. Meyers has regained consciousness but cannot speak. She has identification with her and efforts were made to call her home, but there was no response.

How would you proceed?

What are the possible criminal charges?

### II. MRS. JONES

You are assigned to make a well-being check on Mrs. Jones by a concerned neighbor. The neighbor reports that Mrs. Jones came to live with her nephew in his home several months ago. The neighbor has not seen Mrs. Jones in several weeks, and when she asks the nephew about her, he claims that his aunt is not well and doesn't want to see anyone.

When you knock on the door, nobody answers. However, when you shout out, you hear a muffled cry that seems to be coming from the basement. You force entry and find Mrs. Jones confined to a room in the basement. She is very weak and slightly confused.

She manages to explain to you that she had an accident several months ago. At that time, her nephew visited her in the hospital and convinced her to sell her home and come live with him in another city. She agreed to do so, and he had a lawyer draw up a life estate agreement which gave him the assets from the sale of

her home in exchange for lifelong care. Mrs. Jones signed the agreement and went to live with the nephew. While she has recovered from the accident, she is very weak because she has not been given enough to eat. Her nephew confines her to the basement while he is at work. She wants to get out of the situation, but she has no money or friends. She is also terrified of the nephew.

How would you proceed?

What are the possible criminal charges?

### III. MR. ALLEN

You receive a call from a concerned neighbor about the Allens, who live next door. When you go out to the home to investigate, you find that Mr. Allen is an 83 year old stroke victim. Since his stroke two years ago, his 81 year old wife has been providing care for him. However, Mrs. Allen's ability to care for her husband has diminished recently because of her own health problems. Mr. Allen is bedridden with severe bedsores. He is becoming increasingly confused and allows his wife to manage their finances. Mrs. Allen has refused needed medical and personal care for her husband.

The Allens have no children or family members who live close by. They have become increasingly isolated, and Mrs. Allen has stopped letting anyone come to visit.

How would you proceed?

What are the possible criminal charges?

#### IV. JOHN AND STELLA REED

John and Stella Reed (ages 87 and 84 respectively) have been married for 64 years. They live in a home that they have owned for over thirty years. They have one child, who lives in another state.

Stella has Alzheimer's disease. She does not sleep at night, and because she wanders, John cannot leave her alone for long. When he needs to go out, he leaves her locked in a room. Since the room is locked from the outside and he is the only one with a key, she will not be able to get out in the event of a fire. Stella is usually dirty and is often left sitting in urine for long periods of time.

Several years ago, before Stella became ill, she and John made a pact with each other that as long as they were both alive, they would never allow the other to be put in a nursing home. While John is finding it increasingly difficult to care for his wife, he is determined to keep her at home. Because he is embarrassed about her condition, he refuses to let anyone in the house, including service providers, and has refused services.

What services would help this situation?

What would you do?

What obligations does protective services have to intervene?

#### V. MR. BLAKELY

Protective Services receives a call from Superior Gas Company. A customer, Mr. Blakely, is not paying his gas bills, and the company is threatening to turn off the gas.

A protective services worker investigates. He finds that Mr. Blakely is living with his 24 year old daughter, June. June cashes her father's Social Security check for him every month and keeps half for herself. By the end of each month, Mr. Blakely is out of food and frequently can't pay his bills. Mr. Blakely refuses to have anyone else cash his checks for him. He knows that his daughter is taking his money, he recognizes that his health is being compromised, and he understands that his utilities may be cut off if the situation continues. After discussing the situation at length, Mr. Blakely refuses to

change the situation, and the protective worker closes the case.

What obligations does protective services have to intervene?

Could there be future events that might change your response?

#### VI. MRS. ANDERSON

A woman calls the police about her neighbors, Mr. and Mrs. Anderson. The neighbor is concerned because Mrs. Anderson has severe mental disabilities and is confined to her bed. The neighbor doesn't think that Mr. Anderson is capable of taking care of his wife. Sergeant Stern investigates and finds Mrs. Anderson in poor condition. She is unresponsive to his questions and doesn't seem to know where she is. In talking to the neighbor and the Andersons' physician, Sergeant Stern learns that Mrs. Anderson had a fall recently and may have broken her hip. She has not been treated. The physician is concerned because the last time he examined Mrs. Anderson, she was beginning to develop decubiti or bed sores.

Sergeant Stern contacts protective services. They convince the Andersons' daughter Betty to file for and obtain conservatorship. Betty has her mother hospitalized and treated for the decubiti and the hip injury. Although Betty believes that her mother would be better off in a nursing home, she knows that her mother has frequently said in the past that she never wants to be placed in one. As an alternative, Betty hires home care for her mother so that she can continue to live at home.

What legal, ethical or practice principles can be applied to this case?

## VII. MRS. HART

Mrs. Hart has a 29 year old daughter who is an alcoholic. The daughter is unemployed and frequently asks her mother for money. When she doesn't get it, she threatens her mother with violence. The conflicts have escalated, and the daughter recently hit her mother with a board. The mother suffered injuries resulting in hospitalization. There were several witnesses, one of whom called the police. Sergeant Lewis took the report. He discovered that Mrs. Hart had a restraining order against her daughter. This allowed him to take the daughter into custody.

Mrs. Hart does not want her daughter to go to jail. Protective Services has also been involved in the past, and Mrs. Hart calls her caseworker to ask for his help in getting the charges dropped. The worker tells Mrs. Hart that he will see what he can do.

What legal, ethical, or practice principles can be applied to this case?

## VIII. ETHEL AND JOSEPH

Ethel is 84 years old and lives with her 58 year old son, Joseph. Ethel had a stroke several months ago which left her partially paralyzed and in need of a lot of help with her personal care, including eating, bathing, going to the bathroom, and walking. She has an attendant who comes in for a few hours several mornings a week but spends much of her time alone or with Joseph.

Joseph has never been married and works sporadically as a construction worker. Business has been bad in the last few years, and he has been unemployed for long periods. Joseph has a drinking problem, which is worse when he isn't working.

In recent months, Ethel and Joseph have not paid their electric bill. A representative from the electric company made several attempts to call the family but was not able to reach them. He went out to the home. While no one answered the door, he heard a weak woman's voice respond to him when he called out. Concerned about her wellbeing, the representative called the Police, and you are asked to check on her wellbeing. You arrive just as Joseph is getting home, and he allows you to come in to talk to him and his mother.

When you ask Ethel how she is doing, she says that everything is fine. She doesn't understand the electric company's concern and is not aware that there are problems with the bills. She states that her Joseph pays all of the bills and that she has sufficient income to cover it. When you ask about other family members, she tells you that she has no other relatives in town. She explains that while she has friends, she never sees them anymore because, as she explains, "Joseph likes our privacy."

What indicators of abuse and neglect can you identify?

## IX. THE REPAIRMAN

An elderly widow received a knock on her door by a so-called repairman. The repairman was exceptionally friendly and charming, commenting on the beauty of the day and the attractiveness of her lawn.

The man alleged that it was his father who had performed the work on her lawn, two years previously. He claimed that he needed to inspect the ceiling inside of her home, as recommended by her father.

The man was allowed entry into the home. He appeared to have been inspecting the texture of the ceiling and claimed that a finish must be applied to the roof to avoid damaging leakage.

The woman accepted the offer of service and was told that the charge would be \$75.00. After the man sprayed a substance on the roof, he informed the woman that the charge would be \$1,270.00. When she inquired as to his word of \$75.00, he claimed that he clearly stated it would cost \$75.00 per gallon.

The woman exclaimed that she wanted to discuss the matter with her son. The man threatened that if she chose not to pay him, he would file suit against her for breaching a verbal contract. The woman signed a check for \$1,270.00.

How would you handle this case?

Is this conduct criminal? If so, what charges might you bring?

**X. MR. AND MRS. CONNORS**

You are called to the Connors residence by Mrs. Sally Connors, who is 91 years old. Sally is frightened by her husband Alex. He is 93 years old. Sally tells you that when she attempted to call the police, Alex yelled at her and tried to stop her. He may have bruised her arm. You see a bruise on Sally's arm, but you are not sure whether it is new. Sally is in good shape physically but probably subject to easy bruising because of her age.

Alex has clearly been drinking and, while you are there, attempts to grab his wife twice and is growing increasingly loud, threatening and argumentative.

What would you do?

**SOURCE MATERIALS**

Case studies I through VIII were created by PERF in their publication *Improving the Police Response to Domestic Elder Abuse*. With PERF's permission, they have been reproduced in this manual to promote discussion of important issues that officers and protective service workers deal with on a daily basis.

Case study X was created by Peter Antonellis of Elder Services of Cape Cod and the Islands, Inc.

**DISCLAIMER**

*These case studies are fictitious accounts, and any similarity to any actual incidents or individuals is purely coincidental.*

## ATTACHMENTS

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- A. DEMOGRAPHICS OF AGING AND CHARACTERISTICS OF AGING EXERCISE
- B. AN EXAMPLE OF COMMUNITY OUTREACH: OFFICER RONALD NEWTON OF THE WEST BROOKFIELD POLICE DEPARTMENT
- C. INFORMATION ON THE AARP TRIAD PROGRAM
- D. NORWOOD POLICE DEPARTMENT DOMESTIC VIOLENCE CHECKLIST
- E. ELDER SERVICES OF CAPE COD'S PRE-TEST CONCERNING PROTECTIVE SERVICES
- F. ADDRESSES AND PHONE NUMBERS OF THE 27 PROTECTIVE SERVICE AGENCIES IN MASSACHUSETTS AND THE COMMUNITIES SERVED
- G. STRUCTURE, SERVICES, AND STATISTICAL INFORMATION ON PROTECTIVE SERVICE REPORTS IN MASSACHUSETTS
- H. EXECUTIVE OFFICE OF ELDER AFFAIRS: INFORMED CONSENT TO SERVICES FORM
- I. POSTAL INSPECTION SERVICE'S WARNING TO UNWARY CONSUMERS
- J. NEWS RELEASE CONCERNING A CASE FROM THE PUBLIC CHARITIES DIVISION OF THE A.G.'S OFFICE
- K. THE MILWAUKEE PROGRAM FOR FINANCIAL INSTITUTIONS TO PREVENT CONFIDENCE CRIME AND THE SPRINGFIELD INSTITUTION FOR SAVINGS CAUTION FORM
- L. INFORMATION ON 55 ALIVE
- M. POLICE EXECUTIVES RESEARCH FORUM (PERF): LIST OF NATIONAL RESOURCES AND VIDEOTAPES CONCERNING ELDER ISSUES
- N. ELDERLY PROTECTION PROJECT: SCHEDULE OF ADVANCED LAW ENFORCEMENT TRAINING
- O. ELDERLY PROTECTION PROJECT: PROGRAM AGENDA

## DEMOGRAPHICS OF AGING

1. Q: Since 1900, how many years do you think have been added to average life expectancy in this country?  
  
A: A 6 years  
B 16 years  
C 26 years  
D 36 years
2. Q: In Shakespeare's day, what percentage of children died by the age of 15?  
  
A: A 40 percent  
B 50 percent  
C 60 percent  
D 70 percent
3. Q: In 1900, those who lived to the age of 65 constituted only 4 percent of the U.S. population. By 1990, what was the percentage of those over 65?  
  
A 6 percent  
B 12 percent  
C 18 percent  
D 24 percent
4. Q: What is the projected percentage of those over 65 in the U.S. by the year 2020?  
  
A: A 15 percent  
B 20 percent  
C 25 percent  
D 30 percent
5. Q: In 1900, a child born in the United States could expect to live to age 47. To what age can a child born in 1990 expect to live?  
  
A: A 65 years  
B 70 years  
C 75 years  
D 80 years
6. Q: What is the fastest-growing segment of our population by age?  
  
A: A 75 and over  
B 80 and over  
C 85 and over  
D 90 and over

## CHARACTERISTICS ABOUT AGING

1. Q: Advanced age is a good predictor of many things about someone's attitudes, behaviors, and capabilities.  
A: T\_\_\_\_\_ F\_\_\_\_\_
2. Q: The age of 65 is an accurate point at which to identify the onset of "old age." (Consider Social Security and pensions.)  
A: T\_\_\_\_\_ F\_\_\_\_\_
3. Q: People over 65 consider themselves to be old, and the majority are unhappy.  
A: T\_\_\_\_\_ F\_\_\_\_\_
4. Q: The 70-year-old of today is more like a 50-year old 20 years ago.  
A: T\_\_\_\_\_ F\_\_\_\_\_
5. Q: Most older people live alone or in nursing homes.  
A: T\_\_\_\_\_ F\_\_\_\_\_
6. Q: The majority of people over 65 are senile or mentally dysfunctional (defective memories or disoriented).  
A: T\_\_\_\_\_ F\_\_\_\_\_
7. Q: Some older people get paranoid.  
A: T\_\_\_\_\_ F\_\_\_\_\_
8. Q: Age causes the loss of mental abilities.  
A: T\_\_\_\_\_ F\_\_\_\_\_
9. Q: Most older people are financially dependent and do not work.  
A: T\_\_\_\_\_ F\_\_\_\_\_
10. Q: Most people in their 60s are either become frail or are in poor health.  
A: T\_\_\_\_\_ F\_\_\_\_\_

WEDNESDAY  
DEC 15 1993  
NEW ENGLAND NEWSCLIP AGENCY, INC.

# Police target abuse of elderly

## Patrolmen get training in spotting scams and other crimes

By Frederick A. Smock  
Telegram & Gazette Staff

WEST BROOKFIELD — Deck the halls with boughs of holly, 'tis the season to be jolly.

But be careful, 'tis also the season to get ripped off.

That was the warning given to the 400 senior citizens who receive the monthly newsletter put out by the Council on Aging.

It was written by Patrolman Ronald J. Newton, the West Brookfield Police Department's elderly protection officer.

Newton is one of a growing number of police officers across the state being trained to help older residents deal with financial, physical and other types of abuse.

### NEW PROGRAM

It's part of a new program initiated by state Attorney General Scott Harshbarger.

"We want to develop a program so that every single police officer in Massachusetts understands their reporting obligation when they encounter elder abuse, neglect and financial exploitation," said John S. Scheft, director of the Elderly Protection Project.

Newton, who recently completed a 16-hour seminar run by Scheft, said he wasn't enthusiastic about the training program before going into it, but came away from it with ready to go to work.

"I remember, on the way home, saying to the guy that was with me, 'We can apply this in every aspect of our community,' " he said. "It was a unique opportunity."

"I remember, on the way home, saying to the guy that was with me, 'We can apply this in every aspect of our community.' It was a unique opportunity."

RONALD J. NEWTON  
PATROLMAN



Newton said a large part of his work as the elderly protection officer will be educating others in the community about financial exploitation and other forms of elder abuse.

With two rest homes and a newly opened housing project for the elderly, the town needs to have trained people able to recognize abuse, he said.

Scheft said physical or financial abuse of elders is chronically under-reported in Massachusetts. He expects the number of reported cases to increase once the training program is completed in May.

Studies in other states have shown that police officers trained to recognize the various forms of

elder abuse have a better record of solving such cases than untrained officers.

"The key is that they have the sophistication to recognize it (elder abuse), but also they work with social service agencies and are able to get situations dealt with," he said.

When the intensive training program is completed, Scheft hopes to have at least one police officer, in every town with a full-time force, trained as an elderly protection officer. All state police officers are also being trained as elderly protection officers, he said.

Under Massachusetts law, he said, every police officer is re-

quired to report instances of abuse and neglect. The reports go to one of the 27 protective agencies across the state set up to help the elderly.

These agencies are working with the attorney general's office to provide the training, which, in turn, helps build a bond between the police and the agencies, Scheft said.

Scheft said the least reported of all major crimes are con games — whether by phone, in the mail or in person — involving the elderly. "Only 3 to 8 percent of these crimes are reported," he said.

"We tell police officers that when you hear about a case in your community you know that there are 30 other people you are not hearing from," he said. "That's why there has to be a pro-active response from police officers."

Scams like those in which people call or visit the homes of elderly residents claiming to be a "house inspector," or a "bank examiner" or a "driveway sealer," can happen at any time and in any city or town, Newton said.

Elderly people who are taken by such scams often suffer from "vicarious victimization" when they realize what has happened, he said.

"They won't tell their family or caregiver, which makes them more vulnerable," he added.

The best advice to the elderly is not to give credit card numbers or other personal information over the phone or in person to someone they don't know, Newton said.

"Just say 'no,' and have someone check it out," he said.



# NO SNOWING SANTA

*Among the banging the clanging, the clinking the tinkling, the yelling and the screaming. It happens. There it goes again. Santa pulls his nose out of his list for a split second, with his head tilted in a certain direction. He shakes his head and mumbles to himself in a chuckle, no it cant be. But, just a minute, there it goes again. He stands up and yells, quiet everyone. The noises of the productive little shop come to a screeching silence. Do you hear that?, said Santa. Why, there it goes again. Ruben, yells Santa. Out from the rear rushes the rednosed elf. Yes papa ,says Ruben. Is that what I think it is? Well, I don't know what you think it is, but I know its the telephone. Why yes! Get it for me please. It's very rare I get a call. Hold on Santa. Ruben answers the phone politely and then tells Santa it is for him.*

*Santa takes the phone and gives a jolly ho ho and hello. All the elves stand with their good ears tilted to the phone. Santa looks at the captive audience and asks to be excused for one moment as he places his mitten over the phone. Alright buddies, I think I can handle this on my own, now back to work please. We only have a few days left until Christmas.*

*After a few seconds on the phone, Santa realizes that this is a sales pitch. Yes. Yes . Yes. Oh, I know the holidays are coming. I just live for those holidays. Well, my livelihood depends upon my productivity too. Santa becomes a bit perplexed now. I beg your pardon sir, but there is no one that requires me to have an annual physical, nor do I feel the need to call your "900" number to speak with a physician, and further more sir, I think you should stop this dishonest line of milarki. Santa pulls the phone away from his ear and looks right at the receiver and says, " No, and when I say no I mean NO!" Now, goodbye and have a MERRY CHRISTMAS.*

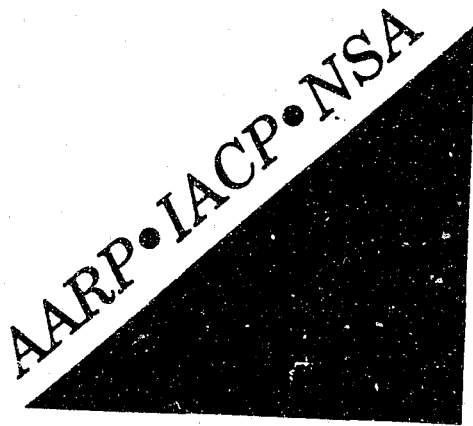
*Just then Mrs. Claus enters the room with quite a concerned look on her face. She looks at Santa and says," Why, that wasn't you talking to someone like that was it?" Why yes mama,said Santa. And why would you say something like that ?,she asked.*

*Santa sat down in his fluffy red chair and told mama all about the con..A few minutes of intense listening by Mrs. Claus go by, and she interrupts Santa. You know papa,she said. You've done the right thing. Every year, thousands of us Elder Americans become victims of some form of FINANCIAL EXPLOITATION. Why, when I was visiting a dear friend in Massachusetts, she told me about a brand new program that their Attorney General Scott Harshbarger was instituting. They call it the ELDERLY PROTECTION PROJECT. This project is created to assist us elder folks in becoming educated in regard to recognizing all forms of congames and scams. It also helps us undrestand how we can ask our financial institutions and police departments to assisist those of us who have fallen victim to scams or any type of financial exploitation. I know for a fact that local police officers are being trained to deal with this type of problem and in 1994 there will be a host of opportunities to learn more about protecting ourselves against these types of people*

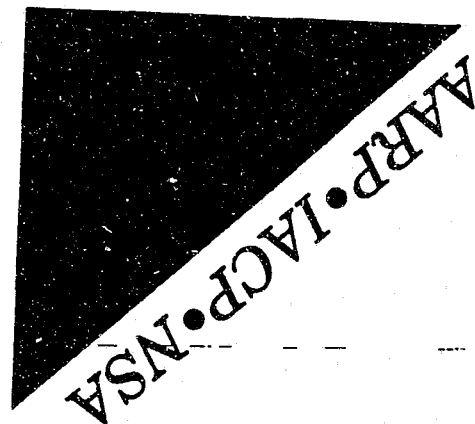
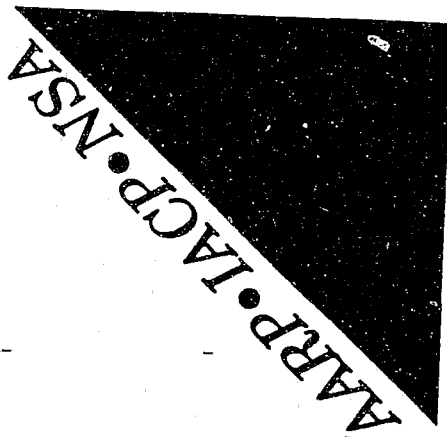
*This year , thousands of elderly people will fall victim to confidence schemes and con artists. If you want to put a stop to the financial exploitation of elder americans, please notify your local police department and ask to speak with the Elderly Protection Officer. HAPPY HOLIDAYS!!!!*

*By Patrolman R. J. Newton W.B.P.D.*

ATTACHMENT C



**TRIAD**



**Law Enforcement  
and  
Seniors  
Working Together**

## **What is a Triad?**

A Triad consists of a three-way effort among

- a sheriff,
- the police chief(s) in the county, and
- AARP or older/retired leadership in the area

who agree to work together to reduce the criminal victimization of older citizens and enhance the delivery of law enforcement services to this population. It provides an opportunity for the exchange of information between law enforcement and senior citizens. It focuses on reducing unwarranted fear of crime and improving the quality of life for seniors. A Triad is tailored to meet the needs of each town/city/county and is governed by a senior advisory council (S.A.L.T.).

## **Why is Triad Necessary?**

Older Americans comprise the most rapidly growing segment of the population. One in every eight Americans is already age 65 or older (31.8 million in 1991). Increased life expectancy is leading to new issues and problems for the criminal justice system as most communities experience a dramatic increase in the number of older persons. Calls for service, crimes, victims - all are changing.

## **How Did Triad Get Started?**

The American Association of Retired Persons (AARP), the International Association of Chiefs of Police (IACP), and the National Sheriffs' Association (NSA) signed a cooperative agreement in 1988 to work together to reduce both criminal victimization and unwarranted fear of crime affecting older persons.

The three national organizations agreed that police chiefs, sheriffs, older leaders, and those who work with seniors, working together, could devise better ways to reduce crimes against the elderly and enhance law enforcement services to older citizens. This, they believe, is true community policing, providing better service to a population which appreciates, respects, and supports law enforcement.

## Who Carries Out Triad Activities?

The senior advisory council, often called S.A.L.T. (Seniors and Lawmen Together) is the key component for the success of a Triad. In each community the S.A.L.T. Council acts as an advocacy/advisory group and provides a forum for the exchange of information between seniors and law enforcement.

Council members are selected and invited by the chief(s) of police, the sheriff, and someone representing older citizens - an energetic, knowledgeable senior or someone from the Agency on Aging, AARP, RSVP, ministerial association, etc.

Council members can be valuable source of input. They can assist in determining the concerns of the community's elderly persons, assess the availability of existing services and programs for the elderly, and recommend additional strategies. S.A.L.T. Council members may also take part in the crime prevention and victim assistance portions of the Triad program, and help to identify potential volunteers to carry out Triad activities.

## What Can Triad Do?

Triad is a program involving law enforcement and older Americans. The focus is determined by both, assessing the needs of the particular community. Areas with more serious crime problems may focus on crime prevention and victim assistance. Areas where older persons are not often targets for crime may decide to concentrate on reassurance programs, training for law enforcement, and involving volunteers within the law enforcement agencies.

The S.A.L.T. advisory council (Seniors and Lawmen Together) plans activities and programs which will involve and benefit both law enforcement and seniors. Some Triads sponsor:

- o Crime prevention programs for older persons
- o Information on how to avoid criminal victimization
- o Expanded involvement in Neighborhood Watch
- o Home security information and inspections
- o Personal safety tips

- o Knowledge of current frauds and scams
- o Training in coping with telephone solicitations and door-to-door salesmen
- o Elder abuse prevention, recognition and reporting information
- o Training for deputies and officers in communicating with and assisting older persons
- o Reassurance programs for older citizens
- o Telephone call-in programs by and for seniors
- o Adopt-a-senior visits for shut-ins
- o Buddy system for shut-ins
- o Emergency preparedness plans by and for seniors
- o Senior walks at parks or malls
- o Senior safe shopping trips for groceries
- o Victim assistance by and for seniors
- o Courtwatch activities
- o Refrigerator cards with emergency medical information
- o Older persons volunteering within law enforcement agencies

Triads across the country are involved in some of these aspects of a Triad, choosing activities which the S.A.L.T. Council agrees will be beneficial to citizens in that area.

## **Triad Plan of Action**

- I. Chief and sheriff meet to discuss
  - A. Crimes against seniors
  - B. Possible areas of involvement needed
  - C. Composition of Senior Council (S.A.L.T. group)
  - D. Designation of S.A.L.T. chairman
- II. S.A.L.T. is selected and meets
  - A. Topics for discussion for this group:
    1. Demographics of aging
    2. Countywide senior statistics
      - a. Numbers of older persons
      - b. Crimes against seniors
      - c. Problems faced by seniors
      - d. Fears of older persons
  - B. Determine currently available programs
  - C. Determine unmet needs

- D. Survey of senior community
  - 1. Designed and supervised by S.A.L.T. Council
  - 2. Needs and victimization informally determined
- E. Assign group members to specialty areas
  - 1. Crime prevention
  - 2. Victim assistance
  - 3. Recruitment of senior volunteers
- F. Training for volunteers in law enforcement
- III. Crime prevention education launched
  - A. Senior event such as sponsored breakfast or lunch
  - B. Programs for and by seniors
    - 1. Senior housing
    - 2. Neighborhood Watch groups
    - 3. Community centers
    - 4. Senior centers
    - 5. Churches
    - 6. Others
  - C. Topics
    - 1. Prioritize crimes, both actual and perceived
    - 2. Combat unwarranted fear of crime
    - 3. Cover topics such as fraud, scams, home security, marking of valuable property, etc.
- IV. Victim assistance program, initiated or expanded
  - A. Volunteers to tie in with existing program
  - B. Volunteer training for new programs
  - C. Volunteers to address means of increasing victim reporting
  - D. Other
- V. Training for law enforcement officers
  - A. Concerns of elderly citizens
  - B. Effective means of communicating with older persons
  - C. Possibility of older persons conducting parts of training
- VI. Expansion
  - A. S.A.L.T. evaluates activities and success regularly
  - B. Volunteer responsibilities increase
  - C. Law enforcement agencies work together on additional programs

***For more information on Triad, contact Betsy Cantrell at 800-424-7827 or AARP Criminal Justice Services at 202-424-2222.***

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**TRIAD**

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# TRIAD NEWS

*Crime Prevention for the Elderly*

*Fall 1993*

*Triad is a cooperative program sponsored by the American Association of Retired Persons, the International Association of Chiefs of Police, and the National Sheriffs' Association.*

## Carbondale, Illinois, Triad Going Full Steam Ahead

The Triad activities which began in Carbondale, Illinois, in April, 1992, now include a wide variety of programs. Chief Don Strom of the Carbondale Police Department reports that S.A.L.T. Council activities are expanding with the help of several committees.

Current emphases include:

- 1) Training: preparing a curriculum for police officers/deputies.
- 2) Resources: preparing a guide for officers concerning the needs of seniors.
- 3) Financial: training for financial institutions on detecting and coping with possible scams against seniors in banks, etc.
- 4) Gatekeepers: training and involvement of public works crews, telephone company employees, and, most recently, newspaper carriers who learn to observe and report possible problems of older persons.
- 5) Courtwatchers: Support for victims and seniors volunteering to observe courtroom procedures on a regular basis.

"Operation SEEniors" and Red Flag are succeeding in Carbondale/Jackson County. A local hardware store donated a number of peepholes which could be installed free of charge in the doors of citizens over the age of sixty, thus "Operation SEEniors." The Red Flag pamphlets were made available to pharmacies and banks to distribute and alert seniors to problems which might affect them.

Equally successful is a recent opportunity to offer high-quality crime prevention training to those who deliver services to elderly home-bound clients. Directors of Meals on Wheels and other services then pass on training in home security and other relevant topics to those with whom they work.

## Florida Triad Adds Activities

Orange County, Florida, reports that it's S.A.L.T. Council is entering its third year. Meetings are held in a different town or area of the county each year, according to Mrs. Hilda Ems, who chairs the council.

Four Senior Safety Seminars are scheduled annually in different areas of the county. These seminars focus on personal safety, safety in the home, frauds, scams, con artists, and pedestrian, auto, and bicycle safety, among other topics.

Members of the S.A.L.T. Council include V.O.C.A.L. (Victims of Crime Assistance League), the Orange County Sheriff's Office, ten police departments, AARP, and senior representatives from the various towns and cities.

The Council has undertaken several new projects including a community resources handbook for law enforcement personnel and decals for older residents' front doors reminding them to keep the door locked and look and inquire before opening it to anyone. They are also urging that hazardous pedestrian crosswalks have "Look Left" or appropriate wording painted on the crosswalks.

## **New Triad in Hillsborough County, Florida**

in a county where nearly one in five residents is 60 or older, numbering about 145,000 persons, Triad seems a natural involvement. Sheriff Cal Henderson of Hillsborough County, Chief Tom Matthews of Temple Terrace Police Department, Chief Eduardo Gonzalez of the Tampa Police Department, Chief Troy Surrency of the Plant City Police Department, and Edith Freedman, AARP District Director signed a joint resolution to form a Triad on July 8.

They agreed "to work jointly to develop and implement policies and programs to reduce criminal victimization of senior citizens, serve the special needs of older victims, and enhance the delivery of law enforcement service to the elderly."

The agreement was signed at a press conference attended by the law enforcement leaders and AARP District Director Freedman. Representatives of television, radio and print media were present. "We are in the process of forming a S.A.L.T. Council. We are committed to this important project," says Sheriff Cal Henderson.

## **Senior Summit in Maryland**

The Frederick County, Maryland, Triad, formed earlier this year, sponsored a Senior Summit on October 4. This event was well-attended and brought together both older residents of the town of Frederick and the county, and those who provide services to the elderly.

County commissioners, law enforcement leaders like Sheriff Carl Harbaugh of Frederick County, and representatives of senior services such as Adult Protective Services spent a morning discussing programs and services available to seniors. Crime prevention officers presented Neighborhood Watch information and discussed frauds, scams, elder abuse, and other crimes against the elderly.

## **First Triad Underway in Arizona**

Chief Mike Branham of the Youngstown Police Department and Sheriff Joseph Arpaio of Maricopa County met recently and agreed to sponsor a Northwest Maricopa Triad. This marks the first Triad begun in Arizona.

## **Quality of Life in Personal Care Homes Targeted**

The active Columbus/Muscogee County, Georgia, Triad has added a personal care home relocation task force to its areas of involvement. When the S.A.L.T. Council learned that the rules and regulations governing personal care homes were not being enforced, the law enforcement members of the Council swung into action.

An ombudsman pointed out that some older persons residing in personal care homes were suffering from abuse and neglect. Members of the S.A.L.T. Council, in conjunction with law enforcement, visited a home to investigate a complaint. Subsequently, the operator of the home was arrested, and proper lodging and care for residents was located by Family Services.

Now a task force on enforcement is urging the city and county to adopt regulations and see that all such homes are licensed and inspected locally, with periodic reviews.

The Columbus Triad was started in 1991 by Chief Jim Wetherington, Sheriff Gene Hodge, and Dr. Charles Mendoza, representing AARP.

## **Citizen Police Academy**

A number of Triads are enthusiastic about their involvement with the Citizen Police Academy approach to community education.

Duncanville, Texas and Bridgeport, Connecticut are two of the areas where high value is placed on informational presentations to citizens who apply to attend or are invited to take part.

Some Triads, including the Union County, North Carolina Triad, believe that, early in the life of each S.A.L.T. Council, citizens should be offered the chance to learn more about law enforcement and the criminal justice system.

Few citizens are informed about the mandate, emphases, and problems of their law enforcement agencies, including the different roles of the police departments and sheriffs' offices and the state police or highway patrol. Therefore, more and more law enforcement leaders advocate this worthwhile program.



## Hampshire County, MA

The goal of the Hampshire County, Massachusetts 'Triad', Sheriff Robert Garvey said, "is to allow the elderly to live safely without fear, and give them somewhere to turn when they're having problems".

"We'd like to make the community of Hampshire County as comfortable as possible for seniors," Garvey said, "that's what the Triad is all about."

Subjects to be discussed at future S.A.L.T. meetings include fraud, scams, abuse, neglect, money management, and consumer protection.

The S.A.L.T. Council is now discussing how best to relay information from the law enforcement sector to the seniors, and vice versa. As a start, Council on Aging Director Christy Geffen said she is working with Kendra Warhurst, coordinator for WETC-13, to put together televised programming for seniors. And Easthampton Police Officer Ronald Schaffer agreed to compile statistics on crime in Easthampton to provide seniors with accurate information.

*Does Triad work? "Triad gets results. It breaks down barriers." - Undersheriff Ted Freeman, Monmouth County, New Jersey. . . "Each program assesses and addresses the needs of seniors. All have a common thread yet are tailored to the needs of the seniors in that community." Sheriff Stanley Glanz, Tulsa County, Oklahoma.*

## New York Focuses on Seniors

Joe Dominelli, executive director of the New York State Association of Chiefs of Police, understands aging issues quite well. As a senior — and a long-time law enforcement professional as well — he lent strong support to the 1993 state legislation which was designed to create a means of coordinating law enforcement and social services cooperation in delivering services to the elderly.

This Triad thinking seems to be pervasive statewide, as several areas in New York race to organize the first Triad in the state. Triad NEWS has learned that Seneca County (Waterloo), New York has begun a

Triad, and other counties plan to get programs underway. Sheriff Thomas Fox of Seneca County reports that he has met with police departments and older citizens who agreed to work as a Triad.

## New York Legislation Signed

Governor Mario M. Cuomo signed a bill creating a New York State Committee on the Coordination of Police Services to Elderly Persons. Sponsored by first term Utica Assemblywoman RoAnn Destito, the bill is the first of its kind in the nation.

The committee will consist of representatives of the superintendent of state police, the sheriffs and chiefs of police of the state and the director of the State Office for the Aging. Amendments expected to be enacted by the end of the current legislative session will add the Division of Criminal Justice Services (as co-chair) and the Crime Victims' Board to the Committee. The Committee will be charged with promoting the Triad concept.

A unique feature of the new law is a provision that enjoins the Committee to solicit the participation of retired law enforcement professionals in carrying out this mandate. The bill's backers want to create opportunities for such volunteers to apply the skills and expertise acquired during a career in police service to improving services to seniors. These might include crime prevention programs, neighborhood watch, and others. Said Ms. Destito: "Police work is, unfortunately, one profession for which mandatory retirement ages are unlikely to be abandoned. That should not deprive the public of the contributions of willing volunteers."

The bill was widely supported by law enforcement, religious groups, and seniors' advocates. The first organization to endorse the bill was the 600-member New York State Association of Chiefs of Police in a strongly-worded memo filed by its executive director, Joseph S. Dominelli. A number of individual retired police officers and the 4,000-member New York State Troopers' PBA also filed a memorandum in support.

The bill takes effect in April 1994 at the beginning of the next state fiscal year.

## Is It Time to Get Triad Underway?

Triad — you liked the idea of a cooperative program when you first heard of it. You talked with some of the members of your department — and even some seniors, who were a) skeptical, b) interested, and/or c) enthusiastic.

But perhaps up to now, you've been inundated with activity, including a problem or two. And Triad may have dropped to the back burner.

Sheriff Robert Prinslow of Salem, Oregon, finds this "the best program in my 36 years in law enforcement," and Chief William Miller of Skokie, Illinois, says "the elderly need to know that people care. And they need a working knowledge of crime prevention. When we form an effective coalition, we can do something meaningful for them."

IF your town, city, or county has a senior population which is abused or victimized or fearful — or if you aren't sure about the level of victimization, abuse or fear, it is indeed time to get involved with Triad.

IF some older adults in your area are in declining health, live alone, have few supportive family members nearby, it is time to get involved with Triad.

WHETHER your department cooperates actively with other law enforcement agencies in the area — or seldom — it is time to get a Triad underway.

With your interest and encouragement, a Triad will flourish in your area. Most of the 80 Triads operating to date report that the time and cost (if any) are minimal— especially compared to the assistance rendered to both law enforcement and the elderly.

YOU and your senior volunteers will be a winning combination. YOU and your fellow law enforcement officers will experience the satisfaction of a DARE program, the cooperative attitude of a lively Neighborhood Watch, and the gratitude of those who support law enforcement most enthusiastically — seniors.

*Older persons, chiefs of police, and sheriffs are often like three spinning tops, rarely bumping into each other, until Triad brings them together." - Retired Sheriff Walt Gallagher, Orange County, Florida.*

## Training Offered in Louisville, Kentucky

Criminal victimization and abuse of older persons is one of the critical concerns of many Triads. The National Crime Prevention Institute has scheduled a one-week training session March 28 - April 1. Topics to be covered include:

- Demographics, myths, and facts of aging
- Communicating with the elderly
- Assault and abuse by family, caregivers, and others
- Guardianship, fiduciary, and healthcare fraud
- Con games and street crimes targeting the elderly
- Legislative issues (defining crimes of abuse and neglect)
- Program development, implementation, and evaluation; and
- Managing senior volunteer services.

Housing is available on campus. For more information contact National Crime Prevention Institute, University of Louisville, Shelby Campus, Louisville, Kentucky 40292 or phone 502-588-6987. Tuition \$400.00.

## Elderly Specialist Training in Ohio

Ohio's Crime Prevention Association is offering comprehensive two-day workshops for police officers, crime prevention practitioners, and others who work with older adults.

The workshops are designed to create awareness and enhance skills leading to the development of a specialist in elderly crime prevention within law enforcement agencies.

Offered in September and again October 20-21, the training covers such topics as:

- Demographics of aging
- Dealing with chronic illness
- Issues of dignity
- Communicating with older persons
- Family dynamics and caregiving
- The elderly as victims of elder abuse

## Indiana to Train Prospective Triads

Monroe County, Indiana, is planning a one-day Triad training session in Bloomington on November 17th. Contact Major Jack Harlow for details.

## Washington Becomes Triad State

The State of Washington has become the thirteenth state to sign a Triad agreement. Chiefs of police, sheriffs, and AARP in Washington have agreed to foster cooperation and joint endeavors to make older persons safer and expand crime prevention for elderly victims.



*Left:*  
Calvin Watness,  
Washington State  
Director, AARP.  
*Right:*  
Steven Tomson,  
President,  
Washington  
Association  
of Sheriffs and  
Police Chiefs

## Co-Sponsors for Triad Crime Prevention Events

When the Norfolk County, Massachusetts, Triad plans crime prevention seminars, community sponsors are invited to contribute to the costs and share the credit for the programs. The sponsors cover the cost of videos, handout materials, and publicity for a series of 20 seminars. In return, they receive recognition for their assistance — and the gratitude of older residents and law enforcement.

Among the topics offered as part of the Senior Outreach Services are:

- Health Quackery
- Beating the Burglar
- Fraud and Other Con Games
- Neighborhood Watch
- Avoiding Consumer Fraud
- Avoiding Home Improvement Fraud
- Preventing Elder Abuse

## Triad Conference at FBI Academy

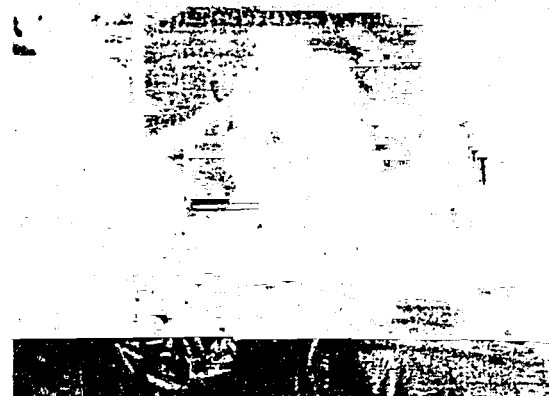
Ninety chiefs of police, sheriffs, AARP leaders, and others who work closely with elderly issues gathered in Quantico, Virginia, for the fourth annual Triad conference in August.

The conference was once more hosted by the FBI, with AARP, IACP, and NSA coordinating presentations and activities. SSA Joe Harpold of the Behavioral Science Unit was the FBI coordinator, ably assisted by Ellen Maynard of the Academy's VICAP unit.

Presentations from George Sunderland and Lee Pearson of AARP's Criminal Justice Services, and such Triad enthusiasts as Chief Michael Courville, Duncanville, Texas; Dr. Charles Mendoza; Columbus, Georgia; Sheriff Frank McGuirt, Monroe, North Carolina; and Nancy Snead and Carole Aston, of AARP area offices, informed attendees about the process of starting a Triad, its activities and benefits.

The goal of each of the conferences has been to encourage the formation of Triads on the local and state level. Several of those attending have already indicated progress in their towns and counties; Triad NEWS will report on new Triads as they are formed.

One of the highlights was the banquet, hosted by AARP. Dr. Kermit Phelps, former chairman of the Board of Directors of AARP, and Bentley Lipscomb, secretary of Florida's Department of Elder Affairs were banquet speakers.



*Triad workshops at the FBI Academy provided information and exchange of ideas.*

## Telephone Frauds Plague Seniors

Concerned, compassionate older persons may listen to the pleas of telemarketers and pledge money to little-known causes. They may also agree to buy products or services sight unseen, or give credit card numbers to strangers over the phone.

When crime prevention programs are presented, seniors are encouraged to adopt a prepared or "canned" response to unsolicited offers which sound suspicious. Having a ready answer will lessen anxiety as well as vulnerability. To respond to fast-talking, high-pressure approaches, citizens may say:

"Leave your number, and I will contact you after I check with (Better Business Bureau, police department, relative, attorney, etc.)."

"Please give me your message quickly. I am going to hang up in 30 seconds".

"Send me some literature, and I will consider it".

"I no longer respond to telephone solicitations".

"I always consult my (daughter, husband, brother, attorney, etc.) before making that sort of decision".

Those attending may practice their favorite responses before leaving the session and, at the next meeting, report on the reactions they have noted when using their new "Triad Response".

### *Back Problems Strike Triad Leader*

*Lee Pearson, Assistant Manager of Criminal Justice Services for AARP and nationally-respected speaker, writer, and program manager, is recuperating following back surgery in mid-August to fuse spinal discs and — hopefully — end months of back pain.*

*She is away from her desk and her rigorous schedule, on the mend at home, while missing Triad friends and activities. She can be reached through AARP-CJS, 601 E. St., N.W., Washington, DC 20049.*

## What is AAA?

An Area Agency on Aging (AAA) is an agency, designated by the state to coordinate services that help older persons maintain their health and independence in their homes and communities. Area Agency on Aging is a generic term and the specific name of a local AAA may vary. AAAs are primarily responsible for a geographic area that is either a city, county, or multi-county district. All of the 670 AAAs across the country serve older adults in the community, but may include:

### Access Services

- information and referral
- care management
- transportation

### Community-based services

- adult day care
- meals in a group setting
- legal assistance
- older worker employment services
- senior center programs

### In-Home Services

- home-delivered meals
- home health services
- telephone reassurance
- friendly visiting
- respite care
- home chore services
- energy assistance/weatherization

### Institutional Care

- nursing home placement pre-admission screening
- ombudsman services to resolve complaints and prevent abuse of nursing home residents

## The Triad Handbook, an implementation manual, available later this fall.

If you would like to receive a complimentary copy of The Triad Handbook, please mail this form to the NSA Triad Division, 1450 Duke Street, Alexandria, VA 22314. You may also fax a copy to 703-683-6541.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_



ATTACHMENT D

## NORWOOD POLICE DEPARTMENT

### DOMESTIC VIOLENCE INVESTIGATION CHECKLIST

1. VICTIM Name: \_\_\_\_\_

- \_\_\_\_\_ Described the victim's location upon arrival.
- \_\_\_\_\_ Administered 1st Aid to the victim and noted if medical treatment sought.
- \_\_\_\_\_ Noted time dispatched, arrived, and when victim spoke.
- \_\_\_\_\_ Recorded any spontaneous statements made by the victim.
- \_\_\_\_\_ Described the victim's emotional condition.
- \_\_\_\_\_ Described the victim's physical condition, including size in relation to attacker.
- \_\_\_\_\_ Described the victim's injuries in detail, (Size, Location, and Coloration).
- \_\_\_\_\_ Noted victim's relationship with suspect.
- \_\_\_\_\_ Recorded history of abuse and court orders.
- \_\_\_\_\_ Gave victim notice of rights (209A card).
- \_\_\_\_\_ Recorded temporary address/phone of victim.
- \_\_\_\_\_ Informed victim suspect may soon be bailed.

2. Witnesses

- \_\_\_\_\_ Interviewed the reporting party.
- \_\_\_\_\_ Identified all witnesses and interviewed them separately.
- \_\_\_\_\_ Recorded all witnesses addresses and phone numbers.
- \_\_\_\_\_ Listed names and ages of all children present.
- \_\_\_\_\_ Interviewed the children.
- \_\_\_\_\_ Recorded names of emergency personnel.
- \_\_\_\_\_ Identified treating physician.

3. SUSPECT Name: \_\_\_\_\_

- \_\_\_\_\_ Described the suspect's location upon arrival.
- \_\_\_\_\_ Administered 1st Aid to the suspect and noted if medical treatment sought.
- \_\_\_\_\_ Recorded any spontaneous statements made by the suspect.
- \_\_\_\_\_ Described the suspect's emotional condition.
- \_\_\_\_\_ Described the suspect's physical condition.
- \_\_\_\_\_ Described the suspect's injuries in detail.
- \_\_\_\_\_ Documented evidence of use of alcohol or drugs by the suspect.
- \_\_\_\_\_ Following Miranda, asked suspect if he wanted to make a statement, knew of restraining order or understood order.

4. Evidence

- \_\_\_\_\_ Photographed the crime scene.
- \_\_\_\_\_ Took "Full Body" shot of victim.
- \_\_\_\_\_ PHOTOGRAPHED the Victim's Injuries.
- \_\_\_\_\_ Photographed the suspect's injuries.
- \_\_\_\_\_ Impounded or took into evidence all weapons used or items thrown.
- \_\_\_\_\_ Impounded weapons for safekeeping.
- \_\_\_\_\_ Attached related reports, photos and evidence tags.

Investigating Officer \_\_\_\_\_ Date \_\_\_\_\_

Commanding Officer \_\_\_\_\_ Date \_\_\_\_\_

## NORWOOD POLICE DEPARTMENT

The office of the District Attorney for Norfolk County has announced that it is committed to following through on prosecutions for domestic violence even in situations where the victim refuses to testify or otherwise cooperate. To prosecute successfully, the assistant district attorneys trying the cases need our cooperation in the form of improved reporting of the circumstances involved in each arrest. To ensure that we secure all information necessary we have been given an investigative checklist which we in turn modified for use by the Norwood Police Department.

### CHECKLISTS

The reasons for which a person elects not to cooperate with a prosecution are as many and varied as the reasons why a victim will stay in an abusive situation. Ensuring that prosecutions will go forward, even without the victim takes a lot of the pressure off of the victim. What it also does though, is make the officer's report the star witness. For this reason we will be using the checklists to aid in evidence gathering. This should ensure that essential information is obtained at the time of the taking of the report and re-interviewing will not be necessary. The checklist should be used when there is an arrest made, warrant sought, or complaint application filed. A supply of checklists will be placed in each cruiser.

### PHOTOGRAPHS

We also have a donated Polaroid camera in the sergeant's cruiser. When visible injuries are present photographs are to be taken for evidence. A full body shot showing the injured area and a close up of the injury should be taken.

### OBSERVATIONS & STATEMENTS

Because there is a good chance that you and your report will be most important to the prosecution it is imperative that your report accurately describes the scene of the incident and includes statements made by all parties involved.

It is important to include in your report the observations you made when you arrived, including: if the altercation was still in progress what you heard upon approach, what you had to do to quell the disturbance, what you saw (observations of the combatants' physical appearances: sweating, clothing torn or disheveled; excited or withdrawn or withdrawn behavior). Mention in the report the physical appearance of the scene if it indicates a physical altercation had just occurred. Note the smashed ashtray or broken or overturned furniture.

A victim's statement can be used in court even when the victim fails to cooperate when the prosecution can show that the police received the statement as an excited utterance, thus serving as an exception to the hearsay rule. This can be aided by showing the tumult at the scene, (as shown above) and the accurate recording of the victim's statements. The statement will be admitted into evidence when we can show: 'That it followed a traumatic event and it was made under the stress or sway of that event. Describe the victim's demeanor when making the statement, (did it show excitement, fear, did the words pour out rapidly and loud?). Have the victim describe what led up to the attack. Key sentences should be taken verbatim and placed in quotation marks in the report. Spontaneous statements can be made in response to questions. It may prove worthwhile to copy the phone recording of the victim's call for help.

Recording the statements and showing that the combatants and the scene were still in disarray solidify the prosecutions contention that the statements should be admitted as excited utterances. While gathering the evidence, remain cognizant of the possibility that the victim may change her mind later and that the District Attorney's office will be prosecuting with or without the victim's cooperation. What you do at the scene and how well you report it may very well be the focus of a subsequent trial. This strategy has proven effective in San Diego, CA where prosecutions have progressed in 70% of cases where the victim refuses to cooperate. A conviction rate of 90% has been obtained in those cases.

## ELDER PROTECTIVE SERVICES TRAINING

### PRETEST

Your Occupation: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Place of work: \_\_\_\_\_

1. How old must a person be to receive assistance from elder protective services?
2. Does elder protective services help people who reside in nursing facilities?
3. What kinds of incidents must you report to elder protective services?
4. What must you also do if you make an oral report to elder protective services?
5. Can you be penalized for not reporting your suspicions about abuse or neglect?
6. Can you be the subject of legal action for having filed a report of elder abuse?
7. What will Elder Services do after you make a report to them?
8. Can elder protective services help an elder who refuses assistance?
9. Can a family member decline protective services for another?
10. Can elder protective services help an elder who is self-neglecting?
11. What is the statewide emergency Elder Abuse Hotline telephone number?

## EXECUTIVE OFFICE OF ELDER AFFAIRS

Designated Protective Services Agencies

Baypath Senior Citizens  
Services, Inc.  
P.O. Box 2625  
Central Station  
Framingham, MA 01701  
(508) 620-0840  
Toll Free: (800) 287-7284

Ashland, Dover, Framingham,  
Holliston, Hopkinton, Hudson,  
Marlborough, Natick,  
Northborough, Sherborn,  
Southborough, Sudbury, Wayland,  
and Westborough

Boston Senior Home Care  
6 St. James Avenue  
Boston, MA 02112  
(617) 451-6400

Beacon Hill/West End, Charlestown,  
Chinatown, Columbia Point  
Dorchester, East Boston, East  
Mattapan, North End and South Boston

Bristol Elder Services, Inc.  
182 North Main St.  
Fall River, MA 02720  
(508) 675-2101  
Toll Free: (800) 427-2101

Attleboro, Berkley, Dighton, Fall  
River, Freetown, Mansfield, North  
Attleborough, Norton, Raynham, Re-  
hoboth, Seekonk, Somerset, Swansea,  
Taunton and Westport

Central Boston Elder  
Services, Inc.  
812 Huntington Avenue  
Boston, MA 02115  
(617) 277-7416

Allston, Back Bay, Brighton, Fenway,  
Jamaica Plain, North Dorchester,  
Parker Hill, Roxbury and South End

Chelsea/Revere/Winthrop Elder  
Services  
300 Broadway  
Revere, MA 02151  
(617) 286-0550

Chelsea, Revere and Winthrop

Coastline Elderly Services, Inc.  
1646 Purchase Street  
New Bedford, MA 02740  
(508) 999-6400

Acushnet, Dartmouth, Fairhaven,  
Gosnold, Marion, Mattapoisett, New  
Bedford and Rochester

Elder Home Care Services of the  
Worcester Area, Inc.  
1241 Main Street  
Worcester, MA 01603  
(508) 756-1545

Auburn, Barre, Boylston, Grafton,  
Hardwick, Holden, Leicester, Mill-  
bury, New Braintree, Oakham, Paxton,  
Rutland, Shrewsbury, West Boylston  
and Worcester



Designated Protective Services Agencies

Elder Services of Berkshire  
County, Inc.  
66 Wendell Avenue  
Pittsfield, MA 01201  
(413) 499-0524  
Toll Free: (800) 544-5242

Adams, Alford, Becket, Cheshire,  
Clarksburg, Dalton, Egremont,  
Florida, Great Barrington, Hancock,  
Hinsdale, Lanesborough, Lee, Lenox,  
Monterey, Mount Washington, New  
Ashford, New Marlborough, North  
Adams, Otis, Peru, Pittsfield,  
Richmond, Sandisfield, Savoy,  
Sheffield, Stockbridge, Tyringham,  
Washington, West Stockbridge,  
Williamstown and Windsor

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Elder Services of Cape Cod  
and the Islands, Inc.  
68 Route 134  
South Dennis, MA 02660  
(508) 394-4630  
Toll Free: (800) 244-4630

Barnstable, Bourne, Brewster,  
Chatham, Chilmark, Dennis, Eastham,  
Edgartown, Falmouth, Gay Head,  
Harwich, Mashpee, Nantucket, Oak  
Bluffs, Orleans, Provincetown,  
Sandwich, Tisbury, Truro, Wellfleet,  
West Tisbury and Yarmouth

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Elder Services of the Merrimack  
Valley, Inc.  
Riverwalk Building #5  
360 Merrimack Street  
Lawrence, MA 01843  
(508) 683-7747  
Toll Free: (800) 892-0890

Amesbury, Andover, Billerica,  
Boxford, Chelmsford, Dracut,  
Dunstable, Georgetown, Groveland,  
Haverhill, Lawrence, Lowell.,  
Merrimac, Methuen, Newbury,  
Newburyport, North Andover, Rowley,  
Salisbury, Tewksbury, Tyngsborough,  
Westford and West Newbury

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Franklin County Home Care  
Corporation  
58 Main Street  
Turners Falls, MA 01376  
(413) 773-5555

Ashfield, Athol, Bernardston,  
Buckland, Charlemont, Colrain,  
Conway, Deerfield, Erving, Gill  
Greenfield, Hawley, Heath, Leverett,  
Leyden, Monroe, Montague, New Salem,  
Northfield, Orange, Petersham,  
Philipston, Rowe, Royalston,  
Shelburne, Shutesbury, Sunderland,  
Warwick, Wendell and Whatley.

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Greater Lynn Senior  
Services, Inc.  
8 Silsbee Street  
Lynn, MA 01901  
(617) 599-0110

Lynn, Lynnfield, Nahant, Saugus and  
Swampscott

Designated Protective Services Agencies

Greater Springfield Senior  
Services, Inc.  
66 Industry Avenue  
Springfield, MA 01104  
(413) 781-8800

Agawam, Brimfield, East Longmeadow,  
Hampden, Holland, Longmeadow,  
Monson, Palmer, Springfield, Wales  
West Springfield and Wilbraham

Health & Education Services, Inc.  
162 Federal Street  
Salem, MA 01970  
(508) 745-2440 or 535-6220

Danvers, Marblehead, Middleton,  
Peabody and Salem

Health & Social Services  
Consortium, Inc. (HESSCO)  
IGO Building  
Carpenter Street  
Foxborough, MA 02035  
(508) 769-7440; 543-2611  
Toll Free: (800) 462-5221

Canton, Dedham, Foxborough,  
Medfield, Millis, Norfolk, Norwood,  
Plainville, Sharon, Walpole,  
Westwood, and Wrentham

Highland Valley Elder Services  
320 Riverside Drive  
Northampton, MA 01060  
(413) 586-2000  
Toll Free: (800) 322-0551

Amherst, Blandford, Chester,  
Chesterfield, Cummington,  
Easthampton, Goshen, Granville,  
Hadley, Hatfield, Huntington,  
Middlefield, Montgomery, Northamp-  
ton, Pelham, Plainfield, Russell,  
Southampton, Southwick, Tolland,  
Westfield, Westhampton, Williamsburg  
and Worthington

Holyoke/Chicopee Regional Senior  
Services Corporation  
4 Valley Mill Road  
Holyoke, MA 01040  
(413) 538-9020  
Hot Line: (800) 462-2301

Belchertown, Chicopee, Granby,  
Holyoke,, Ludlow, South Hadley, and

Minuteman Home Care Corporation  
24 Third Avenue  
Burlington, MA 01803  
(617) 272-7177

Action, Arlington, Bedford, Box-  
borough, Burlington, Carlisle,  
Concord, Harvard, Lexington,  
Lincoln, Littleton, Maynard, Stow,  
Wilmington, Winchester and Woburn

Designated Protective Services Agencies

Montachusett Home Care Corpration  
545 Westminster Street  
Fitchburg, MA 01420  
(508) 345-7312

Ashburnham, Ashby, Ayer, Berlin,  
Bolton, Clinton, Fitchburg, Gardner,  
Groton, Hubbardston, Lancaster,  
Leominster, Lunenburg, Pepperell,  
Princeton, Shirley, Sterling,  
Templeton, Townsend, Westminster and  
Winchendon

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Mystic Valley Elder Services,  
19 Riverview Business Park  
300 Commercial Street  
Malden, MA 02148  
(617) 324-7705

Everett, Malden, Medford, Melrose,  
North Reading, Reading, Stoneham  
and Wakefield

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Old Colony Elderly Services, Inc.  
144 Main Street  
P.O. Box 1586  
Brockton, MA 02403  
(508) 584-1561; 697-3338  
586-3700  
Toll Free: (800) 242-0246

Abington, Avon, Bridgewater,  
Brockton, Carver, Duxbury, East  
Bridgewater, Easton, Halifax,  
Hanover, Hanson, Kingston,  
Lakeville, Marshfield,  
Middleborough, Pembroke, Plymouth,  
Plympton, Rockland, Stoughton,  
Wareham, West Bridgewater, and  
Whitman

-----  
Senior Home Care Services, Inc.  
4 Blackburn Center  
Gloucester, MA 01930  
(508) 281-1750

Beverly, Essex, Gloucester,  
Hamilton, Ipswich, Manchester,  
Rockport, Topsfield and Wenham

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Somerville/Cambridge Elder Services, Inc. Cambridge and Somerville  
(Mail to: Box 338, Somerville 02144)  
20-40 Holland Street (4th flr.)  
Somerville, MA 02144  
(617) 628-2601; 2602  
TDD: 628-1705

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South Shore Elder Services, Inc.  
639 Granite Street  
Braintree, MA 02184  
(617) 848-3910; 749-6832;  
383-9790

Braintree, Cohasset, Hingham,  
Holbrook, Hull, Milton, Norwell,  
Quincy, Randolph, Scituate,  
and Weymouth

Designated Protective Services Agencies

Southwest Boston Senior Services  
23 Florence Street  
Roslindale, MA 02131  
(617) 325-6565; 6566

Hyde Park, South Jamaica Plain,  
Roslindale, West Roxbury and West  
Mattapan

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Tri-Valley Elder Services, Inc.  
284 Worcester Street  
Southbridge, MA 01550  
(508) 764-2501  
Toll Free: (800) 462-5225

Bellingham, Blackston, Brookfield,  
Charlton, Douglas, Dudley, East  
Brookfield, Franklin, Hopedale,  
Medway Mendon, Milford, Millville,  
Northbridge, North Brookfield,  
Oxford, Southbridge, Spencer,  
Sturbridge, Sutton, Upton,  
Uxbridge, Warren, Webster, and West  
Brookfield

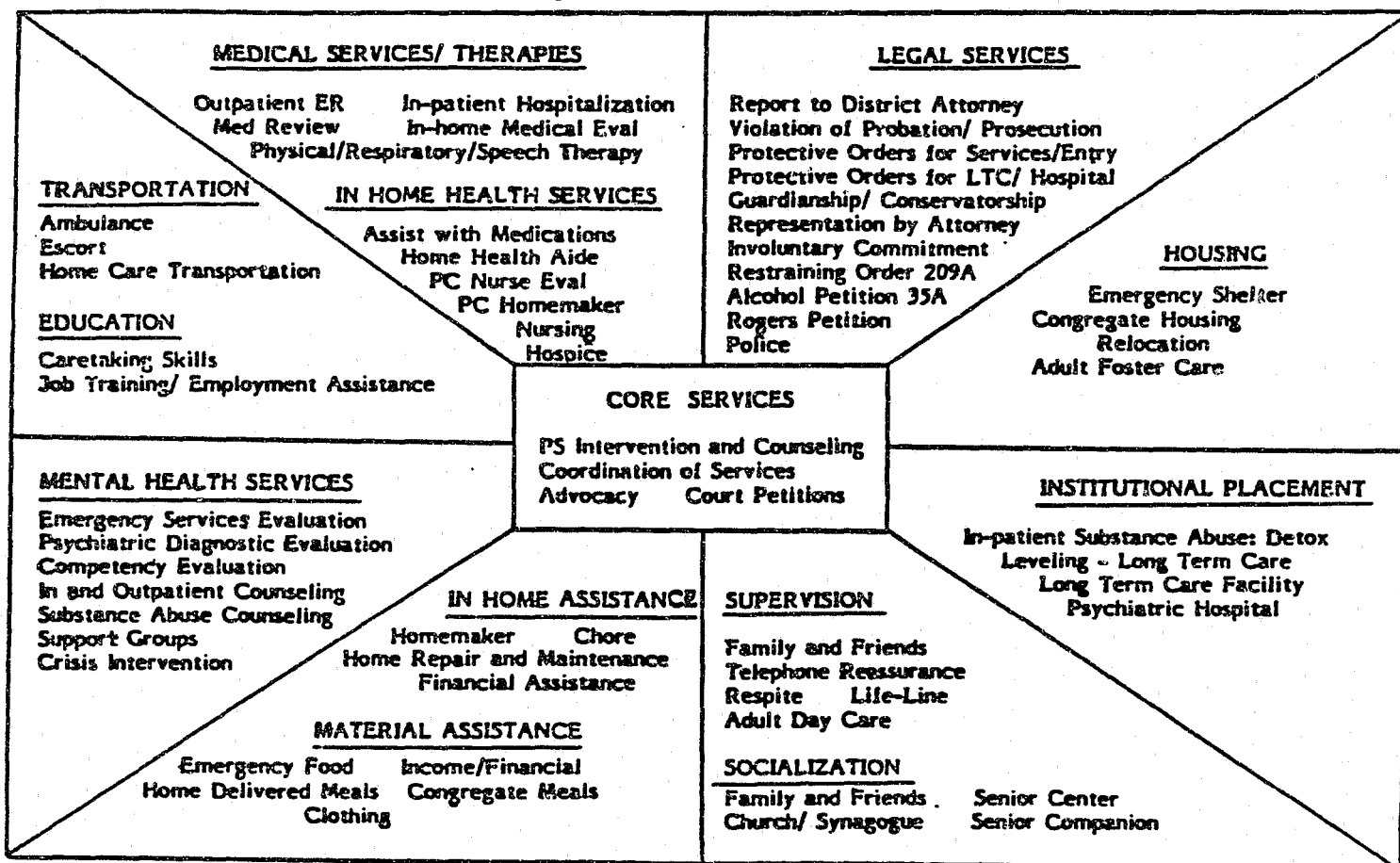
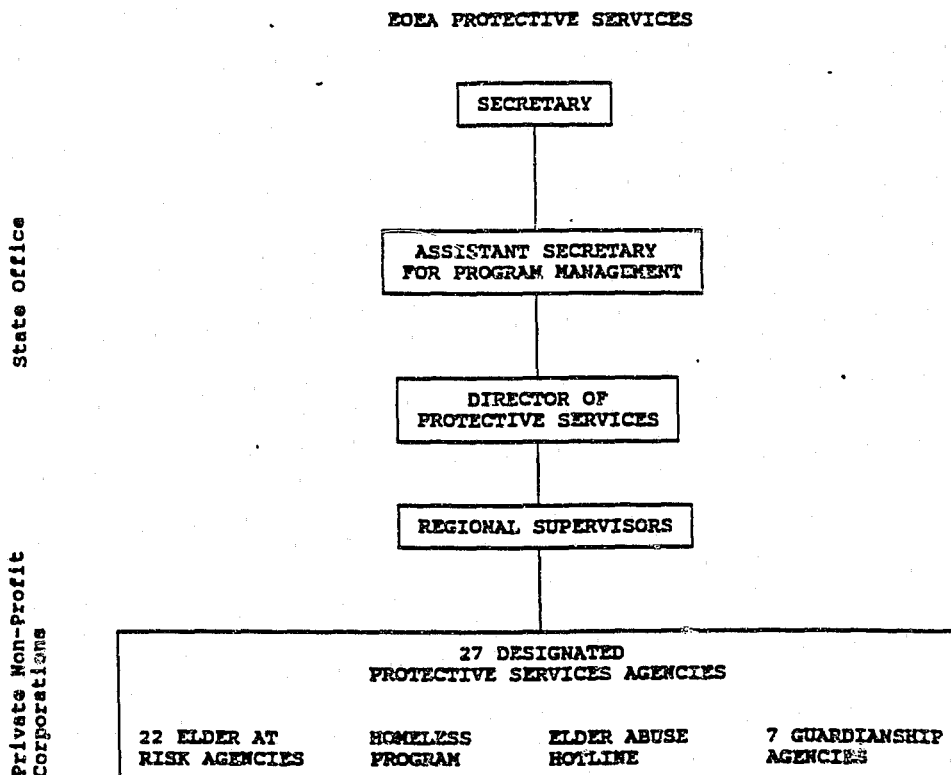
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West Suburban Elder  
Services, Inc.  
Parker Office Building  
124 Watertown Street  
Watertown, MA 02172  
(617) 926-4100

Belmont, Brookline, Needham, Newton,  
Waltham, Watertown, Wellesley and  
Weston

The Elder Protective Services Program operates in twenty-seven (27) Protective Services areas which are congruent with the Executive Office of Elder Affairs' Home Care Services catchment areas.

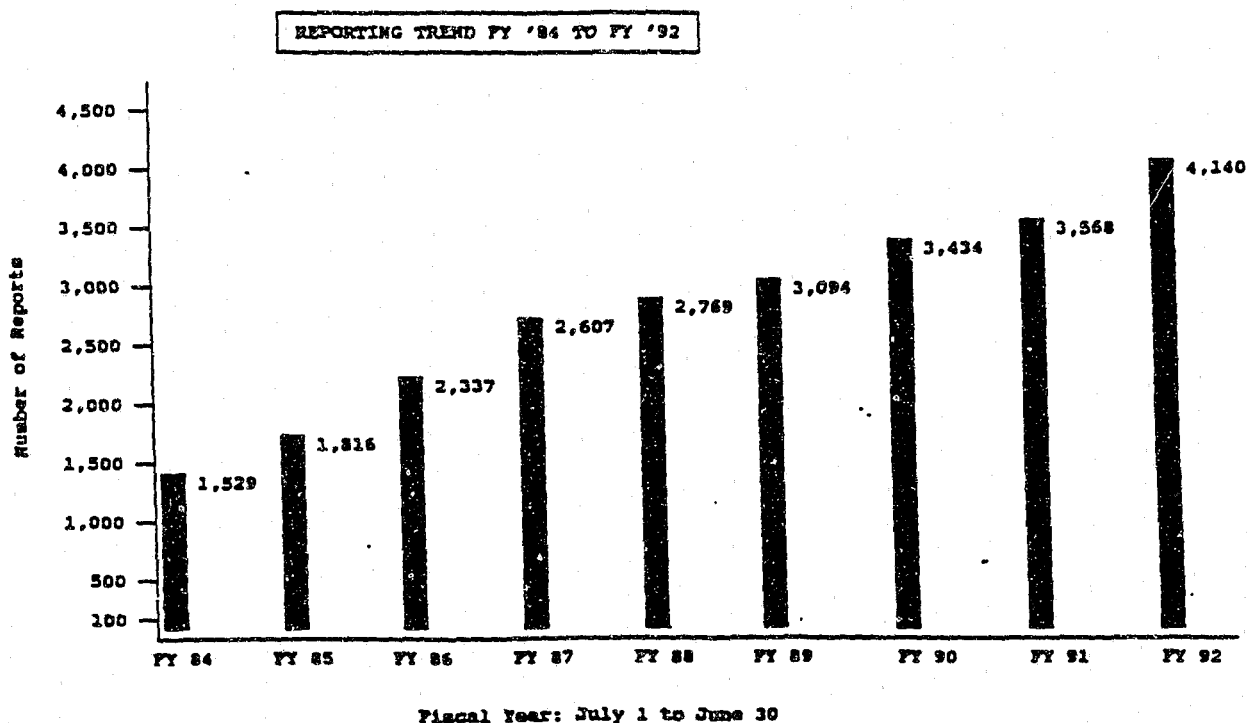
ATTACHMENT G



## PROTECTIVE SERVICES STATISTICS for FY '92

### Increasing Reports of Abuse

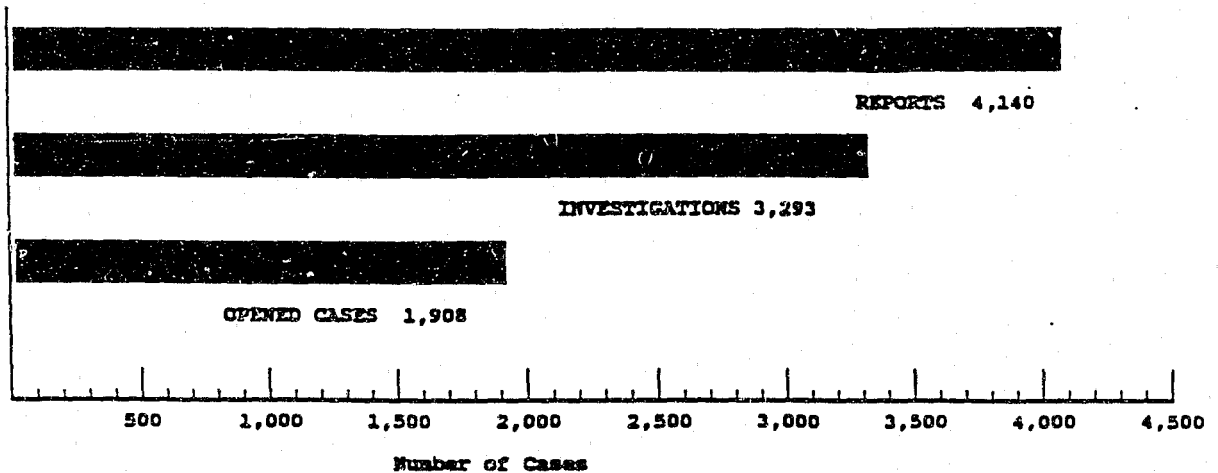
Reports of abuse and neglect have increased from 3,568 reports in FY '91 to 4,140 reports in FY '92. Reports made in FY '92 increased 16 percent over FY '91.



Reports of abuse and neglect  
increased 16 percent in FY '92.

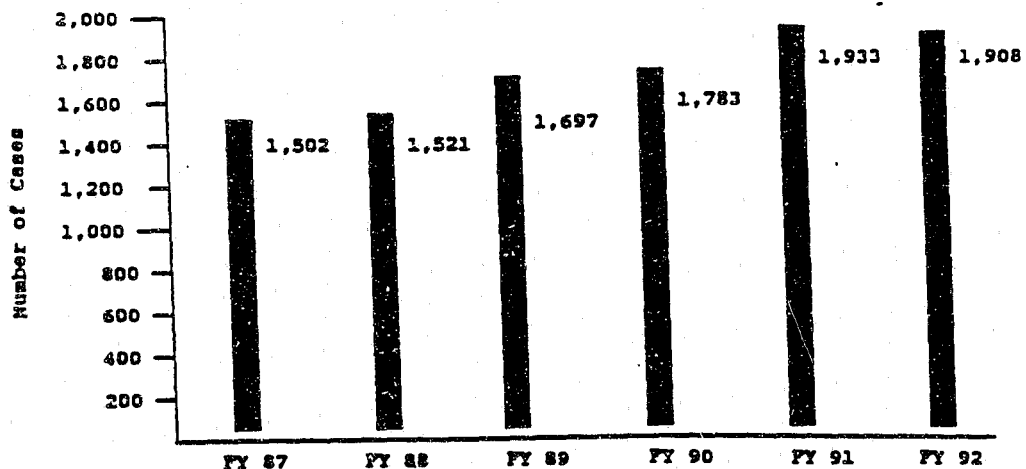
**Reports Received  
and Cases Opened  
to Provide  
Protective  
Services**

Of the 4,140 abuse, neglect and exploitation reports received statewide in FY '92, 3,293 or 79 percent were investigated in accord with 651 CMR 5.14 of the Protective Services Regulations. Of those cases investigated, 1,908 or 58 percent were found to involve abuse, neglect or financial exploitation and were opened to provide Protective Services.



**Trends in  
Abuse Cases**

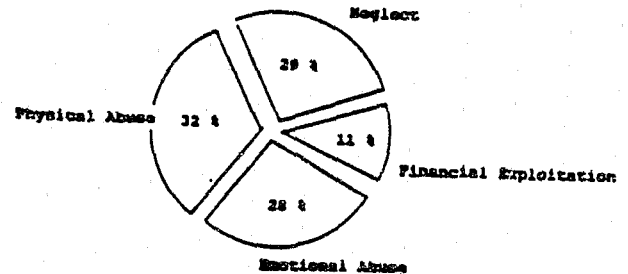
Investigations resulting in a determination that abuse has occurred, and the offering of Protective Services, is seen to be a more accurate indication of the prevalence of elder abuse. Trends in numbers of cases in which abuse has been substantiated are:



**Types of Cases:**  
Physical Abuse  
Neglect  
Emotional Abuse  
and Financial  
Exploitation

Of the 1,908 cases opened throughout the Commonwealth, 614 or 32 percent involved physical abuse, 554 or 29 percent for neglect, 525 or 28 percent for emotional abuse and 215 or 11 percent for financial exploitation as the primary case focus.

Physical Abuse	614
Neglect	554
Emotional Abuse	525
Financial Exploitation	215

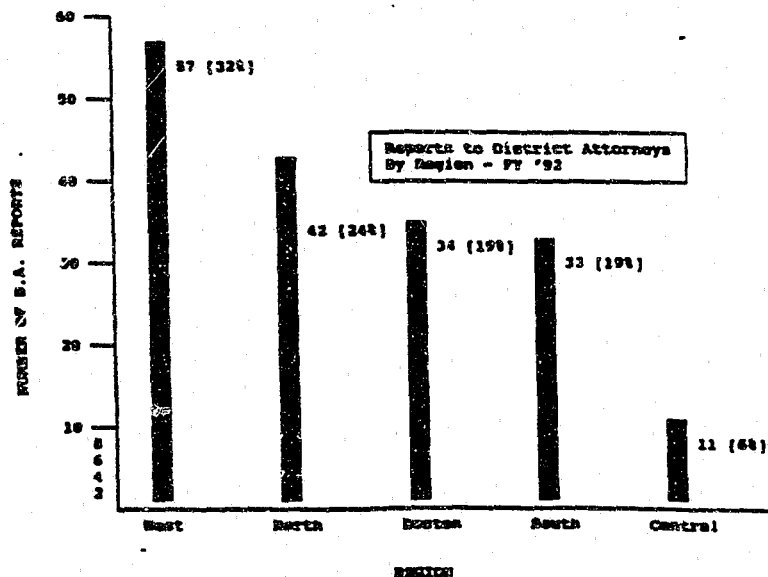


**Reports to  
District  
Attorneys**

A Total of 177 cases involving serious injury were reported to District Attorneys or 9 percent of those cases investigated and determined to have involved abuse. There was a 26 percent increase in the number of cases being reported to the District Attorney over FY '91.

Cases reported by Region were:

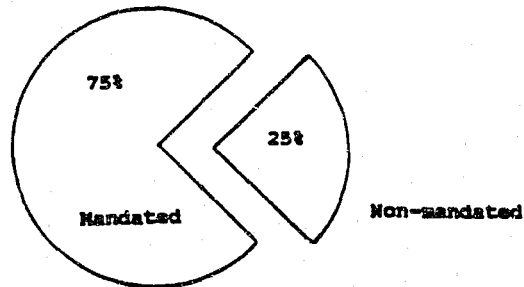
Cases reported to District Attorneys increased 26 percent.





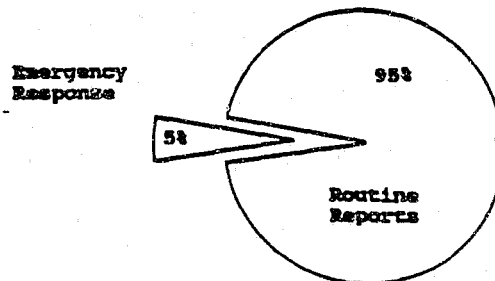
### **Mandated Reporting**

During FY '92, 4,140 reports of abuse and neglect were received. Mandated professionals filed 3,093 reports, while 983 reports were received from non-mandated reporters, such as family and neighbors. Self referrals, family and friends contributed 782 of those non-mandated reports which were made, or 19 percent of the total reports received.



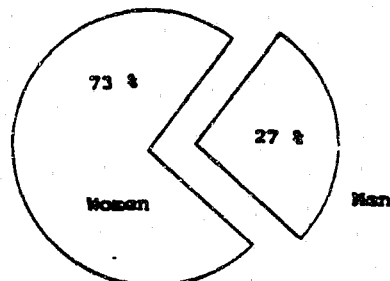
### **Emergency Reports**

Of the 3,293 reports screened in for investigation, 175 or 5 percent were emergency reports requiring immediate response, and 3,118 or 95 percent were routine reports of abuse, neglect or financial exploitation.



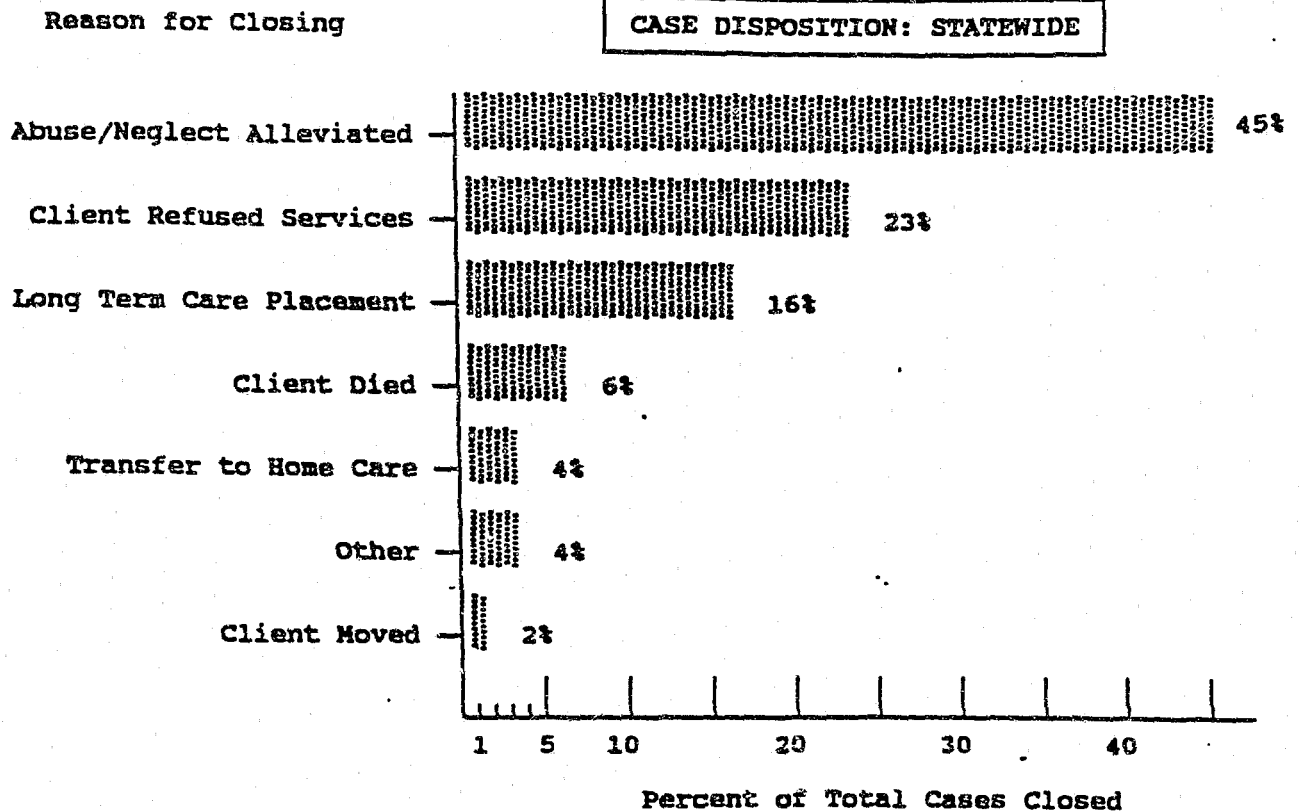
### **Reports by Sex**

Of those FY '92 reports made (excluding multiple reports), 2,805 or 73 percent women, and 1,062 or 27 percent men, were alleged to be abused, neglected or financially exploited.



**Case  
Disposition**

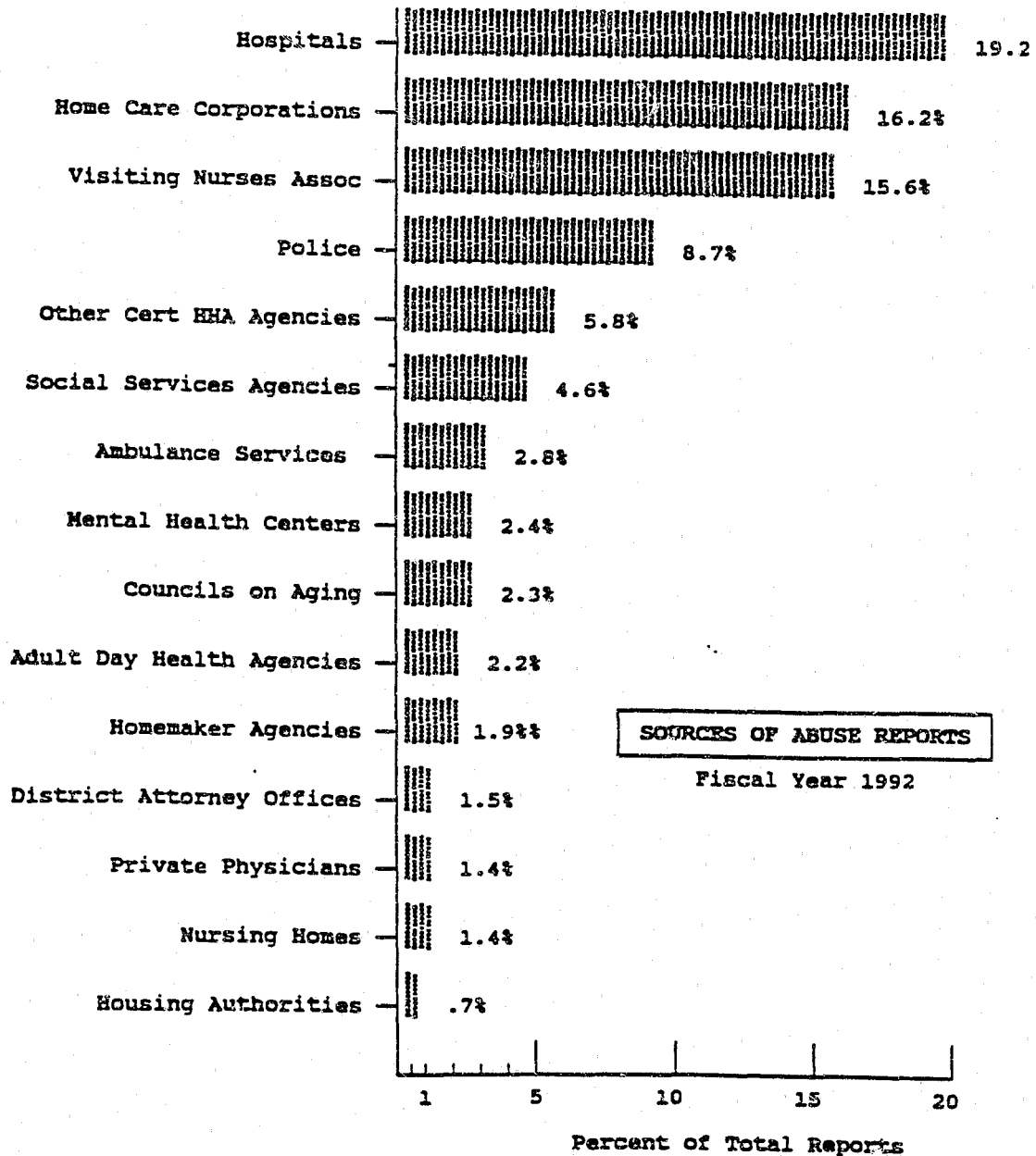
Of the 1,973 cases closed in FY '92, 65 percent were closed, following successful Protective Services intervention to alleviate or eliminate abuse, which includes long-term care placement and transfer to Home Care. Thirty-one percent were closed due to the refusal of services, client moves and death.



Statewide, 65 percent of abuse, neglect and financial exploitation cases were closed following successful casework.

Sources of  
Reports

Sources of FY '92 reports for the  
Commonwealth by agency or institution  
were:



I have been advised of and understand the purpose and use of this form and I DO CONSENT to the provision of these services.

Service	Planned Frequency	Estimated Cost to Client

Signature of Client	Date	Worker's Signature	Date
Signature of Witness/ Guardian/Family Member	Date	Supervisor's Signature	Date

I have been advised of and understand the purpose of this form and I DO NOT CONSENT to the provision of these services.

Service	Planned Frequency	Estimated Cost To Client

Signature of Client	Date	Worker's Signature	Date
Signature of Witness/ Guardian/Family Member	Date	Supervisor's Signature	Date



CHIEF POSTAL INSPECTOR  
Washington, DC 20260-2100

## ATTACHMENT I

# POSTAL INSPECTORS USE DECEPTIVE AD OF THEIR OWN TO WARN CONSUMERS ABOUT ADVANCE FEE LOAN SCHEMES

The advertisement in the Pittsburgh Press and four other newspapers could have been placed by any self-respecting scam artist. It read:

**Bad Credit? Need a Loan?**  
**For Information On Unsecured**  
**Personal Loans Up to \$10,000**  
**Call 1-800-825-8777**

Callers who fell for the ad didn't get a high pressure sales pitch from a smooth talker peddling phony loans. Instead, they received an education from a U.S. Postal Inspector—who may have saved them a few hundred dollars.

The tape recorded message said:

*"Unsecured loan up to \$10,000. Sound too good to be true? Well, it probably is.*

*"Each day hundreds of consumers are ripped off by advance fee loan schemes. Victims responding to ads such as this receive a very persuasive sales pitch. They are told to send in an application fee ranging from \$50 to \$400. Quite often the application is not processed and the fee never returned.*

*"If you think it can't happen here, listen to this: Postal Inspectors recently convicted a Western Pennsylvania man of conning consumers out of \$2.5 million using this scheme.*

*"Before you lose money, check the company out thoroughly, ask for paperwork in advance, and ask plenty of questions.*

*"Remember, if it sounds too good to be true, it probably is.*

*"This is a message from the U.S. Postal Inspection Service."*

The ad received 1,374 responses.

On Dec. 19, 1991, Assistant Chief Postal Inspector Kenneth M. Hearst testified about advance loan fee schemes before the Ad Hoc Committee on Consumer and Environmental Affairs of the Senate Committee on Governmental Affairs.

For years, he said, the U.S. Postal Inspection Service has used the Mail Fraud and False Representation Statutes against advance fee schemes. Typically, the promoters of these scams prey upon individuals or companies that are

experiencing economic difficulty. They purport to provide easy, quick, no-questions-asked loans and credit cards and require some type of "processing fee" up front. If anything is furnished in return for this fee, it is not a loan or a credit card, but little more than generally available information on where loans or credit cards might be sought by the victim, provided he or she can qualify for a loan.

Most often, advance fee scams are but one manifestation of a broader problem: the so-called "boiler room" operation, and part of the solution to this problem would involve enhanced authority to deal with boiler rooms. Boiler rooms are hit-and-run operations using leased facilities and telephones to market a wide range of misrepresented goods, services and investments. Their victims number in the tens of thousands and their losses surpass millions of dollars.

The promoters pitch unsecured loans, credit cards, water purifiers, vitamins, oil, gas, and mineral leases, other investment opportunities, office supplies, charitable solicitations, and a limitless array of merchandise such as boats, televisions, motorcycles, and computers. The pitch and the products being sold vary with the times.

In the late 1970s and early 1980s, with interest rates soaring and money in short supply, many people looked for investments promising high returns and unsecured loans. The boiler rooms responded with a myriad of speculative investment opportunities in gold and silver, securities, commodity futures, real estate and oil and gas leases as well as unsecured loans that could be obtained upon advance payment of a fee. In today's tighter consumer loan market, the con artists have shifted to pitching individual consumers with a wide variety of unsecured loan and or pre-approved credit card scams.

To set up a boiler room is both cheap and easy. All it takes is leased space, furniture, and banks of telephones. Fast talk and high pressure sales are the keys to success.

Where the scam is an advance fee loan scheme, the victim usually calls an "800" number in response to a mailed or newspaper advertisement used to "sucker him, or her, in." The ad is crafted with exaggerated promises of the ease with which an unsecured loan or pre-approved

credit card might be obtained notwithstanding a bad credit rating. The victim is asked to remit payment by mail, by authorizing a charge to his credit card, or, most recently, through a direct bank transfer.

Typically, the operators do not solicit victims residing in the state where the operation is located. They don't want to attract the attention of local law enforcement agencies. By the time most of their customers know that they have been victimized, the operators are gone. Over and over again, we witness a familiar pattern: A surge of consumer complaints about loans, credit cards, and promised refunds that never materialized; we investigate and find that

the promoters responsible for these complaints operated for only a few weeks or months before "busting out"; and that the promoters previously operated the same sort of scam under some other identity.

Times are difficult for many people today. And, quick and easy loans are very tempting, especially to those who can least afford to make a mistake. Please tell everyone you know to be especially careful before sending anyone an advance fee for a loan in the form of a check, a credit card number over the telephone, or through a direct bank transfer. Be aware. Be alert. And, don't be "taken."

Sunday, February 9, 1982

The Pittsburgh Press

E3

# LIFESTYLE

## Prospective borrowers get warning on easy loan scams

The problem just won't go away. During these difficult economic times, thousands of desperate people are being threatened of debtors a day by lenders' promising easy loans for advance fees.

Ask The Press has received a sampling of bad letters from readers who sent \$25, \$50, even a few hundred dollars in advance fees to receive their money, never to be seen again. The letters are full of promises of money, but never materialized.

The U.S. Postal Inspection Service has issued a warning over the phone to thousands of people who are being threatened of debtors a day by lenders' promising easy loans for advance fees.

ing loans — and then offered a check or money order to receive or respond.

There's no such thing as a free loan, says the U.S. Postal Inspection Service. The letters are full of promises of money, but never materialized.

According to Postal Inspectors, Andrew Weber, who reported he was told that a great opportunity was waiting for him, says he has been a victim of this scam.

If you receive a letter like this, don't be fooled. The letters are full of promises of money, but never materialized.

There can be a great deal of money to be made if you are not careful.



### ASK THE PRESS

By Helen Kaiser

to collect even more money from the loan.

The first contact is usually they are promising, and they will "find" them a loan for a fee. Then they forward the money to another contact which is supposed to find the loan, but these are fraudsters, Weber said.

They are receiving hundreds of thousands of dollars in advance fees, says the U.S. Postal Inspection Service. The letters are full of promises of money, but never materialized.

The promoters actually go through the process of making a loan — receiving applications,

checking, etc. And they have a business connection of some kind to give the loans," Weber said.

The one catch is that the loans are not made until the advance fees are received. The letters are full of promises of money, but never materialized.

to check out a company's credit rating, to check out a company's credit rating, to check out a company's credit rating,

Ask for papers on advance fees, says the U.S. Postal Inspection Service. The letters are full of promises of money, but never materialized.

It's not, and what's the catch? The letters are full of promises of money, but never materialized.

There's a lot of money to be made if you are not careful.

for demanding enough information to carry out the loan," Weber said.

"Problems are not restricted to just loans," he said. "There can also be advance fees charged for business reviews, credit cards, debt consolidation, equipment, services. They're similar in that they're asking you to give up your money up front."

"People have to be more vigilant with their dollars."

To Ask The Press, send two letters to Helen Kaiser, Box 476, Pittsburgh 15201. Be sure to include your name, full address, daytime telephone number and any other contact information to your area. One month will be published. Sorry, no business. No charge for postage or handling fees.



*The Commonwealth of Massachusetts*  
*Office of the Attorney General*  
*One Ashburton Place,*  
*Boston, MA 02108-1698*

SCOTT HARSHBARGER  
ATTORNEY GENERAL

(617) 727-2200

N E W S   R E L E A S E

ATTACHMENT J

FOR IMMEDIATE RELEASE  
NOVEMBER 2, 1993

CONTACT: KIM HINDEN  
(617) 727-2543

ATTORNEY GENERAL OBTAINS COURT ORDER SHUTTING  
DOWN STOUGHTON CHARITY FOR HANDICAPPED CHILDREN

Attorney General Scott Harshbarger announced today that his Public Charities Division has obtained a court order terminating the activities of Chosen Children Foundation, a charity for handicapped children and banning its founder from fund-raising or other charitable activity anywhere in the United States.

"When people are asked to donate money to a particular charity, they make their contributions in the good faith belief that their donations will not be diverted to non-charitable purposes," said Attorney General Harshbarger. "Preying upon the public's charitable spirit by falsely claiming to raise money to help handicapped children is simply intolerable."

Suffolk Superior Court Judge Hiller Zobel issued the agreed-to order, which settled a lawsuit brought by the Attorney General in 1991 against Chosen Children Foundation of Stoughton; its founder and president, Joel S. Weinstein, of Stoughton; and his son, Eric M. Weinstein, of Randolph, Chosen's Massachusetts state director. The lawsuit alleged that the Weinsteins deceived the public by holding Chosen Children out as benefitting handicapped children, when in fact, they were using the money to enrich themselves.

In a ruling last November, Judge Zobel had named Gabrielle Wolohojian of the Boston law firm of Hale and Dorr (which has

-more-

volunteered her time without compensation) as temporary receiver to operate Chosen Children.

After a hearing in February, Judge Zobel issued an order banning Chosen Children and Joel and Eric Weinstein from soliciting funds on behalf of any charitable organizations or causes, based on the judge's findings that all donations were being spent to pay the fund-raising salaries and costs of Eric Weinstein and other Chosen Children employees, with virtually nothing left to benefit handicapped children. Joel and Eric Weinstein were further ordered to direct corporations affiliated with Chosen Children in Florida, Rhode Island, New Hampshire and Connecticut, as well as paid fund raisers they had employed across the United States, to end all fund-raising activities.

The agreed-to judgment orders the following:

\*\* Joel and Eric Weinstein are removed as officers and directors of Chosen Children and all of its affiliates, and are ordered to cause Chosen Children's affiliates to return funds transferred from Chosen Children.

\*\* Joel Weinstein is permanently banned from all fund-raising or other charitable activity in Massachusetts or with Eric Weinstein. He is banned from all fund-raising or other charitable activity for five years outside of Massachusetts.

\*\* Joel Weinstein must pay \$30,000 restitution to the receiver. This provision is subject to the approval of the bankruptcy court, where Joel Weinstein has filed for personal bankruptcy.

\*\* Eric Weinstein is banned from all fund-raising or other charitable activity in Massachusetts for five years.

\*\* The receiver is directed to end Chosen Children's operations and have it dissolved.

Assistant Attorney General Eric B. Carriker, Public Charities Division, handled the case. Karen Ortolino, Kathy Murphy and Jack Crimmins, Civil Investigation Division, investigated the matter.



## ATTACHMENT K

### SAMPLE PROGRAM

Since 1985, numerous financial institutions throughout the country have implemented their own variations of the Consumer Alert portion of this program.

Though each of these variations has proven to be equally effective, the following "full-service" program has since become a standard on which all other programs are based:

#### I CUSTOMER ALERT FORMS

These forms are simply designed to obtain the customer's attention. (Refer to pages 11 & 12 for examples)

#### II. TELLER TRAINING

All bank employees receive training on confidence crime recognition, and on the exact procedure they are to follow should any of the bank's customer's attempt to either withdraw a large sum of money, or otherwise conduct transactions which do not adhere to their usual banking patterns. (refer to page #14 for example bank program.)

#### III. SURVEILLANCE PHOTOS

If the suspect is believed to be in the bank, all tellers have been instructed to activate the surveillance cameras. This policy has resulted in the identification and subsequent arrest of many confidence criminals who would have otherwise avoided any and all possibility of arrest.

#### IV. LAW ENFORCEMENT NOTIFICATION

When it is suspected that a confidence crime is in progress inside of the bank, it is also the bank's policy to immediately notify the police department.

**Remember . . .**

**a confidence  
man always  
has an  
honest face.**

**The money  
you are  
protecting  
is YOURS!**

**DON'T  
BE A  
VICTIM!**

**READ THIS BEFORE  
WITHDRAWING  
LARGE AMOUNTS OF  
CASH**

# CAUTION

There are all kinds of con-games . . . all of which are designed for one purpose—to swindle you, the unsuspecting person, out of your money.

Under no circumstances will a bona-fide bank employee, bank examiner, FBI agent, or other law enforcement official request that you, as a customer withdraw cash from your account. If anyone identifying himself as such asks you to withdraw cash from your account—DON'T.

All employees are working to protect you from this type of robbery—but we need your help . . .

## Simple Rules:

1. Beware of anyone who wants you to remove your money from the safety of Bank.
2. Ask for identification if someone presents himself as an official (of any kind).
3. Always ask your bank (in person if possible) if they suspect foul play.
4. If someone approaches you and asks you to remove your money for any reason, call your local Police Department.

**Remember—**Not all robberies happen at the point of a gun . . . some happen with a smile, a handshake, or a telephone call.

# **YOUR MONEY IS YOUR BUSINESS . . .**

... What you do with it, where you keep it, and how you handle it is entirely up to you. The Savings Institutions of Wisconsin, however, would like to make you aware of the types of confidence games professional con artists play. Please check the following clues now, and make sure you are not a potential victim of the con artist.



Have you recently met a stranger who showed you a large bundle of money, or some other valuable item, and told you he found it and would divide it with you if you would show "good faith" by putting up money of your own?



Have you encountered anyone who has offered you money, under any circumstances, but requested you put up money of your own to show "good faith"?



Have you received a telephone call or visit from a person who said he was a bank examiner or member of another federal agency, and needs your help in trapping a teller who is believed to have withdrawn money from your account?



Has a stranger offered to bless your money, remove a curse from it or perform a ritual which will cause it to double in value?

If you answer "YES" to any of these questions, the chances are good that you are being or have been swindled. You should immediately notify your local police department.

Remember, there are very few **LEGITIMATE** reasons why anyone would suggest you make a large cash withdrawal or give them large amounts of cash. Your savings institution wants you to be aware of the dangers involved in large cash transactions, especially when they involve strangers.

PROCEDURES FOR BANK TELLERS  
CONFIDENCE CRIMES

Any customer, especially an elderly person, who wants to withdraw or cash a check for a substantial amount of money from their account, the teller should:

1. Try to convince the customer to take a cashiers check or travelers checks.
2. Inquire as to their reasons for obtaining such a large amount.
3. Give the customer one of the confidence crime alert forms to read and to sign. Ask if they understand what it means.
4. Call upon one of the senior officers to come to your window and talk to the customer.
5. Always activate surveillance cameras in this situation. Log time, dollar amount withdrawn, and the customers name.
6. Ask the customer: "Did someone from the bank, or someone claiming to have found a lot of money, ask you to make this transaction?"

If these steps are implemented, we may be able to save our customers from becoming a victim of a confidence scheme. We have a responsibility to our customers in protecting them against these types of crimes whether they are young, middle aged, or elderly.

# *City of* MILWAUKEE

## POLICE DEPARTMENT

SUBJECT: 1988 Confidence Crime Prevention, Program Update  
TO: All Participating Departments and Agencies.

As was expected, the con-artists have discovered a way to circumvent the effectiveness of our crime prevention program by use of the following:

1. Pigeon-drop suspects are now advising their intended victims that the financial institutions frequently give their customers a hard time by telling them how to handle their money. The suspect then offers his or her assistance in withdrawing money from the account and accompanies the victim into the bank. In two recent cases, which occurred in Milwaukee, the suspects obtained over \$6,000 by posing as the victim's relative.
2. Bank-examiner suspects are also forewarning their intended victims that the teller will question them, and have them read and sign an alert form. The victim is told that this is a routine function, but under the circumstances they are to insist on a cash withdrawal as this is the only way that the "dishonest teller" can be apprehended.

As a result of this recent development it becomes evident that if this once successful crime prevention program is to continue, then additional measures should be implemented. These measures need not be drastic and could include, but are not limited to, one of the following additions to any existing program:

1. Teller could advise the alleged friend or relative that due to recent confidence crime activity, the senior bank officer must authorize any cash withdrawals. Teller could then activate the surveillance camera and call upon the senior officer.
2. Teller could ask the suspect to read and cosign any existing "cash withdrawal alert forms."
3. Any method that consumes time will in most situations prove effective. The con-artists rely upon speed and predictability when plying their trade, and any infringement on their time is sure to achieve the desired results.

**WARNING - BE CAUTIOUS ABOUT CASH OR CHECK WITHDRAWALS**

SIS is concerned about your security. We ask that you take the time to read and **CONSIDER CAREFULLY** this CAUTION FORM.

This form is designed to caution you with regard to the following financial transaction--.

- lump sum withdrawal of \$ \_\_\_\_\_ (in cash/check from your account)
- transfer of assets
- addition of name(s) to current account

**PLEASE CONSIDER THE FOLLOWING FACTS:**

1. **IN A "GOOD FAITH" OPERATION:** Swindlers often arrange to have you "find" or "help find" a wallet or other valuable. One way or another, they have you put up some money to show your "good faith" .... and then leave with the money.
2. **THE POLICE, FBI, BANK REGULATORY AUTHORITIES OR BANK OFFICIALS DO NOT CONDUCT INVESTIGATIONS BY ASKING YOU TO WITHDRAW CASH OR A CHECK FROM YOUR ACCOUNT FOR ANY REASON. [IF SOMEONE ASKS YOU TO WITHDRAW CASH IN THIS MANNER, NOTIFY SIS SECURITY AT 748-8206 (8:30-4:30 M-F) OR THE LOCAL POLICE DEPARTMENT.]**
3. **ELDER ABUSE INCLUDES FINANCIAL EXPLOITATION. ELDER ABUSE IS PROHIBITED BY LAW.** If you are being pressured to give others money, help is available. If you believe you, or another, has been subjected to elder abuse, call the **ELDER ABUSE HOTLINE (#1-800-922-2275)**

If any of these circumstances exist, please contact the local police or the Elder Abuse Hotline and have them investigate the situation **BEFORE** you withdraw your money. Remember, people who want to take advantage of you and your money often are friendly and have "honest" faces.

**I HAVE READ AND UNDERSTAND SIS' WARNING STATEMENT. A BANK EMPLOYEE HAS OFFERED TO ANSWER QUESTIONS.**

- ☐ **CHECK ONE** I INSIST UPON THE IMMEDIATE WITHDRAWAL INDICATED ABOVE (IN CASH OR CHECK)
- ☐ I INSIST THAT SIS PROCESS THE FINANCIAL TRANSACTION NOTED ABOVE

Account # \_\_\_\_\_

Check # \_\_\_\_\_

D. \_\_\_\_\_

eller Stamp: \_\_\_\_\_

Branch: \_\_\_\_\_

555-9780

Initials \_\_\_\_\_

Signature \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_



ATTACHMENT L

## 55 ALIVE/MATURE DRIVING 1992



### Background

The AMERICAN ASSOCIATION OF RETIRED PERSONS was founded in 1958. Today the Association is the nation's leading nonprofit, nonpartisan organization that provides a vital fellowship for men and women age 50 and older whether they are still actively employed, semi-retired or retired.

Currently the Association's membership stands at just over 34 million and continues to grow at a rate of 200,000 new members each month. Approximately 1 out of every 2 Americans age 50 and older belongs to AARP. For interested members there are more than 3,500 chapters and 2,500 units nationwide which work for local community welfare, carry on programs to support the goals of the national organization, and provide educational and social programs.

One of AARP's most significant services is to inform and rally members around legislative issues being considered by older persons.

### Older Drivers' Needs Addressed

Recognizing the need to help older drivers improve their skills and prevent traffic accidents, AARP offers 55 ALIVE/MATURE DRIVING to all motorists age 50 and older. The eight-hour classroom refresher was the first nationwide, comprehensive curriculum designed especially for the older motorist. 55 ALIVE/MATURE DRIVING is available to both Association members and non-members. The graduates to date exceed two million.

AARP's involvement in driver improvement education for older Americans began in 1969. In that year the Association commenced teaching the National Safety Council's (NSC) Defensive Driving Course (DDC) to older Americans nationwide. The program grew dramatically each year and by 1979, when the DDC was phased out, more than 400,000 older Americans had completed the course. In addition, the National Safety Council honored AARP as the number one civilian trainer of drivers every year between 1969 and 1979. The ten consecutive awards cite outstanding contributions to adult driver education.

One reason for the program's extraordinary growth rate was the enthusiastic response from Association members who volunteered to become instructors. More than 4,500 instructors age 50 and older were trained by AARP during the involvement with DDC.

Beneficial as this training effort was, the DDC program had some limitations for older motorists. It was felt that another program was needed. The DDC was not geared to compensate for the age-related physical changes of older persons. It was designed for all drivers age 16 and older. As such, areas which are not seen as serious problems for the older driver are given considerable emphasis. Age-related areas of importance are not covered in detail during the DDC presentation. In developing a specific classroom refresher curriculum for older motorists it was concluded that age-related physical changes, declining perceptual skills, rules of the road, local driving problems, and license renewal merited prime consideration.

An additional change deemed necessary was in the manner of program presentation. Older adults learn best and have the greatest retention rate when the opportunity to participate in the learning process is maximized.

### Creation of 55 ALIVE/MATURE DRIVING

Convinced that older drivers should have a training program of their own, AARP decided to create one. Data was collected from all the nation's state departments of motor vehicles, state agencies on aging, state offices of highway safety, and state departments of transportation. Along with that canvassing, materials were reviewed and contributions received from safety councils, associations, universities, and various agencies of the federal government. Discussions were held with many of the nation's distinguished traffic safety educators to obtain their views regarding the needs of older drivers. During this process a total of 12 older driver courses were uncovered that had been developed since 1961. Most were shortlived but they were examined for their successes and failures. The result is the first comprehensive driver education program fashioned specifically to meet the needs of older motorists. The program is titled 55 ALIVE/MATURE DRIVING.



55 ALIVE/MATURE DRIVING concentrates on those driver education concerns important for older Americans. In the United States, there are approximately 45 million registered drivers age 50 and older. This constitutes 30% of all drivers on the nation's roadways. According to U.S. government figures this is expected to increase significantly by 2000. It is anticipated that women drivers over age 65 will increase 120% over the next five years.

### **The Accident Record of the Older Driver**

Drivers over age 50 are a unique population and have specific physiological considerations and driving problems. 55 ALIVE/MATURE DRIVING is aimed at this target population. How do these individuals compare with other age brackets in safe driving practice and incidence of accidents? In order to obtain an accurate picture it is not enough to consider only age and number of accidents, it is necessary to factor in the annual number of miles driven per year. Research shows that the number of annual miles driven by motor vehicle operators begins to decline significantly after age 55. Therefore, an important consideration with regard to the safe driving practices and abilities of older persons is the criteria used to determine accident involvement statistics. The record of the older driver is good when calculated on the basis of accidents per driver. When the same figures are examined on the basis of miles driven annually a different picture emerges. This more significant and meaningful statistic highlights the urgent need for corrective measures to re-educate older drivers.

Since older persons drive fewer miles, corrections must be made for driving exposure. When this factor is included in accident involvement rates, and the involvement per exposure is determined, a U-shaped curve of accidents versus age results. Violation and accident rates per mile are higher for the youngest and oldest drivers and lower for those in the middle ranges. Although one can quibble over the exact placement of the curve, a general "U" configuration has emerged in every major study undertaken during the past 30 years.

The National Safety Council reports that when the number of miles driven is taken into account, drivers age 55 and older have a poorer accident record than drivers in their middle years.

The U.S. Department of Transportation identifies the older driver as being age 60 and older and a group which requires special consideration in the development of driver improvement training procedures. The National Highway Safety Forecast points out that the older driver is adjudged at fault more frequently than middle-aged drivers, and due to the population age shifting currently underway in America, is perhaps *one of the fastest growing highway safety problem areas.*

### **The Differences of Older Drivers**

Older drivers do not commit traffic violations such as speeding, drunk driving or reckless driving to any significant degree.

Older drivers do have problems when involved in driving situations requiring quick response, full vision and interaction with other drivers. Typical violations include failure to yield right-of-way, improper turning, incorrect lane changing, passing, and entering and leaving expressways.

The older driver learned to drive during the first forty years of this century, well before the advent of formal driver education programs in the public school systems. The older driver who has completed a formal driver training course is the exception rather than the rule.

These individuals may experience physical changes which affect driving abilities and attitudes. People age at different rates so age alone is not a fair criterion for determining driving competence, and there is no question that driving ability can be affected by the aging process. The gradual failure of sensory acuity associated with aging reduces the quantity and accuracy of information capable of being processed. This reduces the ability of the individual to respond or react to his environment with the speed and judgment current traffic often requires.

Eighty-five to ninety percent of all sensory input needed to drive comes via the eye. Unfortunately, as one ages the need for illumination increases, glare sensitivity rises, dark adaption lessens, and peripheral vision narrows. Hearing loss also presents problems for older drivers. It is also broadly accepted that as one ages muscles tend to weaken or atrophy.

Research shows that normal age-related physical changes begin to accelerate at age 55. Accidents per mile driven begin to increase at this same age. This is the reason we call the course 55 ALIVE/MATURE DRIVING. The course title has nothing to do with the 55 mph speed limit.

We accept all motor vehicle drivers age 50 and older because this action allows the 50-54 year old age group to prepare for the normal age-related physical changes and anticipate accident behavior. It gives them a head start.

## **Curriculum: Edition III**

The 55 ALIVE/MATURE DRIVING curriculum consists of six separate sessions. The course is given three sessions at a time over a two-day period. Each three session segment lasts four hours.

### **Session One: Overview**

To define course content, a series of slides describes the characteristics of the driver age 55 and over and establishes the relevance of the curriculum that will follow. Group discussion centers on driving frustrations and effects of aging on individual driving behavior.

### **Session Two: Physical Changes**

Discussion pertains to the many unrecognized but normal losses in vision, hearing and reaction time as they relate to driving performance. The session concludes with an examination of the effects of alcohol and medication on driving.

### **Session Three: Interacting with Traffic**

Basic rules of driving particularly pertinent to the 55+ driver are discussed. These include right-of-way, intersections, turning and passing. A review of the shapes, colors, and types of road signs as well as pavement markings is featured.

### **Session Four: Interacting with Traffic Continued...and Safety Belts**

A discussion of the rules of the road continues with entering and leaving freeways, parking and backing. The importance of safety belt usage is considered as well as what a driver can expect if involved in an accident while not wearing a safety belt.

### **Session Five: Accident Prevention Measures, Adverse Driving Conditions, Other Road Users and Recreation Vehicles**

Accident prevention measures and the effect of adverse driving conditions such as night, inclement weather, and rush hour driving are considered. Discussion of other road users spotlights pedestrians, bicycles, trucks, motorcycles, towed vehicles and stray animals. Proper techniques for handling unexpected driving emergencies are reviewed. Safe R.V. use is examined.

### **Session Six: Perception and Course Wrap-Up**

Group discussion focuses on major driving hazards in specific driving environments. A brief review of the previous sessions concludes the course.

## **Conduct Of Courses**

Courses are conducted by volunteers aged 50 and older utilizing the peer concept. These volunteers are recruited and trained by AARP in a three-phase process. An Instructor training session provides the overall training to conduct educational discussion groups and review educational learning skills. In the second phase the Instructor's first course is conducted as a practice teaching session in that it is monitored by the trainer. The last phase is an on-going supervision process supplemented by in-service training workshops held regularly. All of these costs are subsidized by the Association.

Each participant in 55 ALIVE/MATURE DRIVING is charged a minimal fee to help offset overall program costs which include Instructor recruitment and training, Instructor out-of-pocket expenses, ongoing supervisory training nationwide, and program materials and their distribution. AARP subsidizes the remaining expenses amounting to 30%. Each Instructor volunteers his/her time and recruits sponsors who provide a rental free facility and slide projector.

## ATTACHMENT M

### National Resources

This list of resources and videotapes is reprinted from PERF Improving the Police Response to Domestic Elder Abuse, Instructor Manual, Resources 3-5

#### Administration on Aging

330 C Street, S.W.  
Room 4755  
Washington, D.C. 20201

#### American Association of Retired Persons

Criminal Justice Services  
601 E Street, N.W.  
Washington, D.C. 20049

#### American Bar Association

Commission on Legal Problems of the Elderly  
1800 M Street, N.W.  
Suite 200 South  
Washington, D.C. 20036

#### American Public Welfare Association

810 First Street, N.E.  
Suite 500  
Washington, D.C. 20002

#### American Society of Law Enforcement Trainers

P.O. Box 361  
Lewes, Delaware 19958

#### Clearinghouse on Abuse and Neglect of the Elderly

College of Human Resources  
University of Delaware  
Newark, Delaware 19716

#### Gray Panthers

2025 Pennsylvania Avenue, N.W.  
Suite 821  
Washington, D.C. 20006

#### International Association of Chiefs of Police

1110 North Glebe Road  
Suite 200  
Arlington, Virginia 22201

#### International Association of Directors of Law

Enforcement Standards and Training  
c/o Darrel Hart  
4491 Cerillos Road  
Santa Fe, New Mexico 87505

#### National Aging Resource Center on Elder Abuse

810 First Street, N.E.  
Suite 500  
Washington, D.C. 20002

#### National Association of Adult Protective Services

Administrators  
c/o Adult Protective Services  
P.O. Box 149030, W-509  
Austin, Texas 78714

#### National Association of Area Agencies on Aging

1112 16th Street, N.W.  
Suite 100  
Washington, D.C. 20036

#### National Association of State Units on Aging

1225 I Street, N.W.  
Suite 725  
Washington, D.C. 20005

#### National Committee for the Prevention of Elder Abuse

c/o Institute on Aging  
Medical Center of Central Massachusetts  
119 Belmont Street  
Worcester, Massachusetts 01605

#### National Conference on State Legislatures

1560 Broadway  
Suite 700  
Denver, Colorado 80202

#### National Council of Senior Citizens

1331 F Street, N.W.  
Washington, D.C. 20004

#### National Crime Prevention Council

1700 K Street, N.W.  
2nd floor  
Washington, D.C. 20006

#### National Institute on Aging Information Center

9000 Rockville Pike  
Bethesda, Maryland 20892

#### National Ombudsman Resource Center

1224 M Street, N.W.  
Suite 301  
Washington, D.C. 20005

#### National Senior Citizens Law Center

1815 H Street, N.W.  
Suite 700  
Washington, D.C. 20006

#### National Sheriffs' Association

1450 Duke Street  
Alexandria, Virginia 22314

#### Older Women's League

666 Eleventh Street, N.W.  
Suite 700  
Washington, D.C. 20001

Police Executive Research Forum  
2300 M Street, N.W.  
Suite 910  
Washington, D.C. 20037

San Francisco Consortium for Elder Abuse  
Prevention  
Mount Zion Institute on Aging  
3330 Geary Boulevard  
2nd floor  
San Francisco, California 94118

Victim Services  
2 Lafayette Street  
3rd Floor  
New York, New York 10007

For a more complete listing of federal, state, and local agencies and non-profit associations, consult the Directory of Aging Resources, available from Business Publishers, Inc., 951 Pershing Drive, Silver Spring, Maryland 20910. Area agencies on aging and other local resources should also be consulted for additional services in your region.

## **National Center on Elder Abuse**

The National Center on Elder Abuse (NCEA), established in October 1993 by a cooperative agreement grant (No. 90-AM-0660) awarded to the American Public Welfare Association (APWA) by the Administration on Aging (AoA), is operated by a consortium of the APWA, the National Association of State Units on Aging (NASUA), the University of Delaware, and the National Committee for the Prevention of Elder Abuse (NCPEA).

The purpose of NCEA is to develop and provide information, data, and expertise to federal, state, and local agencies, professionals, and the public on a timely basis. NCEA seeks to assist interested organizations and individuals in their efforts against elder abuse, neglect, and exploitation by conducting training workshops, producing newsletters, operating an information clearinghouse, engaging in research, and developing and disseminating technical reports of national significance.

For information regarding elder abuse, neglect, and exploitation, write to the National Center on Elder Abuse (NCEA), 810 First Street, N.E., Suite 500, Washington, D.C. 20002, or call (202) 682-2470 or (202) 682-0100.

## Additional Video Resources

*Elder Abuse and Neglect in the Family.* University Center on Aging, University of Massachusetts Medical Center. 1986.

Tape #1 — *The Hidden Sorrow: An Overview* (24 minutes)

Tape #2 — *In Pursuit of a Life Without Violence: Intervention Strategies* (26 minutes)

Tape #3 — *Difficult Choices: Ethical Issues in Casework* (21 minutes)

To order, contact:

National Committee for the Prevention of Elder Abuse  
c/o Institute on Aging  
The Medical Center of Central Massachusetts  
119 Belmont Street  
Worcester, Massachusetts 01605

*Breaking the Silence* (9:32 minutes)

To order, contact:

Metropolitan Washington Council of Governments  
777 North Capitol Street, N.E., Suite 300  
Washington, D.C. 20002-4201  
(202) 962-3255

*Elder Abuse: 5 Case Studies* (each case study runs 5 to 10 minutes)

To order, contact:

Terra Nova Films, Inc.  
9848 South Winchester Avenue  
Chicago, Illinois 60643  
(312) 881-8491

*An Informative Video for Health Care Professionals* (25 minutes)

To order, contact:

Orange County Area on Aging  
18552 MacArthur Boulevard, Suite 425  
Irvine, California 92715  
(714) 863-0323

*Lifeline Series: Mandated Reporter* (27 minutes)

Segment 1: Overview of the problem and profiles of victims and abusers

Segment 2: Types of abuse

Segment 3: Reporting

To order, contact:

California Attorney General's Office  
In California (916) 638-8383  
Outside California 1-800-982-1420

*The Golden Years* (60 minutes)

To order, contact:

Great Plains National  
P.O. Box 80669  
Lincoln, Nebraska 68501  
1-800-228-4630

*In Crime's Wake Series: Elder Abuse: Hidden From View* (10 minutes)

To order, contact:

Victim Services  
Public Affairs Unit  
2 Lafayette Street  
Third Floor  
New York, New York 10007

*Elder and Dependent Adult Abuse* (31 minutes)

To order, contact:

Lieutenant Castro  
Los Angeles County Sheriff's Office  
Media Resources Unit  
(310) 946-7807

*Serving the Victim of Elder Abuse: A Team Approach.* Mount Zion Institute on Aging. Video (26 minutes). 1986.

To order, contact:

Terra Nova Films, Inc.  
9848 South Winchester Avenue  
Chicago, Illinois 60643  
(312) 881-8491

# Attorney General ATTACHMENT N SCOTT HARSHBARGER

## *Law Enforcement Advanced Training*



### SCHEDULE

The Elderly Protection Project will hold sixteen (16) regional, two-day, advanced law enforcement trainings. The Attorney General is pleased that Secretary Frank Ollivierre and staff from the Executive Office of Elder Affairs and its local protective services agencies will participate in and help to present the trainings.

The schedule below indicates training dates and the participating protective service agencies and police departments from the corresponding cities and towns.

#### **SEPTEMBER 22-23, 1993**

Montachusett Home Care Corporation

Ashburnham, Ashby, Ayer, Berlin, Bolton,  
Clinton, Fitchburg, Gardner, Groton,  
Hubbardston, Lancaster, Lunenburg,  
Leominster, Pepperell, Princeton, Shirley,  
Sterling, Templeton, Townsend,  
Westminster, Winchendon

#### **SEPTEMBER 29-30**

Elder Services Of Cape Cod and The Islands, Inc.

Barnstable, Bourne, Brewster, Chatham,  
Chilmark, Dennis, Eastham, Edgartown,  
Falmouth, Gay Head, Harwich, Mashpee,  
Nantucket, Oak Bluffs, Orleans,  
Provincetown, Sandwich, Tisbury, Truro,  
Wellfleet, West Tisbury, Yarmouth

#### **OCTOBER 6-7**

Elder Services Of Berkshire County, Inc.

Adams, Alford, Becket, Cheshire,  
Clarksburg, Dalton, Egremont, Florida,  
Great Barrington, Hancock, Hinsdale,  
Lanesborough, Lee, Lenox, Monterey,  
Mount Washington, New Ashford, New  
Marlborough, North Adams, Otis, Peru,  
Pittsfield, Richmond, Sandisfield, Savoy,  
Sheffield, Stockbridge, Tyringham,  
Washington, West Stockbridge,  
Williamstown, Windsor

#### **OCTOBER 20-21**

Baypath Senior Citizens Services, Inc.

Ashland, Dover, Framingham, Holliston,  
Hopkinton, Hudson, Marlborough,  
Natick, Northborough, Sherborn,  
Southborough, Sudbury, Wayland,  
Westborough

**Tri-Valley Elder Services, Inc.**

Bellingham, Blackston, Brookfield,  
Charlton, Douglas, Dudley, East  
Brookfield, Franklin, Hopedale, Medway,  
Mendon, Milford, Millville, Northbridge,  
North Brookfield, Oxford, Southbridge,  
Spencer, Sturbridge, Sutton, Upton,  
Uxbridge, Warren, Webster, West  
Brookfield

**NOVEMBER 3-4**

**Elder Home Care Services Of The Worcester Area,  
Inc.**

Auburn, Barre, Boylston, Grafton,  
Hardwick, Holden, Leicester, Millbury,  
New Braintree, Oakham, Paxton, Rutland,  
Shrewsbury, West Boylston, Worcester

**NOVEMBER 15-16**

**Health And Education Services, Inc.**

Danvers, Marblehead, Middleton, Peabody,  
Salem

**Senior Home Care Services, Inc.**

Beverly, Essex, Gloucester, Hamilton,  
Ipswich, Manchester, Rockport, Topsfield,  
Wenham

**Greater Lynn Senior Services, Inc.**

Lynn, Lynnfield, Nahant, Saugus,  
Swampscott

**DECEMBER 1-2**

**Western Massachusetts Elder Care**

Belchertown, Chicopee, Granby, Holyoke,  
Ludlow, South Hadley

**Greater Springfield Senior Services, Inc.**

Agawam, Brimfield, East Longmeadow,  
Hampden, Holland, Longmeadow, Monson,  
Palmer, Springfield, Wales, West  
Springfield, Wilbraham

**DECEMBER 8-9**

**Coastline Elderly Services, Inc.**

Acushnet, Dartmouth, Fairhaven, Gosnold,  
Marion, Mattapoisett, New Bedford,  
Rochester

**Bristol Elder Services, Inc.**

Attleboro, Berkley, Dighton, Fall River,  
Freetown, Mansfield, North Attleborough,  
Norton, Raynham, Rehoboth, Seekonk,  
Somerset, Swansea, Taunton, Westport

**JANUARY 19-20, 1994**

**Boston Senior Home Care  
Central Boston Elder Services, Inc.  
Southwest Boston Senior Services**

All of the neighborhoods and areas of  
Boston

**JANUARY 26-27**

**Chelsea/Revere/Winthrop Elder Services**

Chelsea, Revere, Winthrop

**FEBRUARY 9-10**

**Health & Social Services Consortium, Inc.  
(HESSCO)**

Canton, Dedham, Foxborough, Medfield,  
Millis, Norfolk, Norwood, Plainville,  
Sharon, Walpole, Westwood, Wrentham

**South Shore Elder Services, Inc.**

Braintree, Cohasset, Hingham, Holbrook,  
Hull, Milton, Norwell, Quincy, Randolph,  
Scituate, Weymouth

**FEBRUARY 23-24**

**Minuteman Home Care Corporation**

Acton, Arlington, Bedford, Boxborough,  
Burlington, Carlisle, Concord, Harvard,  
Lexington, Lincoln, Littleton, Maynard,  
Stow, Wilmington, Winchester, Woburn

West Suburban Elder Services, Inc.

Belmont, Brookline, Needham, Newton,  
Waltham, Watertown, Wellesley, Weston

## **MARCH 16-17**

Somerville-Cambridge Elder Services, Inc.

Cambridge, Somerville

Mystic Valley Elder Services, Inc.

Everett, Malden, Medford, Melrose, North  
Reading, Reading, Stoneham, Wakefield

## **APRIL 6-7**

Highland Valley Elder Services

Amherst, Blandford, Chester, Chesterfield,  
Cummington, Easthampton, Goshen,  
Granville, Hadley, Hatfield, Huntington,  
Middlefield, Montgomery, Northampton,  
Pelham, Plainfield, Russell, Southampton,  
Southwick, Tolland, Westfield,  
Westhampton, Williamsburg, Worthington

Franklin County Home Care Corporation

Ashfield, Athol, Bernardston, Buckland,  
Charlemont, Colrain, Conway, Deerfield,  
Erving, Gill, Greenfield, Hawley, Heath,  
Leverett, Leyden, Monroe, Montague, New  
Salem, Northfield, Orange, Petersham,  
Philipston, Rowe, Royalston, Shelburn,  
Shutesbury, Sunderland, Warwick,  
Wendell, Whatley

## **APRIL 20-21**

Old Colony Elder Services, Inc.

Abington, Avon, Bridgewater, Brockton,  
Carver, Duxbury, East Bridgewater,  
Easton, Halifax, Hanover, Hanson,  
Kingston, Lakeville, Marshfield,  
Middleborough, Pembroke, Plymouth,  
Plympton, Rockland, Stoughton, Wareham,  
West Bridgewater, Whitman

## **MAY 18-19**

Elder Services Of The Merrimack Valley, Inc.

Amesbury, Andover, Billerica, Boxford,  
Chelmsford, Dracut, Dunstable,  
Georgetown, Groveland, Haverhill,  
Lawrence, Lowell, Merrimac, Methuen,  
Newbury, Newburyport, North Andover,  
Rowley, Salisbury, Tewksbury,  
Tyngsborough, Westford, West Newbury



ATTACHMENT O

# TRAINING AGENDA



## FIRST DAY

### *Registration*

8:30 a.m. - 9:00 a.m.

### THE INCREASING ELDER POPULATION: THE IMPLICATIONS FOR POLICE

9:00 a.m. - 9:30 a.m.

### MYTHS AND FACTS OF AGING

9:45 a.m. - 10:00 a.m.

### FEAR, VICTIMIZATION AND VULNERABILITY: DEALING WITH THE ELDERLY VICTIM/WITNESS

10:00 a.m. - 11:00 a.m.

### *Morning Break*

11:00 a.m. - 11:15 a.m.

### COMMUNICATING WITH THE ELDERLY

11:15 a.m. - 12:00 p.m.

### THE VALUE OF SPECIALIZED TRAINING

12:00 a.m. - 12:30 p.m.

### *Lunch*

12:30 p.m. - 1:15 p.m.

### THE ELDER ABUSE REPORTING LAW AND WORKING WITH PROTECTIVE SERVICES

1:15 p.m. - 3:30 p.m.

## SECOND DAY

### CASE STUDIES IN ELDER ABUSE, NEGLECT, AND EXPLOITATION

8:30 a.m. - 10:00 a.m.

### *Morning Break*

10:00 a.m. - 10:15 a.m.

### INVESTIGATION: THE VALUE OF REPORTS AND PHOTOGRAPHS

10:15 a.m. - 11:00 a.m.

### MISSING PERSONS AND ALZHEIMER'S DISEASE

11:00 a.m. - 12:00 p.m.

### DOMESTIC VIOLENCE: REVIEW OF 209A AND ITS APPLICATION TO ELDERS

12:00 p.m. - 12:30 p.m.

### *Lunch*

12:30 p.m. - 1:15 p.m.

### CHAPTER 123 AND MENTAL HEALTH ISSUES

1:15 p.m. - 1:45 p.m.

### FINANCIAL EXPLOITATION

1:45 p.m. - 2:30 p.m.

### *Afternoon Break/Course Evaluation*

2:30 p.m. - 2:45 p.m.

### FINANCIAL EXPLOITATION Continued

2:45 p.m. - 3:00 p.m.

### ELDERS AND IMPAIRED DRIVING

3:00 p.m. - 3:30 p.m.

*Participants Receive Certificates*