

# The Peninsula Elder Abuse Forensic Center

Stephanie Edwards, MSG, York-Poquoson Social Services

Beth Walters, RN, BS, FNE, SANE-A, SANE-P  
Riverside Health System

# OBJECTIVES

- Learn the concept of the Forensic Center model
- Learn the benefits of using a Forensic Center model/enhanced MDT for elder abuse cases
- Learn how collaboration enhances positive case outcomes
- Learn how to replicate the Forensic Center model in your locality

# ELDER ABUSE

- Complex
- Physical abuse, sexual abuse, neglect, self-neglect, financial exploitation
- Web of medical, social, legal and/or financial issues
- Multidisciplinary problem that requires a multidisciplinary solution
- Responded to more effectively when disciplines work together rather than in silos

# Elder Abuse MDT's

- An innovative response to elder abuse
- Vary in size, composition and activities (Teaster, Nerenburg and Stansbury, 2003)
- Focus on cases that require coordination among different systems and professionals
- Based on the assumption that no single agency has all resources to effectively resolve elder abuse

# THE 3 C's

- COLLABORATION
- COOPERATION
- COMMUNICATION

# What is an Elder Abuse Forensic Center (E AFC)?

- An enhanced MDT focused on concrete action steps
- A new tool in the field of elder abuse
- Each member works on case and provides a “service” to the case
- Task Focused, Action Oriented
- A “ONE STOP SHOP” for an agency who needs help with a case
- Forensic Center is not a “place”, but a meeting

# Orange Co., CA EAFC

- First EAFC in the US (2003)
- Developed as an effort to overcome barriers and improve cooperation among agencies
- Funded by a 3 year grant from the Archstone Foundation
- Unites medical, legal, law enforcement and social service agencies
- Started EAFC's in Los Angeles, San Francisco and San Diego

# GOAL OF AN EAFC

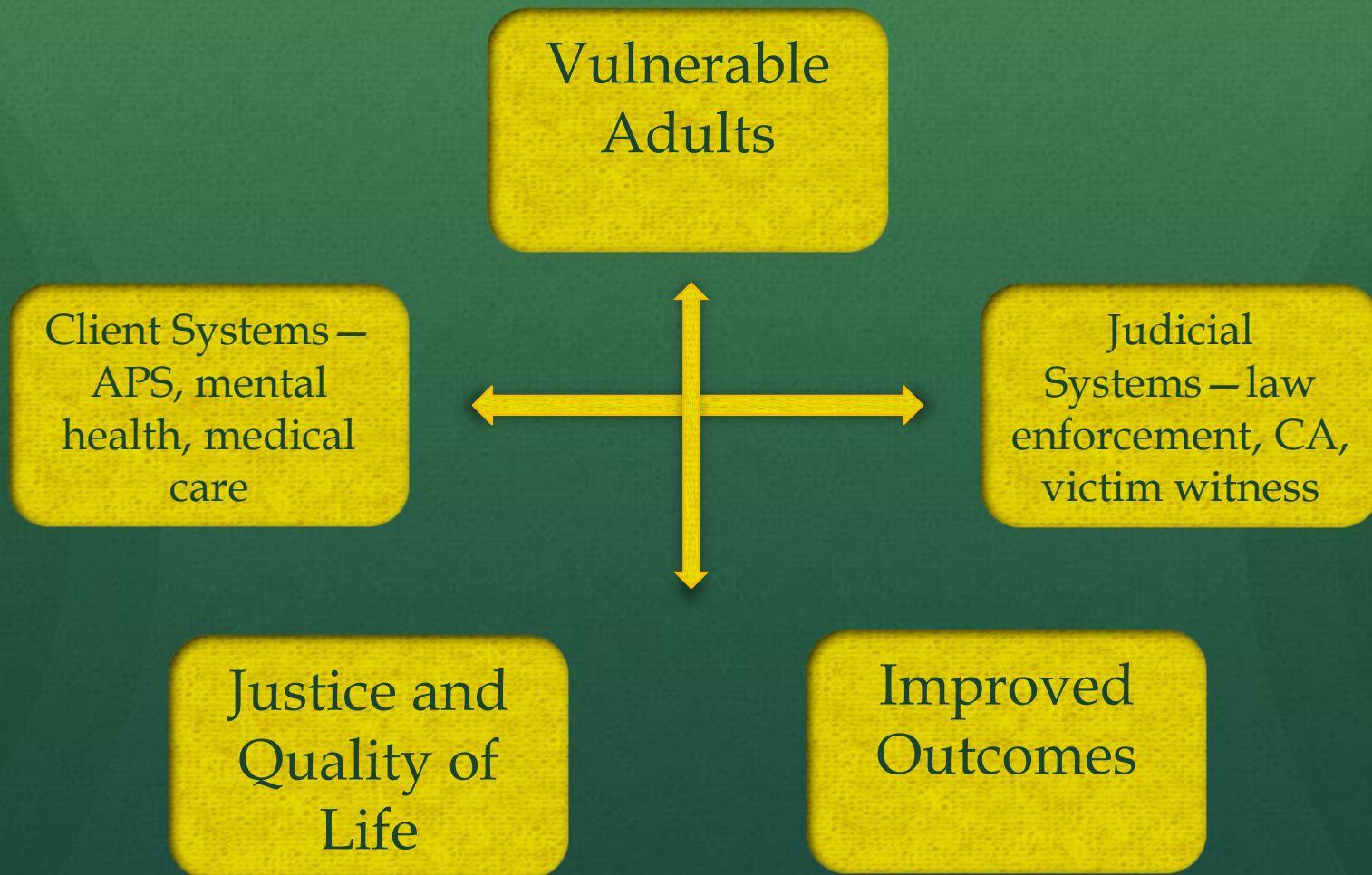
- To determine CONCRETE ACTIONS to be taken on the case to address the NEEDS OF THE CASE and to take appropriate ACTIONS. Case becomes the responsibility of the team.
- Traditional MDT's only provide recommendations to the presenter – responsibility of the presenter to take action steps.



# FORENSIC

- The application of scientific knowledge to legal problems
- Combined medical, legal and social model

# Forensic Center Model



# Team Members

- APS
- Law Enforcement
- Commonwealth's Attorney
- Physician
- Neuropsychologist/Neurologist
- Victim Witness
- Domestic Violence Providers/Sexual Assault
- Community Services Boards (mental health)

# TEAM MEMBERS

- Forensic Nurse
- EMS/Fire Department
- Area Agency on Aging
- Civil Attorneys
- Federal Partners-FBI/US Attorney
- Forensic Accountant
- Financial Institutions

# Role of the Physician

- Review medical records
- Review medications
- Can follow up with client's physician
- Testify in court as an expert witness
- Can help determine if neglect, self-neglect or physical abuse
- Provide action steps/suggestions to the investigator

# Role of the Neuropsychologist

- Mental capacity assessments
- Can be used to determine if a POA, guardian, conservator is needed
- Can be of use in financial exploitation cases

# Forensic Accountant

- Most frequently utilized service
- Analyzes bank records to detect patterns indicative of financial exploitation
- Used to understand the nature and scope of financial abuse
- Can explain victim's regular financial activity before perpetrator involvement as compared to after perp involvement
- Can explain tax implications and penalties; estate planning suggestions

# When to use Forensic Accountant

- When law enforcement needs stronger evidence of financial exploitation to investigate a case
- Strengthen a guardianship/conservatorship petition
- Multiple transfers between accounts/numerous bank accounts
- Unauthorized use of assets or credit card



# Coordinator

- Essential to the operation of the e-MDT
- Accepts and triages referrals from team members
- Plans and facilitates meeting
- Coordinates with the experts (forensic accountant, geriatrician, psychologist)
- Tracks action steps and case outcomes

# How an EAFC works

- Coordinator receives case review request
- Coordinator contacts agencies/individuals of cases to be staffed – case specific
- Meetings held monthly at a central location – 1.5-2 hrs
- 2-4 new cases staffed, case updates
- Identify case needs and goals
- Action steps assigned, follow up at next meeting

# Outcomes

- Geriatric/medical or capacity assessments
- Referrals to services (case management, mental health, legal services)
- Further investigation by law enforcement
- Recommendation for guardianship or conservatorship
- Enhanced support to APS and law enforcement

# Benefits of an EAFC

- Timely response to cases
- Timely response leads to improved victim safety, preservation of evidence and apprehension of the perpetrator.
- Duplicate activities are avoided
- Prompt, coordinated intervention
- Improved communication among team members

# Benefits continued

- Reduce recidivism/recurring cases (Examples: APS cases/ER visits/repeat calls to 911)
- Legal intervention (criminal or civil)
- Increased participation and collaboration; relationship building among agencies
- Increased effectiveness in addressing cases

# The Peninsula Elder Abuse Forensic Center

- Established November 2017
- Regional – Newport News, Hampton, James City Co, Williamsburg, York-Poquoson, Gloucester
- Meeting at beginning of the month – Greater Williamsburg group
- Meeting at end of month-Newport News/Hampton group

# Team Members

- Law Enforcement
- APS
- Commonwealth's Attorney
- Peninsula Agency on Aging (AAA)
- Riverside Regional Medical Center
- Colonial Behavioral Health/Hampton-NN CSB
- Center for Sexual Assault Survivors

# Team Members cont.

- Civil attorneys (2)
- York County Attorney
- Avalon Center (Domestic Violence)
- Newport News Fire Department
- Financial institutions
- FBI-Norfolk office
- US Attorney's Office Eastern District of VA



# Case Referrals

- PEAFAC hears complex cases of elder abuse, neglect, self-neglect and financial exploitation.
- Multiple agencies involved (APS, law enforcement, hospital, EMTs, etc)
- Access needed to a specialist (forensic accountant, geriatrician, psychologist)
- Difficulty implementing interventions to stop abuse, neglect or exploitation
- Chronic APS cases

# Referrals, cont.

- Referrals sent to Coordinator via encrypted email.
- Coordinator contacts team members who are especially needed for the case so they will be present at meeting or on phone
- Case is discussed and followed up on monthly until case is resolved.
- Referrals come from participating agencies, not from the community/public
- Team members communicate between meetings to provide updates and coordinate case work

# 2018 Statistics

- 17 total cases
- 6 financial exploitation-4 cases involved forensic accountant
- 1 sexual abuse
- 6 neglect
- 2 hybrid (financial exploitation and neglect)
- 1 “complicated”
- 1 self-neglect

# So far in 2019

- 5 financial exploitation-2 of those have gone to the FBI for further investigation
- 5 self-neglect
- 2 neglect

# Case Examples

- MD--financial exploitation
- BP--neglect
- VW--financial exploitation

# Grants

- 2018-University of Southern California-\$6900
- 2019-Williamsburg Community Foundation-\$3900
- 2019-Peninsula Task Force on Aging-\$1000
- 2018-Recognized by the Virginia General Assembly

# How To Start

- Find a like minded community partner to work with
- Stakeholder's meeting to gauge interest-VIDEO from Center of Excellence on Elder Abuse and Neglect
- Form workgroups/committees
- Planning and logistics (meeting place, schedule of meetings for each locality)
- Determine types of cases to hear (physical abuse, sexual abuse, self-neglect, neglect, financial exploitation)
- Grant writing/fundraising

# How to Start

- Memorandum of Understanding
- Development of policy/procedures
- Mission and vision statement
- Develop strategic plan
- May take 3-6 months to get off the ground
- Be prepared for a slow start



# EVALUATION

- Higher number of referrals for prosecution
- Higher rates of referral for conservatorships
- Recurrence of repeat APS complaints significantly reduced
- EAFC has been found to be an effective evidence based elder abuse intervention

Wilbur, K., Nichol, M., Gassoumis, Z., Cho, J., DeLiema, M., Gironda, M., Wu, J. and Navarro, A. (2014). Elder abuse forensic center development and evaluation: a toolkit.

# REMEMBER

- The EAFC needs to fit the needs of your community. Not one size fits all.
- The Center needs strong representation, commitment and involvement from agencies to be successful!
- Contact Stephanie Edwards if you would like case documents shared-MOU, case referral forms, strategic plan, etc.

QUESTIONS?

CONCERNS?

COMMENTS?

# Contact Information

Stephanie Edwards, BSW, MSG

York-Poquoson Social Services

757-890-3978

[Stephanie.edwards@yorkcounty.gov](mailto:Stephanie.edwards@yorkcounty.gov)

Beth Walters, RN, BS, FNE, SANE-A, SANE-P

Riverside Regional Medical Center

Office-757-594-3983

[Elizabeth.walters@rivhs.com](mailto:Elizabeth.walters@rivhs.com)

# REFERENCES

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- *Elder Abuse Case Review MDT Toolkit*, US Department of Justice, Elder Justice Initiative
- *Multidisciplinary Elder Abuse Prevention Teams: A New Generation*, National Center on Elder Abuse