

**Elder Abuse Fatality Review Team Meeting
Minutes – March 6, 2013
421 N. County Farm Road, Room 3500-A
Wheaton, Illinois 60187**

Meeting called to order: 2:06 pm by Joe Ruggiero

Members Physically Present: Joe Ruggiero (DuPage County State’s Attorney’s Office), Diane Michalak (DuPage County State’s Attorney’s Office), David Zdan (Wheaton Police Department), Steve Hamill (Wheaton Police Department), Holly Zielke (Illinois Department on Aging), ShaTonya Herring (Senior Services), Joe Ramos (Illinois Department of Public Health), Jackie Rankin (Illinois Family Violence Coordinating Counsel), Richard Jorgensen (DuPage County Coroner)

Members Absent: Bernie Murray (DuPage County State’s Attorney’s Office), Anthony Rainaldi (Westmont Police Department), Mike Drugan (DuPage County Sheriff’s Office), Mary Lee Tomsa (Senior Services, DuPage County), Dr. Jeff Harkey (DuPage County Coroner’s Office), Scott Heinrich (Addison Fire Department), Darlene Harney (Illinois Department of Public Health), Michael Fisher (DuPage County State’s Attorney’s Office), Joy Ward, RN (Illinois Department of Veteran’s Affairs); William Schubert (Illinois Department of Public Health)

Guests: Jill Uhlir (Wheaton Police Department); Marla Fronczak (Agency on Aging)

Business Conducted:

-Introductions.

Welcomed guests Jill Uhlir an Elderly Service Officer from Wheaton Police Department and Marla Fronczak from the Agency on Aging.

-Guests signed confidentiality agreements

-Minutes

Minutes were reviewed. ShaTonya Herring moved to accept the minutes. Steve Hamill 2nd the motion. Minutes were accepted.

-Discussed “At-Risk Seniors” list

ShaTonya Herring added several names to the list and removed others. There have been 3 hits on the list, though none have generated an investigation.

Dr. Jorgensen to look into how the coroner’s software interacts with the At Risk database to determine how a “hit” is generated. Senior Services and the Coroner’s office are going to contact IT to try and work out some of the computer glitches that are causing false positive hits.

Senior Services would like a more definitive standard for what causes a person to be placed on the list. Holly Zielke suggested that all persons whose risk level is a 2 or 3 (on a 1-3 scale) should be on the list with exceptions made for level 1 risk elders on an individual basis.

Not all seniors on the List are still open/active Senior Service cases but Senior Services did have a case worker contact each closed case listee to perform a well being check.

- 1st responders & the At Risk List

One town (believed to be Downers Grove) sent an Elder Service Officer out to each senior on the list to perform a well being check and the officer informed Senior Services if they determined that the address or other information was incorrect. While this was not the intent of the list it's good to know the department was concerned and checked on these seniors.

Senior Services did receive a call from an officer regarding a senior that was not on the list that they had come across to see if Senior Services could make contact and offer services.

-Training Medical Personnel

Jackie Rankin reported that she was informed that to train hospital personnel the trainings would need to be short (30 min or less), on site, at shift change and geared toward specific groups (e.g. nurses, social workers, ER staff, etc).

It was decided that best approach would be to put together a canned presentation and contact the administrators of the 6 local hospitals and other facilities, such as Linden Oaks and/or Marion Joy and inform them the staff have specific legal obligations with respect to reporting elder abuse and that we would like to make a presentation to explain their legal obligations to assist them in staying within compliance of the law and their licensing boards. ShaTonya related that they have Choices staff at each of the hospitals and she will see if they can do the training. World Elder Abuse Awareness day (June 14th) was suggested as a possible training date.

Another topic to be included besides explaining their obligation to contact the elder abuse hotline is to call the police if you believe a person has been abused or neglected. Medical personnel may not realize that neglect of an elder is a crime that police can and need to investigate.

Holly Zielke said that according to the Dept on Aging annual report 20% of reports to their office are from family members; 17% from social workers; 10% medical personnel; 5% law enforcement, other mandated reporters, self reported or other (neighbors, friends, etc); 2% financial institutions

-Protocol

The statewide team has completed the prosecutor's elder abuse protocol, the domestic violence protocol and the law enforcement elder abuse protocol are completed and training is being developed for all of the protocols and training should begin later this year.

-New Business

Holly Zielke spoke about House Bill 948 which basically keeps the elder Abuse Act intact but changes the name to Adult Protective Services and broadens to encompass persons over the age of 18 with disabilities, which the Department on Aging is in agreement with.

House Bill 2643, however, is removing the section regarding what is now the Elder Abuse fatality Review section from the Elder Abuse Act and changing entirely who can be on the Teams and how the teams are formed. The team agrees that this is not a good plan. The teams are currently constructed are doing good work on behalf of seniors and could be expanded to include adults with disabilities while keeping it under what would become the Adult Protective Services Act and maintaining the status quo on assembly, composition and mission of the teams.

Jill Uhlir has expressed interest in joining the team as a full time member and a vote as to that will be included on the agenda for the May 1, 2013 meeting.

ShaTonya Herring expressed concern about officers not making arrests in cases of elder on elder domestic violence.

ANE symposium will be held on 9/17/13 and 9/25/13 one in DuPage County and one in Kane County which will explain the Fatality Review team and its purpose as well as explaining the At Risk Senior List and other areas of training pertaining to the elder population. Marla will send a letter detailing the program soon.

-Case Review

The team voted to enter executive session at 3:41pm to discuss a case.

From the review it was discussed that the Coroner's office can amend a death certificate if something is learned after the original certificate is issued that changes the facts/circumstances of the death, unless there was a Coroner's Inquest.

Next Meeting: May 1, 2013 at 2pm, Room 3500-A

Adjournment Dave Zdan's motion to adjourn was seconded by Joe Ramos and carried at approximately 4:10pm