

Vulnerable Adult Incident Report

NAME	AGE	DOB	EMERGENCY CONTACT	PHONE
DATE REPORTED	TIME REPORTED	DATE AND TIME INCIDENT OCCURED		FILE NO:
INCIDENT LOCATION			REPORTING OFFICER	

VULNERABLE + HARM = MANDATORY reporting to Adult Protective Services at (855) 444-3911

WHEN ABUSE/NEGLECT/EXPLOITATION IS SUSPECTED

1. Determine if the victim is a Vulnerable Adult (VA)
2. Determine whether the VA can see, hear and communicate ideas. Cognition may be diminished before competency (see below).
3. Determine harm, if any to the VA
4. Determine whether you are required to report to APS or others
5. Evidence and forms for collection
6. Crimes and elements

1A. Is the Victim a vulnerable Adult? (Documenting lack of ability can be important)

- Over 18
- Victim needs help with ADLs (Activities of Daily Living):
- Walking
 - Sitting
 - Cooking
 - Getting Water
 - Bathing
 - Getting out of bed
 - Transportation
 - Taking medication
 - Doctor visits

Unable to protect self from abuse, neglect or exploitation (Vulnerable Adult MCL 750.145m(u))

Comments (if the victim is not vulnerable, continue with normal investigation): _____

1B. Activities of Daily Living (ADL'S)

Ability to Care for Self (bathing, grooming, transportation, walking, toileting etc.)

Level of Function: Independent Needs Support Needs Assistance Total Care Describe: _____

1C. Instrumental Activities of Daily Living (IADL'S)

Financial Decision-Making (bills, donations, investments, real estate, wills, protect assets, resist fraud etc.)

Level of Function: Independent Needs Support Needs Assistance Total Care Describe: _____

1D. Medical Decision-Making (express a choice and understand, appreciate, reason about health info, etc.)

Level of Function: Independent Needs Support Needs Assistance Total Care Describe: Guardian Conservator

Dr. Name and number: _____

PHYSICAL RISK ASSESSMENT

If the adult is vulnerable, is there harm? Abuse Neglect Financial

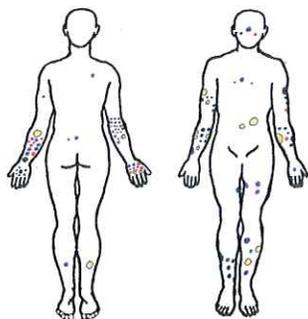
- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Extremely soiled bedding | <input type="checkbox"/> Lock on victim's door | <input type="checkbox"/> Smell of rotting flesh | <input type="checkbox"/> Narcotic medication |
| <input type="checkbox"/> Soiled Bandages | <input type="checkbox"/> Bilateral grip marks | <input type="checkbox"/> Evidence of cleaning prior to arrival | <input type="checkbox"/> Filthy living conditions for victim |
| <input type="checkbox"/> Victim is in pain | <input type="checkbox"/> Foul Smell | <input type="checkbox"/> Inconsistent explanation of care | <input type="checkbox"/> Unusual physical signs |
| <input type="checkbox"/> Dehydrated | <input type="checkbox"/> Stopped seeing doctor | <input type="checkbox"/> Lack of food/malnutrition | <input type="checkbox"/> No sign of pain reliever (aspirin etc.) |
| <input type="checkbox"/> Medication /lack or improper | <input type="checkbox"/> Lack of access to mobility | | |

Medical Treatment

- None
- Will seek own doctor
- First Aid
- EMT* EMT at scene Yes No
- Name(s): _____
- Hospital ** Name: _____
- Attending Physician: _____
- Refused Medical Aid
- Medical Release Form from victim Yes No
- Medical Release Form from Guardian or conservator? Yes No
- Crime victim information given to victim? Yes No
- Protective Services Referral? Yes No

Residence Type? (When victim is found)

- Private
- Public Housing
- Assisted Living
- Licensed Nursing Home
- Hospital
- Homeless
- Unknown
- AFC Home (Licensed or not)
- Other: _____
- _____
- _____



Body Image Diagram

Describe injury (redness, bruising etc.)

Older adults can experience bruising in dotted areas - Note anything unusual or outside the area.

If the adult is vulnerable and has been harmed, consent is often an issue. It is important to ask the right questions.

- Confusion Possible Intimidation Possible Infection or fever

Possible questions include:

- Are you in pain? Would you like to be cleaned up? When was the last time you ate?
 Are you thirsty? Would you like salve for your wound? Would you like to see a doctor?

****If the adult has open wounds and is refusing to see the doctor it may be because they have been told the caregiver will go to jail and the adult will be in a nursing home. See Parasitic Living**

FINANCIAL HARM- APS also takes reports of financial harm to vulnerable adults

- Parasitic Living: "Caregiver" sole source of income is the victim
 One person controls the money
 Poor or no care is giving to the victim
 Providing adequate care may require the victim to pay for care instead of the "caregivers" needs
 "Caregiver" may fail to seek adequate medical attention to avoid criminal charges of vulnerable adult abuse neglect

Other Financial Harm

Controlled by Victim Other:
 Bank Account (Institution): _____
 Bank Account Number: _____

- Ownership of property damages (deeds, car titles, accts)
 Misuse of legal documents (DPOA, guardianship, conservatorship – depleting VA assets)
 New friend – church, grocery store, estranged family member
 One person controls money, no audit, no second look
 Power of Attorney- Since 2012 DPOA require a signed acknowledgement to keep receipts, no joint account and no gifts to self
 Second mortgage or reverse mortgage
 Quit Claim deed
 New auto the victim does not drive
 New or missing credit cards
 Missing valuables or antiques

COGNITION – is not an all or nothing matter. Current research shows that financial savvy may decline in every human brain after the age of 60 regardless of how smart you are. Ask question that helps you find out if the person understands the consequences of their actions.

Current contact with Adult Protective Services

- The matter has been reported to APS
 APS has determined the victim is an adult in need of assistance
 A case worker is assigned
 Contact information for APS provided: _____

Describe: Add name and contact information for APS and the date an oral referral was made to APS at 1-855-444-3911

Evidence:

- A copy of all purportedly legal documents obtained
 A copy of financial statements obtained
 Vehicles owned by victim
 Vehicles owned by person in charge of the money
 Photographs of living conditions, wounds, evidence destruction, locks, location of mobility devices, victim injuries
 When appropriate, consent to lease medical records by victim or by conservator
 Photographs taken by: _____

Lethality Assessment

- Intimidation by threats, yelling
 Suspect has used or threatened to use a weapon
 Suspect abuses Alcohol/Drugs
 Victim is unable to perform Activities of Daily Living (ADLs) without assistance
 Victim has opened untreated wounds, lack of ADLs
 Suspect controls finances of the victim
 Victim isolated from friends, relatives, activities
 Victim's physical condition poor/declining
 Victim's mental conditions poor/declining
 Victim living conditions poor/subs.
 Prior incidents involving APS/Law Enforcement

At the Death Scene of An Older Adult

- What would you see at the scene if the victim was 20 instead of 87?
 Who was the last person to see the deceased?
 Who would benefit from death Is there obvious neglect?
 Was the person responsible for the care in a parasitic living arrangement with the victim?

POSSIBLE ACTIONS TO BE TAKEN

- In an emergency medical situations call an ambulance
- Report to APS when necessary
- When necessary, ask APS to freeze assets in Probate Court
- Evidence of spending may be the motive for physical abuse, obtain consent or search warrants when necessary to obtain financial evidence
- Give all information to medical examiner (Request autopsy)

WHERE TO REPORT HEALTH CARE FRAUD OF MICHIGAN'S OLDER ADULTS

Attorney General's Health Care Fraud Division Hotline:
 1-800-24-ABUSE or 1-800-242-2873

FEDERAL TRADE COMMISSION

Call 1-877-987-3728 (Telemarketing, collection agencies, money scams, fraud)

STATUTES TO KNOW

- | | |
|-----------------------------|---------------------------------|
| Embezzlement of VA MCL | Embezzlement regular |
| Obtaining a false signature | Misuse of legal |
| Racketeering | Any fraud statute that applies |
| Identity Theft | Embezzlement of a joint account |

Source: Emerson, C. – Elder Justice funded by the State of Michigan
 Teter, S. – Michigan Attorney General's Office

