

# House Ad Hoc on Abuse and Neglect of Vulnerable Adults



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**Final Report  
December 2019**

## **Committee Members:**

Representative Jennifer Longdon, Chair  
Representative Timothy M. Dunn, Vice-Chair  
Dr. Cara Christ  
Sherri Collins  
Sarah Kader  
Dana Kennedy  
Cheryl Knupp

Dr. Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Jami Snyder  
Molly McCarthy

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  - f. December 17, 2019: minutes and reference materials

## **REPORT 2019**

### **Background**

The House Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults (Committee) was established by the Speaker of the House of Representatives. The purpose of the 13-member Committee is to review and identify best practices for the reporting and investigative processes to ensure the safety of vulnerable adults.

### **Summary of Committee Activity**

The Committee met on the following dates: August 20, 2019, September 17, 2019, October 1, 2019, October 15, 2019, November 12, 2019 and December 17, 2019.

### **Committee Hearing August 20**

Chairwoman Longdon introduced the Committee and staff. The Chairwoman reviewed the purpose of the Committee and announced meeting dates.

The Committee heard the following presentations:

- **Arizona Department of Economic Security (DES)**
  - Michael Traylor, Executive Director, DES
- **DES Adult Protective Services**
  - Molly McCarthy, Assistant Director, DES Aging and Adult Services
- **Arizona Department of Health Services (DHS)**
  - Colby Bower, Assistant Director, DHS
- **Arizona Health Care Cost Containment System (AHCCCS)**
  - Jakenna Lebsock, Clinical Administrator, AHCCCS

The Committee received public testimony.

A video recording of the Committee can be found at:

[http://azleg.granicus.com/MediaPlayer.php?clip\\_id=23266&autostart=0#](http://azleg.granicus.com/MediaPlayer.php?clip_id=23266&autostart=0#)

### **Committee Hearing September 17**

The Committee heard the following presentations:

- **Abuse and Neglect Prevention Task Force**
  - Kathy Ber, Legislative Director, DES
- **Arizona Developmental Disability Planning Council (ADDPC)**
  - Dr. Erica McFadden, Executive Director, ADDPC
- **Arizona Prosecuting Attorney's Advisory Council (APAAC)**
  - Elizabeth Ortiz, Executive Director, APAAC

- **Long-Term Care Ombudsman Program (LTCO)**
  - Mary Lynn Kasunic, President and CEO, LTCO
  - Regan Smith, Director, LTCO
- **Arizona Statewide Independent Living Council (AZSILC)**
  - Sarah Kader, Direct of Operations, AZSILC

The Committee received public testimony.

A video recording of the Committee can be found at:

[http://azleg.granicus.com/MediaPlayer.php?clip\\_id=23274&autostart=0](http://azleg.granicus.com/MediaPlayer.php?clip_id=23274&autostart=0)

### ***Committee Hearing October 1***

The Committee heard the following presentations:

- **Arizona Center for Disability Law (ACDL)**
  - Jose de Jesus V Rico, Chief Executive Officer, ACDL
- **AARP**
  - Dana Kennedy, MSW State Director, AARP Arizona
- **Ability360**
  - Phil Pangrazio, President and CEO, Ability360
  - April Reed, Vice President of Advocacy, Ability360

The Committee received testimony from the following stakeholders:

- Holly Reycraft
- Faith McCloone, Arizona Attorney General's, Task Force Against Senior Abuse

The Committee received public testimony.

A video recording of the Committee can be found at:

[http://azleg.granicus.com/MediaPlayer.php?clip\\_id=23300&autostart=0](http://azleg.granicus.com/MediaPlayer.php?clip_id=23300&autostart=0)

### ***Committee Hearing October 15***

The Committee heard the following presentations:

- **Beatitudes Campus**
  - Cheryl Knupp, Sr. Vice President of Health Services and Human Resources, Beatitudes Campus
- **Arizona Commission for the Deaf and Hard of Hearing (ACDHH)**
  - Sherri Collins, Executive Director, ACDHH



The Committee heard from the following stakeholders:

- Dr. Tasha Menaker, Arizona Coalition to End Sexual and Domestic Violence
- Carol Brown

Chairwoman Longdon asked Committee members to submit their top three recommendations for discussion at the November 12 meeting.

The Committee received public testimony.

A video recording of the Committee can be found at:

[http://azleg.granicus.com/MediaPlayer.php?clip\\_id=23313&autostart=0](http://azleg.granicus.com/MediaPlayer.php?clip_id=23313&autostart=0)

### ***Committee Hearing November 12***

The Chairwoman asked Committee members at the October 15 meeting to submit their top three Committee recommendations for discussion. The following list is a compilation of those recommendations:

- Abuse and Neglect Training
- Training on Trauma Informed Investigation and Care
- Watchdog
- APS Accommodations for People with Disabilities
- Caregiver Shortage/Pay/Fair Market
- Strengthen Mandatory Reporting Statutes
- Caregiver Board/Certification
- Searchable Records
- Hotline/APS Expansion
- Community Advisory Committee
- APS Collection & Annual Data Reporting/Interagency Cooperation
- Whistleblower Statute

The Committee discussed the recommendations. Chairwoman Longdon indicated that she would forward to the Committee final recommendations for consideration at the December 17 meeting.

The Committee received public testimony.

A video recording of the Committee can be found at:

[http://azleg.granicus.com/MediaPlayer.php?clip\\_id=23344&autostart=0](http://azleg.granicus.com/MediaPlayer.php?clip_id=23344&autostart=0)

### ***Committee Hearing December 17***

The Committee adopted the following recommendations:

#### **Committee Recommendations**

**Recommendation #1:** That legislation be drafted to create or identify and fund an agency to oversee vulnerable adults in Arizona, including related agencies, boards and commissions.

**Recommendation #2:** The Legislature appropriate sufficient funds to the Arizona Department of Health Services and Adult Protective Services to timely investigate complaints in order to eliminate the back logs and create a metric for the tracking of complaints to ensure timely resolution.

**Recommendation #3:** Support the recommendations outlined in the Arizona Auditor General's Report 19-112 contained on pages 14-15 and encourage implementation of said recommendations.

**Recommendation #4:** The Legislature fund an independent audit of APS.

**Recommendation #5:** The Speaker continue the House Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults upon completion of the independent audit to review the findings and make recommendations.

**Recommendation #6:** Support the recommendations of the Governor's Abuse and Neglect Prevention Task Force related to Disclosure and Investigation Training, Signage and Trauma-Informed Approach.

**Recommendation #7:** Support and funding of training and education for facilities, caregivers, residents and family members on the signs of, and how to report abuse and neglect, who to report to, and develop posting requirements to be reviewed annually by the above-mentioned entities/individuals.

**Recommendation #8:** APS identify and make appropriate accommodations at intake, and throughout the investigation process, for vulnerable adults that may impact their ability to communicate and cooperate with the investigation.

**Recommendation #9:** Acknowledge that caregivers are vital skilled professionals and that stability and consistency are essential for the wellbeing of our most vulnerable populations and that appropriate compensation, training and support must be addressed.

**Recommendation #10:** Create a statutory definition for *emotional abuse* in Title 46.

**Recommendation #11:** Support the Arizona Department of Health Services and Department of Economic Security in the development and implementation of a stakeholder-driven action plan to protect Arizona's vulnerable adults.

The Committee adopted the recommendations @ 2:14 p.m.

A video recording of the committee can be found at:

[http://azleg.granicus.com/MediaPlayer.php?clip\\_id=23386&autostart=0](http://azleg.granicus.com/MediaPlayer.php?clip_id=23386&autostart=0)

Appendix A:

August 20, 2019

**Minutes and Reference Materials**



**ARIZONA STATE LEGISLATURE**  
**INTERIM MEETING NOTICE**  
**OPEN TO THE PUBLIC**

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

**Date:** Tuesday, August 20, 2019

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

**Place:** HHR 1

**AGENDA**

1. Call to Order
2. Welcome & Introduction
3. Charge of the Committee
4. Chair's Opening Comments
5. Agency Overview Presentations:
  - Christina Corieri, Senior Policy Advisor, Governor Doug Ducey
  - Jennifer Kirchen or designee, Deputy Assistant Director, DES Adult Protective Services
  - Michael Traylor or designee, Director, Arizona Department of Economic Security
  - Dr. Cara Christ or designee, Director, Arizona Department of Health Services
  - Jami Snyder or designee, Director, Arizona Health Care Cost Containment System
6. Committee Discussion
7. Public Testimony
8. Adjourn

**Members:**

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

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

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

8/14/19  
jjb

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



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

HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE  
ADULTS

Report of Interim Meeting  
Tuesday, August 20, 2019  
House Hearing Room 1 -- 1:30 P.M.

MINUTES RECEIVED  
CHIEF CLERK'S OFFICE

8-20-19

Convened 1:30 P.M.  
Recessed  
Reconvened  
Adjourned 3:41 P.M.

Members Present

Representative Jennifer Longdon, Chair  
Representative Timothy M. Dunn, Vice Chair  
Colby Bowers  
Sherri Collins  
Janneta Lebstock  
Sarah Kader  
Dana Kennedy  
Cheryl Knupp  
Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Michael Traylor

Members Absent

Agenda

Original Agenda – Attachment 1

Request to Speak

Report – Attachment 2

Committee Attendance

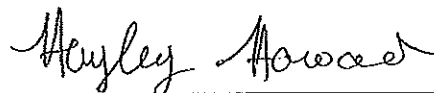
Report – Attachment 3

Presentations

<u>Name</u>	<u>Organization</u>	<u>Attachments</u>
Janetta Lebstock	AHCCSS	4
Michael Traylor	DES	5,6
Molly McCarthy	APS	7
Colby Bowers	ADHS	8

Committee Action

<u>Bill</u>	<u>Action</u>	<u>Vote</u>	<u>Attachments</u>
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Hayley Howard, Committee Secretary  
August 20, 2019

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

**ARIZONA STATE LEGISLATURE**  
**INTERIM MEETING NOTICE**  
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*\*The committee may go into an executive session to receive testimony or documents that are pursuant to House Rules.*

8/14/19  
jjb

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## Information Registered on the Request to Speak System

*House Ad Hoc Committee on Abuse and Neglect of  
Vulnerable Adults (8/20/2019)*

### 7. Public Testimony

**Support:**

Cynthia Elliott, representing self

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

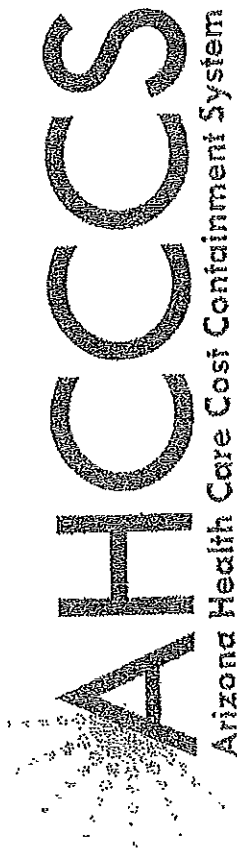
**COMMITTEE ATTENDANCE RECORD**

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

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

DATE	08/20/19	/19	/19	/19	/19
CONVENED	1:30 pm	m	m	m	m
RECESSED					
RECONVENED					
ADJOURNED	3:41pm				
MEMBERS					
<del>Dr. Gara Christ</del> (Colby Bowers)	✓				
Sherri Collins	✓				
Sarah Kader	✓				
Dana Kennedy	✓				
Cheryl Knupp	✓				
Erica McFadden	✓				
Elizabeth Ortiz	✓				
April Reed	✓				
Jose de Jesus V Rico	✓				
<del>Jami Snyder</del> (Janetta Lebstocke)	✓				
Michael Traylor	✓				
Dunn, Vice-Chairman	✓				
Longdon, Chairman	✓				

✓ Present      — Absent      exc Excused



# Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults

Jakenna Lebsock, MPA  
Clinical Administrator  
August 20, 2019

# AHCCCS Structure

- AHCCCS contracts with managed care organizations (MCOs; such as DES/DDD and UnitedHealthcare) to administer the Medicaid benefit for the vast majority of enrollees
- AHCCCS monitors all MCO functions, including, but not limited to, quality of care investigations

# Quality of Care (QOC) Overview

- Each MCO has a Quality Management unit that is responsible for incident investigations
- MCO Chief Medical Officers maintain ultimate responsibility for the Quality Management function and any related investigations
- All QOCs are confidential and cannot be disclosed outside of the Quality Management structure

# Investigative Process

- Assessment required within 24 hours (or less) for significant concerns
- Immediate onsite evaluation of member(s) if there is a health and safety concern
- Investigative entities such as police, APS, and/or DCS allowed to complete investigation first in order to protect members, witnesses, and/or evidence

# QOC Investigations

- Member-centric and strength-based
- Member health and safety always first concern
- Thorough, fact-based processes
- Trained personnel that can assess all aspects of a case
- Timely referral to appropriate entities such as ADHS Licensure, DCS, and APS

# QOC Investigations

- Consider member, family, and provider perspectives
- Documentation is critical
- Use of standardized templates supports consistency in case review
- Able to address quality concerns beyond the primary issue or incident



# AHCCCS Actions

- Onsite support and/or lead investigative entity as necessary
- Health and Safety Committee
  - Regulatory action such as provider suspension, admissions holds, and termination
- Peer Review
  - Detailed review of QOCs
  - Determines referrals to Medical or other regulatory Boards

# Preliminary Recommendations: Governor's Abuse/Neglect Task Force

- Task Force formed in March 2019
- Five work groups charged with development of recommendations in areas of Prevention and Safety, Incident Reporting and Investigation, Incident Stabilization and Recovery, Agency Alignment, and Family and Vulnerable Individual Education
- Report to be provided to the Governor's Office by 11/01/19
- Draft recommendations include:
  - Arizona should commit to creating a statewide culture of abuse, neglect, and exploitation prevention and initiate a corresponding public awareness campaign.
  - Arizona should implement a system-wide trauma-informed approach, with attention to the special needs of vulnerable individuals and their families.

# Preliminary Recommendations: Governor's Abuse/Neglect Task Force

- Draft recommendations include (cont.):
  - Signage on how to report abuse, neglect, and exploitation should be prominently posted in all settings.
  - MCOs, providers, and community organizations should partner to ensure that direct-service staff, including family caregivers, have access to supportive resources to help manage stress and burnout.
  - State agencies should develop and disseminate comprehensive flow charts of reporting and investigation processes for all types of abuse, and neglect incidents and allegations.
  - State agencies should review of existing statutes, regulations, rules, and agency policies on privacy and confidentiality, with the goal of identifying any changes that could maintain needed privacy protections and at the same time allow confidential information-sharing to minimize the number of investigative interviews.

# Questions?

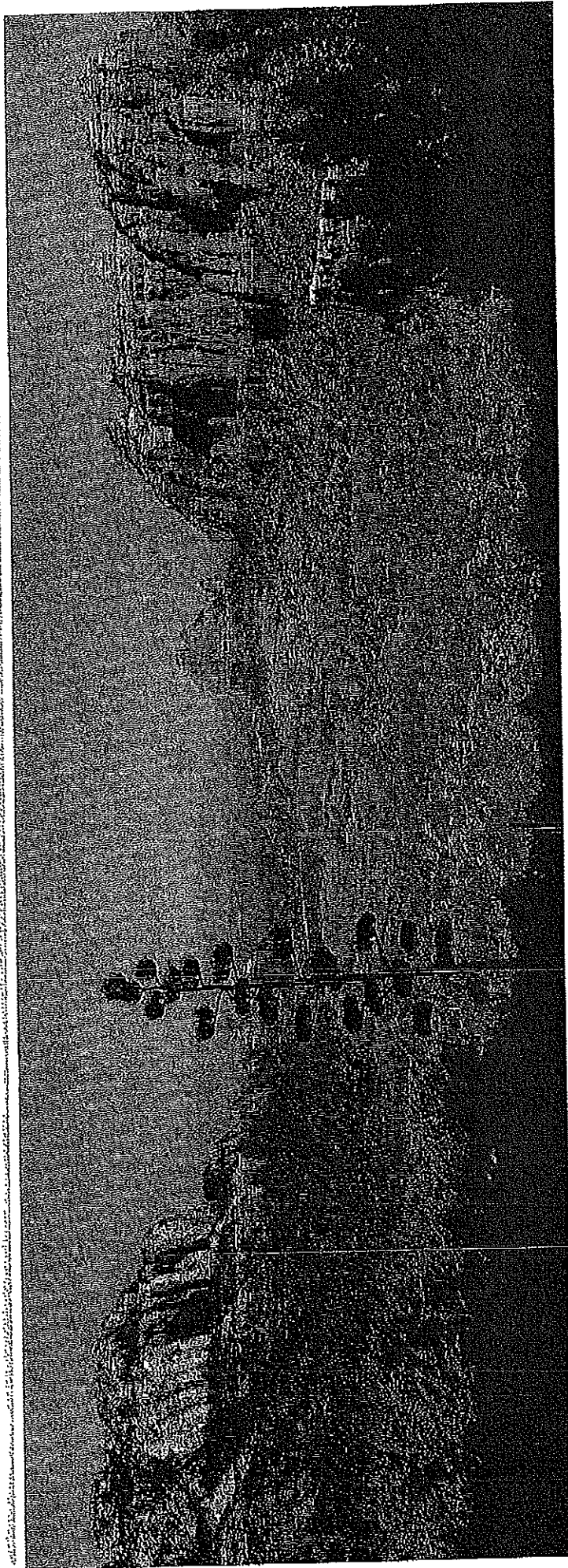


Reaching across Arizona to provide comprehensive  
quality health care for those in need



## DEPARTMENT OF ECONOMIC SECURITY

*Your Partner for A Stronger Arizona*



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

August 20, 2019

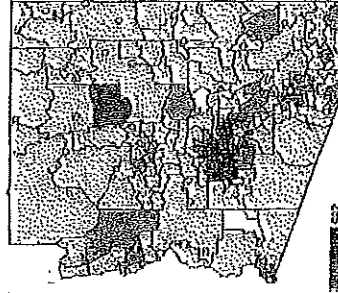
# Arizona Demographics

- Approximately 7.2 million people live in Arizona
- 18% of the population is over the age of 65
  - 42,861 individuals are served by the Department of Economic Security Division of Developmental Disabilities (DES/DDD)
  - 34,201 individuals are Arizona Long-Term Care System (ALTCs) eligible
    - 99% live in home and community-based settings
      - 86.4% live in their own home or with a parent
      - 12.6% live in group home or adult developmental homes
  - Less than 1% live in intermediate care facilities (ICFs) or skilled nursing facilities

Sources:  
 Census Bureau as of 7/1/2018 <https://www.census.gov/quickfacts/AZ>  
 Arizona Department of Economic Security data as of August 1, 2019

## DDD Members August 2019

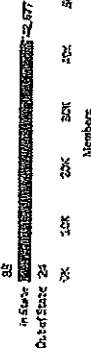
MEMBER MAP



### ELIGIBILITY



2.5% of the population are DDD members



### AGE DISTRIBUTION



# Overview of Opportunities & Changes

- Transformation at DES has occurred over the last two years and will continue as part of the culture of continuous improvement
  - **Division of Aging & Adult Services**
    - Reduced Adult Protective Services (APS) investigations open more than 90 days from 257 to 25 in SFY 2019
    - Due to the additional funding received, the Area Agencies on Aging services waiting list was reduced from 2,700 requests for services to 2,200 requests for services in July 2019. We anticipate reducing the services wait list by an additional 1,000 services by the end of the calendar year
    - Reduced average APS caseload ratios from 60-70 cases/investigator in SFY2018 to 26 cases/investigator in SFY2020
  - **DDD Quality improvements**
    - DDD receives an average of 10,000 requests for service authorizations per month, and 94% are delivered on time



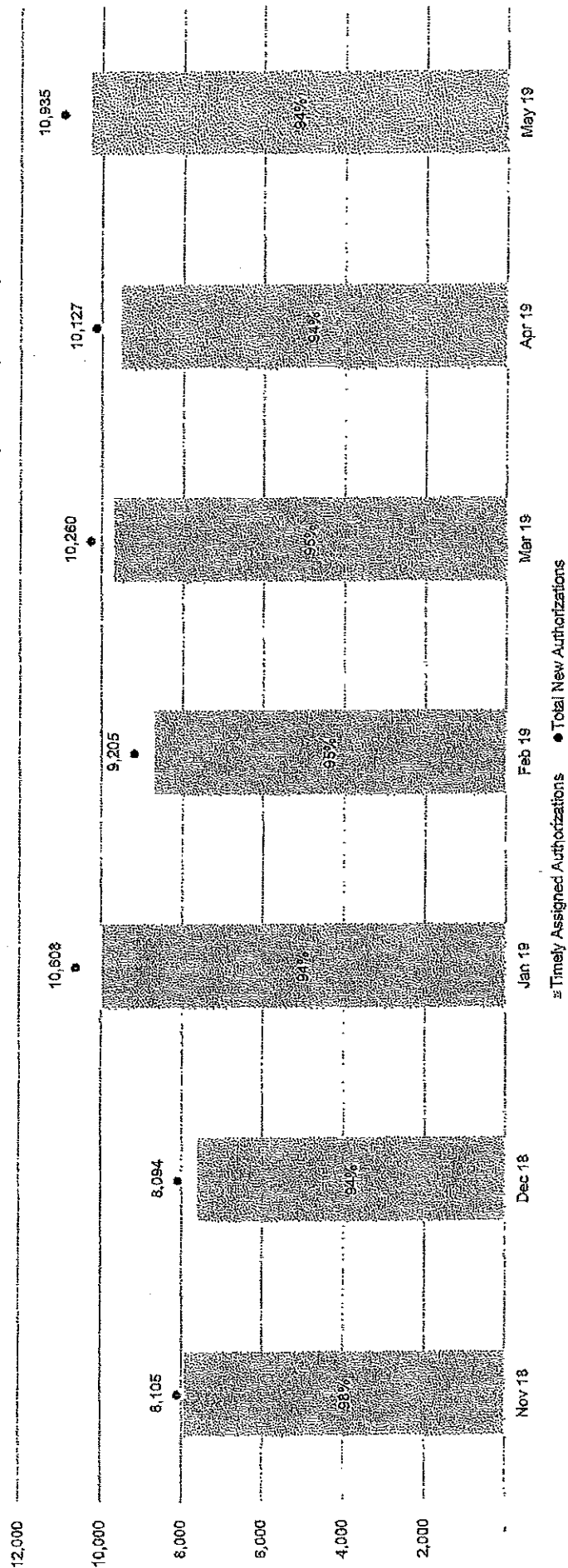
Eligibility  
Redetermination

Support  
Coordination



Service Provision

### Assigned Authorizations for Long-Term Services and Supports (LTSS)



Data Source: <https://tableauprod.azdes.gov/#/site/DDD/Views/ClientServiceAuthorizations-TrendData/UnassignedServicesbyDistrict?id=1>



# Overview of Opportunities & Changes

- Heightened awareness of the need for multiple agencies (DES, the Department of Health Services (DHS) and the Arizona Health Care Cost Containment System (AHCCCS)) and law enforcement to work collaboratively
- Family and provider listening sessions were held throughout the state to learn how to better serve individuals through DDD
  - Between May and June 2019, there were a total of 10 provider forums and a total of 252 attendees
  - Between March and June 2019, a total of 51 family forums were held with 526 statewide participants
  - In July 2019, a total of 7 provider rate increase forums were held with providers and families

# Overview of Opportunities & Changes

- In addition to the initial training requirement, DES/DDD added an annual recertification in *Recognizing and Reporting Maltreatment* training by all DDD staff effective Spring 2019
- As a result of stakeholder requests, APS now reports quarterly data on investigations with two calendar quarters now available, in addition to annual reporting
- Preparing for licensure of all State Operated Intermediate Care Facilities by January 1, 2020

# Next Steps: Governor's Executive Order

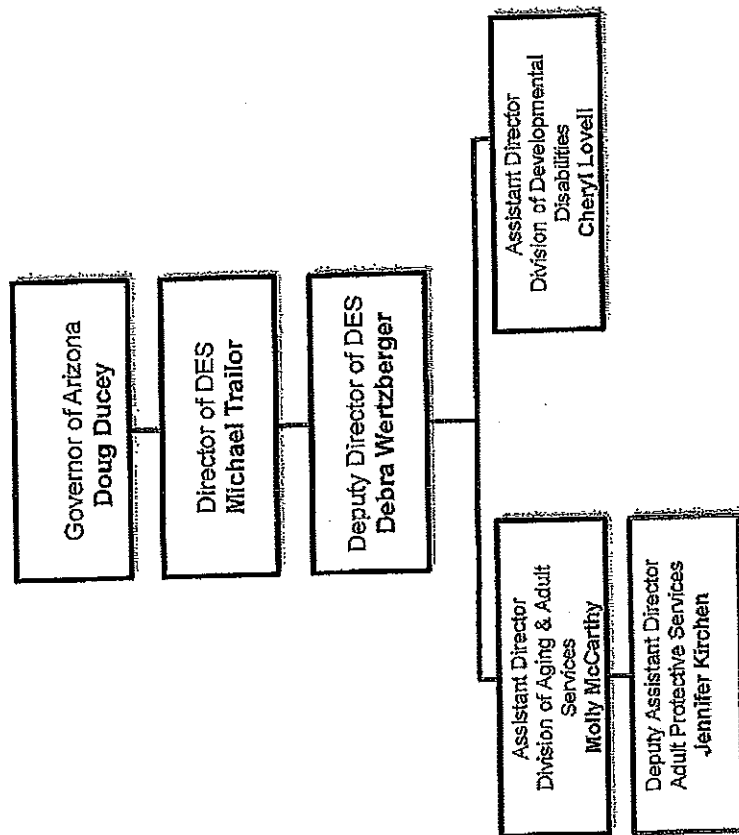
- **The Task Force is continuing to meet and finalize recommendations**
  - Recommendations are due November 1, 2019
  - Some of the recommendations may require legislation
- **Joint training on preventing abuse, neglect and exploitation**
  - Differentiated training approach (based on role in the systems) with specific core competencies
  - Over 6,000 DES contracts are being reviewed to identify needed amendments to implement the training requirement for individuals working directly with children and vulnerable adults

## **Next Steps: Governor's Executive Order**

- **Abuse and Neglect Signage Requirements**
  - Reviewing over 500 qualified vendor contracts to require posting of signage
  - Signs will be displayed in institutional settings as well as community-based settings
  - The Task Force is developing requirements for the signage including language and aesthetics
- **Incident Process Flow**

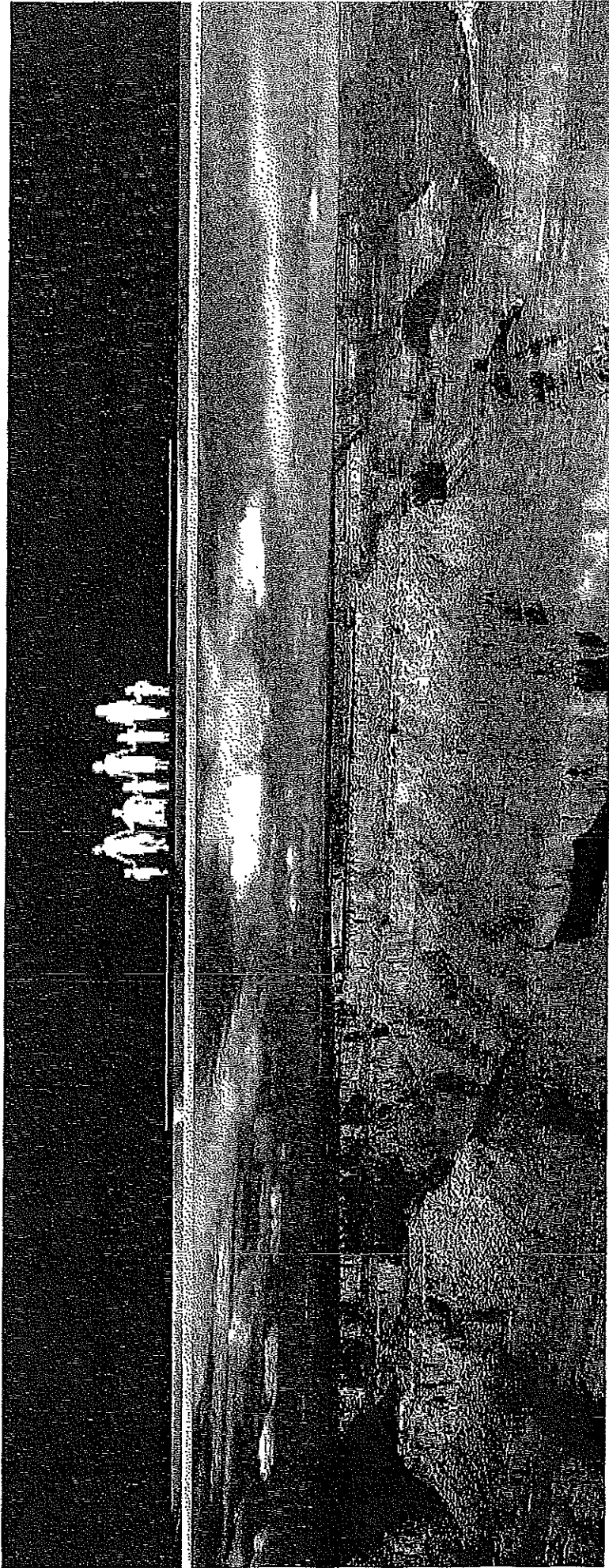
# Oversight of APS & System Partners

## Executive Branch APS Oversight



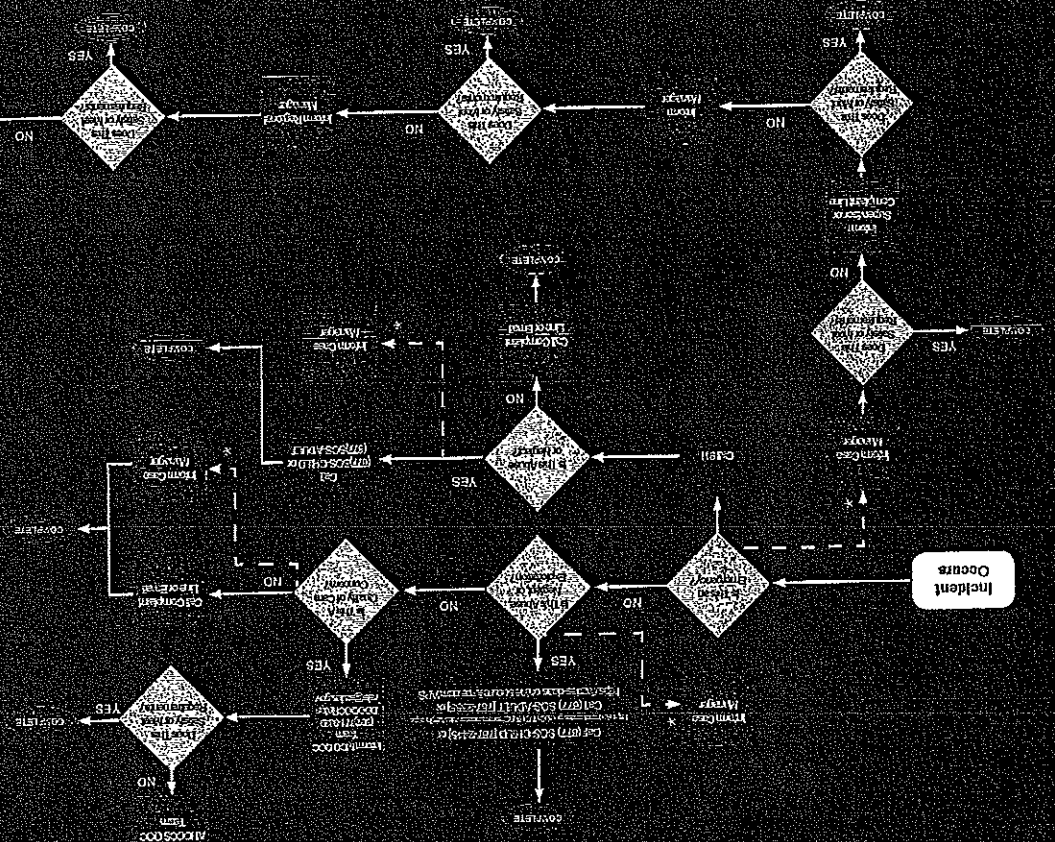
## System Partners In Keeping Vulnerable Adults Safe

- Area Agencies on Aging
- Arizona Department of Health Services
- Arizona Health Care Cost Containment System
- Corporation Commission
- Courts
- Office of the Attorney General
- Independent Oversight Committees
- Law Enforcement
- Mandatory Reporters (A.R.S. § 46-454)
- Public Fiduciaries



**Questions?**

## INCIDENT PROCESS FLOW



## LEGEND


INCIDENTS:

- Neglect
- Human Rights - Seclusion, Restraint
- Stereotypic Concerns
- Exploitation
- Appropriateness of Care
- Access to Health Care/Availability of Services
- Clinical Judgment Concerns

KEY:

**Decision Step**

 Non-HP Assistance Process Step

Complete 

DD Support Coordinator (Case manager (CM) will only know if you have contacted 911, DCS and/or APS if you alert them.

DDD Customer Service Center - General  
Info 1 (844) 770-9500 ext. 1

Attachment to





# DEPARTMENT OF ECONOMIC SECURITY

Your Partner for a Stronger Arizona



## Adult Protective Services

August 20, 2019



## Adult Protective Services Report Criteria

- Adult Protective Services (APS) report criteria is met when the reporting source alleges all of the following:
  - Victim
    - currently 18 years or older;
    - incapacitated or vulnerable;
    - has been abused, neglected (including self-neglect), or exploited (financially, etc.) and may be in need of protective services; and
  - Alleged incident occurred in Arizona.
    - Note: If the incident occurred on tribal land, APS will investigate the report upon written invitation by the tribal council. Absent this invitation, the tribes will conduct their own investigation.

## APS Definitions

### **Vulnerable Adult – A.R.S. § 46-451(A)(9)**

- An individual who is 18 years of age or older who is unable to protect themselves from abuse, neglect or exploitation by others because of a physical or mental impairment. It includes an incapacitated person.

### **Incapacity – A.R.S. § 14-5101**

- Impairment by reason of mental illness, mental deficiency, mental disorder, physical illness or disability, chronic use of drugs, chronic intoxication or other cause to the extent that the person lacks sufficient understanding or capacity to make or communicate responsible decisions concerning his or her person.

### **Abuse – A.R.S. § 46-451(A)(1)**

- Intentional infliction of physical harm; injury caused by negligent acts or omissions; unreasonable confinement; sexual abuse or sexual assault.

## APS Definitions

### **Neglect – A.R.S. § 46-451(A)(6)**

- The deprivation of food, water, medication, medical services, shelter, supervision, cooling, heating or other services necessary to maintain minimum physical or mental health.

*Effective August 27, 2019, Laws 2019, Chapter 321 removes the requirement for a "pattern of behavior" to determine neglect and adds supervision as a factor.*

### **Self-Neglect – Not defined in state law**

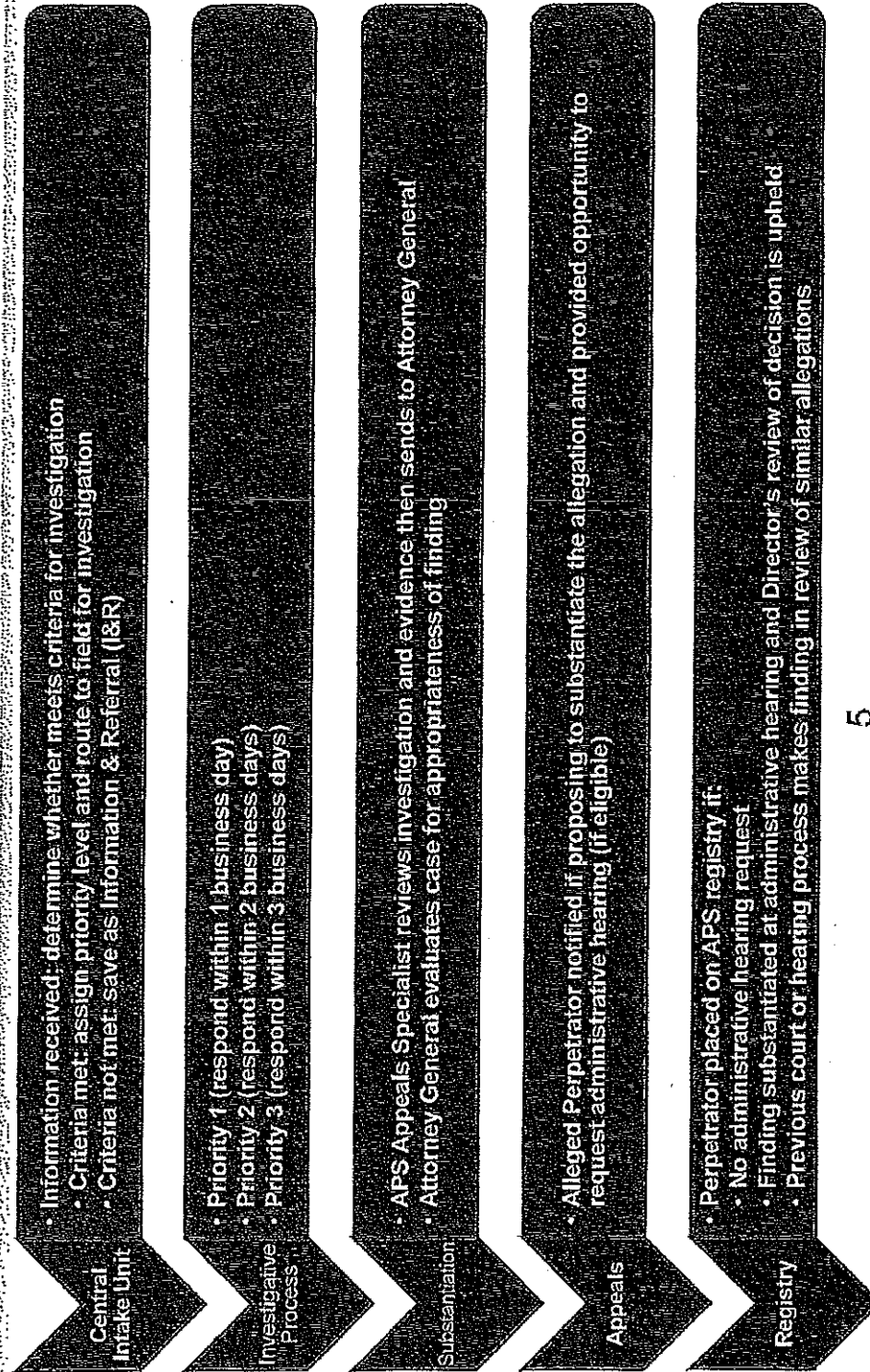
- "An adult's inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including— (A) obtaining essential food, clothing, shelter, and medical care; (B) obtaining goods and services necessary to maintain physical health, mental health, or general safety; or (C) managing one's own financial affairs."

*Elder Justice Act (Patient Protection and Affordable Care Act - Public Law 111-148)*

### **Exploitation – A.R.S. § 46-451(A)(4)**

- The illegal or improper use of a vulnerable adult or their resources for another's profit or advantage.

# APS Process Overview



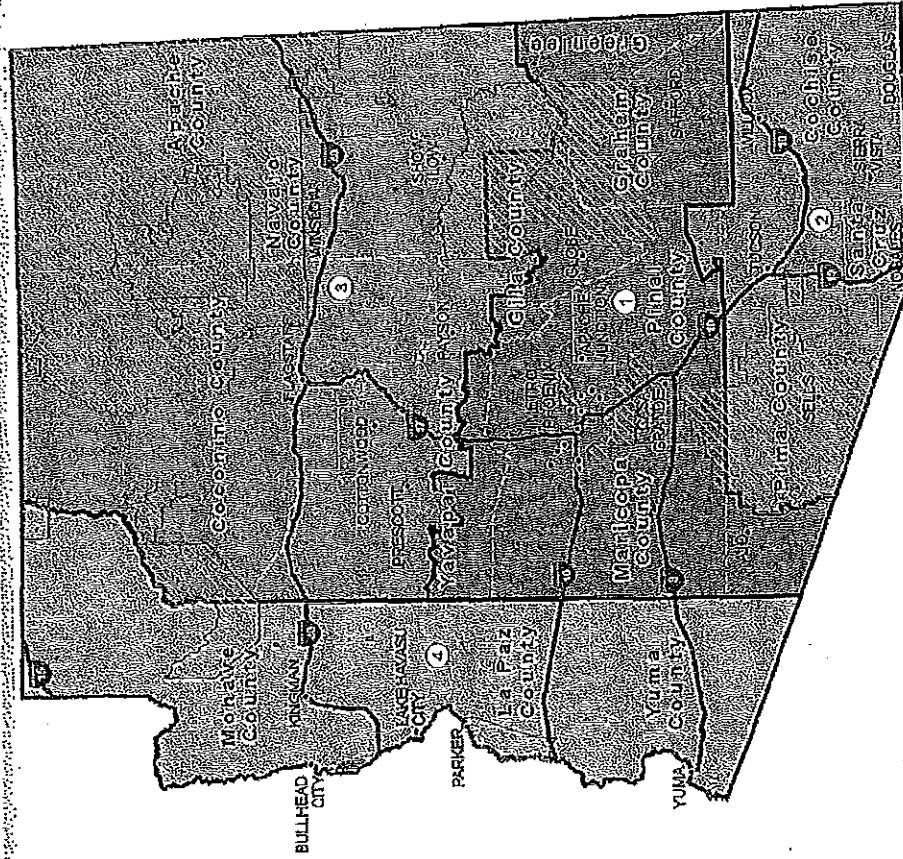
# APS District Boundaries

**District 1**  
 Maricopa County, Pinal County, Graham  
 County, Greenlee County,  
 portions of Gila County, and portions  
 of Yavapai County

**District 2**  
 Pima County, Santa Cruz County,  
 Cochise County

**District 3**  
 Coconino County, Navajo County,  
 Apache County, portions of Gila County,  
 and portions of Yavapai County

**District 4**  
 Mohave County, La Paz County,  
 and Yuma County





# APS Positions

	Central Intake Unit (Customer Service Representative)	Investigator
Background (preferred)	<ul style="list-style-type: none"> <li>• 2 years of customer service experience in a call center environment</li> <li>• Medical terminology experience</li> </ul>	<ul style="list-style-type: none"> <li>• Bachelor's degree in Social Work, Rehabilitation Counseling, Sociology, Psychology or related field</li> <li>• Bilingual</li> </ul>
License/Certification	<ul style="list-style-type: none"> <li>• Level 1 Fingerprint Clearance Card</li> <li>• Department of Child Safety (DCS)/APS Registry Check</li> </ul>	<ul style="list-style-type: none"> <li>• Level 1 Fingerprint Clearance Card</li> <li>• Valid Arizona Driver's License</li> <li>• DCS/APS Registry Check</li> </ul>
Training	<ul style="list-style-type: none"> <li>• Policy/procedure               <ul style="list-style-type: none"> <li>• Data systems reporting line cross reporting submission</li> </ul> </li> <li>• Resources               <ul style="list-style-type: none"> <li>• Law enforcement/community</li> </ul> </li> <li>• Multi-week on the job training               <ul style="list-style-type: none"> <li>• Interview with reporting sources</li> <li>• Priority/response time</li> <li>• Documentation/narrative writing</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Classroom shadowing mentor/mentee</li> <li>• Readiness determination prior to caseload assignment</li> <li>• Policy/procedure               <ul style="list-style-type: none"> <li>• Investigative activities response time substantiation/appeals documentation case close</li> </ul> </li> <li>• Safety/risk               <ul style="list-style-type: none"> <li>• Investigator (personal)</li> <li>• Client assessment</li> </ul> </li> <li>• Resources               <ul style="list-style-type: none"> <li>• Law enforcement/community</li> </ul> </li> </ul>

# 2019 Legislative Session – APS-related Changes

**SB1211**  
**Registry**

- Establishes mandatory APS Registry background checks for DDD employees and contractors in positions that provide direct services to children or vulnerable adults.
- For all other DES employees and contractors that provide direct services to children and vulnerable adults, permits the Department to conduct an APS Registry background check.

**SB1483**  
**Financial Exploitation**

- Authorizes a broker-dealer or investment adviser to delay a disbursement, provide access to or copies of records that are relevant to the suspected or attempted financial exploitation. Reporting is permissive for financial advisors since they are not added to the mandatory reporter statute.

**HB2008**  
**Reporting**

- Cross reporting to DCS expanded to include any person who is employed as the supervisor to or administrator of a person who has a duty to report. If the supervisor or administrator reasonably believes that the report has been made by the person with a duty to report, the supervisor or administrator is not required to report.

**SB1538**  
**APS Statute**  
**DES Bill**

- Codifies in statute the APS Central Intake Unit.
- Authorizes APS to establish multidisciplinary teams.
- Expands individuals identified as mandatory reporters to include various health care and emergency personnel and employees of DES.
- Establishes a separate confidentiality statute for APS.
- Allows APS employees to file with a request county officers and state agencies to prohibit access to that employee's personal information.
- Modifies the definition of *neglect* by removing "pattern" from the definition and adding supervision as an element.

## Recent Opportunities

### Strength in Partnerships

- DES Divisions
- AHCCCS
- DHS
- Attorney General's Office
- Corporation Commission
- Law Enforcement
- Independent Oversight Committee
- City & County Prosecutor's Office
- Area Agencies on Aging
- Legislature
- Courts

- Governor's Executive Order 2019-03
- Continuous Improvement through utilization of the tools in the Arizona Management System



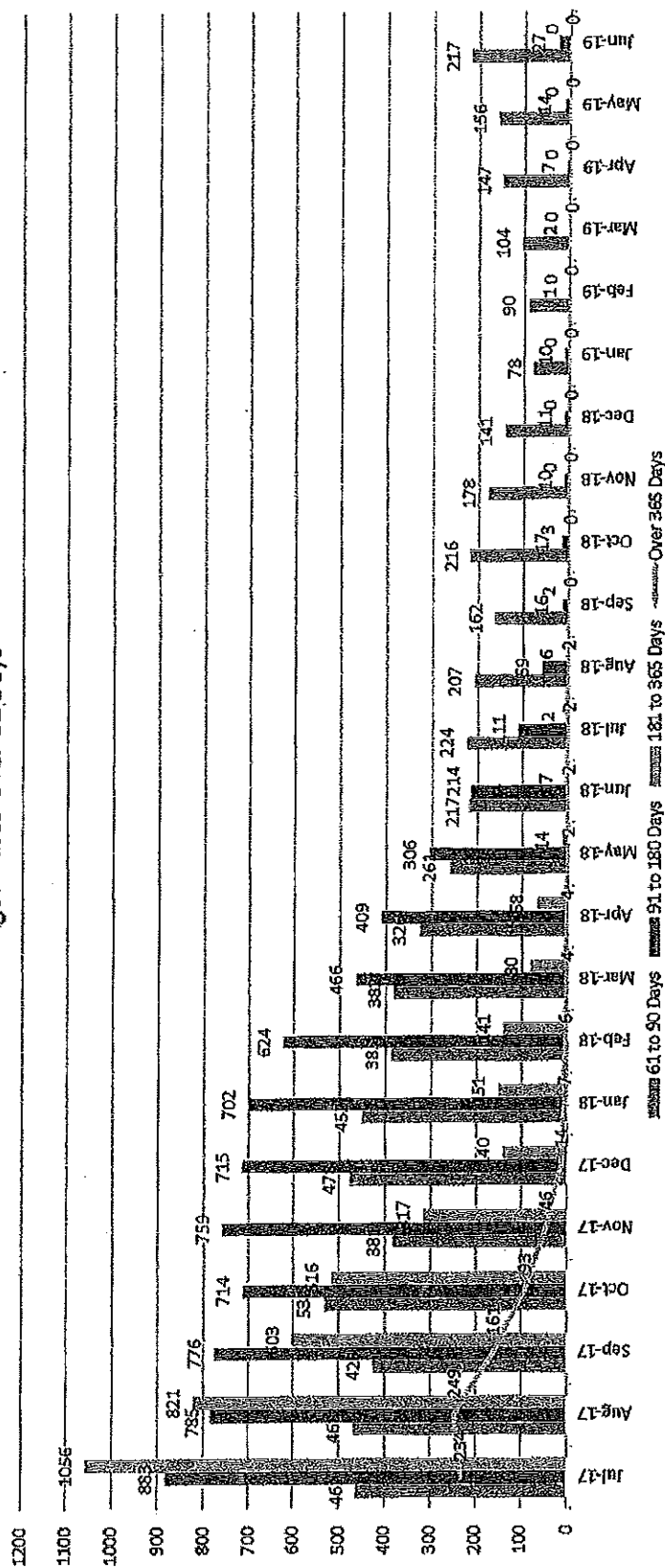
## Recent Work

- Current state
  - In addition to the annual APS report, quarterly data on APS cases involving individuals served by the Division of Developmental Disabilities is posted online
  - APS registry searchable PDF (Ctrl F) and Excel version
    - APS registry is updated on a weekly basis
- Future state
  - Governor's Executive Order recommendations
    - Continued workgroup conversations
    - Implement specific program enhancements
  - Legislative Implementation 8/27/19
  - Partnership/cooperation

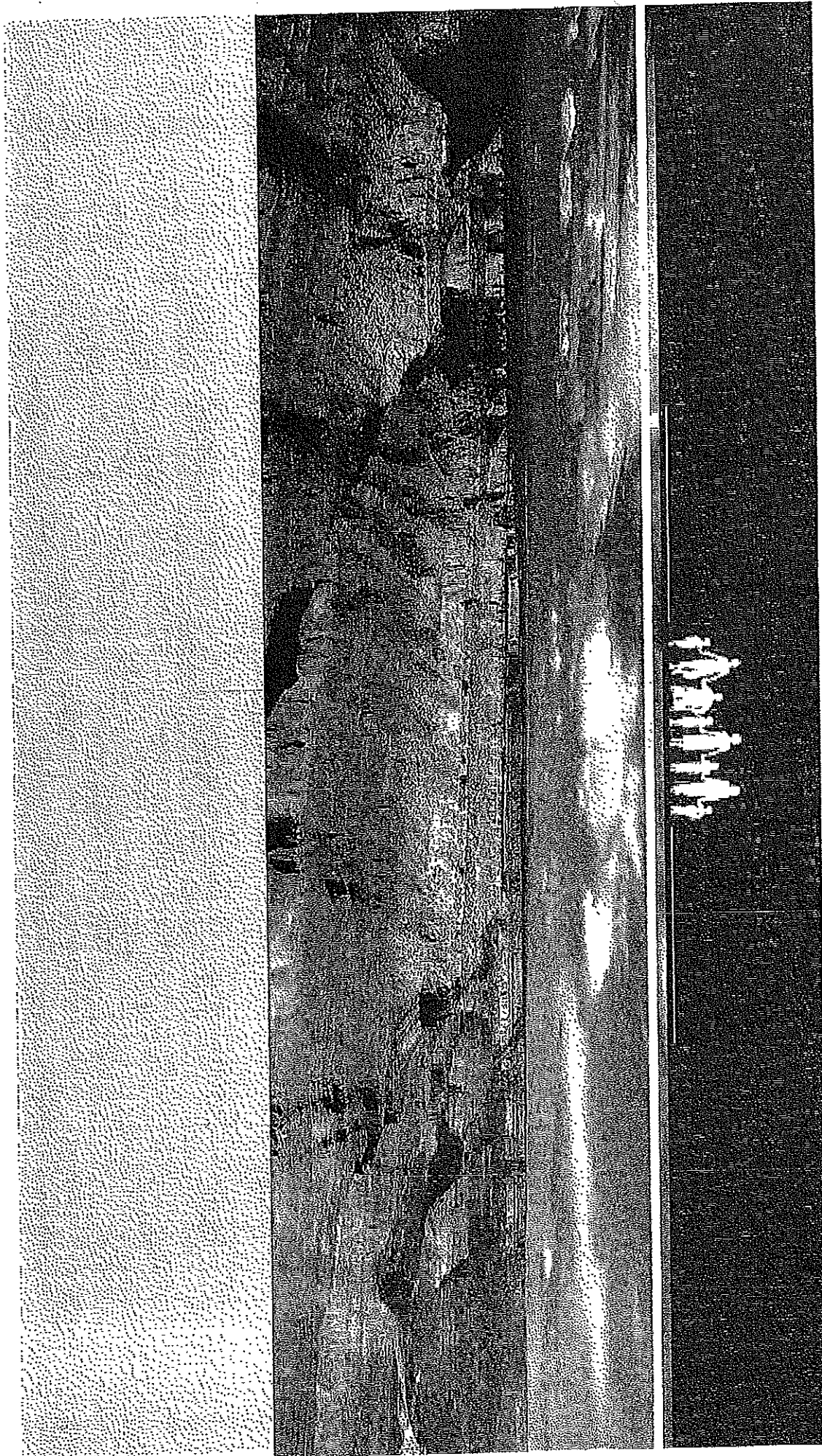
# APS Aged Cases

## APS Success Story Aged Cases

Aged Cases Over 61 Days



Data source:



# Arizona Department of Health Public Health Licensing

August 2019

Colby Bower  
Assistant Director, Arizona Department of Health Services



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# ADHS Overview

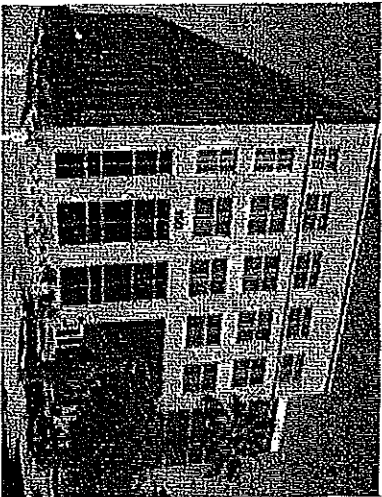
ADHS is a nationally accredited, award winning, nationally recognized public health agency.



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# ADHS Overview



- 6 Divisions
- Approximately 1,800 Staff
- Over 300 Distinct Programs
- 4 Main Campuses
- Virtual and Traveling Employees
- Prevention
- Preparedness
- Licensing
- CLIA Certified / ISO Accredited
- Public Health Reference Lab
- Licensed and Accredited State Hospital



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# Public Health Licensing at a Glance

**4,452**  
Complaints Investigated  
(FY18)

**12,610**  
Surveys Conducted (FY18)

**80,450**  
Applications Processed  
(FY18)

**201,005**  
Certified Medical Marijuana  
Patients

**98%**  
High Priority Complaints  
Investigated On-time (FY19)

**\$10.8M**  
Appropriated Budget (FY18)

**78%**  
Time Reduction in Application  
Processing (FY18)

**35,000+**  
Active Licensees

**142,594**  
Births and Deaths Registered  
(CY18)



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# What Does Licensing License?

2,850  
Residential Facilities

159  
Long Term Care Facilities

2,496  
Child Care Facilities

3,693  
Medical Facilities

1,165  
DD Group Homes

5,770  
Speech and Hearing  
Professionals

71  
Licensed Midwives

11,250  
Medical Radiologic Technologists  
& Laser Technicians

7,716  
Non-Ionizing and X-Ray Facilities

200,000+  
MMJ Patients

128  
MMJ Dispensaries

1  
Nuclear Power Generating  
Station



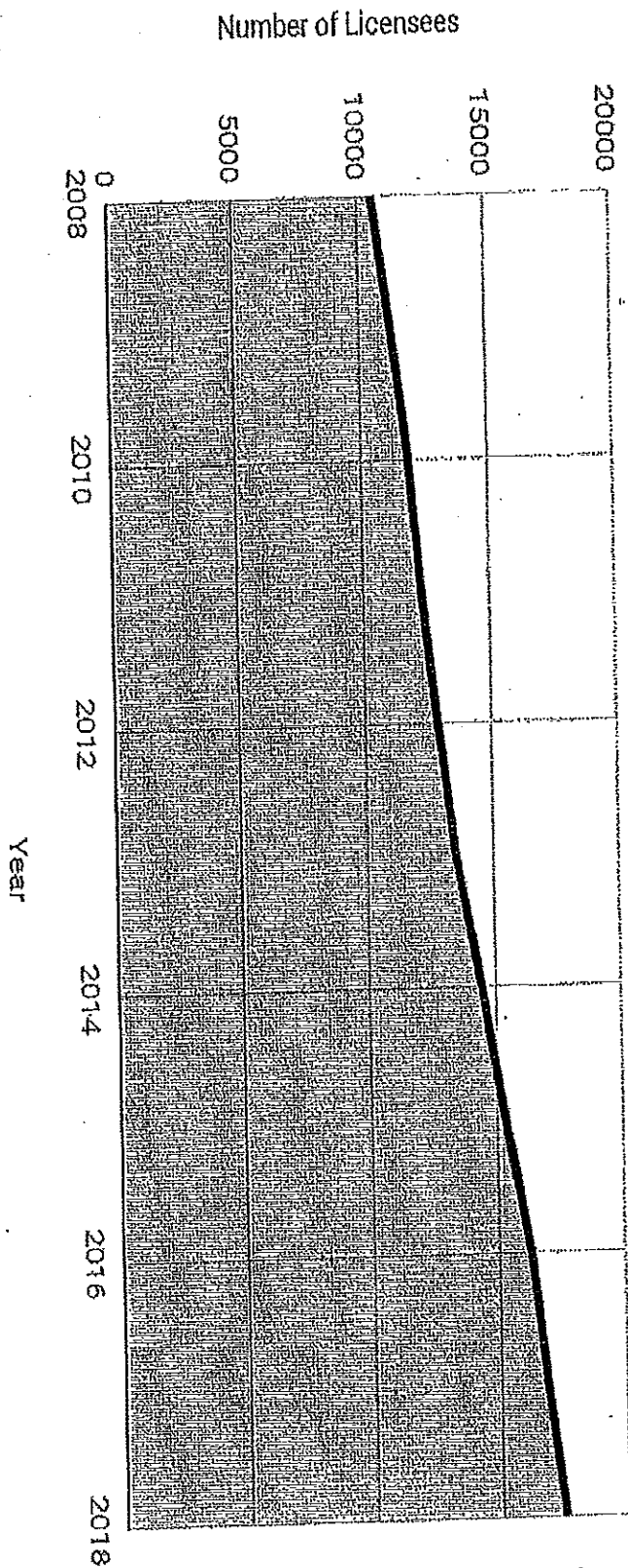
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# ADHS Licensing Growth

10-Year Licensing Growth = 66%



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# Upcoming Licensure

≈ 2,000

Sober Living Homes  
July 1, 2019

11

ICF/IID's  
Spring 2019

≈ 12

Tissue Procurement  
Organizations 2020

≈ 500

Community Health Workers  
2020

≈ 500

Pain Management Clinics  
2019

≈ 10

MWJ Labs  
2020



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# ICF/IID licensure

April 24th, 2019 Governor Ducey Signs S1211

- Allows ADHS to license ICF/IID's in Arizona.
- Currently 11 ICF/IID's
- One private facility (Licensed as of 4/25/19)
- 10 state run facilities (multi-facility in Coolidge, AZ)



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# ICF/IID Licensure

## Rule Status

- ADHS promulgated exempt rules to license facilities
  - Comprehensive rules similar to other health care institutions
- Incorporated Executive Order 2019-03
- Preparing to open up the rules again for any necessary changes



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# DD Group Home Licensure

ADHS provides a small piece of the oversight of DD Group Homes in Arizona.

1. Ensure the safety of the housing structure and environment;
2. Reduce the potential for hazardous conditions to exist;
3. Ensure adequate emergency and disaster preparedness of the home.



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# DD Group Home Comparison

	DD Group Homes	Other Licenses	Details
1 Structure Safety	✓	✓	<ul style="list-style-type: none"> <li>Compliance with local zoning</li> <li>Handrails, ramps, etc.</li> <li>Basic plumbing, electrical, heating, cooling</li> <li>Pool safety</li> </ul>
2 Hazardous Conditions	✓	✓	<ul style="list-style-type: none"> <li>Toxins</li> <li>Vehicles in disrepair</li> <li>Trash, general cleanliness</li> </ul>
3 Emergency Preparedness	✓	✓	<ul style="list-style-type: none"> <li>Evacuation drills, plans, etc.</li> <li>First Aid, basic safety</li> <li>Coordination with local first responders</li> </ul>
4 Quality Management	✗	✓	<ul style="list-style-type: none"> <li>Implementation of quality management</li> <li>Governing body notification</li> <li>Corrective action and monitoring</li> </ul>
5 Contracted Services	✗	✓	<ul style="list-style-type: none"> <li>How to handle contracted services</li> </ul>



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# DD Group Home Comparison Cont.

	DD Group Homes	Other Licensees	Details
1 Personnel Requirements	X	✓	<ul style="list-style-type: none"> <li>Fingerprinting</li> <li>Training Requirements</li> <li>Supervision</li> </ul>
2 Licensed Professional Staff	X	✓	<ul style="list-style-type: none"> <li>Credentialing Requirements</li> <li>Scope and documentation</li> </ul>
3 Admission Requirements	X	✓	<ul style="list-style-type: none"> <li>Process</li> <li>Authorization</li> <li>Documentation</li> </ul>
4 Discharge Planning	X	✓	<ul style="list-style-type: none"> <li>Ensure proper discharge</li> <li>Rights of the residents</li> <li>Safe transfer</li> </ul>
5 Transport & Transfer	X	✓	<ul style="list-style-type: none"> <li>Documentation</li> <li>Plans</li> </ul>



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# DD Group Home Comparison Cont.

	DD Group Homes	Other Licensees	Details
1 Resident Rights	X	✓	<ul style="list-style-type: none"> <li>Free from abuse, etc</li> <li>How to file complaints</li> </ul>
2 Dietary Services	X	✓	<ul style="list-style-type: none"> <li>Special diets, etc</li> <li>Requirement for food</li> </ul>
3 Service Plans	X	✓	<ul style="list-style-type: none"> <li>Plan to treat resident or patient</li> <li>Regular updates</li> <li>Evaluation of effectiveness</li> </ul>
4 Programs	X	✓	<ul style="list-style-type: none"> <li>Ensure that various programs are available</li> <li>Properly implemented</li> </ul>
5 Administration	X	✓	<ul style="list-style-type: none"> <li>Holds the responsible party accountable</li> <li>Various requirements</li> <li>Meet the needs of the patient/resident</li> </ul>



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OF HEALTH SERVICES

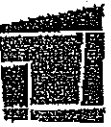
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# Abuse, Neglect, Exploitation

ADHS does NOT investigate cases of abuse, neglect or exploitation in the DD Group Home setting

1. A.R.S. 13-3620: Relates to reporting regarding children. Reports must go to a *peace officer or DCS.*
2. A.R.S. 46-454: Relates to reporting regarding vulnerable adults. Reports must go to a *peace officer or APS.*

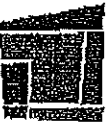


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# Abuse, Neglect, Exploitation

- ADHS investigates failures of the licensee (facility) that allowed the poor outcome to the patient/resident.
- ADHS does not make conclusions about whether abuse or neglect occurred.



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# DD Group Home Inspection Process

Step 1	Step 2	Step 3	Step 4	Step 5
<p><b>Schedule Survey</b></p> <p>ADHS will call you to schedule a survey.</p>	<p><b>Enter the Home</b></p> <p>ADHS will enter the home and conduct an inspection of the premises.</p>	<p><b>Inspect the Premise</b></p> <p>ADHS will inspect the home, the yard, shed, any other buildings.</p>	<p><b>Inspect all vehicles</b></p> <p>ADHS will inspect all vehicles used by the home to transport. All vehicles need to be inspected.</p>	<p><b>Exit Interview</b></p> <p>ADHS will brief you on the findings, leave you with a receipt and explain the next steps.</p>



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# DD Group Home Licensure Process

There are SIX steps for DD Group Home operation in Arizona.

FIVE of the SIX steps are housed within DES



1- Day Seminar	Apply for a QV	HCBS Certification	Get your QVA	ADHS Licensure	Final DDD Review
Attend 1 day seminar & learn about what is required to operate a DD Group Home	Apply to become a "Qualified Vendor" with DDD.	Apply for Home and Community Based Services Certification with DES's OLCR	After completing steps 1-3, DDD issues a Qualified Vendor Agreement	The ADHS Licensure Process	DDD reviews all new homes before residents move in to ensure all systems are in place



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# AZCareCheck.com

ADHS provides a website where the public can search and see the results of surveys and investigations



ARIZONA DEPARTMENT OF HEALTH SERVICES

Public Health Licensure  
Protecting and Regulating Health & Child Care Services

ADHS Home

Home

Public Health Licensure

Public Health Licensure

Public Health Licensure

Public Health Licensure

Public Health Licensure

Public Health Licensure

Public Health Licensure

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# Thank You!

Colby Bower

Assistant Director, Public Health Licensing | Policy & Intergovernmental Affairs

E-Mail: [colby.bower@azdhs.gov](mailto:colby.bower@azdhs.gov)



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OF HEALTH SERVICES

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Appendix B:

September 17, 2019

**Minutes and Reference Materials**





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

## ARIZONA STATE LEGISLATURE

### INTERIM MEETING NOTICE OPEN TO THE PUBLIC

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

**Date:** Tuesday, September 17, 2019

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

**Place:** Senate Hearing Room 109



#### AGENDA

1. Call to Order
2. Presentations:
  - Abuse and Neglect Prevention Task Force
  - Arizona Developmental Disability Planning Council
  - AARP of Arizona
  - Arizona Prosecuting Attorneys' Advisory Council
  - Long Term Care Ombudsman
  - Statewide Independent Living Council
3. Committee Discussion
4. Public Testimony
5. Adjourn

#### Members:

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

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

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

9/12/19  
9/17/19

jy  
jjb

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



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

HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE  
ADULTS

Report of Interim Meeting  
Tuesday, September 17, 2019  
SHR 1 -- 1:30 P.M.

MINUTES RECEIVED  
CHIEF CLERK'S OFFICE

9-19-19

Convened 1:30 P.M.

Recessed

Reconvened

Adjourned 4:09 P.M.

Members Present

Representative Jennifer Longdon, Chair  
Representative Timothy M. Dunn, Vice Chair  
Colby Bower  
Sherri Collins  
Sarah Kader  
Dana Kennedy  
Cheryl Knupp  
Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Jami Snyder  
Michael Traylor

Members Absent

Agenda

Original Agenda – Attachment 1

Request to Speak

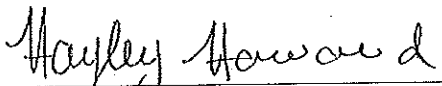
Report – Attachment 2

Committee Attendance

Report – Attachment 3

Presentations

<u>Name</u>	<u>Organization</u>	<u>Attachments (Handouts)</u>
Kathy Berr	DES	4
Dr. Erica McFadden	AZ Developmental Disability Planning Council	5
Elizabeth Ortiz	AZ Prosecuting Attorney's Advisory Council	6
Mary Lynn Kasunic & Regan Smith	Area Agency on Aging	7
Sarah Kader	AZ Statewide Independent Living Council	N/A

  
Hayley Howard, Committee Secretary  
September 19, 2019

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

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

## ARIZONA STATE LEGISLATURE

Conv: 1:30 PM  
Adj: 4:00 PM

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9/12/19  
9/17/19

jy  
jjb

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## Information Registered on the Request to Speak System

### *House Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults (9/17/2019)*

#### 4, Public Testimony

##### **Support:**

Cynthia Elliott, representing self

##### **All Comments:**

Cynthia Elliott, Self: I appreciate the opportunity to address the committee on this extremely important issue.

convened: 1:30pm

adjourned: 4:09 pm

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

**COMMITTEE ATTENDANCE RECORD**

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

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

DATE	09/17/19	/19	/19	/19	/19
CONVENED	1:30 pm	m	m	m	m
RECESSED					
RECONVENED					
ADJOURNED	4:09 pm				
MEMBERS					
<del>Colby Bower</del> Colby Bower	✓				
Sherri Collins	✓				
Sarah Kader	✓				
Dana Kennedy	✓				
Cheryl Knupp	✓				
Erica McFadden	✓				
Elizabeth Ortiz	✓				
April Reed	✓				
Jose de Jesus V Rico	✓				
Jami Snyder	✓				
Michael Traylor	✓				
Dunn, Vice-Chairman	✓				
Longdon, Chairman	✓				

✓ Present      --- Absent      exc Excused



## DEPARTMENT OF ECONOMIC SECURITY

*Your Partner For A Stronger Arizona*

# Update on the Executive Order 2019-03 Task Force



# **Executive Order 2019-03**

## **Enhanced Protections for Individuals with Disabilities**

1. AHCCCS, ADHS, DES with disability advocates shall review current protocols and jointly develop training on preventing abuse and neglect, recognizing the signs and symptoms of abuse & neglect, and reporting of abuse & neglect
2. AHCCCS, ADHS, DES shall ensure that all state contracts include a requirement that all staff, contractors, vendors with direct contact annually undergo training in preventing, recognizing and reporting abuse & neglect
3. AHCCCS, ADHS, DES shall ensure that all state contracts for residential, group homes, and day programs include a requirement for prominent posting of signage with approved language on how to report abuse & neglect
4. AHCCCS, ADHS, DES shall ensure that all contracts include a requirement that a check of the APS registry before someone is hired
5. AHCCCS, ADHS, DES shall convene a working group of individuals with disabilities, advocacy organizations, providers and family members. To consider additional steps that can be taken to protect and improve care for individuals with disabilities and make recommendations and submit a report to the Governor's office by November 1, 2019



# Task Force Members

- Director Christ of ADHS and key staff
- Director Trailor of DES and key staff
- Director Snyder of AHCCCS and key staff
- Lindsay Ashworth; Sexual Violence Response Manager, Arizona Coalition to End Sexual and Domestic Violence
- Representative Nancy Barto; Arizona Legislative District 15
- Senator Kate Brophy McGee; Arizona Legislative District 28
- Megan Cox, Partner, Lincoln Strategy Group, DD family member
- Asim Dietrich, JD; Staff Attorney, Arizona Center for Disability Law
- Stuart Goodman; Principal, Goodman Schwartz Public Affairs
- Emily Jenkins, JD; CEO Arizona Council of Human Service Providers
- Gina Judy, MAOM; COO, Easterseals Blake Foundation and Chair, Developmental Disabilities Advisory Council
- Dana Kennedy, MSW; State Director, Arizona AARP
- Cindy Leach, RN, NHA; COO, CopperSands; Arizona Health Care Association Board Member

# Task Force Members, Continued

- Representative Jennifer Longdon, Arizona Legislative District 24
- Ann Monahan; Board President, Arizona Autism Coalition; VP, State and Governmental Affairs, Hope Group
- Erica McFadden, PhD, MSW; Executive Director, Arizona Developmental Disabilities Planning Council
- Jon Meyers, Executive Director, The Arc of Arizona
- Joyce Millard Hoie, MPA; Consultant; Parent
- Sean Mockbee; Managing Partner, Sunshine Village Memory Care and Paseo Village Assisted Living
- Janna Murrell; Assistant Executive Director, Raising Special Kids; Parent
- Phil Pangrazio; President & CEO, Ability360
- Suzanne Pfister; President & CEO, Vitalyst Health Foundation
- Ellen Poole, Representative, MGA Home Health Care
- David Reed; Executive Director, San Carlos Apache Health and Human Services

# Task Force Members, Continued

- Denise Resnik, Co-Founder and Emeritus Board Member, Southwest Autism Research & Resource Center; Founder, First Place; Parent
- Kim Russell; Executive Director, Arizona Advisory Council on Indian Health Care
- Wendy Shaw; CEO, AIRES, LLC; Vice Chair, Arizona Association for Providers for Persons with Disabilities
- Connie Thompson RN, BSBA; Clinical Care Supervisor for Prior Authorization, Care 1st/WellCare Health Plans
- Heidi Trelease; Director of Residential Operations and Quality Assurance, The Tungland Corporation
- Jason Vail Cruz; Sexual Violence Policy Coordinator, Arizona Coalition to End Sexual and Domestic Violence (through July 2019)
- Karen Van Epps; Chair, District Central Independent Oversight Committee; Family member of individual with Down syndrome; Member, Developmental Disabilities Advisory Council
- David Voepel, CAE; CEO, Arizona Health Care Association

# Organization

- Facilitator – Sharon Flanagan-Hyde
- Monthly Task Force Meetings
- Monthly Work Group Meetings

# Work Groups

- **Agency Alignment**
  - Identifies areas where AHCCCS, DHS and DES need to continue working to ensure a streamlined system of protection for vulnerable adults
- **Incident Reporting and Investigation**
  - Identifies potential gaps or duplication in reporting and investigation of incidents by various entities including AHCCCS, DHS, DES and Law Enforcement
- **Incident Stabilization and Recovery**
  - Identifies strategies and solutions for individuals after abuse or neglect occurs
- **Member and Family Education**
  - Identifies gaps and opportunities for education of individuals and families on the system, including DES/DDD, DES/APS, DHS, AHCCCS and other entities.
- **Prevention**
  - Identifies strategies and opportunities to for prevention of abuse and neglect of vulnerable adults.

# Guiding Principles

- Work toward action items in a positive way
- Keep recommendations as simple as possible
- Keep discussions and recommendations:
  - Person- and family-focused
  - Culturally sensitive and competent, including concerns of indigenous populations.
  - Evidence-based and data-informed
  - Informed by best practice and lessons learned in other states
- Seek innovative, system-level change with optimism
- Work toward collaboration among all entities and stakeholders
- Each Work Group is tasked with incorporating outcome measures in their recommendations

# Current Status

- Work Groups developed recommendations
- Task Force reviewing and revising draft recommendations
- Next Task Force Meeting: September 20, 2019
- Recommendations and report due to the Governor by November 1, 2019



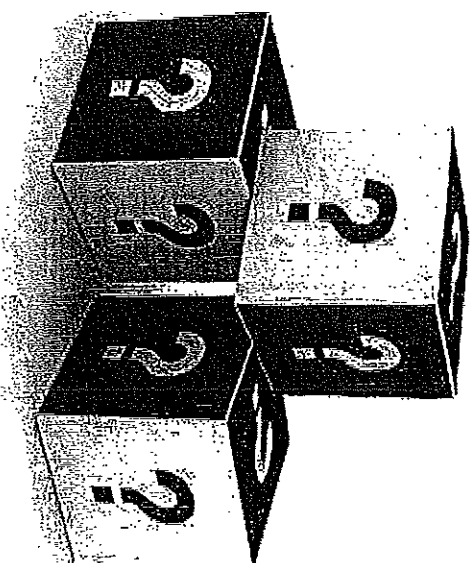
# Reporting and Preventing Maltreatment of Vulnerable Adults: Key Findings and Recommendations

Erica S. McFadden, MSW, Ph.D.



## To be addressed

- What did you learn when you began to investigate your exposure?
- What changes do you feel need to be initiated?
- What do you think you have left to do/next steps?
- What do you need from the AZ Leg to get it done?



## What are Councils on Developmental Disabilities (DD)?

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- Authorized through federal DD Assistance and Bill of Rights Act of 2000
- Federally funded, self-governing organizations in every state and territory
- Engage in “advocacy, systems change, and capacity-building” addressing most pressing needs of people with DD in each region
- Advance public policy that help individuals gain more control over their lives

“Provide information to policymakers by supporting and conducting studies and analyses, gathering information, and developing and disseminating model policies and procedures, information, approaches, strategies, findings, conclusions, and recommendations directly to Federal, State, and local policymakers,... and State agencies.” (*Public Law 106-402*)

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## **ADDPC Required Activities**

Governor-appointed 23-member Council with 6 staff. The Council SHALL:

- ✓ Serve as a forum through which issues regarding people with DD may be discussed
- ✓ Review and make recommendations on services and programs for people with DD and make those recommendations available to the Governor, Legislature and government agencies as requested
- ✓ Monitor programs and services to encourage efficient and coordinated use of resources
- ✓ Advise the public and private sector on programs, policies, and concerns pertaining to services for persons with DD and their families

# ADDPC Response to Abuse

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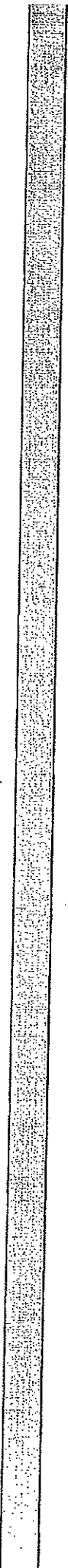
## Council Goal Revised to Include:

“...diminish discrimination, neglect, abuse and exploitation”

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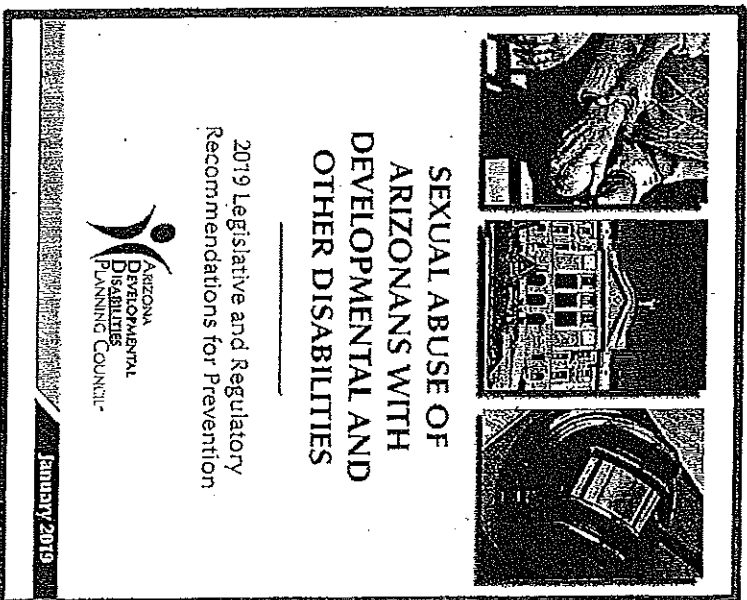
Other Activities sponsored to date:

- \$93,000 grant to Improvement Assurance Group - report due Summer 2020
- Producing video on sexual abuse and people with disabilities
- ACEs training inclusive of people with disabilities
- Supported Decision-Making Coalition
- Ongoing in-house research

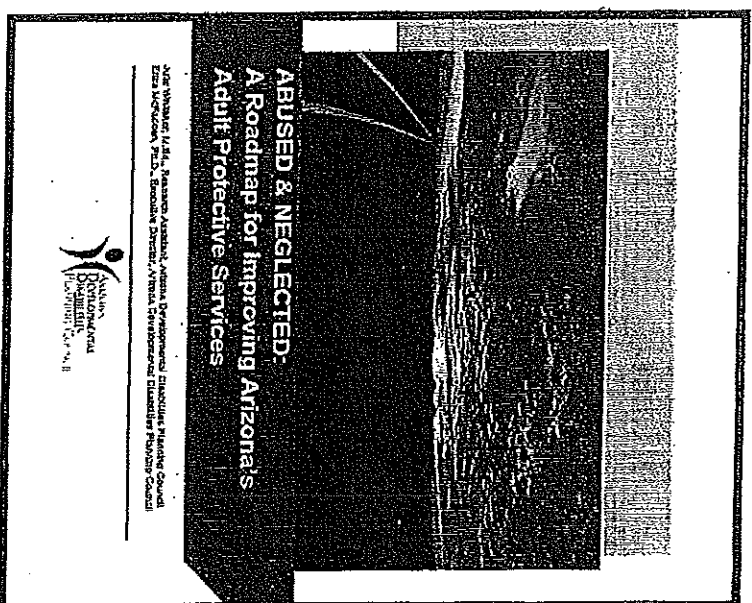


# Reports: Preventing Abuse

January 2019



September 2019



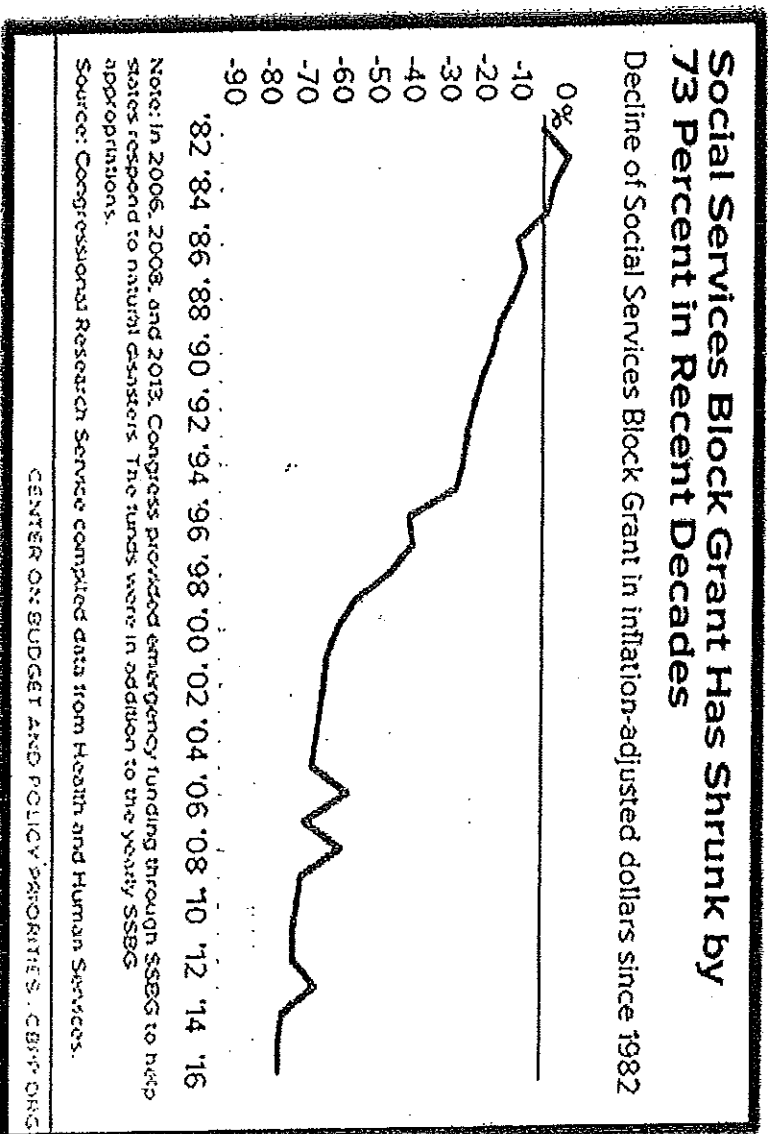
## Post Sexual Abuse Report – What We've Learned

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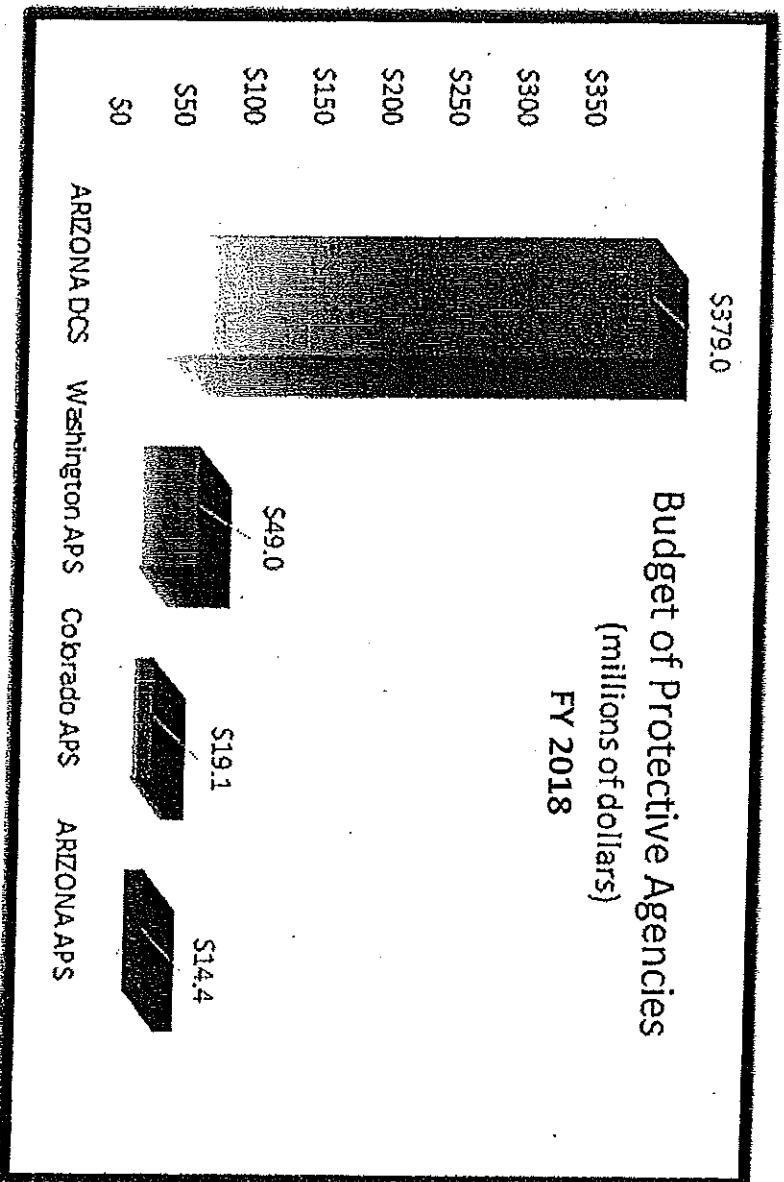
- **Usefulness of One-time APS Registry Checks:** Job hopping continues. Direct care workers or support professionals work multiple jobs, may come from another state, or work in private care or hospital settings.
  - **Abuse and Neglect Training:** There is still a lack of overall, consistent annual training on awareness, recognition, reporting, and post-reporting care among individuals, families, and some provider agencies
  - **Addressing Healthy Relationships:** Fear exists around discussion of healthy relationships of people with DD
  - **Anti-retaliation/Reporting Enforcement:** Victims are afraid to report. Unclear how penalties for failing to report are enforced.
  - **Shortage of Staffing:** Contributing to resistance to additional requirements.
-

# Our Look Into APS – What We've Learned

- No federal requirements or oversight
- Very little federal funding from SSBG funds

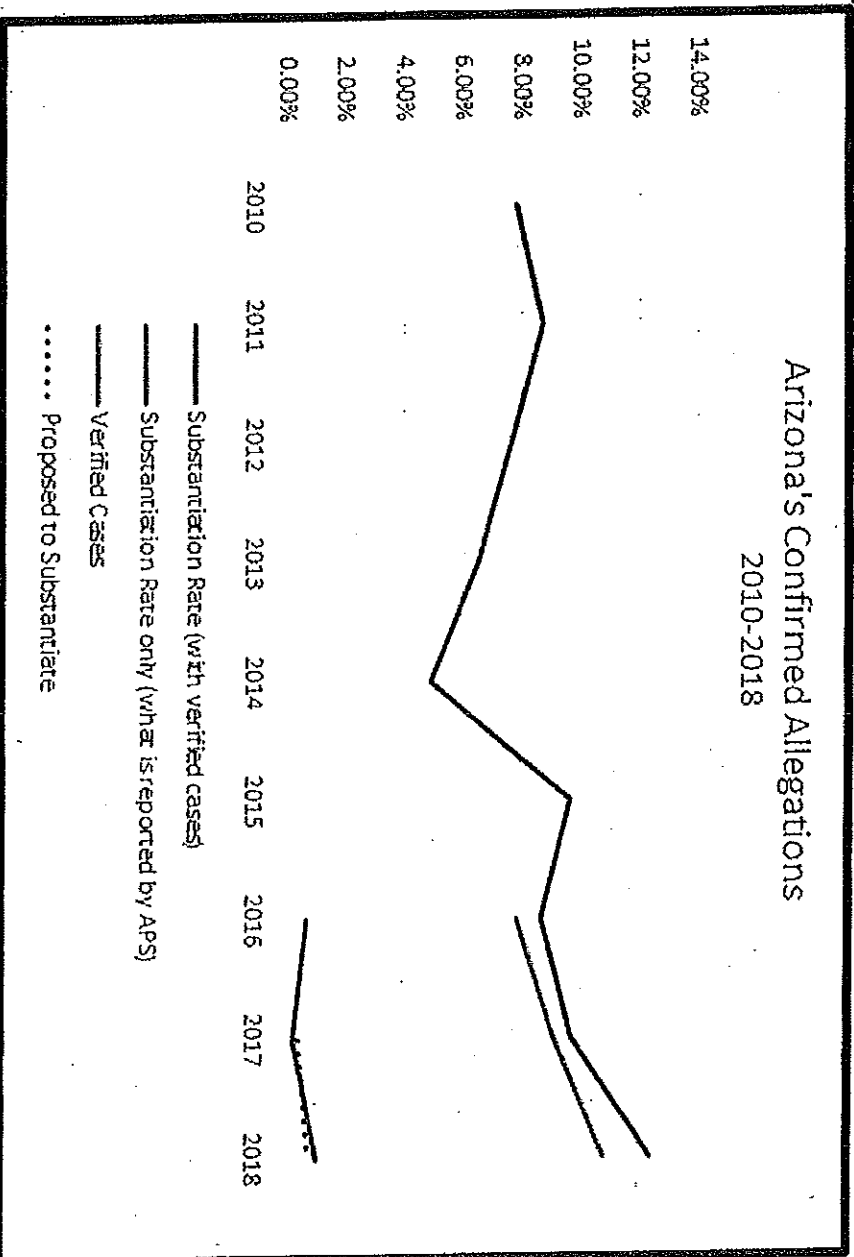


# Our Look Into APS – What We've Learned





# Our Look Into APS – What We’ve Learned



## **Our Look Into APS – What We've Learned**

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Administration for Community Living says higher substantiation rates come with more education and training requirements.

- Currently, no minimum education requirements in AZ
- Limited ongoing training
- Little information about how to interact with people with DD
- Heavy emphasis on case closures by 60 days/high caseloads may contribute to premature case closures
- Data collection and reporting remains an issue

The good news: DES just received a new 3-year federal grant for investigator training

## What Changes Can We Make?

### Transparency:

---

- Agencies should publicly report what changes/actions have been made (successes and barriers), at least semi-annually to support prevention efforts and ensure progress, e.g., status of anti-retaliation language to protect victims?
- Require posting of all residential inspection reports for easy access

### Quality Assurance:

- Work with vulnerable adults and families to develop and report on quality measures/indicators across different agencies, including APS, DDD, DAAS, DHS, and AHCCCS.
- Begin a cross-departmental task force with self-advocates that begins to address serious staffing challenges and its impact to quality care.

**Trauma-Informed Care:** Give all victims of abuse the option of counseling

## Next Steps for our Sexual Violence and DD Roundtable

---

1. **Multi-disciplinary Teams:** How are child/family advocacy centers, APS and DCS working together across the state? What is succeeding and what barriers exist?
  2. **Criminal Justice:** How can we strengthen our criminal justice system to better support victims with disabilities, from police to the judicial system?
  3. **Trauma-Informed Access:** How well-trained are counselors to work with victims with communication or cognitive disabilities? How accessible are clinics?
  4. **School Prevention Data:** What do students with DD need to keep them safe?
  5. **QoC Inspections:** How are these being done, and how effective are they?
  6. **Tribes:** How are these issues being addressed among tribal communities?
-

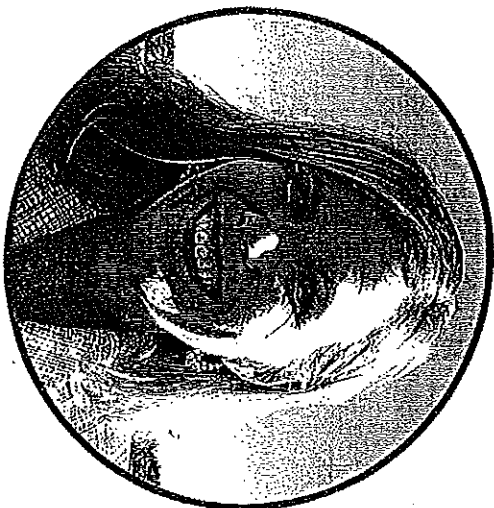
## Legislative Recommendations

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1. **APS staff training:** Require specific training for APS investigators, similar to CO's statute (HB 17-1284). Include stronger minimum requirements for staffing
2. **APS registry:** Require annual checks of the APS registry.
3. **Mandatory reporter training:** Require annual mandatory reporter and duty to report training for everyone obligated to report
4. **Elevate penalties for failing to report:** Move failing to report sexual assault of a vulnerable adult from a class 1 misdemeanor to class 6 felony, equivalent with similar statute for reporting child abuse
5. **Create a community advisory committee for APS**

## Contact Us

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**Erica McFadden, MSW, Ph.D., Executive Director**  
(602) 542-8977  
[emcfadden@azdes.gov](mailto:emcfadden@azdes.gov)

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# House Ad Hoc Committee Abuse & Neglect of Vulnerable Adults

*September 17, 2019*

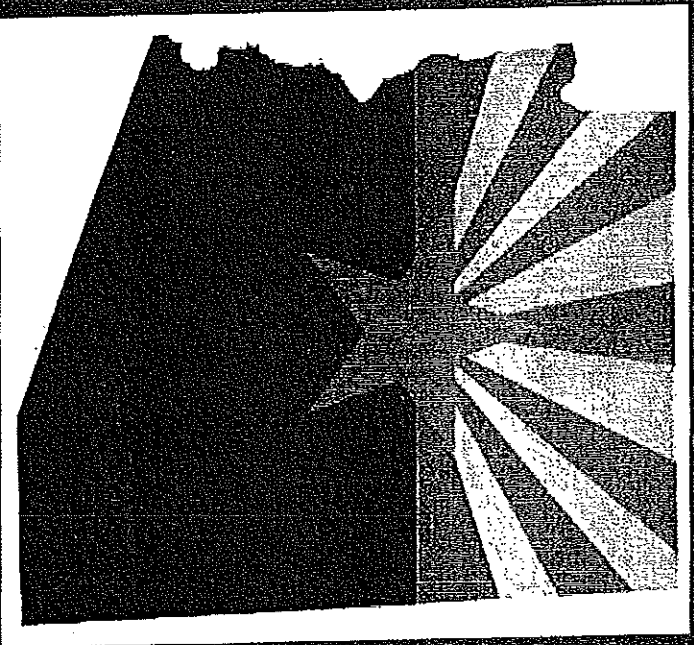
ELIZABETH BURTON ORTIZ, EXECUTIVE DIRECTOR  
ARIZONA PROSECUTING ATTORNEYS' ADVISORY  
COUNCIL

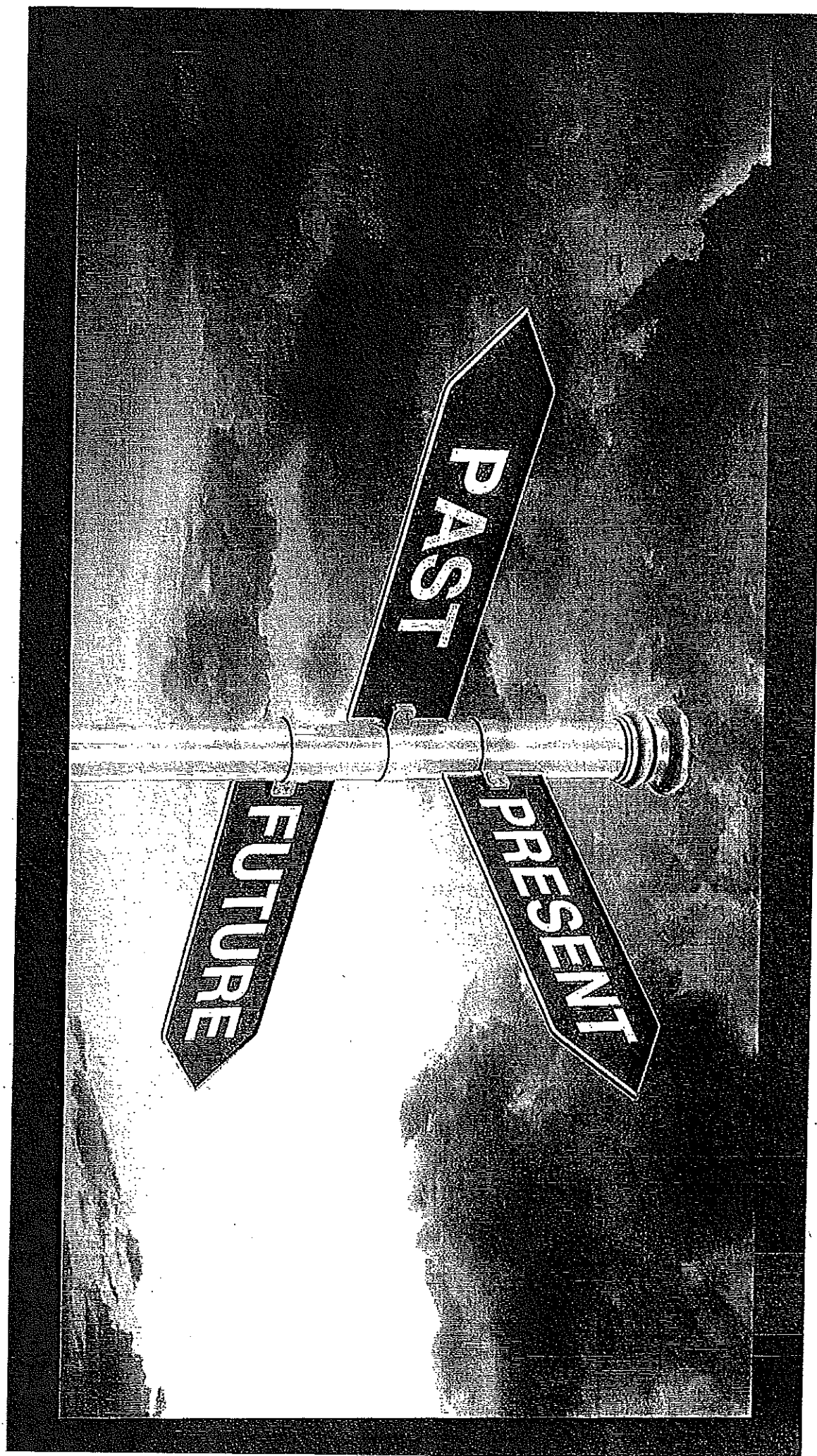
[REDACTED]

**The opinions expressed in this presentation  
are solely that of the speaker and have  
neither been reviewed nor approved by the  
Arizona Prosecuting Attorneys' Advisory  
Council.**

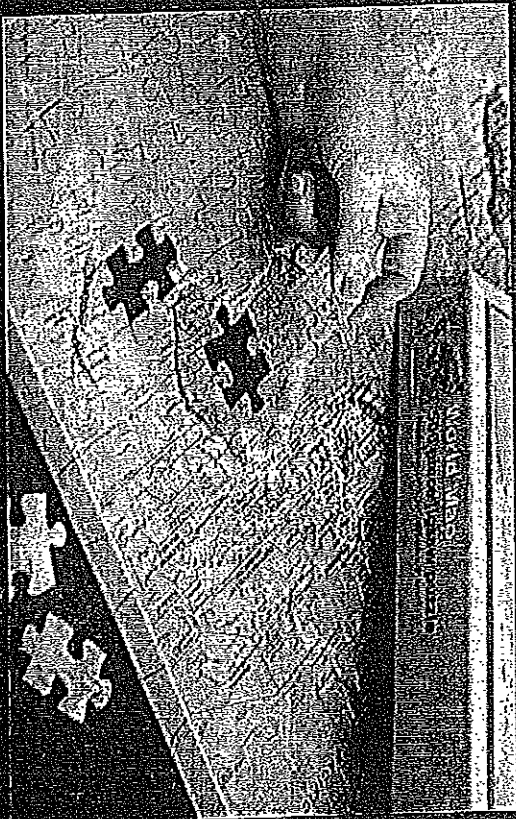


# State of the State Protecting Vulnerable Adults



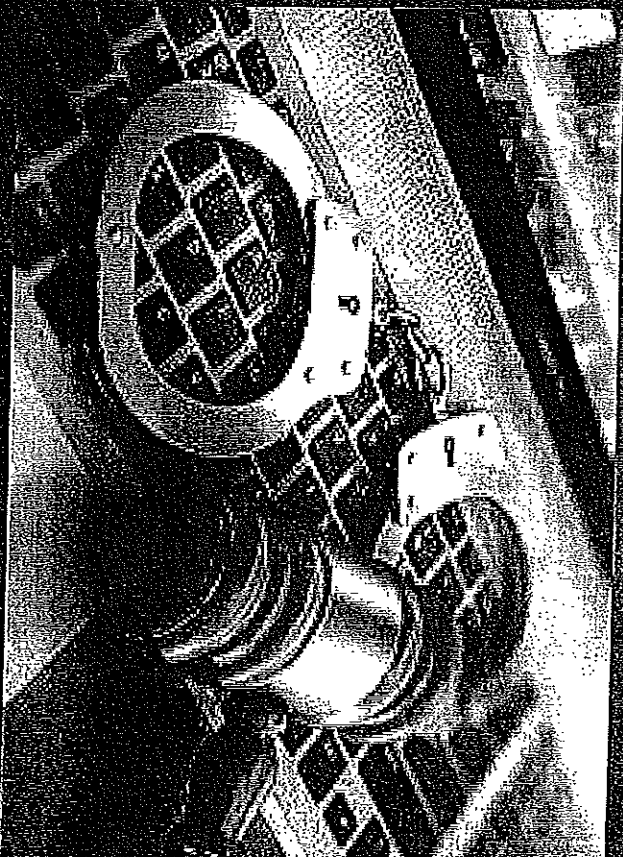


# Putting The Pieces Together





# Criminal History Dispositions

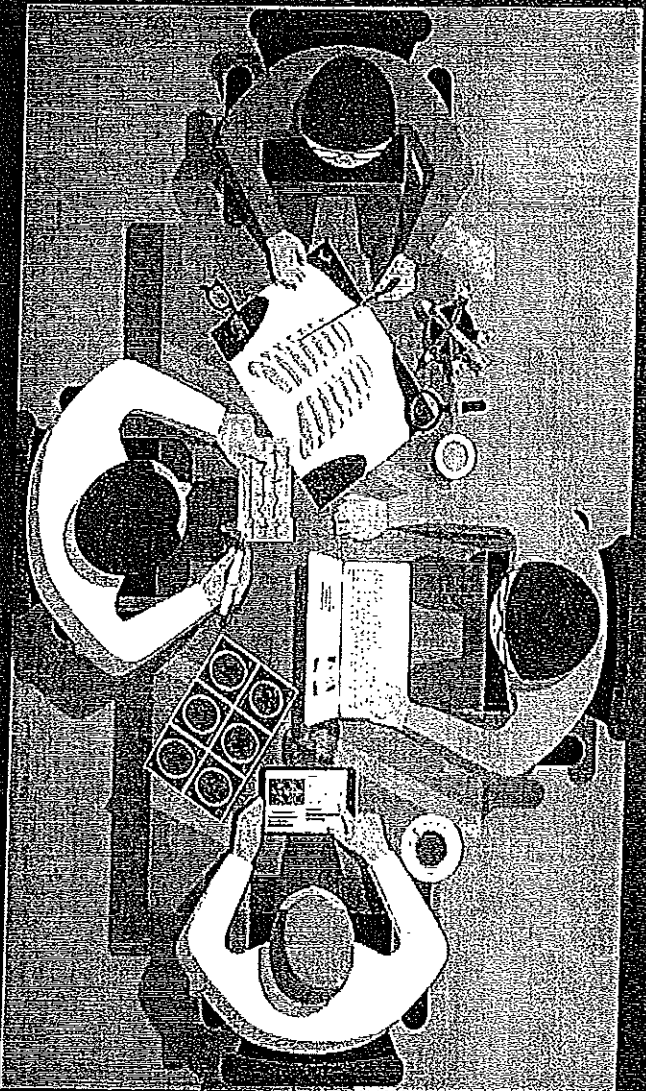


# A.R.S. section 14-5602

## Public Fiduciary



# Multidisciplinary Team Review





## A.R.S. Section 41-198

### Domestic Violence Review Team

- ▶ Non-mandatory
- ▶ Examines fatal or near fatal incidents of DV
  - ▶ Review only after criminal investigation / proceeding complete
- ▶ Report findings/recommendations to AGO
  - ▶ No identifying information in report

# Drug Overdose Fatality Review Team

- ▶ Established in Dept of Health Services
- ▶ Develop drug overdose fatalities data collection
- ▶ Annual analysis on incidence & causes
- ▶ Help develop local review teams & standards
- ▶ Develop investigation protocols
- ▶ Study statutes, rules, training, services, etc
- ▶ Educate public regarding incidents, causes & prevention



# Contact Information

**Elizabeth Burton Ortiz**

**Executive Director**

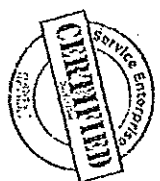
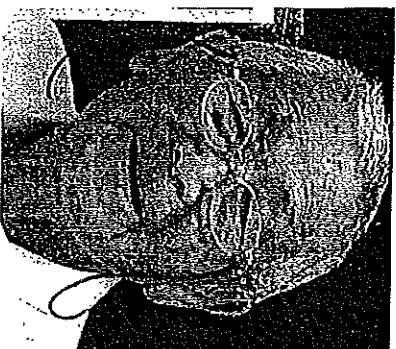
**Arizona Prosecuting Attorneys'  
Advisory Council**

**Elizabeth.Ortiz@apadcaz.com**



**AREA AGENCY ON AGING**  
**REGION ONE, INCORPORATED**

*Responding to  
 Community Needs  
 for 45 Years*



**Medicare**  
 Certified

**AHCCCS**  
 Arizona Health Care Cost Containment System  
 Contracted

**Private Non-Profit Organization, 501(c)(3)**

**Serving over 114,000 Maricopa County Residents Annually**

# **Long-Term Care Ombudsman Program**

**The Arizona Long-Term Care Ombudsman**

**Program is a federal and state funded program to address resident rights and quality care in skilled nursing, assisted living and adult foster care facilities.**

# **Long-Term Care Ombudsman Program**

**The Ombudsman program investigates concerns and resolves complaints related to actions, inactions and decisions that may adversely affect the health, safety, welfare and/or rights of the residents.**

# **Long-Term Care Ombudsman Program**

- Ensures residents have regular and timely access to Ombudsmen services
- Educates residents, their family and facility staff about resident rights and good care practices
- Advocates for changes to improve residents' quality of life and care

# **Long-Term Care Ombudsman Program**

- Represents resident interests before governmental agencies and seeks legal, administrative and other remedies to protect residents
- Provides information to the public regarding long-term care facilities, services and resident rights

# **Long-Term Care Ombudsman Program**

**The national Institute of Medicine  
recommends  
one paid FTE Ombudsman  
for every 2,000 licensed beds.**



# Statewide Ombudsman Data

Region	Counties	Nursing Homes	Assisted Living	Number of Beds	Paid OMB (FTE)	Number of facilities per Paid OMB	Number of Beds per Paid OMB
One	Maricopa	84	1,591	37,765	8.75	191	4,316
II	Pima	25	369	10,138	3	132	3,379
III	Apache, Navajo, Coconino, Yavapai	16	83	3,466	2	50	1,733
IV	Mohave, La Paz, Yuma	11	44	2,909	2	28	1,455
V	Pinal, Gila	7	7	1,721	0.85	16	2,025
VI	Graham, Greenlee, Cochise, Santa Cruz	5	20	808	0.75	33	1,077
VIII	Inter-Tribal Council	6	27	60	1.6	21	38
TOTALS		154	2,141	56,867	19.0	-	-

To meet the Institute of Medicine standards, AZ Long-Term Care Ombudsman program needs an additional \$1M





AREA AGENCY ON AGING  
REGION ONE, INCORPORATED

**Mary Lynn Kasunic**  
**President & CEO**

**Regan Smith**  
**Director**

**Long-Term Care Ombudsman Program**

24-hour Senior HELP LINE  
602-264-HELP (4357)

Answers@aaaphx.org

[www.aaaphx.org](http://www.aaaphx.org)



## Ahjahna Graham

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**From:** Hayley Howard  
**Sent:** Friday, September 20, 2019 11:32 AM  
**To:** Tracy Lopes; Ingrid Garvey; Ahjahna Graham; Jennifer Longdon; Tim Dunn  
**Subject:** FW: request for notes from Committee 09-17

**From:** Sarah Kader <skader@azsilc.org>  
**Sent:** Friday, September 20, 2019 9:48 AM  
**To:** Hayley Howard <HHoward@azleg.gov>  
**Subject:** Re: request for notes from Committee 09-17

Sure thing – here are the statistics I mentioned and AZSILC's current recommendations, as well as the link to the survey that can be distributed.

Survey:

<http://bit.ly/SILCSurvey2019>

Statistics:

From: <https://disabilityjustice.org/sexual-abuse/>

People with disabilities are sexually assaulted at nearly three times the rate of people without disabilities. A 2005 survey of people with disabilities indicated that 60 percent of respondents had been subjected to some form of unwanted sexual activity. Unfortunately, almost half never reported the assault. In general, people with disabilities experience domestic and sexual violence at higher rates than people who do not have a form of disability. Consider the following:

- 83% of women with disabilities will be sexually assaulted in their lives.
- Just 3% of sexual abuses involving people with developmental disabilities are ever reported.
- 50% of girls who are deaf have been sexually abused compared to 25% of girls who are hearing; 54% of boys who are deaf have been sexually abused in comparison to 10% of boys who are hearing.
- Women with a disability are far more likely to have a history of undesired sex with an intimate partner – 19.7% vs. 8.2%.



- Approximately 80% of women and 30% of men with developmental disabilities have been sexually assaulted – half of these women have been assaulted more than 10 times.

From: <https://www.endabusepwd.org/problem/alarming-rates/>

### **People with disabilities are at greater risk of being victimized.**

- 3 times more likely to experience violent victimization as adolescents and adults
- 3 times more likely to experience rape, sexual assault, aggravated assault, and robbery
- 3 times more likely to be sexually abused as children
- 1.6 times more likely to experience abuse or neglect as children
- 1.5 times more likely to experience repeated abuse or neglect as children

Risk of violent victimization is even higher for some people with disabilities. This includes: women with disabilities, people with cognitive or developmental disabilities, people with psychiatric disabilities, and people with multiple disabilities. People with intellectual disabilities are sexually assaulted at a rate seven times that of people without disabilities.

### **Some possible solutions:**

- Increased pay for care-workers
- Training on signs of abuse/neglect for compliance officers that go into facilities
- Add checklist regarding abuse/neglect to licensure requirements
- Training for peace officers on how to spot abuse/neglect and how to respond to calls about abuse/neglect
- Education and resources in the community regarding abuse/neglect (for families, individuals who have disabilities, teachers, social workers, etc)
- APS should be 24/7
- Increased reporting requirements
- Make unlawful policies that disincentivize reporting
- Expand ombudsman office to include monitoring of DDD group homes

**Sarah E. Kader**  
Director of Operations



**Arizona Statewide Independent Living Council**

P.O. Box 46354

Phoenix, Arizona 85063

(602) 262-2900, ext. 1

(602) 271-4100 (Fax)

[skader@azsilc.org](mailto:skader@azsilc.org)

[www.azsilc.org](http://www.azsilc.org)

**From:** Hayley Howard <[HHoward@azleg.gov](mailto:HHoward@azleg.gov)>

**Date:** Thursday, September 19, 2019 at 11:39 AM

**To:** Sarah Kader <[skader@azsilc.org](mailto:skader@azsilc.org)>

**Subject:** request for notes from Committee 09-17

Good Morning,

Can you send our office the notes and information you relayed to the committee on Tuesday.

Hayley Howard- 602-926-5344

Admin. Assistant

**To Rep. Shah & Rep. Longdon**

602-926-4467





Appendix C:

October 1, 2019

**Minutes and Reference Materials**



## ARIZONA STATE LEGISLATURE

### INTERIM MEETING NOTICE OPEN TO THE PUBLIC

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

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

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

**Place:** HHR 1

#### AGENDA

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

#### Members:

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

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

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

9/26/19  
jy

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



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

HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE  
ADULTS

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

MINUTES RECEIVED  
CHIEF CLERK'S OFFICE

10-1-19

Convened 1:30 P.M.

Recessed

Reconvened

Adjourned 4:13 P.M.

Members Present

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

Members Absent

Ms. Knupp

Agenda

Original Agenda – Attachment 1

Request to Speak

Report – Attachment 2

Committee Attendance

Report – Attachment 3

Presentations

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

*Hayley Howard*

Hayley Howard, Committee Secretary

October 1, 2019

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

convened: 1:30 pm

adjourned: 4:13 pm

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

## ARIZONA STATE LEGISLATURE

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Michael Traylor

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9/26/19  
jy

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## Information Registered on the Request to Speak System

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

#### 5. Public Testimony

##### Support:

Cynthia Elliott, representing self; Christine Scianna, representing self

##### All Comments:

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

PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD



HOUSE OF REPRESENTATIVES

Please PRINT Clearly

Committee on Abuse + Neglect Bill Number \_\_\_\_\_  
Date 10/11/19 ☐ Support ☐ Oppose ☒ Neutral  
Name Lindsay Jones Need to Speak? ☒ Yes ☐ No  
Representing Comm. Outreach Program for the Peat Are you a registered lobbyist? no  
Complete Address 268 W. Adams St Tucson, AZ 85705  
E-mail Address Lindsay.j@copdaz.org Phone Number 520-792-1900  
Comments: \_\_\_\_\_

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



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

**COMMITTEE ATTENDANCE RECORD**

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

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

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

✓ Present      --- Absent      exc Excused



# ARIZONA CENTER FOR DISABILITY LAW

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



## **ACDL Mission & Vision**

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



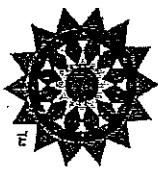
## **Protection & Advocacy System (P&A's)**

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



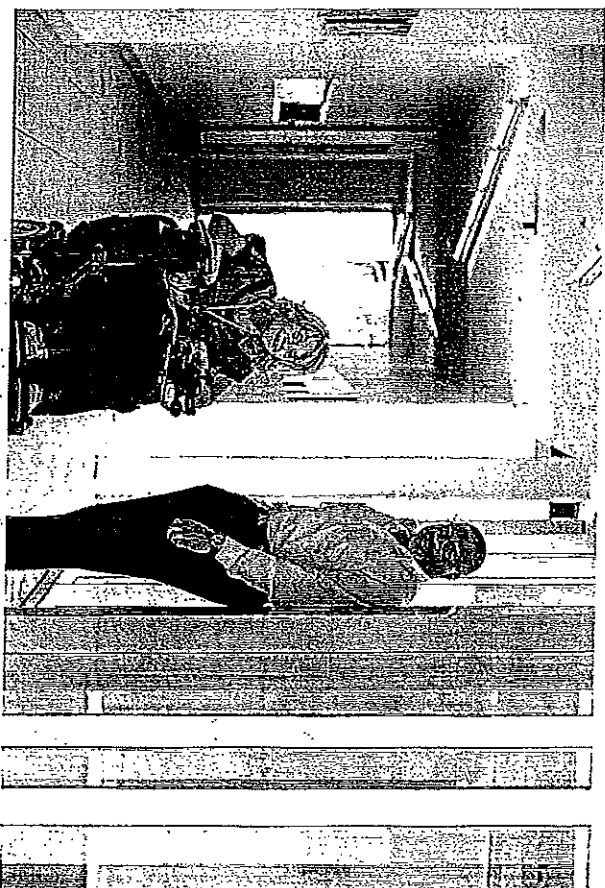
# **Federal Protection and Advocacy Programs**

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



# Who is ACDL?

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





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

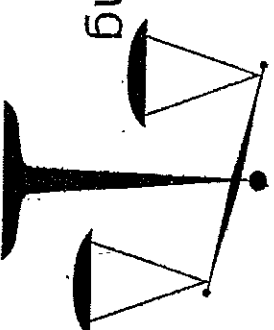
*In Arizona Center for Disability Law v. Cara M. Christ, et al*, 18-CV-02854 PHX MHB (D. Ariz.), ACDL is challenging the Arizona State Hospital's practices that interfere with ACDL staff's reasonable unaccompanied access to patients during monitoring visits and investigations of abuse and neglect, as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

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



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

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



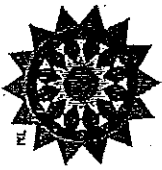




# **ACDL and its Access Authority**

## **ACCESS AUTHORITY:**

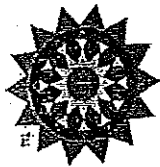
- ACDL may inspect all areas of the facility used by residents or accessible to residents without the presence of any facility employee. ACDL does not need the consent of any party to access to the facility.
- ACDL may speak privately with any resident, including minors or adults with guardians, at all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



# **Hacienda – ACDL follow up 1/30/2019**

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

Installing CCTV cameras, hiring security staff, modifying visiting hours, restricting building access, and increasing patient supervision



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

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



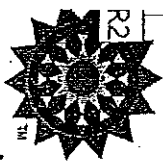
## **Hacienda 3<sup>rd</sup> Visit – 6/27/2019**

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

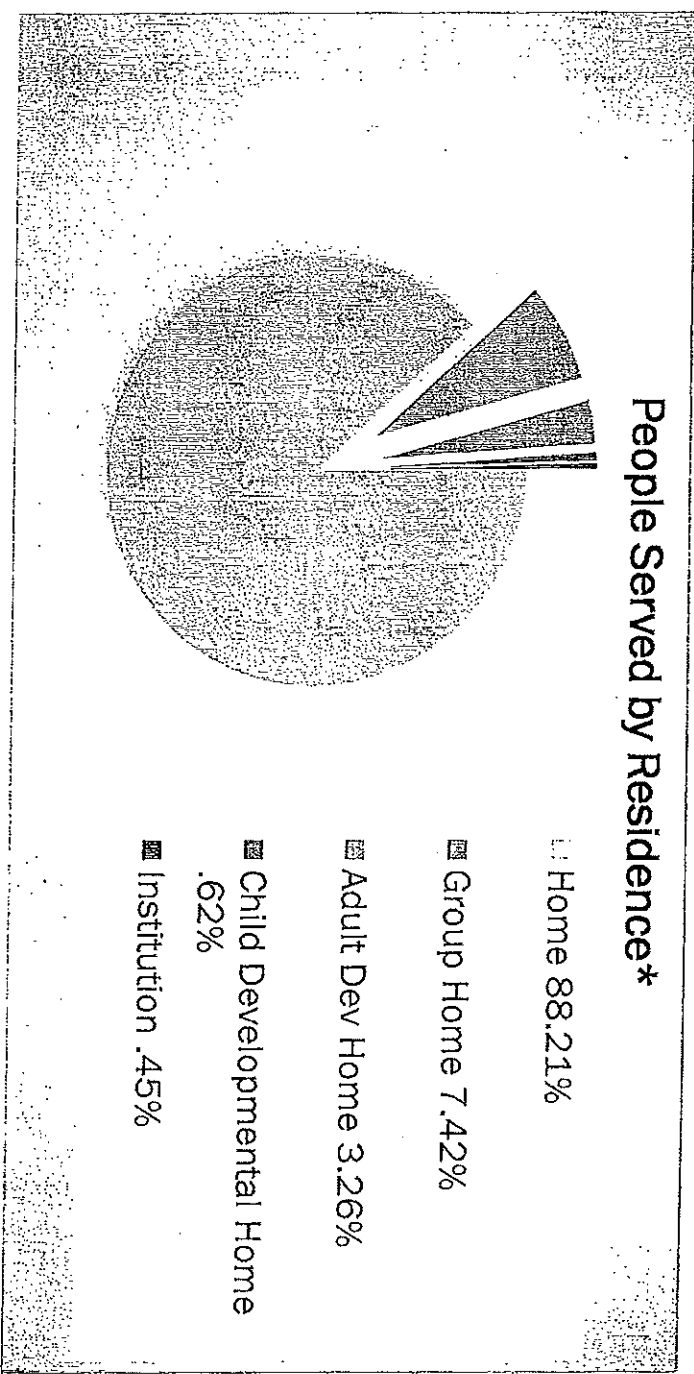


## **Hacienda update as of 9/26/2019**

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



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

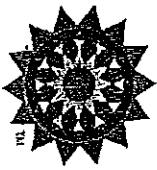


\*Behavioral Health Residential Facility 00% and Assisted Living Center 01% are



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

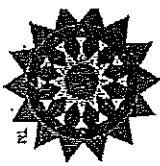
- As of mid-2017, there were approximately 2,905 group home residents throughout the state
- There were at least 485 group homes in operation
- The Department of Economic Security's Quality Management Program Monitoring Unit is currently responsible for monitoring group homes



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

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





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

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

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



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

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



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

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

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

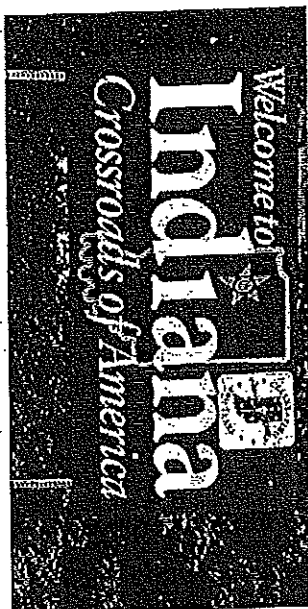


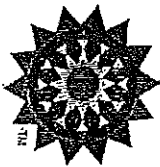
## **ARS 36-592... continued**

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



## Other State Models...





# Indiana's Monitoring Approach

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

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

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

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

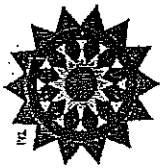


# Washington's Monitoring Approach

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

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

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



# Louisiana's Monitoring Approach

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

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

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





# Louisiana Program Funding

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



### **Phoenix Office**

5025 E. Washington St., Ste. 202  
Phoenix, AZ 85034  
(602) 274-6287  
1-800-927-2260

### **Tucson Office**

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

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

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

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

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



# AARP

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

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

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



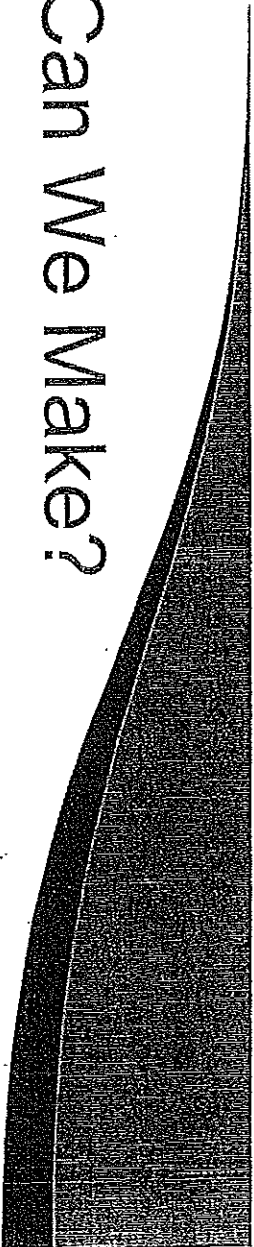
# What We Learned

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

# What We Learned



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



# What Changes Can We Make?

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

# What Changes Can We Make?

Explore Mandatory Reporting Statute to:

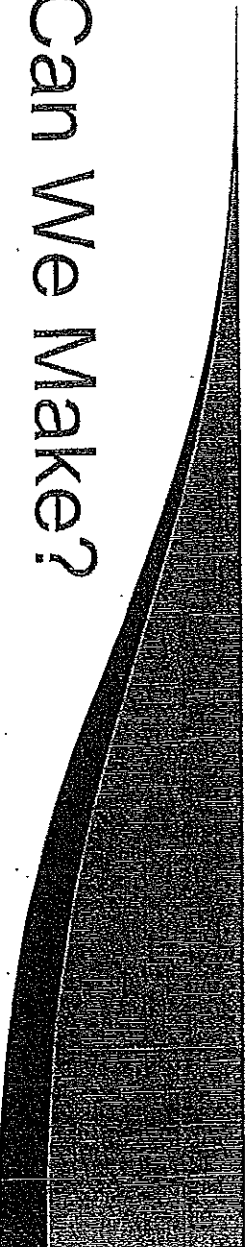
- Impose **Civil** Penalty on the *individual* failing to report, (See, interesting rationale for going the civil route at <http://publish.illinois.edu/elderlawjournal/files/2017/07/Bernal.pdf>) **OR**
- Impose stricter criminal penalty (as in NY/felony)

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

- (a) Revoke the facility's license and/or contract with the state to provide services;
- (b) Deny payment;
- (c) Assess and collect a civil monetary penalty with interest from the facility owner and/or facility administrator;
- (d) Appoint temporary management;
- (e) Close the facility and/or transfer residents to another certified facility;
- (f) Direct a plan of correction;
- (g) Assign monitors to the facility; or
- (h) Reduce the licensed bed capacity.

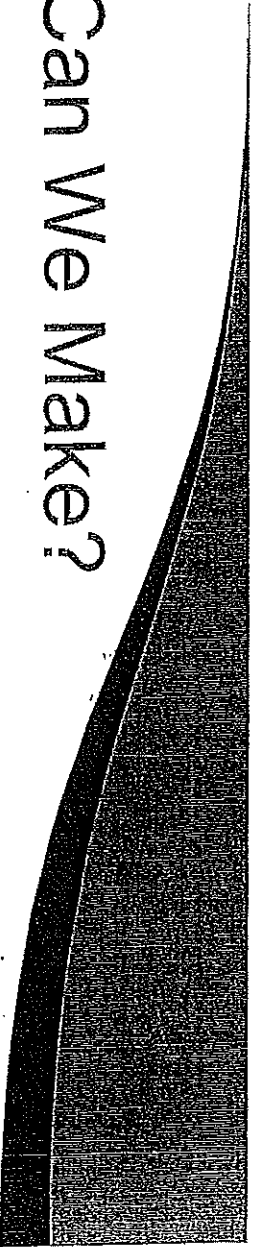
- Require facilities to train all staff and contractors with potential for resident access and test on mandatory reporting. Mandate continuing education on same.





# What Changes Can We Make?

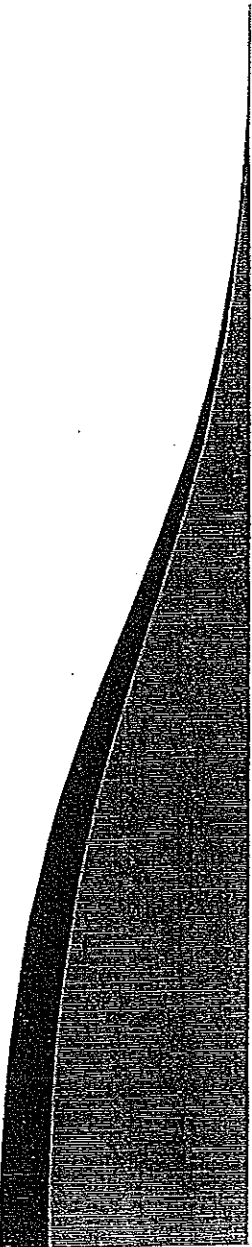
- Strengthen Criminal Background Checks to ensure coverage of all employees and contractors with direct access; Create a system to automatically alert facilities of new arrests (or even convictions) at the state and federal level.
- Strengthen penalties for facilities that fail to follow statutory or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



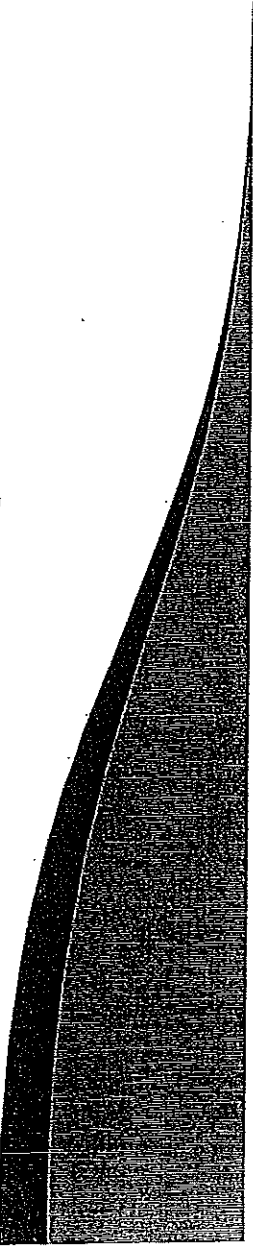
# What Changes Can We Make?

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

# Next Steps



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



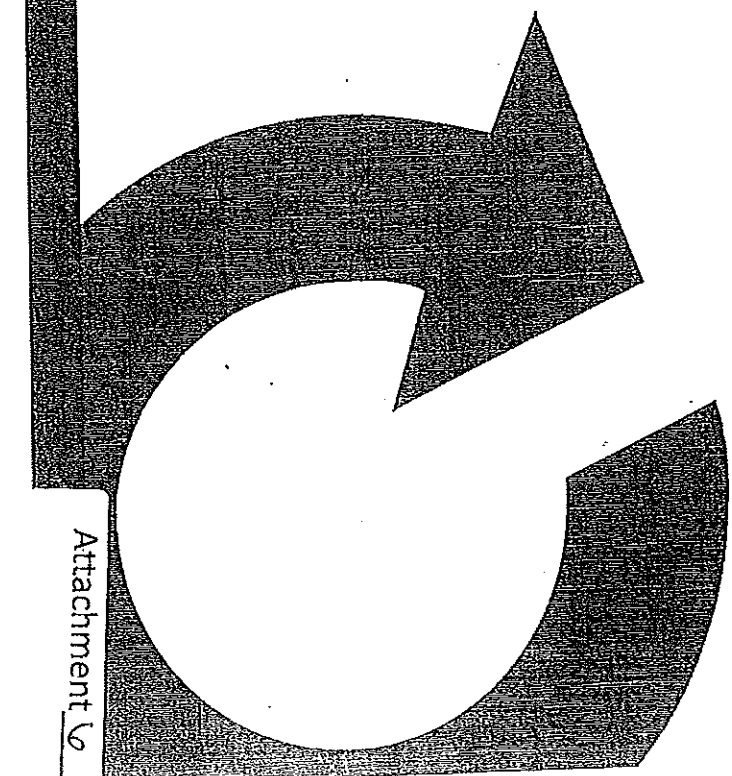
Dana Marie Kennedy, MSW  
State Director, AARP Arizona

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

(602) 262-5191



**ABILITY 360<sup>®</sup>**



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# ABILITY360

## Our Mission

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

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# ABILITY360

**“Center for Independent Living” is...**

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

**We are:**

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

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

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# ABILITY360

## Independent Living Philosophy

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



ABILITY360



## HELPLINE PARTNERSHIP

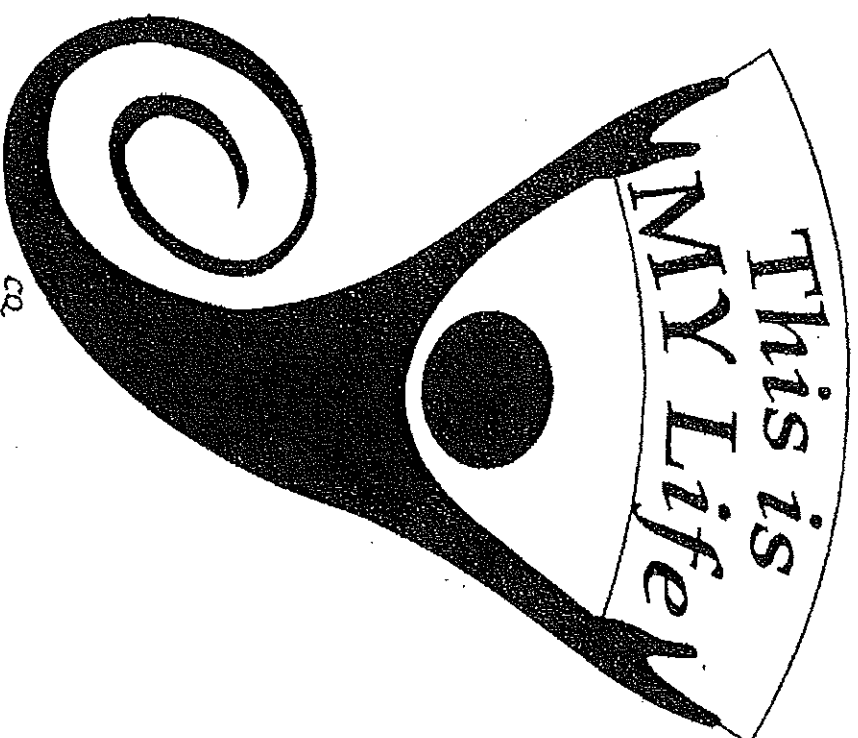
- A Victim Services Specialist is available every Thursday from 3 – 7 PM at the Ability360 Main Campus.
- Community members, including people with disabilities, family, caregivers, service providers, Ability360 Staff, or anyone needing support and services, can use this resource at no cost.
- Call 602-279-2900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

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# ABILITY360

## This is MY Life

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



ca

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# ABILITY360

## Ability360 Home Care Services

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

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

## Training on Legal Concepts

# ABILITY360

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

## Ethical Principles

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

## Consumer's Rights

# ABILITY360

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

## Adult and Child Abuse

## ABILITY 360

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

- Abuse
- Sexual
- Neglect
- Financial
- Emotional

## Signs of Adult and Child Abuse

# ABILITY360

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



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# ABILITY360

## Observing and Monitoring:

Recognizing Changes – The Direct Care Worker (DCW) as Detective:

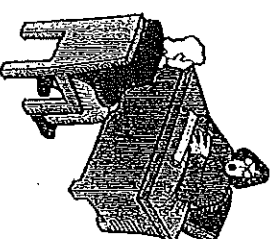
- Early identification of changes in an individuals routines, behavior, appearance, etc.
- You are the first to observe any changes in a consumer.
- You get to know a person by spending time with him/her and learning what is usual for them.

Tools the DCW may use:

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

## Reporting

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



# ABILITY360

## Abuse Reporting Requirements

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

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## Prevention for Abuse

## ABILITY360

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

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

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# Abuse HURTS US ALL

ABILITY360



AREA AGENCY ON AGING  
REGION ONE, INCORPORATED



## Recognize & Report Abuse

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

Attachment 7

Area Agency on Aging, Region One

## **Together We Stand Strong Against Abuse**

### **We are All Vulnerable to Abuse**

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

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

### **Recognize and Report Abuse**

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

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

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

**Area Agency on Aging 24-Hour Senior HELP LINE  
602-264-HELP (4357) [aaaphx.org](http://aaaphx.org)**



AREA AGENCY ON AGING  
REGION ONE, INCORPORATED

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

Appendix D:

October 15, 2019

**Minutes and Reference Materials**





## ARIZONA STATE LEGISLATURE

### INTERIM MEETING NOTICE OPEN TO THE PUBLIC

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

**Date:** Tuesday, October 15, 2019

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

**Place:** HHR 1

#### AGENDA

1. Call to Order
2. Test and Implementation of Accessibility Technology
3. Presentations:
  - Beatitudes Campus
  - Arizona Commission for the Deaf and Hard of Hearing
4. Stakeholders:
  - Dr. Tasha Menaker - Arizona Coalition to End Sexual and Domestic Violence
  - Carol Brown
5. Review of Identified Issues/Challenges in Protecting Vulnerable Adults and Potential Solutions
6. Committee Discussion
7. Public Testimony
8. Adjourn

#### Members:

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

Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Jami Snyder  
Molly McCarthy - designee for DES

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

10/9/19  
JY

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



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

HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE  
ADULTS

Report of Interim Meeting  
Tuesday, October 15, 2019  
House Hearing Room 1 -- 1:30 P.M.

Convened 1:30 P.M.  
Recessed 2:51 P.M.  
Reconvened 3:00 P.M.  
Adjourned 4:01 P.M.

MINUTES RECEIVED  
CHIEF CLERK'S OFFICE

10-16-19

Members Present

Representative Longdon, Chairman  
Representative Dunn, Vice-Chairman  
Mr. Bower  
Ms. Collins  
Ms. Kader  
Ms. Kennedy  
Ms. Knupp  
Ms. McFadden  
Ms. Ortiz  
Ms. Reed  
Ms. Snyder  
Ms. McCarthy

Members Absent

Mr. Rico

Agenda

Original Agenda -- Attachment 1

Request to Speak

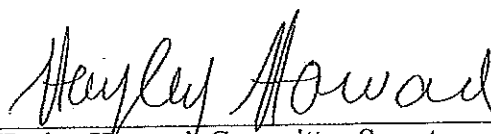
Report -- Attachment 2, 3

Committee Attendance

Report -- Attachment 4

Presentations

<u>Name</u>	<u>Organization</u>	<u>Attachments (Handouts)</u>
Cheryl Knupp	Beatitudes	5
Sherri Collins	ACDL	6
Dr. Tasha Menaker	AZ Coalition to End Sexual Violence	n/a
Carol Brown	WACOG	7
Rep. Longdon	House of Representatives	8



Hayley Howard, Committee Secretary  
October 16, 2019

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

## ARIZONA STATE LEGISLATURE

### INTERIM MEETING NOTICE OPEN TO THE PUBLIC

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

Date: Tuesday, October 15, 2019

Time: 1:30 P.M.

Place: HHR 1

#### AGENDA

1. Call to Order
2. Test and Implementation of Accessibility Technology
3. Presentations:
  - Beatitudes Campus
  - Arizona Commission for the Deaf and Hard of Hearing
4. Stakeholders:
  - Dr. Tasha Menaker - Arizona Coalition to End Sexual and Domestic Violence
  - Carol Brown
5. Review of Identified Issues/Challenges in Protecting Vulnerable Adults and Potential Solutions
6. Committee Discussion
7. Public Testimony
8. Adjourn

#### Members:

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

Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Jami Snyder  
Molly McCarthy - designee for DES

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

10/9/19  
JY

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

## Information Registered on the Request to Speak System

*House Ad Hoc Committee on Abuse and Neglect of  
Vulnerable Adults (10/15/2019)*

### **8. Adjourn**

#### **Support:**

Cynthia Elliott, representing self; Tonia Rokeby, representing self

#### **All Comments:**

Cynthia Elliott, Self: request to speak at today's meetings; Tonia Rokeby, Self: speaking on behalf of myself and my son

**PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD**



**HOUSE OF REPRESENTATIVES**

Please PRINT Clearly

Committee on Vulnerable Adults Bill Number \_\_\_\_\_

Date Oct 15<sup>th</sup> ☐ Support ☐ Oppose ☐ Neutral

Name Christine Scianna Need to Speak? ☒ Yes ☐ No

Representing \_\_\_\_\_ Are you a registered lobbyist? \_\_\_\_\_

Complete Address 15928 W. Custer LN, Surprise, AZ 85379

E-mail Address cmwebster3753@gmail.com Phone Number 623-521-7457

Comments: Speaking about concerns on group homes.

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

**PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD**



**HOUSE OF REPRESENTATIVES**

Please PRINT Clearly

Committee on \_\_\_\_\_ Bill Number \_\_\_\_\_

Date \_\_\_\_\_ ☐ Support ☐ Oppose ☐ Neutral

Name Mark Vallimont Need to Speak? ☒ Yes ☐ No

Representing \_\_\_\_\_ Are you a registered lobbyist? \_\_\_\_\_

Complete Address \_\_\_\_\_

E-mail Address mark.vallimont@yahoo.com Phone Number 520-355-0227

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

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

Mark Valimont  
Deaf Activist/Leader/Survivor  
11177 N Oracle Rd # 10102  
Oro Valley, AZ 85737  
520-355-0227 (H)

Thank you for providing us ASL interpreters in this room. It is helpful! So much appreciated. Here is the list of FACTS/HARDSHIP/NEEDS below. We highly/strongly recommend.

ACDL does not provide me an interpreter. So, they referred me to different non profit organizations and they still do not provide an interpreter. Even, they know nothing about Deaf Rights. Imagine? VRS/VRI are not good enough but live interpreters, in person, are the BEST!

ASL utilizes light and still pay a higher electric bill at residence or commercial and shall/should be half. ASL is communication. Many years ago, we used TTY and typed so long to make a phone bill so higher. Hearies only speak and hear fast.

We, Deaf, drive, better than hearies. No offend. Our eyes are sharp. The higher percent of car crash is hearies. We shall/should have a greatly discount on car insurance or half. They keep charging us so higher because we can't hear. Oh please.

Place Deaf in front line to have better services. There are so plenty of hearies in line or go to others.

We need more certified live legal interpreters in person, only 7 in the state and Deaf Advocacy to be stronger.

We need more funds to go to Deaf Community like COPD, Community Outreach Program for the Deaf in Tucson and ACDHH, AZ Commission for the Deaf and HH to serve better too.

We need more protections for Deafies too.

AZ honors Federal Laws for Deaf Rights.

Thank you again for obtaining your attention. Have a nice day.

fair housing reasonable accommodation

ACDL

From: ACDL Disclaimer (acdldisclaimer@azdisabilitylaw.org)

To: markvallmont@yahoo.com

Date: Tuesday, August 27, 2019, 10:19 AM MST

Hello Mark,

I have attached 2 fair housing resources to help you with your reasonable accommodations requests.

#### Representation Disclaimer

Recently, you requested legal assistance from the Arizona Center for Disability Law (ACDL). Please keep in mind that your request for services does not create an obligation by the ACDL to represent you.

You are responsible for all deadlines and actions in your case, unless and until the Center agrees to represent you. If the ACDL agrees to represent you, our staff will put that agreement in writing in a letter. Both you and the ACDL attorney or advocate will sign the letter outlining the agreement. The letter will state the scope of legal services.

The demand for legal services greatly exceeds our staff and resources. So the Center makes decisions about whether it can accept cases based on many factors.

Those factors include:

- 1) whether the issue is within a service areas the Center is focusing on based on public and our board of director's input,
- 2) available grant funding and eligibility requirements,
- 3) staff workload and commitments, and
- 4) whether the case may positively impact other people with disabilities.

Please click on the link: [Intake@azdisabilitylaw.org](mailto:Intake@azdisabilitylaw.org) to verify your email address is correct.

Thank you, Martha.



Re:

AZ tenants

From: mark valimont (markvallimont@yahoo.com)

To: arizonatenants@msn.com

Date: Wednesday, September 11, 2019, 01:16 PM MST

Calling you. Sorry about tech issues.

On Sep 10, 2019, at 11:46 AM, Arizona Tenants <arizonatenants@msn.com> wrote:

We are a private entity; we are not subsidized. We are happy to accommodate your appointment time, but we are unable to provide you with an ASL Interpreter.

Specifically, what are you trying to accomplish? I understand that there was some misunderstanding by your landlord regarding your ESA. Correct? I referred you to online ESA registration vendors who would be able to complete your ESA registration.

Has the landlord tendered you any written notice? If so, what type of notice?

Jan

Arizona Tenants  
5304 E. Southern Ave., Suite 106  
Mesa, Arizona, 85205  
HOTLINE: (602) 257-8987

----- Original message -----

From: mark valimont

Date: Tue, Sep 10, 2019 9:41 AM

To: Arizona Tenants;

Cc:

Subject: Re: Schedule appointment

I got it about Cara. To bring my interpreter? I thought you would provide one. From an interpreting agency in PHX? I don't know them.

Sent from Yahoo Mail for iPhone

On Tuesday, September 10, 2019, 9:27 AM, Arizona Tenants <arizonatenants@msn.com> wrote:

Hey Mark,

I spoke to you last week. Our office appointments are made by Cara, who responded to your email. Do you have an ASL Interpreter that will come in with you? I am able to coordinate my schedule around your availability, just let me know what day and time you are available.

Thanks.

Jan

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

**COMMITTEE ATTENDANCE RECORD**

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

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

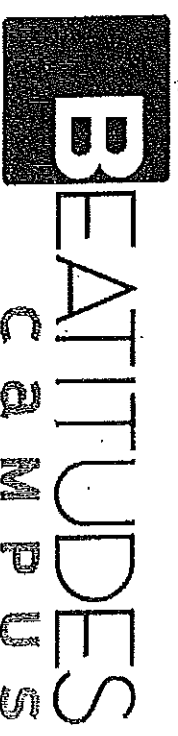
DATE	10/15/19	/19	/19	/19	/19
CONVENED	1:30pm	m	m	m	m
RECESSED	2:51pm				
RECONVENED	3:00pm				
ADJOURNED	4:01pm				
MEMBERS					
Colby Bower- Designee for Dr. Cara Christ	✓				
Sherri Collins	✓				
Sarah Kader	✓				
Dana Kennedy	✓				
Cheryl Knupp	✓				
Erica McFadden	✓				
Elizabeth Ortiz	✓				
April Reed	✓				
Jose de Jesus V Rico	—				
Jami Snyder	✓				
Molly McCarthy- Designee for DES	✓				
Dunn, Vice-Chairman	✓				
Longdon, Chairman	✓				

✓ Present      --- Absent      exc Excused

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

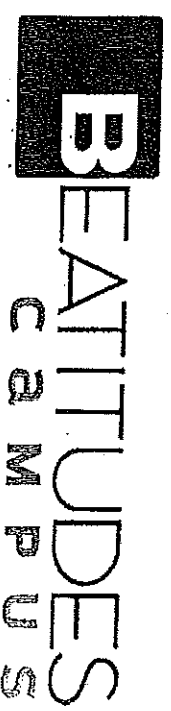
Cheryl Knupp, Sr. Vice President of Health Services and Human Resources

October 15, 2019



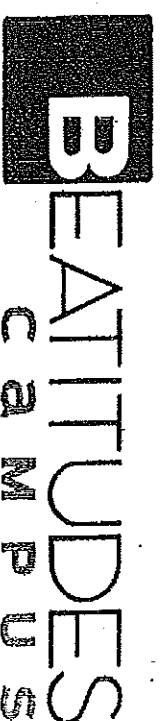
## **Our Mission**

❖ The Beatitudes Campus is a faith-based community offering a wide spectrum of services for older people. Our heritage of Christian hospitality calls us to welcome people of all faith traditions and commits us to a model of wellness that promotes soundness of mind, spirit and body.



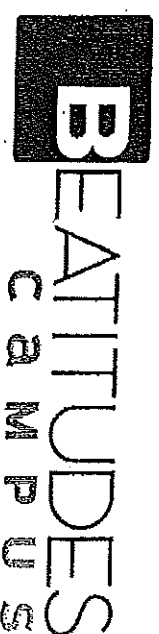
## **Our Promise**

❖ Beatitudes Campus is a not-for-profit life plan community founded by the Church of the Beatitudes, a United Church of Christ congregation. Our heritage of Christian hospitality calls us to welcome all people. This includes outreach to Jewish, Muslim, Hindu, Buddhist and other faiths, as well as those with no connection to a faith community. We value the diversity of all – regardless of gender, race, ethnicity, national origin, disability, marital status or sexual orientation. Our core values of compassion, respect, accountability and excellence drive every aspect of our community, and are what have made Beatitudes Campus a strong and respected leader in senior living since 1965.



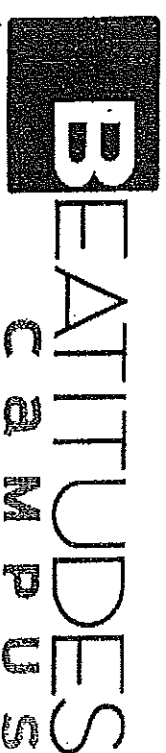
## Who We Serve

- ❖ Beatitudes Campus has the ability to serve over 660 individuals daily:
- We have 461 Independent Living apartments/homes and are in process of building 34 new patio homes to open in early 2020.
- We have a 72 bed Medicare & Medicaid licensed skilled nursing facility consisting of short stay rehab, long term care and advanced memory care residents.
- We have 100 Personal Care Assisted Living beds as well as 29 Directed Care beds for memory support and we accept ALTCS.



## **Who We Serve-continued**

- We offer Medicare Certified Home Health services on campus and to the community through our Beatitudes Home Health Agency.
- We offer non-medical home care services on campus and to the community through our Beatitudes at Home Program.
- We offer Physical, Occupational and Speech Therapy Outpatient services.
- We have an on-site primary care clinic operated and staffed by Mobile Valley Physicians (MVP).



## Caregivers, Nursing, and Additional Staff

### ❖ Beatitudes currently has approximately 450 employees

- All direct care staff are hired under a group/peer review process, their licenses or certifications are checked with governing boards prior to hire and prior to expiration if applicable and they must pass background check, drug test, reference checks and have a valid fingerprint clearance card.
- All non direct care staff must pass a background check, drug test upon hire, and have 2-3 reference checks completed.
- All staff receive training at hire and at a minimum of annually on topics such as Abuse, Resident Rights, Elder Justice Act, Infection Control, HIPAA, etc.
- Direct care staff receive additional training as they are mandated to have up to 12 hours of in services per year as well.



## Staff Turnover

- ❖ Campus wide turnover is 55%
- Nursing turnover is 33%
- Assisted Living staff turnover is 41%
- Home Health staff turnover is 17%
- Beatitudes at Home staff turnover is 29%
- Housekeeping turnover is 50%
- Dining Services turnover is 35%

## Post Hacienda Exposure

### ❖ What Beatitudes Campus Did

- Reviewed access into areas with vulnerable adults including securing additional doors with keypad access and reviewed policy regarding who had that access.
- Reviewed our abuse policy and procedures for necessary changes.
- Conducted additional in-service training to staff on abuse, reporting of abuse, timelines for reporting as well as reporting if something just doesn't seem right.
- Educated our Board and staff about what we knew and talking points if residents, families, or consumers shared their concerns

## Post Hacienda Exposure

### ❖ What Does Beatitudes Campus Still Need to Do

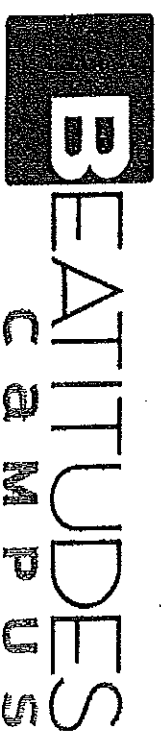
- Continuously review who has access to our vulnerable adults and our policy and procedures.
- Continue to foster a culture of safety in which staff are not fearful to report concerns, errors or near misses. This allows us to look at our processes for compliance and education.
- Continue to in service our staff, residents and families on what abuse is, who may be abusers, what to do if it is suspected, who to report it to and timelines of reporting.
- Continue to conduct root cause analysis for any allegation of abuse. For instance, we need to understand why a resident may have hit another resident. Were they in pain, were they agitated, were there warning signs ignored, etc? Knowing these things is key in implementing interventions to prevent it from happening.

## Monitoring for Abuse

- Staff are educated on and monitored for signs of caregiver burnout.
- Residents are monitored for behavior changes that may indicate abuse (change in appetite, fear, isolation, etc).
- Residents are monitored in licensed areas for skin changes including bruises.
- For our independent living residents, we conduct a weekly interdisciplinary team meeting made up of departments across the campus to discuss residents with whom we may have concerns. . Possible financial exploitation, self harm, concerns about treatment from family or friends, misappropriation of property, etc as discussed to formulate next steps.
- If abuse is suspected or reported in either skilled nursing or assisted living, the victim is removed from the situation, the alleged abuser is removed from the situation, the police are called, notifications are made to the AZ Dept of Health Services, Adult Protective Services and the Ombudsman through the Area Agency on Aging. Interviews are conducted with the resident if possible, with other residents to see if there are other allegations of abuse, with staff and any witnesses or family that may have been present. Additionally, a 5 day investigative follow up report is then sent to those agencies.
- If abuse is suspected or reported in independent living, we encourage the resident to contact the police and Adult Protective Services. We will make calls for them as necessary.

## **What Do We Need Help With**

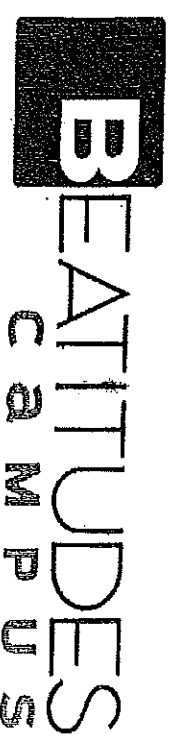
- Developing a registry of certified caregivers and a regulatory board to hold them accountable as is done for CNAs, Nurses, Administrators and Assisted Living Managers.
- Working with Arizona LeadingAge and the Arizona Health Care Associations to ensure any proposed legislation can be implemented successfully with their members.



Cheryl Knupp, LNHA, CPASRM  
SVP of Health Services and Human Resources

[cknupp@beatitudescampus.org](mailto:cknupp@beatitudescampus.org)

(602)995-2611



# House of Representatives Ad Hoc Committee Abuse & Neglect of Vulnerable Adults



**Arizona Commission**  
for the deaf and the hard of hearing

Sherrri Collins, Executive Director  
Arizona Commission for the Deaf and  
the Hard of Hearing

To ensure, in partnership with the public and private sector, accessibility for the deaf and hard of hearing to improve their quality of life!

## OUR PURPOSE



**Arizona Commission**  
for the deaf and the hard of hearing



# Commission Objectives

- Information & Referral
- Empowerment
- Community Development
- Outreach and Education



**Arizona Commission**  
for the deaf and the hard of hearing

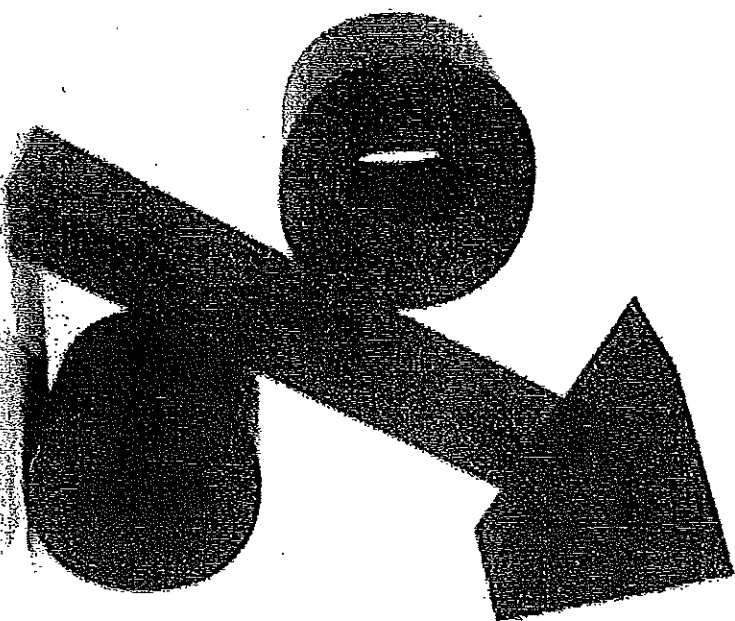
# Victimization

**Higher rates** of domestic violence, sexual violence, abuse, neglect, trafficking, and intimate partner violence THAN the hearing community.

- Domestic violence- 1.5X
- Sexual violence- 3X



**Arizona Commission**  
for the deaf and the hard of hearing



Research Gate. *Child Abuse & Neglect* 28  
(3): 241-51 April 2004.

# Tactics

- Isolated
- Exploited
- Marginalized

- *The most isolated, the*

*most invisible, the most  
lacking of services,*

*resources, and*

*acceptance: individuals*

*who are deafblind or*

*have a combined*

*hearing, vision loss.*

*Truly the most*

*vulnerable and*

*neglected in our society.*



Arizona Commission  
for the deaf and the hard of hearing

# **EXPERIENCES LAST 3 WEEKS ALONE**

# Experience 1

- Deafblind patient was released from hospital and provided in home health care
- Provider sent staff who could not sign
- Family requested staff who could sign or bring an interpreter with staff
- Never received requested services and family was dropped by the home health provider



**Arizona Commission**

for the deaf and the hard of hearing

## Experience 2

- Community organization who provides services to persons with a hearing loss
- Many individuals with co-occurring issues
- Call on agency to investigate suspected abuse and neglect
- No response or requested the Community Org (who called in the abuse) to do to the assessment



**Arizona Commission**  
for the deaf and the hard of hearing

# Experience 3

- Deafblind patient at hospital needing surgery
- Was denied on site interpreting CONTINUALLY, only VRI
- Family member was interpreting (NOT ALLOWED BY LAW)
- Family member contacted ACDHH
- ACDHH advocated for the patient and provided TA around Title III of the ADA.



**Arizona Commission**  
for the deaf and the hard of hearing

# Systems Issue

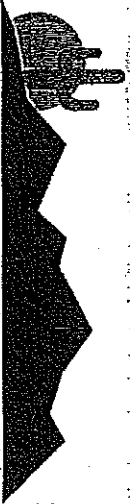
- Working in silos; Not working with agencies who can assist
- Not trained on Deafness, Deaf Culture, and Effective Communication needs for Deaf + community
- NO ONE wants to provide the effective communication needed



**Arizona Commission**  
for the deaf and the hard of hearing



# Effective Communication EQUALS THE ABILITY TO UNDERSTAND



**Arizona Commission**  
for the deaf and the hard of hearing

# Solutions

- Data Collection
- Training
- Specialized Services
- Redefine Abuse/Neglect (legislative fix)



## **Proposed Actions for Arizona House Ad Hoc Committee**

### **On Abuse and Neglect of Vulnerable/Elder Adults**

Respectfully submitted by Carol Brown

1. Form a Statewide Vulnerable Adult/ Elder Abuse Prevention Council that would help to structure, support, and promote Statewide/Regional/County efforts.
2. Start a statewide Community Pilot Program to provide Voluntary Mandated Reporter Training regarding Elder/Vulnerable Adult Abuse. Yuma is planning to begin this program in the near future.
3. The State to mandate that all providers provide a Client Rights form explaining Client's rights regarding protection from Elder/Vulnerable Adult Abuse/Exploitation
  - This form would include an explanation of what abuse is and who to contact in the event of abuse/suspected abuse.
4. The State to require licensing of ALL Caregivers to include "private" Caregivers. The State would also provide a reporting system on line and by telephone of anyone not able to produce proof of license.
  - This would include establishing penalties for anyone providing caregiving services without a license.
5. Strengthen/Develop laws regarding Mandated Reporting for Elder/Vulnerable Adult Abuse.

ADMINISTRATIVE OFFICE  
P.O. Box 21538  
305 South Second Avenue  
Phoenix, Arizona 85006-1538

HARMWORKER OFFICE  
305 South Second Avenue  
Phoenix, Arizona 85003-2402

MOHAVE OFFICE  
2701 E. Andy Devita, Suite 400  
Kingman, Arizona 86401

YAVAPAI OFFICE  
148 N. Summit Avenue  
Prescott, Arizona 86301



## LAW OFFICES

### MARICOPA COUNTY CENTRAL OFFICE HOUSING UNIT

305 South Second Avenue  
Phoenix, Arizona 85003-2402  
Telephone (602) 258-3434  
FAX (602) 254-3957  
TDD (602) 254-9852

SAN LUIS OFFICE  
845 East "B" St., Suite 1  
San Luis, Arizona 85349

YUMA OFFICE  
204 South 1st Avenue  
Yuma, Arizona 85364

VOLUNTEER LAWYERS PROGRAMS  
Maricopa County - Central Office  
Mohave/La Paz Counties - Kingman Office  
Yavapai County - Prescott Office  
Yuma County - Yuma Office

## MEMORANDUM

**TO:** Representative Jennifer Longdon  
Arizona House of Representatives  
Legislative District 24

**FROM:** Stan Silas, Lead/Senior Staff Attorney

**SUBJECT:** CLS Client - Pending Loss of Housing(REVISED)

**DATE:** October 15, 2019

Representative Longdon:

I wish to make you aware of a situation in which your committee may have an interest. I previously negotiated a settlement for an elderly client, with her landlord's attorney, allowing her to remain in her dwelling unit until October 31, 2019. On October 2, 2019, I learned that my client had allegedly "continued the flooding of her dwelling unit causing damage to the Plaintiff's property." Her previous alleged lease violations, dating back to September 3, 2019, also involved issues of flooding and the disturbance of the quiet enjoyment of other residents. I was led to believe, by way of email from the landlord's attorney, that the client had "flooded her dwelling unit three more times by sticking towels in the drains of the sinks and the bathtubs and turning on all of the faucets."

On October 2, 2019, I returned home from a trip to Ohio to attend a family member's funeral and became aware of the further flooding allegations. I immediately contacted the Crisis Response Network and gave them the information because I wanted them to help me protect the client's housing. I also contacted the Adult Protective Services agency for help as well because I had never known my client to engage in deliberate acts of "self-flooding." I knew she was a hoarder and my client falsely believed there was a resident with a man living in the unit above hers who was making excessive noise. This belief in turn caused the client to allegedly "bang on the walls and ceiling" in retaliation and was part of the basis for her current eviction.

Based upon what I stated in my verbal report that afternoon to the Adult Protective Service's ("APS") staff on October 2, 2019, the intake person said they would conduct an investigation and reach out to the client within 48 business hours.

Representative Jennifer Longdon  
Arizona House of Representatives  
Legislative District 24  
October 15, 2019  
Page 2

I contacted my client the morning of October 7, 2019 to see if she had been visited by APS, and learned that she had not. I then contacted APS again and told the intake staff of my concerns and need for immediate help. The staff told me that she would upgrade my call to a supervisor of the investigator to whom the matter was assigned. I later learned from the social worker from the Cigna Medical Group that APS had been to visit the client that afternoon. I have no idea what services APS has offered to the client but she still remains in her home to date.

Given the critical nature of APS' duties and the extreme circumstances of their clientele, why would an investigation take 48 business hours to perform? If it is truly 48 business hours, then why had no one contacted my client until I called and complained about the lack of service on October 7, 2019 at 11:26 AM? The APS investigator finally went out to the client's home later in the day on October 7, 2019. The original complaint had been submitted to APS in the afternoon on October 2, 2019.

Whatever thoughts or suggestions you may have would be greatly appreciated.



Appendix E:

November 12, 2019

**Minutes and Reference Materials**





## ARIZONA STATE SENATE

### INTERIM MEETING NOTICE OPEN TO THE PUBLIC

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

**Date:** Tuesday, November 12, 2019

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

**Place:** HHR 1

#### AGENDA

1. Call to Order
2. Review and Discussion of Potential Committee Recommendations
3. Public Testimony
4. Adjourn

#### Members:

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

Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Jami Snyder  
Molly McCarthy

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

11/07/19  
JY

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

HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE  
ADULTS

Report of Interim Meeting  
Tuesday, November 12, 2019  
House Hearing Room 1 -- 1:30 P.M.

MINUTES RECEIVED  
CHIEF CLERK'S OFFICE

11-14-19

Convened 01:31 P.M.

Recessed

Reconvened

Adjourned 03:21 P.M.

Members Present

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

Members Absent

Ms. Collins  
Ms. Kader

Agenda

Original Agenda – Attachment 1

Request to Speak

Report – Attachment 2

Committee Attendance

Report – Attachment 3

Review and Discussion

<u>Name</u>	<u>Organization</u>	<u>Attachments (Handouts)</u>
Jennifer Longdon	House of Representatives	4



Hayley Howard, Committee Secretary  
November 14, 2019

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

## ARIZONA STATE SENATE

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JY

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## Information Registered on the Request to Speak System

### *House Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults (11/12/2019)*

#### **3. Public Testimony**

##### **Support:**

Betty McEntire, AZ Commission For The Deaf And Hard Of Hearing; Sienna Hart, representing self; Karen Dana, representing self; Tonia Rokeby, representing self

##### **All Comments:**

Tonia Rokeby, Self: requested for co-worker that will do a manual request upon arrival.

PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD



HOUSE OF REPRESENTATIVES

Please PRINT Clearly

Committee on Ad Hoc Committee on Abuse & Neglect of Vulnerable Adults Bill Number \_\_\_\_\_  
Date 11/12/19 ☐ Support ☐ Oppose ☐ Neutral  
Name Laura Hartgroves Need to Speak? ☒ Yes ☐ No  
Representing \_\_\_\_\_ Are you a registered lobbyist? no  
Complete Address 9  
E-mail Address laura.hartgroves@steward.org Phone Number 928-310-4346  
Comments: \_\_\_\_\_

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

PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD



HOUSE OF REPRESENTATIVES

Please PRINT Clearly

Committee on House Ad Hoc Committee on Abuse & Neglect of Vulnerable Adults Bill Number \_\_\_\_\_  
Date 11/12 ☐ Support ☐ Oppose ☐ Neutral  
Name Christine Scianna Need to Speak? ☒ Yes ☐ No  
Representing Self Are you a registered lobbyist? \_\_\_\_\_  
Complete Address 6928 W. Costerton Surprise, AZ 85379  
E-mail Address cmwebster3153@gmail.com Phone Number \_\_\_\_\_  
Comments: Daughter has autism. She was abused in a group home.

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

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

**COMMITTEE ATTENDANCE RECORD**

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

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

DATE	11/12/19	/19	/19	/19	/19
CONVENED	1:30 pm	m	m	m	m
RECESSED					
RECONVENED					
ADJOURNED	3:21 pm				
MEMBERS					
Colby Bower- Designee for Dr. Cara Christ	✓				
Sherri Collins					
Sarah Kader					
Dana Kennedy	✓				
Cheryl Knupp	✓				
Erica McFadden	✓				
Elizabeth Ortiz	✓				
April Reed	✓				
Jose de Jesus V Rico	✓				
Jami Snyder	✓				
Molly McCarthy- Designee for DES	✓				
Dunn, Vice-Chairman	✓				
Longdon, Chairman	✓				

✓ Present      --- Absent      exc Excused

## Recommendations and Notes from Ad Hoc Committee Members

### **April Reed- Ability360**

Below are some of my thoughts and recommendations from the AD Hoc Committee meetings:

- Require trauma-informed training for providers, consumers, and families to ensure that all know how to recognize the signs of abuse and neglect.
  - After an investigation, develop policies and procedures that ensure appropriate trauma counseling referrals are made for the vulnerable adult.
- Adult Protective Services intake does not ask about disability or health conditions and thus does not inquire about accommodations needed to participate in the intake.
- Education to providers on the ADA requirements to provide accommodations to people with disabilities.
  - Address through training the attitudinal barriers that exist on providing the accommodations. Specifically, address intake procedures that have prevented the Deaf community from receiving sign language interpreters.
- Caregiver Workforce shortage and challenges in recruiting qualified caregivers.
  - Address funding to increase caregiver pay
- Group Homes
  - Creation of entity who will have the responsibility to monitor and visit group homes. Entity will also have the ability to receive, investigate, and intervene on resident complaints or incidents of abuse or neglect similar to the authority the AAA Ombudsmen program has in SNFs and Assisted Living Centers.
  - *Searchable records* available to the public who are looking for group homes monitoring records or ADHS site visits records. Right now families and advocates struggle to find group home records on monitoring reports and thus struggle to make an educated decision on the quality of a group home services.

### **Elizabeth Ortiz- APAAC**

Below please see my recommendation for a number of changes at several stages:

1. New staff for residential facilities
  - a. What is the proper ratio of staff to residents
  - b. What is the fair market rate of pay and how do we get the funding to pay it
  - c. What security measures are being taken to screen applicants
    - i. Fingerprint clearance – additional funding is required to continue to address the issues surrounding incomplete/missing criminal history information
  - d. What initial training is needed
    - i. Who does the training
    - ii. Who pays for it
2. Incoming residents
  - a. Assessment of needs & proper placement
  - b. Information to resident and their family regarding rights and how to file complaint/appeal
3. Residential facilities
  - a. Centralization of responsibility to monitor/audit facility
  - b. Expanded ongoing training for staff
  - c. Continued security assessment of staff (e.g. create ongoing reporting notice if staff gets criminal conviction after being hired)
  - d. Creation of documentation and security processes that will assist in oversight and also assist law enforcement if necessary



4. Group homes
  - a. Create system for oversight
5. Law Enforcement
  - a. Expansion of investigative/interviewing techniques when interacting with vulnerable adults
  - b. Develop communication protocols between law enforcement and APS
6. APS
  - a. Determine staffing levels necessary to meet needs
  - b. What is fair market rate of pay and how do get the funding
  - c. Expanding Initial and ongoing training for staff
  - d. Increasing the accessibility of APS (e.g. expanding hot line hours)

#### Dana Kennedy- AARP of AZ

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

Explore Mandatory Reporting Statute to:

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

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

- (a) Revoke the facility's license and/or contract with the state to provide services;
  - (b) Deny payment;
  - (c) Assess and collect a civil monetary penalty with interest from the facility owner and/or facility administrator;
  - (d) Appoint temporary management;
  - (e) Close the facility and/or transfer residents to another certified facility;
  - (f) Direct a plan of correction;
  - (g) Assign monitors to the facility; or
  - (h) Reduce the licensed bed capacity.
- Require facilities to train all staff and contractors with potential for resident access and test on mandatory reporting. Mandate continuing education on same.
  - Strengthen Criminal Background Checks to ensure coverage of all employees and contractors with direct access; Create a system to automatically alert facilities of new arrests (or even convictions) at the state and federal level.
  - Strengthen penalties for facilities that fail to follow statutory or regulatory guidelines. Ensure that remedies are swiftly and consistently imposed.
  - Pass Virtual Visitation Legislation requiring nursing homes to inform residents and their families of their right to utilize technology in their rooms to monitor their care and facilitate communication with family members. This was just recently passed in Louisiana.

- Facilitate family involvement in nursing home care planning. Strengthen Criminal Background Checks to ensure coverage of all employees and contractors with direct access; Create a system to automatically alert facilities of new arrests (or even convictions) at the state and federal level.
- Strengthen penalties for facilities that fail to follow statutory or regulatory guidelines. Ensure that remedies are swiftly and consistently imposed.
- Pass Virtual Visitation Legislation requiring nursing homes to inform residents and their families of their right to utilize technology in their rooms to monitor their care and facilitate communication with family members. This was just recently passed in Louisiana.
- Facilitate family involvement in nursing home care planning.
- Strengthen nursing home family council requirements. Ensure that groups of family members can organize a group and meet without nursing home staff, to discuss concerns and make recommendations to the nursing facility for action.
- Fully fund agencies responsible for investigating abuse and neglect and ensure that they have the capacity to respond appropriately and follow-up.
- Implement and fund strong and *independent* LTSS ombudsman programs that go beyond federal requirements and include an adequate number of ombudsmen.
- Provide adequate funding to permit Ombudsmen to visit all facilities including group homes.
- Ensure that complaints and reports of nursing home abuse are fully investigated by those with skills, training and capacity to do so, and that cases of nursing home sexual abuse are handled by those with expertise in that area.
- Look at model legislation from other states and introduce a package of bills to address the changes we can make.
- Develop a work group to explore best practice models to recruit, train and mentor paid caregivers.

#### Cheryl Knupp-Beatitudes

I would like to see about an expanded role for Area Agency on Aging. There are areas in need that do not fit the Older American's Act such as those that need assistance in group homes or even independent living.

Additionally, I would propose there be a registry created for certified caregivers and a regulatory board that holds them accountable like there is for Nurses, Certified Nursing Assistants, Nursing Home Administrators as well as Assisted Living Managers.

#### JJ Rico- ACDL

Abuse and Neglect Ad Hoc Committee - ACDL Priorities .

1) Fund Arizona Revised Statute 36-592 for DD Group Home Monitoring

36-592(B)- The department shall maintain a system of independent oversight of licensing. The department may contract with third parties to perform services in connection with oversight and licensing. The department may not contract with the same third party for both oversight and licensure under this subsection.

2) Create a registry of care providers who have had an allegation of abuse of a person with a disability substantiated against them.

Abuse is defined as an act that results in serious emotional or physical injury.

3) Require that Arizona representatives attend a training similar to Project FIND (Forensic Interviewing Individuals with Disabilities) - Advanced Forensic Interview Certificate Four Day Training

Following attendance, implement similar training and certificate program in Arizona.

## Erica McFadden- AZ Developmental Disabilities Planning Council

1. Because the quality of APS' investigations increases the likelihood of APS cases being substantiated, require specific training, by statute, for APS investigators (like they do for DCS investigators and as established in Colorado for its APS). Include stronger minimum requirements for APS staffing in statute. For example, require at least a high school degree for call center staff.
2. Require annual checks of the central and APS registries for any organization that serves vulnerable adults and children, including senior living residences, such as apartment or private group homes. Currently, it's only one time, which does not address any new substantiations that may occur.
3. Require annual duty to report training, that includes recognizing and reporting abuse, for everyone obligated to report. Currently, this training is not required legislatively. *Include senior living management, or those who interact daily with senior residents*, in this requirement. People don't necessarily know to whom and how to report.
4. Elevate penalties for failing to report so it's equitable and ensure there is a method for enforcing these penalties. Move failing to report sexual assault of a vulnerable adult from a class 1 misdemeanor to class 6 felony, equivalent with similar statute for reporting child abuse.
5. Create a community advisory committee for APS in statute that meets at least quarterly so that the community could work with APS to address issues and outcomes, increase transparency and help build trust. (Note: This was similarly set up legislatively for DCS. That group, however, was dissolved and brought in-house. There may need to be something in statutory language to prevent that from happening if this option is included in legislative recommendations.)
6. Not many understand what APS actually does when they investigate a case or the outcomes of those investigations, as few outcomes are reported. Legislatively require APS to collect and report data that highlights case information including disability type, APS actions taken and referrals made, number of repeat cases/victims, number of repeat perpetrators identified in cases with different victims, number of perpetrators who are vulnerable adults in verified cases of maltreatment, reasons why cases are closed, and why cases were not investigated and classified as I&R. This data is crucial to identify trends related to vulnerable adult abuse in Arizona. Require a report to the legislature each year to assess these outcomes and detect trends.
7. Strengthen monitoring, enforcement, and penalties for non-compliance around health and safety of children or vulnerable adults for any organization that serves children or vulnerable adults and contracts with ADHS, AHCCCS, or DES/DDD. (All of the current strategies utilized need to be re-reviewed.)
8. Currently, there are posting requirements by Executive Order on how to report abuse, neglect, or exploitation for organizations that serve vulnerable adults and contract with ADHS, AHCCCS, or DES. Require it in legislation. Include anti-retaliation language in the posting language so staff and the victims themselves, are not afraid to report due to retaliation.
9. Require DDD group homes to be monitored at least annually by an independent third party in statute.
10. Begin a cross-departmental task force or a legislative ad-hoc or study committee that, with self-advocates, identifies methods or models to address serious staffing challenges and its impact to quality care. Require a deadline for a report with recommendations to be made to the legislature.
11. Require that school-aged children and vulnerable adults are notified at least annually on what abuse is and how to report it by agencies/organizations/schools that are serving them, in a manner that is appropriate to the individual.
12. Require that for a vulnerable adult where: any maltreatment reports are made by that vulnerable adult that involve a perpetrator; or there is a verified or a substantiated report of maltreatment; that the vulnerable adult always is given the option AND has access to receiving trauma-informed counseling in a manner that is accessible to the vulnerable adult.

### **Kyle Sawyer Legislative Liaison - AHCCS**

- Training of providers - The State must ensure that caregivers have full access to consistent, comprehensive training related to detecting and reporting abuse and neglect. This includes caregivers in ICF, group home and in-home settings.
- Trauma informed care - The state should bolster its efforts to advance a trauma-informed framework focused on understanding, recognizing, and responding to the effects of all types of trauma.
- Accommodations - The State must ensure the provision of necessary accommodations, allowing individuals with varying needs to effectively report incidents and obtain needed services following an incident.

### **Colby Bower- AZDHS**

1. I'm still unclear of the population we are talking about. I know its "vulnerable adults," and that has a specific definition in statute. But this committee has discussed much larger populations, including those with disabilities and children. I understand this is meant to see the "system" as a whole, but it makes it difficult for me to understand or identify what problem we are trying to address. For example, we have discussed the lack of interpreters, domestic violence, the challenges of the disability community in various settings, the child safety system, DD group homes, and ICF-IID facilities. While there can be vulnerable adults in these settings, it makes it hard to come up with a plan and a set of recommendations. I'll be interested to see where this goes and look forward to the discussion.
2. However, I am grateful for the broad discussion because, like many others, it does demonstrate the difficulty in the average person's ability to navigate it given their own situation. As a citizen, the various moving pieces must be nearly impossible to grasp.

### **Sherri Collins- AZ Commission for the Deaf and the Hard of Hearing**

1. After hearing all the presentations - how to navigate the system is still confusing.
2. What are the standards/procedures to ensure deaf, hard of hearing and deafblind are receiving appropriate assessment and communication accommodations? Still get the "round around" and no one can really answer.
3. Where/what is the check and balances on the oversight of service delivery.

### **Sarah Kader- AZ Statewide Independent Living Council**

- Increased pay for care-workers
- Training on signs of abuse/neglect for compliance officers that go into facilities
- Add checklist regarding abuse/neglect to licensure requirements
- Training for peace officers on how to spot abuse/neglect and how to respond to calls about abuse/neglect
- Education and resources in the community regarding abuse/neglect (for families, individuals who have disabilities, teachers, social workers, etc)
- APS should be 24/7
- Increased reporting requirements
- Make unlawful policies that disincentivize reporting
- Expand ombudsman office to include monitoring of DDD group homes

**Jami Snyder- Director – AHCCS**

- Training of providers - The State must ensure that caregivers have full access to consistent, comprehensive training related to detecting and reporting abuse and neglect. This includes caregivers in ICF, group home and in-home settings.

-Trauma informed care - The state should bolster its efforts to advance a trauma-informed framework focused on understanding, recognizing, and responding to the effects of all types of trauma.

Accommodations - The State must ensure the provision of necessary accommodations, allowing individuals with varying needs to effectively report incidents and obtain needed

**Kathy Ber- Legislative Director- AZ DES**

**APS Powers and Duties/Scope**

Based on Committee discussion, there seems to be an interest in increasing the scope of what APS has authority to investigate. The Department recommends that the Committee review the APS powers and duties statutes (A.R.S. § 46-452).

The Committee should also review the definitions that provide the scope for APS investigative authority (A.R.S. § 46-451):

**Vulnerable Adult – A.R.S. § 46-451(A)(10)**

- "Vulnerable adult" means an individual who is eighteen years of age or older and who is unable to protect himself from abuse, neglect or exploitation by others because of a physical or mental impairment. Vulnerable adult includes an incapacitated person as defined in section 14-5101.

**Incapacitated Person – A.R.S. § 14-5101(3)**

- "Incapacitated person" means any person who is impaired by reason of mental illness, mental deficiency, mental disorder, physical illness or disability, chronic use of drugs, chronic intoxication or other cause, except minority, to the extent that he lacks sufficient understanding or capacity to make or communicate responsible decisions concerning his person. In cases of limited guardianship only, a person is not deemed an incapacitated person for purposes of voting if the person files a petition and has a hearing and the judge determines by clear and convincing evidence that the person retains sufficient understanding to exercise the right to vote pursuant to section 14-5304.02.

**Abuse – A.R.S. § 46-451(A)(1)**

- "Abuse" means:
  - (a) Intentional infliction of physical harm.
  - (b) Injury caused by negligent acts or omissions.
  - (c) Unreasonable confinement.
  - (d) Sexual abuse or sexual assault.

**Exploitation – A.R.S. § 46-451(A)(5)**

- "Exploitation" means the illegal or improper use of a vulnerable adult or the vulnerable adult's resources for another's profit or advantage.

#### Financial Exploitation – A.R.S. § 46-471(3)

- "Financial exploitation" means either of the following:
  - (a) The wrongful or unauthorized taking, withholding, appropriating or use of money, assets or property of an eligible adult.
  - (b) Any act or omission taken by a person, including through the use of a power of attorney, guardianship or conservatorship of an eligible adult, to either:
    - (i) Obtain control through deception, intimidation or undue influence over the eligible adult's money, assets or property to deprive the eligible adult of the ownership, use, benefit or possession of the eligible adult's money, assets or property.
    - (ii) Convert money, assets or property of the eligible adult to deprive the eligible adult of the ownership, use, benefit or possession of the eligible adult's money, assets or property.

#### Neglect – A.R.S. § 46-451(A)(7)

- "Neglect" means the deprivation of food, water, medication, medical services, shelter, supervision, cooling, heating or other services necessary to maintain a vulnerable adult's minimum physical or mental health.

#### Self-Neglect – Not defined in state law

- "An adult's inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including— (A) obtaining essential food, clothing, shelter, and medical care; (B) obtaining goods and services necessary to maintain physical health, mental health, or general safety; or (C) managing one's own financial affairs."

*Elder Justice Act (Patient Protection and Affordable Care Act - Public Law 111-148)*

#### Emotional Abuse - A.R.S § 13-3623(F) (3)

- "Emotional abuse" means a pattern of ridiculing or demeaning a vulnerable adult, making derogatory remarks to a vulnerable adult, verbally harassing a vulnerable adult or threatening to inflict physical or emotional harm on a vulnerable adult.
- Based on the present definition of abuse, **APS does not have authority to investigate and substantiate allegations of emotional abuse** and the reporting source is advised that APS is unable to investigate allegations of emotional abuse in Title 46.

#### Caregiver – Not defined in state law

- ➤ The term "Caregiver" is not defined in Arizona state statute, but 39 other states have a definition of "Caregiver" or "Caretaker". Ohio defines a "Caretaker" as: "the person assuming the responsibility for the care of an adult on a voluntary basis, by

contract, through receipt of payment for care, as a result of a family relationship, or by order of a court of competent jurisdiction.

- Develop a public awareness campaign around the role of APS with information related to what their official powers and duties are, along with common public misconceptions. Similar to the Governor's Executive Order Task Force on the Abuse and Neglect of Vulnerable Adults recommendation, community stakeholders and state agencies should collaborate to disseminate this information. The flow chart developed by the Executive Order Task Force that details reporting and investigation processes for all types of abuse, neglect, and exploitation concerns, incidents, and allegations can be used along with the materials already being used by the Department on social media.

### **Vulnerability Statements**

- APS investigators have difficulty obtaining statements of vulnerability during an APS investigation. These statements are used as part of the substantiation process and in making referrals to public fiduciaries and the courts to determine vulnerable adult capacity in guardianship/conservatorship proceedings.
- APS investigates cases involving vulnerable adult abuse, neglect or exploitation. If APS cannot establish the adult is vulnerable, they are not able to substantiate. Vulnerability needs to be determined by a health care professional who can evaluate the adult's capacity for decision making, diagnosis, etc. Many vulnerable adults do not seek regular medical care or lack access to medical care, so APS is unable to proceed with finding an adult vulnerable and proposing substantiation of abuse, neglect or exploitation.
- The Department recommends that the Committee explore opportunities for an on-call health care professional, such as through a mobile unit, who can go to the vulnerable adult with APS investigators to conduct those assessments. While the adult will still have the right to refuse the medical evaluation it is likely that the adult will be more likely to participate if the health care professional is with the APS investigator and travels to the individual.

### **Forensic Interviewing**

- The access point to forensic interviewing for APS investigators is typically through local law enforcement. When law enforcement determines that they are no longer going to move forward with a criminal investigation, APS investigators lose that access to the forensic interview process.
- Another challenge with an adult population is getting them to travel to another location. Unlike children, adults have the right and ability to refuse to participate in the investigative process with APS.
- The Department recommends that the Committee explore opportunities for APS to access forensic interviewers, possibly as part of a mobile unit that goes out with investigators. Having access to a mobile forensic interview process would strengthen the investigative process, enhance the potential of substantiation and preserve evidence for any potential criminal investigation.

**Representative Jennifer Longdon**

Who is the watchdog? Who is responsible for vigorously monitoring facilities and are they appropriately staffed/resourced?

How do we address the impermeability of "the system?" How do agencies communicate with each other and how do they hand off folks who contact them. Arizonans need a seamless system.







Appendix F:

December 17, 2019

**Minutes and Reference Materials**



## ARIZONA HOUSE OF REPRESENTATIVES

### INTERIM MEETING NOTICE OPEN TO THE PUBLIC

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

**Date:** Tuesday, December 17, 2019

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

**Place:** HHR 1

#### AGENDA

1. Call to Order
2. Review and Adopt Committee Recommendations
3. Adjourn

#### Members:

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

Erica McFadden  
Elizabeth Ortiz  
April Reed  
Jose de Jesus V Rico  
Jami Snyder  
Molly McCarthy

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

12/11/19  
JY

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



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

HOUSE AD HOC COMMITTEE ON ABUSE AND NEGLECT OF VULNERABLE  
ADULTS

Report of Interim Meeting  
Tuesday, December 17, 2019  
House Hearing Room 1 -- 1:30 P.M.

MINUTES RECEIVED  
CHIEF CLERK'S OFFICE

12-17-19

Convened 1:33 P.M.

Recessed

Reconvened

Adjourned 2:15 P.M.

Members Present

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

Members Absent

Ms. Kader  
Ms. Kennedy  
Ms. McFadden

Agenda

Original Agenda – Attachment 1

Committee Attendance

Report – Attachment 2

Committee Action

Action

Adopt Final Recommendations

Vote

7-3-3

Attachments

3 & 4

  
Hayley Howard, Committee Secretary  
December 17, 2019

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





## ARIZONA HOUSE OF REPRESENTATIVES

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

**COMMITTEE ATTENDANCE RECORD**

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

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

DATE	12/17/19	/19	/19	/19	/19
CONVENED	1:30pm	m	m	m	m
RECESSED					
RECONVENED					
ADJOURNED	2:15pm				
MEMBERS					
Colby Bower- Designee for Dr. Cara Christ	✓				
Sherri Collins	✓				
Sarah Kader	-				
Dana Kennedy	✓				
Cheryl Knupp	✓				
Erica McFadden	-				
Elizabeth Ortiz	-				
April Reed	✓				
Jose de Jesus V Rico	✓				
Jami Snyder	✓				
Molly McCarthy- Designee for DES	✓				
Dunn, Vice-Chairman	✓				
Longdon, Chairman	✓				

√ Present      --- Absent      exc Excused



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

**INTERIM COMMITTEE ROLL CALL VOTE**


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


DATE: December 17, 2019 MOTION: Adopt Committee Recommendations

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

	PASS	AYE	NAY	PRESENT	ABSENT
Colby Bower- Designee for Dr. Cara Christ				✓	
Sherri Collins		✓			✓
Sarah Kader					✓
Dana Kennedy		✓			
Cheryl Knupp		✓			
Erica McFadden					✓
Elizabeth Ortiz					✓
April Reed		✓			
Jose de Jesus V Rico		✓			
Jami Snyder				✓	
Molly McCarthy- Designee for DES				✓	
Timothy M. Dunn, Vice Chairman		✓			
Jennifer Longdon, Chairman		✓			

APPROVED:

  
COMMITTEE CHAIRMAN

  
COMMITTEE VICE-CHAIRMAN

  
COMMITTEE SECRETARY

Attachment 3



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

## **Committee Recommendations**

**December 17, 2019**

**Version 2**

**Recommendation #1:** That legislation be drafted to create or identify and fund an agency to oversee vulnerable adults in Arizona, including related agencies, boards and commissions.

**Recommendation #2:** The Legislature appropriate sufficient funds to the Arizona Department of Health Services and Adult Protective Services to timely investigate complaints in order to eliminate the back logs and create a metric for the tracking of complaints to ensure timely resolution.

**Recommendation #3:** Support the recommendations outlined in the Arizona Auditor General's Report 19-112 contained on pages 14-15 and encourage implementation of said recommendations.

**Recommendation #4:** The Legislature fund an independent audit of APS.

**Recommendation #5:** The Speaker continue the House Ad Hoc Committee on Abuse and Neglect of Vulnerable Adults upon completion of the independent audit to review the findings and make recommendations.

**Recommendation #6:** Support the recommendations of the Governor's Abuse and Neglect Prevention Task Force related to Disclosure and Investigation Training, Signage and Trauma-Informed Approach.

**Recommendation #7:** Support and funding of training and education for facilities, caregivers, residents and family members on the signs of, and how to report abuse and neglect, who to report to, and develop posting requirements to be reviewed annually by the above-mentioned entities/individuals.

**Recommendation #8:** APS identify and make appropriate accommodations at intake, and throughout the investigation process, for vulnerable adults that may impact their ability to communicate and cooperate with the investigation.

**Recommendation #9:** Acknowledge that caregivers are vital skilled professionals and that stability and consistency are essential for the wellbeing of our most vulnerable populations and that appropriate compensation, training and support must be addressed.

**Recommendation #10:** Create a statutory definition for emotional abuse in Title 46.

**Recommendation #11:** Support the Arizona Department of Health Services and Department of Economic Security in the development and implementation of a stakeholder-driven action plan to protect Arizona's vulnerable adults.

