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Attachment A:

Key findings and recommendations from wave 1 telephone interviews with state-level Adult Protective Services (APS) representatives

To:	Erica Smith, BJS
From:	Kamala Mallik-Kane, Janine Zweig and Miriam Becker-Cohen[1]
RE:	**Key Findings and Recommendations from Wave 1 Telephone Interviews**
	with State-level Adult Protective Services (APS) Representatives
Date:	October 22, 2014

Summary

The Urban Institute, as grantee to the Bureau of Justice Statistics (BJS), conducted 51 semi-structured phone interviews with state-level APS representatives in every state and the District of Columbia to determine the location(s), level of centralization, and coverage of APS administrative data in each state. These "wave 1" interviews, conducted between December 2013 and February 2014, served to inform the sampling frame and design of a subsequent "wave 2" online survey of state and local APS agencies. The goal of the wave 2 survey is to gather caseload statistics and, in so doing, assess the feasibility of developing nationwide estimates of vulnerable adult abuse as reported to APS.

We found that most states had highly centralized APS data collection systems, and used a single data system across their local jurisdictions to record information throughout the lifecycle of an APS case, from the initial report of suspected abuse through to case findings. Even when states reported that APS programs were administered at the county or another level, state APS agencies generally maintained individual-level case records at the state agency and reported having oversight of local APS programs.

Given the high level of data centralization, we concluded that the study's wave 2 survey (to gather caseload statistics and assess APS reporting capabilities) could be conducted mainly with state-level APS respondents. However, local-level respondents are needed in five states where APS data collection systems are more decentralized. In an email to BJS (on March 5, 2014) we recommended that the wave 2 survey respondent universe should include all 50 state APS representatives, the District of Columbia APS, and 89 local-level APS agencies.[2]

Furthermore, we recommend collecting stratified caseload statistics rather than aggregate totals because of state-level variation in the scope of APS agency responsibilities. Our interviews documented how state APS operations differ with respect to the age of clients served, locations that APS has investigative jurisdiction over, and the types of maltreatment subject to investigation. The lack of a uniform case definition creates an "apples to oranges" problem when comparing or combining caseload totals across states. For example, all APS agencies respond to abuse in community-based settings, but, in the majority of states, APS lacks the authority to investigate licensed facilities, such as nursing homes. To compensate for this, we recommend collecting stratified caseload statistics so that data can be aggregated into a

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[1] Darakshan Raja also made significant contributions to this work before leaving the Urban Institute in August.

[2] We recommend local level data collection in five states, as follows: California (all 58 counties), Delaware (all 3 counties), Idaho (all 6 regions), New Jersey (all 21 counties), and New York (1 city, New York City, as it maintains data independently of the rest of the state).

common frame of reference. Collecting APS statistics by age group, abuse location, and abuse type will allow BJS to compute more refined national statistics, using data from applicable states to construct specific measures. We anticipate that data on certain subsets of vulnerable adult abuse will be more widely available in some states than others, such as physical abuse of community residents aged 60 and above.

Detailed Wave 1 Findings and Recommendations

Key findings and related recommendations are described here. The attached appendix summarizes item-by-item responses.

State APS agencies typically oversee local APS services

Most states (42) administer Adult Protective Services at the state level. Only seven reported that APS is administered at the county level, one reported a hybrid of state and county administration, and one reported regional administration. Even when APS programs are administered locally, the state-level APS agency has oversight responsibilities. State-level APS agencies set policy and provided training in all county-administered states and, in every state except California, had oversight over data and monitored local APS programs.   Collectively, state APS agencies oversaw 1,884 local APS offices.

Individual-level electronic data are generally maintained by state-level APS agencies

The project's June 2013 meeting with federal government stakeholders identified a set of key indicators about vulnerable adult abuse, which included statistics collected at multiple time points in the lifecycle of an APS case. Collectively, these measure potential and confirmed victimizations, and can be used to calculate the "transition probabilities" of moving from one stage to the next in the investigative process. We conceptualized three cohorts of data that APS agencies may maintain, as described below, and found that electronic data representing these cohorts are typically maintained by the state-level APS agency.

- **Data on initial reports of suspected abuse** represent the most expansive way of collecting data on potential victimizations. These data represent all potential victimizations reported to APS agencies from a wide range of sources, including vulnerable adults themselves, their family members, friends or acquaintances, and professionals such as healthcare workers, social service providers, and law enforcement officers.   In nearly all states and the District of Columbia (50), data on the initial report of suspected abuse are consolidated in an electronic database and maintained at the state level, though the reports can and do originate from a variety of sources within any given state. The remaining state, California, reported that individual-level data are available only from county APS agencies.

- **Data on investigations opened** represent the subset of reports deemed appropriate for APS agencies to pursue as abuse investigations. State screening practices vary; reports may be evaluated against APS eligibility and jurisdictional criteria before APS opens an investigation. Reports that are not accepted for APS investigation may be referred to non-APS social services if abuse is not suspected, while some suspected abuse is forwarded to other agencies for investigation (e.g., regulatory or licensing agencies that have jurisdiction over certain caregiver or facility types). Nearly all states (46) reported entering individual-level data on newly opened investigations into a state electronic database. In four states—Delaware, Idaho, New Jersey, and North Carolina—local APS agencies forward data to the state, though the extent to which the state receives and maintains individual-level electronic records varies. Only one state, California, reported that individual-level data are collected and maintained exclusively by the counties.

- **Data on investigation outcomes** indicate whether the APS agency substantiated (i.e., confirmed) allegations of abuse. Nearly all states (47) maintain these data at the state APS agency as individual-level electronic records. One state, New York, reported it does not include case substantiation as an outcome measure, but instead focuses on service provision. Case findings are maintained at the county level in the remaining four states (California, Delaware, Idaho, and New Jersey) as a combination of electronic and paper records.

Data about these three stages in the lifespan of an APS case are typically collected in a single integrated data system that follows a case from the initial report through to the investigation outcomes (in 44 states). The remainder of states reported collecting data on discrete stages of the APS investigative process (e.g., initial reports) which may not be easily linked to downstream actions (e.g., opening an investigation or substantiating the allegation).

Recommendations

In most states, we expect that APS caseload statistics can be obtained from the state-level APS agency. State-level APS agencies in most states maintain data on all three cohorts of interest: reports of suspected abuse, APS investigations opened, and APS investigation outcomes. At the same time, we identified five states in which some of these data are maintained locally, necessitating some local-level surveys to supplement the state-level response.

Some contextual knowledge on APS screening procedures should be collected to interpret and properly analyze statistics on the number of investigations opened. Some states' APS agencies are required to investigate all reports of suspected abuse, while others have established criteria for referring reports to non-APS social services or to other investigative agencies.

APS caseload statistics across states do not use a uniform case definition

A potential limitation of using APS caseload statistics to estimate the prevalence of reported abuse nationwide is the lack of uniformity in case definitions across states. APS agencies have different operational scopes, stemming from differences in states' vulnerable adult abuse laws and investigative practices.   Notably, APS administrative data differ with respect to the location of the alleged abuse, the age of clients served, and the types of abuse investigated.

- **Community vs. facility-based abuse.** Sixteen states (31%) reported that APS does not routinely investigate facility-based abuse. In these states, jurisdictional responsibility for facility-based abuse investigation often rests with the licensing agency responsible for regulating facilities. Even when states reported that APS routinely investigates abuse in facilities, respondents noted many exceptions and caveats. Establishing jurisdiction can be complex within a given state and definitions differ across states. For example, resident-on-resident abuse in a licensed facility may fall under APS jurisdiction whereas abuse by facility employees may fall under the jurisdiction of the regulatory agency.

- **Younger vs. older vulnerable adults.** In most states, APS' investigative authority is based on vulnerability rather than age alone.   Most states (45) investigate elder abuse within a broader context of vulnerable adult abuse, which includes disabled adults aged 18-59. Just six states (12%) reported serving only clients aged 60 and above.

- **Self-neglect vs. other abuse types.** BJS may wish to exclude self-neglect from a national estimate of vulnerable adult abuse since it does not involve victimization by another. Most states' APS programs (47) do investigate self-neglect and, for many, self-neglect is a substantial portion of the total caseload. Only four states reported that their APS program does not investigate self-neglect cases.

Recommendations

The wave 2 survey should collect caseload statistics stratified by abuse location (community vs. facility), age group (18-59 vs. 60+), and abuse type (physical, sexual, emotional/psychological, neglect, financial exploitation, and self-neglect). The definition of an APS case differs across states by these dimensions, which set the operational scope of the APS program. BJS may then create and evaluate a variety of aggregated national statistics, combining the stratified counts from applicable states only to establish a common frame of reference and mitigate the "apples to oranges" problem inherent in summing across total caseload counts.

Given the exploratory nature of this work, we do not recommend excluding any of these categories a priori because (1) the data collection may lose buy-in from APS respondents if their full caseload and scope of responsibilities is not reflected in the data collection tool, and (2) some respondents may lack the capacity to report stratified statistics, and it would be preferable to collect total caseload statistics rather than nothing from them.

We expect that APS data on community-based victimizations will be more reliable, given APS' more limited jurisdiction over licensed facilities. Future data collection efforts may wish to incorporate data collected from regulatory agencies. We nevertheless recommend that the current data collection should gather data on facility investigations and contextual information on APS and other agencies' investigative scopes. Data from those states in which APS plays a major role in investigating facilities will provide valuable, foundational knowledge on the share of victimizations that occur in such settings.

We expect that the distinction between victims aged 18-59 and those aged 60 and above will be meaningful to BJS and other vulnerable adult abuse stakeholders. These categories are well established in the adult protection field and are codified in many states' vulnerable adult laws. To aid in the interpretation of statistics on older vulnerable adults (i.e., elder abuse), we recommend collecting information on the specific vulnerability criteria used for adults aged 60 and above.

Counts of self-neglect cases should be collected in the wave 2 survey to secure buy-in and participation from APS agencies, as conveyed to the project team during its workshop with attendees at the National Adult Protective Services Association meeting in October 2013. Collecting statistics stratified by abuse type will (1) allow BJS and other stakeholders to assess the role of self-neglect in APS caseloads, (2) permit BJS to exclude self-neglect from national statistics on victimizations (so-called "second-party abuse"), and (3) provide important foundational knowledge on the distribution of all abuse types within the APS caseload.

APS representatives perceived a low level of interaction with the criminal justice system, but more refined measures are needed

BJS requested that the Urban Institute incorporate a few supplementary questions to shed light on the potential for overlap between APS and criminal justice system statistics on victimization. As these telephone interviews were not designed to collect statistical data, we asked respondents to comment on referrals to and from the criminal justice system, specifically law enforcement officers (e.g., police) and prosecutors. Criminal justice practitioners, especially police, were typically mandated to report abuse. When asked how often the police or prosecutors participated in or followed up on an APS investigation—beyond accompanying the APS worker for safety reasons—APS representatives typically felt this occurred less than half the time. However, we realized that the wording of these questions was too general. Some respondents reported that criminal justice involvement is rare because the bulk of their cases are self-neglect. Others commented that criminal justice practitioners became involved when cases involved severe physical or sexual abuse, financial exploitation, or Medicaid fraud.

Recommendations

The wave 2 survey can and should collect more detailed information on the roles of criminal justice system actors with regard to (1) referrals to the APS agency; (2) types of collaboration with the APS agency (e.g., accompaniment on APS visits, participation in multidisciplinary teams); and (3) referrals from APS to the criminal justice system. Additionally, it would be valuable to gather APS perspectives on the barriers to successful collaboration with the criminal justice system.

The wave 2 survey should collect statistics on initial reports of abuse and investigations opened by referral source. Our project's review of states' reporting protocols suggests that states have the capacity to collect referral sources. Analysis of the survey data will show the extent to which such information is actually recorded and quantified.

Questions about criminal justice system involvement in APS cases should be restricted to those cases in which one individual is victimized by another, ideally by specific abuse type. Without such a specific frame of reference, APS respondents may underestimate the extent of collaboration with the criminal justice system. The data also suggest that the justice system response may differ by abuse type.

The wave 2 survey can also assess states' capacity to link data across APS and law enforcement data systems by asking about the inclusion of various personal identifiers in APS administrative databases (e.g., dates of birth, social security numbers, and police report numbers).

Attachment B:

What is elder abuse? A taxonomy for collecting criminal justice research and statistical data

What is Elder Abuse?

A Taxonomy for Collecting Criminal Justice Research and Statistical Data

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March 2016

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What is Elder Abuse?

A Taxonomy for Collecting Criminal Justice Research and Statistical Data

Overview

The Urban Institute has been funded by the Bureau of Justice Statistics (BJS) to assess how administrative data from Adult Protective Services (APS) agencies may be used to develop uniform, national statistics about elder abuse, and how APS data may augment currently available crime and victimization statistics.

This brief presents a working definition of elder abuse so that research and statistical data may be collected in a uniform manner across states and localities with different legal and programmatic definitions of elder abuse. Consistent definitions and counting rules are needed to permit comparisons across jurisdictions and over time.

At present, there is no uniform, national-level definition of elder abuse because the social response to elder abuse has mostly occurred at the state and local levels. However, broadly speaking, the term "elder abuse" and its many variants[1] are understood to encompass a range of violations against vulnerable older adults perpetrated by individuals who the victim may be expected to trust. For example, the National Research Council has described elder abuse as "(a) intentional actions that cause harm or create a serious risk of harm to a vulnerable elder by a caregiver or other person who stands in a trust relationship to the elder, or (b) failure by a caregiver to satisfy the elder's basic needs or to protect the elder from harm" (Bonnie and Wallace 2003). Correspondingly, not all victimizations of older adults constitute elder abuse. Similar acts without particular victim attributes or victim-perpetrator relationship dynamics might more simply be characterized as assault, rape, theft, or fraud.

The taxonomy we present here defines elder abuse along three dimensions—(1) the acts that constitute elder abuse, (2) the characteristics of the victim, (3) the relationship between the victim and perpetrator—and incorporates a fourth dimension to distinguish between criminal and non-criminal acts based on their severity. This taxonomy builds on work conducted by the Centers for Disease Control and Prevention (2014) to define the acts that constitute elder abuse and is supplemented by extant reviews of states' APS laws, policies and practices, as well as information gathered directly from state APS representatives by the

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[1] For simplicity, this report uses the term "elder abuse," but many variants are used to describe this phenomenon including elder mistreatment; elder maltreatment; elder abuse, neglect, and exploitation; and elder abuse, mistreatment, and neglect. Others use the term vulnerable adult abuse to encompass the victimization of both older adults and younger disabled adults.

Urban Institute. However, APS agencies may have difficulty reporting statistical data according to this taxonomy because (1) their operational scopes often extend beyond elder abuse and (2) they may lack the data system capacity to distinguish between elder abuse and other types of cases. In the coming months, the Urban Institute will be assessing APS agencies' capacity to collect statistical data on elder abuse. Consequently, this brief also presents recommendations on aspects of APS operations and data capacity to assess in support of potential future statistical and research data collection from APS agencies.

Why Measure Elder Abuse?

It is unclear how much elder abuse occurs within the United States. While elder abuse is a growing worry as the population of the United States ages, a lack of basic information has impeded policymakers' ability to document the scope of the problem, monitor changes over time, evaluate the effectiveness of system responses, design prevention strategies, and plan effectively for future service needs. A 2011 General Accounting Office (GAO) report identified only four studies in the past two decades that attempted to estimate the prevalence of elder abuse nationwide. The most recent and frequently cited epidemiologic study of elder abuse estimates that 11 percent of persons over age 60 residing in the community experienced at least one form of mistreatment, including emotional mistreatment (4.6%); physical mistreatment (1.6%); sexual mistreatment (0.6%); and current potential neglect (5.1%) (Acierno et al. 2009). Actual prevalence may be higher because the methodology relied on self-reports and did not include residents of long-term care institutions, thus excluding some of the most vulnerable elders. Nevertheless, applying this 11 percent prevalence estimate to the 2010 Census' count of 40.3 million adults aged 65 and older (Howden and Meyer 2011) suggests that more than 4 million older Americans experience this form of abuse each year. The number of victims is expected to increase as the population of the U.S. ages, in particular the "baby boom" generation born between 1946 and 1964.

Several federal agencies and national stakeholders have long highlighted the need for uniform national data to establish the prevalence of elder abuse, both known (to APS and criminal justice authorities) and unreported. Such data are also needed to measure system performance; make comparisons across jurisdictions; and monitor trends over time (GAO 2011, ASPE 2010, Wood 2006, National Academies Committee on National Statistics 2010). Policymakers generally have two options for collecting comprehensive, national data on elder abuse:

1. Population-based surveys are the "gold standard" for estimating the true prevalence of any condition, both known (to APS and criminal justice authorities) and unreported. Elder abuse, like other victimizations, is often underreported (Planty et al. 2013; Zweig et al. 2014). One study found that 1 in 14 incidents of abuse were reported to authorities, whereas another found that for every

case known by programs, another 24 went undetected (National Research Council 2003; Lifespan of Greater Rochester 2011). Despite this advantage of population-based surveys, they are complex and costly undertakings—particularly so when it comes to measuring elder abuse. In conducting their population-based epidemiologic survey, Acierno and colleagues (2009) noted that the most vulnerable or incapacitated elders may be unable to respond themselves, and proxy reports by family members or caregivers may be unreliable when the reporter may be a perpetrator of abuse. Acierno's 2009 study is the most recent prevalence study conducted; to the best of our knowledge, no updates are planned.

2. Administrative data, by their nature, reflect known cases only, but have the advantage of being ongoing data collections that can be used economically to answer important policy questions. Administrative data are the working records of agencies as they conduct their routine operations. Using administrative records for statistical, research, and policymaking purposes requires a thorough understanding of the underlying data systems and their limitations so the information may be interpreted appropriately (Iwig et al 2013).

Using Adult Protective Services (APS) Data to Measure Elder Abuse

APS data may be able to contribute to our estimation and understanding of elder abuse. APS agencies, rather than police, are often the first responders to reports of suspected elder abuse (Teaster 2006). Initial reports of alleged abuse are often made to APS abuse hotlines, and APS agencies receive reports from multiple sources, including private citizens, health care personnel, financial professionals, and law enforcement agencies. APS agencies are responsible for ensuring the immediate safety of victims, investigating allegations of abuse, providing emergency and, in some cases, longer term services, and coordinating with other human services agencies and the criminal justice system (NAPSA and NASUAD 2012). The Department of Health and Human Services (HHS) has determined that administrative data from APS agencies would form the most comprehensive basis for a nationwide data system on known cases of elder abuse because of APS' central role in responding to, investigating, and serving victims of abuse (ASPE 2010).

Of interest to BJS as a criminal justice statistical agency, is whether administrative data from APS agencies can augment current crime statistics about the victimization of older adults. There are many reasons to believe that reporting to APS agencies—which perform needs assessments, service referrals, and civil investigations—may be more complete than reporting to the police and other criminal justice agencies. Many elder care and elder abuse resources, including the U.S. Department of Justice's (DOJ) Elder Justice

Initiative website, instruct concerned individuals to contact APS in the absence of an immediate, life-threatening emergency (DOJ undated-a). Since elder abuse occurs within the context of familial and/or caregiving relationships, victims and other reporters may be reluctant to risk the arrest of the perpetrator by involving the police—either out of affection for or loyalty to the perpetrator, or fear of disrupting a caregiving relationship on which the victim may depend. In comparison with the police, APS agencies may be more likely to be seen as a source of assistance than a source of punishment or getting in trouble. Also, because APS agencies typically investigate reports of self-neglect, they may detect underlying abuse or neglect that were heretofore unnoticed. Finally, APS data can be used to measure victimizations in long-term care facilities and other institutions that house vulnerable adults who are difficult to reach in population-based surveys of victimization. BJS' National Crime Victimization Survey (NCVS), for example, is designed to measure victimization in the U.S. civilian household population and so excludes persons who live in institutions such as nursing facilities and skilled nursing facilities. This results in an undercount of victimizations among older adults, particularly those aged 85 and above, 11 percent of whom live in nursing homes (Morgan and Mason 2014).

National, criminal justice system-based data collections were not designed to measure elder abuse. They do not contain the level of specificity needed to distinguish elder abuse from other forms of victimization against older adults, and they do not encompass the range of victimization types that comprise elder abuse. Arrest information collected through the National Incident-Based Reporting System (NIBRS) does not collect the fields needed to ascertain either the vulnerability of the older victim or the relationship with the alleged perpetrator. For example, while NIBRS includes a category of "babysittee" to describe the victim's relationship to the offender, there is no comparable category for an adult receiving caregiver assistance (FBI 2013). Like the NIBRS, the NCVS lacks sufficient detail to identify victimizations by non- family caregivers and fiduciaries (BJS 2012). Moreover, the population-based NCVS does not collect information on the full range of elder abuse victimizations. The NCVS is designed to measure "nonfatal personal crimes (rape or sexual assault, robbery, aggravated and simple assault, and personal larceny) and household property crimes (burglary, motor vehicle theft, and other theft)" but does not collect information on emotional or psychological abuse, neglect, or the misappropriation of an older person's financial resources (BJS 2013).

Key Indicator Statistics Needed by Elder Abuse Stakeholders

The BJS-funded Urban Institute assessment of APS data specifically focuses on whether APS data systems have the capacity to generate the following key indicator statistics about elder abuse prevalence, victims,

and case outcomes (Exhibit 1). Collectively, these key indicators measure potential and confirmed victimizations, characterize the victims of abuse, and measure the progress of cases through both APS and criminal justice investigative processes. These key indicators were developed jointly by the Urban Institute and BJS in conjunction with stakeholders from DOJ and HHS at a meeting of the Federal Interagency Working Group on Elder Abuse in June 2013.

Key Indicator Statistics Needed by Elder Abuse Stakeholders

Number of victimizations reported to APS, which represents all potential victimizations known to APS

Percentage of victimizations reported by the criminal justice system (e.g., police and prosecutors). Other reporting sources of interest are: victims; their family and friends; health care workers; social service providers; bank and financial professionals; and other justice system actors (e.g., civil courts, attorneys)

Percentage of victims who have previous reports to APS

Number of victimizations investigated by APS

Percentage of victims with cases investigated by APS

Number of victimizations substantiated by APS

Percentage of victims (reported and investigated) whose cases were substantiated by APS

Number and percentage of victimizations (reported, investigated, and substantiated) that were criminal in nature

Number of victimizations referred by APS to the criminal justice system (e.g. police or prosecutors)

Percentage of victims (reported, investigated, substantiated, and criminally victimized) whose cases resulted in—

- » Arrest
- » Prosecution
- » Conviction
- » An alternative sanction or outcome such as a protective order, loss of licensure, loss of guardianship, or inclusion on an abuser registry

Percentage of victims (reported, investigated, substantiated, and criminally victimized) by the following eight personal and abuse characteristics—

» Age
» Gender
» Race
» Abuse type: e.g., physical, sexual, psychological, neglect, financial exploitation, or abandonment
» Abuse location: community (e.g., victim's home, family member's home, unlicensed group home) or institution (e.g., nursing home, assisted living facility, licensed group home)
» Disability type: e.g., hearing, vision, cognitive, or ambulatory limitations, or the inability to perform self-care tasks or activities needed for independent living.
» Capacity: e.g., ability to make decisions for oneself
» Relationship to the perpetrator: e.g., intimate partner, family member, caregiver, non-family acquaintance, or stranger

Defining Elder Abuse: A Multidimensional Taxonomy

The first step in generating uniform statistics on elder abuse is to develop a working definition of elder abuse. Because elder abuse is a multidimensional phenomenon, any operational definition must take offense, victim, and perpetrator characteristics into account, as described in detail below. The confluence of these three elements makes a particular victimization "elder abuse." Absent these victim characteristics and relationship dynamics, the same acts might be described more simply as assault, rape, theft, or fraud.

Legal definitions of elder abuse vary across states. For example, state laws define between 3 and 22 types of abuse (Stiegel and Klem 2007), with disparate names like "general abuse," "intentional abuse", and "reckless abuse." Yet, we find that there is a fair amount of agreement in the broad strokes of how elder abuse is defined across states, and these correspond to how elder abuse is popularly conceptualized. Various federal entities and national organizations have developed umbrella definitions of the types of acts that constitute elder abuse, and these categorization schemas are generally similar (see Appendix).

For criminal justice research and statistical purposes, elder abuse can be conceptualized as certain acts with specific behavioral criteria, committed against vulnerable older adults, and perpetrated by individuals who the victim could be expected to trust. This taxonomy is summarized in Exhibit 2 and is more fully discussed below. The taxonomy we present here builds on definitions proposed by the Centers for Disease

Control and Prevention (CDC). The CDC, like BJS, is a federal statistical agency, with a mission to develop case definitions and collect epidemiologic data. In the interest of avoiding duplication across federal agencies, we recommend adopting the CDC's detailed, behaviorally based descriptions of the acts comprising elder abuse, and building on the victim and perpetrator attributes identified by the CDC that characterize a given act as elder abuse. As described in the following sections, we find support for these definitions and this taxonomy through a review of the literature and states' APS laws, policies, and practices. Further, certain acts of elder abuse may be severe enough to warrant criminal justice system intervention; criteria for distinguishing criminal and non-criminal acts of elder abuse are discussed as well.

Taxonomy of Elder Abuse for Criminal Justice Research and Statistical Purposes

Elder abuse occurs when—

One of the following acts is committed:

» Physical abuse

» Sexual abuse

» Emotional or psychological abuse

» Neglect (by others)

» Financial or material exploitation

» Abandonment;

Against an adult aged 60 or older with a demonstrated vulnerability; and

By a perpetrator whom the victim could reasonably be expected to trust, such as a family member, financial advisor, caregiver, or another employee of a caregiving institution.

Such an act constitutes elder abuse regardless of—

Whether the abuse was committed in a community or institutional setting, or

Whether the act is codified as a crime.

Elder abuse data should be counted—

At a person-incident unit of analysis, so each victimization a person experiences is counted, and multiple incidents for a given person can be aggregated; and

At multiple points in the APS investigative process to understand potential prevalence, case processing, and case outcomes. These include:

» Initial reports,
» Investigations opened, and
» Cases substantiated.

An incident of elder abuse may be counted as criminal in nature when—

APS refers a given report to the criminal justice system for follow-up; or

Certain specific incident characteristics are present:

» Physical force or inappropriate restraint that caused bodily injury or impairment;
» Any sexual assault;
» Psychological or emotional abuse that caused the victim to seek or receive medical or mental health care;
» Neglect, by a person with a defined caregiving responsibility, to provide the necessities of life (e.g., food, clothing, shelter, healthcare);
» Financial exploitation that resulted in the loss of the victim's property, or when a person without the capacity to consent was coerced to change legal documents or transfer property; or
» Abandonment by a person with a defined caregiving responsibility.

Offense characteristics: What acts constitute elder abuse?

The CDC (2014) defines six, mutually exclusive categories of interpersonal abuse and a seventh category for self-neglect. These encompass acts of varying severity that may be considered criminal or non-criminal in nature. In this section, we first describe the acts that constitute abuse broadly. Later, we consider which specific acts within these categories might be counted as criminal acts for statistical reporting purposes. CDC's (2014) broad abuse category definitions are as follows:

"Physical Abuse occurs when an elder is injured (e.g., scratched, bitten, slapped, pushed, hit, burned, etc.), assaulted or threatened with a weapon (e.g., knife, gun, or other object), or inappropriately restrained."

"Sexual Abuse or Abusive Sexual Contact is any sexual contact against an elder's will. This includes acts in which the elder is unable to understand the act or is unable to communicate. Abusive sexual contact is defined as intentional touching (either directly or through the clothing), of the genitalia, anus, groin, breast, mouth, inner thigh, or buttocks."

"Psychological or Emotional Abuse occurs when an elder experiences trauma after exposure to threatening acts or coercive tactics. Examples include humiliation or embarrassment; controlling behavior (e.g., prohibiting or limiting access to transportation, telephone, money or other resources); social isolation; disregarding or trivializing needs; or damaging or destroying property."

"Neglect is the failure or refusal of a caregiver or other responsible person to provide for an elder's basic physical, emotional, or social needs, or failure to protect them from harm. Examples include not providing adequate nutrition, hygiene, clothing, shelter, or access to necessary health care; or failure to prevent exposure to unsafe activities and environments."

"Financial Abuse or Exploitation is the unauthorized or improper use of the resources of an elder for monetary or personal benefit, profit, or gain. Examples include forgery, misuse or theft of money or possessions; use of coercion or deception to surrender finances or property; or improper use of guardianship or power of attorney."

"Abandonment is the willful desertion of an elderly person by caregiver or other responsible person."

Note that CDC (2014) additionally includes a category of self-neglect, which "occurs when vulnerable elders fail or refuse to address their own basic physical, emotional, or social needs. Examples include self-care tasks such as nourishment, clothing, hygiene, and shelter; proper/appropriate use of medications; and managing or administering one's finances." Since BJS, as a criminal justice statistical agency, is concerned with victimizations perpetrated against others, self-neglect should not be included under BJS' definition of elder abuse. Later in this brief, we consider other characteristics that may distinguish criminal and non-criminal acts for the purpose of statistical reporting.

Victim characteristics: What kinds of people are victims of elder abuse?

Victims of elder abuse are typically defined by both age and vulnerability. We recommend the following threshold criteria for age and vulnerability based on the CDC's case definition, the Elder Justice Act, as well as state APS legislation and practice. Interestingly, other federal agencies and national stakeholder groups have not explicitly defined these criteria (Appendix A).

AGE 60 OR OLDER

In keeping with the CDC and the Elder Justice Act (Appendix A), we recommend defining the age threshold as 60. Similarly, state APS programs most often operationalize the term "elder" as someone aged 60 or older (GAO 2011).

DEMONSTRATED VULNERABILITY

While we define age 60 as the minimum age for a victim of elder abuse, in most states, APS' investigative authority is also based on vulnerability rather than age alone (Stiegel and Klem 2007). Most APS agencies (88%) reported investigating elder abuse within a broader context of vulnerable adult abuse, which includes disabled adults aged 18-59. Very few state APS agencies have the authority to investigate abuse or intervene in the affairs of an adult unless that person demonstrates some vulnerability; only four states used age alone as a factor for determining eligibility for adult protective services. The criteria for deciding when a person over age 60 is vulnerable vary across states. Stiegel and Klem (2007) classify states' vulnerability along the following dimensions:

> Condition: Most states' APS laws (48) had some requirement related to the physical or mental condition of the individual. Many states list non-limiting examples of the types of mental or physical conditions or impairments that qualify using language such as "including but not limited to…". Some specifically enumerate advanced age (13 states), substance abuse (4 states), situation of danger or risk (2 states), or a diagnosed lack of capacity (7 states) as alternative qualifying conditions.
>
> » Note that in 13 states, advanced age is a sufficient "condition" for APS to provide services. No threshold age is specified in the law, however. These statutes use language about impairment due to "advanced age" or "the infirmities of aging."
>
> Function: Most states (49) have at least one stipulation regarding an individual's functional status. The most common stipulations are whether individuals can protect or care for themselves (28 and 29 states, respectively). Other criteria relate to the individual's ability to perform activities of daily living (15 states), capacity to make decisions for themselves (13 states), and ability to manage assets and financial resources (12 states).
>
> Lack of Assistance: In five states an individual must "have no able and willing person available to provide assistance" in order to be eligible for APS services, meaning APS may investigate or intervene only if a person lacks social support.
>
> Living Situation: In eleven states, individuals are categorically eligible for APS services if they reside in a long term care facility, whereas five states specifically have provisions regarding living situation for those who are not in a long-term care facility.

Receiving Services: In seven states, individuals receiving services from a care agency are categorically eligible for APS services.

Guardianship/Conservatorship: In six states individuals who have been assigned a guardian or conservator are categorically eligible for APS services.

For the purpose of a research and statistical definition of elder abuse, we propose that all of these categories, except lack of assistance,[2] should be defining attributes of vulnerability and, therefore, elder abuse. However, more information is needed to operationalize a definition of vulnerability. Outstanding questions include:

What measures do states use to ascertain physical or mental "impairment"?

What constitutes "advanced age" in states where that or the "infirmities of aging" authorize APS to investigate alleged abuse?

Which "conditions" merit inclusion in a definition of vulnerability regardless of the level of impairment?

How do states measure the ability to perform activities of daily living (ADL)? Is any deficit in ADLs sufficient to define vulnerability, or is there a threshold amount? Further, do states consider only basic ADLs, such as walking, bathing, dressing, toileting, brushing teeth, and eating, or do they consider the instrumental activities of daily living (IADLs) that are characteristic of being able to live independently. These IADLs include cooking, driving, using the telephone or computer, shopping, keeping track of finances, and managing medication (Weston 2009).

What types of service eligibility should render a person categorically vulnerable?

Can APS data conform to the disability categories used in the NCVS? The NCVS defines six types of disability (Morgan and Mason 2014):

» Hearing limitation entails deafness or serious difficulty hearing.
» Vision limitation is blindness or serious difficulty seeing, even when wearing glasses.
» Cognitive limitation includes serious difficulty in concentrating, remembering, or making decisions because of a physical, mental, or emotional condition.
» Ambulatory limitation is difficulty walking or climbing stairs.
» Self-care limitation is a condition that causes difficulty dressing or bathing.

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[2] All of the categories, except lack of assistance, define vulnerability in terms of objective individual characteristics rather than social relationships. Employing the lack of assistance criterion would exclude many physically, mentally, or cognitively vulnerable individuals who have a means of social support.

» Independent living limitation is a physical, mental, or emotional condition that impedes doing errands alone, such as visiting a doctor or shopping.

Perpetrator characteristics: What is the relationship between victims and perpetrators of elder abuse?

Elder abuse is frequently characterized within a familial or caregiving relationship between the victim and perpetrator. For example, the National Research Council's description of elder abuse includes "(a) intentional actions that cause harm or create a serious risk of harm to a vulnerable elder by a caregiver or other person who stands in a trust relationship to the elder, or (b) failure by a caregiver to satisfy the elder's basic needs or to protect the elder from harm" (Bonnie and Wallace 2003). Similarly, the CDC (2014) defines elder abuse as "abuse or neglect...by a caregiver or another person in a relationship involving an expectation of trust." Since other national organizations do not explicitly define the victim-perpetrator relationship as clearly, we recommend adopting the CDC's language for defining perpetrators of elder abuse.

It is important to note that this 'expectation of trust' does not necessarily mean that the perpetrator is known to the victim. While family members would typically be so, others are in a position of trust by virtue of their employment or profession. For example, an employee of a nursing home, even one not directly involved in patient care, is expected to behave in a manner consistent with the best interests of the vulnerable adult. There is an implicit expectation of trust because of his or her professional role. The same can be said of attorneys, financial advisors, and other financial professionals, who may have a professional code of ethics to act in the best fiduciary interests of their clients.

How states operationalize this concept of a 'trust relationship' between the victim and perpetrator is varied and unclear. For example, Stiegel and Klem's 2007 review of APS laws did not analyze requirements around the victim-perpetrator relationship. Some state APS agencies, like Florida, explicitly require there to be a trust relationship in order to investigate allegations of elder abuse. Most states, however, do not cite the victim-perpetrator relationship as an overt criterion for receiving APS services (GAO 2011).

BJS may wish to consider that financial exploitation in particular is sometimes conceptualized more broadly to include financial scams by strangers who target older adults. The DOJ's Elder Justice Initiative website, for example, describes a typology whereby the nature of financial exploitation differs according to the relationship between the victim and perpetrator: "family members tend to use theft and misuse of assets; acquaintances, neighbors, service providers, financial professionals, and professional caretakers tend to use theft and fraud; and strangers tend to use fraud/scams" (DOJ undated-b).

However, for consistency with other forms of elder abuse, we nonetheless recommend that the definition of elder abuse, including financial exploitation, be limited to situations in which there is an expectation of trust between the victim and perpetrator. BJS may wish to consider an alternative definition of financial exploitation of the elderly that focuses on financial crimes alone, regardless of the victim-perpetrator relationship or the demonstrated vulnerability of the victim.

When is elder abuse a crime?

As noted by the United Nations' Task Force on Crime Classification, there are two conceptions of crime. There is the technical legal definition, codified in law, and there is the 'common unacceptable action.' The former are often recoded in police crime statistics, while the latter are measured through victimization surveys, which use behavioral criteria to describe unacceptable acts (UNODC 2012). APS data fall between these ends of the spectrum. Cases reported to APS agencies are, by definition, known to the government. At the same time, APS data encompass a range of actions, including crimes as defined by law; unacceptable actions that may not be codified as crimes; and, in some cases, harmful situations in which no one is at fault (such as self-neglect, which the proposed taxonomy excludes from criminal justice statistics).

As a criminal justice statistical agency, BJS is especially interested in the gap between criminal justice statistics and the victimizations reported to APS. In particular, BJS would like to quantify the amount of victimization that is reported to APS that is criminal in nature. However, APS agencies investigate cases from a human services perspective and in a civil capacity. As such, APS agencies and data systems may not explicitly distinguish between acts that are criminal and non-criminal in nature. Further, Urban Institute study interviews with both APS and law enforcement personnel revealed that neither felt that it was appropriate for APS to distinguish between criminal and non-criminal acts; that determination, they felt, should rest with the police or prosecutors, who are trained to do so. APS personnel refer cases that they suspect are criminal to the police or prosecutors. However, relatively few of these cases are prosecuted, and not necessarily because the act was not criminal. Some respondents questioned the value of prosecution with respect to the wellbeing of the vulnerable adult, while others perceived a lack of willingness to prosecute for reasons ranging from ageism to the complexity of some cases and the difficulty of collecting admissible evidence.

As part of its APS data assessment, Urban Institute will investigate possibilities for how to operationalize a definition of criminal elder abuse, and how this may differ from other abuse reports to APS. Referrals to and from the criminal justice system constitute one, albeit imperfect, marker. We will explore the following options as markers for when elder abuse is criminal in nature through our planned survey of APS representatives:

Referrals from the criminal justice system are one means of assessing which victimizations do and do not come to the attention of the criminal justice system. Criminal justice practitioners, especially police, are typically mandated to report abuse to APS agencies. However, we must also consider other measures because criminal justice agencies may become involved in a case only after the initial report was made to APS by someone else.

Cases substantiated by APS are the best approximation of "proven" abuse and may serve as one means to estimate elder abuse that is criminal in nature. A comparison of substantiated and unsubstantiated allegations may shed light on non-criminal reports. However, APS workers anecdotally report that many cases they substantiate do not result in criminal justice system follow-up or prosecution. When our Urban Institute research team interviewed police and prosecutors, they cited a number of reasons why this may be: (1) because APS investigative standards are less stringent than criminal justice investigative standards, and (2) because APS has a lower evidentiary threshold than criminal justice agencies—namely APS considers whether there is a preponderance of evidence, whereas the criminal justice system must provide proof beyond a reasonable doubt.

Referrals to the criminal justice system may be the best marker for criminal acts and we will assess how these are recorded in APS data systems. When asked how often the police or prosecutors participated in or followed up on an APS investigation—beyond accompanying the APS worker for safety reasons—APS representatives typically felt this occurred less than half the time, but that police involvement depended on the type of abuse present in a particular case. It will be important to establish what "referral to the criminal justice system" and "police involvement" means for each APS agency because of the range of practices in the field. For example,

» Some APS agencies refer all substantiated cases to law enforcement as a matter of policy, while others are more selective.
» To define criminal elder abuse, we will want to distinguish between circumstances when a law enforcement officer accompanies the APS worker for safety reasons versus participates in an investigation.
» One measure of criminal justice involvement may be the APS data systems' capacity to record criminal justice outcomes or link to criminal justice data sources (such as maintaining police report numbers or prosecution case file numbers in APS data records).
» In the course of examining APS and police collaboration on cases, it may also be helpful to ascertain the many ways in which these agencies collaborate (e.g., on multidisciplinary teams) and to assess perceived barriers in the relationship between law enforcement and APS.

Additionally, we propose the following elements of criminal elder abuse, based on (1) an understanding of criminal statutes in general, (2) the elder abuse literature, and (3) a review of the language used in BJS'

NCVS to operationalize definitions of crimes. Below we provide the general definitions of elder abuse shown earlier and then delineate when an incident may be criminal or non-criminal. Note that the definitions provided are for research and statistical reporting purposes, and are not designed to comport with specific criminal statutes, which vary across the fifty states.

"Physical Abuse occurs when an elder is injured (e.g., scratched, bitten, slapped, pushed, hit, burned, etc.), assaulted or threatened with a weapon (e.g., knife, gun, or other object), or inappropriately restrained" (CDC 2014).

» Physical abuse may be considered criminal in nature when it results in bodily injury or impairment (e.g., cuts or lacerations, bruising, dislocated joints, broken bones, or any injury for which the victim seeks or receives medical attention). Inappropriate restraint is also criminal in nature and could include the misuse of medication (e.g., sedatives) to confine an individual as well as physical restraints. On the other hand, some forms of physical force are unlikely to be criminal—particularly scratching, pushing, shoving, shaking, slapping, or pinching that does not result in bodily injury or impairment.

"Sexual Abuse or Abusive Sexual Contact is any sexual contact against an elder's will. This includes acts in which the elder is unable to understand the act or is unable to communicate. Abusive sexual contact is defined as intentional touching (either directly or through the clothing) of the genitalia, anus, groin, breast, mouth, inner thigh, or buttocks" (CDC 2014).

» All forms of sexual abuse should be considered criminal in nature.

"Psychological or Emotional Abuse occurs when an elder experiences trauma after exposure to threatening acts or coercive tactics. Examples include humiliation or embarrassment; controlling behavior (e.g., prohibiting or limiting access to transportation, telephone, money or other resources, or monitoring a person's actions or behaviors); social isolation; disregarding or trivializing needs; extreme criticism or insults; or damaging or destroying property" (CDC 2014).

» Much psychological or emotional abuse, while harmful, may not meet the threshold for criminal behavior. However, such abuse may result in measurable injury, such as depression, anxiety, PTSD-like symptoms, and somatic conditions like unexplained pain (Hornor, 2012). As such, psychological or emotional abuse that results in a victim seeking or receiving medical or mental health services should be counted as criminal in nature.

"Neglect is the failure or refusal of a caregiver or other responsible person to provide for an elder's basic physical, emotional, or social needs, or failure to protect them from harm. Examples include

not providing adequate nutrition, hygiene, clothing, shelter, or access to necessary health care; or failure to prevent exposure to unsafe activities and environments" (CDC 2014).

» Most states include neglect by caregivers in their criminal statutes, and these define neglect as either a failure to provide or willful withholding of the necessities of life, such as adequate food, clothing, shelter, or healthcare. The key to determining criminal neglect is whether the alleged perpetrator is in a caregiving role. A caregiver relationship can be said to exist if the alleged perpetrator is (a) a paid caregiver, (b) an adult child of the vulnerable adult (as in the 30 states with filial responsibility laws), and (c) if an individual voluntarily assumed caregiving responsibilities (Stiegel, Klem, and Turner 2007).

"Financial Abuse or Exploitation is the unauthorized or improper use of the resources of an elder for monetary or personal benefit, profit, or gain. Examples include forgery, misuse or theft of money or possessions; use of coercion or deception to surrender finances or property; or improper use of guardianship or power of attorney" (CDC 2014).

» Criminal financial abuse or exploitation occurs when an individual's resources are actually taken for the alleged perpetrator's gain. This includes money that was borrowed but never repaid; large bank transfers or withdrawals of funds; changing the title of the individual's home, car or other property; or changing the payee on an individual's benefits or direct deposits. (For example, the elder abuse screening instrument developed by Conrad et al (2013) advises contacting the police if these behaviors are reported). Other behaviors warrant suspicion but may not be criminal, such as being evasive about how money was spent, demanding money from the older adult, and pressuring an individual to sign documents or change his or her will. However, this latter behavior would be criminal if the older adult lacks the capacity to consent or make decisions.

"Abandonment is the willful desertion of an elderly person by caregiver or other responsible person" (CDC 2014).

» The same criteria for identifying criminal neglect may be applied here, as abandonment is an extreme case of neglect.

What does not define elder abuse, but is nevertheless important to document?

ABUSE SETTING OR LOCATION

Elder abuse may occur in any type of setting—private residences, group homes, assisted living facilities, or residential nursing facilities, to name a few. Conceptually, both community- and institutionally-based abuse should be counted as elder abuse. Community settings include the victim's home, a public place, or an unlicensed group home. Institutional settings include skilled nursing facilities (e.g., a nursing home), assisted living facilities, and other licensed group care settings.

However, APS operations and, therefore, data collection are limited in institutional settings. States differ with respect to APS jurisdiction over institutional settings. Sixteen states (31%) told the Urban Institute team that abuse in long-term care facilities and other such institutional settings is not routinely investigated by APS, but rather by health departments or licensing agencies. Even when states reported that APS routinely investigates abuse in facilities, respondents noted many exceptions and caveats. Establishing jurisdiction can be complex within a given state and definitions differ across states. For example, visitor-on-resident abuse in a licensed facility may fall under APS jurisdiction whereas abuse by facility employees may fall under the jurisdiction of the facility's regulatory agency. Sometimes resident-on-resident abuse is also investigated by the facility's regulatory agency, as it relates to the facility's ability to provide a safe environment for all residents.

We will assess the extent to which APS agencies record the location of alleged abuse and its licensing status to gauge the universe of data coverage. A national statistical program may need to report separately on abuse occurring in community and institutional settings. Additionally, BJS may wish to ascertain the number of non-APS agencies that would be needed to achieve full coverage of reported elder abuse in residential institutions.

Counting Data on Elder Abuse

The previous sections considered the attributes of an incident of elder abuse. Here we discuss how incidents of elder abuse may be counted, given how APS services and data systems are organized.

Unit of analysis

We recommend defining elder abuse in terms of person-incidents, in keeping with the UN Task Force on Crime Classification's 2012 guidance that definitions should be event-based, and that the capacity to link

crime events, perpetrators, and victims is important. These goals are in accord with those of federal elder abuse stakeholders, who expressed a need for both person-level and incident-level key indicator statistics, as listed in Exhibit 1, above.

Our assessment of APS data systems will examine the extent to which APS agencies maintain data hierarchies and can report both person and incident level statistics. APS agency workloads are defined in terms of reports or cases, and a given incident of abuse could be reported by multiple entities. One state, Minnesota, has addressed this issue by tracking records with separate allegation (i.e., incident), report, and victim ID numbers because there may be multiple reports per allegation and multiple allegations (i.e., incidents) per victim.

It is important to note that a reported incident of elder abuse is likely to represent a single episode of victimization within a larger pattern of ongoing abuse, similar to domestic violence. It is likely that a particular episode of violence, for example, prompts the victim and/or other concerned parties to report abuse, but that further investigation reveals a history of abuse. In such instances, the reporting system should capture the details of the episode that was reported, but also record the duration and nature of prior abusive episodes.

When should an incident of reported elder abuse be counted?

APS data may be conceptualized as three cohorts corresponding to different points of case processing—(1) reports of potential victimizations to APS, (2) investigations conducted by APS, and (3) cases/allegations substantiated by APS. All three are important to quantifying victimization and the system response.

> Data on initial reports of suspected abuse represent the most expansive way of collecting data on potential victimizations. These data represent all potential victimizations reported to APS agencies from a wide range of sources, including vulnerable adults themselves, their family members, friends or acquaintances, and professionals such as healthcare workers, social service providers, and law enforcement officers. These data are roughly analogous to calls for service data in police agencies.

> Data on investigations opened represent the subset of reports deemed appropriate for APS agencies to pursue as abuse investigations. It is important to note that state screening practices vary. Some states investigate each report they receive, but others use triaging strategies whereby reports are evaluated against APS eligibility and jurisdictional criteria before APS opens an investigation. Reports that are not accepted for APS investigation may be referred to non-APS social services if abuse is not suspected, while some suspected abuse is forwarded to other agencies

for investigation (e.g., regulatory or licensing agencies that have jurisdiction over certain caregiver or facility types).

Data on investigation outcomes or cases substantiated indicate whether the APS agency confirmed the allegations of abuse. This is the closest approximation of whether the initial report of elder abuse was "proven." APS agencies typically substantiate a case when the preponderance of evidence indicates that abuse occurred.

We suggest that elder abuse can and should be counted at each of these time points within a case. Federal stakeholders have noted that key indicators from each of these cohorts are important for understanding both the prevalence and response to elder abuse. Data on initial reports and investigations opened, in concert with information about APS screening practices, may be used to characterize the number of potential victimizations, and serve as a denominator for measuring the investigative process. Data on substantiated reports reflect "proven" cases and address the question of reported prevalence. Case substantiation rates can be used to evaluate the investigative process and its relative effectiveness for different types of abuse, alleged perpetrators, and victims, thus pointing to differential challenges or successes in the response to elder abuse.

Collecting APS Data on Elder Abuse: Potential Limitations and Workarounds

A potential limitation of using APS administrative records to collect nationwide statistical data on elder abuse is the lack of uniformity in case definitions across states. Cross-jurisdictional operational differences complicate the ability to aggregate statistical information from APS agencies across the nation. State laws and regulations govern APS agencies' definitions of what constitutes elder abuse, who is a victim, and APS' authority to intervene. The implication for nationwide statistical data collection is that APS agencies serve, and keep records on, systematically different client populations across, and occasionally within, states (Mallik-Kane et al 2012).

Notably, the scope of APS administrative data may differ with respect to—

the types of abuse investigated;

the age and vulnerability of clients served;

the requirement for there to be a 'trust relationship' between the victim and perpetrator; and

the location of the alleged abuse.

The taxonomy presented here serves to create a standardized definition of elder abuse across these jurisdictional differences. We anticipate that key indicator statistics collected from APS agencies will most likely need to be stratified or subset by these characteristics to account for key operational differences across states; permit valid comparisons; and reliably aggregate elder abuse data in an "apples-to-apples" fashion across APS agencies (Mallik-Kane et al 2012).

However, APS agencies' ability to report data according to this taxonomy depends on their ability to subset data according to these attributes. Past surveys of APS agencies in 2000, 2004, and 2007 revealed widespread difficulties in reporting statistical data—states used varying definitions of the total number of reports received, and a sizeable number of APS agencies could not provide counts by abuse type, differentiate between older and younger vulnerable adults, or provide case substantiation outcomes (Teaster 2006, Teaster et al. 2006, Otto and Quinn 2007). The most recent survey of APS agencies conducted in 2012 suggests that states have improved their data collection capacities. The vast majority of states (47) now use computerized data collection systems, but this is relatively new for many; 59 percent of states implemented automated systems within the last 10 years, including some that were implemented within the past 2 years (NAPSA and NASUAD 2012).

Urban Institute's data assessment will incorporate questions to clarify APS agency operations in order to frame the generation of key indicator statistics and interpret their data correctly. We will ask respondents to confirm the types of victims, perpetrators, abuse, and settings included under the agency's authority and data collections to determine whether there is a "least common denominator" subset of cases that can be summarized across jurisdictions. In general, APS agencies are likely to collect data on cases that fall outside the definition of elder abuse put forth in this taxonomy. For example, most APS programs (45 states) investigate allegations of abuse against vulnerable adults aged 18-59 in addition to elder abuse, and most states (47) respond to self-neglect, which often comprises the majority of an agency's caseload. If BJS ultimately proceeds with statistical data collection from APS agencies, we suggest collecting some data on total caseload sizes, including cases that fall outside this taxonomy of elder abuse to (1) establish the extent of elder abuse within APS caseload, as a means of understanding the value added by collecting APS data, and (2) secure agency buy-in, by considering and reporting on their total caseload and workload.

Additional Attributes of Elder Abuse to Consider When Assessing APS Data Capacity

The UN Task Force on Crime Classification's 2012 report highlighted the need to collect detailed information about each victimization incident to create a comprehensive crime classification. This will allow

the crime classification to describe acts in a very granular fashion. Exhibit 3 includes additional descriptors suggested by the UN Task Force's report and federal elder abuse stakeholders. Assessing APS data systems' capacity to collect and report on these attributes will both contribute to the creation of a comprehensive crime classification in accordance with UN recommendations and further understanding about elder abuse.

Supplementary Data Elements to Assess for Crime Classification, Research, and Policy Analysis Needs

Characteristics of the act, such as the—

- » Date, time, and location of the offense
- » Degree of completion of the event: planned, attempted, or completed
- » Use of any objects or weapons
- » Other elements of the 'modus operandi' of the act: e.g., whether it was enabled by threats, force, deception or intimidation
- » Target of the act: e.g., person, animal, property, institution, communal values
- » Seriousness of the act in terms of the level of harm to victim (e.g., death, nonfatal injuries sustained, amount of financial loss, institutionalization or other residential disruption) and any consequences to the community
- » Civil and/or criminal justice system oversight: whether the act occurred despite the presence of a protective order, a legal guardian, or criminal justice supervision such as probation or parole.

Characteristics of the victim, such as—

- » Demographics: age, sex, race/ethnicity, nationality, English language proficiency, employment, income, and educational attainment
- » Vulnerability of the victim as measured by health conditions (e.g., physical, mental, cognitive, influence of drugs/alcohol); disability status; functional ability (e.g., performance of activities of daily living); and categorical eligibility (by virtue of program eligibility, residence, or guardianship)
- » Dependence on the perpetrator (e.g. for caregiving, housing, or financial support)
- » Victimization history, in general and with this perpetrator
- » Perpetration history, in general and with this perpetrator (e.g., did the victim have a history of domestic violence or child abuse against the perpetrator?)

» Social support: victim's residence, caregiving needs, and receipt of services.

Characteristics of the perpetrator, such as—

» Demographics: age, sex, race/ethnicity, nationality, English language proficiency, employment, income, and educational attainment

» Vulnerability of the perpetrator as measured by health conditions (e.g., physical, mental, cognitive, influence of drugs/alcohol); disability status; functional ability (e.g., performance of activities of daily living); and categorical eligibility (by virtue of program eligibility, residence, or guardianship)

» Dependence on the victim (e.g. for housing, or financial support)

» Victimization history, in general and with this perpetrator (e.g., did the victim have a history of domestic violence or child abuse against the perpetrator?)

» Perpetration history, in general and with this perpetrator (e.g., criminal history)

» Social support: residence, caregiving needs, and receipt of services

» Intent : purposefulness and motivation of the offender

» Degree of co-responsibility, if others were involved, or if the offender acted alone.

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Appendix: Definitions of Elder Abuse from Federal Agencies, National Stakeholder Groups, and International Organizations

Abuse Element	Administration on Aging (AoA)	Centers for Disease Control and Prevention (CDC)	Elder Justice Act	National Adult Protective Services Association (NAPSA)	National Center on Elder Abuse (NCEA)	United Nations (UN) and the World Health Organization (WHO)
Physical Abuse	The use of force or violence resulting in bodily injury, physical pain, or impairment. Excludes sexual abuse.	Physical Abuse occurs when an elder is injured (e.g., scratched, bitten, slapped, pushed, hit, burned, etc.), assaulted or threatened with a weapon (e.g., knife, gun, or other object), or inappropriately restrained.	ABUSE- The term `abuse' means the knowing infliction of physical or psychological harm or the knowing deprivation of goods or services that are necessary to meet essential needs or to avoid physical or psychological harm.	Physical abuse: may include slapping, hitting, beating, bruising or causing someone physical pain, injury or suffering. This also could include confining an adult against his/her will, such as locking someone in a room or tying him/her to furniture.	Physical abuse is defined as the use of physical force that may result in bodily injury, physical pain, or impairment. Physical abuse may include but is not limited to such acts of violence as striking (with or without an object), hitting, beating, pushing, shoving, shaking, slapping, kicking, pinching, and burning. In addition, inappropriate use of drugs and physical restraints, force-feeding, and physical punishment of any kind also are examples of physical abuse.	No specific definitional breakdowns listed on website. Instead, they write "Elder abuse can be defined as 'a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person'. Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect."

Abuse Element	Administration on Aging (AoA)	Centers for Disease Control and Prevention (CDC)	Elder Justice Act	National Adult Protective Services Association (NAPSA)	National Center on Elder Abuse (NCEA)	United Nations (UN) and the World Health Organization (WHO)
Sexual Abuse	Non-consensual sexual contact of any kind, including sexual contact with any person incapable of giving consent.	Sexual Abuse or Abusive Sexual Contact is any sexual contact against an elder's will. This includes acts in which the elder is unable to understand the act or is unable to communicate. Abusive sexual contact is defined as intentional touching (either directly or through the clothing), of the genitalia, anus, groin, breast, mouth, inner thigh, or buttocks.	CRIMINAL SEXUAL ABUSE- Serious bodily injury shall be considered to have occurred if the conduct causing the injury is conduct described in section 2241 (relating to aggravated sexual abuse) or 2242 (relating to sexual abuse) of Title 18, United States Code, or any similar offense under State law.	Sexual abuse: includes physical force, threats or coercion to facilitate non-consensual touching, fondling, intercourse or other sexual activities. This is particularly true with vulnerable adults who are unable to give consent or comprehend the nature of these actions.	Sexual abuse is defined as non-consensual sexual contact of any kind with an elderly person. Sexual contact with any person incapable of giving consent is also considered sexual abuse. It includes, but is not limited to, unwanted touching, all types of sexual assault or battery, such as rape, sodomy, coerced nudity, and sexually explicit photographing.	No specific definitional breakdowns listed on website. Instead, they write "Elder abuse can be defined as 'a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person'. Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect."

Abuse Element	Administration on Aging (AoA)	Centers for Disease Control and Prevention (CDC)	Elder Justice Act	National Adult Protective Services Association (NAPSA)	National Center on Elder Abuse (NCEA)	United Nations (UN) and the World Health Organization (WHO)
Emotional or Psychological Abuse	The infliction of anguish, pain, or distress through verbal or nonverbal acts. This includes but is not limited to verbal assaults, insults, threats, intimidation, humiliation, and harassment.	Psychological or Emotional Abuse occurs when an elder experiences trauma after exposure to threatening acts or coercive tactics. Examples include humiliation or embarrassment; controlling behavior (e.g., prohibiting or limiting access to transportation, telephone, money or other resources); social isolation; disregarding or trivializing needs; or damaging or destroying property.	ABUSE- The term `abuse' means the knowing infliction of physical or psychological harm or the knowing deprivation of goods or services that are necessary to meet essential needs or to avoid physical or psychological harm.	Emotional abuse: involves creating emotional pain, distress or anguish through the use of threats, intimidation or humiliation. This includes insults, yelling or threats of harm and/or isolation, or non-verbal actions such as throwing objects or glaring to project fear and/or intimidation.	Emotional or psychological abuse is defined as the infliction of anguish, pain, or distress through verbal or nonverbal acts. Emotional/psychological abuse includes but is not limited to verbal assaults, insults, threats, intimidation, humiliation, and harassment. In addition, treating an older person like an infant; isolating an elderly person from his/her family, friends, or regular activities; giving an older person the "silent treatment;" and enforced social isolation are examples of emotional/psychological abuse.	No specific definitional breakdowns listed on website. Instead, they write "Elder abuse can be defined as 'a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person'. Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect."

Abuse Element	Administration on Aging (AoA)	Centers for Disease Control and Prevention (CDC)	Elder Justice Act	National Adult Protective Services Association (NAPSA)	National Center on Elder Abuse (NCEA)	United Nations (UN) and the World Health Organization (WHO)
Neglect (by others)	The failure of a caregiver or fiduciary to provide the goods or services necessary to maintain the health or safety of a person. Includes acts of omission and of commission; includes willful deprivation, etc.	Neglect is the failure or refusal of a caregiver or other responsible person to provide for an elder's basic physical, emotional, or social needs, or failure to protect them from harm. Examples include not providing adequate nutrition, hygiene, clothing, shelter, or access to necessary health care; or failure to prevent exposure to unsafe activities and environments.	NEGLECT- The term `neglect' means-- `(A) the failure of a caregiver or fiduciary to provide the goods or services that are necessary to maintain the health or safety of an elder; or `(B) self-neglect.	Neglect: includes failures by individuals to support the physical, emotional and social needs of adults dependent on others for their primary care. Neglect can take the form of withholding food, medications or access to health care professionals.	Neglect is defined as the refusal or failure to fulfill any part of a person's obligations or duties to an elder. Neglect may also include failure of a person who has fiduciary responsibilities to provide care for an elder (e.g., pay for necessary home care services) or the failure on the part of an in-home service provider to provide necessary care. Neglect typically means the refusal or failure to provide an elderly person with such life necessities as food, water, clothing, shelter, personal hygiene, medicine, comfort, personal safety, and other essentials included in an implied or agreed-upon responsibility to an elder.	No specific definitional breakdowns listed on website. Instead, they write "Elder abuse can be defined as 'a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person'. Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect."

Abuse Element	Administration on Aging (AoA)	Centers for Disease Control and Prevention (CDC)	Elder Justice Act	National Adult Protective Services Association (NAPSA)	National Center on Elder Abuse (NCEA)	United Nations (UN) and the World Health Organization (WHO)
Self-Neglect	A person's inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including obtaining essential food, clothing, shelter, and medical care; obtaining goods and services necessary to maintain physical health, mental health, or general safety; or managing one's own financial affairs. Includes hoarding.	Self-neglect occurs when vulnerable elders fail or refuse to address their own basic physical, emotional, or social needs. Examples include self-care tasks such as nourishment, clothing, hygiene, and shelter; proper/appropriate use of medications; and managing or administering one's finances.	SELF-NEGLECT- The term `self-neglect' means an adult's inability, due to physical or mental impairment or diminished capacity, to perform essential selfcare 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.	Self-neglect: involves seniors or adults with disabilities who fail to meet their own essential physical, psychological or social needs, which threatens their health, safety and well-being. This includes failure to provide adequate food, clothing, shelter and health care for one's own needs.	Self-neglect is characterized as the behavior of an elderly person that threatens his/her own health or safety. Self-neglect generally manifests itself in an older person as a refusal or failure to provide himself/herself with adequate food, water, clothing, shelter, personal hygiene, medication (when indicated), and safety precautions. The definition of self-neglect excludes a situation in which a mentally competent older person, who understands the consequences of his/her decisions, makes a conscious and voluntary decision to engage in acts that threaten his/her health or safety as a matter of personal choice.	No specific definitional breakdowns listed on website. Instead, they write "Elder abuse can be defined as 'a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person'. Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect."

Abuse Element	Administration on Aging (AoA)	Centers for Disease Control and Prevention (CDC)	Elder Justice Act	National Adult Protective Services Association (NAPSA)	National Center on Elder Abuse (NCEA)	United Nations (UN) and the World Health Organization (WHO)
Financial or Material Exploitation	The illegal or improper use of an individual's funds, property, or assets.	Financial Abuse or Exploitation is the unauthorized or improper use of the resources of an elder for monetary or personal benefit, profit, or gain. Examples include forgery, misuse or theft of money or possessions; use of coercion or deception to surrender finances or property; or improper use of guardianship or power of attorney.	EXPLOITATION- The term `exploitation' means the fraudulent or otherwise illegal, unauthorized, or improper act or process of an individual, including a caregiver or fiduciary, that uses the resources of an elder for monetary or personal benefit, profit, or gain, or that results in depriving an elder of rightful access to, or use of, benefits, resources, belongings, or assets.	Financial or material exploitation: includes the misuse, mishandling or exploitation of property, possessions or assets of adults. Also includes using another's assets without consent, under false pretense, or through coercion and/or manipulation.	Financial or material exploitation is defined as the illegal or improper use of an elder's funds, property, or assets. Examples include, but are not limited to, cashing an elderly person's checks without authorization or permission; forging an older person's signature; misusing or stealing an older person's money or possessions; coercing or deceiving an older person into signing any document (e.g., contracts or will); and the improper use of conservatorship, guardianship, or power of attorney.	No specific definitional breakdowns listed on website. Instead, they write "Elder abuse can be defined as "a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person". Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect."

Abuse Element	Administration on Aging (AoA)	Centers for Disease Control and Prevention (CDC)	Elder Justice Act	National Adult Protective Services Association (NAPSA)	National Center on Elder Abuse (NCEA)	United Nations (UN) and the World Health Organization (WHO)
Other Abuse Types	The desertion of a person by an individual who has assumed responsibility for providing care for that person, or by an individual with physical custody of another person.	Abandonment is the willful desertion of an elderly person by caregiver or other responsible person.		Isolation: involves restricting visits from family and friends or preventing contact via telephone or mail correspondence. Abandonment: involves desertion by anyone who assumed caregiving responsibilities for an adult.	Abandonment is defined as the desertion of an elderly person by an individual who has assumed responsibility for providing care for an elder, or by a person with physical custody of an elder.	
Age of victim	N/A - collect data from state APS's who each serve different populations.	"Age 60 or older."	"The term `elder' means an individual age 60 or older."	Not specified.	"Elderly person."	Not specified.
Victim's level of vulnerability	N/A - collect data from state APS's who each serve different populations.	Not specified.	Not specified.	Not specified.	Not specified.	Not specified.
Victim's relationship to perpetrator	N/A - collect data from state APS's who each serve different populations.	Elder abuse is any abuse and neglect of persons age 60 and older by a caregiver or another person in a relationship involving an expectation of trust.	See "neglect" definition above.	Not specified.	Not specified.	Not specified.
Source	http://www.aoa.acl.gov/AoA_Programs/Elder_Rights/NAMRS/index.aspx See "Definitions of Code Values"	http://www.cdc.gov/violenceprevention/elderabuse/definitions.html	http://www.ncea.aoa.gov/Resources/Publication/docs/ELDER_JUSTICE_ACT_2010.pdf	http://www.napsa-now.org/get-informed/	http://www.ncea.aoa.gov/FAQ/Type_Abuse/index.aspx	http://www.un.org/en/events/elderabuse/background.shtml http://www.who.int/ageing/projects/elder_abuse/en/

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Attachment C:

Online survey of state and local APS data collection practices in 2015

Online Survey[3] of State and Local APS Data Collection Practices in 2015

Welcome and Informed Consent[4]

The Urban Institute, a nonprofit research organization in Washington DC, has been funded by the U.S. Department of Justice, Bureau of Justice Statistics (BJS), to examine how Adult Protective Services (APS) agencies respond to and collect data about elder abuse, neglect, and exploitation (elder abuse). The purpose is to assess the feasibility of using existing APS data to help estimate nationwide statistics about the number of characteristics of reported incidents of elder abuse, neglect, and exploitation.

The survey should take you approximately 30 minutes to complete. We will ask about how your agency responded to suspected elder abuse cases in 2015 and what kinds of data you recorded about those cases. You can complete the survey in more than one session if you cannot complete the whole survey at one time. You may also choose to provide your username to colleagues within your agency, if you feel they can help you to complete the survey.

Your participation in this survey is completely voluntary. You can choose to skip any questions that you are not comfortable answering or stop taking the survey at any time. Reports from this project will help the field's understanding of elder abuse, neglect, and exploitation.

Thank you very much for participating in this survey. For technical assistance with the survey, please contact Carla Vasquez-Noriega at cvasquez@urban.org *(phone: 202-261-5299). For any other questions or concerns, please contact either of the Principal Investigators— Janine Zweig at* jzweig@urban.org *(phone: 518-791-1058) or Kamala Mallik-Kane at* kkane@urban.org *(phone: 202-261-5857).*

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[3] Qualtrics software is being used to administer this survey online. In rare cases, project staff will administer the survey by telephone and record responses in the online instrument.

[4] Signed hard-copy consent will not be obtained. Rather, this informed consent will be the first page of the online survey. Participants will indicate consent by continuing with the content of the survey.   The Urban Institute IRB has approved this method for obtaining informed consent.

Survey completed by:

Name: _____

The agency you work for: _____

Job title: _____

Telephone number: _____

Phone Extension: _____

Email address:_____

Note: All items will include the following response options in addition to those shown: Not applicable, Decline to answer, and Don't know.

A. About your agency's recordkeeping and data reporting practices

A1. Did your agency focus exclusively on elder abuse between January 1 and December 31, 2015? Note: for simplicity, we use the term "elder abuse" to encompass all forms of physical, sexual or psychological abuse against an older adult; neglect or abandonment by others; and exploitation of the elder's resources. If your agency went through substantial changes in 2015, please report on your practices during the majority of the year.

- o Yes, we focused on elder abuse only
- o No, we worked on elder abuse AND the abuse of younger vulnerable adults
- o No, we worked on elder abuse AND other types of cases *(please specify the other case types: _____)*
- o No, we rarely received elder abuse cases *(please specify the case types you focus on: _____)*
- o No, we never received elder abuse cases [END SURVEY IF RESPONDENT INDICATES NEVER RECEIVING ELDER ABUSE CASES: *Thank you for your time. This survey is about elder abuse so there is no need for you to continue participating. If you have any questions, concerns, or comments about this project, please contact either of the Principal Investigators: Janine Zweig, at* jzweig@urban.org *(phone: 518-791-1058) or Kamala Mallik-Kane at* kkane@urban.org *(phone: 202-261-5857).*]

A2. In 2015, did your agency typically work with elders when there is no suspected abuse?

- o Yes
- o No, we only worked with elders when there WAS suspected abuse

A2a. What was your agency's role in investigating reports of suspected elder abuse in 2015?

- o We conducted investigations
- o We had oversight of other agencies that conducted investigations
- o We did both

This survey focuses exclusively on how your agency handled elder abuse cases in 2015.

If your agency did not investigate cases directly, please answer questions about the investigation process from the perspective of the local office of your agency that directly investigated cases.

Units of count

The next questions ask about how your agency maintained records about elder abuse investigations in 2015 and how your agency reports data or statistics about elder abuse.

A3. Which of the following ID numbers did your agency assign when you received a report of elder abuse in 2015?

	[1] *Ask for each item. Check one.* Did your agency or data system assign this number?		[2] *If yes to [1], check one.* Following up, when did your agency assign each of these ID numbers?			[3] *If yes to [1], check one.* Following up once more, did your agency store these ID numbers electronically or on paper?			[D] *If [3]=electronically, check one.* Finally, were these ID numbers stored as a structured data field or as "free text"?	
	Yes	No	When report was made	When investigation was opened	At both time-points	Electronically ONLY	Both electronically and on paper	On paper ONLY	Data field	Text
a. Did your agency or data system assign **a unique number to each investigation opened**? For example, if abuse against Jane Doe was investigated on 2 separate occasions (say, in February and in November), 2 different numbers were assigned.	○	○	○	○	○	○	○	○	○	○
b. Did your agency or data system assign **a unique number to each report made to your agency**? For example, if a neighbor and a family member separately report that Jane Doe was being abused, 2 different numbers were assigned.	○	○	○	○	○	○	○	○	○	○
c. Did your agency or data system assign **a unique number to each victim**? For example, if abuse was reported against Jane Doe, was she assigned a client number? *(If response to column [1] is NO, ask this follow up question: "What information did your agency use to identify victims in your recordkeeping system? Please select all that apply. _Name, _Social security number, _Date of birth, _Other (please specify _____)*	○	○	○	○	○	○	○	○	○	○
d. Did your agency or data system assign a unique number to **each type of abuse alleged**? For example, if it was alleged that Jane Doe was	○	○	○	○	○	○	○	○	○	○

physically abused and financially exploited, 2 different numbers were assigned.									

A4. How was information organized in your agency's recordkeeping system in 2015? At what "level" were data entered and stored in your system? *Please check all that apply.*

- o At a person level (only) – there was one record per client (victim)
- o At case or investigation level (only) – there was one record per investigation
- o At a report level (only) – there was one record per report
- o Multiple levels (i.e., hierarchical or relational tables).

A5. [IF MULTIPLE LEVELS] What levels of data were maintained in your agency's system in 2015? *Please check all that apply.*

- o Client (victim) level
- o Case or investigation level
- o Report level
- o Allegation level
- o Other level (s) (*please specify: _____*)

A6. When your agency reports elder abuse statistics for 2015, would it report on the number of cases or reports *or* on the number of individuals (regardless of how many reports they were associated with)?

- o Cases or reports (for example: if Jane Doe was in 3 cases, we would count this as 3)
- o Individuals (for example: we would count Jane Doe only once, even if she was in 3 cases)
- o We can report both ways

Data entry and quality assurance

A7. Did your agency record elder abuse cases in an electronic database in 2015?

- o Yes

o   No [SKIP rest of this section]

A8. In 2015, was your agency's electronic database specifically for elder abuse cases, or was it integrated with other case types?

o   Elder abuse only
o   Elder abuse AND abuse of vulnerable younger adults
o   Abuse of younger vulnerable adults only
o   Elder and/or vulnerable adult abuse AND other case types

A9. Who conducted the data entry into your electronic system in 2015? *Please select all that apply*.

o   The staff person who investigated the case
o   Clerical, administrative, or data entry staff
o   Other types of staff *(please specify: _____)*

A10.   In 2015, was there a time lag between when information was collected on paper, and when it was entered electronically?

o   Yes (IF YES: how long was the time lag between when information was collected on paper, and when it was entered electronically? _____ days / weeks / months)
o   No, we entered the data immediately
o   No, we entered the data directly into the electronic system (paperless system)

A11.   Were paper or electronic records your agency's official "system of record" in 2015? For example: if you needed to provide records for a civil proceeding or criminal prosecution, would you draw from your paper or electronic records?

o   Paper files were the "system of record"
o   Electronic database was the "system of record"

A12.   What quality control procedures were used for the electronic database in 2015? *Please check all that apply.* [>>SKIP IF ANSWERED NO DATA ENTRY]

o   Double data-entry of information from paper forms

- Audits comparing paper and electronic versions of the record
- Assessments of the level of missing data on key elements
- None of the above

A13.   Since when have reliable records generally been available from your electronic data system? What is the earliest date (i.e., how long ago)? _____ (year) _____ (month, if known)

A14.   In general, was there a time lag between when data were entered in 2015 and when you could reliably query the database for statistics?

- Yes (if YES: In general, how long was the time lag between when data were entered in 2015 and when your agency could reliably query the database for statistics _____ days / weeks / months)
- No

A15.   When would reliable records for all completed 2015 investigations be available from your agency's electronic data system? _____ (year) _____ (month, if known)

B. Information gathered about elder abuse reports and investigations

*In 2015, did your agency maintain any data from the initial report of abuse **before** an investigation was opened?*

- o Yes
- o No [Skip all subsequent column 2 questions in section B]

The following questions ask about the types of information your agency collected and recorded in the course of responding to suspected elder abuse, neglect, or exploitation in 2015. ***Questions are grouped into broad categories of information such as client demographics or case outcomes. The first question in each category asks which specific pieces of information your agency gathered, electronically or on paper. Then, for each piece of information you report having gathered, we ask a follow up question about when it was collected.***

If you personally do not know the answer to some of these questions, please enlist the help of others in your agency. You may share your survey username and password with others in your agency.

Victim (client) information

B1. What pieces of information **about victims** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Case ID and victim demographics *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* **Did your agency record information on this characteristic, and is it stored electronically?,**					[2] *If yes to [1], check one.* **Following up, were any items about victims collected as part of the initial report, before beginning an investigation?**	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Name	○	○	○	○	○	○	○
b. Social Security number	○	○	○	○	○	○	○
c. Date of birth	○	○	○	○	○	○	○
d. Victim/Client ID number assigned by agency	○	○	○	○	○	○	○
e. Age	○	○	○	○	○	○	○
f. Sex	○	○	○	○	○	○	○
g. Race	○	○	○	○	○	○	○
h. Hispanic ethnicity (separate from race, so one could be any race but also report Hispanic ethnicity)	○	○	○	○	○	○	○

B2. What pieces of information **about a victim's vulnerability** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Victim's vulnerability *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* **Did your agency record information on this characteristic, and was it stored electronically??**					[2] *If yes to [1], check one.* **Following up, were any items about a victim's vulnerability collected as part of the initial report, before beginning an investigation?**	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
Disability status							
a. Deaf or has difficulty hearing	O	O	O	O	O	O	O
b. Blind or has difficulty seeing, even when wearing glasses	O	O	O	O	O	O	O
c. Difficulty concentrating, remembering or making decisions	O	O	O	O	O	O	O
d. Difficulty walking or climbing stairs	O	O	O	O	O	O	O
e. Difficulty dressing or bathing	O	O	O	O	O	O	O
f. Difficulty doing errands alone, such as visiting a doctor's office or shopping	O	O	O	O	O	O	O
g. Dependent on the care of others	O	O	O	O	O	O	O
h. Lacks capacity to make decisions for oneself	O	O	O	O	O	O	O
i. Meets your agency's definition of vulnerable adult	O	O	O	O	O	O	O
Substance use							
j. Has problems with alcohol use	O	O	O	O	O	O	O
k. Has problems with illegal drug use	O	O	O	O	O	O	O
l. Has problems with inappropriate use of prescription drugs	O	O	O	O	O	O	O
m. Has problems with substance use in general (unknown substance type)	O	O	O	O	O	O	O
Guardianship status							
n. Had a legal guardian at the time of the incident	O	O	O	O	O	O	O

B3. What pieces of information **about a victim's housing and living arrangements** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any

form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Victim's Housing and Living Arrangements *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were there any items about a victim's housing and living arrangements collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
Victim's housing type							
a. Housing type at the time of the incident	O	O	O	O	O	O	O
b. Housing type at the time of case closing	O	O	O	O	O	O	O
c. Which of these specific housing type categories were recorded?							
i. Victim's home	O	O	O	O	O	O	O
ii. Family member's home	O	O	O	O	O	O	O
iii. Group home (unlicensed)	O	O	O	O	O	O	O
iv. Group home (licensed)	O	O	O	O	O	O	O
v. Assisted living facility	O	O	O	O	O	O	O
vi. Skilled nursing facility (e.g., nursing home)	O	O	O	O	O	O	O
vii. Other institution for persons with mental illness or developmental disabilities	O	O	O	O	O	O	O
viii. Hospital	O	O	O	O	O	O	O
ix. Other housing type *(please specify: _____)*	O	O	O	O	O	O	O
Victim's living arrangements							
d. Whether victim lived with alleged perpetrator at the time of the incident	O	O	O	O	O	O	O
e. Whether victim lived with alleged perpetrator at the time of case closing	O	O	O	O	O	O	O

B4. What pieces of information **about a victim's history of abuse** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Victim's Abuse History *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about a victim's history of abuse collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Whether this was the first time this individual was reported to your agency as a victim	○	○	○	○	○	○	○
b. Date of first report to agency as a victim	○	○	○	○	○	○	○

Alleged perpetrator information

B5. What pieces of information **about alleged perpetrators** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

| Case ID and alleged perpetrator demographics

Column 1 will be asked for each item.
Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about alleged perpetrators collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Name	O	O	O	O	O	O	O
b. Social Security number	O	O	O	O	O	O	O
c. Date of birth	O	O	O	O	O	O	O
d. Alleged perpetrator ID number assigned by agency	O	O	O	O	O	O	O
e. Age	O	O	O	O	O	O	O
f. Sex	O	O	O	O	O	O	O
g. Race	O	O	O	O	O	O	O
h. Hispanic ethnicity (separate from race, so one could be any race but also report Hispanic ethnicity)	O	O	O	O	O	O	O

B6. What pieces of information **about the alleged perpetrator's relationship to the victim** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Victim-Perpetrator Relationship *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about the alleged perpetrator's relationship to the victim collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Regarding how the alleged perpetrator is related to the victim, which of these specific relationship categories were recorded about the alleged perpetrator?							
i. Intimate partner (husband, wife, boyfriend, girlfriend), current or ex- (former)	O	O	O	O	O	O	O
ii. Adult child	O	O	O	O	O	O	O
iii. Adult grandchild	O	O	O	O	O	O	O
iv. Other family member	O	O	O	O	O	O	O
v. Non-family friend or acquaintance	O	O	O	O	O	O	O
vi. Paid caregiver	O	O	O	O	O	O	O
vii. Healthcare provider	O	O	O	O	O	O	O
viii. Other employee of caregiving institution	O	O	O	O	O	O	O
ix. Financial professional	O	O	O	O	O	O	O
x. Stranger	O	O	O	O	O	O	O
xi. Other	O	O	O	O	O	O	O
b. Whether the alleged perpetrator met your agency's definition of "abuser" (for example: has position of trust)	O	O	O	O	O	O	O
c. Whether the alleged perpetrator was a caregiver (family or nonfamily, paid or unpaid)?	O	O	O	O	O	O	O
d. Whether the alleged perpetrator was a paid caregiver?	O	O	O	O	O	O	O
e. Whether the alleged perpetrator had guardianship over or power of attorney for the victim?	O	O	O	O	O	O	O

B7. What pieces of information **about the alleged perpetrator's vulnerability** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Alleged Perpetrator's Vulnerability or Disability Status *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about the alleged perpetrator's vulnerability collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Whether the alleged perpetrator met your agency's definition of a vulnerable adult (e.g., has a disability, depends on others for care, lacks capacity to make decisions)	O	O	O	O	O	O	O

B8. What pieces of information **about the alleged perpetrator's history of committing abuse** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Alleged Perpetrator's History of Committing Abuse *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about the alleged perpetrator's history of committing abuse collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Whether this was the first time this alleged perpetrator was reported to your agency as an alleged perpetrator	○	○	○	○	○	○	○
b. Date of first report to agency as an alleged perpetrator	○	○	○	○	○	○	○
c. Whether the alleged perpetrator had any criminal history at the time of the incident	○	○	○	○	○	○	○
d. Whether there was a protective order against the alleged perpetrator at the time of the incident	○	○	○	○	○	○	○
e. Whether the alleged perpetrator was on an abuser registry at the time of the incident	○	○	○	○	○	○	○
f. Whether alleged perpetrator was under criminal justice supervision (e.g., parole, probation, pretrial) at the time of the incident	○	○	○	○	○	○	○

Reporter Characteristics

B9. What pieces of information **about the reporter of suspected elder abuse** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Abuse Reporting *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* **Did your agency record information on this characteristic, and was it stored electronically?**					[2] *If yes to [1], check one.* **Following up, were any items about the reporter of suspected elder abuse collected as part of the initial report, before beginning an investigation?**	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
Abuse report							
a. Date of report	O	O	O	O	O	O	O
b. Which of these specific reporter types were recorded?	O	O	O	O	O	O	O
i. Police	O	O	O	O	O	O	O
ii. Prosecutor's office	O	O	O	O	O	O	O
iii. Other lawyers or court system representatives	O	O	O	O	O	O	O
iv. Guardian	O	O	O	O	O	O	O
v. Victim	O	O	O	O	O	O	O
vi. Family member of victim	O	O	O	O	O	O	O
vii. Friend or acquaintance of victim	O	O	O	O	O	O	O
viii. Healthcare worker	O	O	O	O	O	O	O
ix. Other employees of healthcare or long-term care facility	O	O	O	O	O	O	O
x. Social service provider	O	O	O	O	O	O	O
xi. Bank employee or other financial professional	O	O	O	O	O	O	O
c. Whether your agency decided to open an abuse investigation	O	O	O	O	O	O	O
d. Reason your agency did not open an abuse investigation	O	O	O	O	O	O	O

Incident Characteristics

B10. What pieces of information **about the abusive incident** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Time and place of the suspected abuse *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about the abusive incident collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Date of incident that led to investigation	O	O	O	O	O	O	O
b. Time of incident that led to investigation	O	O	O	O	O	O	O
c. Whether the abuse was a single incident or ongoing pattern	O	O	O	O	O	O	O
d. Regarding the location where the abuse occurred, which of these specific location types were recorded?							
i. Victim's home	O	O	O	O	O	O	O
ii. Family member's home	O	O	O	O	O	O	O
iii. Group home (unlicensed)	O	O	O	O	O	O	O
iv. Group home (licensed)	O	O	O	O	O	O	O
v. Assisted living facility	O	O	O	O	O	O	O
vi. Skilled nursing facility (e.g., nursing home)	O	O	O	O	O	O	O
vii. Other institution for persons with mental illness or developmental disabilities	O	O	O	O	O	O	O
viii. Hospital	O	O	O	O	O	O	O
ix. Other location *(please specify: _____)*	O	O	O	O	O	O	O

B11. What pieces of information **about the abusive incident** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Types of abuse reported or alleged *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about the abusive incident collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Whether specific abuse types were alleged to have occurred. Which of these specific *alleged* abuse categories were recorded?[5] --							
i. Physical Abuse, meaning "when an elder is injured (e.g., scratched, bitten, slapped, pushed, hit, burned, etc.), assaulted or threatened with a weapon (e.g., knife, gun, or other object), or inappropriately restrained."	○	○	○	○	○	○	○
ii. Sexual Abuse or Abusive Sexual Contact, meaning "any sexual contact against an elder's will. This includes acts in which the elder is unable to understand the act or is unable to communicate. Abusive sexual contact is defined as intentional touching (either directly or through the clothing), of the genitalia, anus, groin, breast, mouth, inner thigh, or buttocks."	○	○	○	○	○	○	○

[5] Definitions of abuse are from the Centers for Disease Control and Prevention, 2014.

Types of abuse reported or alleged Column 1 will be asked for each item. Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].	[1] *Ask for each item. Check one.* **Did your agency record information on this characteristic, and was it stored electronically?**					[2] *If yes to [1], check one.* **Following up, were any items about the abusive incident collected as part of the initial report, before beginning an investigation?**	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
iii. Psychological or Emotional Abuse, meaning "when an elder experiences trauma after exposure to threatening acts or coercive tactics. Examples include humiliation or embarrassment; controlling behavior (e.g., prohibiting or limiting access to transportation, telephone, money or other resources); social isolation; disregarding or trivializing needs; or damaging or destroying property."	O	O	O	O	O	O	O
iv. Neglect (by others), meaning "the failure or refusal of a caregiver or other responsible person to provide for an elder's basic physical, emotional, or social needs, or failure to protect them from harm. Examples include not providing adequate nutrition, hygiene, clothing, shelter, or access to necessary health care; or failure to prevent exposure to unsafe activities and environments."	O	O	O	O	O	O	O
v. Self-neglect, meaning "when vulnerable elders fail or refuse to address their own basic physical, emotional, or social needs. Examples include self-care tasks such as nourishment, clothing, hygiene, and shelter; proper/appropriate use of medications; and managing or administering one's finances.	O	O	O	O	O	O	O
vi. Financial Abuse or Exploitation, meaning "the unauthorized or improper use of the resources of an elder for monetary or personal benefit, profit, or gain. Examples include forgery, misuse or theft of money or possessions; use of coercion or deception to surrender finances or property; or improper use of guardianship or power of attorney."	O	O	O	O	O	O	O
vii. Abandonment, meaning "the willful desertion of an elderly person by caregiver or other responsible person."	O	O	O	O	O	O	O

B12. What pieces of information **about specific acts during the abusive incident and resulting injuries** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Column 1 will be asked for each item. Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about specific acts during the abusive incident and resulting injuries collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
Weapon use							
a. Whether a gun was used	O	O	O	O	O	O	O
b. Whether another weapon (e.g., knife) was used	O	O	O	O	O	O	O
c. Whether another type of object was used as a weapon	O	O	O	O	O	O	O
Inappropriate use of restraints							
d. Whether victim was inappropriately restrained (with ties, ropes, cords, etc.)	O	O	O	O	O	O	O
e. Whether victim was "chemically restrained," meaning they were inappropriately sedated with medication or drugs	O	O	O	O	O	O	O
Level of completion							
f. Whether the act was threatened, attempted, or completed	O	O	O	O	O	O	O
Injury sustained							
g. Whether an injury resulted in bodily injury or impairment (e.g., cuts or lacerations, bruising, dislocated joints, broken bones)	O	O	O	O	O	O	O
h. Whether there was sexual contact against the victim's will	O	O	O	O	O	O	O
Elements of neglect							

	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about specific acts during the abusive incident and resulting injuries collected as part of the initial report, before beginning an investigation?	
Column 1 will be asked for each item. *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
i. Whether the victim was "actively" neglected, meaning that things were purposefully withheld	○	○	○	○	○	○	○
j. Whether the victim was "passively" neglected, meaning that there was a failure to provide for him or her without intent	○	○	○	○	○	○	○
k. Regarding the types of things victims lacked access to, which of these specific items ae recorded?:							
i. Adequate food	○	○	○	○	○	○	○
ii. Adequate clothing (e.g., clothing appropriate to the season)	○	○	○	○	○	○	○
iii. Adequate shelter (e.g., a hygienic and safe environment)	○	○	○	○	○	○	○
iv. Access to medicine or healthcare	○	○	○	○	○	○	○
Financial loss or impact							
l. Whether there was a loss of personal property	○	○	○	○	○	○	○
m. Whether there was a loss of financial assets	○	○	○	○	○	○	○
n. Whether victim was forced to alter legal documents or beneficiary designations	○	○	○	○	○	○	○
o. Dollar amount of losses sustained (if financial exploitation)	○	○	○	○	○	○	○

B13. What pieces of information a**bout the severity of injuries sustained** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form,

including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Injury severity and need for health care *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?					[2] *If yes to [1], check one.* Following up, were any items about the severity of injuries sustained collected as part of the initial report, before beginning an investigation?	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Whether the victim was seen by a health care provider for the injuries sustained	O	O	O	O	O	O	O
b. Whether the victim was seen by a mental health provider for the injuries sustained	O	O	O	O	O	O	O
c. Whether the victim was hospitalized as a result of injuries sustained	O	O	O	O	O	O	O
d. Duration of hospitalization	O	O	O	O	O	O	O
e. Whether the injury was life-threatening	O	O	O	O	O	O	O
f. Whether the client died from the injuries sustained from this incident of abuse	O	O	O	O	O	O	O

Investigation Characteristics and Outcomes

B14. What pieces of information did your agency gather **about interagency collaborations** in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Agencies involved in the investigation *Column 1 will be asked for each item.* *Columns 2 will be asked as a follow-up, for only those characteristics respondents said they record in [1].*	[1] *Ask for each item. Check one.* **Did your agency record information on this characteristic, and was it stored electronically?**					[2] *If yes to [1], check one.* **Following up, were any items about interagency collaborations collected as part of the initial report, before beginning an investigation?**	
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Yes	No
a. Whether the police accompanied the APS worker for safety reasons	O	O	O	O	O	O	O
b. Whether case was co-investigated with other agencies	O	O	O	O	O	O	O
c. Name of co-investigative agencies	O	O	O	O	O	O	O
d. Whether case was transferred to other agencies	O	O	O	O	O	O	O
e. Name of agencies case was transferred to	O	O	O	O	O	O	O
f. Police report number, if referred to *or* from the police (meaning, a number you could use to cross-reference to law enforcement records)	O	O	O	O	O	O	O
g. Court case number, case file number or docket number, if referred to *or* from prosecutor's office meaning, a number you could use to cross-reference to the prosecutor's or court records)	O	O	O	O	O	O	O
h. Case file number, if referred to *or* from guardianship, conservatorship, or other civil court proceedings (meaning, a number you could use to cross-reference to attorneys' or court records)	O	O	O	O	O	O	O
i. Case file number, if referred to *or* from another investigative agency (e.g., regulatory or licensing agency) that you could use to cross-reference that agency's records.	O	O	O	O	O	O	O
j. Case file number at any other agency, if applicable *(If yes in Column 1, ask "Please specify the agency: _____)*	O	O	O	O	O	O	O

B15. What pieces of information **about the conclusion of the elder abuse investigation** did your agency gather in the course of an investigation responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any

form, including on paper, in narrative form, or in a database field. Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

Case outcomes	[1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically?				
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded
a. Date investigation was opened	○	○	○	○	○
b. Date investigation closed	○	○	○	○	○
c. Reason for case closure	○	○	○	○	○
d. Whether the overall report of abuse was confirmed or substantiated	○	○	○	○	○
e. Whether specific abuse types[6] were ***substantiated.*** – Which of these specific abuse categories were recorded?					
i. Physical Abuse, meaning "when an elder is injured (e.g., scratched, bitten, slapped, pushed, hit, burned, etc.), assaulted or threatened with a weapon (e.g., knife, gun, or other object), or inappropriately restrained."	○	○	○	○	○
ii. Sexual Abuse or Abusive Sexual Contact, meaning "any sexual contact against an elder's will. This includes acts in which the elder is unable to understand the act or is unable to communicate. Abusive sexual contact is defined as intentional touching (either directly or through the clothing), of the genitalia, anus, groin, breast, mouth, inner thigh, or buttocks."	○	○	○	○	○
iii. Psychological or Emotional Abuse, meaning "when an elder experiences trauma after exposure to threatening acts or coercive tactics. Examples include humiliation or embarrassment; controlling behavior (e.g., prohibiting or limiting access to transportation, telephone, money or other resources); social isolation; disregarding or trivializing needs; or damaging or destroying property."	○	○	○	○	○
iv. Neglect (by others), meaning "the failure or refusal of a caregiver or other responsible person to provide for an elder's basic physical, emotional, or social needs, or failure to protect them from harm. Examples include not providing	○	○	○	○	○

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[6] Definitions of abuse are from the Centers for Disease Control and Prevention, 2014.

| Case outcomes | [1] *Ask for each item. Check one.* Did your agency record information on this characteristic, and was it stored electronically? | | | | |
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded
adequate nutrition, hygiene, clothing, shelter, or access to necessary health care; or failure to prevent exposure to unsafe activities and environments."					
v. Self-neglect, meaning "when vulnerable elders fail or refuse to address their own basic physical, emotional, or social needs. Examples include self-care tasks such as nourishment, clothing, hygiene, and shelter; proper/appropriate use of medications; and managing or administering one's finances."	O	O	O	O	O
vi. Financial Abuse or Exploitation, meaning "the unauthorized or improper use of the resources of an elder for monetary or personal benefit, profit, or gain. Examples include forgery, misuse or theft of money or possessions; use of coercion or deception to surrender finances or property; or improper use of guardianship or power of attorney."	O	O	O	O	O
vii. Abandonment, meaning "the willful desertion of an elderly person by caregiver or other responsible person."	O	O	O	O	O
f. Whether the victim changed residence since the incident (e.g., as a result of the investigation, at the conclusion of the case)	O	O	O	O	O
g. Was there a change in guardianship (e.g., initiated guardianship proceedings, place into guardianship, changed guardian) since the incident (e.g., as a result of the investigation, at the conclusion of the case)	O	O	O	O	O
h. Whether there was a protective order or restraining order issued after the incident (e.g., as a result of the investigation, at the conclusion of the case)	O	O	O	O	O
i. Regarding non-criminal disciplinary action against the alleged perpetrator, which of these are recorded?					
i. Lost license,	O	O	O	O	O
ii. Added to abuser registry	O	O	O	O	O
j. Whether there was a referral to the police	O	O	O	O	O
k. Whether an arrest was made	O	O	O	O	O
l. Whether there was a referral to criminal prosecution	O	O	O	O	O
m. Whether criminal charges were filed	O	O	O	O	O
n. Outcome of the criminal case (e.g., convicted or not)	O	O	O	O	O

Case outcomes	[1] *Ask for each item. Check one.* **Did your agency record information on this characteristic, and was it stored electronically?**				
	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded
o. Whether jail or prison time was imposed	O	O	O	O	O

C. Elder Abuse Definitions and APS Agency Responsibilities

Screening practices

C1. Did your agency's investigations in 2015 reflect reports that had been screened-in somehow?

- o Yes, another agency or unit conducted initial screening to determine that abuse investigation was needed (*please specify the other agency: _____*)
- o Yes, our agency conducted initial screening to determine that abuse investigation was needed.
- o No, our agency opens an abuse investigation on all reports received.

C2. [IF SCREENED IN] Can you report on the number of reports that were screened out in 2015?

- o Yes
- o No

C3. [IF SCREENED IN] Why were reports screened out? *Please check all that apply*

- o Not in need of protective services (for example: referred to social services)
- o Not our agency's jurisdiction (for example: referred elsewhere for investigation)
- o Other reasons (*please specify: _____*)

C3a. [IF SCREENED IN] What was the primary reason why reports were screened out in 2015?

- o Not in need of protective services (for example: referred to social services)
- o Not our agency's jurisdiction (for example: referred elsewhere for investigation)
- o Other reasons (*please specify: _____*)

Types of abuse

C4. What types of elder abuse was your agency responsible for investigating in 2015? *Please check all that apply.*

- o Physical abuse

- Sexual abuse
- Emotional or psychological abuse
- Neglect (by others)
- Self-Neglect
- Financial or material exploitation
- Abandonment
- Other (*please specify:* _____)

C5. How did your agency define neglect by others in 2015? *Please check all that apply.*

- Active neglect (i.e., willful refusal to provide for elder's needs, such as denying food or medications)
- Passive neglect (i.e., failure to provide for elder's needs, but no evidence of malicious or punitive intent)
- Other (*please specify:* _____)

C6. a. Did your agency respond to reports of self-neglect in 2015?

- Yes
- No, we didn't respond ourselves (for example: immediate referral to another agency)

b. [IF YES to A] How did your agency respond to reports of self-neglect in 2015? *Please check all that apply.*

- We conducted an initial screening to determine jurisdiction before investigating
- We conducted a formal abuse investigation
- We provided services to the elder
- We sometimes provided services to the elder even though another agency investigated the case
- Some other response (*please specify:* _____)

C7. a. In 2015, did your agency respond to reports of financial or material exploitation perpetrated by either an acquaintance or stranger (for example: scams)?

- Yes
- No, we didn't respond ourselves (for example: immediate referral to another agency)

b. [IF YES to A] In 2015, how did your agency respond to reports of financial or material exploitation perpetrated by either an acquaintance or stranger (for example: scams)? *Please check all that apply.*

- o We conducted an initial screening to determine jurisdiction before investigating
- o We conducted a formal abuse investigation
- o We provided services to the elder
- o We sometimes provided services to the elder even though another agency investigated the case
- o Some other response (*please specify: _____*)

Vulnerability

C8. How did your agency define "vulnerable" in 2015? *Please check all that apply.*
- o Deaf or has difficulty hearing
- o Blind or has difficulty seeing, even when wearing glasses
- o Difficulty concentrating, remembering or making decisions
- o Difficulty walking or climbing stairs
- o Difficulty dressing or bathing
- o Difficulty doing errands alone, such as visiting a doctor's office or shopping
- o Dependent on the care of others
- o Lacks capacity to make decisions for oneself
- o Has problems with substance use (alcohol, drugs, or inappropriate use of prescription drugs)
- o Has a legal guardian
- o Advanced age
- o Lives in a long-term care facility
- o Receives services from a care agency
- o Other (*please specify: _____*)

C9. Did your agency distinguish between "elders" and younger vulnerable adults in 2015?

- o Yes
- o No

C10. At what age was someone considered an "elder" by your agency in 2015?

o Age (*please specify:* _____)
o There was no such definition

C11. In 2015, did elderly persons have to demonstrate a specific vulnerability in order for your agency to open an investigation, or was advanced age sufficient?

o Everyone had to demonstrate a specific vulnerability, regardless of age
o Advanced age was enough to open an investigation

C12. [IF SELECTED ADVANCED AGE ABOVE] At what age was advanced age, without other demonstrated vulnerabilities, sufficient to open an investigation in 2015? _____

Jurisdiction: Institutions vs. community

C13. Which of the following did your agency consider a "facility" or "institution" in 2015? *Please check all that apply.*

o Licensed group home
o Unlicensed group home
o Assisted living facility
o Nursing home
o State mental illness facility
o State developmental disability facility
o Hospital
o Other (*please specify:* _____)

C14. In 2015, under what circumstances was your agency responsible for investigating elder abuse in a facility or institution?

o We investigated all reports of facility abuse
o We investigated some reports of facility abuse
o We didn't investigate reports of abuse in a facility or institution
o Some other response (*please specify:* _____)

C15. [IF SOME CHECKED ABOVE] In 2015, what were your agency's guidelines on when to investigate elder abuse in a facility or institution? *Please check all that apply.*
- o   We had jurisdiction to investigate some facility types but not others
- o   We investigated when the alleged perpetrator was not part of the facility staff (for example: relative of the victim)
- o   Other (please specify: _____)

C16. a. Did your agency respond to reports of elder abuse in facilities or institutions in 2015?

- o   Yes
- o   No, we didn't respond ourselves (for example: immediate referral to another agency)

b. [IF YES to A] How did your agency respond to reports of elder abuse in facilities or institutions in 2015? *Please check all that apply.*

- o   We conducted an initial screening to determine jurisdiction before investigating
- o   We conducted a formal abuse investigation
- o   We provided or arranged services for the elder in addition to conducting the abuse investigation
- o   We sometimes provided or arranged services for the elder even if another agency investigated the case
- o   Some other response (*please specify:* _____)

C17. a. In 2015, did your agency respond to reports of elder abuse in the community (for example: elder's home)?

- o   Yes
- o   No, we didn't respond ourselves (for example: immediate referral to another agency)

b. [IF YES to A] In 2015, how did your agency respond to reports of elder abuse in the community (for example: elder's home)? *Please check all that apply.*

- o   We conducted an initial screening to determine jurisdiction before investigating
- o   We conducted a formal abuse investigation
- o   We provided or arranged services for the elder in addition to conducting the abuse investigation
- o   We sometimes provided or arranged services for the elder even if another agency investigated the case
- o   Some other response (*please specify:* _____)

Alleged perpetrator relationship

C18. Did the relationship between a victim and alleged perpetrator determine whether your agency could open an abuse investigation in 2015?

- o Yes
- o No

C19. [IF YES TO ABOVE] How did your agency define an alleged perpetrator of elder abuse in 2015?   *Please c*heck all that apply.

- o Abuse if committed by a paid caregiver
- o Abuse if committed by a family member
- o Abuse if committed by facility staff
- o Abuse if committed by a medical professional
- o Abuse if committed by a financial professional
- o Abuse if committed by an acquaintance
- o Abuse if committed by a stranger
- o Abuse if committed by someone without knowledge of the victim's vulnerabilities
- o Other (*please specify:* _____)

Suspicious deaths

C20. Did your agency investigate cases posthumously in 2015? For example, were you called to investigate or co-investigate suspicious deaths?

- o Yes
- o No

C21. [IF YES] – In 2015, did your agency record these cases in the same database as other reports or investigations?

- o Yes
- o No

Referral to law enforcement

C22. In 2015, was there a statewide policy to guide when APS should refer or report substantiated cases to law enforcement or to prosecution?
- o Yes
- o No

C23. [IF YES] In 2015, did local areas in your state have different policies about when APS should refer or report substantiated cases to law enforcement or to prosecution?
- o Yes
- o No

C24. In 2015, what was your agency's policy on referring or reporting substantiated cases (other than self-neglect) to law enforcement or to prosecution?

- o All substantiated cases must be reported to the police or the prosecutor's office
- o Substantiated cases that meet certain criteria were referred to police or the prosecutor's office
- o Substantiated cases were referred on an "as needed" basis

C25. [IF NOT ALL CASES REFERRED TO POLICE OR PROSECUTOR] In 2015, under what circumstances did your agency refer or report substantiated cases (other than self-neglect) to law enforcement or to prosecution? *Please check all that apply.*

- o Cases were referred if criminal activity was suspected
- o All cases with substantiated physical abuse were referred
- o All cases with substantiated sexual abuse were referred
- o All cases with substantiated psychological or emotional abuse were referred
- o All cases with substantiated neglect (by others, not self-neglect) were referred
- o All cases with substantiated financial exploitation were referred
- o All cases with substantiated abandonment were referred
- o Other (*please specify:* _____)

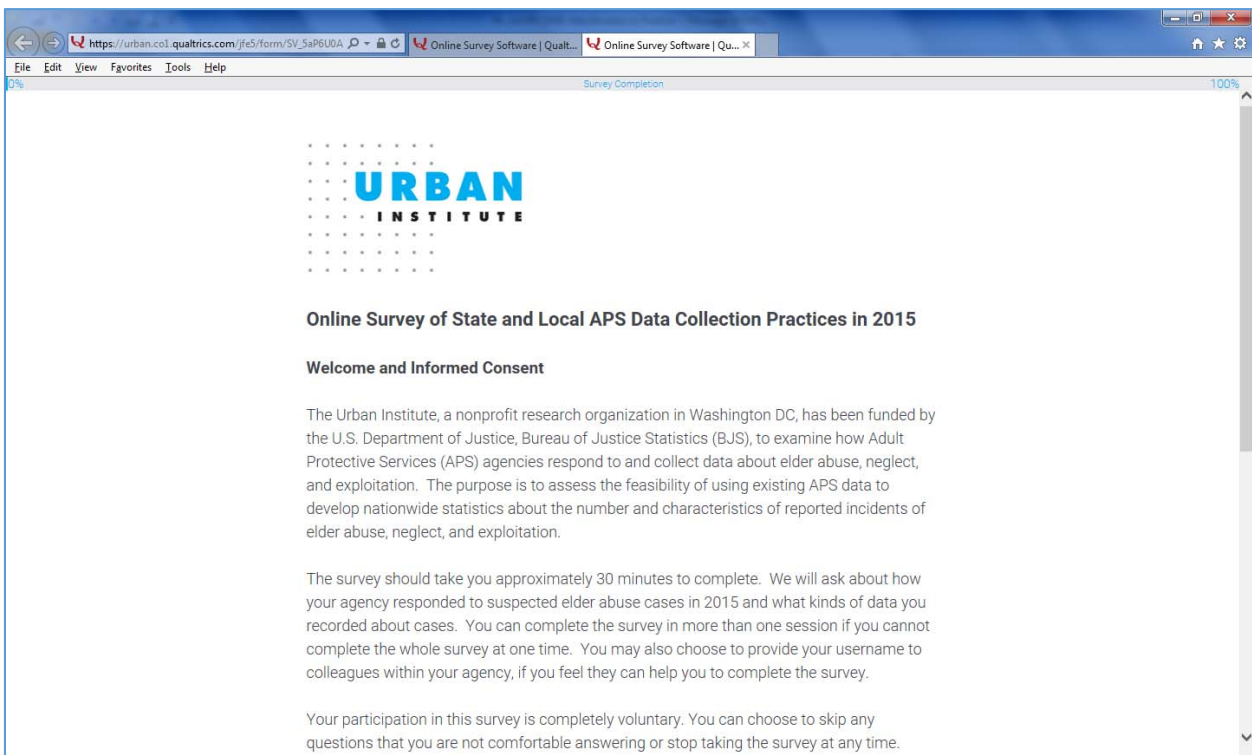C26. When your agency referred to cases to the criminal justice system in 2015, who did you contact?
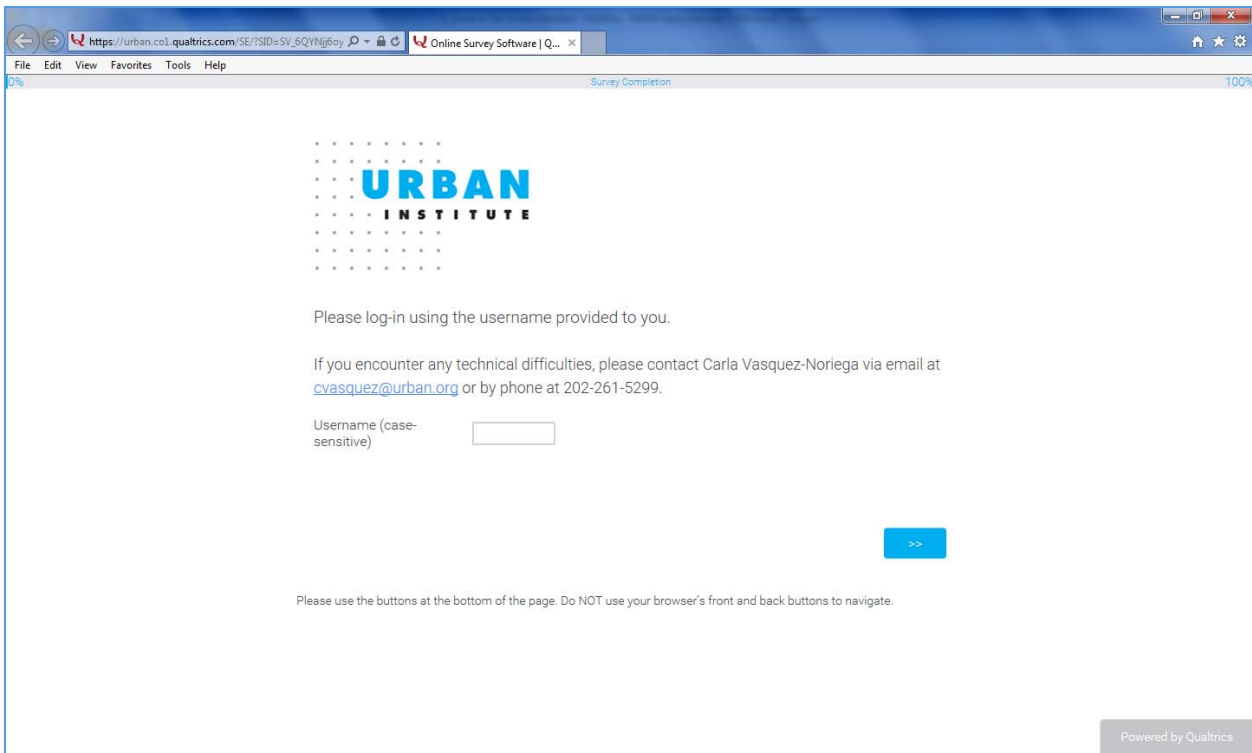
- o Police
- o Prosecutor's office
- o Either, depending on the circumstances
- o Both, the police and the prosecutor's office
- o Other (*please specify:* _____)

Conclusion

Thank you very much for participating in this survey. We truly appreciate the time you spent. The results from this survey will be used assess how APS data can be used to augment current knowledge and statistics about elder victimization. If you have any questions, concerns, or comments about this project, please contact either of the Principal Investigators: Janine Zweig, at jzweig@urban.org (phone: 518-791-1058) or Kamala Mallik-Kane at kkane@urban.org (phone: 202-261-5857).

Attachment D:

Selected screenshots from web-based survey data collection tool

URBAN INSTITUTE

Please log-in using the username provided to you.

If you encounter any technical difficulties, please contact Carla Vasquez-Noriega via email at cvasquez@urban.org or by phone at 202-261-5299.

Username (case-sensitive)

>>

Please use the buttons at the bottom of the page. Do NOT use your browser's front and back buttons to navigate.

URBAN INSTITUTE

Online Survey of State and Local APS Data Collection Practices in 2015

Welcome and Informed Consent

The Urban Institute, a nonprofit research organization in Washington DC, has been funded by the U.S. Department of Justice, Bureau of Justice Statistics (BJS), to examine how Adult Protective Services (APS) agencies respond to and collect data about elder abuse, neglect, and exploitation. The purpose is to assess the feasibility of using existing APS data to develop nationwide statistics about the number and characteristics of reported incidents of elder abuse, neglect, and exploitation.

The survey should take you approximately 30 minutes to complete. We will ask about how your agency responded to suspected elder abuse cases in 2015 and what kinds of data you recorded about cases. You can complete the survey in more than one session if you cannot complete the whole survey at one time. You may also choose to provide your username to colleagues within your agency, if you feel they can help you to complete the survey.

Your participation in this survey is completely voluntary. You can choose to skip any questions that you are not comfortable answering or stop taking the survey at any time.

URBAN INSTITUTE

I understand that my participation is voluntary and that I can stop participating at any time or refuse to answer questions in any part of the survey. By giving my name and contact information, and continuing beyond this screen, I am giving my consent to participate in this study.

Name:

The agency you work for:

Job title:

Telephone number:

Phone Extension:

Email address:

<<   >>

Please use the buttons at the bottom of the page. Do NOT use your browser's front and back buttons to navigate.

URBAN INSTITUTE

A. About your agency's recordkeeping and data reporting practices

A1. Did your agency focus exclusively on elder abuse between January 1 and December 31, 2015? If your agency went through substantial changes in 2015, please report on your practices during the majority of the year.

Note: for simplicity, we use the term "elder abuse" to encompass all forms of physical, sexual or psychological abuse against an older adult; neglect or abandonment by others; and exploitation of the elder's resources.

Yes, we focused on elder abuse only

No, we worked on elder abuse AND the abuse of younger vulnerable adults

No, we worked on elder abuse AND other types of cases *(please specify the other case types):*

URBAN
I N S T I T U T E

Victim (client) information

B1.1. What pieces of information **about victims** did your agency gather in the course of an *investigation* responding to suspected elder abuse in 2015? By "gathering," we mean collecting and recording information in any form, including on paper, in narrative form, or a database field.

Please respond "yes" to all the items that were available on your data collection forms, even if they were not always consistently filled in.

	Yes, electronically in a structured data field	Yes, electronically as free text	Yes, electronically, but don't know the field type	Yes, but on paper only	No, this was not recorded	Not applicable	Decline to answer	Don't know
a. Name	O	O	O	O	O	O	O	O
b. Social Security number	O	O	O	O	O	O	O	O
c. Date of birth	O	O	O	O	O	O	O	O
d. Victim/Client ID								

URBAN
I N S T I T U T E

B1.2. Following up, were any of the items you gathered **about victims** collected as part of the initial report, *before beginning an investigation*?

	Yes	No	Not applicable	Decline to answer	Don't know
a. Name	O	O	O	O	O
b.Social Security number	O	O	O	O	O
c.Date of birth	O	O	O	O	O
d. Victim/Client ID number assigned by agency	O	O	O	O	O
e. Age	O	O	O	O	O
f. Sex	O	O	O	O	O
g. Race	O	O	O	O	O
h. Hispanic ethnicity					

Attachment E-1:

Initial invitation letter

Online Survey of State and Local APS Data Collection Practices
Invitation to Participate

<Date>

Dear Adult Protective Services Representative,

You are invited to participate in an important survey. The Bureau of Justice Statistics (BJS) has sponsored The Urban Institute, a nonprofit research organization in Washington, DC, to examine how Adult Protective Services (APS) agencies manage data about elder abuse, neglect, and exploitation cases.

As part of this research, we are fielding a survey to assess whether existing APS data can help to fill gaps in national statistics about the number and characteristics of known incidents of elder abuse, neglect, and exploitation. Your participation is completely voluntary, but we appreciate your cooperation to make the results comprehensive, accurate, and timely.

This survey will be online.   It focuses on data elements that measure APS cases and the extent to which these are available in electronic formats in APS information systems. It will also ask you about your agency's policies on responding to cases, such as when it is appropriate to refer cases to the police or for prosecution.

Please complete your survey online within three weeks using this username <InsertUsername> at this link: <InsertLink>.

You can complete the survey in more than one session—the information you provide will be saved each time. You also can provide your username to colleagues within your agency, if you feel they can help complete the survey. Reports from this project will increase the field's understanding of elder abuse, neglect, and exploitation.

Thank you very much for your participation. If you need help with the survey, please contact our study's research assistant, Carla Vasquez-Noriega, at cvasquez@urban.org or 202-261-5299.

For any other questions or concerns, please contact either of the Principal Investigators— Janine Zweig at jzweig@urban.org or 518-791-1058; or Kamala Mallik-Kane at kkane@urban.org or 202-261-5857.

Sincerely,

Janine Zweig, Ph.D. & Kamala Mallik-Kane, M.P.H.

Principal Investigators

The Urban Institute

Attachment E-2:

One-page project description

PROJECT DESCRIPTION
Assessment of Administrative Data on
Elder Abuse, Mistreatment, and Neglect (EAMN)

BACKGROUND

Elder Abuse, Mistreatment, and Neglect (EAMN) is a growing concern as the population of elderly persons increases within the United States. Yet uniform and comparative statistics on reported EAMN and the response to those incidents are not available nationwide due to widespread variation in states' legal definitions of elder abuse and reporting mechanisms for tracking cases. This lack of uniform data has impeded policymakers' abilities to adequately estimate and track the prevalence of reported EAMN, make comparisons across jurisdictions, and evaluate the effectiveness of responses to EAMN.

PURPOSE

The Urban Institute—with funding from the U.S. Department of Justice, Bureau of Justice Statistics (BJS)—is assessing the feasibility of using existing data from Adult Protective Services (APS) agencies to fill gaps in currently available national data about EAMN. This project identifies key indicators of elder victimization needed by the field and assesses the extent to which APS agencies collect and maintain comparable data about EAMN cases. In particular, the project focuses on how APS agencies distinguish between criminal and less severe victimizations, and report EAMN to the criminal justice system.

ACTIVITIES

➢ An **online survey of state and local APS agencies** launches in 2016 to collect information on:

- o The specific scope of abuse reports that APS agencies respond to;
- o How APS record-keeping systems are structured;
- o Victim-, perpetrator-, and incident-level characteristics that are maintained within APS agencies' record-keeping systems; and
- o APS policies and practices for referring cases to the criminal justice system.

➢ In preparation for this survey, the project held a **convening of federal stakeholders** to determine the key indicator statistics needed to monitor EAMN and **telephone interviews with state APS representatives** to establish a high-level understanding of how APS data systems are organized.

RESULTS

The study's final report in 2016 will provide an overview of APS agencies' practices on detecting, reporting, and collecting data on EAMN. Specifically, the report will:

- Describe current data collection practices across states, including the processes by which EAMN cases are reported and types of data collected by APS agencies;
- Identify commonalities in reporting practices and data availability across states, as well as highlight gaps in key information; and
- Give recommendations to BJS on the feasibility and challenges of collecting nationwide statistical data on elder victimizations from APS agencies.

Project Team

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Janine Zweig, PhD
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Carla Vasquez-Noriega
Research Assistant
The Urban Institute
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(202)-261-5299
cvasquez@urban.org

Attachment F:

Initial invitation email

Subject: DOJ-Sponsored Online Survey of Adult Protective Services Data Collection Practices

Dear <Title> <Last Name>,

You are invited to participate in a survey, and you should have also received a formal invitation in the mail a few days ago. The Bureau of Justice Statistics (BJS) has sponsored The Urban Institute, a nonprofit research organization in Washington, D.C., to examine how Adult Protective Services (APS) agencies manage data about elder abuse, neglect, and exploitation cases. As part of this research, we are fielding a survey to assess whether existing APS data can help to fill gaps in national statistics about the number and characteristics of known incidents of elder abuse, neglect, and exploitation.

Your participation in this survey is completely voluntary, but we appreciate your cooperation to make the results comprehensive, accurate, and timely.   The survey focuses on data elements that measure APS cases and the extent to which these are available in electronic formats in APS information systems. It will also ask about your agency's policies on responding to cases, such as when it is appropriate to refer cases to the police or for prosecution.

This survey is online. You can complete the survey in more than one session—the information you provide will be saved each time. You also can provide your username to colleagues within your agency, if you feel they can help complete the survey.

Please complete your survey online (<url>) within three weeks using the username provided below.

Username: <User ID>

Thank you very much for your participation. If you need help with the survey, please contact our study's research assistant, Carla Vasquez-Noriega at cvasquez@urban.org or 202-261-5299.

For any other questions or concerns, please contact either of the Principal Investigators— Janine Zweig at jzweig@urban.org or 518-791-1058; or Kamala Mallik-Kane at kkane@urban.org or 202-261-5857.

Sincerely,

Janine Zweig, Ph.D. & Kamala Mallik-Kane, M.P.H.

Principal Investigators

The Urban Institute

Attachment G:

Follow-up email reminder

Subject: REMINDER: DOJ-Sponsored Online Survey of Adult Protective Services Data Collection Practices

Dear <Title> <Last Name>,

You are invited to participate in a survey. You should have also received a formal invitation in the mail a few days ago, as well as an invitation email. The Bureau of Justice Statistics (BJS) has sponsored The Urban Institute, a nonprofit research organization in Washington, DC, to examine how Adult Protective Services (APS) agencies manage data about elder abuse, neglect, and exploitation cases. As part of this research, we are fielding a survey to assess whether existing APS data can help to fill gaps in national statistics about the number and characteristics of known incidents of elder abuse, neglect, and exploitation.

Your participation in this survey is completely voluntary, but we appreciate your cooperation to make the results comprehensive, accurate, and timely.

This survey is online. You can complete the survey in more than one session—the information you provide will be saved each time. You also can provide your username to colleagues within your agency, if you feel they can help complete the survey.

Please complete your survey online (<url>) within three weeks using the username provided below.

Username: <User ID>

Thank you very much for your participation. If you need help with the survey, please contact our study's research assistant, Carla Vasquez-Noriega, at cvasquez@urban.org or 202-261-5299.

For any other questions or concerns, please contact either of the Principal Investigators— Janine Zweig at jzweig@urban.org or 518-791-1058; or Kamala Mallik-Kane at kkane@urban.org or 202-261-5857.

Sincerely,

Janine Zweig, Ph.D. & Kamala Mallik-Kane, M.P.H.

Principal Investigators

The Urban Institute

Attachment H:

Follow-up postcard reminder

Online Survey of State and Local APS Data Collection Practices

The Urban Institute is conducting a survey and we need your help! The survey assesses whether existing APS data can help fill gaps in national statistics about the number and characteristics of known incidents of elder abuse, neglect, and exploitation.

If you have already completed the online survey, please accept our sincere thanks. If not, please do so as soon as possible.

If you did not receive our invitation to complete the survey, please contact our study's research assistant for your login information –Carla Vasquez-Noriega at cvasquez@urban.org or 202-261-5299.

Janine Zweig, Ph.D. & Kamala Mallik-Kane, M.P.H.
Principal Investigators

Attachment I:

Follow-up telephone call script

Online Survey of State and Local APS Data Collection Practices

PHONE SCRIPT for Reminder to Participate

Hello, my name is <name>, and I'm calling from The Urban Institute on behalf of the Department of Justice. We sent you a letter and an e-mail back in <month> inviting you to participate in an online survey to assess whether existing Adult Protective Services data can help fill gaps in national statistics about the number and characteristics of known incidents of elder abuse, neglect, and exploitation.

Was the letter or e-mail with the survey invitation received?

YES	NO
Is there any help I can provide you in completing the survey? (Do you need me to provide your login link and username? Would it be easier to complete the survey over the phone?) IF WANT TO DO SURVEY OVER THE PHONE Is now a convenient time to talk through the survey, or would you like to schedule a time in the future? Is this the best number to reach you? Thank you very much. If you have any questions, feel free to call me at <phone number> or send me an email at <email>. IF DECLINES TO PARTICIPATE A lot of agencies delegate this work so that the burden isn't on one person *(suggest other analysts, APS workers, or data managers)*. We can also complete the survey with you over the phone. It's very important to the field to get as many of the selected agencies as possible to complete the survey to have a comprehensive understanding of APS systems across the country. We are developing recommendations on how APS data can be used to improve elder victimization statistics and would like to make sure all APS agencies' experiences are included. *If still refuse:* Thank you for your time. If you'd like to follow up, you can call me at <phone number> or send me an email at <email>.	I'm sorry about that. Can I confirm your e-mail address and send you a link to the survey? You should receive the link and a username in an e-mail from me shortly. There is a letter attached to the email which describes the purpose of the survey. In short, the Bureau of Justice Statistics has sponsored The Urban Institute, a nonprofit research organization in Washington, DC, to examine how Adult Protective Services agencies manage data about elder abuse, neglect, and exploitation cases. The survey focuses on data elements that measure APS cases and the extent to which these are available in electronic formats in APS information systems. It also asks about your agency's policies on responding to cases, such as when it is appropriate to refer cases to the police or for prosecution. Thank you very much. If you have any questions, feel free to call me at <phone number> or send me an email at <email>.

Attachment J:

Letter of project approval from Urban Institute IRB

INSTITUTIONAL REVIEW BOARD NOTICE OF APPROVAL
(Federalwide Assurance Number #0189)

PROJECT DIRECTOR: Kamala Mallik-Kane and Janine Zweig

TITLE: "Assessment of Administrative Data on Elder Abuse, Mistreatment, and Neglect"

SPONSOR AGENCY: US DOJ **PROTOCOL DATE:** Aug '11, rev. Apr '12; Jun '12; Aug '13; Mar '16

UI PROJECT NUMBER: 08585-000-00   **PROPOSAL NUMBER:** N/A

NATURE OF REVIEW:
(Check One)   FULL _____   EXPEDITED ___X___

MEETING DATE: _N/A_

TYPE OF APPROVAL
____ **PRELIMINARY**
____ **FULL IMPLEMENTATION**
____ **RENEWAL**
__X__ **AMENDMENT:** Survey and consent script.

Please note the following requirements:

PROBLEMS OR ADVERSE REACTIONS: If any problems in treatment of human subjects or unexpected adverse reactions occur as a result of this study, you must notify the IRB Chairperson immediately.

CHANGES IN PROTOCOL: If there are significant changes in procedures or study protocol, you must notify the IRB Chairperson before they are implemented.

RENEWAL: You are required to apply for renewal of approval at least annually for as long as the study is active. Your next review date should be on or before ___3/30/2017_____.

_____   March 31, 2016_____
IRB Chairman   **Date**
Martin D. Abravanel
Print or Type Name

Copy: PI

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