

**Health, Safety, Wellness, Financial Exploitation,  
Abuse, Neglect, and Human Trafficking Training**

# What is Financial Exploitation?

The fraudulent or otherwise illegal, unauthorized, or improper act, that uses the resources of an elder for monetary or personal benefit, profit, or gain, or that results in depriving an elder the rightful access to, or use of, benefits, resources, belongings, or assets.



<https://elder.findlaw.com/elder-abuse/elder-financial-abuse-and-exploitation.html>

# What is Abuse?

- Non-accidental infliction of physical and/or emotional harm.
- Sexual abuse upon a disabled adult or an elderly person by a relative, caregiver, household member or any other person.
- Active encouragement of any person by a relative, caregiver or household member to commit an act that inflicts or could reasonably be expected to result in physical or psychological/emotional injury to a disabled adult or an elderly person.

# Physical Abuse

## Physical Abuse:

- Infliction of physical pain or injury to an older person.

## Physical Abuse of Patient:

- Non-accidental use of force that results in bodily injury, pain or impairment, including, but not limited to, being slapped, burned, cut, bruised or improperly physically restrained.

# Signs and Symptoms of Physical Abuse

- Sprains, dislocations, fractures or broken bones.
- Bruises, welts or discolorations.
- Burns from cigarettes, appliances or hot water.
- Abrasions on arms, legs or torso that resemble rope or strap marks.
- Cuts, lacerations or puncture wounds.
- Fractures of long bones and ribs.
- Internal injuries evidenced by pain, difficulty with normal functioning of organs and bleeding from body orifices.

# Signs and Symptoms of Physical Abuse (Cont.)

- A history of similar injuries and/or numerous or suspicious hospitalizations.
- Injuries healing through secondary intention indicating that the member did not receive appropriate treatment.
- A history of member being brought to different medical facilities for treatment to prevent medical practitioners from observing patterns.
- Delays between the onset of injury and seeking of medical care.
- Signs of confinement (e.g., member is locked in his or her room).

# Sexual Abuse

- Includes unwanted touching, fondling, sexual threats, sexually inappropriate remarks or other sexual activity with an adult with disabilities.
- Touching, fondling, sexual threats, sexually inappropriate remarks or other sexual activity with an older person when the older person is unable to understand, unwilling to consent, threatened or physically forced to engage in sexual activity.

# Signs and Symptoms of Sexual Abuse

- Bruises on external genitalia, inner thighs, abdomen or pelvis.
- Difficulty walking or sitting not explained by other physical conditions.
- Stained or bloody underclothing.
- Sexually transmitted diseases.
- Urinary tract infections.
- Inappropriate sex role relationships between victims and suspects.
- Inappropriate, unusual or aggressive sexual behavior.
- Signs of psychological trauma, including excessive sleep, depression or fearfulness.



# Verbal or Emotional Abuse

## Verbal Abuse:

- Includes, but is not limited to, name calling, intimidation, yelling and swearing. May also include ridicule, coercion and threats.

## Emotional Abuse:

- Verbal assaults, threats of maltreatment, harassment or intimidation intended to coerce the older person to engage in conduct that he or she wishes and has a right to abstain from, or to refrain from conduct the older person wants to do and has a right to do.

# Psychological Abuse

- Berating, ignoring, ridiculing or cursing.
- Threats of punishment or deprivation.
- Significant weight loss or gain that cannot be attributed to other causes.
- Stress-related conditions including elevated blood pressure.
- Isolation by perpetrator:
  - Emotionally isolated.
  - Not speaking or engaging the member.
  - Lack of touch or other method of comfort.
- Depression, confusion, withdrawn, emotionally upset or nonresponsive.
- Cowers in the presence of the suspected abuser.

# Neglect

- **Neglect** – Repeated conduct or a single incident of carelessness that results or could reasonably be expected to result in serious physical or psychological/emotional injury or substantial risk of death.
- **Neglect of Customer** – The failure of another individual to provide an adult with disabilities with, or the willful withholding from an adult with disabilities of the necessities of life including, but not limited to, food, clothing, shelter or medical care.
- **Self-Neglect** – Individual neglects to attend to his/her own basic needs, such as personal hygiene, appropriate clothing, feeding or tending appropriately to Medical conditions.
- **Passive Neglect** – A caregiver’s failure to provide an eligible adult with the necessities of life including, but not limited to, food, clothing, shelter or medical care. This definition does not create a new affirmative duty to provide support to eligible adults; nor shall it be construed to mean that an eligible adult is a victim of neglect because of health care services provided or not provided by licensed health care professionals.

# Signs and Symptoms of Neglect

- Weight loss that cannot be explained by other causes.
- Lack of toileting that causes incontinence.
- Member sits in own urine and feces.
- Increased falls and agitation.
- Indignity and skin breakdown.
- Uncommon pressure ulcers.
- Evidence of inadequate or inappropriate use of medication.
- Personal hygiene is neglected; emotionally withdrawn.
- Lack of assistance with eating, drinking, walking, bathing and participating in activities.
- Little or no response to requests for personal assistance.

# Exploitation

Exploitation is the act of a person who stands in a position of trust and confidence with a disabled adult or an elderly person and knowingly by deception, intimidation or force:

- Obtains control over the person's funds, assets or property.
- Deprives the person of the use, benefit or possession of funds, assets or property.
- This intentional action can be temporary or permanent.
- Uses the person's funds, assets or property for the benefit of someone other than the disabled adult or elderly person.

# Types of Exploitation

## Exploitation of Customer:

- The illegal use of assets or resources of an adult with disabilities. It includes, but is not limited to, misappropriation of assets or resources of the alleged victim by undue influence, by breach of fiduciary relationship, by fraud, deception, extortion or in a manner contrary to law.

## Financial Exploitation:

- The misuse or withholding of an older person's resources by another person to disadvantage of the older person or the profit or advantage of a person other than the older person.

# Indicators of Exploitation

- Visitors ask the member to sign documents the member does not understand.
- Unpaid bills, Despite adequate financial resources, bills remain unpaid by the caregiver or other party.
- Lack of affordable amenities for the member, such as personal grooming items or appropriate clothing.
- New “best friends” who take an interest in the member’s finances.
- Legal documents, such as powers of attorney, which the member did not understand at the time he/she signed them.

## Indicators of Exploitation (Cont.)

- Unusual activity in the member's bank accounts. Includes large, unexplained withdrawals, frequent transfers between accounts or other activity that the member cannot explain.
- Caregiver expresses excessive interest in the amount of money being spent on the member.
- Belongings or property are missing.
- Suspicious signatures on checks or other documents. Includes signatures not matching the member's. Includes signatures and other writing by a member who cannot write.
- Absence of documentation about financial arrangements.



# Indicators of Exploitation (Cont.)

- Implausible explanations about the member's finances are given by the member or the caregiver.
- Member is unaware of or does not understand financial arrangements that have been made for him/her.

## Family and Caregivers:

- Do not provide an opportunity for the member to speak for himself/herself.
- See others who could impact a member's situation without the presence of the member.
- Have an attitude of indifference or anger toward the member.
- Blame the member for the member's condition. For example, accusation that incontinence is a deliberate act.
- Show aggressive behavior toward the member, Threaten, Insult, or Harass.

# Abandonment

Abandonment is defined as the desertion of a person by an individual who has assumed responsibility for providing care or has custody.

# Signs and Symptoms of Abandonment

- The desertion of a person in a hospital, nursing facility or other similar institution.
- The desertion of a person at a shopping center or other public location.
- Report of being abandoned.

# Increased Risk Factors or Traits of Abuse

- Likelihood of abuse, neglect or exploitation occurring increases for members in the presence of one or more risk factors. These include:
- Dependency on others for personal care.
- Dependency on others for financial management.
- Isolation from information about own rights and health.
- Diminished mental capacity.
- Serious health problems.
- Taking medications that affect cognitive status.
- Depression, anxiety or fearfulness.
- Recent losses, including the loss of a spouse, home or friend.

# Increased Risk Factors or Traits of Abuse (Cont.)

Problems and contributing factors exhibited by caregivers who are at risk to abuse, neglect or exploit include:

- Alcoholism
- Mental illness
- Stress
- Chronic fatigue
- Frequent medical consultation.
- History of marital violence and/or child abuse.
- Previous relationship difficulties.
- Conflicting demands of other family members.
- Problems with housing, finances and/or employment.
- Lack of support; lack of respite.

# Increased Risk Factors or Traits of Abuse (Cont.)

- The presence of a single risk factor or caregiver contributing factor does not by itself indicate that abuse or neglect is occurring or is likely to occur. It may, however, indicate the need for measures to be taken to reduce the potential for abuse or neglect in the future.
- Plan care managers, providers (including participant direct employees) and other staff having contact with members or caregivers should be trained to recognize the risk factors for abuse and neglect, including how and when to contact Adult Protective Services.

# Human Sex Trafficking

The recruitment, harboring, transportation, provision or obtaining of a person for a commercial sex act in which a commercial sex act is induced by force, fraud or coercion, or in which the person induced to perform such an act has not attained 18 years of age.

## Physical Signs of Adult Sex Trafficking:

- Multiple or recurrent STIs
- Abnormally high number of sexual partners
- Trauma to vagina and/or rectum
- Signs of physical trauma
- Somatization symptoms (recurring headaches, abdominal pain, etc.)
- Suspicious tattoos or branding

## Behavioral Signs of Adult Sex Trafficking:

- Depressed mood/flat affect
- Anxiety/hypervigilance/panic attacks
- Affect dysregulation/irritability Frequent emergency care visits
- Unexplained/conflicting stories
- Using language from “the life”
- Signs of drug or alcohol abuse

# Labor Trafficking

The recruitment, harboring, transportation, provision or obtaining of a person for labor or services through the use of force, fraud or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage or slavery.

## Physical Signs of Labor Trafficking:

- Malnutrition/dehydration
- Lack of routine screening and preventive care Poor dental hygiene.
- Untreated skin infections/inflamations
- Injuries or illness from exposure to harmful chemicals/unsafe water.
- Ophthalmology issues or vision complaints.
- Somatization

## Behavioral Signs of Labor Trafficking:

- Anxiety/panic attacks (for example, shortness of breath, chest pain).
- Unexplained/conflicting stories.
- Overly vigilant or paranoid behavior.
- Inability/aversion to make decisions independent of employer.
- Inability/aversion to speak with out an interpreter.
- Affect dysregulation/irritability.



# Reporting Human Trafficking

Mandated reporting warranted or the patient wishes to report

- Report to designated contacts and/or contact the NHTRC Hotline: **1-888-373-7888**.

Reporting not warranted and the patient does not wish to report

- Provide referrals and contact the NHTRC Hotline **1-888-373-7888**.

# Prevention Steps

- When a provider suspects there is a risk of abuse, neglect or exploitation, he/she should work with the Health Plan.
- The health plan determines if a member is at-risk for abuse or neglect, if the patient does not display signs or symptoms, the health plan will include in the plan-of-care specific interventions to reduce the member's risk.

Interventions may be tailored to the member's particular risk factor(s) and may include, one or more of the following:

- Increased frequency of care coordination face-to-face visits to monitor for potential abuse, neglect or exploitation.
- Education of the member on the types, risks factors, associated traits and symptoms of abuse, neglect and exploitation, as well as options for reporting abuse and neglect, including through the care manager or through support agencies, such as Adult Protective Services.

## Prevention Steps (Cont.)

- Alert the member's providers, including home and community-based services providers, of the need for heightened vigilance and surveillance, and review of the procedures for notifying the care manager of suspected abuse or neglect.
- Seek arrangements for respite for unpaid caregivers, to be provided for in the plan-of care.
- Increase informal social support for member through use of community activities or resources, e.g., senior centers, support group or worship attendance.
- Refer member, family or caregiver to mental health/substance abuse treatment.
- Refer member to social service agency if family resources are severely limited.

# When identifying abuse situations, utilize these Handle with care measures:

## Recognize risk factors of abuse, neglect and exploitation:

- Potential risk
- Signs and symptoms

## Assess each situation:

- Presence of possible problems or factors that might contribute to tendencies.
- Observation and inquiry (subject to privacy rights and level of cooperation).

## Prevention:

- If risk is determined, include specific plan-of-care interventions to reduce risk.
- Intervention
- Reporting

# Report of Abuse, Neglect or Exploitation

Although the law requires all persons to report suspected abuse, neglect and/or exploitation, certain professionals have a specific responsibility to report. These include, but are not limited to:

- Physicians, osteopaths, medical examiners, chiropractors, nurses or hospital personnel engaged in the admission, examination or care and treatment of elderly or disabled adults.
- Health and mental health professionals not listed above.
- Nursing home staff, adult-living facility staff, adult day-care-center staff, social worker, or other professional adult-care, residential or institutional staff.
- State, county or municipal criminal justice employees or law enforcement officers.
- Human Rights Advocacy Committee (HRAC) and Long-Term-Care Ombudsman Council (LTCOC) members.
- Banks, savings and loan or credit union officers, trustees or employees.

# Mandated Power

A mandated reporter is an individual who is required by law to report situations immediately in which he/she suspects an adult may have been abused, neglected or exploited or is at risk of being abused, neglected or exploited.

# Rights of Mandated Reporters

## Most states allow for:

- Immunity from civil and criminal liability unless the report was made in bad faith or with malicious intent.
- Identity protection; your consent must be given to reveal your identify.
- The court may order the identity of the reporter revealed. The court can then release confidential information without penalty.

# General Reporting Requirements (states may differ)

- Can you identify the person being abused? If known, provide address and/or location.
- What is the approximate age of the adult?
- Does an emergency exist?
- Can you describe the circumstances of the alleged abuse, neglect or exploitation?
- What are the names and relationships of other members of the adult household, if applicable?
- Is the adult incapacitated?
- Do you know the name and address of the caregiver if applicable?
- Do you know the name and relationship of the alleged perpetrators?
- Are there other people who may have knowledge of the adult?
- Do you know the name of the adult's physicians?
- What is your name, address, phone number? (You can report anonymously.)



# Important Reporting Processes

- Provider must report any suspected abuse, neglect or exploitation to the appropriate state agency. Provider must also report suspected abuse, neglect or exploitation to the Health Plan.
- The Health Plan will also report the suspected abuse, neglect or exploitation to the appropriate state agency.

# Reporting Requirements Florida

- Briefly consult on the appropriateness of a referral.
- If the member is in immediate danger, dial 911 or local police.
- Immediately contact the appropriate agency: Telephone: **1-800-96-ABUSE (1-800-962-2873)**, **Press 2** to report suspected abuse, neglect or exploitation of the elderly or a vulnerable adult. Florida Abuse Hotline toll-free number is available 24/7.
- TTY (Telephone Device for the Deaf): **1-800-453-5145**
- Fax a detailed written report with your name and contact telephone to: **1-800-914-0004**
- **Website:** <https://reportabuse.dcf.state.fl.us>

# Reporting

If you suspect Abuse, Neglect, Financial Exploitation, or Human Trafficking, **please contact your manager.**

