



# Prevent and Protect

A Family Guide to Neglect and Abuse in  
Nursing Homes and Other Residential  
Facilities

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# Introduction

We all want the best for our loved ones. A family's decision to entrust the care of a loved one to others comes with responsibility and concerns. This guide is designed to help families ask the right questions about the choice of a facility, how to prevent abuse and neglect before it happens, how to identify it if suspected, and what the law requires for the safety of our elderly population.

## Statistics

They may be called nursing homes, personal care homes, adult congregate living, domiciliary care homes, adult care, homes for the aged, or assisted living. Whatever the name, according to the [National Research Council \(US\) Panel to Review Risk and Prevalence of Elder Abuse and Neglect](#), about 2.6 million people live in these facilities in the US. Here is what is known:

- Estimates show that 43% of those 65 or older will enter a nursing home before they die.
- Women represent a larger percentage of the nursing home population, at 52% vs. 33%.
- Those who live in care facilities are at a much higher risk of abuse and neglect than those who live at home.
- There is a 300% higher risk of death for elders who experience any form of abuse, including verbal abuse.
- When nursing home staff was polled in a US survey, they reported that 36% had witnessed physical abuse of an elderly patient that year. Forty percent reported that they had psychologically abused patients, while 10% admitted to physical abuse.
- Dementia patients were more likely to experience abuse or neglect, and the numbers go up along with the level of their impairment, ranging from 27.5% to 55%. A 2010 study shows that 88.5% of participants with dementia experienced psychological abuse, 29.5% were neglected, and 19.7% suffered physical abuse.
- In [Illinois](#) in 2017, Adult Protective Services received more than 16,000 reports of abuse, neglect, and financial exploitation.

# Check Your Terms: Types of Residential Facilities



If you are looking for the right place for an elderly member of your family, it's easy to get confused by the various terms. Let's begin by outlining the difference between a facility known as a nursing home and the other types of senior housing communities. The difference is largely contingent on how much medical care your loved one needs on a daily basis.

## Nursing Home vs. Other Residential Facilities

Nursing homes are able to:

- Provide round-the-clock care to residents who have more complex health care conditions. The care is provided by skilled nurses, physical and speech therapists, and other professionals.
- As you tour various facilities, you will also notice that nursing homes are more institutional in appearance and residents often share a room. Much of a resident's time is spent in bed or with medical personnel.

Assisted living, memory care, or other similar centers provide:

- Custodial care for those with memory loss or some mobility issues. Medical issues are less complex, and round-the-clock care by skilled nurses and others is not needed.
- Assisted living centers often look like upscale apartment communities for the elderly, with private rooms or suites and communal dining. The residents are offered and are encouraged to participate in a wide variety of group activities every day.

# 6 Types of Elder Mistreatment

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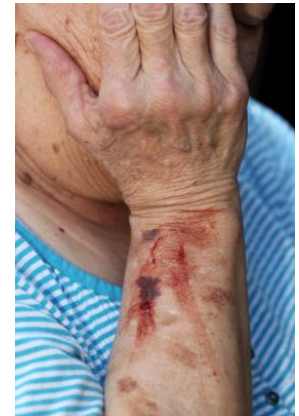
[Studies](#) show that elder mistreatment is prevalent and often underreported. If you have a loved one in a nursing home or residential facility, understanding the different types of elder mistreatment can help shield your loved one from harm.

There are two broad categories to consider here: Abuse and neglect. Abuse is the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish. Neglect is failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness.

There are various ways elder abuse and neglect manifest themselves. According to the [Center for Disease Control](#), there are six types of mistreatment that can occur among those over 60. Let's go over each one.

## Physical abuse

This occurs when someone caring for another harms or places someone in danger. It includes actions such as slapping, pushing, and hitting. The improper use of physical or medical restraints also falls under physical abuse, as does giving the wrong medication or incorrect amounts of medication. Physical abuse is more likely to occur with those who have memory problems, have no family members involved in their lives, are difficult to get along with, are under the total care of another, or are housed in deficient or overcrowded conditions.



## Sexual Abuse

Sexual abuse encompasses when a person is forced, tricked, coerced, or manipulated into unwanted sexual contact. It also includes sexual contact with elders who are unable to grant informed consent or sexual contact between service providers and their elderly clients.

Isolation and confusion in elderly persons can lead to abuse by those who care for them, and most abusers are the primary caregivers. Those who abuse the elderly often do so because they feel their actions will never be discovered or they will never be punished.

## Emotional Abuse

When someone acts in a way that causes emotional pain and suffering to an elderly person, it is considered emotional abuse. This type of abuse is one of the most difficult to identify or prove. It often happens in facilities when no family member is present, and residents may be fearful of reporting it, leaving it unchecked.

Emotional abuse of nursing home residents can result in significant psychological damage. Nursing home employees who emotionally abuse residents use a variety of tactics to control and humiliate. Here are some examples:

- Yelling, shouting, and screaming
- Threatening and pretending to harm the patient
- Intimidation
- Name-calling, insulting, and ridiculing the patient
- Talking to the patient as if they were a child
- Embarrassing the patient in front of others
- Making the patient feel guilty or upset
- Withdrawing affection or being callous and mean
- Scapegoating and blaming the patient

## Financial Abuse

Financial abuse happens when family members or strangers coerce the elderly regarding their spending or fraudulently use the person's money or credit. According to the [National Adult Protective Services Association](#), it is one of the fastest-growing categories of elderly abuse today, with one in twenty seniors reporting some kind of financial abuse in the recent past. The impact can cost the elderly their life savings and also lead to medical issues as money runs out. Those involved with attempting to protect the elderly from financial abuse say most financial abuse is swept under the rug, with only 1 in 44 instances being reported.

## Abandonment

This occurs when an elderly person is left in a hospital, nursing home, or other public location purposely and permanently. Abandonment of the elderly is defined as "deliberate desertion of a senior in need of care, be it by dropping them off at a care facility or leaving them in a public place." It is important to note that finding a care facility for a family member, transporting them to the facility, and never returning can be classified as abandonment.



**Neglect:** Neglect is the failure by a caregiver, whether hired staff or a family member, to fulfill the obligations related to the older person's care. This means the denial of any need related to shelter, food, clothing, hygiene, and medical care.

Some signs that identify neglect:

- No oral/dental care
- Not doing prescribed range-of-motion exercises
- Not changing residents after an episode of incontinence
- Ignoring residents who are confined to bed, particularly not offering activities to them
- Ignoring prescribed wound care
- Not giving residents regular baths
- Doing a one-person transfer (moving the resident from one location to another) when the resident requires a two-person transfer
- Not providing cueing or task segmentation to residents, especially those with dementia, who need to be given step-by-step instructions to complete tasks such as dressing, eating, and other daily routines
- Not providing scheduled visits to the bathroom or helping residents when they ask
- Not keeping residents hydrated
- Turning off a call light and taking no action on a resident's request

# How Can I Tell? Signs of Nursing Home Abuse and Neglect

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**It is easy to become complacent, but family members must stay involved with any loved one living at a residential facility. Regular personal visits are important. This will be critical over time: If you visit regularly, you'll notice changes in behavior and care quickly. Here are some red flags that may indicate a problem for the six main types of elder mistreatment.**

**Physical Abuse:** Unexplained injuries such as bruises, broken bones, head injuries, burns, and frequent use of medical providers.

**Emotional Abuse:** Fearful behavior, anxiety, severe and unexplained changes in mood or personality, fear of interacting with nursing home staff or caregivers, refusal to see family members or close friends, withdrawal from social support system, hesitation to talk openly.

**Sexual Abuse:** Development of sexually transmitted diseases, genital or anal pain, injury, or bleeding.  
**Financial Exploitation:** Discrepancies between the person's standard of living and available assets; unexplained depletion of assets; unexplained financial transactions, missing personal property items; sudden and unexplained changes in living arrangements, such as a new location or new roommate.

**Abandonment:** The absence of caregiver for long periods of time, with no back up for care; unsanitary or unclean living conditions; soiled bedding or clothing; lack of proper medical treatment.

**Neglect:** Malnourishment; lack of basic necessities such as food, water, shelter, bedsores or skin ulcers; medical needs not attended to; unpaid bills. Many residents need help with their personal hygiene, such as getting dressed, brushing their teeth, clipping their nails, bathing, and combing their hair. When a person is neglected, they are left to do these things on their own and often they are not capable of doing so. There may be slippery floors, bad lighting, unsafe wheelchairs, and walkers and unsafe furniture in the resident's room.

Note that neglect is different from self-neglect. Self-neglect involves refusal of care, refusing to eat, or refusing to take the necessary medication or perform basic personal hygiene. In some cases, this may indicate a fear of the caretakers.





## Preventing Abuse and Neglect: Before, During, and After Choosing a Home

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How can you prevent abuse and neglect in a residential home? It's a good question and not an easy one to answer, as the high levels of elder abuse attest. Abusive behavior of any kind relies on secrecy and the complacency of outsiders, making it difficult to spot.

However, there is much you can do to keep your loved one safe in their new home. If you are educated and actively involved, residential care center staff and management will become more accountable for the conditions and care standards in a home. Here are some steps and resources you and your family can take from the very beginning to prevent abuse or neglect.

### Choosing Facilities to Visit

Visit [NursingHomeCompare](#), a site maintained by Medicare for this purpose, when you are starting your search. You can access demographic information about a facility as well as its rating, data about the training of the staff, the quality of care of the residents (both short term and long term), and any penalties that have been imposed. [US News](#) also maintains a list of facility ratings by customers.

While making a short list, keep these tips in mind:

- Educate yourself about the types of facilities and levels of care available: Independent living, assisted living, memory care, nursing care. Which type is best for your loved one?
- Be realistic about which level of care your loved one needs.
- Enlist the advice of the person's doctor as you make decisions.
- Include your loved one in the decisions as much as possible.
- Enlist the help of as many family members as possible in the decision making.

## Visiting Facilities

When visiting facilities, be sure to:

- Make arrangements to eat a meal prepared on-site.
- Try to determine if the printed list of activities is being followed.
- Take tours at each facility at varying times during the day to observe routines.
- Talk to as many staff members as possible in each department to get the best feel for the way the home is run.



One of the most important aspects of a residential facility is staffing. Each state has its own requirements for staffing homes, federal law provides no specific standards for the “best” nursing home or resident facility staffing. Federal law does require all nursing homes to provide enough staff to safely care for residents. Refer to the Nursing Home Checklist to help answer questions about specific nursing homes you're looking at for your loved one.

In general, staff within a nursing home or residential center would have:

- Registered nurses (RNs)
- Licensed Practical Nurses (LPNs) or Licensed Vocational Nurses (LVNs)
- Nursing assistants

## After Move-In

After your loved one has moved into their new home, stay involved. Consider these steps:

- Encourage your loved one to stay active and participate in the planned events
- Volunteer at the facility
- Eat meals with your loved one at the facility when you can
- Get to know the staff and management. Express appreciation for what they do for your loved one.
- Ask questions and discuss concerns as they arise with staff or management. Follow up with an email to create a chain of communication as well as documentation.
- In addition to staying involved in the aforementioned ways, consider advocating for the rights and comfort of your loved one via these provisions.

## Rights of Residents

It is required that these rights be posted in every facility in a central location for residents and family members. These rights include:

- The Right to a Dignified Existence
- The Right to Self Determination
- The Right to Be Fully Informed
- The Right to Raise Grievances
- The Rights of Access (to services, activities, visitors, etc.)
- Rights Regarding Financial Affairs
- The Right to Privacy
- Rights During Discharge and Transfer

Contact [The Long-Term Ombudsman](#), a senior advocacy group, if there are problems obtaining these rights for your family member.

## Family Council

A Family Council is made up of family members of those residing in a particular facility. The Council becomes a cohesive, united voice for the elderly who often cannot speak for themselves. The group works with the facility administration to resolve issues and make the desired improvements. They can also help inform new residents and communicate with facility staff.

Ask if the facility has a family council. If it does, join and support the family council at your loved one's facility. If no family council exists, join with other family members to form one.

# How Does the Law Protect Seniors? Abuse and Neglect Laws in Illinois and Beyond

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As you might expect, elder abuse and neglect is illegal. [Illinois law](#) outlines a host of statutes for crimes against the elderly, such as Aggravated Battery Against a Senior Citizen (720 ILCS 5/12-4.6), Criminal Abuse or Neglect of an Elderly Person or Persons with a Disability (720 ILCS 5/12-21), Abuse and Gross Neglect of a Long Term Care Facility Resident (720 ILCS 5/12-19), and Criminal Abuse or Neglect of an Elderly Person or Persons with a Disability (720 ILCS 5/12-21 (4)). These laws are meant to shield the elderly from the types of mistreatment mentioned earlier in this guide.

For instance, let's consider Illinois law concerning fiduciary abuse (financial abuse). Taking money or property, cashing checks without permission, or denying services can all be considered financial abuse. Laws in Illinois recently increased penalties for financial exploitation of the elderly, making the crime a Class 1 or Class 2 felony depending on how much money was involved in the incident. Changes like this to Illinois law show how seriously the state takes cases of abuse and neglect of seniors.

## Mandated Reporters in Illinois

In 1988, [the Illinois Elder Abuse and Neglect Act](#) was passed. It includes a mandate that professionals in contact with seniors 60 and older who are unable to care for themselves must report any signs of abuse. This would apply, of course, to staff and management of senior residential facilities and gives family members another layer of protection for their loved ones.

If you are a mandatory reporter and you suspect abuse or neglect of an elder, be sure to follow the law and contact [Adult Protective Services](#),

## Elder Abuse and Neglect Laws in Other States

To learn about the laws in other areas, contact [Adult Protective Services](#) in your state. The APS office in your area has [many resources](#) available to help acquaint you with laws and information about how to take legal action if it is ever necessary.



## CARE: 4 Steps in Dealing with Suspected Abuse or Neglect

In cases where you suspect abuse or neglect, simply remember the acronym CARE: Confirm, Address, Report, Enlist. Here is how the four steps work.

### 1 Confirm with the Suspected Victim

It is important to keep the lines of communication open with your loved one living in a residential facility. They may be reluctant to speak up if they are being mistreated in some way, so here are some questions to generate a conversation:

- Have you been hit, punched, slapped, or threatened in any way with physical harm?
- Is food or drink ever withheld from you?
- Have you been touched in inappropriate ways? Does anyone make you feel afraid or uncomfortable?
- Do you feel safe here? Have you been threatened by anyone?
- Have you been asked to lend money to someone?
- If you call for help, does help arrive in a reasonable amount of time?
- Does anyone ask you for your social security number, credit card information, or other personal data?

## 2

### Address the Concern with the Facility

If the victim is in immediate danger, skip this step and call 911 immediately. Otherwise, bring the concern up with the administrators at the facility. Many elderly residents fear retaliation if they speak up, so you might want to sit down with the appropriate people without your loved one present. Simply ask for information and clarification about any incident that troubles you. Hopefully, this can clear up any misunderstanding. In any case, it alerts the facility that you are concerned enough to get involved.

If you do decide to report an incident, it may ease your mind to know that your identity will not be revealed without your written permission.

## 3

### Report the Neglect or Abuse to Adult Protective Services

[Adult Protective Services](#) (APS) is the agency tasked with protecting the safety, health, and well-being of adults with special needs or those who are vulnerable to mistreatment and neglect, making them unable to protect themselves. This includes our elderly population. This is the agency where you would report suspected abuse or neglect.

It isn't necessary to complete a formal reporting form of any kind, a phone call to the [APS office](#) in your area will most likely need the following, so it's best to gather the information before making the call:

- The names and relationships of the parties and the person reporting
- The age and condition of the victim (physical health and mental state)
- Your specific observations and concerns (including dates of events and a timeline, if possible)
- Any concerns of immediate harm
- Any assets of the victim that may be subject to exploitation
- The location of the victim and the best way to contact them
- Other potential witnesses and their contact information
- Any relevant documents you may have (such as copies of emails, letters, powers of attorney, wills, or trusts)

As a report comes to their agency, the APS is responsible for:

- Receiving and investigating reports of alleged instances of elder abuse
- Evaluating the victim's risks
- Assessing the victim's ability to fully understand their risks and to give informed consent
- Drafting a case plan for an abused adult
- Arranging for needed care, such as emergency shelter, medical attention, legal consultation, and related services
- Monitoring of services rendered
- General evaluation of each case

A caseworker is assigned to respond to a report of abuse, neglect, exploitation, self-neglect, or related offenses. The family can rely on this caseworker, whose first concern is protecting the victim.

## 4

### Enlist Legal Aid

The problem of elder abuse and neglect is a complex one, and many of the laws protecting our elderly population also cover other groups, too. An attorney specializing in these laws can save you and your family critical time as you work to protect your loved one.

Elder abuse can result in expensive medical bills, facility relocation, equipment costs, and damaging pain and suffering. A legal team with experience will work with you to recover damages and represent you throughout the legal process. You will know that you have done the best you can for your loved one.

Consider consulting a lawyer if:

- You suspect your loved one was neglected or abused
- You plan to file for damages against the person or organization who neglected or abused your loved one.

## 9 Notable Elder Advocacy Groups

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**Because elder neglect and abuse is unfortunately very common, there are many organizations dedicated to providing older adults and their families with support, resources, and more. Here are nine notable options that can assist in a variety of circumstances. Please note that these groups are no substitute for a lawyer in cases of clear neglect and abuse.**

[Administration for Community Living](#): Formerly known as Eldercare, this group operates under the belief that it is important that our aging relatives remain independent, healthy, and safe for as long as possible, no matter where they live. Legal assistance programs through the ACL work hand in hand to make sure this happens and to offer assistance when it doesn't.

The National Legal Resource Center and Legal Assistance Developers are also under the Administration for Community Living. These agencies can help you and your loved one understand their legal rights and make sure all benefits are received.

[Legal Services for the Elderly \(Title III-B\)](#): This organization provides legal assistance nationwide on issues such as income security, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination. This assistance is targeted towards older individuals in social and economic need.



[National Center on Law and Elder Rights](#): The NCLER is a central access point for a national legal assistance support system serving professionals and advocates working in legal and aging services networks. Please note that while it is an excellent resource, it is not a substitute for legal counsel. Families of elderly individuals who have been victims of abuse or neglect should consider hiring a private attorney.

[The National Center on Elder Abuse](#): This group provides long-term care ombudsman programs and state legal assistance development, as well as an advocacy program for the elderly.

[Office of Long-term Care Ombudsman Programs](#): Operating in all states, the District of Columbia, Puerto Rico, and Guam, thousands of local ombudsman staff and volunteers help residents and their families. Every state office headed by a full-time state ombudsman.

[U.S. Department of Justice Office for Victims of Crime - Elder Abuse and Mistreatment](#): The OVC was established to oversee diverse programs that benefit victims of crime. Its website has a page specifically for victims of elder abuse. It contains links to many agencies that will assist a senior following an incident of abuse or neglect.

[Alzheimer's Association](#): For caregiving specific to Alzheimer's and dementia, this group can provide support and resources. Use the website to find a local chapter for more information.

[National Adult Protective Services](#): This is a branch of APS focusing on financial services for the elderly. They are a good resource for preventing and dealing with cases of elder financial abuse as well.

# Q&A

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## **What If I Am the Victim of Elder Abuse?**

Call the police or 911 right away if you're in immediate danger. If the situation doesn't appear life threatening, please tell your doctor, a friend, or a family member you trust, or call the [Eldercare Locator helpline](#) immediately at **1-800-677-1116**. Specially trained operators will refer you to a local agency that can help. The Eldercare Locator is open Monday through Friday, 9 a.m. to 8 p.m. Eastern Time.

You can also report the situation to [Adult Protective Services](#), a long-term care [ombudsman](#), or the [non-emergency number for the police](#) in your area.

## **Can I Place a Camera in My Loved One's Room?**

Yes, if the facility is given notice and a sign is placed in the room to alert others that a recording device is present. The facility may require that the camera be visible to anyone entering the room. The resident or family is responsible for the cost of the equipment, installation, and maintenance.

Do not put a camera in the room without discussing it with the facility, since they have the right to deny the request. If your request is denied, consult with an attorney with experience with nursing home abuse before doing anything else.

The facility cannot remove a resident because of the request.

## **Where Can I Get Help in Illinois for Adult Protective Services?**

This Illinois government [site](#) can be used to find information on Illinois Department of Aging providers and services. General contact information is as follows:

Senior Helpline: 1-800-252-8966

TTY (text telephone for the hearing impaired): 1-800-206-1327

Email: [aging.ilsenior@illinois.gov](mailto:aging.ilsenior@illinois.gov)

## **What Is the Evidence of Elderly Abuse and Neglect in Illinois?**

From Adult Protective Services FY 2017 Annual Report:

16,507 reports of abuse, neglect, and financial exploitation received by the APS program. This increase reflects 2,971 reports involving adults with a disability between the ages of 18 and 59. Most are living at home or with a relative.

The majority of reports were for Financial Exploitation, (8,604), followed by Emotional Abuse (6,476), Passive Neglect (6,679), Physical Abuse (3,782), Willful Deprivation (2,268), Confinement (1,381), and Sexual Abuse (765).

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