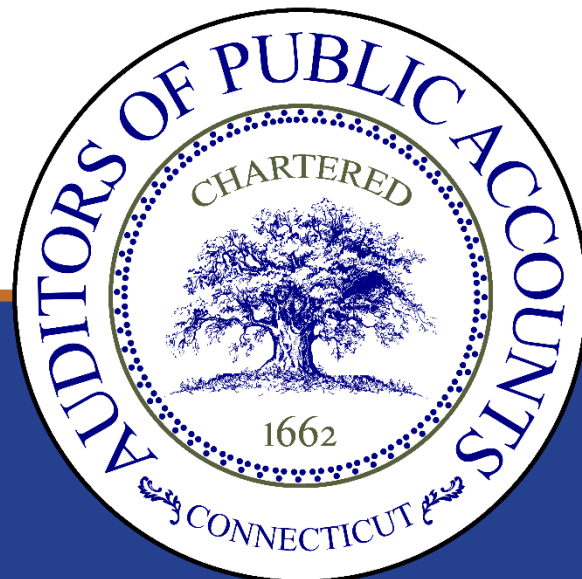


# AUDITORS' REPORT

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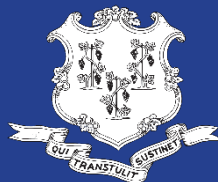
## PERFORMANCE AUDIT FOLLOW-UP REPORT

### **Protective Services for the Elderly As of January 2025**



**STATE OF CONNECTICUT**  
Auditors of Public Accounts

**JOHN C. GERAGOSIAN**  
State Auditor



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# INTRODUCTION

## Background

Our office published the [Protective Services for the Elderly](#) performance audit on August 11, 2021. The purpose of this audit was to assess how state agencies provided protective services for the elderly during calendar years 2017-2019. We focused on the efficiency and effectiveness of the Department of Public Health (DPH) Facility Licensing and Investigations Section (FLIS), Department of Social Services (DSS) Protective Services for the Elderly Program (PSE), and Department of Aging and Disability Services Long-Term Care Ombudsman Program (LTCOP). Specifically, the audit examined elder maltreatment prevention, identification, investigation, and intervention. We also assessed the level of coordination and communication across agencies with any responsibility for protecting elders.

According to the Connecticut Coalition of Elder Justice, approximately one in ten adults aged 60 or older are abused, neglected, exploited, or abandoned (i.e., maltreated) each year. PSE elder maltreatment complaint investigations increased by 29% from 2016 to 2019. During that same time, annual cases rose from 93 to 122 per worker. Attracting and retaining LTCOP volunteers has been a challenge, with the number of volunteers decreasing from 35 to 12 from 2014 to 2018. FLIS received 25% more complaints from facilities and services for elders from 2017 to 2019.

## Follow Up

On September 12, 2023, we requested an update from the Department of Social Services, the Office of the Long-Term Care Ombudsman (LTCOP), the Department of Public Health (DPH), the Department of Consumer Protection (DCP), the Commission on Women, Children, Seniors, Equity and Opportunity (CWCSEO), and the Department of Emergency Services and Public Protection (DESPP) on how each had addressed the report's 47 recommendations. Due to pending updates at the time of the original request, we sent DSS a request for updated responses on July 31, 2024.

The report identified 47 specific recommendations to help protect elderly Connecticut residents. In general, we recommended:

- The Protective Services for the Elderly Program should establish a maximum caseload per worker and increase efficiencies by exploring options for working in the field and providing relevant training and resources,
- The DPH Facility Licensing and Investigations Section should investigate non-critical complaints within the 45-day requirement and automatically contact LTCOP when investigating nursing home complaints,
- The Long-Term Care Ombudsman should develop standards related to frequency, documentation, and reporting of non-complaint related visits to nursing homes,
- LTCOP should develop a plan to recruit and retain volunteers and report on the plan's implementation,
- Mandated reporter training and reporting requirements need to be publicized and accessibility to the reporting system improved,

- Mandated reporters of elder maltreatment should be required to complete related training, and training already on the Protective Services for the Elderly website should be more widely publicized,
- All nursing home complaints should be filed directly with the Facility Licensing and Investigations Section and the state agencies should clarify which agency to contact for specific complaints, and
- The General Statutes should be amended to require prospective employees of homemaker-companion agencies to submit to state and national criminal background checks and prohibit the hiring of employees with certain criminal convictions.

## Highlighted Agency Accomplishments

Since the release of the performance audit, the Department of Social Services (DSS), Long-Term Care Ombudsman Program, and the departments of Public Health (DPH), Consumer Protection (DCP), and Emergency Services and Public Protection (DESSP) informed us they implemented or are in the process of implementing many of our recommendations.

DSS advocated for an amendment to Section 17b-451(a) of the General Statutes to require mandated reporters to expedite their reports to the Department of Social Services Protective Services for the Elderly Program by requiring them to submit the reports as soon as practicable but not later than 24 hours after the mandated reporter has reasonable cause to suspect or believe that an elder has been abused, neglected, exploited, abandoned, or requires protective services. It also updated its case management database to support this process. DSS advocated for an amendment to Section 17b-451(g) of the General Statutes to require newly hired mandated reporters to complete related training within 90 days. DSS implemented a new case management system that optimizes referrals, collects information for mandated reporters and training, tracks rates of refusal, and clearly flags outliers.

The LTCOP Regional Ombudsman now accesses and reports on non-complaint-related areas while conducting complaint-related visits to nursing homes when appropriate. LTCOP revised its policy that prevented individuals from serving as a volunteer resident advocate if they had family members living in any Connecticut nursing home. LTCOP updated the policy to allow them to volunteer provided they do not serve as advocates in their family member's facility. In December of 2024, LTCOP began providing its contact cards and facility outreach materials in English, Spanish, Creole, and Polish.

DPH updated its complaint policy to require investigations of non-immediate jeopardy medium-level complaints to begin within 45 business days of receipt. DPH also developed an automatic and uniform process to request police, emergency medical services, hospital, and other reports necessary to investigate alleged elder maltreatment.

DCP submitted a legislative proposal and helped successfully change Section 20-670 of the General Statutes to prohibit homemaker-companion agencies from hiring employees with a disqualifying offense as described in Section 19a-491c(3) of the General Statutes. DCP also proposed and helped successfully strengthen the background check and hiring language in Sections 20-670 and 20-678 of the General Statutes.

The DESPP Police Officer Standards and Training Division began notifying basic training recruits and state and municipal police departments that police officers are mandated reporters and are required to report suspected elder abuse, neglect, exploitation, and abandonment to DSS Protective Services for the Elderly Program within 72 hours of such suspicion or belief. DESPP also revised its basic training curriculum to educate officers on how to detect and address elder abuse, neglect, financial exploitation, and abandonment.

The Department of Social Services, the Office of the Long-Term Care Ombudsman, the Department of Public Health, the Department of Consumer Protection, the Commission on Women, Children, Seniors, Equity and Opportunity, and the Department of Emergency Services and Public Protection appear to have partially or fully implemented 85% of our audit recommendations. This information is solely based upon their responses to our update request and may be verified during our next departmental audit.

# AGENCY UPDATES

## Department of Social Services (DSS) Protective Services for the Elderly (PSE) Findings and Recommendations

### Finding Area 1

Mandated reporters must contact the Department of Social Services Protective Services for the Elderly Program (PSE) within 72 hours of suspected elder abuse, neglect, exploitation, abandonment, or need for protective services. However, PSE does not confirm the date the suspicion or belief first arose, making it impossible to determine whether the reporting occurred on time.

### Recommendation 1

Section 17b-451(a) of the General Statutes should be amended to require the Department of Social Services Protective Services for the Elderly Program to collect the date when mandated reporters first suspect elder abuse, neglect, exploitation, abandonment, or the need for protective services. To encourage timely reporting, the penalty for a first offense for not contacting the program within 72 hours should be changed to require that the mandated reporter retake the elder abuse training and provide the program with proof of successful completion of such training.

### Status

**IMPLEMENTED**

DSS successfully advocated changing the statute to require the agency to collect the date mandated reporters first suspected elder abuse, neglect, exploitation, abandonment, or the need for protective services. DSS informed us it included the capacity to collect the required information in a March 2024 upgrade to its case management database. With these changes, it appears DSS implemented the recommendation.

### DSS Update

"Agency implemented an upgrade to its case management system in March 2024. The capacity to collect the date information in a format to support tracking is part of that system. Legislative proposal has been submitted. Require mandated reporters who fail to report

maltreatment within the required timeframes for the first time to retake the elder abuse training and provide the program with proof of successful completion of such training. As of 7/1/2022, Public Act No. 22-145 included a revision of the PSE Statutes. This law requires that mandated reporters who fail to make a timely report retake the mandatory training regarding the detection and reporting of elder maltreatment. Legislation component was completed 7/01/2022; system with data tracking is in operation. As of March 2024, system has been implemented and collects the information noted above."

## **Finding Area 2**

Connecticut statute allows 72 hours for mandated reporters to report suspicion of elder maltreatment, which is longer than most states, potentially leading to a delay in elders receiving protective services.

### **Recommendation 2**

Section 17b-451(a) of the General Statutes should be amended to require mandated reporters to make their reports to the Department of Social Services Protective Services for the Elderly Program as soon as practicable but not later than twelve hours after the mandated reporter has reasonable cause to suspect or believe that an elder has been abused, neglected, exploited, abandoned, or is in need of protective services.

### **Status**

**IMPLEMENTED**

DSS reports the General Assembly revised Section 17b-451(a) of the General Statutes to reduce the deadline (from 72 to 24 hours) mandated reporters must report suspected elder maltreatment. Although DSS recommended a 12-hour deadline, the reduction was a significant improvement. Therefore, DSS implemented the recommendation.

### **DSS Update**

"A legislative proposal has been submitted to align mandated reporter timeframes with that of the Department of Children and Families to a 12 Hour reporting timeframe. Public Act No. 22-145 included a revision to the PSE Statutes. This law reduces the timeframe by when mandated professionals must report suspected elder maltreatment from 72 hours to 24. Legislation component completed 07/01/2022."

### Finding Area 3

Mandated reporters can make suspected elder maltreatment reports to the Department of Social Services Long Term Care Investigations Program only via fax or mail, which is potentially burdensome for some mandated reporters and could delay reporting.

#### Recommendation 3

The Department of Social Services Long Term Care Investigations Program should develop an online system for the transmission and acknowledgment of reports from mandated reporters suspecting elder maltreatment of long-term care residents.

#### Status

**IMPLEMENTED**

DSS informed us it implemented an online reporting capacity in its case management system in March 2024. It appears DSS implemented the recommendation.

#### DSS Update

"Agency implemented an upgrade to its case management system. Online reporting capacity is part of the new system and DSS will continue to explore feasibility of an auto referral to Ombudsman's Program at Department of Aging and Disability Services (OMB) when family is referred to OMB. As of 8/1/2023, system replacement includes specifications for an online portal to receive W-410 forms. As of March 2024, system with referral functionality implemented and collects the information noted above."

### Finding Area 4

The Department of Social Services Protective Services for the Elderly Program currently only receives reports of suspected elder abuse, neglect, exploitation, and abandonment by telephone, fax, or mail. Absence of an online reporting option is inefficient and inconvenient and could lead to reporting delays.

#### Recommendation 4

The Department of Social Services Protective Services for the Elderly Program should develop an online reporting tool to receive reports of suspected elder abuse, neglect, exploitation or abandonment. The reporting tool should generate an automated confirmation email to document the submission of the report.



**Status**

**IMPLEMENTED**

DSS successfully posted a fillable online PDF referral form. Since the department established this reporting capacity in March 2024, DSS implemented the recommendation.

**DSS Update**

“Funding to support online reporting capacity has been approved. Implementation will occur in alignment with deployment of new case management system. The most secure means to confirm referral receipt will be identified during system development. Explore with IT on the viability of online reporting prior to development of Salesforce System. As of 06/08/2023, Fillable PDF with dedicated PSE Referrals inbox deployed for public use. As of 08/01/2023, system replacement includes specifications for an online portal. Online fillable PDF implemented 6/2023; online portal in state fiscal year 2024. As of March 2024, system has been implemented and has the required functionality.”

**Finding Area 5**

Department of Social Services Protective Services for the Elderly Program social workers did not consistently meet the requirement to conduct face-to-face visits with clients every 30 days, which led to a lower quality of service.

**Recommendation 5**

Department of Social Services Protective Services for the Elderly Program supervisors should ensure that social workers conduct face-to-face visits with elders every 30 days. Management should consider modifying the PSE Procedure Manual to allow for exceptions to the 30-day visitation policy when an appropriate reason is clearly documented in the case record.

**Status**

**IMPLEMENTED**

DSS informed us it incorporated procedures related to triaging and interim follow-up in its procedure manual. The March 2024 modernization of the database enables DSS staff to track visits and enhance decision making.

**DSS Update**

“Revised Guidance has been issued in a procedural memo on 05/20/21. Applicable language from the manual is noted below:

Other Visits:

Interim Visits: Interim follow-up with clients shall be a minimum of every 30 days.

Supervisors shall triage cases to determine the means of follow-up assessments. This shall include:

- In-person by a DSS Social Worker
- In-person by a proxy (e.g., in-home service provider); or
- Via alternative means such as telephone calls, FaceTime (state phone), or MS Teams.

Some factors to consider when determining the means of interim follow-up shall include:

- Information obtained from the assigned social worker's initial assessment
- Information received from the reporter/other mandated reporters, such as, medical providers, hospitals, police, municipal social service agencies, or in-home service providers,
- Reports from family members, neighbors, and other persons relevant to the allegations in the report and safety of the elder.

Modernization of database completed in SFY 2024. The new database allows staff to track visits due more easily so that decisions on what steps should be taken to make interim contact with client served. System has been implemented and collects the information on follow-up visitation"

## **Finding Area 6**

Elder maltreatment cases that meet statutory requirements for investigation by the Department of Social Services Protective Services for the Elderly Program (PSE) have been increasing annually while the number of available social workers has decreased, leading to less timely services for some clients.

### **Recommendation 6**

Department of Social Services Protective Services for the Elderly Program management should establish a maximum caseload per social worker and ensure that staffing remains adequate to meet the needs of the program.

**Status**

**NOT IMPLEMENTED**

DSS informed us that it does not have the program resources to establish a maximum caseload per social worker.

**DSS Update**

“The development of caseload standards is an important goal of PSE. Experts in the field, including entities such as the National Adult Protective Services Association (NAPSA) and the federal Administration for Community Living, concur that an appropriate limit on the number of cases assigned to social worker is needed for programs to function efficiently and make successfully. The PSE program needs resources to convene needed subject matter experts (e.g., social workers, supervisors, and researchers) to identify PSE staff tasks, conduct a well-designed and executed program time study of the tasks performed, perform analysis of the results, and implement the recommended standards. At this time the PSE program lacks the resources to adequately carryout these activities.”

**Finding Area 7**

The Department of Social Services Protective Services for the Elderly Program does not accept reports from first responders who witness elders in self-neglectful situations if they are subsequently admitted to the hospital. This could cause elder maltreatment to go uninvestigated.

**Recommendation 7**

The Department of Social Services Protective Services for the Elderly Program should accept all first responder reports of elder self-neglect regardless of hospital admission status and amend the PSE Procedure Manual to reflect this change.

**Status**

**NOT IMPLEMENTED**

DSS informed us it will not implement any changes to case acceptance for hospitalized self-neglecting clients.

**DSS Update**

“As 07/01/2022, a meeting was held with the Connecticut Hospital Association (CHA) Discharge Planners on 06/26/2022 to clarify roles and responsibilities. The meeting with CHA was to clarify the Department's position. Procedural guidelines are in development. A review of our existing procedural manual found it to be clear. No changes will be implemented with regard to case acceptance for hospitalized self-neglecting clients.”

## Finding Area 8

Some Department of Social Services Protective Services for the Elderly Program employees do not have enough guidance to determine the substantiation of allegations, leading to potential subjectivity and inconsistency in worker determinations.

### Recommendation 8

Department of Social Services Protective Services for the Elderly Program employees should be trained on substantiating allegations to ensure consistency.

### Status

**PARTIALLY IMPLEMENTED**

DSS informed us that it is modernizing its case management system, but the implementation schedule did not allow for system updates to support training employees on substantiating allegations. Once DSS implements procedural guidance on substantiation of allegations, the recommendation will be implemented.

### DSS Update

“Enhancements to current procedural guidelines are in development. As of 8/31/2023, the case management database for the PSE Program is being modernized and the database will provide guidance on cases about substantiation. The schedule for implementation did not allow for updates to the system to support substantiation findings.”

## Finding Area 9

More than 36% of referrals made to the Department of Social Services Protective Services for the Elderly Program (PSE) include allegations of financial exploitation; however, PSE does not have the necessary resources to adequately investigate financial exploitation cases.

### Recommendation 9

The Department of Social Services Protective Services for the Elderly Program should contract with or hire a forensic accountant or other specialist to support social workers on financial exploitation cases.

### Status

**PARTIALLY IMPLEMENTED**

DSS attempted to increase its capacity to adequately investigate financial exploitation cases. The department requested forensic accounting or examiner positions and is waiting for a response.

### DSS Update

"DSS seeks to advance Financial Exploitation Investigations as follows:

- Enhance the statewide Financial Exploitation specific training curriculum.
- Strengthen Financial Exploitation investigation skills and confidence for PSE Social Workers and Supervisors.
- Reduce "unknown" Financial Exploitation decisions; and
- Improve the quality of Financial Exploitation evidence for DSS-PSE and its prosecutorial and law enforcement partners

Contractual options were explored. Contracting the service appears cost prohibitive. Exploration of potential job classifications is pending (options include Accounts Examiner, and Forensic Fraud Examiner). As of 8/30/2023, staffing request has been submitted. Completion date is pending."

## Finding Area 10

Department of Social Services Protective Services for the Elderly Program social workers receive information for financial exploitation cases via compact discs (CD) that cannot be read in a timely manner because the regional offices do not have CD readers.

### Recommendation 10

Each Department of Social Services Protective Services for the Elderly Program regional office should have a compact disc drive.

### Status

**IMPLEMENTED**

DSS informed us it purchased compact disc readers and deployed them to the regional offices as of March 31, 2023.

### DSS Update

"Request has been submitted and purchase approved. Items backordered. Ticket# DITS-190862 (Submitted November 4, 2021). As of 07/01/2022, CD readers deployed March 2022. Completed 03/31/2022."

## Finding Area 11

Department of Social Services Protective Services for the Elderly Program social workers report barriers to conducting work in the field, potentially leading to decreased efficiency and delays in service.

### Recommendation 11

Department of Social Services Protective Services for the Elderly Program management should explore options to promote working in the field, including providing training and written guidance clarifying when joint visits are appropriate, strengthening community partnerships to arrange for safe workspace in the field, and streamlining processes to reduce office paperwork.

### Status

**IMPLEMENTED**

DSS informed us it consulted with the Adult Protective Services Technical Assistance Resource Center to explore technology solutions to support safety. It is exploring a worker personal safety

application and implemented GPS/ Routing software. DSS offers two safety classes to social workers, implemented additional guidance in the PSE Procedural Manual to support decision making regarding joint visitation, and deployed a new database which has reduced office paperwork. With these actions, the recommendation has been implemented.

### **DSS Update**

“The Department has sought consultation from the Adult Protective Services Technical Assistance Resource Center to explore technology solutions to support safety including: GPS/ Routing Software Applications and Worker Personal Safety Applications. These efforts remain pending. The personal worker safety application is further along in exploration. As far as trip routing, staff have access to Google Maps, which can optimize trips. The department already offers two safety classes to Social Workers that are administered by the Office of Organizational and Skill Development: Situational Awareness: Preventing and Defusing Hostile Exchanges-Course ID: DSS-GSEF-193. Situational Awareness in the Field is part of Social Worker Core Training. Completed 08/30/2023. PSE Procedural manual was updated to include additional guidance on factors to support decision making regarding joint visitation. The deployment of the new database has limited the frequency of producing external documents (e.g., service authorization requests and service plan tasks are now incorporated into the new database and allow for paperless activities).”

## **Finding Area 12**

The number of Department of Social Services Protective Services for the Elderly Program (PSE) cases referred for legal assistance has decreased despite an increase in PSE conservatorship cases, which suggests that social workers are handling more legal matters independently. Without proper training, this could lead to decreased service quality.

### **Recommendation 12**

The Department of Social Services Protective Services for the Elderly Program should consider annual staff training on handling cases with legal matters, including conservatorship petitions.

### **Status**

**IMPLEMENTED**

DSS informed us workers have access to legal consultation and the Office of Legal Counsel, Regulations and Administrative Hearings (OLCRAH) staff have been assigned to provide primary support for these activities. While DSS has not developed an annual training on

handling legal matters, including conservatorship petitions, we consider its efforts satisfied this recommendation.

**DSS Update**

“As of 2/9/2023, workers have access to legal consultation and OLCRAH staff have been assigned to provide primary support for these activities and an email address was created by the legal department to support consultation. [DSSPSElegalconsults@ct.gov](mailto:DSSPSElegalconsults@ct.gov) Staff have access to legal consultation and procedures are in place to facilitate it. Client issues that require court or legal consultation are addressed on a case-by-case basis. Staff are aware of this availability and case specific consultation occurs regularly.”

**Finding Area 13**

Elders refuse Department of Social Services Protective Services for the Elderly Program (PSE) services at different rates, depending on the service regions. This may be due to differences in PSE office approaches and could result in depriving elders of needed services.

**Recommendation 13**

Department of Social Services Protective Services for the Elderly Program management should determine why some regions have higher service refusal rates and implement strategies to encourage program participation.

**Status**

**IMPLEMENTED**

DSS informed us it held training sessions with supervisors to help implement strategies to support social worker client engagement. The department’s update of its PSE case management database allows it to track rates of refusal. DSS implemented this recommendation.

**DSS Update**

“As of March 2024, the case management database for the PSE Program is modernized and the database is able to tracks rates of refusal by office and worker. This data will be used to support supervision. Training sessions held with supervisors to foster their capacity to support social worker’s client engagement. This includes topic: How to Understand Barriers to Motivate Clients and How to Work on Our Own Internal Bias. Training completed Summer 2023; Database updated in state fiscal year 2024. System has been modernized to collect incidents when workers are denied entry to a client’s residence.”



## Finding Area 14

The Department of Social Services Protective Services for the Elderly Program (PSE) Procedure Manual states that all cases will be closed within 90 days of intake with extensions approved by supervisors. However, some social workers informed us that they were not aware of this requirement.

### Recommendation 14

The Department of Social Services Protective Services for the Elderly Procedure Manual should include procedures for documenting case closure extensions. PSE should train its employees on the policy.

### Status

**IMPLEMENTED**

DSS provided procedures to identify factors that warrant a case closure. With the March 2024 modernization of its case management database to more clearly flag outliers, DSS implemented this recommendation.

### DSS Update

"Additional guidance regarding case closure timeframe documentation is pending. Procedures are in place to identify factors that warrant case closure:

#### Closing the Case

- If the investigation results in a determination that the original allegation(s) is not substantiated, and no abuse/neglect/exploitation is found to exist, the case will be closed with no action taken.
- If the investigation results in a determination that the original allegation(s) of abuse/neglect/exploitation is substantiated and found to exist, and the capable elder refuses PSE Intervention, the case will be closed with no action taken.
- If resources have been secured and risk has been mitigated, then the case will be closed.
  - If the investigation results in a determination that the original allegation(s) of abuse/ neglect/exploitation is substantiated or abuse/neglect/exploitation is found to exist and the elder agrees to PSE intervention or it is determined that the elder does not have the capacity to make such a decision, the case will be maintained for ongoing social work intervention.

As of March 2024, the case management database for the PSE Program has been modernized and the database flags outliers more overtly. System has been implemented and has the required functionality to flag outliers.”

## Finding Area 15

Some mandated reporters question whether the Department of Social Services Protective Services for the Elderly Program (PSE) received and investigated reports of elder maltreatment, since PSE does not consistently notify them of its investigation findings.

### Recommendation 15

The Department of Social Services Protective Services for the Elderly Program should consider implementing processes that would ensure follow-up communication is sent to mandated reporters, including modifying program policy to allow the investigation results to be sent electronically and verifying contact information.

### Status

**IMPLEMENTED**

DSS developed a process that ensures follow-up communication is sent to mandated reporters. This change is part of the new case management database completed in March 2024.

### DSS Update

“As of March 2024, system has been implemented and has the required functionality. The case management database for the PSE Program has been modernized and highlights and tracks issuance of W-676. In addition, an online portal to confirm receipt and acceptances of PSE cases has been incorporated into the referral portal.”

## Finding Area 16

There are currently outdated and inaccurate statutory references in the Department of Social Services Protective Services for the Elderly Program regulations.

### Recommendation 16

There are outdated and inaccurate statutory references in Section 17b-461 of the Regulations of State Agencies for the Department of

Social Services Protective Services for the Elderly Program which need to be updated.

**Status**

**PARTIALLY IMPLEMENTED**

DSS is working towards updating its regulations and is awaiting federal guidance to ensure there are no conflicts with proposed federal law.

**DSS Update**

“The department is coordinating with the Office of Legal Counsel, Regulations and Administrative Hearings (OLCRAH) on the revision of the PSE Regulations. In addition to monthly legal meetings a bi-weekly meeting with an assigned legal liaison has been implemented. As of 07/01/2022, regulation development is in process. As of 08/01/2023, the federal Administration for Community Living (ACL) has announced that it will be releasing regulations for comment in summer 2023. DSS will await federal guidance so that there are no conflicts with proposed federal law, redundant effort, and adjust inconsistencies. As of 09/12/2023, ACL released Notice of proposed rulemaking to modify the implementing regulations of the Older Americans Act of 1965 to add a new section related to Adult Protective Services (APS). Public comments are requested through November 13, 2023.”

## **The State Long-Term Care Ombudsman Program (LTCOP) Findings and Recommendations**

### **Finding Area 17**

Although program responsibilities include regular, non-complaint related visits to nursing homes, the State Long-Term Care Ombudsman Program (LTCOP) does not specify the anticipated frequency of such visits, making expectations unclear and accountability difficult for consumers, providers, and others.

**Recommendation 17**

The State Long-Term Care Ombudsman should develop a minimum standard of frequency of non-complaint visits to nursing homes and other long-term care facilities and amend Section 17-408 of the General Statutes to reflect that standard. Section 17a-417 of the General Statutes should be amended to require the State Long-

Term Care Ombudsman to include outcomes of meeting the visitation standard and each facility's visitation frequency in its annual report.

**Status**

**PARTIALLY IMPLEMENTED**

LTCOP reports it has updated its policies to require quarterly visits to all skilled nursing facilities. It did not extend this requirement to other residential care settings and there have been no statutory changes.

**LTCOP Update**

"My concern was in the recommendation, after further reflection the reference to other long term care facilities. Our policies and procedures will reflect the requirement to do quarterly visits to all skilled nursing facilities, however we do not have the staff or capacity to duplicate that in residential care settings like managed residential communities/assisted living. In order to do that we would need to have an expansion in the number of team members within the program."

**Finding Area 18**

Regional ombudsmen do not have a uniform documentation method for non-complaint facility visits, which may lead to inconsistent assessments and reporting.

**Recommendation 18**

The State Long-Term Care Ombudsman should develop and use a checklist for documenting non-complaint visits to long-term care facilities.

**Status**

**PARTIALLY IMPLEMENTED**

LTCOP developed a checklist and is working towards full implementation.

**LTCOP Update**

"We have this form completed and are working toward full implementation in our utilization, however due to continued turnover within the program and ongoing education without a supervisor or trainer, we have not yet reached full compliance."

## Finding Area 19

While visiting a nursing home because of a complaint, some state Long-Term Care Ombudsman programs expand their visit to assess non-complaint related areas. Similarly, the Connecticut program appears to conduct a broader assessment during a complaint visit but does not document the non-complaint related aspects of the visit, leading to an underreporting of such visits.

### Recommendation 19

The State Long-Term Care Ombudsman should consider assessing and reporting on non-complaint related areas while conducting complaint related visits to nursing homes.

### Status

**IMPLEMENTED**

LTCOP reports the Regional Ombudsman assesses and reports on non-complaint related areas while conducting complaint-related visits to nursing homes when appropriate.

### LTCOP Update

"The program has instituted this into our visitation process for Regional Ombudsman."

## Finding Area 20

The State Long-Term Care Ombudsman Program is required to report the number of annual facility inspections (surveys) their personnel participated in with the Department of Public Health Facility Licensing and Investigations Section (FLIS). However, we found participation was not consistently documented, leading to an undercounting of this required activity.

### Recommendation 20

The State Long-Term Care Ombudsman should clarify documentation requirements in its policy manual regarding its participation in Department of Public Health Facility Licensing and Investigations Section complaint investigations or annual surveys. LTCOP should train regional ombudsmen on its new policy.

**Status**

**PARTIALLY IMPLEMENTED**

LTCOP is working with DPH to develop a formal process regarding its participation in complaint investigations and annual surveys.

**LTCOP Update**

"We are working with DPH to develop a formal process and will update the policy manual once we have that is in place in a formal way."

**Finding Area 21**

There has been a steep decline in the number of volunteer residents' advocates, potentially impacting protective services and advocacy for nursing home residents.

**Recommendation 21**

The State Long-Term Care Ombudsman should identify the reasons for the decline in the number of volunteer residents' advocates and develop a plan to increase recruitment and retention of volunteers. LTCOP should include a progress report on plan implementation in its annual report.

**Status**

**NOT IMPLEMENTED**

LTCOP informed us it has not implemented this recommendation due to lack of resources. LTCOP continued volunteer outreach through advertising and health fairs. LTCOP requested an ombudsman to further develop the volunteer residents' advocates program to increase recruitment and retention but has not received the resources for the ombudsman.

**LTCOP Update**

"21 is not implemented due to the lack of resources. We have continued our outreach through advertising and at health fairs however because we are not able to support the volunteers as well as we could if we had a volunteer coordinator they often do not stay long. The Ombudsman's office submitted a request for additional Ombudsman to further develop the volunteer program, however the program does not have the resources to do this currently."

**Finding Area 22**

The State Long-Term Care Ombudsman Program does not allow people to become volunteer residents' advocates if they

have family members living in any Connecticut nursing home, reducing the pool of potential volunteers.

**Recommendation 22**

Applicants with family members residing in Connecticut nursing homes should be considered for State Long-Term Care Ombudsman Program volunteer residents' advocate positions, provided the volunteer is not placed in the same facility as the family member.

**Status**

**IMPLEMENTED**

LTCOP expanded volunteer residents' advocate positions, provided the volunteer is not placed in the same facility as their family member.

**LTCOP Update**

"The program has made this change and will accept someone with a family in a facility provided the volunteer services are not in the same facility as the family member."

**Finding Area 23**

The State Long-Term Care Ombudsman Program (LTCOP) voicemail system does not instruct after-hours callers to contact 9-1-1 in case of emergency or 2-1-1 United Way Infoline to speak with someone immediately for urgent matters. This could lead to potential delays for elders in need of emergency assistance or human contact for urgent matters.

**Recommendation 23**

The State Long-Term Care Ombudsman Program should change its after-hours voicemail system to instruct callers to dial 9-1-1 for emergencies and 2-1-1 to speak with a person immediately regarding urgent matters.

**Status**

**IMPLEMENTED**

LTCOP changed its after-hours voicemail system to instruct callers reporting urgent matters to dial 9-1-1 for emergencies and 2-1-1 to speak with a person immediately.

**LTCOP Update**

"The program completed this."

## Finding Area 24

The postings at long-term care facilities notifying residents and relatives to contact the State Long-Term Care Ombudsman Program for complaints are in English. The information is not available in Spanish, potentially depriving some residents and relatives of this information and access to the State Long-Term Care Ombudsman Program.

### Recommendation 24

The State Long-Term Care Ombudsman Program should post contact information for residents and their relatives in English, Spanish, and other frequently spoken languages in the region.

### Status

**IMPLEMENTED**

As of December 2024, LTCOP has English, Spanish, Polish, and Creole contact cards and facilities outreach materials with a QR code leading to the LTCOP website. The recommendation is fully implemented.

### LTCOP Update

"Recommendation 24 has now been completed. The LTCOP has contact cards and facility outreach materials in English, Spanish, Polish, and Creole with a QR code that leads to our website."



## Finding Area 25

The State Long-Term Care Ombudsman Program Annual Report excludes information necessary to understand the number of volunteers and types of elder maltreatment complaints received from Connecticut long-term care facilities.

### Recommendation 25

The State Long-Term Care Ombudsman Program Annual Report should include the number of program volunteers and more detailed complaint information using tables and graphs.

### Status

**IMPLEMENTED**

The LTCOP annual report included the number of program volunteers and more detailed complaint information using tables and graphs.

### LTCOP Update

"The program has started to include this information in our [annual reports](#) starting in 2022."

## Finding Area 26

The State Long-Term Care Ombudsman Program last issued its policies and procedures manual in 2002, making it outdated for employees and volunteers relying on it to perform their duties and responsibilities.

### Recommendation 26

The State Long-Term Care Ombudsman should regularly review its policies and procedures manual and make necessary updates to reflect changes in state and federal policy or efforts to improve the program's efficiency and effectiveness. LTCOP should post the manual on its website and distribute it to program employees and volunteers.

### Status

**PARTIALLY IMPLEMENTED**

LTCOP completed a full review of its policies and procedures and updated the manual to meet current practices. The policies are available internally to employees. The LTCOP plans on posting the

manual once the program guidelines are fully updated to reflect changes in state and federal policy.

**LTCOP Update**

“We have done a full review and updated it to meet our current practices however wanted to ensure that it matches our regulations and I've held off posting it until we have completed that process. It is available internally for all team members. Once fully updated the program will post the Policies and Procedures.”

**Finding Area 27**

The Office of the State Long-Term Care Ombudsman’s regulations contain outdated statutory references, making them inaccurate.

**Recommendation 27**

The Office of the State Long-Term Care Ombudsman Program should update statutory references in Section 17b-411 of the Regulations of State Agencies.

**Status**

**PARTIALLY IMPLEMENTED**

LTCOP informed us it is updating its statutory references in Section 17b-411 of the Regulations of State Agencies.

**LTCOP Update**

“This is currently being worked on. I worked with several attorneys to move this forward; however, I am still working to secure an attorney to complete the work required to submit it for reg review. There are also new changes federally to the Older Americans Act that I am waiting for the final information on so I can complete all the changes at one time.”

# Department of Public Health Facility and Investigations Section (FLIS) Findings and Recommendations

## Finding Area 28

The Department of Public Health’s website incorrectly states the number of days mandated reporters must contact DSS when they have reasonable cause to suspect abuse, neglect, exploitation, or abandonment of an older adult. This may lead to a longer period an elder is in danger.

### Recommendation 28

The Department of Public Health should update its website to reflect that mandated reporters have 72 hours to report suspected elder abuse, neglect, exploitation, and abandonment to the Department of Social Services.

### Status

**IMPLEMENTED**

DPH updated its website to reflect mandated reporters have 72 hours to report suspected elder abuse, neglect, exploitation, and abandonment to the Department of Social Services.

### DPH Update

“The Department of Public Health (DPH) completed implementation of this recommendation in October 2023. Please see link to [webpage](#).”

## **Finding Area 29**

The Department of Public Health Facility Licensing and Investigations Section (FLIS) did not send or did not promptly send acknowledgment letters to complainants 54% of the time in 2019 in violation of its complaint policy, creating potential uncertainty among complainants.

### **Recommendation 29**

The Department of Public Health Facility Licensing and Investigations Section should send acknowledgment letters to complainants within four working days as required by its complaint policy.

### **Status**

**PARTIALLY IMPLEMENTED**

DPH informed us that it reorganized the facility surveyors in 2022 to create a dedicated complaint unit to better manage the complaint process, including the issuance of acknowledgment letters. However, DPH has not completed the implementation due to a staffing shortage and the replacement of the Facilities Licensure and Investigations Section.

### **DPH Update**

“DPH attention to this recommendation is ongoing. In 2022, DPH reorganized the facility surveyors to create a dedicated complaint unit to better manage the complaint process, including the issuance of acknowledgment letters. DPH is currently recruiting a manager to oversee the unit and ensure compliance with DPH and federal policies. In 2022, the Branch Chief for the Healthcare Quality and Safety Branch (HQSB) and the Section Chief for the Facilities Licensure and Investigations Section (FLIS) retired, along with several seasoned facility surveyors. For much of 2022 and 2023, these units, which are responsible for handling complaints for all licensed healthcare providers, were seriously short-staffed, with vacancy rates upwards of 40%. The Department is also working through a significant backlog of federally required nursing home recertification surveys and a significant backlog of nursing home and hospital complaints. These backlogs were caused by the suspension of survey activity by the federal government during the height of the COVID pandemic and the lack of qualified surveyors. The Department has been aggressively hiring and training new surveyors. In addition, in 2023, the Department hired a new Branch

Chief and Section Chief for the unit. This leadership team will be working with the new complaint manager to ensure that the unit is appropriately implementing DPH and federal policies.”

### Finding Area 30

The January 2019 Department of Public Health Facility Licensing and Investigations Section (FLIS) Complaint Policy does not specify a timeframe to begin investigation of non-immediate jeopardy medium priority level complaints, making it unclear that FLIS chose to require investigations to begin within 45 business days.

#### Recommendation 30

The Department of Public Health Facility Licensing and Investigations Section should update its complaint policy to require investigations of non-immediate jeopardy medium-level complaints to begin within 45 business days of receipt of the complaint.

#### Status

**IMPLEMENTED**

DPH updated its complaint policy to require investigations of non-immediate jeopardy medium-level complaints within 45 business days of receipt.

#### DPH Update

“DPH completed implementation of this recommendation in October 2023, as the Centers for Medicare and Medicaid Services (CMS) revised its requirements that State Survey Agencies (i.e., DPH) must initiate investigations for these types of complaints within 45 calendar days of receipt of the report. DPH incorporates the CMS guidance by reference in its policies. Please see the attached Exhibit A, page 1 of the current policy titled: Policy: Complaint and/or Reportable Event and /or Adverse Event Investigation, revised 1/2019, item G. identifies “A Supervising Nurse Consultant (SNC) will review complaints and adverse events and a Nurse Consultant will review reportable events and will assign them according to Chapter 5 of the State Operations Manual (SOM), which was revised/issued 2-10-23. Chapter 5 has been adopted as referenced and directs in part the following: “For complaints and facility-reported incidents that are assigned a “medium” priority, the state agency (SA) **must initiate an onsite survey within 45 calendar days of receipt of the initial report.** Investigating nursing home complaints and facility-reported incidents according to this timeframe will be implemented no later than October 1, 2023, to provide time for the SAs to prepare given the resource constraints in the SAs. Chapter 5,

## Finding Area 31

The Department of Public Health Facility Licensing and Investigations Section (FLIS) begins most non-immediate jeopardy medium level complaint investigations after 45 days, making them untimely according to its standard and potentially delaying needed assistance for elders.

### Recommendation 31

The Department of Public Health Facility Licensing and Investigations Section should begin investigation of its non-immediate jeopardy medium level complaints within 45 days.

### Status

**PARTIALLY IMPLEMENTED**

DPH hired and trained surveyors, reorganized facility surveyors, and hired a branch and section chief for the newly created unit. DPH took these actions to build the staff, organizational capacities and strategies to reduce the backlog of complaints and meet Centers for Medicare & Medicaid Services (CMS) timeliness standards. The department continues to work on complying with the 45-day requirement.

### DPH Update

“Although CMS requires DPH to begin investigations of non-immediate jeopardy medium level complaints within 45 calendar days (see response above), DPH continues to work on the implementation of this standard.

Work on this standard has been delayed because of staffing issues. For much of 2022 and 2023, DPH’s FLIS unit has been seriously short-staffed, with vacancy rates upwards of 40%. The Department is also working through a significant backlog of federally required nursing home recertification surveys and a significant backlog of nursing home and hospital complaints as a result. These backlogs were driven also by the suspension of survey activity by the federal government during the height of the COVID pandemic. The Department has been aggressively hiring and training new surveyors. In 2022, DPH reorganized the facility surveyors to create a dedicated complaint unit to better manage the complaint process, including the issuance of acknowledgment letters. DPH is currently recruiting a manager to oversee the unit and ensure compliance with DPH and federal policies. In addition, in 2023, the Department hired a new Branch Chief and Section Chief for the unit. The new

leadership team will be working with the new manager to identify strategies for reducing the backlog of complaints and meeting CMS timeliness standards.”

## **Finding Area 32**

There is no uniform template and automated system for Department of Public Health Facility Licensing and Investigations Section (FLIS) surveyors to request police, emergency medical services, hospital, and other reports needed to investigate alleged elder maltreatment. This delays the completion of complaint investigations and needed assistance to elders.

### **Recommendation 32**

The Department of Public Health should consider developing an automatic and uniform process to request police, emergency medical services, hospital, and other reports necessary to investigate alleged elder maltreatment.

### **Status**

**IMPLEMENTED**

DPH completed this recommendation by developing a template in its automated system accessible to all survey staff. The system documents requests for police, emergency medical services, and hospital reports in a communication log in the investigative file.

### **DPH Update**

“DPH has completed its response to this recommendation. DPH uses a template on state letterhead that is part of the letter management system in the automated system that is accessible to all survey staff. The process is standardized, and the requestor initiates the request of the records department of the entity that also was involved in the situation and/or investigation.

Further, requests for police, emergency medical services, hospital, and other reports necessary to investigate alleged elder maltreatment are currently documented in a Communication Log which is part of the investigative file.”

## Finding Area 33

The Department of Public Health Office of Injury Prevention is not meeting all of its statutory obligations in providing awareness and education on elder abuse, potentially eliminating an effective means of reducing this abuse.

### Recommendation 33

The Department of Public Health Office of Injury Prevention website should include existing resources and links related to elder maltreatment awareness and education to reduce elder maltreatment.

### Status

**IMPLEMENTED**

The DPH Office of Injury and Violence Prevention website includes resources and links to elder maltreatment awareness and education. This implements our recommendation.

### DPH Update

"DPH has completed implementation of this recommendation. Please see the [link](#) to the DPH Office of Injury and Violence Prevention website which provides resources to Elder Abuse."

# Systemic Changes to Reduce the Risk of Elder Maltreatment

## Background Checks - Findings and Recommendations

## Finding Area 34

The Abuse Registry Repository housed on the Commission on Women, Children, Seniors, Equity & Opportunity website was used six times from July 2019 through July 2020, indicating a lack of regular use during this time period.

### Recommendation 34

The state agencies protecting elders from abuse, neglect, exploitation, and abandonment, including the departments of



Public Health, Social Services, and Consumer Protection, and the State Long-Term Care Ombudsman Program should publicize the availability of, and provide a link to, the abuse registry repository available on the Commission on Women, Children, Seniors, Equity & Opportunity website.

**Status**

**PARTIALLY IMPLEMENTED**

DPH, LTCOP, and CWCSEO provide a link to the abuse repository on the CWCSEO website. Since DSS submitted its update, we reviewed the DSS website, which now includes a link to the abuse repository.

DCP has not made the recommended change.

**DPH Update**

"DPH has completed implementation of this recommendation. The "abuse registry repository" is [linked](#) on the DPH Nurse Aide Registration Webpage as noted below. The link on the webpage for "Search the CT Nurse's Aide Registry Online links to the same location as the Commission on Women, Children, Seniors, Equity & Opportunity website.

The nurse aide registry is currently maintained through a state contract. Prometric, as the state approved nurse aide registry vendor/contractor provides the required information which includes any discipline that has been taken against a nurse aide in the electronic registry at the following [link](#)."

**DSS Update**

"Changes related to website link are pending with DSS IT SUPPORT. An update to the DSS Website is pending to link Commission on Women, Children, Seniors, Equity & Opportunity [Registry Repository - Women, Children, Seniors and Equitable Access for All \(ct.gov\)](#)."

**DCP Update**

"DCP agrees that a greater use of the abuse registry repository is an admirable goal and will consider adding it the consumer guide for selecting a homemaker companion agency, which is available on the department's website."

**LTCOP Update**

"The program provides links and publicizes available links to the state dedicated sites dedicated and responsible for these areas of focus."

**CWCSEO Update**

"The Commission maintains a registry repository available on our [website](#). This link is accessible from the homepage of our website by clicking on the "Registry Repository" button.

Our website is also linked from the Connecticut General Assembly's Aging Committee [website](#). Furthermore, the Commission hosted and published a special Senior Center Crime Prevention Workshop meeting of the Statewide Senior Center Workgroup on December 9, 2022. This [video resource](#) brought together Judicial Branch staff to educate senior center staff and members of the public to learn about how to prevent and address crime, abuse and exploitation of seniors.

A report summarizing this meeting was included in the published page 40-42 ["Report of the Statewide Senior Center Workgroup" submitted April 4, 2023.](#)

The Commission will continue to work with the Executive Branch to expand awareness of the registry by encouraging its publication on other agency websites."

## Finding Area 35

Connecticut law does not specify certain criminal convictions or findings of elder abuse that would prevent an individual from being hired by a homemaker-companion agency, potentially putting elders at risk.

### Recommendation 35

Section 20-670 of the General Statutes should be amended to prohibit homemaker-companion agencies from hiring employees with a disqualifying offense as described in Section 19a-491c (3) of the General Statutes.

### Status

**IMPLEMENTED**

DCP implemented this recommendation prior to the publication of our original audit. It submitted a legislative proposal and helped change Section 20-670 of the General Statutes to prohibit homemaker-companion agencies from hiring employees with a disqualifying offense as described in Section 19a-491c (3) of the General Statutes. DCP also proposed strengthening the background check and hiring language in Sections 20-670 and 20-678 which was passed by the General Assembly.

### DCP Update

"As DCP noted in the 2021 response to the preliminary findings, a legislative proposal submitted by the department in 2021, to strengthen the background check and hiring language in sections 20-670 and 20-678, was approved and signed into law. Please see PA 21-37."

## **Finding Area 36**

Connecticut law does not specify the type of background check required for homemaker-companions, leading to potentially inadequate background checks that may put the safety of elders at risk.

### **Recommendation 36**

Section 20-678 of the General Statutes should be amended to require prospective employees of homemaker-companion agencies to submit to state and national criminal background checks conducted in accordance with Section 29-17a of the General Statutes.

### **Status**

**IMPLEMENTED**

DCP implemented this recommendation prior to the publication of our original audit, submitting a legislative proposal to strengthen the background check language in Sections 20-670 and 20-678 of the General Statutes. The General Assembly accepted and passed the proposal.

### **DCP Update**

"As DCP noted in the 2021 response to the preliminary findings, a legislative proposal submitted by the department in 2021, to strengthen the background check and hiring language in sections 20-670 and 20-678, was approved and signed into law. Please see PA 21-37."

# Mandated Reporters/Mandatory Training - Findings and Recommendations

## Finding Area 37

Mandated reporters may be unaware that they must report suspected elder abuse, neglect, exploitation, or abandonment to the Department of Social Services. Financial agents may be unaware that they are required to attend mandatory training in detecting potential fraud, exploitation, and financial abuse of older adults. This lack of awareness may result in a lack of necessary services and interventions to reduce or eliminate elder abuse, neglect, financial exploitation, or abandonment.

### Recommendation 37

The departments of Public Health, Social Services, Banking, and Insurance and the State Long-Term Care Ombudsman Program should publicize information about specific mandated reporters and the types of financial agents required to complete training to detect financial exploitation of older adults.

### Status

**IMPLEMENTED**

DPH implemented this recommendation and currently maintains a webpage that guides DPH licensees to report suspected abuse, neglect, or exploitation. DSS and LTCOP updated their websites. These actions implemented the recommendation.

### DPH Update

"DPH completed implementation of this recommendation in December 2023. DPH currently maintains a web page that provides guidance for DPH licensees who are legislatively mandated to report suspected abuse, neglect, or exploitation of certain groups of people which includes Residents of Long-Term Care Facilities and the Elderly."

### DSS Update

"An update to the [DSS Website](#) is complete"

### LTCOP Update

"The program provides information, links and publicizes available links to the state dedicated sites dedicated and responsible for these areas of focus."

## Finding Area 38

Due to a potential lack of awareness of their mandated reporter status, police may be underreporting elder abuse, neglect, exploitation, and abandonment. This could result in the absence of needed services and interventions to reduce or eliminate elder abuse, neglect, exploitation, or abandonment.

### Recommendation 38

The Department of Emergency Services and Public Protection Police Officer Standards and Training Division should notify basic training recruits and state and municipal police departments that police officers are mandated reporters and are required to report suspected elder abuse, neglect, exploitation, and abandonment to the Department of Social Services Protective Services for the Elderly Program within 72 hours of such suspicion or belief.

### Status

**IMPLEMENTED**

As of June 29, 2023, DESPP POST Division sent two training advisories explaining how mandated reporters can access the mandatory training for suspected elder abuse, neglect, exploitation, or abandonment as required by Public Act 22-58. The advisories detail the training requirement and provide instructions on accessing the training through the Department of Social Services. These actions implemented the recommendation.

### DESPP Update

"Public Act 22-58 (see section 71 on page 94) changed C.G.S. 17b-451 subsection (g) adding a mandatory education training program for all mandatory reporters. The Act requires that mandatory reporters shall complete the educational training program developed by the Commissioner of Social Services, or an alternate program approved by the Commissioner of Social Services, not later than June 30, 2023, or not later than ninety days after becoming a mandatory reporter.

C.G.S. 17a-412(a) states that any police officer who has reasonable cause to suspect or believe that any elderly person has been abused, neglected, exploited or abandoned, or is in a condition which is the result of such abuse, neglect, exploitation or abandonment, or who is in need of protective services, shall, not later than seventy-two hours after such suspicion or belief arose, report such information or cause a report to be made in any reasonable manner to the Commissioner of Social Services pursuant to chapter 319dd.

The Department of Social Services approved training program is available online [here](#). Additional information is available at the

Department of Social Services. POST certified officers completing the approved training will earn 1 credit hour in area 501 Principles of Investigation. The approved training program includes a video, followed by an online test which should take between 30-45 minutes in total.”

### **Finding Area 39**

Current Department of Emergency Services and Public Protection Police Officer Standards and Training Council Division (POST) basic training for police trainees has limited information on elder abuse, neglect, exploitation, and abandonment. This lack of information could decrease the likelihood of detecting elder maltreatment and effectively handling such situations.

#### **Recommendation 39**

The Department of Emergency Services and Public Protection Police Officer Standards and Training Division should consider revising its basic training curriculum to educate officers on how to detect and address elder abuse, neglect, financial exploitation, and abandonment.

#### **Status**

**IMPLEMENTED**

As of June 29, 2023, DESPP POST Division sent two training advisories explaining how mandated reporters can access the mandatory training for suspected elder abuse, neglect, exploitation, or abandonment as required by Public Act 22-58. The advisories detail the training requirement and provide instructions on accessing the training through the Department of Social Services. The POST Division has added elder abuse training to its curriculum. These actions implemented the recommendation.

#### **DESPP Update**

“Public Act 22-58 (see section 71 on page 94) changed C.G.S. 17b-451 subsection (g) adding a mandatory education training program for all mandatory reporters. The Act requires that mandatory reporters shall complete the educational training program developed by the Commissioner of Social Services, or an alternate program approved by the Commissioner of Social Services, not later than June 30, 2023, or not later than ninety days after becoming a mandatory reporter.

C.G.S. 17a-412(a) states that any police officer who has reasonable cause to suspect or believe that any elderly person has been abused,

neglected, exploited or abandoned, or is in a condition which is the result of such abuse, neglect, exploitation or abandonment, or who is in need of protective services, shall, not later than seventy-two hours after such suspicion or belief arose, report such information or cause a report to be made in any reasonable manner to the Commissioner of Social Services pursuant to chapter 319dd.

The Department of Social Services approved training program is available online [here](#). Additional information is available at the Department of Social Services.

POST certified officers completing the approved training will earn 1 credit hour in area 501 Principles of Investigation. The approved training program includes a video, followed by an online test which should take between 30-45 minutes in total.”

## **Finding Area 40**

Employers of financial agents are not required to document that their employees completed mandatory training in detecting financial exploitation of older adults, so it cannot be confirmed that they received this training.

### **Recommendation 40**

Section 17b-463 of the General Statutes should be amended to require employers to document completion of mandatory training to detect potential fraud, exploitation, and financial abuse of elderly persons. The documentation should include the employee’s name, date of training, type of training, and resources utilized.

### **Status**

**NOT IMPLEMENTED**

The recommendation was not implemented.

### **DSS Update**

“Action steps regarding this recommendation are under consideration.”

### **CWCSEO Update**

“As previously noted, the Commission does not have any formal procedures to submit legislation to the Connecticut General Assembly. Notably, the question of requiring employers to document completion of training raises key policy considerations which we agree should be addressed by the Legislature, including which agency would be responsible for overseeing this collection/compliance function, and what resources these functions may require.”

## Finding Area 41

The Department of Social Services Protective Services for the Elderly Program mandated reporter training is currently only available on the Department of Social Services (DSS) website and is not widely publicized. This potentially limits its use by many mandated reporters.

### Recommendation 41

The Department of Public Health’s website should include a link to the Department of Social Services Protective Services for the Elderly Program mandated reporter training.

### Status

**IMPLEMENTED**

The DPH website has a link to the Department of Social Services Protective Services for the Elderly program which describes training opportunities on recognizing and reporting elder maltreatment.

### DPH Update

“DPH completed implementation of this recommendation in December 2023. DPH has posted on its Mandatory Report webpage a link to the Department of Social Services which describes training opportunities to educate members of the general public and mandated reported on how to recognize and report elder maltreatment.”

### DSS Update

“This is for DPH’s consideration.”

## Finding Area 42

Mandated reporters are not required to complete training in the detection of elder abuse, which decreases their ability to identify elder abuse.

### Recommendation 42

Section 17b-451(g) of the General Statutes should require mandated reporters to complete related training within the first six months of their employment. Employers should document that their employees completed this training. The documentation should include the employee’s name, date of training, type of training, and resources utilized.

### Status

**IMPLEMENTED**



Section 17b-451(g) of the General Statutes was amended to require newly hired mandated reporters to complete related training within 90 days.

**DSS Update**

“Completed”

## **Coordination and Communication Across Agencies - Findings and Recommendations**

### **Finding Area 43**

Non-mandated and mandated reporters may not be sure which agency to contact when they have a concern about suspected elder abuse, neglect, exploitation, or abandonment, which may delay an elder from receiving necessary assistance.

#### **Recommendation 43**

The departments of Public Health and Social Services, and the State Long-Term Care Ombudsman Program should develop guidance to clarify the appropriate agency for certain elder abuse, neglect, exploitation, or abandonment complaints. This guidance should be posted on websites of state agencies, World Elder Abuse Awareness Day, the Elder Justice Coalition, and other partners such as United Way 2-1-1.

#### **Status**

**PARTIALLY IMPLEMENTED**

DPH, DSS, LTCOP, and Connecticut Elder Justice Coalition are working on a collaborative training for the nursing home industry about regulatory, health, safety, resident rights, and financial issues. LTCOP provided us a draft copy of the guidebook and notified us that it is in its final editing stages.

#### **DPH Update**

“Implementation of this recommendation requires a coordinated response from DPH, DSS, and the state’s Long-Term Care Ombudsman Program. As part of a separate initiative, DPH, DSS, and the Ombudsman are collaborating to provide training to the nursing home industry about a variety of regulatory, health and safety, resident rights, and financial issues. To move this recommendation forward, DPH will raise this issue with its sister agencies as part of the planning for the training conference.”

#### **DSS Update**

“Pending”

**LTCOP Update**

“We have worked on a guidebook with DPH, DSS, DDS and CEJC. There is a draft copy and it’s almost to the final stages of editing. We have provided a draft copy to the auditors.”

**Finding Area 44**

Mandated reporters suspecting potential abuse, neglect, exploitation, or abandonment of long-term care residents may file their reports with the Department of Public Health Facility Licensing and Investigations Section (FLIS) or the Department of Social Services Long-Term Care Investigations and Interventions Program (LTCI), which leads to confusion and inefficiency in the protection of elders.

**Recommendation 44**

Section 17a-412 of the General Statutes should be amended to require all mandated reporters suspecting abuse, neglect, exploitation, or abandonment of long-term care residents to make such reports to the Department of Public Health Facility Licensing and Investigations Section.

**Status**

**NOT IMPLEMENTED**

DPH and DSS did not implement this recommendation. Neither agency believes that it is within its purview.

**DPH Update**

“Section 17a-412 of the Connecticut General Statutes refers to the Office of The Long-Term Care Ombudsperson (LTCOP) statutes and is within the jurisdiction of such. DPH does not have the authority to propose changes to other statutory sections outside of the jurisdiction of DPH. The applicable DPH state and federal laws and regulations address in detail the responsibilities of mandated reporters of suspected abuse, neglect, exploitation, or abandonment.”

**DSS Update**

“This appears to be a recommendation directed to the Department of Public Health.”

**Finding Area 45**

The Department of Social Services (DSS) is statutorily required to receive reports of potential elder abuse, neglect, exploitation,

and abandonment of long-term care residents from non-mandated reporters. DSS cannot meet this statutory requirement because it has not allocated specific resources to receive these complaints.

**Recommendation 45**

Section 17b-451 of the General Statutes should be amended so that mandated and non-mandated reporters suspecting abuse, neglect, exploitation, or abandonment of long-term care residents make all reports to the Department of Public Health.

**Status**

**NOT IMPLEMENTED**

DPH and DSS did not implement this recommendation. Neither agency believes that it is within its purview.

**DPH Update**

“Section 17a-412 of the Connecticut General Statutes refers to the Office of The Long- Term Care Ombudsperson statutes and is within the jurisdiction of such. DPH does not have the authority to propose changes to other statutory sections outside of the jurisdiction of DPH. The applicable DPH state and federal laws and regulations address in detail the responsibilities of mandated reporters of suspected abuse, neglect, exploitation, or abandonment.”

**DSS Update**

“This appears to be a recommendation directed to the Department of Public Health.”

## Finding Area 46

The Department of Public Health Facility Licensing and Investigations Section (FLIS) surveyors do not always contact the State Long-Term Care Ombudsman Program (LTCOP) to discuss the nature of their nursing home complaint investigations and determine whether LTCOP received and substantiated similar complaints.

### Recommendation 46

The Department of Public Health Facility Licensing and Investigations Section should develop a system to automatically contact the State Long-Term Care Ombudsman Program about nursing home complaints to solicit any information about similar complaints at the facility or other information helpful to the investigation.

### Status

**PARTIALLY IMPLEMENTED**

DPH has partially implemented this recommendation. DPH and LTCOP meet weekly to discuss overlapping complaints and are developing a memorandum of understanding to formalize their roles.

### DPH Update

"The Department has partially implemented this finding. DPH and the Long-Term Care Ombudsman Program meet at least weekly to discuss overlapping complaint issues and is currently developing a memorandum of understanding that will formalize the roles of the two organizations and provide additional structure for better communication and coordination, including, but not limited to, notification to the Ombudsman Program when investigating nursing home complaints."

### LTCOP Update

"This is already required as part of the federal State Operational Manual for DPH investigations and the process is being formalized between the agencies."

# The Protective Services for the Elderly Model - Finding and Recommendation

## Finding Area 47

Connecticut uses a protective services for the elderly model rather than an adult protective services model, which may leave a service gap for unprotected vulnerable individuals ages 18 to 59.

### Recommendation 47

The General Assembly should consider establishing a taskforce to evaluate moving from a protective service for the elderly model to an adult protective services model. The task force should include representatives from the Department of Social Services Protective Services for the Elderly, Department of Developmental Services, and Commission on Women, Children, Seniors, Equity & Opportunity.

### Status

**NOT IMPLEMENTED**

The recommendation was not implemented. DSS cited a lack of resources as the reason it did not attempt to implement this recommendation. CWCSEO and DSS both indicated they would be willing to participate on a related taskforce established by the General Assembly.

### DSS Update

"This undertaking would require the convening of external stakeholders, impacted individuals, and state agency program experts to conduct a full evaluation of the pros, cons and costs that would be associated with expanding the coverage of the PSE model to a significantly larger population. Currently, the PSE program lacks the resources to adequately coordinate these activities independently but would participate if the General Assembly (GA) decided to establish such a taskforce."

### CWCSEO Update

"As previously noted, the Commission does not have any formal procedures to submit legislation to the Connecticut General Assembly. In working with our partners we are advised that substantial resources and coordination would be required for the State of Connecticut to transition from a protective services for the elderly model to an adult protective services model. Our Commission would be willing to participate in strategic consideration, including any taskforce or working group on the issue, to evaluate this concept."