

# Statewide Elder Abuse Interventions and Enhanced Multidisciplinary Team (E-MDT) Initiative

## NYSOFA Program Update

September 1, 2017 to September 30, 2022

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## Introduction

Elder abuse is a social, health, and economic problem that has tragic impacts on many of New York State's residents. It is found in all communities and impacts older individuals of every race, ethnic and cultural background, socio-economic status, and sexual orientation. Older adults who are socially isolated are at increased risk for elder abuse.

Elder abuse is often hidden. It has estimated that 300,000 older New Yorkers are victims of elder abuse each year. Statewide, for every reported case of elder abuse, 23.5 cases go unreported. Financial exploitation is the most common form of elder abuse; it often occurs in combination with other forms of abuse; statewide, for every reported case of financial exploitation, 43.9 cases go unreported.<sup>1</sup>

Enhanced Multidisciplinary Teams (E-MDTs) offer an evidence-based, person-centered response to elder abuse. They bring together professionals from various disciplines and systems – e.g., Adult Protective Services (APS), aging services, mental health, finance, law enforcement, health care, etc. – to locally address cases of elder mistreatment (financial, physical, psychological, sexual, and neglect by others). Teams also have access to the specialty services that make the multi-disciplinary team “enhanced,” including forensic accountants, mental health professionals, and civil legal services.

The elder abuse E-MDT model was piloted in eight counties from 2012-2016 using federal grant funds from the U.S. Administration on Aging/Administration for Community Living. Lifespan of Greater Rochester (Lifespan) and the New York City Elder Abuse Center (NYCEAC) at Weill Cornell Medicine partnered with the New York State Office for the Aging (NYSOFA) to implement the pilot. An independent evaluation demonstrated its effectiveness in addressing cases of elder abuse. During 2016-2017, New York State provided funding to sustain the existing E-MDTs and establish or enhance teams in five additional counties, for a total of 13 teams. From 2017 to 2023, NYCAging (formerly the New York City Department for the Aging) funded NYCEAC to coordinate E-MDTs in all five boroughs in New York City.

Building upon this success, in September 2017 the New York State Office of Victim Services (OVS) and NYSOFA partnered to establish and implement the Elder Abuse Interventions and E-MDT Initiative. The Elder Abuse Interventions and E-MDT Initiative is funded with federal Victim of Crime Act (VOCA) funding received by OVS from the United States Department of Justice and with state funding provided by NYSOFA. It is overseen by NYSOFA and coordinated statewide by Lifespan. Lifespan also coordinates teams in 12 counties. Lifespan and NYCEAC work in concert to provide

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<sup>1</sup> Lifespan of Greater Rochester, Inc., Weill Cornell Medical Center of Cornell University, and New York City Department for the Aging. *Under the Radar: New York State Elder Abuse Prevalence Study*. May 2011, <https://ocfs.ny.gov/main/reports/Under%20the%20Radar%2005%2012%2011%20final%20report.pdf>.

technical assistance and training to E-MDTs across New York State and with NYSOFA to provide strategic planning for the Elder Abuse Interventions and E-MDT Initiative.

The Elder Abuse Interventions and E-MDT Initiative is implemented in New York State through a network of 11 regional hubs that administer program implementation and provide E-MDT Coordinator services for each county in the region. County-based E-MDTs bring together professionals in that county for team meetings to review, discuss, and intervene in cases of elder abuse, restoring safety and security of older adults, and protecting their assets. Together, team members conduct coordinated case reviews and tailored responses to each situation.

This NYSOFA Program Update was compiled from several sources including reports submitted annually to NYSOFA by Lifespan; E-MDT program evaluations conducted by the State University of New York (SUNY) at Albany; information gathered as part of the technical assistance, site visits, and monitoring processes; and periodic updates on the Elder Abuse Interventions and E-MDT Initiative provided to NYSOFA by Lifespan.

## Ongoing Expansion

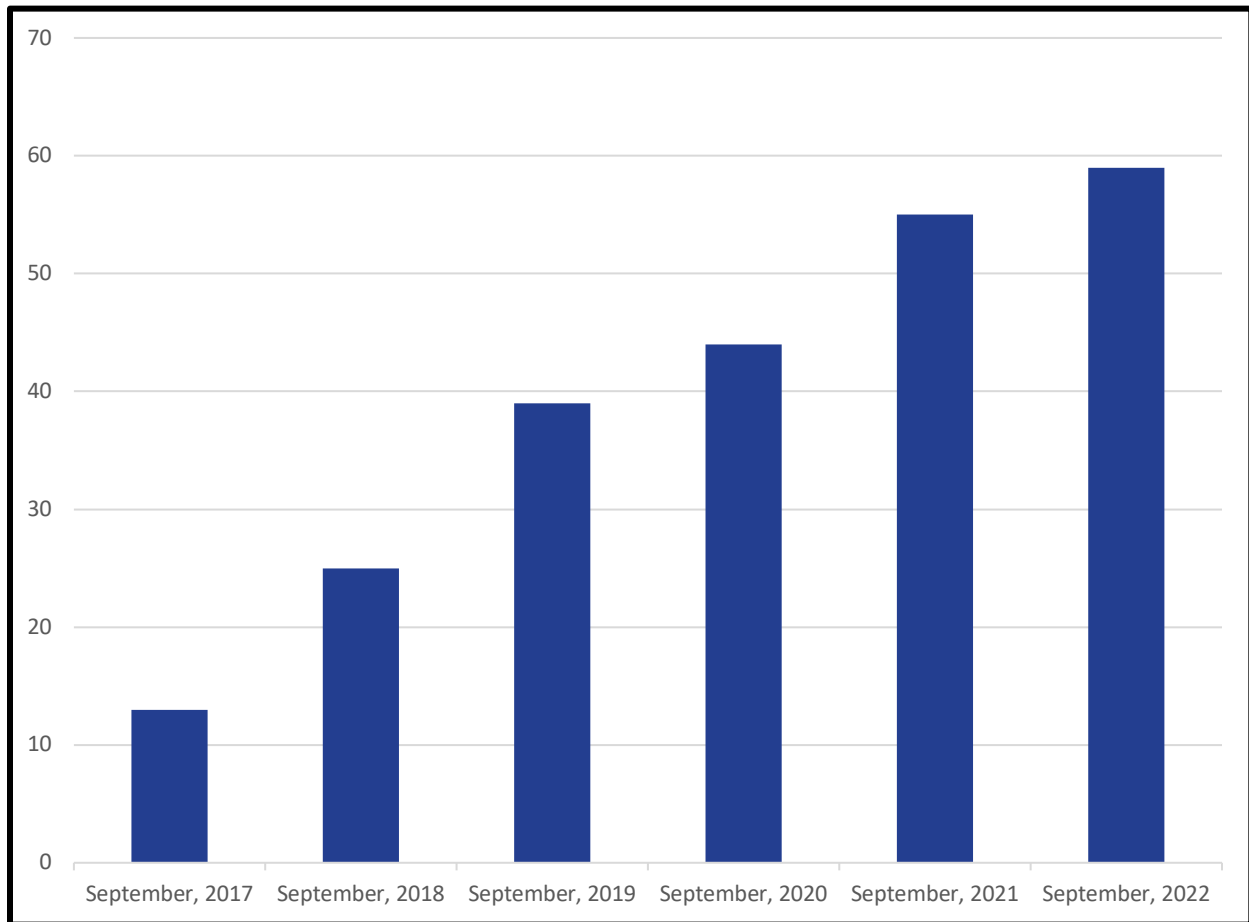
When the OVS-funded Elder Abuse Interventions and E-MDT Initiative began in September 2017, teams existed in 13 counties. As of September 30, 2022, 59 counties had operational E-MDTs in 11 regional hubs (see Figures 1 and 2).<sup>2</sup> Twenty of these teams became operational following the COVID-19 public health emergency, which began in early 2020.

Figure 1: Map of Counties with Operational Elder Abuse E-MDTs as of September 30, 2022



<sup>2</sup> During the preparation of this Program Update, the hub agency for Westchester County opted to operate its MDT independently of the Elder Abuse Interventions and E-MDT Initiative. The MDT in that county is coordinated by The Harry and Jeannette Weinberg Center for Elder Justice at The Hebrew Home at Riverdale.

Figure 2: Number of Counties with Operational Elder Abuse E-MDTs as of September 30, 2022



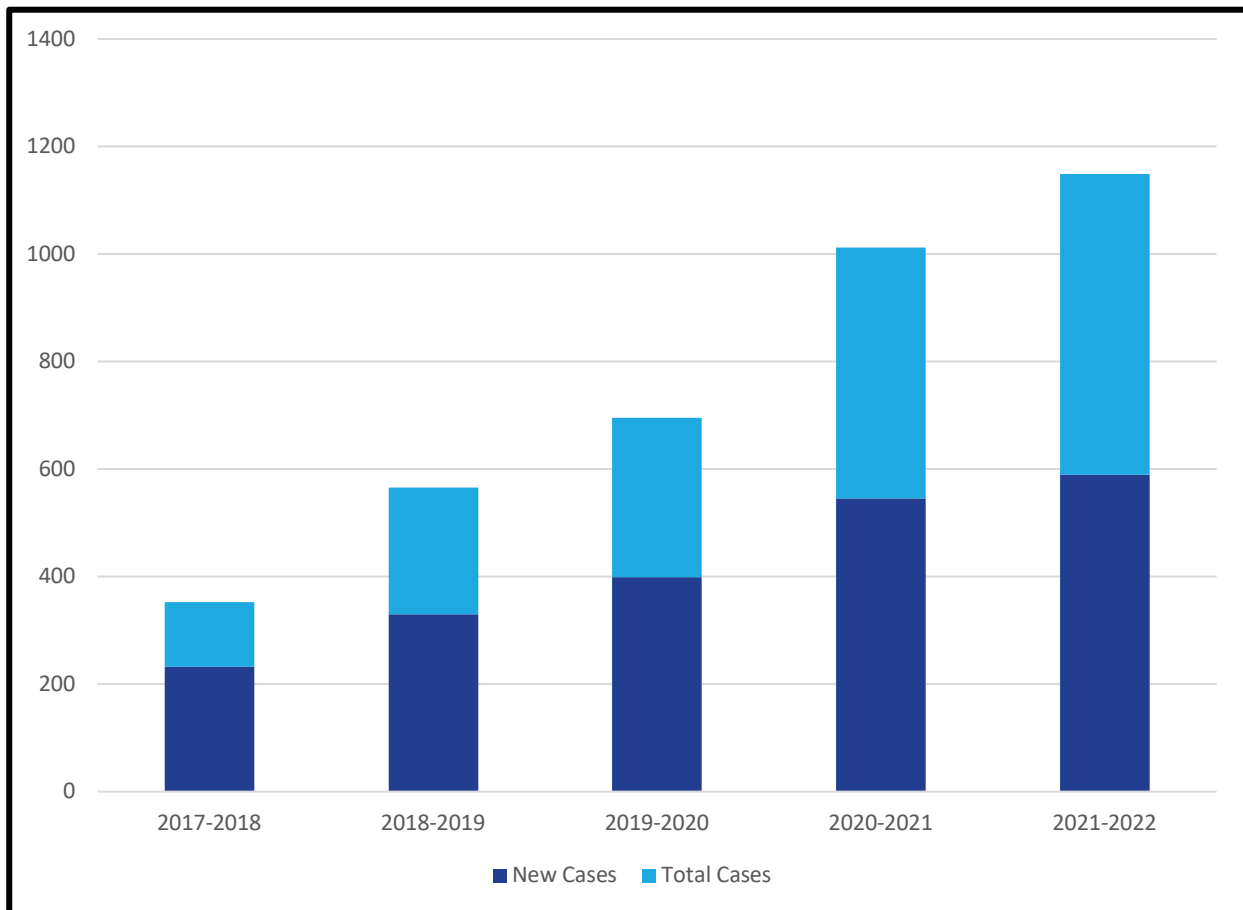
## Victims Served

Data on victims served is derived from the Performance Measurement Tool (PMT), a standardized federal report required by VOCA guidelines and submitted annually by Lifespan. The PMT only includes data on victim services that are funded with VOCA dollars. Per VOCA guidelines, all victims are considered “new” at the start of each new program year (including those who are still receiving services from the prior year); as such, some “new” victims and cases are also included in the prior year’s numbers.

## Referrals

Each year of the Elder Abuse Interventions and E-MDT Initiative has brought a growing number of referrals to E-MDT Coordinators for review. During the 2017-2018 program year, 352 victims had their cases referred to an E-MDT Coordinator. During 2021-2022, 1,149 victims had their cases referred to an E-MDT coordinator. (See Figure 3)

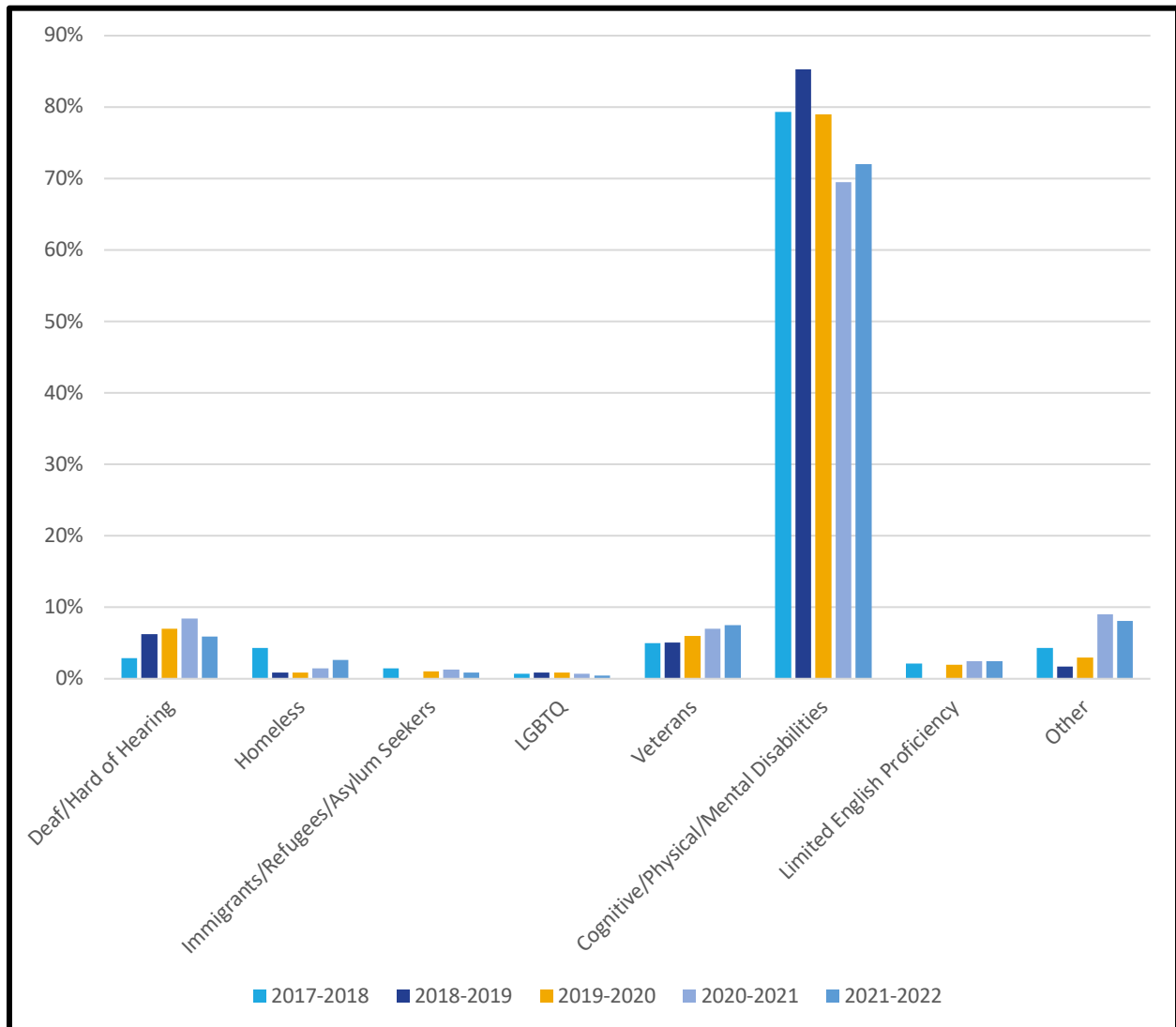
Figure 3: Total Number of Cases Referred to an E-MDT Coordinator



### Special Classification

The PMT includes data on the number of victims who fall into certain categories, or “special classifications.” Most victims who were reported as having a special classification had cognitive/mental/physical disabilities. During 2017-2018, 40 percent (140) of all victims were reported as having a special classification; of these, 79 percent (111) had cognitive/physical/mental disabilities. During 2021-2022, 77 percent (879) of all victims had a special classification; of these, 72 percent (633) had cognitive/physical/mental disabilities. (See Figure 4)

Figure 4: Classification of Victims with a Reported Special Classification

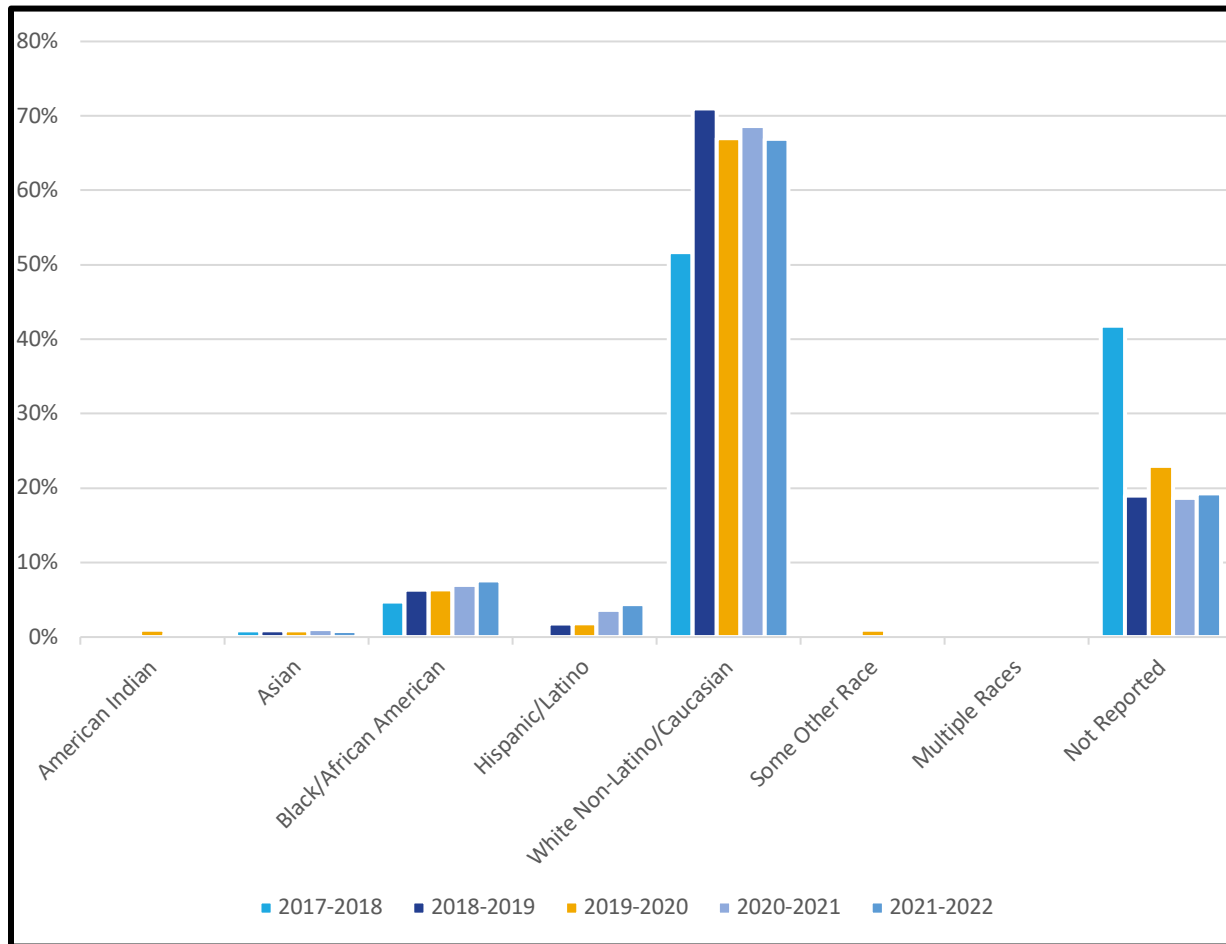




### Race/Ethnicity

Most victims whose cases are referred to an E-MDT Coordinator are white.<sup>3</sup> During the 2017-2018 program year, 52 percent (120) of victims who were considered new were White Non-Latino/Caucasian. During 2021-2022, 67 percent (395) were White Non-Latino/Caucasian. It is also worth noting that race/ethnicity is not reported for a significant number of victims. (See Figure 5)

Figure 5: Race/Ethnicity of Victims in New Cases

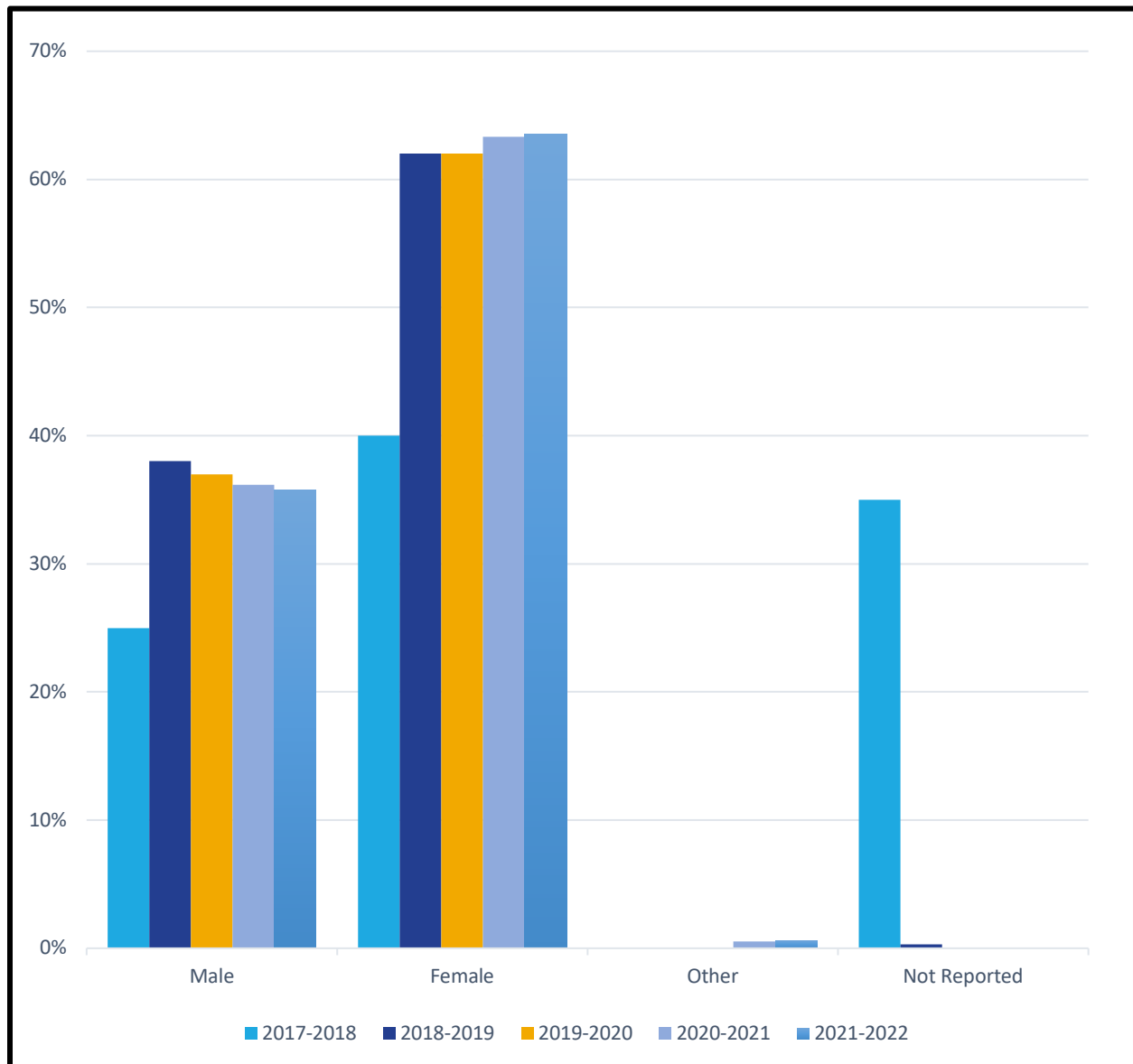


<sup>3</sup> This is consistent with demographic data on elder abuse in general. It speaks to several issues regarding the provision of elder justice services to underserved populations, including reluctance to identify as a victim, varying cultural views on abuse and justice, and distrust of traditional service models. Lifespan, NYCEAC, and NYSOFA’s efforts to increase E-MDT services to underserved populations are discussed later in this report. Additionally, providing elder justice services to underserved populations was the focus of the 2021 New York State Elder Abuse Summit: *Elder Abuse - Creating a Clear Vision of Where We Go From Here*, convened by Lifespan and OVS. For additional information, see: Lifespan of Greater Rochester, Inc., Weill Cornell Medical Center of Cornell University, and New York City Department for the Aging. *Under the Radar: New York State Elder Abuse Prevalence Study*. May 2011, <https://ocfs.ny.gov/main/reports/Under%20the%20Radar%2005%2012%2011%20final%20report.pdf>; and Lifespan of Greater Rochester, Inc., *Seeking Solutions: Elder Abuse Creating a Clear Vision of Where We Go From Here*. September 2022, <https://static1.squarespace.com/static/5851b8a715d5db7317addaca/t/63401ce8e0d93413ec7d77dc/1665146092013/2021+NYS+Elder+Abuse+Summit+Full+Report.pdf>.

## Gender

Most victims whose cases are referred to an E-MDT Coordinator are female. During 2017-2019, 40 percent (93) of victims who were considered new were female. During 2021-2022, 64 percent (375) were female. (See Figure 6)

Figure 6: Gender of Victims in New Cases



## Services Provided

Data on services is derived from the VOCA PMT submitted annually by Lifespan. The PMT only includes data on victim services funded with VOCA dollars.

There are four principal services provided by E-MDTs: information and referral, personal advocacy, therapy, and civil/criminal justice assistance. Through referrals to E-MDT Coordinators by professionals, most victims receive personal advocacy, which includes case intake and research by an E-MDT Coordinator, case discussion at E-MDT meetings, identification of service gaps, and suggested interventions. During 2017-2018, 100 percent (352) of all victims received personal advocacy services. During 2021-2022, 95 percent (1,097) received personal advocacy services.

Many victims also received information and referrals through E-MDTs, including referrals to law enforcement, forensic accounting, mental health professional services, civil legal services, victim service programs, and other services or supports. During 2017-2018, 59 percent (352) of victims received information and referral services. During 2021-2022, 46 percent (533) received information and referral services. (See

Figure 7: Percent of Victims Who Received Each Type of Service

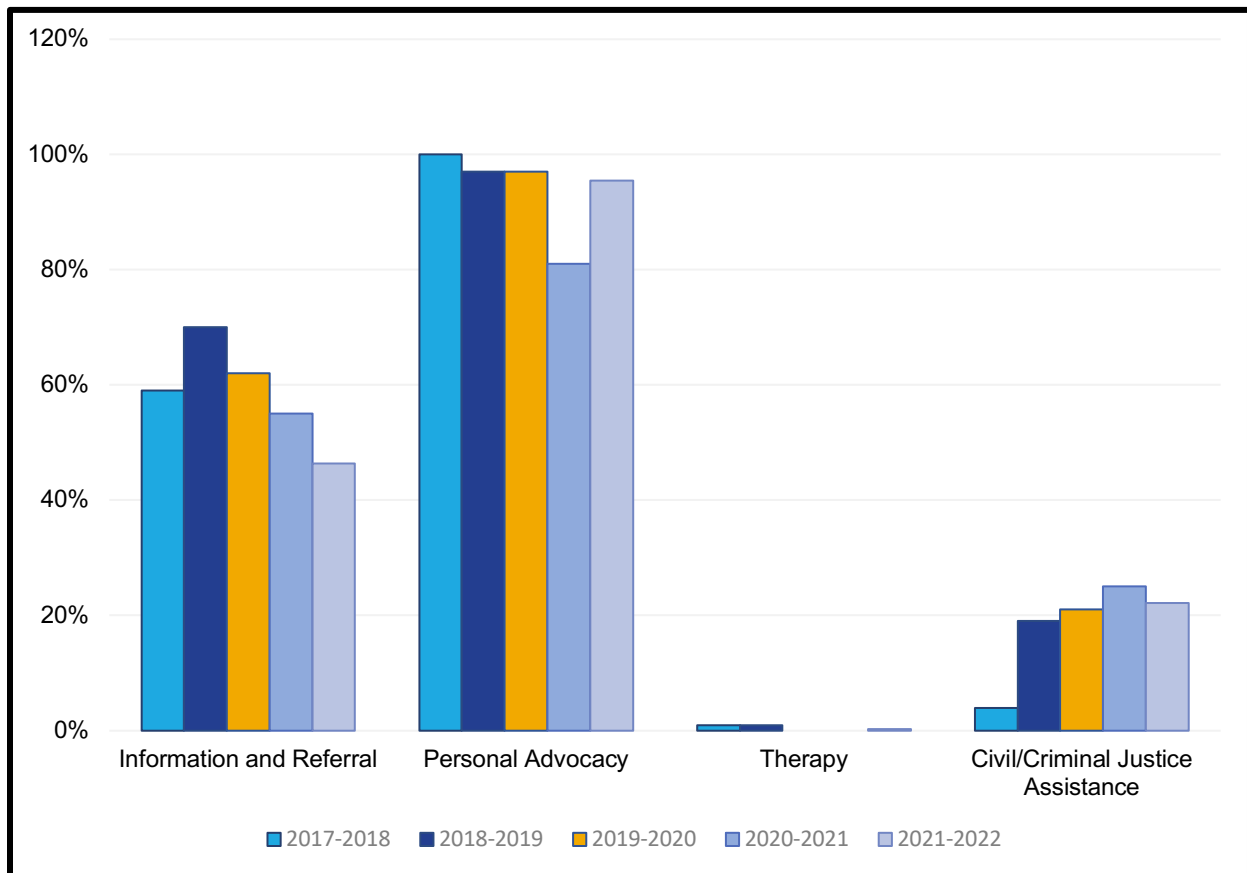


Figure 7)

## Restitution

From 2014 to 2022, E-MDT interventions led to a reported \$4.2 million in restitution in financial exploitation cases, of which approximately \$1.2 million was returned to the victims.

It should be noted that data on restitution resulting from E-MDT interventions is not uniformly reported to E-MDT Coordinators by district attorneys, law enforcement, or other providers. Additionally, many victims are reluctant to take legal action against their victims and those that do pursue such cases do not always obtain the rulings they seek from the courts. It should not be assumed that restitution is necessary to assist the victim in a financial exploitation case; even without restitution, E-MDT interventions often stop further exploitation through other actions and supports.

## Wide-Ranging Impacts

Attendance at E-MDT meetings has impacted team members', agencies', and communities' perceptions of, and responses to, elder abuse cases.

Coordinators and team members have noted increased communications between agencies and individuals who were previously unfamiliar with how they can each assist with elder abuse cases. Team members have noted that the connections they make through the E-MDTs continues outside of team meetings as they engage each other in other elder abuse victim support or prevention activities and contact each other for assistance with other cases. One team member commented that they use what they have learned from other members when responding to cases. All of this has, in turn, led to stronger case discussions in and out of E-MDT meetings and more immediate responses for all victims, not just those whose cases are referred to an E-MDT Coordinator.

Many counties with E-MDTs have seen increased awareness of elder abuse, leading to a greater focus on elder abuse interventions. In one county, the sheriff has committed to an E-MDT referral for all law enforcement cases involving victims aged 60 and over. In another case, the district attorney assigned a specific assistant district attorney to the prosecution of all elder abuse cases. In another example, a police investigator who sits on an E-MDT asked their supervisor if they could review all cases involving older adults to make sure cases of abuse do not go undetected. The local E-MDT was cited as a key reason for all of these decisions.

E-MDT discussions have also led to the identification of previously unknown victims of the same suspected perpetrator(s). In 2020, a county Office for the Aging (OFA) was contacted by an individual who expressed concerns regarding monies they had paid to a local funeral home for pre-paid funeral arrangements. The OFA brought the case to their county's E-MDT, which recommended that OFA refer the case to law enforcement.

Through the course of the investigation, law enforcement discovered that the funeral home director had over 100 victims spanning 12 years. Customers paid amounts ranging from \$350 to \$15,500; these funds were not placed into trust accounts as required by New York State General Business Law, nor were they used for the customers' future funeral expenses (e.g., the purchase of headstones and gravesites). Multiple providers from the county E-MDT collaborated in various aspects of the investigation, including the civil legal service provider, the forensic accountant, and the E-MDT Coordinator. In 2021, the funeral home director pled guilty, was sentenced to two to six years in prison, and was ordered to pay restitution to the victims.

## National and International Attention

New York State's Elder Abuse Interventions and E-MDT Initiative has become a model both nationally and internationally. In June 2019 the United States Department of Justice released a Request for Applications to fund elder abuse E-MDTs across the country using a model similar to the one New York State has been pioneering since 2012.

Furthermore, the statewide coordinators at Lifespan and NYCEAC have been invited to speak about the success of the Elder Abuse Interventions and E-MDT Initiative at conferences around the state and country. Lifespan and NYCEAC have received calls from professionals in other countries – for example, Great Britain and Australia – seeking assistance with the process of starting elder abuse E-MDTs.

## Elder Abuse E-MDT Legislation

In 2021, the Legislature passed, and the Governor signed, Chapter 223 of the Laws of 2021 (A.7634 Cruz/S.6528 Persaud). This legislation, which went into effect on July 1, 2021, codified the Elder Abuse Interventions and E-MDT Initiative into New York State Law. Chapter 223 created a new Section 225 of the New York State Elder Law that authorizes NYSOFA to establish an Elder Abuse E-MDT program consisting of teams established at the regional or county level.

This legislation provides the Elder Abuse Interventions and E-MDT Initiative with the statutory authorization, protections, and clarifications afforded to similar programs, including allowing for the sharing of victim information during case discussions. Agencies participating on county-based E-MDTs had expressed concern about the sharing of victim information absent explicit allowance for such disclosures, creating uncertainties that at times made it difficult for E-MDTs to effectively review and intervene in elder abuse cases. Chapter 223 addressed these issues, thereby allowing the Elder Abuse Interventions and E-MDT Initiative to continue operating in the most effective and efficient manner to help address cases.

For a summary of Section 225 and additional information, visit the [NYSOFA website](#).

## Technical Assistance

Technical assistance for the Elder Abuse Interventions and E-MDT Initiative is provided by Lifespan and NYCEAC. The primary purposes of technical assistance are to: 1) support the effective ongoing implementation of the statewide Elder Abuse Interventions and E-MDT Initiative; 2) build capacity for E-MDTs to effectively intervene in cases of elder abuse; and 3) enhance effective cross-systems training and collaboration.

Through regularly scheduled calls, observation of E-MDT meetings, site visits, Peer Leadership Group (PLG) meetings, webinars, and the Case Support Team, the technical assistance providers offer individually tailored guidance, resources, tools, and training to help Coordinators achieve their professional best, strengthen their teams, and facilitate holistic, victim-centered case discussions.

Technical assistance components include training to help onboard new Coordinators, case consultations, assistance with implementing the E-MDT policies, and guidance on meeting contractual deliverables. The technical assistance providers offer guidance to Coordinators in several areas, including the recruitment of new team members, development of procedures, managing team dynamics, elder abuse detection and intervention, data collection, and reporting.

Since 2011, NYCEAC has been coordinating the PLG, a twice-monthly meeting with Coordinators and other professionals that provides networking, support, and cross-training to strengthen existing teams and support nascent ones. Meetings are typically centered on a specific topic, including “Facilitating Anti-ageist Case Discussions,” “Isolation as an Abuse Tactic and the Impact of Chronic Loneliness,” “Addressing ‘bad’ suggestions at the E-MDT,” and “How Coordinators Address Social Unrest and Racial Equity Reckoning at the E-MDT.”

Beginning in 2016, Lifespan has been offering a monthly Financial Exploitation Webinar Series for professionals across the state. Hosted by the Upstate Elder Abuse Center at Lifespan, this series covers a variety of topics, including “Elder Fraud,” presented by the Federal Bureau of Investigation; “Opioids and Elder Abuse: A Disquieting Connection,” presented by the Elder Justice Coalition; “Veterans Benefits,” presented by Monroe County Veterans Services; and “Protecting Yourself and Your Clients from Common Senior Scams,” presented by the Better Business Bureau.

In May 2022, the technical assistance providers introduced the E-MDT Coordinator Case Support Team. This collaborative resource allows Coordinators to present their own elder abuse cases to fellow Coordinators for review and discussion. The Support Team meets monthly and is structured similar to an E-MDT. The goal is to assist Coordinators with helping their teams generate creative recommendations and new avenues for intervention, especially with cases where further support may be needed to address unique factors or to meet the unique needs of the victim.

## The COVID-19 Public Health Emergency

The COVID-19 public health emergency had a significant impact on the E-MDTs. Restrictions on in-person gatherings forced Coordinators to transition their teams to virtual meetings. With little preparation, Coordinators worked with their team members to overcome technical issues and other concerns and ensure as smooth a transition as possible. While some teams had a delayed or reduced meeting schedule, many continued with little to no interruption, and some met more frequently. All teams continued to meet virtually during a time when many other programs were forced to pause. Additionally, 20 new teams became operational after the shift to virtual meetings.

During this transition, Lifespan and NYCEAC provided invaluable technical assistance. The technical assistance providers assisted Coordinators by offering guidance on ensuring confidentiality when team members are in different locations and strategies for keeping team members engaged. The PLG covered topics such as “Mental Health and Facilitating Online Meetings,” “Addressing Pandemic-related Barriers when Developing Action Plans,” and “Engaging Your E-MDT via Remote Platforms.”

Some E-MDT Coordinators initially saw a decrease in referrals due to the public health emergency, as social distancing and restrictions on in-person meetings made it difficult to identify abuse. Others experienced an increase.

Several teams noted increased attendance as virtual meetings reduced or eliminated scheduling complications and travel time for attendees; in particular, law enforcement officers were better able to attend meetings, with some participating from their vehicles. Some team members found it helpful to have access to their computers during meetings, as they could research and provide information in real time (for example, a law enforcement officer could look up perpetrator information). E-MDT meetings also provided a forum for team members to update each other on other items, such as changes in service delivery, COVID-19 protocols, and COVID-19-related scams. Some teams have begun to use a hybrid in-person/virtual meeting format to facilitate member attendance.

## Elder Abuse E-MDT Website and Video Series

In 2021 and 2022, Lifespan and NYCEAC undertook two projects to highlight the Elder Abuse Interventions and E-MDT Initiative.

First, they partnered with Christopher Communications Inc. to develop, design, and launch a website (<https://www.nysemtdt.org>) devoted to the Elder Abuse Interventions and E-MDT Initiative. The website, formally launched in fall 2022, serves as a platform to provide information, education, and resources on the E-MDT Initiative, E-MDTs in general, and elder abuse response services for both a professional and community audience.



Additionally, Lifespan and NYCEAC partnered with Terra Nova films to produce a series of videos highlighting the E-MDT approach to addressing elder abuse. The main purpose of the Elder Abuse E-MDT video series is to support new and existing E-MDTs by showcasing the various disciplines that participate on an E-MDT and the impacts that E-MDTs have had on services for elder abuse victims.

The series includes 12 videos, each with a different theme. These include a mock E-MDT meeting, a mock case consultation, several discipline-specific discussions, and a video highlighting the benefits of the E-MDT approach to elder abuse. The disciplines featured include APS, civil legal attorneys, the office of the district attorney, forensic accountants, mental health, law enforcement, and county Office for the Aging.

To view the videos, visit the [Statewide E-MDT Videos](#) page on the New York State E-MDT Website.

## Program Evaluations

In 2020, the SUNY Albany School of Social Welfare and the Center for Human Services Research (CHSR) conducted a preliminary program evaluation of the Elder Abuse Interventions and E-MDT Initiative. CHSR conducted interviews with the statewide Coordinators at Lifespan, E-MDT Coordinators, hub administrators, technical assistance providers, and strategic partners. Additionally, CHSR sent an anonymous survey to E-MDT members across the state.

Both the interviewees and the survey respondents overwhelmingly highlighted the success of the E-MDTs and the Elder Abuse Interventions and E-MDT Initiative in being able to intervene in complicated elder abuse cases. Without the collaboration, knowledge, and skills of the team members, such cases would likely be handled in a less comprehensive manner. Interviewees and respondents noted that the E-MDTs have led to more positive outcomes, including increased prosecutions of perpetrators and access to additional resources used to assist victims.<sup>4</sup>

In 2021 and 2022, CHSR conducted a two-part evaluation. In September 2021, CHSR sent a second anonymous survey to E-MDT members across the state. Over 90 percent of respondents reported that E-MDTs are effective at formulating recommendations that lead to positive outcomes for elder abuse victims. E-MDTs facilitate communication between service providers, provide access to specialty services, help identify additional issues and questions to consider in a specific case, and identify additional resources and services for elder abuse victims.

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<sup>4</sup> For more information, see Morano, C. & Burical, E. (2020) *Elder Abuse Intervention and Enhanced Multidisciplinary Teams (E-MDT) Initiative Preliminary Program Evaluation*: School of Social Welfare & Center for Human Services Research, State University of New York at Albany, <https://static1.squarespace.com/static/6149e7c07962fb1653915fa3/t/627ab7ea51e1815712fe815a/1652209643137/Elder+Abuse+Interventions+and+Enhanced+Multidisciplinary+Teams+Initiative+Report.pdf>.



Respondents also noted several ways to further improve outcomes. These include additional training/technical assistance, identifying services for non-abusing family members and other concerned persons to support the victim, and increasing the number of organizations that participate on the E-MDT.

In summer 2022, CHSR conducted focus groups with 16 E-MDT members from across the state and several different professions and agencies. Potential participants were identified using a systematic sampling method from E-MDT members and professionals who have referred elder abuse cases to their local E-MDT Coordinators. Eighty-five potential participants were invited to participate, with 16 people eventually participating.

As with the survey, the focus groups noted that the ability to collaborate with colleagues from a variety of disciplines was one of the strengths of the E-MDT Initiative. Additionally, when the participants were asked if they would continue to refer cases to their local E-MDT Coordinator, they unanimously responded that they would do so.

The focus group participants also noted some areas for improvement, including providing services that are more culturally/ethnically/racially appropriate and more services for suspected perpetrators.<sup>5</sup>

## Diversity, Equity, and Inclusion

Starting in 2021, Lifespan, NYCEAC, and NYSOFA began efforts to foster diversity, equity, and inclusion (DEI) principles into the work of the Elder Abuse Interventions and E-MDT Initiative at all levels and to increase E-MDT services to underserved populations. As noted earlier in this report, most victims whose cases are referred to an E-MDT Coordinator are white.

To improve outreach to providers of underserved older adults, promote the importance of DEI amongst E-MDT members, and ensure that case reviews are conducted with sensitivity to DEI concepts, the Elder Abuse Interventions and E-MDT Initiative engaged Kesha Carter, Chief Diversity Officer at Coordinated Community Services, Inc. (CCSI) in Rochester, New York. Carter provided DEI training for the program administrators at Lifespan, NYCEAC, and NYSOFA and for the technical assistance providers. Additionally, the E-MDT Coordinators were invited to engage in training and dialogue with Carter through the PLG. Her trainings and discussions centered on what constitutes DEI principles, why they are important in E-MDT work, and how E-MDT case reviews can be conducted through a DEI lens.

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<sup>5</sup> For more information, see Morano, C. & Berical, E. (2022) *Elder Abuse Intervention and Enhanced Multidisciplinary Teams (E-MDT)*: School of Social Welfare & Center for Human Services Research, State University of New York at Albany, <https://static1.squarespace.com/static/6149e7c07962fb1653915fa3/t/63e2c12ffdf6bb70bc69047e/1675804975669/E-MDT+Program+Evaluation+Final+Report.pdf>.

## E-MDT Conferences

Starting in 2017, Lifespan and NYCEAC have convened five E-MDT Conferences. Attendees come from across the state and represent a variety of disciplines, including E-MDT Coordinators, APS, social workers, OFA service providers, offices of the district attorney, law enforcement, financial institutions, civil legal service attorneys, forensic accountants, crime victim advocates, and the medical and mental health professions.

Each conference has featured a keynote and a wide variety of workshops. Keynotes have included:

- Paul Greenwood, Deputy District Attorney in the San Diego District Attorney's Office. His speech, *Crimes Against Older Adults: A Community Approach to Identification, Investigation and Prosecution*, focused on the benefits of a multidisciplinary approach of collaboration, communication, and cooperation.
- Marie-Therese Connolly, a nationally recognized expert in the field of elder abuse and the founding head of the U.S. Department of Justice's Elder Justice Initiative. Her speech, *MDTs as Engines of Change: A Brief History*, focused on the origins of multidisciplinary approaches to elder abuse.
- Lisa Nerenberg, Executive Director of the California Elder Justice Coalition. Her speech, *Undue Influence: A Policy and Practice Perspective*, focused on how abusers use their influence over victims to perpetrate abuse.
- Karen D. Lincoln, PhD, MSW, MA, FGSA, Associate Professor at the Suzanne Dworak-Peck School of Social Work, University of Southern California. Her speech, *Demographic Shifts, The Aging Landscape and Elder Abuse: Fertile Ground for Advocacy and Strategic Partnerships*, focused on demographic shifts in aging and the links between the sources of inequality and elder abuse.
- Candace J. Heisler, JD. Her speech, *Undoing Undue Influence*, defined undue influence, explained how it is used against older adults, and identified intervention strategies to protect victims.

A total of 29 workshops have been offered, including presentations on prosecuting elder abuse cases, financial exploitation, overcoming unconscious bias, working with faith communities and culturally specific organizations, incorporating a trauma informed approach to working with elder abuse victims, sexual assault, and guardianship.

Due to the COVID-19 public health emergency, the 2020 E-MDT conference consisted of two virtual workshops for E-MDT Coordinators and technical assistance providers that focused on building and running effective teams. Keith S. Greer, LCSW, PCC, PRC gave a virtual workshop called *The Neurochemistry of Trust: The Practice, Art &*

*Science of the Helping Conversation: Leveraging Conversational Intelligence* and Meg Soper, RN, gave an interactive presentation called *Better Together . . . Personality Styles in the Workplace*.

## Case Examples

The following case examples were submitted to Lifespan by E-MDT Coordinators. Minor edits have been made for clarity and consistency and to remove identifying details.

### Case #1

*Background:* The victim is a 90-year-old woman living in a rural community with concerns of neglect, physical abuse, and financial exploitation. A family member was the alleged abuser who had access to the victim's funds and was reported to have slapped the victim as well as providing inadequate care. Funds were also reported to have been missing from the home; though, at the time of referral, it was unknown if this was accurate. The case originated as a case consult with the E-MDT coordinator, and the initial referral included a direct connection to APS as well as an E-MDT review. Law enforcement became involved prior to the first case presentation at the E-MDT meeting due to APS' visit.

*E-MDT Recommendations:* (1) Explore naming a trusted family member as power of attorney; (2) change bank accounts to a separate bank where the alleged abuser doesn't have access; (3) confirm if there have been any changes to will or deed to the house; (4) complete referral to home-delivered meals; and (5) run a credit report.

*Reduction of Risk:* Those involved with the case were able to successfully assist the victim in finding funds that were thought to have been missing in the home and deposit those funds into a new bank account. The trusted family member was going to become power of attorney and there will be a change to the victim's will to have the alleged abuser removed. Through the various professionals' involvement, the alleged abuser has stopped engaging with the victim, which has resulted in an increase in visits from the trusted family member and neighbors who were previously afraid of the alleged abuser. A credit report was run, and no suspicious activity was found. Locks were changed on the home and Lifeline was installed.

The alleged abuser's access to funds has been blocked, thus protecting over \$2,300 per month of income and over \$30,000 of assets. The alleged abuser's access to the victim has decreased and the victim's socialization has increased.

### Case #2

*Background:* Ms. B, an 89-year-old woman in an assisted living community, called the police and local nonprofit legal services provider to report that the staff at her assisted living facility stole an extensive coin collection. When she reported the allegation to administration, the administration retaliated against her by harassing her and limiting

her access to amenities at the facility. In response, Ms. B stopped making rent payments, accruing significant arrears and facing threatened eviction.

The legal services provider brought the case to the E-MDT. During the case discussion at the E-MDT, it was revealed that Ms. B frequently called the police about the stolen coins and the administration's treatment of her. It was also revealed that Ms. B was being seen by a therapist affiliated with a counseling services partner represented on the E-MDT.

*E-MDT Recommendations:* (1) The legal services provider attorney to enter into a limited representation agreement with Ms. B to liaise with the assisted living administration; (2) the legal services provider to follow up with the police department about their history with the client; (3) the counseling services partner to follow up with the therapist about mental health and family history; and (4) the legal services provider attorney to gain permission to reach out to Ms. B's son for support.

*Services Provided or Arranged Due to the E-MDT:* The legal services provider was able to connect with Ms. B's son. He has always been in contact with his mother but was unaware of the increasingly hostile relationship with the assisted living administration. After being alerted, he stepped up, remained in contact with the legal services provider and provided emotional support for his mother. Due to COVID-19 and decreasing occupancy, the assisted living facility reduced rent for the upcoming year as an incentive for all current residents. The legal services provider worked directly with administration to negotiate a way for Ms. B to safely remain at the assisted living facility. Ultimately, the attorney coordinated for Ms. B to pay her outstanding arrears and for the administration to waive her late fees. With legal services provider liaising with the administration instead of Ms. B herself, Ms. B was able to spend more time in the assisted living community and had made some strong connections with other residents.

*Reduction of Risk:* Through interventions identified at the E-MDT meetings, Ms. B was able to stay in the assisted living facility without harassment from the administration, the late fees for her withheld rent were waived, and her son was better integrated into her support network. Unfortunately, neither the originally missing coins nor the perpetrator were ever located.

### **Case #3**

*Background:* The victim is a 74-year-old man who was the target of an attempted murder. The suspected perpetrator is a woman in her twenties who married him to get a Green Card. The suspected perpetrator came to his home and stabbed him in the bathroom, severing an artery in his arm. The victim went to the hospital where the suspected perpetrator tried to visit him before being banned. The victim was in a rehabilitation facility for several months and then was discharged to the same apartment where the assault occurred. The victim reported to the assistant district attorney overseeing his case that he is fearful being in the home. The victim also had no home

care or other services in place and had accumulated arrears while in rehabilitation. The Assistant District Attorney (ADA) referred his case to E-MDT.

*E-MDT Recommendations:* (1) a referral to APS; and (2) Lifeline and other safety supports in the home.

*Services Provided or Arranged Due to the E-MDT:* APS accepted the referral and counselled the victim about shelter options. The victim was not willing to leave the home. APS assisted the victim in navigating conversations with building management to pay off his arrears. Building management also installed security cameras in the hallway and agreed to provide extra monitoring of the residence. APS again referred the victim for home care and helped coordinate transportation for the victim to testify before the grand jury, after which the suspected perpetrator was indicted and remanded pending trial. The E-MDT discovered the victim had previously connected with a social worker through a community elder abuse prevention program and reconnected the victim and social worker for ongoing supportive counseling.

*Reduction of Risk:* Victim was stabilized and reported decreased fear and an increased sense of well-being.

## 2022-2023 Focus Areas

In the 2022-2023 program year, development of new county-based E-MDTs in the remaining three counties will continue toward achieving the goal of having an operational team in all 62 counties in New York State.

The Elder Abuse Interventions and E-MDT Initiative will continue its important work to ensure that DEI principles are a regular part of the work of each E-MDT into the 2022-2023 program year and beyond. Lifespan, NYCEAC, and the E-MDT Coordinators will continue discussing ways to integrate DEI principles into the work of the E-MDT and strategizing on ways to reach providers of underserved populations. Additionally, E-MDT members will be invited to participate in DEI presentations conducted by Keshia Carter, Chief Diversity Officer at Coordinated Community Services, Inc.

Lifespan, NYCEAC, and NYSOFA will also review the results of the two program evaluations to identify areas where the Elder Abuse Interventions and E-MDT Initiative can better serve elder abuse victims and will consider ways to measure outcomes for victims.

Finally, the existing E-MDTs will continue to meet, ensuring continued interventions for elder abuse victims.

## Appendix: E-MDT Hub Regions, Counties, and Coordinators

E-MDT Hub Region	Counties	Hub Agency Coordinator
Region 1 – Western NY	Cattaraugus Chautauqua Erie Niagara Wyoming	Center for Elder Law and Justice 438 Main St., #1200 Buffalo, NY 14202 (716) 853-3087 <a href="https://elderjusticenyny.org/">https://elderjusticenyny.org/</a>
Region 2 – Finger Lakes	Allegany Cayuga Chemung Genesee Livingston Monroe Ontario Orleans Schuyler Seneca Steuben Yates Wayne	Lifespan of Greater Rochester, Inc. 1900 S. Clinton Ave. Rochester, NY 14618 (585) 244-8400 <a href="https://www.lifespan-roch.org/">https://www.lifespan-roch.org/</a>
Region 3 – Central NY	Cortland Herkimer Madison Oneida Onondaga Oswego Tompkins	Vera House, Inc. 723 James St. Syracuse, NY 13203 (315) 425-0818 <a href="https://www.verahouse.org/">https://www.verahouse.org/</a>
Region 4 – Southern Tier	Broome Chenango Delaware Otsego Tioga	Action for Older Persons, Inc. 200 Plaza Dr. Suite B Vestal, NY 13850 (607) 722-1251 <a href="https://actionforolderpersons.org/">https://actionforolderpersons.org/</a>
Region 5 – North Country	Clinton Essex Franklin Jefferson Lewis St. Lawrence	Catholic Charities of the Diocese of Ogdensburg 46 Flynn Ave. Suite 612 Plattsburgh, NY 12901 (518) 566-0944 <a href="https://www.rcdony.org/">https://www.rcdony.org/</a>



E-MDT Hub Region	Counties	Hub Agency Coordinator
Region 6 – Mohawk Region	Fulton Hamilton Montgomery Saratoga Schoharie Warren Washington	Legal Aid Society of Northeastern New York 95 Central Avenue Albany, NY 12206 (518) 462-6765 <a href="https://www.lasnny.org/">https://www.lasnny.org/</a>
Region 7 – Capital Region	Albany Columbia Greene Rensselaer Schenectady	St. Peter's Crime Victim Services Samaritan Hospital 2215 Burdett Ave. Troy, NY 12180 (518) 271-3410 <a href="https://www.sphp.com/find-a-service-or-specialty/crime-victim-services/">https://www.sphp.com/find-a-service-or-specialty/crime-victim-services/</a>
Region 8 – Hudson Valley	Dutchess Orange Rockland Sullivan Ulster	Jewish Family Services of Ulster County 280 Wall St. Kingston, NY 12401 (845) 338-2980 <a href="https://jfsulster.org/">https://jfsulster.org/</a>
Region 9a – Metro North*  *The Westchester MDT is not funded through the Elder Abuse E-MDT Initiative	Westchester	The Harry and Jeannette Weinberg Center for Elder Justice at The Hebrew Home at Riverdale 5901 Palisade Avenue Bronx, NY 10471 (718) 581-1000 <a href="https://www.riverspringhealth.org/hebrew-home/">https://www.riverspringhealth.org/hebrew-home/</a>
Region 9b – Metro North	Putnam	Putnam/Northern Westchester Women's Resource Center 935 South Lake Blvd. Suite #2 Mahopac, NY 10541 (845) 628-9284 <a href="https://www.pnwwrc.org/">https://www.pnwwrc.org/</a>
Region 10 – New York City	Brooklyn Bronx Manhattan Queens Staten Island	New York City Elder Abuse Center 525 East 68th Street, Box 39 New York, NY 10065 (212) 746-7211 <a href="https://nyceac.org/">https://nyceac.org/</a>

E-MDT Hub Region	Counties	Hub Agency Coordinator
Region 11a – Long Island	Suffolk	EAC Network Inc. 99 Quentin Roosevelt Blvd Suite 200 Garden City, NY 11530 (516) 539-0150 <a href="https://eac-network.org/">https://eac-network.org/</a>
Region 11b – Long Island	Nassau	Family and Children’s Association 377 Oak Street, 5th Floor Garden City, NY 11530 (516) 485-3425 <a href="http://www.fcali.org">www.fcali.org</a>