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## Conceptualizing and Measuring Financial Exploitation of Older Adults

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**Kendon Conrad**  
Chestnut Health Systems, Bloomington, IL  
**Madelyn Iris**  
CJE SeniorLife, Chicago, IL

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MU-MU-0004**

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## Acknowledgements

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## Today's Objectives

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1. Review the need for measurement of elder abuse and financial exploitation
2. Describe our project on financial exploitation
3. Present construct maps for financial exploitation
4. Describe the process of measure development for financial exploitation
5. Describe results of focus groups and cognitive interviews to refine the measures
6. Review results of the instrument field test
7. Describe our BIG PICTURE—Elder Abuse Decision Support System (EADSS)

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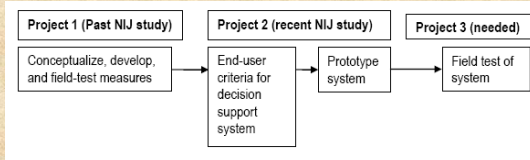
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## BIG PICTURE—Elder Abuse Decision Support System (EADSS)



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## Elder Abuse in Canada

- Estimated that by 2031, 25% of the Canadian population (8 million) will be 65 or older.
- Elder abuse or neglect may affect 7% or more of these elders (approximately 450,000 older Canadians).
- In 1999, researchers found that:
  - 7% of respondents reported emotional abuse
  - 1% reported financial exploitation
  - 1% reported physical or sexual abuse
- At least 1/3 of abusers are family members
- Elder abuse is found in all demographic groups

Department of Justice Canada, Abuse of Older Adults: Department of Justice Canada Overview Paper, 2000, pp. 7-9. Accessed via <http://www.rcmp-grc.gc.ca/ccaps-spcca/elder-aime-eng.htm>.

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## In the United States

- In 2009, using data from 5,777 respondents 60 and older, over 1 in 10 reported emotional, physical, or sexual mistreatment or potential neglect during the past year (Acierno *et al.*, 2010).
- Mixson (2011) referred to elder abuse as a potential “perfect storm,” due to state budget freezes and cuts in critical services (see also, U.S. Government Accountability Office, 2011).
- In 2009 the National Adult Protective Services Association (2009) conducted a survey of state budgets and found that over half of respondents reported APS budget cuts of 13.5%, as well as deep cuts to support services and two-thirds said that abuse reports to APS have increased by 24%.

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### Need Standardized Measurement

- The recent GAO recommendations to the U.S. Senate all pertain to facilitating the development of a nationwide APS data collection system (U.S. GAO, 2011).
- To highlight the need for standardization, this report indicated wide variation in the percentage of cases reported that were investigated.
- Only 20% of cases reported were investigated in Minnesota while 87% were investigated in Illinois.
- There was also great variation in the percentage of cases reported that were substantiated: West Virginia substantiated only 2.1% of cases reported, Minnesota 3%, Utah 4.7%.
- In contrast, Texas substantiated 57.1% of cases reported, Illinois, 53% and California, 27.9%.
- Standardization can address this high variability with high quality input of clients, collaterals and case workers, and can facilitate communication regionally and nationally.

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### What are the Issues?

- Poor screening results in lower detection rates, which can lead to more suffering
- Currently, there has been a lack of psychometrically tested, standardized measures for assessing elder abuse, neglect, and exploitation
- Definitions of what constitutes abuse, neglect and exploitation vary from jurisdiction to jurisdiction, making national prevalence estimates difficult
- No standardized or consistent method for assessing severity, in order to determine appropriate responses and treatment
- Difficult to evaluate intervention or treatment programs

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### Measurement Science and Elder Abuse

- Need to better quantify Elder Abuse in community and residential facilities:
- Risk (physical dysfunction, dementia, dependence)
  - Diagnoses (abuse, neglect)
  - Processes (positive vs. negative caregiving)
  - Outcomes (recovery, quality of life)

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## Why Care about Measurement?

Measurement quality affects research and policy development:

- Standardization needed for prevalence estimates
- Good measurement enables examination of relationships among abuse types, qualities and characteristics of abusers and elders
- Reliable and valid measurement is required for correct correlation estimates
- Enables identification of important differences that may exist, e.g., gender, ethnicity, age, language (English/French), SES, of abusers and elders
- Helps to determine indicators, levels of severity and associated cut-points of abuse

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## Project Goals: Conceptualizing and Measuring Financial Exploitation and Psychological Abuse of Older Adults

1. Conceptualize financial exploitation (FE) and psychological abuse (PA) constructs and develop item banks that represent these constructs
2. Refine procedures for obtaining sensitive information concerning FE and PA in the community
3. Develop new items and refine existing items assessing FE and PA
4. Conduct a full-scale field test of FE and PA assessment measures

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## Phase One: Identify Items and Construct Maps

- From the literature, we gathered concepts or statements describing financial exploitation
- We arranged these items in a hierarchical order from most severe at the top to least severe at the bottom, based on our judgment

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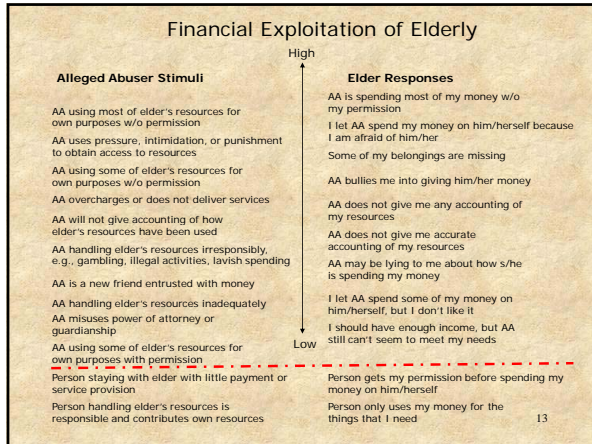
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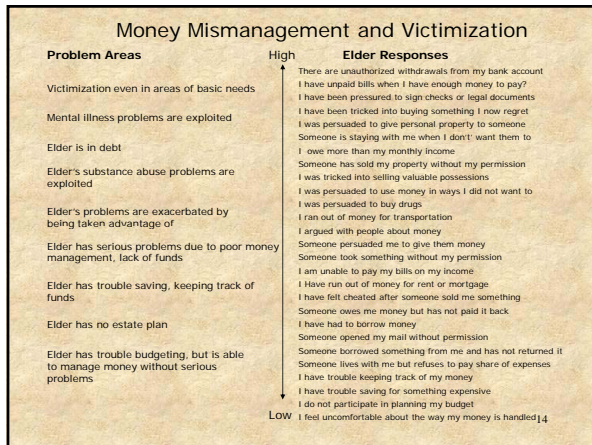
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## Measure Development Methodology: Concept Mapping

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"Concept mapping is a structured process, focused on a topic or construct of interest, involving input from multiple participants, that produces an interpretable pictorial view of their ideas and concepts and how these are interrelated. The process is participatory in that it is inherently a mixed methodology that integrates high-quality qualitative and quantitative techniques."

Trochim, W. (1989). An introduction to concept mapping for planning and evaluation. *Evaluation and Program Planning*, 12(1), 1-16.

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## From Idea to Map in Six Steps

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1. Planning
2. Brainstorm Ideas
3. Sort and Rate Statements
4. Compute the Map
5. Interpret the Map
6. Utilize the Map

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## 1. Planning: Convene Expert Panel

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- Expert Panel of Local and National experts on elder abuse and neglect (N=17)
- 78% female
- 93% Caucasian
- 81% non-medical settings
- 12% worked for IDOA provider agency
- 68% worked in the greater Chicago area

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## 1. Planning: Develop a Focus

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### Focus Prompt

“Please give us some brief statements describing the characteristics of financial exploitation among older persons. Please generate as many statements as you can.”

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## 2. Brain-storming

- Two brain-storming groups
  - Local Experts (N=10) – University of Illinois, School of Public Health
  - National Experts (N=7) – “GoToMeeting”
- Developed 159 items
- Reduced to final list of 79 items

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## 3. Sort and Rate Items

### Sort Guidelines

- Sort items into groups based on a principle of similarity
- More than one item per group, more than one group
- Name the groups



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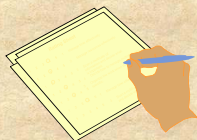
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## 3. Sort and Rate Statements (cont'd)

- |                            |                                |
|----------------------------|--------------------------------|
| • <b>Severity</b>          | • <b>Measurability</b>         |
| 1. Not severe at all<br>to | 1. Not measurable at all<br>to |
| 5. Extremely severe        | 5. Extremely measurable        |



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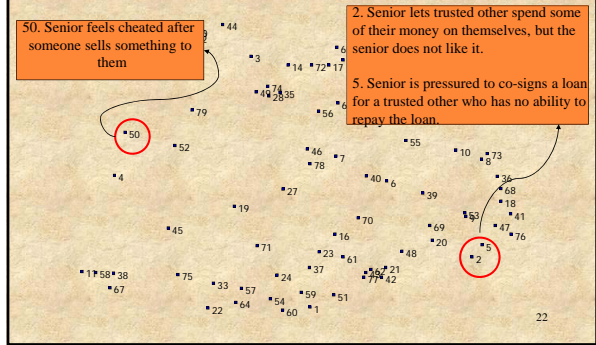
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**4. Compute the Maps: Point Map**  
**Conceptually different items are further apart**




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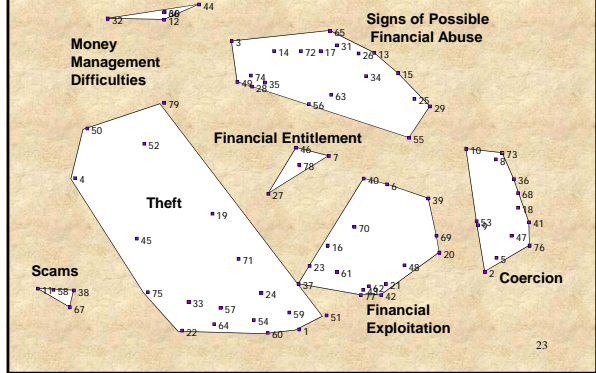
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**Cluster Map Generated Using Hierarchical Cluster Analysis**




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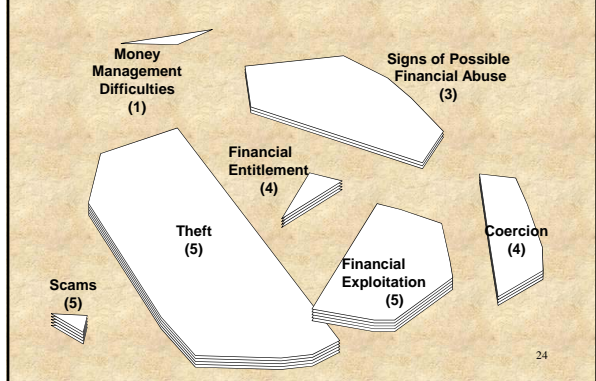
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**Severity Rating Map**




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## 5. Interpret the Maps

- In the interpretation session, the research team and 6 experts from the steering committee reached a consensus about the most optimal number of clusters – when each cluster has a distinguishable theme and the clusters are not redundant
- Identify Regions

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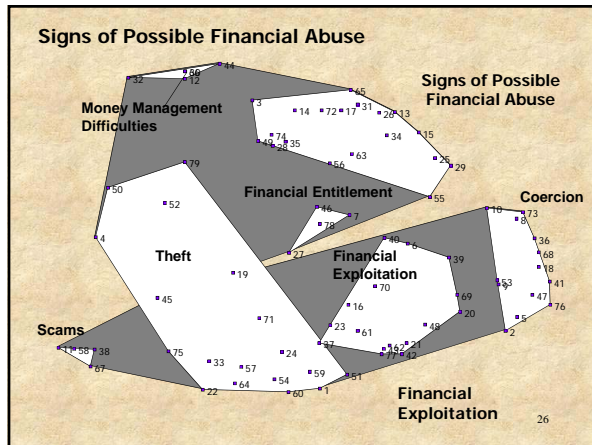
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## 6. Utilize the Maps

Used the maps to develop a FE and PA measurement instruments

Forthcoming: Concept Mapping article of Financial Exploitation in *Journal Elder Abuse and Neglect* <sup>JM1</sup>

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Slide 27

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JM1

micki will put in title  
Jessica Mazza, 12/05/2011

## Development of the Measures

### 2 Closely Related Measures Developed

- Client self-report
  - Can be completed by the client directly
  - Can be completed as an “interview” by the investigator
- Investigator Report
  - Completed by the worker based on conversations with client and/or observations
  - Investigator Report can also be used by a 3<sup>rd</sup> party (collateral)

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## Step 1. Focus Groups to Establish Face Validity and Ease of Use of Measures

- Used mixed focus group technique: combined open-ended discussion regarding EA with review of the FE and PA measure
- Reviewed items, eliminated redundancies and irrelevant questions, revised wording, tested response categories

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## Focus Groups with Professionals

- Conducted 6 focus groups with professionals working in the area of elder abuse and neglect
- Included staff from:
  - 1 Elder Abuse Provider Agency (2 offices)
  - 1 social service organization serving older adults
  - Cook County Public Guardian's Office
  - Illinois State's Attorney's Office (Seniors and Persons with Disabilities Division)
  - 1 bank management-level in-service at 5<sup>th</sup>/<sub>3rd</sub> Bank - Chicago headquarters

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### Focus Groups with Older Adult

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- Purpose: Assess and evaluate the content, language and wording, construct and scope of the FE and PA measures, gather insights regarding the overall issue of money mismanagement, financial exploitation, and psychological abuse of older adults
- Focus groups lasted 1.5-2 hours, audio-taped, observed by project team
- Participants:
  - 3 groups
  - 17 participants, all older adults, African American, Asian, Caucasian, mostly women

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### Step 2: Cognitive Interviews to test interpretation of questions and responses

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- Examined how respondents understand the items and the response scale
- Use a "think-aloud" methodology

#### Respondents:

- 2 males, 2 females
- 1 African-American, 3 Caucasian
- All victims of FE and/or PA

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### Step 3: Finalize the measures with review by Survey Research Lab at the University of Illinois Chicago

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- Wording
- Formatting
- Content of questions

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Client Sample		
Age, Mean (sd): 78.33 (9.95)	Percent	Number (N=227)
<b>Gender</b>		
Female	70.4	
<b>Race</b>		
American Indian	.5	1
Asian/Pacific Islander	.5	1
African American	61.3	133
Caucasian	35.5	77
Mixed/Other	1.8	4
Refused	.5	1
Hispanic	7.1	14

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**Analysis: What Is Rasch Measurement?**

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Creation of a ruler for mental characteristics

- One dimension
- Tests a theoretical hierarchy of item severity
- Based on prevalence of endorsement of each item, which enables estimation of probability

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**Jumping mental bars**

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Children high jumping is analogous to the Rasch method.

- A height of 2' does not change
- So we can define ability using that stable standard.
- The children can then be defined in terms of their jumping ability using that standard.
- Actually, every child can be placed quite exactly and reliably at their ability level on the interval height measure. It's the point where their chance of getting over is 50/50.




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JM2

tkae out numbers

Jessica Mazza, 12/05/2011

## Results

### ***OAMA Staff-reported Financial Exploitation (82 items)***

- Rasch person reliability of .94 with a Cronbach's alpha of .97.
- Rasch item reliability of .97.

### ***OAMA Client-reported Financial Exploitation (80 items)***

- High person reliability at .92 with Cronbach's alpha of .96.
- Rasch item reliability of .95.

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## Significance

- The relationship between client and staff reports on the OAMA had a much stronger correlation than did the client OAMA with the IDoA staff substantiation decision.
- This supports the strategy of interviewing clients with the OAMA.
- A strength of Rasch analysis was that it enabled quantitative and objective estimates of the factors and calibrations of items that were previously generated by a fairly large and diverse group of 83 experts and key stakeholders in the field of elder abuse.
- The result was a theoretical hierarchy of financial exploitation composed of items that may be used to obtain client self-reports.

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- The use of self-reported outcomes has become common in assessing patient and client status and change. No outside observer, given short time frames and limited access to information, can know and report the details of a client's situation as well as the client him/herself if they are cognitively able to report.
- The OAMA Client Self-Report of Financial Exploitation shows promise in assessing the level of financial exploitation of older adults who are able to report

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### Prevention of Financial Exploitation: Primary Prevention Strategies

- Increase public awareness through social media campaigns
- Institute programs that emphasize financial management and estate planning for older adults and for caregivers
- Conduct risk assessments and offer programs that teach money management skills
  - Older adult has trouble budgeting but can manage money without serious problems
  - Older adult has trouble saving, keeping track of funds
  - Older adult has serious problems due to poor money management, lack of funds
  - Elder is in debt
  - Elder has trouble saving, keeping track of funds

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### Prevention of Financial Exploitation: Secondary Prevention Strategies

- Use the Financial Exploitation Short Screener in multiple settings
  - Hospitals
  - Banks
  - Senior centers
  - Law enforcement
- Assess for other types of exploitation and abuse
  - Older adult's substance abuse problems are exploited
  - Mental illness problems are exploited
  - Older adult is being taken advantage of in other areas

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### Prevention of Financial Exploitation: Tertiary Prevention Strategies (Harm Reduction and Avoidance of Recurrence)

- Secure the older adult's financial assets and stabilize their financial situation
  - Ask for a temporary freeze all bank accounts (checking and savings) but ensure access funds to meet essential needs
  - Ensure direct deposit is correct
  - Review all estate and planning documents (deeds, wills, Powers of attorney, trusts, etc.)
- Determine older adult's capacity to manage financial affairs in the future and if appropriate, refer to the Public Guardian for further assessment or seek out (payeeship, accountant, money manager, etc
- If appropriate, recommend assertiveness training for the older adult (learn to say 'no').
- Consult with Law Enforcement regarding steps for recovery of funds<sup>48</sup>

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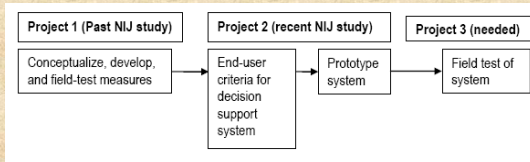
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## BIG PICTURE—Elder Abuse Decision Support System (EADSS)



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## Current Project: Developing an Elder Abuse Decision Support System

Goal: Devise a computer-based decision support system to facilitate assessment of alleged abuse allegations, standardize substantiation decision-making, and link care planning to case specifics

National Institute of Justice Grant #2009-IJ-CX-0202

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## Goals

- 1) Accurately identify different types of abuse and the level of risk associated with the abuse.
- 2) Ensure the older adult's immediate & long-term safety and well-being.
- 3) Increase awareness and reporting of elder abuse via public education.
- 4) Maintain consistent & detailed information about clients.
- 5) Insure data security and client privacy.
- 6) Maintain and further the older adult's right to self-determination.

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### 3 Phases

**Phase 1:** Determine infrastructure requirements and “end-user criteria” that will remove barriers and provide support for use of a computerized decision support system.

**Phase 2:** Develop a new, prototype system based on the results of Phase 1 (EADSS).

- Context of prototype will be the OAMA (physical, sexual, psychological, financial exploitation, neglect, confinement).
- Will include data gathering on usefulness and other end-user criteria.

**Phase 3:** Test demonstration of the prototype to elicit feedback regarding its usefulness, quality, and affordability:

- 8 focus groups and interviews with local experts and practitioners
- 8 national experts
- 3 groups of up to 30 elder abuse staff members
- 3 cognitive interviews with older victims of abuse and exploitation

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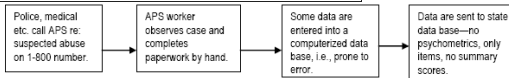
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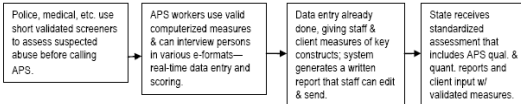
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### Comparative Logic Model

#### A. Typical Elder Abuse Computerized Information System



#### B. Some Characteristics of an Elder Abuse Computerized Decision Support System



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### Phase 1:

Determine infrastructure requirements and “end-user criteria” that will remove barriers and provide support for use of a computerized decision support system.

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In our review of the current Illinois Department on Aging's (IDoA) Abuse Neglect and Exploitation (ANE) investigation system, we found no computerized decision support system (CDSS) to inform the investigation, substantiation, intervention, and outcomes-monitoring of elder abuse. The extensive data that were collected by the IDoA were used primarily for billing purposes and an annual report.

Although not a decision support system, we emphasize that IDoA was probably one of the exemplary systems. For example, this system was reported in *The Gerontologist* to be "unusual in its comprehensive approach to the assessment and documentation of reported cases of abuse and its extensive data monitoring system" (Neale, Hwalek, Goodrich & Quinn, 1996, p. 502).

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### Goals of EADSS

- 1) Accurately identify different types of abuse and the level of risk associated with the abuse.
- 2) Ensure the older adult's immediate & long-term safety and well-being.
- 3) Increase awareness and reporting of elder abuse via public education.
- 4) Maintain consistent & detailed information about clients.
- 5) Insure data security and client privacy.
- 6) Maintain and further the older adult's right to self-determination.

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### EADSS Content

*The heart of the EADSS is The Older Adult Mistreatment Assessment (OAMA) (Conrad et al., 2010a) that has 5 components. It contains assessments for:*

- physical abuse
- sexual abuse
- psychological abuse
- financial exploitation
- neglect

A full or short form of each measure will be administered at intake, investigation, substantiation, and follow-up

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## Intake Form

The intake form is used to record information for a report of elder abuse. It includes eligibility criteria via the short screener and descriptive information on the reporter of abuse, the alleged victim, and the alleged abuser(s).

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## Development of the Short Screener

1. Merged current Financial Exploitation indicators used by Illinois Department on Aging with those in the OAMA
2. Grouped specific indicators into 5 categories based on IDOA standards and procedures for establishing priority response requirements
3. Decided on appropriate response categories
4. Reviewed screener with IDOA personnel and elder abuse investigators and supervisors for face validation

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### Financial Exploitation: Short Screener

Is there a suspicion that the older person's financial resources are being misused or withheld?

No (Skip to remainder of intake process) Yes (Ask the following questions:)

1. Has someone borrowed or taken money from the older adult and not paid it back, lied about spending the older adult's money, or refused to give an accounting of how the money was spent?  
Definitely Yes (III) Suspected Yes (III) No Don't Know
2. Are there suspicious financial dealings, such as commingling of funds, ATM/credit card misuse, questionable changes in financial arrangements (account access, direct deposit; quit claim deeds, titles, mortgages; retirement or investment accounts; power of attorney, payeeship)?  
Definitely Yes (III) Suspected Yes (III) No Don't Know
3. Has the older adult been forced to sign financial or legal documents against their will, without their understanding, or is forgery suspected?  
Definitely Yes (III) Suspected Yes (III) No Don't Know
4. Has someone taken money, property, or financial resources from the older adult through overcharging for goods/services, coercion, manipulation, cheating, scamming, conning, or force?  
Definitely Yes (III) Suspected Yes (III) No Don't Know
5. Even with adequate income, does the older adult have unpaid bills, utilities cut off, unmet basic needs, or an eviction notice?  
Definitely Yes (II) Suspected Yes (II) No Don't Know

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### **OAMA--Staff Report and Self Report**

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- The OAMA—Staff Report is used by the case worker as an assessment tool during the investigation of elder abuse, to drive substantiation. The investigator completes 5 sections regarding physical abuse, sexual abuse, neglect, emotional abuse and financial exploitation.
- *OAMA—Client Self-report.* Since it is generally recognized that the client's perspective is essential to a thorough and fair assessment, the self-report interview was designed to obtain client input whenever this is possible.

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### **Client Status Form**

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This form is started at the first face-to-face visit and is a summary demographic sheet. This is an open form that is edited throughout the investigation. It includes questions about mental status endangering behaviors, substance abuse, and ADLs. It obtains information about other agencies working with the client, client living arrangements, individuals in the household, medical history, medications, health insurance, and financial information.

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### **Care Plan Form**

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Following substantiation, the worker will complete the care plan form, recording goals and objectives of interventions chosen to reduce risk of further abuse. EADSS will generate recommended interventions, i.e., services, programs, actions, based on the specifics of the abuse recorded in the OAMA. Staff will update the form as interventions are put in place.

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A. Current IDoA ANE Processes	B. EADSS Innovations <i>Added</i> to Current Processes
<p><b>Education and Awareness</b></p> <ul style="list-style-type: none"> <li>• Public awareness program</li> <li>• Specialized training for EA service providers</li> </ul>	<p><b>Education and Awareness</b></p> <ul style="list-style-type: none"> <li>• Short screeners used by the public to check for elder abuse (via web or paper/ pencil)</li> <li>• Training providers in use of EADSS</li> <li>• Short screeners used by aging network service providers to screen for elder abuse</li> </ul>

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<p><b>Intake</b></p> <ul style="list-style-type: none"> <li>• 1-800 staff or provider agency conducts intake, assigns priority, transfers case to local agency</li> <li>• Or provider agency conducts intake</li> <li>• Record check of past history, identification of special conditions &amp; contacting collaterals</li> </ul>	<p><b>Intake</b></p> <ul style="list-style-type: none"> <li>• Short screeners provide standardized intake forms with immediate data entry (tablet or desktop to web)</li> <li>• Web-based data facilitates record check even in the field for new cases</li> </ul>
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<p><b>Investigation within 30 days</b></p> <ul style="list-style-type: none"> <li>• Initial attempt within priority period</li> <li>• In-depth assessment within 30 days: initial risk, interview &amp; observations, client status</li> <li>• Substantiation decision made before assessment forms completed</li> <li>• Substantiated risk assessment (every 90 days)</li> <li>• Narrative case notes serve as the report</li> <li>• No validated measures, no scales, only individual items used for billing and annual report.</li> </ul>	<p><b>Investigation within 30 days</b></p> <ul style="list-style-type: none"> <li>• Web access enables communication in the field on background, current status, and care planning</li> <li>• Standardized measures used to help make substantiation decision: client, collateral and investigator forms. Immediate scoring and feedback using validated measures via EADSS facilitate efficient, timely triage and intervention</li> <li>• CDSS provides draft report with care plan recommendations to be edited by staff and supervisor</li> <li>• Standardized posttest measures help to make a complete and valid comparison with the initial evaluation</li> </ul>
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<p><b>Case Work</b></p> <ul style="list-style-type: none"> <li>• Develop &amp; implement care plan, including client input, to alleviate abuse</li> <li>• Referral to interventions to ensure long-term safety and stability (health care, legal services, safe &amp; supportive living, etc.)</li> </ul>	<p><b>Case Work</b></p> <ul style="list-style-type: none"> <li>• Client opportunity for direct input (self-determination)</li> <li>• CDSS provides state-of-the-art care plan recommendations based on findings via data base of “best practices”</li> <li>• Data base facilitates referral to appropriate agencies</li> <li>• Communication via web within and between agencies while in the field</li> </ul>
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<p><b>Follow-Up</b></p> <ul style="list-style-type: none"> <li>• Monthly contact (up to 12 months, from the date of intake)</li> <li>• Follow-up risk assessment</li> </ul>	<p><b>Follow-Up</b></p> <ul style="list-style-type: none"> <li>• Standardized follow-up enables more valid client specific bench-marking and goal achievement even though personnel may have changed</li> <li>• Changes in client status may be charted across time and agencies</li> </ul>
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<p><b>Data Processing &amp; Analysis</b> (begins at substantiation)</p> <ul style="list-style-type: none"> <li>• Selected items inputted manually into DOS-system</li> <li>• Data uploaded to IDoA every month</li> <li>• Annual reports</li> <li>• Provider agencies can generate their own reports, but these are rarely done.</li> </ul>	<p><b>Data Processing &amp; Analysis</b> (begins at intake)</p> <ul style="list-style-type: none"> <li>• Immediate data entry and scoring facilitate clinical judgments in the field on web-based system</li> <li>• IDoA and agency have immediate data access</li> <li>• Ability to generate aggregate agency reports statewide</li> <li>• Ability to generate agency-specific reports</li> </ul>
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<p><b>Program Quality Monitoring</b></p> <ul style="list-style-type: none"> <li>• Operations case review, administration review, &amp; peer review</li> </ul>	<p><b>Program Quality Monitoring</b></p> <ul style="list-style-type: none"> <li>• Sophisticated measurement, scoring and reporting across programs is captured in EADSS</li> <li>• Standardization enables more valid comparison across agencies and programs as well as over time</li> <li>• Establish agency-specific quality improvement benchmarks</li> </ul>
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<p><b>Research Capability</b></p> <ul style="list-style-type: none"> <li>• Limited to case tracking forms with selected items</li> </ul>	<p><b>Research Capability</b></p> <ul style="list-style-type: none"> <li>• Data base enables analysis of complex relationships using all data and scale scores, including client self-reports where possible, to understand elder abuse better</li> <li>• Standardization facilitates more valid prevalence studies</li> </ul>
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**Phase 3:**

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Develop a new, prototype system based on the results of Phase 1. Context of prototype will be the OAMA (physical, sexual, psychological, financial exploitation, neglect). Will include data gathering on usefulness and other end-user criteria.

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### Phase 3:

Test demonstration of the prototype to elicit feedback regarding its usefulness, quality, and affordability

Discuss FE short screener, measure and care plan recommendations at this time.

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### Proposed Full Scale Field Test of EADSS

- A total of 6 provider agencies will be selected to implement the EADSS field test intervention, using a rolling administration.
- An additional agency will be recruited to beta test/trial run the EADSS prior to beginning implementation.
- Standard IDOA ANE procedures of the agencies waiting to be enrolled will be assessed as a comparison.

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Field Test TASKS	Year 1		Year 2				Year 3					
	3	6	9mos	12mos	15mos	18mos	21mos	24mos	27mos	30mos	33	36
Recruit Beta Site & Train; Conduct alpha test/debug EADSS	X											
Revise from Alpha Test and Finalize EADSS for beta test	X	X										
Beta Test/trial run; Finalize EADSS	X	X										
Site 1 pretest, training and posttest			O <sub>ANE+T</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>		
Site 2 pretest, training and posttest				O <sub>ANE+T</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>		
Site 3 pretest, training and posttest					O <sub>ANE+T</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>		
Site 4 pretest, training and posttest						O <sub>ANE+T</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>		
Site 5 pretest, training and posttest							O <sub>ANE+T</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>		
Site 6 pretest, training and posttest								O <sub>ANE+T</sub>	O <sub>EADSS</sub>	O <sub>EADSS</sub>		
Preliminary data analyses					X	X	X	X	X	X		
Final data analyses											X	
Reports	X		X		X		X		X		X	

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For complete reports, email: [kjconrad@uic.edu](mailto:kjconrad@uic.edu)

**THANK YOU!**



Questions?

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